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#### PCOS: What They Should Be Telling You

**Gracie Leavitt** Utah State University, a02330558@aggies.usu.edu

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## PCOS FEATURES

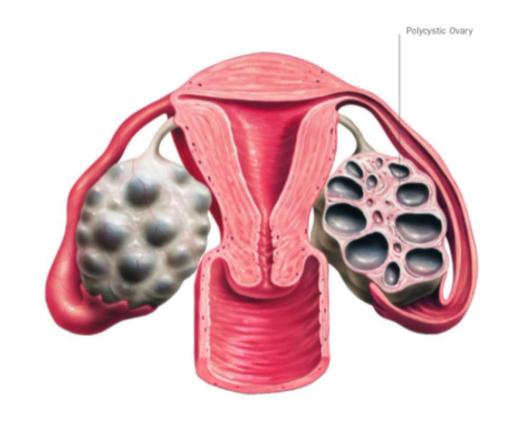
MENSTRUAL DYSFUNCTION

HYPERANDROGENISM

APPEARANCE OF POLYCYSTIC OVARIES

 $(\ K\ A\ L\ Y\ A\ N\ A\ R\ A\ M\ A\ N\ ,\quad P\ A\ L\ )$ 

Out of 14 Million US women, 70% have PCOS and are undiagnosed (Bassett)





# LONG TERM EFFECTS

- Type 2 Diabetes before 40
- Infertility
- Higher chance of miscarriage
- Obesity
- Cardiovascular disease
- Hyperandrogenism
- Insulin resistance
- Endometrial cancer
- Mental illness

(Tiwari et al)

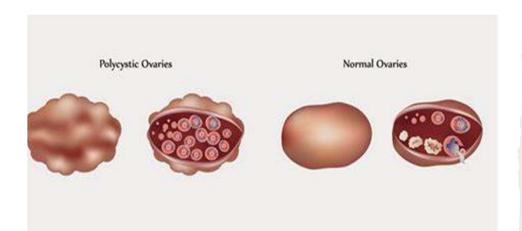
### WHAT HAS BEEN RESEARCHED

- Hyper exposure to androgens in utero can cause PCOS in the future
- PCOS is hereditary
- Dairy and gluten can increase insulin resistance, making PCOS worse
- Significant lifestyle changes can mitigate the symptoms
- Environmental influences
- Few treatments



(Raporport and Homburg) (Merkin et al) (Satviet)

## LACK OF RESEARCH



Discovered in 1935

Not getting pregnant, no problems

Gender Bias

Commonality of Symptoms

A lot is known about it, but not how to treat it



### GENDER BIAS

"Women have an even harder time getting a correct diagnosis for ailments that solely or mostly affect women"

- Knowledge Gap
  - far less is known medically about women's bodies and the ailments that afflict them than about men's
- Trust Gap
  - women's accounts of their symptoms are doubted or taken less seriously than men's
     (Miller)

#### SO WHAT?

RESEARCH NEEDS TO BE DONE

THESE WOMEN DESERVE ANSWERS AND TREATMENTS THAT WORK TO PROTECT THEIR HEALTH

DOCTORS NEED TO BE INFORMED SO THEY CAN GIVE THEIR PATIENTS ACCURATE INFORMATION

WOMEN NEED TO TAKE A STAND AND DEMAND ANSWERS

Physicians should "strive continually to improve medical knowledge and skill and should make available to their patients and colleagues the benefits of their professional attainments" (Riddick)



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