The number of benign and malignant breast diseases is the fastest growing one among all gynecological diseases in Europe. The problem is exacerbated by factors of modern women's lifestyle and by lacking a structure in the health care systems which would enable to detect the pathological changes in an early stage. Gynecologists and family physicians are the primary contact for performing a breast examination. The formula of a successful treatment of dishormonal breast diseases and of a successful breast cancer prevention is an effective cooperation of physicians of different disciplines and an adequate provision of information to the public about existing risk factors as well as about examination and treatment methods. Screening programs are a prerequisite for detecting the pathological changes. Cyclical mastodynia caused by homeostasis disorders of female sex hormones - including prolactin - is one of the breast disease risk indicators. Functional hyperprolactinemia (in 20-25% of cases) is also a pathogenic factor for the development of reproductive system disorders, menstrual cycle disorders and dishormonal breast diseases. Monitoring prolactin homeostasis and treatment options of unbalanced prolactin levels is an obligatory task of diagnosis and treatment of dishormonal breast diseases. After exclusion of an underlying organic disease of the pituitary gland itself hyperprolactinemia can be treated with evidence-based phytomedicine in most cases.