

Women's mid-life health experiences in urban UK, a factor analysis

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Background - Menopause

- · Individual experiences of menopause vary greatly
- Many symptoms attributed to process of menopause, but difficult to differentiate age-related symptoms from those due to menopause
- The experience also differs across ethnic groups / nationally, indicating that symptoms are influenced by culture
- Complex combination of biological, psychological and cultural factors, so research into a "menopausal syndrome" is undertaken using varied epistemological positions and research frameworks.

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Background - menopause in the UK

- Has been claimed that up to 80% of women experience menopausal symptoms, and 45% of these find the symptoms distressing
- Not clear what exactly these symptoms are; how they differ between ethnic groups; how they relate to aging v. menopause, or how they compare to other regions
- Methodological problems as to how existing data were compiled – bias in questions; most data from Caucasians, and varied methods used.



Background - this survey

- · An attempt to overcome these difficulties
- Understand contemporary women's experience
- Compare variations across ethnic groups in urban UK
- Allow cross-cultural comparisons of symptom prevalence with studies from the US, Canada, Japan and China
- One stage of larger research project exploring potential for integration of East Asian medical treatment strategies for symptoms associated with the menopause into the NHS

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Methods - sampling

- GP lists in Lambeth, Lewisham and Southwark due to ethnic diversity
- Targeted electoral wards using Index of Multiple Deprivation
- Women between 45 55 years old
- · Mailed 1931 booklets; response rate of 58%

Methods – questionnaire

- Self-administered; postal; didn't use "menopause" in the title or in questions; two week recall; "Yes" / "No" response
- Adapted general symptom checklist with "menopauserelated" symptoms embedded – 37 symptoms of which 15 "core" symptoms from the four older studies
- Pre-menopausal = menstruating regularly
- Peri-menopausal = menses irregular over previous year, or menstruated in the past 12 months but not the last 3
- Post-menopausal = no menstruation in last 12 months
- Non-natural menopause = stopped menstruating following surgery, radiotherapy or chemotherapy

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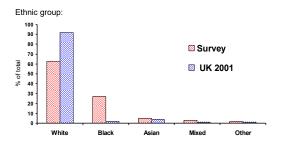
Methods - data analysis

- Basic statistical analysis undertaken using SPSS V.15.0
- For those subjects who had missing responses for only one or two of the 37 symptoms, imputed negative response for these questions
- Exploratory factor analysis using STATA Release 9
- FA applied to menopausal symptom data to detect symptom clusters, and findings used to argue against menopausal syndrome
- FA ideally applied to normally-distributed continuous variables, so inappropriate for binary variables?
- Where binary variables are indicators of underlying continuous variables, can use FA with tetrachoric correlation matrices
- So obtained tetrachoric correlation matrix, then applied factormat using the principal component method (+ varimax rotation with Kaiser normalization)

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Findings - sample

Stage: 29% pre-menopausal; 42% peri-menopausal; 29% post-menopausal (total N = 883)





Findings - Most frequently reported symptoms

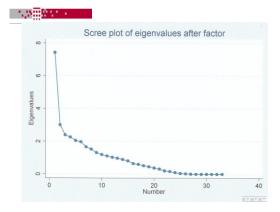
Ques	tion Symptom	N	Prev.
31	Tiredness	880	64.0%
10	Aches or stiffness in the joints	862	52.1%
22	Hot flush and/or sudden sweating	875	47.2%
18	Feeling low or depressed	874	44.4%
9	Headache	862	42.1%
15	Irritability	870	41.5%
14	Insomnia	880	38.9%
8	Backache affecting the lower back	860	38.8%
37	Puffiness anywhere on body	875	35.4%
20	Dry skin or eyes	877	34.5%

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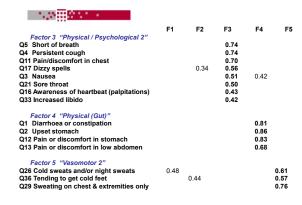
Findings – Least frequently reported symptoms

Question Symptom		N	Prev
24	Hot flush most frequently in daytime	869	20.9%
17	Dizzy spells	874	20.5%
5	Short of breath	862	18.7%
21	Sore throat	872	16.3%
28	Sweating on head only	870	14.7%
11	Pain/discomfort in chest	862	14.7%
3	Nausea	863	12.6%
4	Persistent cough	860	12.4%
29	Sweating on chest & extremities only	868	8.8%
33	Increased libido	870	6.2%

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Findings - other

- No statistically significant variation by ethnicity in hot flushes unlike data from the USA (black women experienced more)
- Insomnia, irritability, and tiredness varied according to ethnicity with the Black ethnic group at lower risk

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Discussion and Conclusion

- London women experience high levels of symptoms
- Patterns of symptoms from this multiethnic group do not permit simple classification



Acknowledgements

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