Quality Of Life In Survivors After Open And Endo repair Of Ruptured AAAs (RAAAs): It is Better After EVAR?

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Disclosure
I do not have any potential conflict of interest

SURVIVING AN AAA RUPTURE : IS THERE ANY CHANGES IN QUALITY OF LIFE ?

• The big question is why ?

• Does the type of surgery affects the QOL ?

• 63 Y old male operated for a RAAA ....

• On Routine examination after 3 months he didn’t report any problems , but ....

• His daughter was seriously worried about him because of many behavioral issues :
  - He is feeling like he’s going to die soon
  - He didn't resume his work because it is far from the hospital ....
  - HE’S NOT THE SAME GUY ..... 

• And so , it all begins ....

• Between 2012 and 2017 , and among 31 patients operated for a RAAA ,
  25 survived .

• Age between 53 and 82 , Mean age : 67 y , M/F : 24/7

• HTN : 100% of cases .

• 13 patients were diabetic ( Almost 40% ) .

• All had severe pain , and 19 were hypotensive ( 61 % ) .

• No history of anxiety disorders or clinical signs of depression ( retrospectively ) .

• The mean operating time was around 150 min .

• The hospital stay varied between 7 and 23 days .

• The ICU stay varied between 3 and 8 days .

• All patients survived the operation .

• 5 patients died in hospital ( 2 from myocardial infarction , 1 from a complicated late diagnosed colonic ischemia and 2 from severe pneumonia after 10 days ) .

• 1 patient died after 13 months .
So patients were called to a follow up and to fill a questionnaire about their QOL (WHO-QOL) * after the operation without any intervention from family members.

In the same time one close family member was called to fill the same questionnaire, and both results were compared.

If taking only the results filled by the patients, only 3/25 reported a change in their QOL and in developing anxiety disorders.

But when looking to the answers filled by a close family member the results were like it follows:
- 4 patients did not resume their work until 7 to 8 months after surgery because they were afraid to drive.
- 2 patients developed like OCD: one was doing a CT-SCAN every month for 11 months post-operatively and the other one was going to the ER for every abdominal pain !!!!!!!
- 7 patients developed like moderate depression and never went out until 3 to 4 months after surgery and still they have severe anxiety disorders and has been treated by the family physician.
- 2 patients developed severe depression and lost their work and have been treated by a psychiatrist.
- So overall, in 15/25 a change in their quality of life was reported for at least 8 months.

And we look back for patients operated for RAAAs by EVAR.
(11 patients)

Not all patients operated by the same team*

The results were in favor of EVAR for the first 3 months

For the long term > 3 months results were almost similar
• And by going into further details in both groups we tried to find a correlation between the medical condition and post operative symptoms

• Male predilection
• Diabetes
• Hypotension at presentation
• ICU stay more than 72 hours
• Age less than 70 years old
• Hemoglobin less than 10 g

Is there any proof??

The association between Diabetes mellitus and Depression
SV Bădescu, C Tătăru, [...], and I. Zăgâorean

Depression is the most common psychiatric disorder witnessed in the diabetes community.

Near-psychiatric Symptoms in Patients with Aortic Aneurysm

Mental health, anxiety, and depression in patients with cerebral aneurysm.

Quality of Life and Long-term Results After Ruptured Abdominal Aortic Aneurysm

“Mental health, anxiety, and depression in patients with cerebral aneurysm. … Depression was present in 8% of the study population and an anxiety disorder in 17%. Patients with both an unsecured aneurysm and a history of subarachnoid hemorrhage (SAH) tended toward higher anxiety scores (p = 0.086).”
IN CONCLUSION ...

• There is still many controversies concerning AAA rupture and its social and psychological effects.
• QOL appears to be affected by many FACTORS RELATED TO THE DISEASE.
• Type of surgery either OPEN or EVAR, affects QOL IN THE EARLY POST OP PERIOD.
• A close follow up by specialists is necessary for at least 6 months period post op.
• Of course we need a quiet large trial to confirm these results and to emerge recommendations.

And Finally ....

• Since QOL has an IMPACT on human dignity, Our MISSION as Surgeons is not only to treat people but to provide them also a good QOL*.

“ When you treat a disease, you can win or you can loose.
But when you treat a patient you will always win .... ”

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