

Dietary intervention versus metformin to improve the reproductive outcome in women with polycystic ovarian syndrome

To the Editor

I have read the article “Dietary intervention versus metformin to improve the reproductive outcome in women with polycystic ovarian syndrome” by Qublan et al.¹ However, I have few queries, which I require clarification from the authors. The pregnancy rates observed were after how much duration of follow up, and was metformin continued in the first trimester of pregnancy as it is shown to decrease the rate of spontaneous abortions?² Both groups showed similar weight loss, and improvement in the condition. The drug specific effect of metformin in the second group was not evident. In treatment of polycystic ovarian syndrome (PCOS) patients, both weight reduction, and insulin sensitizers have a significant role, and authors demonstrated that simple weight loss is equally efficacious to metformin. This needs more explanation, as it is a remarkable new suggestion. Metformin is described as weight neutral, or at the most responsible for minimal weight loss.³ The weight loss in the group receiving metformin is significant in the study population. What was the dietary advice given to that group? Based on the provided data, it appeared that the homeostasis model assessment for insulin resistance was not significantly different from either group.⁴ This suggests that metformin is equal to weight loss in ameliorating insulin resistance, which may not be true. The inclusion criteria described

patients to be clomiphene resistant, and again the same drug was used later on. The justification for the reuse of clomiphene was not provided. The use of alternative drugs like Letrozole may have been better with good results.⁵ I would like to thank the authors for an interesting paper highlighting the importance of weight loss in management of PCOS patients.

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Reply from the Author

No reply was received from the Author

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