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PREVALENCE OF ABDOMINAL AORTIC ANEURYSM IN POPULATION – IS THERE A NEED FOR SCREENING ULTRASONOGRAPHY?

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Introduction. Abdominal aortic aneurysm (AAA) is the most common true arterial aneurysm, defined as focal dilation of the abdominal aorta that is 50% greater than the normal aortic diameter. Most patients with AAA have no symptoms. The rupture rate is substantial in patients with AAA of at least 55 mm diameter and increases with larger diameter. Overall mortality rate of ruptured AAA is approximately 90%. Repairing AAA before the onset of symptoms is the most effective way to prevent sudden rupture. By definition, a screening program is a prophylactic examination carried out among people who do not have the symptoms of a given disease in order to detect it and provide early treatment, which prevents serious consequences of the disease in the future.

Aim: The objective of the study was to assess the prevalence of abdominal aortic aneurysm and iliac artery aneurysms. Secondary aim is an attempt to justify the need for widespread screening for aneurysms in asymptomatic patients at a certain age.

Material and methods. Data of 383 patients was obtained during screening ultrasonography examination. People with specific risk factors, aged 65 and over were invited for a free ultrasound examination. Registration was carried out by telephone and after checking the required conditions, qualification and appointment was performed.

Results and discussion. AAA appeared to occur in 15 patients (3,9%) including 2 women. One patient had aneurysm with a diameter above 5,5 cm (which constitute considerable risk of rupture). Statistical analysis was performed in order to reveal correlation between age, body weight, concomitant cardiovascular diseases, smoking, presence of other risk factors and occurrence of aneurysm.

Conclusions. Screening for abdominal aortic aneurysm is not yet established as continuous screening program as it is for cervical cancer, breast cancer or colon cancer. Although it may be seen significant to perform screening for AAA in patients, in particular men, over the age of 65 who smoke and are at risk of cardiovascular diseases. Moreover, there is a need for widespread of knowledge among family doctors about risk factors and early detection of aortic aneurysms.