



The aorta is the largest artery in the body. It runs from the heart, down through the chest, and into the abdomen. The abdominal region of the aorta is responsible for delivering blood to the legs, gastrointestinal tract, and kidneys.

An abdominal aortic aneurysm (AAA) occurs when the wall of the aorta progressively weakens and begins to bulge. An AAA may enlarge and eventually rupture if left untreated, causing severe internal bleeding and possibly death.

Nearly 200,000 people in the United States are diagnosed with AAA annually, and approximately 15,000 die each year from a ruptured AAA. In addition to concerns about rupture, clots or debris may also develop within an AAA. These substances can be carried to other areas in the body and block circulation, potentially causing severe pain or limb loss if blood flow is cut off for too long.

Symptoms

Most people with AAA have no symptoms. It is often detected when tests are conducted for unrelated reasons. If the patient has symptoms, they might include pain, pulsations in the abdomen, groin pain, or foot sores.

Causes and Risks

Most aortic aneurysms are caused by a breakdown in the proteins that provide structural strength to the aorta wall. Some risk factors that contribute to this structural breakdown include:

- Age – Individuals older than 60 years are most likely to develop the condition
- Gender – Males are more prone to the condition than females
- History of atherosclerosis (hardening of the arteries)
- Family history of AAA
- Smoking
- High blood pressure
- Chronic lung disease



If a patient has risk factors for an AAA or have been diagnosed with an AAA, they should talk to their doctor about a referral to see a vascular surgeon.

Important Note: Medicare Screening Benefit

Medicare offers a free, one-time AAA ultrasound screening for qualified seniors as part of its Welcome to Medicare physical during the first 12 months of enrollment. Men who have smoked sometime during their life and men and women with a family history of AAA are eligible for this benefit.

Talk to a Doctor

If a patient has risk factors for an AAA or have been diagnosed with an AAA, they should talk to their doctor about a referral to see a vascular surgeon.

Diagnosis

If an AAA is suspected, patients likely will be referred for an abdominal ultrasound, which is a painless, safe test that screens for and measures the size of an AAA. A computed tomographic angiogram (CTA) might also be recommended. It requires exposure to radiation and injection of an intravenous contrast agent. A CTA assesses aneurysm size, location, and the extent of impact.

Role of a Vascular Surgeon

Vascular surgeons can determine when treatment is needed and recommend the best procedure

for patients with AAA, based on the size of the aneurysm and other factors.

Board-certified vascular surgeons have specific training in both minimally invasive and traditional open repairs, and they will help ensure that the repair conducted will be tailored to the patient's anatomy and expectations.

Treatment

For smaller AAAs, patients may need to make lifestyle changes, such as quitting smoking and lowering blood pressure. They may also be prescribed medication. A patient should have regular checkups with their vascular surgeon to determine if the AAA has changed.

For large AAAs or those that have been increasing over time, repair may include placement of an endovascular stent graft or open bypass grafting.

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