

OFFICIAL JOURNAL OF GAZIANTEP UNIVERSITY FACULTY OF MEDICINE

Formerly Gaziantep Medical Journal VOLUME 28 ISSUE 4 DECEMBER 2022

eurjther.com

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Aims & Scope

European Journal of Therapeutics (Eur J Ther) is the double-blind peer-reviewed, open access, international publication organ of the Gaziantep University School of Medicine. The journal is a quarterly publication, published on March, June, September, and December. The journal publishes content in English.

European Journal of Therapeutics aims to contribute to the international literature by publishing original clinical and experimental research articles, short communication, review articles, technical notes, and letters to the editor in the fields of medical sciences. The journal's target audience includes researchers, physicians and healthcare professionals who are interested or working in in all medical disciplines.

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 (doaj.org/bestpractice).

European Journal of Therapeutics is indexed in Web of Science-Emerging Sources Citation Index, TUBITAK ULAKBIM TR Index. EBSCO and GALE.

Processing and publication are free of charge with the journal. No fees are requested from the authors at any point throughout the evaluation and publication process. All manuscripts must be submitted via the online submission system, which is available at www.eurjther.com. The journal quidelines, technical information, and the required forms are available on the journal's web page.

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Publisher: Gaziantep University School of Medicine Address: Gaziantep University School of Medicine, Gaziantep, Turkey

Publisher Service: Pera Yayıncılık

Address: Ataköy 3-4-11 Kısım Mah. Dr Remzi Kazancıgil Cd. O-114 N:12 D:7 Bakırköy İstanbul, Turkey

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Printing-Binding: Pınarbaş Matbaacılık Ltd. Şti.

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Instructions to Authors

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- Grant information and detailed information on the other sources of support.
- Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
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Manuscript Types

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Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. Br Med J 1983: 7; 1489–93). Information on statistical analyses should be provided with a separate subheading under the Materials and Methods section and the statistical software that was used during the process must be specified.

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Editorial Comments: Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the research article published in the journal. Authors are selected and invited by the journal to provide such comments. Abstract, Keywords, and Tables, Figures, Images, and other media are not included.

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Table 1. Limitations for each manuscript type					
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Original Article	3500	250 (Structured)	30	6	7 or total of 15 images
Review Article	5000	250	50	6	10 or total of 20 images
Short Communication	1500	200	20	5	1 or total of 5 images
Technical Note	1500	No abstract	15	No tables	10 or total of 20 images
Letter to the Editor	500	No abstract	5	No tables	No media

Tables

Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in the order they are referred to within the main text. A descriptive title must be placed above the tables. Abbreviations used in the tables should be defined below the tables by footnotes (even if they are defined within the main text). Tables should be created using the "insert table" command of the word processing software and they should be arranged clearly to provide easy reading. Data presented in the tables should not be a repetition of the data presented within the main text but should be supporting the main text.

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Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document. When there are figure subunits, the subunits should not be merged to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labeled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legends. Like the rest of the submission, the figures too should be blind. Any information within the images that may indicate an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions: 100×100 mm). Figure legends should be listed at the end of the main document.

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All references, tables, and figures should be referred to within the main text, and they should be numbered consecutively in the order they are referred to within the main text.

Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

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While citing publications, preference should be given to the latest, most up-to-date publications. Authors should avoid using references that are older than ten years. The limit for the old reference usage is 15% in the journal. If an ahead-of-print publication is cited, the DOI number should be provided. Authors are responsible for the accuracy of references. Journal titles should be abbreviated in accordance with the journal abbreviations in Index Medicus/ MEDLINE/PubMed. When there are six or fewer authors, all authors should be listed. If there are seven or more authors, the first six authors should be listed followed by "et al." In the main text of the manuscript, references should be cited using Arabic numbers in parentheses. The reference styles for different types of publications are presented in the following examples.

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Book Section: Suh KN, Keystone JS. Malaria and babesiosis. Gorbach SL, Barlett JG, Blacklow NR, editors. Infectious Diseases. Philadelphia: Lippincott Williams; 2004.p.2290-308.

Books with a Single Author: Sweetman SC. Martindale the Complete Drug Reference. 34th ed. London: Pharmaceutical Press; 2005.

Editor(s) as Author: Huizing EH, de Groot JAM, editors. Functional reconstructive nasal surgery. Stuttgart-New York: Thieme; 2003.

Conference Proceedings: Bengisson S. Sothemin BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics; 1992 Sept 6–10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. pp.1561–5.

Scientific or Technical Report: Cusick M, Chew EY, Hoogwerf B, Agrón E, Wu L, Lindley A, et al. Early Treatment Diabetic Retinopathy Study Research Group. Risk factors for renal replacement therapy in the Early Treatment Diabetic

Retinopathy Study (ETDRS), Early Treatment Diabetic Retinopathy Study Kidney Int: 2004. Report No: 26.

Thesis: Yılmaz B. Ankara Üniversitesindeki Öğrencilerin Beslenme Durumları, Fiziksel Aktiviteleri ve Beden Kitle İndeksleri Kan Lipidleri Arasındaki İlişkiler. H.Ü. Sağlık Bilimleri Enstitüsü, Doktora Tezi. 2007.

Manuscripts Accepted for Publication, Not Published Yet: Slots J. The microflora of black stain on human primary teeth. Scand J Dent Res. 1974.

Epub Ahead of Print Articles: Cai L, Yeh BM, Westphalen AC, Roberts JP, Wang ZJ. Adult living donor liver imaging. Diagn Interv Radiol. 2016 Feb 24. DOI: 10.5152/dir.2016.15323. [Epub ahead of print].

Manuscripts Published in Electronic Format: Morse SS. Factors in the emergence of infectious diseases. Emerg Infect Dis (serial online) 1995 Jan-Mar (cited 1996 June 5): 1(1): (24 screens). Available from: URL: http://www.cdc.gov/ncidodlElD/cid.htm.

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Publisher Service: Pera Yayıncılık

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