

Title: Management of a small diameter abdominal aortic aneurysm, surgical repair vs. ultrasound surveillance

Author: Katsiaryna Ericson

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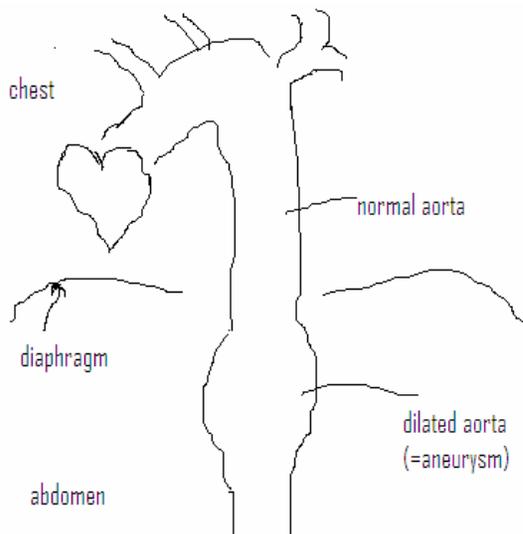
Key words: AAA, abdominal aortic aneurysm, aorta,

Abstract: Current research says that for patients with abdominal aortic aneurysm of 4.0-5.5 cm in size (which is considered a small size) either surgical repair or frequent ultrasound of their aorta is acceptable. Patient should be the one to make this choice. However, if AAA starts to expand >1 cm/year or causes patient to have symptoms, surgical repair should be considered.

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### **What is abdominal aortic aneurysm (AAA)?**

Aneurysm is a dilatation in aorta, the largest blood vessel in the body (see picture). Aorta runs from the heart in the chest down to the belly. This aortic dilatation, aneurysm, is most commonly found in the belly (in medicine called abdomen).



### **Who usually gets AAA (predisposing factors)?**

Even though aneurysm can occur in anyone, white men over 60 years old

develop this condition more commonly. You are also at a higher risk for AAA if you have high blood pressure, high cholesterol, overweight, smoke or have a close family member with AAA.

### **What are the symptoms of AAA?**

Small AAA may have no symptoms at all and is usually found incidentally. When aneurysm starts to enlarge, you may start experiencing back pain that radiates to the groin or your buttocks, or you may notice a pulsating mass in your abdomen. You may also feel dizzy especially when you get up, experience nausea and vomiting, chest pain and difficulty breathing.

### **What should I do if I have symptoms of AAA?**

If you experience symptoms of severe back pain radiating to the groin, dizziness, or see a pulsating mass in your belly, you should call 911 immediately. Rapidly enlarging or already large AAA may rupture and cause death.

### **How is AAA treated?**

AAA that is large in size (>5.5 cm in diameter) can be treated with open surgery where surgeon makes an

incision on your belly and repairs dilated aorta. Another option for repair is to place a stent (tubular structure that will support aortic wall) inside the aorta through a blood vessel in the groin.

### **How to detect AAA?**

Abdominal aortic aneurysm is usually detected by ultrasound, an imaging technique that uses sound waves to detect images inside the body. Computerized tomography (CT) and Magnetic resonance imaging (MRI) are two other methods of taking pictures of your internal organs and can also be used in detecting AAA.

### **Can I do anything to reduce my risk of AAA?**

It is important to modify factors that predispose patients to aneurysms (see answer above). Patients with high blood pressure and high cholesterol should be closely followed by their doctor and have those conditions treated. Patients who are overweight or smoke should try to lose weight and quit smoking. Patient who have a close family member with AAA should tell their doctor about it and ask for an

early screening of AAA with an ultrasound.

**If I have abdominal aortic aneurysm but it is small in size, should I get it repaired with surgery?**

Current research says that for patients having AAA 4.0-5.5 cm in size (small) either surgical repair or frequent ultrasound of their aorta is acceptable. Patient should be the one to make this choice. However, if AAA starts to expand >1 cm/year or causes patient to have symptoms, surgical repair should be considered.

Lederle FA, Kane RL, MacDonald R, Wilt TJ Systematic Review: Repair of Unruptured Abdominal Aortic Aneurysm *Annals of Internal Medicine* 2007; 146: 735-741

## Abdominal Aortic Aneurysm (AAA)



**Patient  
information**

### References:

*Mayoclinic.com*