

# FACT SHEET

## Hypermobility in Children

**Hypermobility is the term given for generalized joint laxity in a number of joints throughout the body.** Children tend to be more flexible than adults and 10-15% normal children have hypermobile joints which extend beyond normal range of movement. Many people refer to this as having a joint laxity or being double jointed. Some people have differences in the structure of the collagen fibers of the ligaments, which increase the flexibility of those joints. Hypermobility syndrome can be a standalone condition or can be part of other conditions including Ehlers-Danlos syndrome, Down syndrome and Marfan syndrome. Hypermobility is more common in children, females, those with a family history and Asian or African populations.

Hypermobility often affects fingers, elbows, shoulders, knees and hips. Many children have joint hypermobility although only few experience difficulties. Difficulties can include generalized aches and pains and higher incidences of dislocations and joint sprains.

It is important for children with hypermobility to stay active to develop strength and fitness. Hypermobility can be helpful with sports requiring flexibility such as gymnastics and dancing. For those who experience pain, low impact sports such as swimming or bike riding can be helpful in building up muscle strength and reducing pain during exercise. Physiotherapy can help with providing more specific exercises to strengthen the surrounding muscles to improve the stability of joints. Joint laxity can predispose you to injury and alignment issues.

As people age, joint mobility tends to decrease, although people with joint hypermobility are still likely to be more flexible than others of the same age throughout their lifespan.

