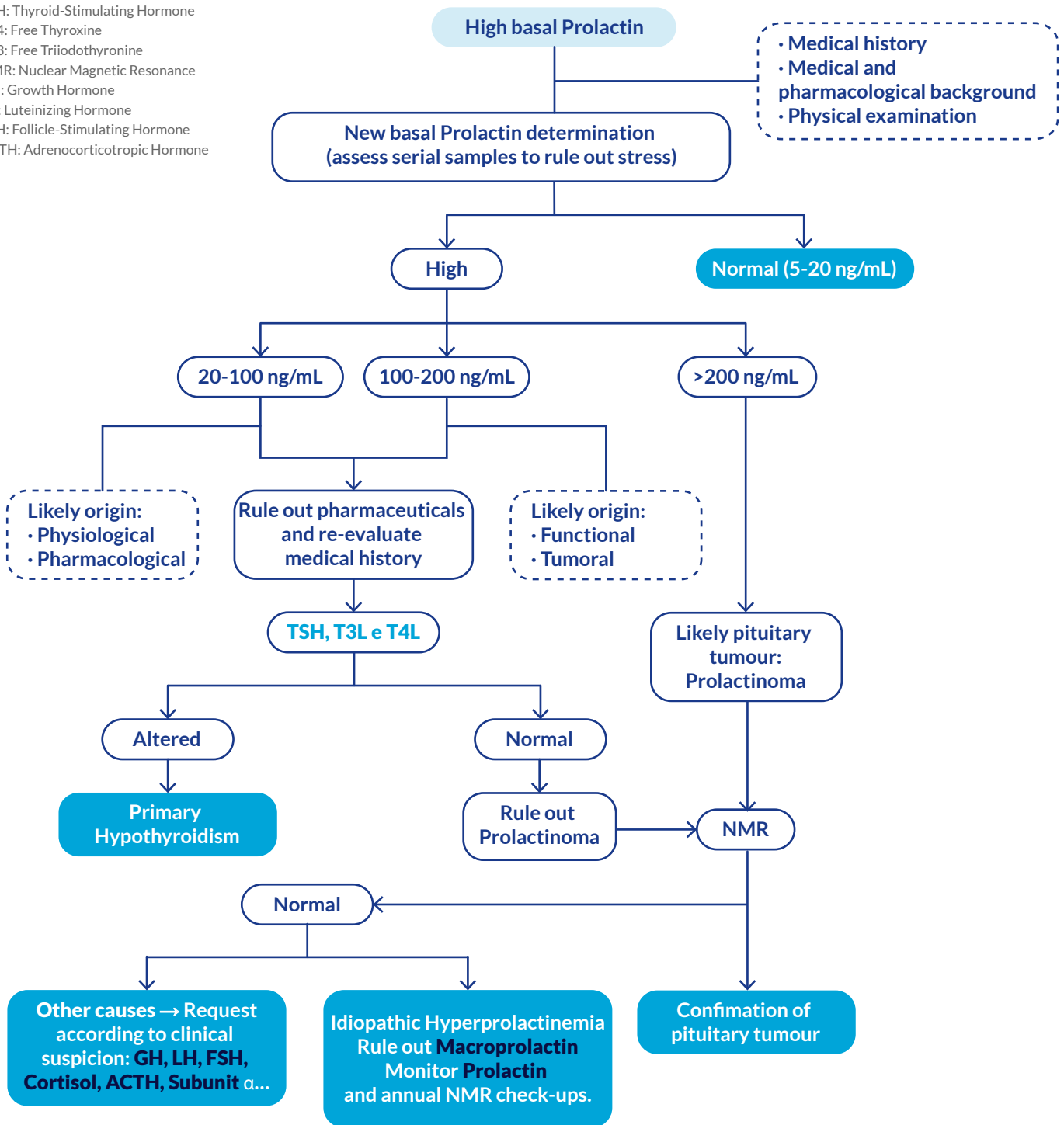




ABBREVIATIONS:

- TSH: Thyroid-Stimulating Hormone
- FT4: Free Thyroxine
- FT3: Free Triiodothyronine
- NMR: Nuclear Magnetic Resonance
- GH: Growth Hormone
- LH: Luteinizing Hormone
- FSH: Follicle-Stimulating Hormone
- ACTH: Adrenocorticotropic Hormone



ETIOLOGY:

- 1- Physiological:** pregnancy, lactation, sleepiness, exercise, stress of any kind, menstrual cycle.
- 2 - Tumoral:** prolactinoma, chromophobe adenoma, ectopic tumour production (Brochogenic carcinoma, hypernephroma, choriocarcinoma, ovarian teratoma), hypothalamic-pituitary tumours.
- 3 - Pharmaceuticals:** neuroleptics, antidepressants, antihypertensives, opiates, antiemetics, estrogens in high doses.
- 4 - Prolactin increased by functional changes of the hypothalamic-pituitary axis:** primary hypothyroidism, Addison's disease, Cushing's syndrome, acromegaly, kidney failure, liver cirrhosis, granulomatous inflammatory infiltrate diseases (sarcoidosis, histiocytosis, tuberculosis, leukemia).
- 5 - Prolactin endogenously increased:** medullary trauma, thoracic surgery or injury, infections and lesions in the breast area or that stimulate the intercostals nerves (mastitis, herpes zoster ...).
- 6 - Idiopathic Hyperprolactinemia:** diagnosis by exclusion, up to 50% of the causes.