More than 75 percent of acute gouty attacks affect a joint in the lower extremity, especially the first metatarsophalangeal joint, a condition known as podagra. In the order of decreasing frequency, joint involvements of gout include the instep, the ankle, the knee, the wrist and the fingers. Here, we describe a rare case of arthritis in the wrist joint caused by an acute gout attack.

A 58-year-old man woke up in the early morning of March 23, 2002, due to a pain in his right wrist joint. He had never undergone a medical check-up. The pain was moderate at first, however, by the time he visited our emergency room, the pain was severe. Tenderness, swelling, and redness overlying the right wrist were remarkable which limited the range of motion. Laboratory studies showed elevated C-reactive protein (8.2 mg/dl), serum uric acid (8.8 mg/dl: normal for men 2.4–7 mg/dl) and mild leukocytosis (10,900/mm$^3$). Detailed history-taking revealed that he had experienced several episodes of mild acute pain in the first metatarsophalangeal joint of his right foot. A diagnosis of acute arthritis of primary gout was made based on the following findings: more than one attack, maximum inflammation that developed within 1 day, monooarticular arthritis, redness observed over the joint, a past history of unilateral and painful attack in the first metatarsophalangeal joint, hyperuricemia and asymmetric swelling according to the criteria proposed by American Rheumatism Association (1). Resolution of the attack occurred within five days after the initiation of diclofenac sodium 25 mg three times a day.

Reference

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