

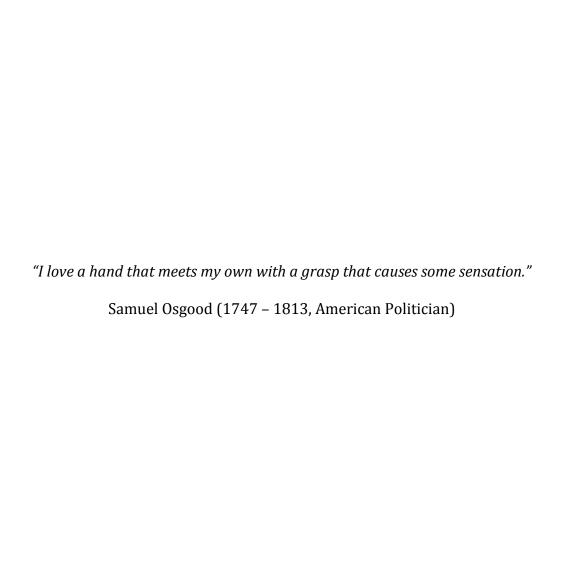
# Hand Conditions Associated with Diabetes:

an observational study characterising hand function

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Discipline of Medicine

Submitted in total fulfilment of the requirements of the degree of Doctor of Philosophy



### **ABSTRACT**

In Chapter 1 of this thesis, I review the literature relating to the hand syndromes associated with diabetes. I describe their unique clinical features and current treatment options. I consider how these hand syndromes may contribute to physical disability in diabetes and formulate questions relating to the degree and the course of this disability.

In Chapter 2, I describe and discuss the rationale for selecting the methods used to measure hand function. The methods used to measure disability and quality of life from the individual's perspective and evaluate motor and sensory impairments of the hand are explained. Other data that was collected, such as body weight, height and information on diabetes duration and control, are discussed. The sample size required to detect a change in hand function is calculated and the clinics from which study participants were recruited are outlined.

In Chapter 3, I describe the characteristics of the sample of adults with diabetes and the associated hand syndromes at their first assessment. My analysis of the factors that predicted hand disability at the initial presentation in this heterogeneous group is presented.

In Chapters 4, I describe the change in hand function measured over the second and third assessments and determine the factors that were associated with this change. My analysis is extended to examine differences between the dominant and non-dominant hands and between men and women.

In Chapter 5, I consider the precision of measures of hand function and discuss how this affected the data obtained. Minimal detectable changes are analysed and recommendations regarding hand assessments are made.

In Chapter 6, I summarize the evidence that carpal tunnel syndrome and trigger finger contributed to hand disability in adults with diabetes. In addition to specific treatment strategies for these disorders strategies to address broader health issues are recommended. A greater emphasis should be given to strengthening the upper limb and implementing strategies to address physical inactivity and obesity in adults with diabetes.

#### **ACKNOWLEDGEMENTS**

I would like to acknowledge and thank my supervisors, Julian McNeil, Gregory Bain and Laura Laslett. I have benefitted from their insightful advice, enthusiasm and humour. I wish to thank Julian and Greg for the mentoring and clinical perspectives that they shared. I hope that in the future I will be able to draw on their example to inspire my own students. I thank Laura for her friendship and advice regarding the processes involved in setting up and conducting clinical studies, managing databases and analytical techniques. I am also thankful that Laura and I pursued further coursework study and extended our knowledge of epidemiological methods.

To my husband, Christopher, and children, John, Natalie and George, thank you for your love and for the constant support you provided. I am grateful for the balance that having a family has given to my life and for providing different perspectives on issues. I appreciated Natalie's technological skills in editing and drawing images for different presentations. I especially appreciated the support of my sister, Lynette, who provided me with a benchmark of excellence. I thank my parents, Fay and Robert, who taught me persistence and to have an enquiring mind. My father once said, "If it was easy, it wouldn't be worth doing", when discussing PhD candidature.

I drew on my prior experience as a physiotherapist and I have been fortunate to have had many skilled and dedicated physiotherapists as colleagues over the years. This network has expanded during my PhD and includes colleagues from different disciplines. I value their friendship and support.

Thank you also to the Modbury Hospital Foundation for supporting my scholarship and allowing me to pursue my research goals.

**DECLARATION** 

This work contains no material which has been accepted for the award of any

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\* Hand syndromes associated with diabetes: impairments and obesity

predict disability.

Redmond CL, Bain GI, Laslett LL, McNeil JD

Journal of Rheumatology 2009 Dec;36(12):2766-71. Epub 2009 Nov 2.

Signed:....

Christine Redmond

V

## **ACHIEVEMENTS**

Work published during the period of this research.

2009	Hand syndromes associated with diabetes: impairments and obesity predict disability.
	Redmond CL, Bain GI, Laslett LL, McNeil JD
	Journal of Rheumatology 2009 Dec;36(12):2766-71. Epub 2009 Nov 2.
2008	Predictors of shoulder pain and shoulder disability after one year in diabetic outpatients
	LL Laslett; SP Burnet; CL Redmond; JD McNeil
	Rheumatology (Oxford). 2008 Oct;47(10):1583-6. Epub 2008 Aug 18.2007
2007	Musculoskeletal morbidity: the growing burden of shoulder pain and disability and poor quality of life in diabetic outpatients.
	Laslett LL, Burnet SP, Jones JA, Redmond CL, McNeil JD
	Clinical and Experimental Rheumatology 2007;25(3):422-9.

# Prizes awarded for presentation of this research.

2009	<b>Oral presentation prize</b> for the clinical programme: Rheumatology Association (SA Chapter) Meeting, Adelaide
2008	<b>Dodridge prize</b> for oral presentation: South Australian Hand Surgery Society Meeting, Adelaide
2007	<b>"MPA 5x5" oral presentation prize:</b> Australian Physiotherapy Association National Conference, Cairns

### LIST OF ABBREVIATIONS

AGE Advanced Glycosylation Endpoint

BMI Body Mass Index

CI Confidence Interval

CID Clinically Important Difference

CTS Carpal Tunnel Syndrome

DASH Disabilities of the Arm, Shoulder and Hand

DD Dupuytren's Disease

DM Diabetes Mellitus

ES Effect Size

HbA1c Glycosylated haemoglobin

GH General Health: general health perceptions

ICC Intraclass Correlation Coefficient

IQR Inter-Quartile Range

LJM Limited Joint Mobility

MCS SF-36: Mental Component Summary

MDC Minimal Detectable Change

MH Mental Health - psychological distress and wellbeing

PCS SF-36: Physical Component Summary

PF Physical Function: limitations in physical health because of health problems

RE Role Emotional: limitations in usual role activities because of emotional problems

RP Role Physical: limitations in usual role activities because of physical health problems

SD Standard Deviation

SF Social Functioning: limitations in social activities from physical or emotional

SF-36v2 Short Form 36-item health survey (version 2)

SRM Standardized Response Mean

TF Trigger Finger

VT Vitality: energy and fatigue

WEST Weinstein Enhanced Sensory Test

## **TABLE OF CONTENTS**

ABSTRA	CT	iii
ACKNOW	/LEDGEMENTS	iv
DECLAR	ATION	ν
ACHIEVE	MENTS	vi
LIST OF A	ABBREVIATIONS	vii
TABLE O	F CONTENTS	viii
LIST OF I	FIGURES	xii
LIST OF	TABLES	xiii
Chapter	1. LITERATURE REVIEW	1
1.1	Introduction	1
1.2	Physical limitations and disability in diabetes	2
1.3	Muscle weakness in diabetes	3
1.4	Limited joint mobility	4
1.4.1	Prevalence	7
1.4.2	Associated features	7
1.4.3	Proposed aetiological mechanisms	7
1.4.4	Treatment	9
1.5	Carpal tunnel syndrome	10
1.5.1	Proposed aetiological mechanisms	
1.5.2	Contributing factors in diabetes	
1.5.3	Nerve conduction studies	
1.5.4	Treatment options	
1.6	Trigger finger	
1.6.1	Proposed aetiological mechanisms	
1.6.2	Treatment options	
1.7	Atypical Dupuytren's disease	
1.7.1	Associated features	
1.7.2	Treatment options	
1.8	Summary	
1.9	Rationale for the study	
1.10	Aims	
1.11	Hypotheses	
Chapter	2. MEASURING HAND FUNCTION	
2.1	Introduction	
2.2	Rationale	21
2.3	Selected instruments	21
2.4	Disabilities of the Arm, Shoulder and Hand (DASH) questionnaire	22
2.4.1	Description	22
2.4.2	Reliability, validity and sensitivity to change	22

2.5	Short-Form 36-item Health Survey, version 2 (SF-36v2)	23
2.5.1	Description	23
2.5.2	Reliability, validity and sensitivity to change	24
2.6	Grip strength	25
2.6.1	Description	25
2.6.2	Reliability, validity and sensitivity to change	25
2.6.3	Influences on grip strength	26
2.6.4	Calibration study of Eval® dynamometer	26
2.6.5	Relationships with physical functioning	29
2.6.6	Protocol	29
2.7	Sensory perception	29
2.7.1	Description	29
2.7.2	Reliability, validity and sensitivity to change	31
2.7.3	Influences on light touch perception	32
2.7.4	Relationships with physical functioning	
2.7.5	Protocol	33
2.8	Nine-hole peg test of dexterity	35
2.8.1	Description	35
2.8.2	Reliability, validity and sensitivity to change	35
2.8.3	Relationships with physical functioning	
2.8.4	Protocol	36
2.9	Measuring obesity and history of diabetes	37
2.10	Subject selection and exclusion criteria	37
2.11	Sample size calculation	38
2.12	Ethics approval	39
2.13	Summary	39
Chapter 3	3. FACTORS ASSOCIATED WITH POORER HAND FUNCTION	
3.1	Introduction	
3.2	Materials and methods	
3.2.1	Participants	
3.2.2	Clinical characteristics	
3.2.3	Self-report instruments	
3.2.4	Tests of hand function	
3.2.5	Data analysis	
3.3	Results	
3.3.1	Clinical characteristics	
3.3.2	Self-report instruments	
3.3.3	Tests of hand function	
3.3.4	Factors associated with hand disability	
3.4	Discussion	
3.4.1	Gender	
3.4.2	Obesity	

3.4.3	Strength	49
3.4.4	Sensation	50
3.4.5	Limitations of this study	50
3.4.6	Significance of this work	51
3.5	Summary	52
Chapter 4	l. DETECTING DETERIORATING HAND FUNCTION	53
4.1	Introduction	53
4.2	Methods	53
4.3	Statistical analysis	54
4.4	Results	55
4.4.1	Rates of follow-up	55
4.4.2	Disability of the Arm, Shoulder and Hand (DASH) questionnaire	56
4.4.3	Grip strength	57
4.4.4	Dexterity	58
4.4.5	Hand sensation	59
4.4.6	Health-related quality of life	61
4.5	The dominant hand and gender	63
4.5.1	Grip strength	63
4.5.2	Dexterity	64
4.5.3	Sensation	65
4.6	Sensory change analysis: trigger finger	68
4.7	Sensory change analysis: Hand surgery in the first year	68
4.8	Sensory change analysis: peripheral nerve supply	71
4.9	Body weight	73
4.10	Assessment of characteristics of those lost to follow-up	74
4.11	Discussion	
	Activities of daily living	
4.11.2	Sensation	
4.11.3	Trigger finger	
4.11.4		
4.11.5	Dexterity	78
4.11.6	Limitations of this study	78
4.11.7	Significance of this work	79
4.12	Summary	79
Chapter 5	5. ERROR AND BIAS IN OBSERVATIONS OF HAND FUNCTION	81
5.1	Introduction	81
5.2	Rationale of study	82
5.3	Methods	82
5.4	Statistical analysis	82
5.5	Results	
5.6	Discussion	

5.6.1	Minimum detectable change	85
5.6.2	Disabilities of the Arm, Shoulder and Hand questionnaire	86
5.6.3	Grip strength	88
5.6.4	Dexterity	88
5.6.5	Tactile sensation	90
5.6.6	Recruitment	91
5.7	Summary	93
Chapter	6. CONCLUSIONS	94
6.1	Introduction	94
6.2	Conclusions from this research	95
6.3	Recommendations for assessment	96
6.3.1	Screening for hand disorders	96
6.3.2	Monitoring impairments	96
6.3.3	Using standardised questionnaires	96
6.3.4	Measuring different aspects of hand function	97
6.3.5	Measuring obesity	98
6.4	Implications for measuring hand function	98
6.4.1	Measuring grip strength	98
6.4.2	Measuring sensory perception	98
6.4.3	Measuring dexterity	98
6.5	Implications for further research and practice	99
6.5.1	Hand strength and fine motor skills	99
6.5.2	Physical health and obesity	100
6.5.3	Conservative management of hand disorders in diabetes	100
6.5.4	Rehabilitation for surgical release of trigger finger	101
6.6	Significance of this research	101
APPEND	IX A Publications	103
APPEND	IX B Presentations	104
APPEND	IX C DASH questionnaire	106
APPEND!	IX D SF-36v2 questionnaire	107
	IX E Consent form and information sheet	
RIRI IOG		109

## **LIST OF FIGURES**

Figure 1.1 Positive prayer sign	6
Figure 1.2 Restricted finger flexion can be associated with severe limited joint mobility	<sub>7</sub> 6
Figure 1.3 Proposed mechanisms underlying the connective tissue changes in the syndrome of limited joint mobility	9
Figure 1.4 Prominent Dupuytren's cord in line with the right middle finger	16
Figure 1.5 Dupuytren's nodule in line with the right ring finger	17
Figure 2.1 Grip strength was assessed with the Eval® electrodynamometer using the second handle position	25
Figure 2.2 Light touch perception was assessed with WEST monofilaments at specific sites on the hand	30
Figure 2.3 Consecutive WEST monofilaments apply forces with disparate intervals	32
Figure 2.4 Sensory test sites in relation to the peripheral nerve supply	34
Figure 2.5 The 9-hole peg test measures the time to complete the accurate placement a removal of small pegs from a pegboard	
Figure 3.1 DASH scores of males and females for each hand disorder	45
Figure 4.1 Loss to follow-up at each assessment	55
Figure 4.2 DASH scores compared with unadjusted and age-adjusted norms at each assessment	56
Figure 4.3 Grip strength for each hand compared with norms at each assessment	57
Figure 4.4 Nine-hole peg test times for each hand compared with normative times	58
Figure 4.5 Tactile sensation scores from the dominant hand at each assessment	60
Figure 4.6 SF-36v2 scales and summary scores at each assessment	61
Figure 4.7 Grip strength for each hand of men and women	63
Figure 4.8 Nine-hole peg test times for each hand of men and women	64
Figure 4.9 Tactile sensation scores calculated for both hands	65
Figure 4.10 Sensory scores from examining the dominant hand, in men and women	66
Figure 4.11 Sensory scores from examining the non-dominant hand, in men and wome	
Figure 4.12 Sensory scores from examining the dominant hand, by trigger finger	68
Figure 4.13 Sensory scores from examining the dominant hand, by carpal tunnel releas during the first year	
Figure 4.14 Sensory scores from examining the dominant hand, by trigger finger release during the first year	
Figure 4.15 Proportions of monofilament thresholds felt at each dominant hand site	71
Figure 4.16 Monofilament values for the little finger tip	72
Figure 4.17 Body weight measurements of participants during a 2-year period	73
Figure 5.1 Lateral pinch grip being used to pick up a peg	90

## LIST OF TABLES

Table 1.1	Clinical examination signs for diagnosing the syndrome of limited joint mobility5
Table 1.2	Rates of symptoms recurring in those with and without diabetes treated for trigger finger
Table 1.3	Dupuytren's disease features in those with and without diabetes15 $$
Table 2.1	Percentage differences were calculated by comparing the total of the standardised weights to the Eval® dynamometer readout28
Table 2.2	The values, applied force and functional status for the WEST hand set of monofilaments
Table 2.3	Calculated sample sizes to detect a change of 10 DASH points with 80% and 90% power38
Table 3.1	Clinical features associated with diabetes and the diagnosed hand disorder in males, females and the total sample44
Table 3.2	Mean (SD) and p values of Short Form 36 scales reported at initial assessment for males and females46
Table 3.3	$Regression\ analysis\ of\ health\ status\ variables\ that\ predicted\ hand\ disability48$
Table 3.4	$Regression\ analysis\ of\ hand\ function\ variables\ that\ predicted\ hand\ disability\ .48$
Table 4.1	Characteristics at study entry comparing participants who completed all assessments to participants who were lost to follow-up at assessment 2 or $374$
Table 5.1	Mean differences and minimum detectable changes between the initial and two-year follow-up for dexterity, grip strength and DASH scores84
Table 5.2	Median scores, p-value and estimated minimum detectable change determined from sensory score (0-35) of the dominant hand