

The discussion of menopause in community: Providing opportunities for knowledge and concepts



<https://doi.org/10.56238/globalhealthprespec-080>

Cisnara Pires Amaral

Regional Integrated University of Alto Uruguay and the Missions – URI/Santiago
Master's in environmental technology, UNISC/RS
Professor of the Department of Biological Sciences and of the Course of Aesthetics and Cosmetics

Vanessa Fatima Gazoni

Regional Integrated University of Alto Uruguay and the Missions – URI/Erechim
Doctor in Health Sciences, Federal University of Mato Grosso – UFMT
Professor of the Course of Aesthetics and Cosmetics

Nagila Bernarda Zortéa

Regional Integrated University of Alto Uruguay and the Missions – URI/Erechim
Master's in human Aging
Professor of the Course of Aesthetics and Cosmetics

Douglas Bacin Pinto

Regional Integrated University of Alto Uruguay and the Missions – URI/Santiago
Academic of the VI semester of the Nursing Course

Luana Casarotto de Borba

Regional Integrated University of Alto Uruguay and the Missions – URI/Santiago
Academic of the IX semester of the Nursing Course

ABSTRACT

We live in times that taking care of esthetics has become a standard in society, but there is still a lack of information regarding the cellular and metabolic dysfunctions that occur in the climacteric and menopausal phase. Thus, an Online Journey on Menopause was held during Esthetics and Cosmetics of the Regional Integrated University of Alto Uruguay and the Missions/URI, with the objective of providing opportunities for the protagonist women over 40 years of age, enabling discussions related to hormones and their consequences in the body. To this end, a partnership was made with the Academic League of Health and Environment (ALHE), registration in the event through the University's website and contact with the volunteer speakers, namely: Biologist, Pharmacist, Doctor and Psychologist. To discuss the results, the Grounded Theory (GT) was chosen. It was noted that the activity had 75 registrations, that there was participation of women through interaction in the chat during the lectures, that the feedbacks received demonstrate that discussing menopause, providing opportunities for knowledge sharing and inserting academic knowledge in the community are primary prevention actions capable of enabling autonomy, criticality and protagonist action of mature women.

Keywords: Menopause, Primary care, Health.

1 INTRODUCTION

1.1 THEORETICAL FRAMEWORK

1.1.1 Physiological and metabolic aspects of menopause

It is noted that the concept related to menopause has become a taboo in society. Women at this stage of life tend to denialism, because they believe that they will be attesting to the bankruptcy of life as a productive woman. This difficulty may be directly related to the beauty standards imposed by the media and the large number of rejuvenation techniques.



Obviously, such techniques help women, providing opportunities to pass through this period with more empowerment, but it is essential that women also take possession of concepts and meanings, understanding the physiological mechanisms that occur in this phase. Fonseca (2015) notes that climacteric women are tormented by society, as there are still beliefs about this phase of life related to body aging.

Aging is not only linked to hormonal changes, but also involves social, economic, physiological and psychological aspects. However, it is important to note that:

Hormonal fluctuations lead to changes, not only in reproductive function, but in other important body areas. It is worth noting that amenorrhea can also be of induced cause, resulting from the removal of parts of the female reproductive system, for example. Thus, the arrest of ovarian activity induces a chronic inflammatory character, increasing the susceptibility of women to various diseases (LINS et al.2020, p.12019).

Still collaborates Fonseca (2015) the intensity of symptoms is influenced by sociocultural factors, psychological, marital, family and professional situation. Linked to this, the woman in this phase lives the myth of the loss of sexual desire, it is believed that this factor is related to the stereotyped social view about the role of the woman (wife and mother) that may negatively interfere in the vision about herself and in her relationship with people and the world (VALENÇA; NASCIMENTO FILHO and GERMANO, 2010).

Thus, it is essential that these women have access to health information to understand this period, re-signifying this phase of life. Thus, it is essential to discuss what the absence of hormones will cause in the body and what are the prospects for this new phase of life. In this context Amaral et al (2022) observe that health promotion activities about menopause are moments that need to be in evidence, as they provide knowledge, engagement, discussions and curiosity, contributing to changes in habits, ensuring the crossing of this period with more tranquility.

Carvalho, Cohen and Akerman (2017) understand that promoting health helps protagonism, as it becomes a way to prevent diseases and seek improvements in the life of the community. This will be the purpose of this work, to provide discussions in conversation circles, instigate curiosity, share knowledge to demystify taboos, contributing so that in addition to an impeccable aesthetic, women are equipped with scientific knowledge about one of the most important phases of their lives.

1.2 UNDERSTANDING BETWEEN THE BIOCHEMICAL ASPECTS OF MENOPAUSE AND AESTHETIC IMPACTS

The biological process of menopause is the end of spontaneous menstruation that occurs by changing the structure of the ovarian follicles, while there is a reduction in the secretion of estrogen and progesterone. It will usually occur in the lives of women along with the aging process, possibly occurring between 40 to 58 years. After the "start" the woman finds herself in a new hormonal



environment impacting her body daily. Some exogenous factors can anticipate the effects of menopause, use of specific medications, smoking and overweight, factors that potentiate the effects of menopause (ANTUNES; MARCELINO and AGUIAR, 2003).

Among the many effects that can be observed, it turns out that the loss of collagen is one of the most common complaints of this phase. This process may impact women's lives, but it is necessary to have knowledge about this process and how to minimize this impact.

The drop in the level of estrogen has an important relationship with reduced collagen, decreased sebaceous secretions, loss of elasticity and consequently atrophy of the skin, in addition to deficiency in the healing process and emergence of expression lines. The connection of the visible appearance of skin changes with the fall of estrogen secretion is linked to the estrogen receptors present in the dermal fibroblast, keratinocytes, in addition to the direct action on the mitochondrial membrane potential (SHU; MAIBAC, 2011)

Evidence also points out that the thickening of the skin is associated with a drop in the level of estrogen in the body, presenting deficiency that varies between 15 to 30%, in addition to changes in vascularization and quality of extracellular matrix, there is a loss of elasticity. This hormone is also responsible for increasing the hyaluronic acid content and hydration of the skin, resulting in loss of elasticity (HALL; PHILLIPS, 2005).

It is known that this loss of collagen will occur anyway, but the Brazilian Society of Dermatology (BSD) points out specific care to minimize skin damage in this phase such as: use of sunscreens and adequate sun exposure, increased water consumption, healthy diet rich in proteins and fatty acids, use of exfoliating in the skin care routine twice a week. Other recommendations include avoiding tobacco, using firming lotions not only on the face but neck and neck, ingesting phytoestrogens with proper medical guidance to further slow the damage, and using moisturizing, antioxidant and amino acid masks to maintain skin integrity (WDS, 2023).

It is believed that the understanding of physiology and its relationship with nutrition and physical activity can help women in relation to the pressure exerted by the media; in addition to strengthening skin care, because it is understood that the meaning of beauty for women, may not occur only from one perspective, but as a result of experiences, customs and myths (ALBARELLO et al, 2016).

Witt and Schneider (2011) report that body image is the way the individual sees himself. The media and industry will be responsible for creating desires and reinforcing standardized images; thus, it is observed that the most striking behaviors are related to the habit of dieting, consuming dietary products and seeking aesthetic procedures (WITT; SCHNEIDER, 2011). Thus, it is essential that women appropriate knowledge, making choices that can help the passage of this phase more naturally.



2 METHODOLOGY

The activity is related to the discipline of Biological Processes of the Course of Aesthetics and Cosmetics of EAD URI, this discipline has as one of the curricular components the sex hormones, senescence and epithelial tissue, so it was proposed the II Online Journey where hormonal issues and their relationship with physiology and metabolism were discussed; the use of aromatherapy to minimize these impacts; Hormone Replacement Therapy (TRP) and health women's psychology.

To this end, the teachers partnered with the Academic League of Environment and Health (LiASM), since in 2022 the league held the I Online Journey, with the theme in question. Registration took place through the University's website, free of charge, where enrollees were directed to a group of *WhatsApp*. The lectures took place on July 3 and 4, from 7 pm to 10 pm via *google meet*. The event was publicized through the social networks of the professors involved and LiASM, on the city's radios and newspapers and through the University's website (Figure 1).

The speakers worked voluntarily and had the participation of Biologist, Pharmacist, Physician and Psychologist. For the analysis of this activity, we opted for the Grounded Theory (GT), a type of interpretative research that seeks to produce an overview about the activity performed and its importance for the subject, in order to build small and medium-sized theories to explain social processes. According to Cassiani, Caliri and Pelá (1996) in this research the investigator looks for processes that are happening in the social scene, starting from a series of hypotheses to explain a phenomenon.

About the research still corroborate Strauss and Corbin (2022) the main requirement is search for a guided investigation that understands the meaning of the relationships and interactions between social phenomena and the understanding of reality and human action, identifying the emotion that is generated based on experiences.

The experience of the activity allowed us to understand the importance of the experience with the elaboration of categories that exemplify the context of the extension activity, thus constructing the central category, entitled: You are in menopause, so what?, delimiting 3 categories of analysis: demystification of taboos and concepts; empowerment and conscious vision, women's protagonism. The categories are illustrated in an explanatory theoretical scheme in the results and discussion.



Figure 1 – Folder of information about the lectures of the Journey.

II Jornada Online Sobre
Menopausa:
TEMA: RESPIRE: VOCÊ ESTÁ NA MENOPAUSA, E DAÍ?

SEGUNDA-FEIRA

03
JULHO

CISNARA PIRES AMARAL | Relação entre metabolismo celular, senescência e menopausa

DRA VANESSA FÁTIMA GAZONI | Efeitos da aromaterapia nos sintomas da menopausa

TERÇA-FEIRA

04
JULHO

ADRIANE CIRNE | Menopausa para iniciantes: como você pode simplificar a sua

CARLA TUSI AMIAN | Resignificando a Menopausa: Descobrimo a Sabedoria, Consciência e Poder

Realização:

| EAD

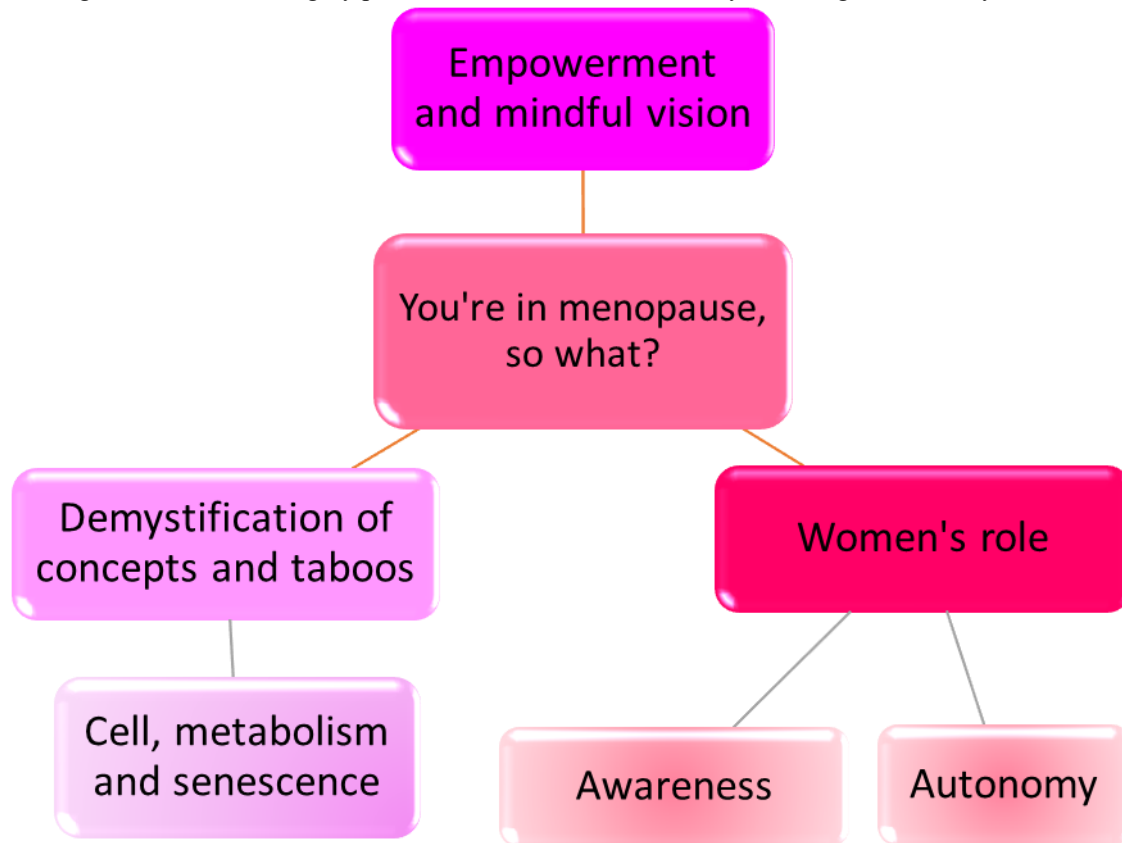
Source: Prepared by the authors.

3 RESULTS AND DISCUSSION

The discussion begins by presenting the central category (Figure 2) constructed from the GT of the study and the categories of analysis constructed from the perception of the researchers about the activity performed.



Figure 2 – Central Category presented from the GT of this study and categories of analysis.



Source: Prepared by the authors.

It is perceived that extension activities that prioritize women's health, promote primary health care, helping women over 40 years to determine a time to discuss menopause and the processes that lead to cellular senescence. It is believed that there are still taboos in relation to this period, because many women deny this phase of life, prioritizing a single symptom that would be the "hot flashes"; but studies show that estrogen, one of the hormones produced in the ovaries is related to lack of lubrication, intestinal problems, problems associated with the absorption of vitamin D and osteoporosis, stroke and infarction, accumulation of abdominal fat, loss of collagen, among others.

Corroborate Alves et al (2015) the integrity of women's health, in addition to cultural, social, psychological and emotional factors, can help the transformations in your body, with diverse symptoms, strange, incomprehensible and often difficult to be verbalized, highlighting the hot flashes, cold sweats, insomnia, sadness, emotional instability, changes in sexual habits, skin, body fat distribution and silhouette.

Thus, the integrity of health is constituted by a sum of factors, thus, it is essential to understand these factors, as an aid to the acceptance of this phase of life. It is noted that the media is an impact factor in this phase, because it coexists with numerous rejuvenation techniques, which mitigate the impacts. But the lack of studies and works on menopause, the lack of dialogues makes women have scant notions about the period, paying attention only to the "loss of collagen" or "Hot Flashes", visible



symptoms, forgetting the other silent symptoms that the body is releasing. Maron et al. (2011) already identified the absence of information and the scarcity of studies referring to this period, believing that the information would be essential for women to be able to identify the symptoms of this phase of life.

In relation to category 2 called: Empowerment and conscious vision, it is believed that some women realize that scientific knowledge will make a difference in their lives, this fact was perceived during the activity, because we had 75 registrations in the II Journey. And during the first day of activity, we had 56 women who were *online* and on the second day we got to 48 women. Although we did not get the presence of all, it is observed that we had a great success, because for 2 days this group of women was interested in discussing this phase of life, demystifying one of the biggest taboos of this phase which is the Hormone Replacement Therapy (HRT). It is noticed that, in general, women have little knowledge about HRT, with numerous beliefs in false information, which combined with the lack of guidance, generates insecurity, especially in relation to the conditions of use, contraindications and available alternatives (BELIZÁRIO et al., 2021).

Given this situation, it is of paramount importance that different therapeutic forms are investigated to mitigate climacteric symptoms, since many women are in risk groups in relation to HRT. Therefore, women who for some personal, psychosomatic or physiological incompatibilities are unable to perform a traditional hormone therapy can adhere to Complementary Integrative Practices (ICPs), including aromatherapy. It is known that this practice has been standing out intensely, due to the use of the properties of essential oils (volatile concentrates extracted from vegetables).

Several studies have shown that the use of essential oils individually or in association, through inhalation and body/ facial massage, promoted statistically significant improvements in sleep quality, self-esteem, anxiety, skin aspects, vasomotor symptoms, sexual function, reduction of hot flashes and increased estrogen levels. Therefore, aromatherapy can be used by menopausal women as an alternative therapy, with noticeable benefits, in addition to being a simple, non-invasive and safe method (MAIA et al,2021; BALTOKOSKI; NASCIMENTO and SILVA, 2022).

These discussions enhance primary health promotion. Primary prevention is the best strategy to prevent the development and control of risk factors that favor the establishment of heart disease. In this sense, these discussions promote awareness regarding healthy diet and physical activity, paramount factors to achieve optimal cardiovascular health, since this is a phase of great risk for heart disease (EL KHOUDARY et al., 2020).

Category 3 is related to "Women's Protagonism: autonomy and awareness". It is noted that we can only have autonomy from the moment we understand the physiology of the organism and its relationship with metabolism. Thus, it is necessary to disseminate scientific knowledge to understand that: "aging does not have to be, as has been thought for so long, a slippery one-way street towards



disease and decadence. We will all age, but how we age depends a lot on the health of our cells (EPEL; BLACKBURN, 2017, p.18,19).

Thus, it is necessary to demystify the culture of aging, as an unproductive and finished form. It is necessary to pay attention to culture as a producer of categories of thinking, feeling, acting and expressing. It articulates concessions, conflicts and resistance. It is the space of the expression of subjectivity (MINAYO, 2014).

And to assist the discussion here are reports received after the end of the activities:

"I wanted to listen twice as long, I had no idea how much estrogen influences the body, because I only hear about hot flashes. Gratitude to you."

"Discussing this phase of my life was fundamental because I am becoming very depressed, especially with the changes in the body and face. Understanding that there are exits was phenomenal. Thank you, teacher!"

"At first I thought it would be silly, kind of a waste of time, but I confess to you that I was very pleased. It is a very difficult time, we lack reading, we do not understand anything and we are still ashamed to talk about this phase. I'm grateful to you, who provided us tonight with discussions with different types of professionals."

"Thank you, thank you and thank you for thinking about the women who are tormented every day by beauty standards, who are terrified without understanding what is happening, who are ashamed to accept and discuss this phase."

"I thank the teachers for their concern with women's health, the event was very good, it brought information, discussion and maturity in relation to the moment we experienced."

The reports make clear the satisfaction, the opportunity and the awareness in relation to the moment experienced. Amaral et al. (2022) report that health promotion activities offered to women over 40 years of age about menopause are punctual moments that need to be in evidence, as they provide knowledge, engagement, discussions and curiosity, contributing to changes in habits, ensuring the crossing of this period with more tranquility.



REFERENCES

- ALBARELLO, M.J. et al. Percepção de beleza e cuidados estéticos em mulheres rurais pós-menopausa residentes em município do interior do Rio Grande do Sul. *RBCEH*, v.13, n.1, p.35-47, 2016.
- ALVES, E.R.P. et al. Climatério: a intensidade dos sintomas e o desempenho sexual. *Texto & Contexto-Enfermagem*, v.24, p.64-71, 2015.
- AMARAL, C.P. et al. Promoção da saúde e a importância das discussões sobre a fisiologia do corpo na menopausa. *Revista Concilium*, v.22, n.7, p.312-321, 2022.
- ANTUNES, S.; MARCELINO, O.; AGUIAR, T. Fisiopatologia da menopausa. *Rev Port Clin Geral*, v. 19, n. 1, p. 353-357, 2003.
- BALTOKOSKI, C.B.; NASCIMENTO, M.C.; SILVA, G.M.D. Efeitos da aromaterapia nos sintomas da menopausa: uma revisão integrativa da literatura. *Brazilian Journal of Development*, v.8, n.4, p. 25520-25538, 2022.
- BELIZÁRIO, R. D. et al. Conhecimento das mulheres sobre a terapia de reposição hormonal. *Revista Médica do Paraná*, v. 79, n. 1, p. 14-18, 2021.
- CASSIANI, S. de B.; CALIRI, M. H. L.; PELÁ, N. T. R. A teoria fundamentada nos dados como abordagem da pesquisa interpretativa. *Revista Latinoamericana de Enfermagem*, v. 4, n. 3, p. 75-88, 1996.
- EL KHOUDARY, S. R. et al. Menopause Transition and Cardiovascular Disease Risk: Implications for Timing of Early Prevention: A Scientific Statement from the American Heart Association. *Circulation*, v.142, n.20, p.506-532, 2020.
- EPEL, E.; BLACKBURN, E. O segredo está nos telômeros: receita revolucionária para manter a juventude e viver mais e melhor. Solange Pinheiro (Trad). 1ª ed. São Paulo: Planeta, 2017.
- FONSECA, F.M. et al. Climatério: influência na sexualidade feminina. *Revista da Universidade Vale do Rio Verde*, v.13, n.2, p. 639-648, 2015.
- HALL, G.; PHILLIPS, T. J. Estrogen and skin: the effects of estrogen, menopause, and hormone replacement therapy on the skin. *J Am Acad Dermatol*, v. 53, p. 555–568, 2005.
- MAIA, V. F. et al. O uso da Aromaterapia no climatério: uma revisão de literatura. *Cad. Naturol. Terap. Complem*, v.10, n.19, p.88, 2021.
- MARON, L. et al. A assistência às mulheres no climatério: um estudo bibliográfico. *Rev Contexto Saúde* [online], v.10, n.20, p. 545-550. Disponível em: <https://www.revistas.unijui.edu.br/index.php/contextoesaude/article/view/1576/1331>
- MINAYO, M.C.S. O desafio do conhecimento: pesquisa qualitativa em saúde. São Paulo: Hucitec, 2014.
- SHU, Y.Y.; MAIBACH, H.I. Estrogen And Skin: Therapeutic Options. *Am J Clin Dermatol*, v. 12, n. 5, p. 297-231, 2011.



SOCIEDADE BRASILEIRA DE DERMATOLOGIA. Dicas básicas para cuidar da pele da menopausa. Disponível em: <https://www.sbd-sp.org.br/geral/oito-dicas-para-cuidar-da-pele-na-menopausa/> . Acesso em: 16 jul. 2023.

STRAUSS, A.; CORBIN, J. Bases de la investigación cualitativa: técnicas y procedimientos para desarrollar la teoría fundamentada. Medellín: Facultad de Enfermería, Ed. Universidad de Antioquia, 2002, 45 p.

VALENÇA, C.N.; NASCIMENTO-FILHO, J.M.; GERMANO, R.M. Mulher no climatério: reflexões sobre desejo sexual, beleza e feminilidade. Saúde Soc, v.19, n.2, p.273-285, 2010.