

Find the **AAAnswers** about Abdominal Aortic Aneurysms (AAA)



What is AAA? + Have you been diagnosed with AAA? + Is someone you care about at-risk?



▶ What is AAA?

Abdominal Aortic Aneurysm: A blood-filled bulge or ballooning of a weakened area of the abdominal aorta, the artery that carries blood away from the heart to the lower part of the body.

As the bulge grows over time, the wall of the aorta becomes weaker. This may cause the aorta to rupture and lead to severe pain and massive internal bleeding. A ruptured aneurysm can cause death and needs immediate medical attention. Unfortunately, most patients with a ruptured aneurysm do not survive emergency treatment.

Get the AAA facts.

What are the symptoms?

Most people with AAA do not experience symptoms. That's because the aneurysm grows slowly and can rupture without warning. In fact, AAA is most often discovered during an examination for other unrelated health reasons. Individuals who do experience symptoms may describe them as:

- A pulsing feeling in the abdomen
- Unexplained, severe pain in the lower back
- Tenderness in the chest

How is it detected?

Fortunately, most AAA can be detected through a screening. The screening test is quick and painless, involving a simple ultrasound of the abdomen, similar to a pregnancy ultrasound. This procedure takes just a few minutes, and the images produced help doctors "see" inside to determine if an AAA is present. These exams also measure the size of the AAA, a key step in identifying the best treatment option.

Who is eligible for screening?

Hundreds of thousands of Americans who receive Medicare benefits now have access to an important tool — a free, noninvasive, ultrasound screening for AAA. In order to be reimbursed, the screening must be completed within the first twelve months of entering Medicare, as part of the Welcome to Medicare physical. Eligible participants include:

- Men who have smoked at least 100 cigarettes
- Men and women with a family history of AAA

All recently eligible Medicare beneficiaries are encouraged to talk to their doctors about this important screening. Individuals that do not qualify for coverage under Medicare, should check with their insurance company regarding coverage for this exam.

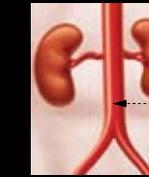
What are the causes?

In most cases, the exact causes of AAA are unknown. However, there are many risk factors that increase the chance of developing AAA, including:

- Age: individual over the age of 60
- Gender: five to ten times more common in men than women²
- History of smoking
- Family history of AAA
- Clogged arteries
- High blood pressure
- High cholesterol

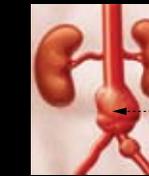
+ By understanding the risk factors, you can be prepared to take action! If you, or a loved one, are at risk, speak with your doctor about a simple screening test.

AAA Disease Progression^{3,6}



The aorta is the largest blood vessel. It carries blood from the heart to vital organs throughout the body.

Normal Aorta



AAA disease weakens the vessel until it bulges like a balloon. This bulge is called an aneurysm.

Aorta with Large Abdominal Aneurysm



If left undetected and untreated, large aneurysms can rupture, leading to massive bleeding, and in some cases, sudden death. Only 10% to 25% of patients with a ruptured AAA – that was previously undiagnosed – survive until hospital discharge.

My Dad was diagnosed with a AAA in 2007.

We were all shocked at his diagnosis as he had no prior symptoms. Like a lot of families, we were unfamiliar with AAA and the risk factors. My dad was at-risk. He was a smoker for 25 years, had many heart-related issues and was over 60.

My family was lucky. Doctors found my Dad's AAA through an ultra-sound, and were able to repair the aneurysm before it ruptured. Today, he's doing great! Because of my family history, I'm also at-risk. So I got screened. Find out if you, or some-one you know, might be at-risk at www.FindtheAAAnswers.org.



- Joe Theismann



Can AAA be treated?

If detected prior to a rupture, AAAs can be successfully treated 95% of the time.²

A vascular specialist will determine the best course of treatment depending on the size and shape of the aneurysm and other medical conditions.

One of the following may be recommended:

“Watchful Waiting”

If the aneurysm is small, a doctor may decide to wait and watch carefully to see if there are any changes. In this method, patients are monitored every 6–12 months for changes

in the size of the aneurysm. In addition, a doctor may suggest lifestyle changes such as quitting smoking, lowering blood pressure, modifying diet or increasing daily exercise.

Open Surgical Repair

Through an abdominal incision, a surgeon replaces the section of the aorta where the aneurysm has formed with a synthetic fabric tube, or “graft”. Open surgical repair is

performed under general anesthesia, usually taking 3–4 hours and may require a hospital stay of 7–10 days.

Endovascular Stent Grafting

This is a less-invasive alternative to surgical repair, because the procedure occurs without surgical opening of the aorta. Instead, the surgeon places a synthetic fabric tube (graft)

supported by a metal scaffold (stent) inside the aneurysm. Because endovascular aneurysm repair is less invasive than open surgery, hospital stays can be shorter (typically lasting 2–4 days).

Take Action.

If you, or someone you know, are at risk for AAA, it's important to discuss diagnosis, screening, and treatment options with a doctor. Here are some questions to start:

- 1 What is AAA?
- 2 Am I at risk?
- 3 Should I be screened?
- 4 How often should I be screened?
- 5 Where can I receive a screening?
- 6 How do I prepare for a screening?
- 7 Does my insurance cover this exam?
- 8 What will I experience during the procedure?
- 9 What should I do if my screening indicates an abnormality?
- 10 Is there anything that I can do to prevent AAA?

Learn More.

For additional information about AAA, please visit the following websites:

- ➔ Find the AAAnswers Campaign
www.FindtheAAAnswers.org
- ➔ Society for Vascular Surgery
www.vascularweb.org/patients/NorthPoint/Abdominal_Aortic_Aneurysm
- ➔ Vascular Disease Foundation
www.vdf.org/diseaseinfo/aaa



The goal of the Find the AAAnswers campaign is to deliver the “answers” needed to drive improvements in AAA screening.

The orange suspenders, seen throughout the Find the AAAnswers campaign, represent a symbol of the Coalition’s commitment to raising awareness of and screening for abdominal aortic aneurysm (AAA). The signature orange suspenders, which resemble the shape of an aorta and frame the abdomen, call attention to the importance of knowing the risks of and getting screened for AAA.

Find the AAAnswers is a multi-faceted, public education campaign designed to increase awareness and understanding among consumers, referring physicians, legislators and policy makers about the seriousness of AAA, and drive at-risk individuals to be screened.

The campaign is sponsored by Medtronic and supported by the Find the AAAnswers Coalition, an alliance of concerned physician societies that have come together to provide information about AAA and improve the number of at-risk individuals that get screened.

Coalition Members include:



References:

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- ² Vascular Disease Foundation. AAA: Risk Factors. <http://www.vdf.org/diseaseinfo/aaa/riskfactors.php>. Accessed August 3, 2009.
- ³ Mealy K, Salman A. The true incidence of ruptured abdominal aortic aneurysms. *Eur J Vasc Surg* 1988;2:405-8.
- ⁴ Johansen K, Kohler TR, Nicholls SC, et al. Ruptured abdominal aortic aneurysm: the Harborview experience. *J Vasc Surg* 1991;13:240-5; discussion 245-7.
- ⁵ Heikkinen M, Salenius J, Zeitlin R, et al. The fate of AAA patients referred electively to vascular surgical unit. *Scand J Surg* 2002;91:345-52.
- ⁶ Brown PM, Pattenden R, Vernooy C, Zelt DT, Gutelius JR. Selective management of abdominal aortic aneurysms in a prospective measurement program. *J Vasc Surg*. 1996;23:213–220.