

# 2<sup>ND</sup> GLOBAL HEART CONGRESS

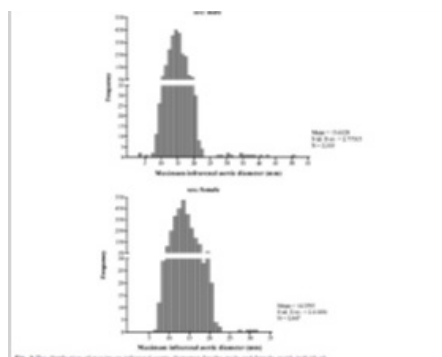
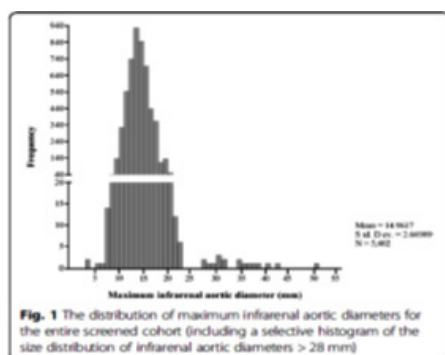
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## Primary results of abdominal aortic aneurysm screening in the at-risk residents in middle China

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There is a lack of information on the epidemiological data and risk factors associated with Abdominal Aortic Aneurysm (AAA) in Chinese population. We reported the primary results from screening five-community population in Middle China for AAA. Methods: From March 2014 to October 2015, an AAA screening program was performed in three urban and two rural communities. These communities were randomly selected. All at-risk residents (a total of 6925) aged 40 years or older were invited to attend an ultrasound scan for AAA. At-risk population was defined as having a family history of first-degree relative diagnosed with AAA; or smoking and aged 55 years or older; or having a history of CAD, cerebrovascular disease, hypercholesterolemia, obesity ( $BMI \geq 26 \text{ kg/m}^2$ ) or hypertension. Results: The study investigated 5402 subjects and the mean age of them was  $61.2 \pm 10.4$  years old. It included 2847 women aged  $62.5 \pm 10.4$  years and 2555 men aged  $59.7 \pm 10.2$  years. The mean maximum infrarenal aortic diameter (Max-IAD) was  $15.0 \pm 2.7 \text{ mm}$  (from 4.1 to 51.5 mm). Eighteen people (aged  $68.0 \pm 10.4$  years) with AAAs were detected (prevalence rate was 0.33%), and the prevalence rate in males was higher than in females (0.55% vs 0.14%, respectively,  $P = 0.009$ ). Additionally, the screened subjects aged 55 to 75 years had a higher prevalence rate of AAA than other age groups (0.51% vs 0.11%, respectively,  $P = 0.016$ ). Conclusion: Conclusion: The mean Max-IAD of the screened population in Middle China was apparently small by comparison with other reports. The result of low prevalence rate of AAA didn't support routine screening in Chinese population. The at-risk males aged 55 to 75 years should be targeted for further screening.



## Biography

Dr Li master the basic clinical theory of vascular and endovascular surgery, and knows recent hot issues and advanced state of the field. With good experiences working and training in Vascular and endovascular surgery department. From Oct 15<sup>th</sup>, 2015 to Feb 28<sup>th</sup>, 2016, He was trained as Observership in Department of Vascular Surgery, Iowa Methodist Hospital. From Mar 1<sup>st</sup> 2016-Apr 30<sup>th</sup> 2016, He was trained as visiting scholar in Department of Vascular Surgery, Cleveland Clinic.

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