Appendix E Table 9. Methodological Characteristics of Included Registry Studies (KQ5)

| **Author, Year**  **Quality** | **Registry** | **Country** | **Recruitment** | **Mean Followup, years** | **Surgical Technique(s) Included** | **Population Characteristics in Patients With Small AAA** | **N (%) of Small AAA** | **Definition of Small AAA** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Budtz-Lilly, 2017116  Fair | Vascunet | International\* | Data on primary intact AAA repairs were collected from vascular registries for the time period of 2005–2013. Data on small AAA <5.5 cm available for 2010–2013 time period. It was estimated that coverage of participating registries was >90% for the majority, 80% in Norway, and 62% in Australia. | NR | EVAR, open | Mean age (range): NR  % Female: NR  % Smokers: NR | 12,610 (25.6) | <5.5 cm |
| Golledge, 2007129  Fair | ASERNIP-S | Australia | Surgeries performed from November 1999 to May 2001 were recorded in the registry. Participation by vascular surgeons was initially enforced. An audit cross checking Health Insurance Commission data found >90% of procedures were included. | 3.2 (Median) | EVAR | Mean age (range): 75 (NR)  % Female: 15.9  % Current smokers: 11.0 | 478 (49.7) | ≤5.5 cm |
| Lo, 2013149  Fair | VSGNE | US | Voluntary collaboration among vascular surgeons, cardiologists, and radiologists from 30 academic and community hospitals in New England. The data are validated periodically to ensure that all procedures are included in the registry. This publication analyzed 2003–2011 data. | 1.0 | EVAR, open | Mean age (range): 71 (NR)  % Female: 26.2  % Smokers (past or current): 88.5 | 1,336 (37.1) | <5.5 cm |
| Overbey, 2017159  Fair | ACS NSQIP | US | A nationally validated, risk- adjusted dataset comprising major surgical procedures and 30-day outcomes. Data are collected from medical charts by a trained Surgical Clinical Reviewer. This article is analysis of 2011–2015 data. | NR | EVAR, open | Mean age (range): 72.3 (NR)  % Female: 21.9  % Current smokers: 33.6 | 5,126 (51.1) | Smallest quartile: 3.5–5 cm  Second quartile: 5.01–5.5 cm |
| Peppelenbosch, 2004160  Fair | EUROSTAR | International† | 110 European institutions participate in the registry. Patient data are recorded on case record forms and submitted. Only elective treatments are tracked. This article is an analysis of 1997–2002 data. | 1.7 | EVAR | Mean age (range): 69.7 (43–94)  % Female: 7.0  % Smokers: NR | 1,962 (44.7) | 4.0–5.4 cm |

\* Eleven countries: Australia, Denmark, Hungary, Iceland, New Zealand, Norway, Sweden, Switzerland, United Kingdom, Finland (Helsinki region only), and Germany.

†Austria, Belgium, Denmark, United Kingdom, France, Germany, Greece, Israel, Italy, Luxembourg, Monaco, the Netherlands, Norway, Poland, Spain, Sweden, and Switzerland.

**Abbreviations:** AAA = abdominal aortic aneurysm; CAD = coronary artery disease; CT = computed tomography; CVD = cardiovascular disease; EUROSTAR *=* European Collaborators on Stent-Graft Techniques for Abdominal Aortic Aneurysm Repair; EVAR = endovascular aneurysm repair; MI = myocardial infarction; NR = not reported; PAT = Propranolol Aneurysm Trial; PIVOTAL *=* Positive Impact of Endovascular Options for Treating Aneurysms Early; PVD = peripheral vascular disease; US = United States.