

Restless Legs Syndrome (RLS): Triggers, Home Remedies and Treatment

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Abstract

Restless Legs Syndrome: is a disorder in which you have an uncontrollable impulse to move your legs, usually in response to an unpleasant sensation. It usually happens when you're seated or lying down in the evening or at night. Moving around temporarily alleviates the uncomfortable sensation. Restless legs syndrome, also known as Willis-Ekbom sickness, can strike at any age and worsens with time. It can interfere with daily tasks by disrupting sleep. Simple self-care and lifestyle adjustments may be beneficial in alleviating symptoms. Medications also help many people with RLS.

Keywords: Restless Less Syndrome (RLS); Willis-Ekbom sickness; Twitching; Worsening; Home remedies.

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Introduction

The great majority of RLS cases will go away on their own with time or with minor lifestyle modifications. Restless legs syndrome (RLS) is a long-term condition characterized by a persistent need to move one's legs. The legs frequently have an uncomfortable sensation that improves with movement. In nature, this is typically described as aching, tingling, or crawling. The arms are occasionally affected as well. The feelings usually occur when you're sleeping, which makes it difficult to get a good night's sleep.

RLS patients may experience daytime tiredness, low energy, irritability, and depression as a result of their sleep disturbances. Many people also twitch their limbs while sleeping.

Restless legs syndrome (RLS) can occur as a result of mental or physical problems, or as a side effect of certain medications. The severity of restless legs syndrome is determined by the frequency and severity of the symptoms, as well as how easily the symptoms may be eased by moving around and how much disruption they cause. It affects up to 1 in 10 people at some time during their life.

Restless legs syndrome affects some persons on a daily basis, while it affects others just rarely. Mild to severe symptoms can occur. Restless legs syndrome can be extremely distressing and interfere with a person's daily activities in extreme circumstances.

What is Restless Leg Syndrome?

Restless legs syndrome (RLS), also known as Willis-Ekbom disease, is a movement disorder characterized by unpleasant sensations and involuntary leg movements during sleep.

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Symptoms of Restless Leg Syndrome

1. An urge or desire to move their legs, usually accompanied by uncomfortable sensations such as numbness, tingling, crawling, itching, aching, burning, cramping, or pain.
2. The urge to move or uncomfortable sensations begin or worsen during periods of rest or inactivity, such as when sitting watching television or traveling in a car or by airplane.
3. The urge to move or uncomfortable sensations are partially or totally relieved by activities such as stretching, walking, or exercising the affected muscles.
4. The urge to move or uncomfortable sensations are worse or occur solely in the evening or at night.
5. The urge to move or uncomfortable sensations are not solely due to another medical or behavioral problem (muscle pains, leg cramps, arthritis, habitual foot tapping).

RLS is Categorized as Either Primary or Secondary

1. Primary RLS is considered idiopathic or with no known cause. Primary RLS usually develops gradually before the age of 40–45 years and can last for months or even years. It's usually progressive and grows worse as you get older. Growing pains are frequently misinterpreted as RLS in youngsters.
2. Secondary RLS usually appears after the age of 40, and it may be present on a daily basis right away. It's most commonly linked to particular medical issues or the usage of certain medications.

Causes

RLS affects about 5% to 10% of the population with mild symptoms. The rate of occurrence rises with age and is more common in women than in males.

There are two types of RLS, described as primary and secondary RLS. Primary RLS is also called idiopathic RLS. The primary type has no clear cause and tends to run in families.

Secondary RLS Occurs in Association with Predisposing Conditions, Including

- Iron deficiency
- End-stage kidney disease
- Diabetes
- Multiple sclerosis (MS)

- Parkinson's disease
- Peripheral neuropathy
- Varicose veins
- Thyroid disease
- Medication side effect

Pregnancy is associated with an increase in RLS symptoms. It is not clear why it occurs during pregnancy and the symptoms of RLS generally resolve after delivery.

How RLS Develops

RLS is caused by a variety of mechanisms. It's been linked to brain abnormalities as well as changes in leg feeling. According to experts, the illness can develop as a result of either of these issues, but it can also develop without either neuropathic pain or recognised brain alterations.

- Conditions that raise the risk of neuropathic pain, such as peripheral neuropathy and diabetes, might induce leg discomfort that is eased temporarily by movement.
- In RLS, the substantia nigra, a brain region, can be affected. The iron concentration of the substantia nigra may be low in iron-deficiency anaemia. This part of the brain is known to play a key role in controlling dopamine, a neurotransmitter, and mediating muscle activity. Several therapies for RLS operate by interacting with dopamine receptors in the brain to alleviate symptoms.

Diagnosis

Although no particular diagnostics exist for RLS, non-specific laboratory testing are done to rule out other possible causes, including as vitamin deficiencies. To confirm the diagnosis, five symptoms are used

- A great need to move one's limbs, generally accompanied by unpleasant or unpleasant sensations.
- It begins or worsens during periods of idleness or relaxation.
- It gets better or goes away (at least briefly) with activity.
- It gets worse in the evening or at night.
- It is not caused by any medical or behavioural issue.
- Leg cramps, positional discomfort, local leg injury, arthritis, leg edoema, venous stasis, peripheral neuropathy, radiculopathy, habitual foot tapping/leg rocking, anxiety, myalgia, and drug-induced akathisia are the most prevalent disorders that should be

distinguished with RLS.

- Leg discomfort can also be caused by peripheral artery disease and arthritis, but it usually grows worse with movement.
- Myelopathy, myopathy, vascular or neurogenic claudication, hypotensive akathisia, orthostatic tremor, aching legs, and wiggling toes are some of the less common differential diagnoses.

Treatment

The medication will depend on the individual but might include:

Iron: People with low iron levels may benefit from iron supplementation. This, in turn, may aid in the alleviation of symptoms. Iron supplements are available for purchase online.

Alpha 2 agonists: may aid with primary RLS, however they have little effect on periodic limb movement when sleeping.

Painkillers: Ibuprofen, a non-steroidal anti-inflammatory drug (NSAID), may help with mild symptoms. Ibuprofen is available for purchase online.

Anticonvulsants: These treat pain, muscle spasms, neuropathy, and daytime symptoms. Neurontin, or gabapentin, is a popular anticonvulsant.

Benzodiazepines: are sedative drugs that assist patients with RLS sleep through their symptoms, both severe and minor. Examples are Restoril, or temazepam, Xanax, or alprazolam, and Klonopin, or clonazepam.

Dopaminergic agents: These drugs increase the amount of dopamine in the brain, which is a neurotransmitter. They can help with the uncomfortable leg feelings that RLS causes. Dopaminergic drugs such as levodopa and carbidopa are often used.

Dopamine agonists: These cure unpleasant leg sensations by increasing dopamine levels in the brain. They may have negative consequences in older persons, while some people report that levodopa has more side effects.

Opiates: are pain relievers that can also help with RLS symptoms. When other drugs have failed, doctors may prescribe them. Low-dose opiates include codeine and propoxyphene, whereas high-dose opiates include oxycodone hydrochloride, methadone hydrochloride, and levorphanol tartrate.

RLS is sometimes treated with Parkinson's disease and epilepsy medicines, which can help to minimise uncontrollable movements.

Home remedies

Lifestyle changes and common medications that may help alleviate RLS symptoms include:

- **Warm baths and massages:** can help to relax muscles and lessen the severity of symptoms.
 - **Warm or cold packs:** Some people prefer warm, while others believe that alternating hot and cold packs is helpful.
 - **Relaxation techniques:** Stress can make RLS worse, so exercises such as yoga, meditation, and tai chi may help.
 - **Exercise:** using legs more can help alleviate symptoms. If the patient has a sedentary lifestyle, walking instead of driving, taking up a sport, or exercising the legs in a gym can help.
- Sleep hygiene for restless legs syndrome: Sleep hygiene is important, as tiredness makes symptoms worse.

Tips include

- ◆ Sleeping in a cool, quiet bedroom.
- ◆ Going to bed at the same time every night, and getting up at the same time every morning.
- ◆ Reduce the amount of light you are exposed to for an hour before bed.
- ◆ Avoid stimulating drinks, such as caffeine or sugar.
- ◆ Avoiding or reducing alcohol consumption and tobacco.

Exercise and physical activity can help RLS, but it can also aggravate it. Most patients find moderate exercise helpful, but too much can make symptoms worse. Working out late in the evening may also be unhelpful.

Conclusion

Physical activity and exercise can help RLS, but they can sometimes make it worse. Moderate activity is beneficial to the majority of patients, while excessive exercise might exacerbate symptoms. Exercising late at night might also be counterproductive.

References

1. <https://www.mayoclinic.org/diseases-conditions/restless-legs-syndrome/symptoms-causes/syc-20377168>.
2. Allen, R; Picchietti, D; Hening, WA; Trenkwalder, C; Walters, AS; Montplaisi, J; Restless Legs Syndrome Diagnosis Epidemiology workshop at the National Institutes of Health; International Restless Legs Syndrome Study Group (2003). "Restless legs syndrome: diagnostic criteria, special considerations, and epidemiology A

- report from the restless legs syndrome diagnosis and epidemiology workshop at the National Institutes of Health". *Sleep Medicine*. 4 (2): 101-19. doi:10.1016/S1389-9457(03)00010-8. PMID 14592341.
3. <https://www.medicalnewstoday.com/articles/7882>.
 4. "What Causes Restless Legs Syndrome?". NHLBI. November 1, 2010. Archived from the original on 20 August 2016. Retrieved 19 August 2016.
 5. "Restless Legs Syndrome Information Page | National Institute of Neurological Disorders and Stroke". www.ninds.nih.gov. Retrieved 7 July 2019.
 6. <https://docveinmanagement.com/new-home/conditions/restless-leg-syndrome-rls/>
 7. "What Are the Signs and Symptoms of Restless Legs Syndrome?". NHLBI. November 1, 2010. Archived from the original on 27 August 2016. Retrieved 19 August 2016.
 8. "How Is Restless Legs Syndrome Treated?". NHLBI. November 1, 2010. Archived from the original on 27 August 2016. Retrieved 19 August 2016.
 9. <https://www.medicalnewstoday.com/articles/7882#home-remedies>.
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