



How is PCOS Diagnosis Done?

PCOS is a difficult disorder to diagnose because there are so many symptoms, and you don't have to have them all to be diagnosed. Several women search for the solution to the question, of how to cure PCOS permanently? Only a small percentage of women have the same range of traits, and symptoms might alter over time.

You must fulfil two of the following criteria to be properly diagnosed with **Polycystic Ovary Syndrome**:

- Periods that are irregular or absent
- Without another medical reason, biological or physical indications of hyperandrogenism (high androgen level).
- An ultrasound examination reveals a string of tiny follicles (cysts).

Even though there is no treatment for PCOS, the good news is that it can be managed. We know that our way of life (what we eat and how active we are) can exacerbate or alleviate PCOS symptoms. There are various ways to handle your lifestyle and enhance all elements of PCOS with the help of your doctor and other healthcare practitioners.

PCOS Diagnosis and Tests

- **Checkup and Medical History**

Your doctor will evaluate your physical symptoms, weight, and BMI as part of the diagnosis (body mass index).

Your doctor will perform a full physical and pelvic exam, looking for physical symptoms of high androgen levels, such as testosterone-induced hair growth (specifically on the face, lower abdomen, back, chest, and nipples).

- **Tests in the Lab**

Blood tests are almost certainly going to be done. Other sex hormones, such as follicle-stimulating hormone (FSH), luteinizing hormone (LH), and prolactin, should be tested in

addition to testosterone. Other related disorders, such as excessive cholesterol and insulin resistance, may be tested for by your healthcare professional.

- **Ultrasound of the Vaginal Canal**

To rule out PCOS, a transvaginal ultrasound may be used for [PCOS diagnosis](#). A probe is inserted into the vaginal canal during a transvaginal ultrasound, allowing the health professional to check the reproductive organs and look for abnormalities. The endometrium's thickness can be measured.

These follicles are frequently referred to as cysts. Many women with cystic-appearing ovaries do not have signs of hyperandrogenism, and many women with PCOS do not have cystic ovaries.

- **Biopsy of the Endometrium**

An endometrial biopsy can be done to examine if your endometrial tissue is in the right phase or to check for endometrial cancer, which is more common in PCOS patients. The frequency of missed periods and the duration between them raise the risk of endometrial cancer.

The biopsy can be done in the office of your healthcare practitioner and is typically painless, however, minor cramping may occur during the operation. A tiny catheter is inserted through the cervix and into the uterus to extract a little piece of tissue from your uterus during the biopsy. This tissue is then evaluated for cancer cells in the context of your cycle.

Because PCOS is known to be underdiagnosed or misdiagnosed, it can take time to get a diagnosis. If your diagnosis isn't obvious, get a second opinion. While everything may be overwhelming, keep in mind that you are not alone.

PCOS is the most common endocrine illness among women of reproductive age, thus many women have experienced it or are experiencing it now. Make contact with a support group or people that care about you. The best strategies to manage your disease are to listen to your doctor's instructions and educate yourself about it.