SEE HOW PEOPLE LIKE YOU MANAGE PAD

A Decision Aid for patients with PERIPHERAL ARTERY DISEASE (PAD) who experience pain in the legs while walking

SHOW ME PAD
Peripheral Artery Disease:

- A form of cardiovascular disease
- Reduced blood flow to the arteries of legs
- Caused by buildup of plaque (fatty deposits) in arteries

Common Risk Factors?

- Smoking
- Diabetes
- High blood pressure
- High cholesterol
- Inactive lifestyle
- Age

Symptoms?

Leg pain in your calves and buttocks, called “claudication,” may occur when your muscles do not get enough blood and oxygen. Leg symptoms that occur while walking may include:

- Fatigue
- Discomfort
- Numbness
- Cramping or pain

These symptoms usually disappear after a brief period of rest (within 10 minutes). Some patients may report other leg symptoms:

- Pain while sitting or standing
- Pain that doesn’t go away after rest

How is PAD diagnosed?

- A painless, non-invasive test called the “ankle-brachial index” (ABI) compares blood pressure in your ankles with the pressure in your arms
- Abnormal test results may indicate there is reduced blood flow in your leg arteries
- You may be asked to do an exercise test to see whether blood pressure in your legs changes when you exercise
- You may receive additional testing to determine the severity and location of blockages

How Serious is PAD?

- PAD can severely limit your day-to-day activities
- People with PAD have an increased risk of heart attack or stroke
- PAD is a chronic disease. Its symptoms and cardiovascular risks need to be managed for the rest of your life
- In rare cases (1-2%), PAD may progress to severe PAD where patients experience non-healing wounds and even risk losing a toe or leg
- To reduce the risk of amputation, all patients with PAD should:
  - Regularly examine their feet and practice healthy foot care
  - Promptly seek diagnosis and treatment for non-healing wounds

Let’s Get Started: Show Me PAD

You may have been diagnosed with Peripheral Artery Disease (PAD) or referred for further testing. This Decision Aid will help you understand this condition, evaluate the different treatment options for PAD symptom relief, and enable you to make an informed decision about managing your PAD.

Smoking is the #1 Risk Factor for PAD. Only 16% of PAD Patients Who Smoke Receive a Referral from Their Doctors for Smoking Cessation Resources.*

Ask your provider about resources to help you quit smoking.
Cardiovascular Risk Management:
Recommended for ALL patients with PAD
PAD is a form of cardiovascular disease, which means it increases your risk of suffering a heart attack or stroke. Scientific studies* show strong evidence that taking cardiovascular medications can lower your risk of heart attack or stroke.

To reduce your risk of heart attack or stroke, your provider may prescribe:

Cardiovascular Medications
- Statins to lower cholesterol
- Antiplatelets (like aspirin) to lower risk of clotting

*For overview of scientific studies referenced, visit www.ShowMe-PAD.org/our-research-methods

80% of PAD patients receive prescriptions for blood thinners and cholesterol lowering medications*

Ask your provider about ways to manage your cardiovascular risk.

Lifestyle Changes:
Recommended for ALL patients with PAD
Scientific studies* show strong evidence that making these lifestyle changes can improve or slow the progression of peripheral artery disease.

To achieve the best outcomes:
- Quit smoking
- Control diabetes
- Control blood pressure
- Eat a heart-healthy diet
- Maintain an active lifestyle
- Practice healthy foot care

The PAD treatment plan you pursue will depend on the severity of your symptoms, the condition of your arteries, the location of your blockage(s), and your overall health.

Managing your PAD means taking action in two areas:

Manage Your Risk Factors
Recommended for All:

Make Lifestyle Changes

Lower Cardiovascular Risk

Regardless of how you choose to manage your PAD symptoms, it is recommended to proactively manage your risk factors.

Medical Interventions:
- Non-invasive treatment
- Invasive treatment
- Combination of non-invasive and invasive treatments

Learn About Pad Treatments

Manages Your Symptoms

Treatment Options For Pad Pain Relief:

2

Non-invasive
Invasive
Combination

Combination of non-invasive and invasive treatments

Regardless of how you choose to manage your PAD symptoms, it is recommended to proactively manage your risk factors.
TREATMENT OPTIONS FOR RELIEF OF LEG PAIN:
To manage PAD leg pain, or claudication, generally it is recommended to try non-invasive treatments first, before trying invasive options. Your treatment plan may include a combination of these options, and the treatments you choose may change throughout your lifetime.

To manage your symptoms, there are two treatment pathways:

#1 NON-INVASIVE OPTIONS
(Does not break the skin or require an incision)

Supervised Exercise Therapy
- Recommend walking at least 3 times per week for 30-45 min. each session for at least 12 weeks
- Supervised programs are recommended over home-based exercise
- Supervised exercise therapy is approved and covered by Centers for Medicare and Medicaid Services (CMS). Your provider can prescribe this program.

Claudication Medications
- Medications that can reduce leg pain and discomfort

#2 INVASIVE OPTIONS
(Requires an incision)

Angioplasty - A small balloon is inflated inside the artery to improve blood flow
Stenting - Uses angioplasty to insert a stent (small tube) to hold the artery open
Leg Bypass Surgery - Uses a vein from another part of the body to direct blood flow around the blockage

WHAT HAPPENS IF I DO NOTHING?
If you take no action to manage your PAD:
- Your symptoms may get worse
- Your risk of experiencing a heart attack or stroke may increase

Talk to your provider about what this could mean for you.

4 COMPARE OPTIONS

PAD TREATMENTS

HOW WILL TREATMENT AFFECT MY SYMPTOMS AND QUALITY OF LIFE?

HOW QUICKLY CAN I RETURN TO MY NORMAL ACTIVITIES?

NON-INVASIVE PROCEDURES

<table>
<thead>
<tr>
<th>Supervised Exercise Therapy</th>
<th>PROS</th>
<th>CONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can significantly improve symptoms and increase walking distance</td>
<td>Regular exercise is proven to lower risk of heart attack or stroke and improve survival over time</td>
<td>May improve quality of life in a meaningful way</td>
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</tbody>
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<tr>
<th>Claudication Medications</th>
<th>PROS</th>
<th>CONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>May take longer to notice improvement</td>
<td>Need to be cleared by your provider to exercise; side effects are rare</td>
<td></td>
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</table>

INVASIVE PROCEDURES

<table>
<thead>
<tr>
<th>Angioplasty and Stents Bypass Surgery</th>
<th>PROS</th>
<th>CONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can significantly improve symptoms and increase walking distance</td>
<td>May improve quality of life in a meaningful way</td>
<td>Results may not last over time; may need repeated procedures</td>
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<th></th>
<th>PROS</th>
<th>CONS</th>
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<tbody>
<tr>
<td>Exercise does not prevent you from normal activities</td>
<td>Pain may still be experienced as you work your way up to walking longer</td>
<td>May take longer to notice improvement</td>
</tr>
</tbody>
</table>

3 HEAR ABOUT PAD
Visit www.ShowMe-PAD.org to learn more from patients and providers

YOUR PREFERENCES AND VALUES MATTER

HOW IMPORTANT IS IT FOR YOU TO...
Not at All Important | Very Important
Favors Invasive Options | Favors Non-Invasive Options

Try exercise and medications first to relieve PAD symptoms

HOW CONCERNED ARE YOU ABOUT...
Not at All Important | Very Important
Favors Invasive Options | Favors Non-Invasive Options

The risk associated with a procedure/surgery
Repeated invasive procedures
Timeline of symptom relief

OUTCOMES I VALUE...
Not at All Important | Very Important

My ability to break a habit
My ability to make lifestyle changes

Take the opportunity to ask your doctor questions during your next appointment.

Lifestyle Changes & Cardiovascular Risk Management
- What can I do to lower my cardiovascular risk?
- What are good resources to help me quit smoking?
- How do my other medical conditions affect my PAD treatment decisions?
- What if I don’t make a treatment decision now?

Symptom Relief & Quality of Life
- What kind of exercise is recommended?
- Are community or home-based exercise programs as effective as supervised exercise programs for PAD?
- What treatment will help me achieve the quality of life I want to have?
- What are the side effects of claudication medications?
- What other changes would I need to make after an invasive treatment?

Timeline of Return to Normal Activities
- How quickly can I return to work or normal activity after my treatment?
- What activities can I engage in? What will I need to avoid?
- Does my condition make me a high-risk or low-risk candidate for invasive procedures?

Cost of Treatment
- What are my individual costs for the PAD treatments available?
- Which department or contact can I speak with to find out more information about costs?

Risk of Amputation
- Why is it important to examine my feet on a regular basis?
- What are healthy foot care behaviors?
- What signs or symptoms should cause me to act promptly to avoid worsening of PAD and to avoid loss of toes or legs?

- Supervised exercise therapy is approved and covered by Centers for Medicare and Medicaid Services (CMS). Your provider can prescribe this program. Also check with your insurance provider about coverage.
- Community health centers may provide exercise programs at low cost if no supervised exercise program is available.
- Generic versions of claudication medications may be available at lower cost.
- Invasive procedures are the most costly form of PAD treatment.
- Out-of-pocket costs will vary depending on the hospital, pharmacy, region of the country and your insurance coverage.
- Ask for written information about treatment options and contact your insurance provider before undergoing treatment to find out about costs and coverage.
- Consult online resources to look up reasonable rates for medical tests and treatments in your region, such as HealthcareBluebook.com.
What are your preferences and values as they relate to your PAD treatment?

Visit www.ShowMe-PAD.org to review these resources online.

- This information is developed for patients with mild to severe PAD in the legs, also called “claudication.”
- It is not intended for patients with critical limb ischemia (rest pain, non-healing wounds, ulcers, gangrene).
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- The statements in this publication are solely the responsibility of the authors and do not necessarily represent the views of PCORI, its Board of Governors or Methodology Committee.
- For a complete list of scientific studies referenced, as well as funding sources and conflicts of interest, visit www.ShowMe-PAD.org/our-research-methods.