

The Gout Protocol

Lower your uric acid, calm the flares, and make gout a disease you choose to leave behind.

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Gout is an inflammatory arthritis caused by uric acid crystallizing in the joints. For most people it is a **modifiable** disease: lower your uric acid with diet, lifestyle, and the right protective foods, and the probability of a flare falls dramatically. This protocol distills the practical steps into a plan you can bring to your physician.

IMPORTANT: PLEASE READ FIRST

This is education, not medical advice. It is designed to help you and your physician work together to navigate your health, not to replace the judgment of a clinician who knows your history.

Do not start, stop, or change any medication on your own. Bring this document to your appointment and use it as a starting point. **Seek prompt care for a hot, swollen, intensely painful joint with fever or feeling unwell.** A joint infection can mimic gout and is an emergency.

Know your number

Everything in gout comes back to serum uric acid. A simple blood test tells you where you stand.

Crystallization risk	Above 6.8 mg/dL, uric acid can crystallize in tissues
Your target	Keep serum uric acid under 6.0 mg/dL (lower is better)
Natural reference	Our primate relatives, who also lack uricase, run near 3 mg/dL
Higher-risk genetics	Pacific Islander, Māori, Han Chinese, Korean, and Japanese ancestry; family history

STEP 1 Cut the biggest triggers

If the sink is overflowing, pull the plug, not just mop. These are the levers that raise uric acid the most.

- Beer** — the worst offender. High in purines *and* alcohol, a double hit. If you struggle with gout, take it off the menu.
- High-fructose corn syrup** — sodas and processed foods spike uric acid within 30–60 minutes. One spike can trigger a flare. Eliminate it.
- Liquor** — reduces uric acid excretion; use only in tight moderation. (Wine is roughly neutral, but any alcohol can trigger a flare in the highly susceptible.)

- Organ meats & high-purine seafood** — liver, anchovies, sardines, mackerel, herring. Avoid as daily staples.
- Red meat & pork** — moderate, do not eliminate. Aim for balance rather than daily servings.

PURINE LOAD	FOODS	GUIDANCE
High	Organ meats, beer, anchovies, sardines, mackerel, herring	Avoid / rare
Moderate	Red meat, pork, chicken, most seafood	Enjoy in moderation
Lower	Salmon, eggs, dairy, most vegetables, coffee, cherries	Freely, within a healthy diet

STEP 2 Add the protective foods

Several everyday foods actively help your body excrete uric acid. The doses below reflect what the research used.

FOOD	SUGGESTED AMOUNT	WHY IT HELPS
Coffee	Several cups daily (decaf helps too)	Inhibits xanthine oxidase; promotes excretion. ~6 cups/day linked to ~59% lower risk.
Vitamin C	1,500 mg/day, split 500 mg × 3	Competes with uric acid for kidney reabsorption; ~45% lower risk.
Tart cherries	Tart cherry or juice daily	Lowers uric acid ~20%; ~35% fewer attacks (up to ~75% with allopurinol).
Dairy / milk	Regular intake (lactose-free is fine)	Casein, whey, and orotic acid promote excretion; ~44% lower risk in high consumers.

STEP 3 Build the metabolic foundation

Better metabolic health lowers uric acid and improves nearly everything else.

- Lose excess weight if needed
- Exercise regularly
- Stay well hydrated throughout the day

If you are mid-flare

The goal during an attack is to calm the inflammation quickly, before the joint is damaged. Discuss options with your doctor.

- NSAIDs** (e.g., ibuprofen, naproxen) — first-line for most people
- Low-dose colchicine** — blocks neutrophils from entering the joint
- Corticosteroids** (e.g., prednisone) — when NSAIDs/colchicine aren't suitable
- A **first flare** or an atypical joint may warrant joint-fluid aspiration to confirm crystals

A red, hot, swollen joint with fever can be a joint infection, not gout. That is an emergency. Seek care the same day.

Long-term, if flares keep coming

Lifestyle comes first. If flares continue, uric-acid-lowering medication is the next step, with one important safety check.

- Allopurinol** — first-line; inhibits xanthine oxidase
- Test HLA-B*58:01 first** if you are of Han Chinese, Korean, Thai, or African-American descent: a positive marker means avoid allopurinol (risk of a rare, serious hypersensitivity reaction)
- Probenecid** — a uricosuric option that increases urinary excretion
- Losartan** — if you also have high blood pressure, it lowers BP *and* increases uric acid excretion
- Febuxostat** — generally not preferred due to cardiovascular safety signals; discuss with your doctor

Why this matters beyond gout

Even without attacks, high uric acid raises blood pressure, promotes kidney stones and chronic kidney disease, and is linked to fatty liver and metabolic syndrome. Lowering it after a kidney stone can cut the risk of another by about half. Keep uric acid down and you protect far more than your joints.

Stay curious, stay skeptical, stay healthy.

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