

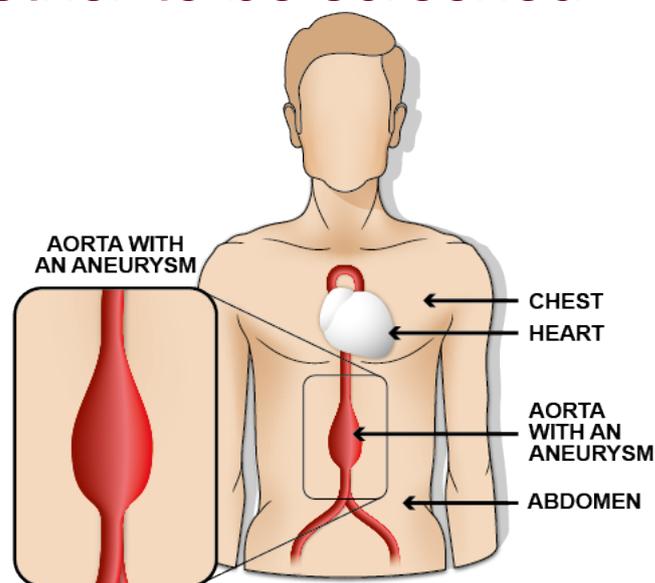
NHS Abdominal Aortic Aneurysm Screening Programme: deciding whether to be screened

This information sheet is for men aged 65 and over. It is to help you decide if you want to get screened for abdominal aortic aneurysm (AAA).

An AAA is formed when the main blood vessel in the body weakens and starts to expand. As they expand, large AAAs can burst. This is a medical emergency that is fatal in around 80 out of every 100 cases.

Men aged 65 and over are most at risk of AAA. The NHS AAA Screening Programme invites men in England for screening during the year they turn 65. Men over 65 can contact the programme to arrange to be screened.

Research shows screening should prevent around 2,000 premature deaths from ruptured AAA every year through early detection, appropriate monitoring and treatment.



Your choice

Screening is a choice. There are 2 options for men aged 65 and over. You can:

- Attend screening**
- Decline screening**

All screening involves a balance of benefits and risks. See the back of this information sheet for information about the potential benefits and risks of both options.

Here are some questions you may want to consider before deciding whether to be screened for abdominal aortic aneurysm:

Would you want to know if you had an abdominal aortic aneurysm?

Would you be willing to have major surgery if screening showed that you had a large abdominal aortic aneurysm that could be repaired?

Possible results

No aneurysm found:

About 985 out of every 1,000 men screened are reassured that no aneurysm has been found and are not offered any further tests.

Aneurysm detected:

About 15 out of every 1,000 men screened have an aneurysm and are either invited back for regular tests or given an appointment with a surgeon to discuss treatment options.

Find out more at www.nhs.uk/aaa

Potential risks and benefits of AAA screening

	Attending screening	Not attending screening
Health 	About 9 out of every 10,000 men who attend screening die due to an AAA within 10 years. The ultrasound screening test itself is completely safe and does not affect health.	About 25 out of every 10,000 men who decline screening die due to an AAA within 10 years.
Screening results 	Screening finds aneurysms early so they can be monitored or treated. About 985 out of every 1,000 men screened are reassured that no aneurysm is found and they are not offered any further tests. About 15 out of every 1,000 men screened have an aneurysm and are either invited back for regular tests or given an appointment with a surgeon to discuss treatment options.	Most people who have an aneurysm do not notice any symptoms. This means men who decline screening usually cannot tell if they have an aneurysm and avoid having to make a decision about whether to have a large aneurysm treated. They also avoid the worry that might come from learning they have a small aneurysm, even though it may never cause any problems.
Lifestyle 	About 985 out of every 1,000 men screened have a result of no aneurysm found and screening does not affect their lifestyle. About 15 out of every 1,000 men screened have an aneurysm and are offered advice on how to help stop the aneurysm getting bigger, including eating healthy foods, regular exercise and not smoking. Men with aneurysms 6.5cm wide or larger are advised to stop driving. Licences are reinstated if their aneurysms are repaired successfully.	Men who decline screening usually cannot tell if they have an aneurysm. They will not receive any advice on what they could do to help stop an aneurysm getting bigger.
Treatment 	If you have a large aneurysm detected by screening, you are likely to be offered the choice of planned surgery to repair it. More than 98 out of every 100 patients survive planned surgery to repair an aneurysm. About 1 out of every 10,000 men who attend screening will die following planned surgery to repair an aneurysm and their aneurysm may never have burst if left untreated.	If you decline screening you will probably not know you have an aneurysm unless it bursts. If an aneurysm bursts, your chances of survival are about 20 out of 100 . About 25 out of every 10,000 men who decline screening will die within 10 years as a result of an abdominal aortic aneurysm. If these men had been screened, their aneurysms may have been detected and repaired successfully following planned surgery.