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A Systematic Review to Determine an Evidence Based, Standardised Protocol for Measuring the Ankle: Brachial Pressure Index.

Peter Roberts and Veronica Newton (Contributor)

BACKGROUND

The use of ABPI as a means of estimating lower-limb circulatory sufficiency and Peripheral arterial disease (PAD) is well documented within the literature. By recognising and measuring the signs and symptoms of PAD it is possible to determine when further objective vascular tests are required in order to plan the next stage of management. However there is also considerable variability.

Three themes of variety from the traditional ABPI method were investigated in 8 papers:

1. The position of the cuff
2. The use of automated devices
3. The mode of calculation

Recommendations were only possible for Theme 3 as there was considerable disagreement amongst papers in themes 1 and 2.

ABPI = Mean of Dorsalis Pedis & Posterior Tibial
Mean of Brachial

PURPOSE

The purpose of this project was to generate an evidence based protocol for the assessment of the Ankle: Brachial Pressure Index in order that reproducibility, interpretation and intervention decisions could be improved.

Overarching factors were that the protocol should be applicable within a variety of health care professions such as Podiatry, District Nursing and General Medical Practice. Secondly that the protocol was relevant to patients suspected of having Peripheral Arterial Disease (PAD) for example via identification of risk factors or the presence of signs and symptoms.

Research Question:
What is the most accurate and repeatable method for the assessment and calculation of ABPI?

MATERIALS AND METHODS

The review was performed as follows:

• Literature Search of electronic databases using terms derived from research question
• Application of explicit inclusion/exclusion criteria derived from the research question and purpose and based on accepted methodological boundaries.
• Quality review of each included article using modified CASP tool (see Handout) and allocation of methodological quality score (CASP 1998 available at www.phru.nhs.uk/learning).
• Identification of themes within the literature
• Cross comparison of papers in each theme to identify agreement
• Compilation of agreed findings to form protocol / recommendations

RESULTS

Three themes of variety from the traditional ABPI method were investigated in 8 papers:

1. The position of the cuff
2. The use of automated devices
3. The mode of calculation

Recommendations were only possible for Theme 3 as there was considerable disagreement amongst papers in themes 1 and 2.

CONCLUSIONS

• Calculating ABPI based on Mean results was reported to reduce inter-rater and intra-rater variability and should be considered a realistic development to routine practice (accurate and repeatable)
• Further primary investigation is needed to determine the comparative reliability of doppler, oscilometric and photopletysmographic methods of measuring ankle pressures
• The lack of consistency amongst papers and the low volume of research into all aspects of the test meant that it was not possible to generate a full evidence based protocol.

BIBLIOGRAPHY