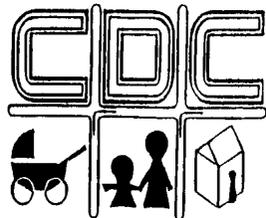


When professionals may be required?

- When there is a diagnosis of a hypermobility syndrome/ genetic connective tissue issue.
- When pain is unmanageable or a specific joint is problematic.
- If handwriting/cutlery use/buttons and zips are a problem (occupational therapy)
- Pain in feet (podiatry)

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Paediatric Physiotherapy

Bendy Kids



A guide for parents for the management for hypermobile children

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Bendy Kids

Hypermobility – very flexible children, 30% of the population are considered hypermobile.

“When a persons joint moves more than is considered normal.” (Billings et al, 2013)
But then what is normal?

There is a large spectrum of hypermobility and the benefits and drawbacks manifest themselves particularly when children start to grow and change.



Common difficulties particularly at school

- Fidgeting
- Low confidence / reluctant to try new things
- Clumsy
- Falling frequently
- Handwriting difficulties
- Problems with hopping/jumping/ poor balance

There is a difference between being HYPERMOBILE (FLEXIBLE) and having an inherited GENETIC HYPERMOBILITY SYNDROME.

Most children are just hypermobile meaning they are more flexible than usual and that's ok :)

The treatment and management of both are very similar:

The two main areas of concern are PAIN and FATIGUE

Pain

- Pain is worrying and disruptive to normal life.
- Common in more flexible children due to not having enough control around certain joints – this does improve with age, growth and an active lifestyle.
- Pain can increase in the evening or at night, usually lower limbs, and can be vague and changes from week to week.
- Usually there is no swelling/redness/heat—if this occurs seek medical opinion.

Fatigue

Often one of the biggest areas experienced by children and adults. Ideally you want to prevent the boom/bust cycle (doing a large amount of activity then not being able to do anything the next day). Hypermobility children may get tired quickly as they have to work harder to gain/maintain stability—again this will generally improve with exposure to activity, practise, time and an active lifestyle.

They might:

- Not keep up with you or their peers/refuse to walk/moan and complain (can be normal for all children!)
- Want to be carried or picked up all the time.
- Complain of tired and sore legs - non specific areas.

Treatment Ideas

- **SELF MANAGEMENT IS KEY**
- Exercise and activity
- Good diet
- **Toolbox** (things that help you to ease pain)
- Distractions such as games, toys or books.
- Rubbing joints and massaging limbs.
- Try putting pillow under their knees at night for lower limb pain.
- Positive reassurance — “look at all the activity you have done today, that’s why your legs feel tired and sore” etc
- Balancing activity — rest days in between active days, encourage regular activity and participation in P.E lessons (allow rest options to sit for 2-3 minutes before continuing if your child complains of pain/fatigue)
- If pain is a struggle then more gentle activity may be better (yoga, swimming, cycling, martial arts etc.)
- **But it is important to remember, being flexible doesn't mean you are restricted from participating in any sports you want too, providing you maintain your muscle strength and control.**
- Fatigue may appear to look like the activity should stop. But often it is not an indication that more rest is needed. Fitness training, pacing and sleep hygiene is required.

Ideas to help with fatigue:

- Pace activities (PE/school trips/Plays), use short rest breaks then continue with the activity. Try scooter bikes instead of walking when appropriate.
- Try routine changes. If a child is less fatigued in the morning , then target physical activity in the morning and less physical activities in the afternoon.
- Always wear appropriate supportive footwear for the activity being undertaken.