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ORIGINAL ARTICLE

Money & Menopause: The Relationship Between Socioeconomic Class and Awareness about Menopause in Women in Mumbai, India

Wani Reena J. · Gupta Ankita S.

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Abstract

Purpose The primary aim of this study is to determine the awareness regarding menopause and its treatment options among women in Mumbai, India and correlate the same with the social class of the subject. In addition, this study also attempts to identify the attitude of Indian women toward menopause.

Methods A cross-sectional study was conducted using a self-constructed semi structured questionnaire given to women between the ages of 35 and 55 years, currently residing in Mumbai. The 192 women interviewed were then divided into 6 groups as per Prasad's Socioeconomic Classification (based on per capita monthly income) with 53 % falling in class I and II and 47 % in class III, IV and V. Although the study was conducted primarily at a charitable hospital, no subject was found who fulfilled the Class VI criteria.

Result The study shows that two-thirds of class I, four-fifths of class II, less than half of class III, and one third of class IV and V are aware about treatment options for menopause which

Wani R. J. (\boxtimes), Professor (Addl), I/C Family Welfare Program Department of Obstetrics and Gynecology, TN Medical College & BYL Nair Ch Hospital, Dr. A. L. Nair Road, Mumbai Central, Mumbai 400008, India

e-mail: reena.wani@rediffmail.com

Gupta A. S., Intern

Department of Obstetrics and Gynecology, TN Medical College & BYL Nair Ch Hospital, Dr. A. L Nair Road, Mumbai Central, Mumbai 400008, India



is a significant variation (χ^2 value = 20.127, df = 1, P < 0.0001). We also found that once counseled, more than half the subjects of classes I to V were willing to accept treatment, which thus is not a significant variation (P = 0.4659). Of the total subjects, more than half were relieved, one fourth frightened, and less than one fifth were uncertain about their feelings toward menopause.

Conclusion We thus conclude that there is a significant relationship between socioeconomic status and awareness about menopause treatment options while there is no relationship between socioeconomic status and acceptance of treatment for the same. A majority of the Indian women are relieved by the onset of menopause.

Keywords Menopause · Awareness · Socioeconomic · Attitude

Introduction

Clinically, menopause is defined as the absence of menses for more than 12 months. However, this definition does not encompass the wide range of signs and symptoms, both emotional and physical, which a woman experiences at this crucial and very disturbing period in her life. In India at present, women are rapidly coming into their own, but while the urban women begin to understand and accept their own body and its changes, social stigma still prevents women from the lower socioeconomic classes of society from becoming aware about the needs of their body and

available methods of treatment for the uncomfortable menopausal symptoms.

The desire to understand and promote the awareness regarding menopause is what has fueled us to conduct this study. There is a varying amount of acceptance and knowledge regarding menopause in the different social classes of the Indian society. This study aims to classify the subjects into six social classes using the *modified Prasad scale of Social Classification* [1] which takes into account the *Per Capita Income* of the family of the subject. We then hope to identify the relationship, if any, between social class and awareness of menopause symptoms. This study also hopes to determine the acceptance of treatment and attitude toward menopause in women in Mumbai.

Material and Methods

A cross-sectional study was conducted over 3 months from 28-07-09 to 28-10-09 using a self-constructed semi-structured questionnaire given to 400 women. Subjects included out-patients, their relatives, as well as staff members working at a tertiary public hospital in Mumbai. Questionnaires were also given to women residing in different areas within the city of Mumbai, India. Written, informed consent was taken from each subject. The questionnaires were in English and were filled in with the assistance of the investigator, if required.

The questionnaire asked for personal information (including age and per capita family income) as well as awareness and willingness to accept treatment options for menopause. The attitude toward menopause was also determined. Inclusion criteria for this study were the age group of 35–55 years as well as a current residence in the city of Mumbai.

The data so collected were entered into MS-Excel sheet from where they were transferred to the SPSS (version 17) package for tabulation and analysis. Both the SPSS Software and Graph Pad Instat 3 Software were used for Chi Square Analysis of the data. Graphs were created in MS-Excel.

Results

Of the 400 women interviewed, 192 women returned completed analyzable questionnaires. 53 % of these fell in class I and II, and 47 % in class III, IV, and V as shown in Table 1. Although the study was conducted primarily at a charitable hospital, no subject was found, who fulfilled the Class VI criteria. We also found that 47 % of the subjects were premenopausal, 13.5 % were perimenopausal, 28 %

were postmenopausal, and 11.5 % had undergone surgical menopause, as demonstrated in Fig. 1.

Almost all the women interviewed (99 %) were aware that their periods would end some day. A total of 103 (53.6 %) of women, as seen in Table 2, were aware that there is some form of treatment available for menopause. On analysis, 48 (66.6 %) of Class I, 24 (80 %) of Class II, 9 (40.9 %) of Class III, 14 (31.8 %) of Class IV, and 8 (33.3 %) of Class V women are aware about the availability of treatment options for menopause. As demonstrated in Table 2 and Fig. 2, statistically significant variation was seen between the different socioeconomic classes (χ^2 value = 20.127, degree of freedom = 1, P value is <0.0001).

In the present study, 42 % women have heard about taking calcium tablets around menopause, 27 % have heard of hormone replacement therapy (HRT), while less than 13 % have heard of alternative therapies including Herbal medicine, Ayurveda, Homeopathy, and lifestyle changes. The awareness varies with social class as seen in Table 3.

Upon counseling, 111 (57.8 %) of women would accept treatment for menopause if required. This includes 38 (52.8 %) of Class I, 20 (66.7 %) of class II, 11 (50.0 %) of Class III, 28 (63.6 %) of Class IV, and 14 (58.3 %) of Class V women as per Table 4. These data are not statistically significant with P = 0.4659.

Of the total subjects, 105 (55 %) were relieved by the end of their menses, 47 (24 %) were frightened by the onset of menopause, while 33 (17 %) were uncertain about their feelings toward menopause as seen in Table 5.

Discussion

With the increase in life expectancy from 49 years in 1970 to 65 years in 2010 Indian women are spending a larger share of their lives in the menopausal period [2]. Therefore, they should be armed with knowledge about menopause and its treatment options keeping in mind quality of life issues.

A study conducted in Chandigarh by Puri et al. [3] reported that while a majority (70.3 %) of urban residents have heard about menopause, only 30.9 % in slums have heard about menopause. As per the study, out of them, only 8.5 % had the correct knowledge about menopause. A similar study by Nusrat in Pakistan found that 78.8 % women were aware about menopause but only 15.9 % had knowledge about symptoms and health implication of menopause [4]. A study on Japanese in Taiwan by H.Pan indicated that 97 % had previously heard of the menopause, but only 53 % knew the definition of the term [5].

Our study found that 99 % of urban women interviewed were aware that their periods would end at some time in

Table 1 Distribution of subjects as per modified Prasad's classification

Social class	Number	Percent
Upper high (I)	72	37.5
High (II)	30	15.6
Upper middle (III)	22	11.5
Lower middle (IV)	44	22.9
Poor (V)	24	12.5
Very poor or below poverty line (VI)	0	0
Total	192	100.0

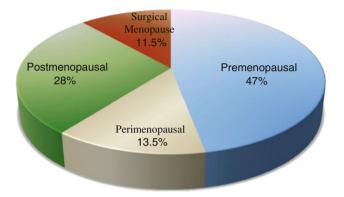


Fig. 1 Menopausal status of subjects

their lives after the age of 40. We also found that of the total, 53.64 % of women were aware about treatment options for menopause with the higher awareness (66 and 80 %) found in classes I & II, and the lower awareness (32 and 33 %) in classes IV & V, respectively (Table 2).

Most women questioned were aware about Calcium tablets (42 %) and HRT (27 %), with 6 % being aware about herbal treatments. Once again, the maximum awareness was seen in class I and II subjects (Table 3). This also reflects the fact that over-the-counter products are known to more women.

Table 3 Awareness of types of treatment in different social classes

Social class	Hormone replacement therapy	Calcium tablets	Herbal therapy	Ayurvedic medication	Homeopathy	Lifestyle changes	Not sure
I(n = 72)	25 (35 %)	36 (50 %)	5 (7 %)	7 (10 %)	11 (15 %)	13 (18 %)	1 (1 %)
II $(n = 30)$	15 (50 %)	21 (70 %)	4 (13 %)	10 (33 %)	8 (27 %)	7 (23 %)	2 (7 %)
III $(n = 22)$	4 (18 %)	9 (41 %)	1 (5 %)	3 (14 %)	3 (14 %)	2 (9 %)	0 (0 %)
IV (n = 44)	5 (11 %)	9 (20 %)	1 (2 %)	4 (9 %)	2 (5 %)	2 (5 %)	2 (5 %)
V(n = 24)	2 (8 %)	5 (21 %)	0 (0 %)	0 (0 %)	1 (4 %)	0 (0 %)	3 (13 %)
Total (%)	51 (27 %)	80 (42 %)	11 (6 %)	24 (13 %)	25 (13 %)	24 (13 %)	8 (4 %)

 $\begin{tabular}{ll} \textbf{Table 2} & Association of awareness of treatment options with social class \\ \end{tabular}$

Social class	Aware of treatment		Total
	Yes	No	
I	48 (66.6 %)	24	72
II	24 (80.0 %)	6	30
III	09 (40.9 %)	13	22
IV	14 (31.8 %)	30	44
V	08 (33.3 %)	16	24
Total	103	89	192

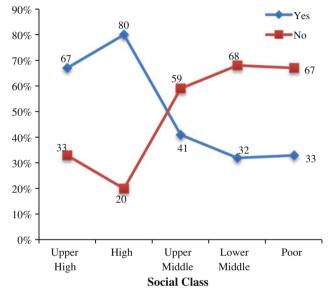


Fig. 2 Awareness about treatment for menopause vs social class of women

After being counseled by the investigator, 57.8 % of women said they would be willing to try treatment for menopause (Table 4). This is higher than the figure in the study by S. Puri which revealed that less than half of females (38.7 %) ever took treatment for menopausal symptoms [3]. In our neighboring country Pakistan too, as

Table 4 Association of acceptance of treatment with social class

Social class	Would you try any	Total	
	Yes	No	
I	38 (52.8 %)	34	72
II	20 (66.7 %)	10	30
III	11 (50.0 %)	11	22
IV	28 (63.6 %)	16	44
V	14 (58.3 %)	10	24
Total	111(57.8 %)	81	192

Table 5 Attitude toward menopause in subjects

Attitude toward menopause	Number	Percentage
Relieved	105	54.69
Frightened	47	24.48
Uncertain	33	17.19
Other	7	3.64
Total	192	100.0

per Nusrat, only 31.86 % women have consulted doctor, and 75.20 % women were not taking any medicine for symptoms [4].

Studies in other parts of the world such as Taiwan show that 71 % of women thought they should receive therapy [5]. Similarly, a study on British–Asian women's views shows that over 75 % were interested in seeking a medical opinion for management of the menopause thus showing a large difference between the studies conducted in the South East Asian region and those in the western world [6].

Regarding the issue of whether women find periods to be a bother, our study found that 55 % of the subjects residing in Mumbai were relieved by the cessation of menses, while 24 % were frightened and 17 % uncertain about how they felt about menopause. A Pakistani study had reported that 83.42 % women were happy about cessation of menses and they did not want to have menses again, while only 16.57 % women wanted to have menses

again [4]. Sethi and Pitkin's [6] report on British-Asian women's views suggested that 33 % felt happy about and 46 % felt frightened by menopause.

Conclusion

The socioeconomic divide rampant in Indian society is also appreciable in the knowledge about menopause. There is a significant relationship between a woman's socioeconomic status and her awareness about menopause and its treatment options. However, this divide is not seen once counseled, and women are willing to accept treatment for menopause regardless of socioeconomic classes. Thus, it is important to encourage and impart knowledge, especially to the lower strata of society, so that women who experience symptoms during menopause are able to recognize and seek treatment for the same.

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