

PERIPHERAL ARTERY DISEASE (PAD) TREATMENT



Medicine
without limits



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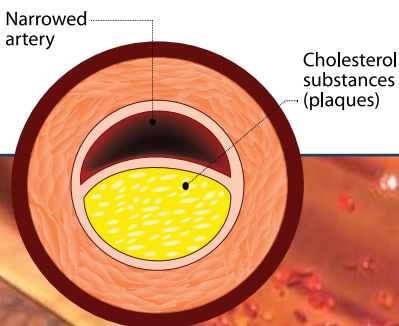
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PERIPHERAL ARTERY DISEASE AFFECTS 20% OF AMERICANS OVER 65.

Peripheral artery disease (PAD) refers to the narrowing of the “peripheral” arteries, which are blood vessels in the legs, arms, stomach and head.

PAD is caused by a buildup of cholesterol and scar tissue on the walls of the artery which forms a substance known as plaque. The plaque builds up gradually and over time it will clog the artery, restricting the flow of blood. In some cases, PAD may be caused by blood clots that break free from within larger arteries and get lodged in narrower arteries, which reduces blood flow.

The most common PAD treatment occurs in the legs. Left untreated, PAD can lead to painful cramping, limited mobility, amputation, gangrene, infection and death. Fortunately, there are several highly effective treatment options if PAD is detected early.



TREATING PAD

If the disease is not severe, PAD can be treated with medication and/or lifestyle changes. If it has progressed to the point where an intervention is needed, there are several procedures available for you and your doctor to consider.

The interventional radiology experts at Lakeland Vascular Institute offer minimally invasive treatments for PAD that do not require open surgery, and have a faster recovery period with less downtime.

Angioplasty

At the site of the blockage within the artery, a tiny balloon is inserted and inflated to open the blood vessel.

Stents

A stent is a small metal “scaffold” that is inserted into the site of the blockage to open the blood vessel and keep it open.

Catheter-Directed Thrombolysis

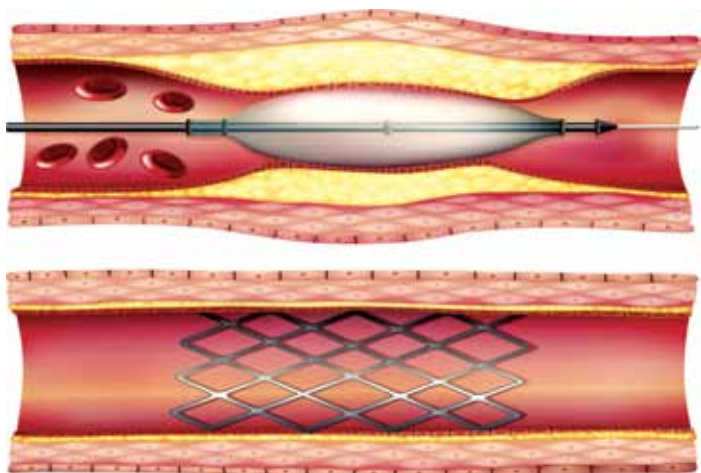
If the blockage in the blood vessel is caused by a clot, a special drug known as a “clot buster” is used. This effectively dissolves the clot to restore normal blood flow.

Atherectomy

An alternative to angioplasty, this procedure is a technique for removing plaque from the blood vessel with a catheter and sharp blade.

Stent Grafts

When an artery is no longer able to function, a special stent covered with a synthetic fabric can replace or “bypass” the diseased artery.



RISK FACTORS

Lifestyle and risk factors that can lead to PAD include having had coronary artery disease or stroke, smoking, high blood pressure, high cholesterol, diabetes/ metabolic syndrome, family history, being overweight and over 50 years of age. African Americans are at a higher risk for PAD. Quitting smoking reduces your risk of developing PAD by 60% within 10 years.



High Blood Pressure



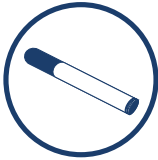
Over 50



Overweight



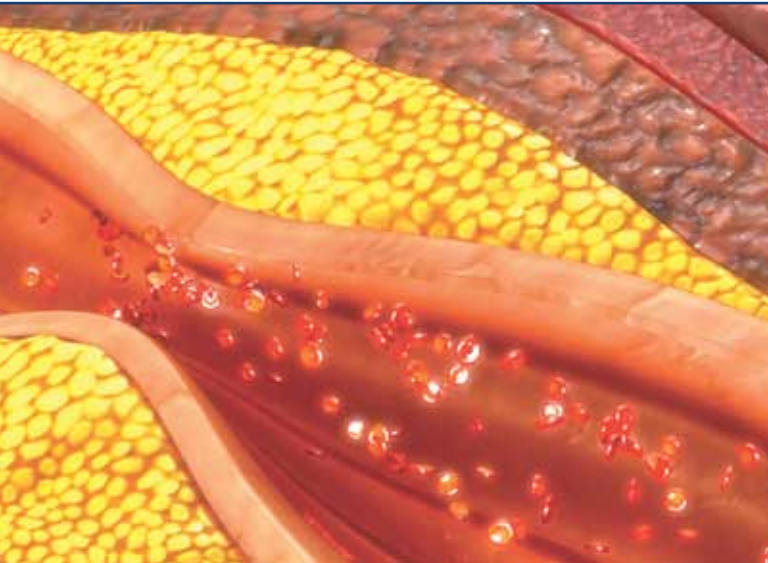
Family History



Smoking



Diabetes



DIFFICULTY IN DIAGNOSING PAD

PAD often goes unnoticed and undiagnosed by healthcare providers. What's more, the symptoms of PAD are easily mistaken for other conditions, such as neuropathy or just the aches and pains of getting older.

Symptoms include:

- Leg pain, numbness, tingling or weakness
- Changes in the color of the arms or legs
- Foot or toe wounds that do not heal or heal slowly
- Decrease in the temperature of the lower legs and feet compared to the rest of the body
- Erectile dysfunction
- Poor nail or hair growth

The good news is that PAD is easily diagnosed with simple, easy and painless tests. These can include physical examination by your doctor, ankle-brachial index (ABI), ultrasound (duplex), X-Ray (arteriogram), CT (CT angiography) and MRI (MR angiography). In some cases, an angiogram may be performed to identify the precise location of blockages within the peripheral arteries.



PAD is underdiagnosed IN WOMEN



It is believed that PAD is often missed in women for two important reasons: First, because women are less likely to complain about leg pain to their doctor than men. Second, because men with PAD are more likely than women to have coronary artery disease, and so their doctors actively look for PAD. As a result, when women are eventually diagnosed with PAD, the disease is more likely to have become severe.



Lakeland Vascular Institute **MEDICINE WITHOUT LIMITS™**

Interventional radiology (IR) represents an exciting new frontier in disease and pain treatment. Today's IR therapies are more precise, less invasive and more effective than ever... giving you and your doctor additional options to treat disease and restore you to optimal health.

At the Lakeland Vascular Institute, we do so much more than treat vascular disease. We use the body's vascular system—along with state-of-the-art imaging guidance—to reach the source of the problem and deliver precisely targeted therapy. Cancerous tumors. Spine fractures. Abdominal aortic aneurysms. Uterine fibroids. Migraine headaches. And of course, vascular disease and access. These and many other health conditions can be treated faster, less expensively and with greater safety and accuracy than ever before.

**For questions, consultations and scheduling,
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