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ANDROGEN IMBALANCE IN GOUTY ARTHRITIS IN MEN WITH OBESITY

Mostly men suffer from gouty arthritis (95% of cases). The most frequent comorbid condition is obesity in men who suffer from gouty arthritis. In men for gouty arthritis obesity found an increase in the level of erythrocyte sedimentation rate ($35,5 \pm 1,2$) and C-reactive protein ($13,0 \pm 1,2$). Found that when gouty arthritis in patients with obesity inflammatory process is not limited to local changes in the joints, but also causes a reaction of the whole organism. There was a decrease the testosterone levels in obese men. It confirms the importance of determining the level of testosterone for gouty arthritis patients with obesity. Thus, the decrease in testosterone levels, especially in the presence of obesity II and III, characterized by maximum hyperuricemia, confirming evidence for an association of abdominal obesity with levels of testosterone in patients with gouty arthritis. A course of gouty arthritis, a form of arthritis and the presence of peripheral tophi affects on hyperuricemia. In turn, the levels of testosterone and uricemia affect the severity of obesity in patients with gouty arthritis. The severity of obesity depends on the indicators of testosterone.

We established pathogenetic role of testosterone in the development and progression of gouty arthritis and obesity in men. It is proved that the aggravation of gouty arthritis is accompanied by changes in testosterone levels, depending on the degree of obesity. We find a strong link between the concentration of testosterone and uric acid, as well as stage of disease. It is shown that obesity contributes to the development of degenerative changes in osteo-articular apparatus in violation of motor function. In turn, promotes the development of gouty arthritis, overweight and obesity.

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