PERIPHERAL ARTERY DISEASE:

Prevalence, Risks and Treatment Options

PREVALENCE



25% YET ONLY 25% OF AMERICANS ARE EVEN AWARE OF THE DISEASE.1

According to the Journal of the American Heart Association:

"PAD IS AN IMPORTANT CIRCULATORY SYSTEM DISORDER SIMILAR IN PREVALENCE TO STROKE AND CORONARY HEART DISEASE."²



THE RISK IS HIGHER AMONG

AFRICAN AMERICAN MEN & WOMEN²

RISKS AND UNDERDIAGNOSIS



PEOPLE WITH PAD ARE 6-7X MORE AT RISK FOR HEART ATTACK AND STROKE



ALL-CAUSE MORTALITY IS 3X GREATER IN PATIENTS WITH PAD



SMOKING INCREASES THE RISK

OF DEVELOPING PAD 2-6X AND IT WORSENS THE SYMPTOMS OF PAD⁴

PAD OFTEN GOES UNDIAGNOSED BY HEALTHCARE PROFESSIONALS⁵

- ONLY 10% OF THOSE WITH PAD HAVE CLASSIC SYMPTOMS OF CLAUDICATION
- 40% DO NOT COMPLAIN OF LEG PAIN
- 50% HAVE A VARIETY OF LEG SYMPTOMS DIFFERENT FROM CLASSIC CLAUDICATION
- 25% OF PAD CASES PROGRESS TO CRITICAL LIMB ISCHEMIA
- PAD CAN LEAD TO GANGRENE & AMPUTATION⁵ IF LEFT UNTREATED





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TREATMENT

Endovascular therapy and bypass surgeries are the two most common revascularization treatments. However, surgical bypass compromises the arteries—if it fails the next step for the patient is amputation. Angioplasty does not affect future treatment options.

Endovascular therapy is an effective firstline therapy for PAD due to:

- EXCELLENT OUTCOMES 92% SUCCESS RATE FOR ANGIOPLASTY WITH OR WITHOUT STENTING6
- LONG TERM CLINICAL RESULTS COMPARABLE TO AORTOFEMORAL ARTERY BYPASS SURGERY⁶
- LOWER PROCEDURE MORBIDITY AND MORTALITY
- SHORTER HOSPITAL LENGTH OF STAY (LOS)
- LOWER COST
- EASIER PATIENT TOLERANCE
- ENDOVASCULAR APPROACHES DO NOT PRECLUDE FUTURE SURGICAL OPTIONS FOR SUBSEQUENT REVASCULARIZATIONS^{7,8,9}
- PAD ENDOVASCULAR TREATMENT CAN PLAY A CRUCIAL ROLE IN **PREVENTION OF AMPUTATION IN DIABETIC PATIENTS.**10



Birmingham has one of the highest amputation rates in the United States. The goal of our limb salvage program is to significantly reduce that number through patient education, early detection and effective treatment.

> - Max Pyko, DO Vascular & Interventional Specialists of America

Vascular & Interventional Specialists of America physicians utilize a number of different endovascular approaches for the treatment of PAD. These procedures are performed with imaging guidance and include:

- · Stenting (utilizing specialty stents designed for PAD)
- Percutaneous transluminal angioplasty (PTA) and drug-coated balloons (DCBs), with or without stenting
- Atherectomy

Our physicians have been performing vascular therapies for many years and are among Alabama's leading experts on these procedures.

If you are interested in learning more about therapies for PAD or other vascular disease such as DVT, venous reflux disease and more, please consult with one of our radiologists by calling 205-905-8411.

To learn more, visit VisaVascular.com.



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- Roger VL, Go AS, Lloyd-Jones DM, et. al. Heart Disease and Stroke Statistics 2011 Update: A Report From the American Heart Association. Circulation 2011;122:e18-e209.

 Kalbaugh, C. 4 et. J. Perripheral Artery Disease Prevalence and Incidence... Journal of the American Heart Association. 2017;6e:e03795 Originally published May 3, 2017.

 Allison MA, Ho E, Denenberg JD, et al. Ethnic-specific prevalence of peripheral arterial disease in the United States. 2007 American Journal of Preventive Medicine 2007;32:228-333.

 Hirsch AT, Haskal ZJ, Hetrez RN, et al. ACC/AHA 2005 Practice guidelines for the management of patients with peripheral arterial disease (lower externity, renal, mesenteric, and abdominal aonici; Circulation. 2006;113:e463-e545

 Source: American Heart Associan-Allisander Allisander Survey (S. K., Botter, R. M., G. Eberly, S. W., Rhodes, J. M., Illig K. A., Shortell, C. K., E. D. E., Waldman, D. L., & Green, R. M. (2005). Percutaneous angloplasty and steering of the superficial femoral artery. Journal of Vascular Surgey, 269-278. https://doi.org/10.1016/j.ys.2004.11.031
- F.B. Pomposelli, N. Kansal, A.D. Hamdan, A. Belfield, M. Sheahan, D.R. Campbell, et al. A decade of experience with dorsalis pedis artery bypass: analysis of outcome in more than 1000 cases.] Vasc Surg. 37 (2003), pp. 307-315

 N.R. Hertzer-Outcome assessment in vascular surgery results mean everything! Vasc Surg. 21 (1995), pp. 6-15

 M. Lepäntalo, S. Mätzke-Outcome of unreconstructed chronic critical leg ischaemia Eur. J Vasc Endovasc Surg. 11 (1996), pp. 153-157

- Jian La Reekers The Role of Interventional Radiology in the Treatment of Arterial Diabetic Foot Disease Cardiovasc Intervent Radiol. 2016; 39(10): 1369–1371.