

## P44. Obesity and Insulin resistance in infertile women with polycystic ovary syndrome

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**Context:** Polycystic ovary syndrome (PCOS) is the most common endocrine disorder, affecting up to 6% to 10% of reproductive-age women. The prevalence of insulin resistance in PCOS patients ranges from 44 to 70%. It is still unclear whether four PCOS phenotypes, defined according to the Rotterdam criteria, have the same metabolic and reproductive consequences as the classic form.

**Objective:** To compare weight, glucose metabolism abnormality and insulin resistance among different PCOS phenotypes.

**Methods:** This cross-sectional study was carried out on clinic records of PCOS women referred to infertility clinic of Royan Institute, Tehran, Iran, between January 2014 and April 2017.

**Patient(s):** 508 infertile women with PCOS were included the study. According to Rotterdam criteria patients divided to four phenotypes: A (oligo-anovulation, hyperandrogenism, polycystic ovary morphology):258 (50.79%), B (olig-anovulation and hyperandrogenism): 15(2.95%), C (hyperandrogenism and polycystic ovary morphology):34(6.69%), D (olig-anovulation and polycystic ovary morphology): 201 (39.56%).

**Intervention(s):** No Intervention.

**Main Outcome Measure(s):** Weight (kg), height (cm), Body mass index (BMI) Fasting blood sugar (FBS) mg/dl, blood glucose 2 hour post 75 gr glucose (OGTT), fasting insulin (mIU/L) were measured and Homeostatic model assessment of insulin resistance (HOMA-IR) were calculated for each patient.

**Result(s):** Mean of age in phenotype C were significantly higher than other phenotypes 30.14±4.53 yrs. vs. 28.72±4.49 yrs (A), 29.67±4.77 yrs (B), 27.50±4.89 yrs (D), p=0.024. Weight and BMI were statistically significantly higher in B phenotype, 79.10±15.78 kg and 31.13±4.88 kg/m<sup>2</sup> vs. 74.01±12.35 kg and 29.01±4.75 kg/m<sup>2</sup> (A), 77.66 ± 10.28 kg and 30.41±4.75 kg/m<sup>2</sup> (C), 71.51±13.38 kg and 27.81±4.71 kg/m<sup>2</sup> (D) respectively. There was no statistically significant differences in FBS and blood glucose after 2 hour 75 gr glucose between phenotypes. Fasting insulin and HOMA-IR index was highest in B and lowest in C phenotype but these differences were not statistically significant.

**Conclusions:** Despite older age in C Phenotype, B phenotype were more obese and have highest insulin resistance in comparison other phenotypes. It seems risk of type 2 diabetes are increased in these group of PCOS patients.

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