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AIMS AND SCOPE

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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), the QUOROM statement for meta-analysis and systemic reviews of randomized controlled trials (Moher D, Cook DJ, Eastwood S, Olkin I, Rennie D, Stroup DF. Improving the quality of reports of meta-analyses of randomized controlled trials: the QUOROM statement. Quality of Reporting of Meta-Analyses. Lancet 1999; 354 : 1896 – 900) and the 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). Keywords are included according to MeSH (Medical Subject Headings) National Library of Medicine.

The Journal of Clinical Research in Pediatric Endocrinology publishes abstracts of accepted manuscripts online in advance of their publication in print. Another initiative is that the journal provides uncorrected full text PDF files via www.jcrpe.org.

Once the manuscript is accepted, it receives a Digital Object Identifier (DOI) number.

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All manuscripts must adhere to the limitations, as described below, for text only; the word count does not include the abstract, references, or figure/table legends. The word count must be noted on the title page, along with the number of figures and tables. Original Articles should be no longer than 5000 words and include no more than six figures and tables and 50 references.

Short Communications are short descriptions of focused studies with important, but very straightforward results. These manuscripts should be no longer than 2000 words, and include no more than two figures and tables and 20 references.

Brief Reports are discrete, highly significant findings reported in a shorter format. The abstract of the article should not exceed 150 words and the text/article length should not exceed 1200 words. References should be limited to 12, a maximum of 2 figures or tables.

Clinical Reviews address important topics in the field of pediatric endocrinology. Authors considering the submission of uninvited reviews should contact the editors in advance to determine if the topic that they propose is of current potential interest to the Journal. Reviews will be considered for publication only if they are written by authors who have at least three published manuscripts in the international peer reviewed journals and these studies should be cited in the review. Otherwise only invited reviews will be considered for peer review from qualified experts in the area. These manuscripts should be no longer than 6000 words and include no more than four figures and tables and 120 references.

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Consensus Statements may be submitted by professional societies. All such submission will be subjected to peer review, must be modifiable in response to criticisms, and will be published only if they meet the Journal's usual editorial standards. These manuscripts should typically be no longer than 4000 words and include no more than six figures and tables and 120 references.

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Note on Prior Publication

The journal publishes original research and review material. Material previously published in whole or in part shall not be considered for publication. At the time of submission, authors must report that the manuscript has not been published elsewhere. Abstracts or posters displayed at scientific meetings need not be reported.

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- All tables and figures must be placed after the text and must be labeled.
- Each section (abstract, text, references, tables, figures) should start on a separate page.
- Manuscripts should be prepared as word document (*.doc) or rich text format (*.rtf).

Title Page

The title page should include the following:

- Full title
- Authors' names and institutions.
- Short title of not more than 40 characters for page headings
- At least three and maximum eight key words. Do not use abbreviations in the key words
- Word count (excluding abstract, figure legends and references)
- Corresponding author's e-mail and post address, telephone and fax numbers
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- Any grants or fellowships supporting the writing of the paper
- The ORCID (Open Researcher and Contributor ID) number of the all authors should be provided while sending the manuscript. A free registration can be done at <http://orcid.org>.

Structured Abstracts (According to the The Journal of the American Medical Association)

Original Articles should be submitted with structured abstracts of no more than 250 words. All information reported in the abstract must appear in the manuscript. The abstract should not include references. Please use complete sentences for all sections of the abstract. Structured abstract should include background, objective, methods, results and conclusion.

What is already known on this topic?

What this study adds?

These two items must be completed before submission. Each item should include at most 2-3 sentences and at most 50 words focusing on what is known and what this study adds.

Review papers do not need to include these boxes.

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The article should begin with a brief introduction stating why the study was undertaken within the context of previous reports.

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All clinical investigations described in submitted manuscripts must have been conducted in accordance with the guidelines in the Declaration of Helsinki and has been formally approved by the appropriate institutional review committees. All manuscripts must indicate that such approval was obtained and that informed consent was obtained from subjects in all experiments involving humans. The study populations should be described in detail. Subjects must be identified only by number or letter, not by initials or names. Photographs of patients' faces should be included only if scientifically relevant. Authors must obtain written consent from the patient for use of such photographs.

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For clinical trial reports to be considered for publication in the Journal, prospective registration, as endorsed by the International Conference of Medical Journal Editors, is required. We recommend use of <http://www.clinicaltrials.gov>.

Experimental Animals

A statement confirming that all animal experimentation described in the submitted manuscript was conducted in accord with accepted standards of humane animal care, according to the Declaration of Helsinki and Genova Convention, should be included in the manuscript.

Materials and Methods

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The name of the ethical committee, approval number should be stated.

Results

The Results section should briefly present the experimental data in text, tables, and/or figures. Do not compare your observations with that of others in the results section.

Discussion

The Discussion should focus on the interpretation and significance of the findings with concise objective comments that describe their relation to other work in that area and contain study limitations.

Study Limitations

Limitations of the study should be detailed. In addition, an evaluation of the implications of the obtained findings/results for future research should be outlined.

Conclusion

The conclusion of the study should be highlighted.

Acknowledgments (Not Required for Submission)

An acknowledgment is given for contributors who may not be listed as authors, or for grant support of the research.

Authorship Contribution

The kind of contribution of each author should be stated.

References

References to the literature should be cited in numerical order (in parentheses) in the text and listed in the same numerical order at the end of the manuscript on a separate page or pages. The author is responsible for the accuracy of references.

Number of References: Case Report max 30 / Original Articles max 50

Examples of the reference style are given below. Further examples will be found in the articles describing the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (Ann Intern Med.1988; 208:258-265, Br Med J. 1988; 296:401-405). The titles of journals should be abbreviated according to the style used in the Index Medicus.

Journal Articles and Abstracts: List all authors. The citation of unpublished observations, of personal communications is not permitted in the bibliography. The citation of manuscripts in press (i.e., accepted for publication) is permitted in the bibliography; the name of the journal in which they appear must be supplied. Citing an abstract is not recommended.

Books: List all authors or editors.

Sample References

Papers Published in Periodical Journals: Gungor N, Saad R, Janosky J, Arslanian S. Validation of surrogate estimates of insulin sensitivity and insulin secretion in children and adolescents. J Pediatr 2004;144:47-55.

Papers Only Published with DOI Numbers: Knops NB, Sneeuw KC, Brand R, Hile ET, de Ouden AL, Wit JM, Verloove-Vanhorick SP. Catch-up growth up to ten years of age in children born very preterm or with very low birth weight. BMC Pediatrics 2005 doi: 10.1186/1471-2431-5-26.

Book Chapters: Darendeliler F. Growth Hormone Treatment in Rare Disorders: The KIGS Experience. In: Ranke MB, Price DA, Reiter EO (eds). Growth Hormone Therapy in Pediatrics: 20 Years of KIGS. Basel, Karger, 2007;213-239.

Books: Practical Endocrinology and Diabetes in Children. Raine JE, Donaldson MDC, Gregory JW, Savage MO. London, Blackwell Science, 2001;37-60.

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Figure legends and titles should be submitted on a separate page. Figure legends and titles should be clear and informative. Tables and figures should work under "windows". Number all figures (graphs, charts, photographs, and illustrations) in the order of their citation in the text. Include a title for each figure (a brief phrase, preferably no longer than 10 to 15 words).

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At submission, the following file formats are acceptable: AI, EMF, EPS, JPG, PDF, PPT, PSD, TIF. Figures may be embedded at the end of the manuscript text file or loaded as separate files for submission purposes.

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Proofs and a reprint order are sent to the corresponding author. The author should designate by footnote on the title page of the manuscript the name and address of the person to whom reprint requests should be directed. The manuscript when published will become the property of the journal.

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The editorial office will retain all manuscripts and related documentation (correspondence, reviews, etc.) for 12 months following the date of publication or rejection.

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3. Where available, URLs for the references have been provided.
4. Upon acceptance of your manuscript for publication, a completed Copyright Assignment & Affirmation of Originality Form will be faxed to the JCRPE Editorial Office (Fax: +90 212 621 99 27)
5. The text adheres to the stylistic and bibliographic requirements outlined in the Author Guidelines, which is found in About the Journal.
6. Completed Disclosure of Potential Conflict of Interest Form. The corresponding author must acquire all of the authors' completed disclosure forms and fax them, together, to the editorial office along with the Author Disclosure Summary.

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2. For those manuscripts sent for external peer review, the editor assigns reviewers to the manuscript.
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4. The editor makes a final decision based on editorial priorities, manuscript quality, and reviewer recommendations.
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The Reviewer is Asked to Focus on the Following Issues:

1. **General recommendation about the manuscript**
How original is the manuscript?

Is it well presented?
How is the length of the manuscript?

2. Publication timing, quality, and priority

How important is the manuscript in this field?
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3. Specific questions regarding the quality of the manuscript

Does the title describe the study accurately?
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Do the authors state the study question in the introduction?
Are the methods clear?
Are ethical guidelines met?
Are statistical analyses appropriate?
Are the results presented clearly?

Does the discussion cover all of the findings?
Are the references appropriate for the manuscript?

4. Remarks to the editor

Accepted in its present form
Accepted after modest revisions
Reconsidered for acceptance after major changes
Rejected

5. Remarks to the author

What would be your recommendations to the author?
Conflict of interest statement for the reviewer (Please state if a conflict of interest is present)
For further instructions about how to review, see Reviewing Manuscripts for Archives of Pediatrics & Adolescent Medicine by Peter Cummings, MD, MPH; Frederick P. Rivara, MD, MPH in Arch Pediatr Adolesc Med. 2002;156:11-13.

Reviews

- 1** Novel Modulators of the Growth Hormone - Insulin-Like Growth Factor Axis: Pregnancy-Associated Plasma Protein-A2 and Stanniocalcin-2
Masanobu Fujimoto, Vivian Hwa, Andrew Dauber, (Cincinnati, Ohio, USA)
- 9** Latest Insights on the Etiology and Management of Primary Adrenal Insufficiency in Children
Tülay Güran, (Istanbul, Turkey)
- 23** The Rationale for Growth Hormone Therapy in Children with Short Stature
Annalisa Deodati, Stefano Cianfarani, (Rome, Italy, Stockholm, Sweden)
- 33** A Critical Appraisal of the Effect of Gonadotropin-Releasing Hormon Analog Treatment on Adult Height of Girls with Central Precocious Puberty
Abdullah Bereket, (Istanbul, Turkey)
- 49** Insulin Resistance, Prediabetes, Metabolic Syndrome: What Should Every Pediatrician Know?
Ahmad Ighbariya, Ram Weiss, (Haifa, Israel)
- 58** Current Nomenclature of Pseudohypoparathyroidism: Inactivating Parathyroid Hormone/Parathyroid Hormone-Related Protein Signaling Disorder
Serap Turan, (Istanbul, Turkey)
- 69** Congenital Hyperinsulinism: Diagnosis and Treatment Update
Hüseyin Demirbilek, Khalid Hussain, (Ankara, Turkey, Doha, Qatar)
- 88** Genetic Causes of Rickets
Sezer Acar, Korcan Demir, Yufei Shi, (Izmir, Turkey, Riyadh, Saudi Arabia)
- 106** Sex Assignment in Conditions Affecting Sex Development
Renata Markosyan, S. Faisal Ahmed, (Yerevan, Armenia, Glasgow, United Kingdom)
- 113** Update on the Genetics of Idiopathic Hypogonadotropic Hypogonadism
A. Kemal Topaloğlu, (Mississippi, USA, Adana, Turkey)



Dear Colleagues,

This special issue of The Journal of Clinical Research in Pediatric Endocrinology (JCRPE) entitled "Pediatric Endocrinology update 2017" is intended to provide our readers with information on some of the latest developments and newest clinical practice recommendations in certain areas of pediatric endocrinology. Knowledge in the field of pediatric endocrinology is growing fast, owing mostly to booming data accumulation due to the increasing use of next generation sequencing techniques in molecular biology which have expanded the etiologic spectrum of many endocrinologic diseases, such as hypogonadotropic hypogonadism, adrenal insufficiency and congenital hyperinsulinemia. On the

other hand, data coming from contemporary studies have highlighted the need for new nomenclatures in certain areas such as pseudohypoparathyroidism, or a re-evaluation of clinical practice in conditions such as "central precocious puberty" and "metabolic syndrome and insulin resistance". This special issue is intended to supply the reader with a balanced blend of reviews in selected areas of pediatric endocrinology, covering both these rapidly changing areas.

I am indebted to a distinguished list of authors who have devoted their precious time to fulfilling this aim and who have made this special issue possible.

I wish you a happy and prosperous new year.

Abdullah Bereket MD, Guest Editor

CONGRESS CALENDAR

22th National Congress of Pediatric Endocrinology and Diabetes
18-22 April 2018, Belek/Antalya, Turkey

20th International Conference on Pediatrics & Primary Care
3-4 September 2018, Zurich, Switzerland