

# Polycystic Ovary Syndrome

Women that have polycystic ovary syndrome usually have disruptions in their menstrual cycle and metabolism. It is caused by alterations in the function of different hormones, principally of insulin and androgens.

It may occur at almost any stage in the fertile period, from puberty to the age of 40. It takes its name from one of its most frequent characteristics: multiple small cysts are detectable in the ovaries by ultrasound scans. However, at times, particularly around puberty, the ovaries in healthy women may look polycystic during scanning and yet they don't have the syndrome.

The most usual symptoms are disruptions in the menstrual cycle, (cycles at longer intervals: fewer than nine periods per year or time lapses of over 35 days between periods) and hirsutism (hair growth in areas where it should not grow, such as on the chin, upper lip, below the belly button, on the back and arms). It can cause weight gain, acne, hair loss on the forehead, dark marks under the armpits and difficulty in getting pregnant. Patients are also more likely to have diabetes and high cholesterol levels. Some women have almost no symptoms and others have them all.

Very often you go to see your doctor because, in spite of dieting and exercising, you gradually gain weight and you feel sad and disappointed because you can't understand what's wrong.

The infertility that polycystic ovary syndrome may cause is easily reversible with a hormone treatment. And, yes, you can have children.

## How is it diagnosed?

We'll make the diagnosis by listening to you, with an examination, a blood test and a vaginal ultrasound scan. The blood test studies the hormones and their variations throughout the day and throughout your menstrual cycle. This explains why they have to be done between the 3<sup>rd</sup> and 5<sup>th</sup> days of your period and why

that day you have to get up 2 hours before having the blood test. If you don't have your period, the blood test can be done any day. If you are taking contraceptives, you'll have to stop taking them for 3 months so that we can evaluate the hormone profile in your blood.

## What can you do and what treatment can we give you?

The most important treatment to avoid possible effects is to get down to the right weight and stay there, by paying special attention to your diet and exercising.

### Three very important recommendations.

- Diet. To avoid or stop being overweight.



- Exercise. At least two and a half hours a week or 10,000 steps a day.



- Regular monitoring. By nursing healthcare professionals and your family doctor.

According to your individual case, we'll give you medicines, like metformin (which regulates insulin metabolism), contraceptives or antiandrogens; or else we'll insist that you follow a healthy diet and get enough exercise, and we'll do all we can to help you.