

Title: Improved Mental Health and Quality of Life in Patients Post-Participation in a PCOS Multidisciplinary Clinic

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Background: Polycystic Ovarian Syndrome (PCOS) affects approximately 1 in 6 women worldwide and impacts multiple systems including reproductive, metabolic, and psychiatric. In fact, PCOS is associated with decreased quality of life and higher rates of psychiatric disorders such as anxiety, depression, obsessive compulsive disorder and somatization disorders even after adjusting for BMI. Integrating mental health providers into PCOS and multidisciplinary care is therefore essential.

Objective/Hypothesis: We hypothesize that patients participating in our multidisciplinary PCOS program which includes a psychologist, gynecologist, and registered dietitian will experience improvements in mental health and quality of life.

Methods: Adults were recruited from a university hospital multidisciplinary PCOS program to complete validated questionnaires: PCOS Quality of Life Questionnaire (PCOSQ), PROMIS self-efficacy for managing chronic conditions, Patient Health Questionnaire-8 (PHQ-8) for depression, and Body Image Concern Inventory (BICI). Participants met regularly with their providers for clinic visits. Data were analyzed as descriptive statistics, and paired t-tests were used to evaluate mean differences from intake to 3-month and intake to 6-month assessments.

Results: Participants (n=129) were on average 30 years old (standard deviation [SD] 5.9), primarily cisgender, non-Hispanic (78%), White (74%) females (96%). At 3-months post-intake (n = 70), participants significantly improved in self-efficacy for managing PCOS symptoms (M 2.3, SD 7.5, $p = 0.021$), PCOSQ total score (M 0.3, SD 0.6, $p < 0.001$) and subdomains (emotion, M 0.3, SD 1, $p = 0.012$; body hair, M 0.3, SD 1, $p = 0.023$; weight, M 0.4, SD 1.1, $p = 0.015$; infertility problems M 0.3, SD 0.8, $p = 0.027$; menstrual problems M 0.3, SD 1.0, $p = 0.018$). They also significantly reduced depression scores (M -1.8, SD 3.6, $p < 0.001$) and body image concern scores (M -5.6, SD 8.6, $p < 0.001$). At 6-months post-intake (n = 37), participants significantly improved in self-efficacy for managing PCOS symptoms (M 2.9, SD 8.6, $p = 0.038$), PCOSQ total score (M 0.4, SD 0.9, $p = 0.008$) and subdomains (weight M 0.5, SD 1.2, $p = 0.033$; infertility problems M 0.5, SD 1.3, $p = 0.022$; menstrual problems M 0.8, SD 1.1, $p < 0.001$). They also had significantly reduced body image concern scores (M -4.1, SD 11.4, $p = 0.039$).

Conclusions/ Future Directions: Findings suggest that self-efficacy for managing symptoms, depression, body image concerns, and quality of life significantly improved following access and engagement in multidisciplinary PCOS care. These findings offer support to screen for and treat mental health concerns that contribute to the overall burden of PCOS.