

Polycystic ovary syndrome: assessment and management

Consultation on draft scope – deadline for comments 5PM on 21/05/2025

email: Guidelines2@nice.org.uk

Checklist for submitting comments

- Use this comment form and submit it as a **Word document (not a PDF)**.
- Complete the disclosure about links with, or funding from, the tobacco industry.
- Include **page and line number (not section number)** of the text each comment is about.
- Combine all comments from your organisation into 1 response. **We cannot accept more than 1 comments form from each organisation.**
- Do not paste other tables into this table – type directly into the table.
- Ensure each comment stands alone; do not cross-refer within one comment to another comment.
- **Clearly mark any confidential information or other material that you do not wish to be made public with underlining and highlighting. Also, ensure you state in your email to NICE that your submission includes confidential comments.**
- **Do not name or identify any person or include medical information about yourself or another person** from which you or the person could be identified as all such data will be deleted or redacted.
- Spell out any abbreviations you use
- For copyright reasons, **do not include attachments** such as research articles, letters or leaflets. We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without attachments, but it must be received by the deadline.
- **We do not accept comments submitted after the deadline stated for close of consultation.**

Note: We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory Committees.

	<p>Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly or arrive after the deadline.</p> <p>In addition to your comments below, we would like to hear your views on these questions:</p> <ol style="list-style-type: none"> Are there any cost saving interventions or examples of innovative approaches that should be considered for inclusion in this guideline? <p><i>Lifestyle interventions should be included as wrap-around care to maximise effectiveness of all treatment options.</i></p> <p>Developing NICE guidance: how to get involved has a list of possible areas for comment on the draft scope.</p>
<p>Organisation name – stakeholder or respondent (if you are responding as an individual rather than a registered stakeholder please specify).</p>	<p>[Insert organisation name or “individual”]</p> <p>British Association for Nutrition and Lifestyle Medicine (BANT)</p>
<p>Disclosure (please disclose any past or current, direct or indirect links to, or funding from, the tobacco industry).</p>	<p>[Insert disclosure here]</p> <p>None</p>
<p>Name of person completing form</p>	<p>[Insert your name here] Dr Susan McGinty</p>

Comment number	Page number or ' general ' for comments on the whole document	Line number or ' general ' for comments on the whole document	<p style="text-align: center;">Comments</p> <p style="text-align: center;">Insert each comment in a new row.</p> <p>Do not paste other tables into this table, as your comments could get lost – type directly into this table.</p>
1	General	General	<p>Insulin resistance (IR) is a major driver of PCOS pathophysiology. IR assessment, especially in early stages of PCOS, and effective evidence-based lifestyle interventions are essential to reduce risk of long-term complications, including cardiovascular disease risk. Scope of this guideline should maximise interventions to improve insulin sensitivity. All comments below are to reflect IR management.</p> <p>Refs:</p> <ol style="list-style-type: none"> 1) Zhao H, Zhang J, Cheng X, Nie X, He B. Insulin resistance in polycystic ovary syndrome across various tissues: an updated review of pathogenesis, evaluation, and treatment. <i>J Ovarian Res.</i> 2023 Jan 11;16(1):9. doi: 10.1186/s13048-022-01091-0. PMID: 36631836; PMCID: PMC9832677. 2) Purwar A, Nagpure S. Insulin Resistance in Polycystic Ovarian Syndrome. <i>Cureus.</i> 2022 Oct 16;14(10):e30351. doi: 10.7759/cureus.30351. PMID: 36407241; PMCID: PMC9665922.
2	002	8	Amend to “1.9 Impaired glucose tolerance, insulin resistance and type 2 diabetes”
3	003	20	<p>New item on Infertility: 5.10 Lifestyle interventions to reduce insulin resistance</p> <p>Ref:</p> <ol style="list-style-type: none"> 1) Lei R, Chen S, Li W. Advances in the study of the correlation between insulin resistance and infertility. <i>Front Endocrinol (Lausanne).</i> 2024 Jan 26;15:1288326. doi: 10.3389/fendo.2024.1288326. PMID: 38348417; PMCID: PMC10860338. 2) Li H, Tan H, OuYang Z, Hu X, Bao Y, Gao T, Hua W. Association between METS-IR and female infertility: a cross-sectional study of NHANES 2013-2018. <i>Front Nutr.</i> 2025 Feb 28;12:1549525. doi: 10.3389/fnut.2025.1549525. PMID: 40093882; PMCID: PMC11906314.

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