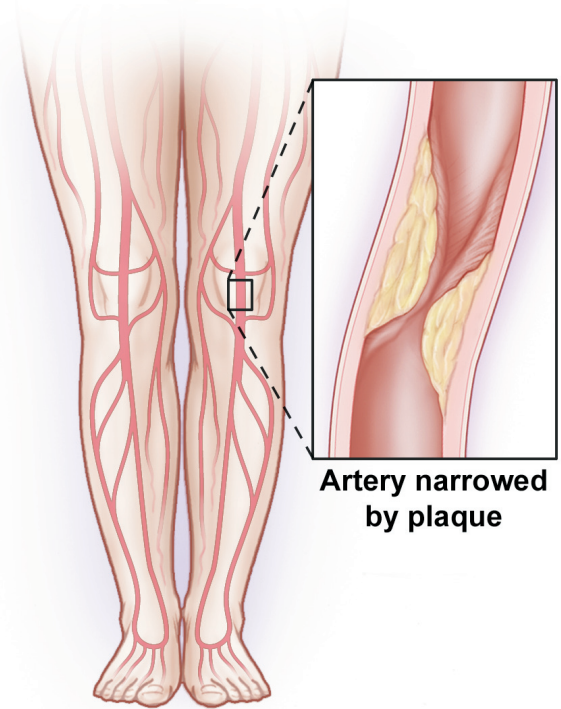


Aspirin Therapy for Patients with Peripheral Vascular Disease — PAD

In a vast majority of cases peripheral vascular disease (PAD) is caused by hardening of the arteries, or atherosclerosis. What that means is the vessels to the legs get blocked by plaque. Sometimes the plaque will remain stable and the disease will not advance, however, in certain patients the disease progresses and the symptoms worsen. The goal of the vascular surgeon is to help the patient live longer while slowing the progression of the disease and improving the patient's quality of life.

PAD, or hardening of the arteries of the legs, is usually a sign of a systemic disease affecting other parts of the body as well. If one has plaque in their arteries to the legs, there is a good chance they will also have plaque in the arteries of the heart and the arteries to the brain. Patients with PAD are at increase risk of having a heart attack and a stroke. In order to help these patients live longer, most doctors recommend some agent that will affect how well the patient's platelets function, or in lay terms, make the blood a little thinner. The most common agent used is aspirin.



How aspirin improves vascular health

A low dose enteric coated baby aspirin has been shown to successfully reduce the rate of heart attacks and strokes in patients with vascular disease. Simply taking an 81mg enteric coated aspirin once a day can reduce the risk of heart attack or stroke by approximately one-quarter. In addition to that, some researchers have suggested that taking an aspirin a day will have numerous other benefits for patients including reducing the risk of colon cancer.

There are many theories about why aspirin may work. One of the most popular theories is that aspirin reduces the amount of clotting in the blood stream. Imagine a blood vessel, which looks like a tube, with some plaque in it. The plaque reduces the size of the tube. If there is a small amount of plaque it does not affect blood flow. However, if the amount of plaque increases, blood flow reduces significantly. At some point the extent of plaque can increase to where blood flow is tremendously diminished. What if in this area of high plaque burden, a small clot would form? This clot may block the total flow in this artery. This is called atherothrombosis. It is believed that clot forming in an area where there is an

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extensive narrowing plaque is the cause of many heart attacks, strokes, and difficulty walking in the legs. Aspirin helps to reduce this amount of clot formation.

Numerous studies have shown the cost-effectiveness of taking aspirin is only pennies a day whether one buys name brand or generic enteric coated aspirin. In view of the fact that there is a significant reduction in death, stroke, and the need for future operations or angioplasty, secondary to symptoms, most patients with vascular disease should be taking an aspirin a day. There are few exceptions, but one is patients who are not tolerant of aspirin. The most common problem these patients have is stomach or gastrointestinal upset. Patients who have known ulcer disease of their stomach may not do well on aspirin.

What should you do if you are at risk for vascular disease?

Discuss your risks of vascular disease and PAD with your physician. If you are at risk, talk with them about taking aspirin every day. Generally, most patients with vascular disease should be taking an aspirin every day. See a vascular surgeon if your symptoms worsen.

Vascular surgeons are the only physicians treating vascular disease today who can provide all the treatment options available.



Society for Vascular Surgery® members are the leaders in vascular health who provide the most comprehensive diagnosis and treatment.

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