Objective: The aim of this study is to assess the causes, evaluation and management of adolescent females, who sought care in our Division due to DUB, as well as to estimate the correlation between DUB and PCOS in these girls later in their life.

Methods: Retrospective study of the records of adolescent females who presented in our Division, from 03/2004 - 03/2012, due to DUB. In all females the diagnosis of DUB was set after the exclusion of a possible pregnancy, hematologic disorders, pathology of female genital tract, endocrine disorders, trauma, medication or other causes. Ultrasound scan or other imaging exams were performed as needed. All of the patients had a long term follow-up, every 6 months. The Rotterdam criteria were used for the diagnosis of PCOS.

Results: A total number of 82 patients, with the diagnosis of DUB and mean age of menarche 12.04 ± 1.63 years, mean age at first attendance 13.46 ± 3.07 years and mean Body Mass Index at first attendance 20.65 ± 5.74 Kg/m2 were included in the study. Thorough laboratory investigations indicate that all DUB cases were due to immaturity of the hypothalamic-pituitary-ovarian axis. In 13 patients admission to the hospital was required. Oral Contraceptives pills administration was used in all patients. In 57 females, during their long term follow-up, the diagnosis of PCOS was set. A statistically significant correlation (P<0.01) was shown between DUB during the first 2 years after menarche and PCOS later during adolescence.

Conclusions: DUB is a potentially life threatening condition that needs proper evaluation and management. Our study indicates that statistically significant portion of DUB patients proceed to developing PCOS later in life. Proper management of the two distinct conditions in the young patients is essential.