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High Androgens? Consider PCOS and metabolic syndrome.

You may frequently find a comment on your salivary hormone reports suggesting that you follow up with blood glucose or insulin testing due to the patient's elevated testosterone and/or DHEA levels. The connection between androgen hormones and blood sugar regulation is one that is often missed, however it can provide a **very important** early indicator of dysfunction that may lead to more overt disease processes including PCOS, metabolic syndrome or frank diabetes!

Polycystic ovarian syndrome (PCOS) is an endocrine disorder. Most often, symptoms first appear in adolescence, around the start of menstruation. However, some women do not develop symptoms until their early to mid-20's. Although PCOS presents early in life, it persists through and beyond the reproductive years.

PCOS is estimated to affect between 5 and 10 percent of women of reproductive age, thus making it the most common hormonal disorder among women in this age group. It affects women of all races and nationalities.

No two women have exactly the same symptoms, but in general the women presenting to you may complain of:

- Hirsutism (excessive hair growth on the face, chest, abdomen, etc)
- Hair loss (a classic "male pattern")
- Acne
- Polycystic ovaries
- Obesity
- Infertility or reduced fertility

While your patients will likely come to your office because the physical complaints of PCOS are bothersome, you, the clinician, will need to monitor them as they are at an increased risk of developing:

- Insulin resistance
- Diabetes
- Lipid abnormalities
- Obstructive sleep apnea
- Cardiovascular disease
- Estrogen dependent cancers

Because there is such variability in the clinical presentation of PCOS, there is not universal agreement among health professionals on how to best define the syndrome. What is clear, however, is that women with the disorder do not ovulate in a predictable manner and that women with PCOS also produce excessive quantities of androgens (particularly testosterone). Additionally, impaired glucose tolerance is present in up to 50% of women with PCOS.

Metabolic Syndrome is a cluster of conditions — increased blood pressure, a high blood sugar level, excess body fat around the waist or abnormal cholesterol levels — that occur together, increasing your risk of heart disease, stroke and type II diabetes.

Metabolic syndrome is often linked to a condition called insulin resistance. Even if your levels aren't high enough to be considered diabetes, an elevated glucose level can still be harmful. In fact, some doctors refer to this condition as "prediabetes." Increased insulin raises your triglyceride and cholesterol levels. It also interferes

with how your kidneys work, leading to higher blood pressure. These combined effects of insulin resistance put you at risk of heart disease, stroke, type II diabetes and other conditions.

Early identification and diagnosis of PCOS and metabolic syndrome is essential in maintaining the health of your patients, but how can you predict these disorders? Elevated androgen hormones including testosterone and DHEA are indicative of insulin resistance. In fact, androgens may become elevated years before frank type II diabetes is present. Consider salivary hormone testing the best way to identify

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and monitor these early warning signs.
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For a more in depth discussion on PCOS, metabolic syndrome and elevated androgens, please join us on Wednesday, August 15th for a live webinar event: "What Elevated Androgens May be Telling You." [Click here to register today.](#)

References:

1. Karakas SE, Kyoungmi K, Duleba AJ. Determinants of impaired fasting glucose versus glucose intolerance in polycystic ovary syndrome. 2010. Diabetes Care. April; 33(4):887-93.

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The banner features the AARM logo (Association for the Advancement of Restorative Medicine) on the left. The main text on the right reads: "San Diego, California September 13 — 16, 2012 NEW! Preconference Intensives Sept. 13th". Below this, three intensive topics are listed: "Intensive 1: Physician Certification in Restorative Medicine PART A", "Intensive 2: Natural Hormone Replacement Therapy and Neuro-Endocrine Function Presented by: Jay H. Mead, MD, FASCP, Erin Lommen, ND and Robyn Kutka, ND", and "Intensive 3: Mindfulness & Mind-Body Therapy Professional Training". At the bottom, a blue bar contains the text "REGISTER ONLINE at www.RestorativeMedicine.org".

Join us at the lush Paradise Point Resort and Spa in beautiful San Diego Mission Bay. Use coupon code 'EXH150' to save \$150! To register today [click here.](#)

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