

VIII Congreso Internacional de Investigación y Práctica Profesional en Psicología
XXIII Jornadas de Investigación XII Encuentro de Investigadores en Psicología
del MERCOSUR. Facultad de Psicología - Universidad de Buenos Aires, Buenos
Aires, 2016.

Síndrome de ovario poliquístico. Revisión sistemática de sus correlatos patológicos en ánimo y cognición.

Martino, Pablo.

Cita:

Martino, Pablo (2016). *Síndrome de ovario poliquístico. Revisión sistemática de sus correlatos patológicos en ánimo y cognición*. VIII Congreso Internacional de Investigación y Práctica Profesional en Psicología XXIII Jornadas de Investigación XII Encuentro de Investigadores en Psicología del MERCOSUR. Facultad de Psicología - Universidad de Buenos Aires, Buenos Aires.

Dirección estable: <https://www.aacademica.org/000-044/292>

ARK: <https://n2t.net/ark:/13683/eATH/DrN>

SÍNDROME DE OVARIO POLIQUÍSTICO. REVISIÓN SISTEMÁTICA DE SUS CORRELATOS PATOLÓGICOS EN ÁNIMO Y COGNICIÓN

Martino, Pablo

Facultad de Psicología, Universidad Nacional de San Luis. Argentina

RESUMEN

El síndrome de ovario poliquístico (SOP) es la endocrinopatía más frecuente en edad reproductiva de la mujer. Durante los últimos años se avanzó considerablemente en la compresión de sus manifestaciones clínicas y fisiopatológicas. Sin embargo los aspectos comportamentales del SOP continúan siendo menos claros. Por lo cual el objetivo del presente trabajo consistió en investigar la prevalencia de dificultades anímicas y cognitivas en mujeres con SOP, y en segundo lugar, delimitar los mecanismos explicativos de dichos desajustes comportamentales. Se revisaron las bases de datos Pubmed y Sciencedirect en búsqueda de artículos originales publicados en el lapso 2006-2015. Las mujeres con SOP presentan vulnerabilidad incrementada para trastornos de ansiedad y síntomas depresivos. Se desestimó un mayor riesgo para trastornos bipolares. Se presume una disminución cognitiva en funciones verbales, aunque no existiría un perfil neurocognitivo de tipo androgénico. Las presuntas dificultades comportamentales asociadas al SOP serían resultado de una combinación de factores biológicos y psico-socio-culturales. Se sugiere a los profesionales de la salud asignar mayor relevancia al estado anímico de las mujeres con SOP, como así también incrementar la investigación destinada a caracterizar el perfil cognitivo en esta población.

Palabras clave

Poliquistosis ovárica, Depresión, Rendimiento neurocognitivo, Psi-coimmunoneuroendocrinología

ABSTRACT

POLYCYSTIC OVARY SYNDROME. A SYSTEMIC REVIEW OF ITS PATHOLOGICAL CORRELATES ON MOOD AND COGNITION
Polycystic Ovary Syndrome (PCOS) is the most common endocrine disease in women of reproductive age. In recent years substantial progress was made in the clinical and pathophysiological understanding of PCOS. However the behavioral aspects of PCOS are still less clear. The aim of the present paper was to determine the prevalence of mood and neurocognitive difficulties in women with PCOS, and secondly, to delimit the explanatory mechanisms of these behavioral disturbances. It is searched of original articles in Pubmed and Sciendirect data bases (between 2006 and 2015). It was found that women with PCOS have increased vulnerability to suffering from anxiety disorders and depressive symptoms. It was dismissed risk for bipolar disorder. The few reports hypothesize cognitive decline especially in verbal functions, although there would be no androgenic neurocognitive profile. The alleged behavioral difficulties associated with the PCOS would result from a combination of biological and psycho-socio-cultural factors. It is suggested to give greater relevance to the mood of women with PCOS, as well as, increase the scarce research to characterize the neurocognitive performance in this population.

Key words

Stein-Leventhal, Depression, Neurocognitive performance, Psycho-neuroimmunoendocrinology

BIBLIOGRAFÍA

- Adali, E., Yildizhan, R., Kurdoglu, M., Kolusari, A., Edirne, T., Sahin, H.G., Yildizhan, B. & Kamaci, M. (2008). The relationship between clinicobiochemical characteristics and psychiatric distress in young women with polycystic ovary syndrome. *J Int Med Res*, 36(6), 1188-96.
- Barnard, L., Ferriday, D., Guenther, N., Strauss, B., Balen, A.H. & Dye, L. (2007a). Quality of life and psychological well being in polycystic ovary syndrome. *Human Reproduction*, 22(8), 2279-2286.
- Barnard, L., Balen, A.H., Ferriday, D., Tiplady, B. & Dye, L. (2007b). Cognitive functioning in polycystic ovary syndrome. *Psychoneuroendocrinology*, 32(8-10), 906-14.
- Barry, J.A., Parekh, H.S. & Hardiman, P.J. (2013). Visual-spatial cognition in women with polycystic ovarian syndrome: the role of androgens. *Hum Reprod*, 28(10), 2832-7.
- Barry, J.A., Hardiman, P.J., Saxby, B.K. & Kuczmarczyk, A. (2011). Testosterone and mood dysfunction in women with polycystic ovarian syndrome compared to subfertile controls. *J Psychosom Obstet Gyneacol*, 32(3), 164.
- Bazarganipour, F., Ziae, S., Montazeri, A., Foroozanfar, F., Kazemnejad, A. & Faghihzadeh, S. (2013). Psychological investigation in patients with polycystic ovary syndrome. *Health Qual Life Outcomes*, 11, 141.
- Benson, S., Janssen, O.E., Hahn, S., Tan, S., Dietz, T., Mann, K., Pleger, K., Schedlowski, M., Arck, P.C. & Elsenbruch, S. (2008). Obesity, depression, and chronic low-grade inflammation in women with polycystic ovary syndrome. *Brain Behav Immun*, 22(2), 177-84.
- Benson, S., Hahn, S., Tan, S., Mann, K., Janssen, O.E., Schedlowski, M. & Elsenbruch, S. (2009). Prevalence and implications of anxiety in polycystic ovary syndrome: results of an internet-based survey in Germany. *Hum Reprod*, 24(6), 1446-51.
- Bhattacharya, S.M. & Jha, A. (2010). Prevalence and risk of depressive disorders in women with polycystic ovary syndrome (PCOS). *Fertil Steril*, 94(1), 357-9.
- Ching, H.L., Burke, V. & Stuckey, B.G. (2007). Quality of life and psychological morbidity in women with polycystic ovary syndrome: body mass index, age and the provision of patient information are significant modifiers. *Clin Endocrinol (Oxf)*, 66(3), 373-9.
- Cinar, N., Kizilarslanoglu, M.C., Harmanci, A., Aksoy, D.Y., Bozdag, G., Demir, B. & Yildiz, B.O. (2011). Depression, anxiety and cardiometabolic risk in polycystic ovary syndrome. *Hum Reprod*, 26(12), 3339-45.
- Cipkala-Gaffin, J., Talbott, E.O., Song, M.K., Bromberger, J. & Wilson, J. (2012). Associations between psychologic symptoms and life satisfaction in women with polycystic ovary syndrome. *J Womens Health (Larchmt)*, 21(2), 179-87.

- Coffey, S., Bano, G. & Mason, H.D. (2006). Health-related quality of life in women with polycystic ovary syndrome: a comparison with the general population using the Polycystic Ovary Syndrome Questionnaire (PCOSQ) and the Short Form-36 (SF-36). *Gynecol Endocrinol*, 22(2), 80-6.
- Davari-Tanha, F., Hosseini-Rashidi, B., Ghajarzadeh, M. & Noorbala, A.A. (2014). Bipolar disorder in women with polycystic ovarian syndrome (PCO). *Acta Med Iran*, 52(1), 46-8.
- Deeks, A.A., Gibson-Helm, M.E., Paul, E. & Teede, H.J. (2011). Is having polycystic ovary syndrome a predictor of poor psychological function including anxiety and depression? *Hum Reprod*, 26(6), 1399-407.
- Ekdahl, C.T., Claasen, J.H., Bonde, S., Kokaia, Z. & Lindvall, O. (2003). Inflammation is detrimental for neurogenesis in adult brain. *Proc Natl Acad Sci U S A*, 100(23), 13632-7.
- Elsenbruch, S., Benson, S., Hahn, S., Tan, S., Mann, K., Pleger, K., Kimmig, R. & Janssen, O.E. (2006). Determinants of emotional distress in women with polycystic ovary syndrome. *Hum Reprod*, 21(4), 1092-9.
- Frayn, K.N. (2001). Adipose tissue and the insulin resistance syndrome. *Proc Nutr Soc*, 60(3), 375-80.
- Ghazeeri, G., Fakih, A., Abbas, H.A., Harajly, S. & Awwad, J. (2013). Anxiety, cognitive, and depressive assessment in adolescents with polycystic ovarian syndrome: a pilot study. *J Pediatr Adolesc Gynecol*, 26(5), 269-73.
- Himelein, M.J. & Thatcher, S.S. (2006). Depression and body image among women with polycystic ovary syndrome. *J Health Psychol*, 11, 613-25.
- Hines, M. (2010). Sex relates variation in human behavior and the brain. *Trends Cogn Sci*, 14(10), 448-456.
- Hollinrake, E., Abreu, A., Maifeld, M., Van Voorhis, B.J. & Dokras, A. (2007). Increased risk of depressive disorders in women with polycystic ovary syndrome. *Fertil Steril*, 87(6), 1369-76.
- Hung, J.H., Hu, L.Y., Tsai, S.J., Yang, A.C., Huang, M.W., Chen, P.M., Wang, S.L., Lu, T. & Shen, C.C. (2014). Risk of psychiatric disorders following polycystic ovary syndrome: a nationwide population-based cohort study. *PLoS One*, 9(5), e97041.
- Hussain, A., Chandel, R.K., Ganie, M.A., Dar, M.A., Rather, Y.H., Wani, Z.A., Shiekh, J.A. & Shah, M.S. (2015). Prevalence of psychiatric disorders in patients with a diagnosis of polycystic ovary syndrome in kashmir. *Indian J Psychol Med*, 37(1), 66-70.
- Jedel, E., Waern, M., Gustafson, D., Landén, M., Eriksson, E., Holm, G., Nilsson, L., Lind, A.K., Janson, P.O. & Stener-Victorin, E. (2010). Anxiety and depression symptoms in women with polycystic ovary syndrome compared with controls matched for body mass index. *Hum Reprod*, 25(2), 450-6.
- Kerchner, A., Lester, W., Stuart, S.P. & Dokras, A. (2009). Risk of depression and other mental health disorders in women with polycystic ovary syndrome: a longitudinal study. *Fertil Steril*, 91(1), 207-12..
- Klipstein, K.G. & Goldberg, J.F. (2007). Screening for bipolar disorder in women with polycystic ovary syndrome: a pilot study. *J Affect Disord*, 97(1-3), 277.
- Lang, B.T., Yan, Y., Dempsey, R.J. & Vermuganti, R. (2009). Impaired neurogenesis in adult type-2 diabetic rats. *Brain Res*, 1258, 25-33.
- Legro, R.S., Castracane, V.D. & Kauffman, R.P. (2004). Detecting insulin resistance in polycystic ovary syndrome: purposes and pitfalls. *Obstet Gynecol Surv*, 59, 141-154.
- Lindqvist, A., Mohapel, P., Bouter, B., Frielingsdorf, H., Pizzo, D., Brundin, P. & Erlanson-Albertsson, C. (2006). High-fat diet impairs hippocampal neurogenesis in male rats. *Eur J Neurol*, 13(12):1385-8.
- Luppino, F.S., Wit, L.M., Bouvy, P.F., Stijnen, T., Cuijpers, P., Penninx, B. & Zitman, F.G. (2010). Overweight, Obesity, and Depression. A Systematic Review and Meta-analysis of Longitudinal Studies. *Arch Gen Psychiatry*, 67(3), 220-29.
- Mansson, M., Holte, J., Landin-Wilhelmsen, K., Dahlgren, E., Johansson, A. & Landén, M. (2008). Women with polycystic ovary syndrome are often depressed or anxious--a case control study. *Psychoneuroendocrinology*, 33(8), 1132-8.
- Miller, A.A. & Spencer, S.J. (2014). Obesity and neuroinflammation: a pathway to cognitive impairment. *Brain, Behaviour and Immunity*, 42, 10-21.
- Moran, L.J., Deeks, A.A., Gibson-Helm, M.E. & Teede, H.J. (2012). Psychological parameters in the reproductive phenotypes of polycystic ovary syndrome. *Hum Reprod*, 27(7), 2082-8.
- Patel, A. (2013). Review: the role of inflammation in depression. *Psychiatric Danub*, Suppl 2, S216-23.
- Rahiminejad, M.E., Moaddab, A., M.D., Rabiee, S., Esna-Ashari, F., Borzouei, S. & Hosseini, S.M. (2014). The relationship between clinicobiochemical markers and depression in women with polycystic ovary syndrome. *J Reprod Med Iran*, 12(12), 811-6.
- Ramos-Rodriguez, J.J., Molina-Gil, S., Ortiz-Barajas, O., Jimenez-Palomares, M., Perdomo, G., Cozar-Castellano, I., Lechuga-Sancho, A. & Garcia-Alloza, M. (2014). Central Proliferation and Neurogenesis Is Impaired in Type 2 Diabetes and Prediabetes Animal Models. *PLoS One*, 9(2): e89229.
- Rasgon, N.L., Rao, R.C., Hwang, S., Altshuler, L.L., Elman, S., Zuckerbrow-Miller, J. & Korenman, S.G. (2003). Depression in women with polycystic ovary syndrome: clinical and biochemical correlates. *J Affect Disord*, 74(3), 299-304.
- Rassi, A., Veras, A.B., dos Reis, M., Pastore, D.L., Bruno, L.M., Bruno, R.V., de Ávila, M.A. & Nardi, A.E. (2010). Prevalence of psychiatric disorders in patients with polycystic ovary syndrome. *Compr Psychiatry*, 51(6), 599-602.
- Rodrigues, C.E., Ferreira, L., Jansen, K., Lopez, M.R., Drews Júnior, C.R. & Souza, L.D. (2012). Evaluation of common mental disorders in women with polycystic ovary syndrome and its relationship with body mass index. *Rev Bras Ginecol Obstet*, 34(10), 442-6.
- Rojas, J., Chavez, M., Olivari, L., Rojas, M., Morillo, J., Mejías, J., Calvo, M. & Bermúdez, V. (2014). Polycystic Ovary Syndrome, Insulin Resistance, and Obesity: Navigating the Pathophysiologic Labyrinth. *International Journal of Reproductive Medicine*, ID719050.
- Rotterdam ESHRE/ASRM-Sponsored PCOS consensus workshop group (2004). Revised 2003 consensus on diagnostic criteria and long-term health risks related to polycystic ovary syndrome (PCOS). *Hum Reprod*, 19(1), 41-47.
- Sahingöz, M., Uguz, F., Gezginc, K. & Korucu, D.G. (2013). Axis I and Axis II diagnoses in women with PCOS. *Gen Hosp Psychiatry*, 35(5), 508-11.
- Schattmann, L. & Sherwin, B.B. (2007a). Effects of the pharmacologic manipulation of testosterone on cognitive functioning in women with polycystic ovary syndrome: a randomized, placebo-controlled treatment study. *Horm Behav*, 51(5), 579-86.
- Schattmann, L. & Sherwin, B.B. (2007b). Testosterone levels and cognitive functioning in women with polycystic ovary syndrome and in healthy young women. *Horm Behav*, 51(5), 587-96.
- Sirmans, S.M. & Pate, K.A. (2013). Epidemiology, diagnosis, and management of polycystic ovary syndrome. *Clin Epidemiol*, 6, 1-13. doi: 10.2147/CLEP.S37559.
- Stein, I.F. & Leventhal, M.L. (1935). Amenorrhea associated with bilateral polycystic ovaries. *Am J Obstet Gynecol*, 29:181-91.
- Tan, S., Hahn, S., Benson, S., Janssen, O.E., Dietz, T., Kimmig, R., Hesse-Hussain, J., Mann, K., Schedlowski, M., Arck, P.C. & Elsenbruch, S. (2008). Psychological implications of infertility in women with polycystic ovary syndrome. *Hum Reprod*, 23(9), 2064-71.
- Tsilchorozidou, T., Overton, C. & Conway, G. (2004). The pathophysiology of polycystic ovary syndrome. *Clinical Endocrinology*; 60, 1-17.
- Udiawar, M., Berlot, R., O'Sullivan, M. & Rees, A. (2014). Reduced cognitive performance and altered white matter microstructure in young insulin-resistant women with polycystic ovary syndrome. *Endocrine Abstracts*, 34 OC6.4.