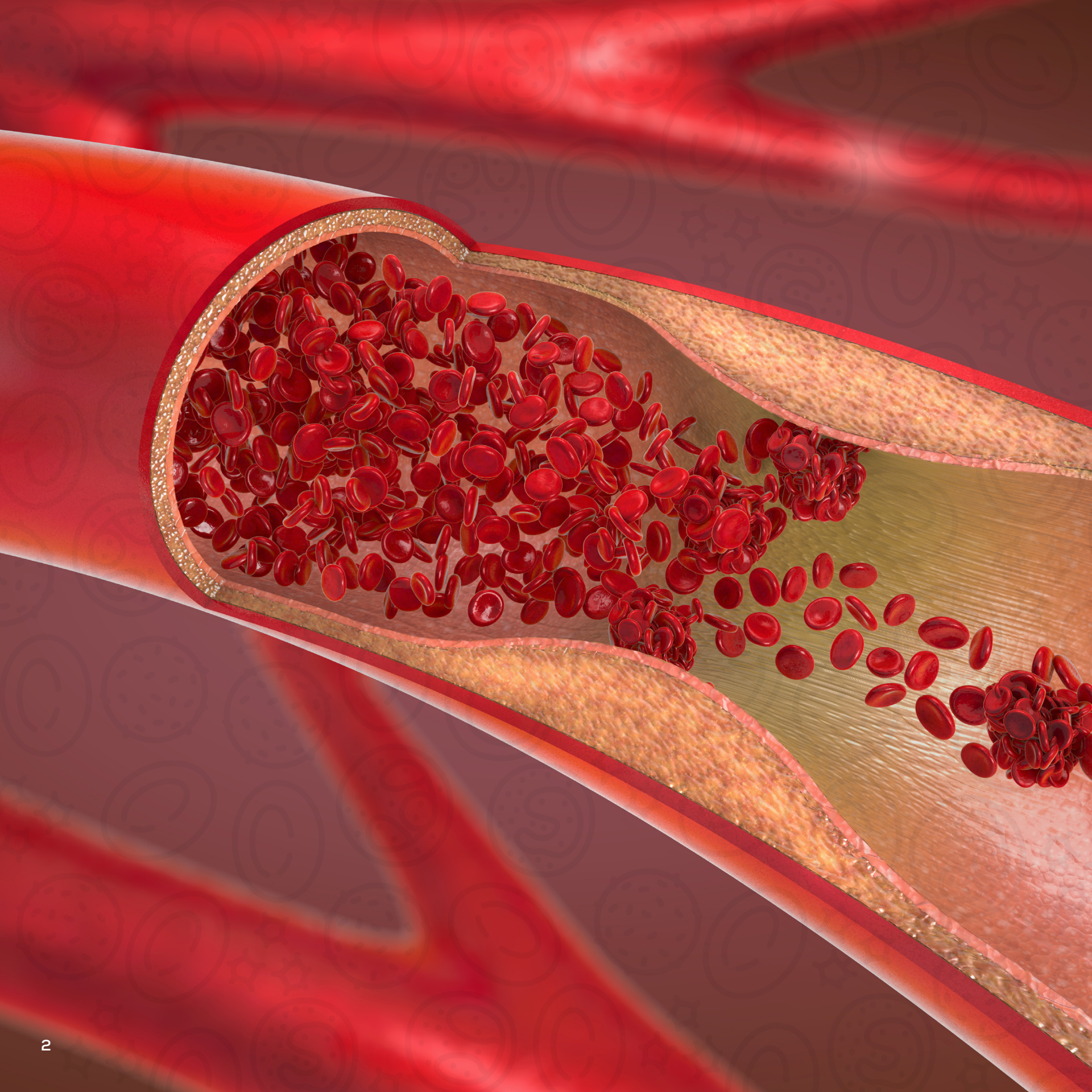


AFRICAN AMERICANS AND

PERIPHERAL ARTERY DISEASE (PAD)

This booklet provides
information regarding
symptoms, prevention,
and **next steps.**



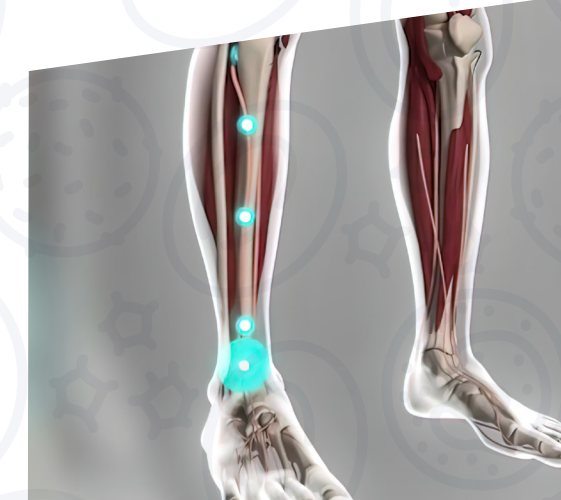


WHAT IS PERIPHERAL ARTERY DISEASE?

When walking, climbing stairs, or working out, do you ever have **cramps in your hips, thighs, or calves**? Do you have **wounds on your feet or toes that won't heal or are taking a long time to heal**? **If you said yes**, you should **talk to a doctor** about your symptoms because they could be signs of Peripheral Artery Disease (PAD).¹

PAD is a disease that causes the **arteries in the body to become clogged or narrow**, causing **less blood flow to the legs and feet**. Atherosclerosis (ath-ero-scle-ro-sis) develops when **plaque (fatty deposits) builds up** in the arteries.² The **blockage of your arteries can take place throughout the body**, including in the **heart, brain, legs, pelvis, and kidneys**.

Getting informed about symptoms, **prevention measures**, and **next steps can save your legs**.





WHY IS PAD AN ISSUE FOR BLACK AMERICANS?

Up to **12 million people** in the US are estimated to have PAD, and **many cases go undetected.**^{3,4} PAD often impacts the legs, and the risk of developing PAD increases with age in both men and women.⁵

Unfortunately, when compared to other racial and ethnic groups, **Black and African Americans** experience a higher frequency of illness as well as lower rates of access to preventative care.⁶

Black Americans are also **twice as likely** to have PAD and are more likely to lose a limb because of it.⁵ **Amputation of a limb** can often be postponed or avoided when treatment is provided right away and is specific to your symptoms.¹



THE CONNECTION BETWEEN CAD & PAD

You are more **likely to develop PAD** if you already have **coronary artery disease (CAD)**. Likewise, if you have PAD, you are also more likely to develop CAD. The buildup of **fatty deposits in the arteries**, atherosclerosis, is the **primary cause of both PAD and CAD**.⁷

Your **medical and family history** are important to your care. If there is a **significant history of chronic kidney disease** in your family, some **medical professionals could evaluate you earlier**.⁸ **Early detection** is key for **effective disease management and treatment**.

THE FOLLOWING FACTORS CAN INCREASE YOUR RISK OF DEVELOPING PAD.⁷



Have a history of smoking



Have high cholesterol



Being obese



Suffer from Type 2 diabetes



Have high blood pressure



Being physically inactive



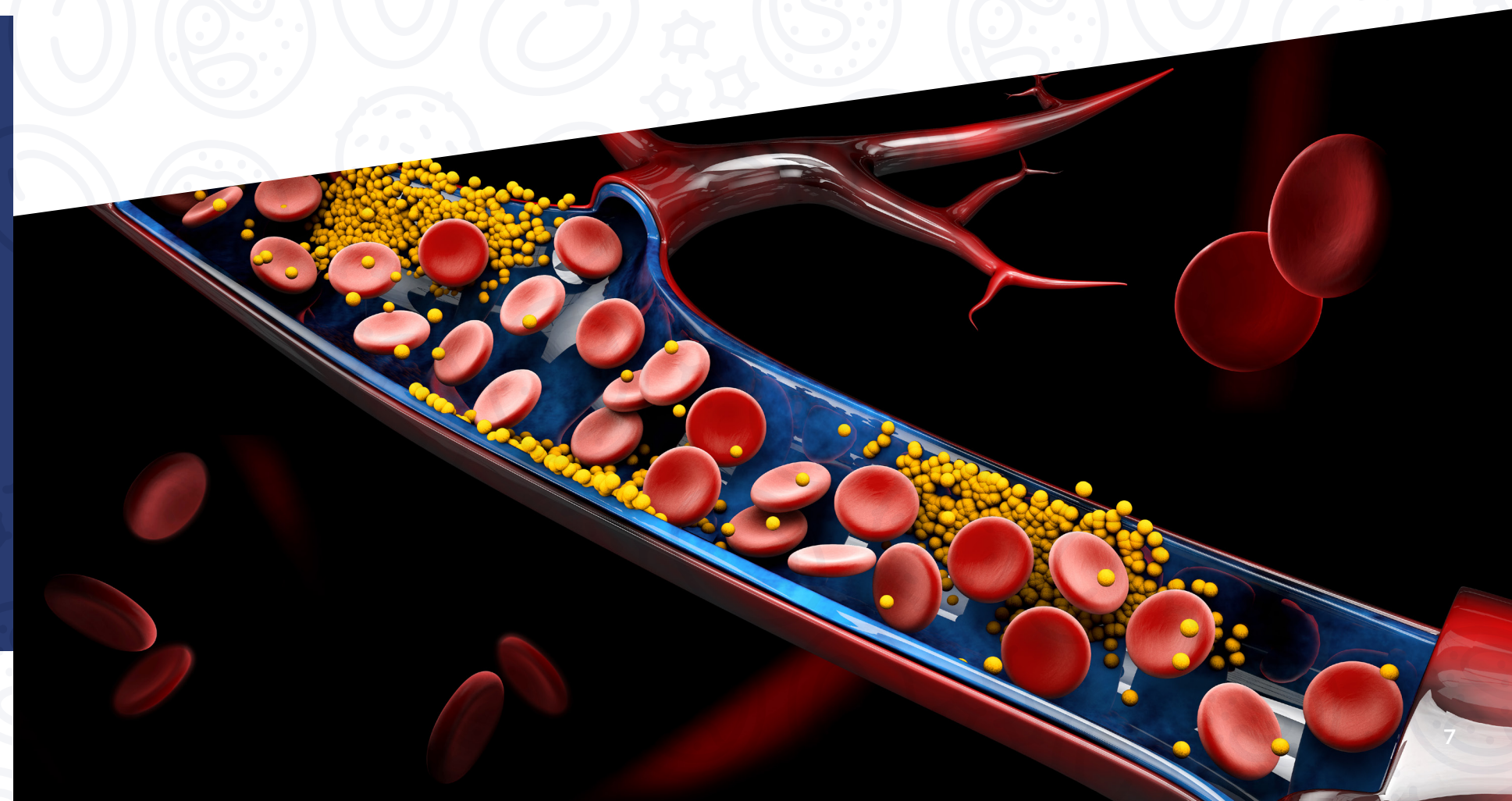
Family history



Increased age



Chronic kidney disease





THE IMPORTANCE OF UNDERSTANDING YOUR RISKS

Your health is important. If **something doesn't feel right**, visiting your doctor is the **first step to determining** your next **course of action**.

[✓] **PAD can be treated**, and there are ways to reduce the likelihood of developing it. The sooner you consult a doctor, the greater your chances are of **saving your leg**.

[✓] If **treatment is delayed for an excessive amount of time**, **amputation may be unavoidable**. However, reducing the progression of gangrene (dead tissue) is possible if treatment is started early enough.

SIGNS AND SYMPTOMS

The **severity of PAD symptoms** and how they appear can be **very different from person to person**. It's possible that **you can have PAD and not show any symptoms** or confuse PAD symptoms with those of another condition. A common symptom of PAD in the **legs is painful cramping in the hips, thighs, or calves when walking, climbing stairs, or doing other types of physical activity**.^{1,9} That is why **visiting your doctor** for **regular checkups** is so important.¹

SEVERE PAD SIGNS AND SYMPTOMS MAY INCLUDE ANY OF THE FOLLOWING⁹:



Leg pain that doesn't go away when you stop exercising



Become affected with **gangrene**, or dead tissue



A leg or foot with a **lower temperature** than the opposite leg or rest of body.



Foot or toe wounds that won't heal or heal very slowly



Poor nail growth on the toes or hair growth on the legs



You may have PAD and **not experience any symptoms**

KNOW YOUR RISK

- ✓ **Schedule a checkup** with your **healthcare provider** to discuss your signs and symptoms.⁹
- ✓ **Make an appointment** for a **physical examination**, since this is the first step in identifying PAD. **Be sure to take off your shoes and socks** and ask your doctor to **examine your feet** and feel for your pulses **at your next medical appointment**.⁹
- ✓ A simple, **noninvasive test** called an **ankle-brachial index (ABI)** can be performed by **your doctor to check for poor circulation** by **comparing the blood pressure** in your arms and legs.⁹





REALITIES OF AMPUTATION

Early detection is key to **reducing your risk of amputation** (loss of toe, foot, or leg) and **improving your chances of saving your leg.** The **appropriate treatment** can prevent or **delay the need for amputation.**¹

Sometimes, **no matter how hard doctors try to save a patient's limb, amputation is the only option.** After an amputation, **daily life becomes more difficult for amputees,** making it harder for them to participate in social activities, and it becomes **physically demanding to get around.**⁹





RISK OF AMPUTATION IN AFRICAN AMERICANS

The physical environment in which you live, learn, work, play, and worship has an **impact on your quality** of life and health. Economic and societal factors can also influence your health.¹¹

[✓] Black Americans are up to **4x** more likely to **undergo amputation** than White Americans.¹²

[✓] **71%** of individuals who have **undergone amputation** will pass away within three years.¹³

[✓] **Black women** with PAD are **7.6x** more likely than other women to have an **amputation**.¹⁴



DIABETES AND PAD

If you have **Type 2 diabetes**, you are at a **higher risk** of experiencing negative outcomes from PAD. **African Americans** have a higher risk of **developing diabetes**.¹⁵ Working with your health care provider to **develop a strategy** that includes **glucose management** can be **beneficial to diabetic patients**.¹⁵

DIABETES MANAGEMENT ¹⁶:

- ✓ **Healthy diet** to reduce your cholesterol and manage diabetes
- ✓ Reaching and maintaining a **healthy weight**
- ✓ Managing other **cardiovascular risk factors**
- ✓ Foot care and ulcer **prevention**

HOW IS PAD TREATED?

When **treating peripheral artery disease**, the **goal of treatment** is to both **reduce the symptoms** of the condition and **stop it from getting worse**.

Changing your lifestyle and **engaging in regular exercise** can **slow the progression of PAD symptoms**. There are **drugs that have been shown to reduce symptoms** associated with leg pain.

CHANGES YOU CAN MAKE TO YOUR LIFESTYLE TO LOWER YOUR RISK INCLUDE ¹⁴:

- ✓ Stopping **smoking**
- ✓ **Managing Type 2 diabetes** and blood sugar levels
- ✓ Controlling **blood pressure**
- ✓ **Being physically active** (including a supervised exercise program)
- ✓ Eating a **heart-healthy diet** low in saturated and trans fats

MEDICATIONS THAT YOUR HEALTHCARE PROVIDER MAY PRESCRIBE INCLUDE ¹⁶:

- ✓ High **blood pressure medicine**
- ✓ Medicines that **reduce cholesterol**, such as statins
- ✓ Medications to treat **claudication** (leg pain)
- ✓ **Antithrombotic agents** (eg. antiplatelet and anticoagulant)

Unfortunately, **for some people with PAD**, changing their **lifestyle**, **getting more exercise**, and taking medications **just isn't enough**. If you have PAD, you **might require surgery** or a **minimally invasive procedure**. Choosing the **optimal course of treatment** for you will involve **discussing your options** with a **healthcare provider**.¹⁶



GET SCREENED

If you **have questions** about peripheral artery disease (PAD), preventing amputation, or maintaining your leg and foot health, speak to your **doctor** and **get screened for PAD.**

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