

Patient Information-PAD

Peripheral Arterial Disease, PAD

Leg pain may be caused by poor circulation. The medical term for this is Peripheral Arterial Disease, PAD, and it affects nearly 2 million Americans. PAD, without treatment can impair a person's ability to walk, and can even lead to amputation.

Common Risk Factors for PAD

Symptoms, such as leg pain, that occurs with any of the following factors, strongly suggests PAD.

- Family history of heart disease
- History of smoking
- High blood pressure
- Diabetes
- High cholesterol
- Obesity

How PAD affects your body

The underlying disease process of PAD is atherosclerosis, or the buildup of fatty deposits or plaques. These fatty plaques block blood flow through arteries. If leg blood flow is blocked by PAD, pain in the legs, called claudication, can occur. The pain usually occurs with work or exercise, but may also occur when resting. In addition to pain, weakness in the legs, numbness, tingling, coldness, and changes in skin color can occur. More serious problems such as ulcers or gangrene can lead to amputation.

Diagnostic Testing

Your doctor can test for PAD by using Duplex Scanning ultrasound in the Vascular Lab, or MR angiography or CT angiography. These are outpatient procedures.

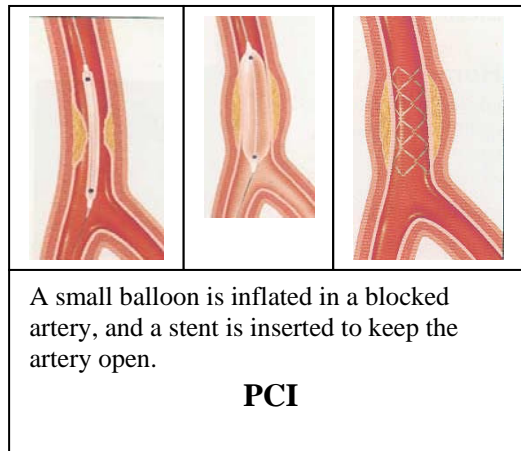
Treatment for PAD

A number of options are available for treating PAD, including surgery, and non-surgical PCI treatment, using balloon angioplasty and vascular stent placement. In the past surgery was the only treatment available, and in certain cases surgery may still be necessary. When surgery is required the surgeon can insert a graft/vein that allows blood to bypass the blocked artery, remove blockage, or use other techniques that are intended to improve blood flow. Only a doctor can determine if standard surgery or PCI is right for you.

Percutaneous Intervention, PCI

In recent years a non-surgical procedure called PCI has been performed on patients with PAD. During PCI the doctor inserts, and then inflates a tiny balloon inside a blood vessel causing the blockage to open. The balloon is then withdrawn from the vessel. This procedure is performed entirely within the vessel through a small puncture in the skin. Sometimes angioplasty does not completely restore blood flow, and the doctor then inserts a wire tube, called a stent, into the vessel. The stent is gently expanded to keep the vessel open and maintain blood flow. The stent remains in the vessel as a permanent implant.

The procedure takes between 45 to 90 minutes. Following a stent procedure, many patients go home the same day. In some cases the patient remains in the hospital overnight. The stent will not limit daily activities, and stent patients can usually return to their normal activities. After treatment, the doctor may recommend a program of exercise combined with lifestyle changes, including cessation of smoking, cholesterol management, and sometimes a special diet.



Philip L. Rice, M.D., F.A.C.S., R.P.V.I.
University Cardiothoracic and Vascular Associates
100 Radnor Road
State College, PA 16801
Telephone (814) 238-2616