
[Medical Professorial Unit and Dept. Chemical Pathology, St. Bartholomew’s Hospital, London, England]

Seventeen women and four men with galactorrhea and associated hypogonadism were treated with bromocriptine for two to 28 months. Serum prolactin levels were elevated in 12 of 17 patients. Bromocriptine therapy led to cessation of galactorrhea, lowered prolactin levels to normal, and restored gonadal function. (The SC® indicates that this paper has been cited in over 330 publications since 1974.)

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"Prolactin is secreted by the anterior pituitary gland. Until 1971 many eminent physiologists did not accept that prolactin existed as a distinct and separate hormone from growth hormone in the human. The pioneering work of Friesen finally led to the extraction of prolactin from the human pituitary. This prolactin was then used to raise antibodies to prolactin for the development of a radioimmunoassay for human prolactin. The radioimmunoassay was immediately used to measure prolactin levels in various physiological and pathological conditions. It became rapidly apparent that elevated circulating prolactin levels were often found in patients with galactorrhea and hypogonadism. At the same time, Flückiger (working at Sandos, Basel) had developed bromocriptine, an ergot drug, with specific prolactin lowering properties which acted directly at the pituitary level. The explanation for these receptors.

"I believe the reason our paper is a Citation Classic is that it showed, for the first time, in a large group of patients, the medical therapy of hyperprolactinemia is effective in the long term. In recent years it has become clear that this therapy is also effective in reducing the size of these tumors and is becoming the treatment of choice for large prolactin secreting tumors. For a more recent review, see Bromocriptine: A Clinical and Pharmacological Review."