

Intermittent Claudication

Claudicación intermitente

"WHEN THE LEGS HURT... THE HEART SUFFERS"

Leg pain occurs for several reasons, and intermittent claudication is one of them.

WHAT ARE THE SYMPTOMS OF INTERMITTENT CLAUDICATION?

They include pain, discomfort, heaviness, and cramping in the muscles of the calves (gembellus), which are typically felt while walking and subside with rest.

WHY DOES INTERMITTENT CLAUDICATION OCCUR?

When walking, muscles need more oxygen, in the same way an engine needs more fuel to run. Oxygen travels through the blood; when cholesterol blocks the arteries carrying the blood, the muscles do not get the oxygen supply they need when walking, resulting in pain or discomfort.

WHO ARE MORE LIKELY TO HAVE INTERMITTENT CLAUDICATION?

Diabetic patients and smokers (or ex-smokers) are at higher risk; high cholesterol, high blood pressure, and old-age are also factors for intermittent claudication.

WHAT IS THE RISK OF INTERMITTENT CLAUDICATION?

Intermittent claudication is a sign that arteries are blocked, therefore it is very likely that other arteries carrying blood to organs such as the heart, brain and kidneys are also affected. In general, patients ignore this issue. (1)

People with intermittent claudication are at higher risk for myocardial infarction, stroke, or even death from cardiovascular causes.

Intermittent claudication impairs the quality of life in aspects like walking capacity and daily activities; people therefore self-limit their tasks and walk less.

In severe and extreme cases, especially when the disease of the arteries is associated with diabetes, some wounds may not heal, resulting in infection and threatening the viability of the leg.

HOW IS INTERMITTENT CLAUDICATION DIAGNOSED?

Diagnosis is made by the doctor on the basis of the patient's medical history, physical examination and characteristics of the pain. If the doctor does not feel the pulse when examining the lower limbs, that may mean clogged arteries.

Measuring blood pressure in the legs and comparing it with blood pressure in the arms is a useful technique. When blood pressure in the legs is lower than in the arms, it means there is a clogged artery. The first study a doctor usually orders to check the arteries is an echo-Doppler.

HOW IS INTERMITTENT CLAUDICATION TREATED?

Treatment has two priorities: to reduce the risk for heart attack or stroke, (2) and to reduce the symptoms so that patients can improve their walking distance.

Therefore, it is very important to manage blood pressure and lower cholesterol levels, as is the case with other conditions affecting the arteries. (3)

In the case of patients who smoke, quitting is very important (4) and usually improves symptoms.

Taking regular walks (provided there are no wounds in the feet or legs), supervised by the doctor, helps create new channels (called collateral circulation) and improve symptoms.

Specific medications can be helpful to improve circulation and reduce symptoms.

If the symptoms persist despite following treatment, the doctor may suggest invasive procedures to unblock the arteries.



Fig. 1



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