A Comparison Of Mental Health Status During Menopause And Post-Menopause Middle-Aged Working Women

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Abstract

The aim of the present work was to compare the mental health status of middle aged (45-55 yrs) working women who were under menopause period with those in post-menopause period. The number of subjects selected for study was 50. An interview schedule with General Health Questionnaire and Psycho Social Stress Scale questionnaire was simultaneously administered to the selected subjects. The observed mean scores of post-menopausal group were comparatively higher than those for during menopausal group however, the study resulted not statistically significant difference between the groups on various scores.

INTRODUCTION

Middle age of a woman is mainly affected by the hormonal factors. The hormonal changes of the climacteric, chiefly the decline in ovarian estrogen production manifest in the menopause, contribute directly to depression. It is believed that a cause of depression is a change in estrogen levels, which occur during menopause. Menopause has been considered a major transition point in women's reproductive and emotional life. While its reproductive significance is clear, its emotional implications have been confused. Menopause refers to the end stage of a natural transition in a woman's reproductive life when ovaries stop producing eggs and a woman is no longer able to get pregnant naturally. Post-menopause refers to a woman's time of life after menopause has occurred. Perimenopause means around menopause and is a transitional stage of two to ten years (experienced during 35 to 50 years of age) before complete cessation of the menstrual period. In the present study the term during menopause refers to perimenopause.

When women approach menopause their menstrual cycles begin to change and becomes unpredictable which is a sign of erratic ovulation that causes unpredictable releases of the hormones estrogen and progesterone leading to mood swings, forgetfulness, hot flashes and all the other symptoms associated with menopause. The symptoms of depression and menopause are similar.

During middle age in addition to physical and social changes some psychological changes also occur which may affect their over all well-being and positive mental health. As working women bear double responsibilities one, at workplace and other in the family therefore, excess work, less freedom, high need for motivation and work-family environment may become powerful source of stress among these women. Therefore, emotional balance, adjustment process, tolerance level and other personality attributes are under great threat, which affect negatively the mental health. There may be a chance that if their problems are left unnoticed they might become a mental case in future. Some suitable intervention and modification in their life style and coping strategy especially during these period may help in improving and maintaining their good health.[1]

The objective of present study was to assess the mental health status of during menopause and post-menopause groups of middle-aged working women in a cross-sectional study. The selected subjects were administered two questionnaires and their scores compared.

MATERIALS AND METHOD

A random sample of 50 middle-aged women in the age group 45–55 years (mean \pm sd = 49.42 \pm 3.46) working as teacher in government recognized girl's schools of Varanasi city (India) in 2002 was selected. The total 50 subjects were divided into two groups viz., during menopause period and post menopause period.

An interview schedule and two questionnaires namely Hindi adaptation[2] of General Health Questionnaire (GHQ) and

Psycho Social Stress Scale[3] were simultaneously administered to subjects of both the groups.

The Hindi adaptation of GHQ was used in the present study. The GHQ-28 developed by Goldberg and Hillier[4] detects symptoms of non-psychotic psychological disturbances. It consists of 28 items divided into 4 sub-scales such as anxiety, depression, somatic symptoms and social dysfunction each having 7 items.

The psycho-social stress scale (PSSS) was designed to assess the extent of individual's feelings of the basic components of psychological stress. The questionnaire consisted of 40 items.

RESULTS

Using interview schedule the general background information of subjects was collected. To determine the general health and psychosocial health two questionnaires were administered. The scores observed on four sections of GHQ viz., anxiety, depression, social dysfunction, somatic symptom and the psychosocial stress scale were recorded. The data obtained on 50 subjects were analyzed using SPSS ver.10 statistical software. The study revealed some interesting findings shown in the following tables.

Table-1 shows the median scores of four sections of GHQ and PSSS for subjects of both the groups.

Figure 1
Table 1

Scale	Median Score Group-I During Menopause (n=25)	Median Score Group-II Post Menopause (n=25)	
GHQ Sub-scale-1: anxiety	11.00	12.00	
GHQ Sub-scale-2: depression	08.00	09.00	
GHQ Sub-scale-3: social dysfunction	16.00	16.00	
GHQ Sub-scale-4: somatic symptoms	13.00	13.00	
Psycho Social Stress Scale (PSSS)	32.00	38.00	

Mean and standard deviation (SD) of observed scores for menopausal and post-menopausal groups are shown in Table-2. All mean scores except social dysfunction were observed slightly higher for post-menopausal women compared to women belonging to menopausal period. However, when mean scores (on 4 sub-scales of GHQ and PSSS) of the two groups were compared, unpaired t test resulted not statistically significant (Table-2).

Figure 2

Table 2

Scale	Group-I During Menopause (n=25)	Group-II Post-Menopause (n=25)	Between group comparison Unpaired t test
	Mean ± SD	Mean ± SD	
GHQ Sub-scale-1: anxiety	11.92 ± 2.52	13.28 ± 4.63	t=1.29, p>0.05
GHQ Sub-scale-2: depression	08.40 ± 1.44	09.84 ± 3.44	t=1.93, p>0.05
GHQ Sub-scale-3: social dysfunction	15.84 ± 2.12	15.76 ± 3.33	t=0.10, p>0.05
GHQ Sub-scale-4: somatic symptoms	13.04 ± 2.89	13.52 ± 3.78	t=0.50, p>0.05
Psycho Social Stress Scale (PSSS)	30.84 ± 15.32	35.68 ± 14.49	t=1.15, p>0.05

DISCUSSION

Perimenopause and post-menopause period in middle age of women bring some biological changes due to hormonal change that may have a bearing on their mental, physical and also social well-being. The present study observed low to moderate level of anxiety, depression, social dysfunction and somatic symptoms as well as psycho-social stress in middleaged women working as school teacher. It was interesting to note that level of these factors was comparatively higher in post-menopause group than during menopause group. However, as far as these psychological factors are concerned the present small study could not find statistically significant difference between the groups. One of the reasons of low and similar scoring between the groups may be due to the fact that these women were not psychological cases. In a study[5] on 32 post-menopausal and 32 pre-menopausal patients aged between 40--55 years to investigate the anxiety and depression at postmenopausal women, the Beck depression scale showed highly significant difference whereas, State Trait Anxiety Inventory (STAI) I and II resulted not statistically significant difference and therefore concluded that depression rate is significantly higher in menopausal women.

Changes occurring in women during 40–60 years of age require proper attention. Working women preferably may require more care due to dual role responsibility. It may become slightly difficult to manage all activities with same efficiency as before. That may cause feeling of guilt, irritation, stress etc. in these working women. Physical relaxation, emotional support and essential care are needed for healthy living. Certain modifications in life-style and some programmed interventions can provide enhancement of positive healthy habits, reduce stress and can add quality to their life.

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