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# POLYCYSTIC OVARIAN SYNDROME

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## Polycystic ovary syndrome (PCOS) at midlife: Manifestations and treatment

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Much has been written about manifestations and treatment options for women with PCOS during adolescence and reproductive life. Following childbirth, PCOS does not simply “go away”, and metabolic expressions of PCOS have important implications on health, longevity, and well-being. Hyperandrogenic manifestations of PCOS may persist in midlife causing or perpetuating cosmetic issues (hirsutism, seborrhea, and hair loss.) Chronic anovulation is a risk factor for endometrial hyperplasia and malignancy. Given that many women with PCOS are insulin resistant, at least 30% of PCOS women will develop type 2 diabetes. Women with PCOS are at greater risk for metabolic syndrome, hypertension, dyslipidemia, central obesity, and cardiovascular disease during the normal aging process. Android fat distribution, present in 50-70% of women with PCOS regardless of BMI, clearly exacerbates features of metabolic syndrome. In this lecture, the natural history and manifestations of PCOS in midlife will be explored, and traditional as well as novel therapeutic options for PCOS related metabolic disorders will be discussed. Surveillance for type 2 diabetes and dyslipidemia is particularly important in this special population. Prevention of endometrial hyperplasia and uterine bleeding disorders will be addressed.

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