Care and treatment of peripheral artery disease



At the Capital Health Heart & Vascular Institute, a team of clinicians from multiple medical fields work together to provide care, including:

- Primary Care
- Interventional Cardiology
- Vascular and Endovascular Surgery

- Vascular Imaging and Intervention
- Nephrology (kidney specialists)
- Nutrition and Physical Therapy
- Wound Care

For more information about the Capital Health Heart & Vascular Institute, visit **capitalheartandvascular.org** or call **855.827.2362 (VASCDOC)**.

Podiatric medicine

(foot specialists)



What is Peripheral Artery Disease?

Peripheral artery disease (PAD) is a common but serious circulatory problem in which narrowed arteries reduce blood flow to the limbs. With PAD, the extremities — most often the legs— don't receive enough blood flow to keep up with demand. PAD may also be a sign of atherosclerosis, a more widespread build-up of plaque in arteries. The underlying build-up may be reducing blood flow to the heart and brain, as well as the legs.

While many people with PAD have mild or no symptoms, some people have leg pain when walking. The leg muscle pain or cramping that's triggered by activity, such as walking, disappears after a few minutes of rest. The location of the pain depends on the location of the clogged or narrowed artery. Calf pain is most common.

The severity of symptoms varies widely, from mild discomfort to disabling pain making it hard to walk.

Symptoms Include:

- Painful cramping in the hip, thigh or calf muscles after activity, such as walking or climbing stairs (intermittent claudication)
- Leg numbness or weakness
- Coldness in the lower leg or foot, especially when compared with the other leg
- Sores on the toes, feet or legs that won't heal
- A change in the color of the legs
- Hair loss or slower hair growth on the feet and legs

- Slower growth of the toenails
- Shiny skin on the legs
- No pulse or a weak pulse in the legs or feet
- Erectile dysfunction in men

If PAD progresses, pain may even occur when at rest or when lying down (ischemic rest pain).

It may be intense enough to disrupt sleep. Hanging legs over the edge of the bed or walking around the room may temporarily relieve the pain.

Testing for PAD

Physical exam

Reveals a weak pulse near a narrowed artery, decreased blood pressure or poor wound healing

- Ankle-brachial index (ABI)
 Compares the blood pressure in the ankle with the blood pressure in the arm
- Ultrasound
 Evaluates blood flow and identifies
 blocked or narrowed arteries
- Angiography
 Views blood flow through arteries

Catheter angiography

Guides catheter through artery to the affected area, allowing for simultaneous diagnosis and treatment



Harit Desai, DO

Dr. Desai is an interventional cardiologist who specializes in heart angiographies, opening clogged arteries using the state-of-the-art WRIST approach and nonsurgical treatment of vascular diseases including PAD. To schedule an appointment with Dr. Desai, visit **capitalheartcare.com** or call **609.393.1524**.

Treating Peripheral Artery Disease (PAD)

Treatment for will help manage symptoms, such as leg pain, so patients getback to healthy physical activity. It may also help stop the progression of atherosclerosis and reduce the risk of heart attack and stroke.

The first step is to make lifestyle changes if necessary such as quitting tobacco, adding regular aerobic exercise and improving diet. For smokers, quitting is the most important factor in reducing the risk of complications. If lifestyle changes are not enough, additional medical treatment may include medicine to prevent blood clots, lower blood pressure and cholesterol, and control pain; or minimally invasive interventional surgical procedures.

With careful medical management and lifestyle changes, patients can live well with PAD.

When to See a Doctor

If you have leg pain, numbness or other symptoms, don't dismiss them as a normal part of aging. Call your doctor and make an appointment.

Even if you don't have symptoms of PAD, screening is recommended for:

- People over age 70
- People over age 50 and have a history of diabetes or smoking
- People under age 50 with diabetes and other PAD risk factors, such as obesity or high blood pressure

Ask Your Doctor to Check Your Feet for Signs of PAD

