

# First global analysis reveals alarming rise in peripheral artery disease with over a quarter of a billion cases worldwide

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The number of people with peripheral artery disease worldwide has risen dramatically (by 23.5 percent) in just 10 years, from about 164 million in 2000 to 202 million in 2010, according to the first robust global estimates, published in *The Lancet*.

The estimates suggest that the PAD burden is increasing in every region, but the majority (140.8 million; 70%) of people with PAD are now living in low-income or middle-income countries (LMIC), mainly in southeast Asia (54.8 million) and western Pacific regions (45.9 million).

"Despite its alarming prevalence and [cardiovascular risk](#) implications (people with PAD have a roughly three times higher [risk of heart attack](#) and stroke), little attention has been paid to this disease", explains lead author Professor Gerry Fowkes from the University of Edinburgh in the UK. "Our findings are a call to action."

Fowkes and colleagues identified over 100 studies that looked at the incidence or prevalence of PAD. Analysis and modelling of data from 34 community-based studies published since 1997, that identified PAD using the [ankle brachial index](#) (ABI; a [simple test](#) that measures the ratio of blood pressure at the ankle to that in the arm), were used to develop age-specific and sex-specific prevalence rates in high-income countries (HIC) and LMIC, and to establish the main [risk factors](#) for PAD.

Since 2000, the number of individuals with PAD has increased by over a quarter (28.7%) in LMIC, and by 13.1% in HIC (mainly in Europe; 40.5 million cases in 2010).

Longer life expectancy, as well as changing lifestyles, appears to be driving this dramatic rise in PAD rates, leading to a greater than 35% increase in cases older than 80 years, with PAD now affecting 1 in 10 people aged 70 years and 1 in 6 people older than 80 years worldwide.

The researchers identified higher rates of PAD among men in HIC than men in LMIC, whilst PAD may be more prevalent in women than in men in LMIC, especially at younger ages.

The analysis also confirmed that many of the key risk factors for PAD such as smoking, diabetes, hypertension, and high cholesterol are the same as those for other major cardiovascular disorders, and can be prevented and treated.

According to Professor Fowkes, "PAD has become a global problem in the 21st century and can no longer be regarded as a disease that affects mostly HIC. The dramatic growth in PAD is already a major public health challenge due to loss of mobility, diminished quality of life, and the significantly increased risk of [heart attack](#) and stroke. As the world's population ages, PAD will become substantially more common, and there is an urgent need to assess treatment and prevention strategies in both HIC and LMICs."

Writing in a linked Comment, Alan T. Hirsch and Sue Duval from the University of Minnesota Medical School and School of Public Health, Minneapolis, USA, point out that this study almost certainly underestimates the true PAD burden, because its estimates were derived using just one method of detecting PAD, the ABI.

According to Professor Hirsch, "Future progress in the improvement of global health will require a global strategic plan for [peripheral artery disease](#). When any disease affects more than 200 million people, it is time to take action to prevent and control its global burden."

**More information:** [www.thelancet.com/journals/lan ... \(13\)61249-0/abstract](http://www.thelancet.com/journals/lan... (13)61249-0/abstract)

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