

## Treatment

**Medication**—Your doctor may prescribe one or more medications to help manage the symptoms and risks associated with PCOS.

**Surgery**—If medications don't help you get pregnant, your doctor rarely may recommend an outpatient surgery called laparoscopic ovarian drilling.

**Hair removal**—Several options besides prescription medications exist for hair removal. They include shaving, plucking and over the counter remedies. Options for longer lasting hair removal include electrolysis and laser therapy.

## Lifestyle and Home Remedies

**Choose complex carbohydrates**—carbohydrates provide many important nutrients, so don't severely restrict them. Instead, choose complex carbs, which are high in fiber. This includes whole-grain breads and cereals, barley, brown rice, beans, etc.

Additional research may determine which specific dietary approach is best, but it's clear that losing weight by reducing calorie intake benefits the overall health of women with PCOS. Work with your doctor and registered dietician to determine the best dietary plan for you.

**Get your exercise**—exercise helps lower your blood sugar levels. For women with PCOS, an increase in daily physical activity and participation in a regular exercise regimen are essential for treating or preventing insulin resistance and for helping weight control efforts.

## CU Healthy

**HCS** wants to CU Healthy! The Health Promotion Team at HCS tries to achieve this through our:

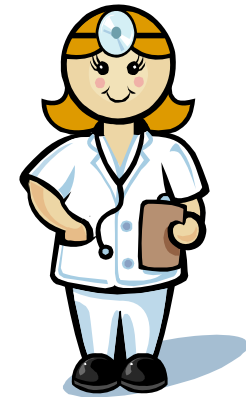
- Resource Centre
- Student Peer Interns
- Health Promotion Advisory Committee
- Website ([carleton.ca/health](http://carleton.ca/health))
- Facebook page
- Newsletters, class presentations, workshops and more . . .

The Health Promotion Team promotes healthy lifestyles and wellness and can provide you with information about stress, colds, nutrition, sexuality, alcohol, etc. Contact the Resource Centre for more information at 613-520-2600 ext. 6544 or [cu\\_healthy@carleton.ca](mailto:cu_healthy@carleton.ca).



2600 CTTC Building  
613-520-6674  
[carleton.ca/health](http://carleton.ca/health)

# Polycystic Ovary Syndrome



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## What is it?

Polycystic ovary syndrome (PCOS) is a common condition characterized by irregular menstrual periods, excess hair growth, acne and obesity, though it can affect women in a variety of ways.

The exact cause of polycystic ovary syndrome is unknown, but the condition stems from a disruption in the monthly reproductive cycle. The name polycystic ovary syndrome comes from the appearance of the ovaries in some women with the disorder –large and studded with numerous cysts (polycystic).

Polycystic ovary syndrome is the leading cause of infertility in women. Early diagnosis and treatment can help reduce the risk of long-term complications, which include diabetes and heart disease.

## Symptoms

Women with PCOS usually have at least several of the many signs and symptoms associated with the condition, including:

- Irregular or no menstruation
- Signs of excess androgen, including excess facial hair and acne
- Enlarged ovaries with multiple cysts
- Infertility

- Obesity
- Skin tags
- Prediabetes or type 2 diabetes
- Acanthosis nigricans (This is the medical term for darkened, velvety skin on the nape of your neck, armpits, inner thighs, vulva or under your breasts.)



Additionally, the following are more likely to occur in women with PCOS:

- High blood pressure
- High blood cholesterol
- Elevated levels of C-reactive protein, which may be associated with cardiovascular problems
- Non-alcoholic steatohepatitis, a liver disease
- Sleep apnea

## Causes

Doctors don't know the cause of polycystic ovary syndrome, but research suggests a link to excess insulin, the hormone produced in the pancreas that allows cells to use sugar (glucose), your body's primary energy supply. By several mechanisms, excess insulin is thought to boost androgen production by your ovaries. Studies also indicate that genetic factors may play a role in PCOS.

Early diagnosis and treatment of PCOS may help reduce your risk of long-term complications, such as diabetes and heart disease.



Talk with your doctor if you have irregular, scant or no menstrual periods, are overweight, and have acne or excess facial hair growth. Your doctor may refer you to a doctor who specializes in hormonal disorders (endocrinologist).

## Tests and Diagnosis

There's no specific test to definitively diagnose PCOS. Besides a complete physical examination, including a pelvic examination, other tests you may have include:

- Blood tests
- Ultrasound

## Complications

Because PCOS disrupts the reproductive cycle and exposes the uterus to a constant supply of estrogen, women with PCOS are at risk of *abnormal uterine bleeding* and *cancer of the uterine lining*.