



<b>Title</b>	<b>Screening for Abdominal Aortic Aneurysm</b>
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## Aim

To assess the scientific evidence with reference to the following questions:

- Can screening reduce the risk for mortality from abdominal aortic aneurysm?
- Is screening for abdominal aortic aneurysm a cost-effective strategy?
- Is screening for abdominal aortic aneurysm ethically defensible?

## Conclusions and results

Aneurysm of the abdominal aorta is common in older men. An aortic diameter of 30 millimeters or more is defined as an abdominal aortic aneurysm. As an aneurysm becomes larger, the risk for rupture increases, often with fatal consequences. Screening to detect the condition at an early stage is one approach toward reducing mortality from abdominal aortic aneurysm.

- Screening for abdominal aortic aneurysm leads to reduced mortality related to abdominal aortic aneurysm in men (Evidence Grade 1). The method is cost effective (Evidence Grade 1).
- Scientific evidence is insufficient as regards the effects of screening for abdominal aortic aneurysm in women.
- Screening for abdominal aortic aneurysm is ethically defensible, provided that the screening programs are designed to satisfy fundamental ethical principles and that the information given in conjunction with the initial examination and follow-up is objective and easily understood.

## Recommendations

No recommendations.

## Methods

A systematic literature search was conducted primarily via electronic databases (PubMed and Cochrane Library) until June 2008. For inclusion in the systematic review,

articles needed to meet predetermined criteria: the results of the studies should be relevant to the questions posed by the project, ie, have appropriate endpoints, follow-up period, and study design.

Ethical and economic implications were considered.

## Further research/reviews required

None.