Restless Leg Syndrome

Examination

1. Restless Legs Syndrome is classified as a neurologic movement and/or sensorimotor disorder that inflicts from ________ of Americans according to the National Institute of Health.
   a. 1% to 3%
   b. 3% to 5%
   c. 5% to 15%
   d. 15% to 20%
   e. 20% to 25%

2. At the present time, researchers believe that RLS is probably due to a subcortical brain dysfunction involving the ________ system.
   a. serotonin
   b. endorphin
   c. acetylcholine
   d. dopaminergic
   e. norepinephrine

3. Onset of RLS may begin at any age, but most patients who are severely affected are
   a. newborns
   b. infants
   c. teenagers ("growing pains")
   d. young adults
   e. middle-aged or older

4. Primary RLS seems to follow ________ pattern of inheritance.
   a. an autosomal dominant
   b. an autosomal recessive
   c. an X-linked recessive
   d. a chromosomal
   e. a multifactorial

5. Secondary RLS is usually a reversible form of the disorder seen in patients with ____ deficiency.
   a. zinc
   b. calcium
   c. iron
   d. magnesium
   e. phosphorus

6. The chief clinical complaint for which most patients initially seek treatment with RLS is
   a. insomnia
   b. leg pain
   c. delayed onset of sleep
   d. fatigue
   e. poor function at work
7. **All of the following statements regarding the symptoms of RLS are true EXCEPT**
   a. Individuals typically describe their symptoms as worse when sitting or lying down
   b. Individuals typically describe their symptoms as more prominent during the day
   c. Rest, quiet activities, or attempts to sleep evoke unpleasant sensory and motor symptoms most commonly of the legs and sometimes the arms
   d. Patients might describe their sensations as pulling, prickly, or electric
   e. Sensations range from mild to intolerable combined with a need to move the legs

8. **The symptoms of RLS typically progress over time in about ______ of patients and may be severe enough to be disabling.**
   a. one-tenth
   b. one-fourth
   c. one-third
   d. one-half
   e. two-thirds

9. **Regarding the symptoms of RLS, all of the following activities may become unpleasant EXCEPT**
   a. travel as a passenger in a car
   b. taking short walks
   c. going to the theater
   d. dining
   e. reading a book

10. **The diagnosis of RLS is based primarily on**
    a. the patient's history and assessment
    b. a low serum ferritin
    c. an abnormal physical exam
    d. an abnormal sleep study
    e. ruling out varicose veins

11. **Disorders that may be in the differential because of similar complaints include all of the following EXCEPT**
    a. intermittent claudication
    b. peripheral neuropathy
    c. varicose veins
    d. narcolepsy
    e. nocturnal leg cramps

12. **In order to make a diagnosis of RLS, all of the following minimum criteria must be met EXCEPT**
    a. Motor restlessness as seen in activities such as floor pacing, tossing and turning in bed, or rubbing the legs
    b. A compelling urge to move the limbs usually associated with paresthesias or dysesthesias
    c. Symptoms worse or exclusively present at rest
    d. Symptoms worse during the daytime hours
    e. Symptoms with a variable or temporary relief by activity

13. **All of the following categories of medications have been used in the treatment of RLS, EXCEPT**
    a. Opioids
    b. Sedatives
    c. Antipsychotics
    d. Dopaminergic agents
    e. Anticonvulsants

14. **A side effect (seen in 5% to 10% of cases) of the dopamine agonists that often results in patients**
discontinuing the therapy with these agents is
a. nausea
b. hallucinations
c. hypotension
d. somnolence
e. syncope

15. In the medical treatment of RLS, the problem of augmentation has recently been found to occur with
a. gabapentin
b. propoxyphene
c. clonazepam
d. tramadol
e. carbidopa-levodopa

16. This class of drugs that interferes with chemical activity in the nervous system and brain by reducing communication between nerve cells and thus, may promote sleep, relax muscles, etc. is
a. Anticonvulsants
b. Sedatives
c. Dopaminergic agents
d. Antipsychotics
e. Opioids

17. All of the following are low-potency opioids EXCEPT
a. oxycodone
b. tramadol
c. codeine
d. hydrocodone
e. propoxyphene

18. The following anticonvulsant that preliminarily appears to be showing some promising effects in the treatment of RLS is
a. gabapentin
b. pergolide
c. clonazepam
d. tramadol
e. ropinirole

19. Regarding the prognosis for RLS, all of the following statements are true EXCEPT
a. It can be a life long disease that for some becomes more debilitating over time.
b. Those patients whose RLS is not related to any other medical condition show a very slow progression of symptoms requiring many years before symptoms occur every day.
c. In general, patients who report RLS onset associated with another medical condition rapidly develop symptoms over a few years.
d. Sometimes, patients can have remissions; however, symptoms usually return and can become more severe with recurrence.
e. Those patients, who report symptoms starting in childhood or young adult life, show a rapid progression of symptoms to where they occur every day.

20. All of the following items may increase the duration or intensify the symptoms of RLS, EXCEPT
a. calcium channel blockers
b. tobacco
c. propoxyphene
d. alcohol
e. anti-nausea medications