



## ASSESS THE KNOWLEDGE AND PRACTICE REGARDING HOMECARE MANAGEMENT OF DYSMENORRHEA AMONG ADOLESCENT GIRLS

### Nursing

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### ABSTRACT

Dysmenorrhea is a medical condition of pain around the pubic bone and in the lower abdomen during menstruation. It is one of the most frequent gynecological diseases which 50% of women of childbearing age suffer. Most of the home remedies for menstrual cramps are centered on dilating the blood vessels and easing the muscles. The objectives of the study are to assess the knowledge about homecare management of dysmenorrhea among adolescent girls, to assess the homecare practice of dysmenorrhea among adolescent girls and to associate the knowledge on dysmenorrhea and its homecare management with selected demographic variable. A Quantitative descriptive research design was adopted. The study was conducted in Kadambathur, TamilNadu with 60 adolescent girls who met the inclusion criteria were selected by using convenience sampling technique. Data was collected using tools consists of three sections demographic variables, structured multiple choice questionnaire to assess the knowledge on dysmenorrhea and check list to assess the practice of homecare management on dysmenorrhea. The data was collected, organized and analyzed in term of descriptive statistics. The Result of the study shows that only one girl i.e.2 [3.33%] who had adequate knowledge, and majority of them 38 [63.33%] had moderate knowledge, 20[33.33%] had inadequate knowledge. There is significant level with demographic variables such as education, types of family, dietary pattern, treatment for dysmenorrhea and various treatments such as pain killer, herbal medicine, warm water bath and other are non-significant. Hence educational activities are necessary to increase the adolescent girl's awareness on dysmenorrhea and its homecare management.

### KEYWORDS

Dysmenorrhea, Knowledge, Practice, Homecare Management.

### INTRODUCTION

Adolescence is a transition period from childhood to adulthood and is characterized by a spurt in physical, endocrinal, emotional, and mental growth, with a change from complete dependence to relative independence. The period of adolescence for a girl is a period of physical and psychological preparation for safe motherhood. As the direct reproducers of future generations, the health of adolescent girls influences not only their own health, but also the health of the future population.

Dysmenorrhea is a medical condition of pain around the pubic bone and in the lower abdomen during menstruation. It is one of the most frequent gynecological diseases which 50% of women of childbearing age suffer. Primary dysmenorrhea refers to painful menstrual periods in the absence of any underlying pathology while secondary dysmenorrhea is painful menstruation associated with a pelvic pathology, such as endometriosis. Most of the home remedies for menstrual cramps are centered on dilating the blood vessels and easing the muscles.

The prevalence of dysmenorrhea in adolescent girls was found to be 79.67%. Most of them, 37.96%, suffered regularly from dysmenorrhea severity. The three most common symptoms present on both days, that is, day before and first day of menstruation were lethargy and tiredness (first), depression (second) and inability to concentrate in work (third). The home remedies for dysmenorrhea includes, hot application measures, exercise, diet, herbs and rest & sleep. Dysmenorrhea is the leading cause of short-term school absenteeism. It is associated with a negative impact on social, academic and sports activities of many female adolescent<sup>1</sup>.

Many research studies states that nonmedical remedies be used in pain, is best treatment for cramps.<sup>2</sup> There was substantial heterogeneity in forest plots and statistic was 98%.<sup>3</sup> Socio economic losses and perceived quality of life losses are more prevalent among girls in urban area than girls in rural area.<sup>4</sup>

The prevalence of primary dysmenorrhea has been reported to range from 42 to 95% in different countries.<sup>5</sup> Prescribed medications include inhibitors of prostaglandin synthesis and non-steroidal anti-inflammatory drugs (NSAIDs) for the relief of pain as well as oral contraceptives. Non-pharmaceutical treatments include acupuncture and surgery.

Several of these treatments may have adverse effects or may be contraindicated in certain groups of women<sup>6</sup>. Today, new information has been achieved on the benefits and pharmacological effects of fenugreek on human wellbeing.<sup>7</sup> Fenugreek plant is native to the West Asia and Iran<sup>8-9</sup>. So the researcher has identified and investigated knowledge and practice regarding homecare management of dysmenorrhea among adolescent girls.

### OBJECTIVES

1. To assess the knowledge about homecare management of dysmenorrhea among adolescent girls
2. To assess the homecare practice of dysmenorrhea among adolescent girls and
3. To associate the knowledge on dysmenorrhea and its homecare management with selected demographic variable.

### MATERIALS AND METHODS

A Quantitative approach descriptive research design was adopted to conduct this study. 60 adolescent girls were selected in Kadambathur, TamilNadu by using convenience sampling technique. The inclusion criteria are adolescent girl who attained menarche, who are having signs and symptoms of dysmenorrhea, girls with the age group between 12-18 years, who willing to participate in the study, adolescent girl who can able to read and write Tamil and available during the time of data collection. The exclusion criteria are adolescent girl who diagnosed with gynecological conditions, those who below 12 years of age and above 18 years of age, never had a pain during menstruation and who are under hormonal therapy. Data was collected using tools consists of three sections demographic variables, structured multiple choice questionnaire to assess the knowledge on dysmenorrhea and check list to assess the practice of homecare management on dysmenorrhea.

### RESULTS AND DISCUSSION

The present study findings depicts that out of 60 adolescent girls 20 girls (33.33%) had inadequate knowledge, 38 (63.63%) of them had moderate knowledge and 2 (3.33%) had adequate knowledge.

The present study reveals that there is significant association between knowledge with variable education, type of family, dietary pattern, treatment of dysmenorrhea and type of treatment at  $p = 0.05$  significant levels. There is no significant difference with the others demographic variables. The present study was supported by **Gayathiri K V (2017)** conducted a study on effectiveness of planned teaching programme on

home remedies of dysmenorrhea which showed that overall knowledge score was 50(100%) inadequate knowledge regarding home remedies of dysmenorrhea while coming to the knowledge and association there is no association between knowledge scores and selected demographic variables like age, education, area of residence at 0.05 level of significance<sup>10</sup>.

**Tab: 1: Frequency and percentage of level of knowledge about homecare management of dysmenorrhea among adolescent girls**

Knowledge	Frequency(n)	Percentage (%)
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Adequate Knowledge	2	3.33
Moderate Knowledge	38	63.33
Inadequate knowledge	20	33.33

**Tab: 2 Practices regarding homecare management of dysmenorrhea among adolescent girls.**

	Mean	Median	SD
Practices regarding homecare management of dysmenorrhea among adolescent girls.	10.4	22	2.2477

**Tab: 3: Association of knowledge on dysmenorrhea and its homecare management among adolescent girls with selected demographic variable.**

S.no	Demographic variables	No. of sample	Level of knowledge			Chi square
			Adequate	Moderate	Inadequate	
1.	Education :					$X^2=3.09066$ P=9.49 S
	A) Illiterate	18	0	5	4	
	B) Primary School& High School	36	1	11	6	
	C) Higher Secondary& Above	6	0	3	10	
2.	Type of family:					$X^2=9.27172$ P=5.99 S
	A) Nuclear	28	1	11	2	
	B) Joint	32	0	8	8	
3.	Dietary pattern					$X^2=13.6480$ P=5.99 S
	A) Vegetarian	10	0	4	1	
	B) Non Vegetarian	50	1	15	9	
4.	Do you take treatment for dysmenorrhea?					$X^2=12.1028$ P=5.99 S
	A) Yes	12	0	2	4	
	B) No	48	1	17	6	
5.	If so what treatment you will take?					$X^2=14.4053$ P=12.59 S
	A) Pain killers	6	0	0	3	
	B) Herbal medicine	10	0	3	2	
	C) Take warm water bath and rest	4	0	1	1	
	D) None	40	1	15	4	

## CONCLUSION

Majority of the adolescent girls have inadequate level of knowledge regarding dysmenorrhea. Hence educational activities are necessary to increase the adolescent girl's awareness on dysmenorrhea and its homecare management.

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## AUTHORS CONTRIBUTION

All the authors actively participated in the work of the study. All authors read and approved the final manuscript.

## CONFLICT OF INTEREST

The authors declare no conflict of interests.

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