

Prolactin	
Description	<p>Prolactin (PRL) is a peptide hormone produced by the pituitary gland that is primarily associated with lactation. In breastfeeding, the act of an infant suckling the nipple stimulates the production of PRL, which fills the breast with milk via a process called lactogenesis, in preparation for the next feed. Oxytocin, another hormone, is also released, which triggers milk let-down.</p> <p>PRL is unique in being predominantly controlled by an inhibitory hypothalamic factor dopamine. This explains why PRL deficiency is rare and why any disease that interferes with pituitary anatomy and thus the flow of portal blood may be associated with hyperprolactinaemia. Hyperprolactinaemia can also arise from excess production of PRL from a prolactinoma or from drugs that block the action or the stores of dopamine result in a loss of the negative feedback.</p>
Indication	<p>PRL levels are used, along with other hormone tests, to help: determine the cause of galactorrhoea; determine the cause of headaches and visual disturbances; diagnose infertility and erectile dysfunction in males; investigate infertility in females; diagnose prolactinomas; evaluate anterior pituitary function (along with other hormones); monitor treatment of prolactinomas and detect recurrences.</p>
Additional Info	<p>Stresses from illness, trauma, and even the fear of having the blood test done can cause moderate increases in prolactin.</p>
Concurrent Tests	<p>LH, FSH, testosterone, oestrogen or macroprolactin (adjusted prolactin).</p>
Dietary Requirements	<p>N/A</p>
Interpretation	<p>High levels of prolactin (hyperprolactinaemia) are normal during pregnancy and after childbirth while the mother is nursing. Moderately raised levels may also be seen during periods of stress and a repeat should be requested with the patient sitting quietly for 30 minutes. High prolactin levels are also seen with prolactinomas, other pituitary tumours and diseases; drugs: oestrogen, tricyclic antidepressants, drugs that block dopamine release or action such as antipsychotics, some hypertensive drugs (reserpine, verapamil, methyldopa) and some drugs that are used to treat gastroesophageal reflux (cimetidine). Anorexia, hypothalamic diseases; hypothyroidism; kidney disease; nipple stimulation (moderate increase); polycystic ovary disease can also causes a raised PRL.</p>
Collection Conditions	<p>Serum or plasma samples acceptable.</p>
Frequency of testing	<p>N/A</p>