Independent Medical Education (IME)

Request for Proposal (RFP) – National meetings for primary care practitioners and neurologists

Disease Areas: Restless Legs Syndrome

Contact: MedicalAffairs@noctrixhealth.com

Date ranges:

- January 1, 2026 to December 31, 2026

Scope of events

- Live national primary care society meetings are in-scope and the primary focus. Events primarily attended by MDs, NPs, and PAs are all in-scope. Examples include AAFP FMX conference, ACP Internal Medicine Meeting, and National Conference for Nurse Practitioners (NCNP).
- Live national neurology (e.g. AAN) and movement disorders meetings are a secondary focus.
- Meetings specifically for sleep specialists (e.g. APSS/SLEEP) are out-of-scope because they are already aware of this educational content.
- Events focusing on primary care for pediatrics or adolescents are not in-scope.
- State or regional meetings with high prescriber attendance will also be considered.
- Virtual educational opportunities may be considered only if there is no comparable live event.
- All initiatives must be U.S.-based only.

Eligibility Criteria

- Societies/associations, academic centers, hospital systems, and medical education companies all may be eligible if they meet the requirements below.
- U.S. based education provider
- ACCME-accredited to provide CME/CE and in good standing

Primary Learning Audiences:

- Primary care practitioners (medical doctors, nurse practitioners, and physician assistants)
- Neurologists and movement disorder specialists

Support Available:

- Support will vary depending on number of learners and scope (nationwide vs. state).

Opportunity:

In most cases, RLS is initially managed by primary care practitioners and initial treatment often involves prescription of dopamine agonist (DA) medications. In many other cases, RLS patients are initially referred to a neurologist or movement disorder specialist. Among many of these initial prescribers, DAs have been the most common first-line treatment for RLS for the past 20 years.

While effective in the short-term, long-term DA treatment leads to drug-induced worsening of RLS, termed “augmentation” [1,2]. Augmented patients are especially challenging to manage [3] partially because they have diminished response to other medications [4]. As a result, the most recent clinical practice guideline (CPG) for RLS have changed DAs from being a first-line treatment to a treatment that is recommended against and recommends alternative evidence-based treatments with lower long-term risk [5]. Many initial prescribers may be unaware of the risks of prescribing DAs.

Therefore, there is a need to educate primary care practitioners and neurologists on:

1. the reasons why DAs are no longer recommended,
2. how to detect and prevent augmentation in RLS patients,
3. non-DA treatments that are recommended,
4. how to manage RLS patients on non-DA treatments,
5. risks and side-effects of non-DA treatments,
6. options to manage augmented patients.

References:

1. García-Borreguero D, Allen RP, Kohnen R, et al. Diagnostic standards for dopaminergic augmentation of restless legs syndrome: report from a World Association of Sleep Medicine-International Restless Legs Syndrome Study Group consensus conference at the Max Planck Institute. *Sleep Med*. 2007;8(5):520-530. doi:10.1016/j.sleep.2007.03.022

2. Garcia-Borreguero D, Silber MH, Winkelman JW, et al. Guidelines for the first-line treatment of restless legs syndrome/Willis-Ekbom disease, prevention and treatment of dopaminergic augmentation: a combined task force of the IRLSSG, EURLSSG, and the RLS-foundation. *Sleep Med*. 2016;21:1-11. doi:10.1016/j.sleep.2016.01.017

3. Winkelman JW. Treating Severe Refractory and Augmented Restless Legs Syndrome. *Chest*. 2022;162(3):693-700. doi:10.1016/j.chest.2022.05.014

4. Garcia-Borreguero D, Cano-Pumarega I, Garcia Malo C, Cruz Velarde JA, Granizo JJ, Wanner V. Reduced response to gabapentin enacarbil in restless legs syndrome following long-term dopaminergic treatment. *Sleep Med*. 2019;55:74-80. doi:10.1016/j.sleep.2018.11.025

5. Winkelman JW, Berkowski JA, DelRosso LM, et al. Treatment of restless legs syndrome and periodic limb movement disorder: an American Academy of Sleep Medicine clinical practice guideline. J Clin Sleep Med. 2025;21(1):137-152. doi:10.5664/jcsm.11390