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HEALTH

Support Gathers To Force Coverage Of Aneurysm Test

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Screening older people for dangerous bulges in their aortas has been shown to save lives and it is relatively inexpensive, but the federal Medicare insurance program doesn't pay for it.

That may change.

Eight major medical societies, along with a bipartisan group of senators and congressmen, are preparing legislation that would require Medicare to pay to screen Americans over age 65 for such rupture-prone bulges, called abdominal aortic aneurysms. The plan is to introduce legislation in April.


The screening method is a simple ultrasound, and can be gotten for as little as \$45. But because it generally isn't reimbursed by Medicare or insurers, it isn't part of most doctor visits.

Leading medical groups such as the American College of Surgeons, the American College of Radiology and the American Vascular Association have teamed up with congressional sponsors, including Sens. Christopher Dodd (D., Conn.) and Jim Bunning (R., Ky.), and Reps. Gene Green (D., Texas) and Jim Greenwood (R., Pa.). Medicare traditionally doesn't pay for screening tests at all, and an act of Congress is required to institute such screening. But Congress has in the past required the Medicare agency to pay for screening of such conditions as breast, uterine, prostate and colon cancer, as well as glaucoma and osteoporosis.

"Now, Medicare won't pay for aneurysm screening without signs and symptoms," says Dartmouth Medical School vascular-surgery professor Robert Zwolak, an organizer of the effort. "But 99% of patients don't have signs and symptoms until they begin to rupture."

Dr. Zwolak says the screening initiative was spurred by a series of articles in The Wall Street Journal. The articles, among other things, noted that medical studies

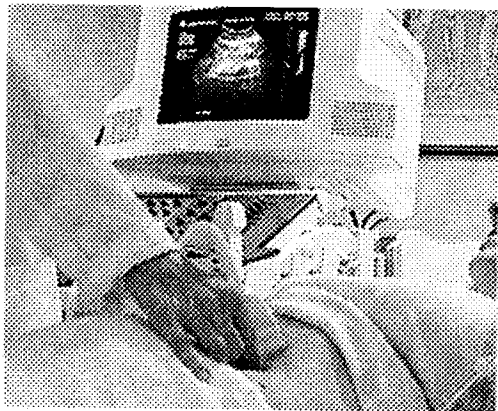
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An abdominal ultrasound screening for aneurysms.

in Europe and the U.S. have shown that aneurysm screening saves lives and is economical. The articles also pointed out that ruptures and tears in the aorta, the body's largest artery, are frequently misdiagnosed in emergency rooms and even by cardiologists and other specialists.

Experts estimate that this condition kills 25,000 or more Americans every year. They also say the real number could be higher because many people die at home of undiagnosed aneurysms. A recent autopsy study of 261 natural deaths in Australia found that 13, or 5%, were due to ruptured abdominal aortic aneurysms. And a recent screening program run by the American Vascular

Association and vascular surgeon William Flinn of the University of Maryland found aneurysms in 5% of men and 1% of women over 55 years old.

"More than half of all victims of aortic aneurysms die as a result, and those that survive will face extensive and costly rehabilitations," said Sen. Dodd. "By putting the focus on prevention of an aneurysm rather than treatment after an aneurysm, we hope to save lives and eventually costs to the Medicare program."

Rep. Greenwood's office estimates the total 10-year cost of aneurysm screening and follow-up treatment would be between \$310 million and \$620 million, while Medicare last year paid out \$274 billion in benefits.

Philip Edwards, 70 years old, of Mayfield, Ky., was in seemingly fine health when it dawned on him last month that, as a caregiver for his ailing wife, he should get screened. When he did, the ultrasound technician -- who normally sends letters to patients advising them of findings -- immediately whispered to him, "You have an aneurysm. When you leave here, go straight to your doctor." He did, and a large aneurysm was confirmed. It was 2.5 inches in diameter, almost triple the normal aortic size. Mr. Edwards sailed through surgery and is nearly fully recovered.

Various medical professional societies support Medicare screening that would cover all men beginning at 65, and all women of the same age with cardiovascular risk factors -- particularly a family history of aortic aneurysms. Bulges in the aorta are significantly more common in men than in women. Aneurysms tend to run in families. Doctors with vascular expertise actually encourage people over 60 to get screened, especially if they have high blood pressure or such family history, other artery disease, diabetes or are smokers. Of course, the Medicare insurance program kicks in only at 65.

Aortic aneurysms are treatable with surgery, or with the installation of a fabric-lined, inverted-Y-shaped device called a stent-graft.

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