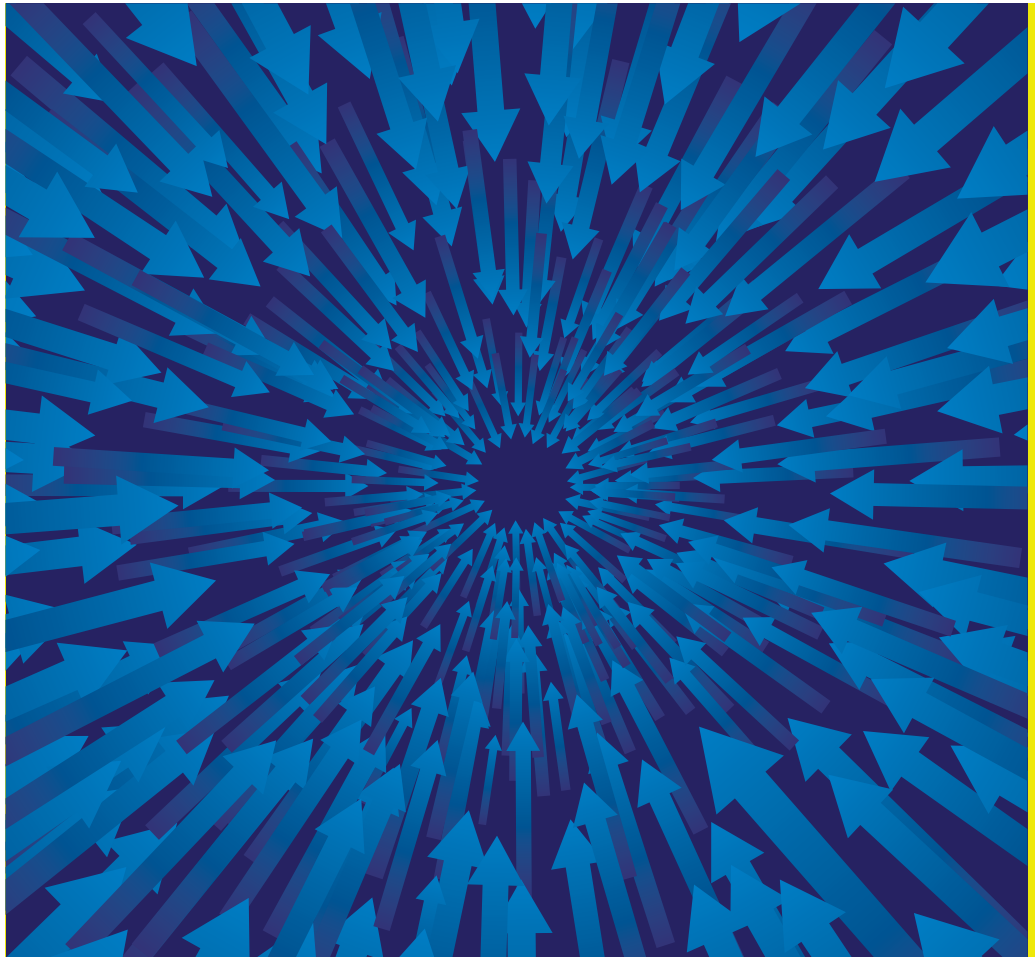


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The Journal of Basic and Clinical Health Sciences (J Basic Clin Health Sci) is an international open access periodical officially owned by the Dokuz Eylül University, Institute of Health Sciences. The Journal is published quarterly (January, May and September) in English.

The JBACHS contain peer-reviewed original articles, editorials, reviews, pictorial essays, technical notes, letters to the editor and case reports related to all fields of basic and clinical health sciences.

The Journal of Basic and Clinical Health Sciences (JBACHS) is a multidisciplinary journal aimed at attracting contributions from basic and clinical health sciences as well as community medicine and public health.

The JBACHS has a special focus on research on translational medicine. The manuscripts linking basic science with the clinical and population practice will be given priority in the journal.

JBACHS also focuses on providing physicians with continuing education in basic and clinical sciences to enhance clinical decisions and improve health care quality internationally. The target audience of the journal includes academicians, researchers, specialists and primary care physicians working in the fields of basic and clinical health sciences.

Editorial and publication processes of the JBACHS are shaped in accordance with the guidelines of the international organizations such as the International Council of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), the Council of Science Editors (CSE), the Committee on Publication Ethics (COPE), the European Association of Science Editors (EASE). The journal is in conformity with Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice). Processing and publication is free of charge with the Journal of Basic and

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The journal mainly aims to publish original, important and valid research articles in health sciences as well as reviews, pictorial essays, technical notes and case reports related to all fields of basic and clinical sciences. It also focuses on providing physicians with continuing education in basic and clinical sciences to enhance clinical decisions and improve health care quality internationally.

Editorial and publication processes of the journal are shaped in accordance with the guidelines of the international organizations such as the International Council of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), the Council of Science Editors (CSE), the Committee on Publication Ethics (COPE), the European Association of Science Editors (EASE). The journal is in conformity with Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/best-practice).

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2. Drafting the work or revising it critically for important intellectual content; AND
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4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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Keywords: Each submission must be accompanied by a minimum of three and a maximum of six keywords for subject indexing at the end of the abstract. The keywords should be listed in full without abbreviations.

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Original Articles: This is the most important type of article since it provides new information based on original research. If the information is accurate and important, and the conclusions are substantiated by the data provided, the paper serves to advance health sciences.

The main text should be structured with Introduction, Methods, Results and Discussion subheadings. Please check Table I for limitations for Original Articles.

Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with the

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Review Articles: Review articles are scientific analysis of recent developments on a specific topic as reported in the literature. Articles prepared by authors who have extensive knowledge on a particular field and whose scientific background has been translated into high volume of publication and high citation potential are taken under review. No new information is described, and no opinions or personal experiences are expressed. Reviews should only include the highlights on a subject.

The authors can structure the main text of review articles as they see fit. Please check Table I for limitations for Review Articles.

Case Reports: There is limited space for case reports in the journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include Introduction, Case Presentation, and Discussion subheadings. Please check Table I for the limitations for Case Report.

Pictorial Essay: This is a continuing medical education exercise with a teaching message in the figures and their legends. Pictorial Essays may have as many as 15 Figures (or 30 images). No new

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Type of manuscript	Word limit	Abstract word limit	Reference limit	Table limit	Figure limit
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
Case Report	1000	200	15	No tables	10 or total of 20 images
Pictorial Essay	1500	400	20	No tables	15 or total of 30 images
Letter to the Editor	500	No abstract	5	No tables	No media
Technical Note	1500	200	8	2	3 or total of 6 images

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Technical Note: Technical notes are brief descriptions of specific techniques, procedures, modifications of techniques, or new equipment of interest to physicians. It should include a brief introduction followed by Technique section for case reports or Materials and methods section for case series and a Discussion that is limited to the specific message, including the uses of the technique, equipment or software. Please check Table I for limitations for Technical Notes.

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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 an 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 labelled (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 300DPI. To prevent delays in the evaluation process all submitted figures should be clear in resolution and large in size (minimum dimensions 100x100 mm). Figure legends should be listed at the end of the main document.

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

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Book Section: Sherry S. Detection of thrombi. In: Strauss HE, Pitt B, James AE, editors. *Cardiovascular Medicine*. St Louis: Mosby; 1974.p.273-285.

Books with Single Author: Cohn PF. *Silent myocardial ischemia and infarction*. 3rd ed. New York: Marcel Dekker; 1993.

Editor(s) as author: Norman IJ, Redfern SJ, editors. *Mental health care for elderly people*. New York: Churchill Livingstone; 1996.

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.p.1561-1565.

Scientific or Technical Report: Smith P. Golladay K. Payment for durable medical equipment billed during skilled nursing facility stays. Final report. Dallas (TX) Dept. of Health and Human Services (US). Office of Evaluation and Inspections; 1994 Oct. Report No: HHSIGOE I69200860.

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Epub ahead of print Articles:

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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/ncidod/EID/cid.htm](http://www.cdc.gov/ncidod/EID/cid.htm).

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Editorial

The era we live in is unpredictable and chaotic. *The rapid urbanization* of the developing world, which promotes sedentary lifestyles and unhealthy nutrition with processed foods high in sugar, processed meats and grains, and unhealthy types of fats, cause epidemics of obesity, diabetes and cardiovascular diseases. It is predicted that the burden of chronic diseases will further increase in low and middle income countries in Asia and Africa in next decades. *The growing disparity and unfair distribution of the wealth* create anger and unrest in many parts of the world. The communities are divided in various ways and there is always an ongoing war in some parts of the world. The chain of poverty, environmental shocks, wars, mass migration and violence is getting longer. *Global climate* change threatens population health through heat waves, droughts, storms and floods, and hence migration to other countries. Western capitals are under the threat of *terrorist attacks* which deteriorates the mental health of the communities. It is likely that the social and environmental threats to human will gradually increase.

Science is defined as a systematic and logical approach to discovering how things in the universe work. Science is done through observation of natural phenomena, and/or through experimentation that tries to simulate natural processes under controlled conditions. In medicine, we use scientific methods to understand the mechanisms and determinants of health status. Health is a complex result of individual, social, political and environmental determinants. In the causal pathway, we can count wide range of factors from molecules, genetics, epigenetics, mutations, physical and biological environment to treatment, health behaviour and health care delivery. Despite the huge developments in understanding and managing the mechanisms of diseases, substantial efforts are still needed to prevent loss of lives from ignorance, war or terrorism.

The Journal of Basic and Clinical Health Sciences (JBACHS) has a wide perspective to health and aims to publish research papers from basic and clinical health sciences as well as social medicine and public health. The second issue of the Journal of Basic and Clinical Health Sciences (JBACHS) includes articles from animal research to clinical research capacity which we think will attract attention of scientists from wide range of scientific fields.

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