POLYCYSTIC OVARIAN SYNDROME (PCOS)

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OBJECTIVES

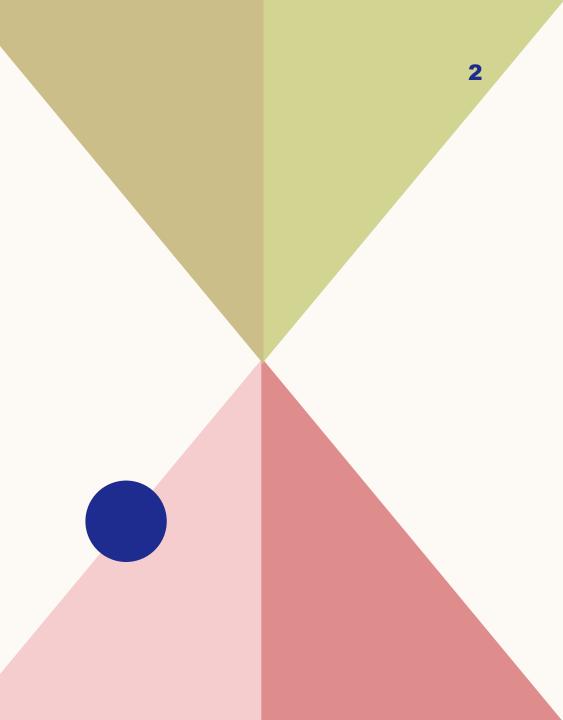
What is PCOS

Causes and Risk factors

Diagnostic Criteria

Lifestyle Modifications

Medical Management and Screening





WHAT IS PCOS

- Hormonal and metabolic disorder effecting women of reproductive age.
- 5.2% incident rate
 - 70% of women with PCOS are undiagnosed
 4-5 folds higher than UK.
 - 4-5 folds nighter than UK.
- Increases risk of type II diabetes, cardiovascular disease, endometrial cancer and leading cause of infertility.

CAUSES OF PCOS

Genetic Factors:

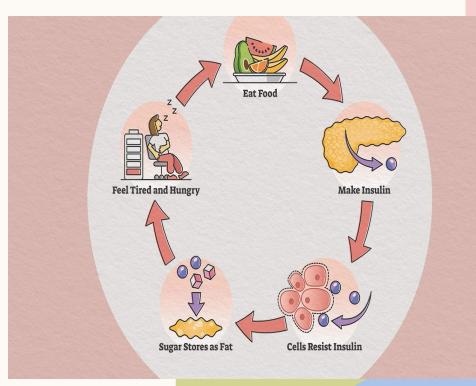
• PCOS tends to run in families, suggesting a genetic component.

Hormonal Imbalances:

- Insulin Resistance: Higher insulin levels in blood leads to excess androgen production
- Excess Androgen: Prevents ovulation causing irregular cycles and other physical symptoms

Inflammation:

• Low-grade inflammation is common in women with PCOS.



RISK FACTORS FOR PCOS

Family History:

• Mother or sister with PCOS increases risk

Obesity:

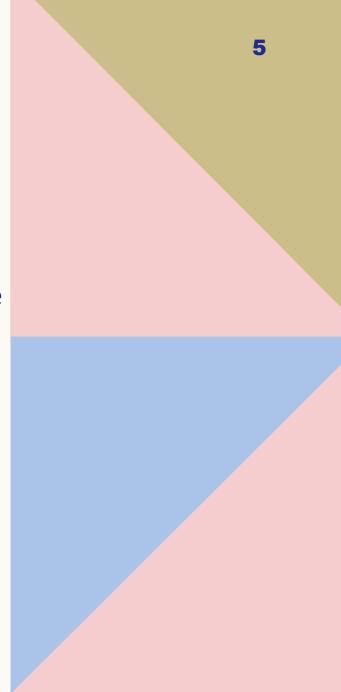
- Increase weight = hormonal imbalance and insulin resistance
 Lifestyle Factors:
- Poor diet, sedentary lifestyle= increased symptoms

Environmental Factors:

• Not as well understood

Metabolic syndrome

• Routine labs- Lipids, A1C, hypertension screening



Diagnosis

Rotterdam Criteria:

- Hyperandrogenism: Clinical signs (e.g., hirsutism, acne) or biochemical evidence (elevated levels of androgens in blood tests).
- **Ovulatory Dysfunction**: Irregular or absent menstrual periods.
 - First Year Post-Menarche: Irregular cycles are normal.
 - **1 to <3 Years Post-Menarche**: Cycles <21 or >45 days are considered irregular.
 - >3 Years Post-Menarche to Perimenopause: Cycles <21 or >35 days or <8 cycles per year are considered irregular.
 - >1 Year Post-Menarche: Any cycle >90 days is considered irregular.
 - **Primary Amenorrhea**: No menstruation by age 15 or >3 years postthelarche (breast development).
- Polycystic Ovaries: Presence of 12 or more follicles in each ovary as seen on an ultrasound or increased ovarian volume.

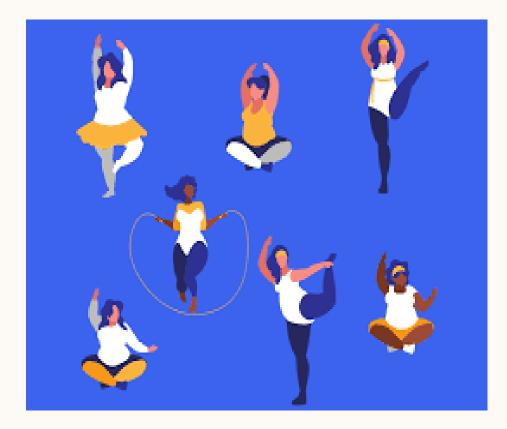
LIFE STYLE MODIFICATIONS

* Diet

* Exercise

Sychosocial Counseling

- Increased risk of depression and anxiety
- Increased psychosexual dysfunction
- Eating disorders
- * Laser Hair Removal
- Sleep Apnea Screening



MEDICAL MANAGEMENT

Hormonal Contraception

- Regulates cycles
 Protects the endometrium

Metformin

• Improves insulin sensitivity- lower blood insulin

GLP1

• Growing Research

Inositol

Anti-androgen medication

Antidepressant/ Antianxiety



MYTHS OR FACTS OF PCOS

FACT: Not all women with PCOS have cysts on their ovaries, and having cysts does not necessarily mean you FACT: PCOS is quite peops not necessarily mean of reproductive age worldwide.

FACT: While PCOS can cause infertility, many women with PCOS can still conceive naturally or with the help of fertility treatments.

FACT: The exact cause of PCOS is unknown, but it is believed to involve a PCOBilis falls of by something the patient fast done.

FACT: There is no cure for PCOS, but losing weight can help manage symptoms and improve insulin sensitivity. However, weight loss alone will not eliminate PCOS.

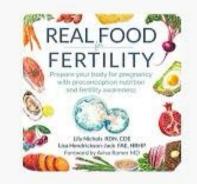
PATIENT RESOURCES

- AskPCOS app
- Real Foods for Fertility By: Lily Nichols RDN, CDE

Ask PCOS

POWERED BY MONASH

- Aviva Roma MD podcast
- https://www.pcosaa.org





QUESTIONS?

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