# Example of GPs script:

Patient contribution How are you doing, Lee?

Oh dear, tell me more?

Okay, it's all about the toe?

Can I check, is there any other issue that you were hoping to raise today?

<u>ICE</u>

Yeah, so you think it was a muscular thing? (the shoulder)

Okay, worst case scenario with the shoulder?

So, what were your thoughts about what you were hoping I would do for you today?

Yeah. Something that would be effective for your gout pain, yeah.

Right, okay, but were you looking for something that would help with your shoulder at the same time? Not really?

That's by-the-by, so maybe we could talk about options for you with regards your shoulder, but we're mainly focusing on the gout?

Worst case scenario, were you thinking of anything else? Not really?

Okay, what would she like me to do for you today? Just to fix you so you can go to Centre Parcs?

Can I check with you, have we ever talked about the pros and cons about the different types of treatment we've got for acute gout, with you?

# PSO

Domestic arrangements, you mentioned you were off this weekend, and you're going to Centre Parcs with your family?

Who's at home with you?

What sort of things do you do when you're across there?

Who's the youngest in your (extended) family?

Sounds like you still do a lot of travelling, doesn't it?

#### Red flags

Can I check that you're not taking anything that might be not so safe for you? You're not using any anti-inflammatory painkillers persistently or consistently?

You've got no problems with your breathing and no pains in your chest?

To be fair, your blood pressure has been well controlled, and we've been relatively happy with that.

# Not feeling unwell in yourself?

#### Focussed history

Okay, and have you found anything else in this part of the world that works for it?

No swollen joints?

# And the gout only ever affects this big toe?

# Always the same one, isn't it?

You take a tablet to help you when your gout comes on, what do you take?

# **Focussed examination**

Why don't we take a peek at it for you? We've done your weight relatively recently, haven't we?

#### Identify problem and explain diagnosis

We've got you at 114kg, so maybe that's something that we could touch upon. Are you getting support from our diabetes team?

Well, put yourself back together. It doesn't seem to be anything else, and I think it's reasonable to treat it at the first suggestion, as gout.

# Check understanding

Does that make sense? Okay, questions?

#### Develops management plan / shares management plan

But because you're on treatment for your blood pressure, then it's (ibuprofen) not the best treatment, because it puts your blood pressure up. We could offer you something safer, so we can come back to that.

Okay. I'm not going to do your blood pressure, because you've had - you're having that looked after by Janet and she's targeting your weight, but can I ask you, perhaps, to talk with Janet after you've listened to our website, about weight and about diabetes. So, we can see if we can help you with that. Is that okay?

Well if you're consistently—repeatedly getting more of the gout episodes, we may review the dose of the allopurinol, come back to that. So, I'm going to recommend a treatment for your gout, okay. It's called colchicine, have you ever used it before? Have you heard of it before? So, it's an effective treatment that works consistently well with the majority of people that get gout.

If you take it in too high a dose, it might make you nauseated or cause diarrhoea, so we just recommend that you restrict it to one tablet twice a day, whenever the gout's there. Okay?

You can use it as a preventative treatment, too, but we tend mostly to confine it just to using it if we're increasing your dose of allopurinol, just to make sure that as we're increasing the dose of allopurinol that you're not prone to another episode of gout. So, for treatment, one tablet twice a day, and usually ten days' worth is more than enough.

Okay. So, take it while you've still got any suggestion of symptoms and then when the symptoms have gone for three or four days and then you can stop it.

I would keep on the allopurinol – it's important that your allopurinol is consistent, and you're using it all the time, so don't stop and start it. But, if you're finding you're having frequent episodes of gout, then we really ought to be reviewing whether that's the right dose for you. Does that make sense?

So, diet's important.

Also, alcohol can be important, and dehydration can be important, so there may be aspects of your diet and your drinking habits...

You don't think it's anything to do with Australia; how long have you been back now?

Yeah, okay. So, some lifestyle changes while you were travelling, I guess? Because sometimes when you're on a flight, you can be prone to getting a bit dehydrated, as well.

Oh, yeah, in Singapore, I've worked there for thirty years – using that as a base and travelling around all over the Pacific, and I've got lots of colleagues and ex-business associates out there and they've spoiled me and my wife like you wouldn't believe.

Do we need to explore anymore information about what we need to know about your gout?

Today? No? You're quite happy to be able to access information if you were interested in it. One of the resources that you might think about using is patient.info, but I'm going to talk about our website at the moment, if that's okay with you?

Our website has got some audio material that could be helpful for you with regards to your choices as a patient with diabetes.

So, I'm going to give you this prescription today.

And yes, I do want you to continue on with your allopurinol. If that on its own is not sufficient, then we may think about adding in the ibuprofen – you can buy that over the counter – but, I don't recommend that you use ibuprofen much because of your risk of it causing your blood pressure to go up.

And it can irritate your stomach as well, so when you are using ibuprofen, then take it after food. But if you've got rid of that gout, take three of your over-the-counter ibuprofen tablets, which is a total of 600mg, three times a day in addition to this one, but this is safer for you.

I'll give you two courses – you've got one to use now and one to use if you're getting another episode, so at least you've got them to hand, even if you're travelling, alright?

#### Safety net and follow up

And it could be helpful when it comes to your choices in terms of helping you with your weight loss, because clearly, it's gone up a bit, and that ties in with your diabetes. If we can help you with your weight, often your diabetes will be much less of a problem. Is that okay?

Take it twice a day, and if it's not having an impact and it's absolutely throbbing, then by all means you can take ibuprofen. But, for as short a period as you can get away with.

And if you ever find that you've got black, tarry poo, or persistent upper tummy pain, think about bleeding from your stomach, and we need to see you urgently.