The angiosome concept of perfusion may help vascular interventionalists effectively treat ulcers and ischemic tissue caused by Critical Limb Ischemia (CLI) by specifically targeting and optimizing blood flow to the ischemic area.

Angiosomes delineate specific three-dimensional anatomic areas of tissue fed by a specific source artery and drained by specific veins. Therefore, targeted direct revascularization of the source artery to the affected angiosome may result in improved wound healing and increased limb salvage.

Angiosome-guided direct revascularization to a specific area has resulted in higher rates of successful wound healing and limb salvage compared to an indirect revascularization strategy. Direct revascularization using the angiosome concept may not always be possible; however, published literature and case studies demonstrate the utility of this concept in improving wound healing and limb salvage when feasible.