CHAPTER - II
REVIEW OF LITERATURE

This Chapter deals with the report on the available reviews on the research studies and relevant literature from which the problem has been formulated, designed and studied. Literature review in any research study is done to understand the in-depth knowledge related to the problem and its related area.

An intensive literature review has been done from published and unpublished materials, books, journals, reports and so on. It has helped researcher and provided the researchers with a deeper insight into the problems and has assisted in the methodology, defining the problem construction of tool, formation of hypothesis and conceptual framework and analysis of data. During the review of the literature the investigator will came across many themes directly and indirectly relevant to the present problem and study.

‘Review of literature’ is very necessary to get insight in to topic and develop the experimental project. Its written literature review provide the investigators and researchers with background for understanding what has already been done in the problem being studied and illuminate the path ways to perform new studies to meet the demands of unmet needs.

Many researchers have defined the term review of literature in their own way. A few researchers say that going through the study done by other researchers is a total information of what are the facts which have been published, unpublished and generalized on the specific problem by the university researchers. University of Toronto has also defined the term review of literature in same way.

American Nurses Association defines; review of literature is a total text, which purposes are comprehensively go through the every bit of information on a specific problem statement of research.

Best John defines the concept as, review of literature is a brief summary of previous researchers and writing of recognized experts providing evidences that the investigator is known with what facts are existing about new things and what is to be still find out about hidden information.

Polit and Beck explains the term as; review of related literature provides
readers with an overview of existing evidence on the problem being addressed and develops an argument that demonstrates the need for study.

The information of previous studies is to produce theoretical and scientific knowledge about particular problem and phenomenon and finding in a production of information, which, already exists and about the occurrence that appear. The important and first purpose of literature review is to gain in depth and a broad background that available related to a problem in conducting research, the literature review aids in selecting a problem and purpose, developing a theoretical frame work and formulating a research questions.

According to Abdullah and Levine, a literature review gives the foundation for next researches and readers. It gives an account of the necessity to replicate the same study. It too assists to find out detailed information of empirical information in any professional subjects. The investigator followed all these steps in review of related research and non-research information to expand her level of understanding the facts of the study.

A review of literature is a action of searching and evaluating of the existing material in the subject of given area and topic which is chosen by the researcher. It is the activity of state of the art related to topic which is selected. It has 4 important objectives as follows:

- In the selected area of the study it surveys the available material
- By this researcher can synthesises the information what he gets into a summary
- Helps for the critically analyses of the material which is collected by finding of gaps in presents areas of knowledge and it shows the theoretical limitations and view of points
- It helps to present the material is the systematic and organised way

A detailed research and non research studies extensive study has been done to increase and widen the scope of knowledge on problem in hand and to go deep into the information to assess and evaluate the outcome of research. This under taken research’s Literature review is discussed in
following sections.

Section I: Literature related to biopsychosocial problems among post menopausal women

Section II: Literature related to the coping strategies used by post menopausal women

Section III: Literature related to life quality of women of post menopausal women

2.1 Section I: Literature related to biopsychosocial problems among post-menopausal women

The human age continuum can be discussed in many stages and every this stage is distinguished by specific manifestations and characteristics. overlapped by significant alteration in hormones, women’s life stages are divided generally into infant period, adolescent period, fertility age, climacteric period and elderly period. Along with these all above stages pregnancy and delivery are the life events that are generally included in women life and these are specific to women.

Health status of a human in any stage has its influence in the next stage. Since from past half century, Japanese society has changed greatly and life of menopausal women and health status at current condition largely differs from previous generation how it t was seen Middle age women’s psychosocial facets are crucial requires huge focus has to be put. It required the prompt perception of clinical practice and needs involvement of a holistic view and it extends over the limitation of biomedical issues.

Socio-cultural aspects, bodily characteristics of every phase of life and to understand the each menopausal women’s social, physical and emotional background is essential to understand the role women after the attainment of menopause. Understanding of stage life process is enlarger the emotional and rational perception and the used as clue to explore the precipitating complications and its management which cannot be anticipated. the emotional stability and health of menopausal women can also be enhanced by supportive and polite attitude of physician and health care provider.

Shahedur Rahaman, Faizus Salehin and Asif Iqbal (2011) have carried out a cross sectional research to assess related symptoms of menopause among women of middle age in Kushtia region of Bangladesh. In
this study 509 women were interviewed and their age was 42 – 70 years. For taking interview they used modified Menopause Rating Scale. The finding of the research depicts that, the average age respondents were noted 51.14 years. The important symptoms among respondents' complaints about pain in joints and subjective discomfort of muscles, feeling tired, headache, mental and physical exhaustion and sleep problems, these are followed by Sadden mood dryness of vagina, hot flushes, intolerance and apprehension and other symptoms reported were cardiac discomfort and bladder problem. The study concluded that, hot flashes and swatting were less when these results compared with other studies in Caucasian women.

Sarkar A et al (2014) Disseminated a study of cross sectional carried out to evaluate various post complaints of menopause along with various demographical parameter at Jamnagar district, India study include 300 samples of age 40-65 years. The finding revealed that majority of participants were had pain in joints (64%) which is followed by back pain around 58%, irritation 56.66%, problems with memory and sadness (48%) and vasomotor symptoms features such as night sweats and hot flushes is 47.33% were most reported symptoms in the study were most reported symptoms in the study. Still huge work has to be done to aware the these middle age females and educate about these changes, needed to educate these women and make them aware about various menopausal symptoms and ways available to cope with them. This will help and enable post-menopausal woman to find out these symptoms as early as possible, to take early medical interventions to Uplift their life quality.

Priya Bansal, et al (2013) conducted study among women of middle age to assess the occurrence of post-menopausal problems at Punjab. A total of 180 women of 40-60 years of age were selected in the study by using proportionate sampling technique in this research. The facts explain that, the most frequently and commonly occurring symptoms of menopause were headache (94.1%), spells of dizziness (81.5%), decreased libido and sexual energy (81.5%), 68.9 percentage of sleep disturbance, loose the interest in day to day activities. Parts of above mentioned symptoms, the general symptoms were alteration in attention and concentration at 54.1%, fluctuations in mood around 49.6% and diaphoresis during night 35.6% and
vaginal hot flushes around 59.3%. A very rare women explain the symptoms like facial hair, infection of urinary tract, incontinence of urine, uterine prolapse and dyspareunia. This study concluded that, majority of post-menopausal women possess one or other biological and psychological problems among that, headache and dizziness are most common vasomotor symptoms and sleep disturbance is most common psychological symptoms.

Vijayalakshmi S et al (2013) Explain in descriptive research conducted by her, to evaluate the transition during menopause in middle age females living in rural area of Amritsar, Punjab, From July 2012 to December 2012. By using purposive sampling method 30 rural middle age females were selected. Scale rating the menopause was adopted to gather the data. The findings of the study were, 92.90% of samples experienced feeling tired, 88.80% experienced headache, 76.20% were had joint and muscular discomfort, 60.09% were had physical and mental exhaustion 54.40% were experienced, 37.30% were had depressive mood, irritability was experienced by 36% of samples, vaginal dryness (36%), sweating and hot flushes (35.80%) and anxiety (34.50%). This study concluded that, the increased percentage of scores of menopausal rating scale were observed in women of peri menopause and post menopause

Donald S et al. (2012) carried out a project To explore the post-menopausal women suffer with health issue among women living in rural areas to match the outcome to other studies which are conducted in before in various conditions of at Vadodara district, Gujarat. Data was collected from 147 post-menopausal women by using questionnaire. Result of research that, many of menopausal women suffered from biological symptoms like tiredness and headache. It is accompanied by physiological changes as sweating in night, vaginal flushes and palpitations as well as other psychological symptoms like lack of concentration, sleep problems and anxiety in the work. Study concluded that, post-menopausal women of rural community will presented with many types of health related problems and it has also related to the setting where they lives in.

Oppermann K et al.(2012) Regulated a research by cross sectional method to find out, the extent of biological, mental and bodily features related to menopause concern symptoms and relation of these symptoms to transient
mental problems among premenopausal, perimenopausal women and middle aged women of post menopause phase at Brazil. The 20-item Self-Reporting scale consisting of questionnaire was used to collect the data about minor psychiatric disorders among 324 Brazilian women of 36 to 62 years of age. The result of the study revealed that, more prevalent symptoms among perimenopausal women were sweating during night, hot flashes and dryness in vagina (P < 0.001). Among all groups the most frequent complaint was fatigue. Minor psychiatric disorder such as acute memory loss education and irritability were common variables found readily accepted variables during research study. In support of the facts of study conclude that, memory loss, poor educational level menopausal transition and irritability represent for positive findings of risk factors in a assessment for minor mental problem.

Sussman et al (2015) conducted a retrospective study among 102 randomly selected patients to find out the menopausal symptoms prevalence among women with hormonal therapy by making use of electronic medical record information from Reliant Medical Group from 2006 to 2011. Findings of the study revealed that, symptoms of motor system like vaginal flushes (40 %), sweating during night period (17 %), and disturbance in sleep (16 %), vaginal dryness is about 13 %, psychiatric mood alteration is seen about 12 % and increase in the weight (12 %) were most common menopausal symptoms. This study concluded that, Menopausal symptoms in the population the advanced medical findings will be authentic tool of information for future perspective.

An cross sectional study was conducted by Peter Chedraui et al.(2007) To find out the associated risk factor and severity, frequency and intensity of menopausal symptoms in females of middle age around 300 women were selected at Luis Vemaza hospital Guayaquil. Study results indicated according to status of menopause women were found as 40.6% premenopausal, 48%perimenopausal, 11.4 percept of postmenopausal. About 62percent samples were experience decreased libido, participants has schooling less than 12 years is about 8.3 percent. Most general and prevalent complaints are musculardiscomfort and pain in joint is seen about 77 percent, sadden emotional state about 74.6 percent . Fertile dysfunctions s about 70 percent , vaginal flushes are prevent about 66 percent and sleep dysfunction 45
percent. The rate of prevalence of menopausal complaints are greater in premenopausal and post-menopausal when matched with premenopausal women. Age of menopause, sexual dysfunction and level of education were risk factors associated with more profound complications of menopause.

A prospective study conducted by Dr. Rita Marahatta, (2012) in the department of OBGYN, Nepal medical college teaching hospital, Kathmandu, Nepal to find out the major health problem in mid-life of female, to see Menopausal age and to see rate of occurrence of menopausal symptoms, common menopausal symptom among Nepalese women. By interviewing from 500 middle age females to collect the data for present study. Findings of the research explains that around 49.9 years is the average age of menopause and UTI is an important significant feature to diagnose the menopause and somatic symptoms were common in menopause.

Masoumeh A et al. (2012) conducted a cross-sectional study to determine the prevalence and severity of menopausal symptoms and related factors among women of 40-60 years of age in Kashan in the country of Iran. In this study 700 menopausal women from City of Kashan were included and they are recruited by using cluster sampling. Information for this study was collected by the Menopause Quality of Life Questionnaire. Results of the study revealed that the most common symptoms in all the areas were, sweating at night, less accomplishment of tasks, feeling like lack of energy, and changes in sexual desire. There was a statistically significant difference was found between; the severity of menopausal symptoms and work status, level of education, exercise activity, frequency of exercise and duration of menopause. Study concluded that, employment status, high level of education, engaging themselves in physical activity and menopausal duration of more than 5 years are associated with mild level of symptoms of menopause.

El Shafie et al (2011) Carried out a cross-sectional research project mong women ranges from 40 to 60 years of age and total 472 healthy women were included from the representative regions of Omani population motive of the project under taken to enumerates the rate of occurrence and profoundness of manifestation of climacteric phase and precipitating events. Result of the study revealed that, 39.6% of women belonged to
premenopausal group, 15.2% were Perimenopause women and 43% were women of post menopausal period. The facts observed through rating scale of menopause are most readily seen symptoms were concern to somatic system and psychological system than genito-urinary complication in all three stages of menopause. The most common symptoms were muscular discomfort and pain in joints is seen around 73.3 percent, and later psychological and bodily fatigue is found about 47.2% and apprehension is about 46.6 percent. This study concluded that, symptoms, fetal symptoms were concern with age of women, delayed stage of menopause and low educational status.

Shakila. P, P Sridharan and S Thiyagarajan (2014) conducted a descriptive survey to find out the common symptoms and knowledge associated with period of menopause. This study was conducted among Sri Lankan academic women who were ranging from the age 25 to 60 years. Study used modified Menopause Rating Scale questionnaire and total 50 Sri Lankan women were interviewed to obtain information. The findings of the research depicts about common and prevalent features reported with in the study were joint and muscular pains, psychological exhaustion, concentration and problems of sleep these symptoms are followed by symptoms related to hot flushes and sweating in night, irritability, anxiety, itching in private parts, and depressive mood status. This study concluded that, the studies in this area are very minimal to assess level of awareness regarding phenomena of menopause in female’s bodily, mental, social aspects areas. Therefore findings under taken research will help to improve the available body of knowledge and awareness in this area.

E. Ojeda et al (2011) carried out a research study for find out of menopausal symptoms in two populations who belonged to indigenous Latin American population. Study samples were total 573 who had natural menopause. Their age was 45 – 59 years in that 288 menopausal women belonged to Quechua (Peru), 285 menopausal women belonged to Zenu (Colombia). They were living in separate areas. Survey is done and data collected by using general questionnaire, rating scale, i.e. Menopausal Rating Scale. Study results showed that MRS score was high in Quechua women which was significant but Zenu women MRS score was not higher. Quechua women had high somatic and psychological signs when it was compared with
Zenu women, but both the groups presented similar intense urogenital symptoms. Study concluded that, in women who belonged to Latin America had severe menopausal symptoms and it was higher, this may be because of the indigenous ethnic group they belonged to.

Joseph N et al. (2014) conducted a research study to explore occurrence Mode and extent of symptoms of menopause and to find out the associated causes to the menopausal symptoms among various outreach clinics of Kasturba Medical College, Mangalore. The 40-65 years of age women were considered for this project via convenient method of sampling. And Data regarding menopausal symptom was collected by using the menopause rating scale questionnaire. Result of the study revealed that, joint pain and discomfort in muscles and bodily and psychological tiredness are observed commonest complications and is seen around 94 (85.4%) women. The average symptoms reported by women were 7.6 ± 2.8. Women with well education reported significantly more symptoms. Among perimenopausal women Somatic and urogenital symptoms were more and somatic symptoms were more among postmenopausal women. Study concluded that, symptoms related to menopause are common and they cannot be ignored. More of menopausal health care facilities are needed to create awareness, early detection and treatment of related problems.

To assess sexual function, menopause related symptoms and satisfaction with life, a cross sectional study done Lia ornat et al (2013), Middle age females aged from 40 to 59 years attending the gynaecological consultations were considered included in the research project. The total dispersion of 26.6 percent of the total score variance was found by multiple linear regression analysis model the scores which was increased expressed in the facts. Peak sexual function was proportionated with good SWL and sexuality is inversely proportionate with women’s age and adverse manifestations of menopause. Study. In the conclusion of this study it is said that, low SWL scores were related to lower sexual function and female age and symptoms of menopause with poor marks were proportionate with factors related to economic, symptoms related to menopause, smoking and partner factors.
Batool SF, Saggu Y and Ghani M (2014) were conducted a research study to make an comparison of symptoms related to menopause among the literate and illiterate women who in Rawalpindi in Pakistan country. Rating scale concern to menopause was applied to find out profoundness and degree seriousness of postmenopausal features among literate and illiterate women around 100 females were considered in the study. Findings of the project under taken revealed that, most prevalent post menopausal symptoms was sleeping problems and other problems reported were heart discomfort, sweating and hot flushes, pain in joints and muscles, mood of depressive type, anxiety and irritability and exhaustion both physically and mentally. The symptoms and severity were differed with regard to educational status of the participants. Study concluded that, educated women were presented with high somatic symptoms as compare to uneducated women.

To examine experience and their attitude towards the menopause among women of middle age in relation to some demographic factors Sewasew tsehay et al (2014) undertaken a research study. In this study by using simple random sampling 300 middle aged females of age ranges 35 to 70 years recruited for collection of data a semi structured questionnaire was used. The results of the study revealed that, based on educational background there was differences found significantly in relation to attitude towards menopause and it directly suggest that educated women shown better and positive attitude than other group of non educated ones. If was also found that there were significant difference in symptoms of menopause and attitude across the status of menopause. As compared to post menopausal women with pre-menopausal women experience the peak symptoms of menopause, positive attitude is displayed by postmenopausal women than pre and peri menopausal women’s. The study concluded that, status of menopause, educational status and knowledge and awareness related to females of middle age attained menopause significant determinants to develop positive attitude towards menopause

A research study conducted through cross-sectional and descriptive survey design was conducted (Lt Col Geetha R and Lt Col Laxmi Priya Parida (2013), illustrate prevalent rate of problems of menopause and the ways they have taken for the prevention of menopausal problems. Women
attendants who were present in the tertiary care hospital from Sep to Oct 2013 were recruited in study. A 100 samples was included in the study and needed information was collected by using structured interview schedule. Results of the survey revealed that, 50.28 years was the mean age of samples and 45.26 years was mean age of menopause. Discomfort in joints and muscles and physical as well as mental exhaustion was experienced by majority of menopausal women (86% and 81% respectively) and Conclusion is made as the most common symptoms were reported are somatic and psychological areas. All study participants adopted some kind of strategies to prevent menopausal problems at home.

Zhang JP et al (2016) conducted a community based survey to find out the symptoms of postmenopausal phase prevalence and sleep pattern and quality during menopausal transferring phase and post menopausal phase among women in Taiyuan, Shanxi. The results of the study revealed that, with regard to menopausal symptoms highest prevalence is found beginning of postmenopausal period, the subsequent symptoms will be found at late postmenopausal stage and the early menopausal stage. Fatigue, arthralgia, myalgia, decreased libido and insomnia were five most common symptoms found in the study. Study concluded that, Menopausal changes are most general and they do not yield any serious complications during menopausal transferring phase and post menopausal phase among Taiyuan, shanxi women. Sleep disturbance are high during post menopausal phase

Cutinho SP et al. (2013) reported that, biopsychosocial problems which the post-menopausal women mostly suffer are ranges mild to moderate level and maximum number of postmenopausal women are presented with biological problems in their study which was conducted to investigate selected biological psychological and social issues of middle age females reached the menopause phase; to understand the connection between biosocial problems and how they are related with menopause and to find out relatedness among these said problems with selected the selected baseline variables. In this descriptive study conducted among 50 post-menopausal women in the year 2012 data was collected using a rating scale. This study concluded that, in contrast to the psychological and social problems most of the women experienced biological problems
Akanksha S and Shishir K (2014) conducted a population based, cross sectional study to assess post menopausal symptoms among women in Dichaon Kalan village, Najafgarh, located in South-West district, New Delhi between October 2011 to March 2013. Middle age females attained the menopause from 40 to 54 years were considered for the undertaken research project. Findings of the project revealed that, Maximum number of postmenopausal women attained menopause at the age of 45 to 49 years and 46.24 was the average age at attaining menopause. Majority of women around 225 (89.3%) were suffered with at least one or more menopausal symptoms. The highly profound and habituating symptom among postmenopausal women are sleep disturbances (62.7%), pain in joints and muscles about 59.1%, vaginal painful flushes around 46.4 percept and sweating at evening (45.6%). It was found about 32.1% middle age women suffered with psychological symptom such as depression and of about 21.0% postmenopausal women suffered from disorders related to anxiety. No woman was found to be suffering from severe or very severe depression and anxiety.

Shahedur R et al. (2011) conducted a study to find out the problems concerning to menopause in females attaining menopause at kustia in Bangladesh country. Said research find modified rating scale questionnaire is suitable for data collection, around 509 middle age women around 40 t 70 years old were involved for research project the mean age of attaining menopause is around 51.14 years among samples. the commonest problems experienced by the samples were, tiredness around 92.90 percent, headache about 88.80% pain in joints and muscle ache about 76.20 percent, mental and physical tiredness 60.90% and sleep disturbance about 54.60 % and followed depressive affect, irritability, vaginal dryness, diaphoresis and vaginal hot flashes about 37.30, 36 36 and 35.80 percent respectively found in the findings of the study. They conclude the study by draw the conclusion that, common postmenopausal complications were found in samples involved in the study and compared this study to Caucasian women Asian females observed that prevalence classical symptoms of menopause id hot flushes and sweating are less
Terauchi M, et al conducted a study to explore association among mental and physiological symptoms in females attained peri menopause and post menopause in respective clinical area; it shows that insomnia participate the depressive mood and apprehension or fearfulness cause the insomnia. The female attained peri and post-menopausal phase attending to scientific health and nutrition education session at Tokyo medical and dental university hospital were involved for the study around 237 females were participated for under taken project. Questionnaires related to life quality of menopausal women and hospital anxiety, depression scale were found suitable for data collection, data collected were analysed through spearman’s rank correlation and regression scale. Facts of analysis shows that sleep disturbance is profoundly seen, the issues related to initiation of sleep and experiencing non refreshing sleep were strongly related with psychological problem rather physiological problem. Insomnia is highly concern with anxiety and it is largely seen among females of peri- and post-menopausal phase. The hospital condition is also closely related to psychological that somatic problems. Anxiety is caused due to anxiety and non-refreshing sleep is associated with depression.

Geukes M, et al conducted a study to find out the how symptoms of menopause influence work ability among 208 healthy working women between 44 to 60 years of age by cross sectional research study. The ability of work is measured with help of work ability index a green climacteric rating is applied to rate the features of menopause. Strong negative correlation was analysed among total rate of green climacteric rating and index of work capacity. Sum variance in the Work Ability Index score which was predicted by total Greene Climacteric Scale score is 33.8%. Only mental and bodily sub ratings in the scale of Greene Climacteric were apparent anticipator among multiple linear regression analysis. Menopausal symptoms and ability of work have invert relation which may increase the risk of absence due to sickness.

Peter Chedraui, et al conducted the study to find out the Percentage and profoundness of menopausal features and their association with health of middle age females in Ecuador. In this said cross sectional project females have intact ovaries and uterus of age 40 or more working in Luis Vernaza hospital of Ecuador were considered for the study. The participants were
required to furnish the information to questionnaires provided for them. Percentage and severity is obtained data assessed and correlated with variables. About 300 females were integrated for under taken study, mean age of participant was 45 years, females of pre-menopause were 40.6 percent, the Perimenopause women were about 48% and post-menopausal women were around 11%. Around 8% of samples has schooling less than 12 years and females have sexual inactiveness been about 62%. The largely general symptoms seen in study samples were muscular discomfort and joint pain is about 77%, sexual problem is about 69.9%, vaginal hot flushes 65.5% and sleep disturbance 45.6% followed by mental sadness is around 62.6%. The number of menopausal symptoms among peri and post menopausal women is significantly greater than women of premenopause age. In relation to age of women and stage of menopause the total and subscale of menopause rating scale scores significantly increased and participants with low level of education had higher rate of physical and mental features when they matched with their opposite part. Women who were inactive sexually had more ratings and mental somatic and physiological problems are more when compared to pre-menopausal women. Age of attainment of menopause, level literacy, inactiveness in sexuality where non dependant risk factors in the study predicting more severe form of menopausal symptoms.

Cuadros JL, et al carried out a study. A study project to ascertain which is more commonly seen in insomnia and its concern factor in females attaining menopause in Spain. For this study the women of age ranges from 40 to 65 years about 235 females of said age were involved for the study, rating scale related menopause is adopted for the data collection, perceived scale and insomnia severity index scale to calculate the personal and partner information, socio demographic questions were adopted. The reliability and validation of all tools were established and facts of the study shows that; 61.3% of women were in post menopause phase which highest, increase in BMI values was seen in women in an about 49.1%, obesity is also seen about 43.8%, 11.9% has HTN and 74% of women had a life partner.

A part from this around 9.8% females use the hormone therapy and 12.4 percent are on psycho-pharmacological drugs. Higher PSS score inversely proportional to age of the female and positively with MRS urogenital and
psychological scores as perceived as multiple regression rates. An absolute higher ISI rating denotes the large sleeping problem and ejaculation problems of partner. Positive associated rates of higher ISI with PSS and MRS bodily score Denotes unfaithfulness of partner and adversely with hip circumference of female

**Leuzzi C, etal** revealed that, diseases of cardiovascular system Disorder major and profound cause of morbidity and mortality in men women across the globe. In fertile age women may protect from these fatal CVS disorder due to the protective effects of endogenous estrogen. As the female reaches the menopause there is a decrease in the effect of hormone, the sex difference in CVS diseases occurrence are deceased and enhances the risk of disorder in females those are presented with metabolic conditions. The insulin opposition, dyslipidaemia, HTN, decreased BMI and Increased obesity increased coagulation and increased inflammatory state are marked due to deficiency of estrogen during menopausal transformation phase. Other general susceptibility for CVS disorder are adverse effect is seen in menopausal women in initial menopause phase. Over the time different approaches were adopted to enhance the life quality and CVS health in female living with menopause.

**Topatan S, and Yldz H** in their study which was conducted to find out symptoms experienced by women according to type of menopause and how these symptoms are related to sexual functions of women. Total 450 women’s were participated in study among them, about 250 women had spontaneous and natural menopause and 200 women had surgical menopause. Rating scale related to menopause and sexual satisfaction inventory formulated by Golombok were implemented to collect the information and facts of study revealed that sweating and hot flushes were the most common symptoms and infrequency in sexual function is scored largely in all samples of research study. Desirable connection was seen between the problems of multiple fertile activity and intensity of assumed degree of problems of menopause specifically among the females of surgical menopause group.

**Masoumeh Abedzadeh-Kalahroudi, et al** under taked a study by cross sectional method to assess, the severity and prevalence of symptoms of menopause and their concern events in females of age 40 to 60 years, in
Kashan. This was a study carried out by cross sectional and Cluster sampling method adapted to select 700 menopausal women as sample. Data was gathered through using the life quality questionnaires related to menopause. The facts shows that sweating during night, decreased performance at job, lack of energy, sexual dysfunctioning are common manifestations of menopause in the samples. Fetal symptoms in these aspect were night sweating associated with anxiousness and nervousness, joint ache muscular pain, social isolation. Statically contrast is established in degree of severity of menopausal symptoms and working status of a women, educational level, exercise and activity, frequency in exercise and menopausal duration.

Lutwak N, & Dill C reported in their study that compared to male counterparts of post menopausal women these women’s are at higher risk for cardiovascular diseases and increased rates of depression and they often present atypically with coronary in sufficiency. There is great overlap between coronary ischemia and depressive disorder among this group of women. Other complaints like body pain, fatigue and disturbances in sleep are reported by a depressed woman may be related to cardiac problems and need investigation seriously without physician bias. Depression is and risk factor for which is independent for cardiovascular disease and if it occurs after myocardial infarction may lead to poor life quality of post menopausal women, increased morbidity and mortality. Post-menopausal females are at highly susceptible for cardiac ischemia and mood disorders and their features, which are often atypical, may not be diagnosed as angina equivalents.

Ande AB, et al undertaken a study to explore the perception and features of spontaneous menopausal processamong Nigerian middle aged females. In this descriptive cross-sectional study 533 participants were randomly selected who with characteristics of experience of amenorrhea for 2 years and data collected by using structured questionnaire. Most samples were married currently with monogamous relationships. 356 women have known about menopause and they described it correctly. About 97.4% of women considered menopause was a normal event, Majority of participants adjusted themselves satisfactorily with the process of menopause transition and no one among participants revealed any profound adjustment problem with menopausal stage. 346 women were not active sexually and many of
them presented with joint pains, hot flushes and night sweating and they believed that these are the common symptoms related to menopause. Suffering of at least one of the symptom of menopause was present among 302 women. Pain in joints, hot flushes and sweating in nights were most common symptoms experience by these women. The advantage reported by these women was freedom from monthly bleeding and few participants knew about hormonal replacement therapy and none of them were taking this therapy.

Aksu H, et al undertook a research to find out the correlation between attitude towards menopause and menopausal symptoms experience by women, anxiety, depression scores of the participants of the study. In this study sixty women who have attained physiological menopause and their life partners were included as samples. Measurement of menopausal symptoms was done by using menopausal rating scale and both women as well as their partners were administered the scale to measure the attitudes of women to menopause by rating scale, Depression and anxiety questionnaires formulated by beck was utilised and all the menopausal females and partner has expressed the desirable attitude towards menopausal process. This project shown the profound desirable relation is seen between rating scale of menopause and depression and anxiety questionnaires of beck rate of females. The significant facts of the research both females attained menopause and their partner have positive attitude towards menopause. The women who have suffered with serious menopausal complication have an undesirable attitude towards menopause revealed in findings of the study.

Chedraui P, et al Managed to carry out the research study by cross sectional approach, to enumerate the severity and percentage of manifestation related to menopausal process and related risk factors of women in middle age attaining the menopause. Data was collected from 404 middle aged women of age from 40 to 59 years old by adopting menopausal rating scale contain questionnaire include individual and partner information. The most commonly found problems are 4 and of those consists the menopausal rating scale are seen joint pain and muscle complications of 80%, sadden mood of 73.5%, exhaustion physically and mentally 71.3% and irritability 68%. In this middle age the most common and frequent
psychological menopausal symptoms were associated to parity and partner sexual dysfunction.

**Terauchi M, et al** Done descriptive project to identify pervasiveness and contributing factors of insomnia in peri menopausal and post menopausal women in Japan. About 1451 females attaining the menopause were selected for the study. The facts of the project expresses that rate of pervasiveness of features of insomnia was reported about 50.8 percent and profoundness is inversely connected with health related score related to life quality in all four dimension are analysed i.e physical, mental, spiritual and social dimension. As far as concern to menopausal problems, connection of insomnia was seen more significant with saddened mood apart from vasomotor symptoms. Among women with sleep disturbance one third women were depressed mood seriously. Marked relevance to sleep disturbance was seen in effect of medication, health and nutritional status, use of hormone therapy and use of hypnotics. It was concluded that, among Japanese peri and post menopausal women sleep disturbance connected more greatly with saddened mood than with other features of vasomotor system.

**Nusrat Nisar and Nisar Ahmed** conducted a study to assess the menopause related Symptoms related to menopause and to explore to effects of these features on life quality of menopausal women. Female of age from 40 to 60 years old about 200 hundred women were involved for the research. A life quality questionnaire of menopause women was adopted to analyse percent and extremity of symptoms of post menopausal phase somatic or general body pain 165, 81.7% percentage of some prominent features are calculated they were 134 or 66.3% were noticed, were common symptoms seen I subjects under study. Hot flushes 139 68.9% lack of energy 134 or 66.3% and declined physical strengths respectively. The rarely seen features are increase in facial hairs about 9.9%, bodily dimensional score were largely more in postmenopausal women at P<0.002 at same time rates of mental dimension were significantly more in menopausal transformation at P<0.003. They draw their finally their view that menopausal feature adversely impact the life quality of women in menopause.

**2.2 Section II: Literature related to the coping strategies used by post-menopausal women**
To reduce stress the conscious efforts used is called coping. Coping skills or strategies which are used are commonly known as psychological coping mechanisms. By the mechanisms of watching others and by the method of trial and error usually coping mechanisms develops in the period of infancy. The important source of coping with situations of stress is known as perceived control.

Coping usually improve from prior control over the situations of stress and within the contest of social relationships in society. For managing stress a close relationship or affiliation with others is a basic step. The coping skills effectiveness in decreasing the stress is related and depending on the skills which are used and belief of self one will have it is also termed as self efficacy.

The mechanism of coping is a one of the part of normal health and psychological well being and it included environment which is healthy, parenting which is responsive, a good sense of belongingness, good and healthy activities and treatment of diseases.

Kiranpreet Kaur et al. (2016) under took a descriptive project to analyse the level of psychosocial problems, coping strategies To establish the relatedness of psychosocial problems and coping mechanism to demographical variable. Total 50 samples were selected for study by purposive random sampling technique. The results revealed that, among total samples moderate psychosocial problems was experienced by 37(74%) of women, mild psychosocial problems was experienced by 13(26%) of samples and No one of the samples had experienced the extreme psychosocial complications. Largely 74 percent of respondents have utilized sufficient coping mechanism and lowest 26 % of the samples use inadequate coping strategies. It depicts significant connection in the levels of psychosocial problems with study demographic variables. They concluded that, study findings have certain crucial indication for the nursing fraternity such as in nursing education, practice, research and administration.

Mansoureh Yazdkhasti et al. (2015) in their review revealed that, most women after menopause focused on physical activity/exercise, educational intervention, nutritious and healthy diet, management of stress, healthy behaviors and prevention of certain diseases as a coping strategies used by
the women after menopause. This review concluded that, Increase the awareness of menopausal women in holistically will enhance their health during late menopause phase of their life. This may assist the menopausal women to advantage from reproductive life for their remaining life.

A positive correlation between the psycho social problems and physiological problems was found with the menopause as reported in a study conducted by Mohile (2003). The other problems which were reported in the study were pain in the back, increased incidence of headache, sleep disturbance and hot flushes, psychological problems like impatience, sadness, and problems related to concentration, disturbance in memory and nervousness. As perceived by large number of menopausal females their life partners and mother in law are the support system during the situation of stress due to phase of menopause. Maximum number of women took help from health professionals for biological and physiological problems due to menopause.

2.3 Section III: Literature related to the quality life in post-menopausal women

Fallahzadeh H (2010) Carried out the study through cross sectional study to analyse the life quality in post menopausal women in Yazd, Islamic republic of Iran in 2008. questionnaire related to life quality of menopausal women is applied to collect the data and 480 middle age female were selected for the study. The serious life condition is seen in vasomotor domain and higher quality score is observed in physical aspect of post menopausal women revealed in the results.

By univariate analysis it is found that there were differences in MENQUOL scores which were significant those were the age they belonged to, how many children they had, how much education women had and which employment they were having, another variable was body mass index. By logistic regression it is found score of vasomotor reduced with age of respondents. It concluded that, menopause leads reduced life quality that is depending on working condition and variables related their socio demography. So we need to make effective services for improvement of in the life quality of the women when she reaches to menopause.

Fatemeh Shobeiri et al (2016) Carried out the study by cross sectional
in post menopausal women in Hamadan of Iran around 300 post menopausal were interviewed to explore the life quality of post menopausal women. Research adopted the specific life quality questionnaires of menopause to assess the life quality of women reached the menopause phase. The facts obtained shows that the sample’s average rate regarding life quality in different community were 19.36, vasomotor problems 11.65, somatic 40 and sexual problem reported were 11.02. peak mean score shows that detrimental life quality via specific life quality questionnaires about menopause, the research shows aperient contrast in rate secured by respondents regarding life quality depends on educational status, age, economical condition, children order, employment status, BMI etc. They draw their final views by saying that life quality is declined with menopause and which is based to elements like work, literacy, age BMI , No.of children and economic status. Therefore, it is necessary to use effective educational strategies to improve quality of life among postmenopausal women.

**Mirhaqhjou SN et al. (2016)** conducted a cross-sectional survey based on population to estimate the life quality and its indicators among menopausal females of Iran. Study used cluster sampling technique to select women in post menopausal phase between age from 40 to 60 years. Life quality was analysed by specific life quality questionnaires related to menopause Findings of study showed that, worst score is found in physical domain among menopausal women when compared with other domains. One item of physical domain, Pain in joint and muscle had the highest score. According to log Regression phenomena the assumed elements of average quality of life in menopause condition were: age of menopause, education of husband and score of Body Mass Index. Study concluded that, menopausal complication had adverse impact on life quality among post menopausal women; no differences was found among the impact of age of menopause and female reached menopause group as found in study one and all the participants felt that they are positive about measures of these wellbeing in the future than their past and present life. Peri menopausal and post-menopausal participants don’t experienced as desirable role regarding their part in life as premenopausal women not concerning of their age factor as noted by second study. These studies concluded that, Menopause may express the purpose of
life of women reaching menopause and changing. It is crucial to under the menopause consists of psychosocial dimensions of life in women

**Kuo Liu et al. (2014)** An interview research title was conducted to examine the influence of menopause on life quality and health (HRQOL), from scheduled June to August 2010 in Beijing depends on cross sectional method. Total 1351 post-menopausal women aged from 40–59 years were involved in the said study. Findings of the study explain that, postmenopausal females who had menopausal process for two to five years were at risk to have portability issues after multiple adjustments. It concluded that, In first five years of menopause there is reduction in physical activity. Educational status, physical activity, smoking and history of chronic illness were closely connected with HRQOL in middle age females living in china.

**Dorota Zolnierczuk-Kieliszek et al (2012)** An cross sectional observational study was carried out to reveal the how permanent domicile influence the life’s quality during peri and post menopausal period in women and to show the influence of employment as a full time worker of agriculture on the quality of life of women at Lublin Province. Study recruited 2143 women and data collected by three standardized questionnaires: Women's Health Questionnaire, WHOQOL-BREF and SF-36. Results revealed that, the women’s life quality was significantly associated by the permanent residence place. Among permanent country dwellers the quality of life was found is worst. Residents of city and town revealed a considerably more level of quality of life among women. It concluded that, knowledge about the dependence in required in order to plan effectively health education program and campaigns related to physical and social health promotion.

**Josefa Marquez & Membrane et al (2011)** carried a descriptive and study by cross section method for finding out , whether there is an association among profession and menopausal women life quality in who were climacteric. These menopausal women were working in the department of education and health in Spain. Sample consisted of 203 climacteric women. Result of the study revealed that, between working women’s life quality and working place conditions an significant differences were found. The females work in educational sector is greater than women who works n health sector as perceived by women. It concluded that, To deal with negative influence
predicted on life quality in climacteric females there is a large demand to frame and develop the health programs.

Mackey S (2007) has done a research study to assess the level being well in female during peri-menopausal phase. The ultimate goal of the study was to embark the knowledge of feeling of being well during peri-menopausal phase. In depth, unstructured interview method is adopted for gathering the data. The experience menopausal symptoms were replaced by the feeling of being healthy. Experience of these symptoms will not interrupt adhered presence and continuous menstruations pattern. Menopause is largely discussed across the world, yet only partial women have information about it. Now largely known about nature and hormonal influence of ovary, the physiological events during menopause, and management of menopausal complications, is understood slightly about feeling associated with menopause.

Kalarhouddi MA el al. (2011) has done study to asses life quality and concern elements in kashan in Iran. Cluster sampling method was adopted to selected the 500 women of age ranges from 40 to 60 years. Female suffering severe mental and bodily problems were excluded. The information was collected by using specific life quality related menopause questionnaire. The finding of the project depicts that, average age of menopause in kahsan females was $47.6 \pm 4.1$ years in samples and 55.6 percent females were in postmenopausal phase for less than 5 years. The total average ratings obtained for every dimensions was follows; vasomotor problems around $2.89 \pm 1.64$ percent and psychosocial factors $2.71 \pm 1.2$ for bodily dimension $2.46 \pm .99$ and $2.89 \pm 1.73$ for sexual dimensions. Baseline variable like age, work condition, physical activity, educational status, menopause duration, and marital satisfaction and No.of children in those living with family had impact on life quality of women with menopause.

Jaanu MM et al.(2012) carried out survey study based on population to explore the to assess whether physical activity has any influence in the life of menopausal women related to quality. Sample size for this study was 1165 women who were of age group of 45 to 64 years. The results of the study revealed that, physical activity was increased by peri menopausal and post-menopausal women during study period about eight years. Quality of life was
not significantly correlated with status of menopause. Educated women were more likely improved their life condition than uneducated women. Life quality was improved among females who were having increased physical activity or remained stable. There was also enhancement in the life quality of women who had stable weight during their follow up. It concluded that, a strong relation was established between life quality with systematic or regular physical exercise, higher educational level and stable weight but is not with status of change in menopause.

**Naughton MJ et al. (2016)** Has undertaken research title to evaluate whether the life quality in menopausal women related with mental, psychological, social, life style and physical variables of health. This study was conducted among women of 80 or more years of age. In this study they have examined 26,299 women and global quality of life was measured by asking single item to them to their overall quality of life is rated by using a scale which measured from 00 to 10 points. The facts of the title shows that, significant relatedness was seen among mental, social, physical social, and current variables of health were with global quality of life than a history of selected co morbid medical and psychological conditions.it draw the conclusion that sadden mood and improved health may lead to goo self reported health and global life quality among odler women

**Shrestha s, Zarit SH (2012),** Have relate the life quality of menopausal women among two population i.e those who live with their family and who live with an old age home in Nepal and explained the information on elements related with life quality in 2 group samples. The finding of the titles explain that social and cultural rules, which are explained by religious philosophy that indicated familial elder management influence the how life quality is described by the women of both groups in Nepal.

**Antonio J et al. (2008)** under taken a descriptive research study by using cross-sectional method among 93 aged people to identify the what is the degree of dependency in day to day living activities, the life quality and what are the causative elements affect to life quality. Questionnaire concern to all above mentioned factors, scale related to quality of live evaluation and other scale katz index was used in the study to collect the data. The findings shown that, quality of life was found among the institutionalized old age
people as shown by the positive relation between quality of life and Katz index among these people. Regarding marital status, gender, educational level and presence of pain among institutionalized old age people no differences were found in index of quality of life.

Luciano M et al. (2012) conducted a study to evaluate the older adults’ perceptions of their quality of life among aged people residing in two long-stay care facilities and to identify the socio demographic factors and variables of health which interfere in there perception. The method adopted was a cross-sectional epidemiological study of 77 older adults resident in institutions. The results of this study revealed that, the highest average obtained in the domain of social relationships 68% and the aspect of sensory abilities in the 73.7%. The socio demographic variables gender, age, physical activity and level of education have shown a correlation significantly with the scale and the variables gender and leisure time have the same with the WHO quality of life. With old age people who are younger, high levels of education and who are involved in physical and leisure activities have an average and better perceptions in their quality of life scores as concluded by the study.

Eunkyoung Hong (2015) studied to help older adults with health programs based on their age variations in the life quality in relation to wellbeing as per to their difference in age was included in this study. This was a cross sectional research and totally 1,666 old aged institutionalized people were studied from civil population in South Korea. Written questionnaire was used to survey the population and data was collected by interviewing them. Scores on a scale had differences according to each age group as revealed by the study. Self care, mobility and usual activities domain scale shown differences among the old age people significantly.

Rajasi RS, Mathew T, Nujum ZT, Anish TS, Ramachandran R and Lawrence T (2016) have undertaken title to explore the life quality a standard scale provided by WHO was used to collect the findings. Title was mainly focused to explore the whether the life quality was impacted by socio-demographical elements in older women in kerala. Researcher adopted the cross sectional design which was based on community and information gathered samples of 160 older women who were having quite good life quality. The facts analysed shows that 2.5% of older women have large good
life quality, 38.8% has good quality and 43.15 had poor life quality had 15.6% of samples had profoundly poor life quality. When psychological life was considered, quality of life was neglected. Less quality of life was again found in physical health which influenced by social status and environment in which women lived. Logistic regression concluded that poor quality of life was because of increasing age of women i.e. women more than 70 years, not having property that were neglected by their family members and no any friends or relatives. But the women who lived in urban area were not having this problem. It was concluded that if women were financially sound, better care by family and good social status they will have good quality of life.

A study qualitative study was conducted by Abreu NS et al to assess how old age women undergoing physical therapy for infections of urinary tract as perceived by their current quality of life. By using saturation method the size of the sample was determined and recorded interview was done, it was translated and analysis is done by content analysis technique. This study result revealed that, the personal factors of health, personal relationship, autonomy, stability in finance and active life are the highly connected with life quality of female in menopause. The concern and disgust related to loss of urine and fear of urination occur at in appropriate places are associated with the impairment psychologically. Women were presented with embarrassment because of notice by other people from smell of urine and experience of similar embarrassing situations previously were the factors associated with impairment socially. In the life of old age women even though infections of urinary tract was present and cause them social and psychological harm these women had a positive perception with regard to quality of life as concluded by the study.

A descriptive study conducted by Sule G et al (2013) to find out characteristic of the menstruation in the women and what effect menorrhagia has on life condition of women. The facts revealed that, the women in the case group, menstrual bleeding was severe was said by 10.9% of women and it was largely fatal early problems while vaginal leakage as extreme or profound followed by problems was described by 73.2% of women. 46.7% of women said that use of hygienic products like sanitary pads as they are more protective as described by the participants among who had complained about
the menorrhagia. As severity of the bleeding women said that their bed sheet, clothes, and other things goes dirty simultaneously. Among menorrhagia group quality of life of the women was less than other control group significantly. With regard to quality of life menorrhagia has negative effects as conclusion made in the study. It also suggested that, women who are consulting clinics with menorrhagia symptoms can be checked their quality of life and more effective and appropriated approaches should be designed to handle them.

Chiu Y et al (2002) has carried to research title by cross sectional method to examine the events which impact the life quality of females attain menopause in Taiwan. Female of age from 45 to 77 years were considered for research. The variables under the titles were baseline variables, condition of menstruation, menopausal complications, osteoporosis and hormonal replacement therapy. Path regression and multiple regression test were adopted to check association in variables. The findings show that among menopausal complication and life quality have a association across different age group females reaching menopause. A positive impact of hormonal replacement therapy and undesirable effect of climacteric symptoms’ in mental and somatic elements life quality was depicted through path analysis. Age, status of marriage, educational status and osteoporosis also shown direct and indirect effects either positively or negatively on the factors related to quality of life.

A quantitative and descriptive study by Mehmet Top (2012) assessed the attitude related to aging and quality of life among 270 old age women Turkey. The WHO’s quality of life instrument, module of older adults and attitude towards aging questionnaire of Turkish versions were used in the study to collect information among the participants. There was statistical apparent association was established among life quality of women while attitude of menopause women towards the aging process. Physical change and growth psychologically the two dimensions of the attitude towards process of aging were life quality predictors in females of middle age and these were significant. Education and happiness affected the many dimensions of life quality of postmenopausal women and few sub scales shown affect on attitudes towards aging.
A descriptive study was conducted by Pauline Lowe and Karen MH (2010) to investigate perspectives of women in their life’s quality while living with chronic illnesses. Study was done among three women and interview was done to collect information. Discussion was made regarding management of their chronic illnesses, use of past experiences by women, their positive attitude and strategies of coping that assist them to create meaning in their life. One of the greatest challenge of health provider face today is improvement in system of health care delivery system to respond to demands of old age people who are living with chronic diseases. to corresponds to needs of elderly population who are suffering with long term disease. Health care services is designed to full fill the needs of susceptible groups of population by understanding and perceiving whether the life quality is managed in elderly menopausal women

A study conducted by Nidhi Gupta (2016) explains that, Often, ‘development’ is simplistically equated to economic growth, however, philosophically it has a deeper meaning that points towards improvement of humankind. The implicit meaning entailed in ‘improvement of mankind’ is ‘increasing the lifespan’ as well as ‘quality of life’ of people. With economic development and technological advancements, expectancy of life at birth in India has almost increase twice in last five decades and continues to increase. However, with the changing socio-cultural context and weakening inter-generational bonds, the value system of filial piety is rapidly fading.

These changes have led to increased occurrence of elderly abuse and aviod, especially within the community, that adversely affects the quality of lives of older persons, more so, for older women. Elderly women are susceptible due to inadequate access to resources, and dependence on their spouse and family to meet their basic needs during their life course. This paper highlights the types of abuse experienced by older women in an urban context in India, and its influence on various dimensions and overall life quality of menopausal women. The information gathered by a cross-sectional survey method conducted in suburbs of Mumbai, India, has been used to meet the objectives of this study in addition to review from other empirical studies in Indian context. The findings show a high incidence of abuse among elderly women and members of family being the important indicators. Abuse
among older women had a significantly negative impact on holistic domain of life quality of older female reflecting an urgent need for change in social attitude coupled with policy and programmatic interventions

Peter Chedraui, et al Carried out the project to explore the women's life quality at the time menopausal transformation phase and to assess personal and spouse elements related to its disturbance. The cross-sectional method was applied to assess the percent of menopausal complications, around 40 to 60 years old females were included into said project and 409 females were surveyed, rating scale related menopause and questionnaires concerning to determine the individual and partner baseline information. The average age of menopause is 47 years, mean educational status of samples 13.2 years, females having the schooling 12 or less, premenopausal 42.1 percent and premenopausal female around 24.4% and post-menopausal females were 33.5%. About 9.8% females have undergone hormone therapy, 1.5% were on psychotropic therapy and 1.2 percent.

Samples taking the alternative therapies for menopausal symptoms. About spouse profile, 10.3 percent have erectile dysfunction, about 11.2 % complaints of premature ejaculation, and 7.3% have presented with alcohol abuse. Average menopausal rating is 9, and bodily subscale 4, the mental scale 3, and urogenital subscale 2.1, of surveyed women 50.6% presented a sum of rating scale score is 9, or implicating from moderate to extreme percent. The readily common symptoms comprises the menopausal complications were vaginal hot flushes is about 68.9%, disorder of sleep 68.4 percent, sadden mood 55.2% and irritability 51.6%. when co-habituating factors were established statistical regression calculation was done to assessed that age of menopause and spouse’s premature ejaculation increases the susceptibility of higher menopausal rating score a part from use of hormonal therapy, gentle approach and spouse faithfulness may help to decline the risk. The peak level menopausal women in this series presented disturbed life quality is depends on age, hormonal condition and addition to that partner’s health and sexual behaviour

Kuo Liu etal in their study to examine the impact of menopause on dimensions of health-related life quality and assess the susceptible elements for life quality of the menopausal women living in rural area of China. The
study variables were assessed through 5 point questionnaire related euro life quality of women. Matching and caparison is done between different menopausal groups. Women who had menopause for 3 to 5 years prone to develop mobility complications after various adjustments. Menopause also causes the disturbance life quality index. And rating scores score to post adjustment for age. For 1st five years after the Perimenopause phase there decline in the physical mobility. Extreme 5 point rating questionnaires index and 5 point rating scales –was concern with menopause, Education status, physical exercise, smoking, and long term disorders history were related with health related life quality in middle aged Chinese rural women

**Nivedita Som and Subha Ray** done a study to establish the connection among the specific life quality of menopausal women and occupational condition, duration of menopausal phase. They selected 250 postmenopausal women through cross sectional design. The respondents’ are required to respond to specific life quality, self analysed questionnaires. Both bivariate and multivariate analytical process explains that life quality of menopausal period declines as the duration of postmenopausal phase proceeds. Perhaps bivariate process the established that working females had good life quality when compared with the non working women , multivariate process via linear regression phenomena did not correlate this result. Postmenopausal phase duration had apparent relation with specific life quality of menopausal women

**Shyu YK, etal** analysed the baseline features andwellbeing concern life quality of Taiwanese female suffering menopausal complications. Multi staged stratified systematic sampling scheme was used for said research title. A sum of 4,437 females ranges from 40 to 65 years, wereconsidered into the study, data analyzed. Multivariable logistic regression models was used by the researchers to assess whether variables profoundly and non-dependently related to the occurrences of menopausal complications. They also used the regression phenomena to analyse the problems of poor life quality concern with health and utilizing resources of healthcare among women living with symptoms of menopause compared with those without these symptoms. Eight hundred and forty six women 19.1%have said that they are experiencing menopausal symptoms. Age, habit of smoking, religion, activity like exercise
and presence of co-morbidity are non-dominantly related with the precipitating e of such menopausal complications.

**Wu HC** has done research title to assess the whether the quality and quantity of sleep hygiene concern to life quality of post-menopausal women of age 40-60 years receiving the medical treatment in Taiwan. About 1098 climacteric women form 2 health care centre were selected for the research title, the participants were required to reply to the questionnaires of life quality which formulated by WHO. The facts shows that premenopausal females had greater average score than Perimenopause in environmental and somatic dimensions and general life quality related to wellbeing. Though the criteria of sound sleep did not apparently assess the life quality among postmenopausal females, there after controlling the elements of baseline variables, intensity of features of menopause, quality of subjective sleep and disturbance in daytime were found important indicators of ratings in life quality of different women.

**Hess R, Thurston RC, et al** done research investigation to exam the what is impact of menopausal status more than symptoms in climacteric phase on well being associated life quality among 732 women of age 40 to 65 years regardless of their condition of health and status of menopause. These participants were included form single unit of general internal medicinal practice. They were asked to answer for annual questionnaire including well being concern life quality, status during menopause and symptoms of climacteric phase. Results reveals adverse implications of climacteric period on few areas of wellbeing associated life quality as found in over 5 years of follow up period regardless of symptoms of menopause.

**Márquez Membrane J, et al** has under taken research project through cross sectional descriptive design to find out, association between life quality as perceived, professional activity among postmenopausal female, who were working in educational and health sectors. This study was included 203 women of climacteric period. It was found that, factors related to labour impact on standard of health related living as it was established by correlation analysis. Among the some labor conditions and life quality of women there was significant differences were found and quality of life which is perceived by
peri menopausal women works in education sectors was higher as compared with women who were working in health sector.

Chun JY, et al carried out a study to know regarding how menopause is impacting on the standard of life of late adult age women and females of old age, comprising their care in general and problems related to voiding and sexual distress. Total 1,679 women completed self administered questionnaire in Korea.

At last about 1262 women were involved for the data collection and statistical facts shows that premenopausal women were 307, 240 were in Perimenopause and 175 were post menopause phase. The profoundly enhancement in complaints of voiding in Perimenopause and post menopausal females when co relate to fertile females. Elderly females who had hysterectomy and urinary incontinence had more voiding problems. The conditions such as HTN, Heart disease and problems related to joints reduces the life quality. Climacteric phase aversively impact the life quality of female reaching the menopause and elderly females due to declined health and increase the voiding problems.

Waidyasekera H, et al in their study to explore the presence of symptoms of menopause among the women of Sri Lankan population and the relation of quality of life which is health related. This was a cross sectional study based community need and it has been done among women of age 45 to 60 years about 683 number. Menopausal rating scale was administered to find out symptoms of menopause and briefly 36 interview related to health had administered, to find out the well being concerned life quality among women.

Among all participants 18.04 per cent were Perimenopause, 59.4 percent women were in postmenopausal and 90 percentage of the respondents presented with least one or other features of menopause. The very significant and occurring symptoms related to menopause were muscle and joint discomfort, exhaustion mentally as well as physically and hot flushes. Hot flushes, problems with sleep and muscle and joint discomforts indicated an enhancement in presence of category of women from premenopausal to post menopause. In the presence of symptoms of menopause chronic illness in the women was connection significantly. Lower
life quality ratings was found among the women with menopausal symptoms in almost of the areas of the brief form 36 health questionnaire as correlated to female who were not having symptoms. There was significant association found between evident of menopausal features and decline in life quality of menopausal women related to health

**Chen Y, et al** has done a study to find out the effect of age of menopause and other contributing elements on life quality in china. Climacteric females of age ranges from 35 to 65 years were selected for the undertaken study. Specific life quality questionnaires concern to menopause which related to Chinese community was included for data collection. The life quality is slowly reduces from premenopausal women to postmenopausal phase when it is concern with female of same age. The vasomotor and bodily features are closely associated with disturbed life quality among post menopausal female express in analysis. The detrimental life condition ratings among vasomotor, bodily and psychosocial dimensions were seen in initial phase of postmenopausal. The slowly reduction in sexual activity related to life quality results from early menopause.

**Abedzadeh Kalrahoudi M** has done research title to analyse the life quality and contributing elements in menopausal women in Kashan city of Iran, About 700 females of age ranges from 40 to 60 years were considered for said project through cluster sampling method. Females suffering psychological and somatic problems were not considered for the study. A standard life questionnaire was adopted to gather the data. The facts revealed that the average age of climacteric period is $47.6 \pm 4$ years and 55.6% of females had been in postmenopausal period from less than 5 years. The total sum mean ratings collected for every dimensions was $2.89 \pm 1.73$ for sexual functioning domain, $2.71 \pm 1.2$ for psychosocial, physical dimension $2.89 \pm 1.2$ for psychosocial, physical dimension $2.89 \pm 1.73$ for vasomotor aspect, the age working condition, physical functions, educational status, menopausal duration income, satisfaction, marital conditions and number of child had influence on quality of life in menopausal women.

**Ozkan S, et al** conducted a research study to find out correlation between symptoms of climacteric phase and life quality in female of pre menopausal and post menopausal phases. Total 171 women who were in
climacteric period were included as samples in the study and self administered questionnaire consisting of socio demographic information, symptoms accompanied with menopause and use of hormonal therapeutic modality along with WHO quality of life brief was used in the study to collect information. Among 171 women 71 women were postmenopausal women and 100 were premenopausal. Results shown, that no differences significantly among pre menopausal and post menopausal women with relation to their biological life quality, relationship in society, social ,environmental ratings. The biological life quality scores of menopausal women is associated without vasomotor complications during fertile period and postmenopausal period were more apparent in those with good education status and females who had menopause from 1 to 6 years and more than 10 years.

**Marcianna Nosek, et al** conducted a research to analyse the level of distress among women during the menopause transferring period. The design applied for the study was narrative analysis and they maintained all samples complete narrative when possible. Among fifteen midlife women an interview was conducted and digitally audio recorded and the verbatim is transcribed. All the participated samples narrate the distress felt by them concerning to amenorrhea, instability in emotions, and dryness of vagina and decreased libido, which influence their relationship with self, their partner, family and work. Some experiences influenced by concerns for the future life and some were presented against a backdrop of the past life. The narrations which are gathered in detail illustrate that the 43 stresses affect their quality of their life, it comprises the how these symptoms affect women’s personal, occupational and social life during menopause

Menopausal Distress experienced by women’s associated with attitude of a women concerning to menopause reported in many studies. Menopausal women’s perspective of symptoms alters her to mould in her physique and can strive her to assess the ways to deals and manage the related distress. Poor coping method of women will result in to unpleasant experience of menopause. The way women responds to menopause will on their experience of menopause and influence the women’s quality of life thus it is important to observe close at coping strategies which a menopausal women apply to manage the menopausal symptoms. *(Nosek et al, 2010)*
According to WHO the quality of life is an individual’s perception of their position in life concerning to culture and value system in which an individual live and in association to their aims, ambitions, standard. Quality of life is dynamic and multidimensional and abstract it cannot be define in one dimension in the literature of medicine. (Catherine A et al, 2012).

In midlife women quality of life reduces. Therefore it is necessary to find out whether this problem is because of transition to menopause and early menopause. (Avis NE et al, 2004)

Quality of life population is a crucial component to scale the health care service. For a care of symptomatic postmenopausal women it is necessary to understand the effect of menopause on their quality of life. (Col N et al 2009) In clinical practices now days it became important to study the quality of life of post-menopausal women.

Mishra G and Kuh D, 2006 reported that, impact of menopause in the women’s life is complex phenomena and it includes the changes which takes place in all domains like somatic health, psychological health, spiritual health and personal health. Women who are presented with vasomotor symptoms, quality of life related aspects of health may be severely influenced and it is also found in their study that in Sweden country about more 40% of women complaints regarding the vasomotor symptoms till the age of 64 years.

SUMMARY

At end of this lesson had covered the literature review of research publications and printed literatures concern to title of research under taken. This literature has provided an understanding and enlarged the investigator’s perspective required for the research title under taken. This chapter consisted of comprehensive review of literature related to bio psycho social features among post-menopausal females, coping strategies used by post-menopausal women and quality of life among post menopausal women.