Abdominal Aortic Aneursym (AAA)

About 15,000 Americans die each year from ruptured abdominal aortic aneurysms (AAA). Ruptured AAA is the 10th leading cause of death in men over age 50 in the United States.

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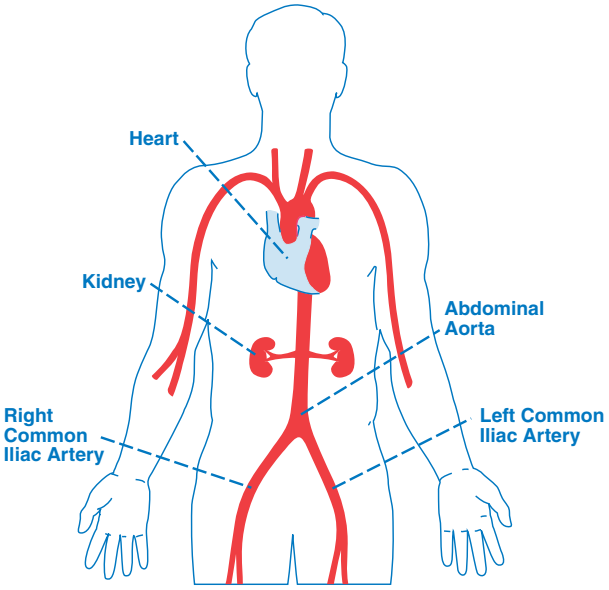
What is an Abdominal Aortic Aneurysm?

An aortic aneurysm is the weakening and enlargement of the aortic wall, which if left untreated can lead to rupture and death. Plaque build-up (atheroscierosis) in the aortic artery can lead to a weakening of the wall. The arterial wall becomes damaged and loses the normal inner lining. The damaged area of artery can be stretched or "ballooned" from the pressure of blood flow inside the artery, resulting in an aneurysm.

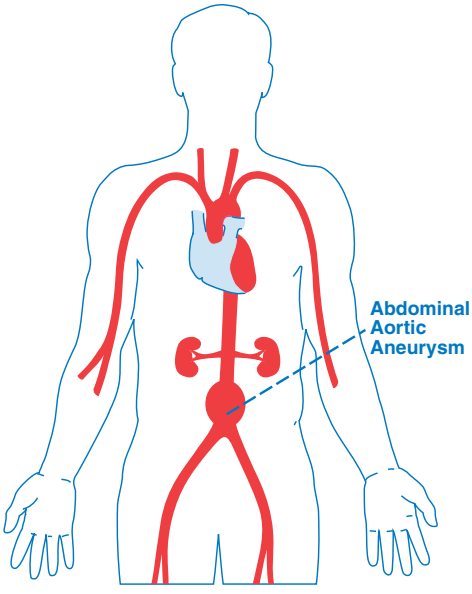
Risk factors for aneurysm disease, which increase with age, include:

- smoking: smokers are eight times more likely to develop an aneurysms than non-smokers
- atherosclerosis (the build up of fatty deposits in the artery)
- high blood pressure
- diabetes
- high cholesterol
- overweight or obesity
- gender: Men are 5 to 10 times more likely than women to have AAA
- age: AAA's occur more often in people between the ages of 60 to 80
- having an immediate relative, such as a mother or brother, who has had an aneurysm
- inflammation or infection of the artery wall (vasculitis)
- certain diseases, such as Marfan syndrome, can weaken the wall of the aorta



What are the symptoms of AAA?

Most abdominal aortic aneurysms produce no symptoms. They are often discovered when abdominal ultrasounds and/or CAT scan studies are ordered for other conditions. When they produce symptoms, the most common symptom is pain. It is felt most prominently as a deep pain in the lower back region and lower abdomen. The pain is usually steady but may be relieved by changing position. The person may also become aware of an abnormally prominent abdominal pulsation.



How is AAA diagnosed?

An ultrasound assesses the aorta for a bulge caused by a weakening or damage of the abdominal aorta. An ultrasound test uses high-frequency sound waves to produce images of the organs and structures of the body. An ultrasound usually gives a clear picture of the size of an aneurysm.

What can I do if I have an abdominal aortic aneurysm?

The goal of any treatment is to avoid aneurysm rupture. Treatment options depend on the size of the aneurysm, the speed of growth, and a person's overall health. For large or fast-growing aneurysms, treatment may require traditional surgery to remove the aneurysm or place an artificial graft inside the damage artery. A less invasive repair where a tube or stent, is placed in the aneurysm, that allows blood to flow and reduces the pressure in the aneurysm to keep it from bursting. The physician will decide which procedure is best in each situation.

Patients with aneurysm smaller than 5 cm generally are not surgical candidates. In these cases medical treatment to prevent aneurysm expansion and rupture includes:

- Stop smoking
- Control high blood pressure
- Control diabetes
- Lower high blood cholesterol
- Visit with your doctor regarding medication called beta blockers which has been shown to slow the rate of aneurysm expansion
- Monitor the aneurysm size with ultrasound or CAT scan every 6 to 12 months (sooner in high risk patients)