

# POLYCYSTIC OVARY SYNDROME (PCOS)

## DEFINITION

Poly cystic ovary syndrome (Pcos) is a common endocrine system disorder among women of reproductive age. Women with PCOS may have enlarged ovaries that contain small collections of fluid called follicles located in each ovary as seen during an ultrasound exam.

Infrequent or prolonged menstrual periods, excess hair growth, acne, and obesity can all occur in women with polycystic ovary syndrome, in adolescent infrequent or absent menstruation may raise suspicion for the condition.

Polycystic ovary syndrome is unknown

## Signs and symptoms

- First begins having periods (menarche)
- In some cases PCOS develops later during the reproductive years for instance Substantial weight gain
- To be diagnosed with the condition your doctor looks for the least two of the following.
- Irregular periods- This is the most common

## characteristics

- Excess androgen- Elevated levels of male hormones (androgens) may result in physical signs, such as excess facial and body hair, adult acne or severe adolescent acne and male pattern baldness.
- Polycystic ovaries- polycystic ovaries become enlarged and contain numerous small fluid-filled sacs which surround the eggs.

## When to see a doctor

- If you have concerns about your menstrual periods
- You are experiencing infertility
- Signs of androgen excess such as acne and male pattern hair growth

## Factors that may play a role in causing PCOS

- Excess insulin: Insulin is the hormone produced in the pancreas that allows cells to use sugar (glucose) your body's primary energy supply.
- Blood tests: Measuring the levels of several hormones to exclude possible cause of menstrual abnormalities or androgen excess that PCOS blood test us mainly doing fasting and triglyceride levels and a glucose tolerance test.
- Ultra sound: An ultra sound exam can show the appearance of your ovaries and the



thickness of the lining of your uterus. Tran's vaginal ultrasound the transducer emits inaudible sound waves that are translated into images on a computerscreen.

### Management in PCOS

- Life style changes: first step weight loss through a low calorie diet combined with moderate exercise activities. Even a modest reduction in your weight might improve your condition.

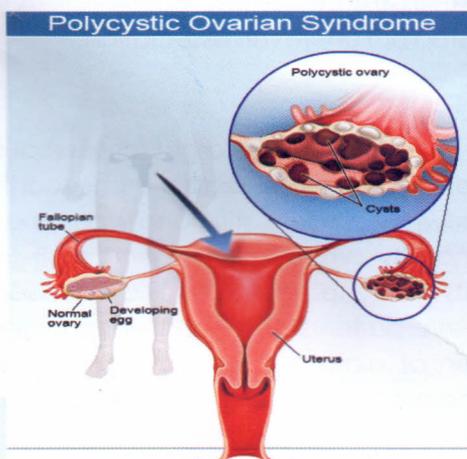
### Medication

To regulate your menstrual cycle: to regulate your menstrual cycle, doctor may recommended with combination birth control pills. Pills that contain both estrogen and progestin.

If you are not good candidate for combination birth control pills an alternative approach is to take progesterone for 10 to 14 days everyone two months this type of progesterone therapy regulate your periods and offers protection against endometrial cancer.

Metformin an oral medication for type 2 diabetes that improves insulin resistance and lowers insulin levels. This drug may help with ovulation and lead to regular menstrual cycles.

- Help you ovulate: if you are trying to become pregnant you need a medication to help you ovulate. Clomiphene is an oral -anti estrogen medication.
- If you don't become pregnant using Clomiphene and metformin , in your doctor may



recommend using gonadotrophin follicle -stimulating hormone (FSH) and lutenizing hormone medication are administrated by injection.

- When taking any type of medication to help you ovulate its important that you work with reproductive specialist and have regular ultrasound to monitor your progress and avoid problems.

### To help offset the effects of PCO

Keep your weight in check : obesity makes insulin resistance worse. Weight loss can reduce both insulin and androgen levels and may restore ovulation. No single specific dietary approach is best but losing weight by reducing how many calories you consume. Each day may help with polycystic ovary syndrome especially if you are over weight or obese use smaller plates reduces portion size and resist the urge forsecond to help with weight loss. Ask your doctor to recommend a weight control program and meet regularly with a dietitian for help in reaching weight loss goals.

Consider dietary changes: low fat, high carbohydrates diet increases insulin levels so you may want to consider a low carbohydrates diet . if you have PCOS and if your doctor recommended it don't severely restrict carbohydrate instead choose complex carbohydrate which are high in fibre . The more fibre in food the more slowly its digested and the more slowly your blood sugar level arise. High fiber carbohydrate include whole grain, breads and cereals whole wheat, pasta, barley, brown rice, beans, limited less healthy simple carbohydrate such as soda, excess fruit juices, cake, candy, ice-cream, cookies and dough nuts.

Be active: Exercise help lower blood sugar levels. If you have PCOS increasing daily activity and participating in a regular exercise programme may treat or even prevent insulin resistance and help you keep your weight under control.

**NEETHU POLY MSW, MBA**

Department of diabetes Education & counseling