



Asymptomatic Peripheral Arterial Disease

Robert Lookstein, MD

Disclosures:

In the last 12 months, Robert Lookstein MD, has engaged in outside activity as listed below:

Consultant: Boston Scientific, Cordis, Medicines Company

Speakers Bureau: Penumbra, Covidien

Research Support: BTG, Venite, Spectranetics, Boston Scientific, Philips Healthcare, Merit Medical

DSMB/CEC: Shockwave

For adults with asymptomatic lower extremity PAD, how confident are you that there is sufficient evidence for an intervention that improves:

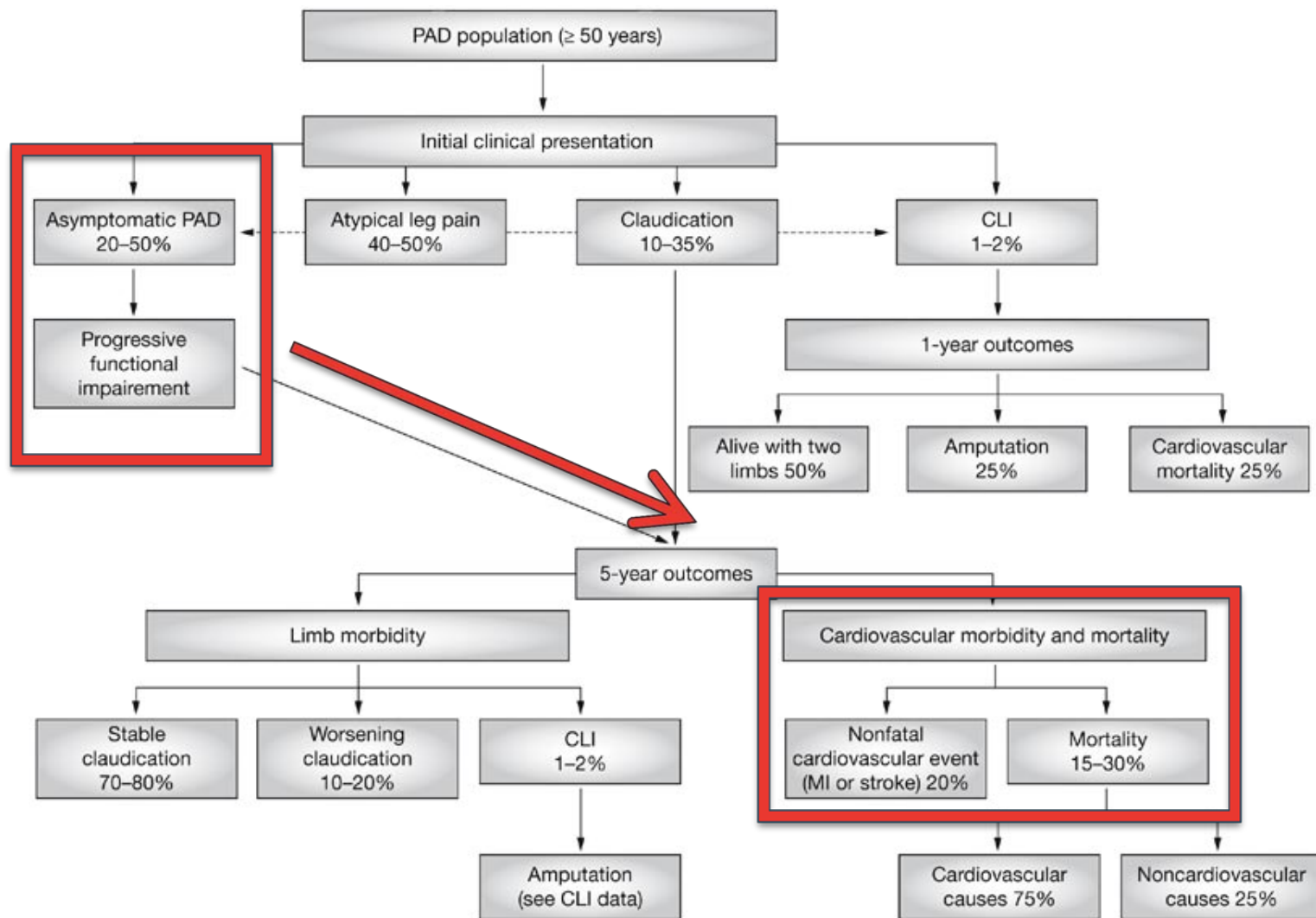
Immediate/near-term health outcomes?

Long-term health outcomes?

Hirsch AT, et al. ACC/AHA 2005 Practice Guidelines for the management of patients with peripheral arterial disease (lower extremity, renal, mesenteric, and abdominal aortic): a collaborative report from the American Association for Vascular Surgery/Society for Vascular Surgery, Society for Cardiovascular Angiography and Interventions, Society for Vascular Medicine and Biology, Society of Interventional Radiology, and the ACC/AHA Task Force on Practice Guidelines (Writing Committee to Develop Guidelines for the Management of Patients With Peripheral Arterial Disease): endorsed by the American Association of Cardiovascular and Pulmonary Rehabilitation; National Heart, Lung, and Blood Institute; Society for Vascular Nursing; TransAtlantic Inter-Society Consensus; and Vascular Disease Foundation. *Circulation*. 2006 Mar 21;113(11):e463-654.

Norgren L et al.; TASC II Working Group, Inter-Society Consensus for the Management of Peripheral Arterial Disease (TASC II). *Eur J Vasc Endovasc Surg*. 2007;33 Suppl 1:S1-75.

Society for Vascular Surgery Lower Extremity Guidelines Writing Group, Society for Vascular Surgery practice guidelines for atherosclerotic occlusive disease of the lower extremities: management of asymptomatic disease and claudication. *J Vasc Surg*. 2015 Mar;61(3 Suppl):2S-41S.



Recommendations

- Smoking Cessation
- Patient education
- Ankle Brachial Index and Patient surveillance
- Blood pressure control
- Lipid Control
- Serum glucose control
- Antiplatelet agents



To reduce
cardiovascular events
and monitor for
progression of
symptoms

Revascularization is not recommended in the asymptomatic population

Critical Limb Ischemia

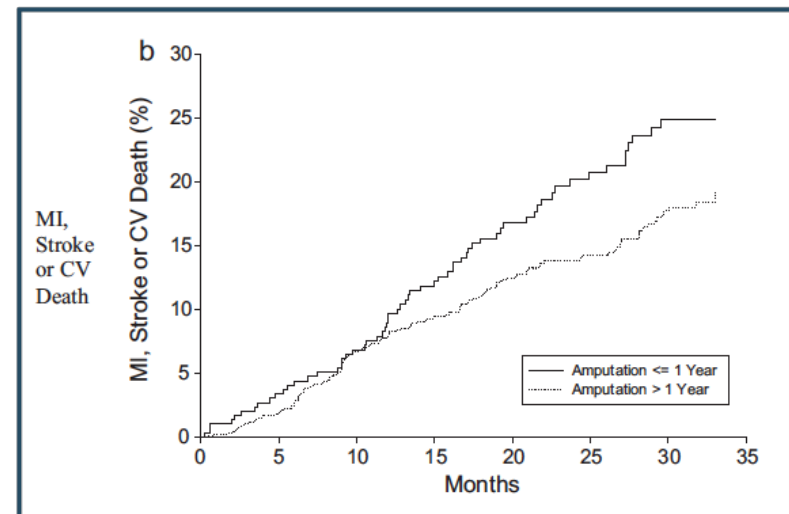
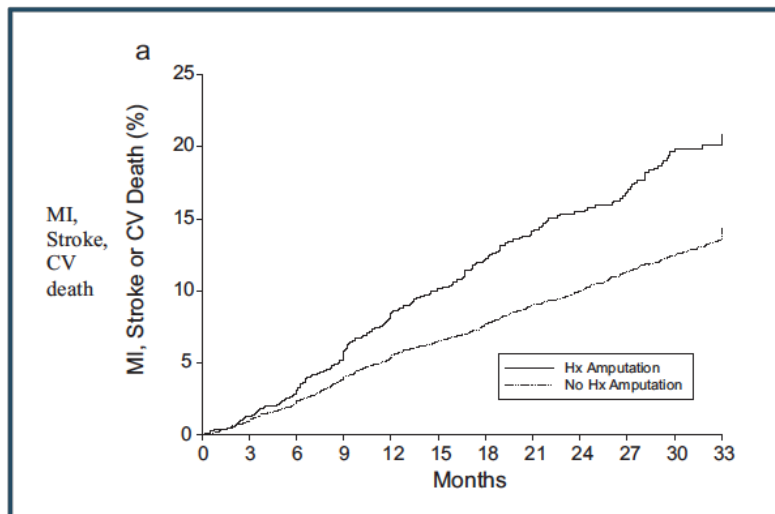
For adults with lower extremity critical limb ischemia, how confident are you that there is sufficient evidence for an intervention that improves:

Immediate/near-term health outcomes?

Long-term health outcomes?

Fate of individuals with ischemic amputations in the REACH Registry: Three-year cardiovascular and limb-related outcomes

Maria Teresa B. Abola^{a,*}, Deepak L. Bhatt^b, Sue Duval^c, Patrice P. Cacoub^e, Iris Baumgartner^d, Hong Keo^l, Mark A. Creager^f, Danielle M. Brennan^g, Ph. Gabriel Steg^{h,i,j}, Alan T. Hirsch^k, on behalf of the REACH Investigators¹



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Recommendation 24. Optimal treatment for patients with critical limb ischemia (CLI)

- Revascularization is the optimal treatment for patients with CLI [B].

ACC/AHA guidelines

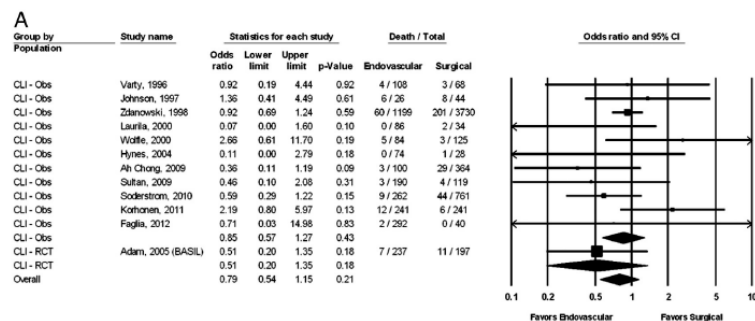
“...Treatment of CLI is dependent on increasing blood flow to the affected extremity to relieve pain, heal ischemic ulcerations, and avoid limb loss...”

Peripheral Vascular Disease

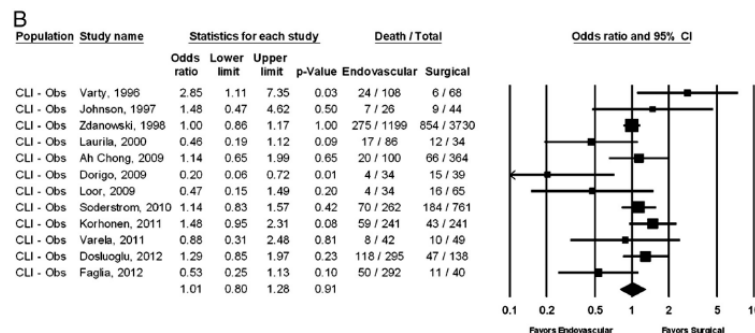
Comparative effectiveness of endovascular and surgical revascularization for patients with peripheral artery disease and critical limb ischemia: Systematic review of revascularization in critical limb ischemia

W. Schuyler Jones, MD, ^{a,b} Rowena J. Dolor, MD, ^{a,c} Vic Hasselblad, PhD, ^a Sreekanth Vemulapalli, MD, ^{a,b} Sumeet Subherwal, MD, ^a Brooke Heidenfelder, PhD, ^{a,c} and Manesh R. Patel, MD ^{a,b} **Durham, NC**

EARLY

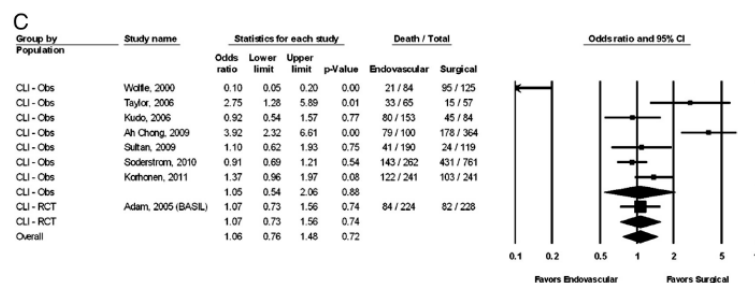


MIDTERM



**NO
DIFFERENCE**

LONGTERM



Overall Mortality