

# Prevalence and Factors Affecting Dysmenorrhea in Female University Students: Effect on General Comfort Level

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## ■ ABSTRACT:

The purpose of this study was to investigate the prevalence and the affecting factors of dysmenorrhea and its effects on overall comfort among female university students. This was a cross-sectional study. The research was carried out between October and November 2013 at a university in Ankara. This study was conducted with 200 female students. The data were analyzed using frequencies, means, SD,  $\chi^2$  tests, independent *t* tests and analysis of variance. Data were collected using an interview questionnaire, the visual analog scale (VAS) and the General Comfort Questionnaire. The mean age of students in this study group was  $20.85 \pm 2.15$  years. The prevalence of dysmenorrhea in the students was 84%. The mean severity of pain was  $5.78 \pm 2.45$  on the VAS. The present study found that 45.8% of female students experienced moderate menstrual pain and the most common co-occurring symptoms were irritability (34.6%) and fatigue (21.5%). One-fourth of the students with dysmenorrhea consulted the advice of a physician and the most commonly used methods for pain were analgesics (69%), heat application (56.5%), and rest (71.4%). Family history of dysmenorrhea, education about menstruation, and frequency of menstrual cycle were identified as important factors in the development of dysmenorrhea ( $p < .05$ ). The mean general comfort score for students with dysmenorrhea ( $2.57 \pm 0.25$ ) was lower than that of students without the condition ( $2.65 \pm 0.23$ ). Also, use of the methods for management of dysmenorrhea was found to increase students' general comfort levels. Therefore, it is important for nurses to educate and advise adolescents and young women about dysmenorrhea.

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## BACKGROUND

Dysmenorrhea is defined as painful menstruation (Ozerdogan, Sayiner, Ayranci, Unsal, & Giray, 2009). The majority of adolescents and young women of reproductive age experience painful menstruation on a periodic basis (Polat et al., 2009).

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Dysmenorrhea is the most common gynecologic disorder among menstruating adolescents and young women (Seven, Güvenç, Akyüz, & Eski, 2013; Potur Coşkuner & Kömürcü, 2013). Although lower abdominal cramping is a common menstrual symptom, it may be accompanied by premenstrual irritability, depression, nausea, vomiting, loss of appetite, headaches, backaches, bloating, and diarrhea (Chia et al., 2013; Harel, 2006; Ju, Jones, & Mishra, 2014). Symptoms usually occur just before and/or during menstruation, and may last for 1-3 days (Ortiz, Ranger-Flores, Carrillo-Alarcon, & Veras-Godoy, 2009; Potur Coşkuner, Bilgin Çıtak, & Kömürcü, 2013; Unsal, Ayranç, Tozun, Arslan, & Cahik, 2010).

Dysmenorrhea is classified as primary (or functional) or secondary (congestive) (Ju et al., 2014). Primary dysmenorrhea is highly prevalent among adolescents and young women (Potur Coşkuner et al., 2013; Chia et al., 2013). It is associated with a normal ovulation cycle and with no underlying pelvic pathologic reason. Primary dysmenorrhea is thought to be induced by the release of prostaglandins into uterine muscle; these prostaglandins induce contractions and pain (Ortiz, 2010). Secondary dysmenorrhea is menstrual pain associated with underlying pelvic pathologic reasons, such as ovarian cysts, endometriosis, or uterine myoma (Unsal et al., 2010).

The prevalence of dysmenorrhea among adolescents and young women has been varied between 64%-93%, depending on the measurement methods used (Potur Coşkuner et al., 2013; Chia et al., 2013). In similar studies from Turkey, the prevalence of dysmenorrhea among female university students was reported between 72.7%-85.7% (Harel, 2006; Unsal et al., 2010; Seven et al., 2013). Prevalence increases in adolescence and decreases with age. A study with Mexican university students reported a dysmenorrhea prevalence of 62.4%. Another recent study of university students reported that dysmenorrhea prevalence is seen in 64% of students in Nigeria, 93% of students in Taiwan and Australia, and 80% of students in Hong Kong (Cheng & Lin, 2011; Parker, Sneddon, & Arbon, 2010; Titilayo, Agunbiade, Banjo, & Lawani, 2009).

Previous studies have shown that many risk factors are related to this gynecologic disorder. These include age at menarche, low or high body mass index, amount of menstrual flow, duration of menstrual flow, frequency of menstrual cycle, family history of dysmenorrhea, oral contraceptive use, smoking, education level, marital status, psychological disturbance, and somatization (Grandi et al., 2012; Ju et al., 2014; Ortiz, 2010). Despite the frequency of dysmenorrhea, most adolescents and young women do not seek

professional medical advice even when symptoms are severe (O'Connell, Davis, & Westhoff, 2006). Therefore, dysmenorrhea symptoms negatively affect the physical, psychosocial, and mental health of this population. It causes important limitations in daily and social activities in young women; reduces their overall comfort and quality of life; increases school absenteeism; and decreases daily scholarly activity (e.g., school success, productivity, lack of concentration in class) (Cheng & Lin, 2011; Grandi et al., 2012; Parker et al., 2010; Seven et al., 2013). Adolescents and young women may not have enough education and understanding about dysmenorrhea and its affecting factors. For this reason, they should be encouraged to seek counseling from health professionals when dysmenorrhea symptoms occur. Nurses' awareness of dysmenorrhea and its affecting factors allows them to increase the general comfort and quality of life of those affected by the condition.

The purpose of this study was to investigate the prevalence and the affecting factors of dysmenorrhea and the effects of the condition on the general comfort level of female university students.

## METHODS

### Sample and Study Design

A cross-sectional design was used to elicit information about prevalence and the affecting factors of dysmenorrhea and its effects on the condition and general comfort level of the students. The research was carried out at the School of Nursing and the School of Physical Therapy and Rehabilitation of Turgut Ozal University between October and November 2013. This study has not been made the method of sample selection. The population of female students studying at the university was 240. In all, 200 students agreed to participate in the research. Five students did not agree to participate. Thirty-five were disregarded from analysis because of incomplete data.

### Data Collection Instruments

For data collection, we used a 23-item interview questionnaire, a visual analog scale (VAS) and the General Comfort Questionnaire (GCQ). The interview questionnaire was structured by the researchers after investigation of the previous studies in the literature and determined the menstrual factors (age at menarche, length of menstrual cycle, duration of menstrual flow, knowledge about menstruation), dysmenorrhea characteristics (pain with menstruation, frequency and severity of dysmenorrhea symptoms, family history of dysmenorrhea), use of oral contraception, use of drugs such as analgesics, consultation with a physician,

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