

## Gynecology case study # 8

A 39-year-old , housewife, G2P2, comes to your clinic to consult about her irregular menstrual periods. She had a history of primary infertility for 5 years due to PCOS and conceived only through clomiphene citrate. She gave birth to her second child 8 years ago. Although she has had irregular menses before getting pregnant, she noticed that her periods have been occurring less often, about every four to five months (longest interval being 7 months) ever since she gained a lot of weight 5 years ago. She also noted onset of fatigue, shortness of breath and occasional dizziness and headaches.

On PE, her BMI is 35, BP = 150/100, HR = 86, and a waist circumference = 89 cm. Acanthosis Nigricans noted at the back of her neck. Lipid panel showed: total cholesterol: 220 mg/dl, triglycerides 180 mg/dl, HDL-C 30 mg/dL

### QUESTIONS:

- 1.What is your complete diagnosis? Defend your diagnosis (state basis)
- 2.What other laboratory work-ups will you request to investigate this condition?
- 3.Discuss the pathophysiology of this condition? Give the differential diagnosis
- 4.How will you manage this patient?