Chapter 63:

LEARNING OBJECTIVES

On completion of the chapter, the reader will be able to:

1. Describe the underlying etiology of amenorrhea, menorrhagia, anovulatory bleeding, and dysmenorrhea.
2. Describe the pathophysiology of amenorrhea, menorrhagia, anovulatory bleeding, and dysmenorrhea.
3. Explain how the pathophysiology of amenorrhea, menorrhagia, anovulatory bleeding, and dysmenorrhea relates to the selection of effective treatment modalities.
4. Differentiate between premenstrual syndrome and premenstrual dysphoric disorder with respect to pathophysiology and clinical presentation.
5. Differentiate between premenstrual syndrome and premenstrual dysphoric disorder relative to their respective treatment(s).
6. Describe the clinical presentation of amenorrhea, menorrhagia, anovulatory bleeding, dysmenorrhea, and premenstrual dysphoric disorder.
7. Identify the potential negative health implications of amenorrhea, menorrhagia, and polycystic ovary syndrome.
8. Recommend appropriate lifestyle and dietary modifications for patients with amenorrhea, menorrhagia, anovulatory bleeding, dysmenorrhea, premenstrual symptoms, and premenstrual dysphoric disorder.
9. Recommend appropriate pharmacologic interventions for patients with amenorrhea, menorrhagia, anovulatory bleeding, dysmenorrhea, premenstrual symptoms, and premenstrual dysphoric disorder.
10. Compare the available therapeutic options for patients with amenorrhea, menorrhagia, anovulatory bleeding, and dysmenorrhea dependent upon patient age, concomitant disease states (when necessary), and desire for contraception.
11. Evaluate the role(s) of metformin and the thiazolidinediones in the management of polycystic ovary syndrome.
12. Identify the desired therapeutic outcomes for patients with amenorrhea, menorrhagia, anovulatory bleeding, dysmenorrhea, premenstrual symptoms, and premenstrual dysphoric disorder.
13. Identify the time frame within which the desired therapeutic outcomes for amenorrhea, menorrhagia, anovulatory bleeding, dysmenorrhea, and premenstrual dysphoric disorder should be observed.
14. Design a monitoring plan to assess the pharmacotherapeutic efficacy for the treatment of amenorrhea, menorrhagia, anovulatory bleeding, premenstrual symptoms, and premenstrual dysphoric disorder.
15. Design a monitoring plan to evaluate and manage the occurrence of side effects associated with the treatment of amenorrhea, menorrhagia, anovulatory bleeding, premenstrual symptoms, and premenstrual dysphoric disorder.