# Does a normal A1c rule out blood-sugar effects from PMOS?

You asked: My A1c is normal. Does that mean PMOS cannot affect my blood sugar?
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**No.** A normal HbA1c (A1c) is reassuring, but it does not prove that PMOS cannot affect your blood sugar or insulin response.

PMOS, or **polyendocrine metabolic ovarian syndrome**, is the newer name used for the condition formerly called PCOS (polycystic ovary syndrome). The name change reflects that the condition can involve metabolic health as well as periods, ovulation, and androgen-related symptoms. [1]

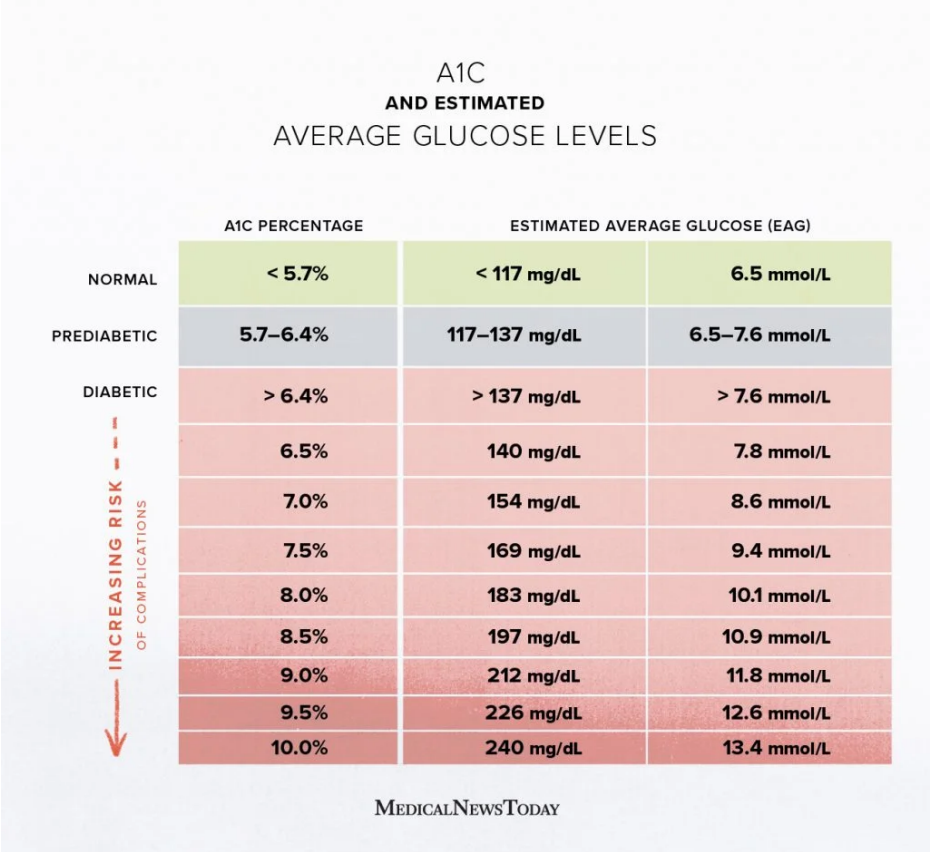
An A1c is one measure of glycaemic status, meaning blood-sugar regulation. It is useful, but in PMOS it is not the most accurate test for finding every form of abnormal glucose handling. In particular, a normal result does not fully exclude impaired fasting glucose or impaired glucose tolerance. The 2023 international guideline recommends a 75 g oral glucose tolerance test (OGTT) as the most accurate test for assessing glycaemic status in people with PCOS/PMOS, regardless of body size. It notes that fasting glucose or A1c are less accurate alternatives when an OGTT cannot be done. [2]

How the HbA1c blood test works
A pathology expert explains what the HbA1c blood test measures in a short laboratory-focused video.
Video · https://www.youtube.com/watch?v=afXWeJo_AYc

This matters because people with PMOS have a higher risk of impaired glucose tolerance and type 2 diabetes, even if they are young or do not have a high BMI. That is a risk increase, not a diagnosis or a prediction that you will develop diabetes. [3]

## What a normal A1c does mean

It means your result did not show elevated average glucose by that test. That is good news. It does **not** answer every related question, such as whether glucose rises too much after a glucose drink or meal, or whether insulin resistance may be present before glucose levels become consistently high.




The chart shows how A1c results correspond to estimated average blood-glucose levels and diagnostic ranges. · Image source: A1C chart: Test, levels, and more for diabetes

## A sensible next step

If you have PMOS, review the result with the clinician managing your care. Ask whether your situation calls for:

- a fasting plasma glucose test;
- a 75 g OGTT; or
- routine repeat testing.

The international guideline advises assessment when PMOS is diagnosed, then repeat assessment every one to three years based on individual diabetes risk factors. An OGTT should also be considered when planning pregnancy or seeking fertility treatment. [2]

This is especially worth discussing if you have had prior high glucose in pregnancy, previous abnormal glucose tests, a family history of type 2 diabetes, high blood pressure, or other diabetes risk factors. A normal A1c should be part of that discussion, not the sole reason to dismiss metabolic screening. [4]

**Sources**


1. NICE PMOS guideline https://www.nice.org.uk/guidance/gid-ng10436/documents/450
2. International PCOS guideline https://www.monash.edu/__data/assets/pdf_file/0003/3371133/PCOS-Guideline-Summary-2023.pdf
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