



A STUDY TO ASSESS THE EFFECTIVENESS OF YOGA ON DYSMENORRHOEA AMONG FEMALE B. Sc. NURSING STUDENT AT SELECTED NURSING COLLEGE OF DEWAS M.P.

¹Mrs. Roopa Rani Pathak, ²Dr. Sneha Sahay Youtham

¹M.Sc. Nursing Students ²Guide/HOD, Obstetrical & Gynaecology Nursing

Abstract

Introduction –Dysmenorrhea is recognized as a among female major health hazard of the contemporary century. The nursing students are likely to experience more Dysmenorrhea than their friends enrolled in other programme. Few weeks of disciplined yoga practice is a promising approach for dealing with the reduces pain.

AIM- The aim of the study was to assess the effectiveness of Yoga on Dysmenorrhea among Female B.Sc. Nursing students at selected Nursing colleges in Dewas M.P..

Material and Methods- In the study, quasi experimental nonequivalent control group pre test post test design was used and a non-probability convenient sampling technique was adopted to select 60 B.Sc. Nursing students, in control group.

Pilot study The Prepared tools was tried out on six Nursing Students who were studying in Gynodaya college of nursing from 02/02/2019 to 10/02/2019 The objective of pilot study was to test the clarity , applicability and feasibility of standardized tool. The tool was found to be practicable and feasible to collect final data.

Results -Analysis is the systematic organization and synthesis of research data and the testing of research hypothesis using those data “Polit and Hungler (1999)”

Plan for data analysis would be as follows:

- The data will be presented in the form of tables and diagram
- A master data sheet was prepared to complete the data by the investigator.
- Mean & standard deviation of pre & post test level of dysmenorrhoea.
- Mean of pre-test to compare the significant difference among female Nursing Students.
- Demographic data containing selected sample characteristics was analyzed using frequency and percentage distribution.
- Paired “t” test to determine the significance between mean pre test score and post test score of effectiveness of yoga in Dysmenorrhoea.
- Chi-square test for association would be to find out the significant association between effectiveness and level of Dysmenorrhoea.

CONCLUSION

After the implementation of yoga during dysmenorrhoea is very benedictional.

Background of the study- Dysmenorrhoea, also known as painful periods, or menstrual cramps, is pain during menstruation. Its usual onset occurs around the time that menstruation begins. Symptoms typically last less than three days. The pain is usually in the pelvis or lower abdomen. Other symptoms may include back pain, diarrhea, or nausea.¹ In young women painful periods often occur without an underlying problem. In older women it is more often due to an underlying issue such as uterine fibroids, adenomyosis, or endometriosis. It is more common among those with heavy periods, irregular periods, whose periods started before twelve years of age, or who have a low body weight. A pelvic exam in those who are sexually active and ultrasound may be useful to help in diagnosis. Conditions that should be ruled out include ectopic pregnancy, pelvic inflammatory disease, interstitial cystitis, and chronic pelvic pain.¹

Dysmenorrhea occurs less often in those who exercise regularly and those who have children early in life. Treatment may include the use of a heating pad. Medications that may help include NSAIDs such as ibuprofen, hormonal birth control, and the IUD with progestogen. Taking vitamin B or magnesium may help. Evidence for yoga, acupuncture, and massage is insufficient. Surgery may be useful if certain underlying problems are present.⁴

Estimates of the percentage of women of reproductive age affected varying from 20 to 90%.^[1] It is the most common menstrual disorder. Typically it starts within a year of the first menstrual period. When there is no underlying cause often the pain improves with age or following having a child.

Dysmenorrhea can be literally translated as "difficult monthly flow." Although it's normal for most women to have mild abdominal cramps on the first day or two of their period, about 10% of women experience severe pain.² There are two types of dysmenorrhoea:

- **Primary dysmenorrhea** is menstrual pain that's not a symptom of an underlying gynecologic disorder but is related to the normal process of menstruation. Primary dysmenorrhea is the most common type of dysmenorrhea, affecting more than 50% of women, and quite severe in about 10%. Primary dysmenorrhea is most common in late adolescence and the early 20s. Fortunately for many women, the problem

eases as they mature, particularly after a pregnancy. Although it may be painful and sometimes debilitating for brief periods of time, it is not harmful.

- **Secondary dysmenorrhea** is menstrual pain that is generally related to some kind of gynecologic disorder. Most of these disorders can be easily treated with medications or surgery. Secondary dysmenorrhea is more likely to affect women during adulthood.

Having menstrual cramps is one of the most common, annoying parts of your period. They can strike right before or during that time of the month. Many women get them routinely. ³

The main symptom of dysmenorrhea is pain. It occurs in your lower abdomen during menstruation and may also be felt in your hips, lower back, or thighs. Other symptoms may include nausea, vomiting, diarrhea, lightheadedness, headache, or fatigue. ⁴

For most women, the pain usually starts shortly before or at the beginning of their menstrual period, peaks around 24 hours after the start of bleeding, and subsides after 2 to 3 days. Sometimes clots or pieces of bloody tissue from the lining of the uterus are expelled from the uterus, causing pain.

Dysmenorrhea pain may be spasmodic (sharp pelvic cramps at the start of menstrual flow) or congestive (deep, dull ache). The symptoms of secondary dysmenorrhea often start sooner in the menstrual cycle than those of primary dysmenorrhea, and usually last longer. In 5% to 15% of women with primary dysmenorrhea, the pain is severe enough to disturb their daily activities and may result in missed work or school. ⁶

Although the prevalence of dysmenorrhea varied in range from 25% of menstruating women to 90% of adolescent females or 45% to 95% of any age, dysmenorrhea seems to be the most common gynecological condition in women, regardless of age, race, or nationality. Furthermore, dysmenorrhea is a critical global health issue in reproductive age women, as it causes school absences, poor academic performance, lost work time, and has a significantly negative affect on daily activities . Dysmenorrhea is generally defined as difficult monthly flow and describes painful menstruation of uterine origin .

Dysmenorrhea can be classified into two subtypes. The pathogenesis of primary dysmenorrhea is commonly explained by “an abnormal increase in vasoactive

prostaglandins originating in secretory endometrium and menstrual fluid, which may induce myometrial hyperactivity and uterine tissue ischemia and pain” .⁸

In addition, various psychological problems have also been proposed. Secondary dysmenorrhea can occur many years after menarche and is associated with identifiable pelvic pathology such as endometriosis.

Dysmenorrhea is characterized by cramping lower abdominal pain that may radiate to the lower back and upper thighs and is commonly associated with nausea, headache, fatigue, diarrhea, lethargy, breast tenderness and emotional symptoms.

Dysmenorrhea is usually treated with drugs such as oral contraceptive pills or non-steroid anti-inflammatory drugs. A variety of alternatives for dysmenorrhea, such as transcutaneous electrical nerve stimulation, acupuncture, acupressure, topical heat, behavioral interventions, relaxation, and herbal and dietary therapies, are increasingly growing in attention.

A growing body of evidence supports the belief that yoga benefits physical and mental health via down-regulation of the hypothalamic-pituitary-adrenal axis and the sympathetic nervous system. Yoga may be a safe and cost-effective intervention for managing menstrual problems. Yoga plays an important role in reducing stress and sympathetic activity, increasing parasympathetic activity, improving one's quality of life, and decreasing psychological symptoms levels .⁹

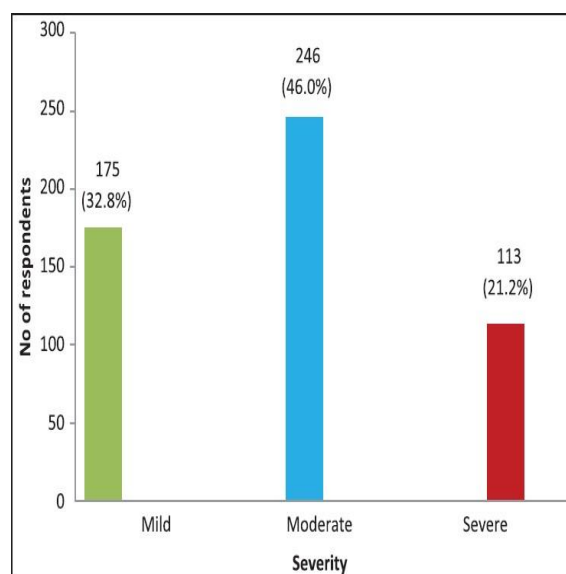
As stated, there is evidence for the benefit of yoga in reducing pain and symptoms of dysmenorrhea. However, the quality of the evidence needs to be examined to establish whether or not we can advocate yoga as an alternative and complementary therapy for women with painful periods. Therefore, the aim of this review is to assess the evidence for the effectiveness of yoga in the management of menstrual pain and the symptoms associated with dysmenorrhea.

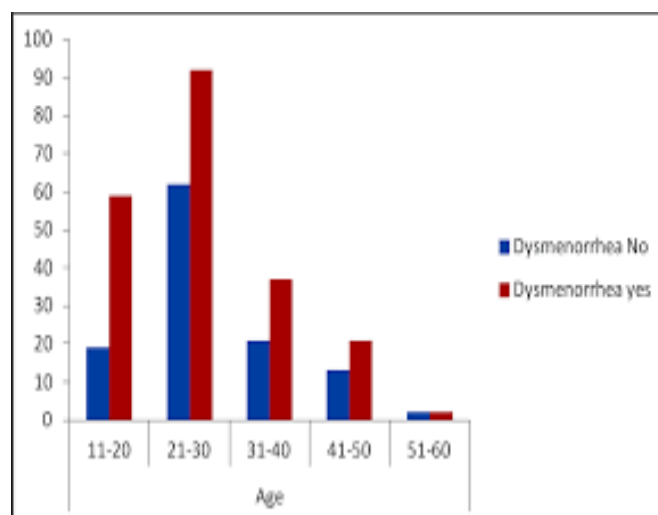
Menstrual disorders are a common presentation by late adolescence, 75% of girls experience some problems associated with menstruation . Dysmenorrhoea is a common problem in women of reproductive age. Primary dysmenorrhoea is defined as painful menses in women with normal pelvic anatomy, usually begins during adolescence. Affected women experience sharp, intermittent spasm of pain usually concentrated in the

supra pubic area. Pain may radiate to the back of the legs or the lower back. Systemic symptoms of nausea, vomiting, diarrhoea, fatigue, mild fever and headache or light headedness are fairly common. Pain usually develops within hours of the start of the menstruation and peaks as the flow becomes heaviest during the first day or two of the cycle Primary Dysmenorrhoea is the most common gynaecologic disorder among female adolescents, with a prevalence of 60% to 93%. Several studies have shown that adolescents with primary dysmenorrhoea report that it effects their academic performance, social and sports activities and is a cause for school absenteeism. 1, 4 The most common effect of menstrual problems on daily routine, reported by unmarried undergraduate medical students was in the form of prolonged resting hours followed by inability to study. The aetiology of primary dysmenorrhoea is not precisely understood, but most symptoms can be explained by the action of uterine prostaglandins, particularly PGF₂- Alfa. 6 The risk factors for dysmenorrhoea are; age < 20 years, nulliparity, heavy menstrual flow, smoking, upper socioeconomic status; attempts to lose weight, physical inactivity, disruption of social networks, depression and anxiety . Physical activity is also an important behavioral cofactor; people who describe themselves as active have lower levels of inflammatory biomarkers than their sedentary counterparts.¹⁰

Need of the Study and Review of Literature-

WHO in 2014 the prevalence of dysmenorrhea. Out of 250 samples from over all indian 194 girls & womens are heaving dymenorrhea.





Above graph represent the severity of dysmenorrhea in the age of puberty to young age from the sample of 300 sensation of dysmenorrheal pain are moderate level. Graph represent that 91% of women are feeling pain during menstruation time.

Graph shows that severity of pain according to age 21-30 years of age young girls are feeling severe pain. And in the age of 51-60 sensation of pain is very low.

10 October , 2016, Sang-Dol Kim To assess the evidence for the effectiveness of yoga in the management of menstrual pain and the symptoms associated with [dysmenorrhea](#). A search was conducted using CINAHL, electronic databases to identify randomized controlled trials (RCTs) reported effects of yogic intervention on dysmenorrhea. Quality assessment was conducted using the Cochrane risk of bias tool. Two potential trials were identified of which two were included in the review. Quality critical appraisal had low or moderate risk of bias. The available data could only be included as a narrative description. A significant difference was observed between experimental and control groups in [pain](#) intensity and pain duration ($p < 0.05$) and thyroid-stimulating hormone ($p < 0.002$), follicle-stimulating hormone ($p < 0.02$), luteinizing hormone ($p < 0.001$), and prolactin ($p < 0.02$) were decreased significantly in the experimental group, compared with the control group. There is evidence from two RCTs that [yoga](#) interventions may be favorable effective for dysmenorrhea. However the findings should be interpreted with caution due to the number of small RCTs and quality limitation partly. Therefore further high quality RCTs are required to investigate the hypothesis that yoga alleviates menstrual pain and the symptoms associated with dysmenorrhoea, to confirm and further comprehend the effects of standardized yoga programs in dysmenorrhoea.¹¹

The literature review that was under taken for the purpose of conducting the study has been presented under the following heading:

1. Study related to prevalence of Dysmenorrhoea.
2. Study related to effectiveness yoga on Dysmenorrhoea

1.1 Study related to prevalence of Dysmenorrhoea-

Shabnam Omidvar (2016): Primary Dysmenorrhea and Menstrual Symptoms in Indian Female Students: Prevalence, Impact and Management A Cross-sectional study was conducted on 1000 healthy females aged 11-28 years. Standardized Self-reporting questionnaires were used to obtain relevant data. Pain intensity was assessed by using the Numerical Pain Scale (NPS). Data was analyzed by SPSS version 16. Prevalence of dysmenorrhea was 70.2%. Majority of the subjects experienced pain for one or 1-2 days during menstruation. 23.2% of the dysmenorrheic girls experienced pain for 2-3 days. The most common symptom in both dysmenorrheic and non dysmenorrheic girls during the menstrual periods was tiredness and second most prevalent symptom was back pain. Females experiencing mild pain on an average absented for one and half day a month while 2.1 ± 1.2 and 2.5 ± 1.3 days for those who experienced moderate and severe forms of dysmenorrhea respectively. A small proportion of girls sought pharmacological management (25.5%) and 83.2% depended on non-pharmacological methods. Only 14.2% had sought medical advice. Sub optimal use of the medical advice and the barriers to seek medical attention by dysmenorrheic females need exploration. It is important that health education on puberty and menstruation is regarded as inadequate for many girls in India.

MoolRaj Kural July 2015 Menstrual characteristics and prevalence of dysmenorrhea in college going girls In a cross-sectional study, data was collected among 310 girls (18–25 years) on age at menarche, presence and absence of dysmenorrhea, dysmenorrhea duration, pre-menstrual symptoms (PMS), family history, menses irregularities, menstrual history, severity grading using visual analogue scale (VAS) using a semi-structured questionnaire. Dysmenorrhea was reported in 84.2% (261) girls and 15.8% (49) reported no dysmenorrhea. Using VAS, 34.2% of girls experienced severe pain, 36.6% moderate and 29.2% had mild pain.

Anil K Agarwal, Anju Agarwal 2010 A study of dysmenorrhea during menstruation in adolescent girls Majority of the adolescent girls under study had experienced dysmenorrhea, that is, 698 out of 970 (71.96%). Thus it can be said that dysmenorrhea is a very common problem among adolescent girls. Further analysis was conducted to find out how frequently they experienced dysmenorrhea. the maximum number of girls, that is, 237 out of 698 girls (33.95%) experienced dysmenorrhea every month, and 118 (16.90%) experienced it in most of the months, and it was statistically highly significant ($P<0.001$).

Grishma Dinesh Chauhan October 2015 A study of prevalence and impact of dysmenorrhea and its associated symptoms among adolescent girls residing in slum areas of Vadodara city, Gujarat A cross-sectional study, a part of field training of third-year medical students where adolescent girls (14–19 years) who experienced menarche for minimum of 1 year at the time of the study, residing in slum areas of Vadodara city were selected purposively and enrolled a sample of 100 adolescent girls. For compiling data, pretested oral questionnaire was used after obtaining written consent from the participants. Result: Prevalence of dysmenorrhea was 75%, which is significantly higher among the girls with family history of dysmenorrhea.

NahalHabib December 2015 Prevalence of Primary Dysmenorrhea and Factors Associated with Its Intensity Among Undergraduate Students: A Cross-Sectional Study Primary dysmenorrhea is a womanhood problem around the world and negatively affects quality of life. This study was designed to investigate the prevalence of primary dysmenorrhea and to determine the factors associated with its intensity. A cross-sectional study was carried out among 311 undergraduate female students aged 18 to 27 years in Isfahan University of Medical Sciences, Iran. Socio-demographic characteristics and menstrual factors were obtained through interviews with the help of a pretested questionnaire

Review of Literature related to use of yoga on dysmenorrhoea

Somrati Feb 2017 Effect of yoga on the menstrual pain, physical tness, and quality of life of young women with primary dysmenorrhea The aim of the present study was to investigate effect of specially designed yoga program on the menstrual pain, physical tness, and quality

of life (QOL) of non-athlete women with primary dysmenorrhea (PD) aged 18–22 years. Thirty-four volunteers were randomly assigned into control and yoga groups. Menstrual pain, physical fitness, and QOL were evaluated at baseline and at the end of the 12-week study period. The yoga group was asked to practice yoga for 30 min per day, twice a week, for 12 weeks at home, while the control group did not receive any form of exercise over the study period. There were significant improve in menstrual pain, physical fitness, and QOL in the yoga group more than the control group. Therefore, this specially designed yoga program may be a possible complementary treatment for PD

Sang-Dol Kim October 2016 Effects of Yoga on Dysmenorrhea: A Systematic Review of Randomized Controlled Trials A search was conducted using CINAHL, the Cochrane library, Embase, PsycINFO, PubMed, and KoreaMed electronic databases to identify randomized controlled trials (RCTs) reported effects of yogic intervention on dysmenorrhea published in any language between January 1966 and October 2014. Quality assessment was conducted using the Cochrane risk of bias tool.

Usha Nag Jan 2013 Effect of Yoga on Primary Dysmenorrhoea and Stress in Medical Students 113 medical students, unmarried girls, with primary dysmenorrhoea and stress, were randomly assigned to study (n = 60) and control group (n = 53). Semi structured questionnaire, the Numerical rating scale for pain and the Perceived Stress Scale were administered at baseline and after three months. The study group was subjected to yoga intervention. Significant ($p < 0.0001$) reduction in the perceived pain after yoga intervention in study group. 88% of the study group reported complete pain relief and 12% reported mild pain. Compared to control group, students with yoga intervention demonstrated significant improvement in perceived stress ($P < 0.0001$). 82% of the study group reported complete stress relief

Usha Malik Jan 2017 The Effect of Yoga on Menstrual Disorders: A Systematic Review Fifteen studies described in 18 papers were included in the review. A range of yoga interventions were used. Some studies used a combination of Asana, Pranayama, and other yogic relaxation or meditation techniques.

Yashashree Harish Shriwatri 2016 Effect of Yoga in Primary Dysmenorrhoea To study the effect of yoga on primary dysmenorrhea in secondary school girls using visual

analogue scale. Dysmenorrhea or painful menstruation is common problem in women of reproductive age prevalence is 60%-93%.

Jenifer 2017 The Effect of Yoga on Menstrual Disorders: A Systematic Review Fifteen studies described in 18 papers were included in the review. A range of yoga interventions were used. Some studies used a combination of *Asana*, *Pranayama*, and other yogic relaxation or meditation techniques.

Problem Statement –

A Study To Assess Effectiveness Of Yoga On Dysmenorrhea Among Female B.Sc. Nursing Student At Selected Nursing College Of Dewas M. P.

1.3 Objectives of the Study

- To assess the pre-test level of Dysmenorrhoea among female B.Sc. Nursing Student at selected Nursing college of Dewas M.P.
- To assess the post-test level of Dysmenorrhoea among female B.Sc. Nursing Student at selected Nursing college of Dewas M.P.
- To evaluate effectiveness of yoga on Dysmenorrhoea.
- To find out association Pre-test level of dysmenorrhoea with selected demographic variable of female B.Sc. Nursing Students.

1.5 HYPOTHESIS

H₁: There will be a significant difference between pre-test and post-test level of Dysmenorrhoea among female B.Sc. Nursing Student at 0.05 level of significance.

H₂: There will be a significant association between Pre-test level of Dysmenorrhoea with their selected demographic variables at 0.05 level of significance.

RESEARCH METHODOLOGY

RESEARCH APPROACH: -

Research is a study designed to explore the dimension of a phenomena on the manner in which it is manifested and other factor which with it selected. Polit and Hungler (1999)

Research approach keeping in view the nature of problem and objective of the study an experimental research approach was found to be the most appropriate.

RESEARCH DESIGN:-

The true research design refers to the plan of organization a scientific investigation. It is concerned with an overall framework for conducting the study the design can be presented as:-

Group	O₁	X	O₂
	Pre- test (O ₁)	Nursing Intervention (X)	Post- test (O ₂)
Female B.Sc. Nursing Students	Wong Baker Faces Pain scale	Yoga	Wong Baker Faces Pain scale

SETTING OF THE STUDY: -

Settings are the more specific places where data collection will occur. The setting for the present study is Amaltas institute of nursing sciences Dewas M.P.

3.5 POPULATION:-

Population is a group whose members possess specific attributes and the researcher is interested in studying the target population consists of the total membership of a defined female B.Sc. Nursing Students at Amaltas Institute of Nursing Sciences whom are selected and whom the data will be generalized.

- **TARGET POPULATION:** The target population of my research study is female B.Sc. Nursing Students.
- **ACCESSIBLE POPULATION:** In my study accessible population is female B.Sc. Nursing Students at Amaltas Institute of Nursing Sciences Dewas M.P.

3.6 SAMPLING TECHNIQUE: -

Non probability convenient sampling technique.

3.7 SAMPLE SIZE: -

Sample size is 60 female B.Sc. Nursing Students.

3.8 SAMPLING SELECTING CRITERIA: -

INCLUSION CRITERIA:-

- Female B.Sc. Nursing Students
- Those are studying in Amaltas institute of Nursing Sciences
- Those are presenting during data collection

EXCLUSION CRITERIA:-

- Students who are having any other medical condition.

1.9 DATA COLLECTION TECHNIQUES:

Data collection tools are the devices that researcher used to collect the data. A valid and reliable data collection instrument is considered important to field high quality data. A pin assessment scale are used to assess level of dysmenorrhoea.

3.10 DEVELOPMENT OF THE TOOL

Wong Baker Faces Pain scale is used to assess dysmenorrhoea. It was based on the literature extracted from journals, books, research reports, personal experience and expert guidance. **DESCRIPTION OF THE TOOL**

The tool consisted of two sections.

- a. Demographic data.
- b. Wong Baker Faces Pain scale

Section A: (Demographic data): It describes the selected sample characteristics. It comprises of following items for obtaining information regarding age, education, Nutritional Status, where they do yoga to reduce dysmenorrhoea.

Section B: Wong Baker Faces Pain scale

3.11 VALIDITY OF TOOL

The tool was submitted to 7 experts including nursing personnel from the field of Nursing along with the criteria checklist. The seven experts were requested to check for the relevance sequence were done according to the expert's opinion and suggestion

regarding the changes in demographic variable for the adjustment in class interval of age and occupation and language of the tool was developed.

METHODS OF DATA COLLECTION

Written permission was obtained from higher authority prior to data collection. The study was carried out in the same way as that of the pilot study.

A total 60 sample were selected for the study. Data collection was held in Amaltas college of Nursing Dewas. The data collection period was from 01/4/2019 to 17/4/2019. The investigator introduces her and the purpose of the study was explained to the subject and informed consent was obtained. Confidentiality was assured to the entire subject to get their cooperation.

The pretest was taken using a Wong Baker Faces Pain scale to assess level of Dysmenorrhoea intervention that is yoga has been given and after 3 days interval post test was taken.

The investigator thanked and appreciated all the participated for their cooperation.

Results:-

Results of the study revealed that, there was significant difference between the pre test Level of dysmenorrhoea of female B.Sc. Nursing Students in the selected areas of disciplining. The data presented in table shows the significant" value .

Theses finding again highlight the effectiveness of yoga in decreasing the level of dysmonorrhoea of the respondents regarding various areas of disciplining.

Organization of study findings

The data collected is organized and presented under the following headings;

Section I: Description of demographic variables.

Section II: Level of dysmenorrhoea

Section III: Effectiveness of yoga on dysmenorrhoea.

Section IV: Association between the pre-test level of dysmenorrhoea with selected demographic variables.

Section II: Pre-Test level of dysmenorrhoea of Female B.Sc. Nursing Students regarding

This section deals with the analysis and interpretation of the data with relevance to effectiveness of Yoga

Table-4

Frequency and Percentage Distribution of Pre-test level of Dysmenorrhoea

Level of Dysmenorrhoea	Day 1		Day 2		Day3	
	Frequency (N)	Percentage %	Frequency (N)	Percentage %	Frequency (N)	Percentage %
0	-	-	-	-	-	-
2	-	-	-	-	-	-
4	10	16.7%	25	42%	30	50
6	10	16.66%	12	20%	15	25
8	25	41.67%	23	38%	15	25
10	15	25%	-	-	-	-
TOTAL	60	100	60	100	60	100

Table 4 describe that in day one majority of students are in the 25% in hurts whole lot in day 2, 42% of students are from 4 category in last day, day 3, 50% are from category 4 hurt little more.

Section III: Effectiveness of yoga on dysmenorrhoea.

Frequency and Percentage Distribution of Post-test level of Dysmenorrhoea

Level of Dysmenorrhoea	Day 1		Day 2		Day3	
	Frequency (N)	Percentage %	Frequency (N)	Percentage %	Frequency (N)	Percentage %
0	10	16.7%	25	42%	30	50
2	10	16.66%	12	20%	15	25
4	25	41.67%	23	38%	15	25
6	15	25%	-	-	-	-
8	-	-	-	-	-	-
10	-	-	-	-	-	-
TOTAL	60	100	60	100	60	100

Table 5 shows that majority of students in day one after yoga was from 42% in 4 category hurts little more in day 2 they are from 0 category no hurts but in last day same in 0 category no hurts.

Section III: Effectiveness of Yoga to reduce level of Dysmenorrhoea

In order to find out the significance of the difference between the mean pre-test and post-test level of Dysmenorrhoea on disciplining, paired 't' test was computed and data was presented in

There is a significant increase in the level of Dysmenorrhoea

Day1

knowledge score	Mean (\bar{X})	S. D. (s)	Std. Error of Mean	D. F.	t	Significance
Pre-test	27.32	2.45	0.4886	59	-18.525	P<0.001[®]
Post-test	51.23	2.12				

Day2

knowledge score	Mean (\bar{X})	S. D. (s)	Std. Error of Mean	D. F.	t	Significance
Pre-test	37.47	3.42	0.3245	43	-12.345	P<0.001[®]
Post-test	62.53	2.01				

Day3

knowledge score	Mean (\bar{X})	S. D. (s)	Std. Error of Mean	D. F.	t	Significance
Pre-test	22.47	1.24	0.234	36	-17.895	P<0.001[®]
Post-test	61.23	1.98				

DISCUSSION

This chapter presents the discussion of findings based on the sample characteristics, female B.Sc. Nursing Students effectiveness of Yoga to reduce dysmenorrhoea The overall experience was a satisfying.

The objectives of the study:

- To assess the pre-test level of Dysmenorrhoea among female B.Sc. Nursing Student at selected Nursing college of Dewas M.P.
- To assess the post-test level of Dysmenorrhoea among female B.Sc. Nursing Student at selected Nursing college of Dewas M.P.
- To evaluate effectiveness of yoga on Dysmenorrhoea.
- To find out association Pre-test level of dysmenorrhoea with selected demographic variable of female B.Sc. Nursing Students.

Section I

Findings regarding demographic variables

The data show a majority 28.3% of Female B.Sc. Nursing Students were in the age group of 21-24 years, 25% of Female B.Sc. Nursing Students were in the age group of 25-28 years, and 25% Female B.Sc. Nursing Students were in the age group of 17-20 years. There was a trace no. of Female B.Sc. Nursing Students in age group of more than 28 years. Overall Majority of the Female B.Sc. Nursing Students were in the age group of 21-24 years.

Show that Educational status of Female B.Sc. Nursing Students was, 75% were from B.Sc. Nursing I Year & 25% were from B.Sc. Nursing II Year Majority of B.Sc. Nursing students were from B.Sc. Nursing I Year.

Show that 75% of Female B.Sc. Nursing Students were Non Vegetarian & 25% of Vegetarian Majority were from Non Vegetarian.

Section II

Comparison in level of dysmenorrhoea

Describe that in day one majority of students are in the 25% in hurts whole lot in day 2, 42% of students are from 4 category in last day, day 3, 50% are from category 4 hurt little more.

Shows that majority of students in day one after yoga was from 42% in 4 category hurts little more in day 2 they are from 0 category no hurts but in last day same in 0 category no hurts.

Paired 't' test was used to test the significance of difference between the pre-test and post-test Level of Dysmenorrhoea of Female B.Sc. Nursing Students in the selected areas of

disciplining. The data presented in Table shows the significant 't' value. These findings again highlight the effectiveness of Yoga in decreasing the level of dysmenorrhoea of the respondents regarding various areas of disciplining.

Section III Find out association between pre test and selected demographic variables

The Value of Chi-Square is 13.65 which shows a significant value ($p < 0.05$, two-tailed). Hence there is an association between age in years (grouped) and pre-test score.

The Value of Chi-Square is 11.69 which shows a significant value ($p < 0.05$, two-tailed). Hence there is an association between education (grouped) and pre-test score.

The Value of Chi-Square is 10.19 which shows a significant value ($p < 0.05$, two-tailed). Hence there is an association between Nutritional status (grouped) and pre-test score.

5.2 SUMMARY

The findings of the study shows that yoga will help to reduce level of dysmenorrhoea.

"A study to assess the effectiveness of yoga to reduce level of dysmenorrhoea among female B.sc. Nursing students at selected college of Nursing Dewas

OBJECTIVES OF THE STUDY

- To assess the pre-test level of Dysmenorrhoea among female B.Sc. Nursing Student at selected Nursing college of Dewas M.P.
- To assess the post-test level of Dysmenorrhoea among female B.Sc. Nursing Student at selected Nursing college of Dewas M.P.
- To evaluate effectiveness of yoga on Dysmenorrhoea.
- To find out association Pre-test level of dysmenorrhoea with selected demographic variable of female B.Sc. Nursing Students.

It is assumed that yoga will help to reduces level of dysmenorrhoea.

An experimental research approach was adopted in the study. The population of the study consisted of B.Sc. Nursing Students at Amaltas institute of Nursing sciences Dewas.. Non probability convenient sampling technique was utilized to select 60 B.Sc. Nursing

Students based on predetermined criteria. The investigator standardized pain assessment scale

Actual study was conducted on 60 eligible couples of Chhindwara city. The duration of the study was from 01/04/2019 to 17/04/2019.

Based on the objectives and the assumptions the data was analyzed and using various descriptive and inferential tests is (χ^2 & t) test

The constant encouragement and guidance of the guide, cooperation and interest of the respondents to participate in the study, contributed to the fruitful completion of the study.

Hypothesis of my research both are accepted. That result that yoga is very benefaction in dysmenorrhoea.

5.3 CONCLUSION

After the implementation of yoga during dysmenorrhoea is very benedictional.

5.4 NURSING IMPLICATIONS

The findings of the study have implications on the field of nursing education, nursing practice, nursing administration and nursing research.

Nursing education

Nursing curriculum plays an important role in the preparation of future nurses. Those implement yoga in reduce dysmenorrhoea. Yoga is a important part of daily healthy and wealthy lifestyle that should be applicable in our Nursing curriculum .The curriculum also should incorporate activities like preparation of booklets, handouts, pamphlets and self-teaching materials to train the parents and caregivers at home, hospital and nursery setting.

Nursing practice

A major role of the nurse is teaching the Nursing students. The extended and expanded roles of professional nursing emphasizes preventive and primitive aspects of health.

Nurses play a role in educating nursing students regarding use of Yoga during dysmenorrhoea in community or in the hospitals. Charts, audiovisual materials and equipment can be used to demonstrate, reinforce or review the content of the teaching session. Incorporating anticipatory guidance on disciplining along with other topics to eligible couples would create additional incentives for healthcare organizations to deliver guidance.

The present study revealed the effectiveness of Yoga in teaching. The investigator as a nurse felt the need for nurses to act as facilitators to educate nursing students regarding use of Yoga during dysmenorrhoea. They can help the parents to develop control over their behaviour and also an acceptable behavioral pattern in life. This may help them in acquiring better knowledge and give the same to parents attending these clinics.

Nursing research

The literature and research done use of yoga for a quality of life in daily maintaining health. So many girls are using that yoga and other alternative medicines to reduce level of dysmenorrhoea.

The nursing administrator should implement the outreach programmes to make the public aware of yoga so as to prevent an untoward effect on quality of life. There should be necessary health education material and administrative support provided to conduct health programmes. Adequate funds should be provided to develop health teaching materials.

Reference

1. Webster's New World College Dictionary. 4th edition. Cleveland, Ohio: Wiley Publishing, Inc. 2010
2. Rashmi Barua. Adolescence - A Period That Really Matters. 2008. Available from: ezinearticles.com
3. Dysmenorrhoea Resources in Obstetrics and Gynecology. Available from: www.mdlinx.com
4. D.C Dutta. Text Book of Gynaecology, 4th Edition. New Central Agency Private Limited. 2003.

5. Dysmenorrhoea. Available from: <http://en.wikipedia.org/wiki/>
6. Beausang CC, Razor AG. Young western women's experiences of menarche and menstruation. Available from: www.Pub Med.com
7. Coco AS. Primary dysmenorrhea. *Am Fam Physician*. 1999 Aug;60(2):489-96.
8. Pickles VR, Hall WJ, Best FA et al: Prostaglandins in endometrium and menstrual fluid from normal and dysmenorrheic subjects. *J Obstet Gynaecol Br Commonw*. 1965;72:185-92.
9. Dawood MY. In: Overall approach to the management of dysmenorrhea. Williams & Wilkins Dysmenorrhea.1981:261
10. NaCakir M, Mungan I, Karakas T, Girisken I, Okten A. Menstrual pattern and common menstrual disorders among university students in Turkey. *Pediatr Int*. 2000;49(6):938-42.
11. The ART of Living. Yoga. Available from: What is yoga.htm
12. Williams K, Abildso C, Steinberg L, et al. Evaluation of the effectiveness and efficacy of Iyengar yoga therapy on chronic low back pain. *Spine (Phila Pa 1976)*. 2009;34(19):2066-76.
13. Theresa Ann Health. Yoga for menstrual cramps and disorder. Available from: hubpages.com
14. Maternal_child_adolescent. Available from: www.who.int
15. Anil K Agarwal and Anju Agarwal. A Study of Dysmenorrhoea During Menstruation in Adolescent Girls. Available from: www.pubmed.com.
16. George. A Study of dysmenorrhoea during menstruation in adolescent girls. Available from: www.we-asc.org.
17. Pregya S, Chetna M, Taneja D K, Renuka S. Problem related to menstruation in Adolescent girls and the effect of the problems on daily routine: New Delhi; 2008 June22
18. A study during dysmenorrhoea among adolescent girls. Available from: medind.nic.in/iaj/t10/i1/iajt10i1p159.htm

19. Essays/health-and-social-care/literature-on-yoga-and-dysmenorrhea-health-and-social-care-essay.php. Available from: <http://www.ukessays.com>
20. Definition of Dysmenorrhea in the Medical dictionary. Available from: Free Online Medical Dictionary, Thesaurus and Encyclopedia.
21. Durand F. Jacobs. General information of yoga. The American Yoga Association's Beginner's Manual Yoga 1998 Mar; 45(5): 55-56.
22. Briana Rognlin. Yoga Poses to Beat Period Cramps. Available from: www.thatsfit.com
23. Nag U, Chakravarthy VK, Burra KC et al. Effect of yoga on progesterone levels and pain relief in primary dysmenorrhea. IJRRMS 2013;3(2)
24. Usha Nag, Madhavi Kodali. Meditation and yoga as alternative therapy for primary dysmenorrhea. Available from: <http://www.scopemed.org/?mno=34212>
25. Rakhshae Z. Effect of three yoga poses (cobra, cat and fish poses) in women with primary dysmenorrhea: a randomized clinical trial. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/21514190>
26. Williams. K.A. Petronis. J. Smith. D. Goodrich. Effect of Iyengar yoga therapy for chronic low back pain. Journal of 2005 Apr; 115(9): 107-17.
27. Dr. Anice George. The effect of yoga in the management of dysmenorrhoea among adolescent girls. Available from: www.we-asc.org.
28. Rani M, Singh U, Agrawal GG, Natu SM, Kala S, Ghildiyal A, Srivastava N. Impact of Yoga Nidra on Menstrual Abnormalities in Females of Reproductive Age. Available from: www.ncbi.nlm.nih.gov/pubmed/23647406
29. Chien LW, Chang HC, Liu CF. Effect of yoga on serum homocysteine and nitric oxide levels in adolescent women with and without dysmenorrhea. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/22963270>
30. Berger et al. The effect of yoga on wellbeing. 2009. Available from: www.ukessays.com

31. Sakuma Y, Sasaki-Otomaru A, Ishida S, Kanoya Y, Arakawa C, Mochizuki Y, Seiishi Y, Sato C. Effect of a home-based simple yoga program in school students: a randomized controlled trial. Available from: yumahs@tmd.ac.jp(30)
32. T Pramanik, R Shrestha, MT Sherpa, P Adhikari. Incidence of dysmenorrhoea associated with high stress scores among the undergraduate Nepalese medical students. Journal of Institute of Medicine .Vol 32, No 3 (2010)
33. Williams. K.A. Petronis. J. Smith. D. Goodrich. Effect of Iyengar yoga therapy for chronic low back pain. Journal of 2005 Apr; 115(9): 107-17.
34. Thenmozhi Priya Needhirajan, Raj Maturi, Bhavani Balakrishnan. Effect of Isha yoga on menstrual disorders. Available from: www.ishafoundation.org.