

## The Effects of Flaxseed Oil Omega-3 Fatty Acids Supplementation on Metabolic Status of Patients with Polycystic Ovary Syndrome: A Randomized, Double-Blind, Placebo-Controlled Trial.

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### Abstract

**OBJECTIVE:** This study was conducted to evaluate the effects of flaxseed oil omega-3 fatty acids supplementation on metabolic status of patients with polycystic ovary syndrome (PCOS).

**METHODS:** This randomized double-blind, placebo-controlled trial was conducted on 60 women with PCOS according to the Rotterdam criteria aged 18-40 years old.

Participants were randomly assigned into two groups to receive either 1,000 mg flaxseed oil omega-3 fatty acids (n=30) or placebo (n=30) twice a day for 12 weeks. Metabolic, endocrine, inflammatory factors were quantified at baseline and after the 12-week intervention.

**RESULTS:** After the 12-week intervention, compared to the placebo, flaxseed oil omega-3 supplementation significantly decreased insulin values ( $-2.6 \pm 7.7$  vs.  $+1.3 \pm 3.9$   $\mu$ IU/mL,  $P=0.01$ ), homeostasis model of assessment-estimated insulin resistance ( $-0.7 \pm 1.7$  vs.  $+0.3 \pm 0.9$ ,  $P=0.01$ ), mF-G scores ( $-1.2 \pm 1.7$  vs.  $-0.1 \pm 0.4$ ,  $P=0.001$ ), and increased quantitative insulin sensitivity check index ( $+0.01 \pm 0.02$  vs.  $-0.01 \pm 0.02$ ,  $P=0.01$ ). In addition, supplementation with flaxseed oil omega-3 resulted in significant decreases in serum triglycerides ( $-5.1 \pm 20.9$  vs.  $+9.7 \pm 26.1$  mg/dL,  $P=0.01$ ), VLDL-cholesterol ( $-1.0 \pm 4.2$  vs.  $+1.9 \pm 5.2$  mg/dL,  $P=0.01$ ) and high-sensitivity C-reactive protein (hs-CRP) ( $-1.6 \pm 3.1$  vs.  $+0.2 \pm 1.5$  mg/L,  $P=0.004$ ) compared to the placebo. We did not see any significant effect of flaxseed oil omega-3 supplementation on hormonal and other lipid profiles, and plasma nitric oxide levels.

**CONCLUSIONS:** Overall, flaxseed oil omega-3 supplementation for 12 weeks in women with PCOS had beneficial effects on insulin metabolism, mF-G scores, serum triglycerides, VLDL-cholesterol and hs-CRP levels, but did not affect hormonal and other lipid profiles, and plasma nitric oxide levels.