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# MULTICOMPONENT BEHAVIOURAL TRAINING FOR PRIMARY DYSMENORRHEA IN WOMEN

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***Abstract***

*Dysmenorrhea is a painful period, or menstrual cramps or it is a pain during menstruation. Dysmenorrhea is a term describing painful menstruation that typically involves cramps caused by uterine contractions. Primary dysmenorrhoea is pain in the absence of any organic cause and it is characterised by cramping lower abdominal pain that may radiate to the lower back and upper thighs and is commonly associated with nausea, headache, fatigue and diarrhoea. Multi-behavioural training has been suggested as an alternative or non-medical approach to the manage the symptoms which commonly occur during menstrual cycle. Many women are now seeking alternatives to conventional medicine and research into the menstrual cycle suggests that these multi-behavioural training may play an important role in the cause and treatment of menstrual disorders.*

***Keywords:*** *Multi-behavioural training, menstrual cramps, dysmenorrhoea, primary dysmenorrhea, women*

## INTRODUCTION

Gynecological disorders are those disorders that affect the female reproductive system. Every woman suffers from some gynecological disorder at some point in her life. The most common gynecological condition is dysmenorrhea and it refers to the painful periods sufficient to incapacitate daily activities. The pain is often mild but, in about 1 in 10 women, the pain is severe enough to affect day-to-day activities. The pain can be so severe that they are unable to go to school or work.

Dysmenorrhea is classified as primary dysmenorrhea and secondary dysmenorrhea. **Primary dysmenorrhoea** is the most common type of painful periods. This occurs where there is no underlying problem of the womb (uterus) or pelvis. **Secondary dysmenorrhoea** is pain caused by a problem of the womb or pelvis.

## EPIDEMIOLOGY

Dysmenorrhea is one of the most common gynaecological conditions, regardless of age or race. It is one of the most frequently identified etiology of pelvic pain in menstruating adults. The prevalence of dysmenorrhea can vary between 16% and 91% of surveyed individuals, with severe pain observed in 2% to 29% of menstruating individuals. Reports of dysmenorrhea are greatest among individuals in their late teens and 20s, with reports usually declining with age. The prevalence in adolescent females has been reported to be 67.2% by one study[61] and 90% by another.[62] It has been stated that there is no significant difference in prevalence or incidence between races, although one study of Hispanic adolescent females indicated an elevated prevalence and impact in this group. Another study indicated that dysmenorrhea was present in 36.4% of participants, and was significantly associated with lower age and lower parity. Childbearing is said to relieve

dysmenorrhea, but this does not always occur. One study indicated that in nulliparous individuals with primary dysmenorrhea, the severity of menstrual pain decreased significantly after age 40. A survey in Norway showed that 14 percent of females between the ages of 20 to 35 experience symptoms so severe that they stay home from school or work. Among adolescent girls, dysmenorrhea is the leading cause of recurrent short-term school absence.

**SYMPTOMS**

The main symptom is crampy pain in your lower tummy (abdomen). Often, the first few periods that you have are painless. Period pains may only begin 6-12 months after you have started your periods. The pain:

- May spread to your lower back, or to the top of your legs.
- Usually starts as the bleeding starts, but it may start up to a day before.
- Usually lasts 12-24 hours but lasts 2-3 days in some cases.
- Can vary with each period. Some periods are worse than others.
- Tends to become less severe as you get older, or after having a baby.

In some women, other symptoms are

- Headaches.
- Tiredness.
- Faintness.
- Breast tenderness.
- Feeling sick (nausea).
- Bloating.
- Diarrhoea.
- Feeling emotional or tearful.

**CLASSIFICATION**

1. **Primary Dysmenorrhea**

   It is caused by increased prostaglandin production by the endometrium in an ovulatory cycle which cause contraction of the uterus. In this type there is no pelvic pathology. Primary dysmenorrhoea is associated with uterine hypercontractility characterized by excessive amplitude and frequency of contractions and a high 'resting' tone between contractions. During contractions endometrial blood flow is reduced and there seems to be a good correlation between minimal blood flow and maximal colicky pain. Prostaglandin and leukotriene levels elevated. n general primary dysmenorrhoea appears 6–12 months after the menarche when ovulatory cycles begin to become established. The early cycles after the menarche are usually anovular and tend to be painless. The pain usually consists of lower abdominal cramps and backache and there may be associated gastrointestinal disturbances such as diarrhoea and vomiting. Symptoms occur predominantly during the first 2 days of menstruation.

2. **Secondary dysmenorrhea**

   Secondary dysmenorrhea presentation is a clinical situation where menstrual pain can be due to an underlying disease, disorder, or structural abnormality either within or outside the uterus.There are many common causes of secondary dysmenorrhea, which include

endometriosis, fibroids (endometriomas), adenomyosis, endometrial polyps, pelvic inflammatory disease, and maybe even the use of an intrauterine contraceptive device.

**MULTICOMPONENT BEHAVIOURAL TRAINING**

Dysmenorrhoea refers to the occurrence of painful menstrual cramps of uterine origin and is a common gynaecological condition with considerable morbidity. The behavioural approach assumes that psychological and environmental factors interact with, and influence, physiological processes. Behavioural interventions for dysmenorrhoea may include both physical and cognitive procedures and focus on both physical and psychological coping strategies for dysmenorrhoea symptoms rather than modification of any underlying organic pathology. Behavioural therapies focus on both physical and psychological coping strategies for symptoms such as pain rather than focusing on medical solutions for any underlying causes of the symptoms. An example of a behavioural therapy is using relaxation to help a woman cope with painful period cramps. The examples of multicomponent behavioural training are relaxation exercise and abdominal massage.

**I RELAXATION EXCERCISES**

**Introduction**

Relaxation produces physiological effects opposite those of anxiety: slow heart rate, increased peripheral blood flow and neuro- muscular stability. A relaxation technique (also known as relaxation training) is any method, process, procedure, or activity that helps a person to relax; to attain a state of increased calmness; or otherwise reduce levels of pain, anxiety, stress or anger.

**Purpose**

- The goal of relaxation exercise is to calm the brain or brain, to permit thinking process to stream in an even, smooth pace, and trigger the relaxation reaction.
- To improve the circulation.
- To relive muscle fatigue
- To improve the physical and mental health.
- To improve the physiological function.
- Increase in blood flow to primary muscles.
- Regularize the heartbeat.

**RELAXATION EXERCISES ARE**

1. **Walking**

   This is an easy exercise that does not require any special equipment, clothing or location. You can take as much as you have or need, and you can adjust your speed however you want. Endorphins are the body's pain-inhibiting hormones, and exercise walking can spur their release and walking not only helps to maintain the functional capabilities, but it can also reduce your experience of chronic lower back pain ang abdominal cramps.

2. **Diaphragmatic Breathing**

   Step 1: Sit or lie down in a comfortable position on a flat surface.
   Step 2: Sit up straight and pull your shoulder back to relax them
   Step 3: Put one hand on your chest and one hand on your stomach
   Step 4: Breath in through your nose for about 2 sec
   Step 5: Purse your lips, press gently on your stomach and exhale

Step 6: Repeat these steps several times for the best results.

3. **Equal Breathing**

Step 1: Sit or lie down in a comfortable position on a flat surface
Step 2: Sit up straight and pull your shoulder back to relax them
Step 3: Start your breathing in and breathing out through your nose, while counting 1-4 each time.

4. **Abdominal stretching exercise**

Step 1: Lie down on your stomach
Step 2: Place your hands out in front of you
Step 3: Extend your arms
Step 4: Arch backwards
Step 5: Try to keep your belly button in contact with the floor
Step 6: Aim to feel a stretch in the upper abdominal region
Step 7: hold this position for 30 seconds

**III ABDOMINAL MASSAGE**

**Introduction**

Abdominal massage is a technique that has been used by multiple cultures since the time of the ancients. Palpating the belly has been thought to promote health and wellness in many ways, including pain relief, stress relief, and overall improvement of the functioning of the digestive tract.

***The benefits of abdominal massage***

Abdominal massage produces many health benefits, and not all of them are limited to the tummy area. This process can heal momentary ailments such as constipation and bloating, and when performed regularly, abdominal massage can be a contributing factor to lifelong wellness. The benefits are:

- **Reduction of bloating:** Abdominal massage which help to regulate metabolic function and reduce the build-up of wastes in the body (which contribute to bloating), leading to relief from uncomfortable bloating.
- **Relief from constipation:** Abdominal massage can provide all-natural relief from troubling constipation and associated abdominal pain.
- **Improved menstrual symptoms:** Abdominal massage with or without aromatherapy oils (clove, cinnamon, lavender and rose) may help reduce painful menstrual cramps and lighten problematic heavy menstrual bleeding.
- **Psychological benefits:** The practice of abdominal massage can contribute not only to various aspects of physical wellness, but to psychological well-being too. Abdominal massage, provides peace of mind and relief from stress and anxiety
- **Improvement of overall gastrointestinal wellness:** Abdominal massage helps to increase the stimulation of blood flow to the abdominal region and physically stimulating the intestines and there by improve the overall wellness of the gastrointestinal system.
- **Weight loss:** Abdominal massage using essential oils can help aid in weight loss. It help to reduce abdominal subcutaneous fat, waist circumference, and to improve body image in post-menopausal women."

**CONTRAINDICATIONS**

- Pregnant women
- People with gallstones
- People with kidney stones
- People with calcium deposits in the bladder
- Women with inflammation of any sort in the reproductive organs
- People with hernias of any types
- People with stomach or duodenal ulcers
- People with any type of internal bleeding

**Steps of abdominal massage**

- Lie flat on your back on a firm bed or on a mat placed on the floor with pillow under the knees.
- Expose the belly by lifting your shirt, so you can get skin-to-skin contact with the abdomen.
- Rub your hands against one another firmly until they feel very warm (about 15 seconds) with any oil or lotion
- Place the both hands over the abdomen
- Take a nice deep breath, inhale through the nose and exhale through the mouth and repeat it five times.
- Start on the right side of your stomach down by the bone of your pelvis. Rub in a circular motion lightly up to the right side till you reach your rib bones. Move straight across to the left side. Work your way down to the left to the hip bone and back up to the belly button for 2-3 minutes.
- Rub with your fingertips in a circular motion. You may press a little deeper with your fingers. Spend about 1 minute moving from the right hip bone to the right ribs then 1 minute across the middle (gently) and then 1 minute down to the left bone by your pelvis to the belly button.
- Repeat rub, always in clockwise motion, for 10 minutes.

**CONCLUSION**

Dysmenorrhea has been associated with a major impact on woman's day to day life. Such impact is reflected in the rates of absenteeism from school or work. Dysmenorrhea could also limit women's participation in sports or social events. Furthermore, there are associated emotional stressors associated with dysmenorrhea. Dysmenorrhea is a public health matter that has an economic impact. More regular physical activity like relaxation exercise and abdominal massage is effective in reducing dysmenorrhea complications.Relaxation Exercise acts as non-specific analgesia by improving pelvic blood circulation and stimulating the release of beta-endorphins. The primary goal of Multicomponent behavioural training is to reduce the pain and improve the quality of life of patients suffering from dysmenorrhea. Therefore, it is important to educate and create awareness among young women about the importance of multicomponent behavioural training to prevent and reduce dysmenorrhea complications.

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