

Rapid Eye Movement Sleep Behavior Disorder (RBD)

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Mini Review

Normal skeletal muscle atonia's intermittent absence, which results in acting out patient's dreams, is the characteristic of the Rapid eye movement Behavior Disorder or RBD. The occurrence of RBD is in the last third part of the night. In this part, the REM sleep is much more common. The dreams during RBD would be vivid and patient's violent and aggressive behavior and movements can be dangerous for the patient and his/her bed partner. RBD is most common in older men. Its etiology is not clear but RBD is associated with some neurodegenerative diseases like multiple system atrophy, parkinson's disease and lewy body dementia. This association specifically with parkinson's disease is high, since about 50 percent of the patients with RBD develop parkinson's disease during years. In the association between RBD and neurodegenerative diseases, RBD's occurrence would usually be preceded such neurodegenerative diseases by several years.

Withdrawal of cocaine, amphetamine, TCAs and alcohol as suppressors of REM sleep, fluoxetine, monoamine oxidase inhibitors and stress disorders can be triggers for occurrence of acute RBD.

Rapid eye movement behavior disorder can be treated with clonazepam as a long-acting benzodiazepine. About 90 percent of the patients will benefit from taking clonazepam as it will reduce or cease the abnormal movements of the patients at

night. Melatonin can be another choice to treat the patients with RBD. Apart from medications, having good sleep hygiene and good bed and bedroom conditions, can be helpful to reduce the problems which may arise from abnormal dreams and movements during the sleep. Educating the patient's bed partner also can be helpful to reduce such problems.

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