



Peripheral vascular disease

What is PVD?

In PVD, blood vessels that carry blood from the heart (arteries) become narrowed or clogged. The disease most often affects arteries in the legs.

The most common cause of PVD is atherosclerosis, a disease that causes a fatty material called plaque to build up on artery walls, restricting blood flow. As a result patients typically develop aching or painful cramps in the legs when walking—this is called claudication. The pain resolves quickly with rest.

As the disease progresses, skin around the affected blood vessels may become numb and cold to the touch. Leg sores called ulcers may develop that won't heal. Leg pain may occur also at rest. When PVD becomes severe, gangrene—a condition in which skin cells die from a lack of oxygenated blood—may develop.

Is there a cure for PVD?

There is no cure for PVD. But for many patients, making lifestyle adjustments is enough to manage symptoms and stop the disease from getting worse:

- **Stop smoking.** Smoking worsens atherosclerosis and therefore PVD. People who quit decrease their chances of dying from the disease by half.
- **Exercise.** A regular walking program is an effective treatment for PVD. You should walk 30 to 60 minutes at least 3 times a week, or ideally, every day. The goal is to walk until strong pain signals you to stop; then start walking again as soon as the pain goes away.

- **Control your diabetes.** If you have diabetes, you are more likely to have leg pain—even at rest—and leg ulcers. Those with both diabetes and claudication have a 1 in 5 chance of needing a toe, foot, or leg amputated because of gangrene. You can help prevent foot problems by taking good care of your feet and toenails. See a podiatrist for treatment of corns and calluses and treat minor problems such as blisters or small cuts immediately.

- **Limit your intake of fried and fatty foods.** This can help prevent further build-up of fatty material in your arteries.

Medical therapy

If you have high blood pressure or high cholesterol levels, which can worsen PVD, your doctor may ask you to take drugs to treat these conditions. Depending on the severity of your disease, your doctor may also prescribe medication to prevent blood clots and further build-up of plaque.

Surgical and nonsurgical treatments

You may need surgery if you have PVD that causes skin ulcers or gangrene, if it limits your lifestyle, or if you also have diabetes. Surgery can open up the clogged artery or attach a new artery to bypass the clogged one. In some cases, a physician can open the clogged artery nonsurgically using a small balloon that is threaded through an opening in the affected vessel, then inflated—a procedure called angioplasty. Often during angioplasty a small stainless steel tube-shaped device called a stent is inserted into the narrowed blood vessel as a permanent support that keeps the vessel open.

