



TURKISH JOURNAL OF OBSTETRICS AND GYNECOLOGY

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Clinical Investigations

► Labor induction in heart disease

Kalp hastalığında doğum indüksiyonu

Yogita Dogra, Vanita Suri, Neelam Aggarwal, Ravi Kant Dogra; New Delhi, Chandigarh, Shimla, India

► Femoral fractures in the neonatal intensive care unit

Yenidoğan yoğun bakım ünitelerinde femur kırıkları

Mine Kanat Pektaş, Hilal Koyuncu, Afşin Ahmet Kundak; Afyonkarahisar, Turkey

► Relationship between uterine anomalies and PCOS

Uterus anomalileri ve PKOS arasındaki ilişki

Serhat Ege, Nurullah Peker, Muhammed Hanifi Bademkiran; Diyarbakır, Turkey

► Platelet-rich plasma administration to the anterior vaginal wall

Vagen anterior duvarına trombositçe zengin plazma uygulaması

Gökmen Sukgen, Aşkı Ellibeş Kaya, Ebru Karagün, Eray Çalışkan; Adana, Düzce, İstanbul, Turkey

► Human papilloma virüs and sexual dysfunction

İnsan papilloma virüsü cinsel işlev bozukluğu

Önder Sakin, Sakine Betül Uzun, Kazibe Koyuncu, Burak Giray, Emine Eda Akalın, Ali Doğukan Anğın; İstanbul, Turkey

► Diagnosis of cervicitis with multiplex-polymerase chain reaction DNA

Multipleks polimeraz zincir reaksiyonu DNA ile servisit tanısı

Onur Güralp, Ayşegül Bostancı, Esra Özerkman Başaran, Meike Schild-Suhren, Barış Kaya; Oldenburg, Lefkosa-TRNC, Nicosia, Germany, Turkey, Northern Cyprus

► The potential of cell free DNA in trophoblastis diseases

Mol gebeligin erken tanısında serum fetal DNA'nın potansiyeli

Muhammed Hanifi Bademkiran, Özcan Balat, Seyhun Sucu, Mehmet Obut, Hüseyin Çağlayan Özcan2, Fatma Bahar Cebesoy; Diyarbakır, Gaziantep, Turkey

► Loupe glasses in gynecologic oncology surgeries

Jinekolojik onkoloji cerrahisinde büyüteçli gözlük

Fatih Akkuş, Serhan Can İşcan, Jalal Raoufi, Mehmet Güney, Evrim Erdemoğlu; Isparta, Turkey

► Diabetes effecting radiotoxicity in gynecologic tumors

Jinekolojik tümörlerde radyasyon toksisitesinde diyabet etkisi

Emine Elif Özkan, Evrim Erdemoğlu, Jalal Raoufi; Isparta, Turkey

► Bone recurrence in early-stage cervical cancer

Erken dönem rahim ağzı kanserinde kemik nüksü

Caner Çakır, Dilek Yüksel, Çiğdem Kılıç, Mehmet Ünsal, Rıza Dur, Gökhan Boyraz, Alper Karalok, Özlem Moraloğlu; Ankara, Turkey





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The precis is a one-sentence synopsis of no more than 30 words that describes the basic findings of the article. Precis sample can be seen below:

'Using a 45 point questionnaire, we have evaluated the trend of Robotic surgery training in the gynecologic surgery fellowship programs across the nation'.

Abstract

All manuscripts should be accompanied by an abstract. All information in the abstract should be consistent with the information in the text, tables, or figures. Avoid use of commercial names in the abstract. Original research reports should have a structured abstract of no more than 250 words, using the following headings:

- Objective: Main question, objective, or hypothesis (single phrase starting with, for example, "To evaluate..." or "To estimate." [never start with "To determine."]).
- Materials and Methods: Study design, participants, outcome measures, and in the case of a negative study, statistical power.
- Results: Measurements expressed in absolute numbers and percentages, and when appropriate indicate relative risks or odds ratios with confidence intervals and level of statistical significance; any results contained in the abstract should also be presented in the body of the manuscript, tables, or figures.
- Conclusion: Directly supported by data, along with clinical implications.

Authors from Turkey or Turkish speaking countries are expected to submit a Turkish abstract including subheadings such as "Amaç, Gereç ve Yöntemler, Bulgular, Sonuç". The abstract of Authors whose native language is not Turkish will be provided free of charge translation services into Turkish language.

A structured abstract is not required with review articles and case reports.

Keywords

Below the abstract provide 3 to 5 keywords. Abbreviations should not be used as keywords. Keywords should be picked from the Medical

Subject Headings (MeSH) list (www.nlm.nih.gov/mesh/MBrowser.html).

Turkish abstracts should have keywords "Anahtar Kelimeler" picked from www.atifdizini.com under "Türkiye Bilim Terimleri" link.

Several types of articles can be submitted for publication in Turkish Journal of Obstetrics and Gynecology: Original research, case reports, systematic reviews, current commentaries, procedures and instruments, and letters. Stated word counts and page limits were shown in Table 1. Copyright transfer forms, the cover letter, and figures do not contribute to the page limits.

Table 1. Manuscript length at a glance

Article type	Abstract Length	Manuscript Word Count*	Maximum Number of Authors	Maximum Number of References [†]
Original Research	250 words	5,500 words (~22 pages) [‡]	NA	30
Case report	150 words	2,000 words (~8 pages)	4	8
Systematic review	300 words	6,250 words (~25 pages)	4	60
Current commentary	250 words	3,000 words (~12 pages)	4	12
Procedure and Instruments	200 words	2,000 words (~8 pages)	4	10
Letters	NA	350 words	4	5

*Manuscript length includes all pages in a manuscript (ie, title page, abstract, text, references, tables, boxes, figure legends, and appendixes). [†]Suggested limit. [‡]The Introduction should not exceed 250 words. [§]approximately; NA, not applicable.

Original researches should have the following sections;

Introduction

State concisely the purpose and rationale for the study and cite only the most pertinent references as background. Avoid a detailed literature review in this section.

Materials and Methods

Describe the research methodology (the patients, experimental animals, material and controls, the methods and procedures utilized, and the statistical method(s) employed) in sufficient detail so that others could duplicate the work. Identify methods of statistical analysis and when appropriate, state the basis (including alpha and beta error estimates) for their selection. Cite any statistical software programs used in the text. Express p values to no more than two decimal places. Indicate your study's power to detect statistical difference.

Address "IRB" issues and participants informed consent as stated above, the complete name of the IRB should be provided in the manuscript. State the generic names of the drugs with the name and country of the manufactures.

Results

Present the detailed findings supported with statistical methods. Figures and tables should supplement, not duplicate the text; presentation of data in either one or the other will suffice. Authors should report



TURKISH JOURNAL OF OBSTETRICS AND GYNECOLOGY

INSTRUCTIONS FOR AUTHORS

outcome data as both absolute and relative effects since information presented this way is much more useful for clinicians. Actual numbers and percentages should be given in addition to odds ratios or relative risk. When appropriate, number needed to treat for benefits (NNTb) or harm (NNTb) should be supplied. Emphasize only your important observations; do not compare your observations with those of others. Such comparisons and comments are reserved for the discussion section.

Discussion

Begin with a description of what your study found in relation to the purpose or objectives as stated in the Introduction. State the importance and significance of your findings to clinicians and actual patient care but do not repeat the details given in the Results section. Limit your opinions to those strictly indicated by the facts in your report. Compare your finding with previous studies with explanations in cases where they differ, although a complete review of the literature is not necessary.

Study Limitations

Provide information on the limitations of the study. No new data are to be presented in this section. A final summary is not necessary, as this information should be provided in the abstract and the first paragraph of the Discussion. Although topics that require future research can be mentioned, it is unnecessary to state, "Further research is needed."

Conclusion

The conclusion of the study should be highlighted. The study's new and important findings should be highlighted and interpreted.

Conflict of Interest

Authors must indicate whether or not they have a financial relationship with the organization that sponsored the research.

The main text of case reports should be structured with the following subheadings:

Introduction, Case Report, Discussion and References.

References

References are numbered (Arabic numerals) consecutively in the order in which they appear in the text (note that references should not appear in the abstract) and listed double-spaced at the end of the manuscript. The preferred method for identifying citations in the text is using within parentheses. Use the form of the "Uniform Requirements for Manuscripts" (<http://www.icmje.org/about-icmje/faqs/icmje-recommendations/>). If number of authors exceeds seven, list first 6 authors followed by et al.

Use references found published in peer-reviewed publications that are generally accessible. Unpublished data, personal communications, statistical programs, papers presented at meetings and symposia, abstracts, letters, and manuscripts submitted for publication cannot be listed in the references. Papers accepted by peer-reviewed publications but not yet published ("in press") are not acceptable as references.

Journal titles should conform to the abbreviations used in "Cumulated Index Medicus".

Examples

Journals; Zeyneloglu HB, Onalan G. Remedies for recurrent implantation failure. *Semin Reprod Med* 2014;32:297-305.

Book chapter; Ayhan A, Yenen MC, Dede M, Dursun P, Gultekin M. How to Manage Pre-Invasive Cervical Diseases? An Overview. In: Ayhan A, Gultekin M, Dursun P, editors. *Textbook of Gynaecological Oncology*. Ankara, Turkey: Gunes Publishing; 2010. p. 28-32.

Book; Arici A, Seli E. Non-invasive Management of Gynecologic Disorders. In: Arici A, Seli E (eds). *London: Informa Healthcare*; 2008.

Tables and Figures

Tables should be included in the main document after the reference list. Color figures or gray-scale images must be at minimum 300 DPI resolutions. Figures should be submitted in ".tiff", ".jpg" or ".pdf" format and should not be embedded in the main document. Tables and figures consecutively in the order they are referred to within the main text. Each table must have a title indicating the purpose or content of the table. Do not use internal horizontal and vertical rules. Place explanatory matter in footnotes, not in the heading. Explain all abbreviations used in each table in footnotes. Each figure must have an accompanying descriptive legend defining abbreviations or symbols found in the figure. If photographs of people are used, the subjects must be unidentifiable and the subjects must have provided written permission to use the photograph. There is no charge for color illustrations.

Units of Measurement and Abbreviations

Units of measurement should be in Système International (SI) units. Abbreviations should be avoided in the title. Use only standard abbreviations. If abbreviations are used in the text, they should be defined in the text when first used.

Revisions

Revisions will be sent to the corresponding author. Revisions must be returned as quickly as possible in order not to delay publication. Deadline for the return of revisions is 30 days. The editorial board retains the right to decline manuscripts from review if authors' response delays beyond 30 days. All reviewers' comments should be addressed a revision note containing the author's responses to the reviewers' comments should be submitted with the revised manuscript. An annotated copy of the main document should be submitted with revisions. The Editors have the right to withdraw or retract the paper from the scientific literature in case of proven allegations of misconduct.

Accepted Articles

Accepted articles are provided with a DOI number and published as ahead of print articles before they are included in their scheduled issue.

Journal and Society Web sites:

www.tjod.org (Turkish Society of Obstetrics and Gynecology)

www.tjoddergisi.org (Turkish Journal of Obstetrics and Gynecology)

CONTENTS

Clinical Investigations

- 213** Induction of labor with oxytocin in pregnancy with low-risk heart disease: A randomized controlled trial
Düşük riskli kalp hastalığı olan gebelerde oksitosin ile doğum indüksiyonu: Randomize kontrollü bir çalışma
Yogita Dogra, Vanita Suri, Neelam Aggarwal, Ravi Kant Dogra; New Delhi, Chandigarh, Shimla, India
- 219** Long bone fractures in neonatal intensive care units of Afyonkarahisar: Five-year's experience
Afyonkarahisar yenidoğan yoğun bakım ünitelerinde tanı konulan uzun kemik kırıkları: Beş yıllık deneyim
Mine Kanat Pektaş, Hilal Koyuncu, Afşin Ahmet Kundak; Afyonkarahisar, Turkey
- 224** The prevalence of uterine anomalies in infertile patients with polycystic ovary syndrome: A retrospective study in a tertiary center in Southeastern Turkey
İnfertil polikistik over sendromu hastalarında uterus anomalilerinin prevalansı: Türkiye'nin güneydoğusunda bulunan üçüncü basamak bir merkezde retrospektif çalışma
Serhat Ege, Nurullah Peker, Muhammed Hanifi Bademkiran; Diyarbakır, Turkey
- 228** Platelet-rich plasma administration to the lower anterior vaginal wall to improve female sexuality satisfaction
Kadın cinselliğinde memnuniyeti artırmak için alt ön vajinal duvara trombositçe zengin plazma uygulaması
Gökmen Sukgen, Aşkı Ellibeş Kaya, Ebru Karagün, Eray Çalışkan; Adana, Düzce, İstanbul, Turkey
- 235** Cervix human papilloma virus positivity: Does it cause sexual dysfunction?
Serviks human papilloma virüsü pozitifliği: Cinsel işlev bozukluğuna neden olur mu?
Önder Sakin, Sakine Betül Uzun, Kazibe Koyuncu, Burak Giray, Emine Eda Akalın, Ali Doğukan Ançın; İstanbul, Turkey
- 242** Evaluation of the prevalence of sexually transmitted bacterial pathogens in Northern Cyprus by nucleic acid amplification tests, and investigation of the relationship between these pathogens and cervicitis
Kuzey Kıbrıs'ta cinsel yolla bulaşan bakteriyel patojenlerin prevalansının nükleik asit amplifikasyon testleri ile incelenmesi ve bu patojenlerin servistile olan ilişkilerinin araştırılması
Onur Güralp, Ayşegül Bostancı, Esra Özerkman Başaran, Meike Schild-Suhren, Barış Kaya; Oldenburg, Lefkosa-TRNC, Nicosia, Germany, Turkey, Northern Cyprus
- 249** The potential of serum fetal DNA for early diagnosis of gestational trophoblastic disease
Gestasyonal trofoblastik hastalığın erken tanısında serum fetal DNA'nın potansiyeli
Muhammed Hanifi Bademkiran, Özcan Balat, Seyhun Sucu, Mehmet Obut, Hüseyin Çağlayan Özcan, Fatma Bahar Cebesoy; Diyarbakır, Gaziantep, Turkey
- 255** Effect of using magnifying loupe glasses on lymphocele formation and surgical outcomes in gynecologic oncology
Jinekolojik onkolojide büyüteçli gözlük kullanımının lenfosal oluşumu ve cerrahi sonuçları üzerine etkisi
Fatih Akkuş, Serhan Can İşcan, Jalal Raoufi, Mehmet Güney, Evrim Erdemoğlu; Isparta, Turkey
- 260** Impact of diabetes on gastrointestinal and urinary toxicity after radiotherapy for gynecologic malignancy
Jinekolojik tümörlerde radyoterapi sonrası gastrointestinal ve üriner toksisite üzerinde diyabetin etkisi
Emine Elif Özkan, Evrim Erdemoğlu, Jalal Raoufi; Isparta, Turkey



TURKISH JOURNAL OF OBSTETRICS AND GYNECOLOGY

CONTENTS

266 Bone recurrence after radical hysterectomy and lymphadenectomy in early-stage cervical cancer

Erken dönem servikal kanserde radikal histerektomi ve lenfadenektomi sonrası kemik nüksü

Caner Çakır, Dilek Yüksel, Çiğdem Kılıç, Mehmet Ünsal, Rıza Dur, Gökhan Boyraz, Alper Karalok, Özlem Moraloğlu Tekin, Taner Turan; Ankara, Turkey

Case Reports

271 A spontaneous heterotopic pregnancy presenting with acute abdomen treated with natural orifice transluminal endoscopic surgery procedure: Case report

Doğal orifis ile transluminal endoskopik cerrahi ile tedavi edilen ve akut batın ile başvuran heterotopik gebelik: Olgu sunumu

Keziban Doğan, Cihan Kaya, Derya Ece İlman, İbrahim Karaca, Hüseyin Cengiz; İstanbul, Turkey

274 Immunoglobulin G4 deficiency can be a new entity for primary recurrent miscarriage: Successful pregnancy in two cases after treatment with intravenous immunoglobulin

IgG4 eksikliği, primer tekrarlayan düşük için yeni bir oluşum olabilir: İntravenöz immünoglobulin ile tedavi sonrası iki olguda başarılı gebelik

Behzad Shakerian, Mozghan Moghtaderi, Nasrin Heidari; Isfahan, Shiraz, Iran

278 Letter to Editor

Editöre Mektup

Demet Aydoğan Kırmızı, Taylan Onat, Emre Başer, Melike Demir Çaltekin; Yozgat, Turkey