Polyendocrine Metabolic Ovarian Syndrome
Hyperandrogenism: Acne & Hirsutism

Understanding excess androgen and what it means for women

PHILIPPINE SOCIETY FOR REPRODUCTIVE MEDICINE
MANILA 1994

Hyperandrogenism means higher-than-typical levels or effects of androgens (male-type hormones) in the body. When this happens in people with PMOS, it can influence symptoms, cycles, and overall well-being.

What is Hyperandrogenism?

Hyperandrogenism means having increased androgen activity in the body. It may present as clinical hyperandrogenism, such as excess facial or body hair (hirsutism), acne, or female-pattern hair loss, or as biochemical hyperandrogenism, characterized by higher-than-normal androgen levels on blood testing. Among these clinical features, hirsutism is the sign most strongly associated with biochemical hyperandrogenism.

How is it related to PMOS?

Hyperandrogenism is one of the three key features of Polyendocrine Metabolic Ovarian Syndrome (PMOS). In adults, PMOS is diagnosed when at least two of three features are present, after excluding other causes: ovulatory dysfunction, characterized by irregular or absent menstrual cycles; hyperandrogenism, which may be clinical and/or biochemical; and polycystic ovarian morphology, identified by ultrasound or AMH assessment in adults

How can this affect me?

People with hyperandrogenism and PMOS may experience a range of symptoms. These can vary in type and intensity and may change over time.

- Irregular or less predicable menstrual cycles
- Changes in skin (e.g., acne)
- Increased facial or body hair
- Hair thinning on the scalp
- Weight changes or difficulty with weight management
- Fatigue, mood changes, or low energy
- Difficulty getting pregnant

What can cause it?

In PMOS, hyperandrogenism is mainly related to increased androgen production from the ovaries and, to a lesser extent, the adrenal glands, together with altered androgen metabolism and increased androgen activity. Insulin resistance and compensatory hyperinsulinemia can further stimulate ovarian androgen production and reduce sex hormone–binding globulin (SHBG), increasing free testosterone. Other causes of androgen excess—such as congenital adrenal hyperplasia, Cushing syndrome, androgen-secreting ovarian or adrenal tumors, ovarian hyperthecosis, severe insulin resistance, or medications—should be excluded when androgen levels are markedly elevated or symptoms develop rapidly.

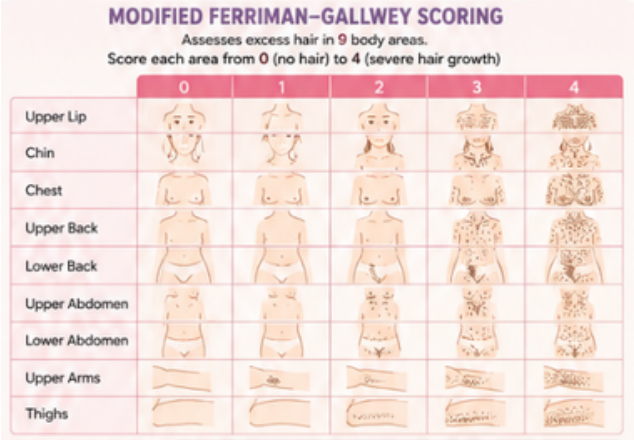
Knowledge. Support. Partnership. Better health starts with you.

REFERENCES

International Evidence-based Guideline for PMOS/PCOS (Monash University, 2023; updated PMOS resources, 2026), developed with ESHRE, ASRM and international collaborating societies.

How is it assessed?

HHyperandrogenism is assessed through clinical signs and blood tests. Excess facial or body hair (hirsutism) can be assessed using the modified Ferriman–Gallwey (mFG) score, with a score of 4–6 or higher indicating hirsutism depending on ethnicity. Blood tests measure total and free testosterone; if these are not elevated, androstenedione or DHEAS may be considered.



How can I manage it?

Treatment depends on the symptoms and whether pregnancy is desired. For hirsutism and acne, options include cosmetic hair removal, laser/light therapy, combined oral contraceptive pills (COCPs), and anti-androgens such as spironolactone in selected patients. Anti-androgens require effective contraception if pregnancy is possible.

- COCPs: assess improvement after at least 6 months
- Anti-androgens: may require ≥6 months to assess response
- Laser/light therapy: usually requires multiple sessions; results are assessed over several months
- Lifestyle: healthy eating and regular physical activity are recommended for all women with PMOS, regardless of weight, to improve metabolic health and quality of life.

If pregnancy is desired: For anovulatory infertility, letrozole is the preferred first-line medication for ovulation induction when appropriate. COCPs and anti-androgens are not fertility treatments.

KEY FACTS

- Symptoms can look different for everyone.
- Early support can help you feel better and improve day-to-day wellbeing.
- Small, steady steps can make a big difference.
- You deserve care that listens to you.
- You are not alone.

Maraming “androgen” at PMOS

Pag-unawa sa Labis na Androgen at Kung Ano ang Kahulugan Nito para sa mga Kababaihan

Ang “androgen” ay isang halimbawa ng “hormone” na karaniwang nauugnay sa pagiging lalaki.

Ano ang ibig sabihin kung ikaw ay maraming “androgen”?

Ang mga babaeng may mataas na antas ng panlalaking “androgen hormone” ay maaaring magpakita ng sobrang balahibo sa mukha o bigote, balbon na pangangatawan, matagihawat o may pagnipis ng buhok sa ulo. Puwede rin itong masuri sa dugo sa pamamagitan ng pagkuha ng antas ng “testosterone”. Ang karaniwang nakikita sa mga may PMOS na mataas ang “androgen” ay ang pagkakaroon ng bigote.

Ano ang kinalaman ng mataas na “androgen” sa PMOS?

Isa ito sa tatlong pamantayan upang malaman kung may PMOS ang isang babae. Dapat may makitang dalawa sa tatlong pamantayan para masabing mayroong kang PMOS matapos siguraduhing walang ibang dahilan ang hindi pangigitlog kada buwan tulad ng sakit sa “thyroid” o problema sa “prolactin”. Una, hindi normal na pagreregla o hindi pangingitlog kada buwan; pangalawa, pagkakaroon ng mataas na lebel ng “androgen” o manipestasyon nito tulad ng pagkakaroon ng bigote o pagkakaroon ng maraming tagihawat; at pangatlo, larawan ng “polycystic ovaries” sa ultrasound o base sa mataas na sukat sa dugo ng iyong AMH.

Ano ang epekto ng maraming “androgen” sa aking kalusugan?

Ang pagkakaroon ng maraming “androgen” ng isang babaeng may PMOS ay maaaring magpabago-bago sa haba ng panahon. Mga halimbawa:

- Magulong regla na di-malaman kung kailan dadating
- Pagbabago sa balat tulad ng matagihawat o mamantika
- Mabuhok o mabalahibo sa mukha o pangangatawan
- Pagnipis ng buhok sa anit
- Pagbabago sa timbang o mahirap pumayat
- Madaling mapagod o maselan ang damdamin
- Hirap mabuntis

Bakit ito nangyayari?

Ang maramimg “androgen hormone” ay nanggagaling sa obaryo. Maaari din itong manggaling sa ating “adrenal gland”. Kapag nagkakaroon ng “insulin resistance” o mataas na antas ng insulin sa katawan ang isang babae, lalo nitong tinutulak ang kanyang metabolismo na gumawa ng mas marami pang “androgen”. Bukod sa PMOS, may ibang kondisyon na puwedeng maging dahilan ng pagkakaroon ng maraming “androgen” tulad ng Congenital Adrenal Hyperplasia, Cushing’s syndrome, tumor sa obaryo o adrenal, o masamang epekto na iyong gamot.

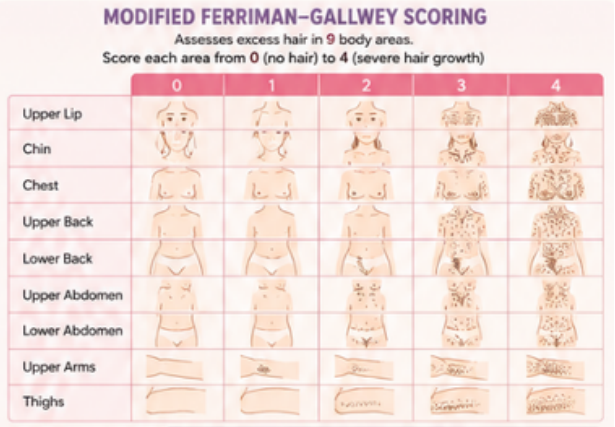
Kaalaman. Suportahan. Pagkakasama.
Sa iyo nagsisimula ang iyong kalusugan!

REFERENCES

International Evidence-based Guideline for PMOS/PCOS (Monash University, 2023; updated PMOS resources, 2026), developed with ESHRE, ASRM and international collaborating societies.

Paano ito sinusuri?

Ang pagkakaroon ng maraming “androgen” tulad ng “total testosterone”, “androstenedione” o DHEAS ay maaaring masukat sa dugo o sa pamamagitan ng eksaminasyon ng katawan ng babae. Maaaring gamitin ang marka base sa Modified Ferriman-Gallway Score upang malaman kung kaunti o madami ang pagkabalbon niya mula mukha hanggang binti.



Paano inaayos ang problema sa “androgen”?

Ang gamutan ay naaayon sa sintomas at kagustuhan ng babaeng mabuntis. Kung kaanyuan ang problema tulad ng bigote o tagihawat, puwedeng piliin ang kosmetikong pagtanggal nito, uminom ng pills o gamot na panlaban sa “androgen”. Huwag kalilimutang tiyakin kung ang napili mong gamot ay hindi mapanganib kung magbubuntis.

- Ang pills o gamot ay mangangailangan ng hindi bababa sa anim na buwan upang makakita ng pagbabago sa iyong balat.
- Ang mga “laser therapy” ay mangangailangan ng maraming sesyon na tatagal ng ilang buwan para tumalab.
- Ang malusog na pamumuhay: tamang pagkain, maayos na timbang at regular na pag-eehersisyo ay mahalaga sa lahat ng may PMOS upang maiwasan ang mga pangmatagalang komplikasyon nito tulad ng kanser sa matres, diabetes at atake sa puso o utak.

Hindi naaangkop ang pag-inom ng pills o anti-androgen sa mga babaeng nais mabuntis. Ang pangunahing gamot na mainam ibigay para mangitlog ang may PMOS ay letrozole.

KEY FACTS

- Iba’t iba ang sintomas ng mga may PMOS.
- Makakatulong ang pagkakaroon ng maagang suporta para gumanda ang iyong kalooban at pang-araw-araw na buhay.
- Kahit paunti-unti ang pagbabago mo, basta pinili mong simulan ang landas tungo sa iyong kalusugan, malaki na ang iyong naihakbang para makamit ang iyong paggaling.
- Hindi ka nag-iisa.
- Karapatan mong pumili ng pinakamahusay at nakauunawang alaga.