

All about gout and treatments

Gout is a type of arthritis. It results from an excess of uric acid in the blood which if present for long enough, can form into needle-like crystals which can inflame your joints and cause severe pain and swelling. If you have gout, it is important to get the right treatment to relieve your suffering as quickly as possible. You will then be able to get on with your everyday life and reduce the likelihood of suffering further painful attacks.

How long does a gout attack normally last?

Untreated, a sudden attack usually lasts for one or two weeks. If you have had several untreated attacks, further attacks are likely to last even longer.

What should you do if you think you have gout?

Visit your GP as soon as possible. Your doctor will be able to check whether you have gout, and, if so, give you advice and information (details of symptoms can be found in our booklet *All About Gout*). He or she will also be able to prescribe the most appropriate and effective drug for the relief of pain and swelling, suggest lifestyle changes, and see if any other treatment is required to help prevent further attacks.

What are the main medical treatments available?

Medicines to relieve pain and swelling

NSAIDs

- Sudden (acute) attacks of gout are usually treated with non-steroidal anti-inflammatory drugs (NSAIDs). NSAIDs such as diclofenac, naproxen, indomethacin or ibuprofen relieve pain and help to reduce the redness and swelling. They do not contain steroids. They are very effective but can sometimes cause stomach ulcers or bleeding, and occasionally headache, dizziness and rashes. They can also aggravate asthma.
- Newer NSAIDs called COX-2 selective inhibitors ('coxibs') are less likely to cause stomach upsets or gastric bleeding, and are therefore sometimes recommended for patients who are at higher risk of suffering an ulcer or bleed (but should not be taken by people with an active stomach ulcer or bleeding in the stomach or intestines). Only one (etoricoxib) is currently approved for treating gout. All coxibs should be avoided in people with a history of heart problems such as heart attack, heart failure, angina or bypass surgery. Etoricoxib should be avoided in people with high blood pressure which has not been adequately controlled.
- Although it is an NSAID, aspirin is not recommended for gout as it can actually increase the level of uric acid in your blood. Low doses of aspirin (75mg daily), when prescribed for the

prevention of heart attacks, should not increase your uric acid levels significantly, and should be continued.

- Some NSAIDs (such as ibuprofen) are also available without a prescription from pharmacies and supermarkets. Always tell your doctor if you are taking other medicines as taking too high a dose of NSAIDs can be dangerous.

Colchicine

- Colchicine is another medicine which can be used to treat acute attacks of gout. This is a long established remedy made from a plant known as meadow saffron (the autumn crocus). It can be effective, but tends to be used less often than NSAIDs as it can make you feel very sick or give you diarrhoea. Your doctor will usually prescribe an initial dose of two tablets to be followed by one tablet every two to six hours until your gout attack settles or diarrhoea becomes troublesome. The risk of developing diarrhoea is reduced when the dose of colchicine is restricted to one tablet every six hours. As diarrhoea is a very unpleasant and unwelcome addition to acute gout, many people prefer to take colchicine only every six hours, even if it takes a little longer to be effective.

Steroids

- If a sudden attack of gout does not get better with NSAIDs or colchicine, or if stomach problems or kidney disease rule out the use of these drugs, your doctor may have to prescribe a cortisone-like drug (corticosteroid). This could be in the form of an injection into the affected joint or a 5–7 day course of oral steroids, usually prednisolone. Side effects with such a short course are usually limited to some minor insomnia but long term treatment with corticosteroids can result in weight gain, fluid retention, high blood pressure and diabetes, as well as osteoporosis and wasting of the skin and muscles; and should therefore be avoided. Corticosteroids such as prednisolone are entirely different from, and should not be confused with, the anabolic steroids that are sometimes misused by athletes to build up muscle bulk and strength.

Medicines to help prevent further attacks

- If you have repeated, very painful attacks of gout, and the blood uric acid level remains raised, you are likely to be prescribed a drug which will lower the level of uric acid in your blood. These have to be taken continuously every day after your attack of gout has settled. These preventive medicines can either reduce the production of uric acid in the body or increase its removal from the body through the kidneys in your urine.

Allopurinol

- The drug most commonly prescribed to lower blood levels of uric acid, by reducing its formation, is allopurinol which is

available under several brand names. Doctors frequently advise delaying the start of treatment for at least a week after the attack has settled because allopurinol and other uric acid lowering drugs may actually make a gout attack last longer, or trigger sudden attacks in the early phase of treatment. It is also common to prescribe a small dose of colchicine (one tablet twice daily) or an NSAID, for a number of weeks after starting treatment with allopurinol (or uricosuric drugs) in order to reduce the likelihood of further attacks. Allopurinol is usually started in a small dose of 100mg daily and this is then gradually increased by your doctor. Doses of more than 300mg a day are rarely given, and people with poorly functioning kidneys, whatever the cause, should receive a reduced dose. Skin rashes are a problem in less than 5% of gout patients. Rarely, however, are these serious and severe, so it is advisable to consult your GP if you get one.

Uricosuric drugs

- These lower the level of uric acid in the blood and help you to get rid of excess uric acid in your body by increasing the removal of uric acid by the kidneys. Sulphinpyrazone is the only uricosuric drug generally available in the UK at present. It is usually prescribed by your doctor initially in a dose of 100–200mg daily, increasing as required to 600mg per day and should be taken with food. Heartburn and stomach problems are the most frequent side effects. Allergic rashes can occur and on rare occasions it can have serious effects on the blood.
- Sulphinpyrazone is best avoided by people who have had kidney stones. It also doesn't work well in people with reduced kidney function. You should always drink lots of water when taking a uricosuric drug in order to avoid high concentrations of uric acid developing in your urine. High levels of uric acid in your urine can increase the likelihood of uric acid stones forming in your kidneys or bladder.
- Benzbromarone is a more powerful uricosuric drug which can sometimes be effective in people whose kidney problems are not so severe and when allopurinol and sulphinpyrazone cannot be used. Benzbromarone is not available for general use in the UK but can be obtained by doctors for individual patients who need it. It is, however, sometimes associated with toxic liver side effects.

Will I be on treatment for the rest of my life?

Although it is generally recommended that uric acid lowering drugs should be continued for an indefinite period, changes in lifestyle such as gradual weight loss, reduction in the consumption of beer, alcohol and foods with high purine content, may allow some people to avoid the need for lifelong treatment with uric acid lowering drugs. (See UK Gout Society's *All About Gout and Diet* fact sheet).

Are herbal remedies useful for gout?

Various herbal remedies have been claimed to have a beneficial effect on gout e.g. nettle leaves, devils claw and a medicine called quercetin made from plant extracts. However, medical evidence to support their use is extremely limited and the strength and

purity of these products may vary. You should always consult your doctor before taking herbal medicines as they may interact with prescribed medicines that you are already taking. In addition it may be helpful to speak to a trained therapist in complementary medicine before experimenting with such remedies.

I cannot bear anything touching my gout. What should I do?

Resting the affected joint in an elevated position can be helpful. For those who find that they cannot even bear the weight of the bedclothes on the inflamed joint at night, an improvised 'bed cage' to hold the sheets away from the gouty joint can help. Duvets are generally better than blankets but sometimes it is best just to leave the inflamed joint exposed to the cool air. Some people find that an ice pack (or a packet of frozen vegetables) applied to the skin can also relieve pain to some extent, while others recommend putting their acutely painful foot in a very cold bath of water.

What else can I do to help myself?

Lifestyle changes including reducing your alcohol intake, gradual weight reduction and limiting protein and purine content in your diet (which increase uric acid levels in your blood) can go some way towards reducing the frequency or likelihood of having further attacks of gout. It is very important to avoid getting dehydrated and to avoid going without food for long periods, in addition to avoiding binges of eating and drinking. For more information on diet, see our *All About Gout and Diet* fact sheet by visiting www.ukgoutsociety.org

Remembering to take your allopurinol (or other uric acid lowering drug) regularly is very important and this is not always top of mind when you haven't got any symptoms. Hurting your joints may also trigger an attack of gout in gout sufferers, so try to avoid injuries.

Diuretics, particularly thiazide (water) drugs, which help to reduce fluid retention in people with heart problems, can also increase your chance of developing gout. Sometimes alternative treatments, which have less effect on the blood uric acid level, can be used for treating high blood pressure and heart failure. Discuss this possibility with your doctor but do not stop taking diuretics without medical advice.

For further information:

1. UK Gout Society. Web: www.ukgoutsociety.org
Email: info@ukgoutsociety.org
2. Arthritis Research Campaign Web: www.arc.org.uk
Email: info@arc.org.uk
Tel: 0870 850 5000



UK Gout Society