

# Gout

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Gout is a common, recurrent condition of joint inflammation in which crystals of uric acid are deposited within joints. It is due to a uric acid overproduction or uric acid under excretion by the kidneys resulting in higher uric acid blood levels. More commonly seen in men than women, it most often appears in the big toe joint but can involve any of the joints of the limbs. If gout is left untreated, the joints involved may be damaged and surrounding tissues also may become inflamed. Kidney stones are also a possibility. Five to ten percent of the population normally have a high blood level of uric acid, called hyperuricemia, but they do not have symptoms and are therefore not considered to have gout.

Medications may cause gout, such as diuretics (hydrochlorothiazide and furosemide), and some antibiotics. Gout is more likely to appear with disorders like leukemia, polycythemia, thyroid disease, kidney disease, high blood pressure, diabetes, high cholesterol, anemia, coronary occlusive disease, and blood vessel diseases. Other things to consider are a family history, age 50 or higher, male gender, obesity, trauma or surgery, or women after menopause. Even diet can play a role as large amounts of certain foods can lead to a problem.

## Signs and symptoms:

- Sudden, severe joint pain (within hours), especially the big toe. Sometimes the weight of bed sheets may even be intolerable. The individual may be awakened from sleep due to the sudden pain.
- Joint is red, hot and swollen.
- Skin overlying the swollen joint may be tight and shiny.
- Painless, firm nodules on the external cartilage of the ear, sometimes seen on the fingers, hands, feet, Achilles tendon and under-surface of forearm. This is rare and usually occurs over time; it happens in what is known as chronic tophaceous gout. The nodules are called tophi (singular is tophus).

## Treatment:

- Diagnosis - joint fluid analysis, blood levels of uric acid (which can be misleading and is not diagnostic of gout by itself), x-rays and bone scan.
- NSAIDs (nonsteroidal anti-inflammatory drugs). Naprosyn is best.
- Medication to decrease production of uric acid, such as allopurinol.
- Medication to increase excretion of uric acid by the kidneys, such as probenecid.
- Other medications - colchrys, indomethacin, prednisolone.
- Warm or cold compresses on affected joints.
- Keep bedclothes off of painful joint; design a frame that raises the sheets and blankets.
- Diet - avoid foods high in purines. Drink lots of water to help flush out the kidneys and prevent stone formation.
- Avoid alcohol as it can trigger or worsen a gouty attack.
- Lose excess weight but do it slowly and under the guidance of a physician.
- Discuss the side effects of all other medications you are taking. Understand the side effects of the medications you do take for gout.

Call our office if you develop new symptoms, especially fever over 101 degrees, sore throat, rash, red tongue, bleeding gums, sudden swelling or weight increase, diarrhea or vomiting. If the medication you are prescribed to treat your gout does not improve symptoms within three days, let us know.

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*Connie Lee Bills, D.P.M.*