

LECTURE PRESENTATION

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Screening of AAA

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When the possibility to submit the population to a screening program is considered, a series of parameters must be evaluated.

Mainly four

1) prevalence of the pathology 2) the accuracy and the invasivity of the test used for the screening 3) the effectiveness of the necessary interventions to correct the pathology and the relative cost 4) the general economic commitment. Screening for abdominal aorta aneurysm corresponds to these criteria. The prevalence is elevated if the screening is turned to a selected population: for instance the incidence of the aneurysms of the abdominal aorta with greater dimensions than 3cm in males over sixty varies from 4% to 8%; if the subjects have vascular risk factors such as smoking and hypertension, the incidence increases (from two to five times); the prevalence in the women over 60 years old is just up to the 1,5%, but if considered in the subjects with familiar history or with multiple factors of vascular risk, it increases two or three times more. Ultrasounds are extremely accurate for the identification of the aneurysms of the abdominal aorta. The effectiveness of the treatment of the aneurysms of great dimensions is widely documented: the annual incidence of breakup and death because of aneurysms of the abdominal aorta larger than 5,5cm is equal to around 16%, while the pre and post surgery mortality from aneurysms of these dimensions changes from 2% to 6%. Subjects with great aneurysms receive a definite benefit from the surgery. The identification of the "small aneurysms" moreover enables a suitable program of overseeing to continue until the possible correction. The general economic commitment is sustainable just because it is carried out with non-invasive investigations, without correlated consequences, repeatable and low cost, in contrast to the huge managerial costs of the treatment of the morbidity and the mortality correlated to the pathology.

In conclusion enough data exist to hold effective screening for the search of aneurysms of the abdominal aorta in selected populations of subjects between the ages of 60 and 75 years old and that the cost for the society can be considered sustainable.

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Reference

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