



Turkish Journal of Nephrology

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Page 8

When a Patient
with CKD
Needs Contrast
Radiography

Page 17

Role of Local
Renin Angiotensin
System Activation
on Blood Pressure
and Residual
Renal Function in
Peritoneal Dialysis
Patients



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Aims and Scope

Turkish Journal of Nephrology (Turk J Nephrol) is the double-blind peer reviewed, open access, international online-only publication of the Turkish Society of Nephrology. The journal is a quarterly publication, published on January, April, July and October. The publication language of the journal is English.

Turkish Journal of Nephrology aims to contribute to the literature by publishing manuscripts at the highest scientific level on the fields of nephrology, dialysis and transplantation. The journal publishes original articles, rare case reports, reviews, and letters to the editor that are prepared in accordance with the ethical guidelines.

The scope of the journal includes but not limited to; remarkable clinical and experimental investigations conducted in all fields of nephrology. The target audience of the journal includes specialists and professionals working and interested in all disciplines of nephrology and kidney care.

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).

Turkish Journal of Nephrology is currently indexed in Web of Science-Emerging Sources Citation Index, Scopus, EBSCO, and TUBITAK ULAKBIM TR Index.

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.turkjnephrol.org.

The journal guidelines, technical information, and the required forms are available on the journal's web page.

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Instruction to Authors

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Originality, high scientific quality, and citation potential are the most important criteria for a manuscript to be accepted for publication. Manuscripts submitted for evaluation should not have been previously presented or already published in an electronic or printed medium. The journal should be informed of manuscripts that have been submitted to another journal for evaluation and rejected for publication. The submission of previous reviewer reports will expedite the evaluation process. Manuscripts that have been presented in a meeting should be submitted with detailed information on the organization, including the name, date, and location of the organization.

Manuscripts submitted to Turkish Journal of Nephrology will go through a double-blind peer-review process. Each submission will be reviewed by at least two external, independent peer reviewers who are experts in their fields in order to ensure an unbiased evaluation process. The editorial board will invite an external and independent editor to manage the evaluation processes of manuscripts submitted by editors or by the editorial board members of the journal. The Editor in Chief is the final authority in the decision-making process for all submissions.

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volving Human Subjects," amended in October 2013, www.wma.net) is required for experimental, clinical, and drug studies and for some case reports. If required, ethics committee reports or an equivalent official document will be requested from the authors. For manuscripts concerning experimental research on humans, a statement should be included that shows that written informed consent of patients and volunteers was obtained following a detailed explanation of the procedures that they may undergo. For studies carried out on animals, the measures taken to prevent pain and suffering of the animals should be stated clearly. Information on patient consent, the name of the ethics committee, and the ethics committee approval number should also be stated in the Materials and Methods section of the manuscript. It is the authors' responsibility to carefully protect the patients' anonymity. For photographs that may reveal the identity of the patients, signed releases of the patient or of their legal representative should be enclosed and the publication approval must be provided in the Materials and Methods section.

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- 2 Drafting the work or revising it critically for important intellectual content; AND
- 3 Final approval of the version to be published; AND
- 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.

In addition to being accountable for the parts of the work he/she has done, an author should be able to identify which co-authors are re-

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Manuscripts submitted to the journal will first go through a technical evaluation process where the editorial office staff will ensure that the manuscript has been prepared and submitted in accordance with the journal’s guidelines. Submissions that do not conform to the journal’s guidelines will be returned to the submitting author with technical correction requests.

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Title page: A separate title page should be submitted with all submissions and this page should include:

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- Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

Abstract: An abstract should be submitted with all submissions except for Letters to the Editor. The abstract of Original Articles should be structured with subheadings (Objective, Materials and Methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

Keywords: Each submission must be accompanied by a minimum of three to a maximum of six keywords for subject indexing at the end of the abstract. The keywords should be listed in full without abbreviations. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (<https://www.nlm.nih.gov/mesh/MBrowser.html>).

Manuscript Types

Original Articles: This is the most important type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Materials and Methods, Results, Discussion, and Conclusion subheadings. Please check Table 1 for the limitations for Original Articles.

Statistical analyses are essential features of medical studies, in order to answer the research questions with hypothesis testing. 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, as 'Statistical Analysis', under the Materials and Methods section. This section should detail the following:

(i) how the statistical assumptions are tested (e.g. Histogram and q-q plots were examined, Shapiro-Wilk's test was used to assess the data normality.);

(ii) which statistical methods are used for which purposes (e.g. To compare the miRNA levels of patients with and without CKD, a two-sided independent samples t test was applied.);

(iii) how the data values are expressed (e.g. Values are expressed as mean \pm SD or median(1st-3rd quartiles).);

(iv) which statistical software was used to analyze the data (e.g. Analyses were conducted using TURCOSA (Turcosa Analytics, Turkey) statistical software.).

Additionally, the study design (e.g. retrospective case-control, cross-sectional, cohort, etc.) and the sample size calculation procedure (power analysis) should also be detailed in the Materials and Methods section.

Units should be prepared in accordance with the International System of Units (SI).

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.

Review Articles: Reviews prepared by authors who have extensive knowledge on a particular field and whose scientific background has been translated into a high volume of publications with a high citation potential are welcomed. These authors may even be invited by the journal. Reviews should describe, discuss, and evaluate the current level of knowledge of a topic in clinical practice and should guide future studies. The main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the 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 in-

clude Introduction, Case Presentation, Discussion, and Conclusion subheadings. Please check Table 1 for the limitations for Case Reports.

Letters to the Editor: This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. Articles on subjects within the scope of the journal that might attract the readers' attention, particularly educative cases, may also be submitted in the form of a "Letter to the Editor." Readers can also present their comments on the published manuscripts in the form of a "Letter to the Editor." Abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should be unstructured. The manuscript that is being commented on must be properly cited within this manuscript.

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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 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.

Figures and Figure Legends

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.

All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

When a drug, product, hardware, or software program is mentioned within the main text, product information, including the name of the product, the producer of the product, and city and the country of the company (including the state if in USA), should be provided in parentheses in the following format: "Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)"

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.

References

While citing publications, preference should be given to the latest, most up-to-date publications. 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/

Table 1. Limitations for each manuscript type

| 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 |
| Letter to the Editor | 500 | No abstract | 5 | No tables | No media |

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.

Journal Article: Altun B, Soylemezoglu O, Tokgoz B, Yilmaz MI, Odabas AR, Koc M. Hemodialysis complications. *Turk Neph Dial Transpl* 2010; 70: 1-4.

Book Section: Sagawa K. Analysis of the CNS ischemic feedback regulation of the circulation. Reeve EB, Guyton AC (eds). *Physical Basis of Circulation Transport*. Philadelphia: WB Saunders, 1967; p.129-139.

Books with a Single Author: West JB. *Respiratory Physiology*. 2nd ed. Baltimore: Williams and Wilkins; 1974.

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

Conference Proceedings: Bengissson 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: Abood S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. *Am J Nurs (serial online)*. 2002 Jun (cited 2002 Aug 12): 02(6). Available from: <http://www.nursingworld.org/AJN/2002/june/Wawatch.htm>

Revisions

When submitting a revised version of a paper, the author must submit a detailed “Response to the reviewers” that states point by point how each issue raised by the reviewers has been covered and where it can be found (each reviewer’s comment, followed by the author’s reply and line numbers where the changes have been made) as well as an annotated copy of the main document. Revised manuscripts must be submitted within 30 days from the date of the decision letter. If the revised version of the manuscript is not submitted within the allocated time, the revision option may be canceled. If the submitting author(s) believe that additional time is required, they should request this extension before the initial 30-day period is over.

Accepted manuscripts are copy-edited for grammar, punctuation, and format. Once the publication process of a manuscript is completed, it is published online on the journal’s webpage as an ahead-of-print publication before it is included in its scheduled issue. A PDF proof of the accepted manuscript is sent to the corresponding author and their publication approval is requested within 2 days of their receipt of the proof.

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Contents

Editorial

- Burden, Access, and Disparities in Kidney Disease 1
Deidra C. Crews, Aminu K. Bello, Gamal Saadi; for the World Kidney Day Steering Committee

Decision Making in Clinical Nephrology

- When a Patient with CKD Needs Contrast Radiography 8
Yaşar Çalışkan

Original Articles

- Comparison of the Effects of Uremia and Metabolic Disorders on the Development of Insulin Resistance 12
Nilgöl Akalın, Mehmet Ali Uran, Mustafa Uçar, Hanişe Özkan, İrem Kırac Utku
- Role of Local Renin Angiotensin System Activation on Blood Pressure and Residual Renal Function in Peritoneal Dialysis Patients 17
Tolga Yıldırım, Rahmi Yılmaz, Alper Azak, Mahmut Altındal, Ercan Türkmen, Mustafa Arıcı, Murat Duranay, Yunus Erdem, Bülent Altun
- New Method to Predict Survival in Hemodialysis Patients Using the Impedance Ratio 24
Ender Hür, Cenk Gökalg, Şennur Kose, Elif Duman, Kemal Mağden, Gürsel Yıldız, Bilal Toka, Siren Sezer, Soner Duman
- Effect of Intravenous Active Vitamin-D Treatment on the Left Ventricular Mass Index in Chronic Hemodialysis Patients with Secondary Hyperparathyroidism 30
Kadir Gökhan Atılğan, İhsan Ergün, Mehmet Deniz Aylı, Ali Rıza Odabaş
- The Level of Satisfaction from Nursing Care and Social Support of Organ Transplant Patients 34
Tuğçe Yeşilyaprak, İlknur Pekpazar, Eda Dolgun, Meryem Yavuz Van Giersbergen
- The Effect of Quality of Sleep on Depression in Hemodialysis Patients 38
Selçuk Mıstık, Demet Ünalın, Hümeysra Aslaner, Merve Çalışkan, Hacı Ahmet Aslaner, Bülent Tokgöz
- Risk Factors for Catheter Related Central Venous Thrombosis in Hemodialysis Patients 43
Kemal Mağden, Bilal Toka, İbrahim Yıldırım, Gürsel Yıldız, FÜRÜZAN Köktürk, Cem Çil, Nesimi Yavuz, Ender Hür
- Neutrophil Gelatinase-Associated Lipocalin: A New Biomarker for the Differential Diagnosis of Anemia? 48
Gökhan Temiz, Meltem Akay, Mustafa Karagülle, Salih Tokmak, Fezan Mutlu, Ahmet Uğur Yalçın
- The Impact of Peritonitis on Clinical Outcomes of PD Patients: A Single Center Experience 54
Zuhal Atan Uçar, Yener Koç, Taner Baştürk, Feyza Bayraktar Çağlayan, Tamer Sakacı, Elbis Ahabap, Ayşe Sinangil, Mustafa Sevinç, Arzu Kayalar, Nuri Barış Hasbal, Abdulkadir Unsal
- Relationship Between Monocyte/HDL Cholesterol Ratio and Urinary Protein Excretion in Patients with Primary Hypertension with Reverse Dipper Pattern 62
Bilal Katipoğlu, İhsan Ateş, Burak Furkan Demir, Gökhan Yirgin, Nisbet Yılmaz, Fatih Dede
- Evaluation of Genotypic and Phenotypic Characteristics of Children with Familial Mediterranean Fever in Eastern Turkey 68
Hülya Kalem, Burcu Kayhan Tetik, Yılmaz Tabel, Engin Burak Selçuk, Ahmet Taner Elmas

Review

Smoking and Chronic Kidney Disease
Bülent Yardımcı, Tevfik Ecder

75

Case Reports

Colchicine- and Clarithromycin-Induced Rhabdomyolysis in a Hemodialysis Patient with Familial Mediterranean Fever
Amir Hossein Abedi, Eray Erođlu, İsmail Koçyiđit, Aydın Ünal, Murat Hayri Sipahiođlu, Bülent Tokgöz, Oktay Oymak

81

Microscopic Polyangiitis Nodosa: A Rare Cause of Cerebral Hemorrhage
Bariş Eser, Osman Nuri Koyun, İbrahim Dođan, Mustafa Şahin, Aysel Çolak, Nihal Özkayar

84

Case Report of a Patient with Goodpasture's Syndrome Who Relapsed While on Hemodialysis
Tuba Elif Şenel, Sami Uzun, Egemen Cebeci, Oktay Özkan, Ahmet Behlül, Ayça Erođlu, Yasemin Özlük, Savaş Öztürk

88

A Rare Renal Anomaly: Nutcracker Syndrome

Egemen Şenel, Hasan Basır, Betül Güzel, Murat Baykara, Ertuđrul Erken, Orçun Altunören, Özkan Güngör

91

Acute Kidney Injury Secondary to Rhabdomyolysis in Case with Gitelman Syndrome
Bilal Katipođlu, İhsan Ateş, Nazlı Pelin Aslan, Nisbet Yılmaz

94

Letter to the Editor

The Relationship between Diabetes Mellitus and Electrolyte Disorders
Yusuf Ziya Şener, Seher Şener

96

Editorial

A New Beginning with a New Name

*“You can never step into the same river twice”
- Heraclitus*

Dear Readers,

I am happy to announce that our journal is going through an innovative development process this year. We are entering into a new stage with important structural changes by which our journal will be acknowledged internationally in its field.

Firstly, our journal will be titled “Turkish Journal of Nephrology” as of January 2019, which is more brief but inclusive. We have also changed our publication frequency and will publish quarterly. Our enriched content will be presented with an entirely renewed website. Following from these structural changes, we have decided to publish all papers in English, considering that it is extensively accepted as the main language in scientific communication.

Turkish Journal of Nephrology is now a fully open access journal. We have updated our practices in accordance with the Budapest Open Access Initiative (BOAI) and our content will be licensed under a Creative Commons Attribution International License. This means all its content may freely be copied, redistributed, and reused, transformed and built upon the material for any purpose as long as the author and original source are properly cited.

As the highlight of the very first issue of 2019, we co-published an internationally recognized Editorial of the World Kidney Day which focuses on the burden of kidney disease this year. Turkish Journal of Nephrology is one of the many journals that publish this editorial to help raise awareness of kidney disease and disparities in its prevention and management worldwide.

I would like to express my deep gratitude to the executive committee of the Turkish Society of Nephrology and all editorial board members for their encouraging support. I hope you enjoy the very content of this new issue and wish that you will accompany the progress of our journal with your valuable contributions.

Bülent Tokgöz
Editor in Chief