

Thank you for using this booklet.

We hope you find it useful.

This decision aid is not meant to replace the consultation.

Whatever you decide, please clarify your queries and discuss your opinion(s) with your healthcare provider.

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GOUT MANAGEMENT PATIENT DECISION AID

To help you make a joint decision with your doctor in selecting your long-term treatment for gout.



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Hello!

Your healthcare provider has just told you that you have gout that needs long-term treatment.

This booklet will help to address some of your concerns and assist you with making a decision regarding long-term gout treatment options.

What is gout and what causes it?

Gout is a type of joint swelling disease (arthritis) and is caused by high levels of a chemical called uric acid in the blood. It forms crystals in the joint, causing pain. Uric acid is mainly formed by the body and is also a breakdown product from certain food items.



How do I know if I have gout?

The most common presentation of gout is sudden severe joint pain (typically toes, ankles or knees). The joint also becomes red, warm and swollen. This is known as a gout "flare".

When do you need treatment for gout?

Your doctor will assess that your gout is not well-controlled when you have more than two "flares" in the last one year. Repeated gout "flares" can result in joint deformity or formation of hard swellings called "tophi". High uric acid level can also cause kidney stones.



What are the benefits of controlling gout?

By reducing your uric acid and controlling your gout, you will suffer less gout "flares" which will lead to less joint damage, therefore less joint deformity and preservation of joint function.

What is the decision to be made?

If your doctor concludes that your gout requires further long-term treatment, you will need to choose a treatment option.

How do you treat gout?

Short term treatment for treating gout "flares"

- ▶ Painkillers such as nonsteroidal anti-inflammatory drugs (NSAIDs) or a gout-specific painkiller called 'colchicine'
- ▶ Steroids such as 'prednisolone'

Long-term treatment

- ▶ No treatment
- ▶ Dietary control
- ▶ Medication to lower the level of uric acid in your blood, such as Allopurinol, Febuxostat or Probenecid, when you have two "flares" or more in the last one year.

You can find further information in the next two pages.

How does it work?

How effective is it?

Side effects

Cost

	No treatment	You can refuse treatment.	You will likely continue to get gout "flares".	Cost of treating gout "flares" and complications like joint damage, reduced joint movement and deformed joints.
Short-term treatment	Using NSAIDs, Colchicine or Oral steroids only.	Reduces inflammation and pain during a gout "flare".	Only works during flare and needs to be taken early at start of flare. Does not prevent future flares.	<p>NSAIDs - Kidney injury with prolonged use. Cannot be used in people with pre-existing kidney disease. May cause gastric bleeding in certain groups of people.</p> <p>Colchicine - Diarrhoea / vomiting when consumed in high dosages.</p> <p>Steroids - Side effects with prolonged or high dosages.</p> <p>\$</p>
	Diet Control - Applies to all patients with gout	Obesity, consumption of sugary/alcoholic drinks, excess meat and seafood have been proven to increase gout "flares".	Dietary efforts to control gout ranges from no effect to average uric acid decrease of 59 $\mu\text{mol/L}$.	True low purine diet generally does not taste nice. Cost of treating gout "flares" and complications such as joint damage, reduced joint movement and deformed joints.
Long-term treatment	Allopurinol - 1 st line for long-term gout control	Reduces uric acid production in the body.	Effective for long-term control.	<p>Rash: < 2 per 100</p> <p>Severe skin reaction resulting in hospitalisation: 2 per 1000</p> <p>\$\$</p>
	Febuxostat - 2 nd line for long-term gout control	Reduces uric acid production in the body.	Effective for long-term control.	<p>Liver abnormalities: 5-7 per 100</p> <p>Skin rash: 1-2 per 100</p> <p>4 more heart-related deaths per 1000 people treated</p> <p>\$\$\$</p>
	Probenecid - 2 nd line long-term gout control	Lowers uric acid levels in the body by increasing uric acid elimination through the urine.	Effective for long-term control.	<p>Headaches, dizziness, flushing, nausea and vomiting.</p> <p>\$\$</p>

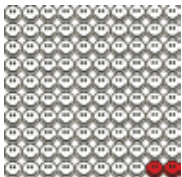
How do you know if your gout is getting better?

You should get less than two gout flares a year or your blood uric acid level is less than 360 $\mu\text{mol/L}$ if you have no other complications, and less than 300 $\mu\text{mol/L}$ if you have complications of gout.

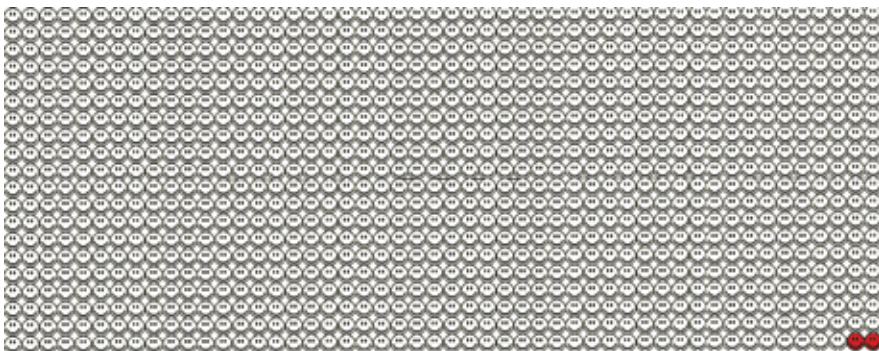
What do the numbers mean?

For side-effects of Allopurinol

Rash in less than 2 per 100



Severe skin reaction resulting in hospitalisation - 2 per 1000



What matters most to you?

Please rank from 1 to 3 which aspect of treatment is most important to you, with '3' as the most important and 1 as the least important.

	Not Important	Important	Very Important
Effectiveness	1	2	3
Side effects	1	2	3
Cost	1	2	3

What is your final decision?

Please select your preferred option(s). You can choose more than one option.

- No treatment
- Using NSAIDs, colchicine or steroids only
- Diet control
- Allopurinol
- Febuxostat
- Probenecid