"A Study To Assess The Effectiveness of Structured Teaching Programme Regarding Knowledge on Prevention of Polycystic Ovarian Syndrome Among The Students of Girl's Hostel of IUST Awantipora"

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ABSTRACT

Polycystic Ovarian Syndrome is a polygenic gynecological endocrinopathy presenting combinations of signs and symptoms and range of phenotypes, which may include reproductive endocrine and metabolic alterations. This condition is also named as schlerocystic ovaries, multicystic ovaries and Stein Leventhal Syndrome.

Method: A Pre experimental one group pre-test posttest design was carried out on225 **female** students residing on Girls Hostel **IUST Awantipora** among which 55 girls were selected by using Simple Random Sampling Technique.**,** who were willing to participate in the study and present at data collection time . Pre- Test questionnaire were given to the sample and they took 30-45 minutes for answering it. On day 5th Structured Teaching Programme on knowledge regarding prevention of PCOS was given for 45 minutes via zoom. On 12th day the same questionnaire was provided to the samples and were asked them to answer, they took only 20-25 minutes to complete the questionnaire.

Result: Study results revealed that after giving knowledge the overall pretest knowledge mean was 23.01 with standard deviation of 5.75. The highest mean was 18.32 with standard deviation of 4.97 in relation to knowledge and prevention of PCOS and lowest mean was 4.67 with standard deviation of 1.503 in relation to introduction, anatomy and physiology of ovaries.

Conclusion: structured teachingwas useful method toto increase knowledge regarding Polycystic Ovarian Syndrome (PCOS).

PCOS is characterized by hypothalamic –pituitary ovary axis dysfunction and anovulation. Anovulation attributed to PCOS includes androgen excess, subtle alterations in serum levels of gonadotropin and estrogen and increased levels of Anti-Mullerian Hormone. 60-80% of affected women showshyperandrogenism. Due to altered GnRH release, there is increased luteinizing hormone [LH], which plays an important role in PCOS pathophysiology and infertility. Fertility complications may be attributed to the elevated hormones, insulin or glucose levels of which can interfere with implantation and development of the embryo. LH excess decreases the chance of conception and increases miscarriage. Furthermore insulin imbalance may reduce egg quality making conception more difficult. PCOS if left untreated has the potential for serious consequences, including increased risk for the development of endometrial hyperplasia and neoplasia.[5]

The emotional distress of women associated with the disorder may have psychosocial and/pathophysiological causes such as hirsutism, acne, obesity, alopecia and infertility. The prevalence of psychiatric morbidity has been witnessed to be highest in Kashmir [52.7%].[2]

Management of Polycystic ovarian Syndrome includes symptom relief, planning safe fertility, general wellbeing and prevention of long term consequences. According to PCOS management guidelines linked by Royal College of