

## HEALTH SEEKING BEHAVIOR OF PRIMARY DYSMENORRHEA IN ADOLESCENTS: A LITERATURE REVIEW

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### **ABSTRAK**

Gangguan menstruasi, termasuk dismenore primer dan menstruasi tidak teratur, merupakan indikator penting dari ketidakseimbangan hormon, peradangan, dan risiko masalah kesehatan di masa depan pada wanita dan remaja putri (Murata, 2022). Gejala dismenore primer dapat menimbulkan rasa tidak nyaman dan mengganggu aktivitas belajar remaja putri di sekolah. Selain itu, dismenore primer yang tidak ditangani dengan baik juga dapat mengakibatkan infertilitas, kehamilan tidak terdeteksi, ruptur ektopik, kista pecah, perforasi uterus akibat IUD, dan infeksi (Saputra, 2020). Pemahaman yang baik mengenai kesehatan reproduksi merupakan kunci penting dari perilaku sehat dalam menjaga kesehatan reproduksi. Adanya perbedaan perilaku mencari pengobatan atau pengobatan dismenore primer mempunyai pengaruh yang signifikan terhadap tingkat keparahan dismenore primer itu sendiri (Owonaro, 2021). Penelitian ini dilakukan dengan menggunakan metode tinjauan pustaka dengan mencari artikel, melalui PubMed dan Google Scholar. Tahap seleksi dilakukan untuk memperoleh artikel yang memenuhi kriteria inklusi dan eksklusi, sehingga menghasilkan 5 artikel yang dapat dijelaskan. Hasil penelitian menunjukkan terdapat beberapa jenis perilaku pencarian kesehatan pada remaja putri yang mengalami dismenore primer saat menstruasi.

**Keywords:** Dismenore primer, *Health seeking behavior*, Remaja putri

### **ABSTRACT**

Menstrual disorders, including primary dysmenorrhea and irregular menstruation, are important indicators of hormonal imbalance, inflammation, and risk of future health problems in women and adolescent girls (Murata, 2022). Symptoms of primary dysmenorrhea can cause discomfort and disrupt young women's learning activities at school. Apart from that, primary dysmenorrhea that is not treated properly can also result in infertility, undetected pregnancy, ectopic rupture, ruptured cyst, uterine perforation from the IUD, and infection (Saputra, 2020). A good understanding of reproductive health is an important key to healthy behavior in maintaining reproductive health. The existence of differences in treatment-seeking behavior or treatment of primary dysmenorrhea has a significant influence on the severity of primary dysmenorrhea itself (Owonaro, 2021). This research was conducted using a literature review method by searching articles, via PubMed and Google Scholar. The selection stage was carried out to obtain articles that met the inclusion and exclusion criteria, resulting in 5 articles that could be explained. The results showed that there were several types of health-seeking behavior in young women who experienced primary dysmenorrhea during menstruation.

**Keywords:** *Adolescents, health seeking behavior, primary dysmenorrhea*

## **INTRODUCTION**

One of the signs that a teenager is growing, especially teenage girls, is menstruation. The first menstruation that occurs in young women is called menarche (Kojo, 2021). When menstruating, young women often experience complaints of primary dysmenorrhea (Kojo, 2021). Menstrual disorders, including primary dysmenorrhea and irregular menstruation, are important indicators of hormonal imbalance, inflammation, and risk of future health problems in women and adolescent girls (Murata, 2022). Symptoms of primary dysmenorrhea can cause discomfort and disrupt young women's learning activities at school. Impacts that can occur if dysmenorrhea is not treated immediately include obstruction of daily activities, retrograde

menstruation (menstrual cycle that moves backwards), infertility (sterility), undetected pregnancy, ectopic rupture, ruptured cyst, uterine perforation from the IUD, and infection (Saputra, 2020). Primary and secondary dysmenorrhea have a negative impact to women's lives, such as on the physical, psychological, social, and academic. This condition can impact their daily productivity, reduce their quality of life and well-being, and increase their risk of depression and anxiety (Getahun, 2023).

According to data from the World Health Organization (WHO), 15% of the 55% prevalence of primary dysmenorrhea among productive age groups in Indonesia experiences complaints or obstacles when carrying out daily activities due to primary dysmenorrhea (Kojo, 2021).

One form of healthy behavior is a health seeking behavior. Health seeking behavior is every action taken by an individual when they have a health problem to get the right treatment so they can prevent the severity of an illness or the emergence of a more serious illness (Putri, 2022). Forms of health seeking behavior include ignoring the symptoms of illness, taking medication independently, visiting health service facilities (Owonaro, 2020). Currently, there is not many adolescent girls know how to deal with dysmenorrhea themselves (Prabawati, 2024; Lisa, 2017). In Indonesia, there is many adolescent girls that didn't go to doctor or health facilities (Hudaya, 2023). The main obstacle in health seeking behavior is the assumption that the symptoms of the disease suffered are normal (Aljahdali, 2022).

The research results of Hariyanti, et al (2015) confirm that the health seeking behavior of is influenced by several factors, namely demographic and geographic, socio-cultural, clinical, perception and knowledge factors (Sari, 2023). Low access to information and knowledge of adolescents regarding reproductive health has a close influence on reproductive health behavior problems in adolescents (Junias, 2023). Even though primary dysmenorrhea is experienced by many teenagers, not many teenagers know about dysmenorrhea in depth. This happened because of difficulties when they looked for information on menstruation and primary dysmenorrhea (Gustina, 2017). Many adolescent girls that consider dysmenorrhea to be a normal part of menstrual cycle, so that they do not seek help (Tanushree, 2021). Only few of adolescent girls seek health and most of them ignore the pains that caused by dysmenorrhea (Gustina, 2017). That condition can influence women's attitudes towards health seeking behavior towards primary dysmenorrhea. It develops a negative attitude towards it. They are reluctant to seek medical treatment to reduce their pain or menstrual problems because they feel embarrassed to communicate it to other people, such as their parents, friends, and more. The other reasons are inadequate attention to menstrual issues, some see the primary dysmenorrhea as a 'taboo' (Igbokwe, 2021). They also assume that primary dysmenorrhea is a part of their menstrual cycle, so do not need to seek help. Adolescents tend to self-medicate, such as buying pain relievers at the nearest shop (Gustina, 2017). Adolescents have to understand health seeking behavior to improve health outcomes and reduce health problems by designing effective interventions for them (Wang, 2022). Moreover, self-medication is a major public health problem throughout the world that affects children and adolescents (De, 2020). Apart from that, primary dysmenorrhea in adolescent girls must also be treated appropriately to avoid negative impacts or other more serious illnesses.

The aim of this research is to determine the factors associated with health seeking behavior for primary dysmenorrhea in adolescent girls.

## METHOD

The writing of this article is classified as a qualitative study utilizing literature review method, which is a search for both national and international literatures. The literature review method is used to collect and analyze literature relevant to the research topic. In this study, which talks about how variables as health seeking behavior towards primary dysmenorrhea.

The data used in this study were sourced from scientific articles from 5 journals that obtained from the PubMed and Google Scholar database using keywords such as "health seeking behavior," "primary dysmenorrhea," and "adolescents,". The inclusion criteria for this research were scientific articles published within the last 7 years (2017-2024).

## RESULTS

Based on the collected and results of the literature search, the findings are presented as follows:

**Table 1. List of Articles**

No.	Author	Method	Result
1.	Oluwole, E. O., Agha O. O. Ogunyemi A. O., Bakare O. Q.	Cross sectional	There was a significant relationship found between respondents' knowledge of statistical behaviour and seeking treatment for primary dysmenorrhea.
2.	Mike Kelly Christina Tania Armour, Parry, Curry, Ferfolja, Melissa A. Parker, Toobah Farooqi Freya MacMillan, Caroline A. Smith, Kathryn Holmes. (2022).	Cross sectional	The majority of young women do not seek medical advice to deal with their menstrual symptoms but use natural information, from the Internet and carry out self-management, most commonly with over-the-counter medications such as paracetamol or ibuprofen. Relative use of oral contraceptives, partly for general purposes and mostly to reduce menstrual pain. Despite experiencing significant primary dysmenorrhea, about half of the participants considered their periods normal. Adolescent girls with higher primary dysmenorrhea scores tend to rate their menstruation as normal, but they still don't consult a doctor.
3.	Peter A. Owonaro, John E. Arute, Benedicta C. Uweru, Joshua F. Eniojukan. (2021).	Cross sectional	Regarding the health seeking behaviour of respondents from the selected institutions, the majority (26.3%) visited pharmacies, 22.3% to pharmacies, 13.0% to hospitals and 1.5% to seek herbal and spiritual help at home. Regarding self-medication, 59.8% used paracetamol self-medication, 21.6% used

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			<p>felvin and 1.5% used herbs to relieve pain. 1.5% used herbal preparations, Yoyo cleanser use (17.0%) was the most common. 35% considered self-medication to be very effective while 4% did not recognize the effectiveness of self-treatment. The data revealed highly significant correlations between all aspects of health-seeking behavior among respondents at the three institutions. Research shows that there is a significant difference in the influence of self-medication use, use of herbal preparations and the effectiveness of self-medication when one has primary dysmenorrhea. The use of self-medication was associated with the severity of cramps in all institutions.</p>
4.	Vincenzo de Sanctis, Ashraf T. Soliman, Shahina Daar, Salvatore Di Maio, Rania Elalaily, Bernadetter Fiscina, Christos Kattamis. (2020)	Cross sectional	<p>Based on this research, adolescent girls who experience mild primary dysmenorrhea are less likely to seek medical treatment than adolescent girls who experience moderate primary dysmenorrhea. Most of them used pharmacological treatment, such as staying out of bed or sleeping (84%), taking a hot bath (75%), using a heating pad (50%), watching television or trying to distract themselves and (47%), doing sports (30%). As many as 90% of teenage girls consume over the-counter (OTC) medication, including ibuprofen (54%), acetaminophen (41%), midol (28%), and 7 naproxen. As many as</p>

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			teenagers (17%). 21% of girls take medication from a doctor's prescription.
5.	Senait Belay Getahun, Semarya Berhe, Bazie Mekonnen, Getnet Melaku	Qualitative phenomenological study	The study mentioned that there are three themes for reasons they do not seeking healthcare, such as sociocultural and personal factors, healthcare system-related perceptions and experiences, and preference for self-management of symptoms. Besides that, the students prefer to self-medicate instead of visiting healthcare for their menstrual pain (primary dysmenorrhea). They believed that menstruation pain is not something that makes they feel unwell because it occurs monthly. So that, they think that it is inappropriate to visit healthcare facilities every month. They thought it was better to take pain relievers instead of going to the doctor or visiting healthcare.

Based on the 5 articles presented in Table 1, there are many factors that contribute to the health seeking behavior towards primary dysmenorrhea in adolescent girls. The occurrence of primary dysmenorrhea is considered normal during menstruation in adolescent girls. Knowledge, attitude and behavior factors can influence health seeking behavior in young women who experience primary dysmenorrhea. Adolescents girls usually do not seek medical advice, but they looking for information from the internet and carry out self-management. Adolescents girls usually took the pharmacological and non-pharmacological medication to reduce their menstrual pain (primary dysmenorrhea). Based on health seeking behavior, adolescent girls refer to do self-medicate instead of visiting healthcare for their menstrual pain (primary dysmenorrhea).

## DISCUSSION

According to research conducted by Oluwole (2020), the majority of young women have good knowledge and attitudes towards health seeking behavior when experiencing primary dysmenorrhea during menstruation. However, there are still very few young women who have sought health services or performed health seeking behavior for primary dysmenorrhea. Most adolescent girls consider primary dysmenorrhea to be normal. This is also related to the fact

that young women seek more health advice (medical advice) from their parents, friends, pharmacists, popular books or magazines, and the internet (De, 2020).

There is a statistically significant relationship between knowledge and treatment seeking behavior (health seeking behavior) on primary dysmenorrhea (Oluwole, 2020). Household income and maternal education are significantly related to the choice of health service facilities in health seeking behavior. Household income is also strongly correlated with people's medical costs at health service facilities. Apart from that, the community's years of schooling is also related to the level of knowledge of health services (Aktar, 2022).

Most adolescent girls who experience mild primary dysmenorrhea use non-pharmacological treatments, such as staying in bed or sleeping, taking a hot shower, using a heating pad, watching television or trying to distract themselves, and doing sports.

Apart from that, young women also tend to consume medicines purchased outside of a doctor's prescription (OCT medicine) by means of self-medication. This has the potential for risks at the individual and community level. Risks at the individual level include errors in self-diagnosis of drugs, inappropriate drug doses, risk of drug dependence and abuse, interactions between food and drugs, side effects of drugs, taking drugs for too long a period of time, and the choice of type of drug, which is not appropriate. The risk at the community level is that it results in an increase in disease caused by drug consumption which also has an impact on wasteful government spending (De, 2020).

In Indonesia, health seeking behavior towards primary dysmenorrhea is done with non-pharmacological treatment management by reducing their pain by taking deep breathing, resting, consuming herbal drinks (kunyit asam jawa). The majority of pharmacological treatment they carry out is by taking pain relievers from the pharmacy without going to the doctor with a prescription (Dewi, 2023).

The majority of young women did not engage in health seeking behavior to overcome the menstrual symptoms (primary dysmenorrhea) they experienced. They use information from the internet and take drugs from pharmacies or herbal medicines to relieve primary dysmenorrhea. In addition, young women who engage in health seeking behavior make an appointment at a health service first and then are referred to a gynecologist.

The reason why the adolescent girls did not seeking healthcare is dysmenorrhea is a wrath of God, their personal thing, and it is scary to talk about it (Getahun, 2023). Adolescent girls thought that they did not think that the providers would help their dysmenorrhea symptoms. Adolescent girls had a negative experience with previous providers when they seeking help for medical treatment, especially for dysmenorrhea (

## **CONCLUSION**

Based on the results of the literature review, knowledge and attitudes has a relationship to health seeking behavior when experiencing primary dysmenorrhea. However, there are still young women who do not carry out health seeking behavior when experiencing primary dysmenorrhea during menstruation. Young women tend to let primary dysmenorrhea go away by itself and consider primary dysmenorrhea to be normal. Health seeking behavior in the form of seeking treatment independently (self-medication) in young women who experience primary dysmenorrhea has risks both at the individual and community levels. Household income and maternal education level have a significant relationship with the health seeking behavior of adolescent girls with primary dysmenorrhea.

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