



Quick Guide: The Power of Pilates and Strength Training for Joint Hypermobility Syndromes

By Jennifer Paa, MPT,CPT



Welcome to the Hypermobility Starter Kit!

This Starter Kit is for the people I see everyday—who feel like they've fallen through the cracks of the fitness world, who want to feel strong and capable again but just need someone to show them how!



How to Use the 5-Day Series

Each video in this series is designed to stand alone, so you don't need to do them back-to-back or on any particular schedule.

If you're new to this kind of movement, start with the first video and repeat it as many times as you need before moving on. There's no timeline here.

If you have some experience, these videos work well as a reset — after a flare, a period of inactivity, or any time you want to come back to basics.

Go at your own pace. That's the whole point.

Read the written Guide first- then roll out your mat!

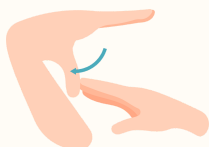
What is the difference between Generalized Hypermobility and Hypermobility Syndrome (HSD)/ h-EDS?

Mobility of a joint refers to the amount of motion available at that joint. Some joints are naturally more mobile than others, depending on their location and purpose.

Being flexible doesn't mean you're hypermobile. Flexibility is about how much range of motion a muscle allows across a joint — and people with hypermobility often have very tight muscles. That's usually your nervous system doing its job: when the brain doesn't feel a joint is stable enough, it recruits muscles to lock things down and protect the area. This shows up a lot in hamstrings and trunk muscles.

Hypermobility itself — excessive motion at a joint — can be limited to one or two areas with no other issues. For a lot of people, that's just how their body is built, with no real impact on function.

But joint hypermobility exists on a spectrum: from one or two flexible joints with no symptoms, all the way to generalized hypermobility with systemic involvement. Everyone's presentation is different.



Hypermobility Syndrome

HSD/hEDS

A hypermobility syndrome can be multi-systemic and cause a host of issues in multiple areas of the body.

- Multi-joint instability
- Poor motor control
- Chronic pain
- Depression/isolation
- GI (IBS, reflux)
- Genito-urinary issues
- Periodontal disease
- Incoordination
- POTS or dysautonomia (33-50%)



Ehlers Danlos is a group of genetic disorders that affect the collagen in the connective tissues of the body, primarily the joints, skin and blood vessels. Each type of EDS has its own set of features. There is a spectrum of EDS and symptoms are highly variable among different types. Diagnosis is made using a checklist of symptoms, family history, and with the help of an experienced medical professional. Physical therapy (PT) can provide skilled monitoring of exercises, manual therapy when needed, improved pain control, and self care strategies. BUT, usually insurance dictates how much therapy one needs, OR you are not sure your PT understands the implications of your condition.

THAT CAN BE FRUSTRATING.



Pilates 101



Pilates, created by Joseph Pilates in the early 20th century, is a gentle exercise technique aimed to promote overall body wellness. It encompasses joint flexibility, core strength, balance, and body awareness through precise movements and breathing exercises. Joseph Pilates designed unique equipment like the Reformer, Cadillac, Tower, Barrel, and Wunda chair to enhance the practice. Originally, Pilates appealed to dancers and affluent individuals from a historical perspective. However, that was not his initial intention and it was developed through the rehabilitation of injured soldiers in World War I.

Breathing: the beginning of life, learn to breathe deeply to bring oxygen to muscles and support the core

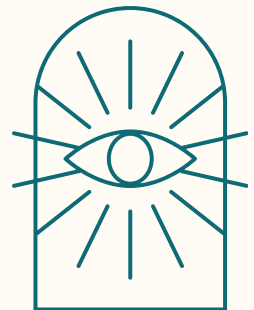
Centering: the source of movement in the body (“the core”)

Control: safe, properly paced movement is preferred

Precision: quality movement with intention

Flow: incorporate the whole body with continuous movement

Concentration: mental focus to connect mind and body



Pilates and Hypermobility



For individuals with Hypermobility, Pilates can be particularly beneficial due to its emphasis on control, strength and stability.

For those with co-morbidities such as POTS or other symptoms (fatigue, joint pain), Pilates can offer modifications for these obstacles. With or without the equipment (Reformer, Tower), much of the work is done close to the ground.

Pilates can offer:

- Exceptional core and pelvic stability
- Joint stability (shoulders, hips, spine)
- Body awareness, which is often lacking with an unstable joint.
- Neuromuscular control
- Balance
- Controlled flexibility throughout the range of motion
- Energy boost from coordination of mind and body and a positive movement experience!

Pilates can be used for rehabilitation or can be advanced to dynamic patterns of movement. You could literally do Pilates for a lifetime!

Pilates is a versatile exercise system designed to improve flexibility, strength, and body awareness. The "key" Pilates exercises, while great for reducing stiffness and overall body movement, did not really consider the specific needs of certain pathologies. Joseph Pilates was ahead of his time, certainly but the knowledge of hypermobility syndromes was non-existent!

Some key Pilates exercises include the "Hundred," which warms up the body and strengthens the core with a rhythmic pumping of the arms while maintaining a "curled up" position.

Take the "Hundred" — it warms up the body and works the core through a rhythmic pumping of the arms while holding a curled-up position. For hypermobile bodies, it's easy to modify:

- Keep your head down on the mat
- Bend your knees, or point your legs straight up to the ceiling
- Slow the arm pace down
- Break it into smaller sets (3x30 or 5x20 instead of one set of 100)

In this picture, the woman can rest her head down and then take a variation that accomplishes the same goal while respecting her body's limitations.



"Single Leg Circles" target the hip flexors and core stability by drawing circles in the air with one leg while the other leg remains extended on the mat. This may be difficult for the person with pain due to hypermobility for reasons related to hip instability or SIJ instability.

In the picture below, the strap or band can be added for support.



The "Swan" focuses on back extension and strength, performed by lifting the chest and shoulders off the mat while lying prone. The hypermobile individual may need extra cues and attention to avoid hyperextension as they may feel less connection of the ribcage to the pelvis. The unstable spine may find this exercise painful in the low back or they may not feel it at all due to the excessive range of motion in lower spine.

It's not that these exercises are BAD or DANGEROUS! They just require special attention if the person lacks body awareness, core control or has pain.

In fact, when done with competence they can become very beneficial for a balanced and strong, stable body.



But...is Pilates “enough?”

THAT DEPENDS ON YOUR GOALS:

If your goal is:

- to begin exercising
- get generally stronger
- improve joint stability
- improve muscular endurance
- prevent injury and recovery
- feel better overall, then...



ABSOLUTELY!!

HOWEVER....

If your goals include muscle hypertrophy, body re-composition (fat loss) or weight loss, then probably not! Depending on the Pilates class structure and type, you may not stimulate enough load to improve bone density or even get your HR up.

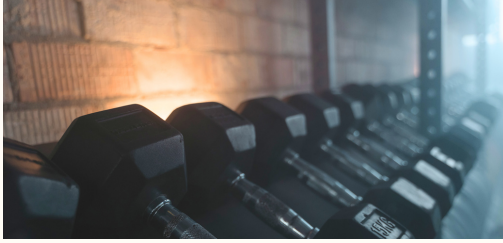
In order to gain muscle, you need to bring a muscle to “near failure” in less than 30 repetitions. Most Pilates moves are not done for that long and therefore do not load the muscles to this degree.

Often, Pilates group sessions may target specific body parts (the “booty” and the “abs”) likely because that is what draws a crowd and speaks to trends in the fitness industry. But, it is possible to over-train glutes and under-train other important muscle groups, especially if you have specific needs due to hypermobility. A well-structured program will ensure you build a well balanced body.

But IF you love Pilates. then DO IT!

The best exercise for your body is the one you will do consistently.

Lifting “Heavy” Things!



Strengthening is crucial to supporting joints that lack stability. It is not possible to strengthen a ligament. Muscles provide the added support needed to stabilize the joint, no matter the size or type of joint.

Using progressive overload with weights, resistance bands or even body weight is what is needed to support hypermobile joints including hips, knees, shoulders and ankles.

“Heavy” is relative to your body as well as which specific body part you are targeting! It also depends on the body position in which the exercise is being performed. So **NO** you don’t have to squat or overhead press to get better at these activities.

You need to develop tissue resilience and begin to build up the tolerance for being upright, combining muscle groups, and THEN adding on.

This may take a really long time if you are dealing with symptomatic hypermobility syndrome because your symptoms fluctuate depending on:

- the weather
- your diet
- your over/under activity
- your blood pressure
- your mood
- your hydration
- EVERYTHING!**

Weight training for hypermobility syndromes

There are things to keep in mind when beginning a resistance training program. The following are some ideas for making your workout safer and more effective in the long term.

REMEMBER: Strength is your life's work!

1. Prioritize stability: Limit ROM if necessary and focus on form over finding the end of the range (deep squat)
2. Weight machines may be ideal to provide a fixed arc of movement
3. Reduce the load. Body weight can often be enough (side-lying leg lifts)
4. Use a different body position (side-lying arm exercises)
5. Work one muscle group at a time to reduce overall stress to Central Nervous System
- 6 Respect the feedback your body gives you. You may feel fine during the exercise but "crash" later. This can be typical but not something to keep pushing through.



Optimizing your health

- Balance and proprioception exercises can be very beneficial to challenge small stabilizing muscle around the joint

THINK: single leg work, balance pads closing the eyes to reduce input from visual world

- Functional strengthening is needed as well for tasks of everyday life.

THINK: lifting, hinging, squatting, pushing and pulling

- Cardiovascular stimulus is needed to improve overall heart health and metabolism

THINK: walking, dancing, hiking, biking

BUT you still need a plan.

You can't "muscle" through and expect to just deal with the consequences.

Pilates can be a part of whole body health and is highly effective for preserving joint health, energizing the body, and improving body awareness.



WHY PILATES + STRENGTH TRAINING FOR HYPERMOBILE BODIES



Above is an example of an ideal framework for structuring your weekly workouts. Walking or other light activity may be added in throughout the week, if able.

Of course, this may take time depending on your beginning level of fitness.

For those with other symptoms, fatigue, postural intolerance, and active pain, this may take months to achieve.

START THE PROCESS.

Pilates and strength training are a powerful combination — especially for hypermobile bodies.

Hypermobility means your joints move beyond their typical range, and your connective tissue provides less passive stability than most. That's a great reason to be deliberate about which exercise you choose.

Pilates builds the internal foundation your body needs — deep core activation, joint stability, body awareness, and the kind of neuromuscular control that keeps you safe when you load. But Pilates alone won't build the muscle mass that protects your joints long-term. For that, you need progressive strength training.

Think of Pilates as the bridge.
Strength training is the destination.

Starting here — with this kit — means you're building that foundation first. That's the right order.

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A note: if you're concerned about a medical condition, talk to a healthcare professional who can actually evaluate you — not just read about your symptoms. Self-diagnosis tends to create more anxiety than answers, and a proper evaluation (history, physical exam, testing where needed) is what actually moves things forward. If something feels off, don't wait on it.

