

Restless Legs Syndrome

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RLS (Restless Legs Syndrome) is a disruptive neurological disorder that affects approximately 10% of the population. RLS is characterized by uncomfortable and sometimes painful sensations in the legs. Some affected individuals describe these feelings as *creepy*, *crawly* sensations or a *pulling* or *tugging* sensation. In all cases, the symptoms are relieved with movement of the affected limbs; conversely, the symptoms are exacerbated by staying still or by periods of prolonged immobilization, such as sitting in an airplane, a movie theater, or a long car ride. Usually, RLS is worse at night or during the evening hours, but symptoms may occur during the day as well.

Health professionals are concerned about RLS because of its impact on sleep and quality of life. In addition, many people with RLS have difficulty falling asleep at night, resulting in insomnia. This can cause a number of problems related to inadequate sleep and poor or unrefreshing sleep. These sleep disturbances can carry over into the daytime resulting in fatigue and excessive sleepiness, which directly impact productivity, social interactions, and the affected individual's mood and well-being.

We know that RLS is often accompanied by periodic leg movements of sleep (PLMs), which are jerking movements of the legs that occur repetitively throughout the night during sleep. More recent research has demonstrated that these PLMs result in sudden, acute elevations in blood pressure when they occur. Therefore, it is possible that PLMs and/or RLS may increase a person's risk for hypertension and other adverse cardiovascular events, such as heart attacks or strokes. This connection has yet to be proven, but it demonstrates another reason to take RLS seriously.

Currently, research is ongoing to determine the exact cause of RLS. However, the latest evidence indicates that RLS may be due to an abnormality of iron metabolism. In most cases, however, certain factors, such as pregnancy, chronic kidney disease, anemia, or excessive caffeine intake, may be associated with the syndrome. Often, RLS has a familial pattern, and it may occur in several generations of a family.

Fortunately, effective treatment for RLS exists. For those suffering from milder forms of RLS, a health care provider may suggest lifestyle changes and activities like a hot bath, leg massages, heating pads, regular exercise, and the elimination of caffeine to reduce symptoms. For moderate to severe cases of RLS, medication is the most effective treatment option. If an iron deficiency is found to be present, then iron supplementation, with vitamin C to improve absorption in the intestinal tract, may be helpful. Other medications that are utilized to treat RLS include dopaminergic agents, such as pramipexole (Mirapex), ropinirole (Requip), and combination carbidopa/levodopa (Sinemet).

Anyone who believes they might be affected by RLS should discuss this with their physician. At the Dallas Center for Sleep Disorders, we are skilled in evaluating and treating RLS and related disorders. If you or someone you know might have RLS, please contact us to schedule an appointment.

Dr. Kakar is a Diplomate of the American Board of Sleep Medicine (D.ABSM) and he is board-certified in both Sleep Medicine and Internal Medicine. He completed fellowship training at Stanford University's Sleep Disorders Clinic for Adults and Pediatrics. He is the medical director for the Dallas Center for Sleep Disorders in Plano, TX.