

Polycystic Ovarian Syndrome (PCOS)

What is PCOS?

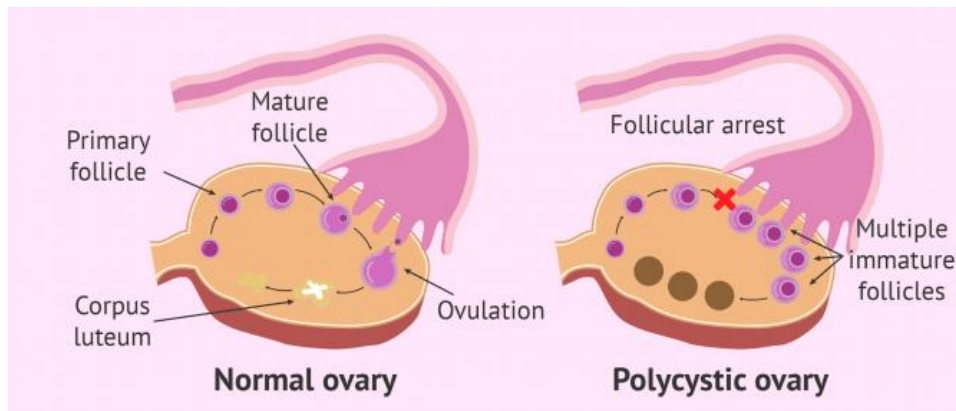
Polycystic Ovarian Syndrome (PCOS) is a common hormonal disorder that affects 5-10% of people with ovaries. It is diagnosed based on a combination of clinical signs and symptoms, ultrasound findings, and laboratory features.

Clinical Signs & Symptoms of PCOS

- Excessive facial or body hair or receding or thinning hair.
- Acne.
- Irregular or absent menstrual periods because of irregular or absent ovulation (this is the main reason why people with PCOS have trouble conceiving).
- Hormonal imbalances (eg. elevated androgen levels).
- Insulin resistance.
- Excess weight.

Ultrasound Findings of PCOS

- Enlarged ovaries.
- High number of antral follicles. (Note: People with PCOS do not have cysts in their ovaries. It is the presence of the large numbers of small immature follicles seen on ultrasound that gives this syndrome its name.)



Laboratory Features of PCOS

- Elevated androgen levels.

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What are the risks of PCOS?

Women with PCOS produce higher levels of androgens and may have irregular menstrual cycles if the ovary does not release an egg each month. Irregular ovulation can lead to difficulty getting pregnant. In addition to infertility, PCOS is associated with a number of other conditions, both short and long term. People with PCOS are more likely than those without it to have pre-diabetes or diabetes, excess weight, high cholesterol, high blood pressure, heart disease and/or sleep apnea. PCOS is also associated with depression and anxiety. Over time, because of the lack of regular ovulation in people with PCOS, the endometrium (the lining of the uterus) can be exposed to too much estrogen relative to progesterone causing the endometrium to become excessively thickened. This can result in heavy or irregular bleeding, and an increased risk for pre-cancerous and cancerous changes of the endometrium.

Management

For people with PCOS who are trying to conceive the goal is to induce regular ovulation. Lifestyle modifications such as dietary changes and weight loss can be helpful in achieving spontaneous ovulation. Lifestyle changes are also important to improve associated medical conditions such as diabetes and hypertension which can affect the health of a pregnancy. When lifestyle changes alone are not enough, medications to induce ovulation can be used.

Please connect with your care team if you are interested in a consultation with our ARC Registered Dietitian who specialized in reproductive health. Note that many health plans cover this service.

** Adapted from the ASRM Hirsutism and Polycystic Ovary Syndrome Guide for Patients*

**Image from inviTRA What is PCOS?*



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If you have questions, please contact us via
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