Appendix E Table 7. Methodological and Intervention Characteristics of Included Treatment Studies (KQs 4 and 5)

| **Intervention** | **Study, Year** | **Quality** | **N****randomized** | **Country** | **Mean followup, years** | **Intervention** | **Control** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Open surgery vs. surveillance** | Lederle, 2002140ADAM | Good | 1,136 | United States | 4.9 | Elective open surgery within 6 weeks of AAA identification | Surveillance until AAA reached 5.5 cm, enlarged by at least 0.7 cm in 6 months/1.0 cm in 1 year, or symptoms developed |
| Powell, 2007161-163UKSAT | Good | 1,090 | United Kingdom | 12 | Elective open surgery within 3 months of AAA identification | Surveillance until AAA reached 5.5 cm, rapidly increased in diameter (>1 cm/year) or developed symptoms |
| **EVAR vs. surveillance** | Cao, 2011118CAESAR | Fair | 360 | 20 European/Western Asian hospitals | 2.6‡ | Patients received surgery via EVAR as soon as possible | Surveillance until AAA reached 5.5 cm in diameter, a rapid increase of >1 cm/year was found, or the aneurysm became symptomatic |
| Ouriel, 2010158PIVOTAL | Fair | 728 | United States | 1.7 | Patients underwent EVAR ≤30 days of randomization | Surveillance until AAA reached 5.5 cm or enlarged ≥0.5 cm between any two 6-month assessments |
| **Pharmacotherapy vs. placebo** | Bicknell, 2016114AARDVARK | Good | 227 | United Kingdom | 2 | 10 mg perindopril (IG1) or 5 mg amlodipine (IG2) daily for 2 years | Placebo |
| Hogh 2009132 | Good | 92 | Denmark | 5 | 300 mg oral roxithromycin once daily for 28 days | Placebo |
| Karlsson, 2009133 | Fair | 247 | Sweden | 1.5 | 600 mg azithromycin once daily for 3 days, followed by 600 mg once a week for 15 weeks | Placebo |
| Lindholt, 1999142║ | Fair | 54 | Denmark | 2 | 40 mg propranolol twice a day for 2 years | Placebo |
| Meijer, 2013152 | Fair | 286 | The Netherlands | 1.5 | 100 mg doxycycline daily for 18 months | Placebo |
| Mosorin, 2001153 | Fair | 32 | Finland | 1.5 | 150 mg doxycycline daily for 3 months | Placebo |
| PAT Investigators, 2002164PAT | Good | 552 | Canada | 2.5 | 20 mg propranolol twice a day; increased to 40 mg after 1 week, 80 mg after 2 weeks, and 120 mg at 4 weeks. Target dose was 80–120 mg twice a day. Patients observed for mean of 2.5 years | Placebo |
| Sillensen, 2015166AORTA | Fair | 168 | Multisite¶ | 1 | 40 mg pemirolast twice a day# for 52 weeks | Placebo |

\* No AAA-related death was found in both groups.

† This study also reported 5-year followup data on growth rate.

‡ Median.

§ Due to a large loss to followup, efficacy data were not usable. However, these losses were due to adverse events so the harms data are included.

║ This study is included for KQ5 (harms) only.

 ¶ 15 sites participated from Sweden, Denmark, and the United Kingdom.

# Study also reports 10 mg twice a day and 25 mg twice a day.

**Abbreviations:** AAA = abdominal aortic aneurysm; ADAM = Abdominal Aortic Aneurysm Detection and Management Study; AORTA: the Anti-inflammatory Oral Treatment of AAA; CAESAR = Comparison of Surveillance vs. Aortic Endografting for Small Aneurysm Repair; N = sample size; NA = not applicable; EUROSTAR = European Collaborators on Stent-Graft Techniques for aAbdominal Aortic Aneurysm Repair; PAT = Propanolol Aneurysm Trial; PIVOTAL = Positive Impact of Endovascular Options for Treating Aneurysms Early; UKSAT = UK Small Aneurysm Trial.