Objectives In this study we compared the clinical findings and some provocative tests (Tinel, Phalen, reverse phalen) with electrophysiological examination (ENMG) results.

Methods This study was carried out on 48 patients who had pain, numbness, tingling and weakness complaints in at least one hand. Provocative tests and ENMG investigation were applied for each patient whom suspected for carpal tunnel syndrome.

67 hands of 48 patients which represent positive sign for carpal tunnel syndrome were evaluated and compared with ENMG positivity. In order to evaluate validity of provocative tests, chi-square test was used. Positive-negative predictive values of provocative tests also investigated.

Results 20 patients had bilateral complaints, 28 patients had complaints only in one hand. When compared with ENMG results, reverse Phalen test was founded most spesific test (% 78.8). This was followed by Tinel test%72.3 and Phalen test% 70.2.

Conclusion We concluded that provocative tests for ENMG have increased sensitivity, for that reason can be applied in epidemiological studies for carpal tunnel syndrome. But to make an definite diagnosis of carpal tunnel syndrome electrophysiological examination should be applied.

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FRI0246 THE IMPACT SOCIAL, LABOUR AND PSYCHOLOGICAL OF THE CHRONIC LOW BACK PAIN

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Background

Objectives To determine the social and psychological impact that exercises the chronic lumbar pain on the affected population.

Methods We carry out a longitudinal study with patients that demand attendance for low back pain (LBP). The selected patients were interviewed to determine if the pain exercised influences on their work, familiar life, sports, their economy and their social life. To determine the psychological impact it was valued which was the most important concern for the patient, the originated pain, the lesion or disablement, taking an abnormal life, the progressive worsening, the deformity, the lost of work or he didn't have concern.

Results They were carried out a total of 485 interviews. They presented repercussion on their job 377 patient (77.7%), family repercussion 218 (44.9%), social repercussion 154 (31.8%), economic repercussion 107 (22.1%) and sport 309 (63.7%). Psychologically they had some type of concern 340 cases (70.3%) and they didn't have any concern 145 (29.7%), it was the pain what more worried to a total of 125 (25.8%), not being able to carry out a normal life at 92 (19%); the progressive worsening and the disability worried to 10% of cases each one of them, being the deformity and the work loss what less worried 0.6% and 4.5% respectively.

Conclusion

- The most important repercussion in the LBP is the labour one and the less important one is the economic repercussion.
- The DLC worries majority of patients.

- The most important concerns for the patients were the own pain and not being able to carry out a normal life: what less worried it was the work loss and the acquisition of a deformity.

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FRI0247 SHOULDER'S ADHESIVE CAPSULITIS. TREATMENT BY SUPRASCAPULAR NERVE BLOCK

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Background A new approach for the management of frozen shoulder associated with adhesive capsulitis is presented.

Objectives The choice of blockade of the suprascapular nerve is a new concept for the management of the frozen shoulder. This is based on the fact that the nerve contains a high proportion of sensitive fibres supplying the shoulder joint.

Methods 11 patients with adhesive capsulitis have been referred to us: women 9, men 2; mean age 55,5 years; mean duration of the disease 7,2 months.

All the patients had failed to prior treatment.

A suprascapular nerve block with anaesthetic solution and corticosteroid injection was performed by needle insertion through the suprascapular notch: behind the lateral end of the clavicle at its junction with the insertion of the trapezius muscle.

Results Evaluation of the efficacy was achieved by comparing subjective pain and passive range of movement before and after the first block and after the final one.

The block was repeated once weekly with a mean of 3 treatments.

Relief of the pain has been noted in 8 of 11 patients.

Conclusion This approach seems a new, non invasive and painless treatment of the adhesive capsulitis of the shoulder.

FRI0248 MYASTHENIA GRAVIS AFTER HEPATITIS B VACCINE. REPORT OF ONE CASE

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Background

Objectives

Methods Myasthenia gravis (MG) is a chronic, organ-specific auto-immune disease in which anti-Rach antibodies are considered responsible for muscle weakness. Among triggering or worsening factors, drugs were often involved. However, very little is known about the role of vaccine. Triggering MG by anti-hepatitis B vaccination was previously reported in 3 cases. We report here one new case. A 46-year old asthmatic woman without previous history of neuromuscular disorder presented in November 1995 with dyspnea, dysphonia, bilateral palpebral ptosis, difficulty of mastication and swallowing and, proximal weakness presenting at noon and with exercise, one month after second dose of plasma-derived recombinant hepatitis B vaccine (H-B-VAX II,

MSD). MG was suspected and this diagnosis was confirmed by positive prostigmine test and typical electromyographic findings. Antibodies to acetylcholine receptors were not detected. The patient underwent thymectomy in Mars 1996. Then, under oral anticholinesterase therapy and corticosteroids (60 mg of prednisone daily), her condition stabilised, but her clinical status worsened when the dose of prednisone was tapered under 20 mg daily. She finally improved after institution of ciclosporine (5 mg/Kg/daily) in association with steroid therapy.

Results

Conclusion

FRI0249 CORRELATION BETWEEN SERUM MUSCLE ENZYMES, MUSCLE WEAKNESS AND MUSCLE PATHOLOGY IN PATIENTS WITH POLYMYOSITIS

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Background Polymyositis (PM) is a chronic inflammatory myopathy of unclear aetiology. Clinical features of PM have been well described, but the study of the correlation between serum muscle enzymes, muscle weakness and muscle pathology is limited.

Objectives We reported the clinical correlation between serum muscle enzymes, muscle weakness and muscle pathology in Thai patients with PM.

Methods A retrospective chart review was carried out in patients with PM, age >16, who had muscle biopsy available for review, and seen during January 1986 – December 1999. The diagnosis of PM followed Bohan and Peter's criteria. The degree of muscle weakness was graded 0–5. The degree of muscle inflammation was scored 0–4 (0%, 1–10%, 11–25%, 26–50% and >50% of inflammatory cell infiltration, respectively), and the degree of muscle destruction was scored 0–4 (0%, 1–10%, 11–25%, 26–50% and >50% of muscle fibre destruction respectively). Serum muscle enzymes including CPK, LDH and AST, which determined within 7 days prior to muscle biopsy, were used for analysis.

Results Of 163 patients, 123 had muscle biopsy performed. Only 102 specimens were available for review, of which 2 that showed granulomatous myositis were excluded due to the possibility of tuberculous myositis. Therefore, 100 charts were included for analysis. There were 22 males and 78 females, with their mean $\pm$ SD age and duration of disease of 45.0 ± 13.9 years and 6.3 ± 13.4 months, respectively. The clinical diagnoses were idiopathic PM in 37 cases, idiopathic dermatomyositis in 13, myositis associated with malignancy in 5, and PM associated with connective tissue disease in 45 (SLE in 16 cases, scleroderma in 22, MCTD in 6, and PAN in 1). The mean $\pm$ SD scores of proximal muscle weakness, muscle inflammation and destruction were 3.2 ± 0.8 , 1.5 ± 1.6 and 2.2 ± 1.7 , respectively. Serum muscle enzymes including CPK, LDH and AST were elevated in 87%, 92% and 82%, respectively, with a mean $\pm$ SD level of $2,352 \pm 3,239$ U/L, 750 ± 420 U/L and 196 ± 193 U/L, respectively. Seventy-six percent had abnormal EMG findings that were compatible with myositis. There was a good correlation between the level of serum muscle enzymes and the degree of muscle inflammation and destruction ($p < 0.02$). The degree of weakness correlated well with the degree of muscle inflammation and destruction ($p < 0.05$ and < 0.01 ,

respectively). There was no significant correlation between ESR and serum muscle enzymes, muscle weakness or muscle pathology. Patients with idiopathic PM had more severe muscle pathology than patients with PM associated with connective tissue disease.

Conclusion Serum muscle enzymes showed a good correlation with muscle pathology. The degree of muscle weakness correlated well with the degree of muscle destruction. ESR had a limited value in patients with PM.

FRI0245 CLINICAL COURSE AND OUTCOME IN MIXED CONNECTIVE TISSUE DISEASE

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Background

Objectives To investigate the clinical course and outcome of patients diagnosed with mixed connective tissue disease (MCTD).

Methods Since 1981, forty-four patients with MCTD have been diagnosed and followed up until December 2000. We reevaluated all these patients by entering the demographic, clinical, laboratory, radiological and therapeutic disease characteristics in a database.

Results Thirty-nine patients had the typical feature of MCTD, 3 developed diffuse systemic sclerosis and 2 systemic lupus erythematosus. Thirty-six were female and 3 male. The mean age was 51.6 (11), the disease duration was 12.9 (5.2) (range 1–25 years) and the mean follow up was 6.6 (4.9) (range 1–19 years). Almost all patients (95%) presented symptoms and signs of Raynaud's phenomenon, arthritis and arthralgias evolving the small joints of the hands. Pulmonary dysfunction was observed in 44%, while pulmonary hypertension and renal involvement in 5% of patients. All patients had positive U1Sn-RNP antibodies and high titers of antinuclear antibodies. Only 10% of our patients also had Ro (SSA) antibodies.

Conclusion It seems that our patients presented the typical clinical and serological features of MCTD. The majority of our patients had favorable outcomes, with pulmonary dysfunction being the most frequent, while pulmonary hypertension and renal involvement was observed in only a few cases.

FRI0251 MUSCULOSKELETAL DISORDERS OF THE UPPER LIMB AND WORKRELATED FACTORS

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Background

Objectives To study the association between upper extremity physical requirements (UEPR) at workplace and soft tissue lesions.

Methods A retrospective analysis (from 1–01–95 to 31–12–99) was carried out comparing temporal disability due to lateral, medial epicondylitis (LE), (ME) and shoulder tendinitis (ST) in two factories with different UEPR: a shipyard of 305 workers (AS) with high UEPR and a nuclear components manufacturing plant of 405 workers (EN) with low/medium UEPR. The UEPR