

## 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.

## SIGNS AND SYMPTOMS

- Sudden onset of severe pain in the inflamed joint, often at the base of the big toe. May be accompanied by fever or chills.
- Involved joints may be hot, swollen, and very tender. Skin over the joint is red and shiny.

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

## 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 include:

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

## TREATMENT

- Urgent care treatment consists of controlling the pain and inflammation of the attack.
- An x-ray may be ordered if this is your first attack.
- Further evaluation by your primary care doctor may be necessary in order to determine the cause of gout and also for long term treatment and follow-up.

## MEDICATIONS

- Nonsteroidal, anti-inflammatory medications are usually prescribed, to control inflammation and pain although narcotic pain medications may also be used.
  - Lifelong treatment with medications to decrease uric acid production or to increase the kidneys' excretion of uric acid may be needed. These medications may have side effects or adverse reactions and need to be managed by your primary care physician.
  - Oral steroids may also be prescribed to reduce inflammation.
    - You should begin your steroid prescription today.
    - You should begin your steroid prescription tomorrow.
- Unless your doctor tells you differently, always finish the full course of your steroid prescription, even if you start to feel better.
- Steroids may interfere with the effectiveness of birth control pills. Use an alternative method of contraception for the remainder of the month after finishing your steroid prescription.

## ACTIVITY

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

## 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 keep 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.

**SEEK MEDICAL ATTENTION IF:**

- Pain gets worse, or fever and chills occur.
- You notice an increase in redness or swelling.
- New, unexplained symptoms develop. They may indicate an adverse reaction of drugs, or interactions between drugs.