



## A case report: A Gout Masquerading as Osteomyelitis

Anthony M<sup>1</sup>, Ganesan P<sup>2</sup>, Satriya SHA

Department of Orthopaedics, Hospital Tengku Ampuan Rahimah (HTAR)



### INTRODUCTION

Gout is one of the most prevalent inflammatory arthritis among adults which increases with age and has a predilection for males. Radiograph findings in chronic tophaceous gout include well-defined “punched-out” lesions with overhanging edges, soft tissue nodules, and often asymmetric involvement which can mimic those of osteomyelitis(OM). The purpose of this case study is to present a rare case of extensive joint destruction due to gout which treated as OM where patient presented with clinical as well as radiological findings mimicking acute OM.

### REPORT:

A 52-year-old nondiabetic male with a nearly 30-year history of gout (but defaulted medication) presented with history of fever with left big toe swelling and pus discharge. Patient was treated with iv unasyn and underwent surgical debrided with bone curettage. However, intra-operative culture showed present of tophus and no bacterial growth. Eventually patient symptoms resolved once anti-gout medication restarted.



**Figure 1:** Left foot X-ray showed destructive bone of distal phalanx of big toe.

### DISCUSSION:

Acute gouty arthritis and infections such as OM in the foot can present with very similar findings. Appropriate diagnosis of gout as demonstrated in the case above, results in different and definitive treatment choices and spared the patient further unnecessary antibiotic therapy or surgery. Surgical intervention is rarely indicated for the treatment of gout and is typically reserved for cases where severe

deformity or infection is present. It is important for the surgeon to be aware of the radiological manifestations of acute gout that can resemble infection in order to avoid inappropriate diagnosis and delay in adequate treatment. Both surgical and conservative, multi-team approaches much be considered in the treatment of gout to provide a definitive treatment plan which resulted in a functional foot and satisfied patient.

### CONCLUSION:

Although gout is perhaps the most understood disease in terms of cause and treatment, delays in establishing a diagnosis and commencing treatment, in addition to poor compliance from the patients, contribute to poor management and outcomes associated with gout.

### REFERENCES:

1. Osteomyelitis Secondary to Chronic Tophaceous Gout: A Case Study. Sadie Wylie DPM, Christopher Cullum1 DPM, Jeffrey Hospital-Mercy Health, Cincinnati, Ohio.