

Hypermobility

Service User Information Leaflet

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Issue No: 6.7.1.7	Date of Issue: Sept 2016	Review Date: Sept 2022 If review date has passed the content will apply until the next version is published
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Symptomatic Hypermobility.

What is hypermobility and what causes it?

'Hypermobility' is movement of some or all of your joints beyond their normal ranges. Hypermobility can affect a few joints or many of the joints. For some people this can be very helpful. Having excessive joint movement is useful for some jobs and sports e.g. ballet and playing the piano. Hypermobility is not an illness or a disease. It often causes no symptoms and requires no treatment.

Hypermobility is more common in females than males. It is more common in children than in older people. Hypermobility is something you are born with. It affects the collagen tissue. Joint ligaments are composed of collagen. In hypermobility the joints are more lax and flexible. Ligaments give stability to the joint. If people with hypermobility stop exercising you can lose strength in your muscles. When this happens you can develop symptoms. This is caused by the joints becoming less stable.

Sometimes different names are used to describe hypermobility.

- Hypermobility syndrome (JHS).
- Benign joint hypermobility syndrome (BJHS).
- Ehlers-Danlos syndrome (EDS).

What are the symptoms of hypermobility?

People with hypermobility often have no problems, however sometimes you can develop the following symptoms.

- Muscle strains and pain.
- Partial or fully dislocated joints.
- Joint stiffness and joint pain.

It is not uncommon at times to feel tired, anxious or low in mood. Symptoms are not always related to the degree of hypermobility.

These problems may be related to:

- Poor muscle strength.
- Poor muscle stamina.
- Poor control of joint movement.

What can you do to help?

It is important to keep yourself healthy. Strong muscles help support the joints and reduce pain. You should maintain a healthy weight. A healthy weight reduces the stress on the muscles and joints. An exercise programme can help strengthen the muscles. Exercise also helps manage your pain and stiffness. Normal activities and work help people with symptomatic hypermobility. Stopping all activities can make your symptoms worse. Lack of use of the muscles makes them become weaker.

Pacing and spacing

Pacing involves dividing an activity into small achievable chunks and setting realistic baselines.

A baseline, is the maximum amount of activity you can do on a bad day without stirring up your pain at the time or later, e.g. walk 3 minutes, iron 2 shirts, stand to wash up 2 minutes

Example:

The corner shop is an 8 minute walk. Your baseline is 3 minute pain free walking. In order to get to the shop, you walk for 3 minutes, rest, walk for 3 minutes, rest and then walk the remaining 2 minutes to the shop. Repeat the same on the way back.

You can gradually increase your baseline by a minute at a time, over a period of time e.g. a week or two (Figure 1).

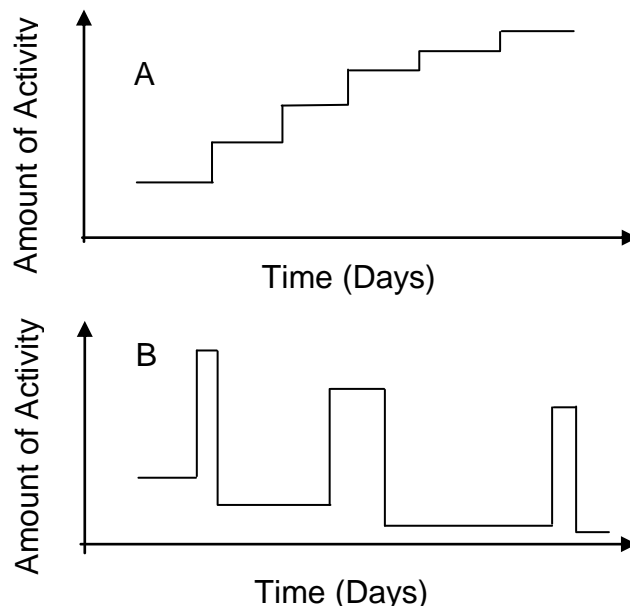


Figure 1: Pacing and Spacing (A) Gradual increase in activity results in greater long term improvement (B) Rapid bursts of increased activity results in reduced improvement

If you increase your baseline too much, cut it back for a week. Then gradually increase more slowly.

Any activity within your daily life can be divided up into chunks of activity and rest that do not flare up your pain.

Pain Management.

The pain is usually the result of muscle fatigue. It is not usually caused by damage or injury. Pain medication often does not help people with hypermobility. Your GP or Pharmacist can advise about any medications. Try other methods to reduce the pain e.g. a hot bath or applying a hot or cold pack to the painful area.

Physiotherapy.

If you are experiencing joint pain and difficulty with activities a physiotherapist can advise you about changes to your daily routine. They can also advise on a suitable exercise programme. This may include muscle strengthening and stretches. Advice about improving your posture and balance is beneficial. You may be seen at your GP or hospital physiotherapy department. A regular exercise programme can be very helpful to help increase your general function and may help reduce some of your symptoms. The goal is to enable you to manage your condition independently.

Role of the General Practitioner.

The GP can assess you and prescribe medication or make onwards referrals as you require.

Role of the Podiatrist.

Podiatrists can assess and advise you regarding any foot or ankle problems you may have in relation to your hypermobility. Supportive footwear with a sturdy heel can help if you have flat feet. Try to avoid shoes with no support around the heel e.g. thin soles, slip on shoes or boots.

When to seek advice.

- If there is new trauma or injury to a joint(s).
- If your joint(s) are swollen/swelling.
- If you have severe pain, seek advice from your GP.

For further Advice please search the following websites:

www.nhsinform.scot/illnesses-and-conditions/muscle-bone-and-joints (search for hypermobility)

www.hypermobility.org

<https://www.versusarthritis.org> (search for hypermobility)

<http://ednf.org/>

<http://www.ehlers-danlos.org/>