

POLYCYSTIC OVARY SYNDROME

What is it?

PCOS is a condition affecting how a woman's ovaries work. It can cause a woman's menstrual cycle to be irregular (see information leaflet on the menstrual cycle), which may result in the woman having long gaps between her periods, and it may affect her fertility and physical appearance.



Around

1-IN-10 WOMEN

have PCOS. It can run in families.

What causes it?

The cause is unknown, but the balance of hormones produced by the ovaries is affected and, in some women testosterone is slightly higher than normal. It can happen at any age, as young as 12, but it can also develop later.



Symptoms

The symptoms of PCOS include:



Irregular or no periods



Weight gain and difficulty losing weight



Reduced fertility



Acne



Excess hair growth



Mood swings and irritability



Problems with sugar metabolism

The National Institute for Health and Care Excellence (NICE) provides national guidance and advice to improve health and social care. A medical complication is an unfavourable result of a disorder. For PCOS, potential complications include:

- metabolic disorders such as type 2 diabetes
- cardiovascular disease
- pregnancy complications
- endometrial cancer
- psychological disorders (anxiety, depression and obstructive sleep apnoea)



Diagnosis

A diagnosis of PCOS should be made by a health professional and is made when at least two of the following are present:

- irregular periods (some periods >6 weeks apart) or no periods
- excess facial or body hair, or higher than normal testosterone levels on a blood test
- ultrasound scan showing polycystic ovaries (multiple very small follicles on the ovaries). Follicles are fluid filled sacs that contain an egg

The symptoms and appearance of multiple follicles on the ovaries can come and go, so it can take a while to be diagnosed. Also they might be observed in healthy women and so having multiple follicles alone is not sufficient to diagnose PCOS.

A definite diagnosis might not be performed until 8 years after periods start in adolescence, as this gives the menstrual cycle time to settle down.

Treatment

There are various treatments that can improve symptoms. The treatment suggested will depend on the symptoms, and whether the woman is trying to become pregnant.

A healthy lifestyle is helpful; eating plenty of fruit and vegetables, cutting out processed foods, and taking at least 30 minutes of sweat-inducing exercise per day.

Around 70% of women with PCOS will have periods longer than 35 days. Irregular periods can be helped by starting the contraceptive pill to regulate the cycle. If periods are heavy and/or painful, the pill will help improve this.

If women want to remove excess hair growth on the body and face, topical creams, waxing, shaving, laser hair removal and the contraceptive pill and other endocrine medications can help. The pill can help in reducing acne.

One in ten women with PCOS will go on to develop diabetes.

Women with PCOS have an increased chance of developing high blood pressure.

PCOS can increase the risk of developing cancer of the womb lining (endometrial cancer), because having fewer periods can cause the womb lining to become thickened and it can overgrow. Taking the pill or hormone tablets to induce a period every three-four months reduces this risk.

About 40% of women with PCOS are affected by infertility. The difficulty in becoming pregnant usually comes from not ovulating on a regular basis. Doctors may prescribe drugs which help to reduce insulin levels, and to help women ovulate more regularly in order to become pregnant.

Further reading

- <https://www.womenshealth.gov/a-z-topics/polycystic-ovary-syndrome>