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How are patients on allopurinol for gout being monitored in primary care?

Background
Gout is an important indicator for cardiovascular disease, and a common cause of primary care consultations. National Institute for Health and Care Excellence (NICE) guidelines outline recommendations for patients on allopurinol for gout: annual serum urate measurements, alongside assessment of kidney function and cardiovascular risk factors.
Aim
To identify whether the monitoring of patients on allopurinol reflects NICE guidelines.
Method
Retrospective searches carried out at a large GP practice identified the proportion of patients on allopurinol who had had their serum urate measured between mid-August 2023 and mid-August 2024. For these patients, further searches were carried out to identify what other relevant tests they had had.
Results
It was found that 21% of the patients on allopurinol had had their serum urate measured in the last year (35/166). Of these patients, 51% (18/35) had their latest serum urate within the target range. There was no standard set of tests done alongside serum urate, with some patients being extensively investigated and others minimally.
Conclusion
The monitoring of patients on allopurinol is inadequate; improvements must be made.
Patients lacking a recent serum urate measurement are to receive a text asking them to arrange a blood test as soon as possible. Text reminders are to be set up for all patients on allopurinol to book annual blood tests. Patients whose serum urate exceeded the target are to be invited to make an appointment to discuss this. A standard gout phlebotomy order is to be created, to cover all recommended annual monitoring.

Katherine Scott, University of Oxford

Katherine Scott, University of Oxford
Email: katherine.scott@gtc.ox.ac.uk

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