The **Ehlers-Danlos** Society

What are the hypermobility spectrum disorders?

Hypermobility spectrum disorders (HSD) are a group of conditions related to joint hypermobility (JH). HSD are intended to be diagnosed after other possible answers are excluded, such as any of the Ehlers-Danlos syndromes (EDS). HSD, just like hypermobile EDS, can have significant effects on our health. Whatever the problems that arise, whatever the diagnosis, it is important that these effects are managed appropriately and that each person is treated as an individual. HSD and hEDS can be equal in severity, but more importantly, both need similar management, validation, and care. HSD is known to affect people of all ages, races, and genders.

Joint hypermobility is a term to describe the capability of joints to move beyond normal limits. It can exist by itself or be a part of a more complex diagnosis. Those with joint hypermobility in a couple of joints (fewer than five) have localized joint hypermobility (LJH). Those of us with joint hypermobility in five or more joints are described as having generalized joint hypermobility (GJH). GJH is often something we're born with and possibly inherited, although acquired forms of GJH exist.

The essential difference between HSD and hEDS lies in the stricter criteria for hEDS compared to the HSD and reflects the more likely hereditary and/or systemic nature of hEDS compared to HSD. **Treatment is more important than labels**.

For more information,
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Generalized HSD: GJH plus one or more secondary musculoskeletal manifestations identified below.

Peripheral HSD: JH limited to hands and feet plus one or more secondary musculoskeletal manifestations.

Localized HSD: JH at single joints or group of joints plus one or more secondary musculoskeletal manifestations.

Historical HSD: historical)GJH plus one or more secondary musculoskeletal manifestations.

Secondary Musculoskeletal Manifestations

Trauma (macro- and microtrauma);

Chronic pain;

Disturbed proprioception;

Other musculoskeletal traits (flat feet, misaligned bones in the elbow and big toes, mild to moderate scoliosis, kyphosis of the upper spine and lordosis of the lower spine).

Associated Problems Not Based in the Musculoskeletal System

There can be many associated issues not directly related to the mechanics of jJH. These associations are very real; they seriously affect quality of life and they need to be managed as part of treatment. The strongest (but not only) associations noted so far are anxiety disorders, orthostatic tachycardia, a variety of functional gastrointestinal disorders, and pelvic and bladder dysfunction. These additional problems need to be evaluated and treated when an HSD is diagnosed.