OSCE - GIVING INFORMATION TO PATIENTS

A Patient with an ultrasound report

Your patient is an actor but you are NOT. Do what you could do as a third year student. Try to gather knowledge in advance.

Your patient is waiting to discuss about her ultrasound report.

You don't know anything about this patient. You are going to meet her for the first time.

The ultrasound report indicates bilateral polycystic ovaries with normal uterus and normal pelvic viscera.

Polycystic ovaries are an ultrasound appearance of multiple small ovarian follicles 4 -9 mm size lining the periphery of ovaries. The cysts are actually follicles, which have not matured and released their ova. Polycystic appearance of ovaries is associated with the anovulation and obesity. This leads to irregular menstrual periods and subfertility. The long-term outcomes are increased risk of developing diabetes and dyslipidaemia and risk of developing endometrial and breast cancer. These risks are more likely if anovulation persists for a longer duration. The cysts of polycystic ovaries are not associated with any malignancy. The usual associated symptoms are increased acne, frontal male pattern hair loss, and abdominal male pattern hair distribution. Diagnosis is established by demonstrating two out of following three criteria:

- 1 Oligomenorrhoea or a amenorrhoea
- 2. Clinical or biochemical evidence of hyper androgenism
- 3. Ultrasound appearance of polycystic ovaries

Management is dependent on the patient presenting problem and usually involves regulating menstrual cycle with an oral contraceptive pill, weight reduction and exercise. If sub-fertility is an issue ovulation induction is used as a treatment