RLS Survey Findings – Dopamine Agonists

The survey indicates that over half (55%) of respondents who were taking dopamine agonists were showing clear signs of augmentation. While dopamine agonists often provide excellent relief at first, in 40% - 70% of cases the drug becomes less effective requiring increased doses and eventually causing worsening of symptoms at which point the only course of action is gradual tapering off the drug which is often uncomfortable and distressing.

From the survey:

55% of those taking medication for RLS were taking a Dopamine Agonist
Of those, over half are showing one or more signs of augmentation
52% say it worked at first but symptoms returned and they increased the
dose
□ 36% say their symptoms have started earlier in the day since taking the
medication
37% say their symptoms have spread to other parts of the body since
taking the medication
These are all signs of augmentation where dopmanine agonists will eventually
make the condition worse
Additionally 65% of those who previously took a dopamine agonist but switched
to a different medication did so as they experienced augmentation
Only 13% say they do not currently experience any issues
Lastly 11% are experiencing some form of impulse control and 15% report binge
eating. Impulse control order (ICD) is a known side effect of dopamine agonists

These numbers demonstrate the scale of the problem with dopamine agonists and back up the experiences we see reported on the HealthUnlocked forum as well as supporting the observations of leading RLS Experts that most people taking dopamine agonists will suffer augmentation.

RLS-UK's position is that dopamine agonists should never be the first line of medical treatment with Iron Therapy the first option and alpha-2-delta ligands such as gabapentin or pregabalin next if required.

Please visit our website for more information:

https://www.rls-uk.org/augmentation-rebound https://www.rls-uk.org/medical-treatments https://www.rls-uk.org/useful-resources