Aim: Ruptured Abdominal Aortic aneurysms (rAAA) are a fatal vascular condition. In 2018, The Get It Right First Time Programme (GRIFT) recommended the restructuring of vascular services in England to a Hub and Spoke model where AAA repairs should be performed in higher volume centres, the hub sites. This study aims to assess the mortality rates in patients presenting at hub versus spoke sites in the Merseyside region.

Method: We conducted a retrospective review, 1st January 2017 to 31st December 2020, recognising 110 patients with a rAAA presenting to hub and spoke sites in the Merseyside Region. We determined if there was any association in mortality and the presenting site. We also assessed the mean time to theatre for both Hub and Spoke patients.

Results: 41 patients presented to Hub site and 69 patients to the spoke sites. 81% underwent operative intervention and 19% died in A+E or were palliated. 57% of those who underwent an intervention survived. Overall mortality rate in hospital was 53% (58 patients). There was no association between mortality and transfer from a spoke site (p = 0.58). The median time to theatre for Hub patients was 160 minutes from presentation and 315 minutes from Spoke sites. Time to theatre had no overall effect on mortality (p = 0.1)

Conclusions: This study indicates that the GRIFT programme does not have a negative effect on mortality irrespective of time taken to theatre. Therefore, transferring patients to a specialist hub site will positively influence patient outcomes.