

GOUT



SYMPTOMS AND DIAGNOSIS

- Sudden and acute onset of pain, usually in the metatarsophalangeal joint, although gout can occur in any joint.
- Inflammation.
- Skin may be red.
- Symptoms usually flare for between 6 and 24 hours and may persist for between 3 and 10 days before dissipating.

CAUSES

- An excess of purine chemicals form uric acid in the bloodstream when the body is unable to adequately break them down.
- The uric acid produced builds up to create sodium urate crystals in the joints.

RISK FACTORS

- **Age:** the risk of gout increases with increasing age.
- **Sex:** men are three times more likely to develop gout than women.
- **Weight:** obese or overweight patients are at increased risk of gout.
- **Medical:** illnesses such as diabetes and high blood pressure increase the likelihood of gout, as do conditions

that prevent the elimination of uric acid from the bloodstream, such as chronic kidney disorders.

- **Diet:** foods rich in purines, such as liver and sardines, create an excessive build up of uric acid that may be difficult for the kidneys to completely process.
- **Alcoholism:** beers and spirits contain high levels of purines that may be difficult for the kidneys to excrete.
- Family history of the condition.
- Previous history of gout.

TREATMENT

NSAIDs will help to decrease inflammation and reduce pain.

Allopurinol will lower uric acid levels in the bloodstream.

Lifestyle changes for weight reduction, low-purine diet and elimination of alcoholic beverages should allow for lower levels of uric acid and therefore reduced build-up of sodium urate crystals.

Through a combined effort of lifestyle changes and medication, gout can be cured as the sodium urate crystals have the potential to dissolve once uric acid levels are under control.

Patient education should include information on the dangers of chronic gout, including kidney stones and long-term joint damage.



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