



The Impact of Yoga Therapy on Menopausal Symptoms: A Comparative Study Between Women from Nuclear and Joint Families

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ABSTRACT

Menopause is a natural biological process which is an end of a woman's menstrual cycle, typically occurring between the ages of 45 and 55. This phase is characterized by hormonal changes, mainly a decrease in estrogen, leading to various psycho-physiological symptoms that significantly impact a woman's quality of life. Yoga has been shown to be an effective and safe approach to managing these symptoms. Yogic interventions are especially beneficial for improving women's health during menopause. The present study aims to compare the effects of yogic intervention on menopausal symptoms among women from nuclear family and joint family, as they face different atmosphere so challenges during this phase. Nuclear family's women may lack the extended support network that joint families offer. This can lead to feelings of loneliness or isolation, which can worsen symptoms like depression or anxiety during menopause also may experience "empty nest syndrome", which can exacerbate menopausal symptoms. Women in joint families often shoulder multiple roles, including care-giving for elderly relatives, managing household tasks, and maintaining family harmony. This added stress can exacerbate menopause symptoms like mood swings, anxiety, and sleep disturbances. In both cases, yoga offers a holistic, integrated approach to help women cope with these challenges and improve their mental, physical, and cognitive health. A range of yogic practices, including asanas, pranayama, breathing exercises, relaxation, and meditation, were selected to suit the menopausal age group. These practices were provided to participants over 90 days, with three sessions per week, each lasting 60 minutes. The Menopause Rating Scale was used to assess the severity of symptoms before and after the intervention.

In this present study, the data shows the effectiveness of an intervention on menopausal symptoms within the groups of nuclear family women and joint family women. Each groups consisted of 50 participants. Paired t-test was conducted on this variable (MRS). Menopause rating scale of nuclear family Women (t-value 2.88 and P-value 0.05) and Menopause Rating Scale of joint family women (t- 2.43 and p-value 0.01). Comparatively nuclear family group showed a stronger and more statistically significant reduction in menopausal symptoms than joint family group. It means that factors such as atmosphere of the family, life style, time availability, management of multiple responsibilities and stress levels could influence the effectiveness of the intervention. Intervention showed significant reduction in menopausal symptoms measured within the group. But, the results revealed statistically not significant when compared means of nuclear family's women and joint family's. Before intervention, the mean scores for nuclear family (26.14) and joint family (25.30) were having very slight difference, with a t-value of 0.53 and $p > 0.05$ indicating no statistically significant different. Post-intervention, both groups showed a decrease in menopausal symptoms. nuclear family women having a mean of 21.16 and joint family 22.38, but the results remained minimal and statistically significant. These results demonstrate that the yogic intervention was equally effective for both groups.

The statistical analysis of the results of within these groups suggests that, the Yogic intervention has significant effect on menopausal symptoms on groups, nuclear family and joint family women. Nuclear family's women experienced more pronounced and statistically significant reduction in menopausal symptoms compared to joint family women. It means that factors such as atmosphere of the family, life style, time availability, management of multiple responsibilities and stress levels could influence the effectiveness of the intervention. The comparison between the two groups showed no significant difference in the effectiveness of the intervention, as both pre and post intervention results demonstrated minimal and no significant differences. With similar reduction in symptoms observed in both groups suggests that, the intervention was effective for irrespective of all backgrounds of women whoever is experiencing menopausal symptoms. Further long term intervention with large group may reassert the results.

INTRODUCTION

Yoga is as old as Vedas. It has been in practice for many thousands of years particularly in Bharat. Now Yoga has become popular all over the world. Yoga is a way of life and science of living. Yoga should be looked at, as a pure science, which is aimed at improving health by maintaining the harmony at physical, mental, social, intellectual and spiritual level. Yoga is also getting popular in the treatment and precaution of various ailments. Physicians all over the world are accepting the effects of stress on the human body and various diseases. In addition to routine medical and surgical treatments, counseling is becoming a routine practice. Counseling helps an individual in understanding the real nature of the disease and helps him in improving the lifestyle. Irrespective of age and gender yoga can be practiced by all without any excuses. It can be only understood by practicing it. In various stages of life old age is one of the challenging phases of life, where an individual may experience physical and mental challenges, many adjustments. One who

practice Yoga in old age, gains not only health and happiness but also freshness of mind, since Yoga gives one a bright outlook on life and one can look forward to a happy future rather than looking back into the past which has already entered into darkness. The loneliness and the nervousness which creates sadness and sorrow are destroyed by Yoga as a new life begins.

Yoga is a Holistic approach because it addresses the whole personality of an individual- Physical, Mental, social and spiritual – rather than just focusing on one aspect of health or wellness. Yoga plays a vital role in present day life for many reasons – stress relief, physical health, mental clarity and focus, emotional balance, energy and vitality, sleep quality, social well being, prevention and longevity and Mind-body connection.

Menopause:

Women go through various phases of life; every phase gives unique experiences, challenges and transitions. These phases often cover from childhood to old age, and each phase brings with it own set of physical, emotional, and psychological changes. The transitions and changes that women experience provide lifelong journey of personal development, strength, and self-discovery.

The main transitions in women's life:

- Puberty: The transition from childhood to adolescence.
- Reproductive years: The time between early adulthood and midlife, when women are at their most fertile.
- Menopause: End of fertility.

Menopause is a natural biological process that symbols the end of a woman's menstrual cycles and fertility. It is officially diagnosed when a woman has not had a menstrual period for 12 consecutive months, without any other obvious medical cause. This phase is typically observed between the ages of 45 and 55, though it can happen earlier or later. It is a part of the normal aging process and signifies the cessation of ovarian function, which leads to a decrease in the production of hormones such as estrogen and progesterone. These hormonal changes bring about various physical, emotional, and psychological changes in a woman's body.

Various stages of Menopause:

Menopause is a slow process that naturally occurs in three phases:

- **Peri-menopause:** This phase can begin several years before menopause (usually in the 40s) and is characterized by fluctuating hormone levels, leading to irregular periods, hot flashes, mood changes, sleep disturbances, and other symptoms.
- **Menopause:** This phase occurs when a woman has gone 12 months without a menstrual period. The ovaries stop releasing eggs, and estrogen and progesterone levels decline significantly, leading to the cessation of menstruation.
- **Post-menopause:** This stage starts after a woman has gone through menopause and continues for the rest of her life. Many menopause symptoms may ease during this phase, but the long-term effects of lower estrogen levels, such as bone density loss and heart disease risk, becomes more significant.

Symptoms of Menopause

The symptoms of menopause can vary generally between individuals but are commonly attributed to the decrease in estrogen levels. These include:

- **Hot flashes:** Sudden feelings of warmth often accompanied by sweating and flushed skin.
- **Night sweats:** Hot flashes that occur during sleep, leading to disturbed rest.
- **Irregular periods:** Changes in the frequency, duration, and flow of menstruation during perimenopause.
- **Vaginal dryness:** Lower estrogen levels can cause thinning of the vaginal walls, leading to dryness, irritation, and discomfort during intercourse.
- **Sleep disturbances:** Difficulty falling or staying asleep, often due to night sweats or anxiety.
- **Mood changes:** Many women report increased irritability, anxiety, or feelings of sadness during menopause.
- **Memory and concentration issues:** Sometimes referred to as "brain fog," these changes are often due to hormonal shifts.

Physical and Emotional Changes

- **Physical Changes:** Along with the symptoms mentioned above, menopause also affects women's physical health in other ways. The reduction in estrogen levels contributes to a decrease in bone density, increasing the risk of osteoporosis. There is also a higher risk for cardiovascular disease, as estrogen plays a role in maintaining healthy cholesterol levels.
- **Emotional Changes:** Menopause can bring about emotional challenges, such as depression, anxiety, and mood swings. The physical symptoms, hormonal fluctuations, and societal pressures around aging can impact a woman's mental health.

Management of Menopause

While menopause is a natural life stage, its symptoms can be challenging. Several approaches are available to help manage the symptoms:

- **Hormone Replacement Therapy (HRT):** One of the most common treatments for menopausal symptoms, HRT involves replacing estrogen (and sometimes progesterone) to alleviate symptoms like hot flashes and vaginal dryness.
- 1. **Lifestyle Changes:** Regular exercise, a balanced diet, stress management techniques (like yoga and meditation), and staying hydrated can help alleviate symptoms and maintain overall health.
- 2. **Non-Hormonal Medications:** For women who cannot or choose not to use hormone replacement therapy, other medications, such as selective serotonin reuptake inhibitors (SSRIs) or gabapentin, may be prescribed to manage mood swings, hot flashes, and sleep disturbances.
- 3. **Herbal and Natural Remedies:** Some women seek relief from symptoms through herbal treatments or acupuncture, though it's important to consult a healthcare provider before trying these remedies.

Impact of Menopause on Women's Health

Beyond immediate symptoms, menopause can have a long-term impact on women's health:

- **Bone Health:** Estrogen helps maintain bone density, and its decline during menopause can lead to osteoporosis. Women are encouraged to focus on bone-strengthening activities (like weight-bearing exercises) and adequate calcium and vitamin D intake to maintain bone health.
- **Heart Health:** The drop in estrogen is associated with an increased risk of heart disease. Menopause can cause changes in cholesterol levels, raising the risk of cardiovascular problems. A heart-healthy diet, regular exercise, and stress management are essential preventive measures.

Though menopause is a significant transition in a woman's life, bringing both physical and emotional changes and signifies the end of fertility, it also offers an opportunity for women to focus on health, self-care, and personal growth. Understanding the stages, symptoms, and potential long-term effects of menopause is crucial for women to manage this transition effectively. Medical treatments, lifestyle changes, and emotional support can help ease the symptoms and reduce the risks associated with this natural process.

Women in both joint and nuclear families face unique challenges, especially during the menopause phase. These challenges can influence their physical and emotional well-being, including the experience of menopause.

Challenges Faced by Women in Joint Families:

- **High Expectations and Responsibilities:** Women in joint families often shoulder multiple roles, including care-giving for elderly relatives, managing household tasks, and maintaining family harmony. This added stress can exacerbate menopause symptoms like mood swings, anxiety, and sleep disturbances.
- **Limited Personal Space:** In joint families, personal space and privacy can be limited, which may contribute to stress and emotional strain during menopause. The pressure to meet everyone's expectations can increase feelings of overwhelm.
- **Lack of Emotional Support:** While joint families may provide physical support, emotional support can be fragmented or difficult to access, especially if there are generational or relational tensions. This can make menopause, a time of emotional vulnerability, more challenging.

Challenges Faced by Women in Nuclear Families:

- **Isolation:** In nuclear families, women may lack the extended support network that joint families offer. This can lead to feelings of loneliness or isolation, which can worsen symptoms like depression or anxiety during menopause.
- **Balancing Career and Home Life:** Many women in nuclear families are balancing professional responsibilities with household tasks. This dual burden can increase stress and make managing menopause symptoms, such as fatigue and mood changes, more difficult.
- **Lack of Shared Care-giving:** Unlike joint families where responsibilities can be shared, women in nuclear families may be the primary caregivers for children and elderly relatives, which can intensify menopause-related stress.

Effect on Menopause:

- **In Joint Families:** The increased stress, lack of privacy, and high expectations can make menopausal symptoms such as hot flashes, sleep disturbances, and mood swings more intense.
- **In Nuclear Families:** The isolation and pressure of managing all responsibilities alone may lead to emotional distress, affecting the mental health aspect of menopause, such as feelings of sadness, depression, and anxiety.

In both family structures, women may face heightened stress during menopause, but the way they manage it depends on their available support systems, whether in the form of extended family or self-reliance.

Yoga for women:

In the current world, women face a unique set of challenges, and yoga can play an essential role in addressing various challenges. Modern women often juggle multiple roles and responsibilities, which can lead to physical, mental, and emotional strain.

Present-Day Life of Women

➤ **Balancing Multiple Roles:**

- **Career and Professional Life:** Many women today are working full-time or managing careers while also maintaining family responsibilities. The pressure to excel in both professional and personal spheres can lead to significant stress and exhaustion.
- **Parenting and Family Care:** Women are often expected to take the lead in raising children and caring for family members. This responsibility can leave little time for self-care, leading to physical exhaustion and emotional strain.

➤ **Health and Wellness:**

- **Chronic Stress and Anxiety:** The demands of daily life, work-related pressures, and societal expectations can contribute to high stress levels. Women are more prone to anxiety, depression, and burnout due to these stressors.
- **Hormonal Changes:** Women's bodies undergo major hormonal changes through various life stages such as menstruation, pregnancy, childbirth, and menopause. These fluctuations can impact mood, energy levels, and overall well-being.
- **Body Image Issues:** Women are often confronted with unrealistic beauty standards, leading to body image concerns and self-esteem challenges.

Importance of Yoga for Present-Day Women

Yoga addresses these challenges by offering physical, mental and intellectual benefits that are particularly relevant to women's modern lives.

➤ **Stress Management**

- **Stress Reduction:** Yoga is one of the most effective ways to manage stress. Practices like pranayama, meditation, and chantings activate the parasympathetic nervous system, helping to lower cortisol levels and generate relaxation. This is crucial for women facing the stress of balancing work, family, and social expectations.
- **Calm and Focus:** Yoga encourages mindfulness and staying present in the moment. It helps women develop a sense of mental clarity, which can reduce overwhelm and improve focus in daily tasks. This mental clarity is essential for making better decisions and managing the complexities of life with a calm mind.

2. Physical Health

- **Strengthening the Body:** Yoga postures (asanas) help strengthen and tone the body. Many women suffer from back pain, poor posture, and muscle weakness due to sedentary lifestyles, post partum pregnancy and menopause. Regular yoga practice helps counteract these issues by improving posture, increasing flexibility, and building muscle strength.
- **Hormonal Balance:** Certain yoga poses and practices help regulate the endocrine system, which is essential for balancing hormones. Yoga can alleviate symptoms of PMS, menopause, and hormonal imbalances by enhancing circulation, reducing stress, and promoting overall wellness.

3. Mental Health

- **Emotional Balance:** Yoga encourages women to connect with their emotions and practice self-compassion. In a world where women are often expected to put others first, yoga provides a space to nurture themselves. This emotional awareness and acceptance help women cope with the pressures and challenges of daily life.
- **Boosting Self-Esteem:** Yoga fosters a positive body-mind connection, allowing women to embrace their bodies as they are. This self-acceptance can counteract negative body image issues and the societal pressures women face regarding appearance.
- **Resilience:** The practice of yoga teaches resilience—mentally, emotionally, and physically. By learning to focus on breath, persevere through challenging poses, and develop patience, women can build inner strength and cope with the ups and downs of life.

4. Empowerment and Self-Care

- **Time for Self-Care:** In the hustle of balancing work, family, and social obligations, women often neglect their own needs. Yoga provides dedicated time for self-care, helping women recharge physically and mentally. It empowers them to prioritize their well-being and maintain a healthy lifestyle.
- **Self-Discovery:** Yoga allows women to connect with them on a deeper level. Through practices like meditation and mindful movement, women can develop a greater sense of inner peace, self-awareness, and purpose. This sense of connection helps them approach life with a clearer, more grounded perspective.

5. Pregnancy and Postpartum Health

- **Prenatal Yoga:** For pregnant women, yoga helps alleviate common discomforts such as back pain, swelling, and tension. It also prepares the body for childbirth by enhancing flexibility, strengthening muscles, and promoting relaxation. Prenatal yoga provides a supportive environment for women to connect with their bodies and their babies.
- **Postpartum Recovery:** After childbirth, yoga helps women recover physically and emotionally. It strengthens the pelvic floor, improves core strength, and helps tone muscles that may have weakened during pregnancy. Postpartum yoga also supports mental health by reducing stress and promoting relaxation, which is crucial during the often-tiring phase of motherhood.

6. Longevity and Preventive Health

- **Chronic Condition Prevention:** Women are at risk of chronic conditions such as osteoporosis, heart disease, and joint pain as they age. Yoga helps prevent these conditions by improving bone density, cardiovascular health, and joint mobility.
- **Promoting Long-Term Wellness:** Regular yoga practice supports a balanced lifestyle by enhancing digestion, boosting immunity, and improving cardiovascular health. It promotes longevity by addressing both physical and mental health needs, helping women live healthier, more active lives as they age.

7. Spiritual Growth and Personal Development

- **Inner Peace and Connection:** Yoga offers a pathway for spiritual growth and personal development. It provides a sanctuary for women to slow down, reflect, and connect with their deeper selves. In the fast-paced, often stressful modern world, yoga helps women reconnect with their inner peace and sense of purpose.
- **Empowerment through Mindfulness:** Yoga encourages mindfulness, which leads to greater self-awareness and emotional intelligence. As women learn to tune in to their inner thoughts and feelings, they gain confidence, clarity, and a deeper sense of empowerment.

Methodology

Objectives:

To compare the effect of Yogic Intervention on Menopausal symptoms among women from Nuclear families and joint families.

Study Design:

This study was conducted with two group's pre-post design to compare the impact of Yogic intervention on menopausal symptoms among women from Nuclear families and joint families.

Sampling:

Convenience sampling method was used to select the sample. Participants were selected according to their availability; sample was selected from nearby apartments, communities and Hospitals.

Sample Size:

The sample size (N) for the study was 100

Joint Family 50

Nuclear Family 50

Selection Criteria:

Inclusion Criteria:

1. Women aged 45-60yrs, who are experiencing menopausal symptoms.
2. Women who are suffering from various menopause psycho-physiological symptoms.
3. Women who were able to attend regular Yoga sessions.
4. Women who were voluntarily in the study.

Exclusion Criteria:

1. Women who were having chronic medical conditions.
2. Women with psychological disorders.
3. Who were undergoing HRT or recent HRT.

4. Who were unable to attend regular Yoga sessions were excluded.
5. Severe insomnia.
6. Women who had substance addiction.

Variables:

Menopause Rating Scale was used as dependent variable and Yogic Intervention was used as an independent variable.

Dependant Variable:

Various psycho-physiological symptoms of menopause were used to assess the impact of intervention.

Independent Variables:

Specifically designed Yoga practices – Asana, Pranayama, relaxations, meditation and chantings were used as dependant variables.

Tools:

Menopause Rating Scale offer a comprehensive approach in measuring the various dimensions of menopausal symptoms, severity of symptoms and overall impact on a quality of life of a women.

Menopause Rating Scale:

Menopause Rating Scale developed by a team of researchers who are guided by Dr. Heinemann and in the early 1990s. The Menopause Rating Scale is a widely recognized and validated tool used to assess the severity of Menopause symptoms. Developed to provide a comprehensive overview of the physical, psychological, and Urogenital symptoms associated with menopause, the MRS helps in evaluating the impact of menopause on a woman's Quality of life.

The scale consists of 21 items, which are grouped into three distinct domains:

1. **Somatic Symptoms (Physical Symptoms)**
2. **Psychological Symptoms**
3. **Urogenital Symptoms**

Scoring and Interpretation:

- Each item is rated on a scale from **0 to 4**, where **0 = no symptoms**, **1 = mild symptoms**, **2 = moderate symptoms**, **3 = severe symptoms**, and **4 = very severe symptoms**.
- The total score is obtained by adding up the scores for each item. Higher scores indicate greater severity of menopausal symptoms. The total score provides an overall measure of symptom severity, allowing for comparisons before and after an intervention.

Procedure

To collect the data permission has taken from various Women's hospitals and health care canters then consent has taken from the participants. After establishing the bond with participants, questionnaire was administered with instructions as per manual of the questionnaire. After completion of pre-test each participant has given Yoga sessions for 3 months as per yogic intervention module. After completion of yogic intervention, again same questionnaire was administrated. After completion of the data collection responses of each respondent, scoring of each questionnaire was done as per the scoring key of manual.

Statistical Analysis:

To assess the data, paired t-test was used, which is suitable for this study design.

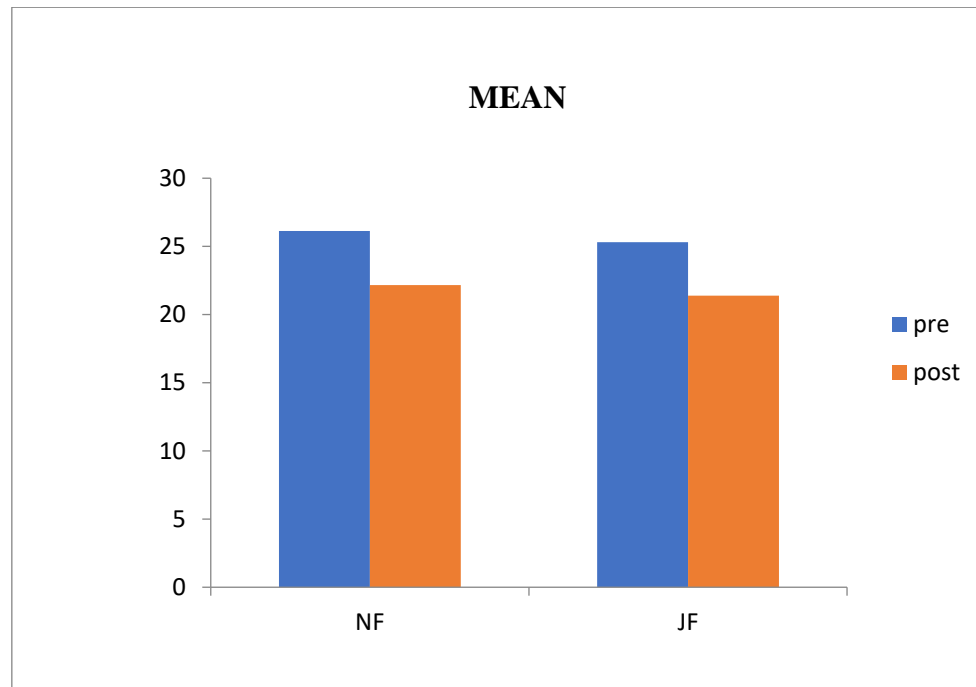
Results:

Within the groups of Women of nuclear family and joint family:

Group	N	Pre-Mean	Pre-SD	Post- mean	Post-SD	t	Level of significance
NF	50	26.14	7.26	22.16	6.51	2.88	0.004
JF	50	25.30	8.30	21.38	7.81	2.43	0.016

In the within-group comparison, both the Nuclear Family women (NF) and Joint Family women (JF) groups show a significant reduction in menopausal symptoms from pre-mean to post-mean. For the NF group, the pre-intervention mean was 26.14 (SD = 7.26), and after the intervention, the mean decreased to 22.16 (SD = 6.51). The t-value of 2.88 with a p-value of 0.004 ($p < 0.05$) indicates a statistically significant reduction, suggesting that the intervention had a meaningful impact within this group. Similarly, in the JF group, the pre-intervention mean was 25.30 (SD = 8.30), which decreased to 21.38 (SD = 7.81) post-intervention. The t-value of 2.43 with a p-value of 0.016 ($p < 0.05$) also shows a significant decrease, indicating that the treatment was effective for the JF group as well. Comparatively, the NF group shows a slightly greater statistical significance than the JF group, as the p-value for the NF group is smaller than that of the JF group, this suggests that the intervention had a slightly more pronounced effect on the NF group, indicating a stronger significance in the change observed. Overall, both groups experienced a significant change, demonstrating that the intervention had a positive effect within groups, with $p < 0.05$ in both cases.

Figure showing means scores of pre and post yogic intervention on Menopause symptoms within the groups of Nuclear family women and joint family women

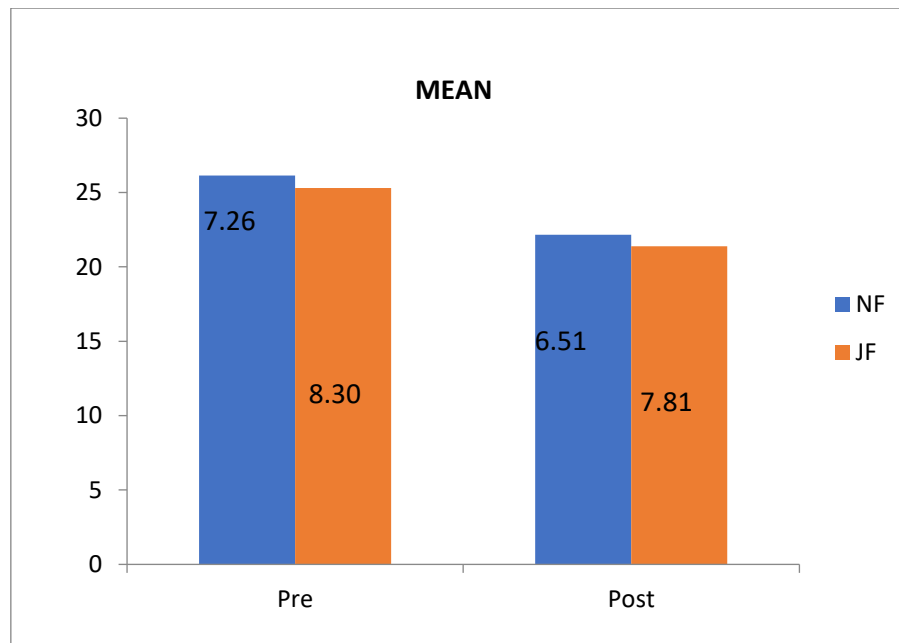


Difference between the groups:

Group	N	NF Mean	NF SD	JF Mean	JF SD	t	Level of significance
Pre	50	26.14	7.26	25.30	8.30	0.53	0.59
Post	50	22.16	6.51	21.38	7.81	0.54	0.58

The data shows no significant difference in the reduction of menopausal symptoms between Nuclear family women and joint family women before and after the Yogic Intervention. Before intervention, the mean scores for nuclear family women (26.14) and joint family women (25.30) were very slight difference, with a t-value of 0.53 and $p > 0.05$ indicating no statistically significant different. Post-intervention, both groups showed a decrease in menopausal symptoms. Nuclear family Women having a mean of 22.16 and joint family women 21.38, but the results remained minimal and statistically significant. These results demonstrate that the yogic intervention was equally effective for both groups.

Figure showing differences in means scores of pre and post yogic intervention on Menopause symptoms among nuclear family women and joint family women



Discussion:

The aim of the present study was to compare the impact of Yogic Intervention on menopausal symptoms within the groups of nuclear family women and joint family women and differences between the groups. Within the groups, the data indicates that both groups experienced a reduction in menopausal symptoms after the intervention, as measured by the Menopause Rating Scale. But, the statistical results show more significant effect in the nuclear family women compared to the joint family Women. Joint family Women group shows borderline significant with a p-value ($p \leq 0.05$). Nuclear family women group showed a higher significance with the p-value of 0.01. This indicates stronger and more statistically significant reduction in menopausal symptoms among nuclear family women. Hence, the results show that the intervention was more effective for nuclear family women, compared to the joint family Women where effect was less pronounced.

Between the groups, the data shows lack of significant difference between nuclear and joint family women in response to the Yogic intervention. It explains that, the base-line menopausal symptoms in both groups are similar by comparing pre-intervention mean scores. In spite of both groups showing a reduction in post-intervention symptoms, the difference in their mean scores remained minimal and statistically not significant, as reflected in the t-values which are 0.53 for pre-intervention and 0.54 for post-intervention and $p = 0.59$ and 0.58 respectively. This suggests that the intervention had a similar effect on nuclear and joint family women.

Conclusion

The statistical analysis of the results of within these groups of nuclear and joint family women suggest that, the Yogic intervention has significant effect on menopausal symptoms on both groups, nuclear family and joint family. However, the comparison between the two groups showed no significant difference in the effectiveness of the intervention, as both pre and post intervention results demonstrated minimal and no significant differences. With similar reduction in symptoms observed in both groups suggests that, the intervention was effective for irrespective of any back ground women whoever is experiencing menopausal symptoms. Further long term intervention with large group may reassert the results.

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