



Clinician Information Pack

Thank you for your interest in the restiffic restless leg foot wrap. In this pack you will find helpful information for both you and your clinician, including:

- An overview of restiffic's clinical trial, which was published in the Journal of the American Osteopathic Association in July 2016.
- An RLS symptom journal to help you track your symptoms and discuss them with your clinician.

If you or your clinician has any questions regarding restiffic, please call us at o1432 373500 or email us at restiffic@mediuk.co.uk. We look forward to hearing from you!





Information for Physicians



restiffic is a foot wrap for the treatment of primary Restless Legs Syndrome (RLS). The device promotes a gentle, relaxing pressure on targeted muscles in the foot – the abductor hallucis and the flexor hallucis brevis – which reduces the uncontrollable impulses to move the legs. Patients may wear the foot wraps at any time when they are not putting pressure on their feet (e.g. sleeping, reclining, sitting) and it may be used in conjunction with any medication.

PhysiciansIndications:

• Primary Restless Legs Syndrome/Willis-Ekbom

DiseaseContraindications:

- Do not use when engaging in activity that puts pressure on the feet (e.g. walking, running, operating a vehicle). Do not use in water.
- Do not use if you have neuropathy, poor circulation, peripheral vascular disease, varicose veins, deep vein thrombosis, a history of blood clots, or foot and/or leg swelling.
- Do not wear if you have breaks, bruises, sprains, wounds, sores, fragile skin, cuts, rashes, or abrasions involving your feet and/or legs.
- Consult with your doctor if you have diabetes, kidney failure, heart problems, are pregnant, or have any other medical condition that may contraindicate the use of restiffic.

Cautions:

• In the event of pain, numbness, burning, cramping, tingling, or other sensations in the feet, loosen the straps of the device immediately. If the symptom does not go away after loosening the device, remove it completely.

If the symptom does not go away after removing the device, consult with your healthcare professional.



restiffic Clinical Evidence

Using restiffic to manage moderate to severe primary Restless Legs Syndrome

Original Publication: Targeted Pressure on Abductor Hallucis and Flexor Hallucis Brevis Muscles to

Manage Moderate to Severe Primary Restless Legs Syndrome

Journal: The Journal of the American Osteopathic Association

Publication Date: July 2016

Authors: Phyllis J. Kuhn, MS, PhD; Daniel J. Olson, DPM; John P. Sullivan, MD

OBJECTIVE

The objective of this study was to assess the efficacy and safety of the restiffic restless leg foot wrap which applies targeted pressure on the abductor hallucis and the flexor hallucis brevis muscles to reduce the symptoms of moderate to severe RLS, and to compare the current findings with findings from studies of ropinirole use in patients with primary RLS.

METHODS

- Design: 8-week single-arm, open-label, clinical trial with a repeated measures design conducted between April 2009 and August 2012 in 2 offices in Erie, PA.
- Demographics: 30 participants (22 men; 8 women); mean age 51.5 years
- Inclusion criteria:
 - o Adults age 18-75 with moderate to severe primary RLS
 - o Evening & nighttime symptoms with sleep impairment (patient-reported)
 - o RLS symptoms 2-3/week for 6+ months
- · Outcome measures:
 - o International Restless Legs Syndrome Study Group (IRLSSG) Rating Scale – patient generated
 - o Clinical Global Impression (CGI) Scale clinician-generated
- Meta-analysis: compared restiffic with historic reports of ropinirole and a placebo

RESULTS

IRLSS Scores:

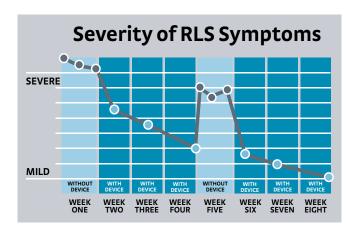
- Decreased from 25.05±5.33 ("Severe") to 7.83±6.33 ("Mild") from first day to last day.
- Indicates a 2 level drop in the severity of symptoms.
- 69% decrease in average IRLSS scores (Figure 1).

Sleep loss due to RLS symptoms:

- Decreased from 119.5 minutes to 22.1 minutes per night.
- Over 90 minutes of sleep gained per night on average.

Clinical Global Impression Scale:

- · All patients improved; none became worse.
- 90% of patients were "much improved" or "very much improved."
- 60% of patients showed complete or nearly complete remission of all symptoms.
- 93% of patients showed no side effects.



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RLS Symptom Journal

Complete in the morning when waking up:	Date:						
Time I went to bed:							
Time it took me to fall asleep:							
How many times I woke up in							
the night, if any:							
Total hours slept:							

Complete in the evening before bed:

	E																	
□Morning	□Afternoon	□Evening	□Night															
□ Morning	□Afternoon	□Evening	□Night															
□Morning	□Afternoon	□Evening	□Night															
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□Morning	□Afternoon	□Evening	□Night															
□Morning	□Afternoon	□Evening	□Night															
I experienced RLS symptoms	at these times:			From 1 to 5 (5 being the worst),	my symptoms were	this severe:	I consumed any of these	substances during the day	(with times):	□Caffeine	□Alcohol	☐ Tobacco products	☐ Medications (please list)	□ Other (please list)	Additional comments	(ex. Events, stresses,	personal notes):	

an appointment with your healthcare provider to discuss your RLS symptoms. It may What should you do if you think that you have Restless Legs Syndrome? Make

be helpful to bring your RLS Symptom Journal to help your doctor determine what

factors may or may not be contributing to your symptoms.

Talk to your doctor about restiffic. Learn how restiffic works, watch patients discuss their experiences, and read more about RLS on www.restiffic.co.uk.