

## I- INTRODUCTION

## CHAPTER I

### INTRODUCTION

Diabetes Mellitus is a disease characterized by chronic hyperglycemia and other disturbances of carbohydrate and lipid metabolism, often associated with the development of specific microvascular complications of the eyes and kidneys, neuropathy, and an increased frequency of macrovascular disease such as peripheral vascular and coronary heart disease (Albi and Rifkin, 1986).

Diabetes mellitus is common and affects every organ system in the body. It is hardly surprising therefore that the skin, the body's largest organ, has manifestations related to this disease. The clinical cutaneous signs are numerous and varied. Some are caused by the abnormal carbohydrate metabolism, whereas others are a consequence of one or more of the three major diabetic complications of microangiopathy, macroangiopathy, and neuropathy. Other cutaneous signs are linked to an impaired ability to handle infection, altered collagen, insulin resistance, a pancreatic neoplasm and complications of diabetic treatment. Some skin conditions appear with greater than expected frequency in diabetics. Whereas others are found so often in association with diabetes that they are considered to be markers of the disease. Many of the cutaneous features linked to diabetes still have not been explained entirely and are labelled as idiopathic, because the cause of diabetes itself is incompletely understood (Jelinek, 1986). Diabetics have a significantly shorter life span than non diabetics. No organ system appears to be immune from the effects of this disease (Huntley, 1986). At least 30% of diabetics have some type of cutaneous involvement during the course of their chronic illness (Allen, 1969).

## **II- DIABETES MELLITUS:**

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**Management of Diabetes Mellitus.**