

Podagra: Acute Gouty Arthritis of the Foot

By Pamela M. Jensen-Stanley

Podagra of the big toe is commonly referred to as gout. The classic presentation is a sharp, painful attack of the big toe joint that includes swelling, tenderness, and redness that commonly occurs at night. People who have an attack state that even the pressure from a sheet is intolerable. The big toe joint is most commonly affected, however, the joints of the feet, ankles, knees, wrists, fingers, and elbows may also be involved. Gout attacks can last from two to seven days on average and up to a month for severe cases. As the gout attack subsides, the skin around the affected joint may peel and feel itchy. Other symptoms associated with gout include fever, limited movement of the affected joint, and the false appearance of an infection. Gout can occur after an illness or surgery and chronic gout is less painful and is mistaken for other arthritides in the elderly. Some patients may have nodules (called tophi) on the hands, elbows, or ears without the classic symptoms of gout. Without treatment, gout attacks tend to recur and can cause severe damage to joints, tendons, and other tissues.

Gout is caused by too much uric acid in the blood (hyperuricemia). When uric acid levels in the blood become too high, uric acid crystals form and deposit within the joints causing severe inflammation and pain. Prolonged hyperuricemia can also result in uric acid stones that can damage the kidneys. The exact cause of hyperuricemia is not entirely clear, however, genetic prevalence in families and factors such as being overweight, eating of meats and seafood that are high in purines, intake of medications such as aspirin and diuretics, and increase alcohol intake can increase uric acid levels.

Diagnosis, after a physical examination and medical history by your podiatrist or physician, may be determined with a few tests. A joint fluid aspiration or arthrocentesis, which locates uric acid crystals within the joint fluid, is the most diagnostic. However, in people with acutely swollen, red, and painful joints, it is often difficult to obtain joint fluid. A simple blood test determines uric acid levels in the blood and is confirmatory of diagnosis if elevated. However, if there is a delay in treatment, high normal levels can not rule out gout as a diagnosis. Uric acid levels of the urine may also be used for evaluation. Radiographs of the hands and feet can be useful in the late stages of the disease to determine the degree of joint destruction. "Punched-out" or "Rat Bite" lesions within the bone are noted near the joints.

The goal of treatment of a gouty attack is initially to alleviate the pain, then to prevent future gout attacks with its associated joint destruction and kidney damage. Acute gouty attacks are treated with strong anti-inflammatory medications and corticosteroids prescribed by your podiatrist or physician. Recurrent attacks can be reduced by medications that can increase the elimination of uric acid by the kidneys or by medications that decreases production of uric acid by the body. In addition, being overweight, drinking alcohol, and consuming meat and seafood can increase your risk for a future attack. Thus, if you have a history of gout, please see your physician prior to starting a high protein, calorie restrictive diet. Some of these diets are known to bring on

gout attacks. In addition, certain medications given for other conditions reduce the amount of uric acid eliminated by the kidneys. These include diuretics (water pills), niacin, and regular use of low-dose aspirin which may affect the uric acid levels in the blood. Please talk to your physician regarding these side effects if you have recurrent gout.

Podagra (Gout) is a painful experience that is best treated within 24 hours of the onset of symptoms. Recurrent episodes can cause severe damage to joints resulting in erosions of the bone and joint destruction as well as kidney damage. Chronic gout results in uric acid crystals accumulating within the body to form gritty, chalk-like nodules on the hands, feet, and ears. Fortunately, advances in early treatment and chronic management of gout have greatly reduced the severity of a gout attack and reduced its debilitating effects for the future.