**WHAT IS AAA?**

An abdominal aortic aneurysm is the bulging of a weakened area of a blood vessel. The wall of the aorta can become weak due to age, disease or trauma. This may cause the aorta to rupture and lead to massive internal bleeding.

**OPEN SURGERY OR ENDOVASCULAR STENT GRATING**

**OPEN SURGERY**

In this treatment option, the doctor repairs the aorta by making a large cut in the abdomen. The aneurysm section of the aorta is removed and replaced with a fabric graft.

**ENDOVASCULAR STENT GRATING**

This is a minimally invasive procedure. A stent graft is placed inside the aneurysm without surgically opening the tissue surrounding it. Risks and benefits are associated with both treatment options. Patients should talk with their doctors about which option is best for them.

**ABDOMINAL STENT GRAFT PROCEDURE**

**BEFORE THE PROCEDURE**

Prior to the procedure, imaging tests like CT scans are performed. These tests allow the doctor to assess the aneurysm.

**DURING THE PROCEDURE**

A small cut is made on both sides of the groin to prepare for the stent grafting procedure. Fluoroscopy is used to guide the catheter through the large vessel in the patient's groin to reach the abdominal aneurysm. The stent graft is slowly released from the catheter into the aorta. As the stent graft is released, it expands to its proper size so that it snugly fits into the aorta both above and below the aneurysm. The catheter is then removed from the body. The stent graft remains inside the aorta permanently.

**RISKS**

As with any endovascular stent graft, the abdominal stent graft comes with risks. Please speak with your doctor to fully understand all of the risks. Major risks associated with abdominal endovascular stent grafts include, but are not limited to:

- Endoleaks
- Stent graft movement
- Device-related issues (for example, breaking sutures or the metal portion of the stent graft)
- Aneurysm rupture
- The use of this device requires fluoroscopy and use of dyes for imaging. Patients with kidney problems may be at risk of kidney failure due to the use of dyes.
- Swelling of the groin area
- Nausea and vomiting
- A hole or tear of the blood vessels are risks associated with any catheter-based procedure. These risks may increase with the use of large-sized catheters.

**RECOVERY**

**FOLLOW-UP**

It is important to schedule regular follow-up visits with your doctor. Most often these will occur at one month, one year, and annually thereafter. Long-term results of this stent graft have not yet been established. Most problems with endovascular repair do not have symptoms. Thus, follow-up is important to determine the success of your stent graft.

**ADDITIONAL INFO**

Additional information regarding AAA can be found at:

- [www.medlineplus.gov](http://www.medlineplus.gov)
- [www.fda.gov](http://www.fda.gov)

For a more detailed booklet, ask your doctor's office, or download at:


This guide is not a substitute for detailed discussions between you and your doctor. Only your doctor can decide if this procedure is suitable for you. This therapy is not for everyone. Please consult your doctor. Prescription is required.