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Wolters Kluwer

Patient education: Abdominal aortic aneurysm (The Basics)

[Written by the doctors and editors at UpToDate](#)

What is an abdominal aortic aneurysm?

An "abdominal aortic aneurysm" is a problem in the aorta, the main blood vessel that comes out of the heart. Blood flows through the aorta to the rest of the body. The "abdominal aorta" is the part of the aorta that is located in the belly. It branches to supply blood to the organs in the belly and the legs. In people with an abdominal aortic aneurysm, also known as an "AAA," a part of the abdominal aorta balloons out or bulges ([figure 1](#)). If the bulge bursts, the condition becomes very dangerous. A burst aorta causes lots of internal bleeding.

What are the symptoms of an AAA?

Most people with abdominal AAAs have no symptoms. When symptoms do occur, they can include:

- Pain in the belly or back
- A small lump in the upper part of the belly that pulses, meaning it swells and shrinks in rhythm with the heartbeat (doctors notice this more often than patients do)

AAAs can burst with no warning. Doctors suggest you get tested if there is a high risk that you might have the condition.

Who is most likely to get an AAA?

Your risk for having an AAA goes up if you:

- Smoke
- Are a man
- Are older than 60 (with every year of life after that, your risk goes up even more)
- Are white

- Have family members who have had the condition
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Can AAAs be prevented?

No. But you can greatly reduce your risk by not smoking. If you have high blood pressure, it is also important to control your blood pressure.

Is there a test for AAAs?

Yes. The most common test is called an "abdominal ultrasound." For this test, your doctor will pass a tool called a "probe" over your belly. The probe uses sound waves to make a picture of your aorta. The picture can show if you have an AAA or some other problem. Your doctor might also want to press on your belly to feel for anything unusual.

How are AAAs treated?

That depends on how big the AAA is. Some people need a procedure to repair it. Others do not.

You might not need to have your AAA repaired right away if it is small, or if it is not getting bigger quickly.

What if I have an AAA but don't need a procedure?

Your doctor will suggest that you:

- Get regular tests to see how fast it is getting bigger – Your doctor will tell you how often you should get these tests based on the size of your AAA.
- Take medicine to control your blood pressure
- Call your doctor if you start having pain in your belly or back – Pain can be a sign that the AAA is bursting.

People who have an AAA, even a small one, are at increased risk for heart disease. Your doctor can talk to you about ways to help lower your risk. This might include improving your diet, exercising more, and quitting smoking if you smoke.

When should AAAs be repaired?

Repair is the best treatment if your AAA is at a higher risk of bursting, which is more common if:

- Your AAA is causing any symptoms
- Your AAA is bigger than 5.5 centimeters (2.2 inches) wide
- Your AAA gets more than 0.5 centimeters (0.2 inches) bigger in 6 months

How are AAAs repaired?

AAAs can be fixed in one of two ways ([figure 2](#)):

- Traditional "open" surgery – For open AAA surgery, the doctor cuts open your belly and replaces the bulging part of the aorta with a tube called a "graft." This tube is made from a special fabric, and is sewn into place. Blood can flow normally through it.
- Endovascular stent graft – To fix the AAA this way, the doctor accesses the blood vessel at the top of the thigh and inserts a folded graft. Then the doctor threads the graft up to the bulging part of the aorta and unfolds it. This type of graft does not need to be sewn into place. Blood flows through the graft.

What should I know about the two repair options?

Open surgery is a little riskier in the short term. But it fixes the AAA for good. Endovascular repair is less risky in the short term. But your doctor will need to watch you for problems that can happen afterwards. Endovascular grafts sometimes slip out of place and need to be fixed. (Fixing them usually involves a simpler procedure than the first one.) If your doctor offers you a choice between the 2 options, ask:

- What are the risks of each procedure for me?
- What kind of follow up will I need with each option?
- What is likely to happen if I do not have either treatment?

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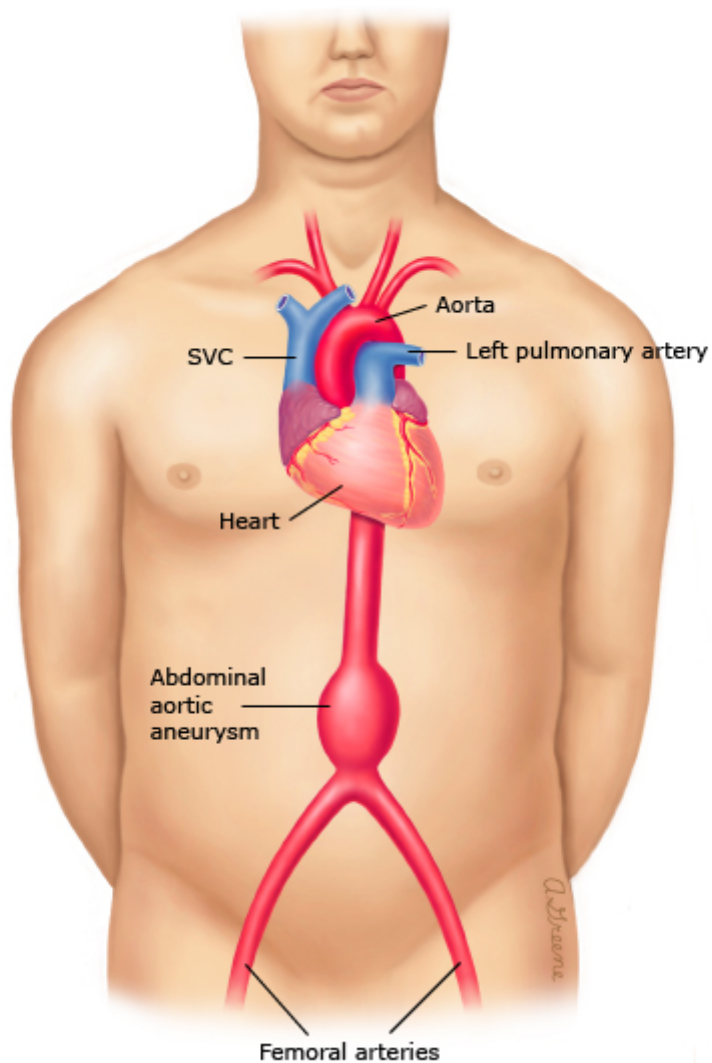
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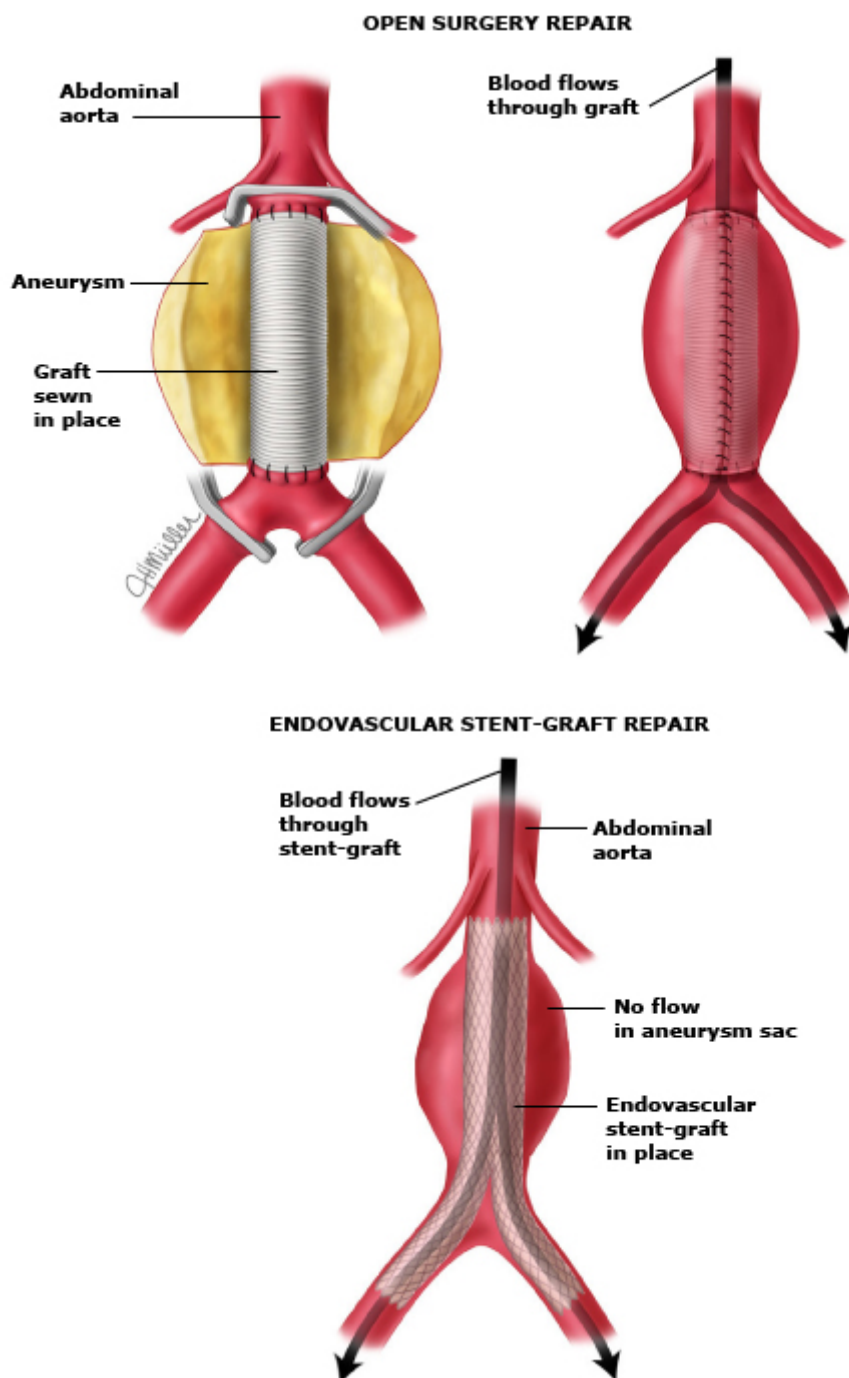
Abdominal aortic aneurysm



An abdominal aortic aneurysm (or "AAA") is a bulge or a weakening in the "abdominal aorta." The aorta is the main blood vessel that comes out of the heart. The abdominal aorta is the lower part of the aorta that supplies blood to the legs.

Graphic 52216 Version 10.0

Abdominal aortic aneurysm repair



For open surgery repair, the doctor cuts open your belly and replaces the bulging part of the aorta with a tube called a "graft." This tube is made from manmade materials. It is sewn into place. Blood can flow normally through it.

To repair the aorta with an endovascular stent graft, the doctor cuts into a blood vessel in your thigh (at the spot where your thigh meets the rest of your body) and inserts a folded graft. Then the doctor threads the graft up to the bulging part of the aorta and unfolds it. This type of graft is not sewn into place. Blood flows through the graft.

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