

GOUT AND ALLOPURINOL

What is gout?

Gout occurs due to a high level of urate in the body. Urate occurs naturally in the body and is normally processed in the kidneys and then removed from your body via urine.

If the levels go too high the urate can become urate crystals in your joints. These are a rough texture and cause pain when you move your joints. Your body will break down these crystals with time, but if your levels of urate remain high, they are likely to come back. After years of gout especially if left untreated, you can get something called tophi, which is when the crystals build up so much you can see them with the naked eye. These look like small bumps on your joints. Gout can also increase your risk of heart disease.



What are the treatments for gout?

With gout you can treat the flare (acute treatment) and you can reduce the chance of another flare occurring (prevention).

Acute treatment:

High dose, fast acting NSAIDs

For example, naproxen, diclofenac or indomethacin. This may be given alongside a stomach protector like omeprazole in some people. You should take NSAIDs until 48 hours *after* the symptoms have improved.

Colchicine

Can be taken until symptoms resolve but can often cause diarrhoea as a side effect. This may be used if you cannot take NSAIDs like those with kidney disease.

Steroids

This is often used in people who cannot have or have not responded to NSAIDs or colchicine. This can be given as a tablet or injection into the muscle.

Paracetamol or co-codamol

This can be used alongside other treatments and can be brought over the counter.

Prevention:

Reducing your risk factors	This includes changing your diet to have less red meat and shellfish, reducing your alcohol intake, quit smoking, and losing weight if you have a high BMI. Drink plenty of water throughout the day as dehydration can trigger flairs. If you developed gout after starting a diuretic or blood pressure medication have a talk with your doctor about whether this can be stopped or changed. However, for many people this may not be possible.
Allopurinol	Allopurinol is first line treatment for prevention of gout (alongside lifestyle changes) and will be talked about more in this leaflet.
Febuxostat	This is second line if allopurinol is not tolerated, contra-indicated or is not effective. However, most people tolerate and respond well to allopurinol once the dose is correct.

What is allopurinol?

Allopurinol is a medication used to **prevent** flairs of gout. It needs to be taken every day as it is a preventer of gout.

Allopurinol works by reducing the levels of urate in the blood. This can prevent the crystals from forming and allows your body to break down any existing crystals.

Depending on how high your urate is before starting allopurinol, you may still get gout flairs while taking allopurinol, as it will take longer to reduce your urate levels. If this happens to you then it does not mean that the allopurinol is not working, it just needs more time.

Any patient with gout may benefit from allopurinol. You will likely get even more benefit from taking it if you have multiple gout flairs, if your flairs impact your life, if you have chronic kidney disease, if you cannot stop taking the medication that triggered your gout or if you have large crystals in your joint that you can see (tophi).

How is it taken?

Allopurinol is a tablet that is taken once a day. Most people find they get less side effects if they take the tablet after eating a meal. You will originally be started on the lowest dose to see your response, but the dose may be increased.

Monitoring while on allopurinol

While taking allopurinol your GP will ask you for periodic blood tests. These tests will have a look at your urate levels to see if the medication is working and if you need the dose increased or decreased. These will be more regular at the beginning (once a month) while we are figuring out which dose works best with your body and will become less frequent with time. Once you are on a dose that gets your urate levels in the correct range the blood tests will be done every year to keep an eye on it.

Side effects of allopurinol?

Allopurinol is a tablet that is taken once a day. Most people find they get less side effects if they take the tablet after eating a meal. You will originally be started on the lowest dose to see your response, but the dose may be increased.

Most people who take allopurinol will have no side effects. However, here are some important side effects to be aware of:

Side effects:

If you currently have a gout flare and you have never taken allopurinol before, starting allopurinol can worsen the flare. Therefore, you should not start taking allopurinol until 2-4 weeks after a gout flare has settled to reduce this risk.

Worsening a gout flare/ triggering a gout flare

Some people may get less than 4 weeks gap between gout flares. If that is the case then it is best to start the allopurinol, even if it is during a gout flare.

For some people at high risk of getting a gout flare once starting allopurinol, they can be offered acute treatment (see above) for the first month.

Once you are on allopurinol, if you do get a gout flare you need to continue taking allopurinol during the flare.

Gastrointestinal side effects

Some people can get nausea or heart burn when taking the tablets. Some people can also get a foul taste in their mouth after taking the tablets. This is why it is recommended to take the tablets after food with plenty of water.

Rash

There is a very rare reaction that can happen from allopurinol called SJS (Steven Johnsons syndrome). This would cause a rash and blistering on the lips. Although it is very rare it is important to know about because it can be very serious and needs immediate treatment. So, if you develop any symptoms of this you need to immediately seek medical help and tell them you have started taking allopurinol.

FAQs about allopurinol



How long does a gout flare last? Usually about 1-2 weeks

Can I get vaccinations on allopurinol? Yes

Can I drink alcohol while taking allopurinol? Allopurinol and alcohol do not interact and are safe to take together, but high weekly alcohol consumption is heavily linked to gout and binge drinking can trigger gout flares.

Can the crystals build up in other places other than my joints? Yes, it can also build up in the kidney and form kidney stones.

Do I need to see a specialist doctor for gout management? GPs can usually manage most people with gout but sometimes patients are referred to joint and arthritis specialist doctors (rheumatologists) if your case is complicated. For example, if the diagnosis is not clear, if you are not responding to treatment or if you have another medical condition that means treatment options are limited.

For more information about gout and allopurinol you can find reliable information on the **NHS website** and through the charity '**versus arthritis**'.