



Polycystic Ovarian Syndrome in Teens

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Commentary

Polycystic Ovary Syndrome (PCOS) is a condition that affects a woman's hormone levels. Which is a problem with hormones that affects women during their childbearing years. Women with PCOS produce higher-than-normal amounts of male hormones. This hormone imbalance causes their body to skip menstrual periods and cause infertility. PCOS also causes hair growth on the face and body, and baldness. And it can contribute to long-term health problems like diabetes and heart disease. Birth control pills and diabetes drugs given in a mixed composition can help fix the hormone imbalance and improve symptoms. PCOS affects a woman's ovaries, the reproductive organs that produce estrogen and progesterone hormones that regulate the menstrual cycle. The ovaries also produce a small amount of male hormones called androgens. The ovaries release eggs to be fertilized by a man's sperm. The release of an egg each month is called ovulation. Follicle-Stimulating Hormone (FSH) and Luteinizing Hormone (LH), which are produced in the pituitary gland, control ovulation. FSH stimulates the ovary to produce a follicle, a sac that contains an egg and then LH that is the Luteinizing hormone triggers the ovary to release a mature egg. PCOS three main features are: cysts in the ovaries, high levels of male hormones, irregular or skipped periods. A pelvic exam the doctor visually and manually inspects your reproductive organs for masses, growths or other abnormalities. Blood tests your blood may be analyzed to measure hormone levels. This testing can exclude possible causes of menstrual abnormalities or

androgen excess that mimics PCOS. You might have additional blood testing to measure glucose tolerance and fasting cholesterol and triglyceride levels. An ultrasound. Your doctor checks the appearance of your ovaries and the thickness of the lining of your uterus. A wand like device (transducer) is placed in your vagina (transvaginal ultrasound). The transducer emits sound waves that are translated into images on a computer screen. Many women need a combination of lifestyle changes and medications to treat PCOS. Relieve stress. Depression and anxiety are more common in women with PCOS than in women without this condition. Hormone imbalances may affect your moods – and the struggles of learning to cope with the challenges of PCOS can certainly play a role in mood swings. Relaxation to the rescue! Hormonal birth control pills, a skin patch, vaginal ring, shots, or a hormonal IUD (intrauterine device) can help restore regular periods. These birth control methods may also lower your chance of having endometrial cancer, in the inner lining of the uterus. Taking just a hormone called progestin could help get your periods back on track. It doesn't prevent pregnancies or treat unwanted hair growth and acne. But it can lower the chance of uterine cancer. Surgery: A procedure called ovarian drilling might make your ovaries work better when ovulation medications don't, but it's being done less often than it used to. The doctor makes a small cut in your belly and uses a tool called a laparoscope with a needle to poke your ovary and wreck a small part of it. The procedure changes your hormone levels and may make it easier for you to ovulate.