

TITLE 1: “Ask the Doctor”

TITLE 2:

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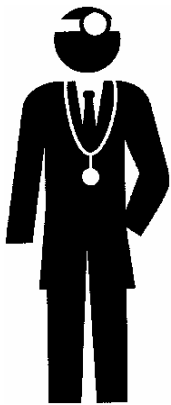
KEYWORDS:

- Pharmaceutical treatment

ABSTRACT OVERVIEW: One reader asks a question about having RLS confined to her feet and her success with the addictive drug Vicodin. Dr. William Ondo responds with some interesting points about her question: whether what she really has is RLS and whether she can continue taking Vicodin.

COPY OF ARTICLE:

Q. *I have RLS in my feet, not my legs. In June 1996, I had a total hip replacement and was prescribed Vicodin. I noticed relief from my RLS. My family doctor is reluctant to continue*



giving me prescriptions for Vicodin, even after I informed him about RLS and the relief it has given me. When I ask him to make my scrip for 120 tablets instead of 60, he balks, saying Vicodin is a powerful drug and that he could lose his license if the government cracked down on him. I take one and a half tablets at bedtime, and on rare occasions, two. They work for three or four hours. After that, I walk the floors and eat, watch TV, etc. I take no other medications, have no other health problems, passed a medical examination with flying colors, but I need some sleep, sleep, sleep.

A. RLS confined only to the feet is somewhat unusual. Other conditions that have similar symptoms in the feet include 1. painful neuropathies and 2. painful legs and moving toes. The former typically consists of a burning pain near the surface of the feet. The latter has variable pain and constant writhing

movement of the toes. Both can be worse at night and respond to Vicodin. In my experience most people that do have RLS in the feet also have some component of nerve injury (neuropathy). Therefore evaluation with an electromyogram (EMG) to test for this may be warranted. Vicodin (hydrocodone) is a “controlled” narcotic with potential for abuse. Although I have not seen many problems in RLS patients who take this type of medication, many physicians are not comfortable prescribing these drugs on a chronic basis. Alternatives for the “urge to move” component include the dopaminergic medications. Alternatives for the more painful component include gabapentin or tramadol.

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