Intermittent claudication (IC) is pain or discomfort in the muscles of the calf, thigh or buttock that occurs during walking and is relieved by rest. It affects 4% of people over 60 years of age and is the most common symptom of peripheral arterial disease (PAD). For people with IC, the goals of treatment are twofold: (1) secondary prevention of cardiovascular disease through management of risk factors (eg, tobacco use, dyslipidaemia, diabetes, hypertension and physical inactivity); (2) improving functional status, with treatment options including exercise training, revascularisation and vasodilator therapy. In 2012, the UK’s National Institute for Health and Care Excellence published a clinical guideline on the diagnosis and management of PAD. This guideline recommended that a 3-month supervised exercise programme (SEP) should be offered as a first-line therapy for IC, and that revascularisation and vasodilator therapy should only be considered if exercise provides insufficient symptom relief. Although research studies have shown unsupervised exercise to be generally less effective at improving functional status than an SEP, it can still be effective, and should be recommended if an SEP is not available.

The evidence supporting the efficacy of exercise for people with IC dates back to 1966 when a study reported that 6 months of interval walking exercise improved patients’ pain-free and maximum walking distances. Over the following 50+ years, numerous randomised trials and meta-analyses have been published supporting the efficacy of exercise in improving functional status in this population. Despite this evidence and the clinical guideline recommendations, the provision of SEPs is variable, with one study reporting that only 38.5% of vascular units in the UK had access to an SEP. Potential barriers include a lack of funding, facilities and patient motivation.

The benefits of exercise for people with IC are too great to be ignored. Therefore, to support the provision and uptake of exercise, we have developed two new resources. First, a statement for healthcare professionals that summarises the evidence and provides exercise prescription guidelines. Second, an infographic of key messages aimed primarily at patients. This infographic, which may be shared digitally or used as a poster or handout in clinics, aims to encourage patients to make exercising a regular habit by highlighting potential benefits and providing clear guidelines and safety messages. We hope that readers will share this infographic widely to enhance awareness of this debilitating condition and the important role that exercise can play in its management.
Infographic


Infographic

8Thermal Ergonomics Laboratory, Discipline of Exercise and Sport Science, The University of Sydney, Sydney, New South Wales, Australia
9Department of Sport, Health & Exercise Science, University of Hull, Hull, UK
10School of Health and Related Research, The University of Sheffield, Sheffield, UK
11Your Thinking Ltd, London, UK
12Department of Physiotherapy and Paramedicine, Glasgow Caledonian University, Glasgow, UK
13Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield, UK

Correspondence to Dr Garry A Tew, Department of Sport, Exercise and Rehabilitation, Northumbria University, Newcastle NE1 8ST, UK; garry.tew@northumbria.ac.uk

Correction notice This article has been corrected since it published Online First. The title has been corrected.

Twitter Garry A Tew @garry_tew and Chris Seenan @chrisseenan

Contributors GT led the design of the infographic and drafted the accompanying text. All coauthors contributed to the design of the infographic and reviewing and revising the text. All authors approved the final version to be published and are accountable for all aspects of the work.

Funding The infographic was funded by The Circulation Foundation and Northumbria University.

Competing interests None declared.

Patient consent for publication Not required.

Provenance and peer review Not commissioned; externally peer reviewed.

OPEN ACCESS

Open access This is an open access article distributed in accordance with the Creative Commons Attribution 4.0 Unported (CC BY 4.0) license, which permits others to copy, redistribute, remix, transform and build upon this work for any purpose, provided the original work is properly cited, a link to the licence is given, and indication of whether changes were made. See: https://creativecommons.org/licenses/by/4.0/.

© Author(s) (or their employer(s)) 2020. Re-use permitted under CC BY. Published by BMJ.


Accepted 23 January 2020
Published Online First 12 February 2020
doi:10.1136/bjsports-2019-101930

ORCID iD
Garry A Tew http://orcid.org/0000-0002-8610-0613

REFERENCES