

Implementation of clinical guidelines on the cancellation of dopamine agonists in the event of pregnancy in patients with hyperprolactinemia tumor origin.

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OBJECTIVES

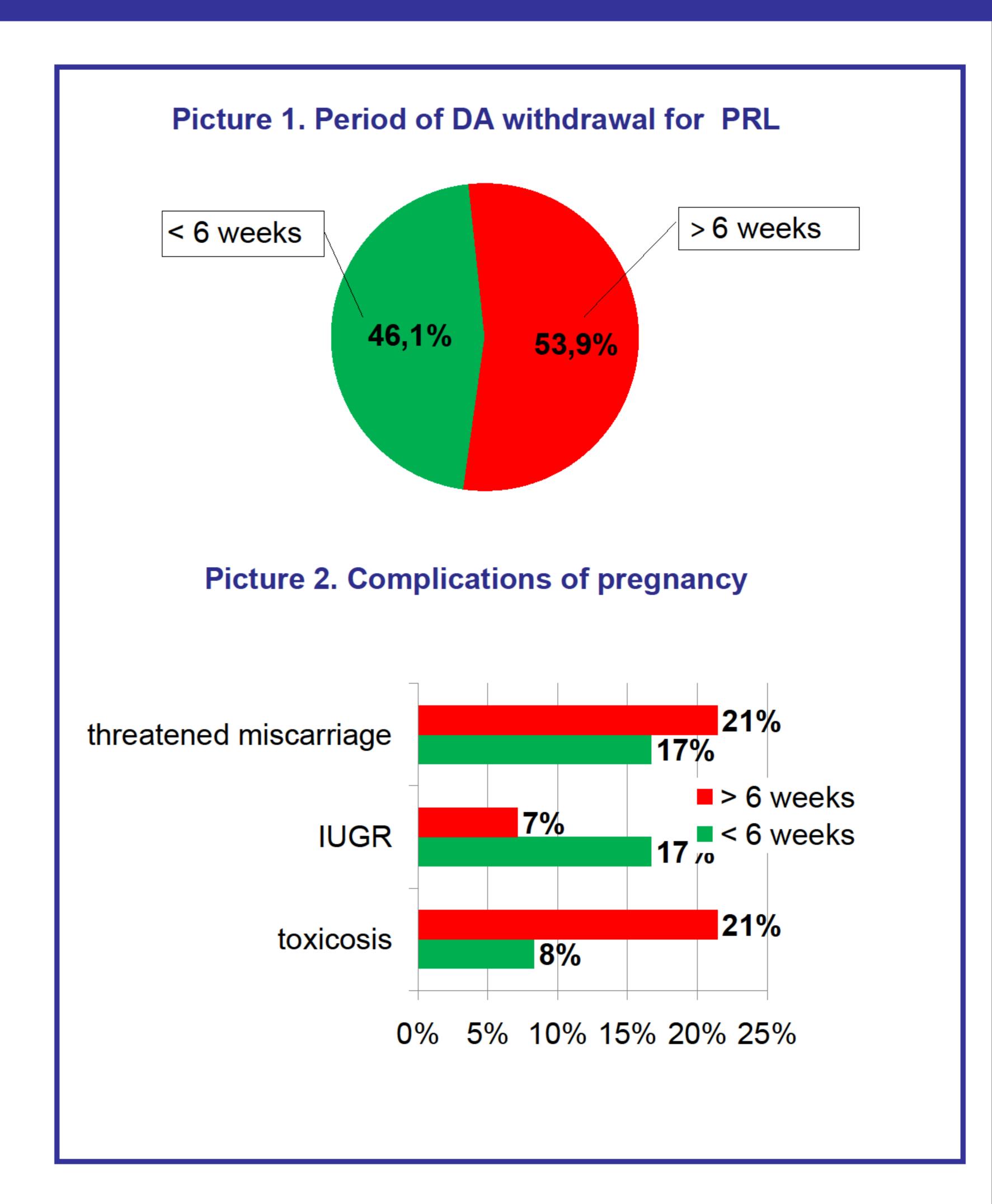
Clinical guidelines recommend the cancellation of dopamine agonists after confirmation of pregnancy as because further their use is unnecessary. However, an implementation of these recommendations in real clinical practice is unknown which became the aim of our present research.

METHODS

The study included 21 patients with prolactinomas who had 26 pregnancies ended in childbirth. These patients were found archived medical records of Endocrinology Research Centre (Moscow, Russia) and consent to personal/telephone interview to complete specialized survey questionnaire.

RESULTS

In the period up to 6 weeks dopamine agonists have been canceled in 46% of patients (12/26) of those 42% (5/12) were taking bromocriptine and 58% (7/12) cabergoline (Picture 1). Toxicosis was observed in 8.3% (1/12), intrauterine growth retardation (IUGR) in 16.7% (2/12) threatened miscarriage in 16.7% (2/12) (Picture 2). For more than 6 weeks dopamine agonists took 54% (14/26) of patients, with 29% (4/14) taking bromocriptine, 64% (9/14) - cabergoline and in one patient took quinagolide (7%) (Picture 1). In this group toxicosis was observed in 21% (3/14) of cases, IUGR in 7% (1/14), threatened miscarriage in 21% (3/14) (Picture 2). The patient on quinagolide was not aware of the need to discontinue the drug at pregnancy. At 8th week of gestation she had a threatened miscarriage, which doctors regarded as quinagolide-mediated and the drug was canceled; this pregnancy proceeded uncomplicated, ended in term delivery of a healthy child. Another patient with microadenoma as advised by a doctor took cabergoline during whole pregnancy, despite the absence of symptoms of tumor growth and normal otherwise state of health; she had a term delivery, the child had patent foramen ovale. In one case, the dose of cabergoline was gradually decreased till 20 weeks of gestation; first trimester of this pregnancy complicated by toxicosis; the child was born at term and later was found to have adrenal incidentalomas.



CONCLUSIONS

Our study show not ubiquitous implementation of clinical guidelines in the issue of cancellation of dopamine agonists at pregnancy confirmation with 54% patients continuing medications for more than 6 weeks of gestation.







