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Progression and risk factors of peripheral arterial disease in a population cohort after 5 years of follow-up

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Background: Peripheral arterial disease(PAD) is a major cause of decreased quality of life, lower life expectancy and is a major cause of morbidity and mortality. With regard to quality of life, 10-20 % of the subjects with PAD have intermittent claudication and up to 50 % may have atypical symptoms in the lower extremities. in addition, PAD triples the risk of mortality and major cardiovascular events including myocardial infarction and stroke.

Aim: To known the progression of PAD as a marker of subclinical atherosclerosis.

Method: Prospective follow-up of a population cohort including 3786 patients > 55 years assigned to 28 health primary care centres. Followed for five years(2006-2011), a second cross-sectional evaluation was performed in(2011-2012). The progression of PAD is considered on finding a decrease >10 % in the minimum ankle brachial index(ABI) values of either of the extremities over time compared to baseline. The ABI determination was performed in a standardized method.

Results: in healthy patients (normal baseline ABI) a decrease in ABI >10 % was observed in 15 %(n = 326). The multivariate model showed the risk factors positively and significantly associated with PAD progression (decrease in ABI > 10 %) were: age (OR 1.03), former smoker (OR1.42), current smoker (2.04), physical activity moderate limitation (OR 1.34), primary education level (OR: 0.52), secondary education level or university (OR 0.65).

Conclusion: in primary care it would be important to insist on controlling modifiable risk factors that influence the progression of PAD such as smoking habit and physical activity.