

Diagnosis and treatment of ANEURYSMS

By Daniel R Gorin, MD, RVT, FACS

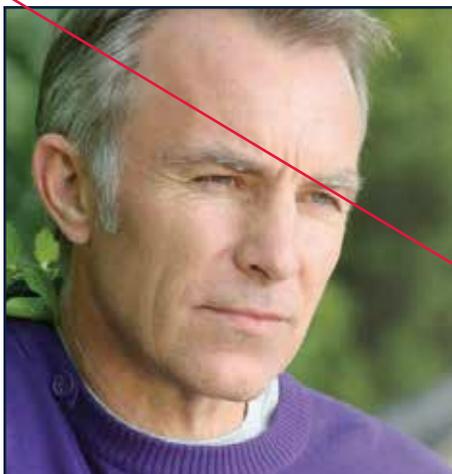
What is an aneurysm?

An aneurysm develops when a section of an artery becomes weakened. This causes the artery to balloon out, like a bubble on an inner tube. While aneurysms can happen in any artery in the body, they almost always occur in the aorta. The aorta is the largest artery in the body. It comes directly off of the heart, and loops through the chest and then heads down into the abdomen, giving off branches to the intestines and kidneys. At the level of the belly button it divides into a "Y" and supplies the legs. Aneurysms usually form at that very bottom of the aorta, below the branches to the intestines and

above the "Y." Called Abdominal Aortic Aneurysms (AAAs), these aneurysms are commonly referred to by doctors as "Triple A's."

Are AAAs dangerous?

AAAs are dangerous because they can burst, or rupture. This can cause a patient to bleed to death. Aneurysms are the 13th leading cause of death in the United States. Aneurysms are more likely to rupture when they are large. Doctors measure aneurysms by diameter, the same way a plumber measures a pipe. Aneurysms 5 to 5.5 cm (about 3 inches) or larger in diameter are felt



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to be at risk to rupture, and should be treated. Smaller aneurysms can be safely observed, but need to be regularly checked.

Who is at risk for an aneurysm?

Aneurysms happen in patients with a history of hardening of the arteries. This is the same disease that causes heart attacks and strokes. Smokers are also more likely to develop aneurysms. Patients with a family history of aneurysms are at increased risk to develop one as well. Aneurysms are twice as common in men as compared to women, and the incidence of the disease increases with age, with most patients presenting in their 70s and 80s.

How can I tell if I have an AAA?

AAAs are easily diagnosed with an ultrasound of the abdomen. Your doctor may recommend an ultrasound if

you are over 60, and have any of the risk factors for developing an aneurysm. They may also order an ultrasound if they feel an enlarged aorta on abdominal exam.

Can I prevent aneurysms?

The most important thing a patient can do to prevent an aneurysm is to quit smoking. While there are no medications, special diet programs or exercise plans that have been shown to prevent aneurysms, it is still very beneficial to practice good cardiovascular health. This includes regular exercise, a healthy diet and routine checkups with your physician.

How are AAAs treated?

Aneurysms under 5 cm in size do not require surgery, and are managed with regular ultrasound checks once or twice a year. Larger aneurysms require surgery. Traditionally this involved an

operation through a large incision in the abdomen, in which the weakened part of the artery was replaced with a fabric, tube-shaped graft. Now most aneurysms are repaired with a less invasive procedure, called an Endovascular Aneurysm Repair (EVAR). This involves placing a stent-graft (a metal stent, or wire tube, covered with fabric) into the aneurysm under X-Ray guidance. The procedure is done through small incisions in the groin, and has a much shorter recovery time than traditional surgery. +



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