



Case Study of a Premenopausal Woman with Menstrual Disorders Using Non-Pharmacological Therapy in the Watershed Area of Palangka Raya City in 2024.

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Abstract. Premenopause is a natural process in a woman's life. In addition to menstrual cycle disturbances, it indeed causes symptoms and complaints accompanied by physical and psychological changes. The symptoms that arise from three main components are the decreased activity of the ovaries followed by hormonal deficiency, especially estrogen, which leads to various symptoms and signs before, during, and after menopause. Objective: To provide midwifery care to Mrs. U in premenopause with menstrual disorders in the watershed area of Palangka Raya City. Methodology: The type of research used is descriptive qualitative with a case study approach. Design using field observation. The method of data collection is through interviews and documentation analysis of midwifery care. Data analysis is obtained from case study research by creating a narrative from the results of observations and descriptive analysis of midwifery care, assessment, formulating diagnoses, planning, implementing, and evaluating midwifery care. The research was conducted in August 2024. Result: Mrs. U is willing to try complementary alternative medicine, recommending her to consume foods rich in vitamins A, C, and B as antioxidants, vitamin D for calcium absorption, plant-based foods, and B complex vitamins from fruits such as vegetables, legumes, carrots, spinach, tomatoes, potatoes, cassava leaves, oranges, guavas, and bananas, which are commonly found to aim at reducing complaints occurring during the primenopausal period.

Keywords: Menstrual Disorders, Premenopause, The Watershed Area

1. INTRODUCTION

Premenopause is a natural process in a woman's life. In addition to menstrual cycle disturbances, it indeed causes symptoms and complaints accompanied by physical and psychological changes. The symptoms that arise from three main components are the decreased activity of the ovaries followed by hormonal deficiency, especially estrogen, which leads to various symptoms and signs before, during, and after menopause. The socio-cultural factors determined by the environment of women, and the psychological factors that depend on the character structure of women. Premenopause is the period when the body begins to transition towards menopause. This phase typically lasts for 2-8 years, with an additional year at the end leading up to menopause. Premenopause usually occurs in individuals over the age of 40, but many also experience these changes in their mid-30s [1]. The physical changes that are felt and cause discomfort include hot flashes from the chest upwards, often followed by excessive sweating. Changes and other complaints felt include palpitations, vertigo, migraines, decreased libido, restlessness, irritability, depression, insomnia, feelings of inadequacy, loneliness, fear of violence, impatience, fatigue, osteoporosis, back pain, and others. Data from WHO (2020) (World Health Organization) estimates that each year around 25 women worldwide are expected to experience menopause. Approximately 467 million women aged 50 and above spend their lives in a post-

menopausal state, and 40% of these post-menopausal women live in developing countries, with an average age of menopause at 51 years. According to WHO, in Asia, the number of menopausal women is projected to surge to 107 million by 2025. Based on the Indonesian Demographic Health Survey (SDKI) in 2018 regarding premenopause, there are 4.3 million individuals among the total population of Indonesia, which was around 240-250 million in 2017. In the category of women (AGE 46-49 years), 18% of Indonesian women have experienced premenopause along with all its consequences and impacts. (Depkes RI, 2019). According to the Ministry of Health's statistics in 2019, the population of Indonesia was 268.07 million people. Among them, there were 133.1 million males and 133.4 million females. Of the 133.4 million females, 8.63 million women lived in the premenopausal age [2]. (Kemenkes RI, 2019). On July 22, 2024, at the UPT Puskesmas Pahandut in Palangka Raya City, the author conducted interviews with four mothers, who were on average between 45 and 55 years old. The results showed that the mothers had experienced menstrual disorders with varying cycles and intensities of menstrual flow for each individual. As a result of the menstrual issues they faced, the mothers felt anxious, easily irritated, and stressed [3].

2. METHODS

The type of research used is descriptive qualitative with a case study approach. Meanwhile, the design employs field observational methods. Data collection methods were conducted through interviews and documentation analysis of midwifery care. Data analysis was obtained from case study research by creating a narrative from the results of observations and descriptive analysis of midwifery care, assessment, formulating diagnoses, midwifery assessment, planning, implementing, and evaluating midwifery care. This research and case study were conducted in August 2024 at the UPTD Puskesmas Pahandut in Palangka Raya, where this health center is located not far from the Kahayan River basin in the city of Palangka Raya, and many residents in the health center's area live along the banks of the Kahayan River.

3. RESULTS AND DISCUSSION

The results of the article review can be seen in the table as follows:

Table 1. Article Summary

No	Journal	Title	Purpose	Research Methodology	Results	Reasons for Choosing the Article
1	<p>Writers: Hesti Ariyanti, Ety Apriliana</p> <p>Year of Publication: 2016</p> <p>Country: Indonesia</p> <p>Journal Name: Majory Jurnal</p> <p>Database:</p>	The Influence of Phytoestrogens on Menopausal Symptoms	Menopause is a hypoestrogenic condition resulting from decreased ovarian function. This condition can lead to changes in the system of women undergoing menopause. This leads to complaints such as vasomotor issues, psychological problems, urogenital concerns, increased risk of	Review of the latest journals.	Phytoestrogens have a structure and function similar to endogenous estrogen. Phytoestrogens can bind to estrogen receptors, allowing them to alleviate burning sensations, thicken the endometrium, increase elasticity, lower vaginal pH, enhance bone	The results of the literature review and its discussion can be used in midwifery care for premenopausal women with menstrual disorders.

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osteoporosis, and cardiovascular disorders. The number of women over the age of 50 entering menopause in Indonesia in 2020 is estimated to reach 30.3 million. Management of menopause through hormone therapy. However, the therapy is not recommended for certain patients due to specific conditions..

density, inhibit atherosclerosis, and improve cognitive function.

Table 2. Article Summary

No	Journal	Title	Purpose	Research Methodology	Results	Reasons for Choosing the Article
2	Writers: aniza, dkk Year of Publication: 2018 Country: Indonesia Journal Name: Nursing News Database: Google Scholar	The Relationship Between Stress Levels and Menstrual Cycles in Women Aged 40-50 Years (Premenopause) in Tlogosuryo Village, Tlogomas District, Lowokwaru, Malang.	To determine the relationship between stress levels and the menstrual cycle in women aged 40-50 years (premenopause) in Tlogosuryo village, Lowokwaru district, Malang Regency.	Design an analytical correlation using a cross-sectional approach. The population in this study consists of 107 premenopausal women, with the sample selection using purposive sampling, resulting in a total of 33 research samples. The data collection technique used is a questionnaire. The data analysis method used is Pearson product-moment correlation, utilizing SPSS 17.	Proving that more than half of the 21 respondents (63.6%) have a moderate level of stress and more than half of the 18 respondents (54.5%) experience irregular menstrual cycles, while the results of the Pearson product-moment correlation test showed a p-value of (0.002) < (0.050), it can be concluded that there is a significant relationship between stress levels and menstrual cycles in women aged 40-50 years.	The results of the literature review and its discussion can be used in midwifery care for premenopausal women with menstrual disorders.

Table 3. Article Summary

No	Journal	Title	Purpose	Research Methodology	Results	Reasons for Choosing the Article
3	<p>Writers: Nur Santi, dkk</p> <p>Year of Publication: 2022</p> <p>Country: Indonesia</p> <p>Journal Name : Jurnal Indonesia</p> <p>Database: Google Scholar</p>	<p>Management of Perimenopausal Midwifery Care for Patient "N" with Irregular Menstruation at Kassi-Kassi Health Center, Makassar City, 2022</p>	<p>Melaksanakan Management of Midwifery Care for Perimenopause in Patient "N" with Irregular Menstruation at Kassi-Kassi Community Health Center in Makassar City according to the 7 steps of Varney and SOA, and gestational hypertension, which develops after 20 weeks of pregnancy and usually resolves within 6 weeks postpartum. There is a consensus that a systolic blood pressure of ≥ 170 or a diastolic blood pressure of ≥ 110 mmHg is a medical emergency and indicates the need for hospitalization. The selection of antihypertensive medication and its administration method depends on the estimated timing of the dosage</p>	Case Study	<p>The results of the case study conducted on Mrs. "N" in perimenopause with irregular menstruation showed that no obstacles were found while providing care. Monitoring was conducted four times over approximately two months. During the study, the mother had complained about irregular menstrual cycles, experiencing body heat at night, and difficulty sleeping. However, after receiving care and understanding about perimenopause, she no longer complained and was better able to accept her condition.</p>	<p>The results of the literature review and its discussion can be used in midwifery care for premenopausal women with menstrual disorders.</p>

4. DISCUSSIONS

1. Informing the mother about the examination results that her general condition is good, blood pressure is 130/80 mmHg, pulse is 80 beats/minute, temperature is 36.7 °C, and respiration is 22 breaths/minute.

Rationale: The patient has the right to know everything related to her current condition, the planned actions to be taken, and the risks associated with those actions [4].

"The mother and family are informed of the examination results."

2. Informing the mother that the menstrual irregularities (irregular periods/only spotting) she is currently experiencing are signs that she has entered the premenopausal phase, during which a woman's menstrual cycle begins to become irregular.

Rationale: Premenopause is the period around ages 46-50, starting with irregular cycles that may be prolonged, scant, or heavy, sometimes accompanied by pain [5].

3. "The mother understands the explanation provided."

4. Encouraging mothers to address complaints and maintain personal hygiene by consistently keeping clean, such as bathing twice a day, wearing cotton underwear that is not tight and has absorbent qualities, using the correct wiping technique from the vagina to the back, always drying the vulva after bowel movements and urination, changing underwear whenever it becomes wet, and changing sanitary pads at least three times a day.

Rationale: Providing health education to premenopausal women: Eating nutritious foods such as calcium, minerals, phytoestrogens, water and fiber, protein, fats, carbohydrates, and maintaining personal hygiene, especially vaginal cleanliness, to avoid skin infections, particularly focusing on skin hygiene, genital area cleanliness, using soap to dry the skin, and engaging in physical activities/exercise such as doing household chores, walking, jogging or running at a moderate pace rather than racing, swimming, and light aerobic exercises. The right physical activity can reduce the symptoms experienced by women in perimenopause. Exercise and physical activity during this period can delay the loss of muscle strength. [6]

"The mother understands and is willing to follow the recommendations given."

5. Advising the mother to consume foods rich in vitamins A, C, and B as antioxidants, vitamin D for calcium absorption, plant-based foods, and B-complex vitamins from fruits such as vegetables, legumes, carrots, spinach, tomatoes, potatoes, cassava leaves, oranges, guavas, and bananas, which are commonly found to help reduce complaints occurring during the perimenopause phase. The mother can also consume foods containing phytoestrogens such as papaya, soybeans, and green tea to alleviate complaints during perimenopause.

Rationale: Phytoestrogens have a structure and function similar to endogenous estrogen. Phytoestrogens can bind to estrogen receptors. They can increase endometrial thickness, enhance elasticity, lower vaginal pH, improve bone density, inhibit atherosclerosis, alleviate hot flashes, and enhance cognitive function. So that phytoestrogens can reduce menopausal symptoms (Hesti, 2016).

"Mother understands and is willing to follow the recommendations given."

6. Advising mothers to engage in light exercise every day, such as morning walks and taking advantage of sunlight to prevent osteoporosis, and to do light aerobic exercises or yoga to alleviate complaints during the premenopausal phase and prevent issues during menopause later on.

Rationale: Physical activity/exercise such as doing household chores, walking, jogging, or running at a moderate pace. The right physical activity can reduce the symptoms experienced by women in perimenopause. Exercise and physical activity during this period can delay the loss of muscle strength [7].

"Mother understands and is willing to follow the given recommendations."

5. CONCLUSIONS

Based on the assessment of subjective and objective data of Mrs. U, aged 50, with complaints of irregular menstruation, sometimes only experiencing light spotting. The objective data indicates that the general condition of the mother is good, with blood pressure at 130/80 mmHg, pulse at 80 beats per minute, temperature at 36.7 °C, and respiration at 22 breaths per minute. Based on the interpretation of subjective and objective data, a diagnosis of obstetric premenopause can be established for Mrs. U, aged 50, G1P0A0, with menstrual disturbances.

Non-pharmacological treatment management can be carried out by advising mothers to consume foods rich in vitamins A, C, and B as antioxidants, vitamin D for calcium absorption, plant-based foods, and B complex vitamins from fruits such as vegetables, legumes, carrots, spinach, tomatoes, potatoes, cassava leaves, oranges, guavas, and bananas, which are commonly found to aim at reducing complaints that occur during the perimenopausal period. Mothers can also consume foods containing phytoestrogens such as papaya, soybeans, and green tea to help alleviate the complaints experienced during perimenopause. Phytoestrogens have a structure and function similar to endogenous estrogen. Phytoestrogens can bind to estrogen receptors. They can increase endometrial thickness, enhance elasticity, lower vaginal pH, improve bone density, inhibit atherosclerosis, alleviate hot flashes, and enhance cognitive function. Thus, phytoestrogens can reduce menopausal symptoms (Hesti, 2016).

The evaluation of the care results indicates that the mother is willing to implement complementary care by consuming foods rich in vitamins A, C, and B as antioxidants, as well as foods containing phytoestrogens.

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REFERENCES

1. Haniza, et al. 2018. The Relationship Between Stress Levels and Menstrual Cycles in Women Aged 40-50 Years Pre Menopause in Tlogosuryo Village, Tlogomas Subdistrict, Lowokwaru, Malang. Nursing News Journal
2. Hesti Ariyanti, Ety Apriliana. 2016. The Influence of Phytoestrogens on Menopausal Symptoms. Majory Journal
3. Nur Santi, et al. 2022. Management of Midwifery Care for Perimenopausal Mrs. N with Irregular Menstruation at Kassi-Kassi Health Center, Makassar City. Indonesian Journal
4. Lisnani. 2010. The Relationship Between Knowledge and Attitudes of Premenopausal Mothers in Facing Changes Related to Menopause Issues in Sari Village, Medan Denai District. <https://www.researchgate.net/publication/4522910>
5. Proverawati, Atikah. 2010. Menopause and Premenopause Syndrome. Yogyakarta: Nuha Medika
6. Basic Health Research (Riskesdas) (2018). Research and Development Agency. Ministry of Health of the Republic of Indonesia, 2018
7. Sari Ida Miharti, Meli Prenti Ayu. (2021). Factors Associated with Anxiety about Physical Changes in Premenopausal Mothers. Journal of Maternal Child Health Care Volume 4 Number 2