

# RESTLESS LEGS SYNDROME: TRIGGERS & COPING STRATEGIES



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# RESTLESS LEGS SYNDROME

- Sleep and Movement Disorder
- Affects 8% of population (more than Parkinson's Disease)
- Is exacerbated by stress
- Cannot sit for long periods of time
- Have trouble focusing due to symptoms

# 2012 NEW DIAGNOSTIC CRITERIA

[HTTP://IRLSSG.ORG/DIAGNOSTIC-CRITERIA/](http://IRLSSG.ORG/DIAGNOSTIC-CRITERIA/)

- An urge to move the legs (may or may not have uncomfortable sensations)
- Begin or worsen during rest or inactivity
- Partially or totally relieved by movement
- Are worse during the evening or night
- Are not accounted for symptoms of other health conditions (medical or behavioral)

# CO-MORBID — CHRONIC CONDITIONS THAT EXACERBATE SYMPTOMS

Iron deficiency

PD

Kidney failure

Diabetes

Neuropathy

GI disorders

Electrolyte imbalances

Menopause?



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# MEDICATIONS THAT MAY EXACERBATE SYMPTOMS

**Anti-nausea drugs** (Compazine, Dramamine, Phenergan and Reglan)

- Alternative drugs that may not worsen RLS symptoms include Zofran for nausea and Transderm Scop

**Anti-psychotropic drugs (block dopamine)**

**Some antidepressants** (Celexa, Cymbalta, Effexor, Elavil, Tofranil, and others)

- Alternative drug is Wellbutrin

**Antihistamines (Benadryl)**

- Alternative drug is “second generation” antihistamines Allegra, Clarinex, Claritin/Alavert

# CONDITIONS THAT EXACERBATE SYMPTOMS

## **Pregnancy**

- **Symptoms worsen during pregnancy**
- **Usually resolve after delivery (one month)**

# TREATMENT AND MANAGEMENT OF CO-MORBID CONDITIONS

If your RLS is “acting up” and you have a co-morbid condition, take care of that, even though you may not be having symptoms

- eg: Diabetes – the holidays – blood sugar is up, may not even realize it, RLS symptoms are worse than ever.

# WHAT IS NOT A TRIGGER?

A “trigger” is not something that has been determined (tested/researched) that is a diagnostic feature or known to cause symptoms (eg: low iron).

A “trigger” is not a co-morbid condition.



# WHAT IS A TRIGGER?

Everyone has “triggers” that are unique to them.

- Your “trigger” is not someone else’s.

A trigger is something that worsens YOUR symptoms but may not worsen someone else’s.

# STRESS

## Everyday stress

Stress that is situational (holidays, birthdays, death in family, divorce, etc.)

## Worrying about symptoms

- Am I going to have them tonight?
- Am I going to have them on the airplane?
- Am I going to have them during Susie's recital?

## Chronic stress

# EXERCISE

Does exercise cause your symptoms to get worse?

Does exercise at a certain time of day make your symptoms get worse?

# CAFFEINE

## Includes

- Coffee
- Chocolate
- Tea
- Soda

May also include time of day you consume these things

# NICOTINE

Does smoking make your symptoms worse?

# ALCOHOL

Drinking a glass of wine before bedtime?

To much drinking

# WHAT TO DO?

## Identify your triggers

- Sleep diary
- Food diary
- Activity diary

# CONSIDER STRESS REDUCTION TECHNIQUES

Specific to YOUR needs

## MBSR

- Here and now
- You know you are going to have them – control stress knowing this - proactive

Massage

Meditation



# KNOW THE MEDS YOU ARE TAKING

Educate yourself

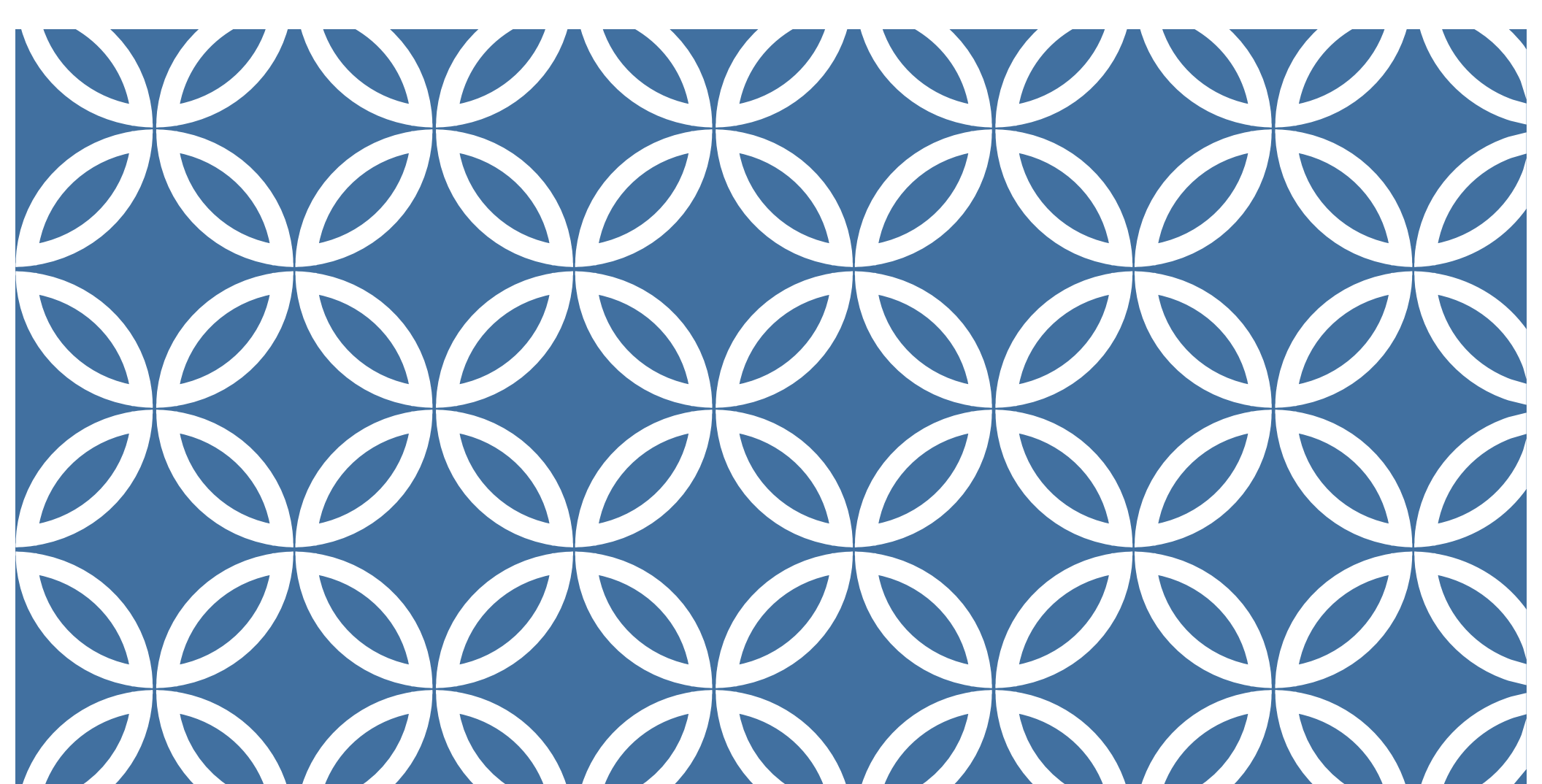
Talk to your health care provider

# TRIGGERS FOR RLS

A Guide To Help You Control and Manage Your RLS

[www.rls.org](http://www.rls.org)





**Q & A**

[WWW.RLS.ORG](http://WWW.RLS.ORG)



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