**Chronic mesenteric ischemia and vascular stenting**

Mesenteric ischemia is poor circulation in the vessels supplying blood flow to your mesenteric organs: your stomach, liver, colon and intestine. With poor circulation, blockages can form and compromise the function of these organs.

Mesenteric ischemia can come on suddenly or build slowly and become an ongoing health issue. It is part of a systemic disease process known as peripheral vascular disease or peripheral artery disease (PAD).

Chronic mesenteric ischemia often causes severe stomach pain 15–60 minutes after eating. The pain may last for as long as 2 hours and, unfortunately, tends to recur with every meal. You may also experience nausea, vomiting, diarrhea or flatulence.

Chronic mesenteric ischemia sometimes leads you to lose weight because, although you may feel hungry, you eat less or less frequently to avoid the pain.

Chronic mesenteric ischemia is frequently due to atherosclerosis (hardening of the arteries), which slows the amount of blood flowing through the arteries. An artery becomes blocked by plaque, which is formed by fats and other materials circulating in your blood. As more plaque builds up along the blood vessel wall, the artery can narrow and stiffen. Eventually, enough plaque builds up to reduce blood flow or even completely block the arteries.

In chronic cases minimally invasive endovascular treatment has become the first-line approach in most instances. Balloon angioplasty and stenting are sometimes performed at the same time as a diagnostic angiogram to avoid a second procedure and begin treatment as soon as possible. A tiny balloon device is inserted inside the narrowed artery. Your vascular surgeon inflates and deflates the balloon to push plaque against the wall of the artery. Once the artery is widened, your vascular surgeon inserts a stent, a tiny metallic mesh tube designed to support the artery walls to keep the vessel open.