

# AEPCOS QUARTERLY PUBLICATION LIST

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## APRIL—JUNE 2014

The AEPCOS Publication Committee chaired by Kathleen Hoeger (Rochester, USA) and formed also by Franca Fruzzetti (Pisa, Italy) and Carlos Moran (Mexico City, Mexico) has prepared the new issue of AEPCOS Quarterly Publication list.

As in past, the published papers have been grouped according their main focus. In addition, the Committee has selected two papers from this list that seemed particularly interesting and worthy to be commented.

*One of the many Kauai beaches*



Kauai, Kalapaki Beach

# AEPCOS QUARTERLY PUBLICATION LIST

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## HIGHLIGHTED PAPERS

- Kim JJ, Hwang KR, Choi YM, Moon SY, Chae SJ, Park CW, Kim HO, Choi DS, Kwon HC, Kang BM, Lee BS, Cho SH, Kim TJ, Kim T, Kim MJ, Park HY. Complete phenotypic and metabolic profiles of a large consecutive cohort of untreated Korean women with polycystic ovary syndrome. Fertil Steril. 2014 May;101(5):1424-30.
- Mes-Krowinkel MG, Louwers YV, Mulders AG, de Jong FH, Fauser BC, Laven JS. Influence of oral contraceptives on anthropomorphometric, endocrine, and metabolic profiles of anovulatory polycystic ovary syndrome patients. Fertil Steril. 2014 Jun;101(6):1757-65.

*Photo Caption*

Kauai Marriott Beach and Resort at Kalapaki Beach



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## HIGHLIGHTED PAPERS

1. Kim JJ, Hwang KR, Choi YM, Moon SY, Chae SJ, Park CW, Kim HO, Choi DS, Kwon HC, Kang BM, Lee BS, Cho SH, Kim TJ, Kim T, Kim MJ, Park HY. **Complete phenotypic and metabolic profiles of a large consecutive cohort of untreated Korean women with polycystic ovary syndrome.** Fertil Steril. 2014 May;101(5):1424-30.

The present study is interesting due to the fact that PCOS phenotypes of this specific Asian population allow the comparison with other populations where similar protocols have been performed.

The object of the study was to investigate the metabolic and phenotypic profiles of a cohort of untreated Korean women with PCOS. The study includes 865 PCOS women, with a range in age of 18-40 years. The authors used the Rotterdam ESHRE/ASRM diagnosis criteria for PCOS. They took into account the presence of irregular menstruation (IM), clinical and/or biochemical hyperandrogenism (HA) and polycystic ovary (PCO) morphology.

They found that the median menstrual cycle was 60 days, PCO morphology was observed in 96.5% of the patients, hirsutism was present in 33.9%, and biochemical hyperandrogenism in 47.4% of the patients. Dyslipidemia, prediabetes, diabetes and hypertension were present in 35.7%, 20.8%, 3.5% and 4%, respectively. Obesity (body mass index [BMI]  $\geq 25$  Kg/m<sup>2</sup> for Asians) was found in 20.1% of the patients. Of these data, it is important to note the low proportion of hirsutism with respect to other series that reported high proportion of hirsutism (75%); also noticeable is the low proportion of obesity in comparison to the higher percentages of overweight or obesity (45-80%) reported in other American studies (Arch Med Res 25: 311, 1994; J Clin Endocrinol Metab 89: 453, 2004).

The authors classified the PCOS patients by the presence of IM, HA and PCO, in four phenotypes with the following characteristics: 1) IM, HA and PCO (57.8%), 2) IM and HA (2.3%), 3) IM and PCO (38%), and 4) HA and PCO (0.7%). The most frequent group was the phenotype with all the components IM, HA and PCO, similar to data reported in other populations. However, it is surprising the high proportion of patients in the group with IM and PCO that differ to reports in other populations (0% to 23%) (Fertil Steril 88: 1389, 2007; Fertil Steril 94: 2197, 2010; J Obstet Gynaecol Res 37: 1020, 2011; Reprod Sci 18: 1230, 2011; Internat J Endocrinol 317241, 2012).

In addition, they found metabolic syndrome in 17.3% of the IM, HA and PCO phenotype and in the 8.8% of the IM and PCO phenotype; they did not report the prevalence in the other two phenotypes due to de scarce number of patients in those groups. Nonetheless, in the phenotypes reported, the proportion of metabolic syndrome is lower than that found in previous studies in different populations, in which percentages of 36-45% and 20-33% have been reported for those specific phenotypes, respectively (Fertil Steril 88: 1389, 2007; Reprod Sci 18: 1230, 2011).

In conclusion, this study shows the great heterogeneity in the PCOS presentation. This Asian population presents particular characteristics of its PCOS phenotypes emphasizing the ethnic differences in the clinical presentation of PCOS (CM).

*Photo Caption*

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## HIGHLIGHTED PAPERS

**Mes-Krowinkel MG, Louwers YV, Mulders AG, de Jong FH, Fauser BC, Laven JS. Influence of oral contraceptives on anthropomorphometric, endocrine, and metabolic profiles of anovulatory polycystic ovary syndrome patients. Fertil Steril. 2014 Jun;101(6):1757-65**

The use of oral contraceptives is a first line therapy in the management of PCOS. There are few long-term data on the impact of OCs on the phenotype and endocrine profile in PCOS.

This study includes a retrospective cohort using OCs in a timeframe of 18 years. The study included a total of 1,297 patients, of whom 827 were white. All PCOS patients diagnosed according to the Rotterdam 2003 consensus criteria were divided into three groups: current users, (n = 76; 6% of total), ever users (n = 1,018; 78%), and never users (n = 203; 16%). Ever users were subdivided based on the OCP-free interval.

Main outcomes were anthropomorphometric (blood pressure, cycle duration) and ultrasound (follicle count, mean ovarian volume) parameters, endocrine (SHBG, testosterone, free androgen index, antimüllerian hormone [AMH]) and lipid profiles.

Lipid profiles and measure of insulin resistance (HOMA-IR) did not differ between current, ever or never users of OCs. Current users of OCs had a milder PCOS phenotype in terms of hyperandrogenism, ovarian features than never users. SHBG was higher in users and remained elevated after discontinuation of OCs for up to 10 years.

It is possible that because ovarian follicle number and ovarian volume are reduced during OCP use, it may alter the ability to detect PCO morphology. In other studies of OCs and PCOS, normalization of the number of follicles seen on ultrasound has been observed. In the present study, the ovarian volume and mean follicle count were decreased in current users compared with never users. Despite the decrease in these markers, all patients still fulfilled the ultrasound criteria for PCOS. Thus, the presence of PCO morphology on ultrasound remains relatively stable during OCP use, which makes ultrasound criteria a reliable marker for PCOS diagnosis during OCP use.

As the study is retrospective neither the rationale for use of OCs, nor the type of progestin in the OC, is able to be determined and it is possible the study reflects intrinsic differences in those choosing to use oral contraceptive therapy but the authors adjusted the analysis for BMI, waist-hip ration, fertility treatments and previous pregnancy using multiple and logistic regression. The study is not a prospective or longitudinal study of OCs therefore cannot provide an estimation of ongoing impact of OC on metabolic and cardiovascular disease in PCOS.

However given the limitations of a retrospective cohort, the data are reassuring as to no increased risk of diabetes or cardiovascular risk factors with the ongoing use of OCs. Additionally the endocrine benefits of OCs appear to last several years after discontinuation of OC. (KH).



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## CONGENITAL ADRENAL HYPERPLASIA/ STEROIDOGENESIS

- Böttcher B, Dörr HG, Wildt L. Naltrexone as a diagnostic tool to distinguish between hyperandrogenemic and hypothalamic ovarian failure in females with congenital adrenal hyperplasia due to 21-hydroxylase-deficiency (CAH). *Eur J Obstet Gynecol Reprod Biol.* 2014 Jun 24. [Epub ahead of print]
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One of the many Kauai beaches





# AEPCOS QUARTERLY PUBLICATION LIST

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## ADOLESCENT PCOS

- Cengiz H, Ekin M, Dagdeviren H, Yildiz S, Kaya C, Kanawati A. Comparison of serum anti-Müllerian hormone levels in normal weight and overweight-obese adolescent patients with polycystic ovary syndrome. *Eur J Obstet Gynecol Reprod Biol.* 2014 Jun 28;180C:46-50.
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## PCOS-Steroidogenesis

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- Imbar T, Eisenberg I. Regulatory role of microRNAs in ovarian function. *Fertil Steril.* 2014 Jun;101(6):1524-30.

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## PCOS - DERMATOLOGY

- Clark CM, Rudolph J, Gerber DA, Glick S, Shalita AR, Lowenstein EJ. Dermatologic manifestation of hyperandrogenism: a retrospective chart review. *Skinmed*. 2014 Mar-Apr;12(2):84-8.
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- Zouboulis CC. Acne as a chronic systemic disease. *Clin Dermatol*. 2014 May-Jun;32(3):389-96.

## PCOS-ENDOCRINE DISRUPTERS

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Kauai, falls along Na Pali Coast trail

# AEPCOS QUARTERLY PUBLICATION LIST

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## PCOS: ANIMAL MODELS

- Ben-Shlomo I, Younis JS. Basic research in PCOS: are we reaching new frontiers? *Reprod Biomed Online*. 2014 Jun;28(6):669-83.
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