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## **Polycystic Ovarian Syndrome**

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## Polycystic ovary syndrome and anovulatory infertility, an evolving strategy

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The polycystic ovary syndrome (PCOS) accounts for approximately 80% of women with anovulatory infertility. Various factors influence ovarian function and fertility is adversely affected by an individual being overweight, the degree of hyperandrogenism and having elevated serum concentrations of LH. Interestingly, a Finnish study showed that while women with PCOS may take longer time to conceive but their lifetime fertility is not impaired and they may display sustained fertility with advancing age as compared with infertile eumenorrheic women. For those who present with anovulatory infertility, the principles of therapy are first to optimize health before commencing treatment and then induce regular unifollicular ovulation, while minimizing the risks of OHSS and multiple pregnancy. Weight loss, in those who are overweight, should improve the endocrine profile, the likelihood of ovulation and a healthy pregnancy and the response to ovulation induction therapy. Anovulation associated with PCOS has long been known to be amenable to surgical treatment, and a long-term cohort study has shown persistence of ovulation and normalization of serum androgens and SHBG up to 20 years after laparoscopic ovarian electrocautery in over 60% of subjects, particularly if they have a normal BMI. There is interesting new data on improved efficacy using aromatase inhibitors compared with CC. *In vitro* fertilization (IVF) may be required for women with anovulatory PCOS who do not conceive with ovulation induction or if there are other fertility factors such as tubal damage or male factors. The effect of basal serum LH and LH/FSH ratio on outcomes of *in vitro* fertilization-embryo transfer in patients with polycystic ovarian syndrome will be discussed.

## Biography

Radwan Faraj is a Consultant Obstetrician and Gynaecologist. He is the Lead of Infertility Unit in Rotherham/South Yorkshire and had a wide experience in the Management of Infertile Couples. He has a special interest in recurrent miscarriage, gynecology scanning, endometriosis and polycystic ovary syndrome. He was a Medical Director of the first IVF unit in Muscat and had the first IVF baby in the Sultanate of Oman. He is also Senior Clinical Lecturer (Honorary) at University of Sheffield.

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