



Ultrasound screening women age 65y for AAA is not recommended, even if....2 but.....


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Disclosures: none

Men are screened for AAA but 1/3 ruptures are in women


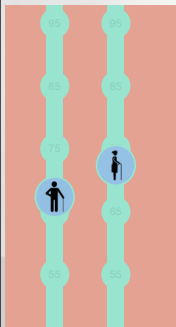


Screening Women for Aortic aneurysm 

A modelling study using best available data, published in Lancet 2018, Sweeting et al.

Interpretation By UK standards, an AAA screening programme for women, designed to be similar to that used to screen men, is unlikely to be cost-effective. Further research on the aortic diameter distribution in women and potential quality of life decrements associated with screening are needed to assess the full benefits and harms of modified options.



Focus on cost-effectiveness


women have smaller **blood vessels**

what defines an aneurysm is **poorly established**

impact of screening on quality of life is uncertain

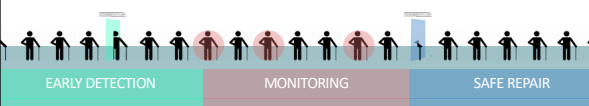
 700 INVITED	→	10 MONITORED	→	1 DEATH PREVENTED
 3,900 INVITED	→	27 MONITORED	→	1 DEATH PREVENTED

Screen at 70y, diagnose at 2.5 cm, repair at 5.5 cm – almost cost-effective




SWAN


We need better information about aneurysms in women



EARLY DETECTION MONITORING SAFE REPAIR

Who tramples on misleading information?



New different information 

Author	logRRR	logSE	Risk Ratio	RR	95%-CI	Weight
Carter 2020	0.7202	0.0082		2.05	[0.02; 2.08]	27.9%
Jahangir 2015	0.9888	0.1736		2.69	[1.91; 3.78]	9.5%
Konwar 2024	0.4393	0.3053		1.55	[0.85; 2.82]	4.0%
Singh 2001	-0.2043	0.2206		0.82	[0.55; 1.25]	6.8%
Stackelberg 2014	0.5021	0.0506		1.65	[1.50; 1.82]	24.1%
Weich 2014	0.5551	0.0143		1.74	[1.70; 1.79]	27.7%
Random effects model (M-H)				1.78	[1.32; 2.38]	100.0%
Prediction interval					[1.20; 2.63]	

Heterogeneity: $I^2 = 96\%$, $p < 0.01$

<https://doi.org/10.1101/2024.11.08.24316961>

The risk of smoking for AAA is twice as high in women
Should we screen women smokers?