**COMMERCIAL PERIPHERAL ARTERIAL DISEASE SCREENING OUTSIDE THE SCOPE OF ESTABLISHED GUIDELINES**

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**Objective:** USPSTF PAD screening recommendations include a one-time screen for AAA in men older than 65 who have ever smoked, they recommend against screening for Carotid Artery Stenosis (CAS) in asymptomatic individuals and have inconclusive evidence for ABI screening. There are numerous commercially available screening tools at many hospitals throughout the country where preventive screening is practiced outside the scope of national guidelines. Aim is to examine the appropriateness of commercially available PAD screening programs in the general population.

**Methods:** Our hospital has a program that allows the public to obtain screening for PAD regardless of risk factors or symptoms. This includes an ABI measurement and ultrasound screening for AAA and CAS for the price of $90-100. Participants' answers a questionnaire related to their symptoms and risk factors. A patient can obtain one to three of the above tests regardless of their answers on the questionnaire. After Institutional Review Board approval, we retrospectively collected data from 2013-2016, compromising a total of 603 individuals. The data included patient's answers to the questionnaire and measurements from the above tests, analyzed using SPSS and reported as descriptive statistics.

**Results:** Our analysis included 566 patients, 43 were excluded due to repeat screening. 212 (37.4%) were male and 354 (62.5%) were female. Of the males, 38 (17.9 %) were Less than age 55 and 132 (82%) were over the age of 55. Of the females, 89 (35.3%) were less than age 65 and 162 (64.2%) were over the age of 65. Hypertension was encountered in 58.3% of the study population, 33.7% had history of smoking, 16.3% were diabetic, 7.2% had coronary artery disease and 6% had a history of stroke. Positive tests were defined as an ABI less than 0.9 in one or both sides, a carotid US ratio of internal carotid artery to common carotid artery greater than 4.0 on one or both sides, and an anterior-posterior or transverse aortic diameter greater than 5 cm. Positive tests were obtained in 19 (3.4%) individuals for ABI, 1 (0.2%) for carotid US, and 2 (0.4%) for abdominal US.

**Conclusion:** We urge against the practice of commercial preventive screening tests for PAD in the general population.