

✓ PCOS, What is it ?

Polycystic Ovary Syndrome (PCOS) is a complex disorder with important effects of woman's fertility, psychological health and metabolism.



Signs and symptoms of PCOS

- Psychological disorders (anxiety disorders, depression)
- Infertility (irregular menstrual cycles)
- Signs of hyperandrogenism (alopecia, hirsutism, visceral fat)
- metabolic disorders (insulin resistance, metabolic syndrome, prediabetes, type 2 diabetes, and cardiovascular risk)
- Among PCOS women, about 30% ~ 40% of normal-weight women and about 80% of obese women have insulin resistance

PCOS diagnosis according to Rotterdam criteria

2 symptoms out of 3



Polycystic Ovary

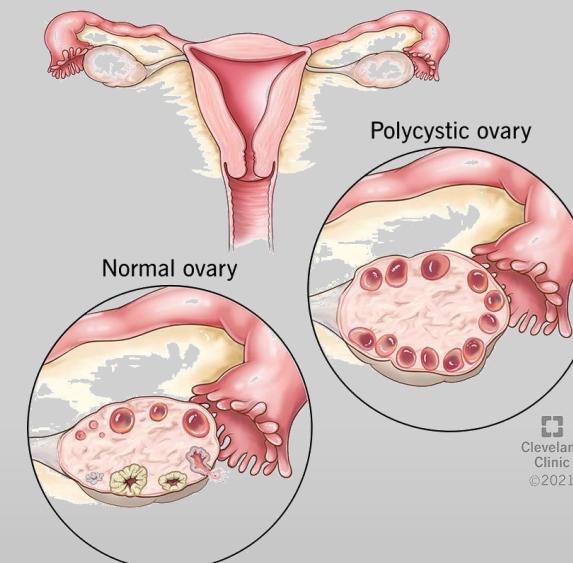


Menstrual irregularities



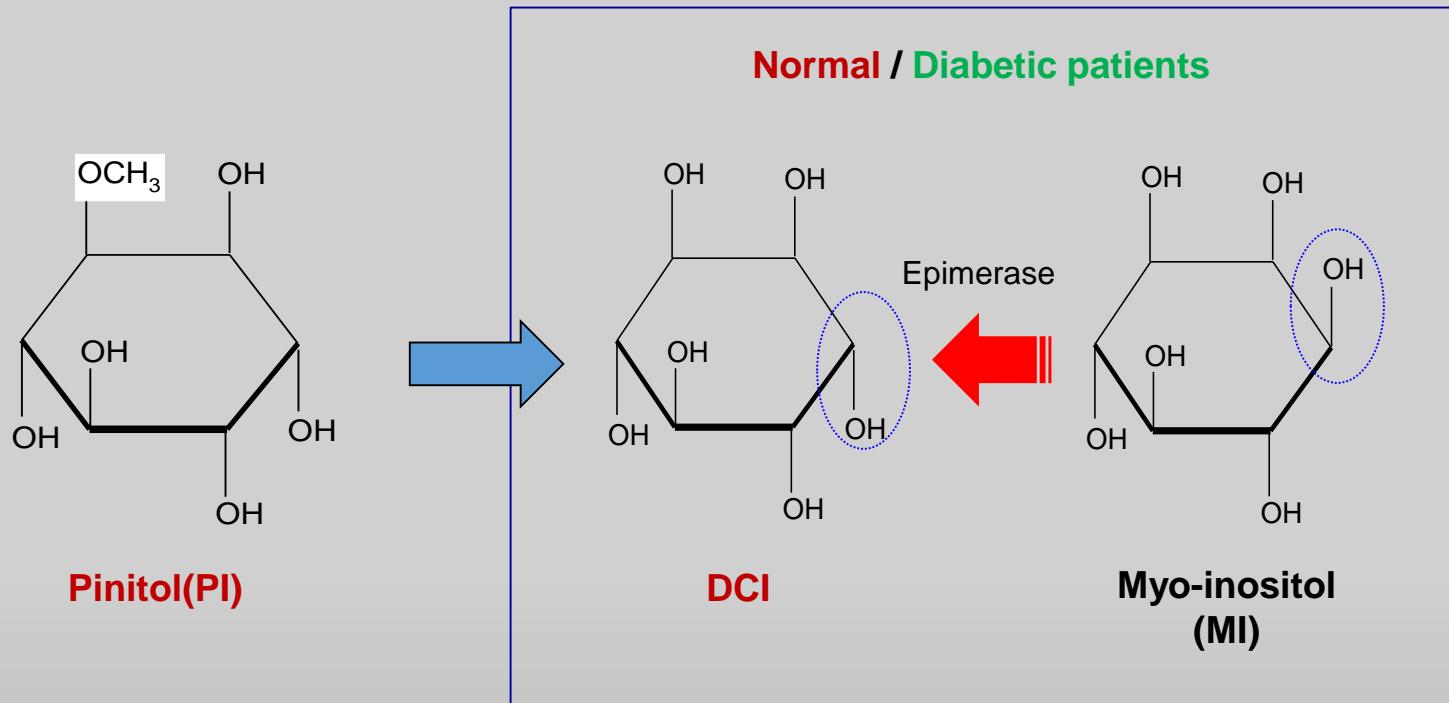
Hyperandrogenism

+ insulin resistance

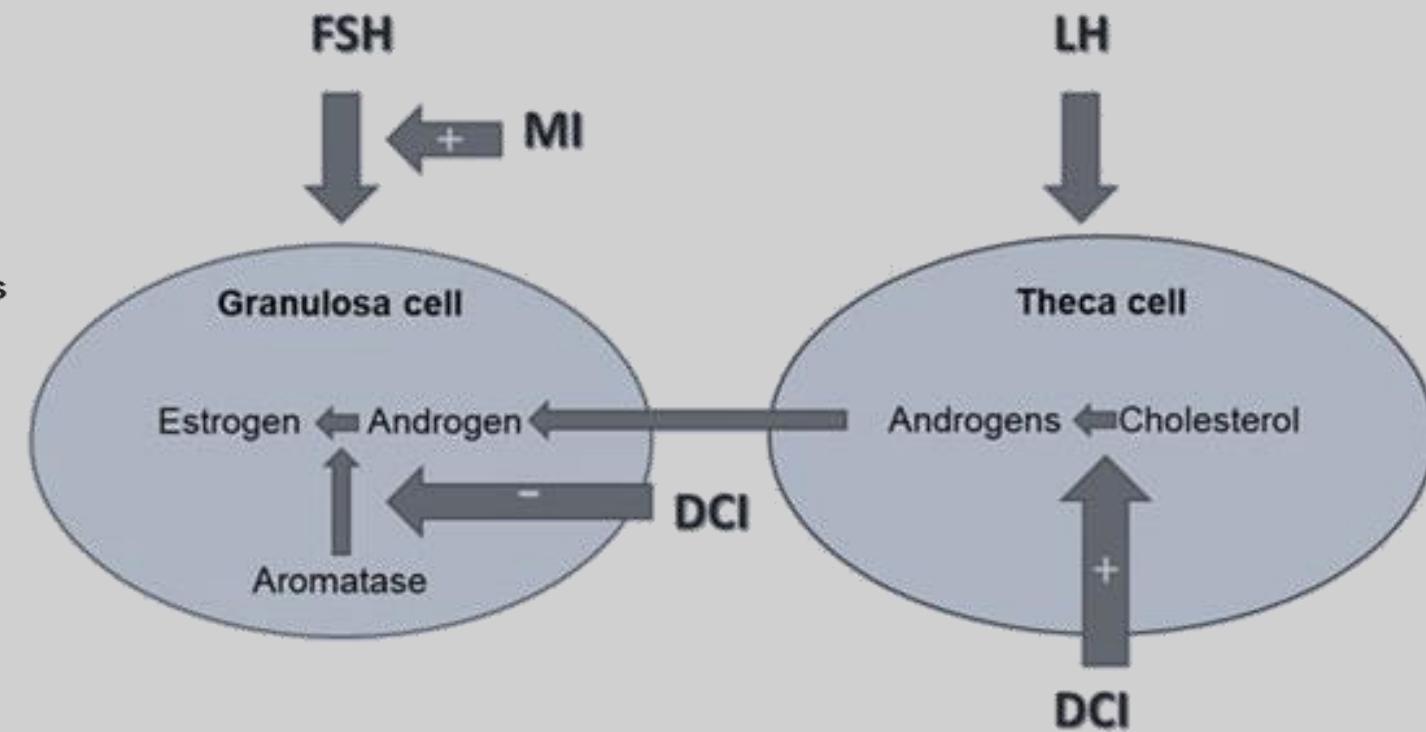
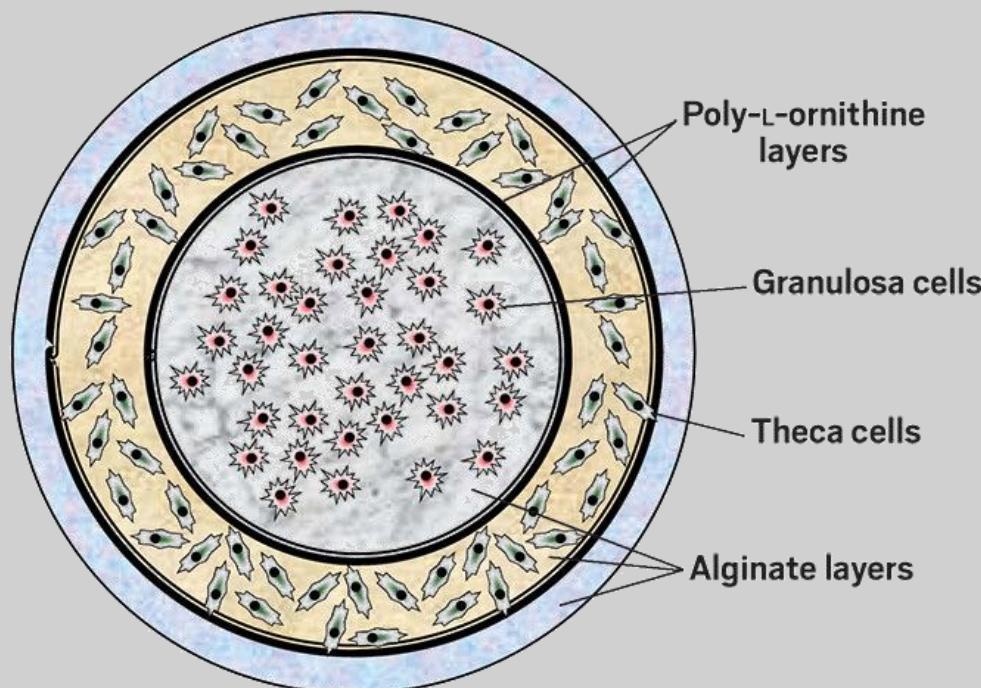


✓ DCI Functionality

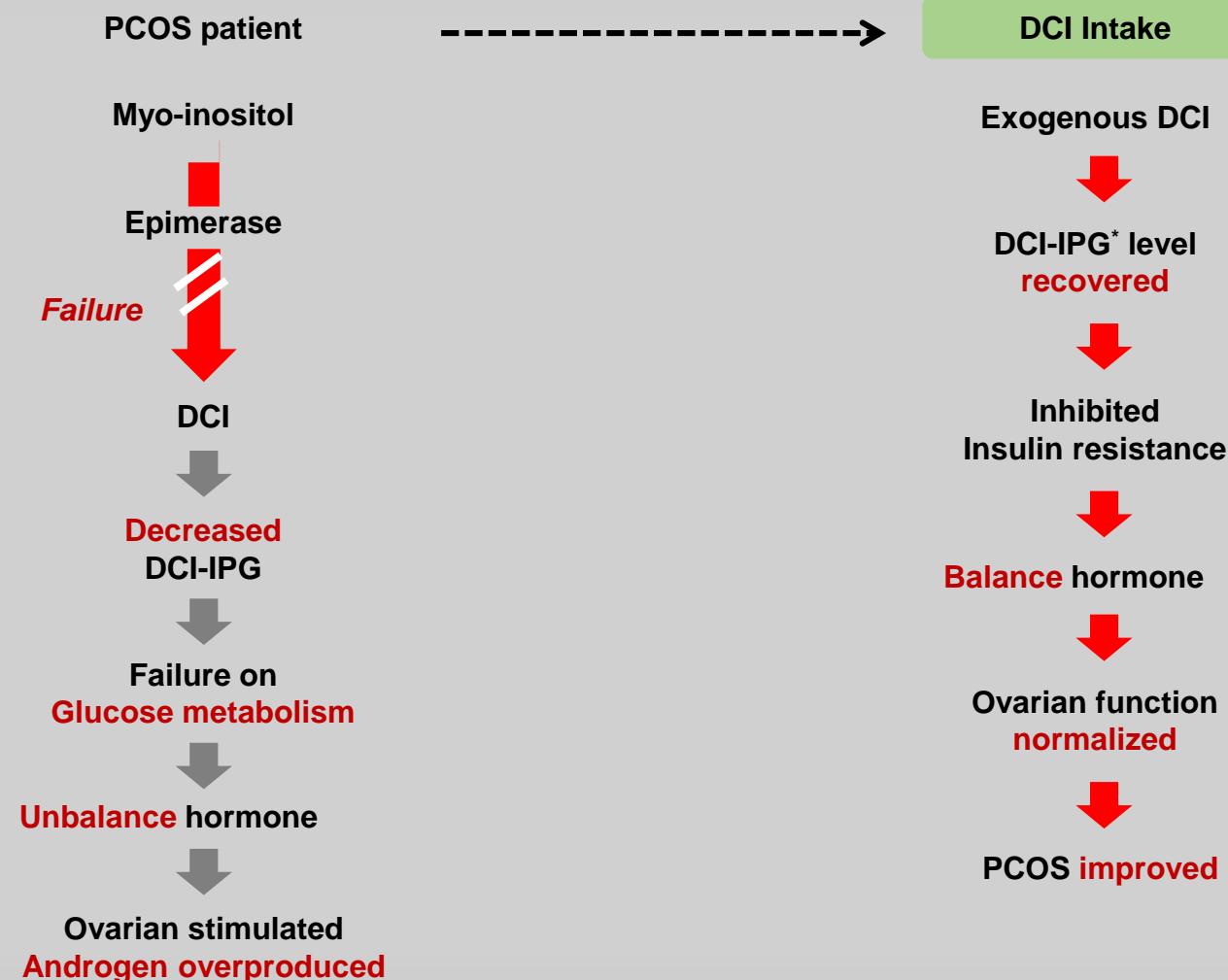
- Mediates the action of insulin
- It is involved in the synthesis of insulin-dependent androgens
- Promotes glucose storage
- Acts as an aromatase modulator



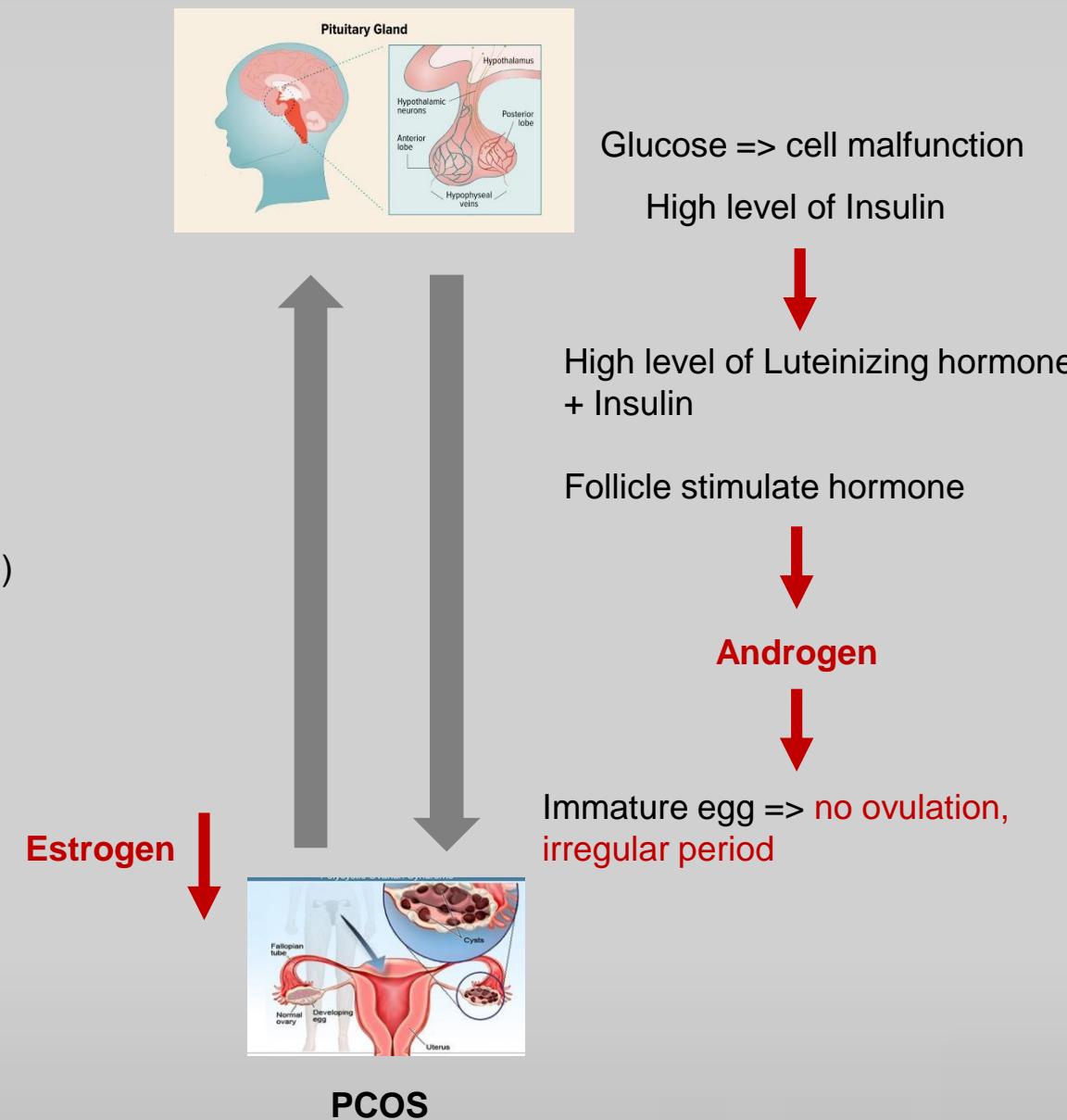
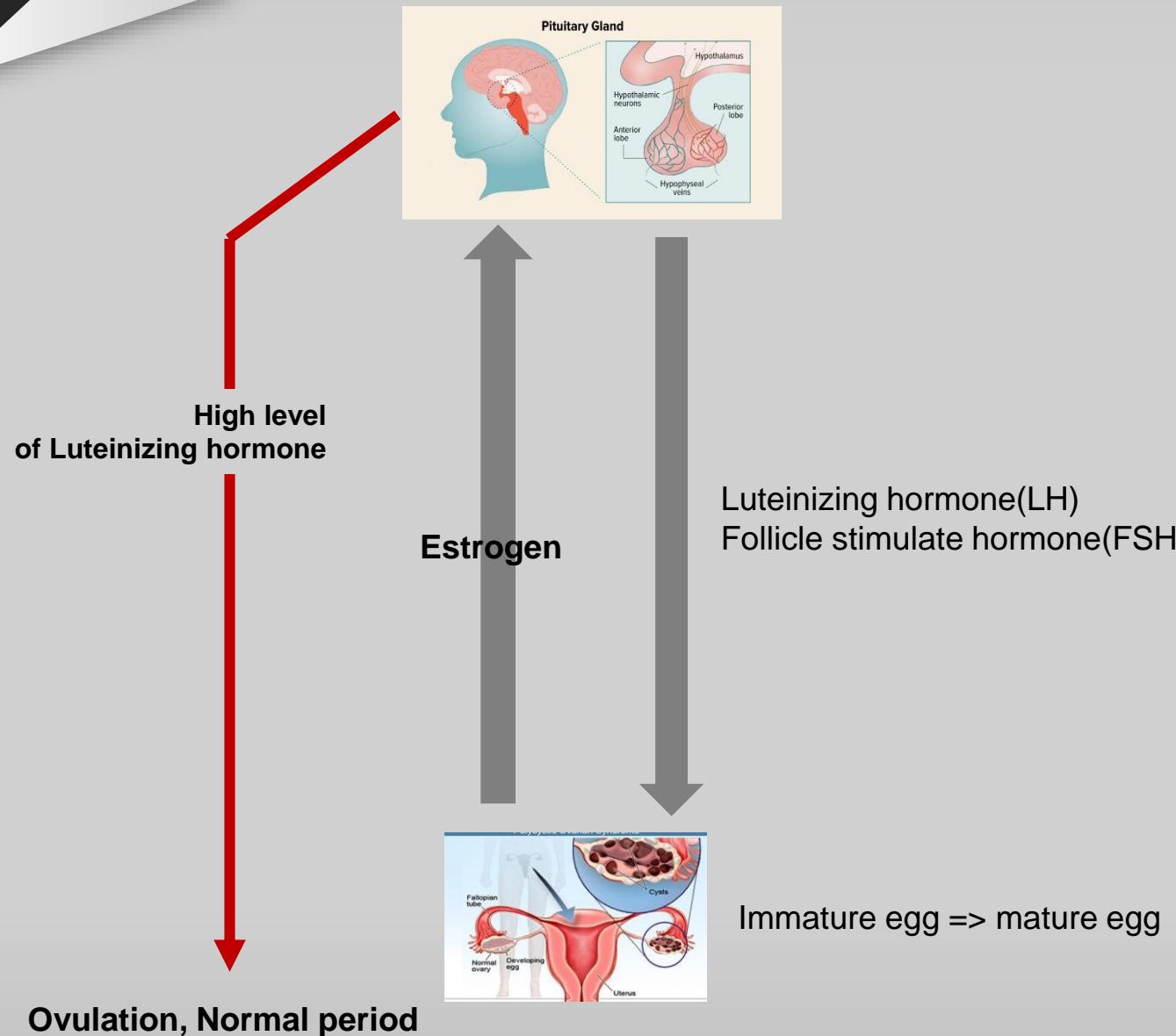
✓ DCI MECHANISM



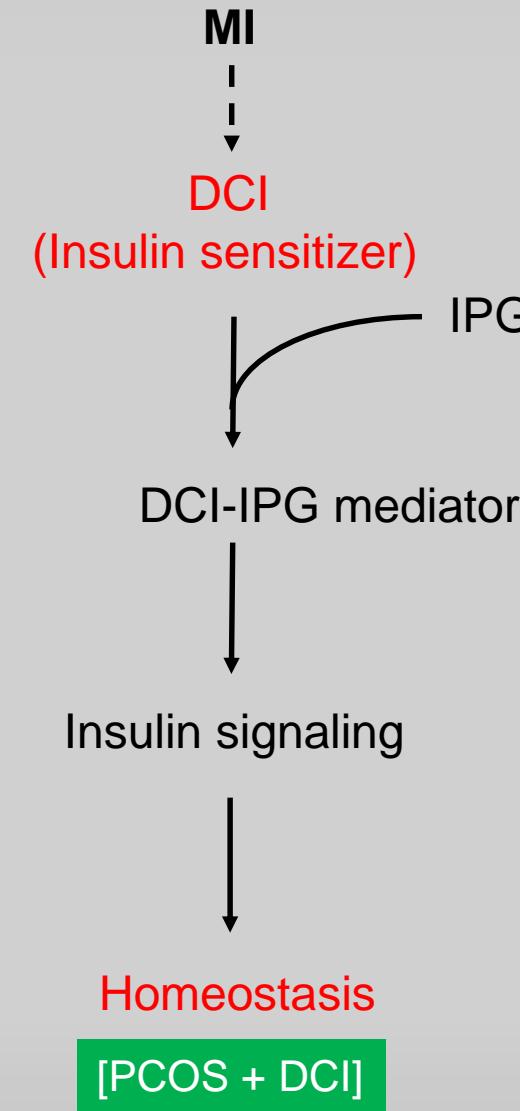
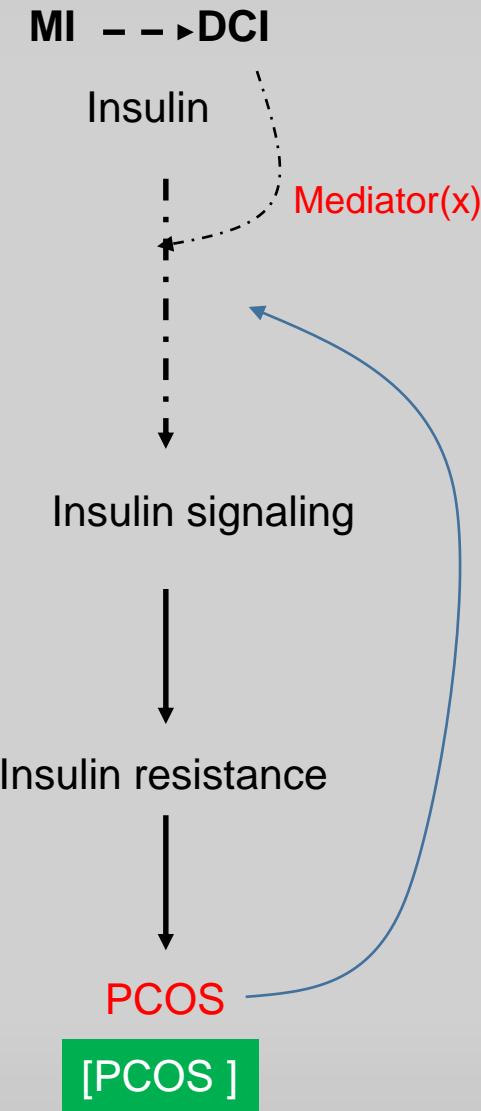
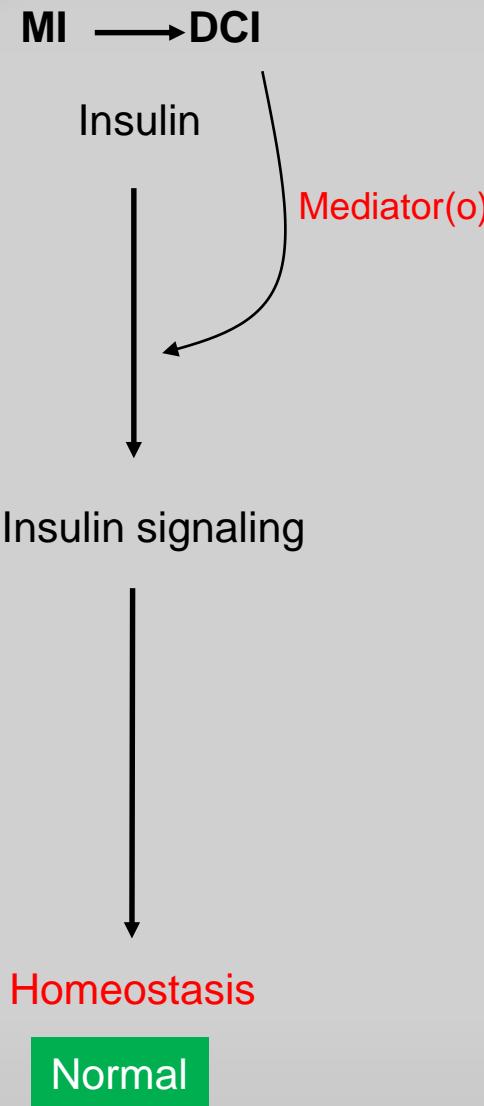
✓ DCI Benefits



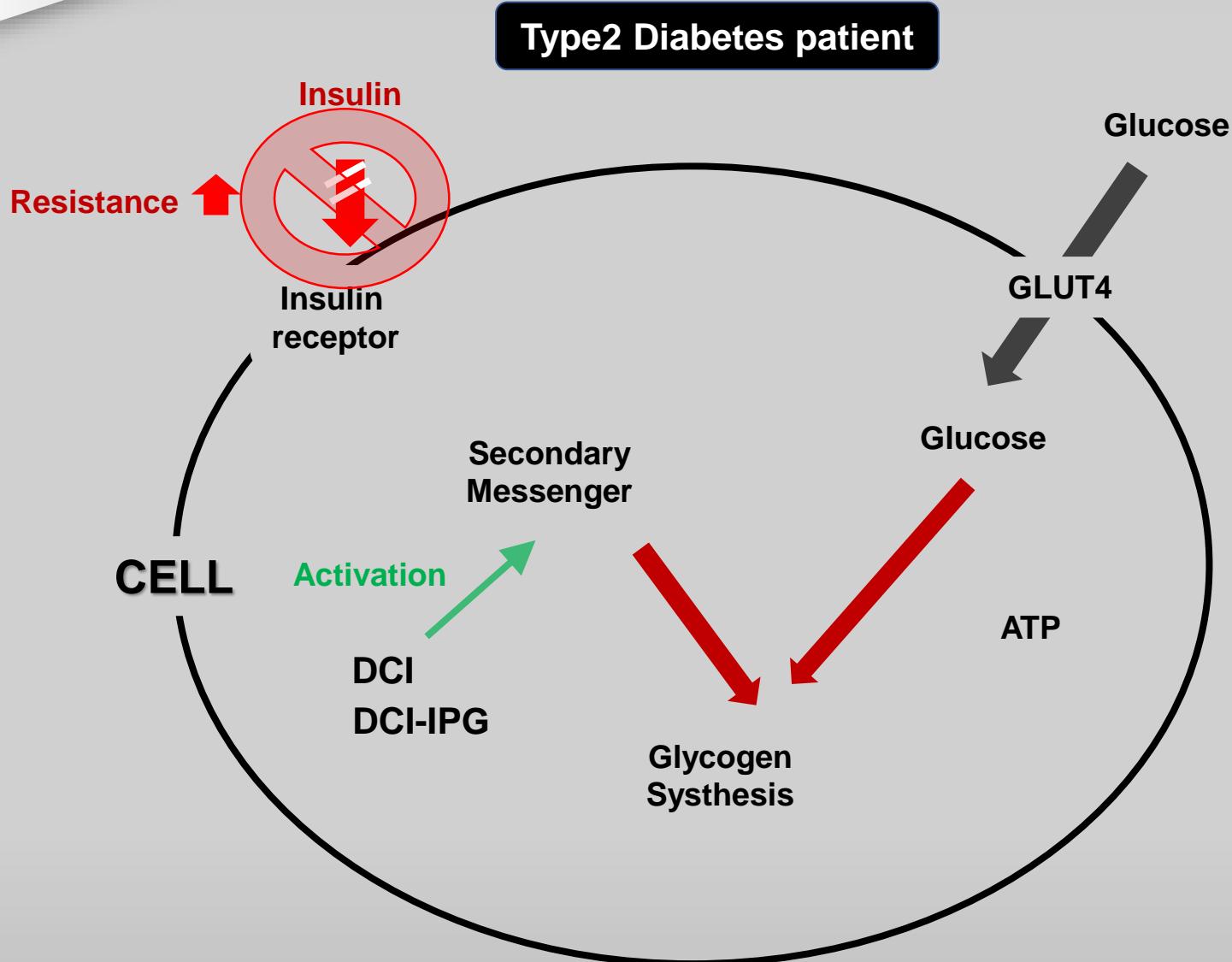
✓ DCI Benefits



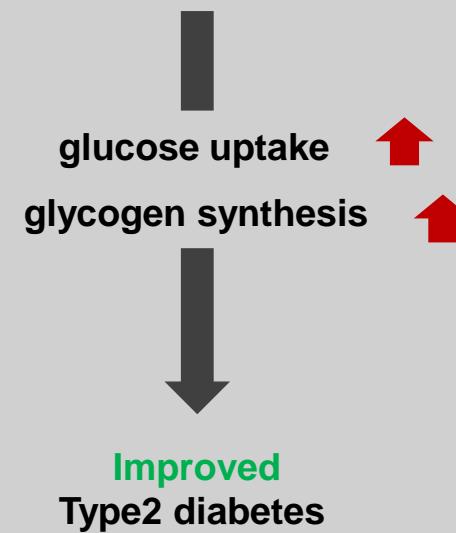
✓ **DCI Benefits**



✓ DCI Benefits



DCI activate
Secondary Messenger In cell



✓ DCI Benefits

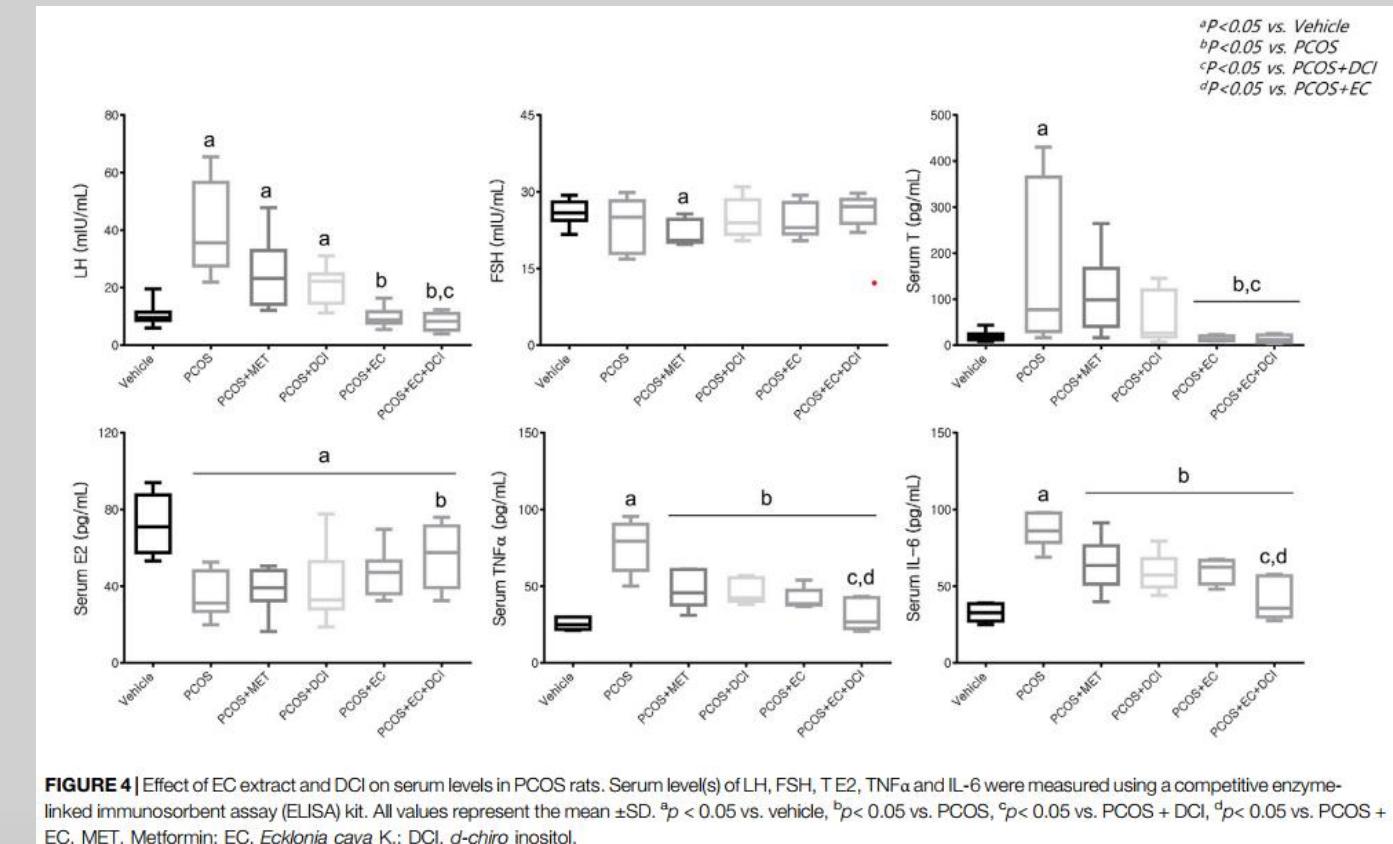
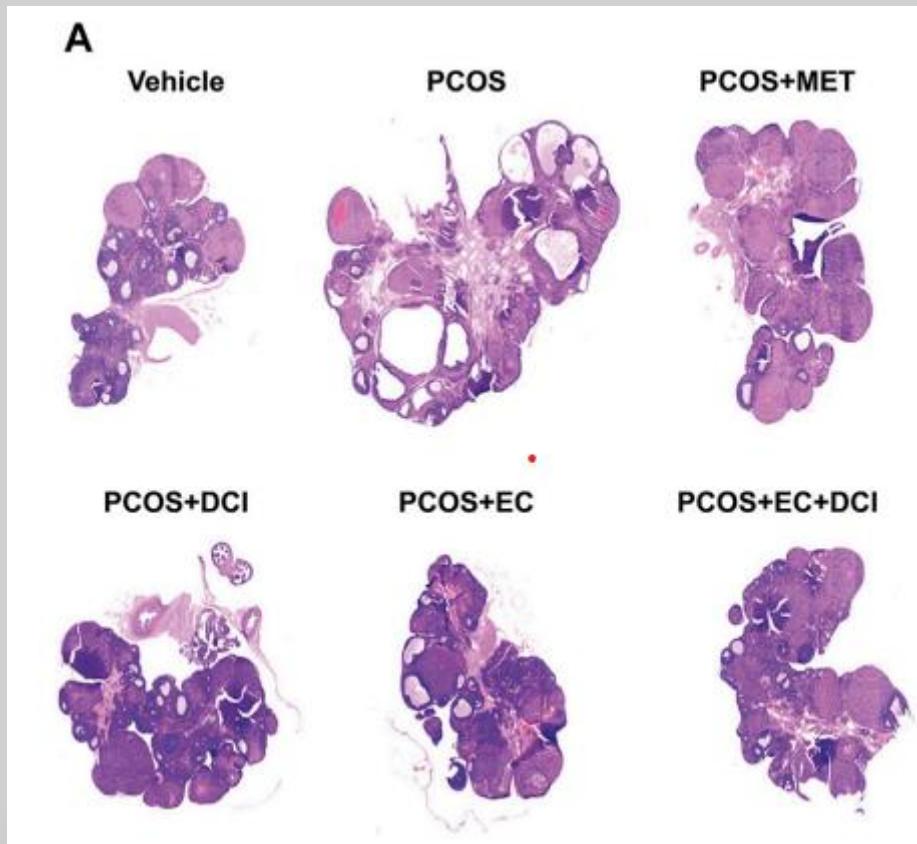


FIGURE 4 | Effect of EC extract and DCI on serum levels in PCOS rats. Serum level(s) of LH, FSH, TE2, TNF α and IL-6 were measured using a competitive enzyme-linked immunosorbent assay (ELISA) kit. All values represent the mean \pm SD. ^a*p* < 0.05 vs. vehicle, ^b*p* < 0.05 vs. PCOS, ^c*p* < 0.05 vs. PCOS + DCI, ^d*p* < 0.05 vs. PCOS + EC. MET, Metformin; EC, Ecklonia cava K.; DCI, d-chiro inositol.

✓ DCI Benefits

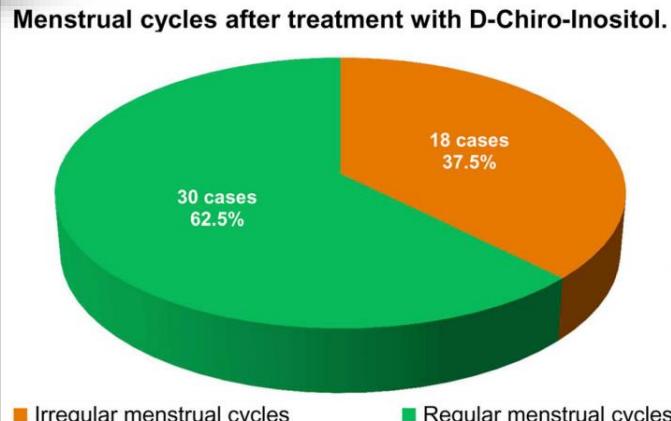


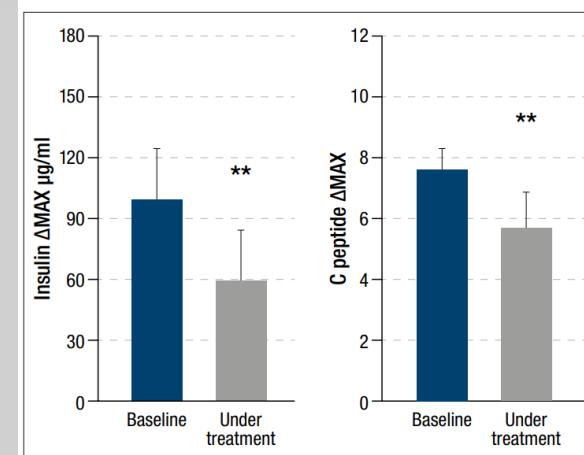
Fig. 2 Menstrual cycles after treatment with d-Chiro-Inositol

Table 1: features of 50 females

Charac	Group i		Group ii	
	Baseline	After	Baseline	After
Age	29±9		30±9	
Bmi	26.6±3.7		25.8±4.2	
Obs	12 (43%)		10 (40%)	
Dm	6 (21%)		4 (16%)	
Lh	19.6±4.8	14.74±4. 52*	17.72±3.31	17.22±3. 99
Fsh	13.59±3.2	10.19±3. 03**	13.6±2.96	13.03±3. 02
Testosteron e levels	91.7±13.80	79.47±2 4.4***	90.04±14.75	86.08±1 8.23

0.05. (P value less than 0.05).

Figure 1 Maximal insulin (left) and c-peptide responses (right) (Δ_{max}) to OGTT in all PCOS patients under study. ** p< 0.005.



1. Improvement on **Menstrual Irregularity** by DCI Intake
2. Lowering **Androgen Levels** by DCI Intake
3. Improvement on **overweight & Hormone regulation** by DCI Intake
4. Improvement on **Hormone regulation & Glycemia, Insulinemia** by DCI Intake

