

Management of tophaceous gout

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Over the last several years, evidence has been accumulating that increased serum uric acid (sUA) levels and gout are associated with subclinical organ damage a greater risk of cardiovascular and renal events. Several pathogenetic mechanisms have been shown to link sUA to the development of tophi.

Patients with tophaceous gout often have comorbidities such as cardiovascular disease, renal failure and metabolic syndrome components. Some studies have suggested that hyperuricemia and gout are associated with increased risk of myocardial infarction, renal failure and death primarily because of increased risk of cardiovascular events. Therefore, knowledge of the effects of urate-lowering therapy (ULT) on co-morbidities, in particular cardiovascular events and chronic kidney disease, is crucial.

Preliminary studies have suggested that the use of febuxostat relief gout patient from tophi and could be beneficial for comorbidities. In the lecture, we will explore the ULT role in tophaceous gout from rheumatologist perspective.