INPLASY

Relationship between altered eating behaviors and joint hypermobility, hypermobility spectrum disorders or Ehlers-Danlos syndrome. A systematic review protocol

INPLASY2026100119

doi: 10.37766/inplasy2026.10.0119

Received: 28 October 2026

Published: 28 October 2026

Baeza-Velasco, C; Arias, K; Lorente,S.

Corresponding author:
Sonia Lorente

sonia.lorente@uab.cat

Author Affiliation:
Universitat Autònoma de Barcelona.

ADMINISTRATIVE INFORMATION

Support - This work has not financial support.

Review Stage at time of this submission - Preliminary searches.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY2026100119

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 28 October 2026 and was last updated on 28 October 2026.

INTRODUCTION

Review question / Objective Is there an association between altered eating behaviors and joint hypermobliity, hypermobility spectrum disorders or Ehlers-Danlos syndromes? What is the prevalence of altered eating behaviors in people with joint hypermobliity, hypermobility spectrum disorders and Ehlers-Danlos syndromes?

Rationale This systematic review will evaluate the relationship between physical connective tissue variants—specifically joint hypermobility (JH), hypermobility spectrum disorders (HSD), and Ehlers-Danlos syndrome (EDS)—and altered eating behaviors or clinical eating disorders (EDs) across clinical and non-clinical populations. Connective tissue instability and psychological eating phenotypes frequently overlap, addressing a critical gap in understanding how somatic traits interact with eating behaviors.

Condition being studied Joint hypermobility, hypermobility spectrum disorders and Ehlers-Danlos syndromes are variants of connective tissue disorders. Altered eating behaviors and eating disorders fall within the domains of psychology and psychiatry.

METHODS

Search strategy We will search PubMed, PsycINFO and PsycArticles. In addition, up to 100 results will be screened in Google. The search strategy followed the Preferred Reporting Items for reporting Literature searches in Systematic Reviews (PRISMA-S) (Rethlefsen et al., 2021), including terms such as a) “Ehlers-Danlos”, EDS, “joint hypermobility”, hypermobile and b) “eating disorders”, “avoidance-restrictive food intake”, “food avoidance”, “restrictive eating”. Terms will be adapted to each database. Google and secondary searches will be carried out manually to identify additional studies, and where articles were not available, the authors attempted to request them.

Baeza-Velasco et al. INPLASY protocol 2026100119. doi:10.37766/inplasy2026.10.0119 Downloaded from https://inplasy.com/inplasy-2026-10-0119/

Participant or population Participants with altered eating behaviors (subclinical) or a diagnosis of eating disorders, hypermobility spectrum disorders or presenting joint hypermobility, and an assessment of eating disorders symptomatology or eating disorder diagnosis, regardless of sex, age, and ethnicity.

Intervention The association between altered eating behaviors and joint hypermobility, hypermobility spectrum disorders or Ehlers-Danlos syndrome.

Comparator The control groups will be participants without joint hypermobility, hypermobility spectrum disorders, Ehlers- Danlos syndrome or altered eating behaviors/eating disorders.

Study designs to be included Inclusion. Observational (cohorts, case-control, cross-sectional) and experimental studies (trials, quasi-experiments). Exclusion: Individual case-studies, qualitative designs, letters to the editor, opinions, reports, books, book chapters, conferences abstracts, indexes, studies focus on developing or validating an instrument; systematic reviews; literature reviews; scoping reviews; rapid reviews and meta-analysis.

Eligibility criteria Studies conducted both in clinical and non-clinical settings.

Information sources We will search PubMed and PsycINFO. In addition, up to 100 results will be screened in Google for grey literature. Secondary searches will be carried out manually to identify additional studies, and where articles were not available, the authors attempted to request them.

Main outcome(s) The primary outcomes will focus on the prevalence, frequency, percentages, and proportions of EDs in hypermobile populations and hypermobility in ED populations, alongside measures of association including odds ratios, relative risks, and correlation parameters.

Additional outcome(s) Secondary outcomes will evaluate clinical management impact, specifically intervention adherence rates, treatment tolerance, and response rates.

Data management All identified citations will be imported into Elicit (Elicit, Inc., San Francisco, CA, USA) to remove duplicates. Prior to primary screening, a pilot test using a random sample of 50 citations will be conducted to establish an inter-rater agreement to Elicit of at least 80%, and filters of inclusion criteria will be refined to reach 100%. Subsequently, the abstract screening phase will be conducted automated by Elicit, and one reviewer will evaluate titles and abstracts against the inclusion criteria. Full-text articles of potentially relevant studies will be retrieved and independently assessed by two reviewers in detail. Specific reasons for excluding full-text papers will be documented and reported in the review. Any discrepancies between reviewers at any stage of the selection process will be resolved through consensus or by consulting a third reviewer. Search and selection results will be fully detailed in the systematic review and illustrated using a Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flow diagram. Extracted data of each selected study will include characteristics of the research concerning general information, author, year and region, sample general characteristics methodological data, clinical characteristics and outcomes. Data will be reported disaggregated by sex and/or gender when applicable.

Quality assessment / Risk of bias analysis Risk of bias (RoB) of the included studies will be assessed. Tools proposed by the Joanna Briggs Institute (JBI) for cross-sectional, cohort studies and case-control studies (Moola et al., 2017), for randomized studies (Martin, 2017a), and for quasi-experimental studies (Martin, 2017b) will be used. The RoB will be assessed by two independent reviewers. No studies will be excluded due to high RoB, but this will be considered in conclusions.

Strategy of data synthesis A qualitative data synthesis will categorize findings into three participant subsets: (1) individuals with JH, HSD, or EDS assessed for eating behaviors; (2) individuals with eating disorders assessed for hypermobility; and (3) non-clinical cohorts. Both primary outcomes (frequencies, percentages, and prevalence rates) and secondary outcomes—including measures of association (odds ratios, correlation parameters), symptom severity scores, and clinical management parameters—will be narratively and tabularly synthesized across these subgroups.

Subgroup analysis Where applicable, subgroup analysis by sex/gender will be conducted.

Sensitivity analysis Not applicable.

Language restriction No limits.

Country(ies) involved Carolina Baeza-Velasco, France (University Cite Paris); Karina Arias, Chile

Baeza-Velasco et al. INPLASY protocol 2026100119. doi:10.37766/inplasy2026.10.0119 Downloaded from https://inplasy.com/inplasy-2026-10-0119/

(Pontificia Universidad Católica de Chile); Sonia Lorente Spain (Autonomous University of Barcelona);.

Keywords Eating behaviors, Ehlers-Danlos syndrome, hyperactivity, joint hyperlaxity, Joint hypermobility.

Dissemination plans In the initial stage of our work, we will present our preliminary findings, conceptual frameworks, and methodologies at key national and international scientific conferences, as well as specialized thematic symposia. Following the complete synthesis and finalization of our research, we will proceed to the second phase of our dissemination strategy: publishing our definitive results in high-impact, peer-reviewed journals within our field.

Contributions of each author

Author 1 - Carolina Baeza-Velasco - Conception, Methodology, Formal Analysis, Draft and revised manuscript
Email: carolina.baeza-velasco@u-paris.fr
Author 2 - Karina Arias - Formal analysis, draft and revised manuscript
Email: knarias@uc.cl
Author 3 - Sonia Lorente - Methodology, Formal analysis, draft and revised manuscript
Email: sonia.lorente@uab.cat

Baeza-Velasco et al. INPLASY protocol 2026100119. doi:10.37766/inplasy2026.10.0119 Downloaded from https://inplasy.com/inplasy-2026-10-0119/