Weekend Doctor

By DR. THOMAS F. VAIL

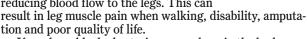
If you're wondering about the health of your heart, try looking at your feet. The lowly, stepped-on, shoe-squished foot could very well hold clues about the state of your coronary arteries.

If your feet show signs of poor circulation, or peripheral arterial disease, your heart could be suffering as well.

I regularly check patients for the subtle signs that could indicate peripheral arterial disease.

Approximately 9 million Americans over the age of 50 are living with peripheral arterial disease that affects their legs and raises their risk of having a heart attack. Unfortunately, many people with the disease do not even know they have it.

Peripheral arterial disease occurs when arteries in the legs become narrowed or clogged with fatty deposits, reducing blood flow to the legs. This can result in leg muscle pain when welling dis



If you have blocked arteries somewhere in the body, you are likely to have them elsewhere. Thus, peripheral arterial disease is a red flag that other arteries, including those in the heart, are likely affected. This increases the risk of a heart disease, heart attack and even death.

Peripheral arterial disease is a silent disease, causing no immediately recognizable symptoms. Often, people think the symptoms are just part of the aging process. This includes a loss of hair on the feet.

Fatigue, heaviness, tiredness or cramping in the leg muscles (calf, thigh or buttocks) that occurs during activity such as walking and then goes away with rest is also an indication of poor circulation.

Sometimes my patients will have toe or foot pain when they are resting that often disturbs their sleep. Many of my patients think this leg and foot discomfort is just part of "getting older," but it could indicate more serious problems.

Different pulses, very cold feet or a change in color also could indicate a circulation problem.

If I see any signs of peripheral arterial disease, I recommend a simple, non-invasive test called an ankle-brachial index. It compares the blood pressure in the ankles to the blood pressure in the arms.

Everyone over the age of 50 is at risk for peripheral arterial disease, and their risk increases if they have diabetes, high blood pressure, high cholesterol or if they are African-American.

In my practice, I recommend all patients who are over the age of 50 have an ankle-brachial index test done if they have diabetes and at least one other risk factor such as a history of smoking, abnormal cholesterol or high blood pressure.

Diabetics that have skin wounds or ulcers on the feet or toes that are slow to heal, or that do not heal for 8 to 12 weeks, are good indicators of poor circulation. If a patient is over the age of 70, then I recommend they get tested even if they don't have any risk factors.

If you fit into any of the above groups, talk to your health care provider about being tested for peripheral arterial disease. Through early detection and proper treatment, we can reduce the devastating consequences of peripheral arterial disease and improve the nation's cardiovascular health.

Vail is with Advanced Footcare Clinic, Findlay. Questions for Blanchard Valley Health System experts may be sent to Weekend Doctor, The Courier, P.O. Box 609, Findlay, OH 45839.