



TURKISH JOURNAL OF OBSTETRICS AND GYNECOLOGY

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Clinical Investigations

- ▶ **COVID-19 in pregnant and non-pregnant women**
Gebe ve gebe olmayan kadınlarda COVID-19
Niyazi Tug, Murat Yassa, Emre Köle, Önder Sakin, Merve Çakır Köle, Ateş Karateke, Nurettin Yiyit, Emre Yavuz, Pınar Birol, Doğuş Budak, Ömer Kol, Edip Emir; İstanbul, Kocaeli, Turkey
- ▶ **Maternal mental wellbeing during COVID-19 pandemic**
COVID-19 pandemisinde maternal mental iyilik hali
Murat Yassa, Ahmet Yassa, Cihangir Yirmibeş, Pınar Birol, Umur Göktuğ Ünlü, Arzu Bilge Tekin, Kemal Sandal, Memiş Ali Mutlu, Gül Çavuşoğlu, Niyazi Tug; İstanbul, Turkey
- ▶ **Pregnancy and seizure disorder: Obstetric outcome**
Gebelik ve nöbet bozukluğu: Obstetrik sonuç
Tarang Preet Kaur, Latika Sahu, Asmita M. Rathore, Sangeeta Bhasin; New Delhi, India
- ▶ **Prenatal diagnosis of sacrococcygeal teratoma**
Sakrokoksigeal teratomların prenatal tanısı
Mehmet Özsürmeli, Selim Büyükkurt, Mete Sucu, Erol Arslan, Selahattin Mısırlıoğlu, Çiğdem Akçabay, Masum Kayapınar, Süleyman Cansun Demir, İsmail Cüneyt Evrûke; Kocaeli, Adana, Turkey
- ▶ **Do external female genital measurements affect sexual function?**
Kadın dış genital ölçümleri cinsel fonksiyonları etkiler mi?
Aşkı Ellibeş Kaya, Ozan Doğan, Murat Yassa, Alper Başbuğ, Canan Özcan, Eray Çalışkan; İstanbul, Turkey
- ▶ **Laparoscopic peritoneal pull-through vaginoplasty**
Laparoskopik peritoneal çekmeli vajinoplasti
Çetin Kılıççı, İlhan Şanverdi, Ezgi Darıcı, Enis Özkaya; İstanbul, Turkey
- ▶ **Anesthetic management of gynecologic laparoscopy**
Jinekolojik laparoskopide spinal ve genel anestezi
Berna Kaya Uğur, Lütfiye Pirbudak, Ebru Öztürk, Özcan Balat, Mete Gürol Uğur; Gaziantep, Turkey
- ▶ **Dysmenorrhea/PMS impact on academic performance**
Dismenore/PMS'nin akademik performans üzerine etkisi
Esra Bilir, Şule Yıldız, Kayhan Yakın, Barış Ata; İstanbul, Turkey
- ▶ **Asymptomatic trocar site hernias**
Aseptomatik trokar bölgesi hernileri
Emin Üstünyurt, Fatma Nurgül Taşgöz, Sefa Tiğrak; Bursa, Turkey
- ▶ **Morbid obesity and endometrial cancer**
Morbid obezite ve endometriyum kanseri
Ahmet Barış Güzel, Ghanim Khatib, Ümrân Küçükgöz Güleç, Derya Gümürdülü, Mehmet Ali Vardar; Adana, Turkey
- ▶ **Upper extremity lymphedema**
Üst ekstremitelerde lenfödem
Tuba Tülay Koca, Gökmen Aktaş, Mehmet Emre Kurtgil; Kahramanmaraş, Turkey
- ▶ **Lung ultrasound for obstetricians**
Obstetrisyenler için akciğer ultrasonu
Murat Yassa, Memiş Ali Mutlu, Erkan Kalafat, Pınar Birol, Cihangir Yirmibeş, Arzu Bilge Tekin, Kemal Sandal, Esra Ayanoğlu, Mahmut Yassa, Ceyhan Kılınç, Niyazi Tug; İstanbul, Ankara, Diyarbakır, Turkey





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STARD checklist for the reporting of studies of diagnostic accuracy (Bossuyt PM, Reitsma JB, Bruns DE, Gatsonis CA, Glasziou PP, Irwig LM, et al, for the STARD Group. Towards complete and accurate reporting of studies of diagnostic accuracy: the STARD initiative. Ann Intern Med 2003;138:40-4.) (<http://www.stard-statement.org/>),

STROBE statement-checklist of items that should be included in reports of observational studies (<http://www.strobe-statement.org/>),

MOOSE guidelines for meta-analysis and systemic reviews of observational studies (Stroup DF, Berlin JA, Morton SC, et al. Meta-analysis of observational studies in epidemiology: a proposal for reporting Meta-analysis of observational Studies in Epidemiology (MOOSE) group. JAMA 2000; 283: 2008-12).

CARE guidelines are designed to increase the accuracy, transparency, and usefulness of case reports. (Gagnier JJ, Kienle G, Altman DG, Moher

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Manuscript Structure

All manuscripts must be submitted as Microsoft Word (.doc or .docx) files. All manuscript pages (including references, tables, and figure legends) must be double-spaced. Use a standard, 12-point typeface such as Times New Roman. Top, bottom, and side margins should be set at 1 inch. Authors must include the following in the manuscript file:

INSTRUCTIONS FOR AUTHORS

Title Page

A separate title page should list;

-The manuscript title, which should contain no more than a total of 100 characters (counting letters and spaces) and should not be declarative; do not use abbreviations or commercial names in the title.

- A short title of no more than 50 characters, including spaces, for use as a running foot.

- All author name(s), institutional, corporate, or commercial affiliations, and up to two major degree(s).

- Corresponding author's name, address, telephone (including the mobile phone number), fax numbers and e-mail address (the corresponding author will be responsible for all correspondence and other matters relating to the manuscript).

Precis

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 (NNTh) 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

- 149** Pregnancy worsens the morbidity of COVID-19 and this effect becomes more prominent as pregnancy advances
Gebelik COVID-19 morbiditesini kötüleştirmekte ve bu etki gebelik ilerledikçe daha belirgin hal almaktadır
Niyazi Tug, Murat Yassa, Emre Köle, Önder Sakin, Merve Çakır Köle, Ateş Karateke, Nurettin Yiyit, Emre Yavuz, Pınar Birol, Doğuş Budak, Ömer Kol, Edip Emir; İstanbul, Kocaeli, Turkey
- 155** Anxiety levels and obsessive compulsion symptoms of pregnant women during the COVID-19 pandemic
COVID-19 pandemisi süresince gebelerin anksiyete düzeyleri ve obsesif kompülsiyon semptomları
Murat Yassa, Ahmet Yassa, Cihangir Yirmibeş, Pınar Birol, Umur Göktuğ Ünlü, Arzu Bilge Tekin, Kemal Sandal, Memiş Ali Mutlu, Gül Çavuşoğlu, Niyazi Tug; İstanbul, Turkey
- 161** Obstetric outcomes in pregnant women with seizure disorder: A hospital-based, longitudinal study
Nöbet bozukluğu olan gebe kadınlarda obstetrik sonuç: Hastane temelli, uzunlamasına bir çalışma
Tarang Preet Kaur, Latika Sahu, Asmita M. Rathore, Sangeeta Bhasin; New Delhi, India
- 170** Evaluation of prenatally diagnosed fetal sacrococcygeal teratomas: A case series of seventeen pregnancies from South-central Turkey
Prenatal dönemde tanı konulan sakrokoksigeal teratomlu fetüslerin değerlendirilmesi: Doğu Akdeniz Bölgesinden on yedi gebelik olgu serisi
Mehmet Özsüremeli, Selim Büyükkurt, Mete Sucu, Erol Arslan, Selahattin Mısırlıoğlu, Çiğdem Akçabay, Masum Kayapınar, Süleyman Cansun Demir, İsmail Cüneyt Evrücke; Kocaeli, Adana, Turkey
- 175** Do external female genital measurements affect genital perception and sexual function and orgasm?
Kadın dış genital ölçümleri, genital algıyı, cinsel fonksiyonları ve orgazmı etkiler mi?
Aşkı Ellibeş Kaya, Ozan Doğan, Murat Yassa, Alper Başbuğ, Canan Özcan, Eray Çalışkan; İstanbul, Turkey
- 182** Laparoscopic vaginal bead pull-through vaginoplasty technique using dental prosthesis material
Dış protez malzemesi kullanılarak laparoskopik vajinal boncuk çekme vajinoplasti tekniği
Çetin Kılıççı, İlhan Şanverdi, Ezgi Darıcı, Enis Özkaya; İstanbul, Turkey
- 186** Spinal versus general anesthesia in gynecologic laparoscopy: A prospective, randomized study
Jinekolojik laparoskopide spinal ve genel anestezi: Prospektif randomize bir çalışma
Berna Kaya Uğur, Lütfiye Pirbudak, Ebru Öztürk, Özcan Balat, Mete Gürol Uğur; Gaziantep, Turkey
- 196** The impact of dysmenorrhea and premenstrual syndrome on academic performance of college students, and their willingness to seek help
Üniversite öğrencilerinde dismenore ve premenstrüel sendromun akademik performans üzerine etkisi ve yardım isteme eğilimleri
Esra Bilir, Şule Yıldız, Kayhan Yakın, Barış Ata; İstanbul, Turkey
- 202** Asymptomatic trocar site hernias: An underestimated complication of laparoscopy
Aseptomatik trokar bölgesi hernileri: Laparoskopinin azımsanan komplikasyonu
Emin Üstünyurt, Fatma Nurgül Taşgöz, Sefa Tığrak; Bursa, Turkey
- 209** The impact of morbid obesity on survival of endometrial cancer
Morbid obezitenin endometriyal kanserli hastaların sağkalımına etkisi
Ahmet Barış Güzel, Ghanim Khatib, Ümran Küçüköz Güleç, Derya Gümürdülü, Mehmet Ali Vardar; Adana, Turkey



TURKISH JOURNAL OF OBSTETRICS AND GYNECOLOGY

CONTENTS

- 215** Prevalance of upper extremity lymphedema and risk factors in patients with mastectomy: Single-center, observational, cross-sectional study

Mastektomili hastalarda üst ekstremite lenfödem prevalansı ve risk faktörleri: Tek merkezli, gözlemsel, kesitsel çalışma

Tuba Tülay Koca, Gökmen Aktaş, Mehmet Emre Kurtgil; Kahramanmaraş, Turkey

- 225** How to perform and interpret the lung ultrasound by the obstetricians in pregnant women during the SARS-CoV-2 pandemic

SARS-CoV-2 pandemisinde gebeler akciğer ultrasonunun obstetrisyenler tarafından yapılması ve yorumlanması

Murat Yassa, Memiş Ali Mutlu, Erkan Kalafat, Pınar Birol, Cihangir Yirmibeş, Arzu Bilge Tekin, Kemal Sandal, Esra Ayanoğlu,

Mahmut Yassa, Ceyhan Kılınç, Niyazi Tug; İstanbul, Ankara, Diyarbakır, Turkey

Case Report

- 233** An unusual cause of female secondary infertility: Hypospadias

Kadında sekonder infertilitenin nadir bir olgusu: Hipospadias

Niyazi Tug, Mehmet Akif Sargin, Murat Yassa, Güldeniz Toklucu; İstanbul, Turkey