

because blood can move more easily with gravity. A warm color, redness, and reduced pain are signs of resting claudication. If rest pain lasts for more than two weeks or there are arterial ulcers, it may indicate critical limb ischemia. If the skin isn't receiving enough oxygen, the color of the skin may decrease. Arterial ulcers look dry and punched out, which contrasts with venous ulcers.

The more severe type of peripheral artery disease is when the actual skin manifestations are getting more severe. This includes: Decreased color Cold extremities Less hair Thin skin Thin nails This can progress to arterial ulcers, dry gangrene, and wet gangrene. Dry gangrene is characterized by black discoloration of the skin. Wet gangrene can potentially progress to a septic type of nature. Acute limb ischemia could be due to a thrombus or an embolus. If there is no blood flow past the area of the embolus, there will be no pulse palpated distal to the site. This is called the six p's: Pain out of proportion Paralysis Paller Poikilothermia Paresthesias Pulselessness If you see these symptoms, it is very concerning for acute limb ischemia. The first-line test to use is an ankle-brachial index (ABI). The lower the ABI, the more severe the peripheral artery disease. The next test is a duplex ultrasound. Another test used is something called medial calcific sclerosis.

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Page 2 of 2