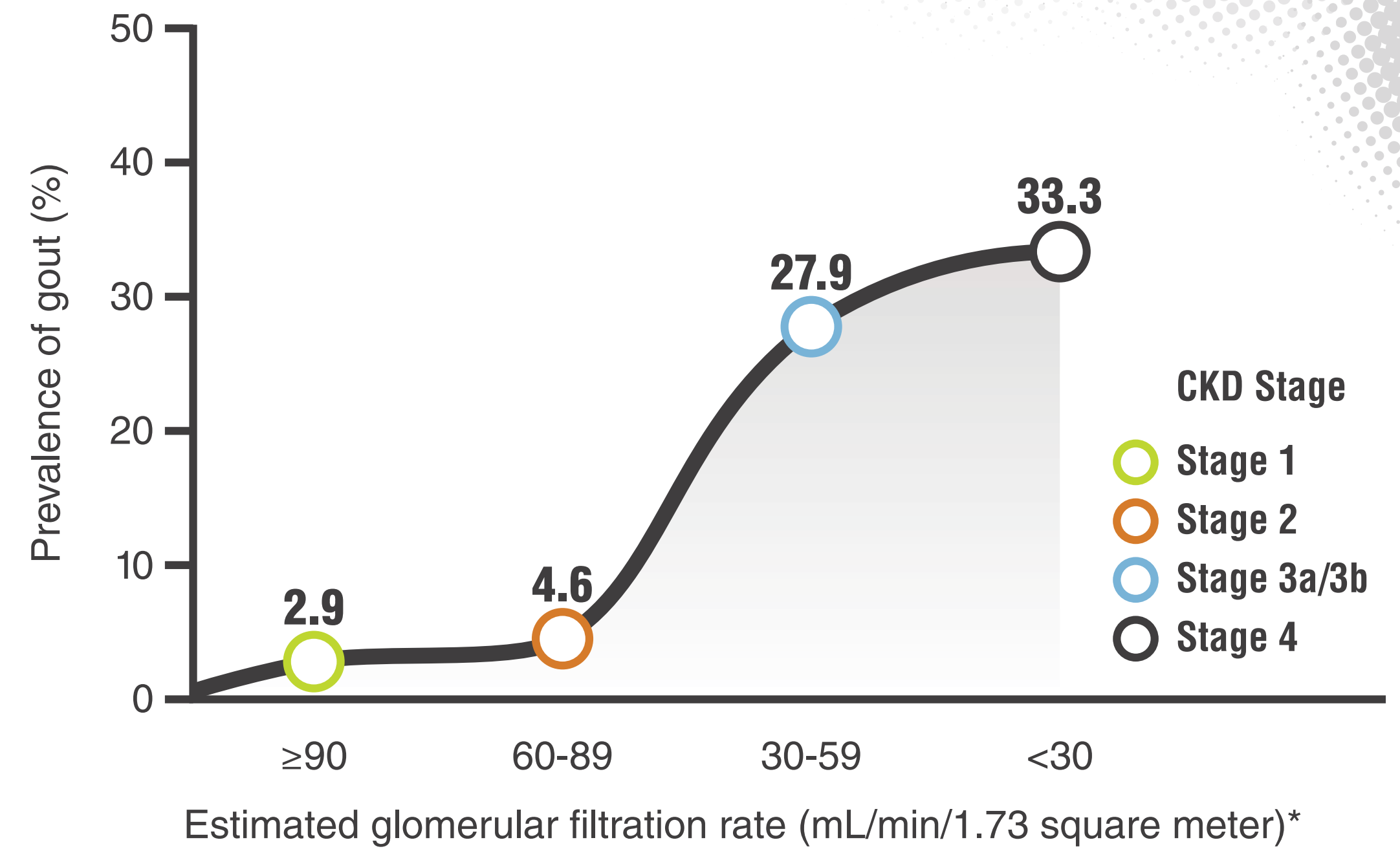


HOW COMMON IS GOUT IN YOUR PRACTICE?

Patients with CKD stages 3 and 4 have a 10-fold increase in gout prevalence¹

Post hoc, cross-sectional analysis of National Health and Nutrition Examination Survey (NHANES) data from 2009 to 2010 of adults >20 years of age.¹

*Adapted from Krishnan E. Post hoc, cross-sectional analysis of National Health and Nutrition Examination Survey (NHANES) data from 2009 to 2010 of adults >20 years of age.



HOW CONTROLLED IS GOUT IN YOUR PRACTICE?

When treating patients with CKD and comorbid gout, how do you know if their gout is under control?

FIRST, CHECK THEIR CHART:

- Serum uric acid (sUA) level – Is it >6 mg/dL?
- Urate-lowering therapy (ULT) – Are they currently on a ULT (allopurinol and febuxostat)?

NEXT, ASK THEM ABOUT THEIR GOUT SYMPTOMS:

- Flares – Have they experienced 2 or more in the past 12 months?
Note: Flares can begin with a slight tingle before evolving into a full blown attack.^{2,3}
- Visible tophi – Do they have swollen joints or lumps (tophi)?

If their sUA level is >6 mg/dL, despite being on a ULT, and they are still having flares and/or tophi, their gout may not be under control.⁴



FLAG THE CHARTS OF PATIENTS WHOSE GOUT IS NOT UNDER CONTROL. IT MAY BE TIME TO CONSIDER A DIFFERENT GOUT TREATMENT FOR THEM.