

REM Behavior Disorder

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REM Behavior Disorder – A condition characterized by physical actions such as walking, shouting, hitting, kicking or thrashing during sleep. It occurs during REM (Rapid Eye Movement) sleep and is associated with a violent, threatening or physically active dream.

Description - During sleep we experience REM sleep four to six times a night. It occurs every 90 minutes on average. If a person is awakened during REM sleep, they are almost always dreaming.

During normal REM sleep there are distinct physiologic changes. During non-REM sleep brain waves slow, eyes move slowly if at all, and our muscles relax but remain active. Paradoxically, during REM sleep our brain waves appear awake, eyes though closed move rapidly, and muscle tone drops. In fact, the muscles are paralyzed. The only muscles functioning are the heart and diaphragm. A change in our brains disconnects our brain from the muscles. In REM sleep, dreams occur but no movement occurs because the muscles are paralyzed.

In REM Behavior Disorder (REMBD), dreams occur but something goes wrong with the mechanism that disconnects the brain from the muscles. A dream occurs and it is acted out.

Problems - A person with REMBD will act out aggressively during sleep and often injure themselves. Cuts, bruises, and even broken bones are not uncommon. They can injure those who sleep with them.

Cause- REMBD has been reported to occur in the following situations;

- Secondary to certain medication – antidepressants primarily

- Secondary to other sleep disorders -Sleep Apnea and others

- In patients with Parkinson's or related disorders

- Life-long appearing in adolescents and young adults

- In older individuals without other known causes

- Older individuals who develop REMBD have a significant possibility (30-70%) of developing Parkinson's disease in the following decades.

Diagnosis - A history of acting out disturbing, violent and threatening dreams is adequate to establish the diagnosis. A sleep test (polysomnogram) is needed to exclude other possible causative or complicating factors. Neurologic test is reserved for those with symptoms of an additional disorder

Treatment - Medications are used to control episodes

- Protect the patient and the patient's bedmate from injury

- Treatment of other sleep disorders (Sleep Apnea) if present.