

Severity of Menopausal Symptoms and Related Factors Among 40 to 60 Year-Old Women

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Dear Editor,

I read, with interest, the original article by Abedzadeh-Kalahroudi et al. about the prevalence and severity of menopausal symptoms and related factors among women aged 40-60 in Kashan (1). In this study, the mean age of menopause was 47.6 ± 4.1 years; the average age is not much different in this study from what is reported for Iranian women (48.2 years) (2). I would like to discuss the risk factors that can increase the symptoms of menopause. Conditions like poor social status, poor economic situation and a low level of literacy, certainly make women more vulnerable to various menopausal symptoms with increased severity, for which preventive and curative solutions are yet to be determined. Abedzadeh et al. study showed that physical activity has a positive effect on menopausal symptoms, so that women who had an exercise activity rate of more than three times a week reported lower severity symptoms. In 2007, a review study found that exercise is not effective in the management of vasomotor symptoms (3). This finding was confirmed in 2009 (4). Further studies have proved the positive effect of exercise on mental health, somatic symptoms and improved quality of life in women who have experienced vasomotor symptoms. Given the many benefits of exercise on general health, it can be recommended that women in menopause still continue their exercise. Exercise is recommended similarly to all ages: at least 30 minutes per day (one should be able to talk but not sing, i.e., breathing and heart rate will be increased) (5-9). Although in Abedzadeh et al. study, the duration of physical activity is reported by women; however, the type of exercise is not reported. Activities such as cycling, swimming, walking and yoga can help alleviate the symptoms of menopause. Abedzadeh et al. reported differences in the frequency of vasomotor symptoms, which may have been due to differences in diet, especially the consumption of phytoes-

trogenic foods. Nutrition plays an important role in the prevention and management of changes in body composition, but the role of nutrition in treating symptoms such as hot flashes is unclear. However, Pruthi's study showed that flaxseeds reduced the frequency and severity of hot flashes (10). Estrogen-like compounds found in flaxseeds and other soy foods are bound to the estrogen receptors, and improve flushing. Although many studies have been conducted on the effectiveness of these substances on hot flashes, there are still many unanswered questions (11). Other factors that influence the vasomotor symptoms include a high percentage of body fat, which is not addressed in Abedzadeh et al. study. Per-unit increase in bodyweight decreased the risk of having night sweats. As percentage of body fat increased, there was a decreased risk of experiencing hot flashes. According to Thurston et al., increase in hot flashes and night sweats are associated with body fat percentages (12). Given the importance of the menopausal period in women's lifetimes, health policy-makers need to integrate programs of education in service centers to improve vision relating to this period. These programs must increase the quality of life in women and change women's lifestyles from passive to active.

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