# CORRELATION BETWEEN PAIN AND STRESS AMONG PARAMEDICAL COLLEGE STUDENTS WITH PRIMARY DYSMENORRHEA

<sup>1</sup>Manoranjitham C, <sup>2</sup>K. Karthick, <sup>3</sup>Induja A

1,2 Assistant professor, 3 Undergraduate students
Cherraan's college of physiotherapy
Coimbatore, Tamil Nadu.
Affiliated to Tamilnadu Dr.M.G.R Medical University, Chennai, Tamil Nadu, India.

#### Abstract

AIM: Aim of the study is to find the correlation between pain and stress among para medical college students with primary dysmenorrhea.

BACKGROUND: Primary dysmenorrhoea is one of the most common gynaecological problems worldwide among young females. The objective of This study is to correlation between pain & stress among paramedical student with primary dysmenorrhea. METHODS AND MATERIAL: Totally 50 are selected based on inclusion and exclusion criteria with the age between 15-25 years, informed consent was obtained from the subject. Then the subject was asked fill the verbal rating scale and perceived stress scale during primary dysmenorrhea. statistical analysis was done with the help of collected data. RESULT: The study result shows that there was the positive correlation r=0.098, between pain and stress para medical students with primary dysmenorrhea.

Keywords: Primary dysmenorrhea, perceived stress scale (PSS), verbal ratting scale (VRS).

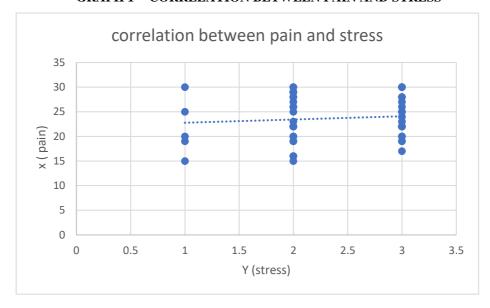
#### INTRODUCTION

Dysmenorrhoea is a term describing painful menstruation that typically involves cramps caused by uterine contraction. It is most common gynaecological disorder approximately 20% - 90% of women suffer from this problem during their reproductive age. (1) Dysmenorrhoea unrelated to any identifiable disorder almost always begin within the first year after menarche. (2) The period of adolescence is transition from childhood to adult life along with pubertal development and sexual maturation. (3) During puberty, hormonal, psychological, cognitive and physical changes occur simultaneously. (4) One of the major physiological changes take place in adolescent girls is onset of menarche. (5) The problems of irregular mensuration, excessive bleeding and dysmenorrhoea are commonly seen of which dysmenorrhoea is the commonest problem experienced by most of the adolescent girls. (7,8)

Primary dysmenorrhea is elementarily painful menses in women with no pelvic pathology. It typically begins within 6-12 months after menarche.<sup>(9)</sup> Pain is usually sharp intermittent, spasmodic in character and felt mainly in the lower abdomen, suprapubic area but it may radiate to the back and along the thighs.<sup>(10)</sup> There may be associated systemic symptoms like nausea vomiting dysmenorrhea headache fatigue, dizziness, mild fever. nervousness, mood swings and in severe cases rarely syncope. The pain occurs 12-24 hours prior to the onset of menstruation and may last for 1-2 days.<sup>(11,12)</sup> Primary dysmenorrhoea is a leading cause of absenteeism from school, work and other activities.<sup>(13)</sup> Daily routine of the females is affected due menstrual pain which in turn affects academic, sports, job and other activities.<sup>(14,15)</sup> The aim of this current study is to find the correlation between pain and stress among para medical college students with primary dysmenorrhea with helps of perceived stress scale and numerical pain rating scale.

**METHOD:** This study design was correlative study survey method, this study was conducted at cherraan's college of health sciences, physiotherapy outpatient department, Coimbatore. Study sampling technique was voluntary sampling technique, totally 50 female students were activity participated based on inclusion and exclusion criteria. Inclusion criteria of this study was subjects with the age group of 18-25 years, Subjects with Regular menstrual cycle, Subjects No Pelvic pathology. Exclusion criteria of this study was athletes, married women, subjects having any pelvic pathology, Subjects Irregular menstrual cycle. Study method was explained to the subjects and informed Consent were obtained from the subjects. Then subjects were asked to fill the Verbal rating scale and perceived stress scale.

**Data analysis:** statistical analysis was done with the help of collected data. This study result shows that there was a positive correlation between pain and stress with r value 0.098 positive correlative graph were plotted with r value.



### **GRAPH 1 - CORRELATION BETWEEN PAIN AND STRESS**

**RESULT:** The study result shows that there was the positive correlation r = 0.098, between pain and stress among para medical students with primary dysmenorrhea. Therefor during the primary dysmenorrhea, increased pain level causes the increased psychological stress level.

**CONCLUSION:** based on the study result, this study concluded that if pain is increased which also increase the stress level among para medical students with primary dysmenorrhea.

**DISCUSSION:** 50 subjects were selected for this study in voluntary sampling manner, pain was measured using Verbal rating scale and stress was measured using Perceived stress scale. The study supports the alternative hypothesis.

**ACKNOWLEDGEMENT:** the author acknowledge the immense help received from the scholars whose article are cited and included in references of this manuscript. The author also grateful to subjects of this study /authors/ editors/publishers of all those article, journals and books from where the literature for this article has been disused.

**CONFLICT OF INTEREST:** None.

## **REFERENCES:**

- 1. Farideh Salehi et al. Effect of Pilates exercise on primary dysmenorrhoea. Journal of research in rehabilitation sciences. (2012)
- 2. Chantler, I., D. Mitchell and A Fuller. The effects of three cyclo-oxygenase inhibitors onintensity of primary dysmenorrhoeic pain. Clinical Journal of Pain. 2008;24:39-44
- 3. Yasoff.D.M.Primary dysmenantioea: Advances in pathogenesis and management Journal of obstetric and gynecology. 2006;108:428-441
- 4. Noorbakhsh Mahvash et al. The Effect of Physical Activity on Primary Dysmenorrhoea of Female University Students World Applied Sciences Journal 2012;17(10):1246-1252
- 5. Berek J.S., E Novak. Berek & Novak's Gynecology. Lippincott Willams & Wilkins Philadelphia, USA.2007.
- 6. Chiou M.H., H.H.Wang. The relationship between dysmenorrhoea and menstrual attitudes among female students in vocational nursing schools. Hu. Liza Zhi 2004:51:45-52
- 7. Daley A.J. Exercise and primary dysmenorrhoea: A comprehensive and critical review of the literature Sports Med. 2008;38:659-670.
- 8. Daley AJ. The role of exercise in the treatment of menstrual disorders: The evidence Br. Gen Pract. 2009;59:241-242.
- 9. Banikarim C. M.R.Chacko, S.H.Kelder. Prevalence and impact of dysmenorrhoea on His panic female adolescents. Arch Pediatr. Adolesc. Med. 2000;154:1226-1229.
- 10. Fox E.L., D.K.Mathews. The physiological basis of physical education and athletics. 1981:Saunders College Pub., Philadelphia, USA on primary dysmenorrheal in young females. Journal of dental and medical sciences (DSRJDMS) 2014;13(6):22-32
- 11. Direkvand-Moghadam A, Khosravi A. Comparison of verbal multidimensional scoring system(VMS) with visual analogue score (VAS) for evaluation menstrual pain. Journal of pharmaceutical and biomedical sciences 2012:23:1-5
- 12. Andersch B, Milsom 1. An epidemiologic study of young women with dysmenorrhea. AmObstet Gynecol. 1982; 144:655-60
- 13. Abbaspour Z, Rostami M, Najjar SH. The effect of exercise on primary dysmenorrhoeal. J Res Health Sci 2006;6:26-31
- 14. Onuro. Impact of home-based exercise on quality of life women with primary dysmenorrhoea. SAJOG 2012:18:15-8
- 15. Gamit KS, Sheth MS, Vyas NI. The effect of stretching exercise on primary dysmenorrhoea in adult girls. Int J Med Sci Public health 2014;3:549-551