

Bromocriptine

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

Nausea: nausea 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. The following detailed schedule is provided for your guidance.

- 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. You should therefore 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 take 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 doctor. Do not stop taking your medicine. It may be possible for your doctor to overcome any problems by prescribing treatment at a lower dosage.

More information is available on the Trust website www.royalberkshire.nhs.uk

This document can be made available in other languages and formats upon request.

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