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## Reducing menopausal symptoms for women during menopause using group education in a primary health care setting: a randomized controlled trial

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**Background:** Women's physical and mental health shows a marked increase during menopause between 45-55 years. Mental illness and somatic symptoms are common causes of long terms sick leave and a common course to visit Primary Health Care (PHC). Women suffer lack of knowledge about the transition around menopause and its associated symptoms.

**Aim:** The aim of this study was to investigate if group education to women in PHC about the transition around menopause can improve their physical and mental ill-health and health during menopause.

**Method:** This randomized controlled study was conducted in PHC. A total of 131 women were randomized to group education or no intervention. The group intervention included two education sessions with topics related to menopause. They answered two questionnaires at baseline and at the four-month follow-up; the Menopause Rating Scale (MRS) and the Montgomery-Asberg Depression Rating Scale (MADRS).

**Intervention:** The group intervention was supervised by a district nurse and a midwife at each session. The first session included the topics: general facts and myths and about menopause, the menstrual cycle, sweating and hot flushes, osteoporosis, local estrogen deficiency symptoms including for example bladder problems and vaginal dryness. The second session included the topics: risk factors for cardiovascular diseases during menopause, mental health, stress, sleeping problems, relationship, sexual health and desire.

**Results & Conclusion:** Change in MRS and MADRS for four months. The intervention group experienced a slight reduction in symptoms while the control group mostly experienced the opposite. This study showed that it was feasible and practical to arrange group discussions around the topic menopausal symptoms for women aged 45-55 years. Women in the age group 45-55 were very receptive and interested in participating. The education could easily be as part of health promoting activity in PHC that has a responsibility for preventative health intervention.

## Biography

Lena Rindner is a PhD Student and a District Nurse from Sweden. Her expertise area is Women's Health during menopause as well as dementia investigations. She has experience of teaching in mental health, child health, the puberty, women's health, dementia and senior health. On care, she has a holistic approach and person-centered view and wants to prevent and improve the health and wellbeing. She built the menopause transition education model after long years of experience of work in Primary Health Care. She has evaluated a group education that addressed topics related to the "menopause transition" and women's health during menopause.

Notes:			