

The Skinny on Periodic Leg Movements of Sleep (PLMS) and Restless Leg Syndrome (RLS)

What is it?

Restless leg syndrome (RLS) is a common disorder characterized by an urge to move that is usually associated with an unpleasant tingling or pulling sensation deep within the leg muscles. The direct result of RLS are discomfort, sleep disturbances and fatigue. All of these things can affect your occupational and social activities.

Doctors don't know what causes RLS, but certain factors are associated with this problem. RLS may be genetic, as it has been known to run in families. A low iron level may contribute to RLS. Sometimes there is relief from symptoms when iron levels are corrected. Also, during the third trimester of pregnancy, women are more prone to RLS.

Movement of the toes, feet and legs occur most often when the person is sitting or lying down for the night. These uncomfortable sensations usually aren't painful. They have been described as "pins and needles", "a creepy crawly feeling", or "itchy". Most feel an uncontrollable urge to move the affected limb.

Approximately 80% of people with RLS also have periodic limb movements of sleep (PLMS). PLMS are limb movements that occur every 20-30 seconds throughout the night. These limb movements do not always cause a person to come to full wakefulness, many times they just keep a person from achieving any deep quality sleep during the night.. These arousals can cause a person to suffer from chronic (long term) sleep deprivation. Sleep deprivation can affect your ability to work by causing memory loss, slower reaction times, and irritability. Sometimes chronic sleep deprivation can even cause injury on the job. Sleep deprivation can also make you unable to function in social activities. You may find that you are falling asleep at inappropriate times. When your daytime life is being affected by sleep deprivation, it is time to consult your physician.

What is the treatment?

For mild RLS, some patients find that a massage, taking a hot bath, or applying a heat or cold can be helpful. Others have found that monitoring their diet and eliminating some triggers can be helpful in reducing symptoms. Caffeine is one common trigger. Other patients have found that moving the legs by walking or doing deep knee bends seems to relieve discomfort temporarily.

The severity of RLS can vary from patient to patient and in more severe cases, patients may want to seek pharmacologic help. At this time, the FDA has approved only one drug specifically for RLS.

The name of this drug is Requip. It would be best to consult with your primary care physician or a rheumatologist to specialize your treatment. You may even be referred to a specialist in sleep disorders to have a sleep study done. Remember, no single medication or combination of medications will work for every patient. It may take several attempts to find the right drug or combination of drugs that will work for you.

There are non-pharmacological treatments available for RLS, these include transcutaneous electrical nerve stimulation, conditioning therapy and procedures that reduce incompetent veins. You should discuss these options with your primary care physician.

Treatment for PLMS is generally medication. Your primary care physician or sleep specialist can recommend and prescribe the proper medication for you.

For questions or for the name of physicians specializing in sleep and RLS, please call The REM Center.