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Turkish Journal of COLORECTAL DISEASE

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E-mail: muratkendirci@gmail.com, muratkendirci@hitit.edu.tr

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E-mail: drfevzi@gmail.com

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Address: Latilokum Sk. Alphan İşhanı No: 3 Kat: Mecidiyeköy Şişli, İstanbul, Turkey
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AIMS AND SCOPE

Turkish Journal of Colorectal Disease is an open access, scientific and peer-reviewed journal in accordance with independent, unbiased, and double-blinded peer-review principles of the Turkish Society of Colon and Rectal Surgery.

The journal is published quarterly in March, June, September, and December in print and electronically. The publication language of the journal is English.

This journal aims to contribute to science by publishing high-quality, peerreviewed publications of scientific and clinical importance that address current issues at both national and international levels.

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The journal scopes epidemiologic, pathologic, diagnostic, and therapeutic studies relevant to managing small intestine, colon, rectum, anus, and pelvic floor diseases.

The target audience of the Turkish Journal of Colorectal Disease includes surgeons, pathologists, oncologists, gastroenterologists, and health professionals caring for patients with a disease of the colon and rectum.

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The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), Council of Science Editors (CSE), Committee on Publication Ethics (COPE), European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing.

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This journal aims to contribute to science by publishing high quality, peerreviewed publications of scientific and clinical importance address current issues at both national and international levels. Furthermore, review articles, case reports, technical notes, letters to the editor, editorial comments, educational contributions and congress/meeting announcements are released.

The journal scopes epidemiologic, pathologic, diagnostic and therapeutic studies relevant to the management of small intestine, colon, rectum, anus and pelvic floor diseases.

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Copyright Transfer Statement

Disclosure Statement

Cover Letter

Manuscript Submission Guidelines

Manuscript Preparation Guidelines

Text Formatting

Title Page

Article Types

Original Articles

Invited Review Articles

Case Reports

Technical Notes

Letters to Editor

Editorial Comments

Ethical Responsibilities of Authors

Research Involving Human Participants and/or Animals

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Preparation of research articles, systematic reviews and meta-analyses must comply with study design guidelines:

CONSORT statement for randomized controlled trials (Moher D, Schultz KF, Altman D, for the CONSORT Group. The CONSORT statement revised recommendations for improving the quality of reports of parallel-group randomized trials. JAMA 2001; 285:1987-91);

PRISMA statement of preferred reporting items for systematic reviews and meta-analyses (Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group. Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 2009; 6(7): e1000097.);

STARD checklist for reporting 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.);

STROBE statement, a checklist of items that should be included in reports of observational studies:

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).

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Manuscripts should be submitted in Word.

Use a standard, plain font (e.g., 10-point Times Roman) for text.

Use the automatic page numbering function to number the pages.

Do not use field functions.

Use tab stops or other commands for indents, not the space bar.

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Save your file in Docx format (Word 2007 or higher) or doc format (older Word versions).

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This category includes original research, including both clinical and basic science submissions. The work must be original and neither published, accepted or submitted for publication elsewhere. Any related work, either SUBMITTED, in press, or published by any authors, should be clearly cited and referenced.



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Results: What were the main findings?

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1. State the importance and significance of your findings but do not repeat the details given in the Results section.

- 2. Limit your opinions to those strictly indicated by the facts in your report.
- 3. Compare your finding with those of others.

No new data are to be presented in this section.

Acknowledgements: Only acknowledge persons who have made substantive contributions to the study. Authors are responsible for obtaining written permission from everyone acknowledged by name because readers may infer their endorsement of the data and conclusions. Begin your text of the acknowledgement with, "The authors thank...".

Authorship Contributions: The journal follows the recommendations of the ICMJE for manuscripts submitted to biomedical journals. According to these, authorship should be based on the following four criteria:

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Journal titles should conform to the abbreviations used in

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Example: 1. Dilaveris P, Batchvarov V, Gialafos J, Malik M. Comparison of different methods for manual P wave duration measurement in 12-lead electrocardiograms. Pacing Clin Electrophysiol 1999;22:1532-1538.

Book chapter; Last name(s) of the author(s) and initials, chapter title, book editors, book title, edition, place of publication, date of publication and inclusive page numbers of the extract cited.

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Reference Number: Not to exceed 100 references.

Reviews should include a conclusion in which a new hypothesis or study about the subject may be posited. Do not publish methods for literature search or level of evidence. Authors who will prepare review articles should already have published research articles on the relevant subject. The study's new and important findings should be highlighted and interpreted in the Conclusion section. There should be a maximum of two authors for review articles.

Case Reports

Abstract length: Not to exceed 100 words. Article length: Not to exceed 1000 words. Reference Number: Not to exceed 15 references.

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Abstract: An unstructured abstract that summarizes the case.

Introduction: A brief introduction (recommended length: 1-2 paragraphs).

Case Report: This section describes the case in detail, including the initial diagnosis and outcome.

Discussion: This section should include a brief review of the relevant literature and how the presented case furthers our understanding of the disease process.

References: See under 'References' above.

Acknowledgments. Tables and figures.

Technical Notes

Abstract length: Not to exceed 250 words. Article length: Not to exceed 1200 words. Reference Number: Not to exceed 15 references.

Technical Notes include a description of a new surgical technique and its application in a small number of cases. In case of a technique representing a major breakthrough, one case will suffice. Follow-up and outcome need to be clearly stated.

Technical Notes should be organized as follows:

Abstract: Structured "as above mentioned".

Indications

Method

Comparison with other methods: advantages and disadvantages, difficulties and complications.

References, in Vancouver style (see under 'References' above).

Acknowledgments.

Tables and figures: Including legends.

Video Article

Article length: Not to exceed 500 words. Reference Number: Not to exceed 5 references

Briefly summarize the case describing diagnosis, applied surgery technique and outcome. Represent all important aspects, i.e. novel surgery technique, with properly labelled and referred video materials. A standalone video vignette describing a surgical technique or interesting case encountered by the authors.

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We welcome correspondence and comments on articles published in the Turkish Journal of Colorectal Disease. No abstract is required, but please include a brief title. Letters can include 1 figure or table.

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The Editor exclusively solicits editorials. Editorials should express opinions and/or provide comments on papers published elsewhere in the same issue. A single author is preferred. No abstract is required, but please include a brief title. Editorial submissions are subject to review/request for revision, and editors retain the right to alter text style.

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Publishing study protocols enables researchers and funding bodies to stay up to date in their fields by providing exposure to research activity that may not otherwise be widely publicized. This can help prevent unnecessary duplication of work and will hopefully enable collaboration. Publishing protocols in full also makes available more information than is currently by trial registries and increases transparency, making it easier for others (editors, reviewers and readers) to see and understand any variations from the protocol that occur during the conduct of the study)

The SPIRIT (Standart Protocol Items for Randomized Trials) statement has now been published. It is an evidence-based tool developed through a systematic review of a wide range of resources and consensus. It closely mirrors the CONSORT statement and also reflects essential ethical considerations.

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approved by the appropriate institutional and/or national research ethics committee and have been performed in accordance with the ethical standards as laid down in the 1964 Declaration of Helsinki and its later amendments or comparable ethical standards.

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If articles do not contain studies with human participants or animals by any of the authors, please select one of the following statements:

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"Additional informed consent was obtained from all individual participants for whom identifying information is included in this article."

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CORRESPONDENCE

All correspondences can be done to the following postal address or to the following e-mail address, where the journal editorial resides:

Turkish Society of Colon and Rectal Surgery

Address: Latilokum Sok. Alphan İşhanı No:3 Kat:2 Mecidiyeköy-Şişli-

İstanbul/Turkey

Phone: +90 (212) 356 01 75-76-77

Gsm: +90 (532) 300 72 36 **Fax:** +90 (212) 356 01 78

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CONTENTS

Research Articles

- 31 Emergency Surgery of Obstructed Carcinoma of the Left Colon with Perforation of the Cecum: Colectomy and Anastomosis Series Erkan Dalbaşı, Abidin Tüzün, Cemalettin Durgun, Abdullah Oğuz; Diyarbakır, Turkey
- The Impact of Body Mass Index on the Oncological Outcomes of Locally Advanced Rectal Cancer: A Comparative Study in a Country with High Obesity Rates

 Mahmoud Al-Masri, Amro Mureb, Basim Aljalabneh; Amman, Jordan
- Frequency and Clinical Impact of Microsatellite Instability in Colorectal Dysplasia Subgroups
 Seçil Ak Aksoy, Tuncay Yılmazlar, Melis Erçelik, Çağla Tekin, Nesrin Uğraş, Ömer Yerci, Ersin Öztürk, Selim Gürel, Özgen Işık; Bursa, Konya, Turkey
- 48 Evaluation of Outcomes in Patients with Emergency Diverting or Decompressive Stoma
 Mehmet Sabri Çiftçi, Mehmet Zeki Buldanlı, Burak Uçaner, Oğuz Hançerlioğulları; Ankara, Turkey

Letter to the Editor

Complete Lymph Node Dissection as a Vascular-Sparing Alternative to Complete Mesocolic Excision for Colon Cancer Sergey K. Efetov, Albina A. Zubayraeva, Cüneyt Kayaalp; Moscow, Russia; İstanbul, Turkey