

Periods shouldn't bring any young person's world to a full stop. Period.

An online survey of Adolescents' Experience of Menstruation



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Introduction

Although it is known that periods impact adolescent lives, understanding this from their perspective is less well appreciated. Co-design is a method of ensuring the input from the cohort of concern. We conducted an online survey to capture the experience and impact of menstruation on adolescent lives and how they manage their symptoms. This survey was part of the Longitudinal Study of Teenagers with Endometriosis, Period and Pelvic Pain (LongSTEPPP), a five year observational study that seeks to improve understanding and care of adolescents who experience endometriosis, period and pelvic pain.

Methods

Adolescents aged 12 to 18 years whose periods commenced at least three months prior and who demonstrated capacity to consent were eligible to participate in an online survey. Recruitment was via social media and adolescent gynaecology outpatient clinics.

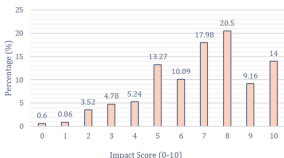
Results

Of the 2362 potential participants who were screened, 1811 met inclusion criteria and completed the survey (mean age 15.7 years).

The most frequent sources of education about periods were conversations with mothers (61.1%), high school health classes (70.6%) or primary school health classes (61.6%).

Access to sanitary products had been, or was currently, a concern for 52.5% of adolescents.

How much does having a period impact your life?



Periods had a self-reported 'moderate' (5 or higher) or greater impact on 85% of adolescent lives. Adolescents rated their period pain when at it's worst 8.7/10 and on average 5.8/10.

Symptoms of nausea, headache, low energy and depression were among the varied symptoms reported by more than 70% of adolescents during their periods.

Results cont.

Most (77.7%) adolescents currently missed activities at least occasionally due to their period. Pain (90.7%), heavy flow (56.2%) and worry about leakage (49%) were the most common reasons for missed activities.

Frequency of missed activities due to menstruation



Further advice about menstrual concerns was commonly sought from GPs (39.8%), nurses (21.3%) and pharmacists (15.6%).

To manage menstrual symptoms, heat packs (66%), pharmacy/supermarket medication (55.8%) and prescribed medications (28.6%) were often used. Few respondents (5.4%) used nothing.

Discussion & Conclusion

This survey captured the menstrual experiences of a large cohort of Australian adolescents.

The prevalence of menstrual pain in this cohort (85%) was similar to that previously reported rates of dysmenorrhoea in high school students. Non-pharmacological means of menstrual management were frequently used as has been reported elsewhere. Paracetamol was used by 43.7%, a higher rate than ibuprofen (38.8%), mefenamic acid (11.1%) and naproxen (13.8%), despite the limited effectiveness of benefit in dysmenorrhoea compared with the evidence for NSAIDs.⁴

While 85% of adolescents reported a 'moderate' or higher impact score, more than a third (34.4%) had never consulted a health care practitioner about their periods. Societal normalisation of menstrual pain as well as stigma and reluctance to discuss menstrual concerns with health care practitioners are likely barriers to adolescents seeking assistance with their menstrual symptoms.

The findings of this survey will be assimilated into future surveys as part of the longitudinal study and ensure the voices and concerns of adolescents living with endometriosis, period and pelvic pain are heard.

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