**Infrarenal Aortic Coarctation as a Cause for Hypertension**

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We present a case report of a 29-year-old male who was diagnosed with asymptomatic hypertension. Computed tomography angiography (CTA) and magnetic resonance angiography (MRA) showed a stenotic aorta, with extensive collateral flow called the middle aortic syndrome. The aetiology of middle aortic syndrome is poorly understood. Although treatment is preferably surgical, our case shows that medical therapy can be successful.

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**A Modified Technique of Open Surgical Treatment for Aneurysmal Sac Enlargement after Endovascular Repair**

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*Introduction:* Although several articles have reported the successful treatment of an abdominal aortic aneurysm (AAA) enlargement after endovascular aortic repair (EVAR) due to endoleak or endotension, the strategy to treat this type of complication is still controversial.

*Report:* We report three cases of AAA expansion after EVAR. When other endovascular approaches were not considered effective, we performed a modified open surgical treatment.

*Discussion:* This technique includes ligation of all branched vessels arising from the aneurismal sac, plication of the aneurysm and wrapping of the aneurysm using bio-prosthetic material instead of explanting the implanted endovascular graft.

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**Endobypass Using a Heparin-bonded Covered Stent to Treat Upper Limb Claudication due to Axillary Artery Occlusion Following Axillofemoral Bypass**

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*Introduction:* Post-surgical axillary artery occlusion may present with upper limb symptoms requiring intervention.

*Report:* A 76-year-old male had previously undergone left axillofemoral bypass for lower limb ischemia. Following an initial presentation with brachial thromboembolism, he re-presented with left axillary artery occlusion manifesting as upper limb claudication significantly affecting activities of daily living. The axillary artery was successfully recanalised following deployment of a 10 × 50mm Viabahn endoprosthesis with complete symptomatic resolution.

*Discussion:* Endovascular recanalisation of proximal upper limb vessels affords a convenient option to open surgery. A stent-graft offers additional protection compared to a stent if there is arterial rupture during the procedure.

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**Not Just a Popliteal Aneurysm: A Case of Metastatic Epithelioid Angiosarcoma**

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*Introduction:* Although several articles have reported the successful treatment of an abdominal aortic aneurysm (AAA) enlargement after endovascular aortic repair (EVAR) due to endoleak or endotension, the strategy to treat this type of complication is still controversial.

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