



Bromocriptine

This leaflet is for patients prescribed the prolactin-blocking medication called Bromocriptine for prolactinoma (tumour in the pituitary gland).

About the medication

This medicine is also supplied under the trade name *Parlodel* and is available as tablets containing Bromocriptine 1mg and 2.5mg. Capsules containing Bromocriptine 5mg and 10mg are also occasionally used.

How does it work?

Bromocriptine acts on the pituitary to block the production and release of the hormone prolactin which is over-produced when a prolactinoma is present in the gland. Prolactin in the circulation is reduced to near normal levels and there may be shrinkage of the tumour itself. Treatment is therefore associated with control of symptoms and restoration of fertility where previously affected by the condition.

How do I take it?

Treatment is usually started at low dosage then increased gradually until the required regular (maintenance) dose has been reached. This reduces the likelihood of early side effects. The maintenance dose varies from patient to patient and depends upon what is required to control your symptoms. It is normally around 2.5 mg three times per day.

This medicine should be taken with food.

What side effects can I expect?

Nausea: this is a common problem at the outset so that it is advisable to slowly increase your dose of Bromocriptine until the required maintenance dose has been reached. We recommend you follow this detailed schedule as a guide.

- Go to bed with a glass of milk and a sandwich.
- After drinking half the milk and eating some of the sandwich, take half a tablet of Bromocriptine, then finish the milk and sandwich.
- Do this for three nights.
- On the fourth night, take a whole tablet of Bromocriptine, again "sandwiched" between food.
- Do this for another three nights, then stop the bedtime routine of milk, sandwich and Bromocriptine.
- Instead, take the whole tablet in the middle of your evening meal.
- After three days, you should attempt to increase the dosage by taking an additional half tablet in the middle of your breakfast while continuing to take a tablet during your evening meal.

- After a further three days, increase the dose to one whole tablet with breakfast and, of course, with your evening meal.
- After another three days, take half a tablet with your lunch then three days later increase this to a whole tablet at lunchtime.
- You should now be taking your tablets three times a day in the middle of breakfast, lunch and the evening meal.
- Further dosage increases can be managed by the above strategy.

If you do develop troublesome nausea at any time this can be overcome by lowering the dosage to that which you previously tolerated. You should then wait for four days before gradually increasing the dose once more.

Effects on blood pressure/dizziness: sudden falls in blood pressure may occur in the first few days of treatment, causing dizziness especially when changing from the lying to the sitting or the sitting to the standing position. We recommend that you sit up or stand up carefully to prevent dizzy turns until you have become "used" to your medicine. This problem is unlikely to persist but may be more troublesome if you also drink alcohol.

Other side effects: headaches, abdominal discomfort, nasal congestion, constipation (and even diarrhoea) are occasionally reported. Other side effects are uncommon at the dose used for the treatment of prolactinoma.

If side effects persist or you feel unable to cope, contact your GP. **Do not stop taking your medicine.** It may be possible for your doctor to overcome any problems by prescribing treatment at a lower dosage.

If you have any questions about this leaflet, please contact:

Diabetes, Endocrine and Metabolism Department

Melrose House, Royal Berkshire NHS Foundation Trust, Reading RG1 5BS

Tel: 0118 322 7969 or Email: rbb-tr.CAT9@nhs.net

To find out more about our Trust visit www.royalberkshire.nhs.uk

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