

Restless legs syndrome (RLS) in children: presenting symptoms.

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Background: Guidelines have been formulated for the diagnosis of RLS in children. The diagnosis remains difficult, because the child gives no clear description of symptoms which may point to RLS. The study seeks to describe these presenting symptoms in a group of young children and teenagers.

Methods: From the records of two centres with special interest in paediatric sleep, 31 patients were identified. (25 boys; age range: 4-16 yrs; median: 10 yrs). All children met the ICSD 2 criteria for paediatric RLS and underwent a full polysomnography including recording of periodic leg movements (PLMS).

Results: The first symptoms occurred at a median age of 8 yrs, range: 4-12 yrs. At the first visit to the sleep centre all children complained of daytime tiredness. Eight of them had excessive daytime sleepiness. Difficulties in initiating or maintaining sleep during the night were reported in all cases. Twelve children complained about feelings in the legs which were initially diagnosed as “growing pains”. Clear RLS symptoms (the essential 4 criteria) were present in 30% of the children. Deep sleep related parasomnias occurred in 3 children. The main co-morbidities were epilepsy in 8 (possibly a selection bias as SEIN is a centre specialised in epilepsy as well) and ADHD in 14 cases. At least for 10 children the family history was positive for RLS, but this data was not present for all patients included in the study. Polysomnography revealed that sleep architecture was normal in 90% of the cases. Leg movements occurred with a mean of 61/hr of sleep (range: 40-250). The PLM index had a mean value of 13/hr of sleep (range: 7-50).

Conclusion: The study gives guidelines concerning what to ask and look for when RLS is suspected in a child.