# Awareness of Polycystic Ovarian Disease among Females of Age Group 18-30 Years

**Priyanka Shenoy.B\* , Dr. M. P Brundha\*\***

*\*BDS ll , Saveetha Dental College*

*\*\*Department of Pathology,  Saveetha Dental College , Chennai - 600 077*

**Abstract** :

**Aim** : The study is to create awareness of Polycystic Ovarian Disease(PCOD) among females of age group 18-30 years.

**Objective** : The objective of this study deals with the signs, causes, diagnosis, complications,  prevention and treatment of Polycystic Ovarian Disease(PCOD) among a selective population of females ranging from 18-30 years of age.

**Background** : Polycystic Ovarian Disease (PCOD) is the principal androgen-excess disorder which affects 5% to 10% of all women. Signs and symptoms include Infertility, Irregular ovulation or menstrual periods. Women with PCOD may have enlarged ovaries that contain small collections of fluid. The prolonged PCOD leads to diabetes, heart disease and endometrial cancer.

**Reason** : PCOD is a syndrome in which a woman's levels of the sex hormones estrogen and progesterone are out of balance. Nowadays Polycystic ovarian disease is commonly seen in woman due to lack of exercise and work which causes various problems in their body. So this is important to create an awareness among females about the disease.

**Keywords :** Awareness, Age group, Females, Infertility, Polycystic Ovarian Disease, Sex- hormones

## INTRODUCTION :

Polycystic Ovarian Disease (PCOD) is the most common endocrine condition in women of reproductive age, with prevalence rates of between 6-10%.(1) It has an incidence varying from 5% to 10%. It is observed in women of child-bearing age across all cultures, and ethnicities. A prospective study of Indian adolescents reported an incidence of 9.13% [2]. The common features of PCOD are irregular or anovulatory cycles with signs of hyperandrogenism like acne, seborrhoea, hirsutism, alopecia, frank virilization, and with polycystic ovaries on pelvic sonography. Recently, It has been associated with obesity, insulin-resistance (IR) and a risk of developing Type 2 diabetes mellitus (T2DM) [3]. It may be perceived as a cosmetic issue because of hirsutism and acne, or as a gynaecological concern that causes irregular menses and reduced fertility (1). Proper diagnosis and management of the patient is most important. Lifestyle changes and long term medications are essential for a successful outcome. Some of the investigations used for Polycystic ovarian disease are ultrasound scan, Laparoscopy, hormonal investigations and hysteroscopy. Ultrasound scan are widely used. Treatment is majorly directed at the immediate presenting complaint and the  treatment  of infertility  for overweight  women  should  always include weight  loss,  exercise, food control and skin care.

 The clinician should inquire about, and examine for, the presence "male-pattern" hair, i.e, hair located on the upper lip, chin, chest, lower abdomen, and inner aspects of the thighs. Oily skin and acne are subtle signs of androgenism, but hirsutism is the most common manifestation of the androgen component of polycystic ovarian syndrome. During the past decade, women with chronic anovulation and hyperandrogenism have been observed to have an increased prevalence of diabetes and increased risk factors for coronary heart disease (CHD) [4].

## MATERIALS AND METHODS :

*Research design :*  Descriptive in nature

*Sampling technique* : Stratified Random Sampling

*Data collective instrument* : Questionnaire

*Sample size* :  50 Respondents

*Method :* Questionnaires are distributed to 50  women belonging to age group 18-30 years in a  random population and the survey is done.

*Data analysis and conclusion :* To synchronise the data received through questionnaire and thereby analyse the awareness of Polycystic ovarian disease among females of age group

 18-30 years.

## DATA ANALYSIS AND INTERPRETATION :

1 .Have you heard of polycystic ovarian disease?

| Options | Response | No of respondents | Percentage |
|---------|----------|-------------------|------------|
| A | YES | 46 | 92 |
| B | NO | 4 | 8 |
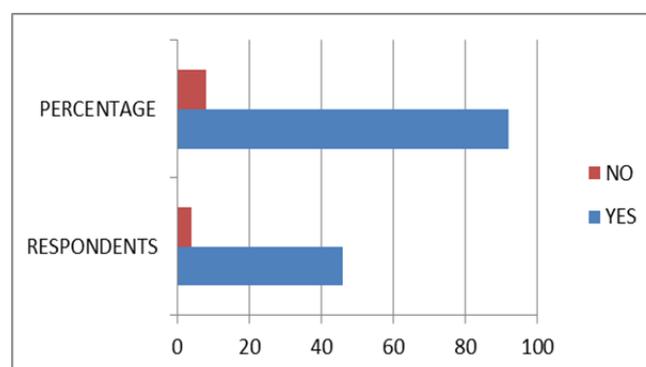
**SOURCES**

| Options | Source | No of respondents | Percentage |
|---|---|---|---|
| A | FRIEND | 21 | 45.6 |
| B | FAMILY | 5 | 10.8 |
| C | MEDIA | 4 | 8.6 |
| D | OTHER SOURCES | 16 | 34.7 |
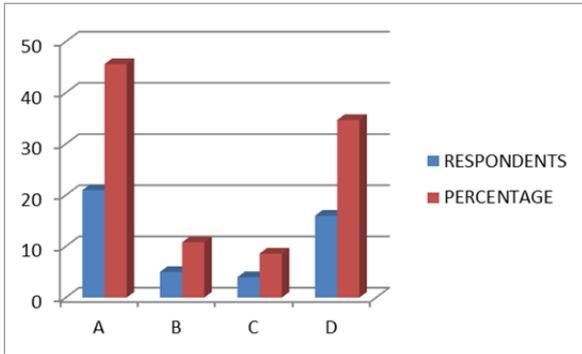


2. Do you know about the causes of PCOD?

| Options | Response | No of respondents | Percentage |
|---|---|---|---|
| A | YES | 42 | 84 |
| B | NO | 8 | 16 |
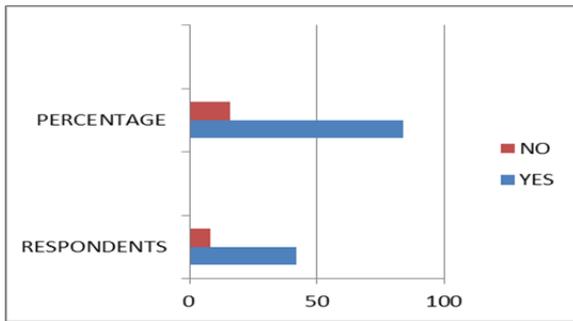


**CAUSES**

| Options | Causes | No of respondents | Percentage |
|---|---|---|---|
| A | GENETIC | 11 | 26.1 |
| B | OVER PRODUCTION OF HORMONES | 31 | 73.8 |
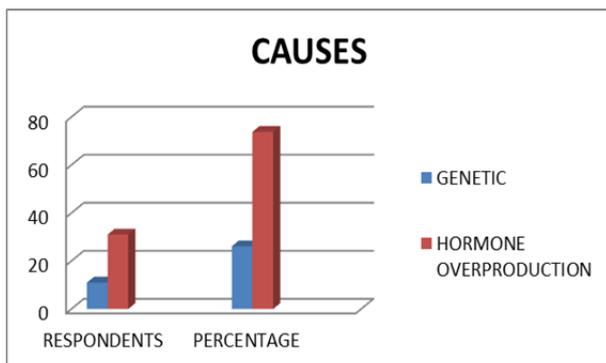


3. Do you know the symptoms of PCOD ?

| Options | Response | No of respondents | Percentage |
|---|---|---|---|
| A | YES | 42 | 84 |
| B | NO | 8 | 16 |
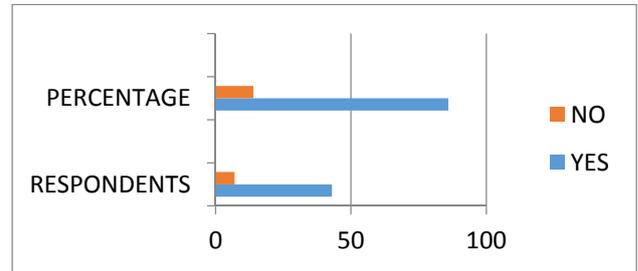


**SYMPTOMS**

| Options | Symptoms | No of respondents | Percentage |
|---|---|---|---|
| A | Menstrual problems | 39 | 92.8 |
| B | Hair loss | 22 | 52.3 |
| C | Acne | 17 | 40.4 |
| D | Obesity | 28 | 66.6 |
| E | Depression | 13 | 30.9 |
| F | Breathing problem | 10 | 23.8 |
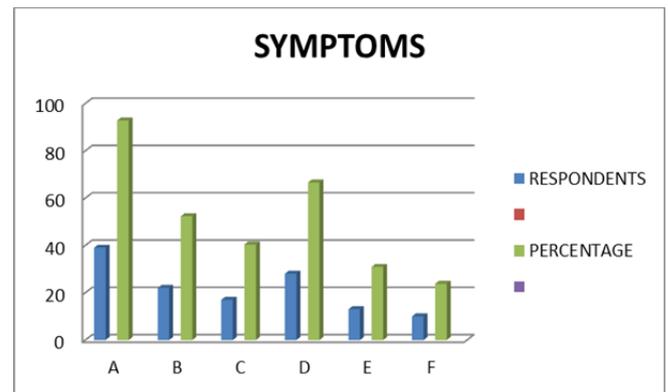


4. Do you know the diagnostic methods for PCOD ?

| Options | Response | No of respondents | Percentage |
|---|---|---|---|
| A | YES | 35 | 70 |
| B | NO | 15 | 30 |
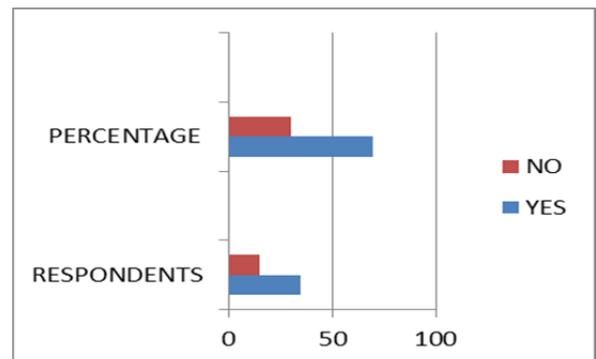
**DIAGNOSTIC METHODS**

| Options | Diagnostic method | No of respondents | Percentage |
|---|---|---|---|
| A | Hormonal investigation | 33 | 94.2 |
| B | Ultrasound scan | 25 | 71.4 |
| C | Laparoscopy | 9 | 25.7 |
| D | Hysteroscopy | 4 | 11.4 |
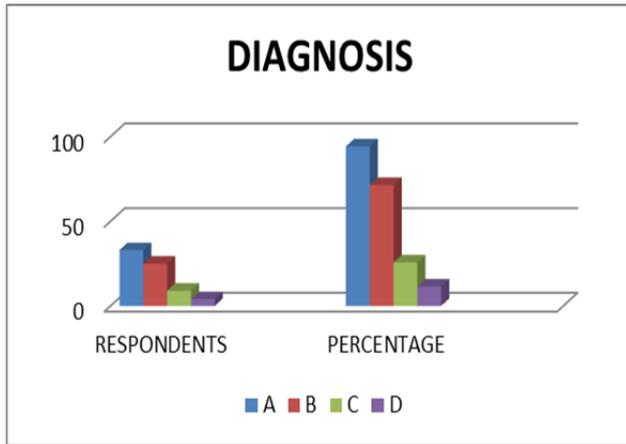


5. Do you know the treatment for PCOD ?

| Options | Response | No of respondents | Percentage |
|---|---|---|---|
| A | YES | 34 | 68 |
| B | NO | 16 | 32 |
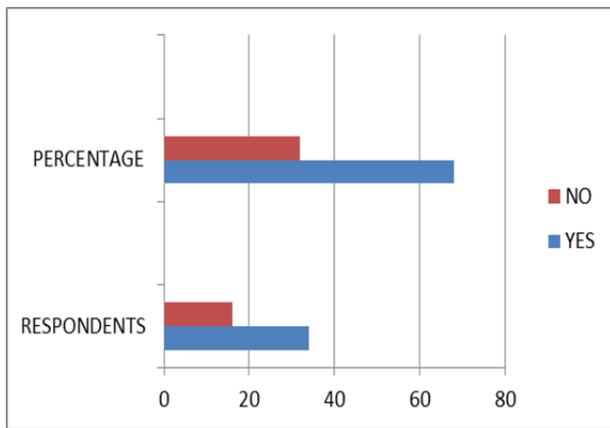


**TREATMENT**

| Options | Treatment | No of respondents | Percentage |
|---|---|---|---|
| A | Diet | 26 | 76.4 |
| B | exercise | 26 | 76.4 |
| C | Weight control | 22 | 64.7 |
| D | Skin care | 8 | 23.5 |
| E | Non smoking | 11 | 32.3 |
| F | Hormone therapy | 28 | 82.3 |
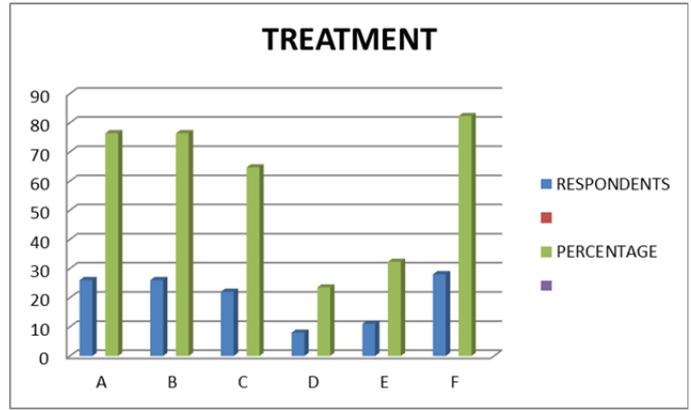


6. Do you know the way to prevent PCOD ?

| Options | Response | No of respondents | Percentage |
|---|---|---|---|
| A | YES | 37 | 74 |
| B | NO | 13 | 26 |
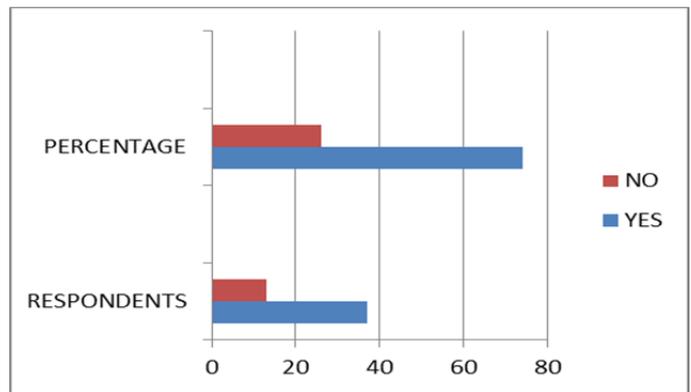


**PREVENTION**

| Options | Preventive measures | No of respondents | Percentage |
|---|---|---|---|
| A | Treating insulin resistance | 27 | 72.9 |
| B | Avoid smoking | 11 | 29.7 |
| C | Healthy exercise | 26 | 70.2 |
| D | Good diet | 26 | 70.2 |
| E | Weight control | 22 | 59.4 |
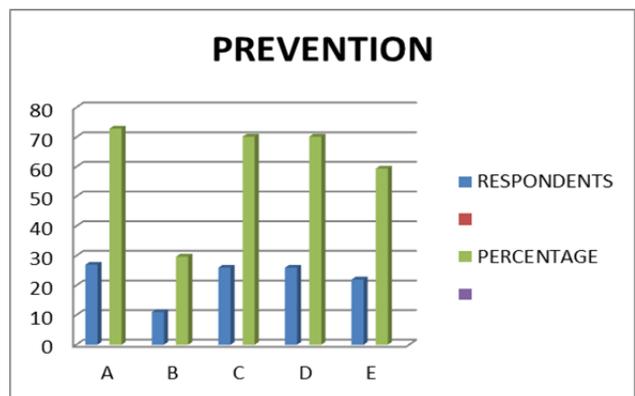
## DISCUSSION :

The awareness of Polycystic ovarian disease among females of reproductive age group was taken as a study and it was found that upto 78% of females have a knowledge of this disease. This study aimed at analysing the causes, symptoms, investigations, treatment and prevention of PCOD among females of age group 18-30 years.

Through this study, it was revealed that - 84% of the respondents reacted positively to the causes of PCOD and the overproduction of hormones (26.1%) was the major cause according to them.

- The questionnaire consisted symptom options such as menstrual problems, hair loss, acne, obesity, depression, and breathing problems. It is surveyed that more than 80% of the population have a knowledge of some of these symptoms with a high positive response given to the menstrual problem option.

- 70% of the respondents know the diagnostic methods of PCOD and the response was high for hormonal investigation (94.2%) followed by ultrasonic scan (71.4%).

- 68% of the females have knowledge on the treatment of PCOD with a high response given to hormone therapy (82.3%) followed by diet and exercise sharing 76.4%.

- 74% of the females knew about preventive measures of PCOD and the response was high for option treating insulin resistance (72.7%) followed by good diet and healthy excercise sharing 70.2%.

## CONCLUSION :

This survey aimed at creating awareness of PCOD among the females of 18-30 years age group. From the data collected and the obtained results it is understood that 78% of the respondents are aware of PCOD while 22% of them are unaware.

The awareness was found high for the symptoms and causes (84%). On the other hand, the least awareness was found for treatment of PCOD (68%).

In a world with unlimited number of people and limited resources, awareness is less about a lot of diseases and PCOD is one among them. Efforts to develop awareness is very important. It can be done in a variety of ways by conducting medical camps, through media and educational institutions and by making neighbours and relatives more aware of these issues.

Thus, it is important to create awareness about this disease to the population so that the future generation will be aware of PCOD and that they stay healthy and happy.

### REFERENCES :

[1] Tomlinson J et al. Raising awareness of Polycystic ovarian syndrome. 2013, 27,40, 35-39.

[2] Nina madnani, Kaleem khan, phurenu Chauhan, Girishparmar. Polycystic ovarian syndrome. Indian Journal of Dermatology, Venereology, and Leprology, May- June 2013, Vol 79, issue 3.

[3] Legro RS, Kunselman AR, Dodson WC, Dunaif A. Prevalence and predictors of risk for type 2 diabetes mellitus and impaired glucose tolerance in polycystic ovary syndrome: A prospective, controlled study in 254 affected women. J Clin Endocrinol Metab 1999;84:165-9.

[4] David S. Guzick.. Polycystic Ovary Syndrome. Clinical Gynecologic Series. January 2004, Vol. 103, No.1, Page. 181.