Galactorrhoea Following Acupuncture

Chris Jenner, Jacqueline Filshie.

Summary
A 41-year-old woman with breast cancer was referred to the pain management clinic for a course of acupuncture for intense pain following a subcutaneous mastectomy and a latissimus dorsi flap reconstruction.

She was treated with a standard course of acupuncture for breast pain, using paravertebral segmental points, trigger points, plus contralateral LI4 on the non-lymphoedematous arm. She experienced an episode of galactorrhoea six days following the first treatment and during the second treatment. She had not previously lactated for four years. CT and MRI of the brain revealed no focal abnormality.

Acupuncture has been used in to promote lactation in the Traditional Chinese literature using the ‘Tianzong’ acupoint SI11. This acupoint coincided with a trigger point over infraspinatus that was included in the neurophysiologically based acupuncture treatment.

Quantitative analysis has shown an increase in the production of prolactin and oxytocin following acupuncture. These hormones are involved in the synthesis and release of milk from mammary glands respectively. This is the first report of galactorrhoea, in the contralateral normal breast, following acupuncture in a patient with breast cancer.

Keywords
Acupuncture, galactorrhoea, breast cancer, prolactin, oxytocin.

Introduction
Acupuncture has been used specifically in the treatment of absent or reduced milk production, especially within traditional Chinese medicine (TCM). There is quantitative evidence that acupuncture causes the release of two hormones intimately involved in the manufacture and release of milk from the mammary glands – prolactin and oxytocin. This case report describes a patient who experienced galactorrhoea following therapeutic treatment with acupuncture for the relief of pain.

Presentation
A 41-year-old woman with cancer of the right breast, diagnosed in 1989, was referred to the pain management clinic in 2000 for acupuncture. She had previously undergone a subcutaneous mastectomy in 1990 and a latissimus dorsi flap in 2000. Her presenting complaint was intermittent pain in the right axilla radiating to the elbow. The pain woke her at night and was exacerbated by stress and repetitive movement, particularly typing. This was problematic as she worked as a secretary

The pain was intense, VAS 80-85, with occasional spasms lasting 5 to 10 minutes. She failed to respond to Co-proxamol and amitriptyline. Her relevant social history included a complex separation from her husband. She had two children aged 9 and 4 years.

Examination revealed tenderness in the distribution of the intercostobrachial nerve consistent with post axillary dissection syndrome, together with multiple trigger points in the suprascapular area on the right. In addition she had lymphoedema in the right arm.

Treatment and Results
She was given paravertebral acupuncture at C7, T1, T2 and T4, which included the intercostobrachial nerve distribution, and trigger points in infraspinatus and the suprascapular region were...
needled. The lymphoedematous right arm was
avoided. Points on the left arm were treated; these
included the traditional acupuncture point LI4.

Interestingly, she developed galactorrhoea in
the normal left breast six days following her first
acupuncture treatment. During the second
acupuncture treatment, milk began to drip from
the left breast. She had last lactated following the
birth of her second child, 4 years previously.

The patient experienced some short-lived
reduction in lymphoedema in the right arm
following her second treatment, but the pain relief
was inadequate to continue with acupuncture
treatment alone. She subsequently underwent
investigation by MRI and recurrent malignant
disease was found. This required a change in
treatment. Regrettably, no hormone levels were
measured around the acupuncture treatments in
this patient. CT and MRI scans of the brain
revealed no focal abnormality.

Discussion

Acupuncture has been used specifically to
promote lactation; in particular the use of the
‘Tianzong’ acupoint is described. This point SI11
coincided with a trigger point in the infraspinatus
muscle that we routinely treat in these patients.

More recently quantitative analysis has shown
increased serum levels of prolactin secondary to
acupuncture; however, most of the papers are only
available in English abstract form.1-3 Oxytocin is
also released by acupuncture, and it is both
analgesic and anxiolytic,4-6 in addition to its
contribution to lactation.7,8 We believe this is the
first report of spontaneous lactation following
acupuncture in a patient with breast cancer, and as
such is worth documenting. Having treated
patients with this condition for over twenty years
with acupuncture, this is the first case the author
(JF) has seen.

Reference list

1. Nedkova V, Tanchev S. (The possibilities for stimulating

2. Sheng PL, Xie QW. Relationship between effect of
acupuncture on prolactin secretion and central
catecholamine and R-amino butyric acid. Zhong Yi Yan Jiu

3. Pars A, Bonfigliani A, Frassoldati P. (Acupuncture

4. Song CY, Liu WY, Yang J, Lin BC, Zhu HN. (The role of
central oxytocin in electroacupuncture analgesia). Sheng

5. Uvnas-Moberg K, Ahlenius S, Hölzgaard V, Alster P. High
doses of oxytocin cause sedation and low doses cause an
anxiolytic-like effect in male rats. Pharmacol Biochem

6. Uvnas-Moberg K, Bruzelius G, Alster P. Lundberg T.
The antinociceptive effect of non-noxious sensory
stimulation is mediated partly through oxytocinergic

7. Caldwell JD, Walker CH, O’Rourke ST, Faggin BM,
Morris M, Mason GA. Analogies between oxytocin

8. Wathes DC, Lamming GE. The oxytocin receptor,
luteolysis and the maintenance of pregnancy. J Reprod
Galactorrhoea following acupuncture

Chris Jenner and Jacqueline Filshie

doi: 10.1136/aim.20.2-3.107

Updated information and services can be found at: [http://aim.bmj.com/content/20/2-3/107](http://aim.bmj.com/content/20/2-3/107)

**Email alerting service**

Receive free email alerts when new articles cite this article. Sign up in the box at the top right corner of the online article.

**Notes**

To request permissions go to: [http://group.bmj.com/group/rights-licensing/permissions](http://group.bmj.com/group/rights-licensing/permissions)

To order reprints go to: [http://journals.bmj.com/cgi/reprintform](http://journals.bmj.com/cgi/reprintform)

To subscribe to BMJ go to: [http://group.bmj.com/subscribe/](http://group.bmj.com/subscribe/)