

# Migraines could be caused by double-jointedness

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By most people, double-jointedness is seen as a common, harmless condition.

But Vincent Martin, MD, UC Health physician and headache expert, says extreme double-jointedness could be the precursor and cause of excruciating migraines and other problems.

A recently published study by Martin and colleagues, including Brad Tinkle, MD, PhD, from Cincinnati Children's Hospital Medical Center, in the journal *Cephalalgia* showed that people with joint hypermobility syndrome, a severe form of double-jointedness, have a greater chance of suffering from migraines.

Joint hypermobility syndrome is a condition where joints easily move beyond their normal range and often affects women. There is a genetic component to the illness, and it tends to run in families. Genes that are responsible for the production of collagen, an important protein that helps glue tissues together, are suspected to play a role.

The syndrome often causes other joint pain, leading to misdiagnosis.

"Joint hypermobility syndrome is very common and affects roughly 10 to 15 percent of the entire female population," says Martin, who also has the syndrome and experiences migraines. "Preliminary studies suggested that headache disorders are more common in patients with joint hypermobility syndrome.

"We wanted to determine if the prevalence, frequency and disability of [migraine](#) differ between female patients with the syndrome and a control population."

Using interviews and written questionnaires, researchers compared 28 women with the syndrome with 232 women from two primary care practices.

They found that 75 percent of patients with joint hypermobility syndrome also got migraines while only 43 percent suffered from migraines in the comparison group. After assessing age and gender differences between the groups, those with joint hypermobility had three times the risk of migraines.

Women in this group also experienced migraines nearly twice as many days each month and were more likely to experience visual disturbances called "aura" preceding the pain of a migraine attack.

"The results show that this common clinical disorder is strongly associated with an increased prevalence, frequency and disability of migraine in females," Martin says. "The patients in the study were selected from a specialty connective tissue clinic, so our next step is to test whether or not this is the same in less severe cases by using patients in a regular primary care clinic.

"In bringing attention to this link, we hope that patients can be diagnosed earlier, leading to quicker treatments."

In addition, individuals who are double-jointed might want to consider seeing a specialist if they have recurrent, debilitating migraines or experience the following:

- Moderate to severe arthritis.

- Dislocation and sprains in joints.
- Fibromyalgia.
- Anxiety and depression.
- Neck pain or herniated discs.
- TMJ (temporomandibular joint disorder), or inflammation of the temporomandibular joint which connects the mandible to the skull.
- Leaky heart valves.

"There are treatments that can greatly improve the quality of life for those with the syndrome, but the correct diagnosis needs to be made first," Martin says.

Provided by University of Cincinnati

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