BOOK REVIEW


This is a comprehensive book which covers all topics related to polycystic ovarian syndrome. There is an introduction including the history and the origin of polycystic ovarian syndrome, giving a coverage of history and the early days of diagnosis. They include definitions of the polycystic ovary syndrome.

The authors describe the Rotterdam ESHRE-ASRM international consensus in 2003 which specifies that the presence of two of the following criteria indicates the presence of polycystic ovarian disease. These include oligomenorrhea and anovulation, clinical or biochemical evidence of hyperandrogenism and polycystic ovaries on ultrasound examination.

The authors stressed that fact that there is a wide discrepancy in the prevalence of polycystic ovarian disease in different parts of the world. Different diagnostic criteria and several associated metabolic syndromes are described. The importance of diagnosing polycystic ovarian disease and the ultrasonographic appearance of polycystic ovarian disease are all well described.

There is a chapter on genetic basis of polycystic ovarian disease and the familial association of the disease. Another chapter for the pathophysiology and consequence of PCO.

There is a stress on impaired glucose metabolism and insulin resistance associated with the syndrome and its relation to diabetes, obesity and hyperandrogenemia, dyslipidemia and the risk of cardiovascular disease.

A large part of the book is devoted to infertility, the pathogenesis of infertility and early pregnancy loss associated with polycystic ovarian disease. One chapter is devoted for the treatment of polycystic ovarian disease in adolescence before marriage and before infertility becomes a problem. The authors stressed the importance of weight loss for the obese and of treatment by antiandrogens. However, the use of insulin sensitizers in adolescents with PCO is still debatable.

The book discussed induction of ovulation by clomiphene citrate and gonadotrophins and stress on the value of chronic low dose step-up protocol. The authors also discussed the value of metformin in treatment and discussed all the studies which suggested that it is useful alone or in combination with clomiphene citrate for ovulation induction. However, it seems that this book was published before the publication of two major randomized studies which showed that metformin does not improve pregnancy rate in the treatment of polycystic ovarian disease.

The role of aromatase inhibitors in ovulation induction was discussed and compared with the value of tamoxifen and clomiphene citrate.

The strategies of prevention of ovarian hyperstimulation syndrome in patients with polycystic ovarian disease, which are known to be vulnerable to this complication, are well illustrated.

Oocyte quality in patients with polycystic ovary is also discussed.

There is a chapter devoted to surgical treatment of polycystic ovarian disease and the pros and cons of ovarian drilling. Reproductive outcome following ovarian drilling was discussed. Pregnancy in patients with polycystic ovarian disease was also discussed.

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