



IDENTIFICATION OF PHYSIOLOGICAL AND PSYCHOLOGICAL CHANGES DURING MENOPAUSE IN BIREUEN DISTRICT, ACEH PROVINCE

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Abstract

Background: Menopause is a physiological condition in women where the end of the reproductive period due to the cessation of the menstrual cycle for 12 consecutive months naturally. During menopause, the production of the hormones oestrogen and progesterone by the ovaries decreases and stops, thus causing changes in the hormonal system in the body that can affect physiological changes in the body as well as psychological changes and will have an impact on the woman's next life. **Method:** This study aims to identify physiological and psychological changes experienced by women during menopause. The research method is descriptive survey research, the population is all menopausal women who live in Bireuen Regency. The sampling technique used random sampling which was taken based on the Slovin formula totalling 392 respondents. The research instrument was a questionnaire distributed to respondents from 11 August to 05 September 2023 during the Elderly Posyandu at the Puskesmas. Data processing and analysis were carried out univariately for each variable of physiological changes and psychological changes using descriptive static tests. **Result:** The results of the study for physiological changes showed that the majority of respondents experienced difficulty sleeping, visual disturbances, had heart disease, did not experience respiratory problems, experienced changes in appetite, did not experience urinary disorders, experienced skin changes, experienced joint pain, experienced heat on the face. In psychological changes, they experience mood swings, feel tired and lack of enthusiasm and experience memory impairment. **Conclusion:** It is suggested that it is necessary to provide special support and attention to women in menopause so that they can go through menopause comfortably and happily so that it will reduce the level of dependence on others.

keyword : physiological changes; psychological changes; menopause

INTRODUCTION

According to WHO, in the Southeast Asia region the elderly population is 8% or around 142 million people. In 2050, it is estimated that the elderly population will increase 3 times from this year. In 2000 the number of elderly was around 5,300,000 (7.4%) of the total population, while in 2010 the number of elderly was 24,000,000 (9.77%) of the total population, and in 2020 it is estimated that the number of elderly will reach 28,800,000 (11.34%) of the total population. Meanwhile, in Indonesia alone, in 2020, it is estimated that the number of elderly will be around 80,000,000 (Kemenkes RI, 2019).



In line with WHO predictions regarding the trend of increasing the number of elderly people in various countries in the world, Indonesia is one of the countries facing this trend. The Central Statistics Agency released data on the number of elderly people based on the results of the 2016 Inter-Census Population Survey, estimated that the number of elderly people (aged 60 years and over) in Indonesia was 22,630,882 people. This figure is expected to increase to 31,320,066 people in 2022. According to data from the Central Statistics Agency (BPS) in 2020, the number of elderly people (aged 60 years and over) in Indonesia reached around 29.1 million people or around 10.78 % of Indonesia's total population which reaches around 269 million people. The number of elderly people in Indonesia is expected to continue to increase along with increasing life expectancy and decreasing birth rates. The percentage of the elderly population in Indonesia will be 10.48% in 2022. This figure is down 0.34% points compared to the previous year which reached 10.82%. (Pangribowo, 2022). According to BPS data from Bireuen Regency in 2019, the number of elderly people was 59,623 people, with the number of elderly men being 26,524 people, while the number of elderly women was 33,109 people. (BPS Bireuen, 2019).

Menopause causes different symptoms in each woman. Menopausal women will have almost the same impact that is felt the same on every woman. Changes in hormone production cause various physical and psychological changes for women. This period is very complex for women because it is related to their physical and mental condition. Apart from women experiencing physical stress, they can also experience psychological stress which affects their emotional state in dealing with normal things that women experience. These physical changes can include hot flushes, profuse night sweats, irregular menstruation until they no longer occur, irritability, fatigue, decreased memory, and pain during intercourse. Meanwhile, the psychological change that occurs is irritability (Nurlina, 2021). The impact is that women become less confident because they experience or lack acceptance of the physical and psychological changes they experience. As with research conducted by Mardiani, there is a relationship between self-acceptance and anxiety in menopausal women. Menopausal women have anxiety during menopause. (Mardiani et al, 2018).



The menopause period requires adequate preparation, knowledge, attitude and family support to deal with it. Wrong assumptions or unpreparedness for menopause can cause several psychological problems, such as anxiety and depression. Research conducted by Mayang Wulan states that there is a relationship between knowledge, attitudes, family support and stress levels and readiness to face menopause (Wulan, 2020). According to Chaerani, there is a significant positive relationship between self-acceptance and social support and adjustment during menopause, self-acceptance takes greater priority over social support. (Chaerani et al. 2019)

Research on identifying physiological and psychological changes in menopause is important to increase understanding of the impact of menopause on women's health and quality of life. Apart from that, we also do not yet have adequate and up-to-date data on health problems in the elderly. Surveys and research related to the elderly are still very limited, so to improve the quality of life of the elderly, especially menopausal mothers, research will be carried out to identify physiological and psychological changes during menopause in Bireuen Regency, Aceh Province.

METHOD

This research is a descriptive research with survey method. The population is menopausal women who live in Bireuen Regency totalling 33,109 people. The sampling technique used random sampling taken based on the Slovin formula with a 95% confidence level totalling 392 respondents. The research instrument was a questionnaire containing a statement of respondent's willingness, respondent's identity, open and closed questions about physiological and psychological changes experienced by respondents during menopause totalling 90 questions. Data collection was carried out from 11 August to 05 September 2023 by distributing questionnaires during the Elderly Posyandu at each Puskesmas in the Bireuen Regency area which was taken randomly.

Data processing was carried out univariately using descriptive statistical tests to obtain the frequency distribution of physiological and psychological changes experienced by respondents during menopause. Data analysis was carried

out for each variable of physiological and psychological changes experienced by respondents by comparing the highest and lowest frequencies.

RESULT AND DISCUSSION

The research carried out was to identify physiological changes and psychological changes during menopause. the following results were obtained:

A. Physiological Changes during Menopause

The results of the study obtained several physiological changes in menopausal women including changes in the respiratory system, sensory system, cardiovascular system, respiratory system, urinary system, reproductive system, immune system, musculoskeletal system, endocrine system, integument system. Physiological changes during menopause are very important and complex in the field of women's health. Some of the significant changes that occur during menopause include hormonal changes, disruptions to the reproductive system, and the impact on general health. Here are some important points in discussing the results of research on physiological changes during menopause:

Table 1. Nervous System

No	Indicator	n	%
1	Difficulty sleeping	264	67.5
2	Often sleepy	232	59.3
3	Sleep needs	195	50.1
4	Headache	283	72.6
5	Hair loss	328	81.4
6	Change in hair color/grey hair	368	94.4
7	Use of hair dye	368	94.4

Because of changes in the nervous system, the average mother has difficulties sleeping up to 67.5% of the time, thus moms frequently feel drowsy (59.3%) and lack the need for sleep (50.1%). Women entering menopause have difficulty sleeping due to several influencing factors including hormone levels, health problems, unhealthy lifestyles, and tension about the situation experienced. A number of these factors can cause menopausal women to experience insomnia. The endocrine-hormone changes involved in a woman's life are mainly caused by an increased loss of ovarian function. One of the changes that women feel is

experiencing sleep disturbances (insomnia). Hot flushes can also cause women to wake up from sleep, besides that difficulty sleeping can be caused by low serotonin levels in the pre-menopausal period. Serotonin levels are influenced by endocrine levels (Syafaria, Sartika and Turiyani, 2021). This is similar to Trijayanti Idris' research which examines the description of the incidence of insomnia in menopausal women, the results of her research show that most respondents experience insomnia (sleep disturbance) (Idris, Kurniawati and Ardiansah, 2016).

Table 2. Sensing System

No	Indicator	n	%
1	Olfactory disorders	332	86
2	Visual impairment	332	85.1
3	Use of glasses	208	53.2
4	Eye surgery	328	85
5	Hearing disorders	271	69.3
6	Use of hearing aids	379	96.9

In the sensing system, on average 85.1% of mothers had vision problems, 53.2% of mothers wore glasses, 85% of women had never undergone eye surgery, 69.3% of mothers did not have hearing issues, and 96.9% of mothers did not use hearing aids. Vision in general can change and worsen as women age, such as experiencing dry eye, cataracts, glaucoma, and macular degeneration, which occurs due to decreased estrogen levels. According to the National Women's Health Resource Center about 6 million women and 3 million men experience moderate to severe dry eye symptoms. More common in post-menopausal and pregnant women, this is due to hormonal fluctuations.^{4,5} The Society for Women's Health Research says that 62% of women who experience menopause suffer from dry eye, but only about 16% report that their symptoms are related to menopause (Chaironika, 2011).

Table 3. Cardiovascular System

No	Indicator	n	%
1	Hypertension	204	52.4
2	Hypotension	304	77.9
3	Heart beat	207	53.1
4	Heart disease	363	93.3

In terms of the cardiovascular system, menopausal mothers do not encounter cardiovascular system diseases such as hypertension (52.4%), hypotension (77.9%), heart palpitations (53.1%), or heart disease (93.3%). The results showed that menopausal women did not experience cardiovascular system disorders including hypertension (52.4%). One of the changes that occurs during the menopausal transition to menopause that can affect cardiovascular health is a decrease in endogenous estradiol hormone which is associated with an increase in cardiovascular risk. This change is found more in the late perimenopausal period than in the premenopausal period which experts believe is not related to age. Recent findings show a significant increase in arterial blood vessel stiffness by 7.5% at 1 year of menopause which is not associated with traditional risk factors for cardiovascular disease (hypertension, cholesterol, diabetes etc.) (El Khoudary et al., 2020). Menopause is associated with an increased risk of cardiovascular disease and high blood pressure. However, for women who have entered menopause, if they adopt a healthy lifestyle such as physical activity, exercise, a healthy diet and continue to measure blood pressure regularly, it can reduce the risk of hypertension (Kumalaningsih, 2015). In line with Rahmi Fitria's research, which says there is an effect of physical activity on lowering blood pressure in menopausal women. Physical activity at menopausal age can help expend energy for optimal body work, and maintain quality of life to stay healthy and fit throughout the day (Fitria and Ningsih, 2020).

Table 4. Respiratory System

No	Indicator	n	%
1	Respiratory disorders	290	74.6
2	Use of oxygen	371	95.1
3	Blown	352	90

In terms of the respiratory system, menopausal mothers have no respiratory difficulties (74.6%), do not utilize oxygen (95.1%), and have no shortness of breath (90%). Respiratory system, there are menopausal mothers who do not experience respiratory problems (74.6%), breathing disorders in women often occur during sleep. The cause of sleep disordered breathing is related to physiological or structural variables. After menopause, body fat is redistributed, resulting in an



increased waist-to-hip ratio and increased neck width, which can put pressure on the airways. Excess body mass index is the most important predisposing factor for sleep apnea, about 58% of Obstructive sleep apnea (OSA) patients are caused by excess body mass index. Research conducted by Rimpila to measure the apnea-hypopnea index in menopause, was higher among participants in the menopausal stage (Rimpilä et al., 2023).

No	Indicator	n	%
1	Changes in appetite	226	58.2
2	Increased appetite	307	78.9
3	Decreased appetite	257	66.1
4	Weight gain	293	75.7
5	Weight loss	284	73.4
6	Difficulty in defecating	295	75.4
7	Diarrhea	343	87.9
8	Other digestive disorders	231	58.9
9	Use of dentures	330	84.2
10	Food restrictions	241	61.5
11	drink restrictions	321	82.1
12	Consuming certain foods every day	357	91.8
13	Consuming certain drinks every day	347	89
14	Difficulty in swallowing food	354	90.8

Table 5. Digestive System

In terms of the digestive system, menopausal mothers do not have digestive problems, such as changes in appetite (58.2%), complaints about appetite, weight, or other issues. The results of research on the digestive system, obtained by menopausal mothers did not experience digestive problems, namely not experiencing changes in appetite (58.2%). A decrease in the amount of estrogen and progesterone during menopause can slow down the process of food passing through the digestive system. When the digestive process takes longer, more water is reabsorbed into the bloodstream, which can lead to constipation, increased gas and bloating. Changes in metabolism due to hormonal fluctuations can cause food cravings. Decreased estrogen levels trigger an increase in food intake, body mass and body fat mass, this triggers weight gain during menopause which causes obesity. This is in line with Juwita's research that one of the factors associated with obesity in women is menopause (Juwita, 2019).

Table 6. Urinary System

No	Indicator	n	%
1	BAK Difficulty	315	80.6
2	Ability to hold BAK	253	64.7
3	Difficulty in holding BAK	286	73
4	Use of diapers	379	96.7

In terms of the urinary system, menopausal mothers have no significant complaints. They do not have difficulties in peeing (80.6%), still have the ability to hold BAK (64.7%), and do not have difficulty holding BAK (73%), therefore they are not in need of diapers. (96.7%). In the urinary system, menopausal women do not experience significant complaints, mothers do not experience difficulty urinating (80.6%). Complaints that are often felt by menopausal women in the form of vasomotor complaints and symptoms, urogenital complaints and symptoms will cause frequent micturition and urinary incontinence, increased risk of urinary tract infections. Bladder control problems have many possible causes, including reduced estrogen levels in the body, other contributing factors may be nerve damage from childbirth, pelvic surgery, and weakening of the pelvic floor muscles (Suparman and Rompas, 2008). This is in line with Agusma's research, which says that childbirth, parity and childbirth surgery affect urinary incontinence in menopause (Agusma, 2022). However, this is not in line with this study because menopausal women do not experience urinary disorders.

Table 7. Reproductive System

No	Indicator	n	%
1	Vaginal dryness	255	65.7
2	Complaints since menopause	329	84.4

In terms of the reproductive system, moms did not experience vaginal dryness (65.7%), and there were no additional complaints about the reproductive system since menopause (84.4%). Based on research from Cagnacci (2020), vaginal dryness is strongly influenced by the age of a woman who has entered menopause. Menopause can affect reproductive system disorders. When a woman no longer has

a menstrual cycle, there is no thickening of cervical mucus in the middle of the cycle. Therefore, menopausal women may experience vaginal dryness due to a decrease in the hormone estrogen in the body.

Table 8 Integumentary System

No	Indicator	n	%
1	Changes in the skin	309	79.8
2	Wrinkle skin	310	79.9
3	Black spots on the skin	218	56.3
4	Itchy skin	206	53.1

In the integument system, mothers experienced skin alterations (79.8%), and wrinkled skin (79.9%), did not complain of black spots on the skin (56.3%) and mothers did not experience itching on the skin (53.1%). The skin is an endocrine organ and a major target of hormones such as estrogens, androgens and cortisol. Besides vasomotor symptoms (VMS), skin and hair symptoms often receive less attention than other menopausal symptoms despite having a significant negative effect on quality of life. Skin and mucosal menopausal symptoms include dryness and pruritus, thinning and atrophy, wrinkles and sagging, poor wound healing and reduced vascularity, whereas skin premalignant and malignant lesions and skin aging signs are almost exclusively caused by environmental factors, especially solar radiation (Zouboulis, 2022).

Table 9 Musculoskeletal System

No	Indicator	n	%
1	Joint pain	299	77.3
2	shaking body	265	68.7
3	Movement is getting slower	299	77.3
4	Ability to defecate by squatting	336	86.6
5	Ability to stand	362	93.3
6	Ability to walk	374	96.6
7	Use of walking aids	347	89
8	Fracture	356	91.8

In the musculoskeletal system, the majority of mothers reported joint pain (77.3%), did not have shaking body (68.7%), had slower movements (77.3%), could still defecate by squatting (86.6%), could still stand (93.3%), could still walk (96.6%), did not use walking aids (89%), and never had a broken bone (91.8%). In the

musculoskeletal system, most mothers experience joint pain (77.3). In women who have menopause, complaints of joint pain or what is usually called old people's disease can be caused by the decline in the hormone estrogen. The reason is, the hormone estrogen has an anti-inflammatory effect, so when this hormone decreases, the risk of inflammation will be greater. A similar thing about Widjayanti's research that complaints in menopausal women research found the majority of respondents complained of discomfort in the bones of the joints and muscles (pain in the joints, rheumatic complaints) (Widjayanti, 2016).

Table 10. Endocrine System

No	Indicator	n	%
1	Night sweats	204	52.4
2	Hot feeling in the face	304	77.9

In the endocrine system, mothers complained of sweating at night (52.4%), and did not experience hot sensations on the face (77.9%). As much 262 respondents (67.9%) felt that they did not often get sick after menopause. In the endocrine system, mothers complained of night sweats (52.4%). Hormones are substances released into the bloodstream from a gland in the endocrine system that affect the activity of body cells that control the function of the body's organs as a whole. The drastic decrease in estrogen and progesterone hormones in some women will affect various physical changes and psychological conditions according to each person, physical changes commonly experienced by menopausal women include wrinkled or saggy skin, incontinence (urinary control disorders), heart palpitations when doing activities, hot flushes and other complaints. Vasomotor complaints in the form of hot flushes or heat in the chest and followed by sudden sweating were experienced by 16.7% of respondents. When looking at the theory of vasomotor complaints, hot flushes and sweating sometimes followed by shaking are the most common and most disturbing symptoms during menopause, these symptoms are experienced by about 75% of women. Hot flushes are associated with an increase in skin temperature and vasodilation resulting in dryness, increased skin conductance and decreased skin resistance. These hot flushes are uncomfortable, but they disappear quickly and are not harmful.

B. Psychological Changes during Menopause

Table 11. Psychological Changes during Menopause

No	Indicator	n	%
1	Still working	198	51.2
2	Mood swings	276	71
3	Easily angry or offended	207	53.1
4	Anxious, afraid, worrying too much	197	50.8
5	More tired and less enthusiastic	284	73
6	Difficulty sleeping and waking up at night	238	61.8
7	Gets stressed easily	221	57
8	Difficulty dealing with stress	287	73.4
9	Feel lonely	236	60.4
10	Changes in social interactions	305	78.4
11	Lack of confidence	311	79.7
12	Changes in thinking patterns and difficulty concentrating	238	60.9
13	Losing youth	323	83.2
14	Physical changes affect mental health	227	58.5
15	Difficulty accepting body changes	306	78.9
16	Family support	223	57.2
17	Feeling worthless	342	87.7
18	Anxious about hormonal changes	250	64.3
19	Energy decline	300	76.7
20	Feel satisfied with support from the social environment	330	84.6
21	Anxious about the future	268	68.7
22	Often moody	241	62.1
23	Unstable emotion	246	62.9
24	Feeling unproductive and helpless	200	51
25	Memory disorders	316	80.6
26	Difficulty concentrating and not focusing	243	62
27	Difficult to make a decision	216	55.1
28	Fear of being abandoned by family	252	64.6
29	Feeling not considered in social interactions	331	84.4
30	How to deal with stress during menopause	207	52.8

Mothers experience psychological changes during menopause, such as sudden mood changes (71%), irritability (53.1%), feelings of anxiety, fear, and excessive worry (50.8%), feeling tired and less enthusiastic (73%), difficulty sleeping or waking up frequently (61.8%), and mothers do not feel easily stressed. Mothers sought help from family and friends to deal with psychological changes (57.2%), and they were satisfied with the help they received (84.6%). Other psychological issues expressed by moms include feeling unproductive and helpless

(51%), having memory problems (80.6%), and having difficulty concentrating and focusing (62%).

Various physiological changes experienced by menopausal women which include changes in the nervous system, sensing, cardiovascular, respiratory, digestive, urinary, reproductive, integument, musculoskeletal, endocrine and immunity, greatly affect the quality of life of menopausal women. These physical changes will be experienced by women starting in the pre-menopausal period aged 45-55 years until women enter the post-menopausal period. The complaints and symptoms experienced by each woman vary depending on the condition of her body. As with the physical changes experienced by 392 respondents of menopausal mothers in Bireuen Regency, who were sampled in this study, the average mother experiences physical and psychological changes that are difficult to accept because they are considered to interfere with her daily activities, so that it will affect the mother's quality of life in undergoing menopause. Menopausal mothers want to always be productive even with various physiological complaints experienced and age that is no longer young. The condition of acceptance of physiological changes in each mother varies in response, as well as psychological changes.

Research conducted by Ulfa (2023), there is a relationship between psychological changes and quality of life in menopausal women, so that menopausal women can control the psychological changes that occur to them by thinking positively, and increasing activities outside of homework such as gymnastics together so that they can make their quality of life better. Wardani et al (2021), provided health education to menopausal women about changes that occur in menopausal women and their management to 25 participants involved in this activity. The results of the questionnaire assessment showed that there was a difference in the knowledge value of the participants before and after being given health education regarding changes that occur during menopause and its management as evidenced by an increase in knowledge value in almost all participants. This proves that health education is needed to improve the quality of life of menopausal women so that they are ready to face physical and psychological changes during menopause. Hartin's research (2020) found that there is a



relationship between physical changes and psychological changes in menopausal women in Borok Toyang Village, West Sakra District, East Lombok Regency.

According to research by Yanti (2022), the results showed that most respondents experienced physical changes in the moderate category as many as 38 people (46.3%). As for the level of anxiety, the majority of respondents experienced moderate category anxiety as many as 30 people (36.6%). Based on the Chi-Square analysis test result, a significance score of 0.027 (<0.05) was obtained. It can be concluded that there is a significant relationship between physical changes and anxiety.

Based on Jayanti's research (2022), the factors associated with quality of life in menopausal women in Indonesia include education level, employment status, parity, region of residence, marital status, sexual activity, husband's support, length of menopause, history of disease, and self-esteem. Quality of life in menopausal women in Indonesia is influenced by various factors. Therefore, holistic and comprehensive interventions need to be carried out by health workers at various levels of service so that women and their environment are better prepared to face changes during menopause so that they are able to maintain and improve their quality of life.

In accordance with Ulya's research (2021), The purpose of this study was to determine the readiness of women aged 45-55 years in facing menopausal changes in Kuripan Yosorejo Village. Readiness to face menopause is a condition for mothers to prepare themselves for menopause both physically, mentally and psychologically. This research is a quantitative study with a cross sectional study design and using the chi square statistical test. The results obtained p value $0.01 < \alpha$ (0.05), which means that there is a relationship between knowledge of menopause and readiness to face changes in menopause. With this research, it is hoped that menopausal mothers can increase their knowledge about reproductive health, especially about menopause by reading many books about menopause or through other information media so that it can increase understanding of how to deal with menopause and reduce complaints before menopause, especially for menopausal mothers at a level of lack of knowledge.

Based on Anisa's research (2023) on 87 premenopausal women respondents in Bukateja Village, Bukateja District, Purbalingga Regency, it shows that there is a relationship between knowledge about physical changes with readiness to face menopause with a p value of 0.002 (p value <0.05) and there is a relationship between knowledge about psychological changes with readiness to face menopause with a p value of 0.010 (p value <0.05).

Physiological changes during menopause are very important and complex in the field of women's health. Some of the significant changes that occur during menopause include hormonal changes, disorders of the reproductive system, and the impact on general health.

Menopause is a natural process in a woman's life where she stops menstruating and is no longer able to get pregnant naturally. Significant hormonal changes during menopause can affect various psychological aspects of a woman's well-being. The following is some discussion of research results related to psychological changes during menopause:

1. **Depression and Anxiety:** Several studies show that women in menopause have a higher risk of experiencing depression and anxiety compared to those who are still in the reproductive period. This can be related to hormonal fluctuations, especially a decrease in estrogen, which can affect brain neurotransmitters involved in mood and emotion regulation.
2. **Mood Disorders:** Some women report significant mood swings during menopause. This can include symptoms such as feeling sad, irritable, and irritable. Some women can also experience more severe mood swings such as major mood disorders or bipolar disorder.
3. **Sleep Disorders:** Hormonal changes during menopause can affect sleep quality. Many women report difficulty sleeping or insomnia during this period. Chronic sleep disorders can impact psychological and physical well-being.
4. **Cognitive Impairment:** Several studies have shown that hormonal fluctuations during menopause can affect cognitive functions such as memory, concentration, and focus. However, there is no scientific



agreement on the extent of this influence and whether there are significant cognitive declines during menopause.

5. **Body Image and Physical Changes:** Physical changes such as increased weight, changes in fat distribution, and decreased bone density can affect a woman's body image and self-confidence. This can have an impact on their psychological well-being.
6. **Stress and Adaptation:** The transition to menopause can be an emotionally challenging period. Women may experience stress related to physical changes, social roles, and changes in interpersonal relationships. However, many women also experience positive adaptations and find ways to overcome these challenges.

According to research by Putra Utama, Zul Fadillah (2020), physiological and psychological changes occur in the elderly as a result of the aging process which has an impact on the lives of the elderly. In line with Jumiati's research (2021), the physical changes most often experienced by menopausal women are hot flashes, while the psychological changes that respondents often experience are irritability.

It is important to remember that the experience of menopause can vary greatly from one individual to another. Some women may experience significant psychological changes, while others may experience little or no noticeable changes. Factors such as lifestyle, social support, and physical health can influence how a person experiences menopause.

If a person experiences significant emotional difficulties during menopause, it is important to seek help from a mental health professional or gynecologist. They can provide advice, support or treatment if needed. Every woman experiences menopause in a unique way, and experiences can vary. Therefore, consultation with a healthcare professional is an important step to understand and appropriately manage the physiological changes of menopause.

CONCLUSION AND SUGGESTION

Identification of physiological and psychological changes in menopausal women in Bireuen district shows that on average mothers experience difficulty sleeping,

mothers experience vision problems, in the cardiovascular system the majority do not have heart disease and do not experience respiratory problems, in the digestive system they experience changes in appetite, do not experience problems urination, and experiencing complaints after menopause, experiencing skin changes, experiencing joint pain and experiencing a hot feeling on the face. Psychological changes experience changes in mood, feeling tired and less enthusiastic and experiencing memory problems. It is recommended that attention be paid to the menopause period by increasing women's awareness and adaptation to menopause, both through health services and health promotion in order to improve women's quality of life.

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