TREATMENT OPTIONS FOR PERIPHERAL ARTERY DISEASE (PAD)

Treatment of PAD may depend on the severity of disease. The first goal of addressing this condition is to restore and preserve adequate blood flow to the extremities. Early detection is important: when caught early, PAD may be treated with medications, diet, exercise and smoking cessation. For example, exercise can cause new, tiny blood vessels to grow and bring oxygen to problem areas.

However, when patients begin experiencing symptoms such as frequent pain and reduction of mobility, this indicates that the disease is progressing. Your doctor may decide that it’s necessary to treat significantly blocked arteries with a medical procedure. Treatment options for helping blood to flow more freely range from less invasive catheter-based treatments to more invasive surgical options.

- **Angioplasty** – A catheter with a balloon is passed through the blocked artery. Once inflated, the balloon compresses the plaque against the wall of the artery. During angioplasty, a tiny metal mesh tube called a stent may be placed in the artery to help hold it open.

- **Atherectomy** – A special catheter is used to gently shave and remove plaque from the arteries.

- **Endarterectomy** – A catheter is used to open blocked blood vessels by removing plaque buildup from inside the artery wall.

- **Bypass Surgery** – A healthy blood vessel taken from another part of the body (or a small man-made tube) is used to create a detour to allow blood to flow around the blocked artery.

**ATHERECTOMY OVERVIEW**

If you’ve been diagnosed with peripheral artery disease, your physician may feel that a less invasive option called atherectomy is right for you. The goal of an atherectomy procedure is to open a pathway through the blocked artery, improving blood flow.

During this procedure, a tiny catheter, or thin tube, is guided through your artery to the site of the blockage and is used to gently shave away the buildup and remove it from the artery. Your physician will access the blocked artery through another artery, near your groin, foot, or other part of your body.
How should I prepare for my procedure?
You may need to discontinue certain medications or refrain from eating or drinking the night before. Your doctor and care team will provide specific instructions.

Where will my procedure take place?
This type of procedure will take place in a room designed for what’s called “interventional” therapy, equipped with X-ray equipment used to see the exact location of the blockage in your artery.

What happens during this procedure?
To start the procedure, a guidewire is inserted into the blocked artery. A special dye is injected and X-rays called “angiograms” are taken to help your doctor guide the catheter. Your doctor will then insert the catheter (through one of the access sites mentioned earlier) and then advance it through your artery until it reaches the obstruction. Once the buildup has been removed and blood flow has been improved, your doctor may decide to use additional devices to increase or stabilize the opening through the diseased artery.

Will the procedure be painful?
Generally an atherectomy procedure is not painful; it is performed under local anesthesia to numb the area where the catheter will be inserted. You may stay awake, but a mild sedative may be given.

How long does the procedure typically last?
The procedure itself typically takes less than one hour, but the preparation and postoperative recovery time can add several hours. Most commonly this type of procedure does not require hospitalization.

What should I expect after the procedure?
Following the procedure, you will be taken to a recovery room to rest for 4 to 6 hours. You should plan for transportation and care after the procedure as well as during recovery time at home. Usually, atherectomy will provide good relief of PAD symptoms. Typically you may begin your normal activities a few days after your procedure; this largely depends on the location of the artery. Your doctor can provide more details.

How should I care for myself after the procedure?
After your procedure, it’s important that you refrain from smoking, eat a low-fat, low-cholesterol diet, and exercise as recommended by your doctor. Your care team will give you specific guidelines, along with a list of potential symptoms that may require prompt medical attention.

What are the risks of this procedure?
Recurrence of the blockage in your artery (called restenosis) could occur at some time in the future, especially if you smoke. There are a few risks associated with atherectomy, which may include embolization (when debris from the blockage breaks loose), or perforation of the artery. As with any interventional procedure, you may experience an allergic reaction to the contrast dye or local anesthetic. Additionally, there is a risk of injury to the groin.

REMEMBER THAT EVERY PATIENT IS DIFFERENT, SO MAKE SURE TO DISCUSS YOUR QUESTIONS AND TREATMENT OPTIONS WITH YOUR DOCTOR.