Metformin Treatment of Polycystic Ovary Syndrome

Polycystic ovary syndrome (PCOS) is a common cause of anovulation and infertility in women. Women with this syndrome do not ovulate (release eggs) regularly and therefore have irregular menstrual cycles. Their ovaries contain multiple small cystic structures, usually about 4-9 mm in diameter. This gives the ovaries a characteristic “polycystic” (many cysts) appearance on ultrasound.

Many women with PCOS produce higher levels of insulin to control their blood sugar level, which is called insulin resistance. Metformin is a drug used to treat insulin resistance. When used in women with PCOS, about 40% will begin to ovulate in the first 6 months of treatment. Clomid is a more effective drug for ovulation, but metformin in combination with Clomid can help some women ovulate who didn’t respond to Clomid by itself.

Approximately 20% of women taking metformin experience side effects such as abdominal discomfort, cramping, diarrhea and nausea. These side effects can be minimized by increasing the dose of metformin slowly and allowing your body to get used to the medication.

**To begin:** metformin will be started as a single tablet with an evening meal. After a few days, once your body has adjusted to the medication, you may add second pill daily with your morning meal and then a third pill daily with your evening meal; this is the usual dose needed for ovulation. If you experience significant side effects, please call our office so that we may help you adjust the dose.