

What is Periphearal Vascular Disease?



Definition



What Is Peripheral Vascular Disease?

Peripheral vascular disease (PVD) is gradual plaque (fat, cholesterol and other substances) buildup in leg arteries, slowly narrowing the inside (lumen). If plaque or a blood clot narrows or blocks your arteries, blood can't get through to nourish organs and other tissues. This causes damage and eventually death (gangrene) to the tissues below the blockage.

Symptoms



How Does Peripheral Vacular Disease Presents?

Burning or aching pain in feet

Cool skin on the feet.

Redness or other color changes of the skin.

More frequent skin and soft tissue infections.

Toe and foot sores that don 't heal.

50% of the patients who have peripheral vascular disease don 't have any symptoms. PAD can build up over a lifetime.

Risk



What Are The Risks Of Peripheral Vacular Disease?

Tobacco products (the most potent risk factor).

Diabetes Mellites.

Age 50 and older.

African American.

Family history of heart or blood vessel disease.

High blood pressure(hypertension).

High cholesterol(hyperlipidemia).

Abdominal obesity.

Blood clotting disorder.

Kidney disease(both a risk factor and a consequence of PAD).

Cause



What Are The Causes Of Peripheral Vacular Disease?

Atherosclerosis that develops in the arteries of the legs causes peripheral arterial disease. Like atherosclerosis in your heart (coronary) arteries, a collection of fatty plaque in your blood vessel walls causes peripheral vascular disease. As plaque builds up, your blood vessels get narrower and narrower, until they are blocked.





Consequences Of Peripheral Vacular Disease?

Without treatment, patient with PAD may need an amputation (the removal of part or all of the foot or leg), especially with diabetes.

HTN with PVD of the renal arteries

CVA

Kidney disease

Patient with atherosclerosis of their legs often have it in other parts of their bodie like the heart or the vessels of the brain.



How Do We Manage Peripheral Vacular Disease?

Treatment of PAD starts with:

1. Making lifestyle changes to reduce risk factors:

Quitting tobacco.

Healthy diet

Exercise.

Manage other health conditions (high blood pressure, diabetes, high cholesterol). Keep the stress level low.

Practice good foot and skin careto prevent infection.

2. Supervised exercise programs

It will improve the symptoms of legs pain with walking, allowing patient to walk farther. A structured program typically includes walking on a treadmill in a supervised setting at least three times per week.

The usual prescription is called the "Start/Stop" exercise:

- a. Walk until the discomfort reaches a moderate level and then stop.
- b. Wait until the discomfort goes away completely.
- c.Start walking again.

3. Medications

Medicines can help conditions such as high blood pressure (anti-hypertensive medications), high cholesterol (statin) and diabetes. These medicines treat the risk factors of PVD and decrease risk of stroke and heart attack.

Antiplatelet medication such as aspirin or clopidogrel can also help improve the symptoms and slow down the progression of the disease. cilostazol improve walking distance. This medication helps people with intermittent claudication exercise longer before they get leg pain.

4. Minimally invasive or surgical treatments

For some people with more severe PAD, they may require endovascular (minimally invasive) or surgical treatment:

Angioplasty.

Stents.

Peripheral artery bypass surgery.

Atherectomy.

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