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# Unraveling the complex relationship: Exploring depression's impact on restless legs syndrome

© Sakarie Mustafe Hidig

*The Fourth Affiliated Hospital, Zhejiang University School of Medicine, Department of Surgery, Division of Hepatobiliary and Pancreatic Surgery, Zhejiang, China*

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## Corresponding Author:

Sakarie Mustafe Hidig, M.D., The Fourth Affiliated Hospital, Zhejiang University School of Medicine, Department of Surgery, Division of Hepatobiliary and Pancreatic Surgery, Zhejiang, China  
+8613656689894  
hidig2015@icloud.com

## ORCID:

orcid.org/0000-0002-4353-8199

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## Dear Editor,

The relationship between mental health and physical well-being has long been recognized, prompting increased research into this intricate relationship. Of particular interest is the correlation between depression and neurological disorders, notably restless legs syndrome (RLS). In a recent article published in *Gülhane Medical Journal* by Çoban et al. (1), the authors shed light on how depression influences RLS, affecting fatigue, quality of life (QoL), and gastrointestinal symptoms. Beginning with an explanation of RLS symptoms and diagnosis, the article underscores the comprehensive impact of the condition, extending beyond mere physical discomfort to encompass ramifications for mental health. Moreover, the authors highlighted studies revealing a heightened prevalence of depression among RLS patients, prompting readers to delve deeper into this significant association (2).

However, a critical lens reveals certain gaps in the study approach. Although the article admirably elucidates the adverse impact of depression on various facets of RLS, it fails to provide a nuanced exploration of the potential causative factors underlying this relationship. For instance, while acknowledging the bidirectional interaction between the brain and gastrointestinal tract, the mechanism merely touches upon the brain-gut axis without delving into the underlying mechanisms. A more robust discussion on the physiological underpinnings of this connection would enrich the discourse. Furthermore, the study's methodology warrants further scrutiny. Although the exclusion of patients on antidepressant medications is understandable, it inadvertently limits the generalizability of findings (3). By homing in on a specific subset of patients with RLS, the study overlooks the broader spectrum of individuals grappling with comorbid depression and RLS. Consequently, the findings may not fully capture the complex interplay between depression and RLS in real-world settings. Moreover, the study's sample size raises concerns about statistical power and generalizability. With a modest cohort of 19 patients, the findings can be regarded preliminary rather than definitive. A larger, more diverse sample would have bolstered the robustness of the findings and lent greater credence to the study's conclusions (4).

Despite these limitations, the study offers valuable insights into the holistic management of RLS, advocating for a comprehensive approach that encompasses mental and physical well-being. By highlighting the detrimental impact of depression on fatigue, QoL, and gastrointestinal symptoms in patients with RLS, the study underscores the importance of addressing mental health concerns alongside conventional treatment approaches. In summary, although the article admirably delves into the connection between depression



and RLS, it could benefit from a deeper examinations of the reasons behind this link and some improvements in its research methods. Taking a critical approach in future studies could help to untangle the complex relationship between mental and physical health in patients with RLS, leading to better treatments and outcomes for those affected.

### References

1. Çoban Ö, Yaşa ME, Sonkaya AR, Ün Yıldırım N. The relationship of depression with fatigue, quality of life, and gastrointestinal symptoms in patients with restless legs syndrome. *Gulhane Med J.* 2023;65:86-91.
2. Lee CH, Giuliani F. The Role of Inflammation in Depression and Fatigue. *Front Immunol.* 2019;10:1696.
3. Ballou S, Katon J, Singh P, et al. Chronic diarrhea and constipation are more common in depressed individuals. *Clin Gastroenterol Hepatol.* 2019;17:2696-2703.
4. Abetz L, Arbuckle R, Allen RP, Mavraki E, Kirsch J. The reliability, validity and responsiveness of the Restless Legs Syndrome Quality of Life questionnaire (RLSQoL) in a trial population. *Health Qual Life Outcomes.* 2005;3:79.