As endovascular abdominal aortic aneurysm repair has become increasingly prominent in our vascular surgery practices, the discussion regarding long term durability continues. The initial randomized trials that enrolled patients almost 10 years ago revealed a short-term survival advantage with endovascular repair (EVAR) at the expense of a higher re-intervention rate and loss of that initial survival advantage in the longer term. Continuing and healthy debate over the practical importance of these findings has resulted in somewhat differing practice patterns on either side of the Atlantic. This debate explores the issues surrounding whether younger, good risk patients with a long life expectancy should be treated with endovascular repair (EVAR).