Orthopaedic Connection

Diabetes and Joints – What?

By Thomas J. Haverbush, M.D.
Orthopaedic Surgeon

Transforming patient information into patient understanding.

It is generally acknowledged that the incidence of Diabetes Mellitus (the official name) is on the rise. There are many ideas about why this is so, but that’s not why I wanted to write the article.

I do see a large number of diabetic patients in my Orthopaedic Surgery practice and at the Wound Treatment Center – Gratiot where I am Medical Director.

Diabetes can affect nearly every part of the body as most people are aware.

- Heart and arterial circulation
- Eyes
- Peripheral nerves (neuropathy)
- Kidneys
- Skin wounds especially the feet
- Carpal tunnel syndrome

Joint Inquiry

If the things I have mentioned above weren’t enough, diabetic patients are known to have a much higher tendency to have arthritis than non diabetic patients. So far research has not been able to pinpoint why diabetics have such a high incidence of arthritis. Some possible explanations are –

- Excessive weight
- Substances produced by fat cells may change the joint surface
- Impaired blood flow
- Elevated blood sugar may effect joints adversely as it does in wounds that don’t heal
- Diabetic neuropathy causes joints to deteriorate

Treatment Complications

Many things I do to treat arthritis complicates diabetic management. Oral and injectable corticosteroid medications cause an increase in blood sugar. Even though this is temporary it does complicate diabetes management.

The NSAIDs which are so commonly prescribed for arthritis can cause damage to the kidneys which are already damaged by the diabetes.

Patients are Less Active

Most of my diabetic patients are less active than average for the following reasons.

- Cardiovascular disease
- Diabetic neuropathy
- Excessive weight

So the typical diabetic patient becomes increasingly inactive.

What To Do
As I see it this is your only hope. Physical activity absolutely must increase. Each case has unique problems so I don’t just say “do more” which doesn’t help at all.

Exercise takes various forms. Obviously walking is the most basic. Most people need to be pointed in the right direction by a physical therapist. 30 minutes of some exercise 5 days a week is the goal.

Weight loss is also a critical element. It helps the diabetes and arthritis as well. I realize how hard this is for most of my patients, but there is no getting around it.

Blood Sugar must be kept below 200.

Low Fat diet.

Calcium and Vitamin D as prescribed by your doctor.

Do your joints a favor. With professional help, if you make the commitment, I have seen this program help countless patients. Proper exercise is medicine as are the other factors. Do it for yourself and those that care about you.

Gratiot County Herald Archive and Office Website

Thank you loyal readers for joining us each week. Do yourself a favor and log onto www.orthopodsurgeon.com.

It contains a world of musculoskeletal information you and your family and friends can use! Website, Your Orthopaedic Connection, Archive of all previous GCH articles. Please check it out. Be well.

Dr. Haverbush