Peripheral artery disease (PAD) means blood is not flowing properly in your legs or arms. It happens when fat and cholesterol (plaque) build up in the walls of the arteries in your limbs.

Here are some common questions patients often ask.

1. **I feel fine. Do I really need to be screened for PAD?**

   Yes. PAD is often missed because many people have no symptoms at first. Medical guidelines recommend screening for anyone over age 65, as well as people with risk factors such as:
   - Diabetes
   - Current or past smoking
   - High cholesterol
   - High blood pressure
   - Other forms of heart disease
   - A family history of PAD

   Screening for PAD is typically done with simple tests. The most common test is to measure your pulse and blood pressure in different parts of your body. If your blood pressure is lower in your ankles than in your arms, this can be a sign that you have PAD.

   Whether or not you have symptoms, having PAD raises the likelihood of a heart attack or stroke. Early detection and treatment are essential.
2. Does having PAD mean I have heart disease?
Not exactly. PAD means plaque has built up in the arteries in your limbs (typically the legs, though it can happen in the arms and abdomen, too). It is often a warning sign that plaque is also building up in the arteries around your heart, which is a common cause of heart disease. So even though PAD is not technically a form of heart disease, it is closely related.

People with PAD are also more likely to have serious heart problems, such as a heart attack or stroke, and often suffer more from these events. Taking action to control your PAD can help lower your risk. Finding out you have PAD is a good opportunity to make changes and protect your heart health in the future.

3. Walking hurts. Should I take it easy?
It’s best to stay active. Moving now – even if it hurts – will help you walk more easily in the future. Exercise is thought to help with PAD by increasing blood supply in your limbs, helping your blood vessels work better, and changing the way your muscles use oxygen.

In fact, a supervised exercise program is a proven way to help manage PAD-related pain and prevent further problems.

4. How do I know if it’s safe to “work through the pain”?
With PAD, it’s normal to have some pain when you’re moving around. In fact, exercising to the point of mild to moderate discomfort has benefits. However, the pain should not be severe, and it should go away when you stop exercising.

Tell your care team if you have pain while resting. And be sure to ask your care team before starting an exercise program, as your other health conditions may affect what’s safe for you.

5. Will I need an amputation?
Severe PAD can cause you to lose blood supply in your limbs. This can happen gradually or all of a sudden, like a heart attack in your leg. This is a serious condition and can cause death.

Your care team might recommend surgery to open the blocked artery or, in rare cases, you may need an amputation. You can reduce the chance of these complications by exercising regularly and sticking to your PAD treatment plan.