



**FRANKLIN  
CARDIOVASCULAR  
ASSOCIATES, PA**

# **It's Not "All in Your Head"—It's Lack of Blood Flow *to* Your Head**

If you have hEDS (Hypermobile Ehlers-Danlos Syndrome) or HSD (Hypermobility Spectrum Disorder), you are likely used to dealing with pain and loose joints. But for many patients, the symptoms that actually disrupt daily life the most—brain fog, anxiety, racing hearts, and stomach issues—seem completely unrelated to their joints.

The truth is, they are directly connected through your **P&S Nervous System** (Parasympathetic and Sympathetic systems).

When you have hEDS, your "hardware" (your heart, brain, and stomach organs) is usually perfectly healthy. The problem is the "software" (the nerves telling them what to do) is glitching. Here is how that glitch works.

## **The Two Main Glitches**

Most hEDS patients suffer from two specific types of nervous system dysfunction:

### **1. Sympathetic Withdrawal (The "Failure to Squeeze")**

Normally, when you stand up, your Sympathetic nerves (fight or flight) tell your blood vessels to squeeze tight to push blood up against gravity. In hEDS patients, these nerves often fail to react—we call this **Sympathetic Withdrawal**.

- **The Result:** Gravity wins. Blood pools in your legs.
- **The Consequence:** Your heart, brain, and arms don't get enough blood flow. This leads to profound fatigue, fainting, and cold hands.

### **2. Parasympathetic Excess (The "Over-Reaction")**

Your Parasympathetic system is supposed to be your "Rest and Digest" mode. However, in hEDS patients, this system often overreacts to stress.



## FRANKLIN CARDIOVASCULAR ASSOCIATES, PA

- **The Result:** Instead of calming you down, it amplifies pain signals and disrupts your digestion.
- **The Consequence:** This leads to GI issues (stomach paralysis or urgency), bladder issues, and a heightened sensitivity to pain.

## The "Great Masquerader": Why It Looks Like Anxiety or Heart Disease

Because of **Sympathetic Withdrawal**, your brain and heart are constantly starved of the blood flow they need to function optimally. This leads to symptoms that mimic other serious diseases, leading to misdiagnoses.

### The "Heart Attack" Mimic

When your heart isn't getting enough blood flow because it's pooling in your legs, it races and pounds to try to compensate.

- **Symptoms:** Chest pain, palpitations, shortness of breath.
- **The Reality:** Patients are often terrified they have heart disease, but the heart muscle is healthy. It's just working overtime because of the blood flow issue.

### The "Mental Health" Mimic

When the brain doesn't get enough blood flow (poor cerebral perfusion), it starts misfiring. This is perhaps the most validating discovery for many patients.

- **Symptoms:** Brain fog, inability to focus, mood swings, and panic.
- **The Misdiagnosis:** These symptoms often look exactly like **Anxiety, Depression, Bipolar Disorder, OCD, or ADD/ADHD.**



## FRANKLIN CARDIOVASCULAR ASSOCIATES, PA

- **The Reality:** While these conditions can coexist, often the "anxiety" or "attention deficit" is actually the brain panicking because it isn't getting enough oxygen and fuel. Even unexplained seizures can sometimes be traced back to this lack of blood flow.

## A Note on Safety: The Vascular EDS Distinction

While we focus heavily on the quality of life for hEDS patients, we must always keep an eye out for **Vascular EDS (vEDS)**.

As mentioned in previous posts, vEDS is the rare, life-threatening form. Unlike the "bendy" hEDS patients who faint and hurt, vEDS patients are defined by tissue fragility.

- **The Clue:** If a patient (especially under 40) has a history of organ rupture (like intestines), aneurysm, or severe bleeding that goes beyond simple bruising, we must suspect vEDS.
- **The Distinction:** hEDS is about *pain and dizziness*. vEDS is about *tissue fragility and bleeding*.

## The Path Forward

The most important takeaway is this: **Your organs are likely healthy.**

The treatment for hEDS/HSD isn't about fixing a "broken" heart or a "broken" brain. It is about fixing the P&S nerve signals. Through proper testing, we can prove that your organs are fine, which is reassuring!

Once we know it's a "software" issue, we can create a personalized plan to help your nerves communicate better, keeping your blood where it belongs: in your head and heart.