

Sudan University of Science and  
Technology College of Graduate Studies



## **Study of Polycystic Ovarian Syndromeby Using Ultrasound**

دراسة حالة تكيس المبايض باستخدام الموجات فوق الصوتية

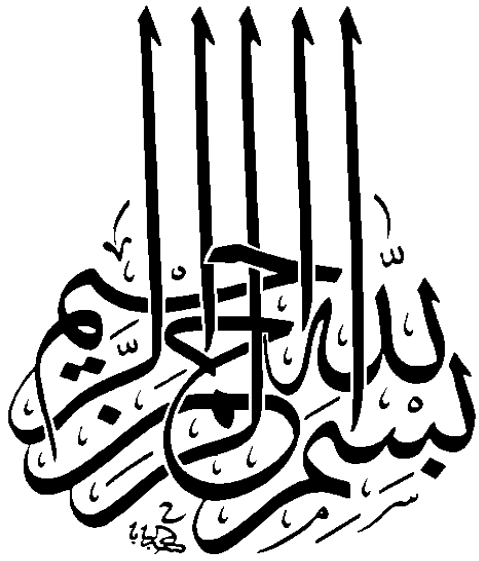
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# آية

قال تعالى:

وَقُلْ اَعْمَلُوا  
عَمَلَكُمْ  
وَالْمُؤْمِنُونَ  
فَسِيرُوا  
وَرَسُولُهُ

صدق الله العظيم

سورة التوبة آية 105

# **Dedication**

**To My Parents Hope AlmightyGod"S**

**Mercy OverwhelmingBoth**

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## Abstract

Polycystic ovarian syndrome (PCOS) IS merely a reproductive and endocrinological disorders affecting 5% to 10% of the female population in their reproductive years.&characterized by multiple cysts in the ovaries which can impair ovulation and therefore fertility. One common feature of the condition is raised levels of the ‘male’ hormone *testosterone*, which can lead to ‘masculinising’ side effects such as ‘hirsutism’ (abnormal, excessive hair growth), scalp hair loss, and acne thatcan cause severe depression to the woman Another key underlying biochemical feature of PCOS is raised levels of *insulin*, usually related to ‘*insulin resistance*’ (impaired functioning of insulin ).

It is a harbinger of a lifelong condition that can lead to serious sequelae such as diabetes mellitus, hyperlipidemia, endometrial hyperplasia/carcinoma, central obesity, sleep apnea& depression. The main objective of this study is to achieve accurate diagnosis of PCOS using the prober materials and methods such as labrotary biochemical testing &hormonal analysis using many radioimmunoassays, especially platform assays, for androgens are decidedly unsatisfactory which bypassed by using liquid chromatography-tandem mass spectrometry (LM/MS-MS), the modern gold standard for all steroid hormone measurement, particularly in women.and by using transvaginalultrasoundwhich is superior to the abdominal one.

This study done in Saqr Hospital –RasAlKhaima- United Arab Emirates,it was a retrospective study done on a thirty three women

of different nationalities, age group & different marital status presented with different clinical pictures.

The most common complaints that has been noticed in the study group is the period irregularity in a percentage of 63 followed by a complaint of hirsutism/acne which is 42% and a few presented with infertility 6.1%. Followed by obesity and rapid weight gain. All these cases underwent hormonal assays using the sensitive radioimmunoassay –the liquid chromatography-tandem mass spectrometry (LM/MS-MS) which confirm the diagnosis of PCOS excluding only two cases one with primary hyperprolactinaemia and the other was a hypothyroidism.

More efforts has been made to reach a proper & accurate diagnosis to achieve cure & to avoid long term complications of PCOS by

subjecting all suspected cases to abdominal ultrasound and repeat it by using the transvaginal one wherever possible as there was some unmarried cases where only abdominal ultrasound can be done. The study reveals eighteen missed cases when TVS done after the abdominal ultrasound. 81% of cases, the Diagnosis of PCOS were established by using TVS Therefore; TVS should be done whenever possible to all suspected cases to attain proper diagnosis of PCOS supported by other confirmatory criteria such as liquid chromatography - tandem mass spectrometry (LM/MS-MS).

## مستخلص الدراسة

تكيس المبايض عبارة عن اضطرابات هرمونية تتعكس سلباً على خصوبة المرأة وتصيب حوالي 5-10% من السيدات بالعالم أثناء فترة خصوبتهن. وتتميز بوجود العديد من الأكياس بالمبيضين الشيء الذي يعيق التبويض والخصوبة ومما يميز هذه الحالة أيضاً وجود ارتفاع في نسبة الهرمونات الذكورية عند المريضة والذي يؤدي إلى ظهور بعض المظاهر الذكورية كنمو شعر الذقن وشعر بالبطن وكذلك ظهور بثور بالوجه الشيء الذي يصيب السيدة بالإحباط. وتكون أيضاً عرضة لحدوث مرض السكري نسبة لوجود مقاومة لعمل هرمون الأنسولين وارتفاع نسبة الدهون والسمنة والإصابة بأمراض القلب وكذلك سرطان الرحم ولتفادي كل هذه المضاعفات كان الهدف من عمل هذه الدراسة والتي تهدف للتشخيص الدقيق والسليم للحالة وذلك بعمل الفحوصات اللازمة واستخدام كل المعدات والوسائل الدقيقة لذلك كعمل فحص الهرمونات الذكورية والهرمونات الأخرى المتعلقة أو المسببة للحالة وعمل الموجات الصوتية المهبليّة دون البطنية وذلك لدقتها في التشخيص. حيث أن الموجات الصوتية المهبليّة شخّصت كل الحالات التي كان بالإمكان عمل الموجات الصوتية المهبليّة لها بينما تلك البطنية لم تشخّص ثمانية عشرة حالة. هذه الدراسة كانت لخمس وثلاثون حالة عدا حالتين أَسْتَنْتِيت فالتشخيص نم عن وجود حالة ارتفاع هرمون الحليب والأخرى هبوط بهرمون الغدة الدرقية وكانت بقيت الحالات لسيدات من مختلف الجنسيات والأعمار والحالة الاجتماعية جئن بمختلف الشكاوى وكانت شكوتهن من اضطرابات الدورة الشهرية أكثرهن بنسبة 63% حدوثاً تليها نمو الشعر بالوجه ووجود البثور بنسبة 42% وقد تم تشخيص الحالة مستعملين طرق فحص الهرمونات الحديثة والدقيقة (LM/MS-MS) وكذلك باستعمال الموجات الصوتية المهبليّة ما امكن والتي ساهمت في تشخيص 81% من الحالات لذلك كانت التوصية باستخدام LM/MS MS والموجات الصوتية المهبليّة.

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## LIST ABBREVIATIONS

**PCOS : Polycystic Ovarian Syndrome**

**TVS: Transvaginal ultrasound**

**LM/MS-MS: Liquid chromatography-TandomSpectrometry**

**TSH: Thyroid stimulating hormone**

**LH:Liutenizing hormone**

**FSH: Follicular stimulating hormone**

**DEHA:Dehydroepiandrosterone**