

Arterial Ulcer Interventions

Existing arterial ulcers should be treated to reduce the risk of severe complications and possible limb amputation associated with critical limb ischemia. Interventions such as exercise, drug therapy, and changes in lifestyle (smoking and caffeine cessation) may also reduce the risk of developing complications associated with peripheral artery disease (PAD). Patients with existing arterial ulcers need meticulous skin care and monitoring.



PLAY PICMONIC

Saline Dressing

Saline-sail with Dressing

Patients should have the wound covered with a wet-to-dry dressing to prevent tissue trauma. A wet saline-gauze should be placed over the wound, which should then be covered with a dry dressing. As the wet dressing dries, it will adhere to underlying dead tissue. When the dressing is removed, this nonviable tissue will be removed as well. New, synthetic materials such as hydrocolloids and hydrogels are useful as well but may not be available everywhere.

Structured Exercise Programs

Structure of Exercising on treadmills

Walking is the activity of choice and should be done at least three to five times a week for 30 to 40 minutes at a time. Patients should be taught to walk to the point of discomfort, stop and rest, and then resume walking until discomfort occurs again. Consistent exercise (walking) increases walking ability and lessens discomfort associated with intermittent claudication, or cramping, in those with PAD.

Fibrinolytics

Fiber-light

These medications work to break up clots that have already formed, reducing the risk that a clot will dislodge and cause further complications.

Antiplatelet Medication

Ant-tie-plates from Med-bottle

These medications reduce the risk of clot formation by preventing platelets from sticking together. Drugs such as aspirin are prescribed to patients with PAD to reduce the likelihood of adverse cardiovascular or ischemic events, such as stroke and myocardial infarction.

No Caffeine, Nicotine

No Coffee-mug with Cigarette

Caffeine and nicotine are both vasoconstrictors. Reducing intake of both of these can reduce the risk of further blood flow impairment in patients with peripheral artery disease.

Surgery

Surgeon

Surgical procedures, such as a peripheral artery bypass, are intended to restore blood flow to the area(s) affected by the blocked artery. Surgeons try to preserve as much of the limb as possible, leaving amputation as the last option.