

A person's leg in white sneakers and black leggings is shown in mid-air, kicking a large red punching bag. The background is white.

A ROYAL PAIN...

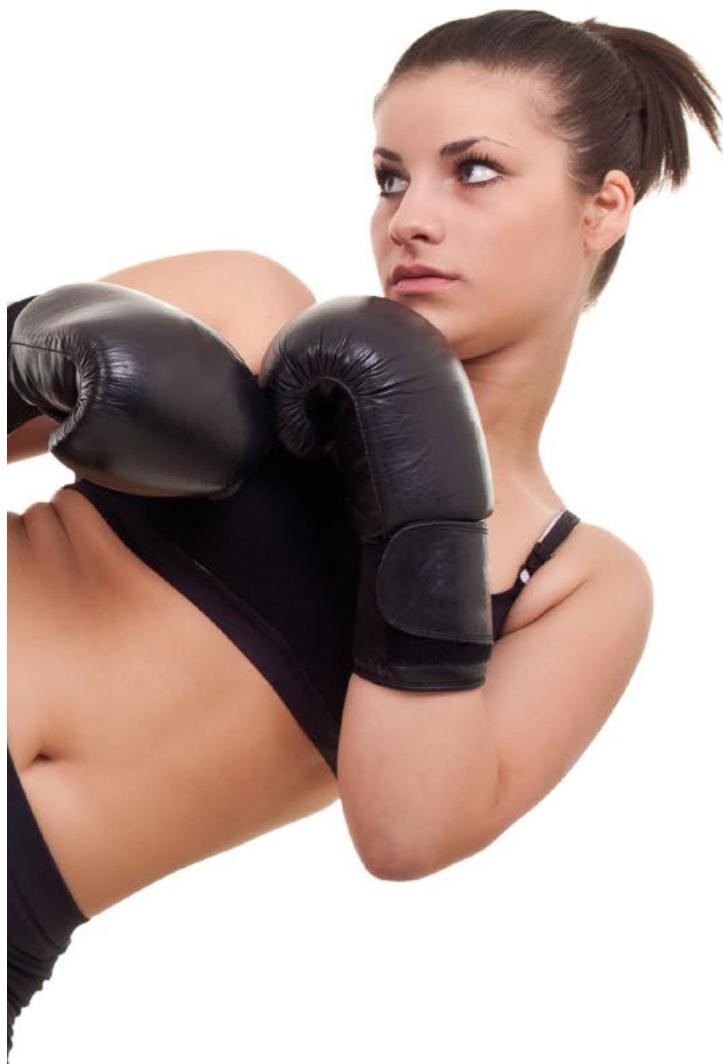
# Out with

## Natural ways to prevent & treat an increasingly

By AMY ROTHENBERG, ND, DHANP

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# Gout! A common condition



THE ONLY WAY TO DESCRIBE WANDA IS WITH ONE word: *exuberant*. At 64, she still works as a therapist, spends much of her free time caring for her grandchildren, and actively volunteers in her community. She's had her share of health problems—a history of bad sinus infections, acne rosacea, a challenging menopause, and high blood pressure—yet I would describe her as someone in basically good health, with high vitality and a clear mind. Whenever I see her name on my patient roster, I smile.

## Sudden attack

This time, Wanda sought my help for a new complaint: gout. Gout is an extremely painful condition characterized by recurrent attacks of acute inflammatory arthritis. Usually one joint becomes swollen, red, tender and warm. About 50% of the time, it is the big toe, but other joints or the kidneys may be involved.

Gout occurs when uric acid (a natural waste product of metabolism that eventually gets excreted in the urine) builds up in the blood to an excessive level and starts to crystallize. It is these crystals that land in the joints, tendons, or surrounding areas and cause terrific pain and galloping inflammation. Sometimes crystals form in other places, such as under the skin or in the urinary tract (kidney stones).

Conventional care may include nonsteroidal anti-inflammatory drugs (e.g., ibuprofen, naproxen, etc.), steroids, and colchicine to relieve pain and decrease inflammation. When a patient is no longer having an acute flare-up, the goal is to reduce uric acid levels in the blood with dietary and lifestyle changes. For those unable or unwilling to make these changes or for whom such changes are not sufficient to keep uric acid levels in the normal range, two main drugs, Allopurinol (a uric acid blocker), and Probenecid (which aids the kidneys' in removing uric acid) are prescribed to prevent further flare-ups.

## "Disease of kings"

Gout is one of the oldest known forms of arthritis, with evidence of it dating back more than 4000 years to ancient Egypt. Historically, gout was known as the "disease of kings" because it tended to afflict royalty and those who had the means to indulge in "rich" diets heavy on meat, alcohol, and fats.

In our time, the incidence of gout has been rising sharply, as might be predicted by certain risk factors. These include dietary issues (see sidebar on the next page), alcohol consumption, high blood pressure, the use of diuretic medication, being overweight, metabolic syndrome\* (high blood sugar, high triglycerides, low "good" cholesterol), osteoarthritis\*\*, and chronic kidney disease. Up to 4% of people in the developed world will have an issue with gout at some point in their lives, and about 8 million people in the U.S. experience it. Men are more likely to have gout, but women become increasingly susceptible after menopause. About 20% of gout sufferers have a family history of gout and may be genetically predisposed to it.

## Gout will make you shout

Anyone who has suffered with gout can attest to the exquisite pain—it can really take your breath away! Wanda was no exception, and she offered what might be described as a spoken word piece of drama to elaborate: “AMY! Horrible, Just horrible! My left toe, like a sausage, blew up like it was going to explode! Red and bulging and hot like a coal! I can’t bear anything touching it! Dead of winter, and I have to go in flip-flops—I am so over-sensitive and so irritable I feel like I am going to pop a gasket!”

Regardless of her complaint, Wanda was always graphic and exceedingly forthcoming; I never had to wait long for her to describe her symptoms. A patient I had

seen over decades, she knew what kind of information I needed: details and lots of ‘em!

What makes it better? “*Nothing!*” What makes it worse? “*Everything! Touch, a breeze of air going by the toe, motion, walking, noise, commotion.*” Any other symptoms elsewhere in your body while the toe is aggravated? “*Loose stools and a general moderate headache.*” Shift in mood? “*YES! I’m a bear!*”

### Risk factors for Wanda

I knew from our long history together that Wanda had hypertension and was on a diuretic for that. Gout risk factor #1 for her. I also knew she did not have a good diet—she ate too much red

meat and drank too much alcohol. Risk factors #2 and #3. She easily carried 30 pounds of extra weight on her not quite 5’2” body. Risk factor #4. With my ongoing encouragement and support, and after having tried lots of different activities, Wanda had finally committed to regular exercise in recent years—but I had been less successful in getting her off her meats, her alcohol, and her beloved sweets. Well, what can I say? Pain is a great motivator! Let me tell you about the homeopathic remedy I prescribed for her, and then we can discuss the dietary, lifestyle, and naturopathic approaches predictably effective in helping treat people with gout [see “Rout Gout, Naturally” below].



# Rout Gout, Naturally

Eat, drink wisely to avoid the “disease of kings”

The body naturally makes uric acid, a waste product that gets excreted in the urine. It is when uric acid levels get too high that needlelike uric acid crystals can form in joints and elsewhere, causing gout pain. So our main goal with dietary and lifestyle changes for gout sufferers is to reduce those levels of uric acid and decrease inflammation.

### Hold the herring

Uric acid is formed as the body breaks down purines; purines are found naturally in the body as well as in the foods we eat. Some foods, however, are very high in purines—organ meats, anchovies, herring, asparagus, and mushrooms—and that is the list of foods I recommend that gout sufferers avoid altogether. In general, I have patients limit meat, poultry, and fish, as animal proteins are all high in purine. Daily intake should be kept to 4 to 6 ounces a day—which is *not* very much at all. You can make up that protein by eating nuts, legumes, and high-protein grains like quinoa.

### Eat cherries & berries

A gout patient’s main dietary focus should be on whole grains, nuts, small portions of chicken or fish, seeds, soy in moderation, and fruits and vegetables. Berries of all

kinds and especially cherries help to neutralize uric acid. I have patients aim for one 8-ounce glass of cherry juice and at least 1 to 2 servings of berries per day. Frozen can work, too, and are often less expensive and easier to find depending on where you live. Fresh cherries, canned cherries (without any added sweeteners), frozen cherries, or cherry juice will all positively impact uric acid levels. Cherries work because they are strongly anti-inflammatory, and you can use red cherries, darker cherries, red sour cherries, as well as yellow cherries.

### Drink more water

Since dehydration can contribute to high uric acid levels, drinking enough water is paramount for gout patients. I generally encourage my patients to aim for one 6-ounce glass of some beverage every 2 to 3 hours while awake. Herbal tea, hot or cold, is fine



## Remedies that worked

Early on in my years of seeing Wanda, she had often received *Sulphur* as her constitutional remedy, and more recently, *Lachesis*. The way she took up space in the room with her enthusiasm and directness, along with the energy with which she lived her life pointed to these two remedies. Twenty years prior, *Sulphur* had helped her more than once when she developed lingering sinus infections. She would be

tired and dragged out, her acne rosacea would flare at the same time, and she would have loose stools that irritated her bottom—all classic *Sulphur* symp-



toms. *Sulphur* helped, along with other naturopathic approaches, to address her general tendency for acne rosacea with which she had struggled for some years. Both her skin and her sinuses were no longer issues.

About ten years later, during her menopausal years, the *Sulphur* wasn't offering as much help. Instead, *Lachesis* helped stem the almost constant hot flashes and bad moods. She felt it calmed her temper and made her less critical of her husband; indeed, it is one of the remedies used most often for easing meno-pausal symptoms. Both *Sulphur* and *Lachesis* are indicated for people who are hot-blooded, get inflammations easily, and experience rashes and eruptions of

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various kinds. People needing these two remedies often have hypertension and can get worked up emotionally.

### "It feels like my toe will explode"

Wanda's gout was further characterized by a sensation of constriction and pressure in the toe—and elsewhere in her body as well. She felt like her breathing

(consider Celestial Seasonings Berry tea.) I have people make a pitcher and put it in the fridge, or add lemon or lime juice to water, which may make water more palatable for those who do not love drinking water. I have also seen over many years of practice, that if patients train themselves to drink a bit more, they will actually develop a more natural thirst.

Coffee and caffeine should be avoided as they tend to be dehydrating, even in small amounts. Alcohol should be avoided as well, since it interferes with ridding uric acid from the body; beer seems to be the worst since it also has a high purine content.

### Curb fats & fructose

Saturated fats lower our ability to get rid of uric acid, so do not use them. I also ask patients to avoid all the whites: white flour, white sugar, and processed foods. Foods that are sweetened with high-fructose corn syrup should be side-stepped (for a myriad of reasons), but, in this case, especially because high-fructose corn syrup directly increases uric acid levels.

### Focus on flax

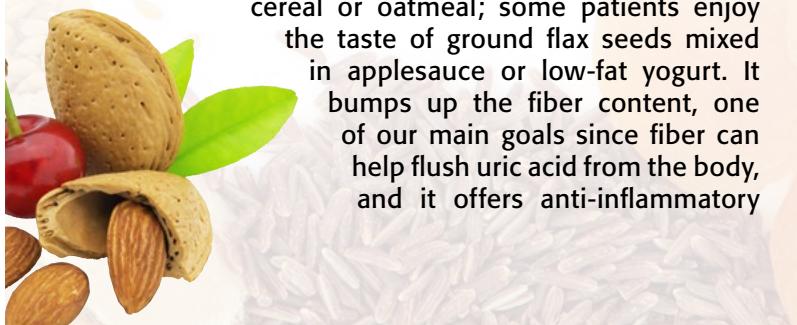
Flax seeds are a great addition to salad or ground up on cereal or oatmeal; some patients enjoy the taste of ground flax seeds mixed in applesauce or low-fat yogurt. It bumps up the fiber content, one of our main goals since fiber can help flush uric acid from the body, and it offers anti-inflammatory

effects as well. I recommend one to two tablespoons a day. Flax seeds go rancid quickly once ground up, so if you buy a whole package of ground flax seeds, roll the bag down after use, put a rubber band around it, and store in the freezer. Just don't forget about it in there! Of course you can grind your own, too, as flax will not go rancid in its whole seed form; if you prefer this, grind in small batches and keep unused portions in the freezer or fridge.

### Supplement sensibly

I recommend a small number of supplements that have been known to either lower uric acid levels or decrease inflammation in general, or both! Dosages here depend on the patient's specific symptoms, weight, and other medications or supplements they may be taking. Please consider working with a licensed naturopathic doctor (see [www.naturopathic.org](http://www.naturopathic.org) for a referral near you) or other qualified practitioner for a plan tailored to you or your loved one. Just because it's a supplement, does not mean it cannot do harm.

1. Vitamin C with Bioflavonoids
2. Quercetin—a bioflavonoid that reduces inflammation.
3. Chromium picolinate—helps to reduce uric acid levels.
4. Fish oil—to reduce inflammation
5. Probiotic—to help reduce inflammation and to create a better internal bacterial environment.



# One of the beautiful things about homeopathy is how a well-selected remedy can help the whole person feel better, not just the body part in question.



was a bit constricted (though her lungs were clear), and she felt a kind of tension in her legs. She also felt much worse in all ways at night and upon going to sleep. She kept repeating herself, saying things like, “*It feels like my toe is going to blow up.*” This sensation of constriction and tightness throughout her body along with the nighttime aggravation of her symptoms, her sleeping into an aggravation, and her increased talkativeness all pointed to *Lachesis*. The exquisite sensitivity to pain and the sheer degree of irritability also led me to *Lachesis*. In addition, I noted that the color of her toe and surrounding area was a deep, dark red—another *Lachesis* indication—and unlike the brighter red you might expect to see in a person needing *Sulphur*.

When a patient has done well with a constitutional remedy in the past (as Wanda did with *Lachesis*) but they now present with an entirely new set of symp-

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toms, I always check to see if the new symptoms fit the previously effective remedy. If they do and if the patient’s temperament still fits, it is appropriate to give another dose of that previous constitutional remedy. If, however, I see big shifts in the patient’s emotional state or in their physical general symptoms (e.g., food cravings, body temperature, thirst, etc.), then I train my eye to look for another, different remedy. In Wanda’s case, although her symptoms appeared new, they were actually “more of the same,” so I prescribed *Lachesis* 200c.

## Sweet relief

Of course, the proof is in the pudding, and Wanda reacted beautifully to the remedy, with quick improvements in her gout as well as in her mood and overall feeling of well-being! Within two days, the toe swelling was considerably reduced, as was the pain. She never needed to take the conventional anti-inflammatories, steroids, or colchicine that most people take to relieve an acute attack of gout, and within a short time, her gout symptoms completely disappeared. To me, seeing a person’s acute physical symptoms resolve is very heartening, but I also liked hearing that Wanda felt less irritable and less explosive overall. As her inflammation calmed down, so did she. Likewise, her bowel movements reverted to normal for her, and her headache went away. One of the beautiful things about homeopathy is how a well-selected remedy can help the whole person feel better, not just the body part in question.

I did have a stern talking to Wanda about the serious and numerous changes she was going to have to make to avoid future gout flare-ups and to get and keep her uric acid levels in the normal range (see sidebar, “Route Gout, Naturally”). Driven by a sheer desire to avoid the pain she’d had, Wanda cleaned up her diet in fast order. She was able to follow my recommendations to a tee and over a short six weeks got her uric acid levels down to just a bit over the normal range. In the ensuing months she edged it down further so it is now well within normal limits, and in the two years since coming to see me

for gout, she has not had another flare. She is grateful to have avoided the recurrent, excruciating flare-ups common to most gout sufferers, as well as the daily conventional drugs frequently prescribed to prevent future attacks. She did come to see me once in the past two years for an acute sore throat. I gave her another dose of *Lachesis* 200c, as it still fit her overall temperament and physical characteristics, along with her sore throat symptoms—and it did the trick. I do not see Wanda regularly; she knows where to find me when she needs me.

Although gout is an ailment that is largely driven by lifestyle, we *should* certainly employ homeopathy for treating people with acute flare-ups and can expect good results. I will always treat a patient afterward as well, with the hopes of preventing further bouts. I am confident that an appropriate homeopathic remedy that addresses the person as a whole can help increase resolve and discipline, those secret ingredients essential for making lifestyle shifts indicated for most patients with chronic high uric acid levels. As our greatest calling is to heal the sick, definitive efforts toward improved diet and lifestyle are essential components to any gout treatment plan.

## FOOTNOTES

\* See my article “Less is More: The Ultimate Resolution—Weight Loss for the New Year,” *Homeopathy Today*, Winter 2013.

\*\* See my article, “A Whole Person Approach to Metabolic Syndrome: hypertension, high cholesterol, pre-diabetes, & obesity,” *Homeopathy Today*, Winter 2011.

\*\*\* See my article, “Wear and Tear Arthritis: What you can do to ease it,” *Homeopathy Today*, March/April 2005.

## ABOUT THE AUTHOR



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