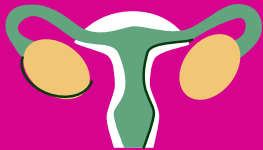


PMOS, Fertility and Pregnancy

Most women with Polyendocrine Metabolic Ovarian Syndrome (PMOS) achieve their desired family size. Many of these women may need simple support.



Many women with PMOS have difficulty getting pregnant because their eggs don't fully develop. But the good news is that this issue often responds well to non-invasive medical treatment.

70%

About 70% may experience problems getting pregnant.



A healthy and active lifestyle improves your chances of becoming pregnant.

30%

About 30% may experience no problems getting pregnant.

Improving your chances



Contraception is needed if pregnancy is not desired.



Discuss family planning and pregnancy health with your doctor. Make a plan of action so that you will be in the best health possible when trying to become pregnant.



If you're in a larger body, **maintaining a stable weight and losing just a few kilos** can significantly improve fertility.



Consider planning your family (if you wish to have children) earlier than 35 years if possible.

More helpful information



If you have had no periods or very few periods over the past 3 to 6 months, see your doctor.



If you are not pregnant after trying for 12 months (or if over 35yrs, 6 months), see your doctor.



If improving your lifestyle has not achieved a pregnancy then your doctor will discuss treatment options.



The most common treatment is tablets such as letrozole, clomiphene citrate and metformin. Surgery and injections are also options.



For more information about PMOS and fertility go to: **askpmos.org**



The AskPMOS App provides comprehensive, high quality PMOS information and support tools that are based on the latest evidence. www.askpmos.org

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