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Living with Gout



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Arthritis Ireland, making a BIG difference everyday

Little things can make a big difference to a person with arthritis. Difficulty with the little things like making a cup of tea, getting dressed or opening the front door can all add up to have a big impact on a person's quality of life.

At Arthritis Ireland we understand this. That is why we are working single-mindedly to transform the experience of people living with arthritis, and those who care for them.

Every day, we work in communities across the country providing community based education programmes to help people effectively manage and control this devastating disease. We actively drive grassroots advocacy so that the voice of people with arthritis is heard and understood and we work with the medical community to control and cure arthritis.

If arthritis is affecting your life or the life of someone you love, call us and talk to someone who understands, someone who will listen, chat and point you towards the people, resources and programmes that can make a difference to your life.

If you would like to volunteer, help raise funds or make a donation, call us on 01 6618188, find us on facebook or log on to: www.arthritisireland.ie

Many people have probably heard the word gout but few people know much about it. Gout has been known for more than 2000 years. It can affect men of any age. It is less common in women and then usually only occurs after the menopause.

Luckily, gout is probably the rheumatic disease for which there is the most satisfactory treatment.

This booklet will help you understand more about gout, what it is, what causes it and how it can be treated so you can live your best possible life with this condition.

This booklet has been made possible with the valuable assistance of the following people:

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Dr. Jeetandera Rath (General Practitioner)
Patricia Kavanagh (Nurse Specialist)
Anne Madigan (Nurse Specialist)



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FOREWORD

Gout is the most common cause of inflammatory arthritis and is becoming even more frequent with time. Up to one in 40 adults may experience gout. You may have had symptoms of gout for many years or just developed them recently. Either way, it is important to know that there are highly effective treatments available for gout, once they are taken correctly.

In order to manage your gout correctly, it is very important to understand why it develops, how the treatments work and the correct way to take the medication prescribed by your doctor. It is also very helpful to make lifestyle adjustments when advised to do so to further help avoid painful attacks of gout.

Important information is contained in this booklet. It is easy to read and will be very helpful in assisting you to manage and limit the effects of this painful form of arthritis. Correct management may also help your general health, including your heart and blood vessels. Please feel free to share it with your family and friends.

Professor Geraldine McCarthy
Consultant Rheumatologist
Mater Misericordiae University Hospital, Dublin

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WHAT IS GOUT?

Gout is a very painful form of arthritis. It is a long term, chronic condition that, if not properly managed, can affect you for your whole life.

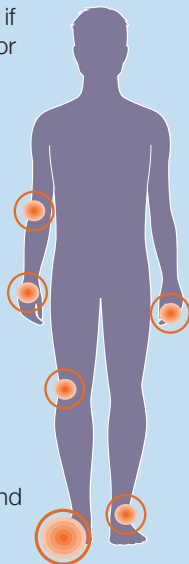
Typically, a first gout attack, or flare, will appear in your big toe, although it can also affect your:

- Knees
- Ankles
- Elbows
- Hands
- Wrists

The affected area will be red, swollen and extremely painful. Usually, the flare will start in the middle of the night and can last for 6-10 days.

Gout is a progressive condition. This means that if you have had one attack, you are likely to have more, increasing in severity over time. Untreated, these attacks can lead to joint and bone destruction, deformities or disabilities, which can greatly affect your quality of life.

Gout is also linked to other medical conditions such as kidney disease, diabetes, high blood pressure and some heart diseases. Like these conditions, the correct treatment and lifestyle choices are key to preventing serious long term effects.



WHO GETS GOUT?

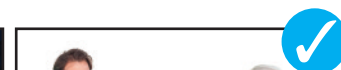
Gout has been a well-known and documented condition for over 2,000 years. It is popularly depicted as a 'disease of kings' with those affected stereotyped as overweight, middle aged men who indulge in a lavish lifestyle of rich food and wine. In fact, gout can affect anyone and risk factors vary.

Gout is the most common form of inflammatory arthritis in adult men. It can occur at any age, although it rarely affects children. While less common, it also affects women, usually after the menopause when hormone levels change. The risk of developing gout for both men and women increases with age.

While diet greatly affects the management of your gout, and contributes to attacks or flares, your individual genetic and biological make-up plays a large role in why you develop the condition in the first place. It is common for gout to occur in families, and this can be a factor in why some people are more at risk than others.

Some other health problems, in particular chronic kidney disease, can also make you more prone to developing gout. Your kidneys play a very important role in managing gout, and maintaining properly functioning kidneys is very important to your overall health.

It is estimated that up to 1 in 40 people are affected by gout.



20 - 30 - 40 - 50 - 60 - 70 - 80

MYTH OR TRUTH?

People who have gout are wealthy and overweight.

MYTH Gout doesn't discriminate between rich and poor, fat or thin, men or women. Although gout has famously affected well known historical figures such as King Henry VIII and Benjamin Franklin, this depiction is unfair.

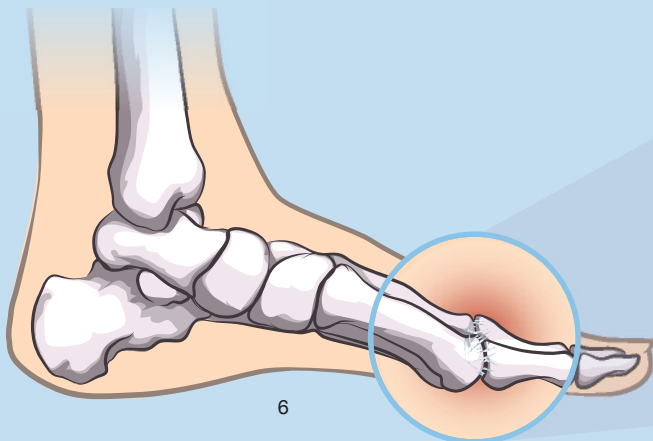
WHAT CAUSES GOUT?

Gout is caused by a build up of uric acid in your blood. Your body produces uric acid in order to break down substances called purines. Purines occur naturally in your body, but you also get them in certain foods and drinks, for example:

- Red meat
- Offal (kidneys, liver, intestines etc.)
- Shellfish
- Alcoholic beverages (especially beer)
- Sweetened soft drinks

Some people have high serum (blood) uric acid levels and never get symptoms. However, if you are prone to developing gout, deposits of needle-like 'urate crystals' will start to form in your joints, most usually the big toe. Your body sees these crystals as intruders and tries to deal with them by sending millions of white blood cells to the site. This, in turn, sets off pain and inflammation.

When you have been diagnosed with gout, your doctor may take regular blood samples to measure your 'serum uric acid' levels. This is a measure of how much uric acid is in your blood. Persistent levels over $360\mu\text{mol/L}$ (micromoles per litre) can lead to the formation of crystals and gout attacks.



I couldn't walk...The thing about the pain of gout, there's no relief. You can't let the bed clothes touch it, it's that sore...

Mark

WHAT ARE THE SYMPTOMS?

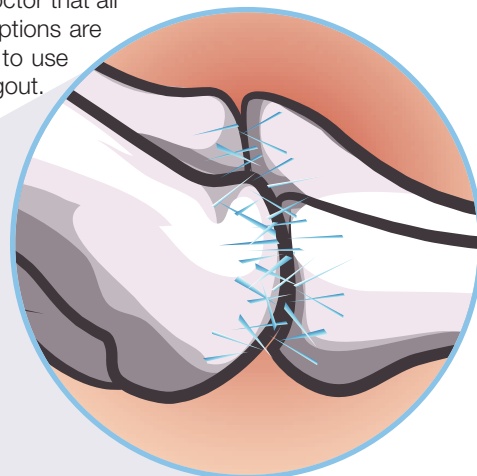
Gout attacks generally occur without warning, usually in the middle of the night, when your joints are colder. Local trauma, such as someone stepping on your toe in heels, can also lead to a flare. The big toe is commonly affected, but it may also occur in your ankles, hands, wrists, knees or feet.

Symptoms occur suddenly, with severe pain and inflammation. Your joint can be warm to the touch and any pressure may be unbearable. The pain will increase in strength, becoming most severe within 12 to 24 hours from the start of the attack.

Without treatment, your flare will probably resolve within 6-10 days, however, if you go to your doctor early you will be given medications that can significantly reduce this time.

If this is your first gout attack, the pain may reduce rapidly and eventually go away entirely. However, as gout progresses, attacks may take longer to treat and there can be a lingering pain for days or even weeks after.

NOTE: Some medications can have an effect on serum uric acid levels, leading to gout attacks. You should check with your doctor that all your prescriptions are appropriate to use if you have gout.



THE PHASES OF GOUT

Gout is a progressive condition with four separate, but connected, phases. How you might personally progress through these phases depends on many factors, such as what stage you were diagnosed at and how you are treated.

The phases are:

1. *Asymptomatic (without symptoms) hyperuricemia*

Many people have high uric acid, or hyperuricemia, without ever developing gout. However, a high serum uric acid reading over a long period of time is an indicator that gout may be a problem in the future.

2. *Acute gout, or acute gouty arthritis*

This is a classic gout attack or flare, as described previously. This can be for several reasons, such as a rapid increase or decrease in serum uric acid, a local injury, an alcohol binge or eating too much meat or shellfish. Medications you have been prescribed for other conditions may also be a factor.

Some people may only ever experience one gout attack or flare. For others, uncontrolled serum uric acid levels can lead to frequent attacks, with the time between them shortening as the condition progresses.

3. *Intercritical gout*

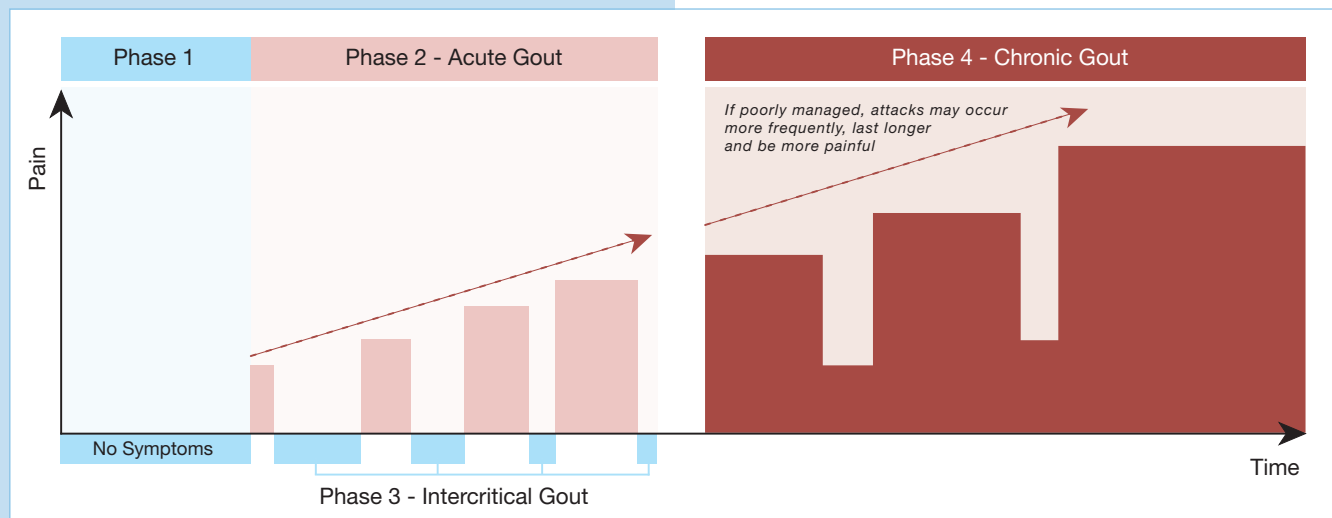
This is the period of time between attacks when you may experience no pain at all. However, even when an acute gout attack is over, the crystals that caused the problem are still present and it is important that they be treated.

4. *Advanced or chronic tophaceous gout*

Advanced or chronic gout can take up to 10 years or more to develop. By this stage, you will have substantial deposits of urate crystals in joints throughout your body. Some of these may even have grown large enough to be seen on the surface of your skin. These are known as tophi. Underneath these tophi, an x-ray or scan may show joint destruction which can be irreversible.

Unlike earlier, when you may have had little pain between attacks, by this stage some people may experience almost constant discomfort and significant loss of quality of life.

The goal of treatment is to avoid this advanced phase if at all possible. However, if you are already at this stage, certain medications can still help reverse damage and improve your long term health.



HOW IS GOUT DIAGNOSED?

Gout is usually diagnosed in one of two ways:

1. Your doctor has observed and treated you for one or more typical attacks as outlined under 'What are the symptoms of gout?', and is confident to make a clinical diagnosis.
2. In some cases, your doctor may want to rule out any other joint conditions and decide to send you to hospital for further tests. This will involve removing fluid from your joint with a very fine needle and syringe and examining it under a microscope.

Occasionally a doctor may also use ultrasound or x-rays to confirm their diagnosis and to check for any long term damage to bones.

When I was diagnosed with gout, I thought it was a joke. You associate it with people being inactive. I couldn't get over it!

Patrick

IMPORTANT

During a gout attack, the uric acid levels in your blood can be below their normal levels, for this reason, it is recommended that your doctor checks your blood concentration after the flare is finished for a more accurate reading.

HOW IS GOUT TREATED?

The good news is that although the underlying causes of gout cannot be completely cured, it is a relatively simple condition to treat. With proper care, attacks can be minimised and the chronic stage delayed or avoided altogether.

Treatment falls into two categories:

- **Relief treatments** are used during an attack and may be taken for a period of time afterwards
- **Prevention treatments** are long term medications used to prevent further attacks and are taken every day

There are a number of medications for both, some of which have been in use for a long time.

Relief treatments

An attack of gout is an inflammation in the area around your joint. Your doctor will prescribe a medication aimed to reduce discomfort and pain during the flare.

It is important to note that none of these medications affect your serum uric acid level.

Colchicine is a treatment which has been in use for hundreds of years. It is actually an extract of a plant known as the autumn crocus. It works to help reduce inflammation at the site of your flare. At high doses, there may be side effects, such as nausea and diarrhoea, but doctors nowadays tend to use lower doses which work well and can be used for longer periods of time.

MYTH OR TRUTH?

When the flare is over, the problem is over

MYTH When you have had an acute gout attack or flare, the urate crystals that have formed remain in your joints. They won't go away without proper treatment.



Non-steroidal anti-inflammatory drugs (NSAIDs) are designed to interrupt your body's normal response which leads to inflammation. They limit or block the chemicals in your body that cause the inflammation, and therefore reduce pain and swelling. As suggested by their name, they do not contain steroids and are generally used for short to medium periods of time.

NSAIDs work well if you take them early in a gout attack and can shorten the overall length of your flare. They may also help reduce pain later in an attack. Your doctor may prescribe lower doses for a period of time after your flare. This can reduce the possibility of future flares.

These products work well to reduce pain, however they do have some side effects. Common complaints include headaches, dizziness and upset stomach, but more serious problems such as stomach ulcers, bleeding and rashes may occur.

Steroids are a very effective treatment for acute attacks of gout and can offer a faster reduction of pain and swelling than colchicine or NSAIDs. They can be administered by means of a needle, directly into the site of your flare, or as a short course of tablets. Steroids are generally well tolerated, however some people are unable to take them due to side effects, other treatments or medical conditions where they are not recommended.

I was told - the flares are getting more frequent, you need to take the tablet!

Peter

MYTH OR TRUTH?

Gout can be cured

MYTH The cause of gout cannot be cured, but the cause can be treated and the condition halted or reversed. This will, however, require continuous treatment and/or lifestyle modifications.

Prevention treatments

Urate lowering treatments (ULTs) work to lower the level of uric acid in your blood. This reduces the likelihood of crystals forming, which in turn prevents further gout attacks and long term effects such as tophi and joint destruction.

ULTs generally reduce your serum uric acid levels quite quickly, however if you have had untreated gout for a while it may take a little longer. Unlike treatments for many other arthritic diseases, ULTs offer the possibility of reversing damage and can prevent further development of your gout altogether.

If you have been prescribed ULTs, you will need to take them every day for the rest of your life. This may seem a daunting prospect at first, however, these medications when taken correctly can greatly help to improve your condition.

If you stop taking your medication, symptoms are likely to return.

IMPORTANT

A short term side effect of ULT treatment may be a gout attack shortly after you start taking it, especially if you have been untreated for some time. The treatment is dissolving urate crystals already present in your joints into uric acid. This in turn goes back into your blood stream, which can dislodge other crystals causing a new attack. However, if taken every day, the ULT treatment will quickly reduce your uric acid to a level where this will stop happening. To ease any discomfort in the meantime, your doctor may prescribe a ULT plus a relief treatment, such as colchicine, until your uric acid levels are stable.



KEEP YOUR URIC ACID DOWN

Like many other chronic conditions, such as diabetes, blood pressure and cholesterol, gout has a target. If you have been diagnosed with gout, the aim of long term gout treatment is to reduce your serum (blood) uric acid to a concentration of $360\mu\text{mol/L}$. Once your doctor gets your uric acid to $360\mu\text{mol/L}$ they will try to keep it as close to that number as possible. In order to keep it at this number, you will most likely need to take ULT tablets each day for the rest of your life.

The reason why $360\mu\text{mol/L}$ is such an important number is that at that blood concentration the following is likely to happen;

- dissolving of uric acid crystals in the joint
- prevention of future crystal formation
- reduced joint damage
- prevention of future gout attacks

It is important that you and your doctor know what your blood uric acid concentration is. This is done by carrying out a simple blood test. You will find a helpful gout diary at the back of this booklet that will allow you to monitor your level.

With the help of your doctor you can...

...Keep your URIC ACID down!



Keep your URIC ACID down

WHAT CAN I DO TO CONTROL MY GOUT?

A first gout attack can be a shock and may occur without any warning symptoms or apparent lifestyle risk factors.

Gout seldom exists on its own and may be related to, or affected by, many other conditions such as high blood pressure, high cholesterol and type 2 diabetes. Unlike these conditions, however, gout lets you know it is there in a loud and painful manner! This can be a good thing - the symptoms are so extreme, it may be the wake-up call you need to start taking more care of your overall health.

The following is some general advice, however the first place to start is with your doctor or nurse, who will be able to give you practical guidance on your individual needs and refer you to an expert who can help if necessary.

Watch your weight

Being overweight has many negative health implications. An above average Body Mass Index (BMI >25), especially with excess weight around the waist and stomach, has been linked to an increased risk of gout. BMI is a measure of body fat based on height and weight that applies to adult men and women. There are many calculators available on the internet that will help you measure yours.

Before embarking on a programme to lose weight, you should always consult with your doctor. In relation to your gout, there are some additional factors you need to consider:

- **Avoid rapid weight loss** – it can increase your uric acid levels and lead to gout attacks. A slow and steady loss of 1 or 2 pounds (0.5 kg or 1 kg) per week is recommended.
- **Avoid high protein (Atkins style) diets** - many high protein foods are high in purines which cause an increase in uric acid levels and gout attacks.

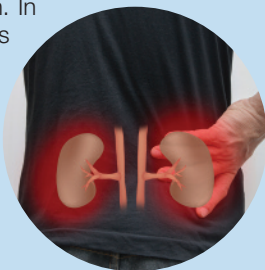
Increase your activity levels

The message is simple – move more. Gentle moderate exercise such as walking, swimming, cycling, golf, gardening, even housework will all help your general fitness and reduce the chance of gout attacks. Strenuous muscular exercises should be avoided until your gout is under control as they may put pressure on your joints. Again, your doctor will advise on what is best for you.



Look after your kidneys

Your kidneys have a hugely important role in the processing of uric acid and excreting it from your body. This is why people with chronic kidney disease sometimes also develop gout. Maintaining healthy kidneys is extremely important not only for your gout but for your overall health. In addition to all the other advice in this section, your kidneys specifically will benefit if you:



- Cut back on salt
- Drink enough water
- Limit your alcohol intake
- Increase your physical activity
- Lose weight if you are overweight
- Quit smoking
- Take all medications you are prescribed for high blood pressure, high cholesterol and/or type 2 diabetes exactly as prescribed by your doctor
- Keep 'your numbers' within the recommended ranges for control of these conditions

Safe drinking guidelines

A standard drink is:

- One pub measure of spirits (35.5ml)
- One small glass of wine (12.5% volume) – a bottle contains about seven standard drinks
- A half pint of normal beer
- One alcopop (275ml bottle)

Safe drinking guidelines are:

- Up to 11 standard drinks per week for women and
- Up to 17 standard drinks per week for men

Binge drinking can lead to a sudden gout attack and it is advised that you have at least three completely alcohol free days per week.

For more information about safe drinking, go to www.drinkaware.ie

Watch what you drink



DO - Drink enough water

Staying hydrated is extremely important for everybody. When you have gout, it is even more important as dehydration can cause a gout attack.

Water is the best form of hydration, and you should try to get into the habit of carrying a bottle with you wherever you go, particularly in hot weather or when exercising. Tea and coffee also contribute to your daily intake, however too much caffeine can be dehydrating.

Limit



DON'T - drink too many sugary drinks

Drinking anything containing fructose, such as fizzy drinks, can increase your risk of a gout attack. Choose diet or zero options. This will also help with weight control.



DON'T - drink too much alcohol

Although, as discussed earlier, drinking too much alcohol is not the only reason you might get gout, and indeed many non-drinkers suffer from the condition, it is an important contributing factor for gout attacks.

MYTH OR TRUTH?

Sugary soft drinks don't effect gout

MYTH Sugary soft drinks greatly increase the amounts of gout causing compounds (purines) in your body. If you are reducing your alcohol intake, substituting for diet or zero options is better.

Watch what you eat

As discussed earlier, gout is caused by an excess of uric acid in your blood. Your body produces uric acid in order to process purines. Purines are found in different quantities in different foods. Controlling uric acid levels in your blood is the key to controlling gout, therefore controlling your purine intake will help you manage your gout.

When you are diagnosed with gout, your doctor may suggest that you see a dietician. A dietician can advise you on an eating plan that will take into account any other conditions you may have such as high blood pressure, high cholesterol or type 2 diabetes. They will also advise on what is reasonable for you and your lifestyle. Cutting out purines completely may not be practical or desirable and may not benefit your overall health to any great extent.

Having said that, we can break down the general dietary recommendations for gout into two broad categories:

Food and beverages to limit:

- Red meat, especially offal, e.g. liver, kidney
- Shellfish or oily fish
- Alcohol, especially beer and spirits
- Sugar-sweetened soft drinks and juices
- Excessive fruit intake

Food and beverages that may, in moderation, have a beneficial effect:

- Slimline milk and other low-fat dairy products
- Purine-rich vegetables such as spinach, mushrooms, cauliflower
- Grains, such as porridge and cereals
- Legumes such as peas, beans, nuts and lentils
- Coffee

Limit



Recommended



MYTH OR TRUTH?

You shouldn't eat vegetables containing purines, e.g. asparagus

MYTH Although some vegetables contain a higher degree of purines than others, there is no evidence that limiting their intake has an effect on serum uric acid levels.

HOW CAN I AVOID GETTING AN ATTACK?

Keep your URIC ACID down

As discussed previously, many medical conditions have a target - you can monitor how well you are controlling your blood pressure, cholesterol or diabetes when your doctor tells you a particular measurement is within the normal ranges.

Gout also has a target – that of your serum uric acid level, the amount of uric acid in your blood.

It is easy to remember – $360\mu\text{mol/l}$ – 360, a full circle. If you can keep your uric acid at or below $360\mu\text{mol/l}$, you will be less likely to experience flares and long term effects can be limited or eliminated altogether.

Watch out for triggers

Over time, you will get to know what your potential triggers for a gout flare are. It can be anything which upsets the normal balance of your body, including:

- Dehydration
- Surgery
- Under eating
- Over eating
- Use of medicines for other conditions
- Chemotherapy
- An alcoholic binge
- Immobility

Keep taking the tablets

It sounds very basic, but it really can be hard to get into a routine of taking your tablets on a daily basis, especially if you feel quite well. However, if your doctor has prescribed a long term treatment for you it is because you need to take it in order to keep your uric acid levels under control. Remember, gout is very treatable and taking your tablets correctly can dramatically improve your symptoms.

Many people find it useful to:

- Set a daily reminder on your watch or mobile phone
- Keep tablets where you can see them as part of your daily routine, e.g. on a bathroom shelf or on a bedside cabinet
- Link taking your tablets to a daily routine like cleaning your teeth, so keep the tablets next to your toothbrush

If you have several tablets to take, it may help to buy a pill box and divide them into days. Your pharmacist may offer a similar service.



WHAT SHOULD I DO WHEN I GET A GOUT ATTACK?

You have probably already taken the first step – speak to your doctor. Remember gout is a very common condition, possibly affecting 1 in 40 people, so your doctor will have seen it all before. The longer you leave it, the more pain you are likely to suffer and the greater risk of long term damage to your joints and future mobility.

During a gout attack or flare, you can ease the symptoms by doing the following:

- Rest the affected joint as much as possible
- Place an ice pack on the affected area. This can help to reduce pain and inflammation. Don't let ice touch your skin directly. A pack of peas wrapped in a towel is ideal
- Take painkillers as prescribed by your doctor
- Take all other medication as prescribed
- Avoid any unnecessary contact with the joint
- If your toe is affected, try wearing larger shoes or Crocs® – sandals may leave you more vulnerable to knocks
- Bedding may be a problem at night – duvets are generally lighter than blankets but sometimes even sheets can irritate. Ask your doctor or nurse about special guards to stop bed sheets touching your feet
- Drink plenty of water and avoid alcohol

It's like having broken glass in your joints - the crunch, the pain!

John

TALKING TO YOUR DOCTOR

Whether your visit is specifically related to your gout or not, it is a good idea to use it to discuss your gout management, general lifestyle and any potentially related issues.

For example, you could ask questions such as:

- How does the treatment you have prescribed help my gout?
- How often should I be taking my treatment?
- What should I do if I miss a dose?
- What should I do if my symptoms are not relieved when taking gout medication?
- Will my gout medication interact with any other treatments I am taking?
- Will any of my current medications increase my level of uric acid? If so, are there any alternatives I can take?
- What is my uric acid level?
- Is my uric acid level below or above my target?

A solid understanding of your condition and a good relationship with your doctor is essential not only to managing your gout, but your overall health in general.



Keep a gout diary

On the next two pages of this booklet you will find a gout diary. The purpose of this diary is to allow you to monitor your condition. Added to this, a diary of this kind will greatly help your doctor to better tailor your gout treatment in order to lessen the disease's effects on your life. The diary is split into two sections:

Gout attacks monitoring

The first section allows you to record some vital information about your gout attacks, such as how long they last and how painful they are. If gout is treated correctly, the time between flares should increase, while the level of pain during the attack should reduce. This information will be very valuable to your doctor.

Serum uric acid (sUA) monitoring

The second section of the diary allows you to monitor your serum uric acid levels, which will be measured by your doctor by a simple blood test. As discussed previously in this booklet, gout like many other chronic conditions has a target related to it. The serum uric acid (sUA) target level for people with gout is $360\mu\text{mol/L}$ and your doctor will try to get yours as close to this number as possible. This is the concentration at which your condition is best managed, ultimately leading to less flares, if any, and reduced joint damage. When you visit your doctor, remember to ask him or her what your most recent sUA level was and write it down in this booklet. If your blood level is not down to $360\mu\text{mol/L}$, your doctor may need to change the dose of your long term gout treatment.



Make contact with Arthritis Ireland

You can learn more of the skills that will help you deal with arthritis on one of Arthritis Ireland's self-management programmes.

Living Well with Arthritis, our most popular course, focuses on what you can do for yourself, how to get the most from your healthcare professionals, handling pain, fatigue and depression, relaxing and keeping active. It is a great chance to meet and share tips with other people who know what you are going through.

Looking for somebody to speak to about living with arthritis? Why not give the Arthritis Ireland Helpline a call. All our volunteers are living with arthritis and as such have a strong understanding of what it is like to live with a lifelong condition like arthritis. They would be happy to hear from you if you are in need of a listening ear. Call 1890 252 846.

Arthritis Ireland runs *Living Well with Arthritis* self-management programmes to enable people to manage their condition more effectively and take back control of their life. Visit www.arthritisireland.ie or LoCall 1890 252 846 to find out about a course near you.

YOUR GOUT DIARY

Gout Attacks Monitoring				
	Date of gout attack	Duration (days)	Severity of pain (1 - 10)	Comments
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Serum Uric Acid (sUA) Monitoring			
	Date sUA checked	sUA reading (μmol/L or mg/dL)	Comments
1			
2			
3			
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7			
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Notes

Notes

Become a friend of Arthritis Ireland

Help manage the pain of arthritis

€3 per Month



While some people with arthritis lead active, productive lives, many more are not so lucky. Unfortunately, there is no cure for arthritis but there are many ways to limit the effect on a person's life.

Your support of just €3 per month, will not only provide you with the information you need to manage your arthritis but it will also help to provide the information and support services in communities throughout Ireland needed to:

- 1.** Ensure that NO child faces the prospect of growing up with arthritis alone through our JA programme
- 2.** Help people deal with the sense of loss and depression that arthritis can bring through our peer support and national Helpline service
- 3.** Help people maintain their mobility and independence through our national exercise programme
- 4.** And help people to break the constant cycle of pain through our self-management programmes

Additional benefits:

As a friend of Arthritis Ireland you will receive:

- 12 Month subscription to our BIG NEWS magazine which is packed full of inspiring stories and ideas from our volunteers, fundraisers, branch members and friends. BIG NEWS will keep you informed on everything going on in Ireland's arthritis community.
- An up-to-date information pack on arthritis.
- A useful arthritis friendly gift.*
- A chance to have your say in the direction of Arthritis Ireland by having voting rights at our AGM.



To read more about how to manage arthritis and to learn about the many ways your support will make a BIG difference visit arthritisireland.ie

**Free gifts are subject to change and supply.*

Become a friend
today

€ **3**
per
Month

Yes, I would like to help manage
the pain of arthritis

☐ **Monthly* payment of €3** (€36 per annum)

*Monthly payments by Direct Debit only. See reverse for details.

PERSONAL DETAILS

Name:

Address:

Telephone:

Email:

DOB:

Do you have arthritis? Yes ☐ No ☐

If Yes, what kind of arthritis?

CREDIT CARD (Once off annual payment of €36)

€36 per annum ☐ Other (€36 + donation) € €20 per annum OAP ☐

Please charge by: VISA/VISA DEBIT ☐ Mastercard ☐

Card No:

Exp date: CVV:

Signature:

Date:

CHEQUES AND POSTAL ORDERS

Payable to Arthritis Ireland

If you would **not** like to have voting rights at
our AGM please tick here. ☐

Please turn over for Direct Debit payment details >

Payment details



SEPA DIRECT DEBIT MANDATE

**Please complete all marked fields*

By signing this mandate form you (A) authorise **Arthritis Ireland** to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from **Arthritis Ireland**. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

Debtor Name*

Debtor Address*

City / County*

Debtor A/C Number IBAN*

Debtor Bank ID Code BIC*

Type of Payment*: Recurrent ☐ One Off ☐

Creditor Name: Arthritis Ireland

Creditor ID: IE90SDD360028

Creditor Address: 1 Clanwilliam Sq, Grand Canal Quay, D 2

Unique Reference No. (URM) For Office Use Only

Signature(s*)

Date of Signature*

For Arthritis Ireland Information Only:

Amount of Direct Debit**

Date of First Payment*

****Arthritis Ireland will debit your account for the amount indicated above from the first day of each month until further notice.**

Note: If you are a PAYE tax payer or are self employed, gifts of €250 in one year (€21 per month) could be worth an additional 31% to us, at no extra cost to you.