

Midstate Medical Moment: Understanding PMOS

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Irregular periods, infertility, acne, weight gain, and mental health issues may seem unrelated, but they can all be symptoms of polyendocrine metabolic ovarian syndrome (PMOS).

The condition formerly known as PCOS has been renamed to reflect significant changes in how the condition is understood and how the diagnosis impacts the entire body.

Recognizing the symptoms and having a better understanding of what PMOS is can improve quality of life for many women.

Q: What PMOS symptoms should women be aware of, and when should they talk to their provider?

A: Often, the major symptom that leads women to get checked for PMOS is having trouble getting pregnant. Other symptoms are irregular periods or too few periods and elevated testosterone levels, which can lead to acne that just won't go away, and hair growth on the face, back, or upper chest. To be officially diagnosed with PMOS, you need two of these three symptoms: polycystic ovaries, irregular periods, and evidence of too much male hormone in the body.

The number one symptom that should lead women to come see me is irregular periods. Not just because they are incredibly uncomfortable and disrupt daily life, but it can also be dangerous. Women who have irregular or too few periods don't regulate the lining of the uterus in a normal way and are at risk for developing severe long-term issues.

Q: Why can PMOS be difficult to diagnose?

A: It can be so difficult to diagnose because we still really don't understand what causes PMOS. We know what the symptoms are, but we don't know how the condition develops, and there isn't a cure yet.

Also, PMOS symptoms like acne or irregular periods are common in lots of other medical problems, which can make it difficult to pinpoint the real issue. Another factor that contributes to the difficulty of diagnosis is that women aren't often aware that being overweight is a common result of having PMOS.

Q: What treatment options are available for women with PMOS?

A: Treatment should really focus on two things: management of the current problems and the long-term metabolic health effects that you want to prevent.

The best treatment we currently have is weight loss; even a modest reduction or getting back to a healthy/normal weight can trigger some of those hormones that help the woman ovulate, which is making an egg regularly, and that can relieve symptoms.

When it comes to medications, the first line of treatment is a birth control pill. Women aren't usually aware that a regular birth control pill can lower the amount of androgen that your body makes, which helps manage symptoms. There are also other medications to help block the effects of male hormones, different ways to help fertility, and other medications and devices that can be used to deliver hormones that prevent long-term issues.

Q: How can PMOS affect mental health and overall emotional well-being?

A: PMOS is associated with depression and anxiety, which makes it important that we identify women who have these symptoms and create their treatment plan to address those mental health problems. To help combat these mental health symptoms, I advise my patients to try to incorporate physical movements like walking into their daily routine; we often underappreciate the value of moving our bodies.

Q: What's your advice to women who may have PMOS?

A: My biggest advice is to continue advocating for themselves. It might take some time to get the diagnosis, but the most important thing is to find multiple providers that you feel heard; because PMOS is a metabolic syndrome, more than one provider is often needed for symptom treatment.

My final advice is to keep trying. It might take 4 or 5 appointments and multiple trials of medication, but just because one thing doesn't work for you doesn't mean that the next won't be a success.