



---

# Polycystic Ovarian Syndrome (PCOS)

## What is PCOS?

Polycystic ovarian syndrome is a hormonal imbalance which is quite common, affecting 5%-10% of women. A syndrome is a group of symptoms/findings that are seen together. In PCOS, these include chronic absence of ovulation, chronic elevated testosterone levels, and ovaries with multiple small cysts (polycystic) containing eggs. To qualify as PCOS, 2-3 of these findings must be present

## How does your doctor diagnose PCOS?

Diagnosis of PCOS is accomplished by identifying the different symptoms/findings through a history and physical examination, ultrasound imaging study and blood tests.

Women with PCOS usually have a history of irregular or missed periods and long duration between periods. They may be unable to get pregnant and have increased acne and hair growth (hirsutism). Enlarged ovaries with multiple cysts characterize PCOS on the ultrasound. Blood tests reveal elevated levels of sugar, cholesterol and male hormones.

## What are the risks associated with PCOS?

Not ovulating regularly carries certain risks. It causes elevation of estrogen which leads to excessive thickening and abnormal bleeding of the lining of the uterus. Over time, precancerous changes or uterine cancer may develop. Irregular ovulation can also make conception difficult.

Women with PCOS commonly have metabolic syndrome which includes fat accumulation around the waist, hypertension, elevated cholesterol and insulin resistance or diabetes. Obesity is also common. These symptoms increase the risk of heart disease.

## How do you treat infertility in women with PCOS?

Medication may be prescribed to induce ovulation. These include Clomiphene citrate and Letrozole which are oral medications. Letrozole is particularly helpful and usually

tried first. If these fail, fertility medicines called gonadotropins may be injected to stimulate egg growth. Care is taken while administering these medications as they can sometimes cause multiple births.

Overweight women are advised to lose weight which can improve the pattern of ovulation and fertility.

Some patients with PCOS may be helped by medications such as metformin which helps the body use insulin more effectively. The risk of developing diabetes and metabolic syndrome may also be lowered by metformin.

If the above treatments are unsuccessful, in vitro fertilization (IVF) is recommended.

### **How do you treat PCOS in women who are not trying to conceive?**

Hormone medications are usually prescribed to treat women with PCOS when pregnancy is not the goal. Excessive hair growth and acne can be controlled by oral contraceptive pills. These also regulate the menstrual periods, preventing pregnancy and reducing the risk of cancer. The risk of developing diabetes and metabolic syndrome may be lowered by taking metformin.

Medications that specifically lower male hormones can help with excessive acne and hair growth. Excess hair growth can also be managed by laser treatment and electrolysis. Weight loss is recommended as it has been found to lower male hormone levels and the risk of developing diabetes.

PCOS can present differently in different women and changes may occur over time. Your doctor will recommend and modify treatment according to your situation.