

What you test in **PCOS** is only the tip of the iceberg

Prolactin

LH

**Thyroid
Function Test**

FSH



**GET THE
REAL PICTURE**



What you test in **PCOS** is only the tip of the iceberg



Prolactin

LH

**Thyroid
Function Test**

FSH

Testosterone (Bio, Free, Total)

Androstenedione

Adiponectin

DHEAS

Insulin (F, PP)

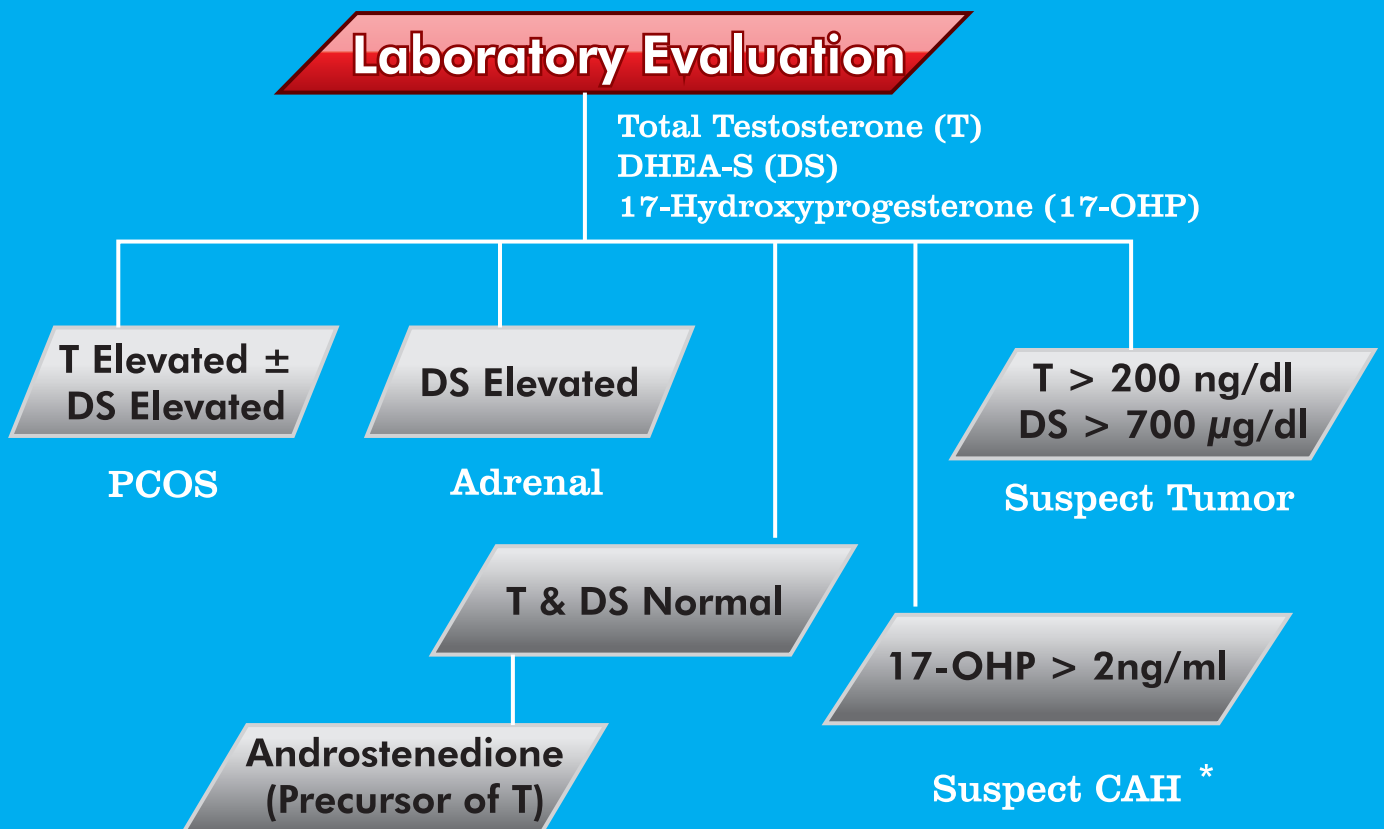
17 OHP

HbA1C

HOMA IR

**Metropolis offers comprehensive
& conclusive diagnosis for PCOS**

Laboratory Evaluation in PCOS- Algorithm



*Congenital Adrenal Hyperplasia

PCOS IS A DIAGNOSIS OF EXCLUSION

Ruling out other conditions is the key to diagnosis

Test	Purpose
17- α Hydroxyprogesterone (17-OHP)	<ul style="list-style-type: none"> To exclude Late onset Congenital Adrenal Hyperplasia¹ Confirmatory diagnosis with further evaluation if levels >200 ng/dL¹
Prolactin	<ul style="list-style-type: none"> To exclude Hyperprolactinemia²
Testosterone (total and Free)	<ul style="list-style-type: none"> To rule out ovarian tumor and Hyperthecosis¹
Dehydroepiandrosterone-sulfate (DHEA-S)	<ul style="list-style-type: none"> To Exclude adrenal tumor^{1,2}
HOMA index	<ul style="list-style-type: none"> To Exclude type 2 diabetes or glucose intolerance^{1,2} To Exclude insulin resistance^{1,2}
TSH	<ul style="list-style-type: none"> To exclude thyroid disease³
Serum FSH, LH	<ul style="list-style-type: none"> To exclude Primary ovarian insufficiency³
Serum Cortisol	<ul style="list-style-type: none"> To exclude Cushing's syndrome³
Serum IGF-1	<ul style="list-style-type: none"> To exclude Acromegaly³

TESTS TO MONITOR RISKS⁴

Test	Purpose
HOMA Index	To check Insulin Resistance
Lipid Profile	To check Total Cholesterol, HDL and Triglyceride Levels
SHBG	To monitor testosterone levels and Insulin resistance

TESTS TO DIAGNOSE HYPERANDROGENISM

Test	Sensitivity %	Specificity %
Bioavailable testosterone ⁶	75.9	83.3
Total testosterone ⁷	72.9	74.1
Free testosterone ⁷	82.0	74.1
Androstenedione ⁷	39.8	90.7

BIOAVAILABLE TESTOSTERONE

- More reliable marker of **PCOS** than free or total testosterone
- Helps to rule out ovarian or adrenal tumors
- Offers High sensitivity & specificity

ANDROSTENEDIONE

Elevated Serum Androstenedione is a valuable marker of biochemical hyperandrogenemia

- Associated with more severe **PCOS** phenotypes⁵
- Contribute to the worsening of **PCOS** features⁵

AMH

- Serves as a marker in ovarian pathophysiology in conditions such as polycystic ovary syndrome (**PCOS**)
- AMH serum levels show high correlation with the number of antral follicles before treatment and number of oocytes retrieved upon ovarian stimulation
- An excellent marker of ovarian responsiveness in IVF treatment

DIAGNOSIS OF **PCOS** AT METROPOLIS

- Highly sophisticated Bio-available testosterone level monitoring available
- Interpretative reports
- Tailored panels for different patients
- Extensive parameters for detecting PCOS

PCOS PROFILES OFFERED AT METROPOLIS

Test name	Details	Sample	Test Schedule	Reported On
PCOS Profile-1	Irregular cycles without hyperandrogenism- (FBS, PPBS, HOMA, Free testosterone, FSH, LH, Prolactin, 17 OHP)	5 ml of serum and 2 ml of F, PP fluoride plasma	Daily: 7am	Same day 5 pm
PCOS Profile-2	Moderate to severe hirsutism, Classic PCOS, Ovulatory PCOS (FBS, PPBS, HOMA, Free testosterone, FSH, LH, Prolactin, 17 OHP, Androstenedione, DHEAS, DHT, Lipid profile-2, T3, T4, TSH)	2 ml of Fluoride plasma (F, PP), 5 ml of fasting serum sample	Tue and Fri: 9am	Same day 5 pm
PCOS Profile-3	Moderate to severe hirsutism, Classic PCOS, Ovulatory PCOS (FBS, PPBS, HOMA, Free testosterone, FSH, LH, Prolactin, 17 OHP, Androstenedione, DHEAS, DHT, Lipid profile-2, T3, T4, TSH, SHBG, Cortisol, AMH), Testosterone Bioavailable (Total Testosterone, Albumin, SHBG, Calculation Done)	2 ml of Fluoride plasma (F, PP), 6 ml of fasting serum sample	Tue and Fri: 9am	Same day 5 pm

References

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