

Prospective Study on Knowledge, Attitude and Practice of PMS among Females

¹²³⁴Aparna.M.Das, C.P.Praseetha, Sreelakshmi.B, Asif.Navas,
National college of pharmacy Manassery, Calicut

Corresponding Author: Mr. Vinod Thomas, Dr. Lisha Govind
*Asst. Prof. Dept. of pharmacy practice
MBBS,DGO,DNB*

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ABSTRACT: This research paper is about to assess the knowledge, attitude and practice of PMS in females. Repeated menstruation every month in women's life is considered to be a sign of being healthy. However, the symptoms that occur in the second half of the menstrual cycle negatively affect the life of most women. We choose Cross-sectional study research design. The sample constituted 347 patients. After obtaining written informed consent form, data from the subjects were collected. Women above 15 years of age were taken. The patients were selected during the time period of November 2021 to May 2022. The patient was given a questionnaire and the relevant information was collected. Data regarding their knowledge, attitude and practice of PMS were obtained. The study incorporated 1 month period observation. The protocol of the study was approved by the IEC. The ultimate goal is to analyse the knowledge, practice and attitude of PMS among females.

KEYWORDS: IEC: Institutional Ethics Committee, PMS: Premenstrual Syndrome

I. INTRODUCTION

In this paper Repeated menstruation every month in women's life is considered to be a sign of being healthy. However, the symptoms that occur in the second half of the menstrual cycle negatively affect the life of most women. The American College of Obstetricians and Gynecologists defines the period which occurs approximately five days before menstruation and ends in a few days after menstruation starts and is accompanied by physical and psychological symptoms as premenstrual syndrome (PMS) The late twenties and mid-fifties are the periods when PMS is seen commonly. In the premenstrual period, changes in appetite such as excessive eating and craving, weight gain,

edema, breast tenderness, and swelling and pain in the joints, abdominal pain, stomach problems, back pain, headaches, vertigo and dizziness, sweating in hands and feet, fatigue, skin problems such as acne, insomnia and short-term drowsiness, decreased libido, depressive mood, anger outbursts, irritability, crying spells, anxiety, restlessness, and confusion have been observed. PMS leads to drug addiction, increased tendency to have an accident and to commit crime, economic losses, and decline in academic achievement.

[1]. The prevalence of PMS was examined, Royal College of Obstetricians and Gynecologists reported that 4 out of 10 women have premenstrual symptoms and 5-8% of them is severely affected by PMS. In addition, PMS is seen in France at the lowest rate (12%) and Iran at the highest rate (98%) . PMS is also very common in our country and especially women in young age group are reported to have a high rate (66%-91.8%) of PMS in studies (8-10).

[2]. The causes of PMS are multifactorial and are still unclear. Nowadays, theories suggest that there is relationship between PMS and ovarian hormone levels, serotonin levels, and gamma Aminobutyric acid (GABA) levels. Symptoms of depression, anxiety, perimenopause, chronic fatigue syndrome, irritable bowel syndrome, and thyroid disease are similar to the symptoms of PMS.

[3]. At the same time, an individualized management plan should be applied because the number, type and severity of premenstrual symptoms vary from person to person. If PMS is mild to moderate, lifestyle changes and diet causes cure and if the symptoms start to have an adverse impact on daily life pharmacological treatment is recommended. Women in our country do not think that PMS can be treated and do not refer to the

health care institution because they hesitate to talk to others about it . Therefore, health workers are advised to evaluate all women admitted to health institution during the reproductive period in terms of PMS, to organize trainings to make them aware of PMS management and to make them consulting. It is suggested that the woman should keep a PMS diary so that she can recognize the symptoms experienced and determine the type and severity of symptoms, when and how they occur, her life affect and how much they affect her life.

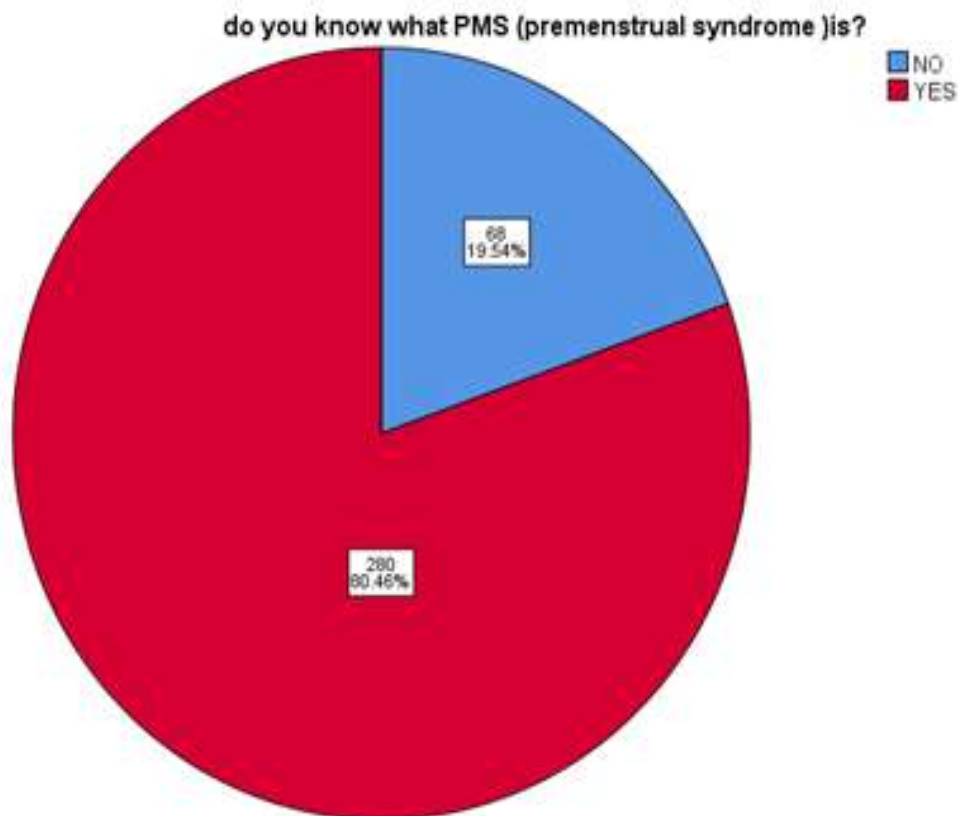
[4]. Most women can only cope with PMS by making lifestyle changes. In this context, it is important that health workers guide women. As lifestyle changes in the management of PMS; - Women are advised to exercise at least 30 minutes

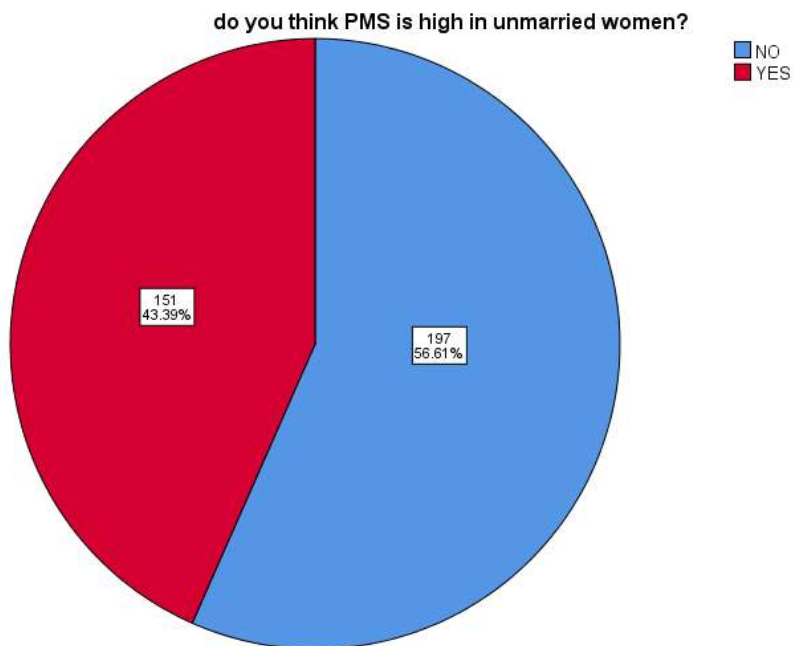
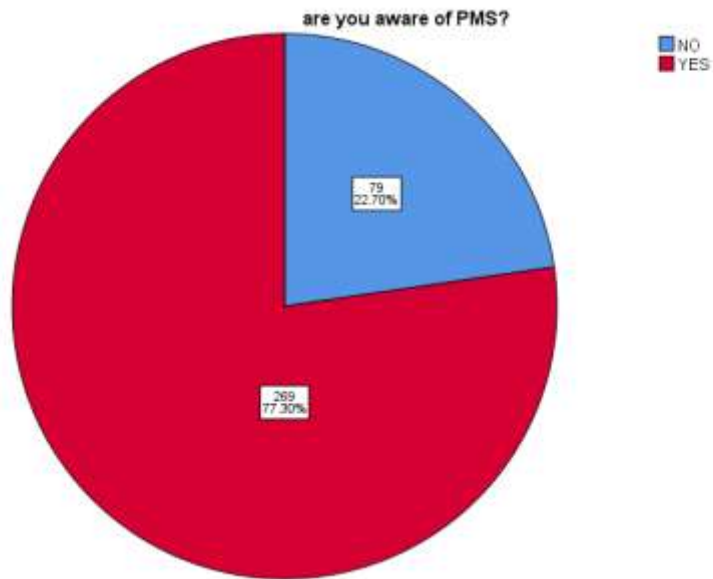
a day. Aerobic exercises, including walking, running, cycling, and swimming increases heart rate, lung function, sleep quality and endorphin levels, while reducing fatigue and depressive mood.

[5]. Adequate (at least 8 hours a day) and qualified sleep is recommended to reduce fatigue and depressive mood. -Smoking is recommended to be stopped, because it is known that nicotine worsens premenstrual symptom. -It is recommended that women communicate with their spouses, family members and friends and share their feelings in order to be understood about how they feel during this period and to receive help from social support system. -If there is a general edema in the body, clothing which is not tight should be preferred.

II. RESULTS

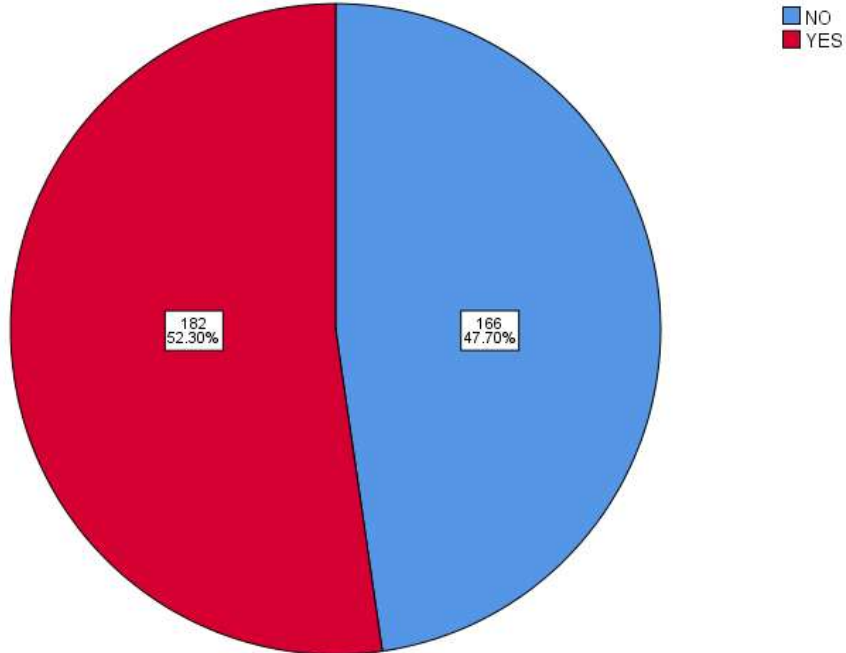
1. KNOWLEDGE



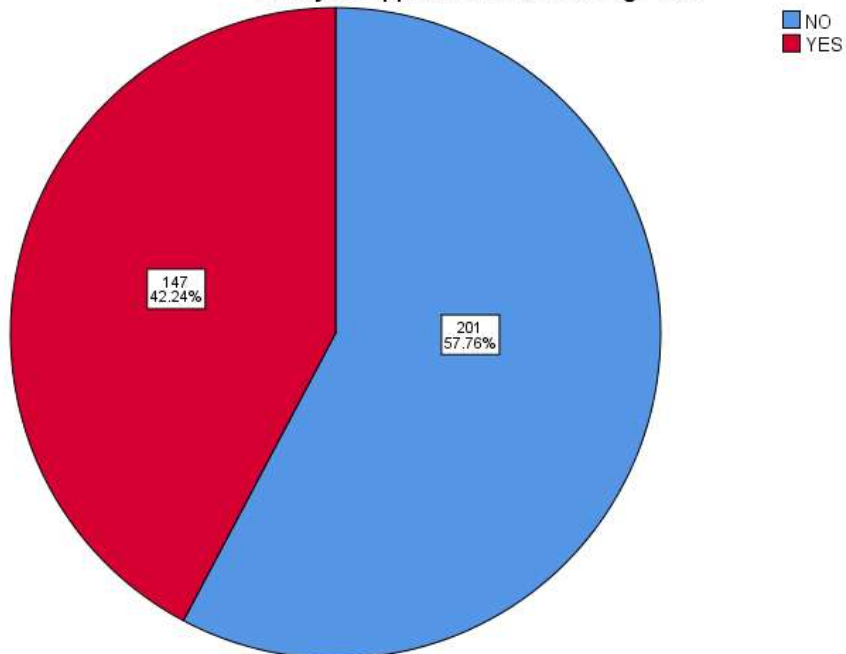


2. ATTITUDE

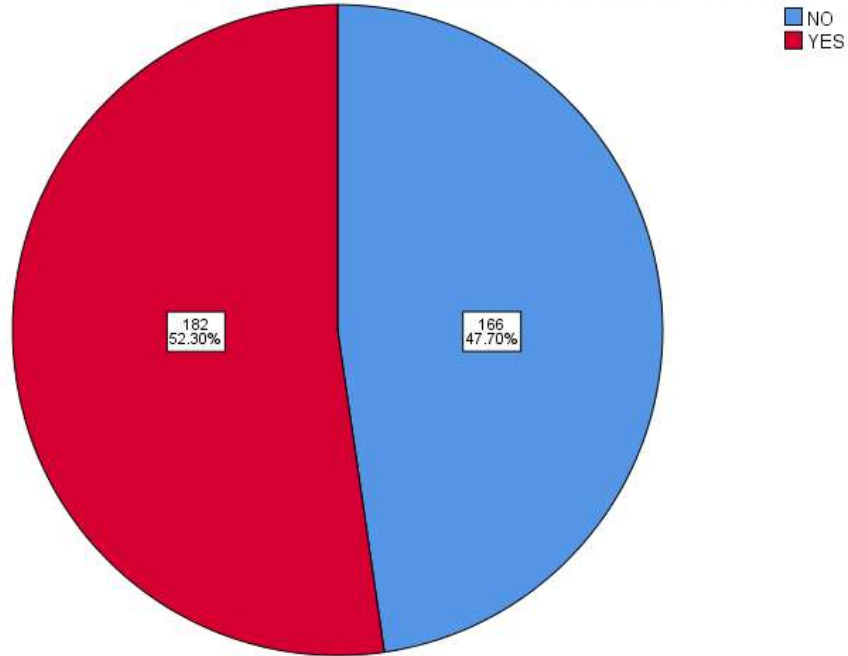
do you have any gastrointestinal symptoms during PMS?



does your appetite decrease during PMS?

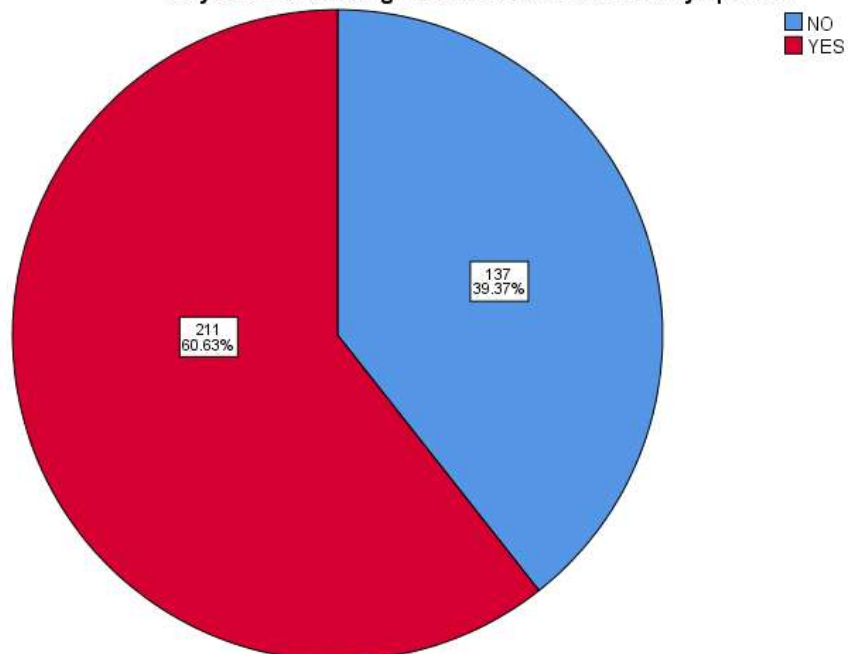


do you experience any special food cravings during PMS?

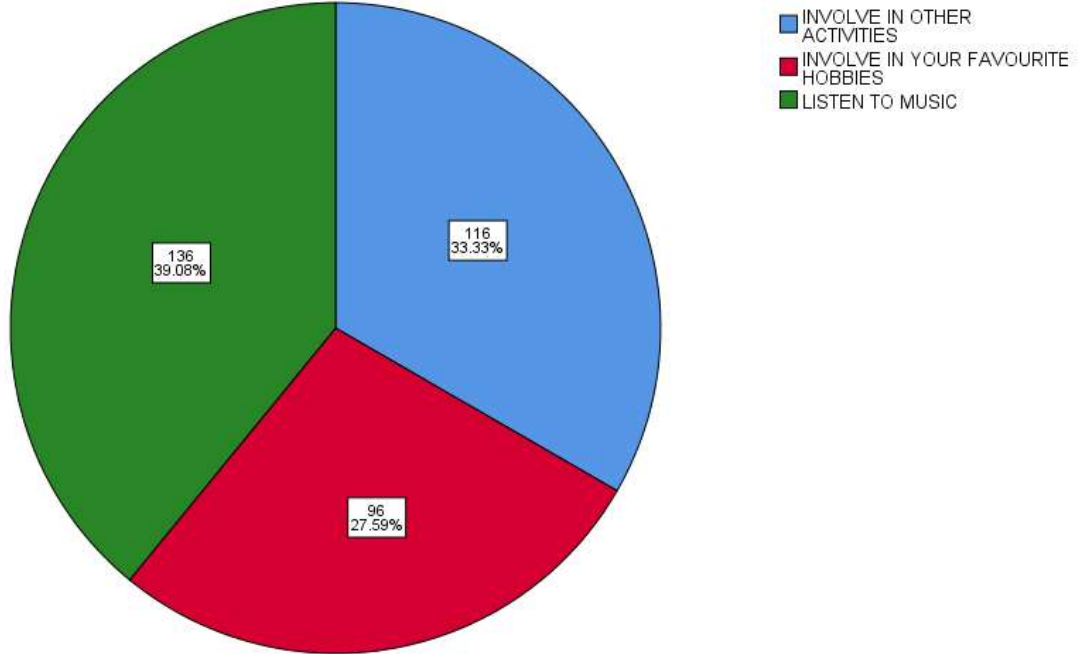


3. PRACTICE

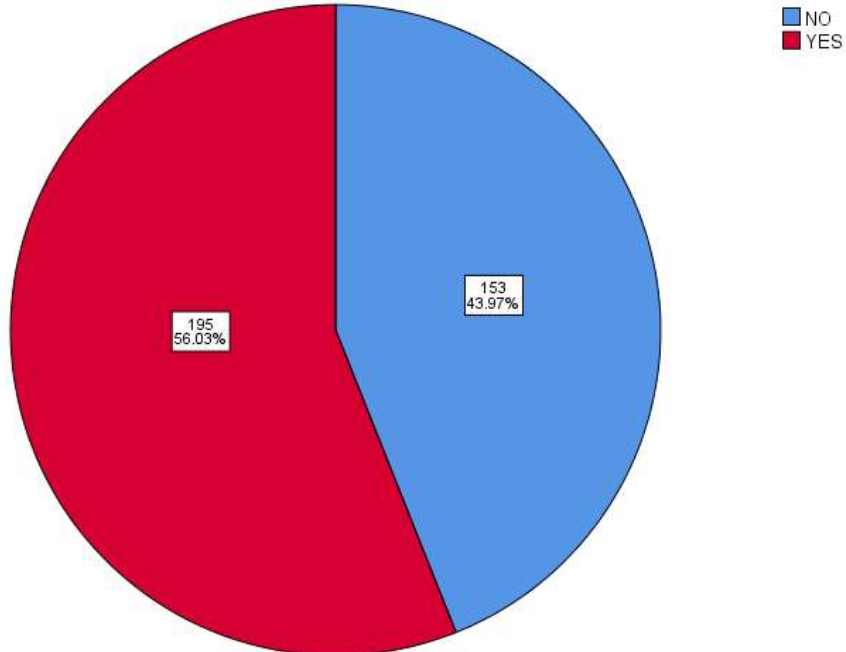
do you think drinking hot water can reduce the symptoms?



how do you overcome mental issues due to PMS?

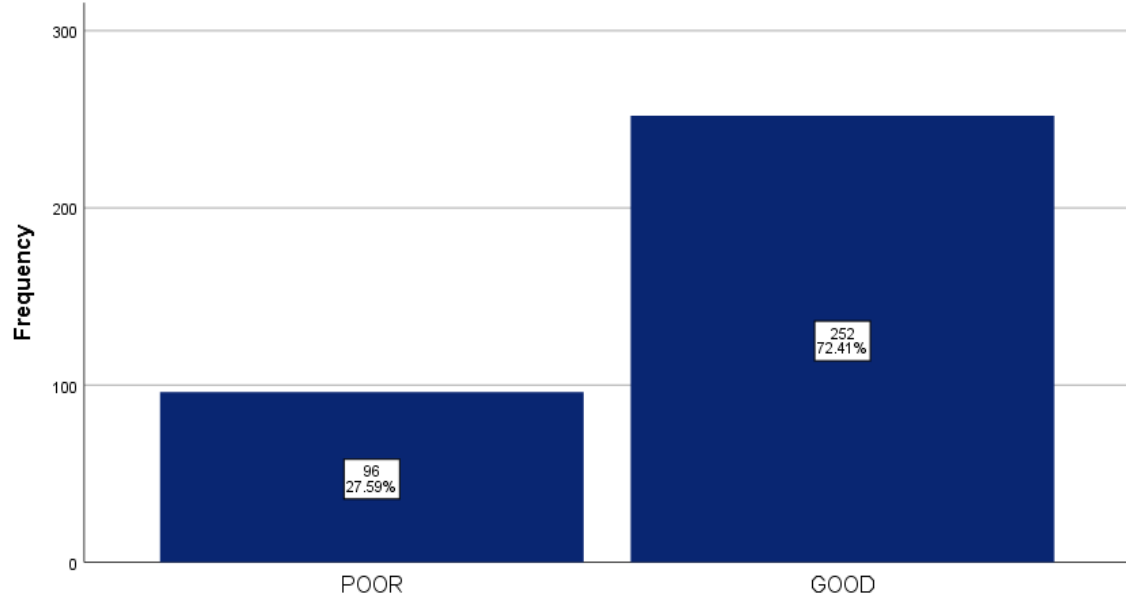


do you take any home remedies during PMS?



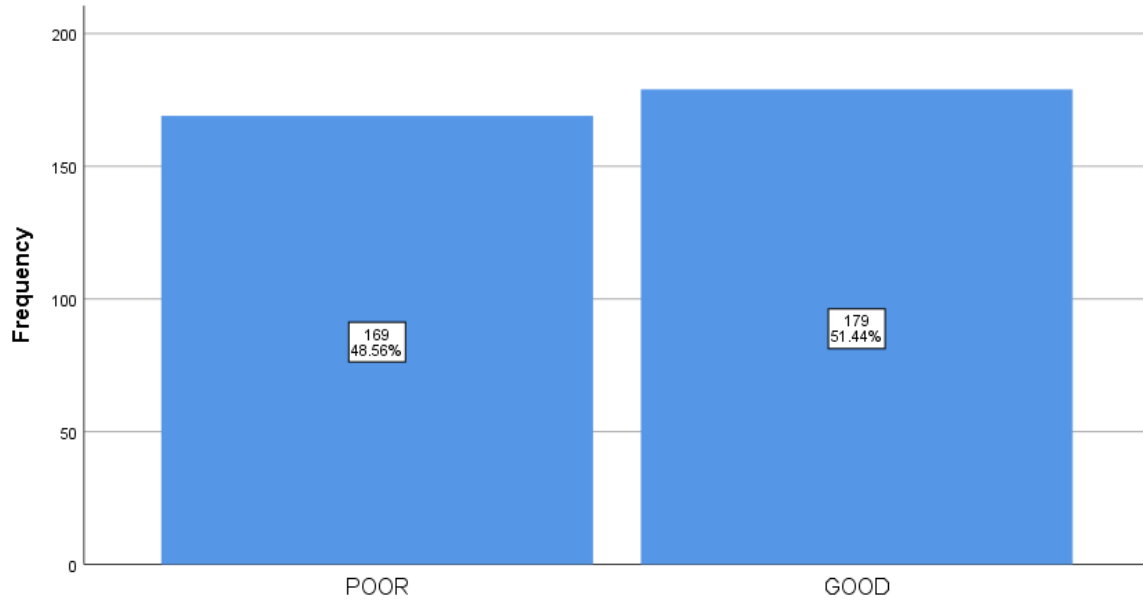
III. DISCUSSION

KNOWLEDGE (GROUP)

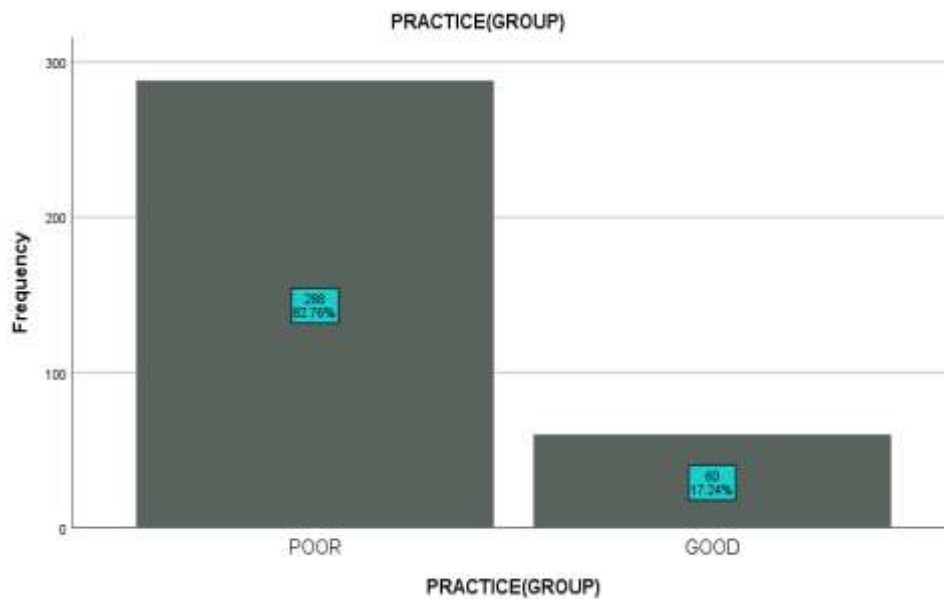


KNOWLEDGE (GROUP)

ATTITUDE (GROUP)



ATTITUDE (GROUP)



IV.CONCLUSION

In our study we analysed knowledge attitude and practice of PMS among females. we conducted our study in a population of 347 females visiting in various OPD in a tertiary care teaching hospital. In our study we have find out that 77.3% of female are aware of PMS and 22.7% are not aware .25.9%. of our population were found to be obese and 74.1% are not. 56.9% population's normal routine is getting affected by PMS. 69.5% females considering as a serious mental issues and stress majority of them are experiencing emotional symptoms. 50% females are symptomatic and 50% are asymptomatic.54%are taking home remedies for PMS and 50% are not taking medication for PMS. Majority of them using allopathy medication. In these medication Mefthal spas is the choice of drug for many. From our study we are concluding that 72.4% have Good knowledge regarding PMS ,51.4% Have good attitude toward PMS. But only 17.2% have good practice of PMS.

SOME OF THE LIMITATIONS FROM THE ABOVE STUDY

- Study is based on a tertiary care center. The result may therefore not be generalizable to all patients in the community.
- As the study duration is small, the result obtained may not be always accurate.
- Lack of response from patients is a major drawback.
- Data obtained from patients may not always be accurate as they may give dishonest answers.

- Data collection from illiterate patients is a problem as they are not very much aware of their condition.

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