

Menstruation in history

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Abstract

Objective. To review historical constructs on menstruation. **Methodology.** Non-systematic review of the literature complemented with consultations with national academic authorities. **Results.** Menstruation is an experience that involves women and their social group, becoming a relevant event. Treatment of menstrual symptoms is linked to the cultural context in which it is developed. The menstruation experience varies according to popular beliefs, cultural characteristics, and information received to this respect within the social group where the woman is. Menstruation exceeds the imaginary that places it only within the feminine setting; It is a process that involves the social group, inasmuch as it has psycho-social and cultural implications. **Conclusion.** A relationship exists between menstruation, as a biological event, and the social processes *per se*, influenced by the historical beliefs that have been transmitted generation after generation.

Key words: menstruation; taboo; menstrual cycle.

La menstruación en la historia

Resumen

Objetivo. Revisar los constructos históricos sobre la menstruación. **Metodología.** Revisión no sistemática de la literatura complementada con consultas a autoridades académicas nacionales. **Resultados.** La menstruación es una experiencia que involucra tanto a la mujer como a su grupo social, convirtiéndose en un suceso

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relevante. El tratamiento de sus síntomas se encuentra ligado al contexto cultural en el cual se desarrolla. La experiencia de la menstruación varía de acuerdo con las creencias populares, las características culturales y la información que se reciba al respecto en el grupo social. La menstruación excede el imaginario que la sitúa únicamente en el ámbito de lo femenino; es un proceso que involucra al grupo social, en tanto que tiene implicaciones sicosociales y culturales. **Conclusión.** Hay relación entre la menstruación, como hecho biológico, y los procesos sociales en sí, influenciados por las creencias históricas que se han transmitido generación tras generación.

Palabras clave: menstruación; tabú; ciclo menstrual.

A menstruação na história

■ Resumo ■

Objetivo. Revisar os constructos históricos sobre a menstruação. **Metodologia.** Revisão não sistemática da literatura complementada com consultas a autoridades acadêmicas nacionais. **Resultados.** A menstruação é uma experiência que envolve tanto a mulher como o seu grupo social, convertendo-se num acontecimento relevante. O tratamento dos sintomas da menstruação se encontra unido ao contexto cultural no qual se desenvolve. A experiência da menstruação varia de acordo às crenças populares, as características culturais e a informação que se recebe ao respeito no grupo social no que se encontra a mulher. A menstruação excede o imaginário que a situa unicamente no âmbito do feminino; é um processo que envolve ao grupo social, enquanto tem envolvimento psicosociais e culturais. **Conclusão.** Há relação entre a menstruação, como fato biológico, e os processos sociais em si, influenciados pelas crenças históricas que se transmitiram geração depois de geração.

Palavras chave: menstruação; tabu; ciclo menstrual.

Introduction

Menstruation is a cyclical bleeding occurring in women during the reproductive stage of their lives; caused by endometrial shedding at regular intervals, it is a natural process of women during their reproductive age and it is present when ovum fertilization does not take place. Menstrual bleeding is the consequence of the shedding of a secretory endometrium, which implies a mature neuroendocrine axis. In general terms, the menstrual cycle can have a frequency of 21 to 35 days, with an average of 28; that duration could

vary between two and seven days of bleeding and the amount tends to be between 20 and 80 cc, with an average of 35 cc.¹

The cycle is affected by the woman's biological, psychological, and social conditions, as well as by the environment. Hence, these parameters can vary from woman to woman, and even along the reproductive life, which makes each woman's experience with menstruation unique. Social factors impact upon the experience lived by each woman, both rationally and psychologically, all

of which is condensed in a profound experience that can affect women in their social, labor and relational life.²

This process is derived into an experience that involves women and their social group; thereby, becoming a socially relevant event. From the socio-cultural point of view, we may state that each social group maintains a vision and an interpretation of what menstruation means. Although, the West legates said mentioned process to the personal environment, it sets the start of the woman's mature life, which is why it is constituted into a transition period in two well-differentiated stages of her life. Other cultures, on the contrary, give the menstrual cycle a high social and community content, arriving at the establishment of rites, festivities, and even sanctions for women upon the appearance of the menarche.³ Hence, menstruation is an issue that concerns the general interest, given that, depending on the socio-cultural environment, diverse beliefs are developed and transmitted around the menstrual cycle and the very varied discomfort and complications this can reveal.

When adding all this to the individual experience, it yields as a result an extensive variation in the meaning, management, and treatment, when such is required. Thus, it is expected for the menstrual experience to vary according to the context, the popular and cultural beliefs, and the information received. Popular beliefs are based on precepts that have been historically transmitted generation after generation. It is, therefore, notoriously important to highlight that menstruation as experience goes beyond the women's sole environment. On the contrary, it should be understood that this is an issue that exceeds the private field, inasmuch as it directly involves the social group in which women develop and affect their own lives personally and socially. In fact, if we bear in mind that nearly 85%⁴ of the women who menstruate present symptoms that may affect their work performance and their social life (additionally, being the first cause of school absenteeism), we will see the urgency of generating new awareness around this issue. Thus, the relevance of revising the historical constructs

on menstruation can allow better understanding the complexity of women's experiences, to more effectively focus their approach from healthcare services.

Methodology

A non-systematic literature review was carried out by using Descriptors from the Health Sciences in Spanish, English, and Portuguese to search in the following databases: Medline, Bireme, Imbiomed, Ebsco, Ovid, ProQuest, Cochrane Library, Ebrary, Scielo, and Tripdatabase.

Additionally, a search was made in Google scholar and some monographs. Said searches permitted access to international and historical material. The search was complemented by consulting with national academic authorities.

Results

Etymologically, the term comes from the Latin *menstruus*, whose origin is in *mensis*, which means month; this is also one of the reasons why it is called period. Many cultures along history have given menstruation a mystical meaning. For example, because of its monthly character and its 28-day cadence, the menstrual cycle has been related to the lunar cycle, and on occasion women have been bestowed with responsibility over agriculture, giving the menstrual cycle mystical qualities that impact upon the planting and harvesting process.⁵ Thus, with menstruation being an event appertaining to women, it has historically had a great social impact, which is why it has been mythologized by several cultures; magical and healing powers have been assigned to it, along with traumatic events, and it has even been related to states of disease or latent weakness.⁶

Some African tribes believe that if a menstruating woman shares the bed or food with a man, she will affect his virility.⁷ Among the Ubangui it is

believed that if a woman is menstruating and prepares the food, her spouse will be “injured during war and his blood will run freely out of his body”.² This is only a small sample of an imaginary that shows menstruation in a negative way. For other cultures, menstrual blood had evil and harmful qualities for men. For example, according to the Talmud if a woman starting her cycle passed between two men, one of them was being condemned to die; if, on the contrary, the woman was ending the menstrual cycle both men would end up quarreling.⁸

Besides this, in some cultures it was believed that, outside of this mystical component, menstruation contained poisonous and harmful substances for living beings and things. On the one hand, Pliny the Elder in his *Naturalis Historia* listed the ‘dangers’ of menstruating women: “[...] can turn wine into vinegar, break mirrors, ruin iron and leather, darken the skies, make the fields sterile, make fruit fall from trees, kill bees, and make animals abort”.⁹

Similar beliefs were spread throughout Medieval Europe, where it was believed that menstruation would keep grains from germinating, that it would sour the must, fog mirrors, could subject iron to the attack by rust and bronze to be blackened. Also, the proximity of menstruating women could make foods under preparation to spoil, kitchenware would deteriorate, plants would wither, and it was believed that a sick person would worsen if a woman who was menstruating was near.²

Per se, the loss of blood by the woman represents the incarnation of many social fears. Some cultures considered menstruation as a symbol of ‘impurity’, which appears proscribed in several sacred texts. The Bible (Lev. X, 19-32) refers to the impurity of women and of the elements and individuals with which they relate during the menstruation.¹⁰ The Koran defines menstruation as an evil that must be banished to reach purity, thereby, placing it in the field of impurity and disease.⁸ In other cultures, menstrual blood is interpreted as a symbol of weakness and malignancy. In some tribes it is believed that because of it menstruating women can diminish the tribe’s collective strength, which is why they are judged as temporary enemies of

the clan and, fearing their presence, are subjected to different types of isolation and confinement, reaching quite varied reclusion mechanisms and periods. In some cases, as with the Falashas of Ethiopia, special places are available for women to be isolated during the days the menstruation lasts.¹¹

In other cases, the reclusion includes some type of social activity, as with the Mondurucus from Brazil, who confine the menstruating woman to a cell and each member of the tribe goes by and pulls a hair from her head.¹² It has even been seen in some cultures that the reclusion can last several years, from the onset of the menarche.¹³ All this is done to somehow ‘cleanse’ the impurity brought with the blood that flows from the woman’s body, to alleviate the weakness brought with it and to avoid the danger that it can represent.¹⁴ Also, we can see that the blood has been represented by diverse cultures as a symbol of life, which is why it is considered to have magical and healing qualities.¹¹ Therefore; it was used for beneficial purposes, as in the preparation of concoctions and potions, among others. For example, during the 17th century in France, it was thought that the menstrual blood from a woman who had not given birth could put out fires, no matter how hot these fires were.¹⁵

In the south of Russia, it was believed that the blood would keep a part of its owner’s soul and it would be used as a love filter, by mixing it in wine, and it was felt that manipulating it could induce the woman to changes.¹⁶ Other places believed in the healing properties of the menstruation and it was used to cure tearing, epilepsy, stubborn pain, gout, boils, warts, ulcer, fever, hydrophobia, and it was even felt that it could serve as an ‘anti spell’ that would cure the evil eye, avoid the plague and divert storms.¹⁷

All this shows us a high social content related to the menstrual cycle, inasmuch as it conforms to a popular knowledge and a collective imaginary around this fact and, hence, is involved with the socio-cultural setting. Thus, from these imaginaries a knowledge set is constituted involved with the personal experience, giving it meaning and

determining an action model that must be followed by the menstruating woman, while forming a particular way of confronting menstruation. It is through the formulation of rational knowledge, removed from all these types of mysticisms, that it would be possible to arrive at a more favorable understanding of menstruation *per se*. Not for nothing, rationalized formulations were sought of the phenomenon of the menstrual cycle, giving it a more biological role than religious or spiritual roles. Aristotle, for example, considered that it was during menstruation when the semen acted to bring on fertilization as a result.⁸ This idea was kept for a long time; it was modified during the Medieval period, given that during said period it was felt that menstruation was a clear signal of fertilizing capacity.⁸

Another indication of rationalization is present in the Salerno school, which proposed that the menstrual flow generated regulation of the female mood, while men did so through the sweating caused by physical labor; besides, it was thought that women were weak with respect to men, specially against disease, given that their bodies did not assimilate all foods and evacuated excesses by menstruating.¹⁸ Today, we have much more specialized knowledge on the topic. However, indisposition persists when dealing with the theme in a direct and more rational and objective manner. On the contrary, given that this theme is kept under a veil of the purely personal experience, it is difficult to accept specific and completely rationalized knowledge. For example, in places with extreme morality and religious conscience, these topics are related to negative attitudes toward menstruation, which are combined with poorly qualified information, superstitions, and inadequate practices. Also, menstruation is no stranger to collective processes, through which concepts and knowledge are constituted, which are shared socially and traditionally bequeathed from one generation to another.¹⁹ It is a biological fact with social implications that are not limited to the fact of menstruating, but which is made complex when related to symbolisms like that of blood, the mystery of reproduction, femininity, among others.² Thereby, even now that qualified

knowledge is available, it is difficult to accept such, given that, on the one side, there is a prevalence of the structures of socially transmitted knowledge and, on the other, menstruation is maintained within the purely personal setting, with it being a taboo issue.

Modern scientific literature states that the hormonal changes of the menstrual cycle may result in changes in the habitual mood of each woman, inasmuch as it influences their mood; which makes it viable to state that the appearance of the menstrual cycle can, in some women, affect their behavior.²⁰ The main emotional changes identified are those related to the menstrual and premenstrual phases, which are mainly characterized by negative feelings, manifested through depression, anxiety, irritability, low self-esteem, among other things. Additionally, during the fertile period of said cycle certain changes may also be produced, like improved mood, better self-evaluation, and more sense of security in themselves.

In any case, rarely do women readily recognize that levels of depression and stress are related to menstruation, unconcerned for the psychological problems and assuming that they are symptoms that will surely disappear in a few days.²¹ On the contrary; some women are immersed in hormonal changes, resulting in highly affecting their social functionality. In these cases, what is most usual is for women to design mechanisms to face the mood changes, above all if these turn out to be regular and predictable.²² It is possible to expect that the stronger the mood changes are, more effective will the strategies designed to face them be.²³ However, little documentation is available on this theme and the experimentation that accommodates empirical evidence regarding the efficacy of these methods is quite low. Nevertheless, it seems that one of the most often used mechanisms is that of increasing activity in the family and work environments for the purpose of "keeping busy". This mechanism is often accompanied by increased time to perform certain activities, which seems to be a practical means to contain the sense of fatigue.²⁴

Although many women show discomfort during menstruation,²⁵ mainly reporting pain, it is

notable how over 50% of them do not seek care for gender-specific pain; indisposition to deal with the topic and generate knowledge of it is notorious and on the rise. Because of the lack of information (and the growing misinformation) regarding this theme, they find it impossible to arrive at a treatment that allows them to solve the pain and other complications that may emerge, besides the social problems that this may bring on.

Some treatments used by symptomatic women are phyto-therapeutic, which are based on using plant properties to treat the symptomatology of pre-menstrual syndrome (PMS). Thus, certain products are used like, for example, Chasteberry (*Vitex agnus-castus* L.), which is attributed a mild sedating action and symptomatic improvement; Feverfew (*Tanacetum parthenium* L.), which has been attributed with analgesic and anti-inflammatory effects; Onagra (*Oenothera biennis* L.) from whose seed is obtained an oil rich in unsaturated fatty acids, among which there are linolenic acid and α -linoleic acid, precursors of certain inflammatory prostaglandins.²⁶ Besides these, Ginkgo biloba is reported in PMS treatment, according to the results from a study conducted at the University of Tehran,²⁷ which revealed decreased physical and psychological symptoms, in addition to a lack of side effects.

To conclude, persistent misinformation turns out to be one of the biggest problems for women. Although, currently, there is a tendency to demystify sexuality, by addressing such in a much more frank and rational manner, that related to menstruation is still relegated to the purely personal setting and submerged in the nebulosity of taboo.²⁸ Because of this, many women who see their everyday lives and social interactions affected; nonetheless, a general indisposition to deal with the topic is maintained, which further hinders the search for effective treatments. Everything related to the gender-specific discomfort is maintained in the most profound secret, which is added to poorly qualified information, culturally and socially transmitted.

It should be highlighted that, even now, notorious discomfort persists in dealing with the topic of

menstruation, which is why a language that does not refer to it directly is used, given that this is considered somewhat annoying, and which should be hidden. Thus, upon the presence of the menarche, women prefer to use traditional knowledge, bequeathed by their elders and their peers rather than seek specialized and scientific knowledge; therefore, traditional treatments and inadequate practices proliferate, which increase in the presence of menstrual disorders.

It is necessary to recognize the relationship between menstruation, as a biological event, and the social processes *per se*, influenced by historical beliefs that have been transmitted generation after generation. Hence, we see that menstruation far exceeds the imaginary that places it only within the feminine setting; far from this, menstruation is a process that involves the social group, inasmuch as it has psychological, social, and cultural implications. For this reason, it is important to address the experience the women have to understand the complexity and scope of the menstruation experience, seeking to comprise useful knowledge to offer comprehensive care and efficient help regarding the psycho-social consequences menstruation may have on some women. It is necessary to continue investigating with qualitative approaches, thus, trying to find solutions that go beyond the traditional biomedical model.

References

1. Gómez-Sánchez PI. Hemorragia Uterina Anormal en la mujer. Enfoque Básico. Rev Colomb Enferm. 2007; 2(2):37-42.
2. McPherson ME, Korfine L. Menstruation across time: menarche, menstrual attitudes, experiences, and behaviors. Women Health Iss. 2004; 14(6):193-200.
3. Tristán J, Ruiz F, Tristan S, Maroto R. La menstruación Como fenómeno transcultural. Antípoda. Rev Antropol Arqueol. 2009; 9:47-88.
4. Harlow SD, Campbell OM. Epidemiology of menstrual disorders in developing countries: a

- systematic review. *Br J Obstet Gynaecol.* 2004; 111(6): 6–16
5. Gray M. *Luna roja. Los dones del ciclo menstrual.* 9th Ed. Madrid: Editorial Gaia; 2009
 6. Ochoa E F, Vázquez LC. *El libro de la sexualidad.* Madrid: Editorial El País; 1991.
 7. García F, Pulido R, Montes A. La educación multicultural y el concepto de cultura. *Rev Iberoamericana Educ.* 1997; 13:223-56.
 8. Alarcón M, Blanco L. Creencias, actitudes y vivencias mágicas alrededor de la menstruación en mujeres de Bucaramanga, Colombia. *Rev Colomb Obstet Ginecol.* 2006; 57(1):19-26.
 9. Carey S. *Pliny's Catalogue of Culture. Art and Empire in the Natural History.* New York: Oxford University Press Inc.; 2001.
 10. Gray M. *Luna roja, Los dones del ciclo menstrual.* 9th Ed. Madrid: Gaia; 2009.
 11. Bergqvist A. Menstruation still full of myths. *Lakartidningen.* 1999; 14:(96):1860-76.
 12. Buckey T, Gottlieb A. *Blood magic: the anthropology of menstruation.* Berkeley, CA: University of California Press; 1998.
 13. Peña AE. La maldición de la Sangre. [Internet]. 2009 [cited 2005 December 12]. Available from: <http://anaelenapena.blogspot.com/2005/12/carrie-la-maldicin-de-la-sangre.html>
 14. Beauvoir S. *El Segundo Sexo.* Buenos Aires: Edit. Sudamericana; 2002.
 15. Mansfield P, Stubbs M. Tracking the course of menstrual life: contributions from the Society for Menstrual Cycle Research. *Women Health Iss.* 2004;14:174-176.
 16. Walker B. "Menstruation" in *The Women's Encyclopedia of Myths and Secrets.* New Jersey: Editorial Castle Books; 1983.
 17. Kappler, C. *Monstruos, demonios y maravillas a finales de la Edad Media.* Madrid, 1st Ed. Editorial Akal; 1986.
 18. Arjona A, Checa F, Olmos L. Las historias de vida como método de acercamiento a la realidad social. *Gaz Antropol Almeria.* 1998;14:1-14.
 19. Phillip K. *Antropología. Una exploración de la diversidad humana con temas de la cultura hispana.* 6th Ed. Madrid: McGraw-Hill; 1997.
 20. Diaz A, Laufer M, Breech L. Menstruation in girls and adolescents: using the menstrual cycle as a vital sign. *American Academy of Pediatrics Committee on Adolescence; American College of Obstetricians and Gynecologists Committee on Adolescent Health Care. Pediatrics.* 2006; 118(5):2245-9.
 21. Marshall J. An exploration of women's concerns about heavy menstrual blood loss and their expectations regarding treatment. *J Reprod Infant Psychol.* 1998; 16(4):259-76.
 22. Granh J. *Blood, bread and roses. How menstruation created the world.* Washington: Beacon Press; 1994.
 23. Jacke J. Tainted femininity -- traces of traditional menstruation myths in product advertising of feminine hygiene products. *Gynakol Geburtshilfliche Rundsch.* 1997; 37(1):30-8.
 24. Brown S, Morrison L, Calibuso M, Christiansen T. The menstrual cycle and sexual behavior: relationship to eating, exercise, sleep, and health patterns. *Women Health.* 2008; 48(4): 429-44
 25. Hernández J, Gómez P. *Dolor en la Mujer.* Bogotá: Asociación Colombiana para Estudio del Dolor (ACED); 2008.
 26. López M. Síndrome premenstrual. Tratamiento fitoterapéutico. *Ámbito fitoterapéutico.* 2004:23-5.
 27. Ozgoli G, Selselei E, Mojab F, Majd H. Placebo controlled trial of Ginkgo biloba in treatment of premenstrual syndrome. *J Altern Complement Med.* 2009; 15(8):845–51.
 28. McGrory A. Menarche: Responses of early adolescent females. *Rev Adolescence.* 1990; 25 (98):265-70.