Polycystic ovary syndrome (PCOS)

What is PCOS?
Polycystic ovary syndrome (PCOS) is the most common hormonal disorder in women of reproductive age. It affects about 8-13% of women – about one in 10 – from when their periods begin to when they reach menopause. PCOS can cause period problems, trouble falling pregnant, acne, excess hair growth and excess weight. Some long-term health issues are also more likely in women with PCOS, but the good news is that many of these problems can be managed with a healthy lifestyle.

What causes PCOS?
Genetics, hormones and lifestyle factors all play a role in PCOS. Women with PCOS are 50% more likely to have a mother, aunt or sister with PCOS and the condition is more common in women of Asian, Aboriginal and Torres Strait Islander and African backgrounds.

Signs & symptoms of PCOS
Hormones are the body’s chemical messengers. In women with PCOS, two hormones – insulin and androgens (male-type hormones) – are produced in higher levels. This imbalance can result in signs and symptoms including:
• irregular periods (more or less often) or no periods
• hair growth on face, stomach and back
• loss or thinning of scalp hair
• acne (pimples) that can be severe
• weight gain
• emotional problems (anxiety, depression, poor body image)
• difficulties getting pregnant
• increased risk of type 2 diabetes, with earlier onset.
Symptoms of PCOS can vary from woman to woman, and also change over time.

How is PCOS diagnosed?
Medical history, examination, blood tests and ultrasounds are used to diagnose PCOS. A PCOS diagnosis requires 2 out of the following 3 criteria:

1. Periods less regular
• More or less often than monthly
• No periods

2. Androgens
• Symptoms such as excess hair growth and acne, OR
• High levels of male-type hormones (androgens) in the blood (hyperandrogenism)

3. Ultrasound
• An ultrasound showing partially developed eggs that look like dark circles (20 or more on either ovary)
• Ultrasound is only needed if 1 and 2 are not present
• Not recommended for women aged under 20.

PCOS-related health issues

Weight
Many women with PCOS have difficulty managing their weight. Increased weight can lead to higher levels of androgens and insulin, resulting in worse physical symptoms.

Psychological effects
Symptoms of depression and anxiety are more common in women with PCOS, though it is not clear why; it may be due to both hormonal influences and dealing with PCOS symptoms.
Other health problems linked to PCOS
There is an increased risk of developing a number of conditions due to PCOS, such as prediabetes, type 2 diabetes, gestational diabetes, cholesterol and blood fat abnormalities, and cardiovascular disease (heart disease, heart attack, stroke). However, these risks can be reduced with an active lifestyle, healthy diet and weight reduction.

Managing & treating PCOS
PCOS cannot be cured, but can be managed. Eating well, staying physically active and preventing weight gain are the first steps – and the best ways – to improve PCOS symptoms and manage long-term health.

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<tr>
<th>Symptom</th>
<th>Ways to manage the symptom</th>
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<tr>
<td>Irregular periods</td>
<td>• Hormonal contraception such as the pill, mini-pill, Implanon® or Mirena®&lt;br&gt;• An insulin-sensitising medication called metformin can be used for treating women with PCOS who don’t ovulate&lt;br&gt;Having regular periods helps keep the uterus healthy. If you have fewer than four periods a year, your doctor might prescribe progesterone to bring on a period.</td>
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<td>Excess hair</td>
<td>• Waxing, laser hair removal, electrolysis, depilatory creams&lt;br&gt;• Androgen levels can be lowered using:&lt;br&gt;° the contraceptive pill, alone or in combination with anti-androgen drugs, such as spironolactone or cyproterone acetate</td>
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<td>Acne</td>
<td>• Hormonal contraception&lt;br&gt;• Isotretinoin (sold as Roaccutane)&lt;br&gt;• Anti-androgens such as spironolactone</td>
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<td>Fertility</td>
<td>• Lifestyle – weight management. Losing 5-10% of body weight, if overweight, can help to induce ovulation&lt;br&gt;• Medications – such as letrozole, clomiphene citrate and metformin&lt;br&gt;• Surgery – laparoscopic ovarian surgery, bariatric surgery</td>
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<td>Depression &amp; anxiety</td>
<td>If you experience thoughts of fear or sadness, or have lost interest in your usual activities, discuss your mood with your doctor. Effective treatments include a healthy lifestyle, psychological/counselling support and medications if required. Importantly, know that you are not alone.</td>
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For more information go to jeanhailes.org.au/health-a-z/pcos