

CACVI Report Finds Early Vascular Care Can Cut Amputations by 40%

CACVI finds early vascular care and follow-up can prevent nearly half of PAD-related amputations.

CA, UNITED STATES, June 5, 2025 /EINPresswire.com/ -- With lower-limb amputations on the rise, especially among individuals with peripheral artery disease ([PAD](#)) and diabetes, CACVI is reporting that timely [vascular surgery](#), minimally invasive vascular intervention, and coordinated [amputation prevention](#) can reduce amputations by up to 40%.

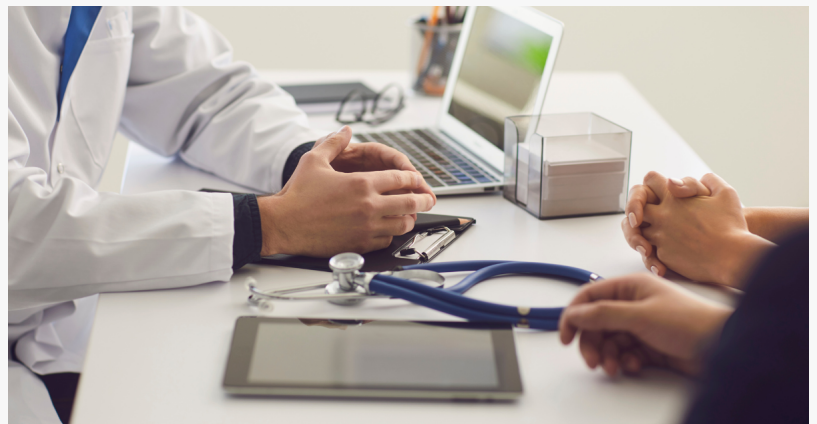
The Center for Advanced Cardiac and Vascular Interventions (CACVI) is a leading center for vascular health in Southern California, now urges earlier referrals and intervention as part of its May 2025 initiative to combat

avoidable limb loss. It has been at the forefront of addressing critical vascular conditions by focusing on a multi-faceted approach rooted in vascular surgery, vascular intervention, and amputation prevention. The center's commitment to evidence-based approaches and personalized care positions it as a regional leader in vascular health outcomes.

Vascular Disease Is Widespread Yet Often Treatable

According to the American Heart Association, peripheral artery disease (PAD) affects an estimated 8.5 million people in the U.S., with the majority of cases going undiagnosed in the early stages. PAD occurs when narrowed arteries reduce blood flow to the limbs, most commonly the legs, leading to claudication, non-healing wounds, infections, and, in severe cases, tissue death and amputation.

The disease is especially prevalent among older adults, smokers, and individuals with chronic conditions like diabetes, high blood pressure, or high cholesterol. According to the Centers for Disease Control and Prevention, PAD-related amputations account for over 100,000 limb losses





These are not just statistics, they reflect real people, real limbs, and lives that can be dramatically changed or lost. We can often save a limb with timely vascular intervention."

Mehran J. Khorsandi

annually in the United States alone.

Despite the severity of outcomes, many of these cases are preventable. Studies show that up to 85% of diabetes-related amputations could be avoided through timely and appropriate vascular intervention, including vascular surgery, amputation prevention strategies and catheter-based procedures paired with long-term follow-ups.

A Unified Approach: Surgery, Intervention, and Prevention
CACVI's approach integrates three core components:

vascular surgery, minimally invasive vascular intervention, and amputation prevention. This care model not only addresses the disease at various stages but ensures that patients are supported beyond the procedure itself.

Patients with advanced disease may require open vascular surgical procedures such as bypass grafting, carotid endarterectomy, or aneurysm repair to restore proper circulation. These surgeries can prevent major complications and are tailored to the patient's anatomy, condition severity, and comorbidities.

Meanwhile, patients in earlier stages or those unable to undergo major surgery may benefit from catheter-based vascular intervention procedures, including angioplasty, stenting, atherectomy, and thrombolysis. These treatments offer shorter recovery times and are often performed in outpatient settings, making them especially valuable for the elderly and individuals with diabetes.

Following either type of intervention, CACVI's focus shifts to amputation prevention through regular vascular imaging, wound care coordination, and risk-factor management. Clinical data show that patients who receive continuous post-treatment care have a significantly lower risk of re-occlusion or limb loss over time.

This care model aligns with findings that report that patients receiving coordinated vascular care are 40% less likely to undergo amputation than those treated in fragmented systems.

Underserved Communities Face the Highest Risk

Health disparities play a significant role in vascular outcomes. Research published in JAMA Surgery shows that Black Americans are four times more likely than white Americans to undergo amputation for PAD, even when disease severity and access to hospitals are similar. Similarly, Native American and Hispanic populations face higher-than-average rates of vascular complications due to systemic barriers to care, delayed diagnosis, and limited access to specialists.

CACVI is addressing these disparities through regional outreach and education. The institute

hosts bilingual screening events, distributes culturally appropriate vascular health literature, and partners with safety-net providers across Southern California. These efforts aim to identify patients earlier and remove access-related barriers that lead to delayed care and irreversible outcomes, by connecting individuals to timely vascular surgery and amputation prevention services that can significantly reduce the risk of limb loss.

Location also plays a role, as patients in rural or low-income urban areas are less likely to be referred to vascular specialists before complications develop. A 2023 study published in *Annals of Vascular Surgery* examined the impact of housing status on the surgical management and inpatient outcomes of patients with chronic limb-threatening ischemia (CLTI). The study found that housing instability was associated with worse surgical outcomes, including higher rates of major amputation and longer hospital stays. This research highlights the significant role that socioeconomic factors, such as housing status, play in the management and outcomes of vascular diseases, emphasizing the importance of improving access to vascular surgery and strengthening long-term amputation prevention efforts

About CACVI

The Center for Advanced Cardiac and Vascular Interventions (CACVI) provides comprehensive vascular care to patients across Southern California. With a team of board-certified specialists, CACVI offers evidence-based treatment plans through advanced vascular surgery, minimally invasive vascular intervention, and long-term amputation prevention strategies. The institute is committed to improving outcomes for patients with PAD and other vascular conditions, with a special focus on early detection and underserved communities.

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