

THE EFFECTIVENESS OF YOGA IN DECREASING MENOPAUSAL SYNDROME COMPLAINTS TO IMPROVE QUALITY LIFE FOR MENOPAUSAL WOMEN AT MEDAN JOHOR PUBLIC HEALTH CENTER 2020

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ABSTRACT

Background Menopause causes changes ovarian function which is automatically affect to hormone production that can cause of various complaints. The increases of the number of elderly women will cause its own problems, that is the appearance of complaints during menopause that can affect to health. It causes discomfort and sometimes causes disruption in daily work, so it can affect for quality of life menopausal women. Yoga is one of effort to unites physical and physical strength to stimulate an increase in beta endorpine production to reduce complaints due to menopause.

Objective This research aims to determine whether yoga is effective in reducing complaints of menopause syndrome.

Methods This research used a quasi-experiment design and pretest and posttest one group. Interventions were given to menopausal women at Public Health Center of Medan Johor from June to September. The respondents were 89 menopausal women using purposive sampling technique. The Primary data collection is obtained from respondents directly with a questionnaire guideliness. The Complaints about menopause both physics and psychological, were assessed using a menopause syndrome research instrument questionnaire adopted from the Menopause Rating Scale (MRS).

Results The results showed the mean pre test was 24.15 with SD 5.193, the mean post test was 10.20 with SD 4.093, it's mean there was a differences of average before and after getting yoga. The results of the paired sample t-test obtained P-Value of 0.000,

Conclusion that means yoga is effective in reducing complaints of menopausal syndrome to improve the quality life of menopausal women.

Keywords Menopause, Menopause syndrome, Yoga, Quality of life

INTRODUCTION

Reproductive health issues do not only cover women's reproductive health in a narrow manner by only linking to problems of pregnancy and childbirth, but various kinds of problems in the reproductive health of adult women which are the focus of reproductive problems itself (Manuaba, 2012).

One of the development goals in Indonesia is to improve the public health status. In order to achieve these goals, various programs have been launched by the government as an effort to deal with existing health problems, Yanti (2015). The demographic survey in 2017 stated that many adult women have experienced changes in the number of life expectancy (UHH) > 60 years which has

increased rapidly, it can be estimated that Indonesia's population in 2020 will reach 28.8 million people or around 11% of the total population of Indonesia. In 2021 it is estimated that the population will reach 30.1 million people, which is the 4th in the world after China, India, the United States, and by 2050 it is estimated to be 50 Million People.

The projection of Indonesia's population based on the results of the population census in 2017 is 261890.90 people, population of North Sumatra 2191140.00 people, Total female population aged 45-59 years is 1,035,350 people, the emergence of several diseases is often experienced by Premenepausal women starting from an increase in cardiovascular disorders 20.30%,

Increased Vessels 41.70%, Insomnia 12.60%, Anxiety (Mental Disorders) 23.55%, to Osteoporosis 62.40% which is the impact of life problems for Elderly Women (Premenopause).

In Putri's research, et al (2014), menopause is a period that causes some women to experience physical and psychological disorders and can affect their daily activities and their quality of life. According to Greenblum, Rowe and Neff (2012), in a study by Syarifah, et al. (2014), said that when women experience menopause can affect the quality of his life. More than 80% of women show symptoms physically or psychologically at the time of approaching menopause with various levels of disturbances and disruptions to their lives.

The climacterium is an intermediate period between the reproductive period and the senium accompanied by characteristic symptoms caused by extreme hormonal changes. As a result of this condition, there are physical changes accompanied by several psychological disorders, so that it requires the right handlers, Yanti (2015).

Physical changes felt by menopausal women due to decreased estrogen and progesterone hormones are changes in menstrual patterns where bleeding will appear for several months and will eventually stop altogether, hot flush, these symptoms will be felt starting from the face to the rest of the body, feeling hot accompanied by a reddish color on the skin and sweating, this hot feeling will affect the sleep patterns of menopausal women which will eventually making menopausal women sleep deprived and exhausted. Hot flush is experienced by about 75% of menopausal women and will be experienced for 1 year and 25-50% of women will experience hot flush for 5 years. Hot flush can also affect menopausal women to experience night sweats which will make menopausal women feel uncomfortable (Widyastuti, et al, 2010).

Short-term health problems in menopause, including symptoms of vasomotor disorders, hot flus, heavy sweating, heart palpitations, sleep disorders, long-term health problems in

menopause, osteoporosis, due to deficiency of the hormone estrogen so that bones are easily brittle, Irianto (2015). In Kargenti's (2013) study, during the menopause phase there will be several symptoms accompanied by complaints that often make women feel anxious and feel depressed due to significant changes in the hormonal system that cause discomfort.

Premenopause is one of the reproductive health problems in women. More than 80% of women menopause experiences symptoms at menopause and in some will last for several years so that the quality of life will be disturbed. Besides having to be able to adapt to menopausal complaints, the emergence of several diseases is often experienced by menopausal women. From a medical point of view there are 2 of the most important changes that occur at menopause, namely the increased likelihood of heart and blood vessel disease, and loss of minerals and protein in the bones (osteoporosis). The government's efforts in addressing the Constitution 36 Year 2009 Article 138 have been carried out in each health facility. Puskesmas Medan Johor as a health facility in the city of Medan has also carried out several activities that support government efforts in the field of improving public health status. For the elderly community, PROLANIS and posyandu for the elderly are carried out

Materials and Methods

This research was conducted at Puskesmas Medan Johor Jln Karya Jaya, Pangkalan Mansyur, starting from June to September 2020. The purpose of this study was to determine the effectiveness of yoga. Against the Decrease in Complaints of Menopausal Syndrome to Improve the Quality of Life of Menopausal Women in the Work Area of the Medan Johor Health Center in 2020. This type of research is quantitative research with Quasi experimental design and one group pretest and posttest design, namely research conducted to provide yoga to the sample group, giving intervention

carried out for 3 months, measuring complaints of menopause syndrome with the Menopause Rating Scale (MRS). Before the bivariate data was tested with the paired sample t-test, previously the data normality test was carried out. The population in this study were all menopausal women who checked themselves and routinely participated in the Chronic Disease Control Program (PROLANIS) in the work area of the Medan Johor Health Center.

Result

Table 1 Frequency Distribution of Respondent Characteristics in the Work Area of the Medan Johor Health Center in 2020

Characteristics	Amount	
	F	%
1 Age (th)		
< 50	32	35,9
≥ 50	57	64,1
2 Education		
Primary school	7	19,1
Junior high school	4	24,3
Senior high school	59	65,3
College	19	21,3
Parity		
< 2	16	18,0
≥ 2	73	82,0
Occupation		
Work	26	29,2
Not Work	63	70,8
Duration of Menopause		
< 2	33	37,1
≥ 2	56	62,9

Table 1 shows that the majority of respondents with high school education are 59 people (65.3%), the majority with parity ≥ 2 are 73 people (82.0%), the majority are worked as many as 63 people (70.8%), and the majority with menopause duration ≥ 2 years as many as 56 people (62.9%).

Table 2 Data Normality Test

Variabel	Mean	SD	Shapiro-wilk	P-Value	
			Statis tic		
Menopause Syndrome Pre Test	24,15	5,193	0,983	89	0,200
Menopause Syndrome Post Test	10,20	4,093	0,957	89	0,095

Table 2 The results of the normality test of quality of life score data before and after yoga using the Shapiro-Wilk test ($p > 0.05$), it is concluded that the data is normally distributed, then the t-test is carried out. The results of data normality test calculations can be seen in the attachment. For the pre-test value, the mean menopause syndrome was obtained or a mean of 24.15 with SD 5,193. Meanwhile, for the post test, the mean menopause syndrome was obtained, or a mean of 10.20 with SD 4.093.

Table 3 Results of the Analysis of Complaints of Menopausal Syndrome in Menopausal Women Before and After being given Yoga by Using the T-Paired Sample T-Test

Variabel	N	Mean	SD	P-Value
Menopause Syndrome Pre Test	89	24,15	5,193	0,000
Menopause Syndrome Post Test	89	10,20	4,093	

From table 3, the results of the t-test analysis show that the value with $\alpha < 0.05$ ($p\text{-value} = 0.000$). From the results of these statistical tests, it was found that there was a significant difference between the total score of quality of life after yoga and quality of life before yoga. There is a difference

rates between menopause syndrome before yoga and menopause syndrome after yoga. This means that yoga is effective in reducing menopausal syndrome complaints in menopausal women so that it can improve the quality of life for menopausal women. For the pre-test value, the mean menopause syndrome.

Discussion

The results showed that the majority of menopausal women in the work area of the Medan Johor Community Health Center were with age ≥ 50 , namely 57 (64.1%) menopausal women. In terms of education, the majority are with high school education, namely 59 (65.3%) menopausal women, the majority of respondents with parity ≥ 2 are 73 people (82.0%), the majority do not work as many as 63 people (70.8%), and the majority with menopause duration ≥ 2 years as many as 56 people (62.9%).

was obtained, or a mean of 24.15 with SD 5.193. Whereas for the post test, it was obtained an average menopause syndrome or mean 10.20 with SD 4.093 meaning that there was a difference in the average before and after get yoga.

The results of the t-test analysis showed $\alpha < 0.05$ (p-value = 0.000), yoga is effective in helping reduce menopausal syndrome complaints to improve the quality of life for menopausal women. The results of this study are in line with research conducted by Astari (2014) at Puskesmas Sukahaji Majalengka Regency and research conducted by Triyaningsih (2016) shows that there is a relationship between menopause syndrome from a physiological and psychological aspects with quality life of menopausal women, which means that complaints of menopause syndrome are decreasing, the quality of

life for menopausal women is increasing.

In this study, most of the respondents experienced mild and moderate menopause symptoms. Women who experience menopause symptoms in the mild and moderate categories will more easily adapt to the changes that occur so they do not affect the quality of life. The results of this study are in line with the results of research conducted by Rosida, et al., 2017 which states that there is a significant influence between yoga and quality of life related to health, and there is a significant difference between the quality of life scores of menopausal women who do yoga with menopausal women who do not. do yoga.

Women who have been afraid to face the arrival of pre-menopause and menopause. The feeling of burning in the body and sweating that is continuously resolved or at least reduced. By doing yoga, the symptoms that accompany menopausal syndrome can be alleviated. Even yoga is said to improve mental function. From research conducted by several experts, shows the superiority of yoga. This too means showing that physical activity also improves cognitive function by emphasizing proper breathing, rhythmic breathing with body movements, relaxation, and resting the mind, Proverawati (2016).

The yoga posture will help balance the endocrine system, which is controlling hormone production and heart rate. This body position supports weight, helps and prevents osteoporosis. Cooling and breathing during yoga is very good when there are hot flushes coming, helps reduce body heat and night sweats, improves blood circulation and helps oxygen enter cells, and maintains memory by reducing the hormone cortisol, Mulyani (2015).

According to Kargenti (2010) the decline in ovarian function (egg cells) results in a reduction in hormones, especially estrogen and progesterone, in our bodies. This deficiency of the hormone estrogen causes physical and psychological complaints that will affect the quality of life of women. Quality of life is individual perceptions of their functioning in the field of life. If this is not addressed properly, she will feel uncomfortable with the condition that is her nature as a woman. During the menopause phase there will be several symptoms accompanied by complaints that often make women feel anxious and feel depressed due to significant changes in the hormonal system that cause discomfort. Symptoms and complaints that accompany the menopause phase. If menopause is linked to the dimensions of quality of life that have been issued by WHO, it is clear that the quality of life for menopausal women has decreased.

In this study, most menopausal women experienced mild and moderate menopausal symptoms and had a relatively good quality of life. Another case with menopausal women who have severe menopause symptoms actually have a poor quality of life. Women who experience symptoms menopause in the mild and moderate categories will more easily adapt to the changes that occur so that it does not affect the quality of life. When compared with menopausal women with mild menopause symptoms, menopausal women with severe menopausal symptoms admitted that their pain inhibited their activities more often, had less vitality, were less satisfied with the quality of their sleep, and were less satisfied with their ability to work and to carry out daily activities. This may be associated with menopausal symptoms such as insomnia, frequent physical fatigue and

pain in joints, and decreased memory is more common in them. The handling of psychological problems that arise during the menopause phase will be very effective if it is handled with psychological approaches. Yoga is a relaxation technique that is appropriate for menopausal mothers to do because in addition to providing physical benefits, yoga can help provide comfort. for psychics, especially menopausal women who experience various menopausal syndrome complaints, Proverawati (2016).

According to the authors' assumptions, menopause symptoms and quality of life for menopausal women are closely related concepts. The severity of menopausal symptoms experienced by menopausal women will have an impact on the quality of life. Menopause is a life process that cannot be avoided but also not to be feared / worried about its presence. Likewise, in a mental condition that is unstable and turbulent, the individual needs help psychologically. to restore their self-confidence, straighten their way of thinking, point of view and how they feel so that they return to being realistic, able to see the real reality and able to solve the problem in ways that can be accounted for.

To reduce complaints of menopause syndrome or even eliminate these complaints, it is necessary to apply yoga as a positive hobby and be applied regularly. In addition, providing proper preparation and positive thinking will enable women to face productive menopause (Romauli, 2017).

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