

New Zealand Should Be Screening Men for Abdominal Aortic Aneurysm

Abdominal aortic aneurysm (AAA) is a disease in which the main artery leaving the heart balloons out and sometimes bursts, usually with fatal consequences. About one in every 25 men between the age of 65 and 74 has an AAA. It kills about 400 New Zealanders every year, most of them men. One in fifty men who reach the age of 65 will die from an AAA. Although the causes of AAA are not fully understood it is related to smoking and high cholesterol, and it tends to run in families. Maori die younger and at over twice the rate of non-Maori. Asian men are less likely to develop AAA.

International studies have shown that about half of the AAA deaths in men (over a ten year follow-up period) could be prevented by screening them once in their life between the ages of 65 and 74 years. Screening consists of a painless and relatively inexpensive abdominal ultrasound, with a repair operation performed on those found to have a life-threatening aneurysm. Those with smaller aneurysms are monitored periodically and operated on if the aneurysm grows to a dangerous size.

A large UK trial calculated that the cost per year of life saved in the first 10 years was just £7,600, and over a lifetime it may be as low as £2,300 which would make it more cost-effective than some of the other diseases currently being screened for in New Zealand. Such cost-effectiveness has not been demonstrated for screening women however, who have a lower risk of developing AAA and tend to die at an older age when they do develop it.

A national population based AAA screening programme began in England in 2009 and in Scotland it will be phased in from 2011-2013. The United States Preventive Task Force recommended AAA screening in men in 2005. Currently it is funded by Medicare and most of the major American health insurance companies either recommend it or consider it “medically necessary”.

New Zealand does not yet have a screening programme for AAA nor, to our knowledge, any plan to introduce one. We have therefore formed a group of senior medical practitioners from a variety of specialties to encourage the government to provide public funding for a national AAA screening programme. We call upon the Ministry of Health to urgently examine the case for a national publicly funded and population-based screening programme for abdominal aortic aneurysm in New Zealand, with particular attention given to finding ways to ensure high uptake by Maori men and other high needs groups.