QUALITY OF LIFE OF WOMEN IN CLIMACTERIC TRANSITION IN DELTA STATE, NIGERIA

By

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and

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## FACULTY DISCLOSURE

<table>
<thead>
<tr>
<th>Faculty Name:</th>
<th>Faculty # 1: Elizabeth Oghoteru Oyibocha, MSc Nursing, BNSc, RN, RM, RNE, FWACN, PGDE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conflict of Interest:</td>
<td>None</td>
</tr>
<tr>
<td>Employer:</td>
<td>School of Nursing, Warri, Hospital Management Board, Asaba, Delta State, Nigeria</td>
</tr>
<tr>
<td>Sponsorship/Commercial Support:</td>
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<tr>
<th>Faculty Name:</th>
<th>Faculty # 2: Adenike Olaogun, PhD, MSc (Nsg), BSc (Nsg) (Hons), RN, RM, RPHN</th>
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</thead>
<tbody>
<tr>
<td>Conflict of Interest:</td>
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<tr>
<td>Employer:</td>
<td>Department of Nursing Science, Obafemi Awolowo University, Ile Ife, Nigeria</td>
</tr>
<tr>
<td>Sponsorship/Commercial Support:</td>
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GOALS AND OBJECTIVES

Session Goal
• To provide additional information on climacteric transition symptoms and quality of life (QoL) of midlife women.

Session Objectives
• To itemize the specific symptoms experienced by midlife women during climacteric transition
• To describe the quality of life of midlife women in climacteric phase of life
BACKGROUND TO THE STUDY

- Climacteric transition is often accompanied with a lot of distressing symptoms often resulting in decrease quality of life (QoL) (Avis et al., 2009).

- Globally, almost 400 million women are already in their climacteric phase of life.

- By 2015 to 2020, nearly 500 million will be entering this phase (USA Census Bureau, 2010).

- In Nigeria, 2.9 to 4.7 million are already in the phase and about 0.3 million in Delta State (Population & Housing Census, 2006 and NPC, Asaba, Delta State office, August, 2013).
SIGNIFICANCE OF THE STUDY

Understanding the effects of climacteric transition symptoms on midlife women’s overall QoL will assist

- clinicians including nurses
- administrators
- policy makers

In developing and implementing interventions such as:
- health teaching
- exercise programs
- active self-management programs
STUDY OBJECTIVES

✓ To ascertain the age range of Delta State women at the onset of menopause;

✓ To identify the specific symptoms experienced by these women during climacteric transition;

✓ To assess the quality of life of the women in climacteric phase; and

✓ To examine the relationship between the women’s quality of life and selected demographic variables (age, income and educational level)
METHODOLOGY …1

- **Study design:** Descriptive study (mixed method – qualitative and quantitative)

- **Research setting:** Delta State in Nigeria (Otovwodo, Eku, Umutu, Kwale, Kiagbodo and Ode-Itsekiri communities)

- **Target population:** 306,470 midlife women within 45 to 60 years

- **Sample size:** 420 women determined using Cochran’s formula

- **Sampling technique:** Multistage sampling technique which involved five (5) stages
METHODOLOGY ...

- Instrument for data collection:
  - Three “Pidgin English” translated instruments were used –

  1. A modified Menopause-Specific Quality of Life questionnaire (MENQoL)

  2. A modified Utian Quality of Life questionnaire (UQoL)

  3. A self developed semi-structured interview guide
METHODOLOGY ...3

- **Ethical consideration:**
  - Necessary permission and approval were obtained before conducting the study
  - Respondents right to participate or not was respected

- **Data collection:**
  - Data collected from January to May, 2015; 420 questionnaires administered, 405 retrieved (96.4% return)
  - 12 participants were interviewed on one-on-one basis

- **Data analysis:** Descriptive statistics was used to compute the results of the study
RESULTS

- socio-demographic characteristics of the respondents
  
  - Thirty eight percent were between the ages of 55-60 years
  
  - 67.9% were married
  
  - 52.3% have tertiary education
  
  - 47% were employed by the government
  
  - 39.2% earn between #41,000 and #125,000 monthly with a mean and SD of #59,776.73±#4,734.92
IDENTIFIED SYMPTOMS OF CLIMACTERIC TRANSITION

- **Vasomotor symptoms:** 67.9% sweat profusely during the day; 62.2% experienced hot flushes etc

- **Psychosocial symptoms:** 67.7% accomplished less work than they used to be; 57.0%) poor memory etc

- **Physical symptoms:** 75.1% reported decrease in stamina; 64.4% difficulty sleeping; 60.5% had weight gain etc

- **Sexual symptoms:** 71.6% experienced changes in their sexual desire, 66.9% vaginal dryness etc
<table>
<thead>
<tr>
<th>Domains</th>
<th>Range</th>
<th>Mean ± SD</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Vasomotor Domain (VD)</strong></td>
<td>0-174</td>
<td>50.3±5.04</td>
</tr>
<tr>
<td>No problem - Very severe problem</td>
<td></td>
<td>Moderate</td>
</tr>
<tr>
<td><strong>Sexual Domain (SD)</strong></td>
<td>0-174</td>
<td>46.3±5.69</td>
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<tr>
<td>No problem - Very severe problem</td>
<td></td>
<td>Moderate</td>
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<tr>
<td><strong>Psychosocial Domain (PsyD)</strong></td>
<td>0-174</td>
<td>38.0±7.11</td>
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<tr>
<td>No problem - Very severe problem</td>
<td></td>
<td>Mild</td>
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<tr>
<td><strong>Physical Domain (PhyD)</strong></td>
<td>0-174</td>
<td>36.9±7.52</td>
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<tr>
<td>No problem - Very severe problem</td>
<td></td>
<td>Mild</td>
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<tr>
<td>Domains</td>
<td>Range</td>
<td>Mean ± SD</td>
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<tr>
<td>-----------------------</td>
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<tr>
<td>Occupational Domain (OD)</td>
<td>23-115</td>
<td>84.2 ± 3.86 Good</td>
</tr>
<tr>
<td>Poor QoL – Excellent QoL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional Domain (ED)</td>
<td>23-115</td>
<td>83.9 ± 4.88 Good</td>
</tr>
<tr>
<td>Poor QoL – Excellent QoL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Domain (HD)</td>
<td>23-115</td>
<td>75.0 ± 6.07 Good</td>
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<tr>
<td>Poor QoL – Excellent QoL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Domain (SD)</td>
<td>23-115</td>
<td>66.3 ± 9.54 Fair</td>
</tr>
<tr>
<td>Poor QoL – Excellent QoL</td>
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</table>
QUALITATIVE RESPONSES

- Most reported symptoms include:
  - Excessive sweating both night and day
    “... the heat and sweating always make me to change my clothes frequently...” (Mrs. A.V, 57 years).
  - Forgetfulness
    “... I forget a lot, I have to write down in a diary to remember things” (Mrs. O.E.A., 58 years).
  - Vaginal dryness and lack of sexual desire
    “I do experience vaginal dryness and lack of sexual desire...” (Mrs. E.J.E., 48 years).
  - Being satisfied with life even with the symptoms
    “... my work have not been affected in any way with the changes... ” (Mrs. M.O., 51 years).
### Relationship between the women’s QoL and selected demographic variables (age, income and educational level)

<table>
<thead>
<tr>
<th>Model (Predictor or independent variables)</th>
<th>Unstandardized coefficients</th>
<th>Standardized Coefficient</th>
<th>T</th>
<th>Sig</th>
<th>Remark</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Beta (β)</td>
<td>Std error</td>
<td>Beta (β)</td>
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<tr>
<td>Constant</td>
<td>37.120</td>
<td>4.309</td>
<td>8.614</td>
<td>0.001</td>
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<tr>
<td>Age</td>
<td>1.920</td>
<td>1.086</td>
<td>0.112</td>
<td>1.768</td>
<td>0.078</td>
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<td>Highest educational qualification</td>
<td>2.538</td>
<td>0.734</td>
<td>0.271</td>
<td>3.456</td>
<td>0.001</td>
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<tr>
<td>Monthly income</td>
<td>0.899</td>
<td>0.863</td>
<td>0.082</td>
<td>1.042</td>
<td>0.298</td>
</tr>
</tbody>
</table>

F-statistic = 8.369, df=5, P < 0.001
DISCUSSION...1

- The study established 40 – 60 years as the age range of onset of menopause.

- This agrees with the findings among Australian women (Burns et al, 2010).

- Though contrary to that of Turkish women (Ayranci et al, 2010).
Identified specific symptoms include:
- Hot flushes, forgetfulness which agrees with that of Pakistan and Turkish women (Nusrat & Nisar, 2009 and Ayranci et al, 2010).
- Feelings of being anxious and depressed were averagely reported. Supported by Nusrat and Nisar (2009) report among Pakistan women.
- Though parallel with Ayranci et al (2010) findings of very high frequency of nervousness among Turkish women.
DISCUSSION…3

- High records of changes in sexual desire and dryness in vaginal during intercourse were revealed.


- Contrary with findings of Arounassalame (2013) and Syed et al (2009) among India and Malaysia women respectively.
DISCUSSION...4

- Quality of life
  - Findings revealed that respondents have positive quality of life.
  - This agrees with Finland women rating (Moilanen et al, 2012)
  - Though contrary to that of Malaysian women (Syed et al, 2009).
DISCUSSION…5

- Relationship between QoL and selected demographic variables

  - Highest education qualification attained was the best predictor of overall QoL.

  - This is in line with findings among Iran women (Abedzadeh et al, 2011).
The study concluded that the highest level of education attained and symptoms of sexual domain had strong relationship with the women’s overall QoL.
Even with the moderate problems the women experienced, they did not necessarily find the symptoms bothersome.

This can be attributed to:

- the general attitude of the women towards ageing and its associated changes
- cultural background
- greater exposure within their family, religious groups and friends.
THANK YOU SO MUCH FOR LISTENING