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New needs for menopausal women during COVID-19 pandemic. A physician-based investigation

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ABSTRACT

It was evaluated whether the COVID-19 pandemic may have influenced the manifestation of menopausal symptoms. In a web interview, 143 physicians, experts on the menopause, were asked to rate their perceived prevalence of hot flush, sleep disorder, sexual disturbance, anxiety and depression as 'rare', 'seldom', 'frequent' and 'very frequent' in patients they managed prior to and during the COVID-19 pandemic. According to physicians, there was no major change in the prevalence of hot flush, sleep disorder and sexual disturbance but prevalence of anxiety (39-8% vs 75.5%; $p < 0.0001$) and depressive (35.6% vs 72.0%; $p < 0.0001$) symptoms increased during COVID-19 pandemic. COVID-19 pandemic has changed the composite picture of menopausal symptoms, challenging physicians to adjust their therapeutic approach to the new need. Approaches capable to treat vasomotor symptoms but also highly effective on mood disturbance should be preferred.

SOMMARIO

Lo studio ha voluto valutare se le manifestazioni della sintomatologia climaterica fossero cambiate durante la pandemia da COVID-19. Lo studio è stato effettuato durante un webinar su 143 specialisti esperti nel trattamento dei disturbi menopausali. È stato chiesto di definire, in relazione al periodo pre-COVID e al periodo pandemico, la prevalenza nelle loro pazienti di vampate di calore, disturbi del sonno, disturbi della sessualità, ansietà e sintomi depressivi, secondo le categorie "rara", "talvolta", "frequente" e "molto frequente". Dai dati emerge che mentre la prevalenza delle vampate di calore, disturbi del sonno e della sessualità non si è modificata, la prevalenza dei disturbi dell'ansia (39-8% vs 75.5%; $p < 0.0001$) e della depressione (35.6% vs 72.0%; $p < 0.0001$) è aumentata durante la pandemia. Il cambiamento nella prevalenza dei sintomi menopausali richiede un adattamento terapeutico alle nuove necessità e la scelta di presidi che siano in grado non solo di curare i sintomi vasomotori ma anche di avere un effetto positivo sul tono dell'umore.

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Key words

Menopause; COVID-19; anxiety; depression; psychological symptoms; vasomotor symptoms; hot flush; climacteric.

INTRODUCTION

Hot flushes are the most evident and frequent symptom of menopause (1, 2) but menopausal symptoms are not limited to vasomotor instability and are related to many functions of the brain, and peripheral organs and apparatus (3-11). Taken together, the disturbances making up menopausal symptoms, as evaluated by climacteric scales, are mainly based on menopause-related mood changes (12, 13) that impact a woman's daily relationships with others, her perceptions and activities. Everyday life has changed remarkably during the COVID-19 pandemic. Social and family contacts have been reduced (14), there are fewer work opportunities and salaries have dropped (15), access to healthcare facilities has been hampered (16, 17), and our future financial well-being and health along with that of our families is uncertain (18). All these factors may be having a negative impact on our psychological equilibrium (19, 24), and this could be particularly evident in menopausal women, who are already living a critical period of their lives (5, 17, 22, 23). In these women, the COVID-19 pandemic may change the prevalence of symptoms and the composite picture of menopausal complaints. New needs and requests may emerge, challenging physicians to find novel therapeutic approaches specifically tuned to meet them. In this investigation, we evaluated whether physicians have experienced change in the prevalence of symptoms and request of treatment among their menopausal patients during the COVID-19 pandemic.

MATERIALS AND METHODS

An investigation was performed during a webinar offering an update on menopause management during the COVID-19 pandemic. The webinar was supported by the Italian Society of Menopause and was delivered to 143 participants, all members of the Italian Society of Menopause with specific experience on menopause. Prior to the start of the session, physicians were asked to answer 5 questions investigating their perception of the frequency of menopausal symptoms that women usually complained about prior to the COVID-19 pandemic. Questions were specific for hot flushes, sleep disorders, anxiety, depression and sexual disturbances. For each of the 5 symptoms, physicians were given 10 seconds to categorize their perceived prevalence of these

symptoms in their patients as 'rare', 'seldom', 'frequent', or 'very frequent'. They were then asked to concentrate on patients they were managing during the COVID-19 pandemic. The same 5 questions were resubmitted with the same procedure.

The results obtained were elaborated almost immediately and made available graphically for discussion. Data were then tabulated. The number of physicians rating the perceived prevalence of each single symptom in the pre- and in the COVID-19 era as 'rare', 'seldom', 'frequent' and 'very frequent' was calculated. Physicians rating a symptom prevalence as 'rare' and 'seldom' were also considered together in a single group, and those who defined a symptom prevalence as 'frequent' and 'very frequent' in another single group. Data referring to the pre-COVID-19 era and to during the pandemic were compared by contingency tables and the chi squared test. $P < 0.05$ was considered statistically significant.

RESULTS

According to the physicians, the prevalence of hot flushes in their patients remained largely unchanged during the COVID-19 pandemic even though more physicians rated prevalence of hot flushes as 'frequent' ($p < 0.027$) and fewer physicians rated this symptom as 'very frequent' ($p < 0.009$) during the pandemic (**table I**). Physicians observed no major change in the prevalence of sleep problems, although a small increase was observed in the number of those rating sleep problems in their patients as 'very frequent' during the COVID-19 pandemic ($p < 0.035$) (**table I**). There was no change in physicians' perception of the prevalence of sexual disturbances in patients before and during the COVID-19 pandemic (**table I**). A higher number of physicians rated prevalence of symptoms of depression in their patients as 'frequent' ($p < 0.0002$) and 'very frequent' ($p < 0.0001$) during the COVID-19 pandemic (**table I**). Similarly, a higher number of physicians rated the prevalence of symptoms of anxiety in their patients as 'frequent' ($p < 0.008$) and 'very frequent' ($p < 0.0001$) during the COVID-19 pandemic (**table I**). When categories 'rare' and 'seldom' were combined in a single group, and 'frequent' and 'very frequent' in another group, physicians rated a similar prevalence of 'frequent/very frequent' for the symptoms hot flushes (93.2% vs 96.0%), sleep

problems (93.6% vs 86.4%), and sexual problems (79.0% vs 79.7%) in patients they managed during than prior to COVID-19 pandemic, respectively (figure 1). More physicians (75.8% vs 39.8%, respectively; $p < 0.0001$) observed their patients suffered from 'frequent/very frequent' anxiety symptoms during the COVID-19 pandemic than before it (figure 1). Similarly, more physician (72.0% vs 35.6%, respectively; $p < 0.0001$) observed their patients suffered from 'frequent/very frequent' symptoms of depression during the COVID-19 pandemic than before it (figure 1).

DISCUSSION

The COVID-19 pandemic has induced a new way of life around the world, characterized by social restraints, loneliness, reduced support, occupational uncertainties, fear of the disease, fear for the health of relatives, and continuous negative input from the media (14-18). Several reports indicated that all these factors have an impact on psychological equilibrium, increasing disturbances, particularly anxiety and symptoms of depression (19-24). An increase in anxiety and symptoms of depression has also been reported as a manifestation of menopausal symptoms (1, 5). Prevalence is usually lower and less defined than that of classic menopausal

symptoms such as hot flushes (1). Thus, most of the therapies and remedies for women with menopausal symptoms are directed to improve hot flushes (11, 25-29).

Current investigation indicates that according to physicians, who are used to managing menopausal symptoms, the prevalence of anxiety and symptoms of depression has increased significantly during the COVID-19 pandemic, to reach the prevalence of hot flushes. This modification in the composite picture of menopausal symptoms has posed greater therapeutical challenges. Position statements and guidelines (11, 25-29) have given suggestions on hormonal and non-hormonal treatments for menopausal symptoms but have failed to indicate how to manage mood changes, even if these represent a major component of climacteric scales evaluating menopausal symptoms and quality of life (12, 13). Mood disturbances increase in the menopausal transition (1, 5) and hormone therapy was reported to improve anxiety and symptoms of depression (5). Yet its effect may not be sufficiently powerful in conditions of elevated psychological disturbance.

The same applies for non-hormonal remedies that have been studied mainly to improve vasomotor symptoms (29). Physicians are now requested to give greater consideration to mood alterations and to become more familiar with the manage-

Table I. Percentage of physicians (n = 143) who rated as 'rare', 'seldom', 'frequent' or 'very frequent' the prevalence of menopausal symptoms in women evaluated prior to or during the COVID-19 pandemic.

	Rare (%)	Seldom (%)	Frequent (%)	Very frequent (%)
Hot flushes				
Pre-COVID-19	0.7	6.3	28.7	67.3
During COVID-19	0	7.7	41.2	52.0
p	0.317	0.643	0.027	0.009
Sleep problems				
Pre-COVID-19	2.1	10.4	64.7	21.7
During COVID-19	0.7	6.3	60.8	32.8
p	0.314	0.210	0.495	0.035
Sexual problems				
Pre-COVID-19	1.4	18.9	48.2	31.5
During COVID-19	2.8	19.6	40.5	38.5
p	0.409	0.881	0.190	0.215
Anxiety symptoms				
Pre-COVID-19	4.9	55.2	36.3	3.5
During COVID-19	0.7	17.5	52.0	23.8
p	0.031	0.0001	0.008	0.0001
Depressive symptoms				
Pre-COVID-19	12.6	51.7	32.8	2.8
During COVID-19	4.2	23.8	54.5	17.5
p	0.010	0.0001	0.0002	0.0001

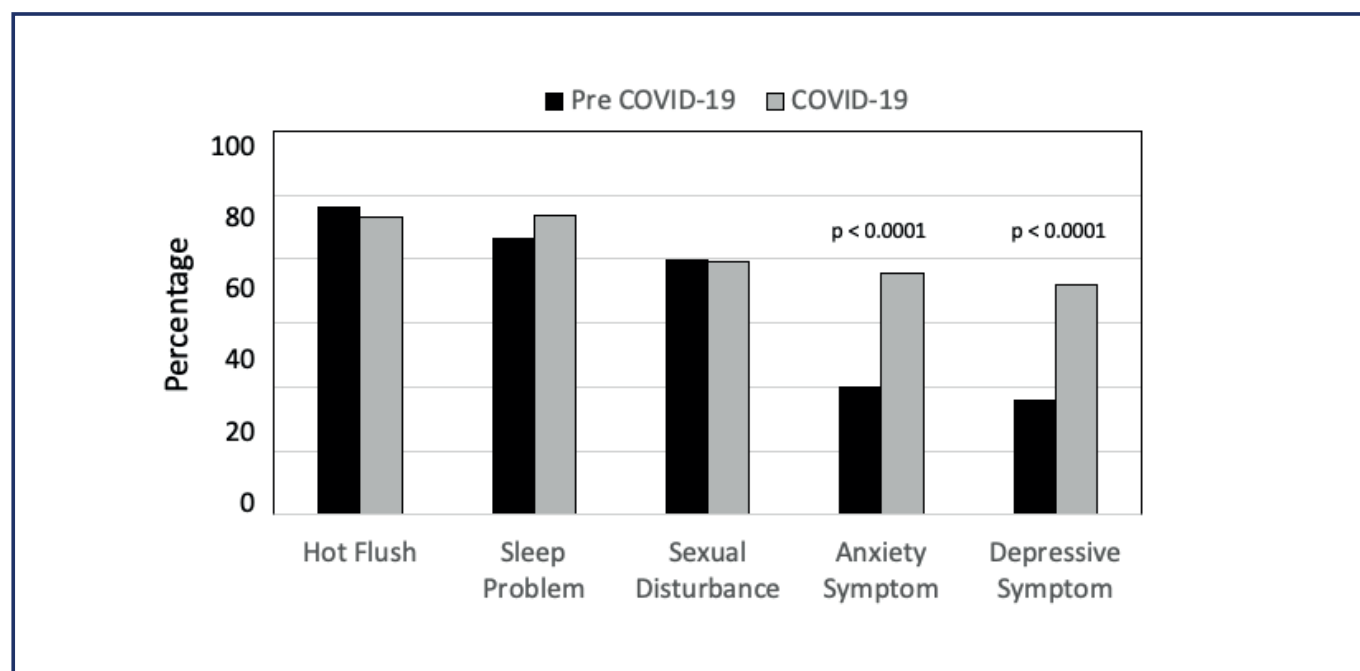


Figure 1. Percentage of physicians ($n = 143$) who rated as 'frequent' or 'very frequent' the prevalence of different menopausal symptoms in women evaluated prior to and during the COVID-19 pandemic.

ment of these increasingly frequent yet often neglected disturbances; here, remedies also capable of re-establishing psychological equilibrium could be more useful. Therapeutical choices should now be directed mainly to pharmacological (30) or non-pharmacological (31-33) remedies capable not only to treat vasomotor symptoms but also to concomitantly improve mood.

A major limitation of this investigation is that it was not performed with the use of psychological scales. However, it involved physicians used to treating symptoms of the menopause, who perceived new demands and were requested to give new answers to women's needs. They observed that COVID-19 has altered the composite picture of menopausal symptoms.

CONCLUSIONS

The change in the manifestation of menopausal symptoms, during COVID-19 pandemic, has posed a renewed challenge and the need to adapt therapeutic approaches to the new emerging requests.

CONFLICT OF INTERESTS

The authors declare that they have no conflict of interests.

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