

# DRUGS

FOR THE TREATMENT OF

# GOUT

## WHAT IS GOUT?

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Gout is a very painful form of arthritis that results in severe pain, heat, swelling, and redness in the joints. It results from a build-up of uric acid crystals in the joint. Typically, attacks will last 5-7 days, and will occur very suddenly. Attacks usually start in the feet, but as time goes by other joints can be affected. Sometimes a flare-up will occur in several joints at a time, and in the later stages of the condition, attacks can go on for weeks rather than days.

## WHY HAVE I GOT IT?

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Many people associate gout with **alcohol**. Whilst it is certainly true to say that gout is more common in people who drink large amounts of alcohol, for many people with gout this is not the cause.

We know that some people inherit a **gene** that makes them more likely to get gout, and often there is a family history. People with **reduced kidney function** are also more prone to gout, as are people who are taking medication for **high blood pressure**. Some **foods** such as liver, red meat, sardines and muscles can also predispose to gout. We also know that **very strenuous exercise** and **dehydration** can bring on an attack.

## WHAT DRUGS ARE USED TO TREAT IT?

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In the treatment of gout, some drugs are used to relieve symptoms during an acute attack, whilst others may be used in the long term to help prevent subsequent attacks.

## TREATMENT OF ACUTE ATTACKS

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### NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDS)

NSAIDs are commonly used to treat acute attacks of gout, and are generally very effective at reducing the duration of an attack. There are many NSAIDs available; Ibuprofen can be purchased over the counter, but is not as strong as the NSAIDs

that are available on prescription, such as diclofenac, indomethacin, naproxen, nabumetone, meloxicam, etoricoxib etc.

NSAIDs may cause side effects such as indigestion and heartburn, and occasionally they may cause ulcers in the stomach. Often a drug such as omeprazole is given to reduce stomach acid whilst taking an anti-inflammatory. NSAIDs can also cause kidney problems and high blood pressure, and this may be a particular problem for people with gout who have these problems to start with.

## COLCHICINE

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Colchicine is another drug that is very useful for treating acute attacks, particularly if it is taken as soon as the first signs of an attack occur. It should be used carefully in people with heart and kidney problems, but this is less of an issue than with NSAIDs.

The usual dose is 500 micrograms two-to-four times daily for up to 3 days. Higher doses can be used, but this often causes severe sickness and diarrhoea.

## STEROIDS

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Steroids, either in tablet form or injected directly into joints or a muscle, are quick and effective treatments for acute gout flare-ups. These are more commonly used in people who cannot take NSAIDs because of heart or kidney problems.

## HOW CAN I HELP PREVENT IT?

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Reducing alcohol intake may help, as may losing weight and paying attention to your diet. If you are taking low-dose aspirin and blood pressure medications such as thiazide diuretics, you should discuss with your doctor whether the treatment you are taking should be modified. It is important to avoid getting too dehydrated, particularly after exercise.

If attacks of gout are occurring frequently, or if there are signs of joint or kidney damage, then it is often worthwhile taking long-term medication to help prevent it.

## ALLOPURINOL

Allopurinol is the most frequently-prescribed preventative drug for gout. It is important not to start it within about 4-6 weeks of an acute attack, as it can actually make matters worse. It is taken every day, usually starting at a dose of around 100mg daily, building the dose up gradually over a few weeks. Many people require a dose of about 300mg daily, but sometimes doses of 600-900mg daily are used.

Most people do not experience side effects, but it may occasionally cause nausea, vomiting, rashes and drowsiness. If you experience any of these side effects then stop taking it and discuss it with your doctor.

Most people will also be given another drug (such as an NSAID, colchicine, or steroids) during the first few weeks of treatment with allopurinol, in order to prevent attacks.

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There are important interactions between allopurinol and warfarin, azathioprine and 6-mercaptopurine, so you should discuss with your doctor if you are taking any of these. Always read the information leaflet that comes with the medication.

## OTHER DRUGS

If allopurinol cannot be tolerated, then there are other drugs that may be tried, including febuxostat, probenecid, sulfipyrazone, and benzbromarone.

## WHERE CAN I GET MORE INFORMATION?

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Go to [www.arthritisresearchuk.org](http://www.arthritisresearchuk.org) and download the patient information leaflets on Gout and Allopurinol. Ask your doctor if you have any concerns.

