

Pain in your legs could signal trouble

By PAULA VESS
Regional Marketing Group

SHELBY - If you think the pain in your legs is from overworked muscles or just regular aches and pains that come with aging, think again. The pain could signal Peripheral Artery Disease (PAD).

The pain may come and go. It starts after walking, jogging or climbing steps. After some rest, the pain goes away. Don't dismiss the pain, however.

"Early stages of the disease with mild blockage may not produce significant symptoms, but as the disease progresses the pain increases," said Andrew Taylor, MD, a vascular surgeon at Cleveland Regional Medical Center.

Similar to other vascular diseases such as coronary and carotid artery diseases, which affect the arteries supplying blood to the heart and brain, PAD is caused by a hardening and narrowing of the arteries that supply blood flow to the arms and legs. Muscles need more oxygen when they are being used, and they get that oxygen through the blood. If you



'When your leg hurts when you walk, it isn't always arthritis.'

DOUG HOBSON, MD
VASCULAR SURGEON

have blockages in your arteries, those muscles are not getting enough oxygen when you walk or exercise. That lack of oxygen is what causes the pain.

PAD is a very common disease, and more than 12 million Americans have it. When diagnosed early, PAD is usually manageable through lifestyle changes. The problem is that many people mistake their symptoms for other things.

"When your leg hurts when you walk, it isn't always arthritis," said Doug Hobson, MD, also a vascular surgeon at CRMC.

Because the pain may start out mild and go away with rest, many people ignore it. "At first you may have a little pain when you walk," said Dr. Taylor. "But it keeps getting worse and if it isn't treated, eventually you can't walk."

SYMPTOMS OF PAD:

Pain, cramping, tiredness, weakness or numbness in the leg or hip muscles brought on by activity and relieved by rest. In more advanced cases of PAD, wounds on the feet or legs will not heal properly, gangrene can occur, and leg pain caused by poor circulation does not go away with rest. These conditions can lead to the loss of a limb.



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Dr. Andrew Taylor performs a vascular procedure in the state-of-the-art vascular surgical suite at CRMC.



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Dr. Taylor reviews a patient's chart before he begins surgery.

Often, people who have PAD also have coronary, carotid or other vascular disease processes, which can lead to serious risks of heart attack, stroke and/or kidney failure. "Vascular disease can affect the whole body," said Dr. Hobson. "About 38 percent of patients who have PAD also have issues with arteries supplying blood to the heart and head."

Having a family history of PAD, cardiovascular disease or stroke, smoking, high blood pressure, high cholesterol, and diabetes are all risk factors for developing PAD. "People who smoke 15 cigarettes a day have a nine-fold increase in developing leg pain due to artery blockage," said Dr. Hobson. "And PAD is five times more common in patients with diabetes."

Symptoms of PAD include pain, cramping, tiredness, weakness or numbness in the leg or hip muscles brought on by activity and relieved by rest. In more advanced cases of PAD,

wounds on the feet or legs will not heal properly, gangrene can occur, and leg pain caused by poor circulation does not go away with rest. These conditions can lead to the loss of a limb.

Diagnosis and treatment of PAD for most people is not difficult. "It can be a very simple process," Dr. Hobson said. "A lot of times simple tests with looking and listening is enough for us to zone in on problems most people are having."

Listening to the blood flow or blood pressure in the legs and comparing it to the blood pressure in the arms is one test. If the blood pressure in the legs is significantly lower than in the arms, that alerts the doctor.

When PAD is diagnosed early, the progression of the disease can be slowed or stopped by making lifestyle changes, such as stopping smoking, exercising and controlling blood pressure and cholesterol. "Early diagnosis is key," said Dr. Hobson. "The

earlier it is discovered, the more choices you have."

If lifestyle changes and medication do not control PAD, endovascular procedures can usually help. Both Dr. Taylor and Dr. Hobson have earned special certification in endovascular surgery from the American Board of Vascular Medicine. Commonly performed in the vascular surgical suite at CRMC, these procedures use a catheter, a long thin plastic tube that is inserted and threaded through an artery to reach the blockage. (See story below on the vascular suite and the latest treatment for PAD.)

The procedures are generally done on an outpatient basis with no cut, just a small needle stick, and most patients resume their normal activities within two to three days.

If you think you are at risk for PAD or you have symptoms of PAD, talk to your personal physician.

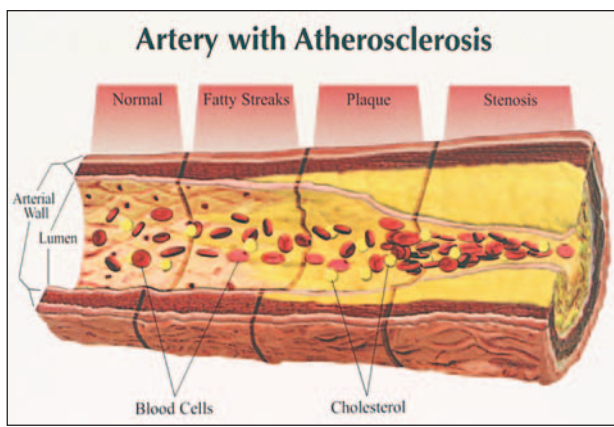
CRMC surgeons perform latest in PAD treatment in state-of-the-art vascular suite

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SHELBY - Peripheral Artery Disease (PAD) affects more than 12 million Americans. Left untreated, what starts out as a little pain in the legs can become a much larger problem with leg circulation. Without proper circulation, wounds do not heal, gangrene sets in and it could lead to the amputation of the foot or leg.

The traditional treatment for PAD meant having surgery with a large cut, a multiple-day hospital stay and needed a long time to recover.

Now, there are several minimally invasive, non-surgical procedures to treat PAD available in the vascular surgical suite at Cleveland Regional Medical Center. These procedures can



This illustration shows the progression of artery disease if not treated. Cholesterol causes buildup along the arterial wall.

usually be performed on an outpatient basis, take only a few hours, and require less time to recover than the traditional surgery.

One option is angioplasty which uses a balloon-tipped catheter that is threaded through the artery to the area that is narrowed or blocked. The surgeon inflates the balloon to open

the artery, deflates it and removes it. Sometimes, in order to keep the artery open and blood flowing properly, the surgeon will insert a stent, a small tube made of a special metal.

The newest vascular procedure offered at CRMC for the treatment of PAD is the Diamondback procedure. Like the other options, this procedure

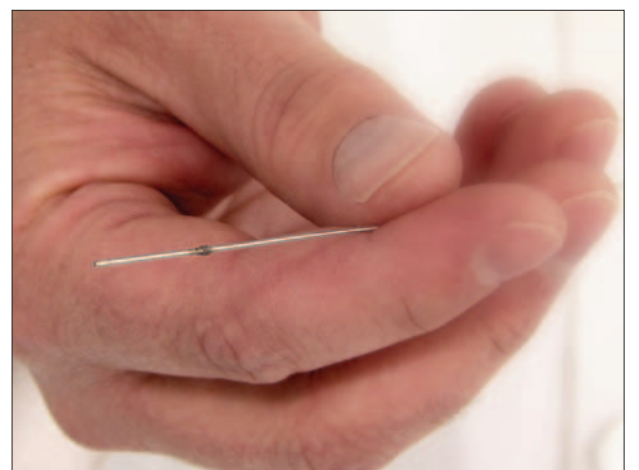
does not require a cut.

"It's just a needle stick," said Andrew Taylor, MD a vascular surgeon at CRMC.

As in the other procedures, a catheter is inserted into the artery and guided to the area of the blockage. Once the surgeon reaches the blockage, the Diamondback tool goes to work. A blade covered in very fine diamond dust spins rapidly inside the artery, grinding away the plaque or fatty deposits that build up on the artery walls.

"The resulting particles are smaller than blood cells, making clots unlikely," said Doug Hobson, MD, also a vascular surgeon at CRMC. "The particles eventually get filtered out of the body."

Nationwide, the Diamondback procedure has been used by surgeons since 2007 to help treat more



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This is the tiny Diamondback tool used to grind away the plaque on the artery walls. The blade is covered with very fine diamond dust that spins rapidly, breaking down the build up so the particles can be eliminated naturally from the body.

than 9,000 patients. When vascular surgeons at CRMC began using the procedure last year, CRMC was the first hospital in western North Carolina to offer it. CRMC's state-of-the-art endovascular suite allows the surgeons to perform the most up-to-date minimally invasive vascular procedures.

"When the hospital

opened our vascular suite three years ago, they provided us with the best equipment available anywhere," Dr. Taylor said. "Our vascular suite is as good as any in the country, and it is available close to home."

For more information on vascular services at CRMC, call Ernest Shock at 980-487-3877.



Quality Performance

Cleveland Regional Medical Center received three awards for Top Performance in the areas of Heart Failure, Acute Myocardial Infarction, and Hip and Knee Replacement. The Wall Street Journal and PBS have featured stories about our success. Hospitals across the Carolinas and one of the largest healthcare systems in England visited here to learn about our programs. For more information call 980-487-3028.

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