Baseline Serum Prolactinin Drug Naïve First Episode Schizophrenia Predicts a Positive Clinical and Social Outcome at Five Years, Post Discharge Follow-up

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In our study, we also conducted a clinical study to examine prolactin levels in female patients with schizophrenia and its relationship with psychopathology. We did not find any significant correlations between prolactin levels and scores or BPRS at baseline, three, and six weeks. However, there was a significant correlation between prolactin and psychopathology. Baseline prolactin levels were also positively correlated with psychopathology severity at five years. This association is not completely without a clinical interpretation. There are reports that prolactin levels correlate with outcome measures, but no results have been published. Interestingly, some scholars have shown an association between serum prolactin levels and psychopathology in female patients with schizophrenia, which is consistent with previous studies. It is possible that an increase in prolactin levels reflects a decrease in dopaminergic activity. The basis of this hypothesis is suggested by the following observations: a) an increase in prolactin levels reflects a decrease in dopaminergic activity. b) an increase in prolactin levels reflects a decrease in dopaminergic activity. c) an increase in prolactin levels reflects a decrease in dopaminergic activity. d) an increase in prolactin levels reflects a decrease in dopaminergic activity.

In conclusion, we observed that the increase in prolactin levels can indicate a positive clinical and social outcome at five years follow-up. However, this difference was found to be statistically significant in males only. Correlations between prolactin levels and psychopathology at the baseline and subsequent follow-up points were assessed on modified BPRS and the Global Assessment of Functioning (GAF) scale. The results of this study indicate that an increase in prolactin levels may be an indicator of good progress in the long term. Further research is necessary to arrive at a definite conclusion.

From the present study it appears that baseline serum prolactin level in drug-naive patients of schizophrenia may not be a reliable indicator of psychopathology but it may be an indicator of good progress in the long term. Further similar experiments and studies in this area can provide valuable insights into the prediction of factors affecting outcome in schizophrenia.

Conclusions

In our study, we also conducted a clinical study to examine baseline serum prolactin levels and psychopathology and found no significant correlations between the two. However, there was a significant correlation between baseline prolactin levels and psychopathology severity at five years follow-up. This association is not completely without a clinical interpretation. There are reports that prolactin levels correlate with outcome measures, but no results have been published. Interestingly, some scholars have shown an association between serum prolactin levels and psychopathology in female patients with schizophrenia, which is consistent with previous studies. It is possible that an increase in prolactin levels reflects a decrease in dopaminergic activity. The basis of this hypothesis is suggested by the following observations: a) an increase in prolactin levels reflects a decrease in dopaminergic activity. b) an increase in prolactin levels reflects a decrease in dopaminergic activity. c) an increase in prolactin levels reflects a decrease in dopaminergic activity. d) an increase in prolactin levels reflects a decrease in dopaminergic activity.

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Discussion

In our study, we also conducted a clinical study to examine baseline serum prolactin levels and psychopathology and found no significant correlations between the two. However, there was a significant correlation between baseline prolactin levels and psychopathology severity at five years follow-up. This association is not completely without a clinical interpretation. There are reports that prolactin levels correlate with outcome measures, but no results have been published. Interestingly, some scholars have shown an association between serum prolactin levels and psychopathology in female patients with schizophrenia, which is consistent with previous studies. It is possible that an increase in prolactin levels reflects a decrease in dopaminergic activity. The basis of this hypothesis is suggested by the following observations: a) an increase in prolactin levels reflects a decrease in dopaminergic activity. b) an increase in prolactin levels reflects a decrease in dopaminergic activity. c) an increase in prolactin levels reflects a decrease in dopaminergic activity. d) an increase in prolactin levels reflects a decrease in dopaminergic activity.

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