



## BASIC INFORMATION

### DESCRIPTION

Recurrent attacks of joint inflammation, especially the base of the big toe. Gout may also involve the foot, ankle, knee, elbow, hand, arm, or shoulder. It affects adults of both sexes but is more common in men than women, until after menopause.

### FREQUENT SIGNS AND SYMPTOMS

- Sudden onset of severe pain (usually at night) in the inflamed joint. This is often at the base of the big toe.
- Involved joints may be hot, swollen, and very tender. Skin over the joint is red and shiny.
- Fever, chills, or fatigue (sometimes).

### CAUSES

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

### RISK INCREASES WITH

- Men over 60.
- Family history of gout.
- Obesity.
- Excess alcohol use.
- Thyroid disorders.
- Use of certain drugs, such as diuretic drugs (water pills), high blood pressure drugs, aspirin, drugs that treat gout, and others.
- High blood pressure.
- Starvation or dehydration.
- Eating large amounts foods that contain purines. These include anchovies, sardines, sweetbreads, kidney, liver, tongue, and large amounts of red meat, shellfish, peas, lentils, and beans.

### PREVENTIVE MEASURES

Avoid risk factors, where possible.

### EXPECTED OUTCOMES

The first attack may last a few days. Recurrent attacks are common unless the uric acid level in the blood is reduced. Symptoms can be relieved with treatment.

### POSSIBLE COMPLICATIONS

- Crippled, deformed joints.
- Kidney stones.
- Continued gout attacks (if untreated).



## DIAGNOSIS & TREATMENT

### GENERAL MEASURES

- Your health care provider will do an exam of the joints. Medical tests may include blood and urine levels of uric acid and studies of fluid removed from the joint. An x-ray or a bone scan may be done.

• Goals of treatment are to control the symptoms, prevent a recurrence, and to lower uric acid levels. Treatment usually involves drug therapy, lifestyle changes, and rarely, surgery.

• Lifestyle changes may include diet changes and weight loss (if overweight).

• Surgery is rare, but may be recommended if the disorder was untreated or treated late.

• For home care: 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 and pain are usually prescribed.

• Other drugs for an attack of gout may be prescribed.

• Lifelong treatment with drugs to decrease uric acid production or to increase the kidneys' excretion of uric acid may be needed. These drugs have side effects and adverse reactions. Obtain as much information as possible regarding their use.

### ACTIVITY

- During an attack, rest and elevate the foot. Take care to avoid joint injury. Wear shoes that fit properly.
- When able, exercise daily.

### DIET

• Limit foods that contain purines (see Risk Factors). Note: all protein foods contain purine, so no one should avoid all purines.

• Drink plenty of water and other liquids daily. Fluids keeps the urine diluted, which 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 rapid weight loss may bring on a gout attack.



## NOTIFY OUR OFFICE IF

- You or a family member has symptoms of gout.
- Pain gets worse, or fever and chills occur.
- New, unexplained symptoms develop. They may indicate an adverse reaction of drugs, or interactions between drugs.

Special notes:

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More notes on the back of this page