IS THERE A HIGHER incidence of restless leg syndrome in the obese population?

Restless leg syndrome is a neurological condition that causes an intense urge to move the legs. It is often accompanied by sensations described as creeping, pulling, itching, or tingling. The symptoms often occur in the evening or night, when the patient is at rest, and are relieved with activity. They often lead to difficulty falling asleep or obtaining a restful night's sleep.¹

The cause of restless leg syndrome is unknown, but has been linked to many other health conditions, including iron deficiency anemia, pregnancy, smoking, nerve disease, polyneuropathy, rheumatoid arthritis, diabetes, kidney failure, caffeine and alcohol intake, H2 blockers, and use of some antidepressant medications.

Treatment is aimed at treating or correcting associated illnesses, such as anemia, quitting smoking, decreasing caffeine and alcohol intake, and increasing sleep and exercise activity. Medications, including opioids, Neurontin, Requip, and Mirapex, are also often used for symptom management.

A recent study from Harvard University presented in *Neurology Journal*² reports that overall obesity and abdominal adiposity are associated with increased incidence of restless leg syndrome. They examined data from 65,554 women from the Nurses' Health Study

and 23,119 men from the Health Professional Follow-up Study. 6.4% of the women and 4.1% of the men were identified as having restless leg syndrome. People with a Body Mass Index over 30 were 1.42 times more likely to develop restless leg syndrome. Decreased dopamine function is known to be present in both obese persons and those with restless leg syndrome. This could be the link between the two populations, but this conclusion has not yet been studied.

References

1. Restless Leg Syndrome Foundation. Available at www.rls.org. Accessed March 22, 2010.
2. Goa X, Schwarzschild M, Wang H, Ascherio A. Obesity and restless leg syndrome in men and women. *Neurology* 2009;72:1255–1261.

We welcome your active participation in this Q&A feature. Please address your questions to lgould@son.jhmi.edu and specify that they are for the Clinical Q&A section of the *Journal*.

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