



Malvern Sleep Clinic

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REM-BEHAVIOR DISORDER

Rapid eye movement (REM) sleep behavior disorder (RBD) is a sleep disorder characterized by loss of normal voluntary muscle atonia during REM sleep associated with complex motor behavior while dreaming.

The precise cause and neural structure involved in RBD are unknown.

RBD may be the prodrome of neurodegenerative disease, such as Parkinson's disease.

The exact incidence and prevalence of RBD are unknown because of inadequate reporting and misdiagnosis. However, a telephone survey indicated a 2% overall prevalence of violent behaviors during sleep. 25% of which were likely to be due to RBD.

Racial differences in incidence and prevalence of RBD have not been reported.

RBD occurs predominantly in males and is typically a disease of elderly persons. The risk increases after the sixth decade.

The presenting complaint is violent dream-enacting behaviors during REM sleep, often causing self-injury or injury to the bed partner. The dream-enacting behaviors are usually nondirected and may include punching, kicking, leaping, crying out or running out of bed while still in sleep.

Overnight sleep study (Polysomnography – PSG) video recording is the most important diagnostic study. This is the most important diagnostic test in RBD. On PSG, at least some tonic or phasic abnormalities of muscle tone are observed during REM sleep accompanying the attack.

REM sleep behavior disorder (RBD) is treated symptomatically by various medications. An important aspect of management is environmental safety. Potentially dangerous objects should be removed from the bedroom, and the mattress should be placed on the floor or a cushion should be put around the bed.

Consultation with a Sleep specialist for proper diagnosis and treatment is recommended.

No dietary recommendations or restrictions are necessary.