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COMPARATIVE ANALYSIS OF CHANGES IN BONE
MINERAL DENSITY AND CLIMACTERIC SYMPTOMS
IN POST MENOPAUSAL WOMEN WITH AND
WITHOUT PELVIC ORGAN PROLAPSE

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INTRODUCTION

The development and occurrence of menopause, which is the permanent discontinuation of menstruation, is an important stage in the woman’s life and can be linked to different pathologies, for example,pelvic organ prolapse (POP), osteoporosis, and the climacteric symptoms. Given that the aging population is on the rise all over the world, these conditions are a major concern in public health. Even though there are an abundant number of studies conducted for various specific conditions, there is still a lack of research that would analyze the interactions between POP, BMD(Bone mineral density) varition, and climacteric symptoms with post menopause.

OBJECTIVE

The objective of this study was to determine the correlation between POP and climacteric symptoms among the postmenopausal women and proposed prevention measures that can enhance the quality of life during menopause

METHODOLOGY

A cross-sectional comparative study was conducted at MCH Unit 1 PIMS.
Population: 367 postmenopausal women 41-70 years of age with and without POP.

Demographic and medical data : BMD analysis and a questionnaire developed from the Greene Climacteric Scale.

Exclusion criterion: premature ovarian failure or other co-morbid conditions.

Variables: Prolapse, changes in BMD, vasomotor status, and psychological manifestations were evaluated in the study.

KEY FINDINGS

Out of 187 women with POP, 45% had osteoporosis, 25% had osteopenia, and 87% complained of psychosexual symptoms and the remaining 10% had no association between BMD changes and proplapse. Conversely, significant alteration of BMD was seen only in 20% of the women who did not have POP and 38% of them complained of psychosexual symptoms. Self-rated climacteric symptoms were less severe in women who did not have prolapse.

POP

Without POP

0

50

100

150

200

No symptoms
12.8%

Symptoms
87.2%

Patients with prolapse

0

50

100

150

200

No symptoms
62.2%

Symptoms
37.8%

Patients without prolapse

PATIENTS WITH PROLAPSE

TOTAL 187

• 84 OSTEOPOROSIS (45%)

• 47 OSTEOPENIA (25%)

• 37 PATIENTS NORMAL BMD(20%)

• 19 PATIENTS : NO ASSOCIATION

PATIENTS WITHOUT PROLAPSE

TOTAL 180

• 36 HAD BMD CHANGES(20%)

• 144 SHOWED NO CHANGES (80%)

PROLAPSE PATIENTS

• WITH ASSOCIATED PSYCHOSEXUAL SYMPTOMS(163) (87%)

•WITHOUT PSYCHOSEXUAL SYMPTOMS(13 %) (24)

NON-PROLAPSE PATIENTS

• WITH PSYCHOSEXUAL SYMPTOMS (68)(38%)

•WITHOUT PSYCHOSEXUAL SYMPTOMS (112) (62%)

CONCLUSION

Altogether the results point towards a statistically significant association between POP with BMD alterations and climacteric manifestations. POP is potentially dangerous for increasing the possibility of osteoporosis as well as the signs related to it, so it is critical to monitor BMD in each postmenopausal lady especially those with POP.The enhancement of risk factors in young women could help to optimize post-menopausal management and reduce the frequency of associated conditions

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