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## CAUSES OF PCOS

Researchers have determined that most women with PCOS have an endocrine imbalance known as “insulin resistance” causing the body to abnormally handle insulin. Insulin is a hormone produced in the pancreas that lowers blood glucose (sugar) levels. After eating, blood glucose levels rise and, in response, the pancreas releases more insulin into the bloodstream. The insulin helps the liver, muscle and fat store some of the energy as glucose and fat, thus keeping blood glucose levels normal.

Women with “insulin resistance” overcompensate by producing higher levels of insulin to keep their glucose levels normal. The higher levels lead to more fat storage (obesity) and disrupt proper ovarian hormone production, leading to increased male hormone production. This ultimately prevents ovulation and can produce all the symptoms of PCOS, anovulation and infertility.

## DIAGNOSING PCOS

Experts agree that, to diagnose PCOS, you must first rule out other endocrine conditions, such as adrenal gland diseases. For PCOS, women must have two of the three following diagnostic criteria:

- History of irregular or absent menstrual cycles and/or no ovulation
- Hirsutism and/or high levels of male hormones (androgens)
- Ultrasound evidence of polycystic-appearing ovaries using specific medical criteria

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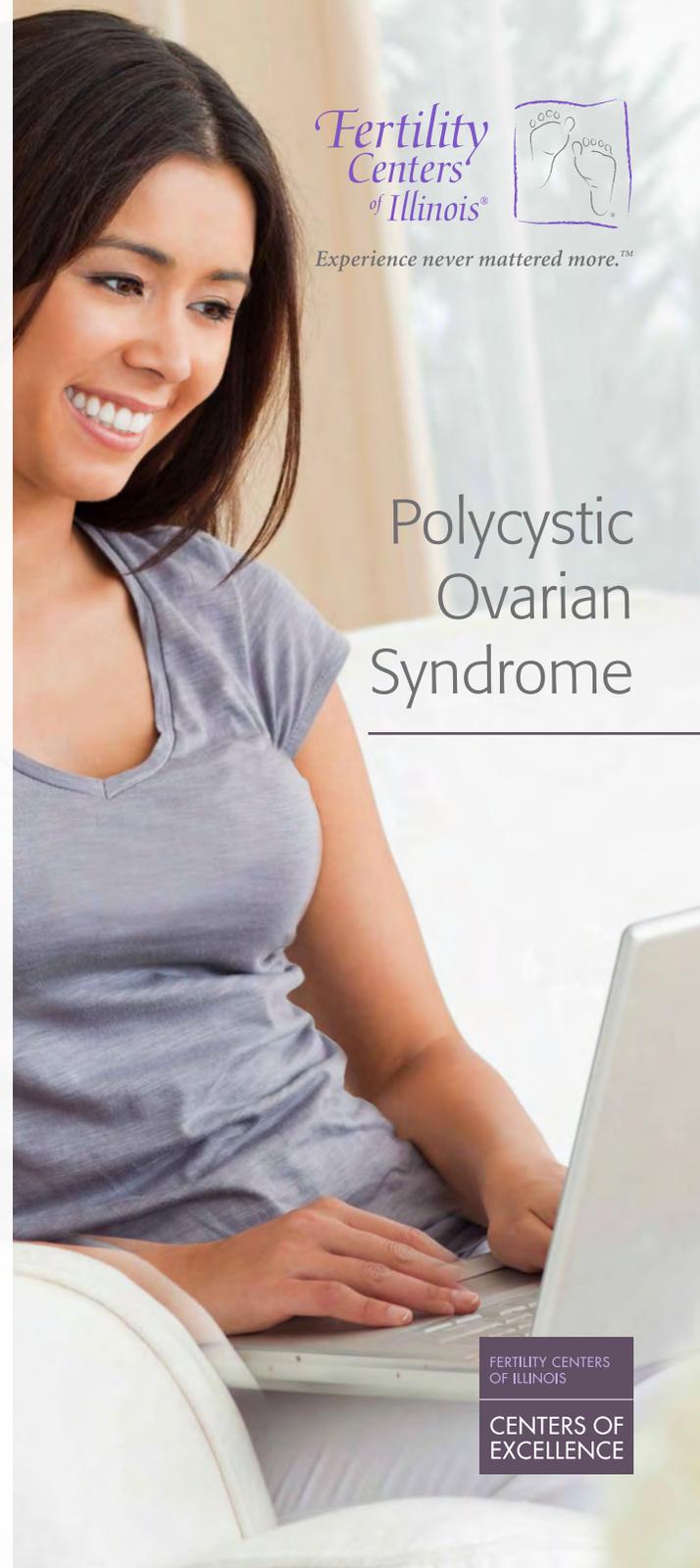
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# Polycystic Ovarian Syndrome



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## POLYCYSTIC OVARIAN SYNDROME (PCOS)

Polycystic Ovarian Syndrome (PCOS) is a condition in which the ovaries contain many follicle cysts due to a hormone imbalance and less frequent ovulation. PCOS has a range of variable and subtle symptoms that can have negative implications for fertility or general health.

### SIGNS & SYMPTOMS

- Irregular or absent periods
- Excessive hair growth on the face, arms, chest or abdomen
- Infrequent or absent ovulation
- Obesity or weight gain
- Ovarian follicle cysts
- Thinning hair
- Acne

### WHO SHOULD BE TESTED FOR PCOS?

PCOS is found among all ethnicities of women, but is more common in Hispanic women with an incidence rate of 13-14 percent, compared to 5 percent in caucasian women. However, any woman who has one or more of the symptoms should consider PCOS evaluation by a reproductive endocrinologist or an experienced obstetrician/gynecologist.

Since PCOS can have confusing signs and symptoms, the diagnosis may be unclear in young women not trying to get pregnant, especially if they are interested in regulating periods with medications, such as birth control pills. In addition, there is no single test to definitively diagnose PCOS. Experienced obstetricians/gynecologists and reproductive endocrinologists, who have more expertise in comprehensive endocrine evaluations, may be better suited for PCOS investigations and able to offer more treatment options.

### THE FERTILITY CENTERS OF ILLINOIS® PCOS SCREENING PROCESS

You will make an appointment between day two and four of your menstrual cycle or any day you do not get your period. During that appointment, patients will:

- Complete a brief questionnaire and have your Body Mass Index (BMI) evaluated
- Have blood drawn to evaluate your hormone and glucose levels
- Receive blood pressure screening
- Receive a trans-vaginal ultrasound to visualize your ovaries

Within one week of the PCOS screening appointment, patients will:

- Receive the results of their screening including physician's evaluation and treatment recommendation
- Should the PCOS screening uncover any abnormalities, be advised to schedule an appointment for further consultation, physical examination and/or additional testing (as required).

### PCOS TREATMENT PLAN

Based on your symptoms, you and your physician can discuss treatment goals to prevent future health problems, your plan to become pregnant and lowering your risks for uterine problems, diabetes and heart disease. You may need a combination of lifestyle changes and medications to meet your goals. Some treatments for PCOS include:

- Lifestyle modification including healthy diet and exercise – even a 10 percent loss in body weight can lead to reduced PCOS symptoms, restore a normal period and make your cycle more regular
- Birth control pills to control menstrual cycles, reduce male hormone levels and treat acne
- Diabetes (insulin-sensitizing) medications to aid in the control of blood glucose levels and lower testosterone production
- Fertility treatments including stimulated ovulation cycles, inseminations (IUI), In Vitro Fertilization (IVF) and other treatment options, which may include surgery

If you have any of these symptoms or think you may have PCOS, contact:

Fertility Centers of Illinois  
877.324.4483  
[fcionline.com/PCOS](http://fcionline.com/PCOS)

