Possible Comorbidities

Collagen is the most abundant protein in our bodies. It's found in skin, muscles, bones, blood vessels, digestive system and tendons. Because of this, Ehlers-Danlos Syndromes and Hypermobility Spectrum Disorders are multi-systematic disorders, resulting in a host of symptoms.

EDS often shows in conjunction with other health problems -some officially, and some not as in that there is no proven link between certain conditions. However, research is ongoing, and through observance of EDS patients we can see some traits that many share. Here are only a few of these possible comorbidities to look out for:

- **Mast Cell Activation Disorders (MCAD) - Including Mastocytosis and Mast Cell Activation Syndrome (MCAS)**
- **Dysautonomia - Including POTS and Inappropriate Sinus Tachycardia**
- **Raynaud's Phenomenon**
- **Stomach and bowel issues - Including Gastroparesis/ slow motility, GERD, Irritable Bowel Syndrome, hiatal hernia, Oesophageal spasm**
- **Von Willebrand Disease (bleeding disorder)**
- **Chronic Fatigue Syndrome (CFS)/ Myalgic Encephalomyelitis (ME)**
- **Eyesight and hearing problems**
- **Spinal and brain manifestations - Including Chiari Malformation, Craniocervical Instability, Tethered Spinal Cord**
- **Sensory Processing Disorders and Developmental Coordination Disorders**

Treatment

There is no cure for EDS or HSD and so symptoms are treated as they arise. This may include mediations to relieve pain, control muscle spams, regulate heart rate, and so on. Physiotherapy (from a physiotherapist qualified in hypermobility conditions) is vital in maintaining muscle tone and mobility. Exercises to strengthen the muscles and stabilise joints can reduce the frequency of joint dislocations and subluxations (partial joint dislocations). Braces are often used when joints do dislocate. Early diagnosis and intervention is key in maintaining joint health.

For more information

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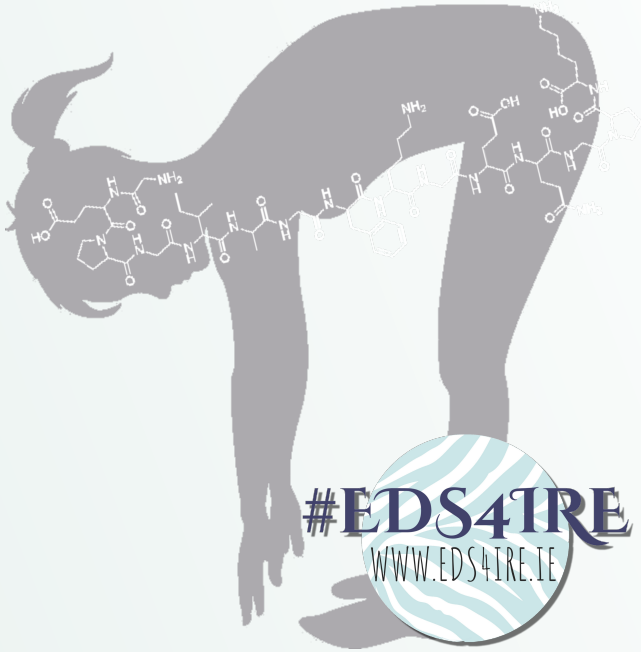
What is EHLERS-DANLOS SYNDROME & HYPERMOBILITY SPECTRUM DISORDER?



What is EDS & HSD?

Ehlers-Danlos Syndrome (EDS) is a rare, heritable connective tissue disorder which affects approximately 1 in 5,000. People with this condition have faulty collagen, which is the glue that holds the body together. It can involve every bodily system, leading to a wide range of apparently unconnected symptoms. One of the primary features of EDS is hypermobile joints - joints which extend beyond the normal range. Joint hypermobility is on a spectrum and so some patients are classified as having HSD (Hypermobility Spectrum Disorder).

General Symptoms of EDS/ HSD

- **Joint and muscle pain**
- **Joint dislocations/ partial dislocations**
- **Stomach pain, nausea, slow gut motility and other digestive issues**
- **Headaches and sensory issues**
- **Stretchy/ fragile skin and poor wound healing**
- **Heart problems**
- **Fatigue and insomnia**
- **Eye problems**
- **Allergic reactions**
- **Disturbed proprioception**

Types of EDS

Each EDS subtype has a set of clinical criteria that help guide diagnosis. There are 13 types of Ehlers-Danlos:

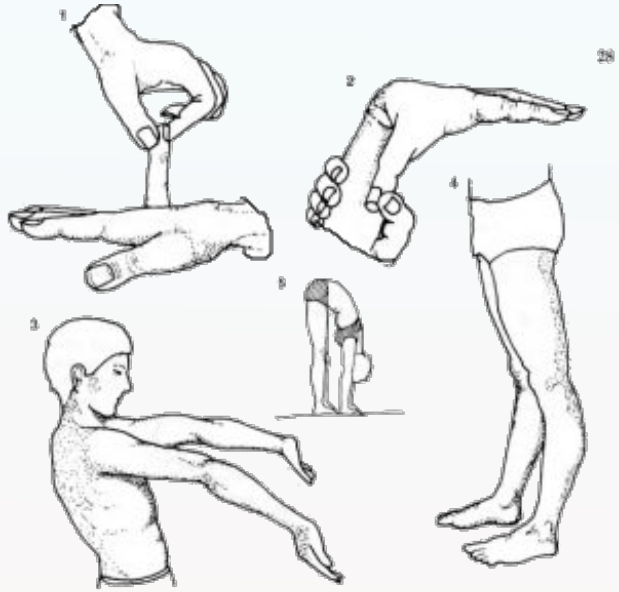
- **Hypermobile EDS**
- **Vascular EDS (vEDS)**
- **Classical EDS (cEDS)**
- **Classical-like EDS (clEDS)**
- **Cardiac-valvular EDS (cvEDS)**
- **Arthrochalasia EDS (aEDS)**
- **Dermatosparaxis EDS (dEDS)**
- **Kyphoscoliotic EDS (kEDS)**
- **Brittle cornea syndrome (BCS)**
- **Spondylodysplastic EDS (spEDS)**
- **Musculocontractural EDS (mcEDS)**
- **Myopathic EDS (mEDS)**
- **Periodontal EDS (pEDS)**

Diagnoses

Hypermobility conditions are usually diagnosed by either a rheumatologist or a geneticist, but a trained physiotherapist can also pick up on the signs. Currently there is no genetic testing for the Hypermobility Type of EDS, but other types (such as vascular and classical) can be identified. Your first consultation with a qualified rheumatologist will often be a physical exam using the Beighton Scale to assess how mobile your joints are. They may also look at your skin, and note any unusual scarring, as well as discuss family history of illness.

The Beighton Scale

The Beighton Scale is a tool to assess joint hypermobility. A positive Beighton score for adults is considered as five out out of nine points, and six out of nine for children. As everyone loses flexibility with age (even those who don't have joint hypermobility), your consultant may ask you about historical hypermobility also.



1. Pull little finger back beyond 90 degrees (1 point each hand)
2. Pull thumb back to touch forearm (1 point each hand)
3. Bend elbow backwards beyond 10 degrees (1 point each arm)
4. Bend knees backwards beyond 10 degrees (1 point each leg)
5. Lie hands flat on the floor while keeping knees straight, bending forward at waist (1 point)