Original Article

Journal of Global Public Health
Volume 1 Number 2, July–December 2024

Polycystic Ovarian Syndrome

Pratima Singh[1], Tarana Sharma[2], Ritu[3], S P Subashini[4]

How to cite this article:
Pratima Singh, Tarana Sharma, Ritu, et. al./Polycystic Ovarian Syndrome/Journal of Global Public Health. 2024; 1(2): 107–109.

Author's Affiliation: [1,3]B.Sc Nursing Student, [2]Nursing Tutor, [4]Dean, Galgotias School of Nursing, Greater Noida 201307, Uttar Pradesh, India.
Corresponding Author: Ritu, Nursing Tutor, Galgotias School of Nursing, Greater Noida 201307, Uttar Pradesh, India.
E-mail: ritu@galgotiasuniversity.edu.in
Received on: 25.09.2024
Accepted on: 28.10.2024

Abstract

PCOS (Polycystic Ovary Syndrome) is a type of hormonal disorder which cares small sites on the outer egges of the ovaries.

It's not cell defined in the medical language, but it have really combination of genetic and environmental factor there is not any proper case of PC OS but doctor suggest to impair their patient day-to-day Life it can be done by eating balanced diet, proper exercise etc. It requires regular diagnosis to check on PC it can be reduced by following doctor suggestion but there is no care for this.. it can last for year or can be life long

Keywords: Life it can be done by eating balanced diet; Proper exercise etc.

Introduction

PCOS is hormonal disorder women of reproductive age women who are suffering from pcos may have infected or prolonged maturation periods or excess male syndromic (andragen) levels.

Some science for these areare having excess facial hair acne website etc.

Ovaries mein developed numerous small collection of fluid (fallices) RPL to regular release egg.

Definition

Polycystic ovary syndrome (pcos) is a normal condition that common can get during their child bearing year it can affect your ability to you have child; stop periods on heard them to; Cause acne and unwanted body for facial hair.

Symptom

Sign and symptoms of PCOS after arm developed around the time of the first menstrual period during power rating sometime PCOS develop letter for example in response to substantial weight gain.

Sign and symptom of PCOS main very.

Irregular peiod

Irregular or infrequent prolonged menstruation

cycle are the most common sign for PCOS.

Excess and rager

Elevated levels of males hormones may result in physical science such excess real and body hairs and occasionally sensor acre and male pattern baldness.

Polycysticovaries

Your ovaries might be enlarged and content fallices that around the eggs as a result the average might fail to function regularly.

Heavy Bleeding

The uterine living build up for a longer period of time so the periods you do get can be heavier than normal.

Darkening of the skin

Dark pattern's of skin can form in body creases like those on the neck in the grain, and under the breast.

Causes

The exact cause of PCOS is non factor that might play a role include.

Excess insuline.

Insulin is a hormones produced in the the pancreas that allows cell to use sugar your body primary energy supply. Excess insulin might increase and endrogen production, causing difficult with regulation.

Law gradeinflammation

System is used to decreased by white blood cell production of substance to fight interaction.

Heredity

Research suggest that certain gen might be linked to PCOS.

Excess androgen

The ovaries abnormal height level of androgen resulting in in hirsutism and acne.

Problems faced by women suffering from PCOS

Eating disorders

Women with PCOS are reported to have a higher prevalence of both disordered eating behaviours and eating disorders compared to women without PCOS in the majority of, but not all, prior literature. In the limited research to date, studies use a variety of screening tools [e.g. Eating Attitudes, the Eating Disorder Examination Questionnaire with each having a different screening criterion. This lack of uniformity in assessments contributes to the reason as to why further clarification is required to better understand whether disordered eating or eating disorders are more prevalent in women with PCOS.

Fatigue and sleep

Fatigue has been reported by women with PCOS as a barrier to adopting lifestyle changes, which may be due to physiological or psychological origins. Fatigue is intrinsically linked with sleep, and women with PCOS have a higher prevalence of poor sleep quality and sleep disorders compared to women without. In particular, it is estimated that up to 35 % of womenw ith PCOS may have obstructive sleep apnoea, compared to 9-38 %in the general population. Women who are obese and of older age are more at risk of developing OSA.

Depression and depressive symptoms

Fatigue and sleep disturbances may also indicate depression, and are the most commonly reported depressive symptoms in women with PCOS. The prevalence of depression and depressive symptoms is higher in PCOS and PCOS is also associated with more severe symptoms of depression.[68] A recent meta-analysis of 57 studies reporting on 172,040 women reported that women with PCOS were at 2.79 greater odds for being clinically diagnosed with depression when compared to controls.

Treatments for PCOS

Many women need a combination of lifestyle changes and medications to treat PCOS. Your doctor will create a treatment plan for you tailored to treat your individual symptoms.

Menstrual problems

Birth control is the most common PCOS treatment for women who don't want to get pregnant. Hormonal birth control pills, a skin patch, vaginal ring, shots, or a hormonal IUD (intrauterine device)

- can help restore regular periods.

Extra weight

When a healthy diet and regular exercise aren't enough, medications can make losing weight easier. Different drugs work in different ways. Your doctor will prescribe the medication they think will be the most successful for you.

Results

With proper attention to risk stratification and surveillance, balanced diet and regular exercises is good for those women who were suffering from PCOS. Benefits of balanced diet and regular exercise is that they'll get relief from irregular periods and acnes, obesity etc.

Overall, there is no permanent cure for this but it requires regular diagnosis by which they can maintain their health and these little problems with doing day to day regular exercises and proper balanced diet.

Conclusion

PCOS is a common disorder of women that is associated with significant reproductive and morbidity as outlined here. Perception of this and preventative therapies are important for the health care of women. For PCOS, diet, exercise, and oral contraceptives are reasonable preventative therapies. Screening for hypertension, abnormal lipid profiles, insulin resistance, and reproductive disorders including cancer should be the main stay of care for women with PCOS.

References

1. PCOS: Symptoms and Awareness in Urban Pakistani Women Somia Gul*, SyedaAdeeba Zahid, Almas Ansari Faculty of Pharmacy, Jinnah University for Women, Karachi, 74600,Pakistan
2. Longitudinal weight gain in women identified With polycystic ovary syndrome: Results of an observational study in young women Authors: Helena J. Teede, Anju E. Joham, Eldho Paul, Lisa J. Moran, Deborah Loxton, Damien Jolley, CatherineLombard
3. Anxiety and depression in polycystic ovary syndrome: a comprehensive investigation Amanda A. Deeks, Ph.D, Melanie E. Gibson-Helm, M. Rep. Sci., Helena J.Teede.
4. Carmina E, Lobo RA. 1999 Do hyperandrogenic women with normal menses have PCOS? FertilSteril.71:319–322.
5. American Congress of Obstetricians and Gynecologists. ACOG Practice Bulletin No. : Polycystic Ovary Syndrome. Obstet Gynecol.2009;114(4):936–949.
6. Webber LJ, Stubbs S, Stark J, Trew GH, Margara R, Hardy K, Franks S. Formation and early development of follicles in the polycystic ovary. Lancet. 2003;362(9389):1017–1021
7. Polson DW, Adams J, Wadsworth J, Franks S. Polycystic ovaries–a common finding in normal women, Lancet, 1988, vol. 1 (pg.870-872).
8. Jancin B: Targeting primary care providers: endocrine society aims to raise PCOS awareness. Ob. Gyn News. 2000, 379.
9. Prospective Study of the Prevalence of the Polycystic Ovary Syndrome in Unselected Caucasian Women from Spain Miryam Asunción, Rosa M. Calvo, José L. San Millán, José Sancho,SergioAvila, and HéctorF. Escobar-Morreale ,Received: September 08, 1999Accepted: March 19, 2000First Published Online: April 25,2011
10. Solomon CG. 1999 The epidemiology of polycystic ovary syndrome. Prevalence and associated disease risks. Endocrinol Metab Clin North Am. 28:247– 11.Polson DW, Adams J, Wadsworth J, Franks S. 1988 Polycystic ovaries–a common finding in normal women. Lancet. 1:870–872. 12.Koivunen R, Laatikainen T, Tomas C, Huhtaniemi I,Tapanainen.