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Polycystic Ovarian Syndrome (PCOS)

PCOS is a common hormonal imbalance. It is defined by a group of symptoms and test results that is common and manageable. While it can be associated with fertility issues, metabolic issues and menstrual (period) issues, there are many ways to treat whatever symptom it causes.

Myths

There are numerous myths that surround PCOS.

An ultrasound showing a 'polycystic appearance' of the ovaries is very common and does not necessarily mean that a woman has PCOS. Further discussions and blood tests will help to work out if the ultrasound is significant.

Teenagers will frequently have irregular and infrequent periods and it is very common to have a polycystic appearance of the ovaries on ultrasound. PCOS therefore is difficult to diagnose in teenagers.

PCOS does not mean that a woman cannot conceive and contraception is important to avoid an unplanned pregnancy.

Other conditions can cause the same symptoms as PCOS. For example an underactive thyroid gland will also cause periods to be infrequent, cause hair loss and weight gain. This is why an assessment of the woman and additional blood tests is important.

Symptoms

Periods- can be infrequent and irregular but not always. It is important to have a period at least every 3 months, whether naturally or as a result of medication, to prevent abnormal cells developing in the lining of the uterus.

Excess facial and body hair/acne - this is as a result of a low level of a protein that binds testosterone in the bloodstream, leading to a higher level of free testosterone. This high testosterone can be treated with medications as well as the skin and hair being treated.

Increased weight- this is associated with insulin resistance and difficulty maintaining a healthy weight.

Subfertility- if ovulation is unpredictable achieving a pregnancy can take longer and sometimes medication will be used to induce ovulation. There are eggs however and so women with PCOS should not consider themselves to be infertile.

Anxiety and Depression- PCOS symptoms can cause stress, anxiety and loss of self confidence. It is important to address the mental impact of this as well as the physical symptoms.

Investigations

Ultrasound

This will look at the uterus and ovaries. If the woman has not been sexually active it is done through the abdomen.

Blood tests

Excluding other causes of the symptoms is important. This includes checking the thyroid, prolactin and other pituitary hormones, pregnancy hormone and different androgens and

adrenal hormones. If PCOS is confirmed, checking cholesterol levels and for diabetes is important.

Treatment

This depends on the symptom.

Periods -the contraceptive pill is commonly used as it provides contraception, regular periods to protect the uterine lining and increases the protein that binds testosterone, lowering free testosterone levels. Other options include progesterone tablets every 3 months, a progesterone implant or progesterone intrauterine device. Options often depend on whether a pregnancy is being planned.

Facial and body hair/acne- the contraceptive pill containing oestrogen helps with this. Other options are anti androgen medications. Hair removal eg laser, waxing and acne creams and medications can help. Anti-androgen medications and some acne medications eg Roaccutane can cause birth defects and so contraception is important.

Increased weight- diet and exercise with the help of a dietician can help. There are also some weight loss medications that can be prescribed. "Get healthy" is a free service for advice. Losing weight also helps to decrease the chance of type 2 diabetes.

Subfertility - tests to check other fertility factors are important such as a semen analysis and making sure the fallopian tubes are not blocked, with a specialised ultrasound. If the only issue that is found is unpredictable infrequent ovulation there are medications, overseen by a fertility specialist which will help.

Anxiety and Depression - this is important to see your doctor about. Your GP can provide a Mental Health Plan to then facilitate seeing a psychologist. Sometimes medication is also helpful.

Helpful Questions to ask your doctor if you think you may have PCOS

What can I do about my periods, my facial hair or acne?

I am trying to conceive - do I need any tests?

Will I conceive naturally or will I need fertility treatment?

Should I lose weight?

How can I lose weight?

Do I have a high chance of other health problems like diabetes?

If my symptoms are not bothering me do I need tests or treatment?

Do I need to see a specialist such as a gynaecologist or an endocrinologist?