



CONDITION

# What is Gout & Pseudogout?

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It is caused by tiny crystals of a chemical called uric acid being deposited in the soft tissues of the body. When these crystals appear in the lining of the joints they can cause inflammation in the joint lining which gives rise to the joint symptoms of gout. It affects about 1% of the population. Most patients with this condition are genetically less able to get rid of the uric acid through their kidneys so leading to a build up in their body.

There is a similar condition called pseudogout which involves crystals of calcium pyrophosphate being deposited instead of uric acid.

## *What are the symptoms of gout?*

This condition classically picks off a single joint at a time with the big toe joint being most frequently affected. The small joints of the hand and the wrist are also commonly affected. During a flare up the affected joint becomes excruciatingly painful very quickly (over a few hours) and can look very swollen and red. This can be most alarming. These acute flare ups usually take a week or two to settle down.

Over time affected joints can be damaged. So called 'gouty tophi' can also appear – these are white deposits just under the skin which are collections of uric acid. These tophi are not usually sore but are another clue to the underlying cause of the problem.

## *How is the diagnosis of gout made?*

A characteristic story and examination suggests the diagnosis. Xrays usually confirm the diagnosis although these can be normal early on. Blood tests can be helpful but the clinching test is a fluid specimen from an affected joint showing the characteristic crystals under a microscope. Certain other conditions may need to be excluded, including infection in the joint, during a flare up.

## *What treatments are available for gout?*

Acute flare ups are treated with painkillers, rest and ice.

In the longer term measures are usually advised to increase uric acid output from the kidneys and to reduce how much uric acid the body makes. A careful diet and tablets might both be necessary to do this. Your GP can advise you regarding this.

Very occasionally surgery is required in this condition. In the acute phase removing fluid from an affected joint can be useful to confirm the diagnosis and exclude an infection in the joint. Later on, if joints have been damaged, the treatment is similar to that for other forms of arthritis. Your surgeon can advise you regarding this.