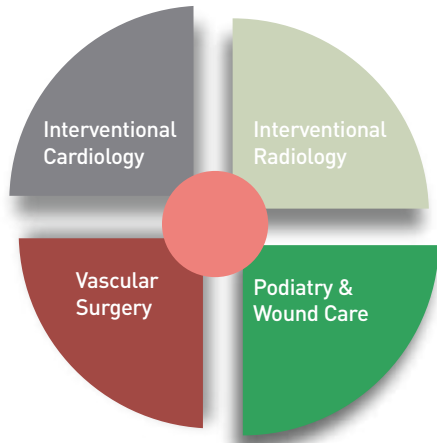


MULTIDISCIPLINARY TEAM



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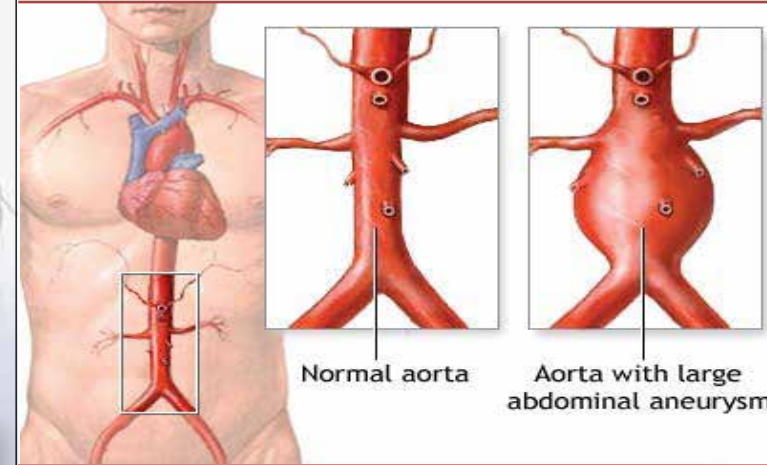
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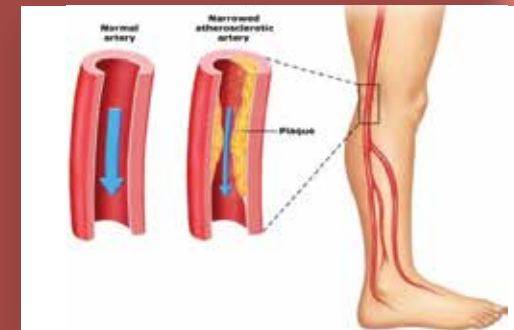
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AORTIC & PERIPHERAL ARTERIAL VASCULAR DISEASE

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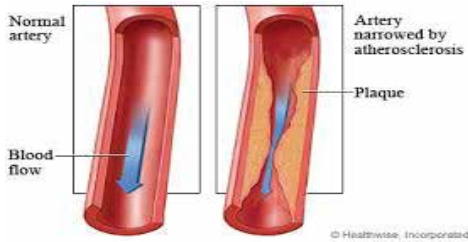
RESULTS OF POOR CIRCULATION

What you need to know about your vascular health and available treatment options.

What is Arterial Vascular Disease

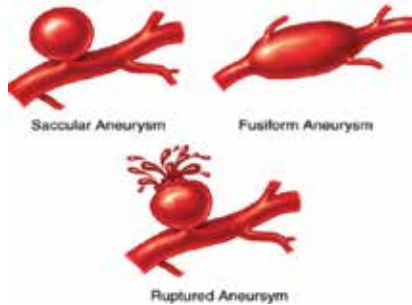


Arteries are the blood vessels in the body that carry blood and oxygen to all essential organs including the brain, heart, liver, and kidney. Arteries also supply blood to the extremities including the arms and legs.



Arterial disease can present in many forms including:

STENOSIS (narrowing of the vessels) or blockage, which results from plaque, build up and leads to poor circulation. This is generally known as Peripheral Arterial Disease (PAD).



ANEURYSM (dilation of the entire or part of the vessel), which can result in acute rupture and bleeding.

OTHER DISEASE PROCESSES INCLUDE

Dissection (tearing and separation of one of the walls of the artery), Ulceration of vessel wall, Inflammation and Intramural Hematoma (bleeding into the arterial wall)

Symptoms and signs of Arterial Disease

Although arterial disease is a serious condition, sometimes people have no symptoms, but for those that do, here are a few signs that may indicate arterial disease.

Symptoms may include

Sudden chest pain which also goes to the back and may indicate the presence of an aortic aneurysm, dissection or intramural hematoma.

Pulsatile mass in the belly which may indicate the presence of an abdominal aortic aneurysm (AAA).

Pain, aching or heaviness in the leg muscles when walking or climbing stairs may indicate poor leg circulation.

A reduced or absent pulse in the ankle or foot

Cold legs or feet

Leg discoloration



Ulcers or sores that would not heal which is especially common in diabetics. These can become infected and result in amputation. What may start as mild symptoms in most people may lead to severe symptoms from acute rupture of an aneurysm resulting in severe internal bleeding. In the case of PAD it can lead to gangrene and amputation.

Know your Risks

Anyone can develop arterial disease, but there are certain risk factors that can increase the likelihood of developing this serious condition.

These risks may include:

Smoking, which can damage the arteries and their ability to transport blood.

Obesity or being overweight can also put pressure on your legs and restrict healthy blood flow.

High cholesterol contributes to the buildup of plaque in your arteries

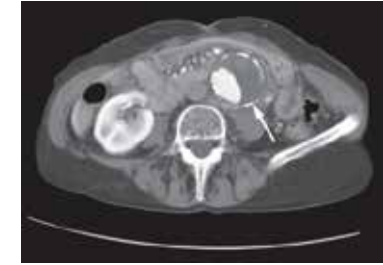
High blood pressure can increase the likelihood of developing arterial disease

Diabetes can narrow blood vessels, making it more difficult for blood to flow to limbs. Poor circulation is the commonest reason for amputation in diabetics

Being older than 60 can increase the risk of developing PAD as blood vessels are more likely to become damaged over time.

How do we make a Diagnosis of arterial disease?

The good news is that arterial disease can be managed effectively, especially if detected early. Your physician will evaluate your medical and family history, take blood tests, and conduct a physical exam.



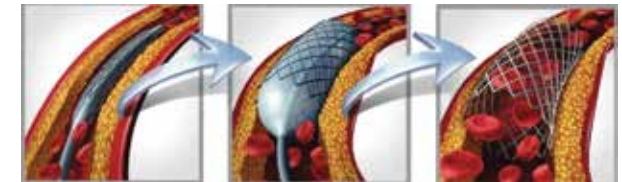
A combination of diagnostic tools may be used, such as:

- Ankle-brachial index
- Duplex ultrasound
- CTA angiography
- Transcutaneous pulse oximetry
- MRA angiography

What are your Treatment options

Depending on the type of arterial disease you are diagnosed with, there are many treatment options available here locally in Nigeria provided by US and UK trained specialists. These may include

- Non-invasive medical options such as changes to diet, exercise and by quitting smoking.
- Medication therapy to control symptoms and reduce plaque build-up.



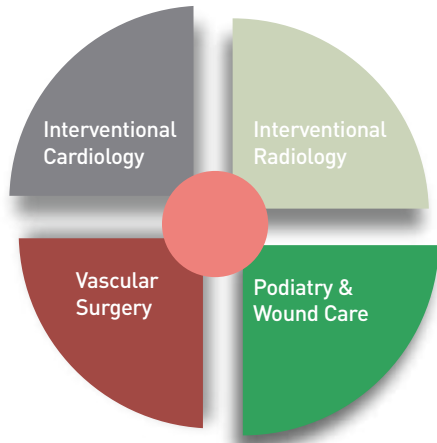
Minimally invasive Non-surgical options that may include Angioplasty (putting up a balloon to dilate and open up areas of narrowing).

Stenting which involves placing a metallic cylinder in a narrowed or dilated vessel either to keep it open or prevent it from rupture in the case of aneurysm.

Atherectomy which involves intravascular or surgical removal of plaque build-up.

Bypass grafting to redirect blood.

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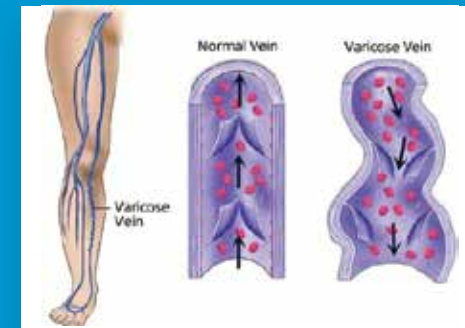
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VENOUS DISEASE AND ITS LONG TERM CONSEQUENCES

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RESULTS OF POOR CIRCULATION

What you need to know about your vascular health and available treatment options.

How does Blood Circulate?

With every heartbeat, blood flows from the heart to the rest of the body and back to the heart again. This process is called Circulation, it is made possible by a vast system of blood vessels. Arteries carry blood away from the heart and Veins return blood to the heart.

How do Veins Work ?

Veins and muscles work together to move blood up from the legs towards the heart. When leg muscles contract and relax, they squeeze blood up the veins. Veins have special cuplike flaps called Valves along their inside walls. These valves act as one-way doors. They open and close to keep blood flowing in the right direction-toward the heart.



When a muscle contracts, the valve opens. Blood is squeezed up the vein. When a muscle relaxes, the valve closes. This holds the blood in place.

A healthy vein has strong walls and valves. When the leg muscles contract, the valves open. When the muscles relax, the valves close. This prevents blood from leaking backward.



When a damaged valve can't close, blood moves in the wrong direction. This causes blood to pool lower in the vein.

A damaged vein has weak walls and valves and are dilated. This allows blood to leak back through the valve. Blood begins to pool in the vein overtime instead of moving to the heart. This results in Varicose veins (dilated veins) that can be seen in the legs. Can also result in swelling of the leg. Blood clots can form in areas of the vein where blood moves too slowly or not at all. This can result in a condition called Chronic venous insufficiency (CVI).

What is Chronic Venous Insufficiency?

Chronic venous insufficiency (CVI) is a result of damaged veins. When veins have been damaged over time, it results in varicose veins, swelling and discoloration of the legs, itching and the development of ulcers near the ankles.

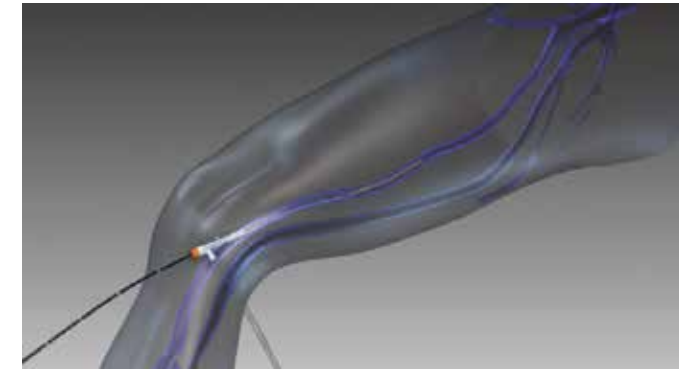
What steps can you take to reduce symptoms

To reduce the symptoms of CVI, your doctor may ask you to elevate your legs a few times a day or wear elastic compression stockings. These actions reduces the pressure in the legs, which in turn reduces swelling and help prevent ulcers. Along with self-care, your doctor may ask you to have a procedure.



What Procedure is Used to Treat CVI?

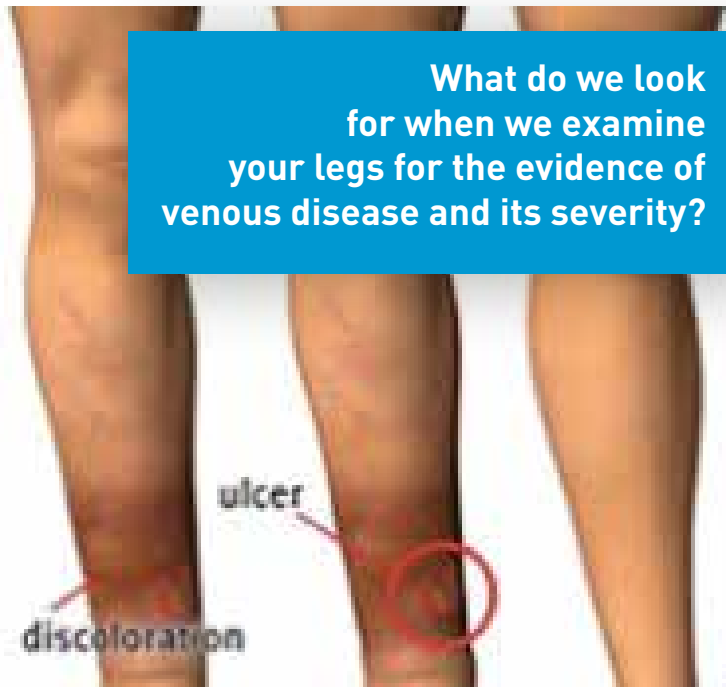
Venous Ablation: Venous ablation is designed to destroy superficial veins that have abnormal valve function. Venous ablation is a simple outpatient procedure performed under local anesthesia and involves no surgery.



Special catheter is inserted into the diseased vein under real time ultrasound. This wire heats up the vein and seals it from the inside. The vein stays in place, but it no longer carries blood. This procedure can be performed in combination with SCLEROTHERAPY to treat ugly spider looking veins in the legs. Sclerotherapy involves injection of the small veins with a tiny needle with a chemical that causes the veins to collapse.



Images of the leg before and after treatment.



What do we look for when we examine your legs for the evidence of venous disease and its severity?