Impact of work status and age when choosing mode of AAA repair


Introduction

The Preferences for Open versus endovascular repair of abdominal aortic aneurysm (PROVE-AAA) trial was a randomized trial assessing different methods to inform veterans regarding their choices for aneurysm repair.

Optimal AAA repair requires a shared decision-making process to achieve high alignment of patient goals, medical outcomes, and general satisfaction. As part of the prove AAA study, this presentation seeks to further assess preference based on a subject’s age and work status as part of a larger goal to identify factors and information sources that influenced each patient’s preference between OSR and EVAR.

Methods

- **PROVE-AAA**: 235 veterans from 23 VA
- **Qualitative analysis Method:**
  - Answers were transcribed and imported into an excel document
  - Iterative review (coding, thematic generation)
  - Data generation and analysis
  - Age and work status analysis

Source of information on EVAR and open surgery

- **Patient response:**
  - "Vascular Physician"
- **Code:** Vascular Surgeon or Professional
- **Themes:** MD(Vascular Team)

<table>
<thead>
<tr>
<th>Themes</th>
<th>Code</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>MD (Vascular team)</td>
<td></td>
<td>35 (16)</td>
</tr>
<tr>
<td>Non-MD Medical Staff</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>Personal research/experience</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Non-medical experience/advice</td>
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<td>2</td>
</tr>
<tr>
<td>Non-VA Hospital</td>
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<td>1</td>
</tr>
<tr>
<td>Wants more information</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td></td>
<td><strong>68</strong></td>
</tr>
</tbody>
</table>

**Results**

- 81% of retired veterans were over 70
- 58% of not retired (working, unemployed, and disabled) veterans were over 70
- p=.003
- 76% of retired veterans preferred EVAR (18% preferring open repair)
- Non-retired population: 50% preferred EVAR and 38% preferred open.

- The most common source of information was from their MD/vascular team
- Almost half of themes indicated a source outside of this group.
- We saw similar results for the responses to the source of EVAR information.

- PROVE AAA subjects: retired, received information from outside sources, and prefer EVAR
- However, non-retired veterans were more likely to prefer OSR than retired veterans
- We postulate: Younger, non-retired subjects value the durability and reduced need for follow-up of OSR over EVAR

Impact and relevance

- The qualitative approach of this study enables us to determine key themes that influence veteran choice in treatment of their AAA.
- In this study, we gain better insight into the themes underlying AAA repair preference in the VA patient population

LIMITATIONS

- This study is limited by the limited sample size and the self-reporting nature of the questionnaire.
- The unequal and limited sample sizes between retired and non-retired groups, precludes further statistical analysis.
- The self-reporting nature of the questionnaire increases the risk of inaccuracy and sampling and response bias.