Polyendocrine Metabolic Ovarian Syndrome (PMOS): Obesity And Weight Management

PHILIPPINE SOCIETY FOR REPRODUCTIVE MEDICINE
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1 Polyendocrine Metabolic Ovarian Syndrome (PMOS), formerly called Polycystic Ovary Syndrome (PCOS), is a common long-term hormonal and metabolic condition. The name was changed in 2026 to better reflect that PMOS is not simply a disorder of the ovaries or a condition caused by ovarian "cysts." Higher body weight is common in PMOS, but PMOS can occur at any body size.



2 What is PMOS?

PMOS can affect

- menstrual cycles and ovulation
- androgen-related symptoms such as excess hair growth or acne
- metabolic health, sleep, emotional well-being
- fertility.

A woman may experience all of these symptoms or only some of them.

Therefore, women with PMOS may experience different health concerns.

3 How are PMOS and obesity connected?

PMOS and higher body weight can influence each other. Insulin resistance and hormonal changes may contribute to weight gain o make weight management more difficult, while higher weight can worsen some PMOS features. *However, weight is only one part of PMOS and is not a measure of how hard someone is trying.*

Higher weight is associated with greater risk of insulin resistance and type 2 diabetes.

It may increase the severity of some hormone-related features such as acne and excess hair growth, as well as metabolic features such as insulin-resistance, and abnormal cholesterol levels.

It can contribute to menstrual irregularity and difficulty with ovulation.

PMOS-related health risks can occur even without obesity.

4 How can obesity affect fertility?

Obesity may affect fertility through changes in ovulation and other reproductive processes. Some people with obesity ovulate regularly but still have lower pregnancy rates. Obesity is also associated with lower IVF success and higher miscarriage risk.



Irregular or absent ovulation can make it more difficult to get pregnant.

Pregnancy complications, including gestational diabetes and hypertensive disorders, are more common.

Cesarean delivery and other pregnancy-related complications may be more frequent.

5 Does everyone with PMOS need to lose weight?

No. Management should be individualized. A healthy lifestyle is recommended for everyone with PMOS. Goals may include maintaining a healthy weight, preventing further weight gain, improving fitness and metabolic health, or achieving weight loss when appropriate. There is no single diet or exercise program proven to be best for PMOS. The most appropriate approach should be based on the person's health, preferences, lifestyle, and individual goals.

6 What lifestyle changes truly make a difference in PMOS?

Sustainable lifestyle changes and not restrictive diets, are key to improving insulin sensitivity and managing PMOS. Focus on eating more fruits, vegetables, whole grains, healthy foods, and low-glycemic carbohydrates, such as those found in DASH and Mediterranean-style diets. If overweight, even losing 7–10% of body weight can help the body respond to insulin more effectively.

Regular exercise, about 150 minutes per week while combining activities like walking or other aerobic exercise with strength training can further improve how the muscles respond to insulin.

7 When should medical or surgical options be considered to help with weight management in PCOS?

For individuals with PMOS who need additional support with weight management, medical and surgical options may be considered alongside lifestyle changes. Anti- obesity medications, including orlistat and GLP-1 receptor agonists such as Liraglutide and Semaglutide, can help reduce weight, waist circumference, and insulin resistance. For those with severe obesity, bariatric or metabolic surgery is also an effective option and may improve ovulation and fertility. In some cases, patients with PMOS may be considered for surgery at a lower BMI threshold than the general population.

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PMOS: Labis na Timbang at Angkop na Paraan Para ito Maiwasto

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1 Ang Polyendocrine Metabolic Ovarian Syndrome (PMOS) na dating kilalang PCOS, ay isang pangmatagalang kalagayan ng problema sa "hormones" at metabolismo. Pinalitan ang pangalan nito taong 2026 dahil nabatid ng mga eksperto na hindi limitado sa obaryo at mga "cysts" na nakikita sa "ultrasound" ang problemang dulot nito. Marami sa mga may PMOS ang may problema sa labis na timbang pero ang totoo, may iba't ibang sukat ng pangangatawan ang iba't ibang babae.



2 Ano ang PMOS?

Ang PMOS ay maaaring:

- dahilan ng magulong pagdating ng regla at hindi pangingitlog kada buwan,
- magpakita ng labis na "androgen" sa katawan tulad ng pagiging balbon o matagihawat
- makaapekto sa kalagayan ng iyong metabolismo, pagtulog o kapayapaan ng damdamin
- maging sagabal sa kakayahang magbuntis.

Puwedeng mangyari ang lahat ng sintomas na ito sa isang babae o ilan-ilan lamang. Samakatuwid, may iba't ibang problemang nararanasan ang mga babaeng may PMOS.

3 May koneksyon ba ang PMOS sa pagiging labis na mataba?

Maaaring makaapekto sa timbang ang PMOS at maaari ding palalain ng labis na timbang ang PMOS. Ang "insulin resistance" at mga pagbabago sa iyong "hormones" ay puwedeng magpalala ng iyong pagtaba o gawing mahirap ang pagbabawas ng timbang. Ang mas matataas na timbang ay magpapalala rin ng ibang sakit o sintomas na dulot ng PMOS.

Kapag mas mabigat ang timbang, lumalaki ang posibilidad na magkaroon ng "insulin resistance" at "type 2 diabetes".

Maaaring lumala ang lahat ng ibang karamdaman dahil sa PMOS tulad ng tagihawat, diabetes o problema sa kolesterol.

Batid ng maraming pasyente na kapag lalo siyang bumibigat, lalong gumugulo ang kanyang regla. Kung mas mataba ka, mas mahirap kang mangitlog. Kung kaya, kapag pumayat, mas madaling mangitlog at mabuntis.

Gayun pa man, kahit hindi ka mataba, lahat ng sakit ay maaaring pa rin mangyari sa iyo basta malaman mong ikaw ay may PMOS.

4 Ano ang epekto ng labis na timbang sa aking kakayanang magbuntis?

Kapag labis ang iyong timbang o "obese" ka, hindi ka malusog. Ito ay magpapadalang sa kakayanan mong mangitlog (para mabuntis) o magkaroon ng maayos na kahihinatnan ang pagdadalang tao. Kahit magpahinga ka, kapag labis ang iyong timbang, lumalaki ang pagkakataong hindi ito maging matagumpay o madaling malalaglag ang bata.



Kapag madalang o ayaw mangitlog ng iyong katawan, mahihirapan kang mabuntis.

Ang pinaghihirapan mong pagbubuntis ay magkakaroon ng kaakibat na mga komplikasyon tulad ng diabetes o mataas na presyon.

Bukod sa komplikadong pagbubuntis, tataas ang posibilidad na maoperahan ka sa panganganak (CS).

5 Lahat ba ng may PMOS ay kailangang magbawas ng timbang?

Hindi. Ang gamutan sa bawat pasyente ay nauukol sa kanya-kanya nilang pangangailangan. Lahat ay hinihikayat na sundin ang isang malusog na pamumuhay. Mainam na hangarin ang pagkakaroon ng maayos na timbang at malusog na pangangatawan at metabolismo. Ang pagtangkilik sa isang uri ng "diet" o ehersisyo ay naaayon sa tumatalab, nababagay, nagugustuhan at layunin ng babae. Walang natatanging isang paraan na epektibo.

6 Ano nga ba ang mabisang paraan upang magkaroon ng malusog na pamumuhay?

Mahalaga ang pangmatagalang paraan ng malusog na pamumuhay upang maayos ang problema sa "insulin resistance" at iba pang sintomas ng PMOS. Piliin ang madalas na pagkain ng gulay, prutas, "whole grains" tulad ng "oats, quinoa" at mais, at mababa ang "glycemic index" tulad ng brown rice sa halip na "white rice". Subukan mo ang "DASH diet" o kaya ang "Mediterranean-style diet". Kapag mataas ang iyong timbang (overweight o obese), mainam magbawas ng 5-10% sa kasalukuyan mong timbang sa loob ng anim na buwan upang gumanda ang paggamit ng insulin ng iyong katawan.

Ang regular na pag-eehersisyo ay nangangahulugan ng paggugol ng hindi bababa sa 150 minutong ehersisyo kada linggo na puwedeng hatiin ng ilang minuto o oras kada araw. Mainam na pagsamahin ang ehersisyong kardyo tulad ng paglalakad o pagsasayaw sa mga galaw na nagpapalakas ng kalamnan tulad ng pagbubuhat ng mabibigat o boksing upang gumanda ang paggamit ng insulin ng katawan.

7 Kailan naaangkop piliin ang mga gamot o pagpapaopera para matugunan ang problema sa timbang?

Bukod sa pagtangkilik ng malusog na pamumuhay, ang pagpili ng gamot o pagpapaopera ay naaayon sa tugon ng may katawan sa gamutan. Marami nang gamot para mabawasan ang timbang o labanan ang labis na pagtaba tulad ng Orlistat at GLP-1 receptor agonists (liraglutide, semaglutide at tirzepatide). Kung grabe ang katabaan at hindi kaya ang gamutan, puwedeng piliin ang "bariatric or metabolic surgery" para umayos ang pangingitlog at lumaki ang pagkakataong mabuntis.

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