

MANAGEMENT OF STRESS AND CLIMACTERIC SYMPTOMS IN PERI- AND POSTMENOPAUSAL GREEK WOMEN

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Introduction

Stress and psychology may affect the climacteric symptoms experienced by women during the menopausal transition and accordingly these in turn may affect stress levels. We assumed, therefore, that by implementing a stress reducing intervention in this population, climacteric symptoms can be managed without medical treatment.

Objective

This study aimed to evaluate the effectiveness of a stress management program to reduce stress and climacteric symptoms in peri- and postmenopausal Greek women.



References

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Materials & Methods

61 peri- and postmenopausal women aged 40-65 years with climacteric and stress symptoms were included. Women were randomly assigned to the intervention group (31) or the control group (30). The intervention group followed an 8-week stress management program on the benefits of regular exercise, healthy diet, relaxation techniques such as diaphragmatic breathing, progressive muscle relaxation, guided visualisation and cognitive restructuring-positive thinking. Cognitive restructuring is a group of therapeutic techniques that help people notice and change their negative thinking patterns, reframing these thoughts in more accurate and helpful ways. The following parameters were assessed at baseline and at the end of the 8-week follow-up period in both groups: Climacteric symptoms (Green Climacteric Scale - GCS) and mood status (Depression Anxiety Stress Scale).

Table 1: Basic demographic data, BMI and menopause duration of the intervention and control group at baseline

Variables	Groups	
	Intervention (N = 31)	Control (N = 30)
Age (yrs)	57.70 (6.89)	56.52 (4.73)
Education (yrs)	4.67 (1.39)	4.52 (1.35)
Body Mass Index	27.87 (4.38)	26.71 (5.48)
Menopause Duration (yrs)	6.80 (1.46)	6.94 (3.07)

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Results & Discussion

A repeated-measure mixed-model ANOVA showed significant time × group interaction on GCS-Psychological symptoms (F = 144.727; p < 0.001), GCS-Physical symptoms (F = 41.233; p < 0.001), GCS-Vasomotor symptoms (F = 62.917; p < 0.001), DASS-Depression (F = 13.249; p = 0.001) and DASS-Stress (F = 9.546; p = 0.003). In the above-mentioned indices, participants in the intervention group had significantly lower scores after the intervention, reflecting significant improvement in their symptoms, whereas no significant changes were detected in the control group.

Figure 1: Show the changes in the mean scores in GCS-Psychological symptoms, GCS-Physical symptoms, GCS-Vasomotor symptoms

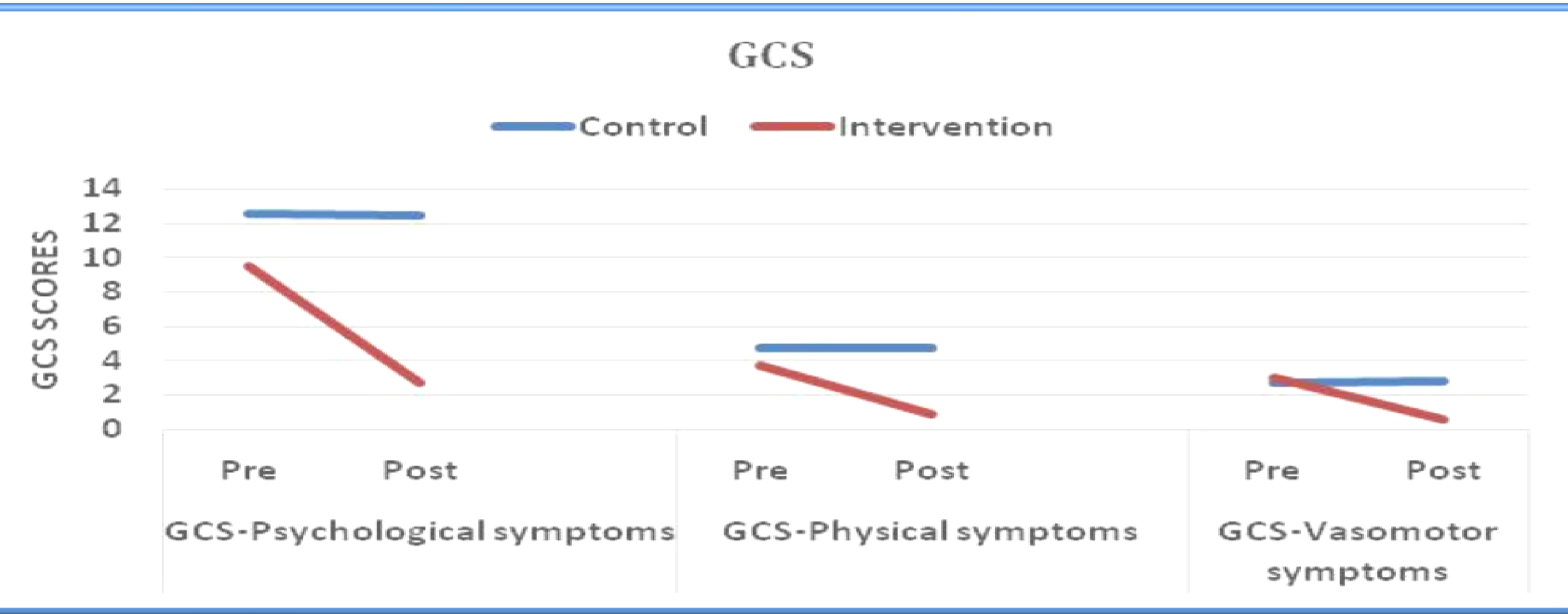
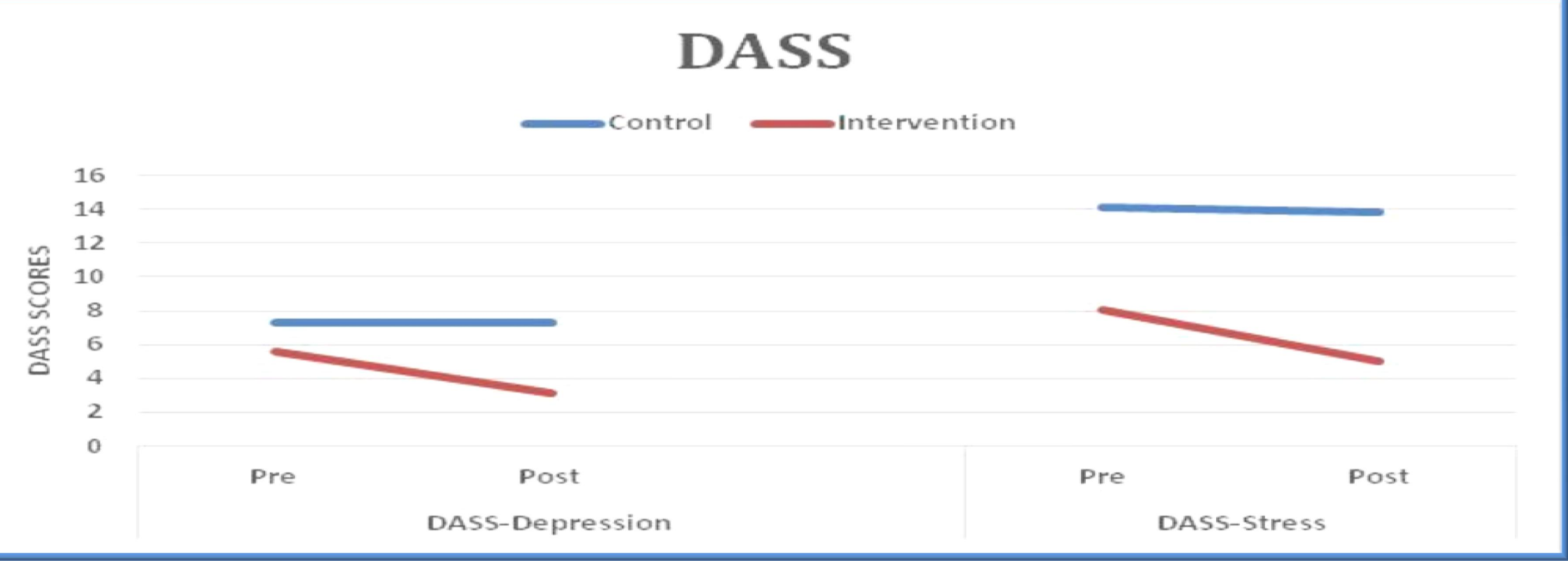


Figure 2: Show the changes in the mean scores in DASS-Depression and DASS-Stress



Conclusions

Stress management offers an alternative non-pharmacological approach to the management of climacteric symptoms and improves postmenopausal women's quality of life.