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TREATMENT INDUCED HYPERPROLACTINEMIA IN PSYCHOTIC PATIENTS

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Background: Important reciprocal relationships exist between the central nervous, the endocrine and the immune systems. **Objectives:** The main objective was the quantitative determination of prolactin levels in acute and remitted psychotic patients receiving conventional and atypical antipsychotic treatment. Possible correlations between prolactin levels and psychotic, endocrine or immune disorders in patients' medical history or family history were checked.

Method: 58 patients (42 women and 16 men) receiving antipsychotic treatment were included in the study in order of their presentation to control visits or admission in the psychiatric hospital. They were classified into the following ICD 10 diagnostic categories: acute and transient psychotic disorders, schizophrenia, persistent delusional disorder, schizoaffective disorder and bipolar disorder. The following data were collected: prolactinemia (chemiluminescence method), ASAT, ALAT liver enzymes, glycemia, serum creatinine, thyroid hormones, sexual hormones, the intensity of psychiatric symptoms measured with BPRS, personal and family history of psychiatric, endocrine, immune disorders or treatments.

Results: 47 patients (81%) presented hyperprolactinemia (33 women and 14 men). 9 patients (16%) presented a history of autoimmune disorders, 4 (7%) having also a family history of autoimmune disorders. 9 women had amenorrhea or irregular menstrual cycle. 5 patients were on long acting antipsychotic treatment.

Conclusions: Regardless of the antipsychotic treatment received, the majority of the patients presented hyperprolactinemia. Women presented a higher increase in prolactin levels than men. The results were interpreted according to the thyroid and sexual hormonal status. A positive correlation between prolactin levels and BPRS scores was found (r = 0.2628 P= 0.0463, 95% CI).

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