

عنوان مقاله:

The relationship between lifestyle and prevalence of polycystic ovary syndrome

محل انتشار:

دوازدهمین کنفرانس بین المللی بهداشت، درمان و ارتقای سلامت (سال: 1401)

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خلاصه مقاله:

Polycystic ovary syndrome, which is caused by an imbalance in female sex hormones, leads to the formation of cysts in the antral follicles of the ovary. Here, a cyst is a fluid-filled sac containing an egg that must normally be drained for possible fertilization. The transformation of the ovum into a cyst, which is called a "functional cyst", prevents ovulation and also leads to a disturbance in the menstrual cycle and "amenorrhea" occurs. When multiple cysts form in ovarian follicles due to hormonal imbalance, it is known as PCOS. Due to water-retained cysts, some of which can be as large as 10 mm in diameter, the ovary increases in size by up to 10 cm. Absence of ovulation and menstrual cycle prevents fertilization and as a result pregnancy becomes difficult. Even if implantation occurs, the risk of miscarriage, stillbirth, and small-for-gestational-age fetus increases. Polycystic ovary syndrome can cause pregnancy-related complications such as gestational diabetes, pregnancy-induced high blood pressure. Normally, ovarian theca cells support the growing follicle and help produce mature eggs, but in PCOS patients, these cells overreact to the stimulatory effects of insulin, thus causing ovarian hypertrophy by multiplying. Insulin resistance enhances androgenic potential in theca cells and exacerbates PCOS. Also, high sensitivity of theca cells to gonadal steroid gonadotropin stimulation contributes to androgenism in PCOS. Impaired release of pulsatile gonadotropin-releasing hormone (GnRH) from the hypothalamus is the cause of PCOS. GnRH causes the pituitary gland to release the hormones (FSH) and (LH). In polycystic ovary syndrome, since these hormones are low, the egg either does not form or is not released from the follicle. Therefore, the cycle is disrupted and amenorrhea occurs, which can be of two types, primary or secondary amenorrhea. While primary amenorrhea is the inability to menstruate due to chromosomal or anatomical issues, secondary amenorrhea, also called hypothalamic amenorrhea, is characterized by the absence of menstrual cycles for 3 or more consecutive months. High levels of prolactin, a peptide hormone, block GnRH. Since the human body is a complex system and metabolites are functionally related, a disruption in one can affect the others. Decreased levels of a number of hormones (prolactin, anti-Müllerian hormone (AMH), cortisol, and androgens), neurotransmitters (dopamine), peptides, lipids, proteins, and glucose are associated with PCOS manifestations. Hyperprolactinemia ... causes hypogonadotropic hypogonadism characterized by amenorrhea, galactorrhea (ab

کلمات کلیدی:

Lifestyle, nutrition, physical activity, polycystic ovary syndrome

لینک ثابت مقاله در پایگاه سیویلیکا:

