

Polycystic Ovarian Syndrome Conference

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Identification of polycystic ovary syndrome (PCOS) with the newest diagnostic criteria: Problems, pitfalls, practical application to clinical care

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Since the syndrome was described in 1935, it has not been a simple process to diagnose PCOS. Many diagnostic criteria have been entertained over years. The newest criteria for the polycystic ovary (PCO) have the potential to reliably identify affected women. The Androgen Excess/PCOS society acknowledged a higher threshold follicle count in the PCO (2013). The higher threshold has prevented false positive PCO/PCOS diagnoses. However, even with improved diagnostic criteria, many women with PCOS are not identified because presentations vary widely at different ages and treatments mask symptoms of PCOS. For example, hormonal contraceptives may control and thereby mask symptoms of PCOS. A missed diagnosis is a missed opportunity to prevent infertility and gestational diabetes preconceptually and prevent diabetes, endometrial cancer and heart disease before and after the menopause transition. Early diagnosis of PCOS is integral to defining at risk individuals. The time of initial assessment is a significant opportunity to motivate better health and prevent disease. Revisiting the meaning of PCOS can reinforce healthy behaviors. In this presentation, clinical cases will illustrate common and unexpected histories from women who have been diagnosed with PCOS. Presenting complaints will be discussed in relationship to making a diagnosis and avoiding false positive diagnoses. The concept of latent and missed PCOS will be considered. Phenotypes of women diagnosed with the newest PCO diagnostic criteria will be reviewed and implications for management will be examined. Women with PCOS need a diagnosis to learn how and why to adopt health promoting strategies.

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Crafting multidisciplinary discussions around the healthcare needs of women with PCOS: A social work frame

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A ccording to the PCOS website and the Mayo Clinic, polycystic ovary syndrome (PCOS) impacts approximately 10% of all women and girls. Since it is the most common female endocrine disorder involving multiple organ systems within the body, the treatment of PCOS requires a more holistic discussion utilizing multidisciplinary team building education. Interestingly, PCOS impacts females across the life, making this syndrome a topic area of which medical social workers worldwide should be aware. Medical teams should be structured to deal with the various facets of PCOS so that women can be treated in a comprehensive manner, providers can more effectively share health information among team members and women's individual factors impacting PCOS can be identified. Understanding how the woman's family context and her home environment can be supportive in providing treatment parameters will enable a woman to make the most of her treatment options to maximize her quality of life. The medical education of social work students needs to be enhanced so that practicing social workers can become effective clinicians in medical settings that provide healthcare to women. This plenary session will explore how to begin this discussion so that healthcare providers can develop a more concrete understanding about creating interdisciplinary teams to discuss PCOS with clients and their families.

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