

- Long-term hyperuricemia is the final cause of urate-crystal deposition in tissues and the development of gout, its prevalence increasing in the last decades.
- Hyperuricemia and gout have been associated to increased risk of both mortality and cardiovascular events.
- New imaging techniques, such as ultrasonography and dual-energy computed tomography have raised increasing interest diagnosis, evaluation of deposition and damage, and response to urate-lowering therapy.
- The final objective of the treatment of gout is to completely dissolve crystals, what is associated to improvement of symptoms and prevention of further inflammation and damage.
- Defining targets for serum urate levels while on urate-lowering therapy will depend on the extent of deposition, severity of disease, but also to whether debulking of formed crystals or prevention of new crystal formation is intended.

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