Restless Legs Syndrome Quality of Life Questionnaire (RLSQoL)

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Purpose The RLSQoL is an 18-item scale initially designed to assess quality of life in patients with restless legs syndrome [1]. It has since been employed as an outcome measure in a variety of studies evaluating interventions to improve symptoms of restless legs syndrome. The scale queries the impact of restless legs syndrome on daily activity, morning and evening activity, concentration, sexual activity, and work.

Population for Testing The scale has been validated in a population of restless legs syndrome patients aged 26–87 years.

Administration The RLSQoL is a self-report, paper-and-pencil measure requiring between 5 and 10 min for completion.

Reliability and Validity According to a psychometric evaluation study conducted by developers [1], the RLSQoL possesses an internal consistency of .92 and a test–retest reliability ranging from .79 to .84. The scale was found to be responsive to changes in symptoms and it has been shown to distinguish between individuals with mild, moderate, and severe conditions.

Obtaining a Copy A copy of the scale can be found in the original article published by developers [1]. Direct correspondence to: Linda Abetz Email: linda.abetz@adelphi.co.uk

Scoring The scoring process for the RLSQoL is relatively complicated for a scale of its kind. Items 1–5, 7–10, and 13 use scales ranging from 1 to 5, with lower scores indicating a greater frequency and interference of restless legs syndrome. The total score for these items is converted to a value between 0 and 100 using an algorithm provided along with the scale. Items 6 and 16-18 require respondents to indicate how many days in the previous month or hours in the previous day they have been able to complete certain activities or have had their daily functioning interfered with. These items are scored as continuous variables (for example, ranging from 0 to 28 days for questions regarding number of days per month). Items 11, 12, 14, and 15 are categorical variables, where a response of "yes" receives (a 1), a response of "no" receives (a 2), and a response of "no because of other reasons" receives (a 3). Additional information regarding scoring procedures and mean scores can be found in the original article published by developers.

RLS Quality of Life Questionnaire-

The following are some questions on how your Restless Legs Syndrome might affect your quality of life. Answer each of the items below in relation to your life experience in the past 4 weeks. Please mark only one answer for each question.

In the past four weeks:

1. How distressing to you were your restless legs? □ Not at all □A little Some □Quite a bit □A lot 2. How often in the past 4 weeks did your restless legs disrupt your routine evening activities? □ Never $\Box A$ few times □Sometimes \Box Most of the time \Box All the time 3. How often in the past 4 weeks did restless legs keep you from attending your evening social activities? □ Never \Box A few times \Box Sometimes \Box Most of the time \Box All the time 4. In the past 4 weeks how much trouble did you have getting up in the morning due to restless legs? □ A little A lot □ None □ Some □Quite a bit 5. In the past 4 weeks how often were you late for work or your first appointments of the day due to restless legs? \Box A few times \Box Sometimes \Box Most of the time □ Never \Box All the time 6. How many days in the past 4 weeks were you late for work or your first appointments of the day due to restless legs? Write in number of days: 7. How often in the past 4 weeks did you have trouble concentrating in the afternoon? □ Never \Box A few times \Box Sometimes \Box Most of the time \Box All the time 8. How often in the past 4 weeks did you have trouble concentrating in the evening? □ Never \Box A few times \Box Sometimes □ Most of the time \Box All the time 9. In the past 4 weeks how much was your ability to make good decisions affected by sleep problems? □ Some Quite a bit A lot □ None \Box A little 10. How often in the past 4 weeks would you have avoided traveling when the trip would have lasted more than two hours? □ Never \Box A few times \Box Sometimes \Box Most of the time \Box All the time 11. In the past 4 weeks how much interest did you have in sexual activity? □ None □ A little □ Some Quite a bit A lot □ Prefer not to answer 12. How much did restless legs disturb or reduce your sexual activities? □ None □ A lot □ A little □ Some Quite a bit □ Prefer not to answer 13. In the past 4 weeks how much did your restless legs disturb your ability to carry out your daily activities, for example carrying out a satisfactory family, home, social, school or work life? □ Not at all □ A little □ Some □ Quite a bit □ A lot 14. Do you currently work full or part time (paid work, unpaid or volunteer)? (mark one box) □ YES If Yes please answer questions #15 through #18 □ NO, because of my RLS - Please go to the next page □ NO, due to other reasons – Please go to the next page 15. How often did restless legs make it difficult for you to work a full day in the past 4 weeks? □ Never \Box A few times \Box Sometimes \Box Most of the time \Box All the time 16. How many days in the past 4 weeks did you work less than you would like due to restless legs? Write in number of days: 17. On the average, how many hours did you work in the past 4 weeks? Write in number of hours per day: . 18. On days you worked less than you would like, on average about how many hours less did you work due to your restless legs. Write in number of hours per day: ____ Abetz et al. [1] © John Wiley and Sons, reproduced with permission.

Reference

 Abetz, L., Vallow, S. M., Kirsch, J., Allen, R. P., Washburn, T., & Earley, C. J. (2005). Validation of the restless legs syndrome quality of life questionnaire. *Value in Health*, 8(2), 157–167.

Representative Studies Using Scale

Morgan, J. C., & Sethi, K. D. (2007). Efficacy and safety of pramipexole in restless legs syndrome. *Current Neurology and Neuroscience Reports*, 7(4), 273–277.