Restless Leg Syndrome
Case Study

James A. Rowley, MD
for the Sleep Education for Pulmonary Fellows and Practitioners, SRN ATS Committee
May 2015
Part 1: Case Presentation

AF is a 35 year old female who comes to your office with complaints of difficulty falling asleep at night for the last year.
Questions

• What are important components of a good history focused on insomnia?

• What is the differential diagnosis of insomnia?
Case Presentation

• Upon further questioning, AF states:
  – Bedtime is at 11p and generally takes her 30-45 minutes to fall asleep
  – Wake time is 7a weekdays, 8a on weekends
  – When cannot fall asleep, generally stays in bed watching the clock
  – While trying to fall asleep, feels restless and is constantly moving her legs
  – Does not watch TV or read in bed
  – Only drinks juices or herbal tea after dinner
  – Does not smoke or consume alcohol
  – Is generally sleepy when gets into bed at night
  – Does not worry about her sleep during the day
  – Feels fatigued during the day
Questions

• What additional questions should be asked to confirm the diagnosis of restless leg syndrome?

• Are there any questionnaires for RLS?
Case Presentation

• Upon further questioning, AF states that:
  – The restlessness in her legs often feels like something is crawling up them
  – The restlessness generally improves if she moves her legs around
  – She occasionally notices the creepy-crawly feeling when watching TV in her living room if lying on couch
  – Symptoms bother her at least 4 nights per week
  – Had similar symptoms about 5 years ago during her pregnancy
  – Her father and brother have similar symptoms
Part II: Diagnostic Testing

• Given the diagnosis of RLS:
  – Which medications need to be checked for?
  – What diagnostic testing is indicated?
Case Presentation

• Upon further questioning:
  – AF only medication is omeprazole for GERD

• Ferritin level is 80
Questions

• What treatment options are available for RLS and what would you recommend for this patient?

• Is RLS associated with other medical conditions and long term health outcomes?
Part III: Treatment

You prescribe AF pramipexole 0.25 mg one hour before bedtime.

AF returns after 2 months with marked improvement in:

• Symptoms of restlessness: now only bother her about 1x/month
• Sleep latency most nights ~10 minutes
Question

• What is the relationship between RLS and periodic limb movements during wakefulness (Figure 1) and sleep (Figure 2) as observed on a sleep study?
Figure 1:
Tracing of PLMs during Sleep
Figure 2: Tracing of PLMs during Wakefulness