Further information
Information on who to contact, i.e. web sites / telephone numbers of other departments / organisations which may be of help.

How to contact us
Obstetrics and Gynaecology
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If you need this leaflet in another language, large print, Braille or audio version, please call 01923 217 187 or email pals@whht.nhs.uk

Polycystic Ovarian Syndrome: Long term health effects

Patient information

Obstetrics and Gynaecology
Watford General Hospital
Hemel Hempstead Hospital
St Albans City Hospital
Polycystic ovarian syndrome (PCOS): Long-term health effects

What is PCOS?

PCOS is a condition that has effect on a woman's menstrual cycle, fertility, hormones and external appearance. This leaflet focuses mainly on the long-term health effects of PCOS than specific treatments for PCOS. You can request a separate leaflet on PCOS and its management.

What are polycystic ovaries?

Polycystic ovaries appear larger than regular ovaries and have more number of follicles (approximately twice) and they can be found in around 20% women. However having polycystic ovaries is different than having a polycystic ovarian syndrome! Only 6-7% of women who have polycystic ovaries actually have PCOS.

Symptoms of PCOS:

- Irregular periods or no periods at all (due to irregular or (anovulation)
- Difficulty becoming pregnant (reduced fertility)
- Having more facial or body hair than is usual for you (hirsutism)
- Loss of hair on your head
- Being overweight, rapid increase in weight, difficulty losing weight
- Oily skin and acne
- Depression and mood swings

Although symptoms vary a great deal from patient to patient ranging from milder to sever form of the condition.

Even though periods are irregular, there is always a small chance of conceiving hence if you do not wish to get pregnant, please contact your GP regarding appropriate contraception.
You should get at least one period every 3-4 months and if you are not, you should contact your GP to get prescription for progesterone tablets to induce the bleeding

Is there a cure?

There is no cure for PCOS

However, the treatment for various symptoms is available depending upon your suitability

If you are trying to get pregnant, various options are available to assess and treat the subfertility

Majority of the symptoms can be successfully managed by maintaining a healthy lifestyle with combination of balanced diet and exercise.

What causes PCOS?

The cause is still unknown. Sometimes it runs in family and if you have any first degree relative (mother, aunt, sister) are affected with PCOS; your risk of developing one is high.

Variety of symptoms of PCOS is due to abnormal hormone levels. The levels of testosterone in women with PCOS are slightly higher than normal levels and is associated with various symptoms like acne, greasy skin, and hirsutism.

Sometimes your body develops resistance to insulin, which is a hormone controlling level of sugar in your body. To control the sugar levels, your body produces more insulin and this in turn leads to weight gain, irregular periods, infertility and higher levels of testosterone.

How is PCOS is diagnosed?

As the PCOS presents with variety of symptoms, you are diagnosed with PCOS when you have two of the following three:

- Irregular, scanty periods or no periods at all
- Clinical symptoms of increased testosterone such as hirsutism, acne, greasy skin or a blood test showing increased testosterone levels
- An ultrasound scan showing polycystic ovaries

What PCOS means for your long-term health?

Insulin resistance and diabetes

10-20% of women with PCOS go on to develop diabetes at some time. And if not treated, it has widespread effect on other organs in the body. If you have PCOS, your risk of developing diabetes is increased further if you:

- Over 40 years of age
- Have family history of diabetes
- Have developed diabetes during a pregnancy (also known as gestational diabetes)
- Your BMI is 30 or over
If you are diagnosed with diabetes, you will be referred to the specialist team and may need to be treated either with tablets or insulin injection.

**High blood pressure**

Women with PCOS generally have high blood pressure, most likely due to insulin resistance and increased BMI than the PCOS itself. High blood pressure can lead to many health complications over the period of time and should be treated.

**Heart disease in later life**

The chance of developing heart disease is more likely if you’ve either diabetes or high blood pressure secondary to PCOS. However if you do have PCOS but no diabetes or high blood pressure then this risk is same as women who do not have PCOS.

For high cholesterol levels, you might be treated with a medication known as statins to reduce the risk of heart disease. However if you are trying to get pregnant, you should speak to the obstetrician regarding use of statins.

**Cancer**

If you are getting less than four periods in a year, the endometrium (lining of the uterus) can thicken over period of time and this may lead to endometrial cancer in a small number of women.

There are many ways to protect the endometrium by using hormone progesterone in various forms. You can either have a combined contraceptive pills, or have a withdrawal bleed by using progesterone pill for five days every 3-4 months or having a coil like Mirena. The choice will depend upon your suitability and whether or not you are trying for a baby. PCOS does not increase your risk of having a breast, cervical or ovarian cancer.

**Depression and mood swings**

The symptoms of PCOS may affect your perception of body image, which may lower your self-esteem.

**Snoring and daytime drowsiness**

PCOS can lead to fatigue or sleepiness during the day. It is also associated with snoring.

**What can I do to reduce long-term health risks?**

**Have a healthy life style**

- Balanced diet with less carbohydrates and more protein along with fruit, vegetables and whole foods
- Eat regular meals, especially breakfast
- Regular exercise (30 min at least 3 times a week)

You can request your GP to see a dietitian and keep your BMI between 19 and 25. If your BMI is more than that, having a targeted approach helps with the combination of diet and exercise.

**The benefits of losing weight include:**

- Lower risk of insulin resistance and developing diabetes
- Lower risk of heart problems
- Lower risk of cancer of the endometrium
- Regular periods i.e. increased chance of spontaneous pregnancy
- Reduction in acne and excessive hair growth
- Improvement in mood and self esteem

**Regular health checks**

Once you are diagnosed with PCOS, you will be monitored to check for early signs of any health problems. Women with PCOS over the age of 40 should be offered a blood sugar test once a year to check for diabetes but if your BMI is high or there is a family history of diabetes, the test might be offered earlier.