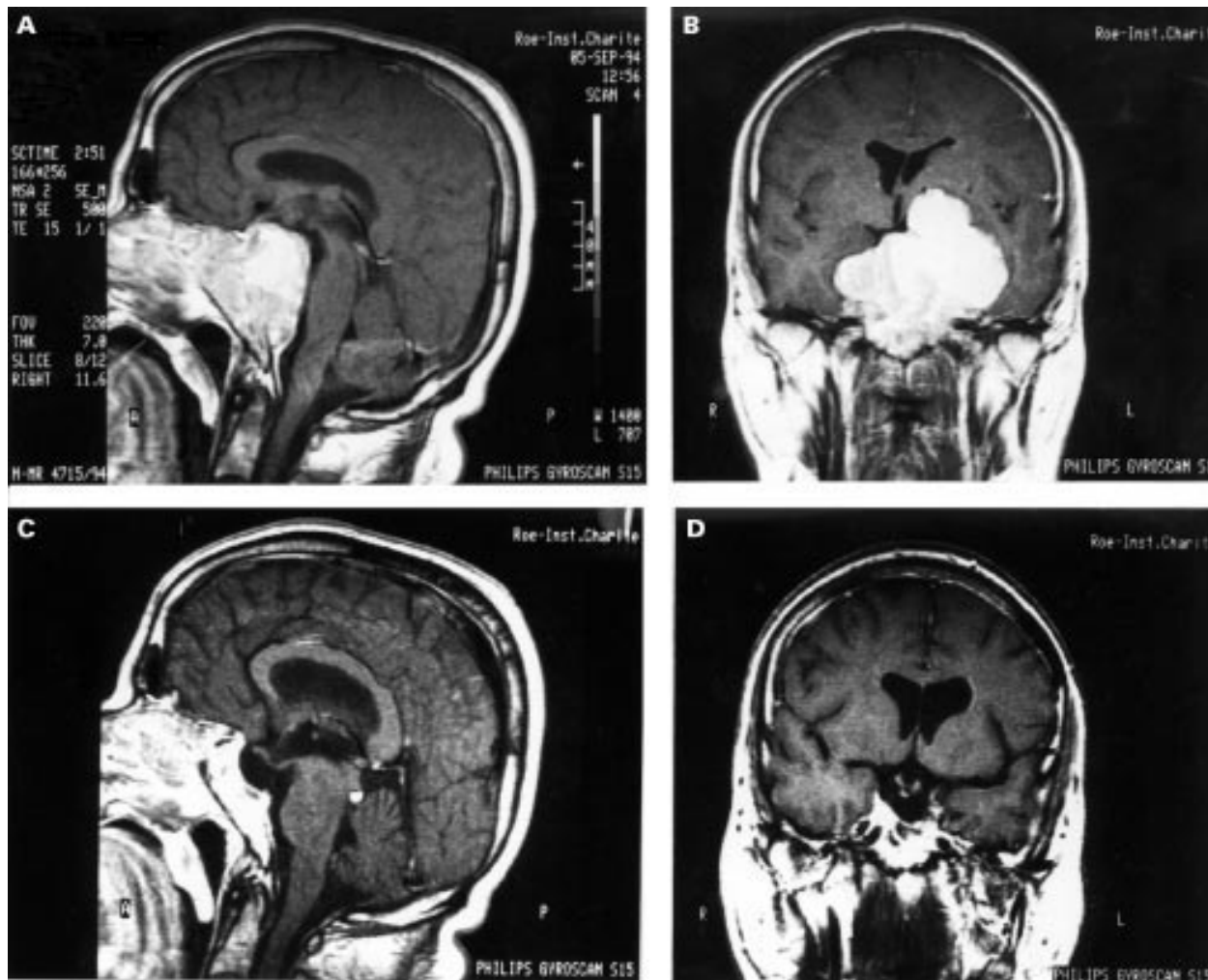


NEUROLOGICAL PICTURE

A "giant" prolactinoma



Sagittal and frontal T1 weighted MRI before (A, B) and after (C, D) treatment with bromocriptine

A 43 year old man with a history of epilepsy was admitted after a grand mal seizure. Physical examination showed bilateral loss of visual acuity, a bilateral lateral rectus palsy, and bilateral optic disc pallor. Secondary sexual characteristics were normal. Brain MRI disclosed an enhancing intrasellar and perisellar tumour ($8 \times 8 \times 8$ cm) with displacement and compression of the optic chiasm as well as the mesencephalon and diencephalon (figure, A and B). A raised serum prolactin concentration of 24 500 ng/ml (normal <15 ng/ml), the tumour location, and size were consistent with a "giant" prolactinoma. After four weeks of treatment with bromocriptine (15 mg/day) the bilateral lateral rectus palsies had remitted completely and vision had slightly improved. At that time the serum prolactin concentration had fallen to 1160 ng/ml. A further brain MRI showed a dramatic reduction of tumour size with residual tumour only in the sphenoid and ethmoidal bone (figure, C and D).

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