

XIXI- SUMMARY

## SUMMARY

Diabetes mellitus is an important metabolic disease which is present all over the world. Its incidence is about from 4% to 6% of the population. Cutaneous manifestation are one of the most important complication of diabetes mellitus. Its incidence is about 30% in all diabetics. Angiopathy (Macroangiopathy and Microangiopathy) is the main cause of the pathogenesis of the cutaneous manifestation, which is affected by the increased incidence of glucose percentage in the skin of diabetics. Authors put definition and description of the disease and the expected aetiological factors and role of pancrease and excretion of insulin and their functions and control. Also a description of classifications of the disease, presentation of the patient, signs and symptoms, how to diagnose a cause of diabetes, complications of the disease which include, neuropathy, retinopathy, nephropathy, dermopathy, arterial disease which affect heart and blood vessels and finally the methods of the treatment and types of therapy and side effect and complication of the treatment which affect the skin of the diabetic persons are given.

The following are the main cutaneous manifestations affecting the diabetic skin which include; pruritus, sweating disorders, cutaneous markers of diabetes mellitus as necrobiosis lipoidica diabetorum, granuloma annulare, diabetic dermopathy, diabetic bullae, and rubeosis.

Diabetes mellitus can affect the foot of the diabetics in the form of vasculitis, infection (bacterial-fungal), fissures, ulcers, and finally gangrene of the foot, also nails may be involved in these cases. Increase of glucose in the skin with defect of host defence of the body of the diabetics make the skin of the patients more liable

for infection. The patient is liable for many types of infection in the form of bacterial infection (cellulitis, cutaneous abscesses, furunculosis, carbuncles, impetigo, pilonidal sinus, hidradenitis suppurativa, phycomycotic leg ulcers and phycomycotic gangrenous cellulitis), candidal infections (vaginitis, candidal vulvitis, intertrigo, candidal balanitis, stomatitis, angular cheilitis, pruritus vulvae, pruritus ani, carbuncles caused by candida albicans), dermatophytosis infection (tinea versicolor, tinea pedis, tinea corporis, tinea capitis) and some other infections in the form of erythrasma, rhinocerebral mucormucosis, malignant external otitis, non clostridial gas gangrene, necrotizing fasciitis, finger sepsis, hand infection, Fournier's gangrene, and infection associated with chronic continuous subcutaneous insulin infusion.

Diabetes mellitus is a metabolic syndrome which affects the metabolism leading to some metabolic diseases as haemochromatosis, porphyria (porphyria cutinea tarda), caroteinoderma (xanthochromia), eruptive xanthoma, and xanthelasma palpebrarum.

Diabetes mellitus can be associated with glucoganoma. Some collagen disorders can occur due to diabetes mellitus as scleredema (scleredema diabeticorum and scleredema adutorum of Buschke). Diabetes also causes the syndrome of limited joint mobility and waxy skin.

There are many remote dermatoses that occur in diabetes mellitus and coexisting with the disease as vitiligo, Kaposi's sarcoma, perforating dermatoses (Kyrle's disease, perforating folliculitis, and reactive perforating collagenosis), lichen planus, skin tags, yellow nails, intracutaneous herniation of fat, psoriasis, ear lobe crease, oral manifestations of diabetes, dermatitis herpetiformis, systemic lupus erythematosus, Beau's lines, lipid proteinosis, herpes zoster, diabetic edema, Norwegian scabies, onychodermal bands, pustulosis

palmaris et plantaris, dermatofibroma, pentazocine complications, cherry angiomas, some syndromes as (Buschke Ollendroff syndrome, Woodhouse-Sakati syndrome and Achard Thiers syndrome).

Diabetes mellitus can be treated by insulin and oral hypoglycemic agents which may cause cutaneous complications in the form of photosensitivity and allergy which may be acute or delayed or biphasic and many other manifestations occur due to diabetic treatment as acanthosis nigricans. The diabetic lipodystrophies are one of the important features due to insulin treatment which occur at the site of the injection of insulin.

Lipodystrophies may be acquired (partial) or congenital (total) type. The lipodystrophy can occur in the form of lipohypertrophy or lipoatrophy.

To all mentioned skin manifestations of diabetes mellitus, the dermatologists, diabetologists, and surgeons must give an attention to the cutaneous complication of diabetes mellitus.