

October 9, 2014

732 Harrison Avenue Preston Family Building, 2 Floor Boston, MA 02118-2393
617-638-7470 Fax: 617-638-7449Page 1
Chart Document**MARY PEELE**

Female DOB: 02/05/1980

3990198

Home: (919)332-0677
Ins: SELF PAY (STANDARD)**09/15/2014 - Transcription: (P) 09/15/2014****Provider: Michael F. Holick MD (696)****Location of Care: Center for Endocrinology, Diabetes, Nutrition & Weight Management**

09/15/2014

RE: PEELE, MARY BMC MRN: 3990198
DOB: 02/05/1980 DATE OF VISIT:

Thank you for the opportunity to see Mary Peele in clinic for evaluation of her possible history for Ehlers-Danlos/hypermobility syndrome. This delightful 34-year-old biracial female has a history of gastroparesis, orthostatic hypotension, hyperflexibility with subluxation of multiple joints and fractures with minimum trauma, especially of her ankle and doughy-textured skin. She has aches and pains in her neck, thorax and lower back. She has poor dentition. She is a G9, P1, M8. At the age of 4 months, after her infant son woke up from a nap, she felt that her son's ribs were unstable and brought the infant in for evaluation. He was found to have rib fractures. A skeletal survey revealed multiple fractures and the parents were arrested for child abuse and the child taken away and put into foster care. At this time or at approximately this time, the child's 25-hydroxy vitamin D was 19 ng/mL on 07/22. On physical exam, she has exquisite sternal tenderness, anterior tibial tenderness with minimal palpation. Her thyroid is approximately 10 g without nodules, nontender to palpation. She has doughy-textured skin with increased elasticity. She has a Beighton score of 9 with hyperextension of both her elbows, knees and first digit along with being able to touch the floor with the palms of her hands. She also has easy bruisability. She has strong family history of deafness and fragility fractures in the family. She recalls at 6 weeks of age she brought her son in for an evaluation because he was not using his left arm and she was told that it was a benign nurse maid elbow. I agree with Dr. Upadhyay's HPI, ROS, PMH, SH, FH, PE, assessment and plan. We spent 20 of 60-minute visit reviewing ways of helping to reduce risks for fragility fractures. There is, in my opinion, no question that she suffers from Ehlers-Danlos/hypermobility syndrome. She states that her infant was found to be very loose, i.e. joints being extremely flexible. It is likely that the infant also has Ehlers-Danlos/hypermobility syndrome and being vitamin D deficient at 4 months of age and being totally breast-fed and had undetected infantile rickets, likely means that he was vitamin D deficient at the time of birth. The combination of infantile rickets and Ehlers-Danlos/hypermobility syndrome can markedly increase bone fragility to the point that it is likely he was fracturing his rib cage during the birthing process and that some of the fractures that were observed would likely be due to the handling of the infant immediately after birth. I would be happy to see the infant for further evaluation.

Sincerely yours

Electronically Signed by Michael F. Holick MD (696) on 10/09/2014 at 8:00 AM

Center for Endocrinology, Diabetes, Nutrition & Weight Management

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