## **SUMMARY**

**OBJECTIVE:** In this study we aimed to determine the frequency of hypermobility among patients applied to outpatient clinic and to present the distribution of musculoskeletal problems with this patient. In this sense we targeted to emphasize once more that hypermobility should be reminded when evaluating the musculoskeletal problems.

**MATERIALS AND METHODS:** Among the patients applied to our outpatient clinic for musculoskeletal problems, 72 patients who are diagnosed as hipermobility according to Beighton criteria are included in this study. The patients with hipermobility that have musculoskeletal problems (growing pain, late walking, hip displasia, subluxation, osteoarthritis) during the examination or in their history are recorded.

RESULTS: The fruequency of hipermobility is calculated as %5.5 as it observed similar within some of the studies. The mean Beihgton score of the 72 patients with hipermobility was 5.51±1.40. There was no significant difference between Beighton scores of the patients aged 35 and over when compared with under 35 (p:0,419). According to the frequency, paresthesia, osteoarthritis, raynaud phenomenon, growing pain, neuropathies, disc hernia, fibromyalgia, fracture, subluxation and others are seen in patients with hipermobility. On the other side no patient with diagnosis of arthritis, thoracic disc hernia, adolescent kyphosis were observed. There was no correlation between hipermobility and osteoarthritis, while there was a significant correlation between hypermobility and disc hernia, tendinitis, fibromyalgia, neuropathies

**CONCLUSION:** This study showed us that hipermobility can makes susceptibility for soft issue problems such as tendinitis, fibromyalgia and musculoskeletal problems such as disc hernia, neuropathies.

**KEY WORDS:** Hypermobility, prevalence, musculoskeletal system, beighton