



Polycystic ovary syndrome & obesity

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Obesity is observed in more than 50 percent women in PCOS.

The body fat is usually deposited centrally (android obesity)

Weight loss improves endocrinal profile by decreasing plasma testosterone , androstenedione LH and fasting insulin levels .

Normalization menstrual cycle and ovulation could occur with modest weight loss which could amount to as little as 5 percent of initial weight over 6 month

Method of weight reduction include diet and life style modification pharmacological agents and bariatric surgery.

The efficacy and safety of long-term drug therapy for weight loss is very important in the management of obesity .

Orlistat is a gastric and pancreatic lipase inhibitor reducing absorption of dietary fats by inhibition of hydrolysis triglycerides

This result in an improvement of insulin sensitivity reduction of postprandial plasma nonesteretified fatty acids ,decreased visceral adipose tissue and stimulation of peptide -1 secretion in the lower small intestine

It's dose is 120 mg three time a day with food .

Improvement metabolic function

Insulin resistance is thought to play an important role in the pathogenesis in the subset of patients who have either increased BMI or hyperinsulinemia and or significant hyperandrogenism .

Medication in PCOS include metformin ,thiazolidinediones ,acarbose ,vitamin D and statins.

Conclusion

Obesity is associated with menstrual Disfunction decreased fertility and increased risk of miscarriages

Obesity decreases fecundity even in ovulatory women.

Obesity is associated with ab normal semen parameters and may adversely affect male fertility.

Life style changes involving a diet and exercise program are the first ilne treatment for obesity.

Adjunctive medical therapy for obesity is indicated when life style changes prove to be inadequate or fail.

When combined with a low-calorie diet, metformin may result in weight loss restore ovulation and improve fecundity in women with PCOS.



Bariatric surgery is more effective than other treatments for weight loss and improves comorbidities related to obesity in patients with a BMI greater than 40 kg/m²