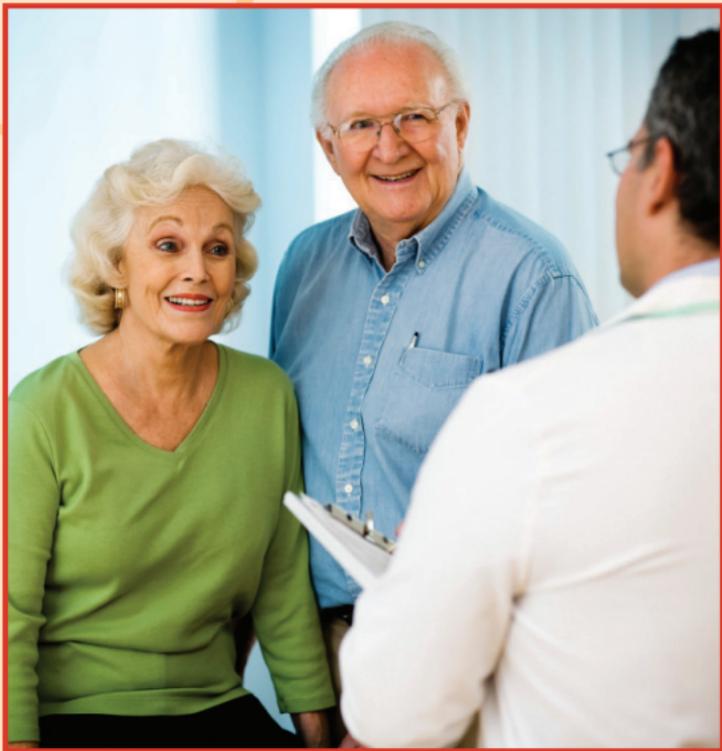




Everything you need
to know about:

Peripheral Artery Disease



Eli Anker, M.D., P.C.

754 Montauk Highway
West Islip, New York 11795
631-422-0909
EliAnkerMD.com



What is PAD?

Peripheral Artery Disease (PAD)

is a common condition that affects 8-12 million people in the U.S. every year. It is characterized by a gradual process in which cholesterol and scar tissue build up to form a substance called plaque which clogs the blood vessels. The disease process is often referred to as atherosclerosis, or hardening of the arteries.

The disease begins when LDL cholesterol passes from the bloodstream into the artery walls. Arteries damaged by high blood pressure, diabetes or smoking are at particular risk. As the cholesterol builds up it triggers inflammation which adds to the damage. Unless treatment halts the process, the cholesterol deposit grows into plaque and narrows the arteries. Mild narrowing may not produce any symptoms but moderate narrowing may prevent muscles from getting the extra blood flow they need during exercise, including walking. When blockages are severe, the tissues suffer, which can cause pain at rest. In addition, poorly healing wounds or even gangrene can develop.

Undetected PAD results in a severe decline in quality of life. It is associated with a two to three fold increase in mortality and three to five fold increase in heart attacks and strokes. Additionally, PAD is the leading cause of leg amputation and is more common than heart disease, cancer and stroke.



PAD Risk Factors

Major Risk Factors

- Smoking History
- High Blood Pressure
- Diabetes
- Abnormal cholesterol levels
- Previous or family history of PAD, heart disease or stroke
- Advancing age

Minor Risk Factors

- Chronic kidney disease
- Obesity
- African-American heritage
- Increased tendency to form blood clots
- Increased levels of homocysteine (an amino acid in the blood)

Evaluation ✦

The American Heart Association (AHA) and the American Diabetes Association (ADA) recommend annual PAD screenings for people with Type 1 Diabetes, people over 65, or people at any age who have the risk factors listed above.

A Pulse Volume Recording (PVR) is a safe and effective test that can detect PAD and give a good estimate of its severity. This exam is performed in our IAC accredited vascular laboratory. Most patients with PAD would also benefit from a Doppler test (vascular ultrasound). The PVR and Doppler exams are non-invasive and risk-free ways to identify the site of a blockage and determine how much an artery has narrowed. In general, a narrowing of more than 50% is likely to produce symptoms.

The team at Eli Anker M.D., P.C. is composed of experienced and talented specialists in the field of Vascular Surgery. Registered Vascular Technicians perform the imaging studies in our IAC accredited vascular facility. Our Vascular Specialists review and interpret the results of these studies, which help in the diagnosis and treatment of PAD.

Call our office for a vascular consultation and to schedule your PAD testing.

◆ The Signs &

Peripheral Artery Disease (PAD)

often goes undiagnosed and many people mistakenly think the symptoms are a normal part of aging. Many people with PAD experience no symptoms at all. When symptoms do arise, the earliest and most common problem is called intermittent claudication. Patients then experience a cramp-like muscular discomfort in the leg or hip but PAD can also produce weakness, fatigue, numbness, or tingling. Claudication develops when muscles are not getting the oxygen they need. Because muscles need more oxygen when they are working, claudication begins during walking or exercise and usually improves after a few minutes of rest.

People with mild blockages can walk long distances before the symptoms set in, but patients with moderate to severe PAD may experience distress after walking just a few yards or a block or two. Patients with PAD often have atherosclerosis in other arteries, which can increase their risk of experiencing a heart attack, stroke, and cardiovascular death.

Patients with claudication may respond well to lifestyle modification and medications. Early testing, detection, and intervention can be crucial! By following our recommendations, you can reduce the complications of PAD.

Learn your family's history

If someone in your family has had heart disease, a heart attack or stroke, you have a greater risk of having these problems as well. Your chance of developing Peripheral Artery Disease also increases. Following a strategy to prevent heart disease can also help to protect you from getting PAD.

Control cholesterol levels

LDL (or bad) cholesterol that builds up in the arteries causes the production of plaque. PAD is the result of this plaque buildup which narrows the arteries and eventually causes severe blockages. Improving your diet and exercising can help.

How to Protect Yourself ◆

Quit smoking

Smoking is a major cause of PAD. It is important to stop smoking and to avoid secondhand smoke.

Control high blood pressure

High blood pressure puts you at greater risk for PAD and heart-related diseases. Control your blood pressure by eating a healthy, low sodium diet and by exercising.

Manage diabetes

If you have diabetes, you are at a higher risk for cardiovascular events, including PAD. Control your blood glucose levels to reduce your risk.

Have your blood tested

It may help in predicting your risk of PAD.

Exercise and lose weight

Exercise can help you lose the extra weight that might be putting you at risk for heart disease and PAD. Always talk to your doctor before starting an exercise program.

If PAD progresses, the pain can become persistent. The blockages can be so severe that the muscles and tissues can't get enough oxygen, even when you are at rest. This is called "rest pain" and most commonly occurs in the foot. Ulcers or sores can develop which don't heal. In extreme cases, untreated PAD can lead to gangrene, a serious condition that may require amputation of a part of a foot or leg.

Fortunately, there are very simple tests that we can perform to determine if you have Peripheral Artery Disease.

Call our office for a consultation to slow, if not prevent, the progression of PAD.

◆ Treatment

The best treatment for PAD depends on a number of factors, including your overall health and severity of the disease. Our vascular specialists will assess your symptoms, medical history and physical examination to create a plan that best meets your individual needs.

Most treatment plans will include a diet and exercise program. If you are a smoker, it is absolutely essential that you stop the use of all types of tobacco. In some cases, lifestyle changes are enough to halt the progression of PAD and manage the disease. When these changes are not enough you may require revascularization treatments.

Patients with moderate to severe PAD may need these treatments to open blocked blood vessels and improve the blood flow (circulation) to their legs. These procedures may control pain, or help to heal a non-healing wound and could save a limb. Many people who were not candidates in the past for these procedures, because of age or medical problems, can now have the procedures we offer. The treatments are performed under local anesthesia, usually through one puncture site.

Our facility is equipped with the technology to perform the latest and most accurate diagnostic and therapeutic procedures. We are most proud of our in-office Endovascular Suite. We were the first team of Vascular Surgeons and Specialists on Long Island to open such a facility in 2008. This has allowed us to perform most vascular procedures on an outpatient basis, right in our office. Our patients are very pleased with the comfort and convenience we provide.

Our Arterial Interventions include the following:

Atherectomy

is a minimally invasive procedure that utilizes a special motorized catheter to remove plaque from a blood vessel. As with most vascular interventions, the catheter is inserted into the artery through a small puncture made in the groin area. The process

can be repeated forward and backward to remove a significant amount of disease from inside the artery thus helping to clear the blockage. This technique, as well as the others mentioned below, requires the use of our specialized fluoroscopic equipment.

Angioplasty

is a method of widening a narrowed artery. A catheter with a collapsed balloon is passed into the narrowed location and then inflated. As the balloon opens it crushes the fatty deposits and widens the channel in the blood vessel. Then the balloon is deflated and the catheter is withdrawn.

Stenting

is another minimally invasive technique to help open blocked arteries and improve circulation. Dr. Anker was the first doctor on Long Island to use stents when they first became FDA approved in 1991. A special catheter holding a collapsed metallic stent is passed into the blockage. As the wrapping around the stent is pulled back, the stent springs open. The stent then acts as a scaffold to hold the artery open. The catheter is then removed through the initial puncture wound.

Thrombolysis or Thrombectomy

(Clot removal or dissolution) are techniques using catheters to remove or break up clots within blood vessels. In addition a special chemical can be inserted directly into the clots to dissolve them.

Call our office to schedule
your PAD testing.

Symptoms of PAD

- Leg or hip pain during walking
- Leg weakness or fatigue
- Leg numbness or tingling
- Burning or aching pain in the feet or toes
- Ulcers or sores that won't heal
- Cold legs or feet
- Discoloration
- Loss of leg hair



Dr. Eli Anker



Dr. Michael Chu



PA Doreen
Delaney

Eli Anker M.D., P.C.

has cared for the vascular disease problems of our community since 1977, delivering the most current vascular treatments to our patients throughout Long Island. Dr. Anker, one of the Island's leading vascular surgeons and a recognized expert in the field of vascular surgery, and his staff are here to provide you with the highest level of care. We hope that you find this brochure informative and that we can help you lead a healthier life!



631-422-0909
EliAnkerMD.com