Patient Information

University Hospitals Coventry and Warwickshire NHS Trust

Vascular Unit

Intermittent Claudication and Peripheral Arterial Disease (PAD)

The cramp-like pain in your legs is called **intermittent claudication**. 'Intermittent' means the pain is not there all the time. 'Claudication' comes from the name of the Roman Emperor Claudius, who was known to limp.

Intermittent claudication is often the first sign of **peripheral arterial disease (PAD)**. This condition is characterised by cramp-like pain or discomfort which starts after walking a certain distance and is relieved when you rest. The pain often returns when you walk again. This condition is caused by a build-up of fatty deposits on the inside of the arteries. These deposits narrow the arteries, reducing blood flow to your legs. The medical name for this is **atherosclerosis**, sometimes known as 'hardening of the arteries'. The fatty deposits are called **atheroma** or **plaques.**

Risk factors for atherosclerosis

- Smoking
- High blood pressure
- High cholesterol
- Diabetes
- Family history of heart disease or vascular disease
- Age

Will it get worse

Your symptoms may remain stable. Most people with intermittent claudication continue to have the same, or milder, symptoms for many

years if they make some lifestyle changes.

For some people, the pain may start after walking shorter distances. You may also experience **night pain** - pain in your feet while in bed. This can be a sign that the narrowing in your artery is becoming more severe or that the artery is completely blocked.

Another sign that the disease is progressing is the development of ulcers (non-healing open sores) on your legs or feet.

How can you help yourself

There is a lot you can do to help or slow down the progress of peripheral arterial disease.

Stop smoking

Stopping smoking is the most important thing you can do to prevent your condition from getting worse. Other lifestyle changes are much less effective if you continue to smoke.

Stopping smoking may be easier than you think. You can get advice on how to quit from your local pharmacy, GP surgery and online self-referral services.

Regular exercise

Physical activity helps your body grow smaller blood vessels to bypass narrowed or blocked arteries. This can allow you to walk further before pain starts.

A purposeful daily walk is the most important exercise. Walk as far as you can at a comfortable pace without stopping. Keep walking until the pain becomes severe enough that you need to rest, then start again when the pain disappears. You may be advised to join the vascular supervised exercise programme to support you with walking and exercise.

What if I have other health conditions?

If you have heart or breathing problems that are well controlled, you may be able to join a supervised exercise programme for people with intermittent claudication. These programmes are held at Atrium Health in Coventry City Centre and Rugby St Cross Hospital and involve regular weekly attendance.

Healthy eating

A diet low in sugars and low in saturated fats is advised.

Medications for peripheral arterial disease

You will usually be advised to take a small daily dose of clopidrogel (75mg). This helps by reducing the risk of a clot forming. If there is a reason you cannot take clopidrogel, aspirin may be prescribed instead.

A ‘statin’ may also be advised to protect against further arterial disease and lower your cholesterol.

Blood pressure

It is important to have your blood pressure checked regularly. At home blood pressure readings will generally be advised at a level of 135/85 mmHg or below. If your blood pressure is high (**hypertension**), your doctor may prescribe tablets to reduce it and give you specific blood pressure targets to aim for. This will help to reduce your risk of a heart attack or stroke.

Look after your feet

By checking your feet regularly, you are more likely to notice changes such as hard skin or sores, which may be the start of an ulcer. Because blood flow to your feet and lower legs is reduced, any skin damage may take longer to heal. Wash your feet every day and dry them thoroughly.

Have your feet measured before buying new shoes, don’t walk around barefoot, and report any non-healing sores or broken skin promptly.

Other treatment options

If you experience the following symptoms, you should report it to your GP or vascular nurse so that referral to a vascular consultant can be considered:

- You develop a wound, open sore, or ulcer on either of your feet that is not healing, or
- You regularly, or on a nightly basis, develop pain in your feet and/or toes at night that only goes away if your hang your foot down to the floor or need to sleep in a chair with your feet down for the pain to go away.

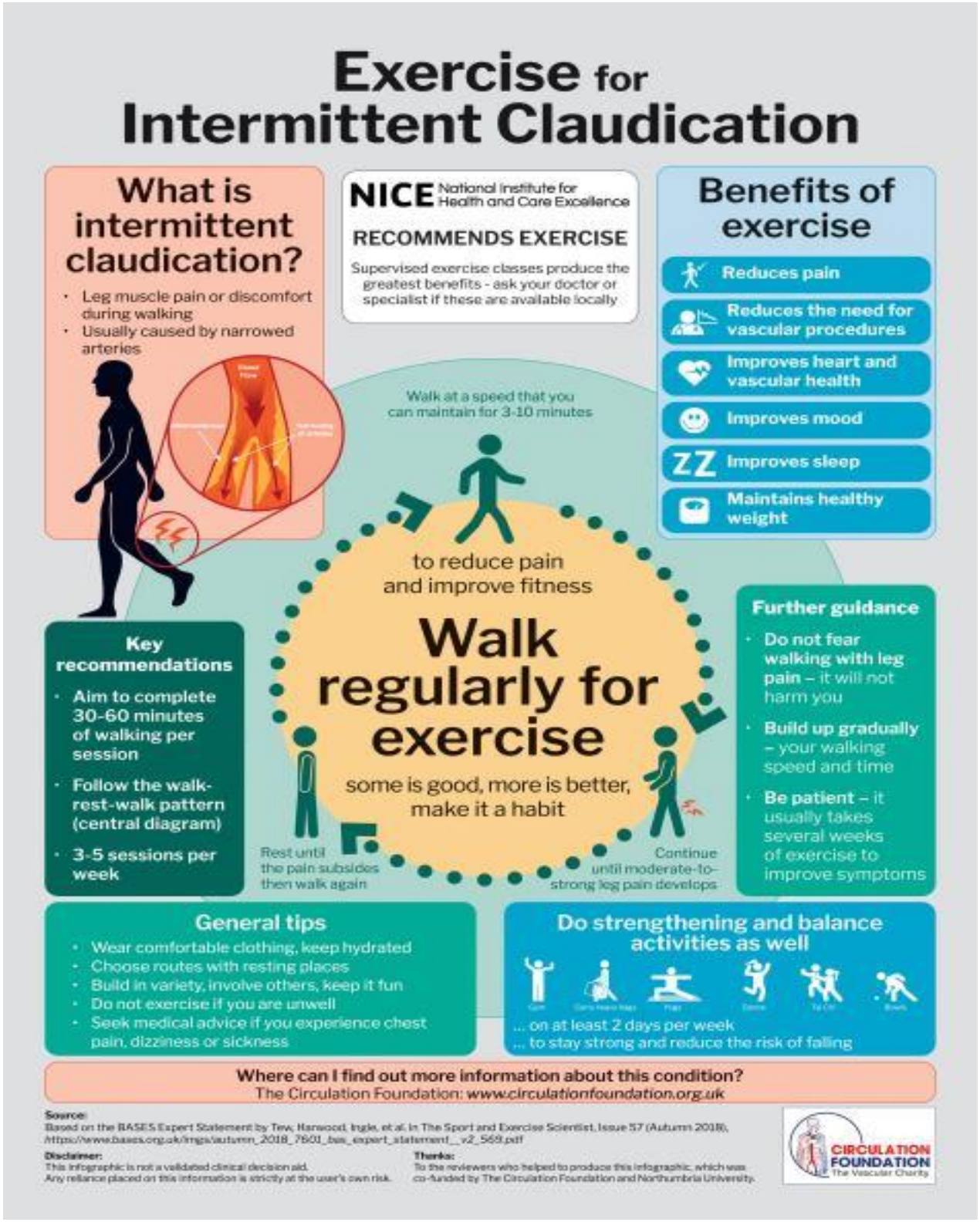
It's up to you

Severe peripheral arterial disease can lead to gangrene and amputation, especially if you continue to smoke. It is important to think carefully about whether you are ready to make the lifestyle changes described in this booklet to help prevent this.

It can be hard to make all the changes at once. If you need to stop smoking, focus on this first.

Set achievable goals. For example, aim to walk to the shops instead of taking the bus, and work towards it **every day**. Make your walk and home exercises part of your usual routine. Introduce dietary changes you can maintain, slowly making a healthy diet your normal choice.

Your walking distance will not improve overnight. It may take several months before you notice any difference.



Glossary

Angioplasty
Treatment using a balloon catheter to open a narrowed artery.

Atheroma (or plaque)
Fatty material that slowly builds up on the inner lining of artery walls.

Atherosclerosis
A condition in which atheroma builds up in the arteries, also called ‘hardening of the arteries’.

Hypertension
High blood pressure.

Intermittent claudication
Pain in the leg muscles while walking that eases when you stop.

Neuropathy
Reduced or altered sensation in your feet, often linked to diabetes.

Peripheral arterial disease (PAD)
A condition in which atherosclerosis affects arteries anywhere in the body except the heart (called cardiovascular disease) or the brain (called cerebrovascular disease).

Night pain
Pain in your feet at night in bed, which is relieved by hanging your leg over the side of the bed.

If you would like to discuss the information in this booklet, please contact the Vascular Nursing team on **024 7696 8020.**

We hope that you have been satisfied with your care from the Vascular Services team. To help us improve our service, we welcome your **comments, compliments or complaints** about the care you have received. You can do this by contacting the Vascular Nurses at the number above or PALS (Patient Advice and Liaison Service).

Useful contacts

PALS (Patient advice and Liaison Service): 0800 0284203

Stop smoking support:

- https://smokefreecw.co.uk/ 0800 122 3780 or 0333 005 0092
- Healthy Lifestyles Coventry – 0800 122 3880 or email info@hlscoventry.org
- Fitter Futures Warwickshire – 0333 005 0092 or text QUIT to 60777

Vascular Conditions:

- www.circulationfoundation.org.uk
- www.vascularsociety.org.uk

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact us on 024 7696 8020and we will do our best to meet your needs.

The Trust operates a smoke free policy.

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