RLS-Workshop 2009

Saturday, December 12th, 2009

Max-Planck-Institute of Psychiatry, Kraepelinstr. 2, Auditorium, 80804 Munich, Germany



Restless Legs Syndrome and women from the hormonal prospective

Several epidemiological surveys confirmed a higher and still unexplained prevalence of Restless legs syndrome (RLS) in female than in male population. About one quarter of women experience RLS during pregnancy, and the RLS prevalence is higher in multipara than in nullipara women. Moreover, menopause might be related to a worsening of RLS symptoms. Women with RLS showed higher levels of estradiol during pregnancy compared to controls. Reciprocal influences have been demonstrated between estrogens and dopamine. These are only part of the evidences that address to a possible hormonal role in RLS pathogenesis. Sexual hormones might act as a risk factor for RLS combined with a specific genetic background vulnerability.

Preliminary Agenda, 9:00 – 13:00 h:

Chairmen: Thomas Pollmächer and Mauro Manconi

09:00 - 09:10	Introduction (Thomas Pollmächer) 10 min
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09:10 - 09:30	Epidemiological update on gender as risk factor for RLS (Jan Ulfberg) 20 min
09:30 - 09:50	RLS and pregnancy (Mauro Manconi) 20 min
09:50 - 10:10	Estrogens, dopamine and RLS (Stephany Fulda) 20 min
10:10 – 10:20	RLS in women in a silician cohort: influence by hormons, life cycles and comorbidity (Rosalia Silvestri) 10 min
10:20 – 10:30	Self reported health related quality of Life among women in Sweden with
	symptoms associated with RLS (Jan Wesström, Jan Ulfberg) 10 min
10:30 – 10:50	- coffe break -
10:30 – 10:50 10:50 – 11:10	
	- coffe break -
10:50 – 11:10	- coffe break - RLS and menopause (I. Ghorayeb) 20 min
10:50 - 11:10 11:10 - 11:30	- coffe break - RLS and menopause (I. Ghorayeb) 20 min Parity and RLS (Richard Allen, Klaus Berger) 20 min

For researchers who are interested the presentations will be followed by a discussion concerning a possible multicentre investigation on genetic influence on RLS during pregnancy, with the aim to verify the frequency of the known genomic variants associated with RLS in a population of pregnant women with and without RLS. (Manconi M, Winkelmann J, Gross N.)