**Impact of Diabetes Mellites on Musculoskeletal system**

Musculoskeletal system (MSK) composed of Bones, joints and muscles; together with all structures that make it moves and facilitates this movement, like: tendons, ligaments and nerves.

Diabetes Mellites (DM) among the most important metabolic and systemic illnesses that adversely affect the whole components of musculoskeletal system with resultant chronic, disabling disorders (tenosynovitis “trigger finger “& adhesive capsulitis “frozen shoulder”) and catastrophic complications (diabetic foot infected gangrene with or without amputation).

Basically, DM is of many types: type 1, type 2, preclinical and gestational. Occasionally, for a surprise, DM comes silent and only diagnosed by these MSK disorders (trigger finger, frozen shoulder, carpal tunnel syndrome and acral paresthesia of the extremities).

In this review we will analyses the pattern of presentation and handling of these disorders as the alarming sign(s) for DM; like: trigger finger(s) or frozen shoulder. This focus will highlight the index of suspension among orthopedic surgeons, Rheumatologists and physiotherapists toward the early detection of these disorders in order to reduce pain, improve quality of life and minimize morbidity and mortality.