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Knowledge, assessment of symptoms and attitudes regarding genitourinary syndrome among postmenopausal healthcare workers in a tertiary care hospital

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Introduction

In 2014, the International Society for the Study of Women's Sexual Health and the North American Menopause Society (NAMS) proposed the introduction of the designation of Genitourinary Syndrome of Menopause (GSM). GSM is defined as a collection of symptoms and signs associated with a decrease in estrogen and other sex steroids involving changes to the labia majora/minora, clitoris, vestibule/introitus, vagina, urethra and bladder. A study on menopausal symptoms done in Sri Lanka reported that urogenital symptoms such as bladder problems (49.5%), vaginal dryness (43.9%) and sexual problems (33.1%) were reported least frequent symptoms.

Method

All the participants of this study were subjected to a questionnaire and data was collected for analysis.

Results

Age of the participants ranged from 48 years to 59 years and the majority (36%) were 59 years. All were married and 36% of them had education up to Advanced level. Most of them (80%) didn't have an idea about genitourinary symptoms in menopause or the age one would experience those symptoms. Although majority of them (90%) underwent natural menopause with some genitourinary symptoms commonly vaginal dryness and increased urgency in urination, symptoms were not severe enough to affect their daily activities or sexual life. 80% of the participants had non-communicable diseases and majority of the rest of the population also are not being screened for such diseases. Only 2.3% of the participants have sought medical advice and their symptoms improved with hormonal therapy. The behavior of not seeking medical advice was largely due to accepting genitourinary symptoms of menopause as a natural process and due to social taboo.

Conclusion

Although genitourinary syndrome in menopause is common, the awareness among healthcare workers also remains at a very low level. Educating the population, assessing symptoms especially of those who undergo menopause at a younger age is of utmost importance.



A clinical audit on evaluation of pap smear screening among patients aged 30 to 75 years, followed up at a university family practice center

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Introduction

Cervical cancer, the second most common gynecological malignancy worldwide, is preventable through regular screening. Despite the availability of Pap smear testing, uptake remains suboptimal

Objectives

1. To assess the proportion of females who have undergone pap smear testing among patients attending a university family practice center
2. To determine the reasons for non-adherence to screening guidelines among female patients

Methodology

Fifty married female patients attending the family medicine clinic at Faculty of Medicine, University of Sri Jayawardenepura, during a month were included. Data was collected via interviewer-based questionnaires administered by doctors. Inclusion criteria were married status, exclusion criteria included sexual inactivity.

Results

Mean age was 53.6 years, 44% had undergone Pap smear screening at least once, 56% had not undergone screening at all. The primary reasons for non-adherence included lack of awareness (25%) and

inadequate guidance (54.5% informed by midwives). Time constraints (28.5%) and procedural anxiety (14.2%) were noted. Patients who had undergone hysterectomy or experienced the early death of a spouse were less likely to undergo screening. knowledge regarding the recommended screening intervals was poor. No participants adhered to the recommended five-year interval up to age 65.

Conclusion

The audit highlights suboptimal Pap smear screening and significant barriers for cervical cancer screening among female patients attending the university family practice center. To enhance screening rates, comprehensive educational initiatives targeting both patients and healthcare providers are warranted. Primary care settings can play a crucial role in cervical cancer prevention efforts. Re-audit planned following further improvement in educating patients and staff.

Knowledge attitudes and practices regarding HRT among health care workers in tertiary care centers in Sri Lanka

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Objectives

To modify the early and late menopause complications, women with early natural menopause or surgically menopause are prescribed HRT by clinicians. Knowledge, attitudes and practices of health care



workers are the key factors to determine the starting HRT among the targeted population.

Method

A descriptive cross-sectional study was conducted among 150 volunteer healthcare workers attached to gynecological field at tertiary centers, to assess the knowledge attitudes and practices, data were collected and analyzed.

Results

95%(n=143) of the participants were aware that HRT is the gold standard treatment for distressing vasomotor symptoms. Knowledge of the type of HRT (33% n=50) and duration of the treatment (26% n=39) were lacking among participants. Awareness of risk reduction of neurodegenerative diseases, and reduction of cardiovascular mortality and morbidity are poor among participants respectively 42%, and 48%. Local treatment for vaginal dryness is a known practice among healthcare workers (65% n=98). 100% of healthcare workers suggested that they need an educational program to gain new knowledge.

Conclusion

Knowledge regarding the benefits of HRT was poor among participants. Practicing of HRT was poor due to negative attitudes and inadequate updates on complications of HRT.

Prevalence of menopausal symptoms and its association with depression, cognitive functions and socio-demographic factors of middle-aged females attending a tertiary care hospital in Sri Lanka

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Background

Psychological well-being during menopause is identified as a major health concern. Although studies have been carried out to assess menopausal symptoms in Sri Lanka, no data was available on the relationship between the severity of menopausal symptoms with clinical depression and cognitive functions.

Objectives

To assess the prevalence of menopausal symptoms and its association with depression, cognitive functions and socio-demographic factors of middle-aged females attending a gynaecology clinic of a tertiary care center in Sri Lanka.

Method

A descriptive cross-sectional study was conducted in a convenience sample of females of ages 40-65 attending a gynaecology clinic with no history of mental health disorders using an interviewer administered questionnaire. It included the culturally adapted menopausal rating scale(MRS), patient health questionnaire(PHQ-9) and Montreal cognitive assessment(MoCA).

Results

A total of 138 individuals completed the survey [mean age= 49.8 years]. The mean MRS score was 8.7(SD=5.4). Majority(75.4%) of the sample showed menopausal symptoms(27.5% mild; 40.6% moderate; 7.2% severe). Individuals with



chronic medical comorbidities had higher MRS scores ($t= 4.6$, $p<0.001$). Overall MRS was not significantly associated with age, marital state, regular exercise or use of hormone replacement therapy. One third of the sample (33.3%) exhibited at least mild depressive symptoms. MRS was positively correlated with depression ($r=0.74$, $p<0.001$) and had a weak inverse correlation with the total MoCA. Out of the cognitive domains, MRS had the strongest correlation with memory. ($r= -0.24$, $p=0.005$)

Conclusion

Our study suggests that one-third of females in the middle-age group suffer from depressive symptoms, and that menopausal symptoms have significantly contributed to it. Moreover, it shows cognitive functions including memory are affected by menopausal symptoms. Contribution of menopausal symptoms in developing depression in this age category needs active attention as treatment protocols may need to be adjusted to suit them.

Do vasomotor symptoms elevate the risk of depression at menopause? A systematic review

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Objectives

Menopause is one of the important life events of a female which is accompanied by physical and psychological changes. Among these, vasomotor symptoms are the most common early symptoms. A Systematic review addressing the psychological consequences of menopause has not been undertaken to diagnose depression among postmenopausal women who are experiencing vasomotor symptoms.

Method

This literature review focused on studies conducted by using the PRISMA methodology which was published in English since 2004 and examined the relation between vasomotor symptoms and depression. GRADE criteria were used to assess the quality. Prevalence, clinical status, prognosis, and evaluations of vasomotor symptoms with depression were analyzed.

Results

In this analysis, 32 citations were selected, summarized, and compared. Out of the selected studies, most were cross-sectional and cohort studies. The majority of participants experienced at least a mild depressive episode in the first year of the menopause. Vasomotor symptoms, affecting daily activities were associated with recurrent episodes of depressive reactions. Individuals with a known history of depressive disorders had exacerbated symptoms in the presence of vasomotor symptoms. Many studies have shown the importance of the psychological influence and prescription of medications to overcome these symptoms among those study groups.

Conclusions



Vasomotor symptoms occur with altered thermal dysfunction. Vulnerability for depression is much higher in postmenopausal women and this affects the emotional well-being due to altered levels of hormonal status during early menopause.

Systematic review on prevalence and associated risk factors of common peri-menopausal gynecological disorders

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Objectives

The prevalence of common gynecological disorders and their associated risk factors pose significant challenges to women's health globally. These conditions contribute to increased morbidity and mortality rates, while also diminishing the overall quality of life and productivity among affected individuals. Three prevalent gynecological disorders frequently encountered in women's health are uterine fibroids, endometriosis, and adenomyosis. The objective of this study is to systematically review the prevalence and associated risk factors of common perimenopausal gynecological disorders among patients in low-middle-income countries.

Method

Twenty relevant scientific databases were systematically searched. Reviewers screened the articles and extracted data on the prevalence and associated risk factors of these gynecological disorders.

Results

A review of 20 articles revealed that the majority were conducted in Low- and Middle-Income Countries. Factors impacting Endometriosis in perimenopausal women were identified as BMI, menstrual duration, age, and parity. Studies indicate a prevalence rate of 5%-10% for endometriosis among perimenopausal women. Similarly, associations with uterine fibroids encompass lifestyle, BMI, diet, physical activity, and stress. Diagnosis of uterine fibroid cases, confirmed through ultrasound or surgery, revealed prevalence rates ranging from 40%-60% among perimenopausal women. Additionally, a systematic review of published research articles on factors associated with adenomyosis among perimenopausal women highlighted obesity, parity, and delivery mode, with prevalence rates ranging from 30%-60%.

Conclusion

The majority of women encounter gynecological disorders at some point in their lives, many of which disrupt the menstrual cycle and are associated with obesity. The prevalence of these common perimenopausal conditions varies significantly.

Menopause and workforce: exploring the intersection of menopause and workplace dynamics in Sri Lankan health care setting

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Objectives

Menopause represents a significant reproductive milestone in a woman's life. The study aimed to explore how menopausal symptoms affect work-life balance, how work conditions influence these symptoms, measures taken to alleviate and strategies for improving workplace dynamics.

Methodology

The study focused on female healthcare workers (HCWs) aged 45-55 at Ragama Teaching Hospital and utilized an interviewer-administered questionnaire.

Results

Of the 66 healthcare workers (HCWs), majority were nursing officers (57.6%), followed by allied health-staff (18.2%), midwives (15.2%) and doctors (6.1%). The average age was 51.2+/-3.4 years. A significant portion (69.7%) were menopausal, 12.1% peri-menopausal and 3% having undergone surgical menopause. Common symptoms included musculoskeletal pains (66.7%), poor memory (51.5%), hot flushes (48.5%), mood disturbances (27.3%) and genito-urinary symptoms (18.2%). Two-thirds of those with symptoms reported impact on both household and workplace activities with 9.1% acknowledging reduced effectiveness at work with symptoms exacerbated by prolonged standing and longer shifts. Many (72.7%) noted inadequate washroom facilities at work.

Despite flexibility in working hours during flare-ups (84.8%), only 15.2% took a day off due to menopausal symptoms, often not disclosing the reason (33.3%). Hormonal replacement therapy (HRT) was not utilized by any participant, primarily due to lack of awareness (65.4%) or concerns about side effects (38.5%). A majority (51.5%) had never discussed menopausal symptoms, though those who did found peer and support of superiors satisfactory (79.2%). Participants suggested flexible hours, better ventilation, and educating superiors could ease the menopausal transition, highlighting a need for official support mechanisms.

Conclusions

The study reveals the need for supportive workplace measures to address the impact of menopausal symptoms on healthcare workers' professional and personal lives. Despite the profound effects on their well-being, HCWs were hesitant to initiate HRT.

An online study on women's knowledge and education on menopause

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Background

The menopause affects all women, yet little information is known about it. Research on women reveals that women's knowledge of the menopause is severely lacking.

Objectives

The purpose of this study is to determine the understanding of menopause by women, and from where they gathered the information on menopause. This



information will be useful in figuring out how best we can educate them regarding menopause.

Method

Using Google questionnaire, a survey was created asking women under 40 about their knowledge of their opinions regarding the menopause in the year 2023. A free-text question with answers was analysed using Excel. Women were questioned about their level of knowledge regarding the menopause, about their educational experiences learning about the menopause, How knowledgeable do women feel about the menopause, how they had found information about the menopause, questioned on the best places to teach people about the menopause and the importance of teaching men about menopause.

Results

The demographics of the 225 participants showed that the majority of participants (64%, 146/225) were between the ages of 21 and 30. The participants' average age was 25. According to this study, the majority of women under 40 know very little or nothing about the menopause. The analysis showed that everyone should be taught about menopause in schools and this will help to lessen male ignorance.

Conclusion

Effective menopause education in schools requires that it be comprehensive and given to every student. It is advisable to approach menopause education holistically, outside of the classroom. Menopause education should ideally be provided in the workplace, through social media. Menopause education can only be properly

provided throughout the life course by combining these approaches.

Awareness of cervical cancer screening among postmenopausal women – A clinic-based study at Teaching Hospital Kurunegala

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Objective

Cervical cancer is the leading gynecological cancer in Sri Lanka. Cancer screening is a main public health intervention which covers the 30%-50% of target population. Hence, the purpose of this study was to determine the awareness of cancer screening among residents in the Kurunegala district of Sri Lanka.

Method

A descriptive cross-sectional study was conducted among post-menopause women of the age group in gynecologic clinic in Kurunegala district, and data were collected using an interviewer-based questionnaire.

Results

There were 302 participants and of them, 74% were aware that cervical cancer is the commonest gynecological cancer in Sri Lanka. The resource of information on cancer screening was given by the public health midwife (n=283) for most of those participants. 223 (73.4%) had a PAP smear test at least once in the lifetime. 18 participants were not aware about the cancer screening program (6%). Despite



the invitation to the screening, 19% (n=54) were never attained to well women's clinic. Out of all participants who had undergone PAP smears at any age after 35, only 28% (63) were aware of their own results. Out of 223 people have undergone PAP 5% (12) were asked to come to collect the report immediately but deflated. 7 (3%) participants were diagnosed with cervical cancer and treated with surgery and concurrent chemo-radiation.

Conclusion

Screening rate is above national figures among the study population. Awareness of cervical cancer seems inadequate when considering the attained follow up after PAP and repeat testing of cervical cancer screening. The knowledge of preventive methods seems unsatisfactory. Cancer screening awareness programs should be emphasis to overcome the cervical cancer burden in Sri Lanka.

Complete Hydatiform mole in a 51-year-old postmenopausal woman: A case report

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Background

Gestational trophoblastic diseases are a spectrum of pregnancy related disorders ranging from benign to malignant. Molar pregnancies occur in the reproductive age group. There is a direct association between increased maternal age and the development of Complete Hydatiform mole but it is exceptionally rare in postmenopausal women. We present a case

of a Complete Hydatiform mole in a 51 year old woman with amenorrhea for 14 months.

Case report

A 51 year old menopausal mother of 5 Children presented with 1 episode of postmenopausal bleeding. On examination uterus was 18 week size. Trans vaginal ultrasound showed a uterus of 18cm x 10cm with a Endometrial thickness of 8cm. A pipelle biopsy was taken and sent for urgent histology. Three days later she presented with heavy vaginal bleeding, severe abdominal pain and high grade fever. Speculum examination showed products at the external cervical os and were removed. A large amount of grape like products were passed. Her Urine Hcg was positive. S. B hCG 191,559 and Hb 6.6 g/dl. Two units of blood was transfused. At discharge, transvaginal scan showed endometrial thickness of 6mm and S. B hCG had dropped to 195. Histology revealed a complete hydatiform mole. Patient underwent hysterectomy.

Conclusion

Although rare, molar pregnancy can occur in postmenopausal women and Gestational trophoblastic disease should be considered in the differential diagnosis of postmenopausal bleeding to prevent a delay in diagnosis and management. Definitive treatment with hysterectomy is preferred in the management of complete molar pregnancy in the postmenopausal group.



Delayed menopause associated with ovarian fibroma: A case report

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Introduction

The menopause is defined as the last menstrual period after a minimum of one year's amenorrhea. The average age of the female menopause is 51 years. One international study of 18,997 women from 11 countries found the median age at natural menopause to be 50 years (range, 49–52 years). Delayed menopause is associated with an increased risk of endometrial, breast, and ovarian cancers. One of the rare causes of delayed menopause is hormone-secreting ovarian tumors such as ovarian thecoma, fibrothecoma, and granulosa cell tumors.

Case report

A 60-year-old lady was referred from the surgical unit with an incidental finding of a pelvic mass while investigating for lower limb varicose veins. On a detailed history, she has not reached menopause with once every two to three weeks vaginal bleeding without a clear period of amenorrhea, and has not had menopausal symptoms as well. She denied any chronic abdominal symptoms. On examination, she was found to have a mobile pelvic mass mainly in the right iliac fossa, endocervical-polyp, and a left side breast lump. Pelvic Ultrasound revealed normal size retroverted uterus with increased endometrial thickness of 11mm and a right adnexal solid lesion with cystic

areas measuring 14.1cm×6.8cm×6.6cm. CA 125 was 6.3 U/ml. She underwent a total abdominal hysterectomy and bilateral salphingo-oophorectomy. During surgery, she had a large right-side ovarian solid mass without capsular breach or metastasis, and uterus bilateral tubes and left ovary were normal. Histology showed a benign ovarian fibroma with a benign endocervical polyp.

Discussion

When a patient is presented with delayed menopause it is better to exclude possible associated hormone-secreting ovarian tumors especially when there is a significant delay. These may be associated with hyper-estrogenic status such as endometrial hyperplasia, endometrial polyps, abnormal uterine bleeding, and breast carcinoma or adenomas.

Assessment of knowledge and practices among postoperative patients recovering from total abdominal hysterectomy

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Objectives

Hysterectomy is one of the most frequently performed major gynecological operative procedure. It can be performed abdominally, vaginally or laparoscopically out of which abdominal hysterectomy accounts for 66% of all hysterectomies. Hence the aim of this study was to assess the knowledge and practices among



postoperative patients recovering from abdominal hysterectomy.

Method

Single-center descriptive cross sectional study was performed involving 84 study participants who underwent abdominal hysterectomy at 4 major tertiary care hospitals. Data collection was done using a self-administered questionnaire and data analysis was done using SPSS software.

Results

Of total number of cases 51 underwent total abdominal hysterectomy (TAH) with bilateral salpingo-oophorectomy (BSO) while 33 underwent TAH with bilateral salpingectomy (BS). Among the causes 69 & 10 were due to benign conditions & malignancies respectively while 5 were done as prophylactic measures. Mean age & parity of study participants were 52 years & 3 respectively. 58% had an unremarkable surgical history while 70% were ASA 2 patients with significant medical comorbidities. 70% of study participants were educated beyond grade 5. Regarding knowledge about immediate post-operative recovery period (Day 1-4), 90% were unaware about mobility & nutrition following surgery. 60% were unaware about commencing basic hygienic practices even on day 5-7. 55%, 45% & 75% were unaware about when to commence their job/driving/sexual activities respectively while 95% were aware that by post-operative 6-8 weeks complete recovery from surgery could be achieved.

Conclusion

Proper education regarding post-operative care is of paramount importance in improving morbidity following surgery.

Uterine prolapse complicated by Genital Myiasis: A case report

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Objectives

This report aims to present a rare case of uterine prolapse complicated by genital myiasis and discuss the challenges in its management. Additionally, it seeks to underscore the impact of socio-economic factors, personal hygiene, and healthcare access on the development and management of this condition.

Case report

We describe the case of a 78-year-old postmenopausal female presenting with a one-year history of a lump at the vulva. Physical examination revealed a third-degree uterovaginal prolapse complicated by cystocele and maggot infestation of an ulcer over the prolapsed uterus. Relevant literature regarding genital myiasis and uterine prolapse was reviewed to provide context. The patient exhibited poor general hygiene, which likely contributed to her condition. Intravenous antibiotics and local wound care, including the application of a 5% dextrose solution to facilitate maggot removal, were initiated. Once all maggots were eliminated and the ulcers healed, the prolapse was managed with a ring pessary. The patient was discharged with plans for vaginal hysterectomy and repair.

Discussion

This case highlights the importance of prompt diagnosis and management of genital myiasis complicating uterine prolapse, especially in settings where socio-economic factors and personal hygiene play significant roles. It



underscores the need for a multidisciplinary approach to address both the underlying prolapse and the infestation, aiming to prevent recurrence and improve patient outcomes.

Awareness and attitudes on HRT and menopause among doctors at gynaecology units at Colombo South Teaching Hospital

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Objectives

Menopause transition can have a considerable impact on many women. A woman who reaches menopause at her 50s, will be looking at another 20 years of time in her post menopausal time period until her demise¹. A proper post menopausal care would add value and quality for this important but neglected time period by most of the doctors. The majority of women will experience menopausal symptoms, and for significant proportion troublesome symptoms may continue long term. Hormone replacement therapy (HRT) is the most commonly used treatment for managing menopausal symptoms and has been shown to be the most effective intervention². This is a study to assess the awareness and attitudes on HRT and menopause among obstetrics and gynaecology doctors at Colombo South Teaching Hospital.

Methods

A modified descriptive cross-sectional study was conducted at Colombo South Teaching Hospital from April to May 2024.

All Gynaecology and Obstetrics units doctors were assessed via a convenient sampling method and were offered a self-administered questionnaire with sixteen questions to assess their knowledge and attitude on awareness and attitudes on HRT and menopause. Gold standard of 100% was set on knowledge on the HRT and menopause.

Results

A total of 25 participants including all the intern medical officers, senior house officers, registrars and senior registrars participated in the audit. Average knowledge and awareness on HRT and menopause is 50.3%. Overall attitude on assessing menopausal symptoms as a routine from menopausal women is 61.9%. Lowest knowledge is shown among intern medical officers amounting for 44.2%. Senior House Officers showed an average knowledge of 50.45%. Post graduate trainees including registrars and senior registrars showed an overall knowledge of 62%. Out of all only 45.45% knew how to diagnose menopause properly and only 56% had a clear understanding on indications and contraindications on HRT. Awareness on commercially available HRT preparations was 27.27% and idea on various types of HRT was 30%.

Conclusions

Knowledge, awareness and attitudes on HRT and menopause among obstetrics and gynaecology doctors are inadequate. Our audit shows a clear vacuum of knowledge on this area among gynaecological doctors who doesn't see it as a significant transition in woman's life. By increasing the knowledge and awareness of the gynaecological doctors who encounter these postmenopausal women in routine



basis, we could make a positive impact on general public and most importantly improve the quality of life by putting a stop to this silent suffering of post menopausal and perimenopausal women. We aim to continue educating the gynaecology doctors and further extend it to general practitioner doctors(GPs) through audiovisual media and small group discussions to reach a maximum knowledge and awareness on this topic. Since this is a small study involving gynaecological doctors of one hospital, it would be difficult to generalize these audit findings for the whole country. It is high time for the relevant authorities, such as Sri Lankan Obstetricians and Gynaecologists and menopause societies to step in and conduct a multicentric study covering all island to implement strategies on improving the first encounter doctor's knowledge.