Aortic aneurysms overview

NICE Pathways bring together all NICE guidance, quality standards and other NICE information on a specific topic.

NICE Pathways are interactive and designed to be used online. They are updated regularly as new NICE guidance is published. To view the latest version of this pathway see:

http://pathways.nice.org.uk/pathways/aortic-aneurysms
Pathway last updated: 14 February 2017

This document contains a single pathway diagram and uses numbering to link the boxes to the associated recommendations.

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1 Person with aortic aneurysm

No additional information

2 Abdominal aortic aneurysms

Endovascular stent–grafts

The following recommendations are from NICE technology appraisal guidance on endovascular stent–grafts for the treatment of abdominal aortic aneurysms. This guidance refers to the use of endovascular stent–grafts or open surgical repair only for the treatment of infra-renal abdominal aortic aneurysms.

Endovascular stent–grafts are recommended as a treatment option for patients with unruptured infra-renal abdominal aortic aneurysms, for whom surgical intervention (open surgical repair or endovascular aneurysm repair) is considered appropriate.

The decision on whether endovascular aneurysm repair is preferred over open surgical repair should be made jointly by the patient and their clinician after assessment of a number of factors including:

- aneurysm size and morphology
- patient age, general life expectancy and fitness for open surgery
- the short- and long-term benefits and risks of the procedures including aneurysm-related mortality and operative mortality.

Endovascular aneurysm repair should only be performed in specialist centres by clinical teams experienced in the management of abdominal aortic aneurysms. The teams should have appropriate expertise in all aspects of patient assessment and the use of endovascular aortic stent–grafts.

Endovascular aortic stent–grafts are not recommended for patients with ruptured aneurysms except in the context of research. Given the difficulties of conducting randomised controlled trials, it is recommended that data should be collected through existing registries to enable further research.

NICE has written information for the public on endovascular stent–grafts.
This guidance should be read in conjunction with NICE interventional procedures guidance on stent–graft placement in abdominal aortic aneurysm.

**Interventional procedures**

NICE has published guidance on stent–graft placement in abdominal aortic aneurysm with **normal arrangements** for consent, audit and clinical governance.

NICE has published guidance on the following procedures with **special arrangements** for consent, audit and clinical governance:

- endovascular aneurysm sealing for abdominal aortic aneurysm
- laparoscopic repair of abdominal aortic aneurysm.

### 3 Thoracic aortic aneurysms

**The E-vita open plus for treating complex aneurysms and dissections of the thoracic aorta**

The following recommendations are from NICE medical technologies guidance on **the E-vita open plus for treating complex aneurysms and dissections of the thoracic aorta**.

The case for adopting the E-vita open plus for treating complex aneurysms and dissections of the thoracic aorta, in a carefully selected group of people, is supported by the evidence.

Using the E-vita open plus could remove the need for a second procedure and the associated risk of serious complications, and it should therefore be considered for people:

- who would otherwise need a 2-stage repair procedure because their aortic disease extends into or beyond the distal part of their aortic arch (into the proximal descending aorta), but
- who would not need additional intervention (such as stent grafting) in the descending aorta.

The E-vita open plus is estimated to generate cost savings compared with current 2-stage repair from about 2 years after the procedure. The estimated cost saving per patient at 5 years after the procedure is around £13,800 when compared with 2-stage repair involving open insertion of a vascular graft, £9,850 when compared with 2-stage repair involving endovascular stent grafting and £12,000 when compared with open surgical debranching followed by endoluminal stent grafting. At 10 years after the procedure, the estimated cost savings range from around £21,850 to £28,160 across the 3 comparators.
Endovascular stent–graft placement

NICE has published interventional procedures guidance on **endovascular stent–graft placement in thoracic aortic aneurysms and dissections** with **normal arrangements** for consent, audit and clinical governance.

4 See what NICE says on patient experience

See patient-experience-in-adult-nhs-services
Sources


The E-vita open plus for treating complex aneurysms and dissections of the thoracic aorta (2013) NICE medical technologies guidance 16

Your responsibility

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