Polycystic Ovarian Syndrome: A Management Algorithm for Primary Care Providers
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Abstract

Polycystic ovarian syndrome (PCOS) is an endocrine disorder affecting many women in the United States who are also at risk for developing cardiovascular disease, metabolic syndrome, and insulin resistance. The purpose of this project was to evaluate treatment options for common symptoms of PCOS to develop a PCOS management algorithm based on scientific evidence. The algorithm will serve as a guide for primary care providers (PCPs) when managing the PCOS patient. Treatment options for hirsutism, obesity, amenorrhea, infertility, psychological aspects, and when to refer to other healthcare providers were addressed. PubMed and CINAHL databases were searched to identify studies evaluating oral contraceptives, metformin, clomiphene, complementary alternative therapy (CAT), mental health, diet, and exercise in treating symptoms of PCOS. Commentaries and opinions were not included in this review. The results of the review revealed many women go undiagnosed of PCOS until later in their adult life when they start experiencing infertility problems. The exact etiology of PCOS is unknown and it has been speculated that this chronic disease may start in the prepubescent years with symptoms appearing during puberty. This syndrome cannot be prevented, but its symptoms can be controlled and future health risks may then be reduced. Patients need to be educated and PCPs must consider individualizing their treatment regimen when treating PCOS symptoms. The Rotterdam Diagnostic Criteria, revised in 2003 is the current clinical guideline being used to diagnose PCOS in adult women. Currently, no consensus guidelines exist in diagnosing and managing PCOS in the pediatric population. The PCOS treatment algorithm is a stepping stone for larger projects and can be
expanded to include other PCOS symptoms and its treatments. Clearly, more investigation is needed to better understand and manage PCOS symptoms.

*Keywords:* polycystic ovary/ovarian syndrome, metabolic syndrome, insulin-sensitizing agents, oral contraceptive pill, metformin, complementary alternative therapy, infertility, amenorrhea, hirsutism, obesity