

Shared Decision Making - abdominal aortic aneurysm (AAA)

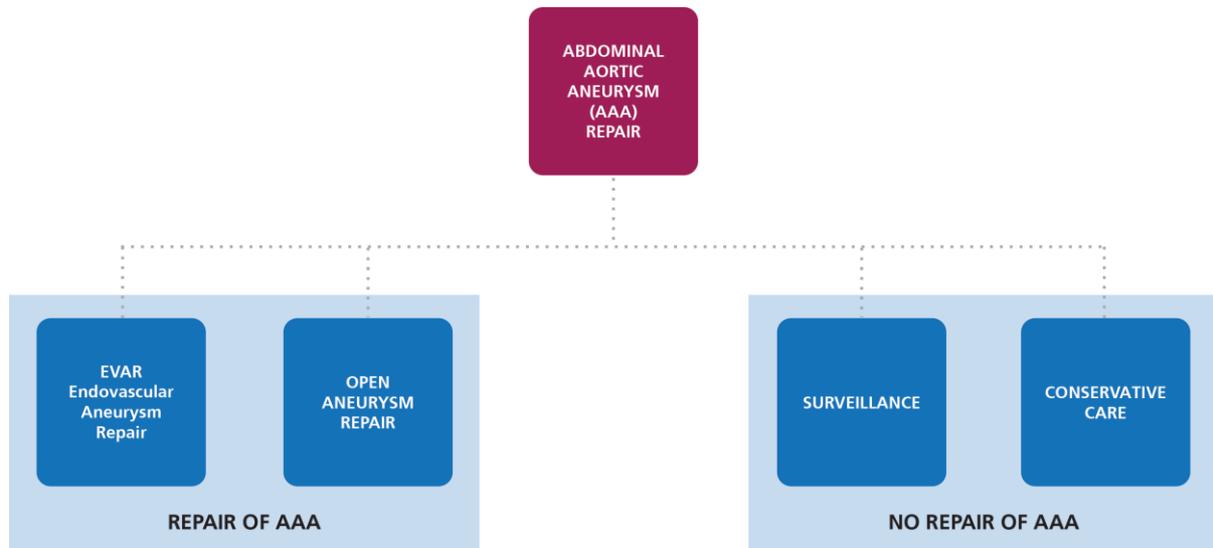
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Deciding what to do about an abdominal aortic aneurysm (AAA)

This short decision aid is to help you decide what to do about an abdominal aortic aneurysm. You can use it on your own, or with your doctor, to help you make a decision about what's right for you at this time.

There are four main treatment options if you have an abdominal aortic aneurysm. The choices are:

- Endovascular repair of aneurysm
- Open surgical repair of aneurysm
- Surveillance by ultrasound
- Conservative Care



What are my options?

	Open Aneurysm Repair	Endovascular Aneurysm Repair	Surveillance	Conservative Care
What is the treatment?	This is an operation that stitches a piece of material, called a graft, inside your artery, to strengthen the artery at the point of the aneurysm and reduce the chance of it rupturing. It is done through a large cut in your abdomen. In some hospitals, this can be done by laparoscopic repair, using a tiny camera and small instruments to operate through smaller cuts.	This is an operation that places an artificial piece of artery, called a stent, inside your artery, to strengthen the artery at the point of the aneurysm and reduce the chance of it rupturing. It is done through small cuts in your groin to access your arteries.	This involves having regular scans to check your aneurysm, to see if it is getting larger. This can help you decide whether eventually to have surgery. You can also consider making lifestyle changes or taking medicines. These may help to reduce the chance of the aneurysm expanding, which may lower the risk of rupture.	You may make lifestyle changes or take medicines to reduce the chance of the aneurysm expanding or rupturing. But you choose not to have surgery or further scans of your aneurysm.

Choose an item.

	Open Aneurysm Repair	Endovascular Aneurysm Repair	Surveillance	Conservative Care
What are the risks from the treatment?	All operations have the risk of complications. Around 2 in 100 people die during surgery or in the 30 days after surgery.[23] Other risks include the chance of kidney failure, problems with your bowels, leg pain, and difficulty getting an erection or having sex. Most problems happen during or soon after surgery.	All operations have the risk of complications. Nearly 2 in 100 people die during surgery or in the 30 days after surgery. [23] [24] Other risks include blood leaks around the graft, which may cause the aneurysm to continue to grow and rupture. The graft may also move, become blocked, break down or become infected. Problems with your graft can occur soon after surgery or long after.	The ultrasound scans used in surveillance, don't cause any side effects. You may get side effects from any medicines you take to help slow your aneurysm growth. Aspirin can cause heartburn and bleeding.[25] Possible side effects from statins include liver problems, muscle pain, sleep problems, headaches, and stomach upsets. [25] Side effects from blood pressure drugs vary according to which drug you take.	You may get side effects from any medicines you take to help slow your aneurysm growth. Aspirin can cause heartburn and bleeding.[25] Possible side effects from statins include liver problems, muscle pain, sleep problems, headaches, and stomach upsets. [25] Side effects from blood pressure drugs vary according to which drug you take.

Choose an item.

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What time do you spend in hospital or on treatment?	People spend around seven days in hospital after open repair.[26] A full recovery often takes between three and six months.[27] However, people vary in how they respond. Some people will recover more quickly and others will need more time.	People spend around three days in hospital after endovascular repair. [26] Most are back to their normal activities within six weeks.[28] But people vary in how they respond. Some people will recover more quickly and others will need more time.	The size of your aneurysm and individual circumstances will help decide how often you have an ultrasound scan. While having surveillance, you may decide to make lifestyle changes or take treatments to help slow the growth of your aneurysm.	You don't have surgery or regular ultrasound scans to check on your aneurysm. You may decide to make lifestyle changes or take treatments to help slow the growth of your aneurysm.

	Open Aneurysm Repair	Endovascular Aneurysm Repair	Surveillance	Conservative Care
What is the effect on the risk of rupture?	Ruptures after open surgery are not common. In a group of almost 600 people, none of the people who had open repair had a rupture during five years following surgery. [29]	About 3 in 100 people have a rupture within five years of having endovascular aneurysm repair surgery.[29]	Your risk of rupture is likely to increase while you have surveillance. The larger your aneurysm becomes, the more likely it is to rupture. Within a year, up to 15 in 100 aneurysms measuring 5.5 to 6 centimetres will rupture. For aneurysms measuring 8 centimetres and over, up to 50 in 100 will rupture in a year.[30] Some people having surveillance eventually decide to have surgery to repair their aneurysm. This reduces their risk of having a rupture.	Your risk of rupture is likely to increase. The larger your aneurysm becomes, the more likely it is to rupture. Within a year, up to 15 in 100 aneurysms measuring 5.5 to 6 centimetres will rupture. For aneurysms measuring 8 centimetres and over, up to 50 in 100 will rupture in a year.[30]

Choose an item.

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What is the effect on the length of life?	Open repair can help you live longer by preventing your aneurysm from rupturing. Around 70 in 100 people are still alive six years after open surgery for a large aneurysm.[31]	Endovascular repair can help you live longer by preventing your aneurysm from rupturing. Around 70 in 100 people are still alive six years after endovascular surgery for a large aneurysm.[31]	Around 20 in 100 people are still alive after five years if they don't have surgery to repair an aneurysm that's larger than 5 centimetres. [32] Some people having surveillance eventually decide to have surgery to repair their aneurysm. This reduces their risk of dying, by lowering their chance of having a rupture.	Around 20 in 100 people are still alive after five years if they don't have surgery to repair an aneurysm that's larger than 5 centimetres.[32]

	Open Aneurysm Repair	Endovascular Aneurysm Repair	Surveillance	Conservative Care
What is the effect on your quality of life?	You will probably have a large decline in your normal activities and what you can do physically and socially within three weeks of surgery. Within six weeks, you will probably still feel limited in these areas.[33] You may be back to your normal activities after three to six months, although people vary in how long they take to recover.[27] If you have complications from your operation, recovery may take longer. People tend to rate their mental health more highly after surgery than before. This includes their level	You will probably have a decline in your normal activities and what you can do physically and socially within three weeks of surgery. Within six weeks, you should be mostly back to your normal activities, although people vary in how long they take to recover. [33] If you have complications from your operation, recovery may take longer. People tend to rate their mental health more highly after surgery than before. This includes their level of distress and sense of wellbeing. [33][34]	There is not much information on how surveillance might affect your quality of life.	There is not much information on how conservative care might affect your quality of life.

Choose an item.

	of distress and sense of wellbeing. [33][34]			
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What is the effect of the treatment on your life?	You won't need regular scans to check on your graft and aneurysm after open repair. However, you will usually have a follow-up appointment to monitor your recovery. Your doctor can help you ease back into a more active lifestyle and advise you on when you are fit enough to return to work.	After you recover from surgery, you will need scans to check on your aneurysm and graft for the rest of your life. You will probably have a scan six weeks, six months, and a year after surgery, and then annually after that.[35]	You will need to schedule regular scans to check on your aneurysm. If you don't live near the location of your appointments, you will have to factor in travel time. If you've decided to make lifestyle changes or take treatments to help slow your aneurysm growth, these will need to be worked into your daily routine. This could involve taking tablets daily, exercising regularly, changing what you eat, and having counselling or other treatments to help you quit smoking.	If you've decided to make lifestyle changes or take treatments to help slow your aneurysm growth, these will need to be worked into your daily routine. This could involve taking tablets daily, exercising regularly, changing what you eat, and having counselling or other treatments to help you quit smoking.

Choose an item.

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What is the effect on what you can do?	You may find it easier to get travel insurance after your aneurysm is repaired. If your aneurysm is 6.5 centimetres or larger, you can legally drive again after having your aneurysm repaired.[36]	You may find it easier to get travel insurance after your aneurysm is repaired. If your aneurysm is 6.5 centimetres or larger, you can legally drive again after having your aneurysm repaired.[36]	You won't be able to drive if your aneurysm is 6.5 centimetres or larger.[36] Travel insurers are sometimes reluctant to insure people with an aneurysm that hasn't been repaired.	You won't be able to drive if your aneurysm is 6.5 centimetres or larger.[36] Travel insurers are sometimes reluctant to insure people with an aneurysm that hasn't been repaired.

What are the pros and cons of each option?

People with an abdominal aortic aneurysm have different experiences about the health problem and views on treatment. Choosing the treatment option that is best for the patient means considering how the consequences of each treatment option will affect their life.

Here are some questions people may want to consider about repair for abdominal aortic aneurysm:

- Do they want a treatment that will help them live as long as possible?
- Are they willing to spend time in hospital, or having treatment?
- Are they willing to take the risk of complications from treatment?
- Are they willing to live with the risk of their aneurysm rupturing?
- Are they willing to have further treatment in future?

How do I get support to help me make a decision that is right for me?

People using this type of information say they understand the health problem and treatment choices more clearly, and why one treatment is better for them than another. They also say they can talk more confidently about their reasons for liking or not liking an option with health professionals, friends and family.

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Choose an item.

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