Prevalence, severity and risk factors of urogynaecological symptoms among postmenopausal women; a community based cross sectional survey

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Introduction

Menopause is one of the most critical stages of life in women. Presence of urogyneacological symptoms (UGS) possesses a greater influence on wellbeing and activities of day today life of post-menopausal (PM) women. The study was planned to determine the prevalence and risk factors of UGS among postmenopausal women in Bope-Poddala MOH area.

Methods

A community based cross sectional survey was conducted. A self-administered questionnaire was applied to 265 randomly selected community dwelling PM women in Bope-Poddala MOH area aged between 50-65 years. Binary logistic regression with SPPS 20.0 was applied to detect the risk factors associated with the presence of UGS. UGS were classified as urological, genital and sexual symptoms.

Results

The mean (SD) age of the sample was 53.5 (2.62) years. Prevalence of UGS in the studied community was 100%. Among the reported symptoms, commonly reported mild symptoms were dyspareunia (54.7%) and vaginal itching (53.2%) while stress incontinence (52.5%) and urinary frequency (48.3%) were reported as moderately severe symptoms. Urge incontinence (12.5%) and overflow incontinence (15.5%) were reported as severe symptoms and there were no very severe symptoms reported. The identified risk factors for presence of UGS were marital status (OR=5.80, 95% CI-2.06-16.37), employment status (OR=9.73,95%CI-4.37-21.67), higher age at menopause (OR=4.87,95%CI-1.30-18.25) and vaginal deliveries (OR=14.856,95%CI-1.24-4.03). The identified protective factors were caesarian sections (OR=0.45,95%CI-0.21-0.97), history of dysmenorrhea (OR=0.42,95% CI-0.20-16.37), use of hormonal contraceptives (OR=0.003,95%CI-1.96-11.37), higher body mass index (BMI) (OR=0.22,95%CI-0.17-1.23) and longer duration of breast feeding (OR=0.02,95% CI-3.53-11.08).

Conclusion

UGS were common among the PM women with a high prevalence in the sample studied. Marital status, employment status, advanced age at menopause and vaginal deliveries were identified as risk factors. Alternative measures to improve UGS needed to be addressed.