

## CONTINUING MEDICAL EDUCATION ΣΥΝΕΧΙΖΟΜΕΝΗ ΙΑΤΡΙΚΗ ΕΚΠΑΙΔΕΥΣΗ

### Vascular Diseases Quiz – Case 68

A 68-year-old woman visited her general practitioner complaining of increasing fatigue in her upper limbs, particularly on the right side. She noticed these symptoms shortly after performing tasks, notably cleaning windows. Additionally, she experienced occasional dizziness, necessitating breaks to rest. Her medical history revealed hypertension, high blood cholesterol levels, and a history of smoking cessation. A chest X-ray revealed severe arthritis.

Apart from arthritis, what could be a vascular cause of this problem?

#### Comment

Although arthritis and dizziness are common issues in older individuals, the onset of symptoms under specific circumstances warrants attention from healthcare providers. Subclavian artery stenosis and subsequent steal syndrome should be considered. While subclavian artery stenosis often remains asymptomatic and may be managed with medications, symptoms such as arm ischemia or dizziness triggered by arm elevation indicate the need for intervention.

Subclavian artery steal syndrome occurs when blood is diverted to the arm instead of the brain due to subclavian artery narrowing (fig. 1). Therefore, thorough assessment of a patient's medical his-



Figure 1.

tory is crucial, particularly noting conditions such as hypertension, hypercholesterolemia, and smoking, which indicate atherosclerotic vascular disease risk. Clinical examinations should include palpation of pulses at common upper limb sites and blood pressure measurements in both arms to detect any significant discrepancies, indicative of subclavian artery stenosis.

If suspicious findings arise, a comprehensive arterial system examination using ultrasound is warranted to detect atherosclerosis, which may affect various circulatory sites, including coronary arteries. If intervention is deemed necessary, a computed tomography (CT) angiogram is performed to assess and plan treatment options. In the era of minimally invasive procedures, endovascular treatments such as angioplasty and stenting of the stenosed subclavian artery segment are preferred over open surgical reconstruction or endarterectomy (fig. 2).

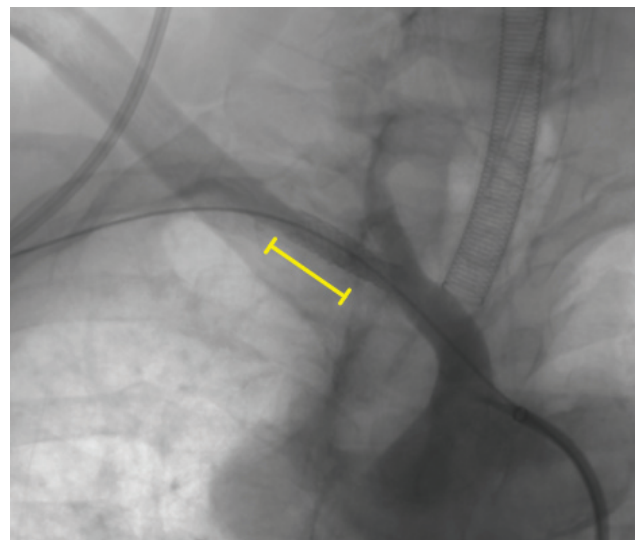


Figure 2.

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