



Research Update: Restless Leg Syndrome

One of our latest research studies has been selected for oral presentation at the *Fifteenth World Congress of the International Union of Phlebology in Brazil*. This study reflects some of the most recent and significant advancements in the understanding and treatment of varicose vein disease. We hope you will find this brief summary useful.

“HIGH PREVALENCE OF RESTLESS LEG SYNDROME IN PATIENTS WITH CHRONIC VENOUS INSUFFICIENCY: A STORY UNTOLD”

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Background: Restless Leg Syndrome (RLS) is pathology of unknown etiology that plagues 9-15% of the healthy population. Currently available knowledge suspects central nervous system pathology and recommends neuropharmacological interventions with limited success. We had observed the possibility of restlessness in chronic venous insufficiency (CVI, Phlebology 2002). However, there are no systematic studies that accurately estimate the prevalence of RLS in CVI.

Methods: 174 consecutive patients reporting to a CVI clinic (study group) and 98 age and sex matched healthy individuals were investigated as controls. The diagnosis of RLS was established by the International RLS study group criteria. Detailed clinical, systemic, duplex ultrasound evaluations were performed to establish CVI (reflux > 0.5 sec with augmentation maneuvers and CEAP criteria).

Results: Of the 174 consecutive study subjects (22 M; 152 F), 62 (36%) had evidence of RLS compared to 19 of 98 (19%, $p < 0.05$) controls. 60 (97%) of the RLS patients had CVI, which was significantly higher ($p < 0.000$, compared to RLS without CVI in study group, $p < 0.05$ vs. 14/19 (74%) of controls with RLS and CVI). When patients with RLS and CVI were compared to patients with vein disease alone ($n = 106$) the severity of vein disease under the CEAP classification was found comparable. None of the patients in this series had anemia, CRF, psychiatric or neurological disease believed to be pathognomic of RLS.

Conclusion: RLS appears to be a common overlapping clinical syndrome in patients of CVI unlike the previous hypothesis. Prospective blinded therapeutic trials are planned to study the influence of definitive treatment for CVI on sequential RLS scores.

We hope you have found this summary useful.