

WHO HAS PERIPHERAL ARTERIAL INSUFFICIENCY?

If you have:

1 - **Intermittent Claudication** (calf cramping while walking); **Rest pain** (leg pain even while sitting or lying down.

2 - **Impotence** - unable to attain erection or maintain during sexual activity.

3 - **Leg/Feet/Toes Discoloration** - Bluish or reddened extremity.

4 - Slowly healing ulceration or wound of the legs/feet. 5-Loss of leg hair Then you may have peripheral vascular disease.

Intermittent claudication is a pain or fatigue in the muscles of the lower extremity caused by walking and relieved by rest. The pain is a deep-seated ache that gradually progresses to a degree, which halts further exertion and is relieved after 2 to 5 minutes of activity. Claudication most commonly occurs in the calf muscle.

The two conditions that most often mimic claudication are osteoarthritis of the hip or knee and neurospinal compression due to herniated disc or osteophytic narrowing of the spinal canal.

Rest pain is severe burning pain usually confined to the foot and is aggravated by elevation of the to extensor making it hard to go to sleep. When rest pain first appears, the patient typically rubs the painful foot and walks about. Pain is relieved somewhat. When the patient is standing erect as gravity aids the delivery of arterial blood. Usually, patients are more comfortable sleeping in the chair.

Rest pain indicates an advanced stage of ischemia and usually requires surgical intervention.

Impotence; Inability to attain or maintain an erection is produced by lesions that obstruct blood flow through the aorta or internal iliac (pelvic arteries), usually reversible with revascularization.

Ulceration; Usually very painful and associated with bluish or reddish discoloration of the feet

Risks:

- 1 - Cigarette smoking has a substantial influence on the progression of arthritis.
- 2 - Hypertension should be controlled.
- 3 - Hyperlipidemia should be lowered by means of weight loss or medication
- 5 - Diabetes mellitus

Work-up; Non-invasive vascular testing aids in the management of vascular patients. Blood pressure cuffs are applied to the arm and various levels of the legs. A ratio is obtained by dividing the US to arm pressure. Any significant decrease implies blockage in the artery above that level.

Invasive arteriogram - x-ray study that helps us obtain a road map of the abdominal/leg arteries with more information about blockage areas and helps the doctor plan for reconstructive vascular surgery, if indicated.

Treatment:

- 1 - Improvement of collateral circulation:
 - walking stimulates the development of collateral circulation;
 - bypassing the blocked artery with new small ones;
 - « walking/exercise also decreases LDL's and increase HDL's.
- 2 - Anti-platelet agents, i.e. Aspirin has good cardiovascular disease benefit carotid and LPG
- 3 - Cease smoking
- 4 - Control hypertension IDM
- 5 - Control cholesterol/lipids
- 6 - Avoidance of foot trauma

Surgical Treatment:

By using man-made grafts or leg/arm veins, the blocked arteries are bypassed producing more flow and increased pressure. This results in reduction of claudication, healing of ulcers/infection and resumption of normal color.

If you have any of the above symptoms, please call your doctor or Cedar Tree Vascular Lab at 945-9730.