

PREGNANCY, PTOSIS, AND A PROLACTINOMA: PROMPT NEUROLOGICAL RECOVERY AFTER CABERGOLINE THERAPY

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Pituitary macroprolactinomas pose unique challenges during pregnancy, as there is an increasing chance of tumor growth while medical therapy raises concerns about fetal safety. Neuro-ophthalmic deficits, particularly isolated ptosis, are exceedingly rare but may signal acute disease progression. We describe a young pregnant woman with a history of hyperprolactinemia and primary hypothyroidism, previously controlled on Levothyroxine and Cabergoline. Following conception, she discontinued all treatment. At two months' gestation, she presented with sudden-onset, complete left-sided ptosis. MRI of the sella revealed a pituitary macroadenoma with suprasellar extension and mass effect. She was admitted to the neurosurgery department with the plan for surgical intervention. But following endocrine consultation, Cabergoline therapy was reinstated. Remarkably, her ptosis improved after just two doses and resolved completely within days. Repeat imaging demonstrated significant tumor shrinkage. This case demonstrates the unique scenario of isolated ptosis due to macroprolactinoma in pregnancy and the dramatic therapeutic effect of Cabergoline. It underscores the need for vigilance in monitoring prolactinomas during pregnancy and supports the judicious use of dopamine agonists in patients to achieve rapid neurological recovery.

Keywords: Prolactinoma, Ptosis, Cabergoline

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