

BÖLÜM 18

DİABETTES MELLİTUS VE KAS-İSKELET SİSTEMİ SORUNLARI



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GİRİŞ

Diabetes mellitus (DM) ile ilişkili kas-iskelet sorunları, eklem hareket kısıtlılığı, fleksör tenosinovit, dupuytren kontraktürü, diyabetik sklerodaktili, adeziv kapsülit gibi eklem problemleri ve karpal tünel sendromu (KTS) ve nöropatik artropati gibi nörolojik tutulumla seyreden pek çok durumu içermektedir. Hayat kalitesini etkilemesi ve tedavi edilebilir olması nedeniyle bu kas iskelet sistemi sorunlarını tanımlamak önemlidir (1).

EPİDEMİYOLOJİ

DM hastalarında kas iskelet sistemi rahatsızlıklarının prevalansı bu problemlerin tanı konulmasına ve DM ile ilgili klinik çalışma popülasyonlarına bağlı olarak değişmektedir. Buna örnek olarak Tayvan'da yapılan popülasyon temelli bir çalışmada karpal tünel sendromu (KTS) sıklığı kadınlarda %1,05 bulunurken, DM olan hastalarda bu oran 3 katı daha fazla olarak tespit edilmiştir (2). Öte yandan 96 DM hastasının katıldığı bir başka çalışmada KTS prevalansı %20 olarak rapor edilmiştir (3). 200 Tip 1 ve Tip 2 DM hastası ve 100 sağlıklı kontrolün katıldığı bir çalışmada el veya omuz sorunları DM olan hastalarda %36 olarak, kontrol grubunda ise %9 olarak tespit edilmiştir (4). Başka bir çalışmada ise ortalama 49 yıllık Tip 1 DM hastalık süresi olan hastalarda hayat boyu prevalansı KTS için %37 ve adeziv kapsülit için %76 olarak tespit edilmiştir (5).

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