

Relief for Restless Legs Syndrome

Restless legs syndrome (RLS) is a disruptive neurologic disorder and sleep-related movement disorder accompanied by a strong urge to move the legs that usually occurs or worsens at rest. This condition may affect up to 10% of the population and seriously affects 2% to 3% of the adult population. This disorder usually comes with abnormal, uncomfortable sensations similar to crawling, cramping, aching, burning, itching, or prickling deep within the affected areas. As the name of the condition suggests, the legs are usually involved, but the arms or other parts of the body can also be affected with an urge to move. If you are afflicted with RLS, you may vigorously move the affected area, engage in pacing, perform other, usually repetitive, movements like stretching, bending, or rocking. RLS may be a primary condition (often genetic or occurs for unknown reasons) or may be due to an underlying disorder, certain medications, or other causes. Iron deficiency, low levels of the oxygen-carrying component of red blood cells (anemia), kidney failure, and pregnancy are some conditions where you might see secondary RLS.

How do I know if I'm at risk?

There are certain factors that may be associated with RLS:

- **Family history.** RLS is known to run in families, and parents may pass on the condition to their offspring.
- **Pregnancy.** Symptoms of RLS sometimes appear during pregnancy, especially in the final months, but usually disappear after childbirth.
- **Low iron levels or anemia (uh-nee-mee-uh).** These conditions may predispose a person to developing RLS, but the symptoms may improve when the iron level or anemia is addressed.

- **Chronic diseases.** Kidney failure frequently leads to RLS. Diabetes, rheumatoid arthritis, and peripheral neuropathy (pehr-ih-fuh-ruhl nyoo-rah-puhth-ee) are among other chronic diseases that may also be associated with RLS.
- **Caffeine consumption.** Reducing caffeine intake may improve symptoms.
- **Attention Deficit Disorder (ADD).** People with RLS frequently have ADD.

What are the warning signs?

Warning signs of RLS include:

- Unpleasant sensations in the legs (and sometimes arms), which are often described as creeping, crawling, tingling, pulling, or painful
- Walking, stretching, knee bends, massage, or hot or cold baths bring relief to leg sensations
- Prolonged periods of lying down or sitting come with leg discomfort
- The symptoms become worse in the evening and at night
- Involuntary leg (and sometimes arm) movement during sleep
- Difficulty falling or staying asleep
- Daytime sleepiness or fatigue
- Leg discomfort that cannot be explained by medical tests

When do I need medical attention?

You are the best judge of when your RLS symptoms are affecting your life. If you are experiencing sleep disturbances, depression or anxiety, or having trouble concentrating, these might also be clues that you should make an appointment with your doctor.

What tests do I need?

No laboratory test can be used to diagnose RLS.

On examination, there is usually nothing a doctor can see or detect. Diagnosis depends on a person's description of their symptoms. Most patients describe typical leg sensations that lead to an urge to move the legs or walk with the sensations worsening at rest, for example, when sitting or lying down or during the evening and night. The person with RLS may report sleep trouble or daytime sleepiness. Your doctor may:

- Listen to you describe your symptoms.
- Ask you if you have an irresistible urge to move your legs, notice more symptoms at night, or keep your bed partner awake with the jerking movements of your legs.
- Take your complete medical history.
- Perform a thorough physical examination.
- Rule out other conditions that might be confused with RLS.
- Check your iron levels.
- Conduct a sleep study to find out whether there are other causes of your sleep disturbance.

How can I avoid the problem?

In most cases, the cause of RLS is unknown, so it is difficult to know how to avoid RLS.

How is it treated?

Recent advances have provided doctors with a variety of ways to treat RLS, but there are no perfect treatments, and there is much yet to be learned about this condition. No one drug is effective for everyone with RLS.

- **Supplementation.** If your doctor recommends it, it may help to take iron, B12, or folate supplements.
- **Lifestyle changes.** Limit alcohol and caffeine, and avoid nicotine. A healthy diet and exercise may also help improve symptoms. For mild cases of RLS, taking a hot bath, massaging the legs, or using a heating pad or ice pack may help alleviate symptoms.
- **Discuss any medication you take with**

your doctor. Certain medicines or herbal remedies may worsen symptoms, including medication to treat high blood pressure, nausea, colds, allergies, heart conditions, or depression.

- **Dopamine (doh-puh-meem) agonists (ahg-uh-nist).** This class of drugs directly stimulates nerves in the brain that are not being stimulated naturally by dopamine, a chemical that sends signals to the part of your brain that controls movement and allows your muscles to move smoothly and do what you want them to. Two such drugs in this class are ropinirole (roh-pin-ih-rohl) and pramipexole (prahm-ih-pex-uhl).
- **Anticonvulsants.** If you have painful daytime RLS symptoms, you may find relief with drugs in this class, including gabapentin (gah-buh-pen-tihn) and enacarbil (en-ah-kahr-bihl).
- **Sedatives.** Drugs in this class are most effective for improving sleep quality for people who experience their RLS symptoms at night.
- **Pain relievers.** For severe, relentless RLS symptoms, drugs in this class can help you find relief.

It may be necessary to seek out a mental health professional to deal with the stress of RLS. For more information or to find a support group, log on to the website of The Restless Legs Syndrome Foundation, <http://www.rls.org>.

Notes:

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