



## A study to assess the knowledge on restless legs syndrome among perimenopausal women

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DOI: <https://doi.org/10.33545/26649187.2020.v2.i1a.19>

### Abstract

Introduction of Restless legs syndrome (RLS) is characterized by unpleasant sensations in the legs and an irresistible urge to move them. Individuals affected with the disorder often describe the sensations as throbbing, pulling, or creeping. The objective of the study to assess the level of knowledge on RLS among perimenopausal women, to associate the level of knowledge of RLS with selected demographic variables among perimenopausal women. Methods of A random sample of 100 women aged 40-80 years was selected from the general population. Re The result revealed in non-experimental research design shows 65% women have inadequate knowledge, 15% of women have moderate knowledge and 20% had adequate knowledge on restless legs syndrome.

**Method:** An knowledge was chosen to assess the knowledge on restless leg syndrome among perimonopausal women. The present was conducted at kilacherry. 100 female who come under inclusion criteria were selected by purposive sampling technique; data was collected by using sociodemographic variable. A method of preparing the coriander seed extract was explained to the samples. They were asked to with quissonarie with all woman who had leg. syndrome between 40-75years.

**Result:** The result revealed in non-experimental research design shows 65% women have inadequate knowledge, 15% of women have moderate knowledge and 20% had adequate knowledge on restless legs syndrome

**Conclusion:** Thus the 20% woman have a adequate knowledge thus this study proves

**Keywords:** knowledge, restlessleg, syndrome, perimenopausal woman, descriptive design

### Introduction

Restless legs syndrome is a common yet under recognized sensory motor disorder characterized by intense, unpleasant leg sensation and irresistible urge to move the legs. The symptoms of RLS can impair sleep onset, sleep maintenance, overall quality of the life. RLS affect both men and women, with a female preponderance of 2:11.

There is no known pathophysiological link and, indeed, very little in the literature written about menopause and restless legs syndrome. Because the cellular mechanism LS are unknown, much literature as focused on numerous associations in order to discover the etiology and pathophysiology of the disorder in men and women<sup>2</sup>.

Restless legs is a common condition of the nervous system that causes and on overwhelming irresistible urge to move the legs. Women complaints of unpleasant symptoms such as tingling burning and painful cramping sensation in the leg.<sup>3</sup> More than 80% of people with RLS experience their legs jerking twitching uncontrollably usually at night. Until now it was thought that RLS is caused by genetic, metabolic and central nervous mechanism.

It is not only the central nervous system but also nerve cells targeting the muscles themselves that are responsible. That may indicates the involuntary leg movements in RLS caused by increase excitability of the nerve cells that supply the muscles in the leg, in an increase number of signals being sent between nerve cells.

RLS is the generally lifelong condition for which there is no cure. Symptoms may gradually worsen with age some women have remissions, periods in which symptoms decreased or disappear for days, weeks or months, although symptoms usually eventually reappear.<sup>4</sup> If RLS symptoms

are mild, do not produce significant day time discomfort, or do not affect the womens to fall as sleep the condition may not have been treated.

The symptoms of RLS can impair sleep onset, sleep maintenance, and overall quality of life. Most studies have reported a prevalence of 5% to 15% of the adult population. RLS affects both men and women with a female preponderance of 2:1. Epidemiological studies have suggested a possible association between RLS and cardiovascular diseases, however the association between RLS and hypertension remains controversial.<sup>5</sup>

Previous studies have suggested that individual with [RLS] are at increased risk of developing the pain because of the presence of periodic limb movements of sleep [PLMS] seen in 80% of patients with RLS. <sup>6</sup>The population-based studies have also suggested that hypertension may act as an intermediary risk factor leading to cardiovascular disease in people with [RLS].

### Materials and Methods

An knowledge was chosen to assess the knowledge on restless leg syndrome among perimonopausal women. The present was conducted at kilacherry. 100 female who come under inclusion criteria were selected by purposive sampling technique; data was collected by using sociodemographic variable. A method of preparing the coriander seed extract was explained to the samples. They were asked to with quissonarie with all woman who had leg. syndrome between 40-75years.

Results of the response rate was 70.3%; 15.7% of the women were diagnosed with RLS. Prevalence increased with age. RLS subjects more often had symptoms of

affected sleep and depressed mood. Co-morbidity with heart disease was more common among RLS subjects, whereas hypertension and diabetes mellitus were not. There was a strong association between vasomotor symptoms and RLS but no statistical relationship between use of hormone replacement therapy, postmenopausal state and RLS. conclusion of the prevalence of RLS among Swedish women is high. RLS sufferers more often suffered from depression and heart disease, whereas no such associations were noted for diabetes or hypertension. We found an increased prevalence of RLS among women with vasomotor symptoms (night sweats) during the menopausal transition but not among women using hormone replacement therapy.

**Result and Discussion**

Socio-demographic variable of the menopausal clients: The study showed that the mean and standard deviation on selected restless legs syndrome among perimenopausal women. Ravi Gupta (2013) has conducted the study on prevalence of restless legs syndrome in subjects with depressive disorder. We hypothesized that RLS in depression is linked to the severity, duration and frequency of depressive episodes. RLS was reported by 31.48 percentage of sample. There was no difference in the age, total duration of depressive illness and number of depressive episodes between RLS and non-RLS groups (F=0.44; P=0.77). The HAM-D score was higher in the non-RLS group (P=0.03). RLS is prevalent in depressive disorder. The overall findings of the study show restless legs syndrome among perimenopausal women brought a level in the chance of knowledge.

The study showed that frequency and percentage distribution of level of knowledge on selected restless legs syndrome among perimenopausal women. The data revealed that 65 (65%) had inadequate knowledge, 15(15%) had moderately knowledge, and 20 (20%) had adequate knowledge on restless legs syndrome.

The findings of this study is supported R kutlu, NY selcuk, S sayin (2018) has conducted the study on restless legs syndrome and quality of life in chronic hemodialysis. The international RLS rating scale was used to calculate RLS severity. The overall prevalence of RLS according to the four essential criteria was 18.6%. This study revealed that the frequency of RLS among chronic hemodialysis patients in 18.6% and RLS leads to physical life quality disturbance. GL Dunitz (2017) has conducted the study on Restless legs syndrome and sleep wake disturbance in pregnancy. To estimate the RLS and frequency with sleep wake disturbances in pregnancy. A cohort of 1,563 women in their third trimester of pregnancy were recruited from prenatal clinics between march 2007 and December 2010. Demographic, pregnancy, and delivery date were extracted from medical records and sleep information was collected with questionnaires. Logistic regression models were constructed to investigate the association of RLS and its frequency with sleep wake disturbances and delivery outcomes. Overall, 36% of the pregnant women had RLS, and half had moderate to severe symptoms. Obstetric health care provider should be aware of these association and screen women for RLS.

Table 1: Frequency and Distribution of Demographic Variable Among Diabetic Clients

**Table 1:** Association between knowledge on perimonopausal woman and demographic variables among perimonopausal woman. (n=100)

S.NO	Demographic Variable	Inadequate		Moderate		ADEQUATE		CHI Square and P Value
		NO	%	NO	%	NO	%	
1	Age							X2=100.000 Df=2 X/df=50.00
	A) 40-50	0	0	65	65%	0	0%	
	B)50-60	25	25%	0	0%	0	0%	
	C)60-80	10	10%	0	0%	0	0%	
2	Educational Status							X2=100.000 Df=2 X2/df=50.00
	A) 10 <sup>th</sup>	20	20%	0	0%	0	0%	
	B)12 <sup>th</sup>	0	0%	52	52%	0	0%	
	D) Illiterate	28	28%	0	0%	0	0%	
3	Number of family members							X2=100.000 Df=2 X2/df=50.00
	A) 3	22	22%	0	0%	0	0%	
	B) 4	21	21%	0	0%	0	0%	
	C) 5	0	0%	57	57%	0	0%	
4	Socio economic status							—
	A) poor	34	34%	0	0%	0	0%	
	B) middle class	34	34%	0	0%	0	0%	
	C) rich	32	32%	0	0%	0	0%	
5	Family income							—
	A) below5000	48	48%	0	0%	0	0%	
	B)5000-1000	47	47%	0	0%	0	0%	
	C)10000-15000	5	5%	0	0%	0	0%	
6	6.Occupation							X2=100.000 df=1 x2/df=100.00
	A) Employed	17	17%	0	0%	0	0%	
	B) Unemployed	0	0%	0	0%	83	83%	
7	Mairtal status							
	A) Married	19	19%	0	0%	0	0%	X2=100.000
	B) widow	0	0%	69	69%	0	0%	Df=2
	C) divorce	12	12%	0	0%	0	0%	X2/df=50.00

**Table 2:** Mean and standard deviation on selected restless legs syndrome among perimenopausal women (n=100)

Knowledge on restless legs syndrome	Frequency
Mean knowledge	6.2
Standard deviation	6.58

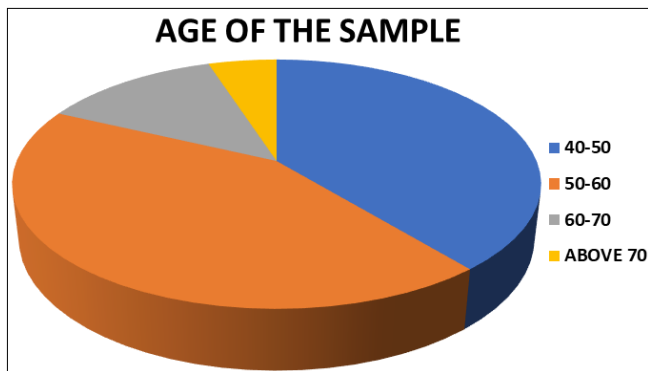
Table 2 mean and standard deviation on selected restless leg syndrome among perimenopausal women. In frequency, the overall knowledge aspects on restless legs syndrome, the mean value of 6.2 with a standard deviation of 6.58 %.

**Table 3:** Frequency and percentage distribution of level of knowledge on restless leg syndrome among perimenopausal women. (n=100)

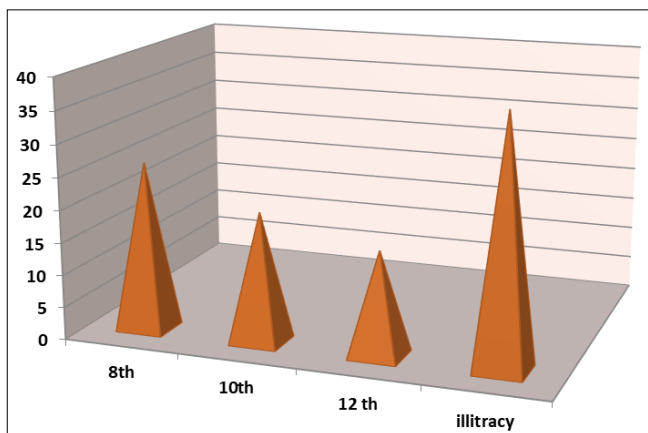
Level of Knowledge	N	%
Inadequate knowledge	65	65%
Moderate knowledge	15	15%
Adequate knowledge	20	20%
Total	100	100%

Table 3 shows the frequency and percentage distribution of level of knowledge on restless legs syndrome among perimenopausal women. The data revealed that, 65(65 %) had inadequate knowledge, 15 (15 %) had moderately adequate knowledge and 20 (20%) had adequate knowledge on restless legs syndrome.

**Demographic variables among perimenopausal woman**



**Fig 1**



**Fig 2**

**Conclusion**

The study findings Thus the 20% woman have a adequate knowledge thus this study proves that womans as have

inadequate knowledge, 15% of women have moderate knowledge and 20% had adequate knowledge on restless legs syndrome

**Acknowledgement**

We would like to extend our gratitude to the authorities of Saveetha College of Nursing and we express our whole hearted thanks to Dr.G.Bhuvanawari Msc(N) Ph.D Associate professor, community health nursing, Saveetha college of nursing, SIMATS, thandalam.

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