CRITICAL LIMB ISCHEMIA GLOBAL SOCIETY

2022 EXECUTIVE SUMMARY

The CLI Global Society's mission is to improve quality of life by preventing amputations and death due to critical limb ischemia.

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NEW **EUROPE CHAPTER** Addressing Health Policy and Clinical Challenges

"An office, with its seat in Brussels close to the European policy makers, and specifically focusing on Europe is necessary because of the major differences that currently exist between the healthcare systems within 52 European countries and territories," said Prof. van den Berg. "The multidisciplinary approach to achieve further fulfillment of the mission of the Society in Europe is guaranteed by the EU board members and it is my pleasure and honor to be the first chairman of the CLIGS EU."



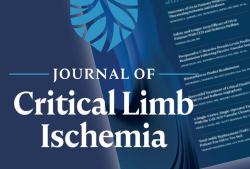
Prof. Jos C. van den Berg, MD, PhD CHAIRMAN, Europe Chapter



Prof. Thomas Zeller, MD VICE-CHAIRMAN, Europe Chapter



Prof. Walter Dorigo, MD TREAUSRER/SECRETARY, Europe Chapter



Critical Limb Ischemia

JOURNAL OF CRITICAL LIMB ISCHEMIA CELEBRATES ONE YEAR ANNIVERSARY

The goal of the journal is to provide an international forum for the presentation of original ideas and recent results related to all aspects of CLI diagnostics, therapeutics, and pathophysiologic treatment.

Launched in March 2021, the Journal of CLI is the official journal of the CLI Global Society. JCLI is the fist and only academic journal to focus on endovascular and surgical techniques for CLI.



WE ARE **PROUD TO PARTNER** With the American Diabetes Association and announce the new Amputation Prevention Alliance

"The Amputation Prevention Alliance's work will focus on addressing communities facing disproportionately high rates of amputations and amputated-related mortality, including through advancing needed policy changes, driving clinician awareness of opportunities to prevent amputations, and empowering patients to advocate for their best care. This three-year effort will aim to improve care for all people living with diabetes, and enhance access to quality care, technology, and necessary interventions. The aim is to reduce the number of unnecessary amputations that take place every year in the United States.

Survey data confirms that far too many people with diabetes are unaware about their own risk for an amputation. In a recent survey of people living with diabetes conducted by Thrivable, despite diabetes being the leading cause of amputations, **65 percent of those surveyed said they believed they were not at risk for amputation** and just 1 in 4 of those surveyed understood the signs and symptoms of conditions that can lead to an amputation such as peripheral neuropathy, peripheral artery disease or critical limb ischemia."

-ADA Press Release September 2022

Visit www.cliglobalsociety.org/apa for additional details.



WELCOME NEW COMMITTEE CHAIRS



Anahita Dua, MD PUBLICATIONS CHAIR



Lorena Henderson, NP COMMUNICATIONS CHAIR



Fadi Saab, MD REVASCULARIZATION CHAIR



Srini Tummala, MD EDUCATION CHAIR The CLI Global Society completed the first call for nominations among the members to identify new emerging leaders to head strategic projects important for the growth of the Society as identified by the Board of Directors.

THANK YOU TO OUR SUPPORTERS

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We must address the unmet need of critical limb ischemia. In the United States, lower extremity PAD manifests as CLI in nearly 1 million Medicare patients per year with an estimated annual cost of over 3 billion dollars.⁶ One in 190 Americans (1.6 million) are living with loss of a limb. Unchecked, this number may more than double by 2050 to 3.6 million.⁷

Barry T. Katzen, MD President, CLI Global

REFERENCES

1. Mustapha JA, Katzen BT, Neville RF, Lookstein RA, Zeller T, Miller LE, Jaff MR. Determinants of Long-Term Outcomes and Costs in the Management of Critical Limb Ischemia: A Population-Based Cohort Study. J Am Heart Assoc. 2018;7:e009724. DOI: 10.1161/JAHA.118.009724. 2. J Vasc Surg. 2013 June ; 57(6): 1471–1480.e3. doi:10.1016/j.jvs.2012.11.068. The incidence and health economic burden of critical limb ischemia and ischemic amputation in Minnesota: 2005–2007. Circulation. 2009; 120:S1148.



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