What is peripheral arterial disease (PAD)?

Peripheral arterial disease (PAD), also known as peripheral vascular disease (PVD) or peripheral arterial occlusive disease (PAOD), causes your legs to be sore, particularly when you walk. The pain is usually in the calves of your leg but may be in your thigh or buttock. It usually comes on when you walk and settles when you stop.

Other signs that you have the problem may include:

- · cold or numb toes or feet;
- sores on your toes, feet or legs that won't heal; and
- loss of hair from your feet, toes or legs.

If your legs do not hurt when you are at rest but you find you cannot walk as far as you used to without feeling pain in your calves, you may have PAD, or intermittent claudication as the symptoms are sometimes called.

What causes PAD?

PAD is caused by the arteries narrowing following the development of fatty patches, called atheroma or plaques in the artery walls – a bit like the scale forming on the inside of water pipes. The amount of blood getting to the muscles of your legs is reduced and you will feel pain. The presence of the fatty deposits can also block the artery completely. This process is exactly the same as can happen to the arteries carrying blood to your heart (coronary arteries).

Cigarette smoking is a very important contributor to PAD. Other medical problems that can contribute to PAD are high blood pressure and diabetes.

What can be done?

Your general practitioner may advise you to make some changes to your lifestyle, for example, by doing more exercise. You will definitely be advised to stop smoking. The doctor may also suggest taking a drug to reduce the amount of cholesterol in your blood – this is the main cause of the build-up of the fatty deposits. Also, the doctor may prescribe a drug, such as aspirin, to reduce the chance of a blood clot developing.

There are also drugs available which may relieve the pain of intermittent claudication.

If your PAD gets worse and causes a lot of pain, your GP may refer you to a specialist - probably a vascular specialist.

There are many tests to find out the extent of your disease and you may have the blood pressure measured in your legs (just like having it done in your arm), an ultrasound scan of the arteries (just like a pregnant mother has to see the baby, but in this case the blood vessels, and any blockages, can be seen) or an angiogram (an X-ray examination of the blood vessels).

If you have significant narrowing of the arteries, the specialist may talk to you about the possibility of: angioplasty, a method of blowing up a balloon in the narrow area and widening the artery; or bypass surgery, inserting a piece of a blood vessel or plastic to get round (or bypass) the narrowed section of the artery.

These procedures are usually only carried out in patients with more severe disease.

One in five people with PAD have diabetes, so it is important that checks are made to see if you are suffering from diabetes. If so, your GP will help you to keep it under control.

What can you do to help?

PAD is a disease which can usually be stabilised and, as with many other problems associated with the circulation, you will be discouraged from smoking. Over 90% of people with PAD are smokers. That sends out a very clear message. To greatly reduce the chances of getting the disease, or to improve your situation once PAD appears, stop smoking. Regular exercise, and controlling your weight if you are obese, will also help. Altering all of these will also help reduce high blood pressure (as will the drugs prescribed by your doctor if appropriate) if this is a contributing factor to your PAD.

What is the likely outcome of having PAD?

Most people with PAD who make these changes to their lifestyle either stabilise or improve their symptoms.

With this reasonable outlook, it is very important to follow the advice above and that given to you by your GP or nurse in relation to taking medication to reduce the risk factors for the disease. Importantly, sometimes when you have disease in your leg arteries you also have it in the heart or brain vessels, so taking prescribed tablets can prevent heart attacks and strokes.



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