



TREATMENT FOR VASCULAR DISEASES

Interview Booklet

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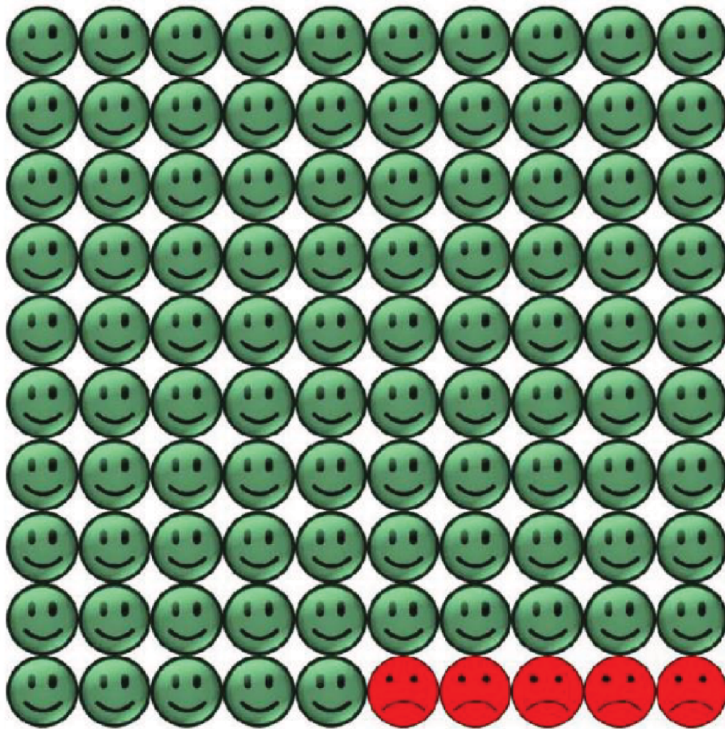


Chance of Treatment Success

If 100 people have the same treatment, for 95 people the treatment will be successful (green faces) but for 5 people the treatment will be unsuccessful (red faces). Put another way:

Chance of treatment success is 95 in 100

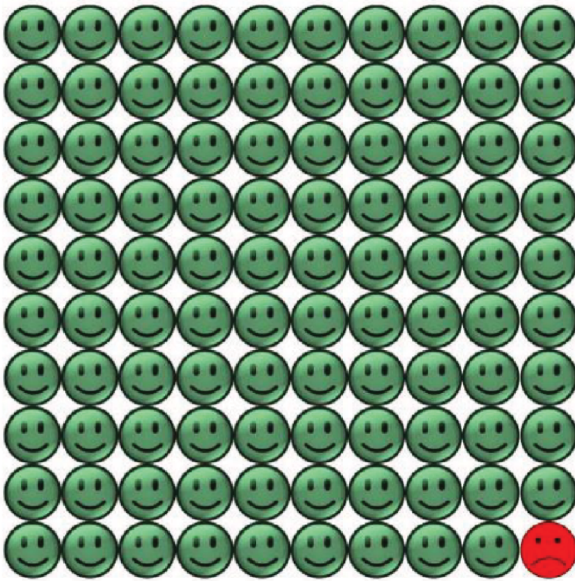
Chance of treatment failure is 5 in 100



The picture below shows a **higher** chance of treatment success.

Chance of treatment success is 99 in 100

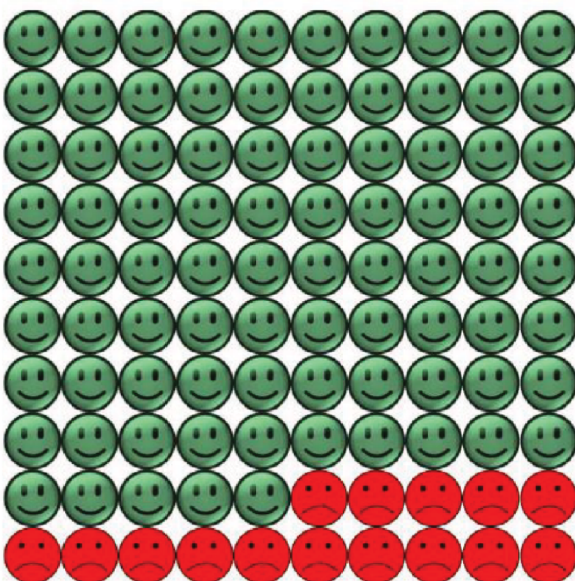
Chance of treatment failure is 1 in 100



The picture below shows a **lower** chance of treatment success.

Chance of treatment success is 85 in 100

Chance of treatment failure is 15 in 100



Health State Descriptions

Health State A - Abdominal Aortic Aneurysm (AAA)

You feel well in yourself and are experiencing no obvious symptoms of pain or discomfort. Following a scan of your tummy (abdomen), you have been told you have a swelling in the major blood vessel (artery) which carries blood from your heart through your chest and tummy. This artery is called the aorta and the swelling is called an abdominal aortic aneurysm (AAA). An AAA occurs when the artery wall is weak and the pressure of the blood flowing through it causes it to balloon out. The main concern is that because the wall of the AAA is weaker than a normal artery wall, the pressure of the blood inside it might cause it to burst (rupture). If this happens, severe internal bleeding occurs which is often fatal.

AAAs vary in size. In general, once you develop an AAA, it tends gradually to become larger. The speed at which it becomes larger varies from person to person. However, on average, an AAA tends to become larger by about 10% per year.

An AAA less than 5.5 cm wide has a low chance of rupture. Above this size the risk of rupture increases significantly.

You have been told your aneurysm is 5.5cm wide.

Health State B – Full Health

You are enjoying full health. That is, your health is the same as that of healthy people of your age.

Health State C - Dead

You are dead.

Treatment Process Description - OPEN

Within four weeks of your AAA diagnosis you will have a standard surgery, known as OPEN surgery. Your surgeon will make a large cut in your tummy (roughly 6 inches) to reach your aorta. Then your surgeon will cut open the aneurysm, and stitch a piece of fabric (also called a graft) to strengthen your aorta. When this repair is completed, the surgeon will close the large cut in your belly with stitches.

You have a general anaesthetic during the surgery, so you will be asleep and will not feel any pain.

After the surgery, you will spend around seven days in hospital, including one or two days in the intensive care unit.

While you recover, you will experience severe pain coming from the cut in your abdomen. You will be taking pain relieving tablets to manage your pain. The pain will slowly improve, but you may get twinges and aches for four to six weeks.

You will have a follow-up appointment six weeks after discharge to check on your recovery. You will not normally need any more follow-up appointments.

A full recovery often takes between three and six months and many people can return to work within six to 12 weeks after surgery.

Treatment Process Description – EVAR

Within four weeks of your AAA diagnosis you will have keyhole surgery, known as EVAR surgery. The surgeon will make a small cut in your groin at the top of your legs to reach your large blood vessels. Then the surgeon will put an artificial piece of artery, called a stent graft into your blood vessels, and use x-rays to guide the stent graft into your aorta where the aneurysm is located. When the graft is in the right place, your surgeon will attach it to the walls of the aorta to strengthen the artery at the point of the aneurysm and reduce the chance of it rupturing.

You may have a general anaesthetic during the surgery (you will be asleep), or a local anaesthetic with sedation (you will be awake during the surgery).

After the surgery, you will spend around three days in hospital. You will not spend any time in the intensive care unit unless you have a complication; this is very rare.

While you recover, the pain coming from the cut in your groin will be uncomfortable. You will be taking pain relieving tablets to manage your pain. The pain will slowly improve, but you may get twinges and aches for two to three weeks.

You will have regular follow-up appointments to scan your repaired aneurysm to make sure it is not leaking blood. Your appointments will be six weeks, six months, a year after surgery, and then once every year for the rest of your life.

Recovery from surgery is quick and most people can return to work within four to six weeks after surgery.