

Is preeclampsia associated with restless legs syndrome?

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Background/ Objectives

Restless legs syndrome (RLS) is a common neurological disorder. Secondary RLS forms include pregnancy and iron deficiency. Prevalence of RLS in pregnancy ranges between 11-27%. Pregnancy or delivery complications due to RLS are not described.

We aimed at assessing frequency and characteristics of RLS in pregnancy in a Peruvian population and to evaluate possible pregnancy or delivery complications due to RLS.

Methods

We assessed 218 consecutive expectant mothers at the inpatient clinic of the Hospital Nacional Docente Madre Niño San Bartolome, Lima, Peru. Assessment was performed by using the standard diagnostic criteria for RLS and by a clinical-diagnostic interview. Questionnaires for RLS severity (IRLS) and excessive daytime sleepiness (EDS), as measured on the Epworth Sleepiness Scale (ESS), were used. Blood examination was performed for haemoglobin and haematocrit. For comparison, RLS patients were matched for age- and BMI with pregnant women without RLS.

Results

Out of 218 patients, 40 (18.4%) fulfilled diagnostic criteria for RLS. In RLS patients, prophylactic iron supplementation therapy during pregnancy was taken less frequently ($P=0.02$). RLS pregnant women had a higher ESS score than pregnant controls (10.6 ± 3.1 vs. 7.6 ± 3.6 ; $P<0.001$). Preeclampsia was more frequent in RLS patients (7/40 vs. 1/39; $p=0.03$).

Discussion

In our study, RLS was frequent in pregnant Peruvian women, especially in those without prophylactic iron supplementation. RLS patients described more daytime sleepiness. Preeclampsia was more common in RLS patients. Known potential risk factors for preeclampsia include preexisting hypertension, diabetes, autoimmune diseases such as lupus, or women with a family history of preeclampsia. This is the first study indicating a possible association between RLS and preeclampsia.