



Galactorrhea

What is galactorrhea?

Galactorrhea is not a disease process itself; it is a symptom. It may be a symptom of a condition that needs further medical treatment or it may be unassociated with an underlying disease. It is important that you see your health care provider to determine the cause if one exists. In about half the cases no serious cause can be found and no specific treatment is needed.

Galactorrhea is a benign type of nipple discharge; that is, it has no association with breast cancer. Galactorrhea is a whitish or greenish discharge from the breast nipples. Usually the discharge is from both breasts rather than just one. A discharge like this is called galactorrhea when women who are not pregnant or breast-feeding have it.

Some less common types of nipple discharge are associated with a risk of malignancy. If there is a question whether the discharge is galactorrhea or not or if the woman has significant risk factors for breast cancer, a physician may refer her to a breast specialist for further evaluation.

How does it occur?

Galactorrhea occurs when your body produces too much **prolactin**. Prolactin is a hormone produced by the pituitary gland in the brain. Normally, prolactin stimulates the production of milk when a woman has a baby.

Galactorrhea may be a symptom of another condition. It may be caused by:

- too much estrogen in your body from birth control pills
- an underactive thyroid gland

- certain drugs, such as some high blood pressure medications, tranquilizers, and antidepressants
- disorders or tumors of the pituitary gland
- some brain diseases, such as meningitis
- a galactocele - a cyst under the darkened area around the nipple
- shingles (herpes zoster) caused by the chickenpox virus in the chest wall
- other medical conditions such as kidney failure, cirrhosis of the liver, and Cushing's disease of the adrenal gland.

Nipple stimulation, either in sexual activity or in sports activities such as jogging, which can increase prolactin production. Any woman who has had a baby, whether or not she breast-fed her baby, may later have galactorrhea. In about half the cases, a cause for galactorrhea cannot be found.

How is it diagnosed?

Your health care provider will ask questions about your medical history and your menstrual cycle, and whether you've had problems with infertility, headaches or vision changes. He or she will also ask about current medication use. Physical exam of the breasts will be performed, with an attempt to squeeze out nipple discharge for evaluation.

What is the treatment?

If your galactorrhea is due to a disorder such as thyroid problems, your health care provider will treat the disorder. If a galactocele (cyst) is causing the galactorrhea, the cyst will be removed.

If the discharge is caused by drugs, it will clear up when you stop taking the drugs. However, stopping drugs is not always necessary (for example, you may continue taking birth control pills).

Rarely, galactorrhea is caused by a pituitary gland tumor. If this is the case, you may need surgery, radiation, or drug treatments. Often these tumors grow slowly, and some eventually stop growing. Some can be treated successfully with bromocriptine, a drug that stops the production of prolactin by your pituitary gland.

If your diagnostic tests do not detect a cause of the galactorrhea, you may not need any treatment. Avoidance of nipple stimulation for a period of time may be recommended. Or your health care provider may prescribe bromocriptine, which can successfully treat galactorrhea when the cause is unknown. If you have stopped having periods, bromocriptine may cause your periods to start again and may increase your chances of becoming pregnant.

How long will it last?

Once the source of your galactorrhea is diagnosed and treated, you should no longer have the discharge. However, if the cause for the galactorrhea is a pituitary tumor, you may need long-term treatment with bromocriptine or radiation because the tumor could come back.

How can I take care of myself?

If you are taking bromocriptine, be sure you take it exactly as your health care provider instructed you.

If your galactorrhea is mild and a cause cannot be found, a well-fitted padded bra may help stop the discharge by preventing stimulation of the nipples.

Disclaimer: This document is for informational purposes only and is not intended to take the place of the care and attention of your personal physician or other professional medical services. Talk with your doctor if you have Questions about individual health concerns or specific treatment options.

Patient Education Handout associated with UMHS Clinical Care Guideline

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