



Gout and It's Homoeopathic Managements

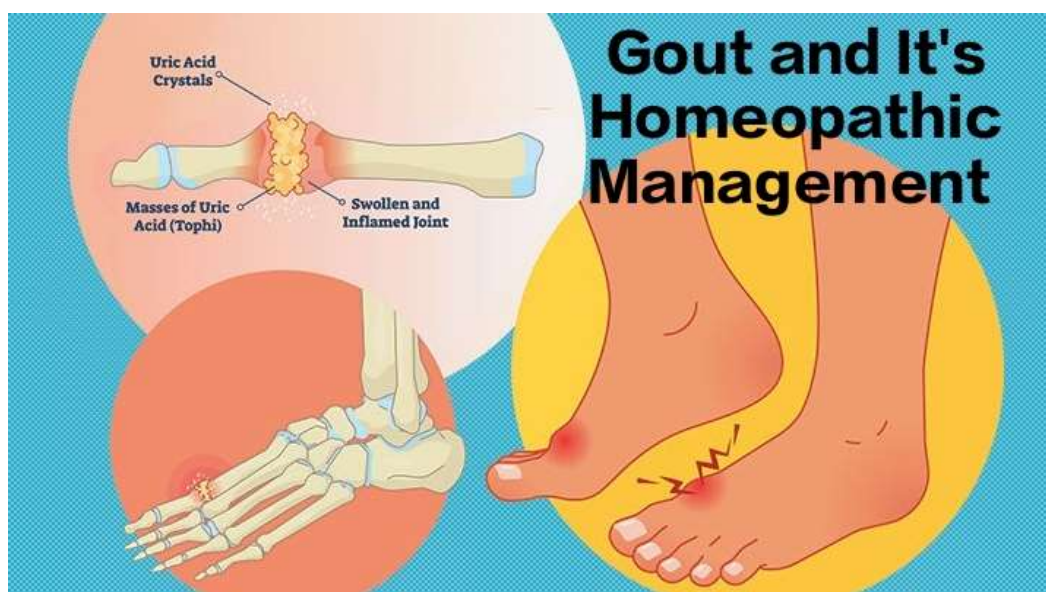
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ABSTRACT-

Urate crystals may accumulate in the joints due to local causes and an elevated blood urate level. Acute gouty arthritis can result from crystals that have been accumulated in a joint being released into the joint space and starting an inflammatory cascade.

The crystals in the joint are still there after these severe flare-ups subside. Lowering the blood urate level and dissolving the crystal deposits will finally resolve the underlying metabolic issue of hyperuricemia and the crystal deposition. Both the sudden attacks and the escalating joint injury will halt as a result.



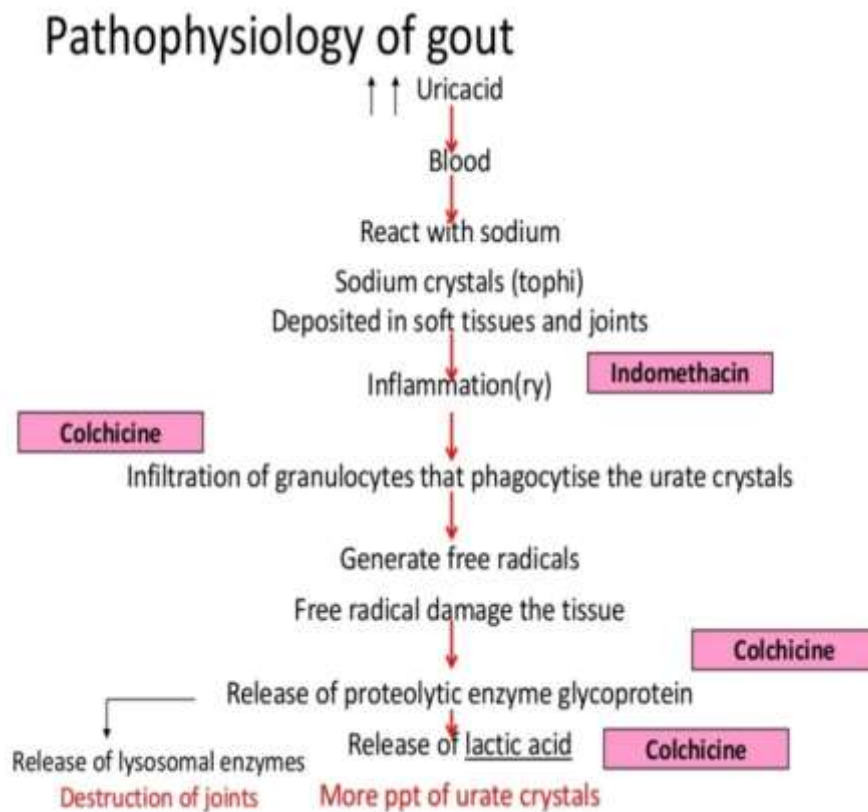
Other names

Podagra, arthritis uratica

INTRODUCTION

Anyone can develop gout, a common and complicated form of arthritis. It is characterised by frequent big toe pain and sudden, acute bouts of swelling, redness, and soreness in one or more joints.

Gout is a purine metabolic condition that develops when monosodium urate, the ultimate metabolite of uric acid, crystallises, precipitates, and forms deposits (tophi) in joints, on tendons, and in the surrounding tissues. A ring of proteins that surrounds microscopic tophi may prevent the crystals from interacting with the cells and causing inflammation. Due to modest physical injury to the joint, medicinal or surgical stress, or abrupt changes in uric acid levels, naked crystals may emerge from walled-off tophi. When they penetrate the tophi, the NLRP3 inflammasome protein complex starts a local immune-mediated inflammatory response in macrophages. Pro-interleukin 1 β is one of the important proteins in the inflammatory cascade, and it is converted to active interleukin 1 β , by the enzyme caspase 1 when the NLRP3 inflammasome is activated. This disorder is widespread because higher primates like humans have lost the enzyme urate oxidase (uricase), which breaks down uric acid, through evolution.



Types -

Acute: With sudden onset.

Predisposing variables include joint trauma, surgery, the cold, medications, infection, and more.

Symptoms: Nighttime aggravation.

Malaise.

headache, rapid heartbeat, and fever and chills.

localised agony, soreness, and swelling. cellulitis, lymphangitis, and prominent veins

Chronic: increased tissue deterioration is a risk factor For instance, chemotherapy

recurring assault

Joint capsules, tendons, bursae, and other structures gradually undergo irreversible alterations.

Joint pain, stiffness, and deformity in the wrist, ankles, knees, elbow, and other joints

CLINICAL FEATURES:

After the age of 30 years, it is typically more common in men than in women.

Gout attacks nearly generally come on quickly, frequently at night. They consist of:

a lot of joint pain. Gout commonly affects the big toe, however it can develop in any joint. The elbows, wrists, fingers, ankles, and knees are other joints that are frequently impacted. Within the first four to twelve hours after it starts, the pain is likely to be at its worst.

persistent discomfort Some joint discomfort may remain from a few days to a few weeks after the most intense pain disappears. Later episodes are probably more prolonged and likely to involve more joints.

Inflammation and redness :might not be able to move your joints normally when gout worsens.



Risk factors:

Diet. Consuming foods and beverages sweetened with fruit sugar (fructose) and eating a lot of red meat and shellfish raise uric acid levels, which raise your risk of developing gout. Additionally, drinking alcohol—especially beer—raises your risk of developing gout.

Weight. Being overweight causes the body to manufacture more uric acid and makes it harder for the kidneys to remove it.

ailment conditions. Gout risk is influenced by several illnesses and situations. Untreated high blood pressure and chronic illnesses like diabetes, obesity, metabolic syndrome, heart and renal disease are some examples of these.

certain medicines. Low-dose aspirin and several drugs used to treat hypertension, such as thiazide diuretics, ACE inhibitors, and beta blockers, can also raise blood uric acid levels. The use of anti-rejection medications that doctors provide to organ transplant recipients can also prevent rejection.

Family history of gout.

age and gender Men experience gout more frequently than women, largely because women typically have lower uric acid levels. However, after menopause, women's uric acid levels begin to resemble those of men. Men are also more likely to experience the signs and symptoms of gout earlier than women do, typically between the ages of 30 and 50.

recent trauma or surgery. Sometimes a gout episode is brought on by recent surgery or trauma. Receiving a vaccine may cause a gout flare in some people.

DIAGNOSIS:

Rheumatoid arthritis and other inflammatory arthropathies can be mistaken for gout.

Gout is diagnosed based on a family history of the condition, the absence of uric acid in early instances, and a negative radiological examination result.

Later cases confirm the diagnosis with elevated uric acid levels and radiographic findings.

Investigation

Blood test : Raised uric acid level, high ESR, and leucocytosis in a blood test

Urine test: low volume and bright colour

TREATMENT:

Patients with hyperuricemia who have no symptoms do not need to be treated.

Rest in bed and avoid purine-containing foods. Apply hot or cold compresses to the affected joint.

To prevent obesity, dietary fat intake should be kept to a minimum.

In William Boericke's materia medica, a few well-known treatments that are typically recommended in cases of gouty pain are listed as follows:

Antim Crudum: The effective homeopathic medication Antim Crudum is used to treat gout. When a patient has gastrointestinal symptoms together with joint pain and inflammation, it is used. The patient might experience an increase in appetite, which could lead to overeating and its associated difficulties. One feels pain in the fingers and heels.

Sabina: When a patient has another feminine problem in addition to gout, Sabina: This homeopathic medication is crucial for treating the condition. Along with the typical gout symptoms, uterine symptoms are present. The heels and toes both endure shooting pain. The joints swell up and appear glossy and red.

Colchicum: Because of its potency, this homeopathic remedy is the main choice for treating gout. It is usually employed in cases of persistent gout. A patient typically has unbearable agony in the big toe that cannot be touched. The injured toe and other areas become swollen, red, and heated. Evening and nighttime are when the agony is greater. Patients using this medication should avoid being outside in warm weather. Additionally, increased weakness and an internal cold are treated with this medication.

Ledum Pal: This potent homeopathic remedy is utilised when pain originates from below and radiates upward. Most often, the discomfort will begin in the feet and gradually work its way up, hurting the knees and legs. Legs are also pierced by the pain. Commonly afflicted joints are little ones. The warmth in the body and joints seems to have diminished. Any form of external warmth will be difficult for the sufferer to tolerate. Applications of cold reduce the pain. The big toe or ankle balls may be enlarged.

Benzoic acid: Benzoic acid is a homeopathic medication used to treat gout in cases where the urine is unpleasant. The urine has a very foul smell that is noticeable from a distance. Urine is often dark in colour and has an unpleasant odour. The big toe is in excruciating discomfort, and the knees are swollen.

References: -

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