

# REM Sleep Behaviour Disorder



## Important Things to Know About REM Sleep Behaviour Disorder

- People with REM Sleep Behaviour Disorder (RBD) move unusually while asleep. It can look like you are acting out a dream. The movements may be sudden and violent. This can be a danger to bed partners.
- RBD mostly occurs in older people. If young people get it, it tends to be due to a side effect of medication.
- There are ways to treat RBD that work well. At least 80% of people with it get better with treatment.
- There are several problems that may cause RBD. A sleep specialist can help.

## What is RBD?

RBD happens when you sleep. It can lead to talking and shouting. It can make you move vigorously. You might have vivid, striking dreams as well. When this happens, people with RBD are seen to suddenly move or call out. They can look like they are acting out their dreams. The episode usually doesn't go on for long. Often you might be able to recall what your dream was about when you wake up.

RBD can be a danger to both people with it and their bed partners. This can be due to the person with RBD responding violently to an imagined attack or because of vigorous movement of their arms and legs.

## What causes RBD?

There are several types of sleep that occur every night. One of these is called rapid eye movement, or REM sleep. This is the time when you have your most structured dreams. Normally in REM sleep, the muscles should relax totally. But if you have RBD, your brain sends the wrong signals to your body muscles so they fail to relax during sleep. This means that when you have dreams you can act these out with bodily movement.

There are two forms of RBD. The first often occurs later in life (over 50 years of age) and more often in males. The cause is unknown. People with this form of RBD should be checked for the possibility of the development of neurological conditions such as Parkinson's disease. The second form of RBD occurs as a side effect of medicines, such as a high dose of antidepressants.

RBD can be made worse if you also have another sleep problem, such as [obstructive sleep apnoea](#).

## How is RBD diagnosed?

The first step is to work out if the RBD is the side effect of a medication or if there is another obvious cause for it. If no readily identifiable cause can be found, you need to

see a [sleep specialist](#) for further investigation. He/she will check if you have any other sleep problems contributing to the RBD, for example [obstructive sleep apnoea](#). Most of the time this assessment will involve an overnight [sleep study](#). This is done in a hospital and includes a video recording.

## How do you treat RBD?

This depends on the cause. If it appears to be due to a medication side effect, the drug responsible should be stopped if possible. If no specific cause is found there are drugs that can help, such as clonazepam which is generally effective in low doses. If you have been diagnosed with [obstructive sleep apnoea](#) or another sleep disorder then treatment of this may help the RBD.

## Where and when should you seek help?

If you or your bed partner has symptoms of RBD then you should discuss this with your GP. He or she is likely to refer you to a [sleep specialist](#), who might suggest an overnight [sleep study](#).

## Where can I find out more?

<http://yoursleep.aasmnet.org/disorder.aspx?id=29>

[http://infosleep.ca/parasomnias/parasomnias\\_RBD.html](http://infosleep.ca/parasomnias/parasomnias_RBD.html)

This information is produced by:

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The peak national association of clinicians and scientists devoted to investigation of sleep and its disorders

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**Sleep Health Foundation** ABN 91 138 737 854

114/30 Campbell Street, Blacktown NSW 2148

T: +61 (0) 2 8814 8655 F: +61 (0) 2 9672 3884