

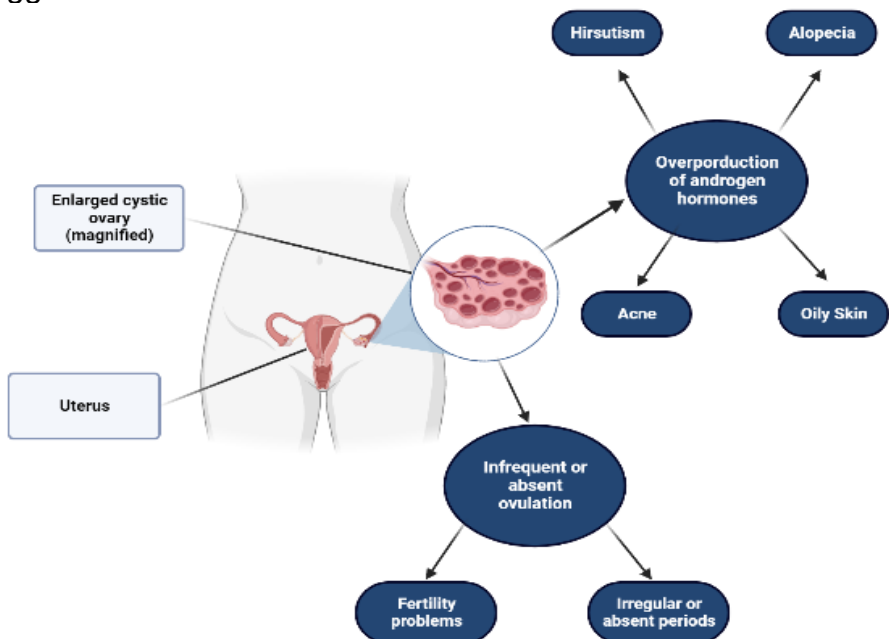
Scottish Paediatric Endocrine Group (SPEG)

Polycystic Ovary Syndrome – PCOS Information leaflet for young women

What is PCOS?

Polycystic ovary syndrome (PCOS) is a condition where there is an imbalance in the hormones that are made by the ovaries. These hormones normally control how the ovaries function, including how an egg matures and is released to cause a period. It is the imbalance in these hormones that leads to the symptoms that women with PCOS experience.

Normally each month in the ovary a follicle (a fluid filled cyst containing an egg) matures and releases an egg. If the egg does not link with a sperm to create an embryo the lining of the womb is shed, this is known as a period. The development of the follicle is controlled by hormones that are made in the pituitary gland, which is in the brain, called follicle stimulating hormone (FSH) and lutenising hormone (LH) as well as hormones made by the ovary: oestrogen, progesterone, and androgens. The balance of these hormones is disrupted in PCOS which means that sometimes follicles do not develop as normal and so an egg is not released.



How do I know if I have PCOS?

Many of the symptoms of PCOS can be normal in young women. For example, many women have irregular periods for a few years after their period has started. Spotty skin is also common. This means that if you have these symptoms, they may be part of normal development and not PCOS.

As many of the symptoms of PCOS can be part of normal development your doctor will need to take a detailed history, examination and do some tests to find out if you have PCOS. This might include:

- questions about your medical history and general health
- questions about your development, for example when you had your first period
- questions about your family history, for example if anyone in your family has PCOS
- physical examination: your height and weight, signs of PCOS such as excess hair
- blood tests: these are to measure your hormone levels to see if there is an imbalance of these

When the results of these tests are back your doctor will share these with you and discuss next steps in the management of your symptoms.

What does PCOS mean for me?

Women with PCOS can have a variety of different symptoms. Your doctor will discuss management options with you based on what your symptoms are. Some common problems and their management are discussed below.

Periods and fertility

Many women with PCOS have irregular periods or no period at all. This can lead the lining of the uterus (womb) to become too thick. Maintaining a healthy weight or increasing activity levels and losing weight if you are overweight can help to make periods more regular.

If your periods remain irregular your doctor may prescribe a tablet that will help you have a period.

The combined hormone pill (commonly abbreviated to COCP) can help regulate periods. It is commonly used by women as a contraceptive (to stop getting pregnant) but can also help regulate periods. This pill contains the hormones oestrogen and progesterone, and you would take it daily with regular breaks to allow you to have a period. There are some situations where this pill may not be appropriate, such as in those with a history of medical conditions such as: heart disease, vascular disease, blood clotting disorders, high blood pressure or migraine with aura and your doctor will carefully assess you for any of these contraindications before prescribing this pill. The COCP can also help reduce some of the androgen effects of PCOS that are discussed later in this leaflet.

If you are not able to take the COCP there is an alternative pill which only contains the hormone progesterone. You may be asked to take this pill every day or for a few days each month. Your doctor will agree a plan for how to take this pill if prescribing it to you. If taken intermittently as described this pill will not act as a contraceptive.

Women with PCOS who want to have a baby might need medical help with this to make sure that they release an egg. Managing problems

with having a baby is often straightforward in women with PCOS compared to women with other causes of reduced fertility.

It is important to understand that women with PCOS can still get pregnant without assistance and so it is important that if you are having sex you continue to use contraception.

Androgen effects

PCOS can lead to excess production of hormones called androgens. This can cause symptoms such as:

- Excess hair (hirsutism) on the face, chest and back
- Sweating
- Acne and oily skin
- Alopecia (hair loss from the head)

Many young women use cosmetic treatments to manage excess hair. This can include:

- Hair lightening agents
- Waxing
- Shaving
- Laser hair removal

Sometimes the above measures are not effective, and you may be prescribed a topical treatment for excess hair called Vaniqa cream. If prescribed this, you may not see an improvement in excess hair for six months.

The COCP can also help with some of these symptoms but is not suitable for all people with PCOS. It can take 6-12 months to see benefits from using the COCP on these symptoms.

Some women with PCOS do not respond normally to hormone in the body called insulin. This hormone is important for balancing blood glucose (sugar) levels. If your doctor thinks you may have problems

with this, they will offer a medication called Metformin. This medication helps your body to respond more normally to the insulin hormone.

There is also evidence that Metformin can help with weight loss and regulating periods.

Weight loss and healthy lifestyle

Maintaining a healthy weight is important for women with PCOS as it can reduce the risk of complications developing, such as type 2 diabetes, and help to improve some of the symptoms associated with PCOS, such as irregular periods. This means maintaining a healthy lifestyle by eating a balanced diet and exercising regularly is important.

If you are overweight your doctor can offer support with weight management by signposting you to resources that can help with this.

Wellbeing

The symptoms of PCOS can often be distressing. Many young women with the condition can feel sad or anxious and it is important to share these feelings with your friends, family, and doctor so that you can be supported.

Support and more information

You can always speak to a member of the endocrinology team for more information about PCOS. There are also some good online resources that you can access for more information:

[The British Society for Paediatric and Adolescent Gynaecology](#)

[Verity: The UK PCOS Charity](#)

[The National Polycystic Ovary Association](#)

If you require this leaflet in an alternative format, please email:

NSS.EqualityDiversity@nhs.scot or telephone **0131 275 6000**

For support with British sign language, please visit their [website](#)