

Clinician Summary of USPSTF Recommendation Screening for Abdominal Aortic Aneurysm

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What does the USPSTF recommend?



For men aged 65 to 75 years who have ever smoked

Perform 1-time screening for abdominal aortic aneurysm (AAA) with ultrasonography in men who have a history of smoking.



For men aged 65 to 75 years who have never smoked

Selectively offer screening to men who do not have a history of smoking, rather than routinely screening all men in this group.



For women who have never smoked and have no family history of AAA

Do not screen women who have never smoked and do not have a family history of AAA.



For women aged 65 to 75 years who have ever smoked or have a family history of AAA

Evidence is insufficient to assess the balance of benefits and harms of screening for AAA with ultrasonography in women aged 65 to 75 years who have ever smoked or have a family history of AAA.



To whom does this recommendation apply?

Asymptomatic adults



What's new?

This recommendation is consistent with the 2014 USPSTF recommendation. Family history (first-degree relative) of AAA has been added as a risk factor for screening decisions in women.



How to implement this recommendation?

Assess risk. Risk factors for AAA include older age, male sex, smoking, and having a first-degree relative with an AAA. The recommendation varies based on a patient's sex, age, and smoking history. "Ever smoker" is commonly defined as smoking 100 or more cigarettes.

Screen. Abdominal duplex ultrasonography is the standard approach for AAA screening.

- a. Screen men aged 65 to 75 years who have ever smoked.
- b. Selectively offer screening to men aged 65 to 75 years who have never smoked. Evidence shows that the overall benefit for screening all men in this group is small. To determine whether this service is appropriate, patients and clinicians should consider the patient's medical history, family history, other risk factors, and personal values.

For those who screen positive, treatment of AAA will depend on aneurysm size, the risk of rupture, and the risk of operative mortality.

How often?

One-time screening



What are other relevant USPSTF recommendations?

The USPSTF has made recommendations on [screening for carotid artery stenosis](#) and screening for [peripheral arterial disease](#).



Where to read the full recommendation statement?

Visit the USPSTF website to read the [full recommendation statement](#). This includes more details on the rationale of the recommendation, including benefits and harms; supporting evidence; and recommendations of others.