

## Screening for abdominal aortic aneurysm

<b>Clinical question</b>	How effective is ultrasound screening for abdominal aortic aneurysm (AAA)?
<b>Bottom line</b>	Ultrasound screening, followed by appropriate management, significantly reduced deaths from AAA in men aged 65 to 79 years (NNS *322 to 1312). There was insufficient evidence to demonstrate benefit in women. The costeffectiveness of a coordinated population-based screening programme may be acceptable but this needs further expert analysis. *NNS = <i>number needed to screen to prevent a death from AAA</i>
<b>Caveat</b>	The incidence of AAA in women is lower than for men. All-case mortality was not significantly different between screened and unscreened groups three to five years after screening, which is to be expected given the relative infrequency of AAA as a cause of death. The “high NNS” is similar to other screening procedures.
<b>Context</b>	AAA is found in 5-10% of men aged 65 to 79 years. The major complication is rupture, which has a mortality of 80% for patients reaching hospital, and 50% for those undergoing surgery for emergency repair. Currently elective surgical repair is recommended for aneurysms discovered to be larger than 5.5 cm to prevent rupture.
<b>Cochrane Systematic Review</b>	Cosford PA, Leng GC. Screening for abdominal aortic aneurysm. <i>Cochrane Database of Systematic Reviews</i> 2007, Issue 2. Art. No.: CD002945. DOI: 10.1002/14651858.CD002945.pub2. This review contains 4 trials involving 127,891 men and 9,342 women.
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