

# Bariatric Surgery May Resolve PCOS Symptoms

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Mid-Atlantic Bureau

BOSTON — Bariatric surgery may resolve symptoms of polycystic ovary syndrome in obese women with the condition, Dr. Héctor Escobar-Morreale reported at the annual meeting of the Androgen Excess Society.

"In some women, the syndrome is so driven by insulin resistance that it may resolve completely with weight loss," said

the endocrinologist, of the Hospital Ramón y Cajal in Madrid.

Among women seeking weight-loss advice at his endocrinology practice, Dr. Escobar-Morreale found a PCOS prevalence of 28%, more than five times the prevalence among lean women in Madrid. This discovery prompted him to examine the prevalence of the disorder among 36 obese women referred for bariatric surgery, and to also track the effect of surgically induced weight loss on their symptoms.

In this group of women, 17 (47%) were diagnosed with PCOS according to the 1990 National Institutes of Health criteria. Follow-up data at 1 year were available on 12 of them.

By 12 months, the women had lost an average of 41 kg and their hirsutism had resolved. Significant decreases were noted in their sex steroid levels: Total testosterone dropped from a mean of 69 ng/dL to 19 ng/dL, free testosterone from 1.6 to 0.3 ng/dL, androstenedione from 4.1 to

1.5 ng/dL, and dehydroepiandrosterone sulfate from 2,000 to 795 ng/dL.

Insulin sensitivity returned to normal and regular menstruation was restored. Among 10 women who were tested, all had hormonal evidence of ovulation.

Of course, Dr. Escobar-Morreale said, bariatric surgery is a serious proposal and is indicated only for morbidly obese patients who have repeatedly failed to lose weight through caloric restriction and lifestyle modification. In fact, he said, one of the PCOS patients died from postoperative surgical complications.

"Lifestyle modification should be attempted first," he said. "But we already know that only about 20% of patients achieve success, which we define as at least a 10% weight loss that's maintained for at least 1 year. That's not very good." ■

## Liver Disease May Accompany PCOS in Women

CHICAGO — Women with polycystic ovary syndrome can have fairly advanced liver disease, Dr. Tracy L. Setji of Duke University, Durham, N.C., and colleagues said in a poster presentation at the annual meeting of the American Association of Clinical Endocrinologists.

At a university endocrinology clinic, charts were reviewed retrospectively for 275 PCOS patients with oligomenorrhea and clinical or biochemical evidence of hyperandrogenism.

Of these, 200 had no other causes of irregular menses and drank less than one alcoholic beverage daily. Aspartate aminotransferase and alanine aminotransferase levels greater than 60 U/L were seen in 15%. Patients with elevated aminotransferase levels had lower median HDL cholesterol levels (41 mg/dL vs. 50 mg/dL), higher median triglycerides (174 mg/dL vs. 129 mg/dL), and higher median fasting insulin (21  $\mu$ IU/mL vs. 12  $\mu$ IU/mL), compared with patients without elevated aminotransferase levels.

Liver biopsies were performed in six women with persistently high aminotransferase levels, and they were diagnosed with nonalcoholic steatohepatitis (NASH) with fibrosis. These patients had lower median HDL levels and higher median triglyceride and fasting insulin levels than did patients who did not undergo biopsy.

The study was limited by the self-reporting of alcohol consumption.

Additionally, normal liver enzyme values do not exclude the presence of liver disease, including NASH, the investigators said.

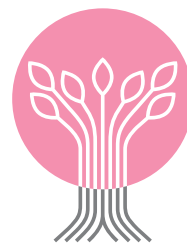
"The young age of many women with polycystic ovary syndrome and the relatively advanced stage of NASH seen on the biopsies of our patients suggest the possibility of significant risk for long-term complications from liver disease," the authors concluded.

—Joyce Frieden

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