

POLYCYSTIC OVARY SYNDROME AND INSULIN RESISTANCE

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Polycystic Ovary Syndrome

★ Diagnostic Criteria:

Clinical features

Endocrine abnormalities

★ Sequelae

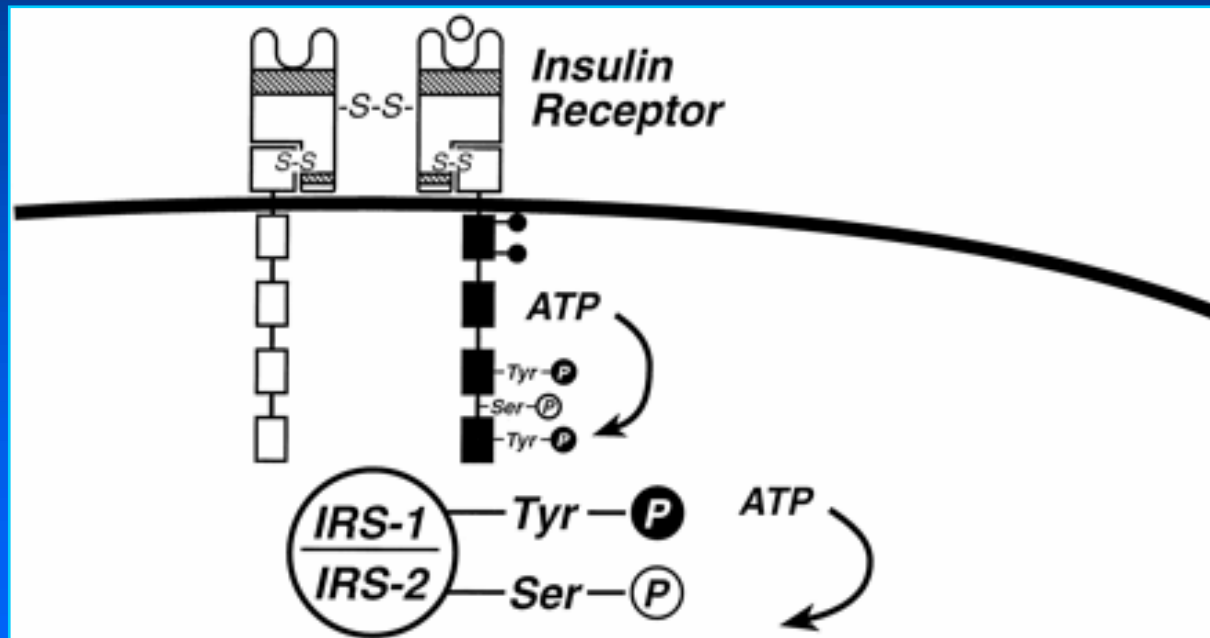
Polycystic Ovary Syndrome

Etiology

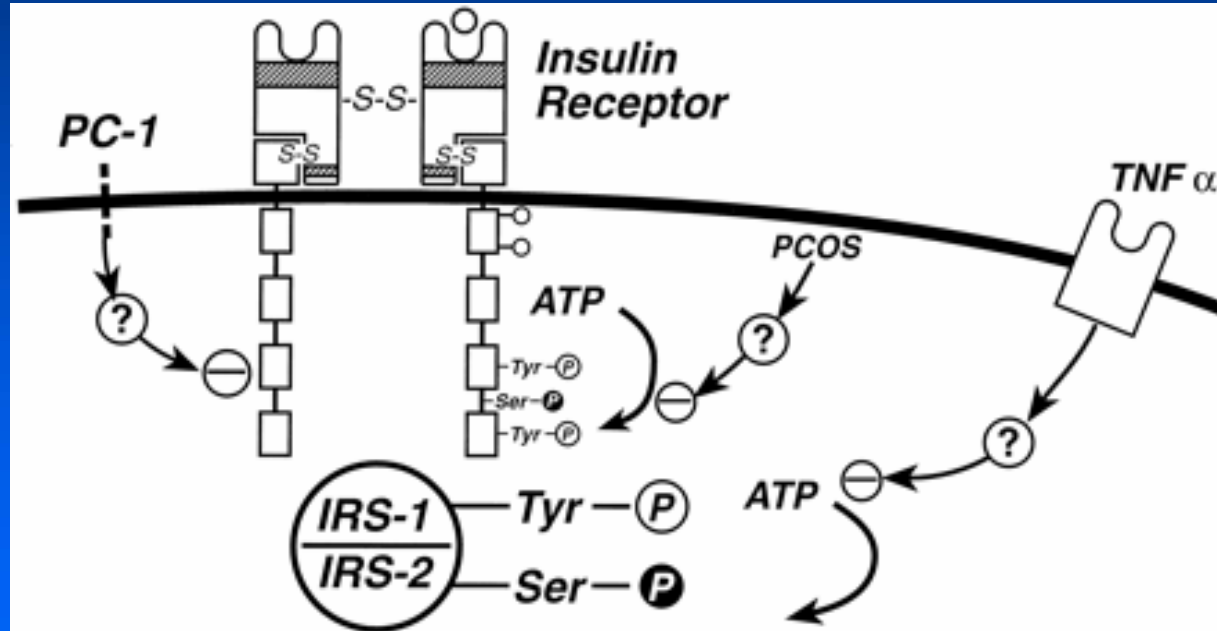
★ Androgens

★ Insulin

Insulin Receptor



Insulin Resistance Mechanisms



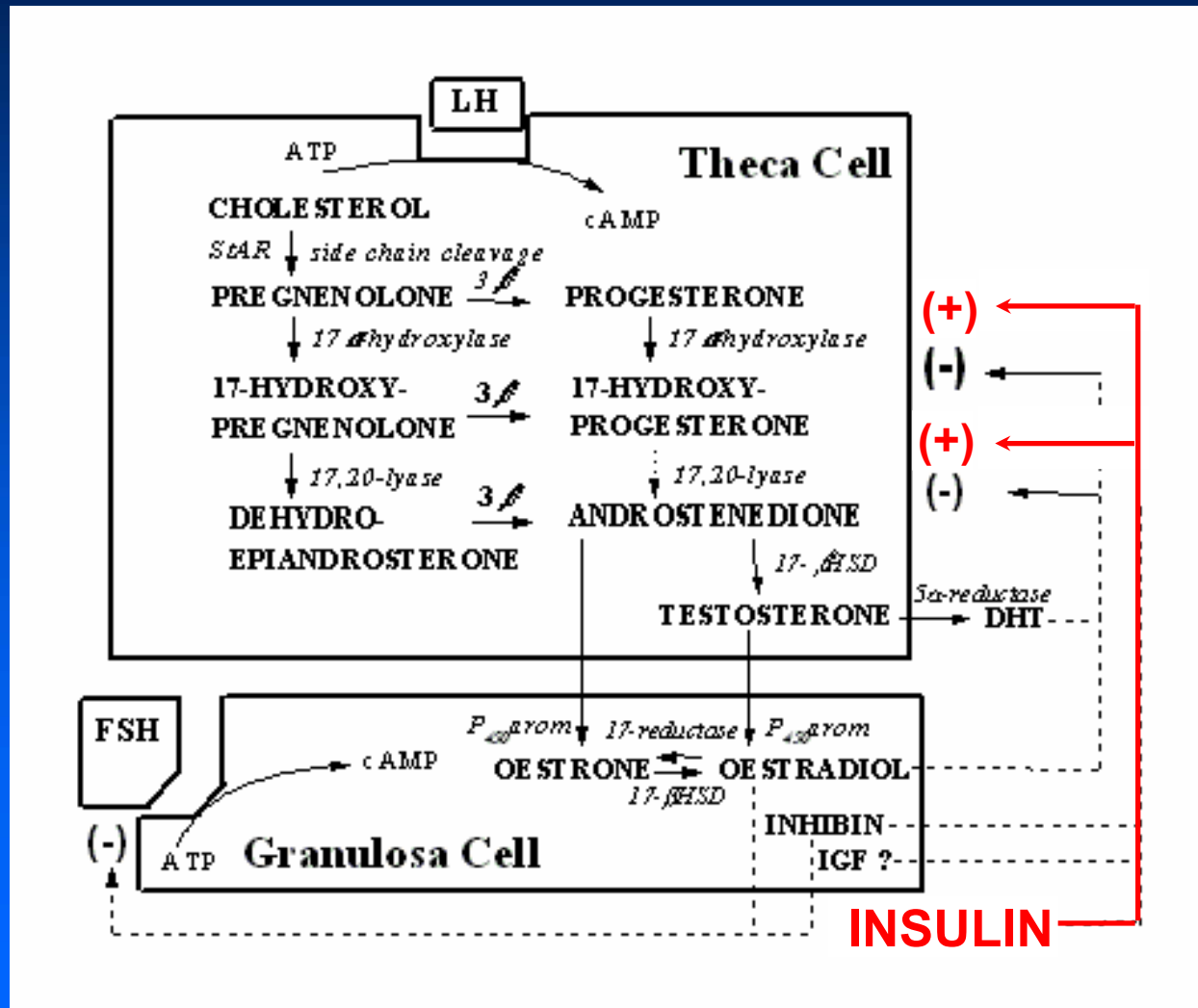
Insulin effects related to ovarian function

Effect

Organ

- Directly stimulates steroidogenesis → • Ovary
- Acts synergistically with LH/FSH to stimulate steroidogenesis → • Ovary
- Stimulates 17-hydroxylase → • Ovary
- Stimulates or inhibits aromatase → • Ovary, adipose tissue
- Up-regulates LH receptors → • Ovary
- Promotes ovarian growth and cyst formation synergistically with LH/hCG → • Ovary
- Up-regulates Type I IGF receptors or hybridinsulin/type I IGF receptors → • Ovary
- Inhibits IGFBP-1 production → • Ovary, liver
- Inhibits SHBG production → • Liver
- Potentiates the effect of GnRH on LH/FSH → • Hypothalamus/pituitary

Major Steroid Biosynthetic Pathways



Treatments for PCOS

* Oral Contraceptives

- Clomiphene
- Ovarian diathermy/laser tx
- ART

★ Weight loss

★ Insulin sensitizing agents

* Cyproterone acetate+ EE
Spironolactone

*

Insulin sensitizing agents

- * Biguanides (metformin)
- * Thiazolidinediones (troglitazone)

Numerous placebo-controlled trials

Similar beneficial effects

Role of Insulin in Central Nervous System

- * NIRKO mice : disruption of IR in neurons
- * Mice lacking IRS-2

Conclusions

1. PCOS is a metabolic and reproductive disease
2. Insulin resistance has a central role in its pathogenesis
3. Numerous defects in insulin signaling may be involved
4. Probably polygenic disease. Problem of the wide range of phenotypic expression

