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## Review on Polycystic Ovary Syndrome- Clinical Manifestations, Diagnostic workup and Management

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## Abstract

Polycystic ovarian syndrome emerges as the most conspicuous endocrinopathy affecting 2.2 - 20% of women belonging to reproductive age group. Diagnosis of PCOS is established when 2/3 of the Rotterdam's criteria is met i.e Hyperandrogenism. Ovulatory Dysfunction and Polycystic ovaries.( 12 or more follicles of size 2-9mm in each ovary and /or ovarian volume > 10mL). According to Guidelines from Endocrine Society, early recognition of PCOD facilitate healthcare providers to prevent and treat adequately wide range of metabolic complications i.e Impaired Glucose tolerance, Type II Diabetes Mellitus, Metabolic syndrome, Dyslipidemia, Non alcoholic fatty liver disease and non alcoholic steatohepatitis, Obesity, Obstructive sleep apnea and cardiovascular diseases. Diagnostic workup and management of PCOS is based on correction of metabolic derangements, psychosocial problems, control of menstrual cycle and prevention of endometrial hyperplasia, assessment of ovulation / and fertility reduction of Dermatological manifestations. Patient's desire for induction of ovulation and pregnancy plays a pivotal

role in management of PCOS. This paper emphasizes on potentially risk factors and impacts of PCOS on multiple systems along with various treatment modalities (pharmaceutical therapy , hormonal contraceptives and lifestyle modification) available to nullify them. Self care and multidisciplinary approach to reduce the morbidity due to PCOS is also discussed.



**Biography** 

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