

Relationship of Knowledge, Types and Long Use of Hormonal Contraception of Amenore in Fertile Aged Women

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ABSTRACT

Background: Amenorrhea is a menstrual condition for 3 consecutive months. As much 30% of menstrual amenorrhea disorders experienced by women who use hormonal contraception, hormonal contraception that is most widely used by active hormonal contraception participants is injection (54.59%) for > 1 year. The occurrence of amenorrhea includes knowledge, types and duration of hormonal contraception. **Objective:** To analyze the relationship between knowledge, type and duration of hormonal contraceptive use to amenorrhea in fertile aged women. **Method:** This study used an analytic observational method with a cross sectional approach that tested for statistical analysis using the chi-square test with significance ($p \leq 0.05$). The research sample was a women in fertile aged which used hormonal contraception in Nanta Semarang midwives, Mangunharjo Village, Tembalang District, Semarang City, Central Java. Data obtained from medical records. **Results:** The research sample was 44 respondents in fertile aged women 15-49 years, in this study the majority of respondents were > 30 years old. Respondents have low knowledge as much as 31 (70.5%), the majority type of hormonal contraception is injecting 3 months as many as 36 (81.8%) and the duration of use contraception > 1 year is 33 (75%). This study shows that there is a significant relationship between knowledge of the incidence of amenorrhea that is $p = 0.013$, there is a significant relationship between the use of hormonal contraception types to amenorrhea that is $p = 0.023$ ($p \leq 0.05$), and there is a significant relationship between the duration of contraception use hormonal to Amenorrhea is $p = 0,000$ ($p \leq 0.05$). **Conclusion:** There is a significant relationship between knowledge, type and duration of hormonal contraception of amenorrhea in fertile aged women.

Keywords: knowledge, type and duration of hormonal contraception, amenorrhea.