

The global burden of androgen excess

Educational Slide Kit

Module 1

The AWARE group is a panel of independent physicians with an expert interest in androgen excess in women. Formation of the AWARE group and its ongoing work is supported and funded by Bayer AG.

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- Which of these typical skin symptoms of androgen excess is the most commonly used marker?
 - A. Seborrhea
 - B. Hirsutism
 - C. Acne
 - D. Alopecia

Testing your knowledge

rsutism be present in women with

2. How often can hirsutism be present in women with androgen excess?

- A. In 2 out of 10 women
- B. In 4 out of 10 women
- C. In 6 out of 10 women
- D. In 8 out of 10 women



- 3. How frequently does alopecia occur in women with androgen excess due to PCOS?
 - A. Women with PCOS are not affected by alopecia
 - B. 1 out of 3 women are affected
 - C. 1 out of 5 women are affected
 - D. 1 out of 10 women are affected



- 4. When looking at the impact of hyperandrogenic skin symptoms, what proportion of women with hirsutism also report anxiety symptoms?
 - A. Women with hirsutism are rarely affected by anxiety
 - B. Approximately 25% of women are affected by anxiety
 - C. Approximately 50% of women are affected by anxiety
 - D. Approximately 75% of women are affected by anxiety

Module content



- Defining androgen excess and its prevalence
- The burden of androgen excess
- Hyperandrogenic skin symptoms impact on:
 - Quality of life
 - Health and wellbeing
 - Healthcare systems

Defining androgen excess

Defining androgen excess



Androgen excess in women can be characterised by either clinical symptoms of hyperandrogenism and/or biochemical hyperandrogenism¹

Clinical hyperandrogenism

Clinical hyperandrogenism, where the pilosebaceous unit has increased sensitivity to normal serum androgen levels and causes hyperandrogenic skin symptoms. Clinical and biochemical hyperandrogenism

Biochemical hyperandrogenism

Biochemical hyperandrogenism, where there is excessive production and/or secretion of androgens, which may be of ovarian or adrenal origin

Prevalence and presentation of androgen excess

Androgen excess* is the most common reproductive endocrine disorder in women¹



*Biochemical and/or clinical

It affects up to 1 in 5 women of reproductive age²



The majority of women with hyperandrogenism (80–85%) have polycystic ovary syndrome (PCOS)^{3,4}

1. Yildiz, B. Best Practice Res Clin Endocrinol Metabol 2006;20(2):167–176; 2. Lizneva D, et al. Fertil Steril 2016;106(1):6–15; 3. Ehrmann DA. N Engl J Med 2005; 352(12):1223–1236; 4. Carmina E, et al. J Clin Endocrinol Metab 2006;91(1):2–6; 5. Bitzer J, et al. Eur J Contracept Reprod Health Care. 2017;22:172-182

Women can present with a combination of different symptoms^{1,2}





In some cases, women present with all four hyperandrogenic skin symptoms, described as the SAHA syndrome^{3,4}

1. Yildiz, B. Best Practice Res Clin Endocrinol Metabol 2006;20(2):167–176; 2. Ozdemir S, et al. Acta Obstet Gynecol Scand 2010;89:199–204; 3. Orfanos CE, et al. Horm Res. 2000;54:251-8; 4. Fauser BCJM, et al. Fertil Steril 2012;97:28–38

Hirsutism is the most commonly used marker for diagnosis of androgen excess¹

- It is present in up to 8 out of 10 women with androgen excess^{1*} Indicated by excess body or facial terminal (coarse) hair growth in females in a male-like pattern²
- Prevalence varies according to ethnicity²

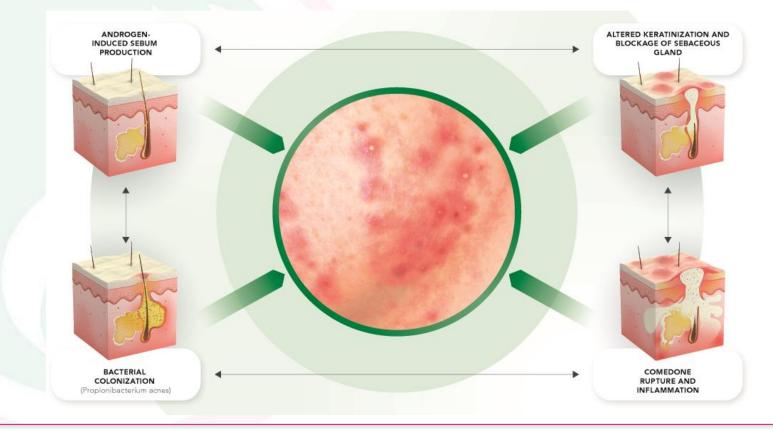


*Depending on criteria for definition and population studies

Acne is an extremely common, chronic skin condition^{1,2}



Acne is caused by androgen excess in approximately
 1 in 6 women³



Alopecia in women is most commonly caused by androgen excess¹

- Affects approximately 1 in 3 of women with PCOS²
- Characterised by overall thinning of scalp hair mainly in frontal and parietal areas¹
- Commonly presents with other skin symptoms of androgen excess¹



Seborrhea can also present as a symptom of androgen excess¹

- Often occurs alongside other skin symptoms of androgen access (SAHA syndrome)¹
- Presents in approximately 1 in
 5 women with hyperandrogenism
- Is a useful marker of androgen metabolic disorders²





The burden of androgen excess

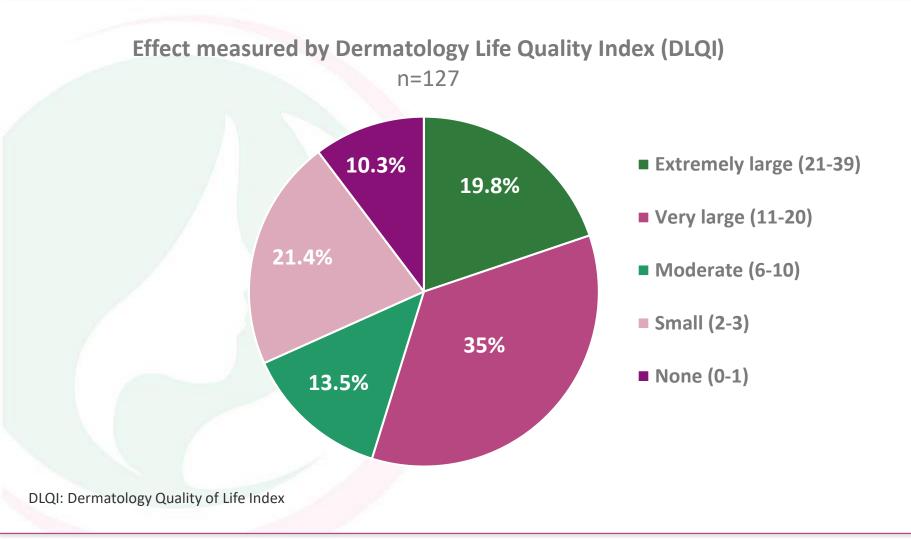
Hyperandrogenic skin symptoms cause significant quality of life and psychological impairment¹⁻³

- Both hirsutism and acne can significantly and negatively impact on quality of life and cause anxiety and depression¹⁻³
- Alopecia has a negative effect on self-esteem, psychological wellbeing and body image³



Hirsutism can significantly and negatively impact on quality of life¹





Hirsutism negatively affects multiple healthrelated quality of life domains¹



Acne also has a significant impact on quality of life¹⁻⁴

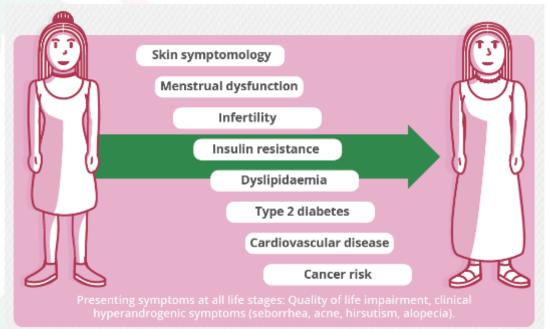


Clinically important depression and anxiety have been reported in **18%** and **44%** of acne patients respectively⁴

Anxiety Depression Suicidal thoughts Self-esteem Low mood Poorer social functioning

Androgen excess due to <u>biochemical</u> hyperandrogenism may have long-term impact on general health¹⁻³

With increasing age, there is a change in presenting symptoms and health implications



- Women with abnormalities in androgen metabolism may have accompanying anovulation and/or polycystic ovary syndrome (PCOS)
- These have reproductive and metabolic implications if left untreated

Androgen excess represents a significant financial burden to healthcare systems¹



	Symptoms included in literature review	Prevalence (%)	Annual cost in millions US\$ (% of total)
Initial evaluation			99 (2.3)
Treatment			
	Menstrual dysfunction/abnormal uterine bleeding	75	1350 (30.9)
<	Hirsutism*	70	622 (14.2)
	Infertility	50	533 (17.2)
	Type 2 diabetes	7.2	1766 (40.4)
Total cost			4370

* Treatment of hirsutism includes both cosmetic and hormonal therapies but does not take into account management of psychological and QoL impact or women's own expenditure on treatment





- Androgen excess affects up to 1 in 5 women of reproductive age¹
- Presenting symptoms include hyperandrogenic skin symptoms (Seborrhea, Acne, Hirsutism and Alopecia) alone or in combination with menstrual irregularities and infertility^{2,3,4}
- It is associated with <u>significant</u> quality of life impairment and <u>negative</u> quality of life^{5,6,7}
- Although data is limited, evidence shows it can be a significant economic burden⁸

1. Lizneva D, et al. Fertil Steril 2016;106(1):6–15; 2. Orfanos CE, et al. Horm Res. 2000;54:251-258; 3. Fauser BCJM, et al. Fertil Steril 2012;97:28–38; 4. Ekbäck MP, et al. 2013;227(3):278–84; 5. Gupta MA & Gupta AK. Br J Dermatol 1998;139(5):846–50; 6. Sawaya ME. Dermatol Clin 1997;15(1):37-43; 7. Yildiz, B. Best Practice Res Clin Endocrinol Metabol 2006;20(2):167–176; 8. Azziz R, et al. J Clin Endocrinol Metab 2005;90:4650–8



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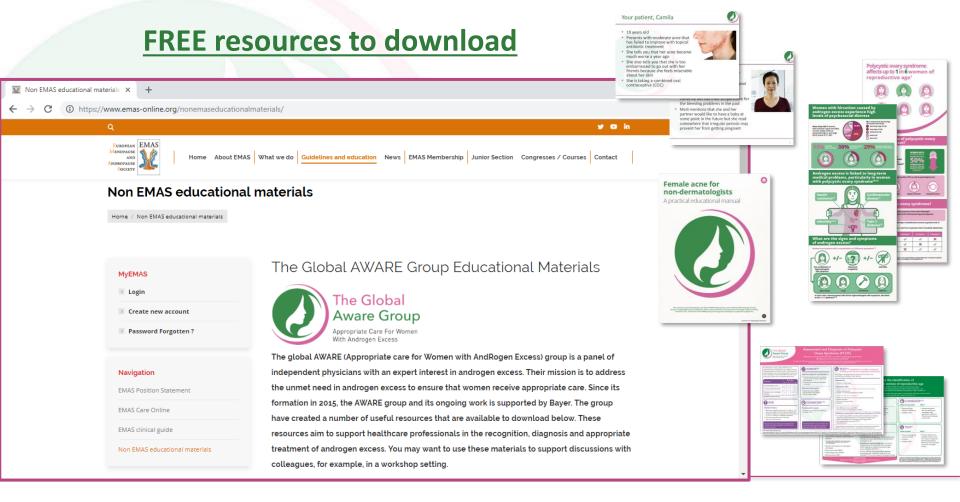
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Find The Global AWARE Group educational materials on the European Menopause & Andropause Society website

https://www.emas-online.org/nonemaseducationalmaterials/



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