

SAND abstract No. 176 from the BEACH program 2010–11

Subject: Comorbidity and management of gout in GP patients

Organisation supporting this study: Novartis Pharmaceuticals Australia Pty Ltd

Issues: The proportion of general practice patients ever treated for gout; current morbidities; number of gout episodes experienced in the previous 12 months; care sought by patients for gout; managements used for gout; contraindications in gout management.

Sample: 3,094 patients from 105 GPs; data collection period: 30/11/2010 – 17/01/2011

Method: Detailed in the paper entitled *SAND method 2010–11* at:
<<http://sydney.edu.au/medicine/fmrc/publications/sand-abstracts>>.

Summary of results

The age and sex distribution of the 3,094 respondents did not differ from that of patients at all 2009–10 BEACH encounters, with the majority (58.6%) being female.

Of the 3,094 respondents, 175 (5.7%, 95% CI: 4.5–6.8) had been treated for gout. After adjustment for attendance rates by age and sex of patient, we estimated that 4.1% of patients who attended the GP once that year had at some time been treated for gout. Treatment was most common for older patients, 11.8% of those aged 65–74 years and 11.3% of those aged 75+ years. The sex-specific rate of gout treatment among male patients (9.8%, 95% CI: 7.9–11.6) was significantly higher than among females (2.7%, 95% CI: 1.7–3.6). Of 175 patients treated for gout, 64.6% had hypertension, 67 (38.3%) had elevated total cholesterol or triglycerides, 66 (37.7%) were obese, 65 (37.1%) had osteoarthritis, 41 (23.4%) used a diuretic, and 39 (22.3%) had chronic kidney disease.

Of 169 respondents (of 175 who had been treated for gout), 69 (40.8%, 95% CI: 34.3–47.4) had an episode of gout in the previous 12 months: 33 patients had one episode and 20 patients had two. Of 160 respondents (multiple responses allowed), 64 (53.3%) used a health service in the past 12 months for gout management: 62 (38.8%) visited a GP, three (1.9%) visited a specialist, three (1.9%) required a hospital visit and three (1.9%) visited an emergency department – 96 patients (60.0%) had not used a health service for management in the previous 12 months.

Of the 68 patients who had had at least one episode of gout in the past 12 months, 55 (80.9%) had used a health service: 53 (77.9%) had visited a GP to have their gout managed, three (4.4%) had visited a specialist, three (4.4%) had required a hospital visit and one patient visited an emergency department for their gout. There were 13 patients (19.1%) who had had an episode of gout in the previous 12 months but had not used a health service.

Of the 175 patients at some time treated for gout, management information was available for 149. Of these, 131 (87.9%) had received treatment for their most recent episode, and 18 patients (12.1%) had sought no treatment. Of those treated, 120 (80.5%) had used medication to treat their most recent episode, and 145 medications were recorded. Colchicine accounted for 37.2% and allopurinol for 22.1% of medications. The most common other treatment used for gout was lifestyle modification (51.0%).

Suitability of specified medications for gout was recorded for 159 patients, while responses varied for each medication. Contraindication or intolerance was indicated for: allopurinol (4.8%); colchicine (8.3%); oral or systemic corticosteroids (11.5%); and NSAIDs (37.4%).

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PLEASE READ CAREFULLY

The shaded section of the following forms asks questions about **MANAGEMENT OF GOUT**.

You may tear out this page as a guide to completing the following section of forms.

INSTRUCTIONS

Please answer the following questions for **ALL** of the **next 30 PATIENTS** in the order in which the patients are seen.

Please **DO NOT** select patients to suit the topic being investigated.

Gout

Please indicate whether this patient has ever been **treated for gout** by you or any health professional.

If 'no' please **end questions here** for this patient.

Acute episodes

Please ask the patient approximately **how many acute episodes** of gout they have experienced in the **past 12 months**.

Treatment of gout

Please indicate how the most **recent episode** of gout was **managed**:

Medication

Please write the **name, form** and regimen (**dose and frequency**) of the **medication(s)** used to treat gout.

Other treatment

Use the tick boxes to advise whether any **other treatments** were used for management of the most recent gout episode.

No treatment

If **no treatment** was used please tick the box labelled '**no treatment used**'.

Comorbidities

Please use the tick boxes to advise whether the patient has been diagnosed with any of the **listed conditions**, or uses diuretics.

Please tick all that apply

NB. TC = total cholesterol; TG = triglycerides

Type of care sought

Please use the tick boxes to indicate whether in the **past 12 months** management of gout has involved a **GP visit, specialist visit, hospital admission, and/or an emergency department visit**.

Tick as many as apply.

Unsuitable medications

Please use the tick boxes to advise whether the patient is **unable to take** any of the **specified medications** for the treatment of gout because the medication is **contraindicated**, they are **intolerant** of or **unresponsive** to the medication.

<p>Has this patient ever been treated for gout?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → End questions</p> <p><small>BL128B</small></p>	<p>Does the patient have:</p> <p><input type="checkbox"/> Chronic kidney disease</p> <p><input type="checkbox"/> Hypertension</p> <p><input type="checkbox"/> Obesity</p> <p><input type="checkbox"/> Elevated TC or TGs</p> <p><input type="checkbox"/> Osteoarthritis</p> <p><input type="checkbox"/> Diuretic use?</p> <p>AND / OR <small>(tick all that apply)</small></p>	<p>How many acute episodes of gout in the past 12 months?</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Don't know</p> <p><small>(please specify)</small></p>	<p>In the past 12 mths has gout required:</p> <p><input type="checkbox"/> GP visit</p> <p><input type="checkbox"/> Specialist visit</p> <p><input type="checkbox"/> Hospital admission</p> <p><input type="checkbox"/> Emergency Dept visit</p> <p><input type="checkbox"/> None of the above</p>	<p>How was the most recent episode managed? <input type="checkbox"/> No treatment used</p> <p><u>Medication:</u></p> <table border="1"> <thead> <tr> <th>Name & Form</th> <th>Strength</th> <th>Dose</th> <th>Frequency</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p><u>Other treatment:</u></p> <p><input type="checkbox"/> Lifestyle modification</p> <p><input type="checkbox"/> Referral to specialist</p> <p><input type="checkbox"/> Referral to allied health professional</p> <p><input type="checkbox"/> Other: _____</p>	Name & Form	Strength	Dose	Frequency													<p>Are any of the medications below unsuitable for use by this patient?</p> <table border="1"> <thead> <tr> <th></th> <th><u>Contraindicated/intolerant</u></th> <th><u>Unresponsive</u></th> <th><u>No</u></th> </tr> </thead> <tbody> <tr><td>Allopurinol</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>NSAID</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>Colchicine</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>Oral corticosteroid</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>Corticosteroid inject'n</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </table>		<u>Contraindicated/intolerant</u>	<u>Unresponsive</u>	<u>No</u>	Allopurinol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NSAID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Colchicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oral corticosteroid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Corticosteroid inject'n	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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