This guideline was developed as outlined in National Health and Medical Research Council (NHMRC) standards and procedures for rigorously developed external guidelines and according to the GRADE (Grading of Recommendations, Assessment, Development and Evaluation) approach.[16] These methods were aligned with European Society of Human Reproduction and Embryology (ESHRE) guideline development methods.

The work builds on the original Australian guideline in PCOS, the update in 2014, the World Health Organisation (WHO) guideline evidence synthesis in infertility management, and the International guideline in the assessment and management of PCOS.[1]

The International evidence–based guideline for the assessment and management of PCOS underpins an international initiative to engage women affected by PCOS and their healthcare professionals to improve health outcomes. The Centre for Research Excellence in PCOS (CRE PCOS) and the CRE in Women's Health in Reproductive Life (CRE WHiRL), funded by the NHMRC and led by Monash University, partnered with the American Society for Reproductive Medicine, the Endocrine Society, the European Society of Endocrinology and the European Society of Human Reproduction and Embryology. Extensive international health professional and consumer engagement informed the gaps, needs, priorities and core clinical outcomes for the guideline, through the CRE, partners and the 40 organisations engaged in formal collaboration.

Guideline development groups (GDGs) included members nominated by the engaged international societies. Society-nominated panel members included women with PCOS, paediatricians, endocrinologists, gynaecologists, primary care physicians, reproductive endocrinologists, psychologists, dietitians, exercise physiologists, public health experts, researchers and other co-opted experts including in sleep and bariatric/metabolic surgery. Other experts were engaged outside GDG meetings where specific individual questions required including dermatology and psychiatry. They were supported by an experienced project management, evidence synthesis team and international early career network and the translation team to develop the guideline. Here we provide a comprehensive review of the evidence and formulate recommendations using the GRADE Framework.

Governance and process

Governance included an international advisory panel from across the continents, a management committee, five GDGs, a paediatric advisory panel, and a translation and consumer committees (See Figure 1). CRE PCOS and CRE WHIRL, funded by NHMRC and led by Monash University, partnered with the American Society for Reproductive Medicine, the Endocrine Society, the European Society of Endocrinology and the European Society of Human Reproduction and Embryology and collaborated with a further 36 organisations. The majority of the funding was provided by the Australian government, with contributions from partner organisations. Advisory, management committee, guideline development group, translation and consumer committee meetings occurred online and face to face over 9 months across Europe, USA and Australia and enabled guideline training, development and translation. Feedback from the partner and collaborating societies and their convened special interest groups of experts and consumers, as well as public consultation, will inform the final guideline.

Multidisciplinary international guideline development groups

GDGs were convened to address each of the five key clinical areas. Expertise was sought through partner and collaborator organisations aiming for multidisciplinary, consumer and geographical participation within each GDG. Each GDG comprised a chair, professional group members with specific expertise in PCOS and the clinical area of interest (i.e. psychologists in the mental health GDG), consumer representatives, evidence officers and representative to consider cultural aspects. See Appendix III. Co-opted experts were also included as needed and additional experts including in dermatology were consulted.