

Poster presentation

Ziprasidone-induced hyperprolactinemia: a case report

Michalis Saitis*, Konstantinos Katsigiannopoulos and Georgios Papazisis

Address: Community Mental Health Center of N/W District, Thessaloniki, Greece

* Corresponding author

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Background

Among the second-generation antipsychotics, ziprasidone seems to be less frequently associated with hyperprolactinemia. A MEDLINE search (2002-2006) revealed three cases of ziprasidone induced hyperprolactinemia. We describe the case of a patient in whom ziprasidone induced clinically significant hyperprolactinemia.

Materials and methods

Ms. A, a 22-year old woman, had a 1-year history of paranoid schizophrenia with delusions and auditory hallucinations. Four months ago, she was treated with ziprasidone 80mg/day. On day 7, the ziprasidone dose was increased to 160 mg/day, because of insufficient suppression of her psychotic symptoms.

Results

After 5 weeks of ziprasidone treatment, the patient reported significant improvement of psychotic symptoms. However, she complained of galactorrhea, breast tenderness and amenorrhea. Magnetic resonance imaging (MRI) of the head showed no pathology, but her prolactin levels were increased to 47.4 ng/ml. Ziprasidone was discontinued and 3 days after, the patient's prolactin levels were decreased to 3.7 ng/ml and 2 weeks after clinical side effects disappeared.

Conclusions

To our knowledge, this is the fourth case of ziprasidone-induced clinically significant hyperprolactinemia. In this respect, the clinicians' awareness and the monitoring of prolactin level are required.

References

1. Compton MT, Miller AH: **Antipsychotic-induced hyperprolactinemia and sexual dysfunction.** *Psychopharmacol Bul* 2002, **36**(1):143-164.
2. Angelescu I, Wolf J: **Successful switch to aripiprazole after induction of hyperprolactinemia by ziprasidone: a case report.** *J Clin Psychiatry* 2004, **65**(9):1286-1287.
3. Lusskin S, Cancro R, Chuang L, Jacobson J: **Prolactin elevation with ziprasidone.** *Am J Psychiatry* 2004, **161**(10):1925.