

Treatment for Restless Legs Syndrome that isn't Pharmacological

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ABSTRACT

RLS (Restless Legs Syndrome) is a well-known condition. It can affect as much as 15% of the general population in its moderate, irregular nature. About 3% of people will experience a clinically relevant illness that will impair their day-to-day life and sleep patterns. Women and pregnant women are most likely to suffer from RLS. Children and the aged are vulnerable. These unique groups are seldom, if ever, used or documented in statistical analyses.

KEYWORDS: Exercises, yoga, Muscle.

INTRODUCTION

. It has the potential to damage children and the elderly. This unique groups are rarely, if ever, used or recorded in research examining drug results. Intermittent RLS patients are still underrepresented in these trials. Patients with mild to serious disease can experience drug side effects that interfere with their treatment. As a result, drugs are not the first or only line of therapy for a significant percentage of people. As a result, non-pharmacologic options for the treatment of RLS must be considered. Yoga, a commonly studied discipline for fitness and relaxation, is a viable choice. A number of recent studies have shown that practising yoga will help patients feel better. In a new survey, a group of nurses who practised yoga twice or more per week recorded lower work stress and better sleep efficiency. In a randomised controlled trial of over 300 participants, yoga decreased self-reported memory difficulty in cancer survivors. In a group of patients, the application of Pranayama, a collection of yogic breathing exercises, was found to help with chemotherapy-related symptoms and sleep. The effects of yoga on sleep have been studied in a number of studies. Yoga, especially the YOCAS software, improved cancer survivors' sleep efficiency dramatically. The literature on the impact of meditative approaches on sleep quality was reviewed by Wang et al in 2015. Despite experimental flaws, meditative movement had beneficial sleep-related outcomes in a variety of communities. Only a few reports have focused on yoga and RLS. Following an 8-week yoga Iyengar programme, recorded substantial change in RLS symptoms as assessed on various scales. To determine the effectiveness of yoga in treating RLS

symptoms, high-quality randomised controlled trials are needed [1-3].

Conclusion

Finally, yoga may be a healthy and effective complement or complementary therapy for RLS. Yoga can also stimulate an improvement in dopamine levels by decreasing activity in the sympathoadrenal and hypothalamic pituitary adrenal axis thereby maintaining parasympathetic/sympathetic equilibrium. Yoga has been shown to cause improvements in the neurochemical system, which can lead to positive changes in mood, sleep, and autonomic control, as well as a decrease in RLS symptoms.

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Received date: Apr 15, 2021; Accepted date: Apr 25, 2021; Published date: Apr 30, 2021

Citation: Edosa Jabesa Tolasa (2021) Treatment for Restless Legs Syndrome that isn't Pharmacological. *Journal of Yoga & Physical Therapy* 11:342. doi: 10.4172/2472-1115.21.11.342

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