

JCRPE

Journal of Clinical Research in Pediatric Endocrinology

March 2025

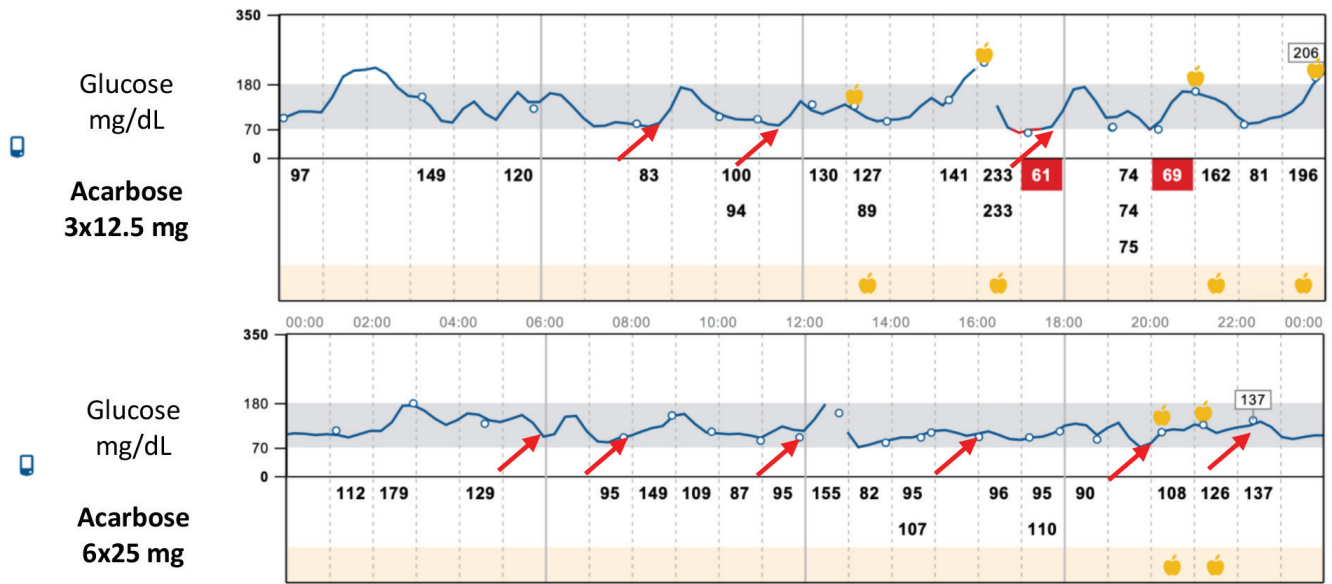
volume 17

issue 1

www.jcrpe.org

ISSN: 1308-5727

E-ISSN: 1308-5735



Continuous Glucose Monitoring Systems and the Efficacy of Acarbose Treatment in Cystic Fibrosis-related Dysglycemia

Arslan E et al.

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Official Journal of
Turkish Society for Pediatric
Endocrinology and Diabetes

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Printing at: Son Sürat Daktilo Dijital Baskı San. Tic. Ltd. Şti.

Address: Gayrettepe Mah. Yıldızposta Cad. Evren Sitesi A Blok No: 32 D: 1-3
34349 Beşiktaş, İstanbul/Turkey
Phone: +90 212 288 45 75
Date of printing: March 2025
ISSN: 1308-5727 E-ISSN: 1308-5735

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Table 1.

Article Type	Fee
Original article	\$ 350
Case Report	\$ 275
Noninvited Review	\$ 500

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*Please note that the Article Processing Charge (APC) will not affect neither the editorial and peer-review process nor the priority of the manuscripts by no means. All submissions will be evaluated by the Editorial Board and the external reviewers in terms of scientific quality and ethical standards.

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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 4000 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 5000 words and include no more than four figures and tables and 120 references.

Case Reports are descriptions of a case or small number of cases revealing novel and important insights into a condition's pathogenesis, presentation, and/or management. These manuscripts should be 2500 words or less, with four or fewer figures and tables and 30 or fewer references.

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All Submissions Must Include:

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- Each section (abstract, text, references, tables, figures) should start on a separate page.
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- Authors' names, and institutions, and e-mail addresses
- Corresponding author's e-mail and post address, telephone and fax numbers
- At least five and maximum eight keywords. Do not use abbreviations in the keywords
- Word count (excluding abstract, figure legends and references)
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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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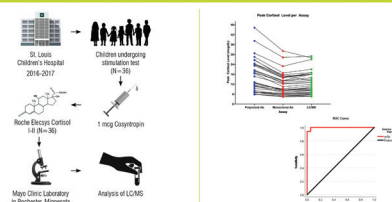
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Peak Serum Cortisol Cutoffs to Diagnose Adrenal Insufficiency Across Different Cortisol Assays in Children

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CONCLUSION

To prevent overdiagnosis of AI in children undergoing 1 mcg Cosyntropin stimulation test, our data support using a new peak serum cortisol cutoff of 12.5 µg/dL and 14 µg/dL to diagnose AI when using mAb immunoassays and LC/MS in children, respectively.

Cortez et al., 2023

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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.

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The kind of contribution of each author should be stated.

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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.

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2. Publication timing, quality, and priority

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Are the methods clear?
Are ethical guidelines met?
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Does the discussion cover all of the findings?
Are the references appropriate for the manuscript?

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Clinical Trials
Observational Studies
Systematic Review
Diagnostic and Prognostic Studies

Review

- 1 Rationale for Long-acting Growth Hormone Therapy and Future Aspects
Semra Çetinkaya, Erdal Eren, Furkan Erdoğan, Feyza Darendeliler

Original Articles

- 9 Gender Difference and Changes in the Prevalence of Obesity Over Time in Children Under 12 Years Old: A Meta-analysis
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- 17 Inequalities in Access to Diabetes Technologies in Children with Type 1 Diabetes: A Multicenter, Cross-sectional Study from Türkiye
Kağan Ege Karakuş, Sibel Sakarya, Ruken Yıldırım, Şervan Özalkak, Mehmet N. Özbek, Nurdan Yıldırım, Gülcan Delibağ, Beray S. Eklioğlu, Belma Haliloğlu, Murat Aydın, Heves Kırmızıbekmez, Tuğba Gökçe, Ecem Can, Elif Eviz, Gül Yeşiltepe-Mutlu, Şükrü Hatun
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