



BASIC INFORMATION

DESCRIPTION

Recurrent attacks of joint inflammation caused by deposits of uric acid crystals in the joints, especially the base of the big toe. Gout may also involve the elbow, knee, hand, foot, ankle, arm or shoulder. It affects adults of both sexes but is 20 times more frequent in men than women.

FREQUENT SIGNS AND SYMPTOMS

- Sudden onset of severe pain in the inflamed joint, usually at the base of the big toe or larger joints.
- Involved joints are red, hot, swollen, and very tender. Skin over the joint is red and shiny.
- Fever (sometimes).

CAUSES

A high level of uric acid in the blood due to increased production of uric acid or decreased elimination of uric acid by the kidneys.

RISK INCREASES WITH

- Use of diuretic drugs (water pills) such as furosemide and hydrochlorothiazide.
- Use of some antibiotics.
- Some blood diseases, such as polycythemia and leukemia.
- Men over 60.
- Family history of gout.
- Obesity.
- Many disorders including thyroid problems, kidney disease, anemia, hyperlipidemia, high blood pressure, diabetes, and vascular disease.
- Trauma, surgery, radiation treatment.
- Eating large amounts of anchovies, sardines, sweetbreads, kidney or liver.
- Chemotherapy may raise uric acid levels.

PREVENTIVE MEASURES

Avoidance of risk factors where possible.

EXPECTED OUTCOMES

The first attack may last a few days, but recurrent attacks are common without treatment to reduce the uric acid level in the blood. Symptoms can be eliminated with treatment.

POSSIBLE COMPLICATIONS

If untreated, may cause:

- Crippled, deformed joints.
- Kidney stones.
- Inflammation of bones, ligaments and tendons.



TREATMENT

GENERAL MEASURES

- Laboratory studies such as blood levels of uric acid and studies of the fluid in the joint; X-ray (usually normal in the first year of the disease); bone scan (sometimes).
- Goals of treatment are to control the symptoms and discover the underlying cause.
- Use warm or cold compresses on painful joints.
- Keep the weight of bedclothes off any painful joint by making a frame that raises sheets off the feet.

MEDICATIONS

- Nonsteroidal anti-inflammatory drugs to control inflammation in the painful joints.
- Prescription medications such as colchicine, indomethacin or prednisolone may be used to control the pain of the acute attack.
- For some patients, lifelong medication, such as allopurinol to decrease uric acid production or probenecid to increase the kidneys' excretion of uric acid. These medications have significant side effects and adverse reactions. Obtain as much information as possible regarding their use.

ACTIVITY

Acute attacks will end sooner with complete rest.

DIET

- Don't eat liver, sweetbreads, kidney, anchovies or sardines.
- Drink 10 to 12 glasses of water daily. Large amounts of fluid keep the urine diluted (helps prevent kidney stones).
- Don't drink alcoholic beverages, especially beer or red wine (they can worsen or trigger an attack).
- If you are overweight, begin a medically approved weight loss diet. Do not go on a crash diet, as quick weight loss may bring on a gout attack.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of gout.
- The following occur during treatment:
 - Fever of 101° F (38.3° C) or higher.
 - Skin rash, sore throat, red tongue or bleeding gums.
 - Marked swelling of feet or abrupt weight increase.
 - Diarrhea or vomiting.
- Symptoms are not relieved in 3 days despite treatment.
- New, unexplained symptoms develop that may indicate an adverse reaction of the drug or interactions between drugs.