THE COMPARISON OF SIDE EFFECTS AND PATIENTS’ TOLERANCE TOWARD PROLONGED USE OF INTRAVAGINAL & ORAL BROMOCRIPTINE

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**Background:** Treatment of Hyperprolactinemia with oral Bromocriptine has been associated with a high incidence of side effects. Researches recently demonstrated that, in normal women, the vaginal route of administration was an effective and safe alternative to oral Bromocriptine. The authors treated 180 hyperprolactinemic women with Hyperprolactinemia to compare the side effects and acceptance level to vaginal and oral Bromocriptine.

**Methods:** This study was a single –blind clinical trial. The subjects were clients of the Gynecologic clinic with complaint of Galactorrhea, Menstrual disturbance, Hirsutism, or infertility. The subjects were divided into two groups, oral and vaginal. Prior to the study the subjects have been examined systemically and gynecologically for other systemic and local complications. After getting certainty of health of other systems of the body, drugs were administered in two forms. The data collected using questionnaires and analyzed by SPSS.

**Findings:** Results showed that the side effects of Bromocriptine were%100 in oral users and %43.2 in intravaginal users. The most common complication in the oral users was nausea (%38.9) and in the intravaginal use was vaginal itching (%22.3). Vertigo in oral-form users was more than in vaginal form users (%27.8 versus %2.3). Hypotension was seen in %11.2 of the cases of oral-users, whereas this quantity was zero among the intravaginal users. About %51.2 of the oral-users had more than two side effects. In both groups the most complications were seen within the first ten days of the treatment (%66.7 and %37.8). Severity of complications in %31.2 of oral group and %11 of the vaginal group were so tense that resulted in discontinuation of the drug.

**Conclusion:** There is a significant difference in severity and kind of complications in the forms of oral and vaginal use of Bromocriptine, and acceptance and tolerance of drug intake in vaginal form is more than oral form. These results suggest that use of vaginal Bromocriptine is a safe and effective method of treatment for hyperprolactinemia.

**Key words:** Bromocriptine, oral, vaginal, side effects, acceptance, tolerance.