

U.S. Preventive Services Task Force Draft Recommendation Statement on Screening for Abdominal Aortic Aneurysm

*Recommendations vary depending on sex, age,
smoking status, and family history*

WASHINGTON, D.C. – June 18, 2019 – The U.S. Preventive Services Task Force (USPSTF) today posted a draft recommendation statement and draft evidence review on screening for abdominal aortic aneurysm (AAA) in people who do not have signs or symptoms of AAA. Based on the evidence, the USPSTF recommendation on screening for AAA varies depending on sex, age, smoking status, and family history.

AAA is a bulge or “ballooning” in the wall of the main artery that carries blood from the heart to the lower part of the body. AAA often has no signs or symptoms and can burst, or rupture, without warning. This can be deadly.

The group that benefits the most from screening for AAA is men ages 65 to 75 who smoke or used to smoke. The USPSTF recommends these men be screened once, using ultrasound, to help prevent a rupture. **This is a B recommendation.**

For men ages 65 to 75 who have never smoked, the USPSTF recommends that the decision to screen be an individual one, made between the patient and the clinician. To help determine who would benefit from screening, clinicians should take into account the man’s medical history; risk factors such as heart disease, high blood pressure, and history of other aneurysms; and his personal values and preferences. **This is a C recommendation.**

“Screening for abdominal aortic aneurysms and repairing larger ones can prevent a potentially deadly rupture,” says USPSTF member Michael J. Barry, M.D. “The Task Force found that older men who are current or past smokers benefit most from screening.”

Overall, women are significantly less likely to have AAA than men. They also have a higher risk of harm from treatment of the aneurysm than men. Treatment can lead to surgeries that may be unnecessary, be harmful, and potentially cause death. As a result, the USPSTF recommends against screening for AAA in women who have never smoked and do not have a family history of AAA. **This is a D recommendation.**

For women ages 65 to 75 who are current or past smokers or have a family history of AAA, the USPSTF concludes that there is not enough evidence to recommend for or against screening for AAA. In this group, clinicians should use their judgement about who to screen. **This is an I statement.**

“More research is needed to determine the benefits and harms of screening women who have ever smoked or who have a family history of AAA,” says Task Force member Chyke A. Doubeni, M.D., M.P.H. “The evidence shows that women who have never smoked and don’t have a family history of AAA do not benefit from screening.”

Grades in this recommendation:

B: Recommended.

C: The recommendation depends on the patient’s situation.

D: Not recommended.

I: The balance of benefits and harms cannot be determined.

[Learn more here](#)

The USPSTF's draft recommendation statement and draft evidence review have been posted for public comment on the USPSTF Web site at www.uspreventiveservicestaskforce.org. Comments can be submitted from June 18, 2019, to July 15, 2019, at www.uspreventiveservicestaskforce.org/tfcomment.htm.

The USPSTF is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Barry is director of the Informed Medical Decisions Program in the Health Decision Sciences Center at Massachusetts General Hospital. He is also a professor of medicine at Harvard Medical School and a clinician at Massachusetts General Hospital.

Dr. Doubeni is the Harrison McCrea Dickson, M.D., and Clifford C. Baker, M.D., presidential professor and an associate professor of epidemiology at the University of Pennsylvania School of Medicine. He is also a senior scholar at the Center for Clinical Epidemiology and Biostatistics at the University of Pennsylvania.

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