

Dr. Marc Schwartzberg uses an ultrasound machine to check the blood flow to Michael Kassan's leg.



Saving Limbs

Reducing Pain

Too many people who suffer painful cramping of the hips, thighs or calves when exercising, walking or climbing stairs assume these symptoms are a natural part of aging. In some cases, though, that could be a costly mistake.

Pain anywhere in the legs can indicate a number of problems, but one condition, peripheral artery disease or PAD, is possible to manage and dangerous to ignore.

As some people age, hard and soft plaque, calcium, clots and fibrous tissue build up in the arteries, particularly in the lower leg. This causes a reduction in the blood flow to that area, at which point patients begin to experience their first warning signs. Atherosclerosis, or hardening of the arteries, is another name doctors might use when describing the process by which arteries become clogged.

"The earliest symptom patients develop is pain on exertion," explained Dr. Marc Schwartzberg, a board-certified interventional radiologist at Lake Medical Imaging and Vascular Institute in The Villages. "On exertion, the muscles demand more blood — more oxygen and sugar — because they are working harder. If that blood can't get there, the muscles start to ache, a dull ache that goes away after a person rests for a while."

The doctor goes on to describe how the throbbing in the legs will become worse, and the distance a patient will be able to walk without pain may decrease until even sitting in a chair comfortably becomes a challenge.

Some people may notice that their lower limbs feel unusually cold, even in warm weather, and attempt to compensate by wearing heavier clothing.

Finally, when blood flow is seriously challenged, wounds on the lower legs and feet heal very slowly or not at all.

"People get ulcers on their feet — and sometimes they wait three months before they come to see me," said Schwartzberg, who would like everyone to have a better understanding of what these symptoms mean and what can be done about them.

More than 12 million people in the US suffer from PAD, but the doctor stresses that about half of these people have mild blockage with little or no symptoms. The other half, however, could be in danger of losing limbs if they continue without any kind of treatment.

"As doctors, we may not be able to cure all diseases, but I'm here to help patients outlive their disease," he said. "Our goal is to help control and treat the disease so people don't lose their limbs."

Asked about the underlying causes of PAD, Schwartzberg didn't hesitate.

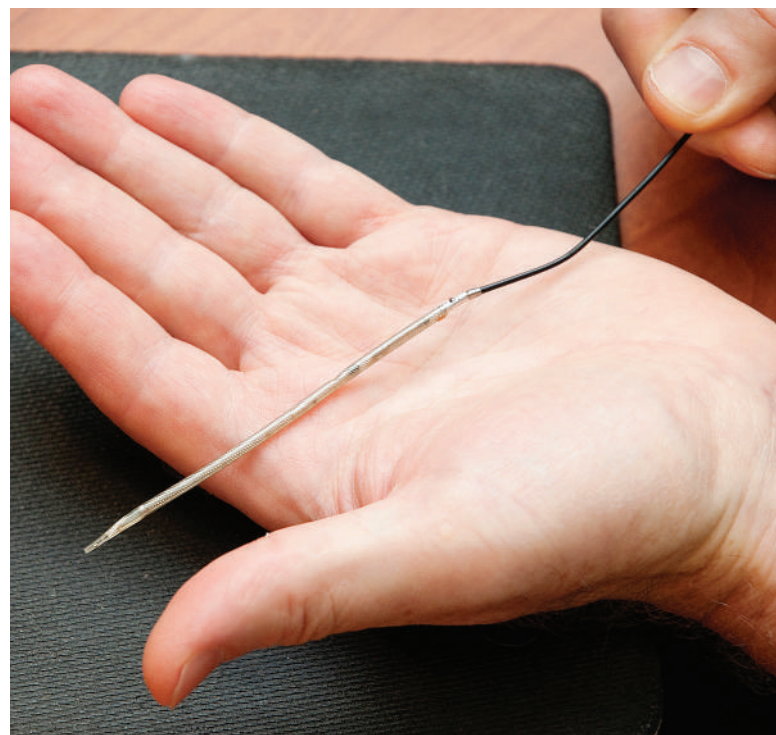
"I usually say the two biggest causes are smoking — and smoking," he said. "Ninety-five percent of my patients are either smokers or ex-smokers."

The normal aging process does account for some of the blockage in arteries, as does renal failure, high cholesterol or blood pressure and diabetes.

"There are always three choices when it comes to treatment," added Schwartzberg. "Control your risk factors and exercise, surgery to bypass the blocked arteries, or a atherectomy procedure to clear the blockage. In the case of surgery, why not just clean the artery out?"

Michael Kassan knows all too well what can happen when circulation to the legs is impeded after he was diagnosed with PAD a couple of years ago.

The Village of Mallory Square resident said that he believed



Above: Schwartzberg reviews before and after photos of Kassan's leg veins. Below: Schwartzberg shows one of the catheters used during an atherectomy.

his history of smoking earlier in life and diabetes were contributing factors to his decreased circulation and subsequent leg pain.

One thing this patient did right was make regular appointments with his podiatrist because of his diabetes. During one of these appointments, the doctor checked Kassan's pulse in his foot and was concerned about his weak pulse — enough to order an ultrasound to determine how much blood was moving to his feet.

"My grandfather had diabetes and lost both of his legs," Kassan noted, "Still, I thought the pain in my legs was just a normal part of aging. As it turned out, there was a lot of blockage in both of them."

Kassan was sent to Dr. Schwartzberg and together they decided that an atherectomy was the best course of treatment for the patient's condition.

This procedure has been done since 2003 and Schwartzberg has been performing it at The Villages Regional Hospital for the past three years. "I've done more than 330 in this area already," the physician said.

He explained that during the procedure a very fine wire is run through the artery of the leg via a small incision. This fine wire will later guide a tiny tube

called a catheter with a device on the end of it that is specially designed to remove plaque.

"The track makes sure that the catheter doesn't 'derail' during the procedure," explained Schwartzberg. "There are three types of devices or catheters to choose from, according to different factors, including the size of the artery and what type of deposit is blocking the blood flow.

"Directional catheters work like a snowplow, pushing through the blocked artery and removing the plaque from the wall. Orbital catheters have a small diamond bit that actually spins around, "sanding away" the build-up. These catheters are also equipped with a vacuum to collect everything that is removed from the artery."

The doctor said atherectomies can reduce the time it takes to clear a blockage, while still being gentle to the delicate artery wall, meaning fewer complications and less recovery time.

"I usually tell patients it will take one to two hours under local anesthetic," he explained. "Half of the patients will leave the hospital the same day — the other half we may want to observe for another day. Activity should be reduced for three or four days. After that, they can head back to the golf course."

Kassan had his first atherectomy in February of 2008. A month later, Schwartzberg was able to clear the blockages from the other leg.

"I went to The Villages hospital in the morning and the surgery took about an hour," recalled Kassan. "I was awake for the procedure, but didn't feel anything. After one of the procedures I stayed at the hospital overnight, but for the other I went home the same day."

Schwartzberg said he always attempts to remove 100 percent of the blockage from a patient's arteries.

"Even if we don't get the artery completely cleared, the bottom line is we want total relief of the symptoms," said the doctor. "We want immediate relief from pain, and any ulcers and sores to be completely healed within a month."

It has been a couple of years since Kassan had the procedure done on both of his legs. Has his mobility improved?

"I have the use of my legs and the pain is gone," he said as he prepared to head out the door for his tee time.

Since his atherectomy, Michael Kassan said the pain in his legs is gone, allowing him to enjoy a more active lifestyle.

