Gout

Summary

- Gout is a type of arthritis caused by too much uric acid in the bloodstream.
- Excess uric acid can form solid urate crystals within joints, which causes severe pain and swelling.
- Gout can be successfully managed with healthy lifestyle choices and medical treatment.

What is gout?

Gout is a common form of arthritis characterised by repeated attacks of extreme joint pain, swelling and redness. While most other types of arthritis develop slowly, an attack of gout usually happens suddenly, often overnight. The most commonly affected joint is the big toe, but gout may be experienced in the feet, ankles and knees, elbows, wrists and fingers.

What causes gout?

Gout occurs when uric acid, a normal waste product, builds up in your bloodstream and forms urate crystals in a joint. Your body makes uric acid when it breaks down purines, a substance found in your body and in some foods. Uric acid normally dissolves in your blood, is processed by your kidneys and leaves your body in urine. If your body makes too much uric acid, or your kidneys can’t clear enough of it out, it builds up in your blood. This is called hyperuricaemia.

Having hyperuricaemia doesn’t mean you’ll develop gout – in fact most people with hyperuricaemia don’t go on to develop gout. Because of this it’s thought that other factors such as your genes may be involved.

Similar attacks to gout can be caused by a condition called pseudogout (or acute calcium pyrophosphate arthritis). In this case, crystals of calcium (rather than urate) are deposited in joint cartilage and then shed into the joint space. This is likely to affect your knees and other joints more than the big toe and is most common in people with osteoarthritis.

Am I at risk of having gout?

You’re more likely to have a gout attack if you:

- are male
- have a family history of gout
- have elevated levels of uric acid in the blood
- drink too much alcohol (particularly beer)
- eat a diet high in purines such as meat, sweetbreads, offal, shellfish, and fructose
- are overweight or obese
- use diuretics
- have type 2 diabetes, high blood pressure or high cholesterol – these conditions can mean that your kidneys are less able to flush out the urates
- have kidney disease
- crash diet or fast.

What are the symptoms of gout?
Symptoms of a gout attack include:

- intense joint pain
- joint swelling
- skin over the joint may look red and shiny
- affected joint may be hot to touch
- tophi (lumps of crystals that form under the skin) may occur in people who have repeated attacks.

How is gout diagnosed?

Gout is diagnosed using a number of tests including:

- medical history
- physical examination
- blood test to measure urate levels — although this cannot confirm gout
- removing a sample of fluid from the joint — if you have gout, uric acid crystals can be seen under a microscope. This is the most definitive test
- ultrasound scan — can identify early crystal formation in the fluid between your joints.

Early diagnosis and treatment is very important. The main goal for everyday management of gout is to reduce the level of uric acid in your blood so it can’t form crystals in the tissues or joints and cause joint damage.

How is gout treated?

The first step in treating your gout is getting the pain and inflammation of the attack under control. This may involve medication, cold packs on the swollen joint, and rest.

Once the painful attack is under control, your doctor may prescribe medications that lower the levels of uric acid in your blood. This will depend on things such as:

- how often you’re having gout attacks
- if you’ve developed tophi or kidney stones
- other health conditions you may have (such as kidney disease).

Medications to reduce gout pain and inflammation include:

- non-steroidal anti-inflammatory medications (NSAIDs)
- colchicine
- corticosteroids injections or tablets.

Medications to lower levels of uric acid:

- febuxostat
- allopurinol
- probenecid.

Some of these medications have side effects – your doctor will be able to advise the most appropriate treatment for you.

If you’ve had attacks of gout before, be on the look-out for early signs of another attack and take the prescribed treatment as soon as possible. The earlier you can start treating an acute attack the better.

How can I self-manage my gout?

The methods of managing an acute attack of gout differ from the ongoing methods for managing gout. If you’ve been diagnosed with gout, you’ll benefit in the long term from making healthy changes to your lifestyle, such as:

- maintaining a healthy body weight. If you do need to lose weight, make sure your weight loss is gradual as crash diets can increase uric acid levels
- drinking alcohol in moderation and avoiding binge drinking
- drinking plenty of water, and staying hydrated
- avoiding, or eating in moderation, foods that are high in purines. Talk with a dietitian for tips and advice
- exercising regularly – aim to complete at least 30 minutes of physical activity most days of the week
- working closely with your GP to prevent further attacks and actively manage your condition.

**Where to get help**

- Your **GP (doctor)**
- **Rheumatologist**
- **Musculoskeletal Australia**, National Help Line Tel. (03) 8531 8000 or 1800 263 265

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