

IS RESTLESS LEGS SYNDROME MORE FREQUENT AND SEVERE IN THE MULTIPLE SCLEROSIS POPULATION? STUDY IN MULTIPLE SCLEROSIS PATIENTS FROM SOUTHEAST TEXAS

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Introduction: Restless Legs Syndrome (RLS) is a poorly recognized condition which affects 5-15% of the general population, with a prevalence that increases with age, and is more frequent in women, patients with history of depression, iron deficiency, renal disease, thyroid disease, diabetes mellitus (DM), obesity, anxiety and during pregnancy. The main diagnostic criteria (1) are: 1) A desire to move the extremities often associated with unpleasant sensation in the legs, 2) symptoms are worse or present during rest and partially relieved by activity, 3) motor restlessness and 4) nocturnal worsening. Associated with the diagnostic criteria, there is a validated scale that can measure the severity of symptoms in patients with RLS (2).

There are three studies (3,4,5) published in the literature regarding the frequency of RLS in Multiple Sclerosis (MS) populations and none regarding the severity according to the international validated severity scale. Many patients with MS have significant fatigue during the day and this may be secondary to RLS and sleep difficulties. RLS may also contribute to missed work, driving accidents and impaired quality of life.

Objectives: To assess the frequency and severity of MS patients with RLS confirmed according to the diagnostic criteria and severity scale.

Materials and Methods: Prospective study of 251 consecutive patients seen at the Maxine Mesinger MS Clinic and having a history of MS diagnosis according to the Revised McDonald criteria from 2005. The patients answered 4 questions related to the diagnostic criteria for RLS. If the questions were affirmatively answered and RLS confirmed, symptom severity was measured using the RLS severity scale.

Results: 251 subjects participated in the study. 77% were women and 23% were men. RLS was present in 33.4% of the interviewed population (fig. 1); 62% of the RLS patients were 41 years or older. From the RLS population, 81% were women and 19% men (fig.2); 35% of female MS patients had RLS compared to 28% of male MS patients (fig. 3). 84% of our subjects had Relapsing Remitting MS and 13% Secondary Progressive MS. Hypothyroidism was present in 8% of the total MS population with RLS but all patients were receiving thyroid replacement. None of the subjects was pregnant, had renal disease or rheumatoid arthritis; 11% had a history of anemia that was under treatment and only one patient had a history of DM.

Fig. 1. Frequency of RLS in our MS population.

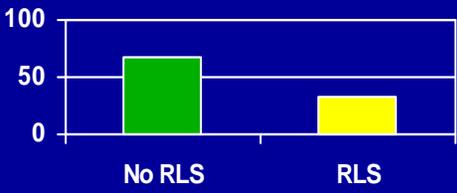


Fig.2. Gender of subjects with MS and RLS

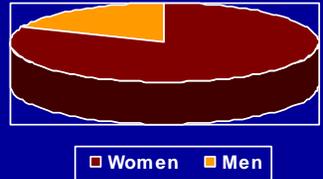


Fig. 3. Frequency of RLS according to gender.



Finally, regarding severity of the disease, more than 90% of the studied population with RLS had moderate, severe or very severe symptoms (fig. 4)

Fig 4. Severity of RLS



Conclusions: We found a higher proportion of MS patients with RLS in comparison with the general population and a significant degree of severity of the symptoms. RLS may be as important as other symptoms and conditions present in MS and we need to be aware of it and treat it if needed. Finally, studies regarding treatment of RLS in patients with MS are needed.

References:

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