

SCREENING FOR PERIPHERAL ARTERY DISEASE AND CARDIOVASCULAR DISEASE RISK ASSESSMENT WITH THE ANKLE BRACHIAL INDEX IN ADULTS

CLINICAL SUMMARY OF U.S. PREVENTIVE SERVICES TASK FORCE RECOMMENDATION

Population	Asymptomatic adults without a known diagnosis of peripheral artery disease (PAD), cardiovascular disease, severe chronic kidney disease, or diabetes
Recommendation	No recommendation. Grade: I statement

Risk Assessment	Important risk factors for PAD include older age, diabetes, smoking, hypertension, high cholesterol level, obesity, and physical inactivity. Peripheral artery disease is more common in men than women and occurs at an earlier age in men.
Screening Tests	Resting ankle–brachial index (ABI) is the most commonly used test in screening for and detection of PAD in clinical settings. It is calculated as the systolic blood pressure obtained at the ankle divided by the systolic blood pressure obtained at the brachial artery while the patient is lying down. Physical examination has low sensitivity for detecting mild PAD in asymptomatic persons.
Balance of Benefits and Harms	Evidence on screening for PAD with the ABI in asymptomatic adults with no known diagnosis of cardiovascular disease or diabetes is insufficient; therefore, the balance of benefits and harms cannot be determined.
Other Relevant USPSTF Recommendations	The USPSTF has made recommendations on using nontraditional risk factors, including the ABI, in screening for coronary heart disease. These recommendations are available at <u>http://www.uspreventiveservicestaskforce.org/</u> .

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to <u>http://www.uspreventiveservicestaskforce.org/</u>.