

Discharge Letter to General Practitioner after last visit in the Nurse-led gout clinic

The patient has now been treated for gout (arthritis urica) at the Gout Clinic, Rheumatology Department, since [start date]. The patient has been thoroughly informed about the disease and its treatment. The course of treatment concludes here and will be taken over by their general practitioner, with a recommended first consultation in 3 months.

We recommend lifelong urate-lowering treatment with Allopurinol/Adenuric. Discontinuation of urate-lowering treatment often leads to disease recurrence with a risk of complications.

We advise blood tests (plasma urate and creatinine) twice a year. Plasma urate should be below 0.36 mmol/l or below 0.30 mmol/l in the presence of tophi. Blood pressure should be monitored annually.

In cases of treatment-requiring hypertension, Losartan should be used whenever possible. In the event of gout attacks, Colchicine, Naproxen, or Prednisolone can be used (refer to the primary treatment plan before the patient's first visit to the Gout Clinic or the Region's on-line management guideline for gout).

Do not discontinue urate-lowering treatment during gout attacks.

The general practitioner is welcome to contact the Rheumatology Clinic with any questions or issues, including those related to renal function impairment.

Best regards,

[Nurse's Name] [Rheumatology Department] [Gout Clinic]

Hotline for GP's to rheumatologist daily 8 AM to 3 PM: (45) 97640996