





The Importance of early recognition of Vascular Pain

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Definition Of Pain

Pain is an unpleasant sensory and emotional experience, associated with actual or potential tissue damage, or described in terms of such damage

International Association for the Study of Pain: Pain Definitions. Bonica JJ. The need of a taxonomy. Pain 1979;6:247-8







Vascular pathology

Arterial

Atherosclerosis

Aneurysm

Dissection

Venous

Lymphatic



PAIN







Ischemic pain

Reduced arterial blood flow in conditions of increased consumption of oxygen and catabolic substrates leads to tissue ischemia



Local pH value drop and secretion of pain stimulating substances (bradykinin, substance P)



interpreted as pain









Atherosclerosis Cause of 52% Death Worldwide

Cerebrovascular disease

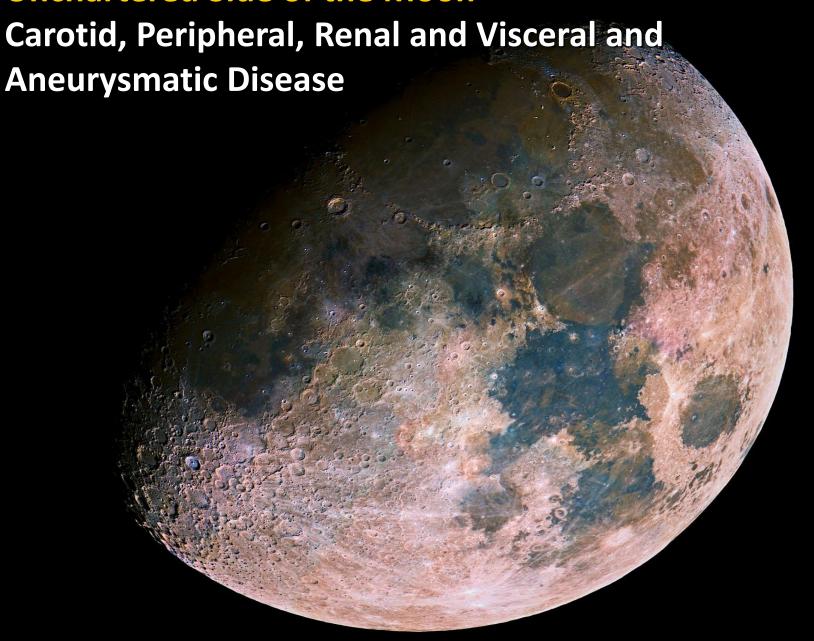
Coronary artery disease

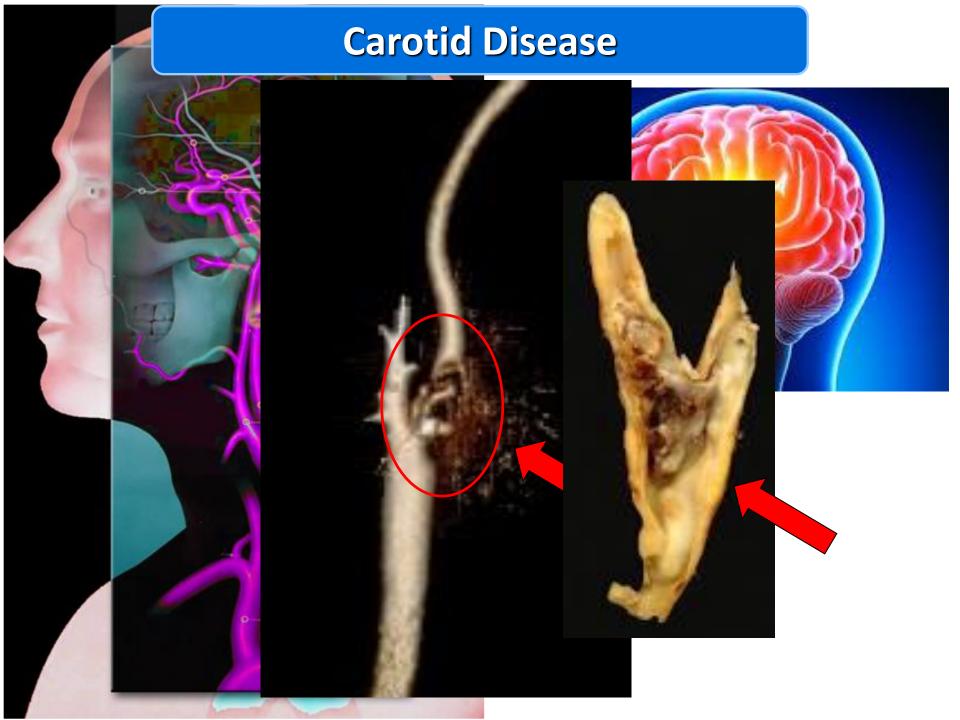
Renal artery stenosis

Visceral arterial disease

Peripheral arterial disease

Unchartered Side of the Moon









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Brain ischemia 2° most frequent cause of Dementia 1° most frequent cause of Invalidity



19% of women in Serbia dies of stroke

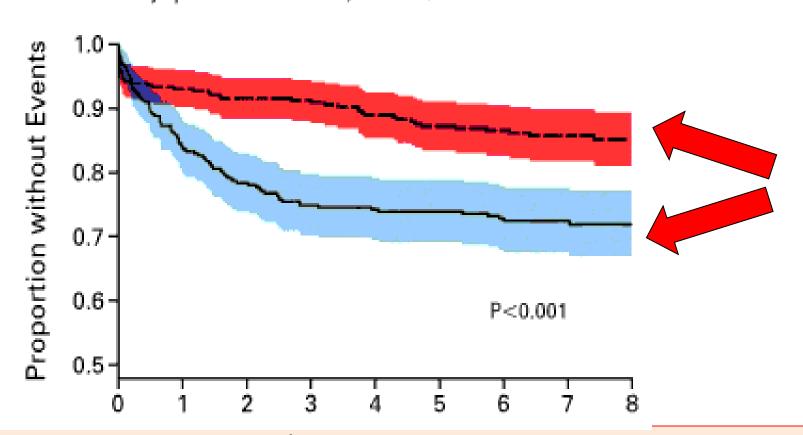




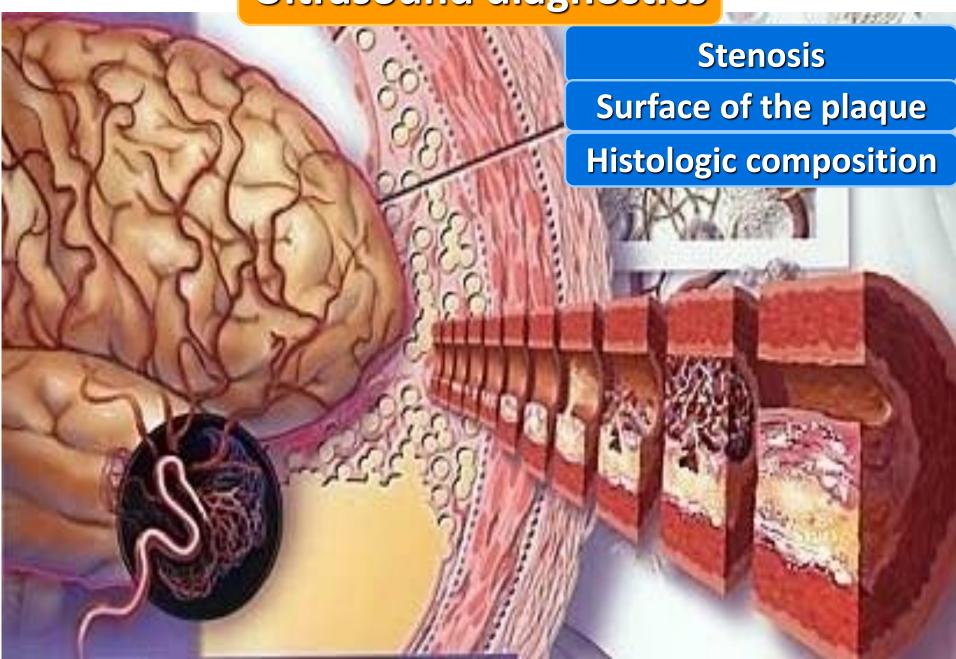


North American Symptomatic Carotid Endarterectomy Trial NASCET European Carotid Surgery Trial ESCT Veterans Administration VA Symptomatic Trial

Any Ipsilateral Stroke, 70-99% Stenosis



Ultrasound diagnostics

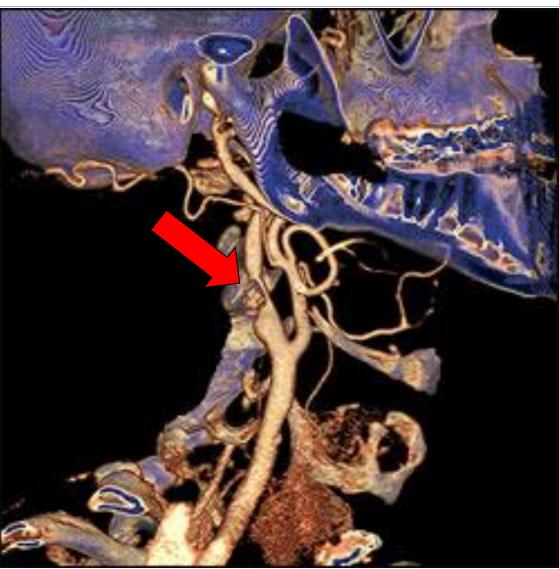




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MSCT Arteriography

Resolving Controversal Findings









The brain tolerates, but does not forgive



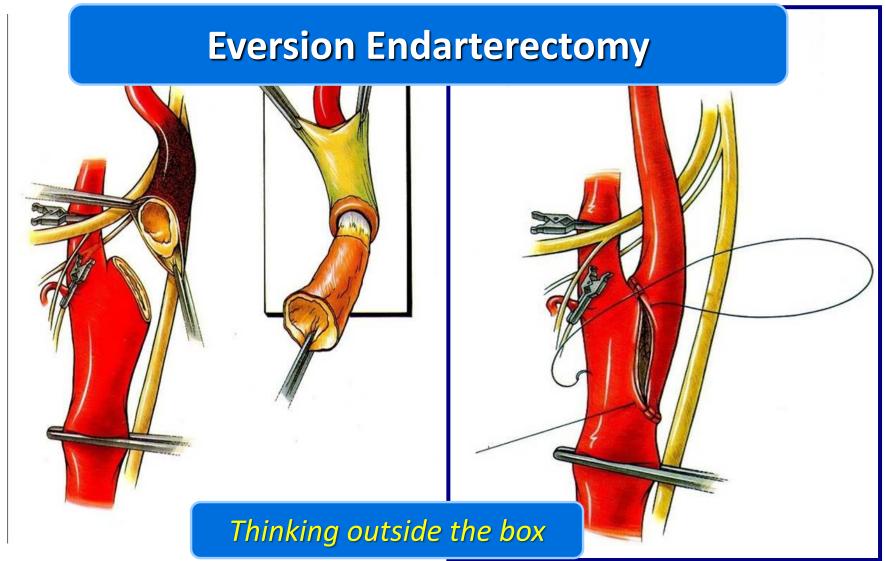
Too early is unnecessary

Too late is pointless









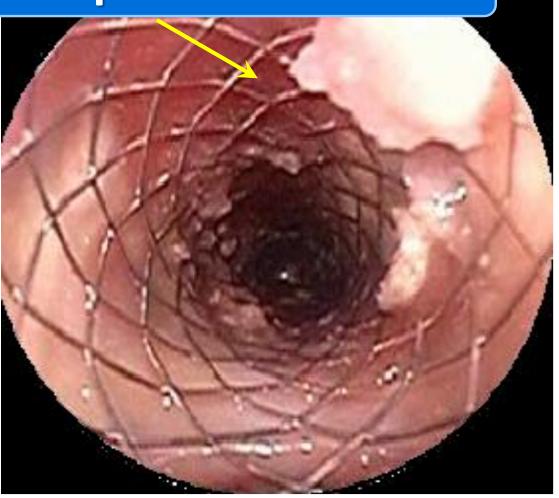


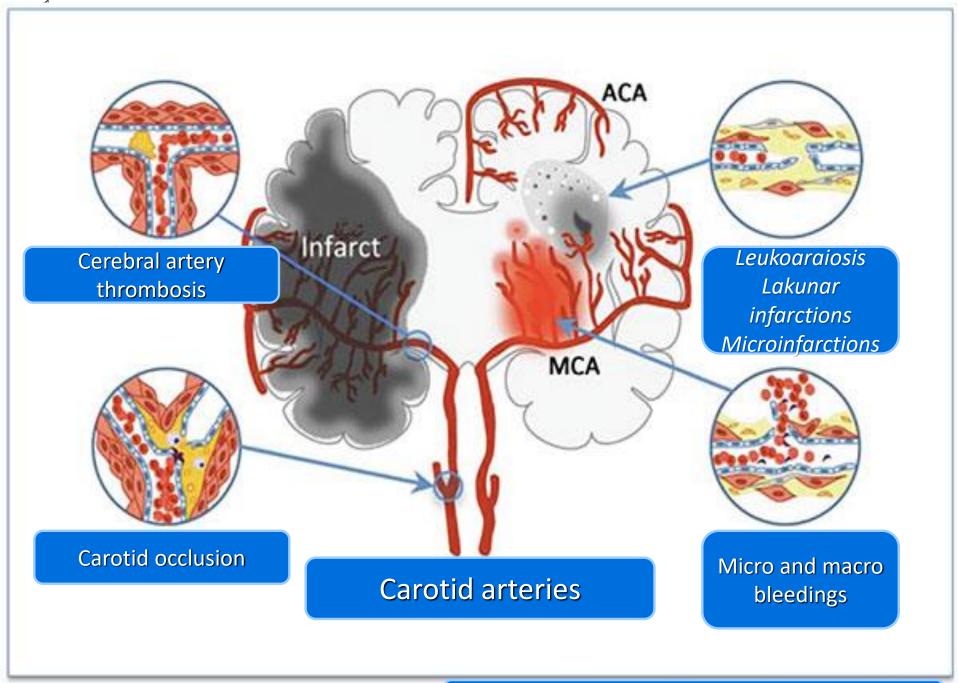




Endovascular procedures



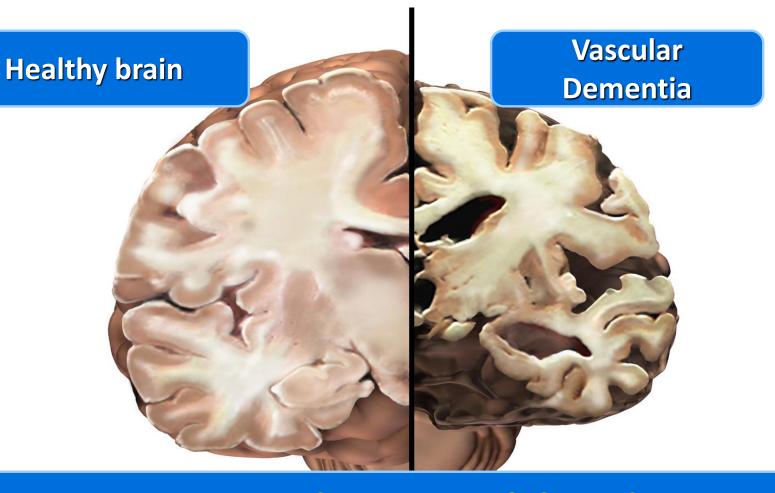












Cognitive and emotional disorders



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Restoration of the blood supply to the brain could reverse the neuropsychological damage

Vasc Endovasc Surg 2007;41(1):5-13







Chronic limb ischemia

Stage	Symptoms
I	Asymptomatic / Non-specific discomfort
II	Intermittent claudications
(IIa)	> 200 m of walking
(IIb)	< 200 m of walking
III	Rest pain
IV	Ischemic ulcer / Gangrene

Fontaine's classification







Chronic limb ischemia

Intermittent claudication is a typical exertional limb pain, easily alleviated by short-term rest

Rest pain is a persistent pain in the distal parts of the limb, more prominent in elevation, accompanied by clinical signs of limb ischemia

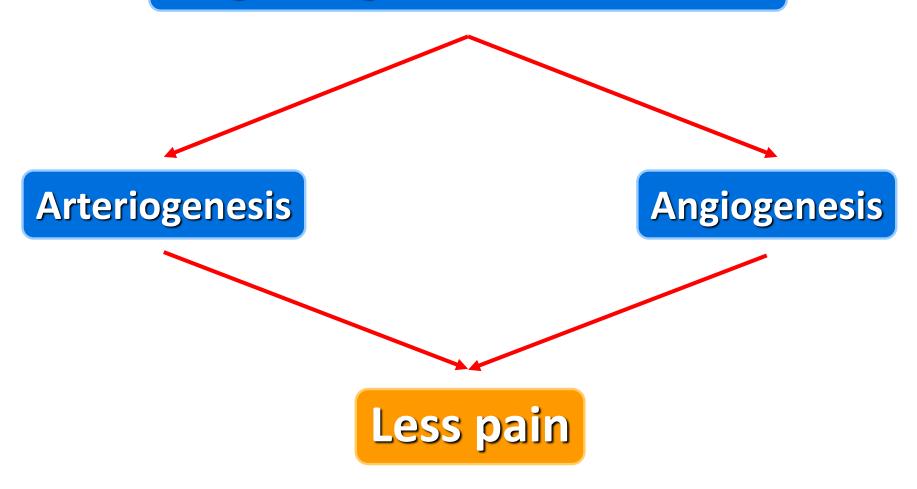
Peripheral neuropathy – underestimation!







Long-lasting chronic limb ischemia

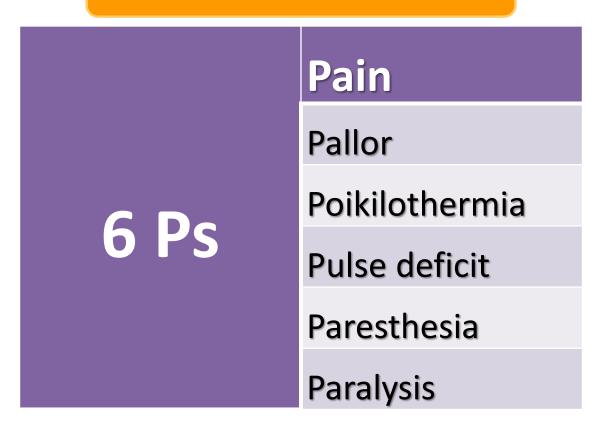








Acute limb ischemia

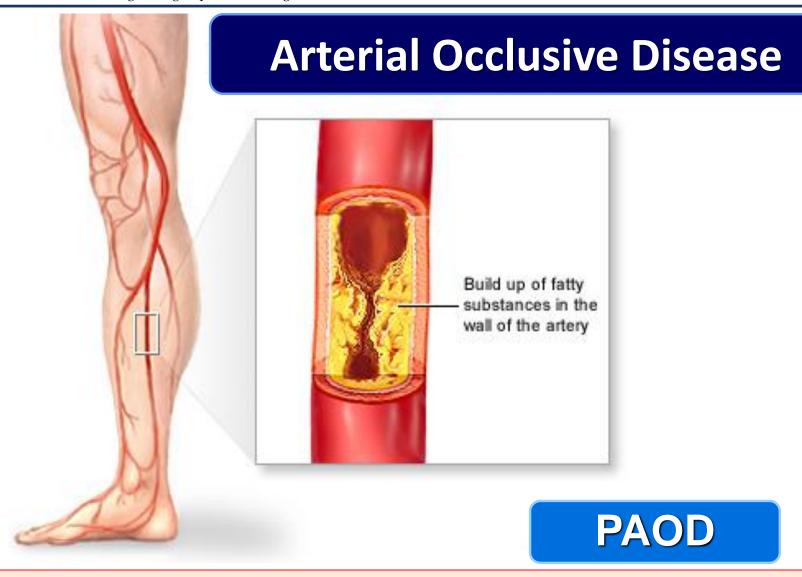


Urgent revascularization !!!











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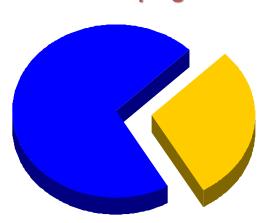






Prevalence of PAD

PARTNERS* program evaluated 6,979 patients in physicians' offices



29%

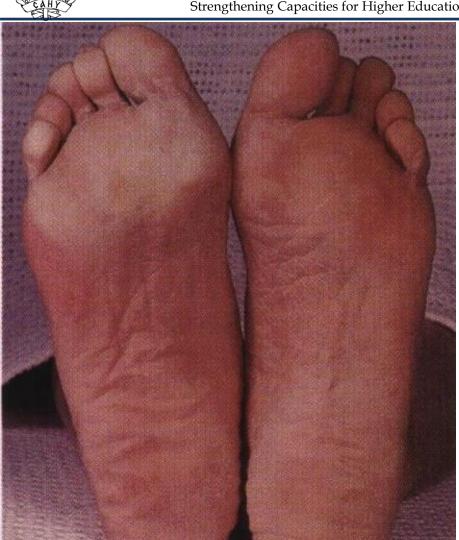
29% of patients with PAD



Patients ≥70 years



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Critical Limb Ischemia Wounds that will not heal Gangrene



Project number: 585927-EPP-1-2017-1-RS-EPPKA2-CBHE-JP (2017 – 3109 / 001 – 001)

"This project has been funded with support from the European Commission. This publication reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein"









Impaired endothelial function Inflammation

Increased Risk of CV Mortality







CVD

Patients with symptomatic PAD

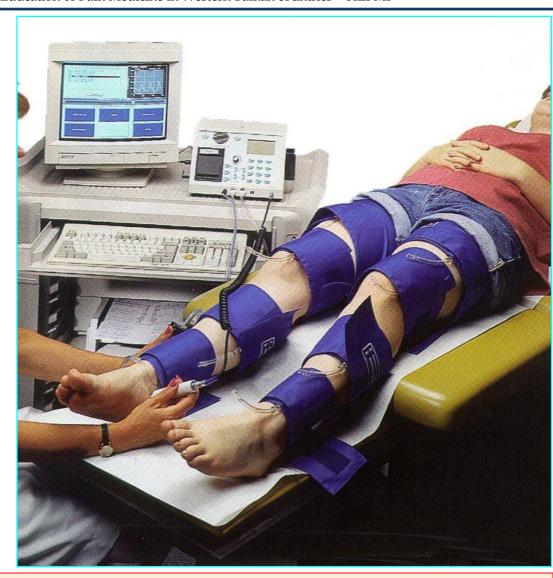
6x greater risk of death

Propensity toward thrombosis

Reduced physical activity



Doppler index ABI









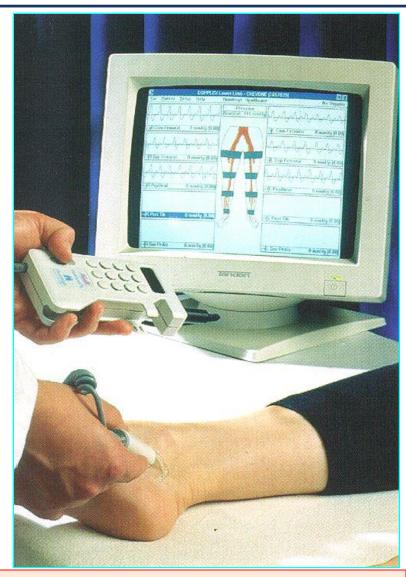
Doppler index

Segmental pressures

Pulse volume recordings

Doppler velocity
Waveform analysis

Treadmill exercise

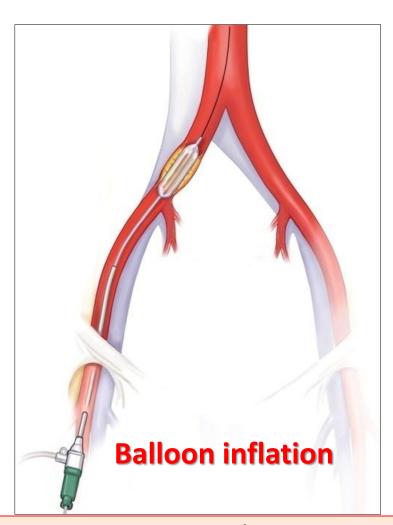


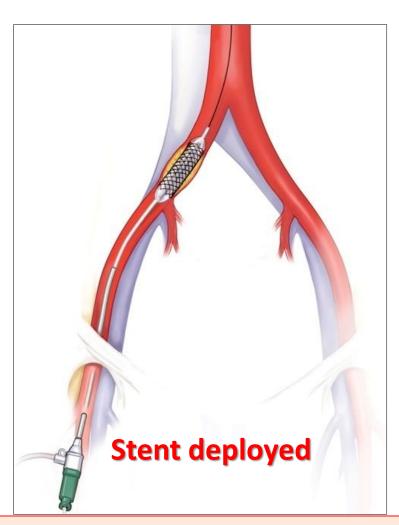






PTA for short segment occlusion





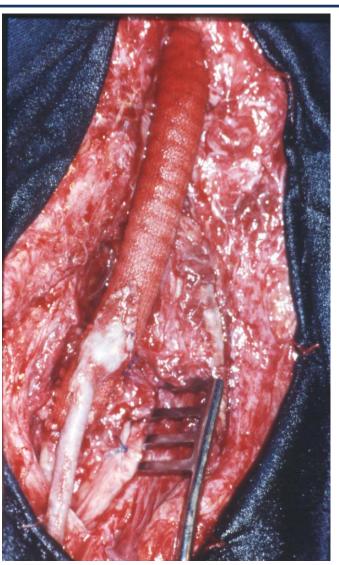








Limb salvage
Femoro-distal
Sequetial
ByPass









Visceral ischemia

Abdominal angina is non-specific abdominal pain, which starts 30 minutes after meal commencement and lasts for several hours







Dissections and aneurysm rupture

Pain is sudden and "the worst ever felt"

Urgent surgery



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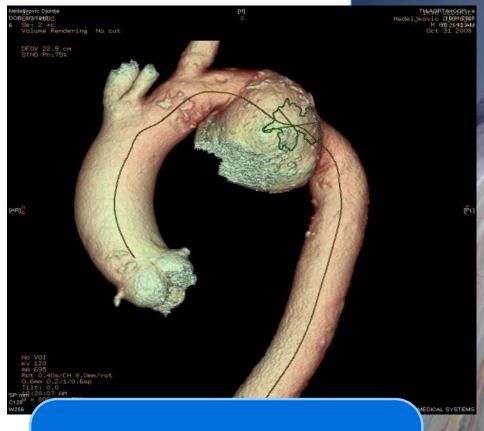


Treatment of Aneurysm

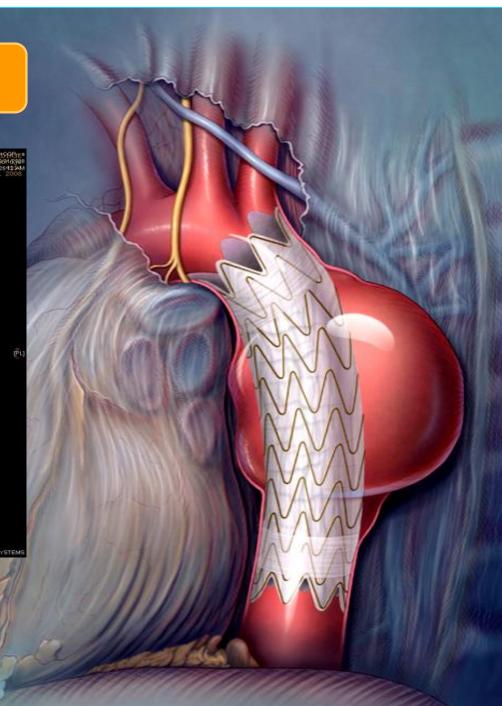
PPKA2-CBHE-JP (2017 - 3109 / 001 - 001)

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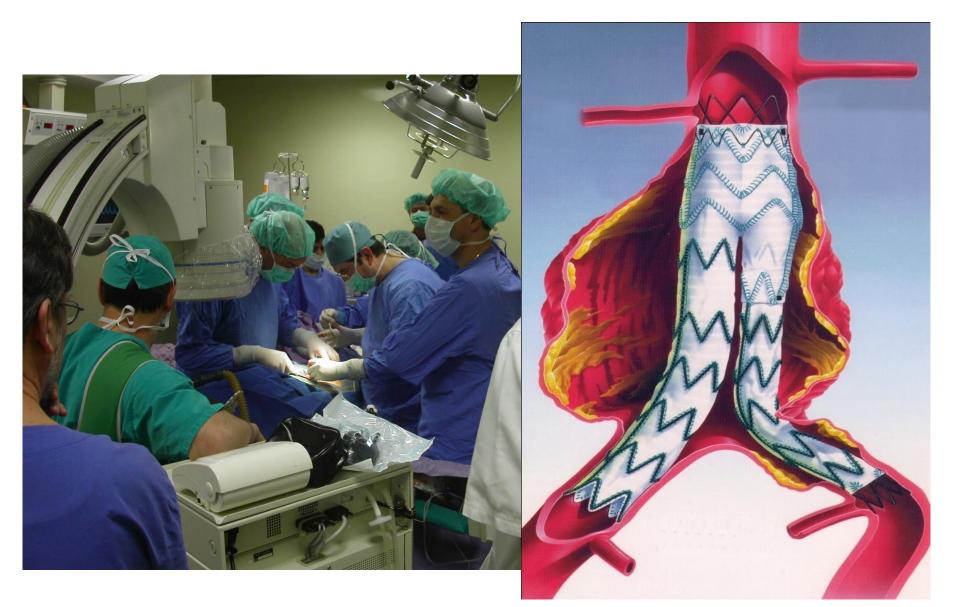




Minimally invasive Short recovery Feasible in Elderly



Extensive combined and hybrid procedures



New EntitiesMural Thrombosis/Penetraning Aortic Ulcer

Long-term survival is shorter

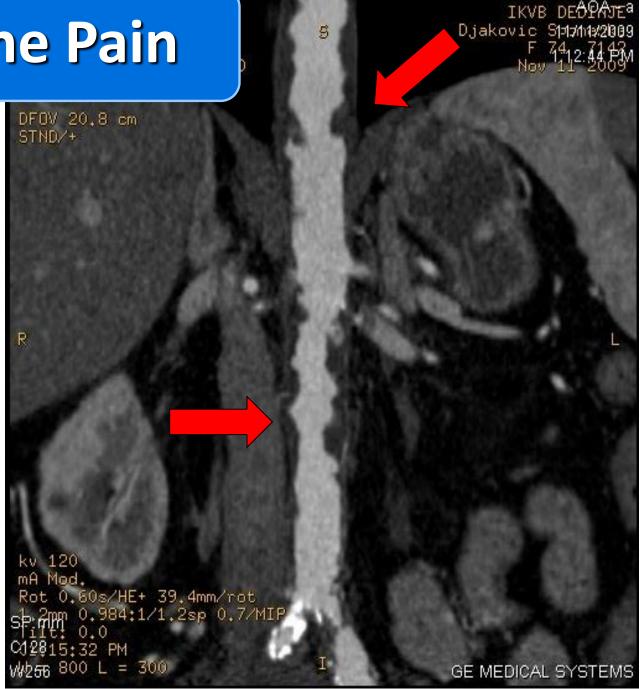


Before the Pain

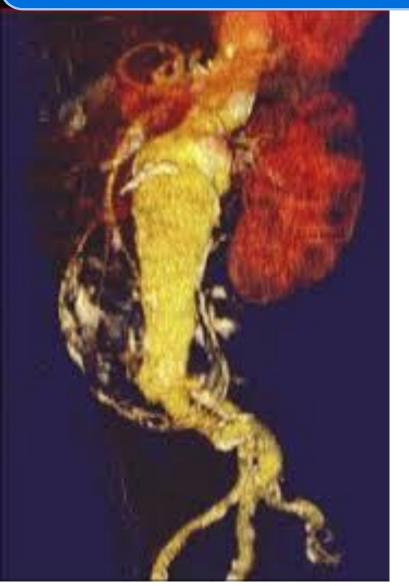
Perioperatively therapeutic dose of LMWH?

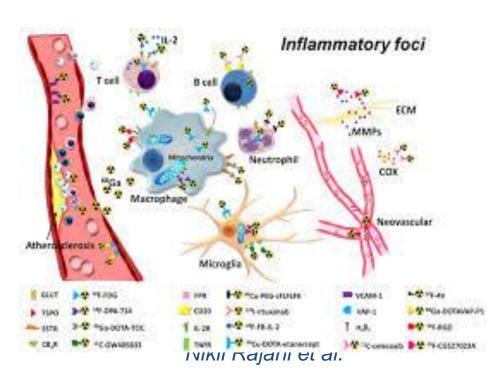
Antiplatelet Terapy?

Oral anticoagulants?



Textural, Funcional, Metabolomic, Proteomic and Genomic Non-invasive Mapping in Individualised Decision Making





CT textural analysis of abdominal aortic aneurysms as a biomarker for aneurysm growth,

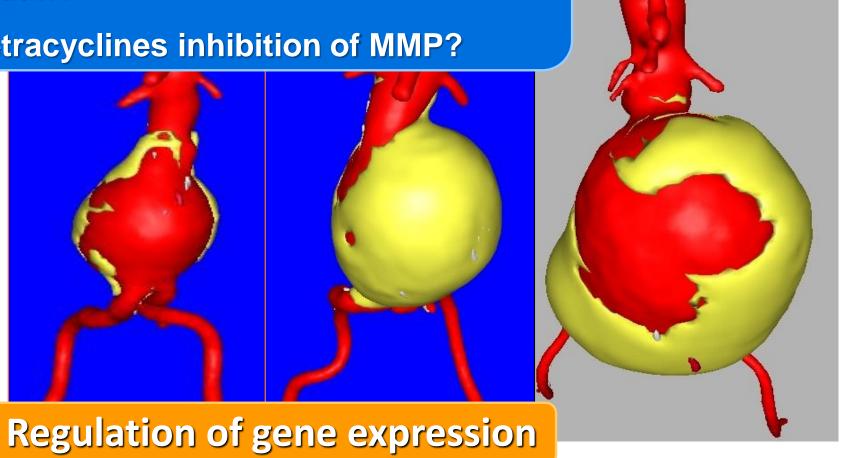
Lancet, 2014, 383, Special Issue, S87.

Prevention of aneurysm growth

Angiotensin-coverting enzyme inhibion?

Statin?

Tetracyclines inhibition of MMP?









What triggers venous pain?

Chronic venous insufficiency leads to venous stasis and venous hypertension

Venous nociceptors responds to mechanical irritation (traction, stretch, distension, spasm)

Chemoreceptors respond to chemical stimuli available locally

Algogenic and proinflammatory chemical mediators as cytokines from lymphocites







Chronic venous insufficiency

Clinical manifestation

CEAP classification

Clinic Etiology Anatomy Patology

Pain correlation is not clear!

	Clinical manifestation		
C0	No signs of venous disease		
C1	Telangiectasia and/or reticular veins		
C2	Varicose veins		
С3	Oedema		
C4a	Pigmentation and eczema		
C4b	Lipodermatosclerosis and athrophie blanche		
C 5	Healed venous ulcer		
C6	Active venous ulcer		







Diversity of pain in venous disease

Pain without signs (COs)

Pain with varicose veins

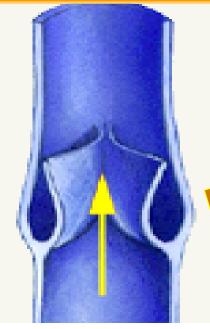
Pain with edema

Pain with venous ulcers

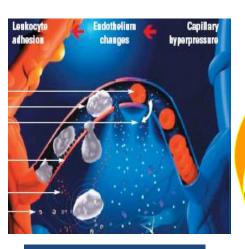
Inflammation parallels severity of Chronic Venous Insufficiency

Takase M et al. Ann Vasc Surg 2000;14:427-435 (C2-6)
Somers P et al. Angiology 2006;57:546-55
Aunapu M et al. Vasa 2005;34:170-75
Endothelial activation with increased expression of ICAM-1 in varicose veins wall, IL-1 &TNF-α in vein wall

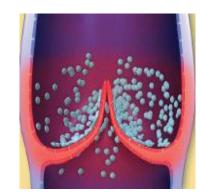
Chronic venous disease



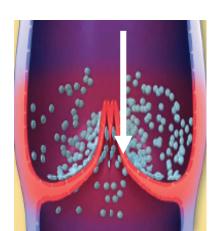
Venous wall distension
Valve distorsion



Skin changes Ulcus VENOUS HYPERTENSION



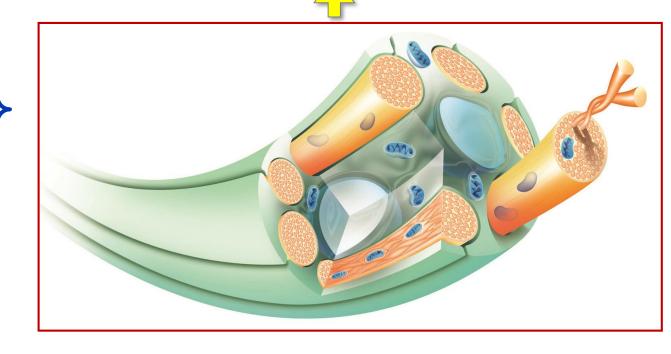
Varicose veins



Response to venous inflammation

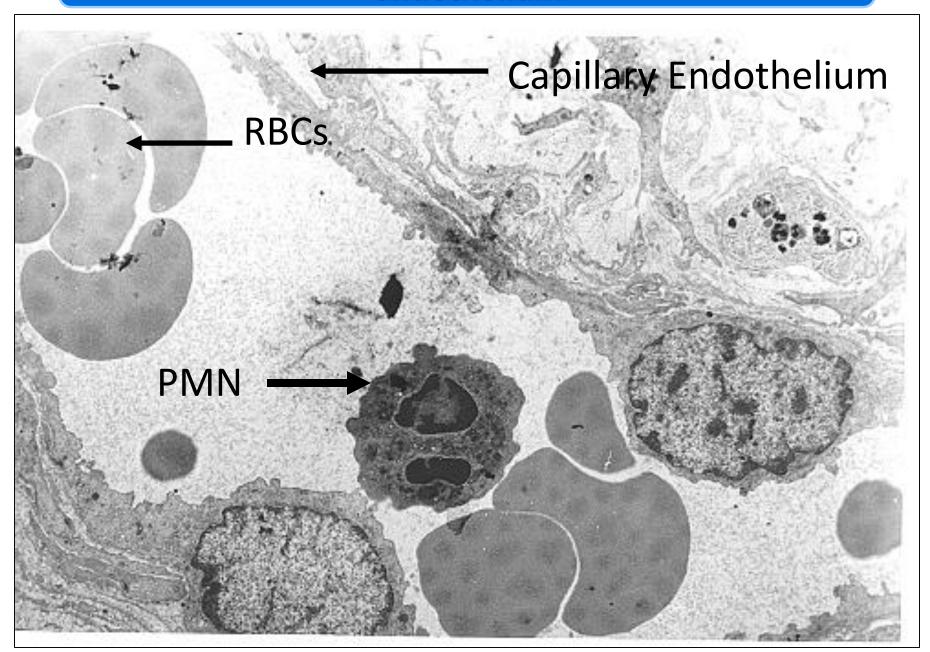
Heaviness Pain, aching **Swelling Burning** Night cramps **Tingling Itching** Restless legs Leg tiredness **Fatigue**

Nociceptive response via C-fibers

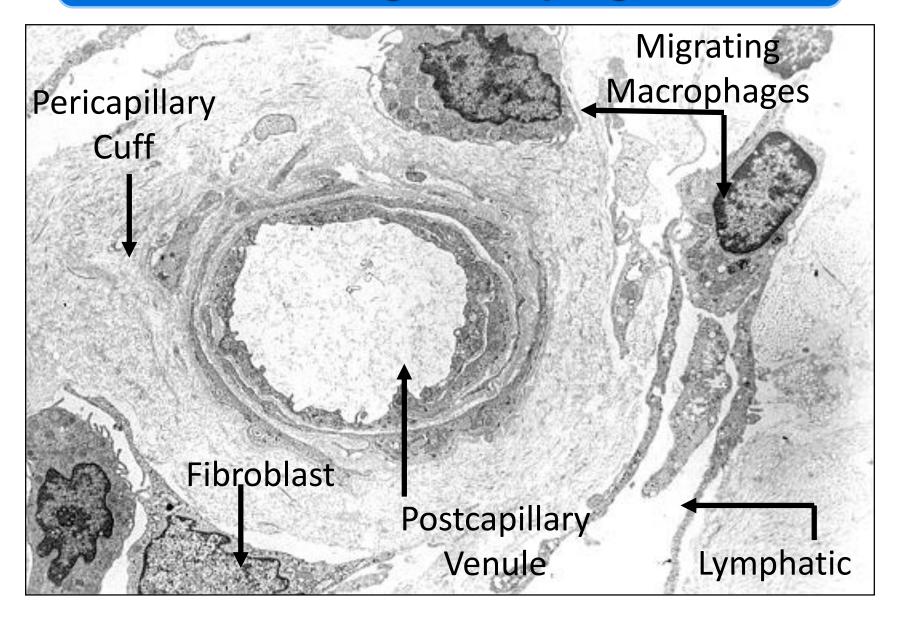


- 1. Eklof B et al. J Vasc Surg. 2009;49:498-501. 2. Strigo IA et al. Pain. 2002;97:235-246.
- 3. Vital A et al. Angiology. 2010;19:73-77.

Traveling leukocytes sense the inflamed endothelium



Pericappilary fibrosis and fibroblasts activating marcrophages









Venous pain resembles visceral pain in comparison with cutaneous pain:

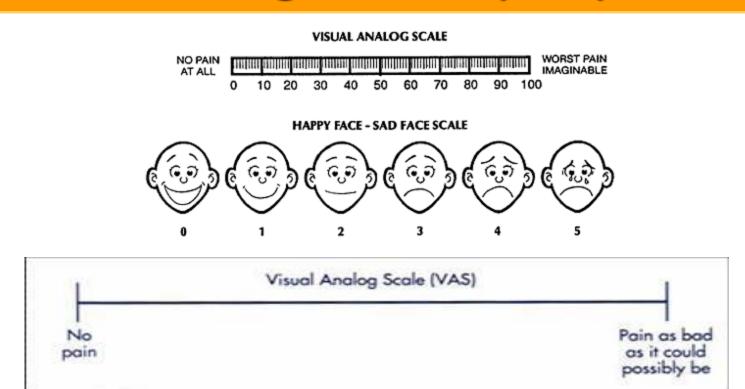
- Less localized diffuse character
- Perceived as more unpleasant
- Emotional impact

Time of exacerbation

"Symptoms of Chronic Venous Disease, particularly are exacerbated by heat or dependency in the day's course, and relieved with leg rest and/or eleveation."

Time of exacerbation	% of VCP pts	Time of exacerbation	% of VCP pts
End of the day	57.4	During summer	30.1
After prolonged standing	45.1	After prolonged sitting	20.2
During night	38.5	When walking	16.4

Visual Analogue Scale (VAS) for Pain



Patients with severe pain require investigation of the iliocaval venous outflow tract

Outflow obstruction is the reason for "Venous claudication"

Bursting persistent pain and uncomfortable tightness in the thigh or calf on walking, with a long resolution time at rest

Deteriorates with exercise ABI index unchanged

Poor correlation between pain and Reflux C0s patients do exist

Stenting of the venous outflow eliminated venous claudication in all patients







Acute venous disease

Phlebothrombosis is a deep vein thrombosis caused by venous wall injury, venous stasis and/or hypercoagulable state (Virchow's triad)

Thrombophlebitis is a superficial vein thrombosis, which happens spontaneously or after (accidental or iatrogenic) trauma

Renal Cell Cancer with Tumorous Thrombus extension in the Inferior Vena Cava and Right Atrium









Conclusions

Pain is an important part of clinical picture of all vascular disorders

Knowledge of typical characteristics of vascular pain can be crucial in effective and timely treatment of these patients







Wisdom lives in the future and from there it speaks to us.

Paul Valery







Exponential Growth of VascularPatients

Ageing of Population

"Times of plenty"

New Noninvasive Diagnostic MDCT

Endovascular interventions







New Age Vascular Medicine

Antiageing Medicine

Redefinition of Treatement Aims

Quality of Life

"Informative Noise"

Burn out in Patients and Doctors