

临床经验交流

痛风性关节炎误诊为化脓性膝关节炎的病例分析

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收稿日期 2007-12-11 修回日期 网络版发布日期 接受日期

摘要

目的 通过对被误诊为化脓性膝关节炎的急性痛风性膝关节炎病例进行分析, 提高对痛风的诊疗水平。方法 自1994年2月至2007年10月治疗29例(其中24例为外宾)误诊为急性化脓性膝关节炎的痛风患者。其中24例患者首次门诊在其他医院。全部病人来诊前均按急性化脓性膝关节炎治疗, 通过血常规、血尿酸检查和膝关节滑膜液分析, 若支持痛风的诊断, 则立即停用抗生素, 并用秋水仙碱作诊断性治疗。部分病人住院观察。结果 对29例中25例患者作出急性痛风性膝关节炎的诊断, 4例以急性痛风性膝关节炎可能为大。全部患者的误诊得到纠正, 而且均治愈。结论 通过详细地询问病史, 仔细对病人做体格检查, 配合实验室检查(血常规、膝关节滑膜液作分析和测定血尿酸), 并用秋水仙碱作诊断性治疗, 有助于减少误诊。

关键词 [痛风](#) [化脓性膝关节炎](#) [误诊](#) [秋水仙碱](#)

分类号

Case analysis of the gouty arthritis was misdiagnosed as suppurative arthritis affecting the knee

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Abstract

Objective In order to elevate the level of diagnosis and treatment for gout, we analysed the patients with acute gouty arthritis affected the knee, these patients were misdiagnosed as acute septic knee. Methods 29 gouty cases, among them 24 were foreigners, whom were misdiagnosed as acute septic knee. All the patients were treated from February 1994 to October 2007. Among them 24 cases were first treated in other hospitals. These patients were treated as suppurative arthritis of the knee before coming to our clinic. If the examination results of blood routine, serum uric acid and synovial fluid analysis supported the diagnosis of gout, the treatment with antibiotics was immediately stopped, and the diagnostic treatment with colchicine were used. Some of these patients were hospitalized. Results Among these 29 cases, the diagnosis of acute gouty arthritis affecting the knee was made sure in 25 cases, while other 4 cases were diagnosed as this disease most probably. All these 29 cases were corrected their misdiagnosis and cured. Conclusions It was helpful to reduce the misdiagnosis by inquiring the details of the case history , taking physical examination carefully, the analysis of synovial fluid of the knee, the examination of serum uric acid and making diagnostic treatment with colchicine.

Key words [gout](#) [suppurative arthritis of the knee](#) [misdiagnosis](#) [colchicines](#)

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