

# AKATHISIA

## What is it ?

Akathisia is a neuropsychiatric syndrome with objective motor restlessness (pacing, rocking, tapping, etc.) and a subjective sense of agitation and terror. **Patients typically experience feelings of unease, inner restlessness mainly involving the legs, and a compulsion to move.** Most engage in repetitive movement. They might swing or cross and uncross their legs, shift from one foot to the other, continuously pace, or persistently fidget.

Akathisia is the abnormal state of excessive restlessness. It fundamentally has 2 components: (1) a sensory component, which includes a sensation of inner restlessness, an urge to move, and dysphoria and (2) a motor component, manifested as movements that result from the sensation (Lohr et al 2015). Patients describe feeling an overwhelming inability to remain still. (Factor & Jankovic, 1994) The sensation is often unbearable and unpleasant, and patients may feel an associated tension, anxiety, irritability, aggressiveness, and impatience (Leong 2003). Akathisia is often accompanied by depression, **including suicide attempts.** The symptoms of akathisia can be so severe, that people take their own lives to escape them, even when they know that recovery is possible.

## What causes it?

In clinical settings, akathisia usually is a side effect of medication. **Antipsychotics, serotonin reuptake inhibitors, and buspirone are common triggers, but akathisia also has been associated with some antiemetics, preoperative sedatives, calcium channel blockers, and antivertigo agents. It also can be caused by withdrawal from an antipsychotic, SSRI, or benzodiazepine.** Akathisia can be acute or chronic, occurring in a tardive form with symptoms that last > 6 months. (Fernando Espi Forcen, MD, 2015)

**Learn More:**  
[misssd.co](https://www.misssd.co)  
[akathisiaalliance.org](https://www.akathisiaalliance.org)

### Sources:

(1) [medge.com/psychiatry/article/89620/somatic-disorders/akathisia-restlessness-primary-condition-or-adverse-drug](https://www.medge.com/psychiatry/article/89620/somatic-disorders/akathisia-restlessness-primary-condition-or-adverse-drug)

(2) [medlink.com/article/akathisia](https://www.medlink.com/article/akathisia)

## Key Points:

- Akathisia is a sensorimotor syndrome.
- Motor symptoms appear to be in response to sensory symptoms and are stereotyped and suppressible, and they decrease with distraction.
- Sensory symptoms are urges or other uncomfortable phenomena that improve with movement.
- Akathisia occurs acutely or subacutely with dopamine receptor-blocker therapy and improves with removing the drug, or it is chronic or tardive after chronic therapy with dopamine receptor-blocking agents and worsens with removing the drug.
- Mechanisms relate to impact of dopamine, serotonin, and noradrenergic systems on the somatosensory system in the brain.
- There should be a high index of suspicion as akathisia is **frequently underrecognized.**
- Akathisia is a complication of **all** atypical antipsychotics.
- The fact that symptoms can decrease with distraction can lead to the misdiagnosis that this condition is psychosomatic. **It is not.**

## Treatment?

First-line therapies include propranolol, mirtazapine, or trazodone. (Factor & Jankovic, 1994)

While drugs can treat symptoms, **anecdotal evidence suggests that treating with medications can actually prolong or prevent recovery from akathisia.**

*This information is to assist in awareness and education. It is not a substitute for medical advice. It is not intended to treat, cure or prevent any disease. Always consult a trusted healthcare professional before making changes to your medication(s).*

