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#### RESEARCH ARTICLE

## Oral Contraceptive In Women With Polycystic Ovary Syndrome : Influence on Behavioural Changes

#### DR KUNJAN HITESHKUMAR SHAH<sup>1</sup>, DR BHAGWANDAS GUPTA<sup>2</sup>, DR RAKSHA SHARMA<sup>3</sup>

- 1. (MBBS, DNB OBS GYN) Departments of Obstetrics & Gynecology, NIMS University, JAIPUR (Rajasthan)
- 2. (MBBS, MS OBS GYN) Departments of Obstetrics & Gynecology, NIMS University, JAIPUR (Rajasthan)
- 3. (MBBS, DNB OBS GYN) Departments of Obstetrics & Gynecology, NIMS University, JAIPUR (Rajasthan)

# Manuscript Info Abstract

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#### Key words:

PCOS = polycystic ovary syndrome OC = oral contraceptive pills HRQOL= health-related quality of life

\*Corresponding Author

DR KUNJAN HITESHKUMAR SHAH Women with polycystic ovary syndrome (PCOS) have gynecologic, psychological, reproductive and metabolic co-morbidities that affects their entire lifespan. They have higher risk of depression. Limited data are available regarding effects of an oral contraceptive pills (OC) treatment on health-related quality of life (HRQOL).

#### AIM

We aimed to determine the impact of an (OC) treatment on health-related quality of life (HRQOL), depressive and anxiety symptoms in polycystic ovary syndrome (PCOS).

#### **METHOD**

Prospective observational study.

Study included 84 patients with PCOS without a previous psychiatric diagnosis. Category I included Oral contraceptive users and Category II included Non Contraceptive users. All participants evaluated after 6 months of treatment with EE/DRSP (3 mg/30 µg).

#### **RESULTS**

After treatment, regular menstrual cycles were attained and hirsutism was significantly improved in all patients (P< 0.05 for both). Percentage of women with behavioural score improvement after treatment with OC pills (CAT-1) was higher than non users of OC pills.

#### CONCLUSION

OC therapy in PCOS improves hirsutism and menstrual disturbances, along with HRQOL. This improvement is not associated with any change in the prevalence of depressive and anxiety symptoms.

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#### INTRODUCTION

Polycystic ovary syndrome (PCOS, STEIN LEVENTHAL SYNDROME) is associated with amenorrhea, hyperandrogenism and ovarian changes diagnosed by rottenberg criteria. It is associated with many psychological and metabolic disturbances. Women with polycystic ovary syndrome have gynecologic, reproductive, metabolic and lifetime long term co-morbidities that affect their entire lifespan.

Recently a higher risk of mood and anxiety disorders has been reported in women with PCOS. Women with PCOS have higher depression scores and a higher risk of depression independent of BMI.

PCOS women presents with —

- Anovulation / Amenorrhoea / Oligomenorrhoea
- Signs of hyperandrogenism
- Hirsutism, Acne
- Obesity
- Subfertility / infertility

These symptoms lead to a significant reduction in quality of life. For example, hirsutism has been shown to cause marked psychological stress and infertility issues can cause tensions within the family, altered self- perception, reduced self confidence and problems at work.

- Health- Related Quality of Life (HRQoL) is a multi- dimensional, dynamic concept that encompasses physical, psychological and social aspects that are associated with a particular disease or its treatment.
- Effective treatment of PCOS can reduce the burden of these symptoms as well as the associated psychological distress and thus improve health-related quality of life (HRQoL).

#### AIM

The aim of this study was to determine the impact of an oral contraceptive (OC) treatment on health-related quality of life (HRQOL), behavioural changes in polycystic ovary syndrome (PCOS).

#### MATERIAL AND METHOD

This was a Prospective observational study.

Subjects recruited in the Department of Obstetrics & Gynecology, NIMS Medical College, NIMS University, Jaipur from January 2015 to June 2015 .

Total number of subjects: 84

Inclusion criteria: PCOS without a previous psychiatric diagnosis.

Subdivision of included patients:

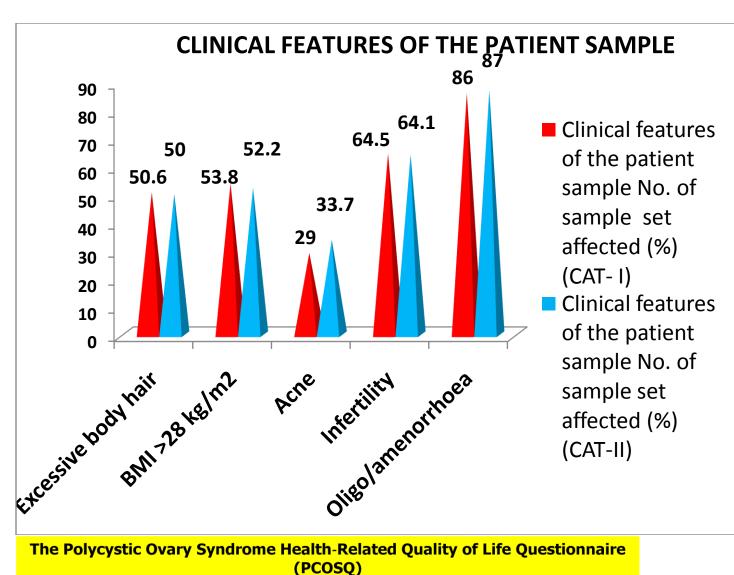
- Category-I: Oral contraceptive pill users in PCOS Patients.
- Category-II: Non Contraceptive users in PCOS Patients.
- All participants completed PCOS Questionnaires, Hospital Anxiety and Depression Scale and General Health Questionnaire. Serum androgens, fasting insulin, fasting and postload glucose values during an oral glucose tolerance test were measured.
- Changes in these variables and the scores of questionnaires were evaluated after 6 months of treatment with OC pill (Ethinyl estradiol / Drospirinone) (3 mg/30 μg).

### **RESULTS**

TABLE 1 DEMOGRAPHIC DATA OF SUBJECTS INCLUDED IN STUDY

	CATEGORY I	CATEGORY II
AGE	25 ±3.2	25 ±3.6
OCCUPATION - EMPLOYED	11	15
-UNEMPLOYED	38	20
LITRACY - ILLITRATE	10	06
- LITRATE	38	30
HABITAT - RURAL	06	08
-SUB URBAN	42	28
ECONOMIC STATUS- UPPER - MIDDLE	14 34	10 26
MARRIATAL STATUS – MARRIED	36	26
- SINGLE	12	10
DURATION OF PCOS SYMPTOMS LESS THAN 1 YEAR 1- 5 YEARS MORE THAN 5 YEARS	10 24 14	08 16 12

FIG. 1 CLINICAL FEATURES OF THE PATIENT SAMPLE



The Polycystic Ovary Syndrome Health-Related Quality of Life Questionnaire (PCOSQ)



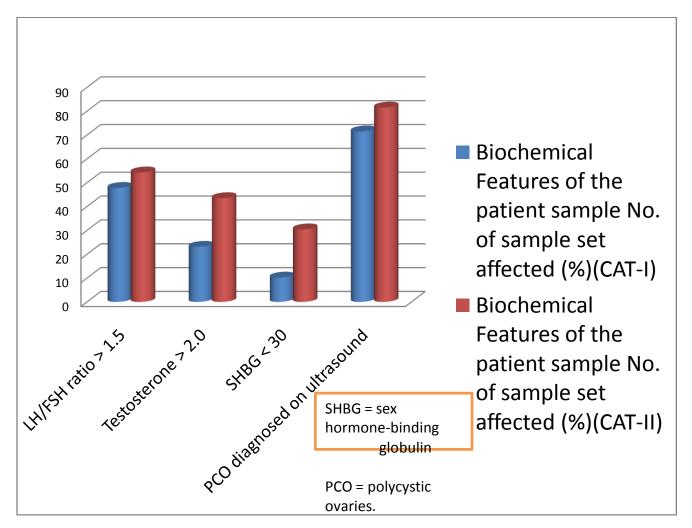
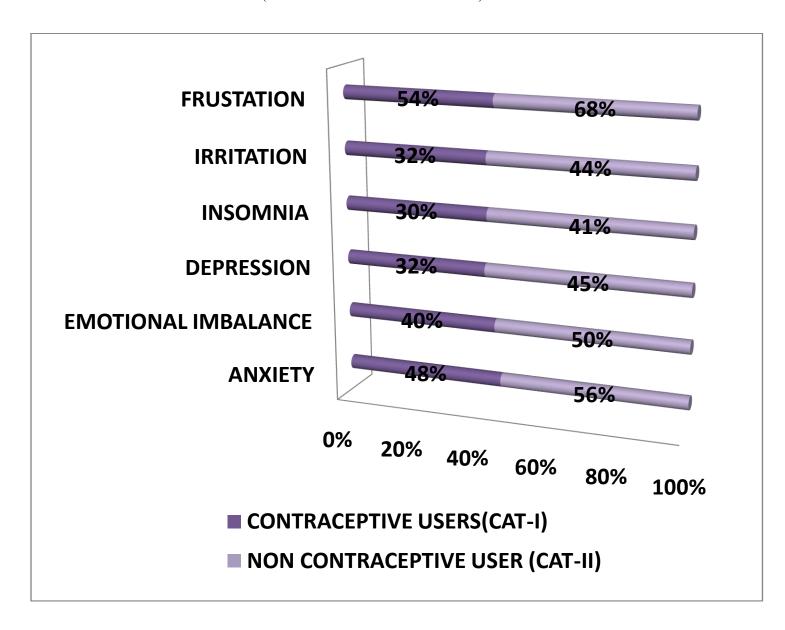


FIG 3 EFFECT OF ORAL CONTRACEPTIVES IN PCOS WOMEN (ON BEHAVIOURAL SYMPTOMPS)



After treatment, regular menstrual cycles were attained and hirsutism was significantly improved in all
patients. Hirsutism and emotional domains of the PCOS Questionnaires improved. Depression and anxiety
was also improved. However, Overall depression, anxiety mean scores and depression rates did not show a
significant change.

#### DISCUSSION

From above study it is clearly evident that OC pills play an important role in PCOS. Treatment with OC pills is beneficial in controlling menstrual irregularity, hirsutism and acne in PCOD. (P< 0.05 for both)

Emotional domains of the PCOSQ improved at 6 months. Depression was improved in depressive patients. Behavioural improvement was found in PCOS patients who used OC pills (CAT-I). However, Overall depression, anxiety mean scores and depression rates did not show a significant change. However our study is in consistent with the findings of Cinar N et al, 2012.

#### **CONCLUSION**

- Behavioural improvement was found in PCOS patients who used OC pills (CAT-I). Percentage of women with behavioural score improvement after treatment with OC pills is higher than non users of OC pills. However, Overall depression, anxiety mean scores and depression rates did not show a significant change.
- The main complaints of the patients of PCOS are hirsutism and irregular menses. Accordingly, menstrual and hirsutism problems are the most serious concerns followed by psychological and emotional problems based on the PCOS Questionnaires.

#### **SUMMARY**

• OC therapy in PCOS improves hirsutism and menstrual disturbances, along with HRQOL. This improvement is not associated with any change in the prevalence of depressive and anxiety symptoms.

#### WHAT IS KNOWN AND WHAT THIS ARTICLE ADDS

Limited data are available regarding the effects of an OC on HRQOL, and depressive and anxiety symptoms in PCOS. This study reports the effects of the OC Pills (ethinyl estradiol/drospirenone (EE/DRSP)) on HRQOL questionnaire for women with PCOS (PCOSQ), depressive and anxiety symptoms after 6 months of treatment.

#### LIMITATION

• The study is subject to the strengths and limitations of observational study design. A limitation of our study is the small sample size and lack of data related to possible confounding factors.

#### **REFERENCE**

• Aydin K, Cinar N, Aksoy DY, Bozdag G, Yildiz BO. Body composition in lean women with polycystic ovary syndrome. Contraception. 2013 Mar;87(3):358-62. doi: 10.1016/j.contraception.2012.07.005. Epub 2012 Aug 13.