

Nº de abstracts = 26

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Experiences of living with intermittent claudication.

Egberg L, Andreassen S, Mattiasson AC.: Journal of Vascular Nursing: official publication of the Society for Peripheral Vascular Nursing, Março
2012 30(1):5-10.

Intermittent claudication is a symptom caused by peripheral arterial disease (PAD) and is associated with pain, impaired mobility and loss of control. Walking ability is reduced due to the pain, and both physical and social functions are often negatively affected, which may lead to patients feeling they are a burden to others. An interview study using a qualitative descriptive design to describe experiences of living with intermittent claudication caused by PAD was carried out during Winter and Spring 2009/2010. Fifteen people suffering from intermittent claudication were interviewed, and the interviews were analyzed using qualitative thematic analysis. Intermittent claudication greatly affects daily living. Six themes were identified: "Experiencing discomfort in the legs," "Moving around in a new way," "Feeling inconvenient when forced to stop," "Missing previous life," "Incorporating intermittent claudication in daily life," and "To lead a strenuous life." The main theme was "Adjusting to a restricted life." The findings show that intermittent claudication has a major impact on daily life. Apart from the severity of symptoms, how the illness is experienced differs among patients, depending on how active the ill person is or wants to be. These findings suggest that increased knowledge about living with intermittent claudication is important to understand the effects on the ill person's life, as a complement to physical examinations when planning individual treatment.

Use of a three-curved rocker sole shoe modification to improve intermittent claudication calf pain - A pilot study.

Hutchins SW, Lawrence G, Blair S, Aksenov A, Jones R.: Journal of Vascular Nursing: official publication of the Society for Peripheral Vascular Nursing, Março 2012 30(1):11-20.

This was a pilot study utilizing hospital-based walking trials to compare two footwear conditions. Two pairs of identical therapeutic shoes were ordered for volunteer claudicant subjects. One pair was adapted with a specifically designed three-curve rocker sole. Volunteer claudicant subjects (n = 8, mean age 66 +/- 9.9 years) with stable pain-free distances of 10 - 400 meters to calf claudication pain were recruited into the study. Walking trials were used to compare differences in both the pain-free distance to claudication and the intensity of the calf pain once claudicating exhibited by each subject while walking separately with the two footwear conditions during the same clinical session. The results demonstrated that claudicant pain-free walking distance was increased, and the intensity of claudication calf pain reduced when walking with the rocker-soled in comparison with baseline. A specifically designed rocker sole has the potential to offer a reduction in the intensity of calf pain experienced by claudicants. A more extensive study is planned to determine the efficacy of this new footwear adaptation when the footwear is worn for extended periods.

Axillary artery injury secondary to inferior shoulder dislocation.

Plaga BR, Looby P, Feldhaus SJ, Kreutzmann K, Babb A.: The Journal of emergency Medicine, 2010, 39(5):599-601. Orthopedic Institute, Sioux Falls, South Dakota 57117, USA.

BACKGROUND: Dislocation injuries of the glenohumeral joint are common in the general public and generally are corrected without complication. One serious complication with shoulder dislocations, or the subsequent reduction, is a lesion to the axillary artery. This specific complication is most frequently seen in the elderly population, where vascular structures have become less flexible. Also, these injuries are most common in association with anterior dislocations of the shoulder. **OBJECTIVES:** To bring awareness to the possibility of axillary artery injury with inferior dislocation of the shoulder, the treatment options, and a review. **CASE REPORT:** We report a 15-year-old male athlete who inferiorly dislocated his shoulder during wrestling practice. The injury was reduced at the scene with manual traction and the patient was transferred to our clinic for evaluation. The patient was determined to have a pseudoaneurysm of the axillary artery, and the history and treatment of the illness are presented. **CONCLUSION:** Axillary artery injuries secondary to shoulder dislocations are rare, especially in the young athlete, and proper recognition and treatment offer patients a full recovery.

Impact of exercise training on arterial wall thickness in humans. Thijssen DH, Cable NT, Green DJ

Clinical science (London, England : 1979)

122(7):311-22, 2012 Thickening of the carotid artery wall has been adopted as a surrogate marker of pre-clinical atherosclerosis, which is strongly related to increased cardiovascular risk. The cardioprotective effects of exercise training, including direct effects on vascular function and lumen dimension, have been consistently reported in asymptomatic subjects and those with cardiovascular risk factors and diseases. In the present review, we summarize evidence pertaining to the impact of exercise and physical activity on arterial wall remodelling of the carotid artery and peripheral arteries in the upper and lower limbs. We consider the potential role of exercise intensity, duration and modality in the context of putative mechanisms involved in wall remodelling, including haemodynamic forces. Finally, we discuss the impact of exercise training in terms of primary prevention of wall thickening in healthy subjects and remodelling of arteries in subjects with existing cardiovascular disease and risk factors.

The effect of moderate intensity exercise on arterial stiffness in resistance trained athletes, endurance trained athletes and sedentary controls: a cross-sectional observational study. [Hoonjan B, Dulai R, Ahmed M, Lucey A, Morrissey D, Twycross-Lewis R, Greenwald S](#)

British journal of sports medicine 45(15):A7-8, 2011 Dez Increased arterial stiffness is a significant risk factor for cardiovascular mortality. Acute changes to arterial stiffness in athletes following moderate intensity aerobic exercise are unknown. The purpose of this study was to compare central and peripheral arterial stiffness at rest and with moderate intensity exercise in resistance trained (RT) athletes, endurance trained (ET) athletes and sedentary controls. Fifty two participants (18 RT athletes, 19 ET athletes and 15 controls) underwent central (carotid to femoral) and peripheral (femoral to posterior tibial) pulse wave velocity (PWV) measurements before and at intervals 3, 15 and 30 min after half an hour of moderate intensity cycling (65% of maximal heart rate). PWV was measured using Doppler flow velocimeters as pulse detectors and calculated using the 'foot to foot' velocity method. Groups did not differ in resting central or peripheral PWV. In the endurance and control group, central PWV increased at 3 min postexercise compared with resting values (from 7.7 ± 2.2 to 10.6 ± 4.2 m/s; $P = 0.01$ and from 7.4 ± 2.2 to 9.1 ± 3.1 m/s; $P = 0.02$, respectively), followed by a decline to baseline in both groups within 15 min of exercise cessation. The RT group experienced no changes in central PWV, and there were no changes to peripheral PWV postexercise in any group. The study concluded that a 30 min bout of moderate intensity exercise led to a transient increase in central PWV in the endurance and control group, most likely due to mechanisms related to vasoconstriction, but did not reduce arterial stiffness. It is likely that repeated bouts of exercise are needed or a higher intensity of exercise required before reductions in arterial stiffness occur.

[Effects of walking and strength training on resting and exercise cardiovascular responses in patients with intermittent claudication.](#) Vasa, Issue: 5, 390-7 Grizzo Cucato G et, al.

Physical activity and cognition in women with vascular conditions. Vercambre MN, Grodstein F, Manson JE, Stampfer MJ, Kang JH.: Archives of Internal Medicine,

2011,07 - 171(14):1244-50. **BACKGROUND:** Individuals with vascular disease or risk factors have substantially higher rates of cognitive decline, yet little is known about means of maintaining cognition in this group.

METHODS: We examined the relation between physical activity and cognitive decline in participants of the Women's Antioxidant Cardiovascular Study, a cohort of women with prevalent vascular disease or at least 3 coronary risk factors. Recreational physical activity was assessed at baseline (October 1995 through June 1996) and every 2 years thereafter. Between December 1998 and July 2000, a total of 2809 women 65 years or older underwent a cognitive battery by telephone interview, including 5 tests of global cognition, verbal memory, and category fluency. Tests were administered 3 additional times over 5.4 years. We used multivariable-adjusted general linear models for repeated measures to compare the annual rates of cognitive score changes across levels of total physical activity and energy expended in walking, as assessed at Women's Antioxidant Cardiovascular Study baseline.

RESULTS: We found a significant trend (P