

Short Communication

Midlife Issues in Women — Crisis or Celebration

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Abstract

Background : Ageing is an inevitable natural process often linked with declining health conditions. Healthy ageing does not have a universally laid criterion but can broadly be regarded as maintaining robust physical, mental and social health, leading to overall well-being. Midlife represents a critical period of health transition requiring optimal health attention. This escalates among women due to the Socio-economic and cultural barriers and their physiological needs, which require intensive interventions to combat. Poorer Quality of Life in midlife can deteriorate work productivity and associated economic loss. The fact that it can at times curtail longevity goes without saying.

Key words : Quality of Life, Midlife Crisis, National Health Mission, Osteoporosis.

The changes of ageing are inherent everywhere and in all life forms¹. The changes may be developmental or transitional. Midlife is one such transitional period, which brings about menopause in women and demands significant changes in the Quality of Life of ladies everywhere in the world. Menopause is a transitional time in a woman's life leading to both physical and emotional challenges which affects the Quality of Life. It is accompanied by biological and psychological changes that affect women's health and sense of wellbeing. Indian women, particularly from rural backgrounds, are often ignorant about the changes taking place in their reproductive system. Religion and culture of our society also inhibits to express these changes. Healthcare professionals have a great role in addressing these issues to prepare women to face the challenges of reproductive health. There is lack of awareness of the causes, effects, and management pertaining to it. Awareness programs need to be conducted to overcome these issues.

The demographic and epidemiological transition in low-and-middle-income countries like India has led to the rise in co-existing two or more long-term conditions known as multimorbidity. The burden of multimorbidity often increases with a rise in life expectancy. India witnessed a dramatic increase in life expectancy from 42.27 years in 1960 to

Editor's Comment :

- Midlife in women should be seen not as a crisis, but as a critical transition that offers opportunities for empowerment, self-awareness and health optimization.
- While biological and psychological changes – especially menopause – pose challenges to Quality of Life, informed support and timely intervention can turn this period into a phase of renewal.
- In India, Socio-cultural stigma, lack of awareness, and inadequate healthcare policies often leave midlife women, especially in rural areas, underserved. The gap in care and understanding is not just urban-rural, but also developmental. Midlife is a time to shift focus from mere survival to holistic well-being.
- Health systems must extend care beyond reproductive years, ensuring awareness, access and dignity. Women must be educated, supported, and celebrated—not silenced.

69.16 years in 2017 due to healthcare technology and quality advancements. But multimorbidity ensures that a mere increase in life expectancy does not guarantee a healthy life. Then again, as of today, inequality in life expectancy across gender in India makes women outlive men. Women seldom have a say in their decision-making process, including their health and when left alone after their husband's demise, if they are not financially independent their issues of their own health may go neglected.

Broadly, the Government's focus on women's health remains confined to sexual and reproductive health, with almost no importance garnered to Post-menopausal or health at mid-life. Reproductive, Maternal, Neonatal, Child and Adolescent Health (RMNCH + A) program under National Health Mission (NHM) is a strategy to promote interventions throughout lifecycle approach but does not cover health beyond reproductive age. Around midlife,

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women may develop several conditions such as Osteoporosis, Depression and Urinary incontinence due to menopausal transition. In India, chronic Non-communicable Diseases (NCDs) - Cardiovascular Diseases, Cancers, Chronic Respiratory Diseases, and Diabetes, typically start a decade earlier (around 45 years and older) than in high income countries. Multimorbidity steeply rises in middle-aged adults with the accumulation of different chronic conditions, which plateaus among the elderly.

In the affluent countries though the NCDs are less frequent and better managed on mass scale, the Postmenopausal symptoms experienced by women are same. This is irrespective of their place of residence urban or rural. The reason could be the influence of mass media such as TV, Radio, Newspapers and Social Media which have deep rooted impact on the lifestyles of the people everywhere. In olden days the women had a close knitted interaction with the family members with whom they were sharing their reproductive problems and issues. Today they can do so with a wider virtual group. The rural ladies of the developing countries are perhaps not yet tech savvy enough and so a rural – urban divide in their midlife quality is understandable. The healthcare industry has a vital role in assessing, informing, and maintaining an improved Quality of Life. The family, society and the community must take a constructive role in supporting a woman as she passes through this crucial period.

Health personnel can educate women to have modification in the lifestyle practices such as having well balanced diet, regular exercises, decreased fat and salt intake, avoidance of self-medication, fruits and vegetable consumption, blood pressure control, and increased daily water consumption, practicing relaxation through Yoga, Pranayama and meditation. This helps them to identify and adapt to the various changes taking place in the body, so that the women will be better equipped to face the changes and minimize the risk of this potentially disruptive period. A wide gap in the knowledge has been documented on the women from developed and developing countries. And this gap is even wider in women among rural and urban communities.

The family support during this transition period is very significant as the women have changes occurring in physical, psychological, and social domains of life². Women experience feelings of guilt and embarrassment in the menopause. These feelings

are guiding the behaviour and affecting the image of one in the eyes of others. Both feelings are enhanced by interpersonal and family relationships. A few alternative medical disciplines including homeopathy, naturopathy, acupuncture and traditional medicine, Yoga and Meditation have developed remedies for Postmenopausal problems and to enhance the Quality of Life³. We should be open to them and freely discuss them so that doctors, nurses, and social workers can convey them to the target audience.

Psychologically too midlife is a watershed for everyone. This is the age when men become boring and predictable or outrageously unpredictable and flashy. This is the aged women start to become “invisible” – their value, sexuality and power supposedly diminish by the vanishing of youth. If they feel at all more visible than ever before, it is because both men and women add a few inches to their equatorial girth.

Life in a middle-class family in India is a struggle, an enjoyable struggle if the couple struggles together. But would we like to turn the clock and relive those days when we know for certain that happier times lie ahead. Today, next to God we need to fear no person, no situations and no circumstances and the only approval we need is our own. This hard-won sense of self-acceptance is one of the joys of being a middle-aged person. But it's a narrative often drowned out by the same marketers who try to peddle us their diet pills, miracle face creams and breathable Yoga pants – as if self-love is a purchasable commodity. Bereft of most family responsibilities midlife doesn't feel like crisis. It's feels like a celebration. The question is, are my sisters in rural India celebrating too?

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