

PS1.168

Clinical spectrum of musculoskeletal manifestations of diabetes mellitus

Ana Marques(1), I Brito(2)

(1) *Department of General Medicine and Family Medicine, UCSP São Mamede, Matosinhos, Portugal*

(2) *Department of Rheumatology, Hospital de São João, Porto, Portugal*

Corresponding author: Dr Ana Marques, ULS Matosinhos, UCSP São Mamede, Porto, Portugal. E-mail: dr.ana.marques@gmail.com

Background/Aim: Diabetes Mellitus is associated with several musculoskeletal disorders, whose development is dependent on the duration and metabolic control of Diabetes. These should be recognized and treated as soon as possible. In the majority of cases, these manifestations are associated with physical incapacity and pain, and an early diagnosis is important to improve the patient's quality of life. The present review addresses both the common and uncommon manifestations of Diabetes, focusing on their clinical presentations, diagnosis, management and treatment.

Methods: A research, in Pubmed, National Guideline Clearinghouse, Canadian Medical Association Infobase, The Cochrane Library, DARE, Bandolier e TRIP, of guidelines, meta-analyses, systematic reviews and randomized trials, published in the last ten years, in Portuguese, English and Spanish, was done, using the following MESH terms: diabetes mellitus, musculoskeletal diseases and prevalence. We used the Strength of Recommendation Taxonomy (SORT) scale of American Family Physician to assign levels of evidence and strength of recommendations.

Results: The musculoskeletal disorders can be divided into three categories: conditions unique to Diabetes - diabetic muscular infarction; conditions more frequent in Diabetes, such as limited joint mobility, diabetic hand syndrome/ diabetic cheiroarthropathy, adhesive capsulitis, trigger finger, Dupuytren's contracture, peri-arthritis; and at last, conditions sharing risk factors of Diabetes, such as Diffuse Idiopathic Skeletal Hyperostosis, gout and osteoarthritis.

Conclusions: There is a relation between musculoskeletal disorders and Diabetes Mellitus. Hand and shoulder disorders occur more frequently than other musculoskeletal manifestations of diabetes. Recognition of the association between diabetes and shoulder adhesive capsulitis, Dupuytren's contracture and stenosing flexor tenosynovitis facilitates their correct diagnosis in the setting of diabetes and prompt initiation of appropriate treatment, which may include optimizing glycemic control. However, more studies are necessary to clarify the physiopathology and the correlation with the progression of the disease.