

# 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

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needed. 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.<sup>1-3</sup> Oxytocin is also released by acupuncture, and it is both

analgesic and anxiolytic,<sup>4-6</sup> in addition to its contribution to lactation.<sup>7,8</sup> 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.

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