STAY HEALTHY!
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Peripherical Vascular Disease
—The Phantom Killer—

Some patients developed pain in their legs that got worse when they walked even a short distance and some doctors initially attributed it to an old back injury. But three years and many doctor visits later, an appropriate specialist finally gave them the correct diagnosis: Peripheral artery disease.

Often referred to as poor circulation, peripheral artery disease, or PDA, is a potentially fatal blockage of large arteries in the lower extremities, usually in the legs, caused by the same kind of fatty deposits or plaque that can build up in the coronary arteries leading to the heart. The poor circulation is often not indicated because of lack of any symptoms or manifestations.

Clinical manifestations of the disease vary. The majority of patients are asymptomatic. This may reflect the presence of limited disease or, more commonly, inactive patients.

Mild to moderate PAD can produce lower extremity discomfort with ambulation. The pain is often described as an ache or “charley horse” in the calf, buttock, or thigh after a fixed distance of activity. Skin changes are insignificant or usually not present until significant PAD develops, with changes including local cool, dry, shiny skin, and thickened nails. Ulcers and gangrene can develop at the tips of the toes.

Between eight and twelve million Americans have PAD, federal data shows. By some estimates, those ranks could double in the next decade as the population ages and risk factors as Diabetes and Obesity—Major Risk Factors—become more prevalent.

PAD has very serious consequences. Patients have rates of heart attack, stroke and death equal or greater to those with coronary artery disease (CAD). A recent study of 68,000 patients in an international registry (PAD-MCRS Morbility-Comorbility Retrospective Study) shows patients with PAD have a 21% chance of suffering a heart attack or stroke, being hospitalized or dying of complications within one year. That risk doubles for those who also have artery disease in the Heart. PAD and Coronary heart disease (CAD) often go hand-in-hand. As many as 60% of PAD Patients have both. The prevalence of PAD rises rapidly with age, present in more than 20% of people who are 75 or older.

PAD is diagnosed by less than 30% of Primary Care Physicians.

Only about 25% of those with PAD know they have it or are undergoing treatment of any kind. Leg pain and cramps, the most common symptoms, are often misdiagnosed as muscle aches, rheumatism or chronic arthritis.

Peripheral artery disease is the most common, deadly and costly cardiovascular disease that the public hasn`t heard of. Hospitalization costs alone for PAD exceed $21 billion dollars annually. A recent study of Medicare data shows that it costs about 5% more to treat PAD patient than one with Coronary Artery Disease. (Dr Alan T. Hirsch University of Minnesota Medical School`s Cardiovascular Division).

More than two million patients annually end up in the most advanced stage of PAD, known as critical limb ischemia, which can lead to ulcers that don’t heal and gangrene. Within one year, 30% will have to have a leg amputated, and 25% will die.

Risk factor modification is necessary to slow or halt progression of peripheral arterial disease and decrease the risk of cardiovascular and cerebro-vascular death.

To be Continued

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