

**De Sousa SMC et al. Impulse Control Disorders in Dopamine Agonist-Treated Hyperprolactinemia: Prevalence and Risk Factors. J Clin Endocrinol Metab. 2020;105(3): e108-18. doi: 10.1210/clinem/dgz076.**

**CONTEXT:** There are growing reports of dopamine agonist (DA)-induced impulse control disorders (ICDs) in hyperprolactinemic patients. However, the magnitude of this risk and predictive factors remain uncertain.

**OBJECTIVE:** To determine ICD prevalence and risk factors in DA-treated hyperprolactinemic patients compared to community controls.

**DESIGN, SETTING AND PARTICIPANTS:** Multicenter cross-sectional analysis of 113 patients and 99 healthy controls.

**MAIN OUTCOME MEASURES:** Participants completed a neuropsychological questionnaire consisting of the Depression Anxiety Stress Scale (DASS21), Questionnaire for Impulsive-Compulsive Disorders in Parkinson's Disease (QUIP-S), Hypersexual Behavior Inventory (HBI), Hypersexual Behavior Consequences Scale and Social Desirability Response Set Scale. Demographic and clinical data were collated to determine ICD risk factors. Patients testing positive for an ICD were offered a semistructured psychological interview.

**RESULTS:** Patients were more likely than controls to test positive by QUIP-S for any ICD (61.1 vs 42.4%,  $P = .01$ ), hypersexuality (22.1 vs 8.1%,  $P = .009$ ), compulsive buying (15.9 vs 6.1%,  $P = .041$ ) and punting (18.6 vs 6.1%,  $P = 0.012$ ), and by HBI for hypersexuality (8.0 vs 0.0%,  $P = 0.004$ ). Independent risk factors were male sex (odds ratio [OR] 13.85), eugonadism (OR 7.85), Hardy's tumor score and psychiatric comorbidity (OR 6.86) for hypersexuality, and age (OR 0.95) for compulsive buying. DASS21 subset scores were higher in patients vs controls and in patients with vs without different ICDs. Only 19/51 (37.3%) interviewed patients were aware of the relationship between DAs and ICDs before the study.

**CONCLUSIONS:** DA therapy poses a high, previously underestimated risk of ICDs, especially in the form of hypersexuality in eugonadal men.