ABSTRACT

Background: Hepatitis C Virus (HCV) infection is a worldwide burden whose seroprevalence is higher in developing countries with Cameroon being the third most affected country in Africa. HCV both a hepatotropic and lympho-tropic infection is responsible for a great number of hepatic and extra hepatic disorders some of which are rheumatic in nature. These rheumatologic manifestations though extensively studied in western countries; there is little or no data in sub-Saharan Africa.

Objective: The study was conducted with the aim to describe the musculo-skeletal manifestations associated to HCV infection in a hospital setting in Cameroon. Design: A cross-sectional study. Setting: Three hospitals in Cameroon: the Douala General Hospital, a tertiary referral hospital with a capacity of 320 beds in Douala, the largest city and economic capital of Cameroon; the University Teaching Hospital of the Faculty of Medicine and Biomedical Sciences of the university of Yaoundé 1, a 240 beds hospital in Yaoundé the political capital of Cameroon and the "Centre Médical de la Cathédrale", a private acceptable standard Gastroenterology clinic also found in Yaoundé. Patients and methods: From February to June 2009, we did a multicentric cross-sectional study of patients from the Gastroenterology, Rheumatology and Internal medicine outpatient clinics of three hospitals in Cameroon. Patients with HIV or HBV infection and those on antiviral treatment were excluded. Results: Among 148 patients with HCV infection identified during the study period, only 62 fulfilled eligibility, 15 (24.2%) of whom had musculoskeletal manifestations related to HCV, the commonest of which were myalgia 9/62 (14.5%), arthritis 6/62 (9.7%), bone pain 6.4% (4/62), sicca syndrome 3/62 (4.8%), and Raynaud's phenomenon 6/62 (9.7%). Among patients with rheumatologic manifestations, 9/15 (60%), had rheumatologic symptoms at HCV diagnosis and in 6/15 (40%). HCV infection was discovered during routine medical check-up. Musculoskeletal manifestations were neither associated with the genotype (p=0.17) nor with the viral load (p>0.98). Conclusion: Arthralgia is the most common presenting feature of the symptomatic disease. Musculoskeletal manifestations may be confused with symptoms of common tropical infections, leading to delayed diagnosis and treatment of HCV infection.