

Girls with type 2 diabetes at higher risk for ovarian cysts

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(HealthDay)—Here's yet another consequence of America's childhood

obesity epidemic: New research shows that girls with type 2 diabetes can set themselves up for developing a condition known as polycystic ovary syndrome (PCOS).

[PCOS](#) occurs when a woman's ovaries or [adrenal glands](#) produce more male hormones than normal, and its many symptoms include painful cysts on the ovaries, irregular periods, excessive hair growth, acne, weight gain and infertility.

Exactly how type 2 diabetes and PCOS are linked isn't fully understood yet.

"There's more work to be done to explore the genetic, epigenetic and [environmental factors](#) that can explain this association," said study author Dr. M. Constantine Samaan. He's an associate professor of pediatrics at McMaster University and McMaster Children's Hospital in Hamilton, Ontario, Canada.

Insulin resistance likely plays a central role in both conditions, Samaan said. When the body doesn't respond well to insulin, [blood sugar](#) can build up in your bloodstream, eventually leading to [type 2 diabetes](#). Many women with PCOS are also insulin-resistant.

Samaan and his colleagues conducted a review to get a better handle on the risk of PCOS in girls with type 2 diabetes. Just shy of 20% of 470 girls with type 2 diabetes from six studies conducted across several countries had PCOS. That rate is at least twice as high as it is in the general adolescent population, he noted.

"Previously, we knew that some girls with type 2 diabetes can develop PCOS, and our paper defines the specific global prevalence of PCOS in type 2 diabetes in [girls](#)," Samaan said.

Awareness of PCOS risk is the key, he said. "Girls with type 2 diabetes need to be counseled about the risk of PCOS, and patients need to share information with their providers about irregular periods, acne or excessive hair growth, to allow appropriate investigations and treatments to be implemented," Samaan said.

The study was published Feb. 15 in the journal *JAMA Network Open*.

Dr. Laurie Cohen, chief of the Division of Pediatric Endocrinology and Diabetes at the Children's Hospital at Montefiore in New York City, points out that it's a two-way street when it comes to type 2 diabetes and PCOS.

"Individuals with PCOS are at increased risk for metabolic syndrome and type 2 diabetes, so should be screened for these conditions, and individuals with obesity or type 2 diabetes mellitus should be screened for PCOS," she said.

Treating PCOS can ease many of its symptoms, said Cohen, who has no ties to the new research.

In adolescents, the first line of treatment for PCOS is usually a combined oral contraceptive pill, she said. "If the [excessive hair growth](#) doesn't improve, an anti-androgen medication may be added," Cohen said.

When a child with PCOS is also overweight or obese, lifestyle modifications such as diet and exercise are recommended. "Sometimes a medication called [metformin](#) is used if there is prediabetes or type 2 [diabetes](#)," Cohen explained.

More information: Milena Cioana et al, Prevalence of Polycystic Ovary Syndrome in Patients With Pediatric Type 2 Diabetes, *JAMA*

Network Open (2022). [DOI: 10.1001/jamanetworkopen.2021.47454](https://doi.org/10.1001/jamanetworkopen.2021.47454)

Nemours Children's Health has more on [PCOS in tweens and teens](#).

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