下肢動脈阻塞篩查計劃 LOWER EXTREMITY ARTERIAL **DISEASE SCREENING PROGRAMME** 費用 FEE \$980

計劃包括 Programme includes:

▼ 外科專科醫生面診 General surgeon consultation

踝肱指數檢測 Ankle-brachial index (ABI) test

= 足踝收縮壓 / Ankle pressure /

Brachial arm pressure

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ABI	阻塞程度 Obstruction level	症狀 Symptoms
>1.30	無法壓縮的血管 Noncompressible vessels	血管鈣化 Arterial calcification
0.90 1.30	正常 Normal	正常 Normal
0.40	輕度至中度阻塞 Mild to moderate obstruction	下肢酸痛或無力、 間歇性跛行 Sore or weak legs, intermittent claudication
<0.40	嚴重阻塞 Severe obstruction	靜息痛或壞疽 Rest pain or gangrene

* 並非所有周邊血管病患者均有病徵。假如檢查發現踝 肱指數少於0.9,便可診斷為下肢血管阻塞。 Not all patients with PAD have symptoms. If a patient has an ABI<0.9, he/she can be diagnosed with lower

extremity arterial obstruction.

周邊動脈病 PERIPHERAL ARTERIAL DISEASE

聯絡我們 **CONTACT US**

尚至醫療大樓

Virtus Medical Tower

香港中環皇后大道中122號尚至醫療大樓6樓 6/F, Virtus Medical Tower, 122 Queen's Road Central, Hong Kong

尚至醫療中心 (尖沙咀)

Virtus Medical Centre (TST)

九龍尖沙咀中間道15號H Zentre 11樓 11/F, H Zentre, 15 Middle Road, Tsim Sha Tsui, Kowloon

趙啟明醫生醫務所

Central Vascular Clinic

香港中環畢打街1-3號中建大廈13樓1335室 Suite 1335, 13/F, Central Building, 1-3 Pedder Street, Central, Hong Kong

- +852 8102 2022
- +852 9325 4580
- CustomerCare@VirtusMedical.com
- www.VirtusMedical.com











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甚麼是周邊動脈病? WHAT IS PERIPHERAL ARTERIAL DISEASE?

周邊動脈病或周邊動脈阻塞病是指供應血液到大腦和心臟以外的動脈收窄,其中以下肢動脈最常見,稱為下肢動脈阻塞。與冠心病一樣,粥樣硬化是周邊動脈阻塞的主要成因。當膽固醇、脂肪或鈣等物質沉積在血管壁上形成粥樣斑塊,動脈便會收窄和硬化,導致通往四肢的血流受阻。粥樣斑塊破裂會繼發血栓塞,令到血管進一步收窄,甚至完全堵塞。

Peripheral arterial disease (PAD) or peripheral arterial occlusive disease (PAOD) is the narrowing of arteries that supply blood to organs except for the brain and heart. PAD most commonly affects arteries in the legs, and this type of PAD is named lower extremity arterial disease (LEAD). Just as coronary heart disease caused by atherosclerosis, PAD is a result of reduced blood flow to the limbs due to the narrowing of artery caused by atheromatous plaque build up (formed by the deposition of cholesterol, fat or calcium) on the wall. Rupture of atheromatous plaque can lead to the formation of thrombus, which can further narrow the blood vessel or even lead to complete blockage.

周邊動脈病會帶來甚麼影響? WHAT ARE THE IMPACTS OF PAD?

動脈阻塞影響血液運送到四肢及器官,繼而造成缺血。 當沒有足夠血液時,腿、手臂以及大腦便會受到損害。 若不及時治療,組織會壞死(稱為壞疽),甚至繼發感染 ,嚴重者或需截肢。研究發現,周邊動脈病患者中風及 心律不均的病發機會分別高五成及七成。

Arteries obstruction can affect blood flow, thus reducing blood supply to the limbs, brain and other vital organs. Legs, arms and brain will be damaged because of inadequate blood supply. If left untreated, it may cause tissue loss (also called gangrene), which can result in infection and eventually limb amputation. Studies have shown that patients with PAD have a 50% and 70% higher chance to develop stroke and arrhythmia.

下肢動脈阻塞常見症狀

COMMON SYMPTOMS OF LOWER EXTREMITY ARTERIAL DISEASE

初期並沒有明顯病徵,當症狀出現時,生活質素已經開始變差:

In the early stage, most of the patients do not develop obvious symptoms. When symptoms start to show, patients may have already witnessed a depreciation of their quality of life:



間歇性跛行

Intermittent claudication

走路或行樓梯時腿部或臀部肌肉疼痛、抽筋或疲勞,但症狀在休息後會得到紓緩。Leg or buttocks muscle pain, cramps or fatigue when walking or climbing stairs, but symptoms relieved after rest.



腳甲和腿毛生長緩慢

Slow growth of toenails and leg hair



腿部乏力或麻痺

Weakness or numbness in the legs



腿部有難以癒合的傷口

Non-healing ulcers or wounds in the legs



腿部皮膚冰冷 Coldness in the legs



腿部膚色改變

Change in the skin colour of the legs

下肢動脈阻塞嚴重程度分級 SEVERITY GRADING OF LOWER EXTREMITY ARTERIAL OBSTRUCTION

症狀分級 Fontaine classification

- 無症狀,踝肱指數≤0.9 Asymptomatic, ABI≤0.9
- 間歇性跛行 Intermittent claudication
- Ila 輕度間歇性跛行 (行走距離>200米) Mild claudication at a distance>200m
- 中度至重度間歇性跛行 (行走距離<200米) Moderate to severe claudication at a distance<200m
- は血性疼痛 (靜息痛/夜間疼痛) Ischemic pain (rest/nocturnal pain)
- A 組織潰瘍或壞死 Necrosis or gangrene

我是周邊動脈病的高危患者嗎? AM I AT RISK OF PAD?

周邊動脈病的危險因素包括 Risk factors for PAD:

- ▶ 65歲或以上 Aged 65 or above
- 動脈粥樣硬化的高危人士,包括:
 At risk of atherosclerosis, including:
 - ▶糖尿病患者 Patients with diabetes
 - ▶吸煙人士 Smokers
 - ▶高血脂患者 Patients with hyperlipidaemia
 - ▶高血壓患者 Patients with hypertension
 - →家族有周邊動脈病史的人士 People with a family history of PAD
- ▶ 其他動脈(如心血管、頸動脈等)粥樣硬化病患者 Having a history of atherosclerosis in other vascular beds, like coronary artery or carotid artery