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## Commentary on the Non-Pharmacological Treatment of Restless Legs Syndrome

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Restless Legs Syndrome (RLS) is a common disorder. In its mild, intermittent form it can affect up to 15% of the general population. Approximately 3% may develop clinically significant disease affecting daytime functioning and sleep. RLS is more frequent in women and during pregnancy. It can affect children and the elderly. These special populations are rarely if at all included or reported in studies looking at the effects of medications. Patients with intermittent RLS are also seldom recruited for these studies. Patients with moderate and severe disease may develop side effects from medications that affect further treatment. Thus, for a large number of patients medications are not the first or only line of treatment. Therefore, it is essential to evaluate non-pharmacologic options for the treatment of RLS [1].

Yoga, a discipline widely practiced for health and relaxation presents a feasible option [2]. Lately a number of studies indicated that yoga practice might improve patients' well-being. A recent study showed that practicing yoga twice or more per week lowered work stress and improved sleep quality in a group of nurses [3]. Yoga reduced self-reported memory difficulty in cancer survivors in a randomized clinical trial of over 300 participants [4]. The practice of Pranayama, a series of yogic breathing techniques was found to benefit chemotherapy-associated symptoms and sleep in a group of patients [5].

Several studies looked at the effects of yoga on sleep. Yoga, specifically the YOCAS program significantly enhanced sleep quality in cancer survivors [6]. Wang et al 2015 reviewed the literature on the effect of meditative techniques on sleep quality. Although methodological limitations were noted, meditative movement had positive sleep related effects on various populations.

Very few studies concentrated on yoga and RLS. Ines et al. [7] reported significant improvement in RLS symptoms as measured on different scales following an 8 week yoga Iyengar program. Recently Bega and Malkani [8] concluded that considering the limited data, high

quality randomized controlled studies are needed to assess the efficacy of yoga in treating RLS symptoms.

In conclusion, yoga may be a safe and a complement or an alternative treatment for RLS. The underlying mechanism might be associated with decreased activation in the sympathoadrenal and hypothalamic pituitary adrenal axis while restoring parasympathetic/sympathetic balance, yoga may also promote a change in dopamine levels. Studies on yoga have also shown changes in the neurochemical system, which may also promote beneficial changes in mood, sleep and autonomic function, while contributing to reduction of RLS symptoms.

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