

TITLE 1: “Ask the Doctor”

TITLE 2:

DATE: August 1999

AUTHOR/S: Sudhansu Chokroverty, MD

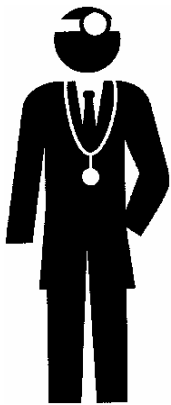
KEYWORDS:

- Pharmaceutical treatment

ABSTRACT OVERVIEW: Dr. Chokroverty discusses how one reader’s husband could have possibly had remission from RLS. Did he really have before RLS? Is the medication for other things effecting his RLS in such a positive way? Dr. Chokroverty discusses this woman’s question in detail.

COPY OF ARTICLE:

Q. *My husband had been taking Sinemet four times a day for RLS and that did not help much. On December 14 of last year he had fluid in his legs and throughout his body so*



bad that he was rushed to the hospital. A week later he was unable to breathe and was put on life support. He responded so well that he was taken off life support a week later and he no longer had restless legs. Now, five months later, he no longer needs any pills for RLS. What could have happened?

A. In order to answer the question “what could have happened?”, it is important to get the answers to the following questions:

1) Did the patient fulfill all the criteria for a diagnosis of true RLS? In other words, did the patient really have RLS or RLS-like symptoms, which may have other causes? How was the diagnosis made? It was stated that he was on Sinemet without much help. Was Sinemet ever helpful? At least in the beginning, RLS patients do have some relief with

Sinemet.

2) What was the cause of his body-fluid collection? The causes of generalized fluid collection are many and the important causes include heart failure, nephrotic syndrome (kidney failure), liver failure associated with cirrhosis of the liver, severe depletion of serum proteins, severe allergy.

3) What was done to remove the body fluid?

4) Was he placed on any medication to treat generalized edema (fluid collection)?

5) Is he currently on any medication that might have an effect on RLS? Without having the benefit of an answer to any of the questions, it is almost impossible to answer what could have happened.

One could just speculate. I am submitting the following possibilities in this patient.

1) He did not really have true RLS.

2) If he was given medication to treat the generalized edema, then that medication may have an effect on RLS.

3) Rarely, remission has been noted in RLS. He may be one of the rare patients who went into natural temporary remission. It would be very important to have regular follow-ups to see if there is any recurrence or if he is completely relieved of RLS symptoms.

I must admit that I am somewhat puzzled by this patient. I have never seen such a patient and, to my knowledge, no such spectacular remission has been described following treatment of generalized edema.

Sudhansu Chokroverty, MD

New York, NY