



Napata College
Faculty Of Medicine
Batch 3
Community Medicine Department

**PREVALENCE AND SEVERITY OF DYSMENORRHEA AND
ITS IMPACT ON ACADEMIC PERFORMANCE AMONG
NAPATA'S STUDENTS – (2021-2022)**

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Surgery, Msc Of Hpme)

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-: DEDICATION:-

This work is dedicated to our beloved parents, for their unconditional love that motivates us to set higher target and provides us with strong love shield that always surround us and will never let any sadness enter inside us.

For those who gave us a forever within the numbered days, we can't tell you how thankful we're for our little infinity

,and we dedicate this research to our father Adil Abualmaali, and Hanadi(God's mercy on them)

We're grateful

-: ACKNOWLEDGMENT-:

To the light .ALLAH, who guides us through the road

Our thanks and appreciation to our supervisors DR: Misaa
Elmamoun Mohammed and DR. Mazin S. Haroun

For providing us with unlimited advices throughout the time it took us to
complete this research.

We must acknowledge, and express our gratitude and deep appreciation
to our beloved friends, who assisted, advised and supported our research
work and writing efforts.

To every person that gave us something to light our way, for the consent
people in a world full of variables, our permanent in a world full of
temporaries.

We thank them for believing in us.

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List of Abbreviation:

GPA	Grade point average
NSAID	Nonsteroidal anti-inflammatory drug
Ocs	Oral contraceptive
IUD	Intra-uterine device
BMI	Body mass index
HRQoL	Healthy-related quality of life
SPSS	Statistical package for the social sciences

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Abstract

Introduction

Dysmenorrhea is a common occurrence, it is a common presentation of gynaecological pathology however, gynaecological pathology is not always the cause of dysmenorrhea, although impactful on the quality of life, it is often of no pathologic significance. Like all aspects considered ensuring a satisfactory quality of life, dysmenorrhea may have a negative impact on academics.

Objective

To measure the Impact of dysmenorrhea on the academic performance of Napata college students.

Methodology

An institutional-based, descriptive cross-sectional study design was used to conduct this study on a number of 395 female students who study at The Napata College by using the non-probability sampling method.

Result

Out of the 395 students who participated in this study 336 student (85.1%) experience Pain with menstruation while the remaining 59

student (14.9%) are not experiencing painful menses, When asked to grade the severity of the pain from 1 to 5 where 1-2 is mild pain, 3 is moderate and 4-5 is severe most of them experienced severe pain, When asked if the pain is worse during exam period 225 (67%) said it was more severe while 111 (33%) said wasn't, 67% are abstaining from college during menses, 88.7% said their academic performance is affected, however 52.7% said dysmenorrhea affects their GPA.

Conclusion

Dysmenorrhea has a high prevalence among students and could affect the quality of life, during their menstrual period most of female students feel as if they have less energy for daily activities and exhibit a higher level of stress, the intensity of the symptom's varies considerably and with it, the degree of the discomfort it creates, Most students use both pharmacological and non-pharmacological methods to reduce pain, depending on the duration and intensity of the pain.

الخلاصة

مقدمة

عسر الطمث هو أمر شائع ، وهو عرض شائع لأمراض النساء ، ومع ذلك ، فإن أمراض النساء ليست دائماً سبب عسر الطمث ، على الرغم من تأثيرها على نوعية الحياة ، إلا أنها غالباً لا تكون ذات أهمية مرضية. مثل جميع الجوانب التي تم النظر فيها لضمان جودة حياة مرضية ، قد يكون لعسر الطمث تأثير سلبي على الأكاديميين.

موضوعي

قياس أثر عسر الطمث على الأداء الأكاديمي لطلبة كلية نبتة.

المنهجية

تم استخدام تصميم دراسة مقطعية وصفية مؤسسية لإجراء هذه الدراسة على 395 طالبة يدرسن في كلية نبتة باستخدام طريقة أخذ العينات غير الاحتمالية.

نتيجة

من بين 395 طالبة شاركوا في هذه الدراسة 336 طالبة (85.1%) (يعانون من آلام الدورة الشهرية بينما لا تعاني الطالبة المتبقية 14.9) 59% (من حيض مؤلم ، وعندما طُلب منهم

تصنيف شدة الألم من 1 إلى 5 حيث 2-1 ألم خفيف ، 3 معتدل و 4-5 شديد معظمهم يعانون من ألم شديد ، عند سؤالهم عما إذا كان الألم أسوأ أثناء فترة الامتحان ، قال 67 (22.5%) أنه كان أكثر شدة بينما قال 33 (11.1%) أنه كان أكثر حدة 67.%. يمتنعون عن الكلية أثناء الحيض ، 88.7% قالوا أن أدائهم الأكاديمي يتأثر ، لكن 52.7% قالوا إن عسر الطمث يؤثر على المعدل التراكمي لديهم.

استنتاج

ينتشر عسر الطمث بشكل كبير بين الطلاب ويمكن أن يؤثر على نوعية الحياة ، خلال فترة الحيض ، تشعر معظم الطالبات كما لو أنهن لديهن طاقة أقل للأنشطة اليومية ويظهرن مستوى أعلى من التوتر ، وتختلف شدة الأعراض بشكل كبير ومع درجة الانزعاج الذي تسببه ، يستخدم معظم الطلاب كلاً من الأساليب الدوائية وغير الدوائية لتقليل الألم ، اعتماداً على مدة الألم وشدته.

CHAPTER 1

1.1Background:

Introduction:

Dysmenorrhea is characterized by crampy pelvic pain that begins shortly before or at the onset of menstruation and lasts one to three days. It usually begins in adolescence for females with normal pelvic anatomy. There are two types of dysmenorrhea: primary, in the absence of pelvic pathology, and secondary, when pelvic pathology is present.¹ Among young women who presented to clinicians with this complaint, it was one of the most common, but it was less prevalent during the first two to three years after menarche.² Onset, duration, type, and severity of pain along with menstrual history are critical to investigate when taking history of dysmenorrhea. There are no investigations for primary dysmenorrhea, but management of secondary dysmenorrhea requires investigation to the underlying cause. Investigations include: laboratory tests, abdominal or transvaginal ultrasonography, hysterosalpingography, hysteroscopy, or laparoscopy.³ Treatment of dysmenorrhea is aimed towards pain control, medicines given to do so include, NSAIDs and opioid analgesics, as well as oral contraceptives (OCs).⁴

1.2 Problem statement:

Although not life threatening, dysmenorrhea can interfere with the quality of life in female population, amongst whom are university students, as students find themselves unable to attend; and even though some may not find an excuse, the ability to carry out tasks and to concentrate may remain difficult. Also, It can interfere with social life, professional life and even sleep.

1.3 Justification:

Dysmenorrhea is responsible for significant absenteeism from work, and it is the most common reason for school absence among adolescence. It may often be dismissed, and some of those who suffer from dysmenorrhea may not be aware of the importance of why and when to seek medical attention; so it's important to raise awareness in order for students to seek help earlier and have a better academic performance in specific, and better life quality in general, as it can indicate an underline gynecological condition.

1.4 Objectives:

General objective:

To measure the Impact of dysmenorrhea on the academic performance of Napata's students (2021-2022).

Specific objective:

1. To assess the prevalence of dysmenorrhea.
2. To determine its severity among Napata students.
3. To determine if the severity increases during exams or not.
4. To assess its effects on college absenteeism of students and final GPA.

CHAPTER 2



2.2 Literature Review:

Studies reviewed reveal that dysmenorrhea is common among students however, when comparing previous studies, it was found that the impact of dysmenorrhea on academic performance is controversial. Previous literature that was studied are as follows:

Study 1

A study done in Ethiopia aimed at providing an association between dysmenorrhea and academic performance among students in Ethiopia, and determine the prevalence and associated risk factors of dysmenorrhea. The design and method of choice were an institution-based cross-sectional study. And a pretested self-administered questionnaire was used to collect data. The study was conducted on 647 subjects and the results of the study showed that of those whom were understudy, 317 (51.1%) had dysmenorrhea but no statistically significant difference in academic performance among students with and without dysmenorrhea. It was concluded that despite being a common health problem among graduating university students, "it has no statistically significant impact on academic performance, but reproductive health officers should educate and determine the negative academic consequences of dysmenorrhea to reduce the physical and psychological stress that happens to females and the ir families."¹⁰

Study 2

A study done in Saudi Arabia aimed at quantifying the prevalence of primary dysmenorrhea, study its associated risk factors, and assess its effect on the quality of life of female medical students. This study was a cross-sectional study which was conducted on a number of 376 female students at the university campus and university hospital, using the technique of consecutive, non-random sampling. The result of the study showed a prevalence of 80.1% amongst the total number of subjects. Contrary to the previously mentioned study, primary dysmenorrhea had a significant impact on the students' academic performance ranging from their attendance to concentration, study time, and participation in class. It was concluded that, the majority of female medical students suffer from primary dysmenorrhea, which adversely affects their quality of life and academic performance. Periodical awareness programs should be developed to minimize the consequences of primary dysmenorrhea.¹¹

Study 3

In this study, the objectives were, to study prevalence of primary dysmenorrhea in young girls and evaluate associated clinical markers of dysmenorrhea. This study was a cross-sectional study conducted on 310 girls within an age range of 18 to 25 years old. On

the age of menarche, presence and absence of dysmenorrhea, dysmenorrhea duration, premenstrual symptoms, family history, menses irregularities, menstrual history and severity. The study was done using a semi-structured questionnaire and it was found that 261 subjects, accounting for 84.2% of the subjects, reported dysmenorrhea. It was concluded that, dysmenorrhea is found to be highly prevalent among collage going girls.¹²

Study 4

This study was done to assess the effect of primary dysmenorrhea on students' academic performance. The study design used was a cross-sectional. The study was conducted on 500 female students enrolled in different colleges at Princess Nourah Bint Abdulrahman University, Riyadh. The tool of choice for this study was a self-administered questionnaire used to collect socio-demographic data and data on menstrual characteristics, menstrual pain and its effect on academic performance parameters. The results were, out of the 500 subjects, the prevalence of primary dysmenorrhea was 92%, 57.6% of which had moderate to severe pain. It was found that primary dysmenorrhea was a significant predictor of reduced physical activity, low concentration, submitting incomplete work and falling asleep during lectures. It was concluded that there is a

need to increase the student's awareness regarding menstrual pain and to improve their perceptions regarding treatment approaches.¹³

Study 5

Studies on the prevalence of menstrual pain have shown that many factors are related to this disorder. These factors include a younger age, low body mass index (BMI), smoking, early menarche, prolonged or aberrant menstrual flow, premenstrual somatic complaints, pelvic infections, previous sterilization, somatization, psychological disturbance, genetic influence, and a history of sexual assault influencing the prevalence and severity of dysmenorrhea.¹⁴

Study 6

Emotional and behavioral problems may exacerbate menstrual cycle problems and dysmenorrhea. For example, depression and/or anxiety symptoms are reported to have an impact on menstrual cycle function and dysmenorrhea. Due to the negative effects of dysmenorrhea on an individual's psychological status, health-related quality of life (HRQoL) may be disrupted among adolescent women. Furthermore, dysmenorrhea is a common cause of sickness absenteeism from both classes and work by the female student.¹⁵

Study 7

This study reported a high prevalence of dysmenorrhea in female adolescence. This condition is associated with a high degree of school absenteeism and limitation on social, academic.¹⁶

CHAPTER 3

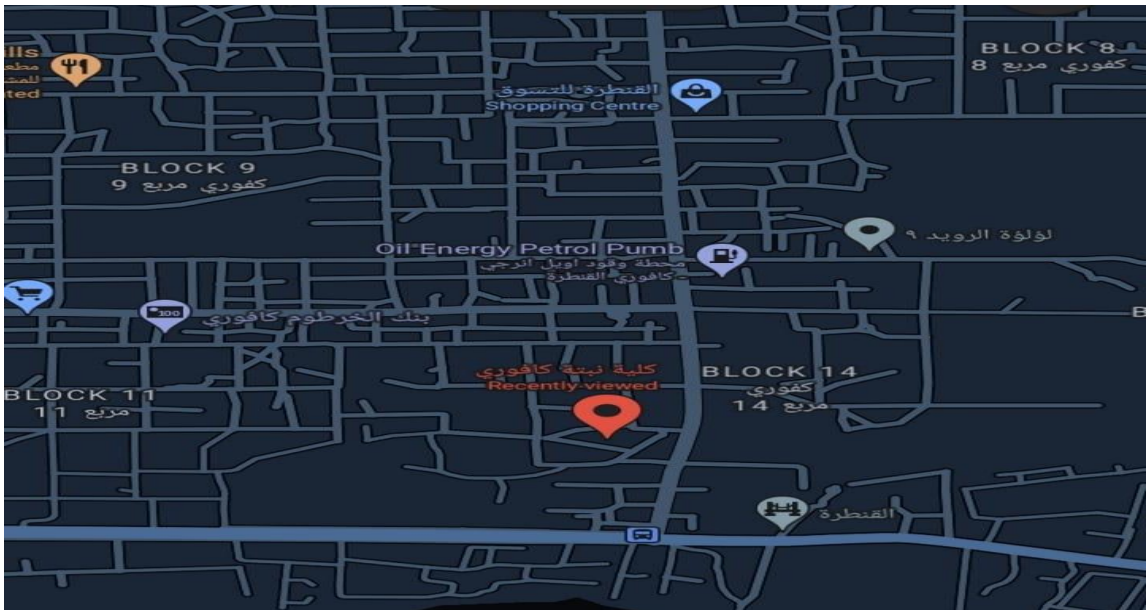
3 Methodologies

3.1 Study design:

This study was a descriptive institutional-based cross-sectional study.

3.2 Study Area:

This study was conducted at the main college campus of Napata college, in Kafori, Khartoum State, Sudan.



3.3 Study time:

The study was conducted between August and November, 2022.

3.4 Study population:

Data was collected from Napata college students.

3.4.1 Inclusion criteria:

1. Female students at Napata main campus.

3.4.2 Exclusion criteria:

1. Menopause.
2. The students that refuse to participate in the study.
3. Women who don't suffer from dysmenorrhea.

3.5 Sample size:

The study sample was calculated using Cochran formula:

$$n = \frac{N}{1 + N(D)^2}$$

n=sample aize.

N=population.

D=acceptable sample error (.04)²

$$1070 / 1 + 1070(.0016) = 394.5$$

3.6 Data collection tool:

A self-administer questionnaire.

3.7 Data analysis:

Data was analyzed using SPSS (statistical packaged for social science)

3.8 Ethical considerations:

1. Ethical approval was taken from research committee in Napata College.
2. Verbal consent was sought from all study subjects.

CHAPTER 4

4. Results

Figure 1: distribution of study participants according to marital status

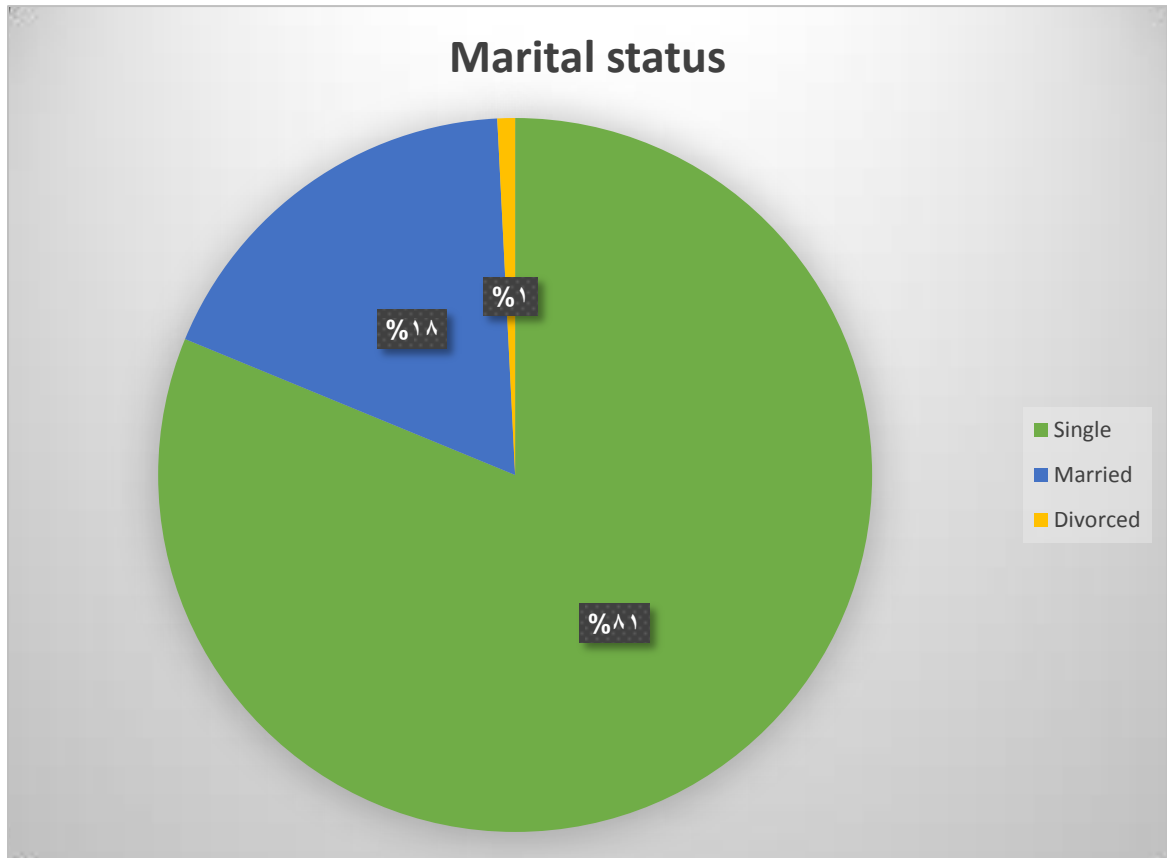


Figure 2: Distribution of study participants according to academic year

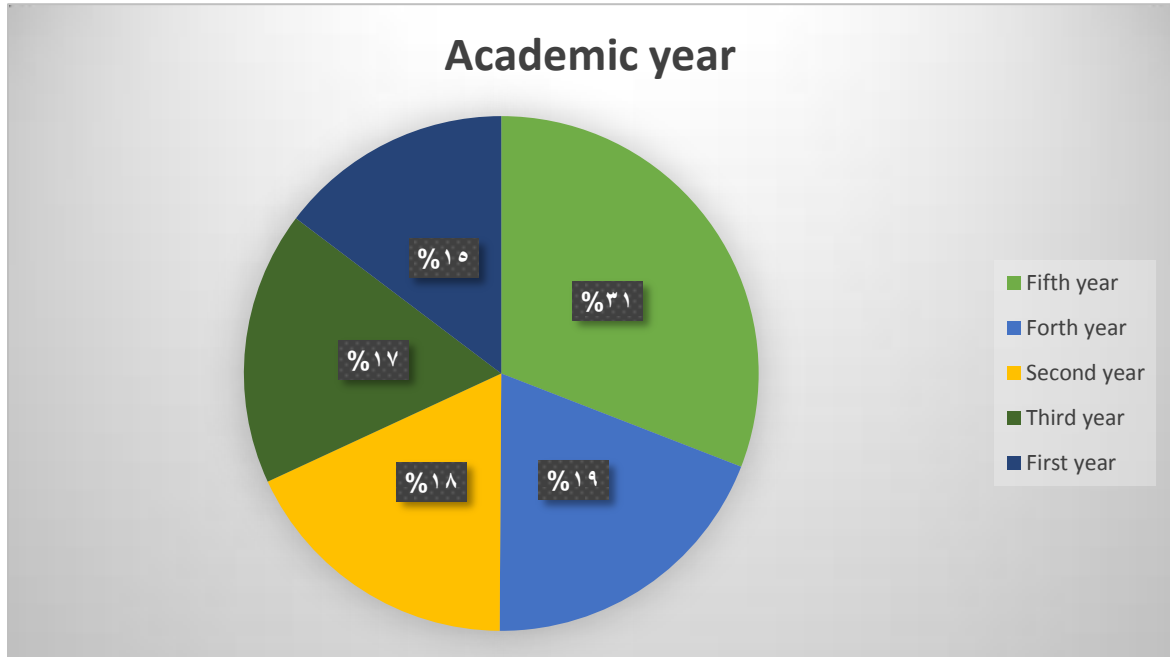


Figure 3: Distribution of study participants according to residence

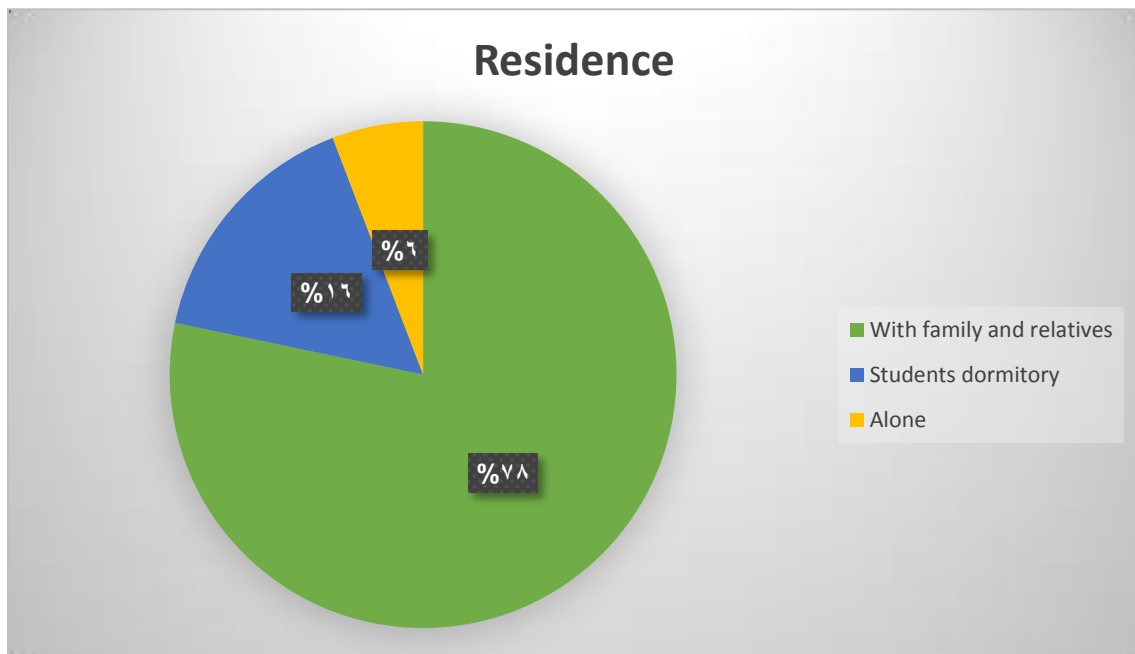


Figure 4: Distribution of study participants according to monthly income.

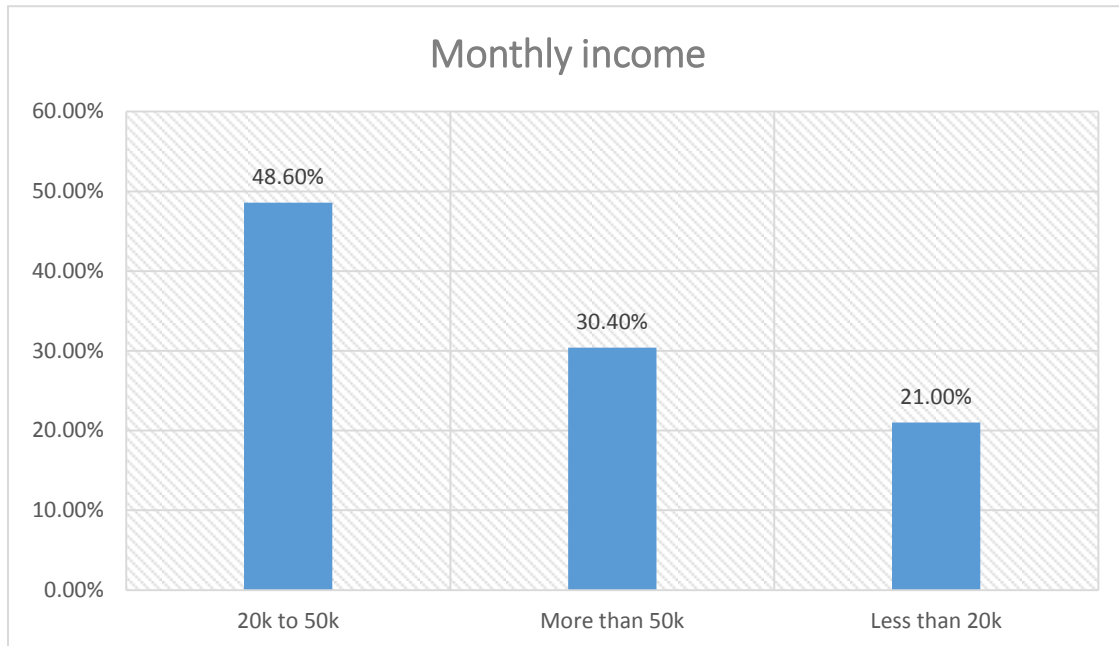


Figure 5: Percentage distribution of dysmenorrhea across the study participants

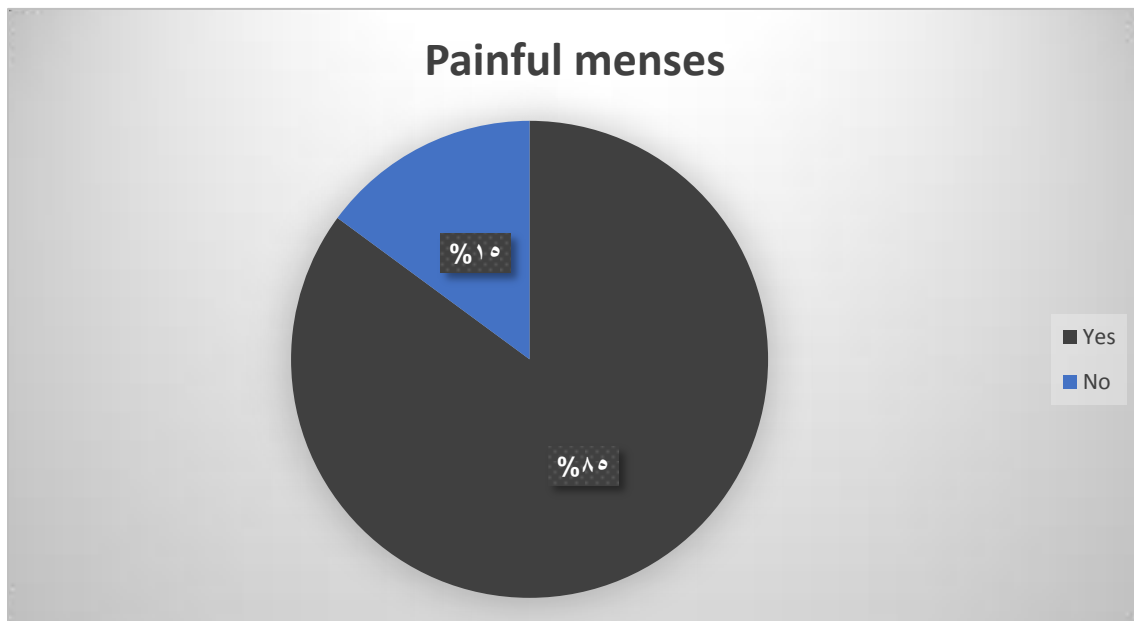


Figure 6: Percentage distribution of pain severity across study participants.

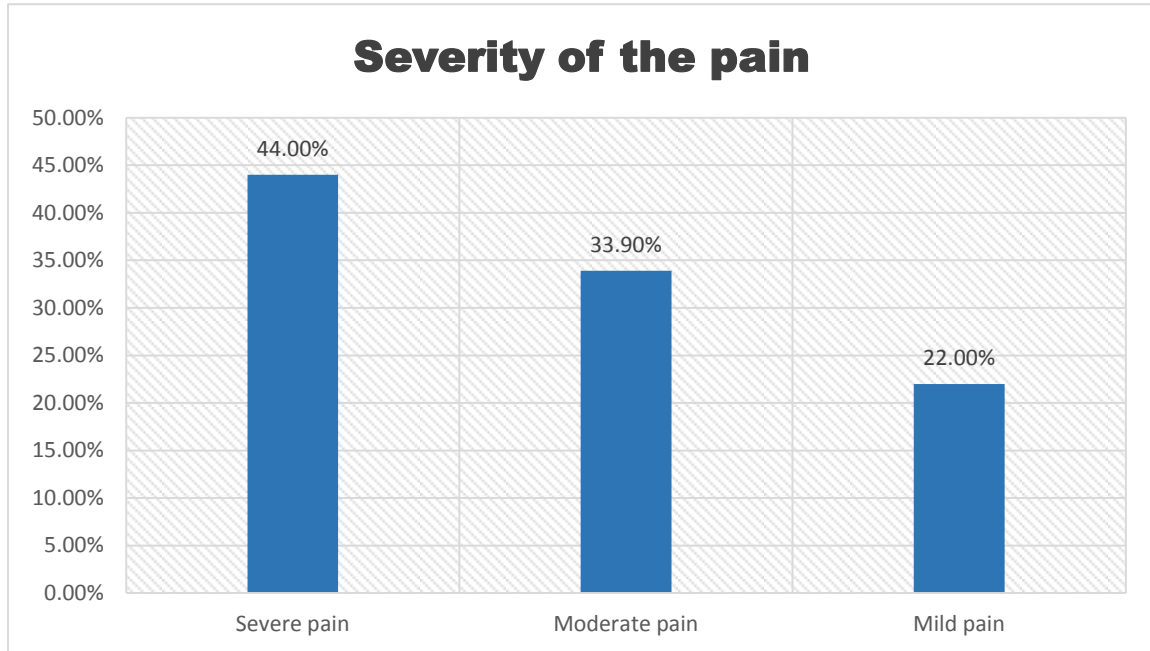


Figure 7: Percentage distribution of premenstrual syndrome across study participants.

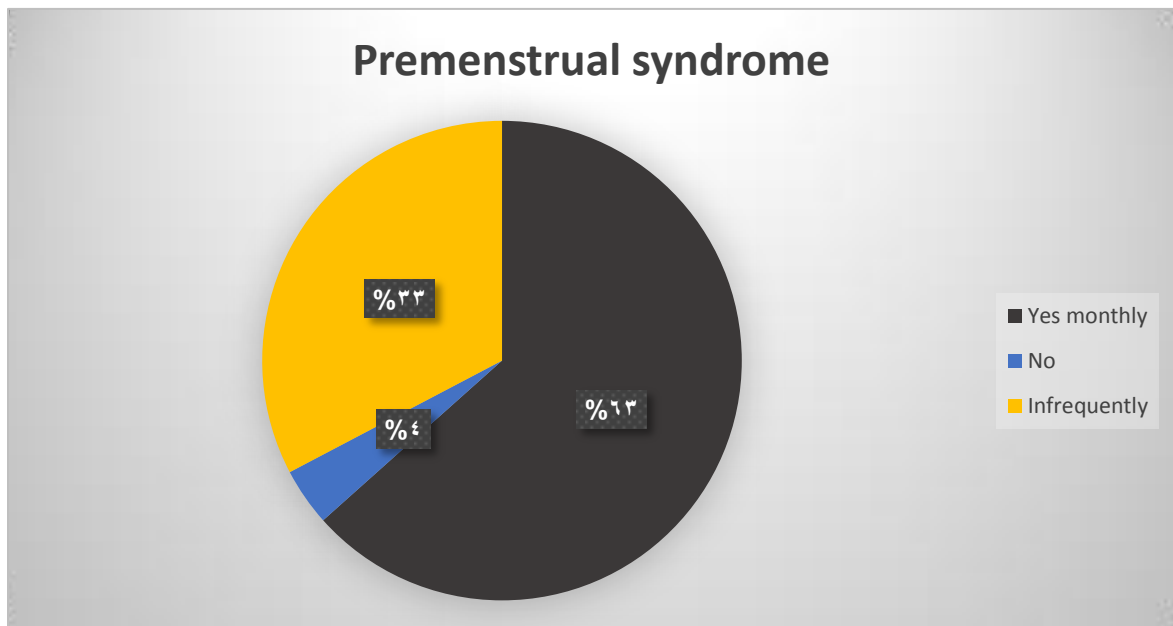


Figure 8: Percentage distribution of a more painful menses during exam periods

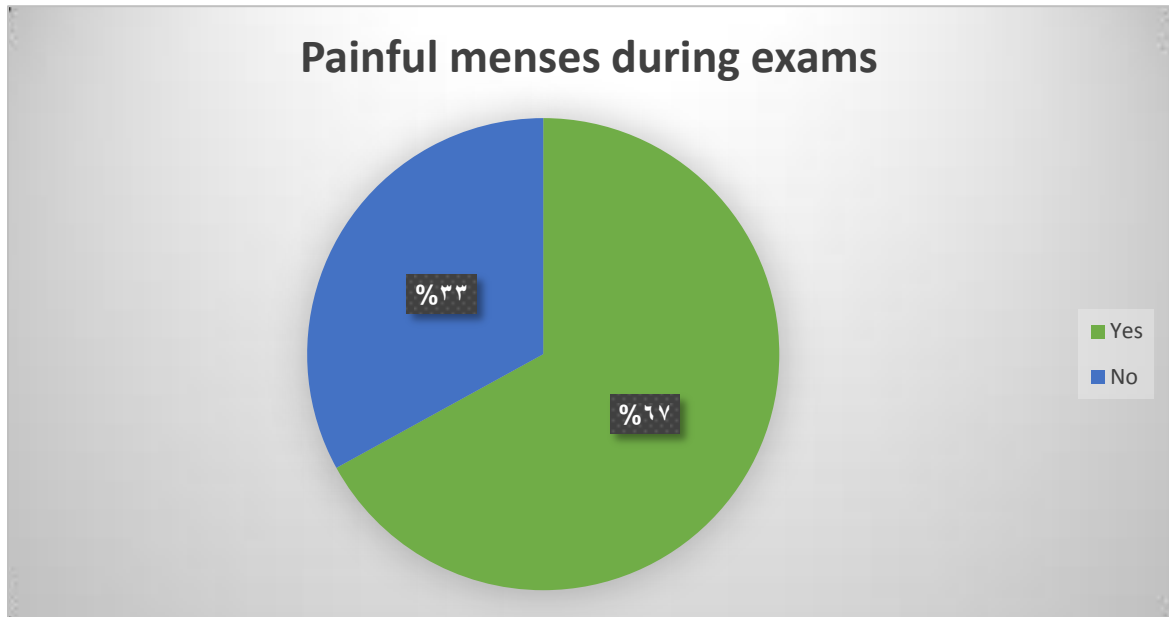


Figure 9: Percentage distribution of pain severity during exams across study participants

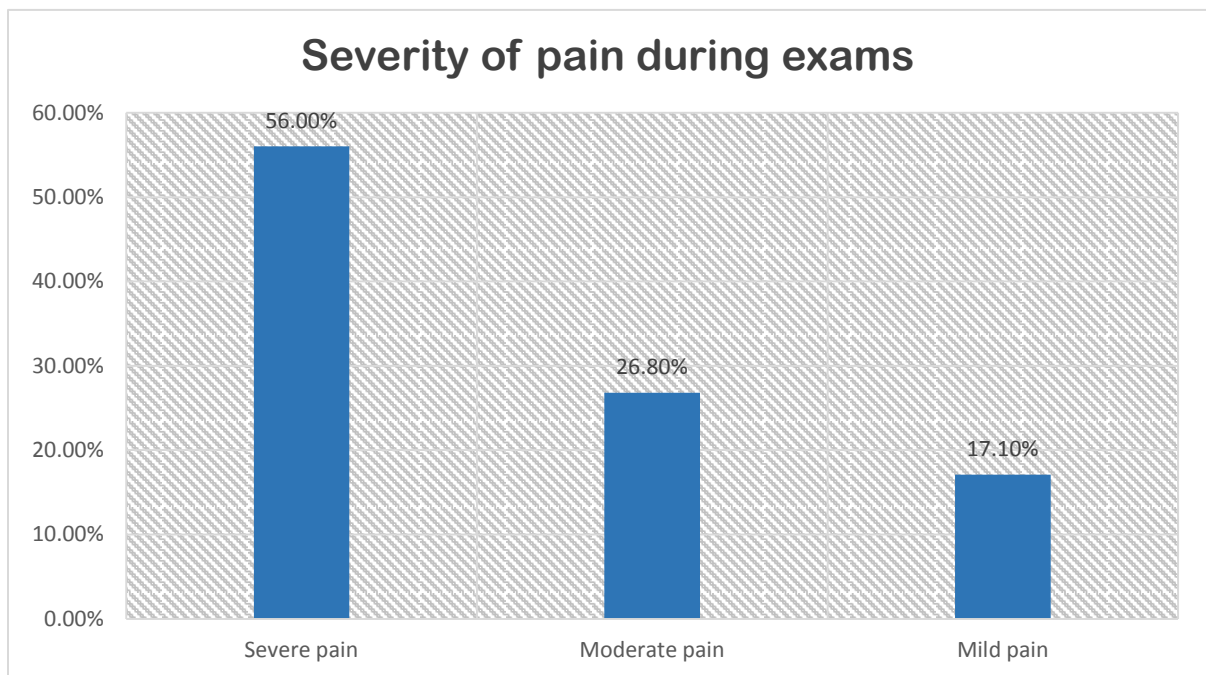


Figure 10: Percentage distribution of students whose daily activity is affected by dysmenorrhea.

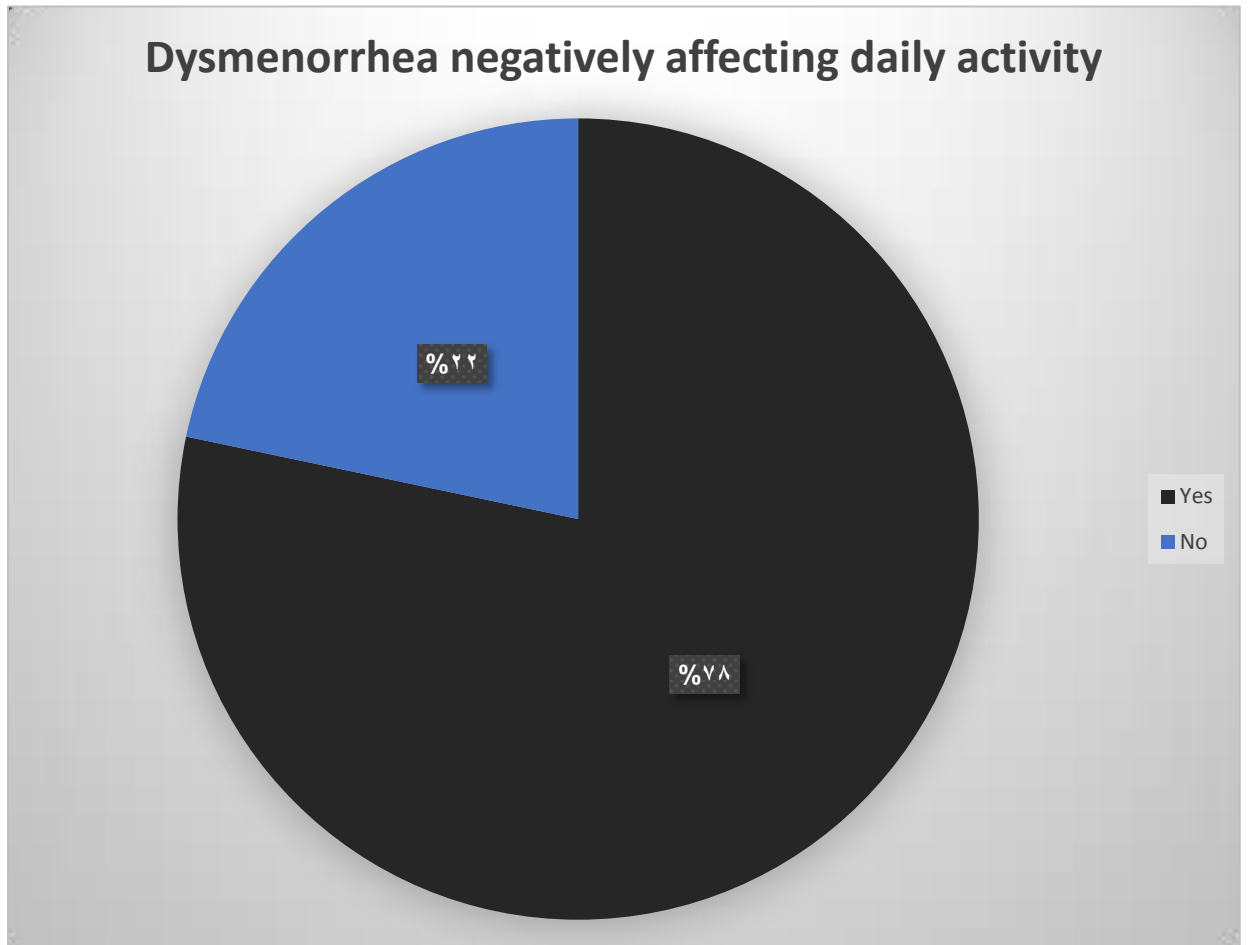


Figure 11: Percentage distribution of students' abstinence during menses.

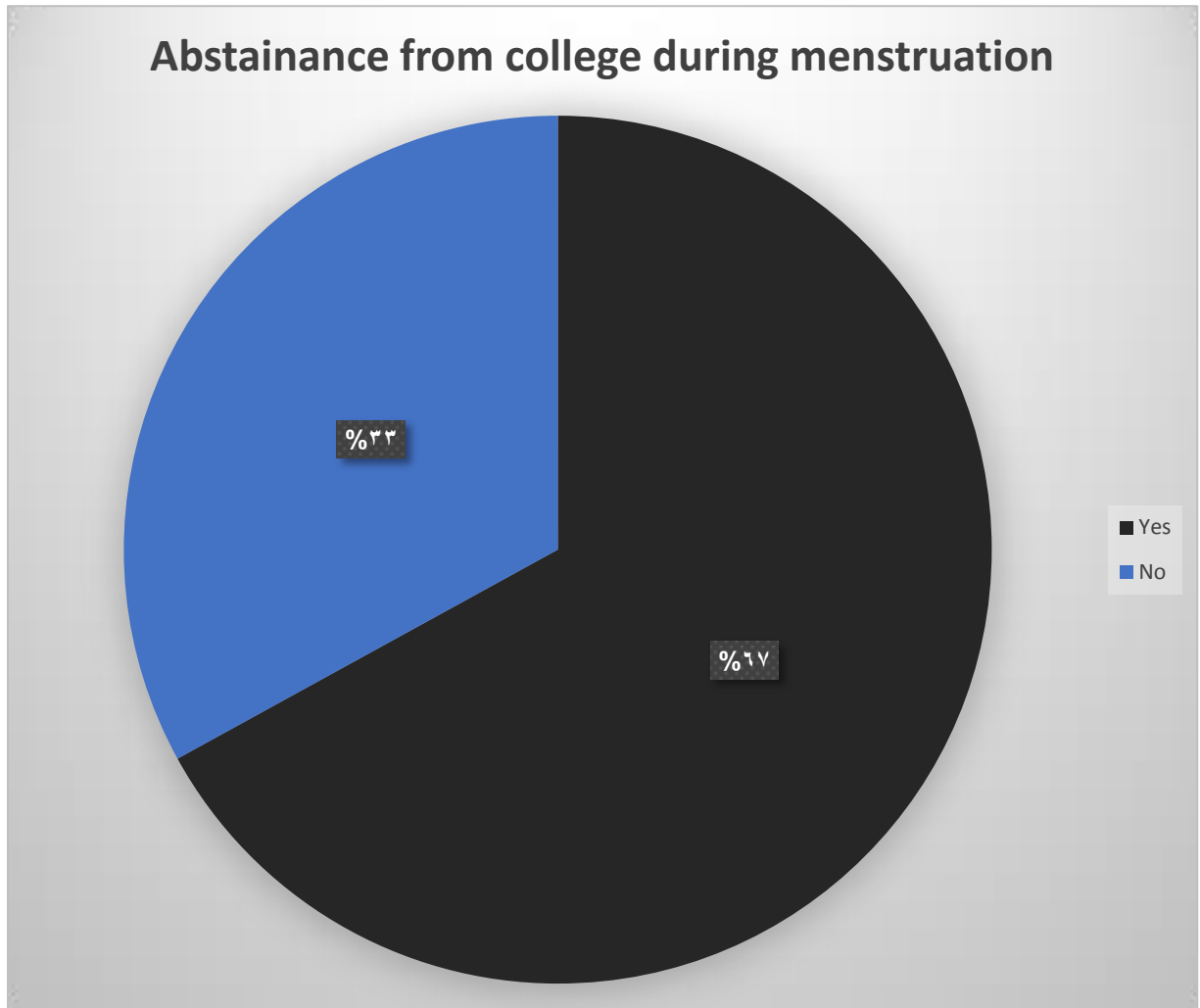


Figure 12: Percentage distribution of days of abstinence from college

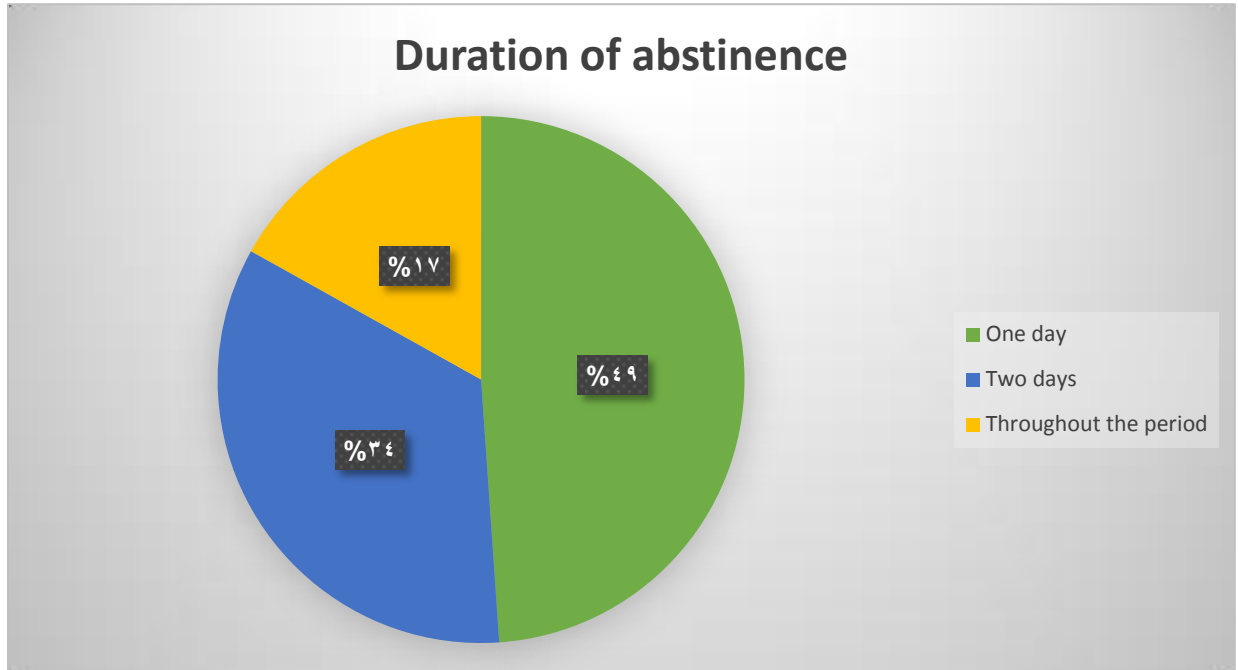


Figure 13: Percentage distribution of dysmenorrhea's impact on academic performance

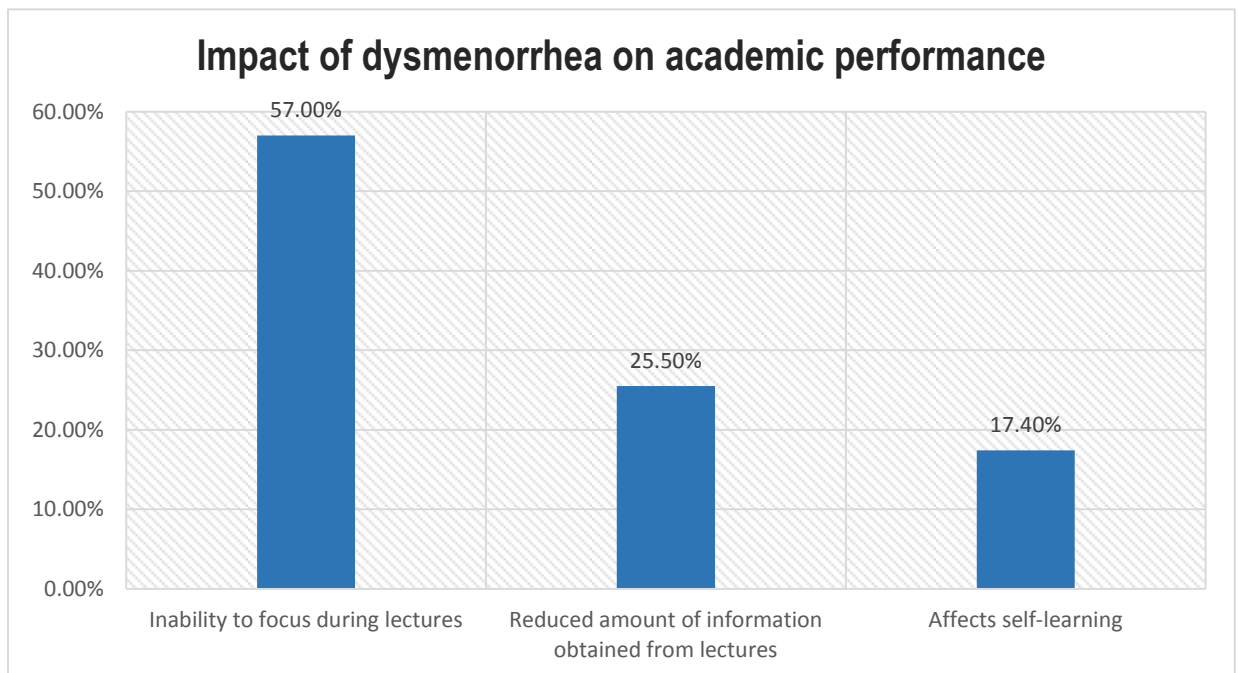


Figure 14: Percentage distribution of students who believe dysmenorrhea is affecting their GPA

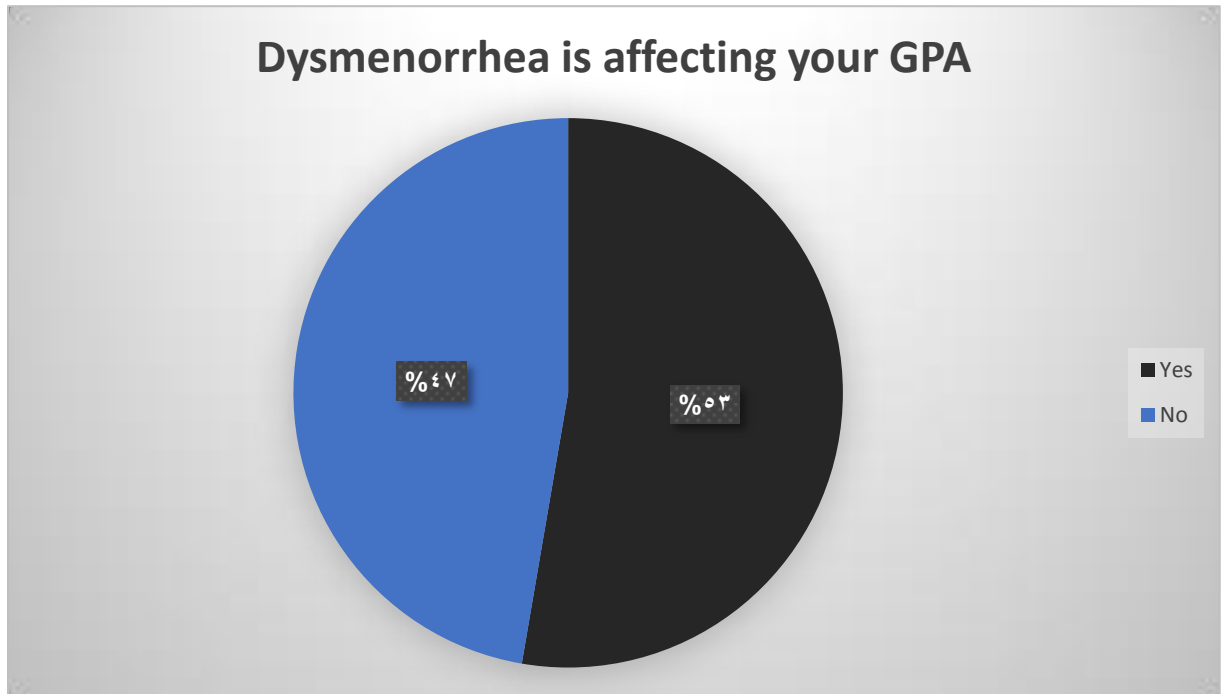


Figure 15: Percentage distribution of how frequent students feel depressed during menses.

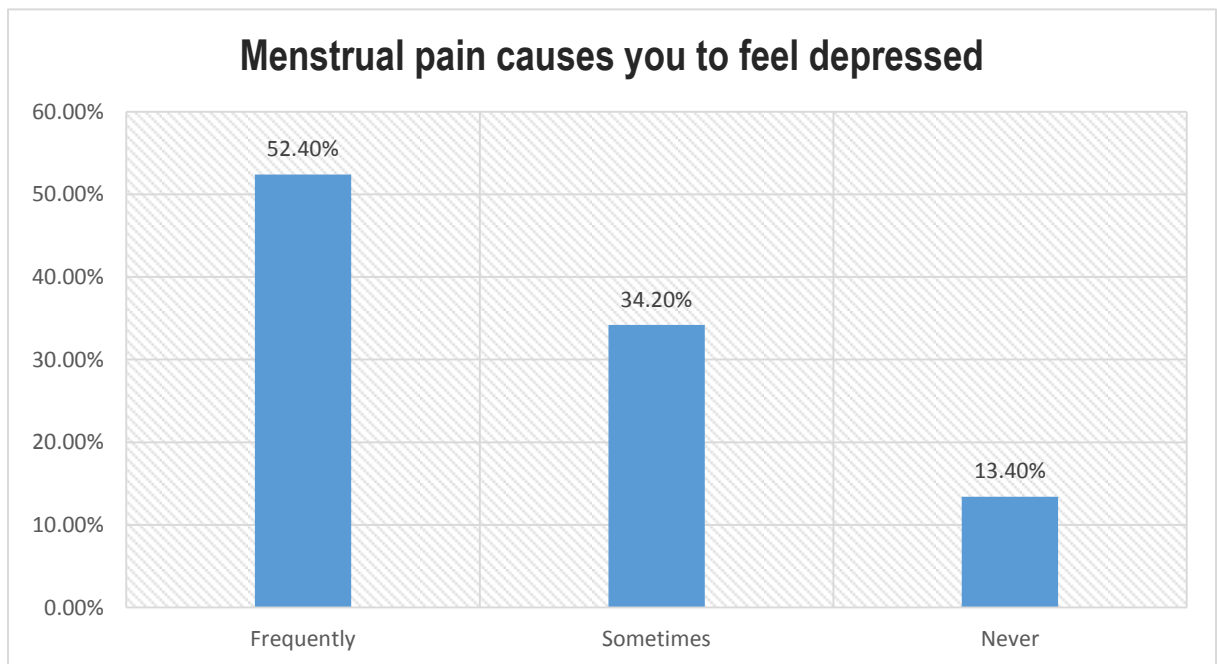


Figure 16: percentage distribution of students health seeking behaviour.

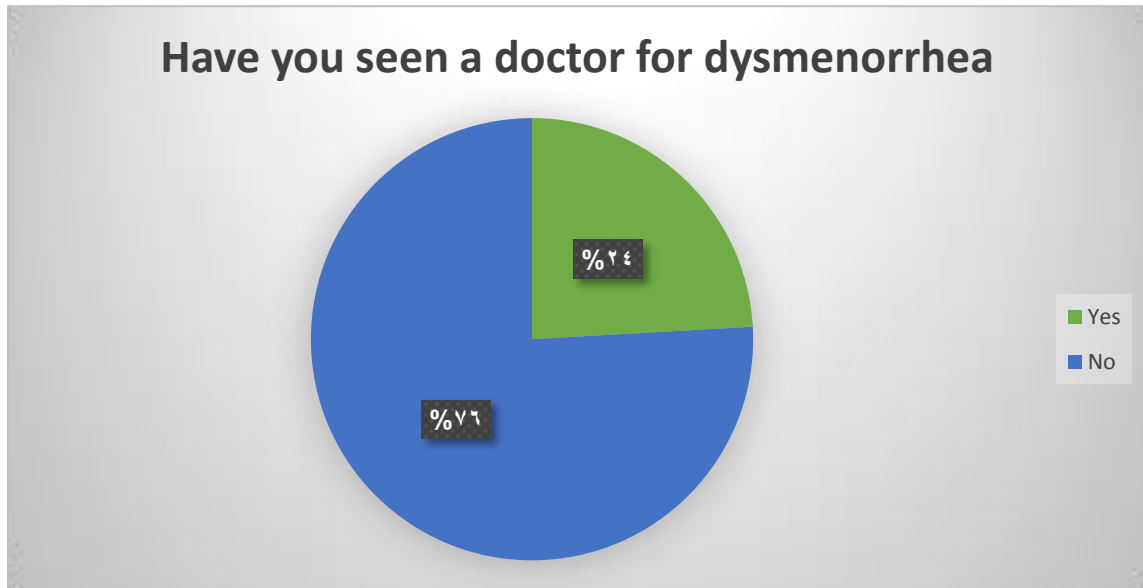


Figure 17: Percentage distribution of students' awareness of dysmenorrhea as a sign of possible illness.

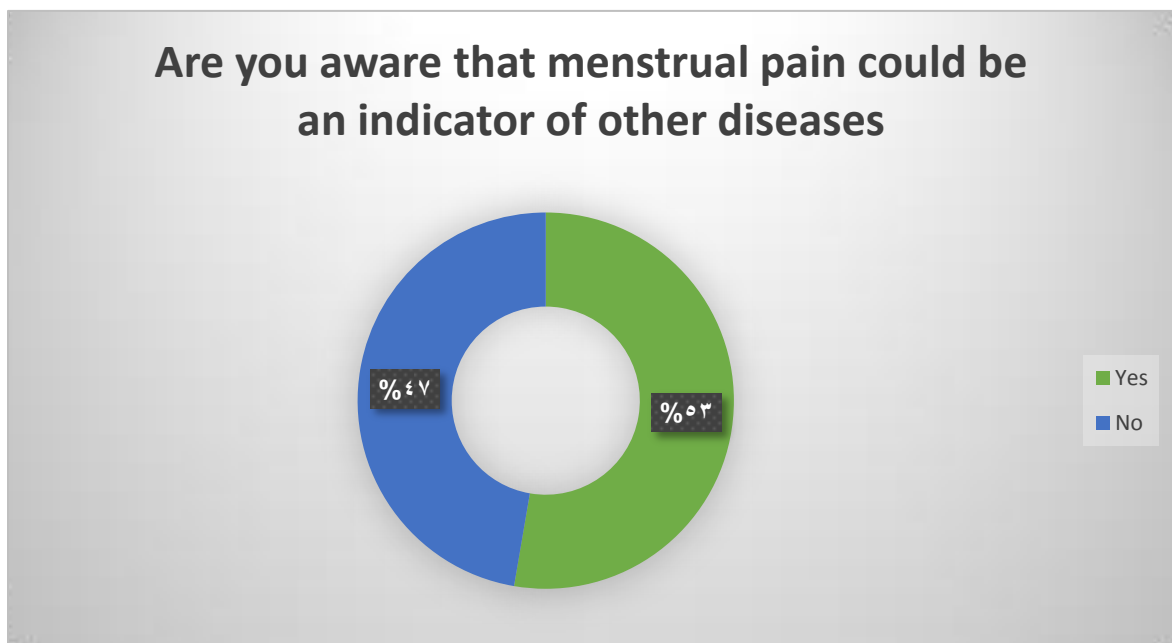


Figure 18: Percentage distribution of painkillers availability.

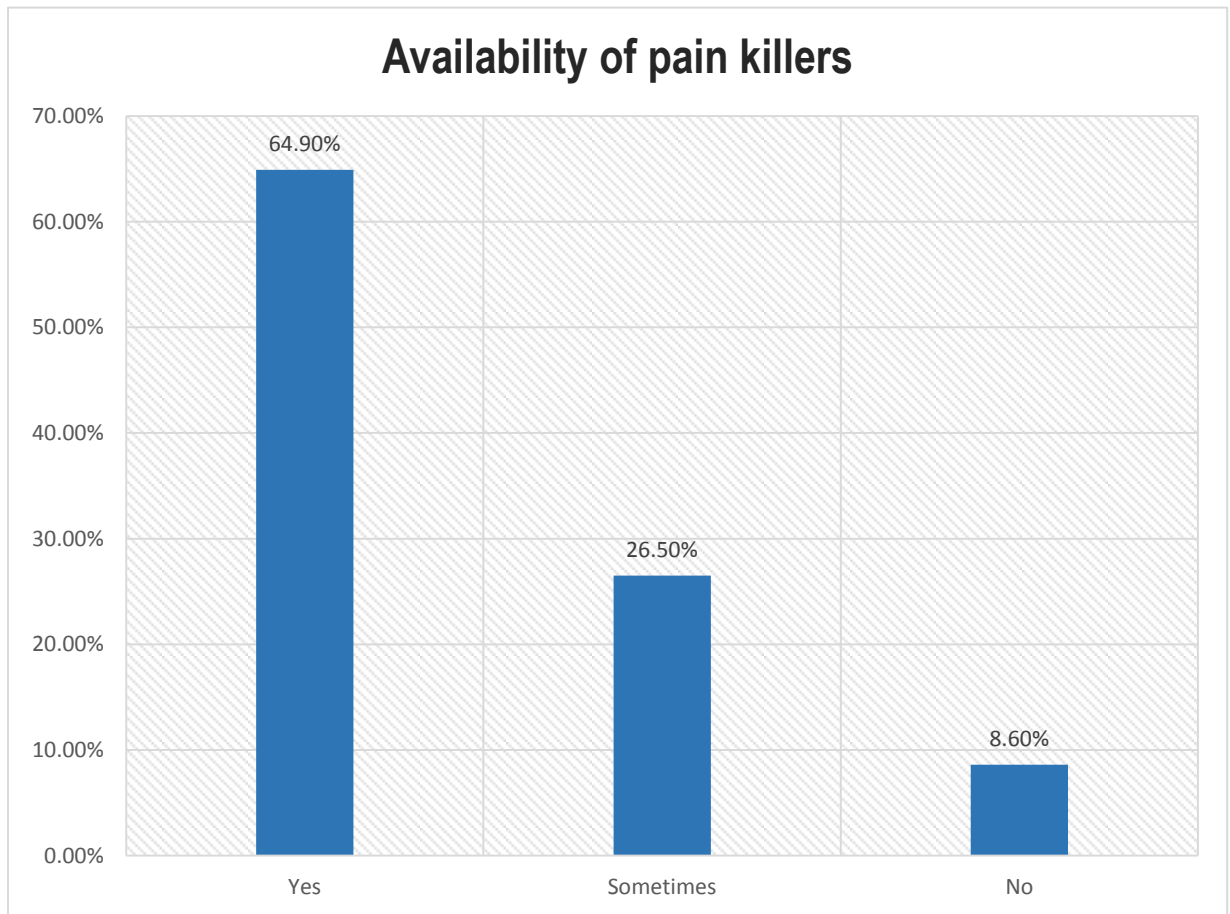


Table 1: Crosstabulation between marital status and dysmenorrhea

		Prevalence of dysmenorrhea				P val ve
		Yes		No		
		N	%	N	%	
M ar it a l s t a t u s	Single	26	82.	56	17.4	0. 00 1
		5	6%		%	
	Married /divorce d	71	95. 9%	3	4.1 %	

Figure 19: Dysmenorrhea across marital status

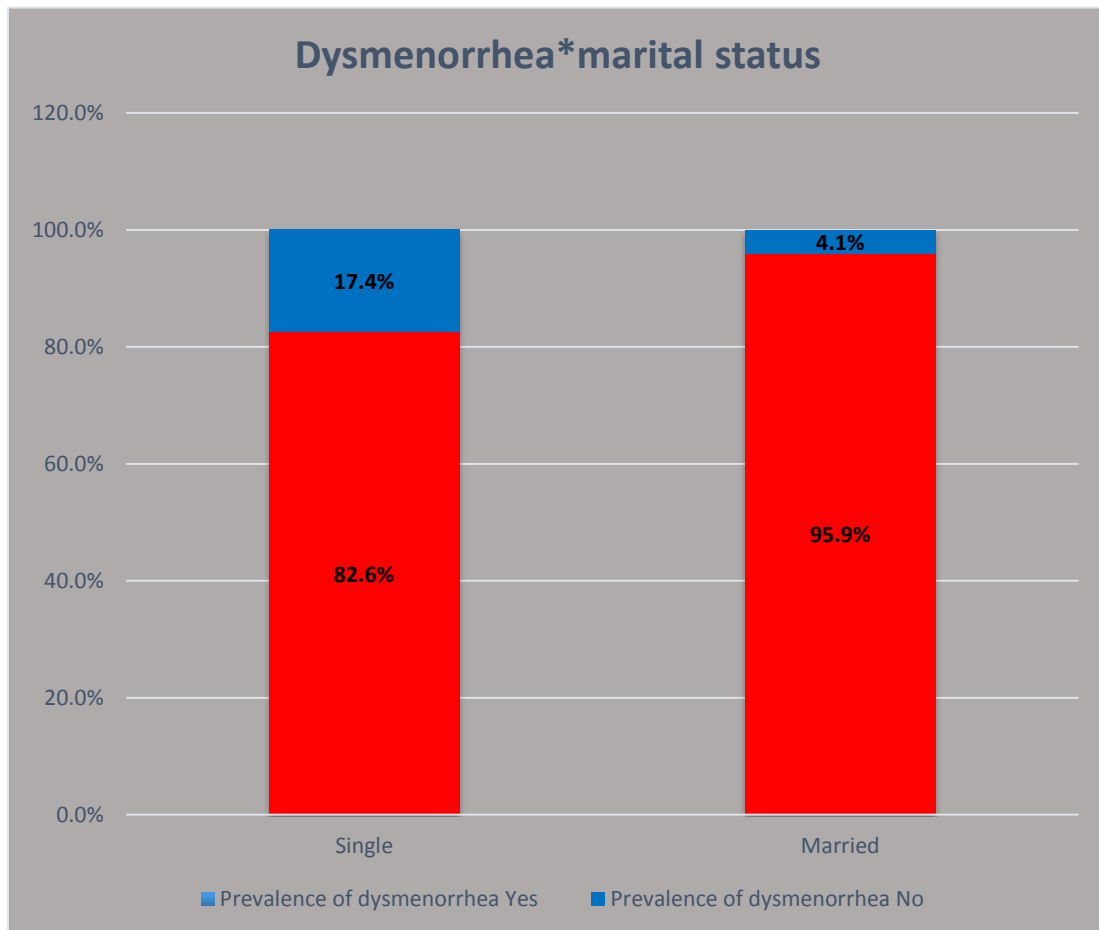


Table 2: Crosstabulation between severity of pain and its impact on academic performance

	Severity of pain						P value
	Mild pain		Moderate pain		Severe pain		
	N	%	N	%	N	%	
do you think dysmenorrhea affects your academic performance	60	20	9	30	14	47	0.01
	14	36	15	39	9	23	
	4	10	5	13	7	17	

Figure 20: Impact of Pain severity on academic performance.

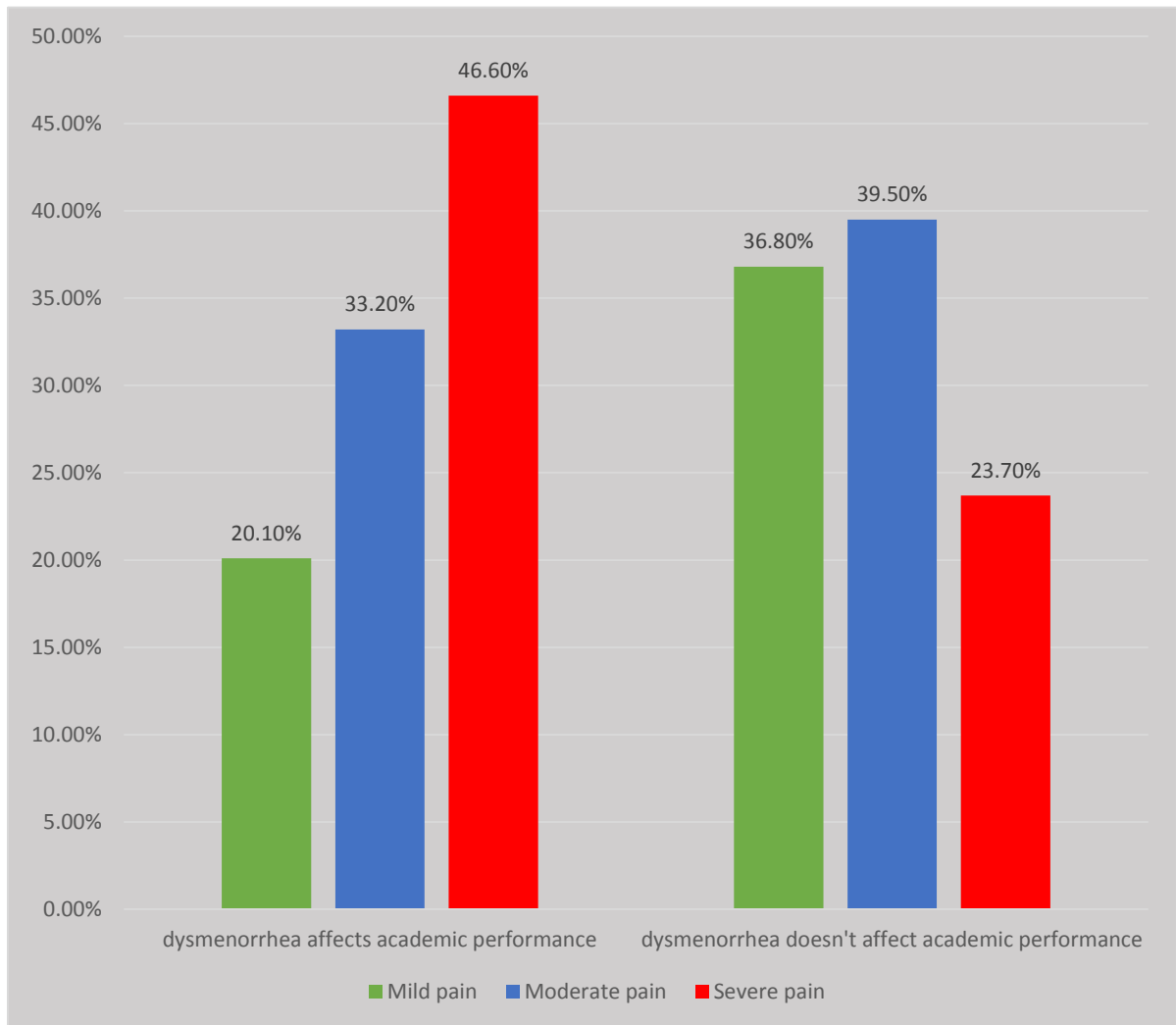


Table 3: Crosstabulation between severity of pain and its impact on college abstinence.

		Severity of pain						P v a l u e
		Mild pain		Moder ate pain		Severe pain		
		N	%	N	%	N	%	
Abstinenc e from college during menstruati on		3	1	6	2	1	5	0 .0 0 1
		9	7	5	8	2	3	
			.		.	1	.	
			3		9		8	
			%		%		%	
		3	3	4	4	2	2	
		5	1	9	4	7	4	
			.		.		.	
			5		1		3	
			%		%		%	

Figure 21: Impact of pain severity on abstinence from college

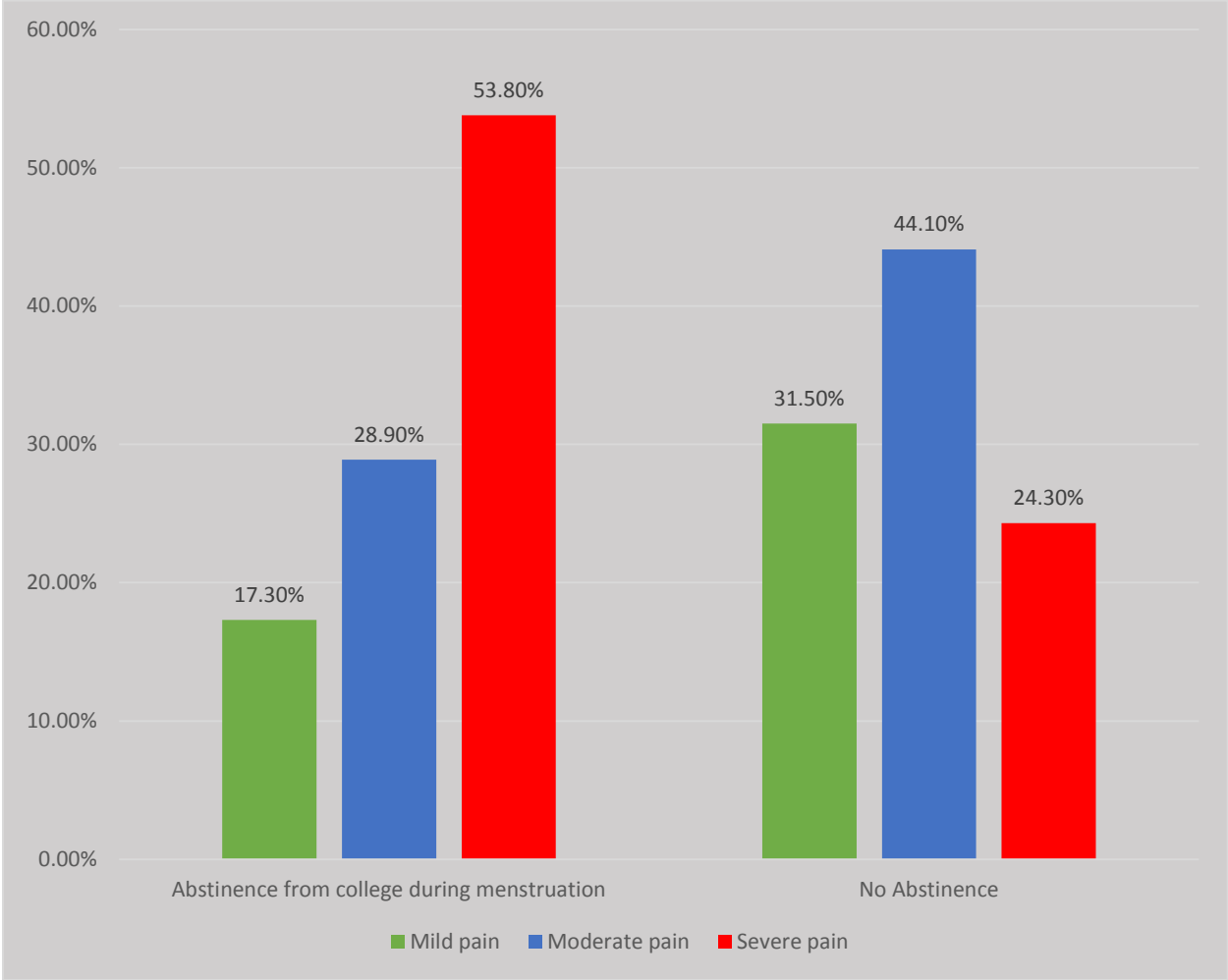
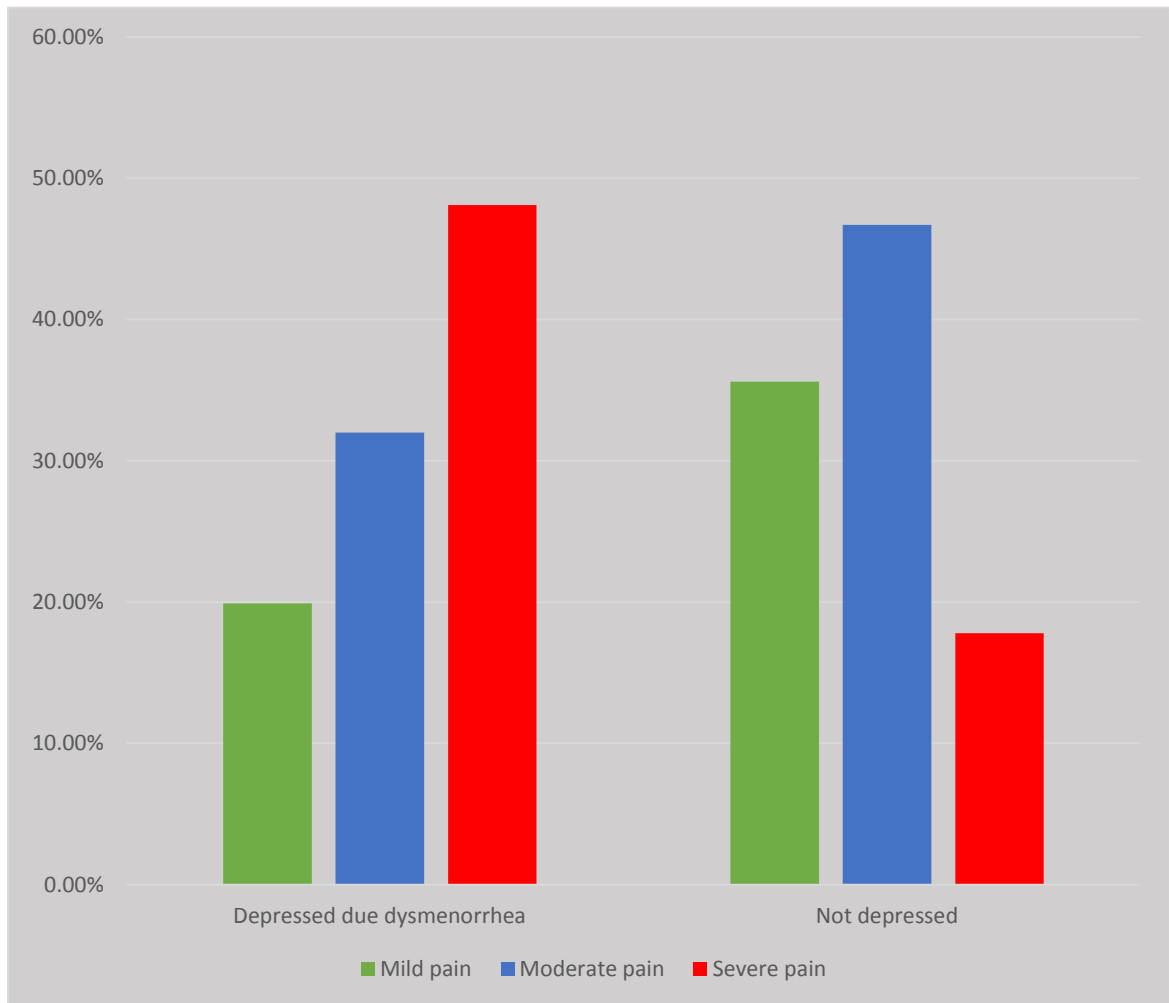


Table 4: Crosstabulation between severity of pain and depression due to painful menses.

		Severity of pain						P value
		Mild pain		Moderate pain		Severe pain		
		N	%	N	%	N	%	
Does menstrual pain causes you to feel depressed	Yes	58	19.9%	93	32.0%	140	48.1%	0.001
	No	116	39.5%	124	41.7%	118	39.8%	

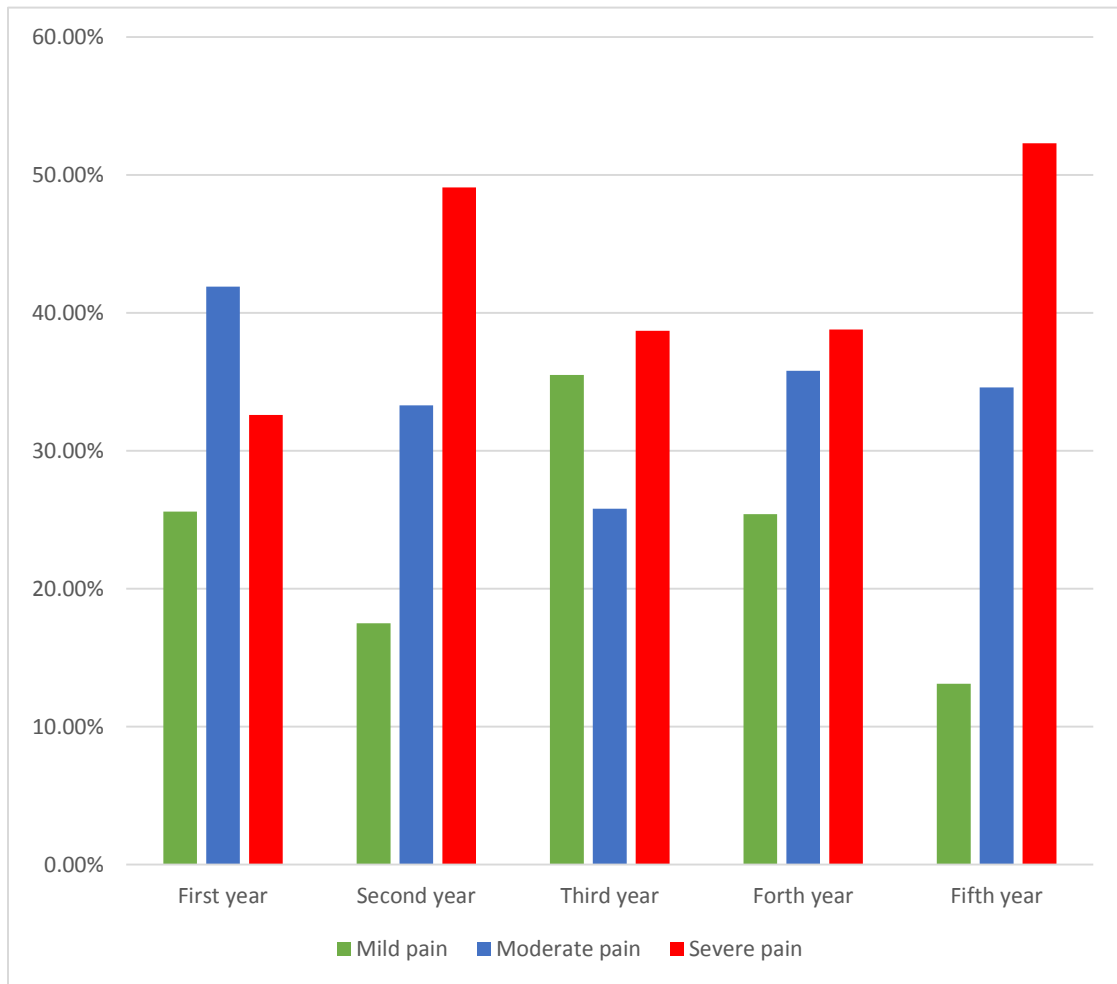
Figure 22: Impact of pain severity on depression.



		Severity of pain					
		Mild pain		Moderate pain		Severe pain	
		C o u n t	R o w N %	C o u n t	R o w N %	C o u n t	R o w N %
Academic year	First year	11	25.6%	18	41.9%	14	32.6%
	Second year	10	17.5%	19	33.3%	28	49.1%

	Th ird yea r	2 2	3 5. 5 %	1 6	2 5. 8 %	2 4	3 8. 7 %
	Fo rth yea r	1 7	2 5. 4 %	2 4	3 5. 8 %	2 6	3 8. 8 %
	Fif th yea r	1 4	1 3. 1 %	3 7	3 4. 6 %	5 6	5 2. 3 %

Figure 23: Severity of pain across different academic years



CHAPTER 5

5.1 Discussion:

In this study we report prevalence and severity of dysmenorrhea and its impact on academic performance among Napata's students. Students suffering from dysmenorrhea need to understand the clinical features and outcome to accurately diagnose and treat complications in a timely manner to alleviate symptoms and reduce mortality and morbidity. We found that the majority of students experienced pain with menstruation, and also described pain as severe. Furthermore, most of the students' pain worsened during examinations period.

Aside from physical health, dysmenorrhea disturbs the quality of life and productivity of young females. According to previous studies, primary dysmenorrhea is considered one of the leading causes of absenteeism from school and work, totaling 600 million hours per year and \$2 billion per year in lost wages.¹⁷

A total of 395 female medical students were included in this study, and mean age was 23.4 ± 4 years. The majority of students (81.3%) were single, 71 (18%) were married and 3 (0.8%) were divorced. Nearly one third of the students (30.9%) were fifth year students, 76 (19.2%) were fourth year students, 71 (18%) were second year students, 68 (17.2%) were third year students, the remaining 58 students (14.7%) were first year students.

Out of the 395 students who participated in this study, 336 students (85.1%) experience Pain with menstruation while the remaining 59 student (14.9%) are not experiencing painful menses.

This is similar to a study were women reported menstrual pain 84.1% of the time, 43.1% during every period, and 41% during some periods.¹⁸

When asked to grade the severity of the pain from 1 to 5 where 1-2 is mild pain, 3 is moderate and 4-5 is severe, 148 (44%) said it was severe pain, 114 (33.9%) said it was moderate, 74 (22%) said it was mild pain. This is in line with a study were the majority (80.34%, n= 654) of dysmenorrhic females reported having moderate/ severe pain.¹⁹

When asked if the pain is worse during exam period 225 (67%) said it was more severe while 111 (33%) said wasn't, as 144 (56%) said it was severe, 69 (26.8%) said it was moderate and 44 (17.1%) said it was mild pain. As such there was significant difference in pain severity during exam and non-exam periods ($P=0.01$). Several psychological disorders appear to be bidirectionally correlated with dysmenorrhea, including depression, anxiety, and stress. Menstrual pain might increase the risk of depression, anxiety, or stress, or vice versa. Menstrual pain can be exacerbated by these psychological

disorders. Dysmenorrhea and depression may increase the perception of pain severity and reduce medication response.²⁰

About two third (63.4%) Of the 336 students with dysmenorrhea said they experience premenstrual syndrome monthly, other 110 (32.7) said they experience it infrequently, the remaining 13 (3.9%) said they do not experience premenstrual syndrome, as shown in table (2). Premenstrual syndrome has a variable prevalence. This is similar to a study were the prevalence is as high as 75–85% if several symptoms are present, 10–15% if medical care is sought, and 2–5% if social activities are interrupted.²¹ Dysmenorrhea is negatively affecting the daily activity of 78.3% of the students, as 67% are abstaining from college during menses, 88.7% said their academic performance is affected, however 52.7% said dysmenorrhea affects their GPA. Prevalence in our study is high in contrast to a study were the prevalence of the impact of dysmenorrhea on academic performance was 74.7%.²² Only 24.1% of the students sought medical care for dysmenorrhea, 52.7% were aware that menstrual pain could be an indicator of other disease. This might be due to nine categories of reasons: assuming symptoms are normal, self-managing symptoms, limited resources, the belief that providers won't assist, not knowing about treatment options, considering symptoms tolerable, being wary of available treatments,

feeling embarrassed or afraid to seek care, and not seeking health care in general.²³

Napat's college undergraduate female students showed a high prevalence of dysmenorrhea impacting academic performance. Studying, doing homework, concentrating in class, participating in activities, attending classes, and engaging in sports were among the most common impacts. An independent factor for dysmenorrhea's impact on academic performance was dysmenorrhea pain intensity, age at menarche, and premenstrual syndrome. Napat's college officials and teachers need to be made aware of the impact of premenstrual syndrome and dysmenorrhea pain intensity on academic performance in order to provide psychological and academic guidance, and provide management mechanisms for the affected students. In order to provide medical care for the affected students, Napat's college must establish a medical facility.

Our study had several limitations, first, the design increased chances of bias; secondly we selectively included patients with dysmenorrhea only, without including patients with other gynecological issues such as menorrhagia, so our results cannot be directly compared between patients; lastly, due to inconvenience, we were not able to include other universities, so findings cannot be generalized.

Despite these limitations, our study has strong points, such as the large sample size of patients, the reliable questionnaire used to produce accurate results, and the exclusion criteria that ensured to target the suitable patients for the study.

CHAPTER 6

6.1 Conclusion

In conclusion, the academic performance of Napat's college undergraduate female students was adversely affected by dysmenorrhea. Affected activities included studying, doing homework, concentrating in class, participating in activities, attending classes, and engaging in sports. Dysmenorrhea pain intensity, menarche age, and premenstrual syndrome all contributed to dysmenorrhea's impact on academic performance.

CHAPTER 7

7.1 Recommendation:

1-To educate the female of napta students on pain control methods.

2-To educate the female on triggers and modifiable factors associated with dysmenorrhea.

3-To raise the awareness on the importance of seeking medical advice for dysmenorrhea.

4-To destegmize dysmenorrhea.

7.2 Disclosure:

The authors report no conflicts of interest in this work.

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العمر؟*

إجابتك

الحاله الاجتماعيه*:

❖ عازبة

❖ متزوجة

❖ مطلقه

❖ أرملة

المستوي الدراسي*:

❖ الأول

❖ الثاني

❖ الثالث

❖ الرابع

❖ الخامس

السكن*

❖ مع الأقارب أو الأسره؟

❖ سكن طالبات(داخليات)

❖ لوحدك

الدخل الشهري؟*

❖ اقل من 20 الف

❖ من 20 الف الي 50 الف

❖ اكثر من 50 الف

هل تعانيين من الأم الدورة الشهري؟*

❖ نعم

❖ لا

اذا كانت الإجابة في السؤال السابق نعم : هل يمكنك وصف حدة الالم من) 1-5 الدرجة 5 هيا

الاسوأ)

1 ❖

2 ❖

3 ❖

4 ❖

5 ❖

هل تعانيين من متلازمة ما قبل الحيض- أي من الاعراض الآتية) :تغير الحالة المزاجية-حب

الشباب-ألم الثدي -التعب-الصداع)*

❖ نعم (شهريا)

❖ لا

❖ أحيانا

هل تشعرين بالهم والقلق عند إقتراب موعد الدورة الشهرية؟*

❖ نعم

❖ لا

هل تعتقدين أن عسر الطمث يؤثر سلبا علي حياتك؟*

❖ نعم

❖ لا

تأثير عسر الطمث علي الاداء الدراسي:

هل تضطرين للغياب من الجامعه اثناء فترة الحيض*؟

❖ نعم

❖ لا

اذا كانت الإجابة نعم :كم عدد الايام التي تغييبن فيها عن دراسه؟

❖ يوم واحد

❖ يومان

❖ كل ايام دوره الشهرية

هل تؤثر الأم الدورة الشهرية علي ادائك الدراسي*؟

❖ نعم

❖ لا

❖ احيانا

اذا كانت الاجابة نعم كيف يتاثر الأداء الدراسي عند حصول التقلصات؟

❖ لا يمكنني التركيز أثناء المحاضرات

❖ لا يمكنني تجميع نفس القدر من المعلومات

❖ تتأثر دراسته الفرديه

هل تزيد ألام دوره الشهرية في ايام الامتحانات؟*

❖ نعم

❖ لا

اذا كانت الاجابه نعم:هل يمكنك وصف حدة الالم ايام الامتحانات؟من 1-5

الدرجه 5 الاسوأ

❖ 1

❖ 2

❖ 3

❖ 4

5 ❖

هل تعتقد ان الأم الدوره الشهرية يسبب لك بعدم الحصول علي معدل دراسي مرضي لك؟*

❖ نعم

❖ لا

هل تستطيعين الحصول علي مسكنات الألم بسهولة؟*

❖ نعم

❖ لا

❖ احيانا

هل الأم الدوره الشهرية تسبب لك الإكتئاب؟*

❖ نعم

❖ لا

❖ احيانا

هل قمتي بمقابلة طبيب من قبل بسبب الأم الدوره الشهرية؟*

❖ نعم

❖ لا

هل تعملين ان الأم الدوره الشهرية قد تكون مؤثر لأمراض ثانويه؟*

❖ نعم

❖ لا