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## Joint Hypermobility

### Can joint hypermobility (JH) get "worse"?

- Joint range of motion usually decreases with age and accumulated injuries present a diagnostic challenge. Sometimes by the time a person develops symptoms, they are not hypermobile anymore (ie: their joint range of motion is no longer greater than “expected”).

### What causes JH?

- Many factors influence joint range of motion including age, sex, hormones, genetics, temperature, injuries, bone shape, and muscle tone. A number of genetic and non-genetic disorders can be associated with JH.

### Is generalized joint hypermobility (GJH) common?

- A recent study<sup>1</sup> found a prevalence of GJH of 12.5% in a university-aged population. GJH **may** be asymptomatic and is not always associated with a Connective Tissue Disorder.

### Does JH lead to arthritis?

- Although more data is desperately needed, it appears that people with JH may experience arthritis at an earlier age. Some Connective Tissue Disorders are clearly associated with arthritis and autoimmunity (eg: Autoimmune Rheumatic Disease).

### Why does JH matter?

- JH matters because it can be an unrecognized contributing factor for pain and other symptoms. People with symptomatic joint hypermobility often experience a wide variety of seemingly unrelated problems that go unnoticed by medical professionals.

Source<sup>1</sup>: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6744937/E>