

CONCEPTUAL ANALYSIS OF RESTLESS LEG SYNDROME IN AYURVEDA

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ABSTRACT

Restless legs syndrome (RLS) is a disorder that causes a strong urge to move one's legs. The feelings generally happen when at rest and therefore can make it hard to sleep. Due to the disturbance in sleep, people with RLS may have daytime sleepiness, low energy, irritability, and a depressed mood. There are two main types. One is early onset RLS which starts before age 45, runs in families and worsens over time. The other is late onset RLS which begins after age 45, starts suddenly, and does not worsen. Diagnosis is generally based on a person's symptoms after ruling out other potential causes. Restless leg syndrome may resolve if the underlying problem is addressed. Otherwise treatment includes lifestyle changes and medication. As the name only say it's a syndrome, hence no single condition in Ayurveda can be co-related to this, it can be understood under the context of *Vata Vikara* which is caused due to *Vrididi* or *Prakopa* of *Vata Dosha*. The different types of sensation that cause a person to move one's legs can be understood in terms of *Pindikodwestana*, *Vyathadi* conditions manifested due to *Vikruta Vayu* or the *Janga Shoola* and *Gatra Udveshtana* mentioned in context of *Amapradoshiya Adhyaya* of *Bhela Samhita*. General line of principle of treatment includes *Samanya Vata Vyadhi Chikitsa* and *Ama Pachana Chikitsa*.

Keywords: Restless Leg Syndrome (RLS), *Vata Vikruti*, treatment.

INTRODUCTION

According to the National Institute of Neurological Disorders and Stroke (NINDS), Restless Legs Syndrome (RLS) is a medical condition characterised by irresistible urge to move the

legs, many patients report a creepy-crawly or unpleasant deep ache within the thighs or calves and those with more severe RLS may have discomfort in the arms as well ¹. RLS is also called

Willis-Ekbom disease (WED). The prevalence of RLS is reported to be between 5 – 10% in the normal population. The exact prevalence of restless legs syndrome in India is not known as not much literature is available on restless legs syndrome from India. RLS can be either primary (idiopathic) or secondary². Secondary RLS may develop in 25 - 30% of the individuals with conditions associated with iron-deficiency states including pregnancy, renal failure, and anaemia.

RLS can be either primary (idiopathic) or secondary.

- Primary RLS is considered idiopathic or with no known cause. Primary RLS usually begins slowly, before approximately 40–45 years of age and may disappear for months or even years. It is often progressive and gets worse with age. RLS in children is often misdiagnosed as growing pains.
- Secondary RLS often has a sudden onset after age 40, and may be daily from the beginning. It is most associated with specific medical conditions such as iron deficiency anaemia, diabetes or the use of certain drugs.

Analysis of RLS in Ayurveda

RLS presents a wide range of symptoms like unpleasant sensations in the legs, including burning, tugging, and tightening, and feels “like insects crawling inside the legs”, which are mostly sensorial.

Four essential criteria are required to make the diagnosis of RLS³.

(1) Distressing urge to move the limbs because of paraesthesia's or spontaneous jerks in the legs or less often in other body parts.

(2) Worsening of these symptoms at rest.

(3) Temporary relief by motor activity.

(4) Worsening of the symptoms in the evening or during the night.

These symptoms can be understood in terms of *Vikruta Vata*⁴ which produce different kinds of pain; such as *Vyadha (Tadanamiva Udgaradinam)*, *Veshtana (Gratanamiva Angasya)* explained in case of *Vata Prakopa*⁵ and *Pindikodwestana* mentioned in *Nanatmaja Vyadhi*⁶ of *Vata Dosha*.

Bhela Samhita in particular in *Amapradoshiya* Chapter mentions that due to *Agni Mandya* there are set of which is exhibited by the body which includes *Jangha Shoola* and *Gatra Udveshtana*⁷.

Nidana-

Vatakara Ahara Vihara

*Agni Mandya Janya Hetu*⁸ such as *Virrudhashana*, *Adhyashanaadi* can be considered as *Nidana* for RLS as per Ayurveda.

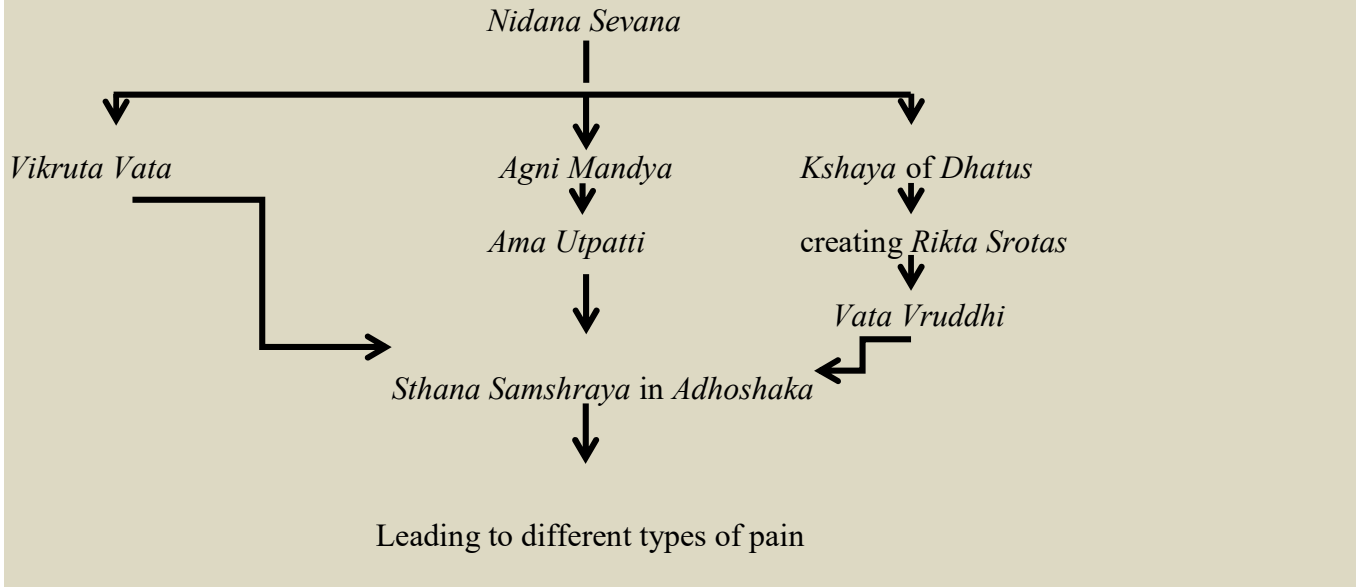
The primary RLS is said to be idiopathic this can be understood in terms that *Vata Prakruti* persons are more prone to *Vataja* disorders.

RLS is said to become more common with age, this can be understood in the concept that *Vata* is the predominant in *Vrudhavastha*⁹ and this age group people are more prone to *Vataja* disorders.

Secondary RLS can be understood in terms of *Agni Mandya* which led to *Ama*; which inturn produce different types of *Shoola* in body or *Vata Vruddi* concept occurring due to *Dhatu Kshaya*.

Samprapti-

Deducing probable *Samprapti* in *Ayurveda* based on the clinical presentation in *Ayurveda*.



Clinical Features / Lakshanas –

Clinical Features Seen in RLS	Probable Co-Relation with <i>Lakshanas</i> Mentioned in <i>Ayurveda</i> Classics
Pain or an aching in the muscles	<i>Pindikodwestana</i>
Pins and needles, pulling, crawling, buzzing, and numbness type of sensations	<i>Toda, Vyadha, Veshtana</i> types of pain
With symptoms worse in the evening and early in the night.	<i>Vata</i> is predominant in <i>Antya</i> of <i>Dina</i>
More common with age	<i>Vata Vriddhi</i> leading to many types of <i>Shoola</i>
Causes sleep disturbances	<i>Vata Vriddhi</i> leads to <i>Anidrata</i>

Treatment-

As said before; *Ayurvedic* texts do not specifically address Restless Leg Syndrome, its symptoms closely relate to diseases in the *Vata Vyadhi* category. Treatment in *Ayurveda* mainly will be *Agni Deepana*, *Ama Pachana* and *Vata-sya Upakrama*¹⁰.

In case of primary RLS the following treatment protocol would be helpful in maintaining the condition.

Shodhana

In severe cases *Basti* treatment can be planned. In mild form of cases *Vatanulomana* with

Gandharva Hastyadi Taila (2tsp at HS with half cup of warm milk) would serve the purpose.

Shamana

Snehana in form of *Abyangadi Bahir Parimarjana Chikitsa* which is said to be *Vataha (Vatahara)* decreasing the *Chala Guna* of *Vayu* thereby reduce pain experienced in RLS and help in improving the sleep pattern.

Shamanoushadis which does *Vatanulomana* along with *Vata Shamana* and *Agni Deepana* such as *Hingvastaka Churna*, *Lavana Bhaskara Churna* will be beneficial.

Measures mentioned for induction of good sleep will reduce the frequency of occurrence of RLS such as *Abyanga, Utsadana, Snana, Tarpana, Shirolepadi Karma*¹¹.

In case of secondary RLS the underlying pathology such as Diabetes, iron deficiency to be treated. A study conducted involving the 40 diagnosed patients of iron deficiency anaemia where 32 number of patients complained of *Pindikodwestana* after treating with iron supplements all patients had makeable relief in *Pindikodwestana*.

Pathya-Apathya^{12,13}

Pathya-Apathya to be planned by assessing the *Nidana* and *Lakshanas* involved.

Pathya-

Ahara- Ghrita, Taila, Mamsa Rasa, Taila, Masha, Kulatha, Lashunadi Vatahara Aharas.

Vihara- Snana, Samvahana.

Apathya-

Ahara- Jambu, Jangala Mamsa, Ruksha Ahara, Kashaya-Tikta-Katu Rasa Ati Sevana, Viruda Dhanya.

Vihara- Vyayama, Ratri Jagarana, Shoka, Shrama, Ati Chankramana.

DISCUSSION

For a body to function properly *Anupahata Dhatu Ushma, Anupahata Maruta* and *Anupahata Srotas*¹⁴ are important. In primary RLS there is impairment in case of *Anupahata Maruta*, in case of secondary RLS impairment in *Dhatu Ushma, Maruta* and *Srotas* can be involved. As RLS can broadly understood under the term *Vata Vyadhi* the first approach here should be to assess *Kshaya, Vruddi* or *Avarana*¹⁵ condition and treatment is planned based on these of the disease. Usually RLS is understood in terms of *Vata Vruddi* and treated accordingly. If vitiation of *Vata* is more than the

Basti Karma, which is said to best in treating *Vata Dosha* can be adopted. If the vitiation is minimal it can be treated conservatively with proper life style changes, following *Pathya* and adopting *Dinacharya* such as *Abyanga* would be beneficial. If RLS is observed secondary to any disorders like diabetes, iron deficiency anaemia then the underlying pathology to be treated initially this will reduce the symptoms of RLS.

CONCLUSION

RLS is frequently described as one of the most common undiagnosed diseases and cannot to correlate to any single condition in *Ayurveda*. A symptom complex has to be analysed based on the clinical presentation. The main aim in this condition is to treat *Vata Dosha Vikruti, Agni Deepana, Ama Pachana* and improve the sleep pattern in order to reduce the urge for movement of legs.

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