Background: Upper-limb ischemia is much less frequent than that of inferior limbs. Clinical presentation is variable, Subclavian Steal Syndrome being the leading manifestation. Rest pain with distal ischemia has also been described.

Objectives: We have reported 3 consecutive cases with similar clinical findings, all of which have been successfully treated with angioplasty in our hospital.

Clinical Findings: 3 female patients, between the ages of 46 and 66, were referred to our cath lab from the E. R. for upper limb ischemia. The three of them complained of distal rest pain. All of them were smokers and none were diabetic or had renal failure. A physical exam revealed distal ischemia, and two patient had necrotic plaque surrounding the nail as well.

In all of the patients an ultrasound was performed showing a narrowing in the origin of the subclavian artery.

Procedures: We performed an angiogram of aorta and the subclavian artery responsible for the symptoms. We found significant stenosis (more than 80%) at the origin of the subclavian artery in all the patients.

In the same procedure we delivered a self-expanding stent at the site of the lesion without pre-dilatation. We obtained 100% of success. All of the patients reported immediate pain relief were discharged shortly thereafter.

Conclusions:
1. Angioplasty proved to be safe and secure in upper-limb ischemia.
2. The importance of early diagnosis and treatment should be emphasized in this condition.