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After the February 6 Kahramanmaraş Earthquakes, Evaluation of People's Earthquake Knowledge and Attitudes

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Background: Earthquake is an inevitable reality for Türkiye and a priority problem for which the society should always be aware and ready. In order to prevent irreparable loss of life, socio-economic and environmental damages, it is of vital importance for every individual to be aware of earthquakes and to take applicable measures. In this study, we aimed to examine the level of earthquake knowledge and behavioral characteristics of individuals aged 18 years and older living in Türkiye.

Materials and Methods: The study was conducted with the participation of 420 people as a questionnaire survey with multiple-choice determinative questions. The distribution of quantitative variables to assess the level of earthquake knowledge and preparedness was analyzed using the Shapiro-Wilk test. Comparisons between groups were analyzed using the independent samples t-test.

Results: The mean age of the 420 participants was 27.64 ± 10.66 years. The mean earthquake knowledge score was 85.60 ± 13.52 and the mean earthquake behavior score was 42.40 ± 23.38. Other socio-demographic data of the study are given in Table. No significant difference was found between the earthquake knowledge scale score and socio-demographic characteristics ($p > 0.05$). While no significant difference was found between the earthquake behavior score scale and gender, whether the house was rented or not, and the status of studying or graduating from health-related departments ($p > 0.05$), a significant difference was found between those who had experienced a major earthquake before and those who were in the affected area during the February 6 earthquake ($p < 0.05$).

Conclusion: Türkiye is located in the first degree earthquake zone due to its geological location. It was found that the mean knowledge scores of the participants were higher than the mean behavioral scores. As a result of our findings, it seems possible to ensure a safer life for individuals living in earthquake-prone areas by providing more information and lifestyle changes.

Keywords: Earthquake, information, society, public

Table 1. Socio-demographic data		n (420)	%
Gender	Female	299	71.2
	Male	121	28.8
Is the house you live in rented?	Yes	128	30.5
	No	292	69.5
Have you ever experienced a major earthquake (e.g., Van, Marmara)?	Yes	106	25.2
	No	314	74.8
Were you in the affected region during the February 6 earthquake?	Yes	38	9
	No	382	91
Are you studying or have you graduated from a healthcare-related field?	Yes	159	37.9
	No	261	62.1
Have you taken out compulsory earthquake insurance?	Yes	143	34
	No	277	66
Have you designated a meeting place for after an earthquake?	Yes	154	36.7
	No	266	63.3

Successful Management of a Rare and Fatal Complication of Cardiac Catheterization: Abdominal Compartment Syndrome

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Background: Retroperitoneal hematoma (RPH) occurs as a result of damage to the vessels located behind the peritoneal layer. This can lead to damage to organs and an increased mortality rate with severe hemorrhagic shock. RPH can cause abdominal compartment syndrome (ACS) as a result of a sudden increase in intra-abdominal pressure. ACS usually presents with clinical manifestations with cardiovascular, renal oliguria and anuria. Left untreated, this condition can result in multiple organ failure.

Materials and Methods: In this study, we investigated the case of a 55-year-old male patient who was admitted to the emergency department with complaints of abdominal pain, dyspnea and weakness and underwent aortic and mitral valve replacement seven years ago. The patient was on regular warfarin and physical examination revealed stiffness in the lower right abdomen. Blood pressure was 81/56 mmHg, pulse was 121 bpm, oxygen saturation was 95%, hemoglobin was 6.9 g/dL, serum creatinine was 1.9 and urea was 79 mg/dL. The patient had undergone coronary angiography a week earlier and extravation was eliminated was detected. Extravation was eliminated with V12 stent-graft application and the patient was kept under observation in the coronary intensive care unit for one day. Intra-abdominal pressure was measured as 16 mmHg in the patient who developed oliguria in the first hours. Six hours later, anuria developed and intra-abdominal pressure increased to 26 mmHg. The patient was diagnosed with ACS and surgical decompression was performed. One day after the operation, anticoagulation therapy was started again.

Results: The development of ACS was associated with the rapid progression of RPH. As a result of early surgical intervention and follow-up, the patient's kidney functions returned to normal and the patient was stabilized. The treatment process was successfully completed and the patient was discharged on the tenth day.

Conclusion: RPH is a rare complication after cardiac catheterization and may present with hypotensive, tachycardic and anemia findings. Early invasive approach and surgical intervention is vital, especially in cases where hemodynamic conditions are unstable. Since the increase in intra-abdominal pressure with the progression of RPH can lead to multiple organ failure, urgent surgical intervention is necessary.

Keywords: Etroperitoneal hematoma, abdominal compartment syndrome, surgical decompression, cardiac catheterization complication, intra-abdominal pressure

The Relationship Between Hemogram Parameters and Erythrocyte Sedimentatıon Rate at the Time of Diagnosis in Newly Diagnosed Solid Cancer Patients with Cancer Type and Stage

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Background: The incidence of cancer is rapidly increasing worldwide, and its treatability is often related to its stage at the time of diagnosis. Hemogram parameters and erythrocyte sedimentation rate (ESR), which reflects the degree of erythrocyte aggregation, are simple and low-cost tests that can be used for diagnosis and monitoring in all inflammatory and infectious diseases. These values can vary at the time of diagnosis in solid cancers. This study aims to investigate the relationship between hemogram parameters and ESR at the time of diagnosis with the stage and type of cancer in solid organ malignancies and evaluate their potential use in early diagnosis.

Materials and Methods: The study randomly selected newly diagnosed solid cancer patients (lung, breast, gastrointestinal system, and others including larynx, prostate, and urothelial cancers) who were admitted to the hospital. At the time of diagnosis, the type and stage of the tumor, hemoglobin level, platelet count, mean platelet volume (MPV), and ESR were recorded for all patients. Patients with active infections, autoimmune diseases, or hematological malignancies were excluded from the study. The relationship between tumor stage and ESR and hematological parameters was statistically evaluated.

Results: A total of 58 patients were included in the study, consisting of 27 women (46%) and 31 men (54%), with a mean age of 60.5±15 years. The clinical and laboratory data of the patients are presented in Table 1. A weak negative correlation was observed between tumor stage and MPV, platelet count, and ESR (r=0.02, 0.04, 0.15). No statistically significant association was found between hematological parameters and ESR at diagnosis with cancer type and stage (p<0.005).

Conclusion: Although an increased erythrocyte sedimentation rate and anemia are most commonly seen in multiple myeloma and hematological diseases, they can be entirely normal in solid cancers, with anemia potentially developing in later stages for various reasons. Moreover, in cases where infection and inflammation are excluded, pathological values can guide the clinician in the diagnosis of cancer. These findings should be supported by studies with larger sample sizes.

Keywords: Solid cancers, erythrocyte sedimentation rate, hemoglobin levels, cancer staging, platelet count

Table 1. Clinical and laboratory data of patients				Min.-max.	Median	Mean	%
Age				34-80	61.5	60.5	
Gender		Female	27				46.55
		Male	31				53.48
Lung cancer		Early stage	1				1.7
		Advanced stage	15				25.8
Breast cancer		Early stage	1				1.7
		Advanced stage	8				13.7
GI cancer		Early stage	5				8.6
		Advanced stage	21				36.2
Others		Early stage	0				0
		Advanced stage	7				12
Sedimentation	Lung cancer			2-127	38.5	43.25	
	Breast cancer					62.11	
	GI cancer					46.4	
	Others					41.14	
Hemoglobin	Lung cancer			7-15.9	11.95	11.77	
	Breast cancer					11	
	GI cancer					11.94	
	Others					12.48	
MPV	Lung cancer			7.2-12.5	10.25	9.38	
	Breast cancer					9.82	
	GI cancer					10.11	
	Others					9,51	
Platelet	Lung cancer			53×10^3 513×10^3	288×10^3 280.000 293.692 316.571	275.875	
	Breast cancer						
	GI cancer						
	Others						
Min.-max.: Minimum-maximum, GI: Gastrointestinal, MPV: Mean platelet volume							

Persisting Challenges: A Rare Case of Enterocutaneous Fistula After Appendectomy

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Background: Acute appendicitis is one of the most common surgical emergencies in modern medical practice. Appendectomy is considered a reliable intervention for removing an inflamed appendix. Although the formation of a fistula after appendectomy is relatively rare, it presents a significant medical challenge for patients. Even though appendectomy is regarded as a safe procedure, it can rarely lead to fistula formation. These abnormal connections or pathways may result from leakage from the appendix remnants, tumors originating from the appendix or cecum, infectious bowel diseases such as tuberculosis, inflammatory bowel disorders like Crohn's disease, or lower bowel obstructions. In this study, we will discuss a patient who presented to the emergency department with a fistula one year after an appendectomy.

Materials and Methods: On 23.08.2022, a 35-year-old male patient with no known medical or family history was admitted and underwent surgery through a McBurney incision. Preoperatively, acute appendicitis was diagnosed. During the surgery, perforated appendicitis was observed, and a linear stapler was used at the base of the appendix. Postoperatively, fecaloid discharge was observed from the surgical site. Therefore, intravenous and rectal contrast-enhanced abdominal and pelvic computed tomography scans were performed, revealing contamination in the pericecal region with contrast extravasation extending to the skin, but no evidence of contrast leakage into the abdominal cavity was found.

Results: During a colonoscopy, it was observed that the mucosa protruded toward the cecum at the site where the appendix had been, and the internal opening of the fistula was clipped. The patient received antibiotic treatment with a combination of third-generation cephalosporin (2x1) and metronidazole (3x1) during hospitalization. Follow-up showed no increase in acute phase reactants, and a decrease in discharge from the wound was noted. However, during outpatient follow-up, fecaloid discharge from the wound site recurred. The patient was prepared for surgery, and on October 30, 2023, a procedure was performed with an ASA score of 2. During the surgery, a fistula opening extending from the cecum, where the appendix root was located, to the skin was observed. Since no inflammatory bowel disease or other pathologies were detected, wedge resection was decided. Wedge resection was performed using a green linear stapler.

Conclusion: Although fistula formation after appendectomy is rare, it can lead to severe consequences. This condition has not been adequately studied in the literature, and the lack of established protocols has further complicated the treatment process. The case highlighted the diagnostic and treatment challenges of a rare fistula developing after appendectomy. Therefore, clinical suspicion and approaches tailored to individual patient characteristics are essential.

Keywords: Enterocutaneous fistula, perforated appendicitis, linear stapler, postoperative infection, antibiotic treatment.
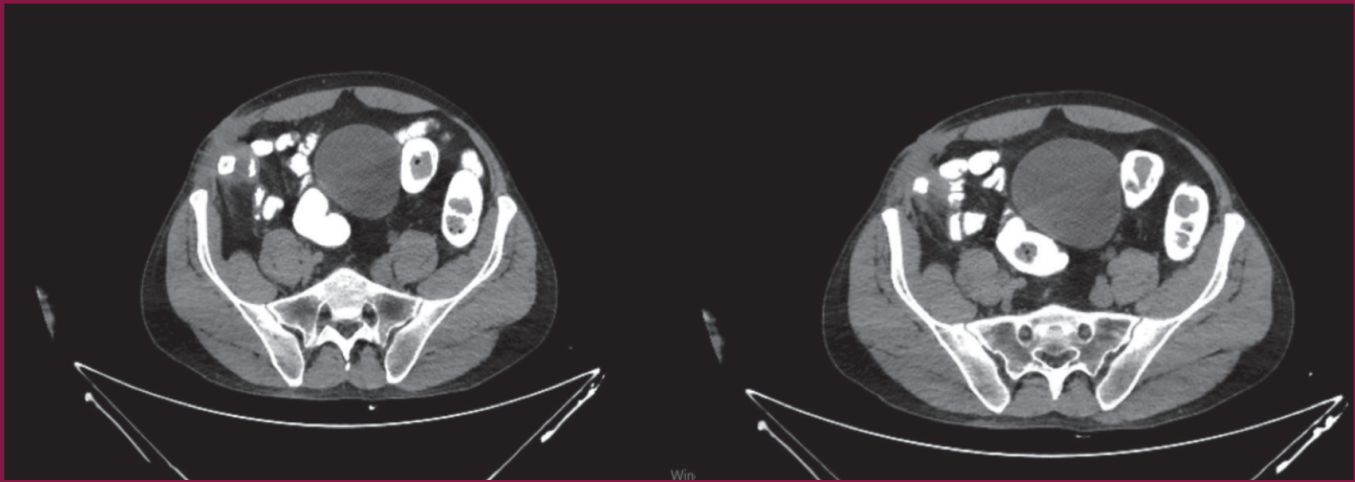
Figure 1. IV and rectal contrast-enhanced abdominal and pelvic scan showing pericecal contamination and skin extravasation
IV: Intravenous

Re-evaluating the Efficacy of Sphenopalatine Ganglion Block in the Treatment of Chronic Migraine

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Background: Migraine is a debilitating condition, more commonly seen in women, that affects a significant portion of the population and decreases quality of life. Chronic migraine (CM) is defined as headaches occurring on 15 or more days per month, with at least eight of those days meeting migraine criteria. Current treatment methods often fall short in terms of efficacy and safety. This study aims to evaluate the efficacy and safety of intranasal Sphenopalatine Ganglion Block (SPGB) with lidocaine in the treatment of CM.

Materials and Methods: Twelve CM patients treated at University of Health Sciences Türkiye, Kartal Dr. Lütfi Kırdar Training and Research Hospital, were included in the study. These patients underwent SPGB with lidocaine pump spray. The treatment was administered transnasally for 30 minutes and repeated monthly. Headache frequency and Visual Analog Scale (VAS) scores were recorded before the treatment and at one and three months after treatment. Statistical analyses were performed using SPSS ver. 20 and paired t-tests.

Results: The majority of the 12 patients were female, with an average CM duration of 7.3 years. Before treatment, patients experienced an average of 18.3 headache days per month, with a mean VAS score of 6.7. Significant reductions were observed in headache frequency, dropping from 18.3 to 11.3 days ($p < 0.001$) at the first month and to 8.3 days ($p < 0.001$) at the third month. Additionally, VAS scores decreased from 6.7 to 4.3 ($p < 0.001$) at the first month and to 3.7 ($p < 0.001$) at the third month. Side effects were mild and transient, with two patients reporting nasal congestion and rhinorrhea.

Conclusions: Intranasal SPGB with lidocaine appears to be an effective and well-tolerated method for CM treatment. Larger randomized studies are needed to confirm these findings and explore the potential of SPGB in combination with other migraine treatments.

Keywords: Migraine disorders, pterygopalatine ganglion, headache, pain measurement

Retrospective Analysis of Age at Diagnosis and Pathological Changes in Breast Cancer Patients Admitted to our Hospital

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Background: The aim of this study is to analyze the trucut biopsy results of breast cancer patients admitted to our hospital between 2013-2023 in collaboration with pathology and radiation oncology disciplines to determine how age at diagnosis and luminal changes change over time, whether there is an increase in diagnosis rates, whether the age at diagnosis should be brought forward when the patient age is younger, and whether there is a change in pathological types in the rate of triple negative patients.

Materials and Methods: In this observational retrospective study, data of breast cancer patients admitted to our hospital between 2013-2023 will be collected. The data set will include patients' age, gender, date of diagnosis, stage, luminal changes and pathological types. Diagnosis rates will be analyzed in Statistical Package for the Social Sciences program to evaluate the relationships between patient age and triple negative patient rates and changes over time. Patients diagnosed with breast cancer who applied to our hospital, patients diagnosed with trucut biopsy and breast cancer patients at all stages were included in the study. In addition, patients who were not diagnosed with breast cancer or were suspected of having breast cancer and patients diagnosed with methods other than trucut biopsy were not included.

Results: The study included a total of 3,635 patients. The mean age by year remained constant between 52.5 and 56 for 12 years. The majority of patients were diagnosed at or after the age of 50 (59.7%). In terms of stage at diagnosis, the majority were diagnosed in advanced stages, which alleviates concerns about early diagnosis. The majority of patients had low to moderate histological grades (64%), and estrogen receptor and/or progesterone receptor positivity was observed in 72.9% of the cases. There were significant correlations between immunohistochemical markers and hormone receptor expressions (estrogen receptor, progesterone receptor, human epidermal growth factor receptor 2, beta-catenin, cytokeratin, E-cadherin, calponin, and p63) and histological grades ($p<0.05$). In addition, an increase was observed in the rate of triple-negative breast cancer patients in the last 6 years.

Conclusion: This study evaluates the changes and effects in breast cancer diagnosis and provides valuable information on whether the age of diagnosis should be brought forward and determines whether there is a change in pathological types in triple negative patient rates. Collaboration between the disciplines of pathology and radiation oncology can contribute to the development of breast cancer-related policies and clinical practices by providing a more comprehensive assessment.

Keywords: Diagnosis age, breast cancer, luminal changes

Examination of Organizational Commitment and Job Satisfaction Levels on Psychopathological Factors in Doctors

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Background: Workplace standards and conditions are known to have effects on employees' quality of life and mental status. In this study, organizational commitment and job satisfaction levels' effects on Brief Symptom Inventory (BSI) scores was examined.

Materials and Methods: This study was conducted on doctors who are actively working in İstanbul. Data was collected via online questionnaire form consisting of 4 parts:

1. Socio-demographic questions

2. BSI Scale (53 items), reliability and validity studies for Turkish society were conducted by Şahin and Durak (1994).

3. Organizational commitment scale (25 items), developed by Meyer, Allen and Smith (1993), adapted into Turkish by Wasti (2000).

4. Job Satisfaction Scale (5 items), developed by Brayfield and Roethe (1951), shortened by Judge et al. (1998).

Data analysis was carried out with IBM SPSS Statistics 25 program. Type 1 error rate was set as 0.05.

Results: Two hundred and nineteen doctors participated in the study. It was found that participants were mostly woman (n=135; 61.6%), between the ages of 41 and 50 (n=58; 26.5%), assistant doctors (n=75; 34.2%) and in the first ten years of their career (n=79; 36.1%). Comparing demographic variables with BSI scores, participants under 40 have higher scores than those over 40 ($p<0.001$). Men score lower than women ($p=0.003$), and professors score lower than assistant doctors, practitioners, and specialists/lecturers ($p<0.001$). Doctors with over 31 years of experience have lower

BSI scores compared to those with 20 years or less. Additionally, doctors with 10 or fewer years of experience have higher scores than those with 21 to 30 years (p<0.001). When we examine the relations between BSI, job satisfaction and organizational commitment scores, it is concluded that there is a weak negative correlation between job satisfaction levels and BSI scores (p<0.001; r=-0.285). Organizational commitment levels and BSI scores have no significant correlation (p=0.599). It is also examined that organizational commitment and job satisfaction levels have a moderate positive correlation (p<0.001; r=0.499).

Conclusion: As job satisfaction levels among doctors increase, a decrease in short symptom inventory scores is observed, although no significant relationship is found between organizational commitment scores and short symptom inventory scores. A positive relationship is identified between organizational commitment and job satisfaction scores. Implementing practices to enhance job satisfaction and improving working conditions to boost job satisfaction are believed to positively affect doctors' psychological well-being and organizational commitment levels.

Keywords: Organizational commitment, job satisfaction, mental health, occupational stress

Table 1. Examination of the relations between BSI, job satisfaction and organizational commitment scores		Organizational commitment	Job satisfaction
Brief Symptom Inventory	rho	-0.036	-0.285
	p	0.599	<0.001*
Organizational commitment	rho	1	0.499
	p	-	<0.001*
*p<0.05 rho: Spearman's rank correlation coefficient, BSI: Brief Symptom Inventory			

The Relationship Between Fatalism and Breast Cancer Awareness in Women

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Background: Breast cancer is an important cancer type because it is the most common cancer seen in women in the world and Türkiye, fatal by metastasizing to many organs and its frequency is increasing gradually. The fact that the survival rate can be increased by diagnosis at early stages increases the importance of awareness and early diagnosis. Therefore, our aim is to determine the relationship between breast cancer awareness and fatalism and to increase awareness among primary healthcare workers.

Materials and Methods: Our study conducted with 371 women who met the inclusion criteria aged 18-69, presented to the Güneşli Education Family Health Center, affiliated with the University of Health Sciences Türkiye, Bağcılar Health Applications Research Center. The survey included a socio-demographic information form which was created by us reviewing similar studies, breast cancer awareness scale and breast cancer fatalism scale. The second was adapted to Turkish by Kamile Altundağ and consists of 29 items, developed by Nitchman Rakkapao in 2016 to promote early detection and prevention. The third consists of 15 questions developed by Powe in 1995, was revised by Mayo Urada and Parker in 2011, reducing the number of questions to 11 to measure fatalism in breast cancer in Türkiye, validated by Ersin et al. in 2014. Data analysis performed with IBM-SPSS 25 package program. Type-1 error rate was taken as 0.05.

Results: It was found that participants in the older age group (60-69 years) had higher total scores on the breast cancer fatalism scale compared to younger age groups (18-29 years, 30-39 years, 40-49 years) (p<0.001). Married participants had higher total scores on the Breast Cancer Fatalism Scale compared to unmarried and divorced/widowed participants (p<0.001).

As a result of the comparison of the total score obtained from the breast cancer fatalism scale with the occupational categories, the participants who were housewives had higher total scores than the students and employees (p<0.001). Participants who reported being informed about breast cancer by a previous physician had higher breast cancer awareness scale scores (p=0.002). It was found that women who had knowledge about breast self-examination, clinical breast examination and mammography had higher breast cancer awareness scores. A weak negative correlation (p<0.00; rho=-0.184) was found between total scores on both scales mentioned.

Conclusion: Our study identified that an increase in fatalistic beliefs and insufficient knowledge about breast cancer negatively impacts breast cancer awareness. Significant relationships were found between fatalism and socio-demographic factors. We believe that awareness campaigns through healthcare professionals, social media etc. can increase awareness about breast cancer risk factors, symptoms and the importance of regular screenings for early detection.

Keywords: Breast cancer, fatalistic beliefs, awareness, early diagnosis

Evaluation of Attitudes of Adult Individuals Towards Disabled Individuals

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Background: Perception of disability can be defined as the convenience and behavioral patterns shown to disabled citizens within the social culture. In social life it is important for disabled persons to have attainability, accessibility and taking care of basic needs without help. Therefore, thanks to the regulations intented for disabled people, these people do not see themselves as different from other members of the society and are less exposed to the perception of disability. In this study, it is aimed to examine the society's perspective on individuals with disabilities in society.

Materials and Methods: The population of our study consists of individuals living in İstanbul. Participants' answers will be collected through a two-part survey created via "Google Forms".

The first part of the survey consists of six questions containing demographic information. In the other section, there are 20 questions prepared with the Likert-type perception scale towards disabled individuals developed by Hülya Diğer and Abdunnur Yıldız (2021). Data analysis will be carried out using SPSS 25 package program. In the research, type 1 error rate (a) will be taken as 0.05.

Results: Four hundred and twenty people participated in our study. 55.7% (n=234) of the participants were male. Individuals with a bachelor's degree or higher education attended the most. (n=373, 88.8%). Most of the participants were students (n=312, 74.3%). The median of the scale scores was found to be "67". A significant difference was found between the scale scores and the presence of a disabled person in the family (p=0.010).

It was determined that there was no significant difference between the presence of chronic disease and the scale scores (p=0.381). A weak positive relationship was found between age and scale scores (r=0.165, p=0.001). A significant difference was found between gender categories and scale scores (p=0.020). It was found that there was no significant difference between educational status and scale scores (p=0.155).

Conclusion: Attitudes of adult individuals in society towards disabled individuals; scale scores of men and individuals with a disabled family member were found to be higher. It was determined that there was no significant difference between educational status and scale scores. This is because most of those who fill out the form have a bachelor's degree or higher.

Keywords: Perception of disability, disabled, society

Examination of Attitudes and Related Factors of Non-Physician Health Personel Towards Traditional and Complementary Medicine

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Background: Traditional and complementary medicine (T&CM), according to the World Health Organization's definition, encompasses knowledge, skills, and practices based on theories, beliefs, and experiences originating from different cultures, sometimes explained through evidence-based methods and sometimes not, applied for the purpose of protecting, maintaining, and treating health conditions. The aim of this study is to measure the attitudes of non-physician health personnel towards T&CM and to examine related factors.

Materials and Methods: This study is a descriptive research type. A total of 301 individuals were reached at a selected hospital. The data collection tool used was a knowledge form along with the "T&CM Attitude Scale" consisting of 27 questions, developed by Köse et al. in 2018. The minimum score obtainable from the scale is 27, while the maximum is 189. As the score increases, individuals exhibit a more positive attitude towards T&CM. Data were collected face-to-face, and ethical approval was obtained. Data were analyzed using the SPSS program, with a type 1 error rate set at 0.05.

Results: The average age of participants was 35.1 years [standard deviation (SD): 8.3], with 66.4% being male. The average duration of work in their professions was 10.5 years (SD: 7.3). The overall average T&CM attitude scale score for all participants was 112.1 (SD: 19.3). Among the participants, 33.6% (n=101) had undergone at least one T&CM practice, with cupping therapy being the most common at a rate of 16.9%. A total of 78.4% responded "yes" to the question "Does religion hold an important place in your life?" The sub-dimension of dissatisfaction with modern medicine had a mean rank of 131.75 among those who answered yes and 156.3 among those who answered no. The sub-dimension of holistic health view had a mean rank of 156.17 for those who answered yes and 132.22 for those who answered no, with the differences being statistically significant (p=0.044; p=0.049, respectively). When analyzed according to their roles, there was a statistically significant difference in the mean T&CM attitude scores (p=0.01). In the correlation test, it was found that as the number of types of T&CM practices increased, the participants' T&CM scores significantly increased, showing a weak positive correlation (r=0.206; p<0.001).

Conclusion: Non-physician health personnel are individuals who engage in dialogue with patients, similar to physicians. They play an influential role in patient involvement in treatments, and their dialogues can be directive for patients. In this context, identifying non-physician health personnel's perspectives on complementary medicine, their attitudes towards modern medicine, and their holistic views on health is valuable. Further research on this topic is recommended.

Keywords: Attitudes, health personnel, complementary medicine

Examination of Medical Faculty Students' Knowledge and Attitudes About Genetically Modified Organisms

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Background: Genetically Modified Organisms (GMOs) are organisms that have undergone hereditary changes through various genetic engineering techniques. This study aims to examine the knowledge levels and attitudes of medical faculty students about GMOs.

Materials and Methods: This study was conducted with volunteers from Hamidiye Medical Faculty at the University of Health Sciences Türkiye, who were accessible online. Data were collected using a data collection form consisting of two parts. The first part inquired about the participants' socio-demographic characteristics. The second part included a 17-question survey prepared using the literature, assessing knowledge levels and attitudes about GMOs. An increase in the score indicated a positive situation. Data analysis was performed using the SPSS 25 package program. A p-value <0.05 was considered statistically significant.

Results: The study included 313 participants, with an average age of 21.34 ± 1.77 (min.=18, max.=25), of which 61.3% (n=192) were male. 43.1% (n=135) were in their third year, and 66.1% (n=207) had a middle income level. 20.4% (n=64) had a chronic illness. The median score of the knowledge level survey was 39 (min.=26, max.=45), and the median attitude score was 12 (min.=6, max.=18). A very weak but significant positive correlation was found between knowledge level and attitude scores (rho=0.123; $p<0.001$). No significant difference in GMO knowledge levels was found between genders, but males had more positive attitudes towards GMOs ($p<0.001$). There was no significant difference in knowledge levels between classes, but fifth and sixth-year students had more positive attitudes ($p<0.001$). Significant differences were found in both knowledge and attitude levels across income levels. Those with higher income had lower knowledge levels, while those with middle income had more negative attitudes (p=0.041; $p<0.001$, respectively). Those without chronic illnesses had higher knowledge levels (p=0.005) and more negative attitudes (p=0.002). Regular medication users had more positive attitudes than non-users (p=0.001), although there was no significant difference in knowledge levels.

Conclusion: This study shows that as medical faculty students' knowledge levels about GMOs increase, their attitudes become more positive. The knowledge and attitudes about GMOs vary according to various demographic characteristics, especially factors such as gender, class, and income status are important for knowledge and attitude.

Keywords: Genetically modified organisms, medical students, knowledge, attitude

Evaluation of the Post-Traumatic Effects of the Earthquake on People

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Background: On February 6, 2023, the earthquake affected the provinces of Adana, Adıyaman, Diyarbakır, Gaziantep, Hatay, Kahramanmaraş, Kilis, Malatya, Osmaniye and Şanlıurfa occurred in Türkiye. This earthquake disaster affected millions of our people and caused loss of life and material damage. Post-traumatic stress disorder is one of the most common psychological problems after earthquake. In this study, it was aimed to contribute to the prevention of psychological problems experienced by examining the status of post-traumatic effects in earthquake victims and the factors affecting them.

Materials and Methods: In the research, the two-part questionnaire we created over "Google Forms" was used. In the first part of the survey form, there are 11 socio-demographic questions, and in the second part, there is the Post-Earthquake Trauma Level Determination Scale consisting of 20 items developed by Fuat Tanhan (2013). Participants were obtained from the students who experienced the earthquake using the snowball method and 384 people were included in the study. The Kruskal-Wallis H test and the Mann-Whitney U test were used in the analysis of the data. The analysis of the data was carried out using the SPSS 25 package program. In the study, type 1 error rate (α) was taken as 0.05. $p<0.05$ was accepted for statistical significance.

52.9% (n=203) of the participants were female. 57.29% of the participants in our study were traumatized (threshold 52,385+5.051). It was found that there was a significant difference between gender categories in terms of scale total scores and that women had a higher scale total score (p=0.024) than men. The total scale score of people who have chronic disease, whose relatives are in the earthquake zone, who experienced loss of property, who lost their relatives in the earthquake and who had to change the city they are in, is significantly higher than other people (p=0.002, $p<0.001$, $p<0.001$, $p<0.001$, $p<0.001$, respectively). It was determined that there was a very weak positive relationship between age and scale score (p=0.004; r=0.147).

Results: The level of trauma after an earthquake is higher in women, those with chronic diseases, those who are in the earthquake zone, those who leave the province close to their relatives and those who have lost their relatives and those who are older. Providing psychiatric support to these people after the earthquake is important for the rehabilitation of people.

Keywords: Post-traumatic stress disorder, earthquake, psychological impact, trauma assessment

Table 1. Comparisons between answers to questions and scale score				
Presence of chronic disease	62 (28-83)	55 (20-92)	-3.171	0.002
Presence of psychiatric disease	61 (28-83)	56 (20-92)	-1.367	0.172
Was your relatives in the earthquake zone	59 (26-92)	51 (20-92)	-4.522	<0.001*
Loss of property	64 (26-87)	52 (20-92)	-6.480	<0.001*
Imminent loss	66 (28-87)	54 (20-92)	-4.956	<0.001*
Leaving the province	64 (26-87)	54 (20-92)	-4.128	<0.001*

Evaluation of Anxiety Caused by Climate Change in Individuals Aged 18+

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Background: As many of us know climate change is one of the most concerning topics of the modern world. Due to variable inner and outer factors the anxiety level of people is also keep increasing. We are aiming to research if the climate change is causing anxiety in people 18+ in our study.

Materials and Methods: Our study is internet-based and conducted via Google Survey for individuals 18+. Data collection tool consists of 2 parts. The first part which is created by the researchers contains the questions determining participants' socio-demographic information. In the second part, there is the Climate Change Anxiety Scale developed by Fatih Cebeci, Merve Karaman, Abdurrahman Ferhat Öztürk, Kıvanç Uzun, Mustafa Ozan Altın, Aylin Arıcı, Taner Artan (2022). Data analysis will be carried out using SPSS 25 package program. The type 1 error rate (α) in the research will be taken as 0.05.

Results: Four hundred and fifteen people have participated in our study in total. After participants who are under 18 or over 65 have been excluded 338 people have been actively involved in the study. %63 (215) of participants were women. Individuals of age 18-25 had the highest rate of participation (%69 n=235). More than half of the participants (%50.3 n=170) either already have or studying the bachelor's degree. The rate of people whose income is <10000 is the most (%67.8 n=229). %65.4 (221) of the participants do not work. Our participants have gained the information about climate change mostly via social media (%45.9 n=155). No significant difference was found between the anxiety scores of people who work and do not work (though p=0.017). No significant differences were found between the anxiety scores of any other variable categories.

Conclusion: Anxiety in people 18+ is not related to climate change.

Keywords: Climate change, anxiety, individuals aged 18+

Examination of Physical Activity Attitudes and Depression Risk Among Hamidiye Faculty of Medicine Students

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Background: Depression is a significant issue of our time, characterized by a mood disorder where individuals do not feel psychologically well. Studies have demonstrated the positive effect of regular physical activity on depression. This study aims to investigate attitudes towards physical activity and depression risk among medical students.

Materials and Methods: This study involved 288 volunteers accessible online from the Hamidiye Faculty of Medicine, University of Health Sciences Türkiye. Data were collected using a Data Collection Form consisting of three sections. The first section assessed the socio-demographic characteristics of the participants. The second section included the "Cognitive Behavioral Physical Activity Scale (CBPAS)" adapted into Turkish by Eskiler et al., and the third section contained the "Beck Depression Inventory for Primary Care (BDI-PC)" adapted into Turkish by Aktürk et al. Data were analyzed using Statistical Package for the Social Sciences 25 software. A p-value of <0.05 was considered statistically significant.

Results: The average age of the 288 participants was 21.49 (21.49±2.18), with 62.2% (n=179) being male and 66.7% (n=192) being preclinical students. 68.1% (n=196) had a monthly budget of less than 10,000 TL. 43.1% (n=124) reported engaging in regular physical exercise. Among those who exercised, 81.5% (n=101) had been doing so for at least one year, and 21.8% (n=27) were involved in multiple sports. The average total score on the BDI-PC was 3.43±3.4, while the average total score on the CBPAS was 3.6±2.27. A negative correlation was found between the total scores of BDI-PC and CBPAS (p≤0.001; rho: -0.275). BDI-PC scores were significantly higher in individuals aged 21 and under, preclinical students, non-exercisers, and those involved in multiple sports (p=0.028; p=0.048; p<0.001; p=0.026, respectively). CBPAS scores were significantly lower in individuals aged 21 and under, preclinical students, non-exercisers, and those who had been exercising for ≤1 year (p=0.017; p=0.025; p<0.001; p=0.035, respectively).

Conclusion: A weak negative relationship was found between cognitive-behavioral physical activity attitude and depression risk among medical students. A very high negative relationship was observed between depression risk and exercise status. A very high positive relationship was found between cognitive-behavioral physical activity attitude and both exercise and class level.

Keywords: Physical activity, depression, medical student, attitude

Evaluation of the Relationship Between Social Media Addiction and Attention Deficit Hyperactivity Disorder in University Students

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Background: Social media develops, renews, and spreads in parallel with the internet. The misuse of social media can cause various problems in individuals. To determine the relationship and degree of attention deficit hyperactivity disorder (ADHD) symptoms in university students with social media addiction.

Materials and Methods: Our cross-sectional study population consisted of first, second, and third-year medical students studying at University of Health Sciences Türkiye, Marmara, Cerrahpaşa, and Medeniyet Universities between the years 2023-2024. Data were collected online using a form that included participants' socio-demographic characteristics, the Social Media Use Disorder Scale-9 (SMDS-9), and the Adult ADHD Self-report Scale (ASRS). The research data were analyzed using appropriate statistical methods.

Results: A total of 353 students participated in the study, 185 of whom were female (52.4%) and 168 were male (47.6%). The most common daily average internet usage time was 4-6 hours (35.7%). The most common daily average social media usage time was 2-4 hours (41.6%). The most frequently used social media platform was Instagram (56.7%). No significant difference was found between gender and the average daily social media usage time (p=0.339). No significant difference was found between the social media platforms used and the average daily social media usage time (p=0.072). Comparisons of scale scores with daily average social media usage times revealed that an average of 4-6 hours of daily social media use was associated with social media use disorder, an average of 6-8 hours of daily social media use was associated with hyperactivity/impulsivity, and an average of 4-6 and 6-8 hours of daily social media use was associated with higher attention deficit scale scores than other time ranges. A significant difference was found between average daily social media usage time and social media use disorder (p<0.001), hyperactivity/impulsivity (p=0.034), and attention deficit (p=0.016). Comparing SMDS-9 and ASRS scale scores, a high positive correlation was found between social media use disorder and hyperactivity/impulsivity scores (p<0.01, r=0.656), and a moderate positive correlation was found between social media use disorder and attention deficit (p<0.01, r=0.571).

Conclusion: Students who use social media for an average of 4-6 hours a day may exhibit social media use disorder and attention deficit symptoms. Students who use social media for an average of 6-8 hours a day may exhibit hyperactivity/impulsivity and attention deficit symptoms.

Keywords: Social media addiction, perception of aesthetic procedures, female university students, body image

The Relationship Between Occupational Accidents and Employees' Fatigue and Stress Levels in a Tertiary State Hospital

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Background: Studies on occupational accidents in the health sector in Türkiye are limited. The aim of our study is to analyse occupational accidents in order to determine the causes and consequences of occupational accidents in a tertiary state hospital and to develop preventive measures. Between 2013 and 2019, 41,735 occupational accidents were reported in the health sector, the majority of which occurred in nurses due to physical and chemical factors. The research aims to develop preventive services by analysing the causes of these accidents.

Materials and Methods: In our study, 249 people (99 men, 150 women) participated in the study. It is a descriptive study and we used a questionnaire consisting of 3 parts. In the first part, questions including 12 demographic characteristics, in the second part A Job Stress Scale-20, and in the third part Chalder Fatigue Scale were applied to the participants. Since the data did not fit the normal distribution, chi-square, Mann-Whitney U, Kruskal-Wallis-H tests were used. Type 1 error rate (α) was taken as 0.05 in the study.

Results: Among the respondents, 68.7% (n=171) were associate/undergraduate graduates. Of those who had occupational accidents, 59.3% had penetrating/cutting tool injuries and 18.5% had trauma/impact type of occupational accidents. It was determined that occupational accidents occurred mostly in emergency (24.7%), clinical (22.2%) and intensive care (12.3%) units. Women were found to have higher fatigue scores than men (p=0.018). It was found that the rate of occupational accidents increased as the number of weekly shifts increased (p<0.001) (Table 1). It was found that nurses

had higher work stress scores than students and workers, and nurses and midwives had higher fatigue scores than workers and other health personnel (p<0.001).

Conclusion: Although the cause of occupational accidents has many dimensions, we observed that there is no relationship with work stress and fatigue in our study. Since it is seen that the majority of occupational accidents occur as a result of piercing-cutting tool injuries, we think that these accidents will be reduced by increasing education, precautions and awareness about this. The fact that female health care workers experience higher fatigue than male health care workers may benefit from a review of gender-based workload and working conditions. The fact that nurses experience higher work stress and fatigue than other health workers may be due to the intensity in their number and working environment.

Keywords: Occupational accidents, preventive measures, work stress, fatigue

Table 1. Comparison of accident occurrence with the number of shifts, fatigue, and stress scores				
	Work accident occurred med. (min.-max.)	**Work accident did not occur med. (min.-max.)**	**Z**	**p**
Work stress	56 (20-99)	51 (20-100)	-0.539	0.590
Fatigue	13 (0-33)	16 (0-33)	-1.549	0.121
Number of shifts	3 (0-3)	0 (0-3)	-6.650	<0.001*
*p<0.05. Min.-max.: Minimum-maximum, med.: Median				

Examination of the Relationship Between Academic Perfectionism and Intolerance of Uncertainty Levels Among Medical School Students

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Background: Academic perfectionism, which directly affects the success perception of medical students, and the possibility that tolerance to the uncertainties inherent in the medical field may vary among prospective doctors, as well as whether there is a relationship between these two conditions, is a topic that needs to be considered. This study aims to examine the relationship between medical students' academic perfectionism and intolerance of uncertainty, and how these two factors relate to different class levels and other socio-demographic characteristics.

Materials and Methods: The study was conducted on a total of 280 students from the University of Health Sciences Türkiye, Hamidiye Faculty of Medicine. The sample size was determined for each academic year, and data were collected using an online questionnaire. The questionnaire consisted of three sections: four demographic questions, the 13-item Academic Perfectionism Scale (APS) developed by Odacı et al., and the 12-item Intolerance of Uncertainty Scale (IUS-12), adapted into Turkish by Sarıçam et al. Data analysis was conducted using Statistical Package for the Social Sciences 25, with a type 1 error rate set at 0.05.

Results: A total of 280 students participated, with an average age of 21.55±2.15 years. Of the participants, 53.6% were male. Most participants lived in family homes (n=122, 43.6%). The average APS score was 36.43±9.96, and the average IUS-12 score was 36.20±9.58. A weak positive correlation was found between academic perfectionism and intolerance of uncertainty (p<0.001, r=0.375). No statistically significant differences were found in intolerance of uncertainty based on gender (p=0.417), class (p=0.659) or residence categories (p=0.291). No statistically significant differences were found in academic perfectionism based on gender (p=0.088) and class categories (p=0.063). However, students living with their families showed higher levels of academic perfectionism compared to those living in dormitories (p=0.009, F=4.759).

Conclusion: No significant differences were observed between academic perfectionism and intolerance of uncertainty based on gender or class categories. As academic perfectionism increased, students showed less tolerance for uncertainties. Students living with their families exhibited higher levels of academic perfectionism than those living in dormitories.

Keywords: Academic perfectionism, intolerance of uncertainty, medical students

Evaluation of Medical Faculty Students' Views and Thoughts on the Use of Artificial Intelligence in Medicine and Its Impact on the Patient-physician Relationship

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Background: Our study looks how artificial intelligence (AI) can support healthcare services, which face challenges in time, space, and accessibility, potentially straining the patient-doctor relationship. The research aims to assess medical students' attitudes towards these systems and gather statistical data on their integration potential.

Materials and Methods: In our study, an online survey was administered to students at the Faculty of Medicine, University of Health Sciences Türkiye. The data collection tool consisted of two sections. The first section included questions determining the socio-demographic characteristics of the participants and evaluating the impact of AI on the doctor-patient relationship. The second section included the "General Attitudes Towards Artificial Intelligence Scale (GATAIS)". Data analysis was performed using the Statistical Package for the Social Sciences 25 software package. The type 1 error rate (α) was set at 0.05. Arithmetic mean, standard deviation, and Kruskal-Wallis H test were utilized in the study.

Results: A total of 309 individuals participated in our study. Of the participants, 56.3% (n=174) were male. The highest participation was from the 19-21 age group (n=190, 61.4%). For 59.2% (n=183) of the participants, the time to reach the nearest health facility was less than 15 minutes. The majority of participants [79.6% (n=246)] considered family medicine most suitable for digital health services. 67% (n=207) of the participants indicated that AI could be effective in the field of consultancy. The average score for the GATAIS was measured at 3.34±0.51. It was observed that participants who could not easily go to the hospital due to reasons such as embarrassment and fear of stigmatization found remote health services more beneficial [agree=36.2% (n=112), strongly agree=21.7% (n=67)]. Medical students believed that AI would make health services more accessible [agree=45% (n=139), strongly agree=15.2% (n=47)] and that AI systems would facilitate active monitoring before illness and the treatment process after illness [agree=47.6% (n=147), strongly agree=21.7% (n=67)].

Conclusion: Participants generally had a positive attitude towards AI, believing it could enhance remote health services for those hesitant to visit hospitals due to embarrassment or stigma. They also thought AI could improve accessibility and support active monitoring before illness and after treatment. The conclusion is that advancing and promoting AI in healthcare is necessary.

Keywords: Artificial intelligence, access to healthcare, healthcare service, telehealth service, virtual hospital

Table 1. Average GATAIS score and significantly related questions		GATAIS med. (min./max.)	H	p	Difference
Access to remote health services may be more beneficial for individuals who cannot easily go to the hospital due to reasons such as shame and fear of stigmatization.	Strongly disagree (A)	2.80 (2.20-4.15)	41.86	<0.001*	E>C>A
	Disagree (B)	3.20 (2.40-4.45)			
	Undecided (C)	3.25 (2.25-4.60)			
	Agree (D)	3.40 (1.70-4.25)			
	Strongly agree (E)	3.45 (2.70-4.60)			
Artificial intelligence does not cause a weakening of the doctor-patient relationship.	Strongly disagree (A)	2.95 (1.70-4.45)	35.30	<0.001*	D>B>A
	Disagree (B)	3.30 (2.15-4.15)			
	Undecided (C)	3.30 (2.30-4.30)			
	Agree (D)	3.55 (2.25-4.60)			
	Strongly agree (E)	3.45 (2.50-4.60)			
I believe that artificial intelligence will make healthcare services more accessible.	Strongly disagree (A)	2.62 (1.70-3.75)	90.68	<0.001*	E>D>C>A
	Disagree (B)	3.00 (2.25-3.80)			
	Undecided (C)	3.15 (2.15-4.45)			
	Agree (D)	3.45 (2.60-4.45)			
	Strongly agree (E)	3.70 (2.80-4.60)			
I believe that artificial intelligence systems will facilitate proactive monitoring before illness and simplify the treatment process after illness.	Strongly disagree (A)	2.60 (2.20-3.75)	83.6	<0.001*	E>D>C>A
	Disagree (B)	2.90 (2.25-3.60)			
	Undecided (C)	3.00 (2.15-4.45)			
	Agree (D)	3.45 (1.70-4.30)			
	Strongly agree (E)	3.70 (2.65-4.60)			
*p<0.05. H: Kruskal-Wallis H test, min./max.: Minimum/maximum, GATAIS: General Attitudes Towards Artificial Intelligence Scale, med.: Median					

Evaluation of the Relationship Between Social Anxiety and Gaming Addiction Among Students of the University of Health Sciences Türkiye Hamidiye Campus

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Background: Gaming addiction, defined as excessive time spent on games played through devices like computer game consoles and smartphones, is a serious issue that can adversely affect an individual's normal life. This research was conducted to determine the levels of social anxiety and gaming addiction among students of the University of Health Sciences Türkiye Hamidiye Campus (SBÜHY) and to evaluate the relationship between them.

Materials and Methods: In this descriptive cross-sectional study, 580 voluntary individuals from SBÜHY participated. Approval for the study was obtained from the Scientific Research Ethics Committee of the University of Health Sciences Türkiye Hamidiye Faculty of Medicine (decision no: 25173, date: 07.02.2024). An online survey form was administered to the participants via Google Forms to determine their levels of social anxiety and gaming addiction. The Liebowitz Social Anxiety Scale Turkish Adaptation [minimum (min.) score: 0, maximum (max.) score: 144] was used to measure social anxiety levels in addition to the Digital Game Addiction Scale for University Students (min. score: 21, max. score: 105) which was used to measure gaming addiction levels.

Results: The majority of the students participating in the study were female (76%). The median social anxiety score for the entire sample was 96 (min.-max.: 48-192), with 86.5 (min.-max.: 48-147) for males and 96 (min.-max.: 48-192) for females. Furthermore, social anxiety levels were determined to be significantly higher in females than males ($p<0.001$). The median gaming addiction score was 24 (min.-max.: 21-105), with 35 (min.-max.: 21-92) for males and 23 (min.-max..: 21-105) for females which after further analysis revealed gaming addiction score was significantly higher in males than females ($p<0.001$). According to our testing; university faculty, income level, or parents' education levels were not influencing factors on gaming addiction and social anxiety scores. Social anxiety levels were not affected by motivation in choosing the faculty or family work status. However, gaming addiction levels were higher among those who chose their majors due to family pressure than those who chose by their own volition, and higher in individuals whose parents were not actively working than those with at least one actively working parent ($p<0.05$). No significant correlation was found between gaming addiction and social anxiety ($p=0.067$, $r=0.76$).

Conclusion: Social anxiety levels were detected higher in females than males, while gaming addiction levels were higher in males than females. No significant relationship was found between social anxiety and gaming addiction.

Keywords: Addiction, game, anxiety, students

Table 1. Correlation between social anxiety and gaming addiction scores	
Social anxiety	Median 96 (min.-max.: 48-192)
Gaming addiction	Median 24 (min.-max.: 21-10[5])
rho	0.76S
p	0.067
S: Spearman correlation test, min.-max.: Minimum-maximum	

Examination of the Relationship Between Personality Inventory of Students Who Do and Do not Engage in Fitness Activities at a University of Health Sciences Türkiye

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Background: The popularity of bodybuilding (fitness) has surged globally in recent years. This sport not only promotes a healthy body but also enhances socialization and discipline. Our research aims to investigate how personality traits and academic achievements of University of Health Sciences Türkiye students involved in fitness compare with those who do not participate in this sport and those engaged in other sports.

Materials and Methods: The study included students from Hamidiye Faculty of Medicine, University of Health Sciences Türkiye with no specific inclusion or exclusion criteria other than being enrolled at the university. Participants completed a questionnaire with two sections: one assessing fitness engagement and academic achievements, and the other using the Turkish version of the Big Five Personality Inventory (BFI) developed by Benet-Martinez and John. Surveys and scales were administered online via Google Forms.

Results: One hundred and thirty five participants (33%) reported engaging in fitness, while 89 (22%) indicated participation in other sports disciplines, and 184 (45%) stated that they do not participate in any sports. Significant differences were observed in the BFI total scores and all subscales ($p<0.05$) based on sports participation. Fitness participants scored significantly higher in extraversion, conscientiousness, neuroticism, and openness compared

to non-participants (p<0.05). Within fitness participants, conscientiousness scores were higher than those in other sports disciplines (p<0.05). Conversely, individuals in other sports had higher neuroticism scores compared to fitness participants (p<0.05).

Conclusion: Fitness participants scored higher in extraversion, openness, agreeableness, and conscientiousness compared to non-participants, indicating greater social integration, adaptability, and openness to new experiences. Conversely, those involved in other sports had higher neuroticism scores, suggesting increased anxiety or emotional variability. They also had higher scores in conscientiousness, neuroticism, and openness compared to non-sport participants. These results suggest distinct personality traits associated with fitness and highlight the need for more accessible exercise opportunities for students.

Keywords: Fitness, bodybuilding, academic achievement, personality traits

Table 1. Examination of scores obtained from the Big Five Personality Inventory Scale and its subscales in relation to participation in sports				
	Fitness (n=135)	Others (n=89)	Does not do sports (n=184)	p
The five factor model in personality	147 (111-174)	144 (91-177)	144 (101-180)	0.001
Extraversion	32 (8-40)	29 (13-39)	29 (9-40)	0.005
Agreeableness	32 (18-40)	29 (13-40)	30 (12-40)	0.002
Conscientiousness	29 (14-40)	27 (12-40)	26 (9-39)	<0.001
Neuroticism	21 (8-37)	26 (9-40)	24.5 (11-38)	<0.001
Openness	32 (21-43)	31 (18-45)	30 (17-43)	<0.001

Investigation of the Relationship Between Sleep Quality and Academic Performance of Medical Faculty Students

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Background: Sleep problems observed in university students, especially during exam periods, play an important role in their academic performance. Sleep deprivation can lead to significant decreases in concentration, memory, and problem-solving abilities of students. The aim of this study is to measure the relationship between sleep quality and academic performance of medical faculty students.

Materials and Methods: Our study was conducted with 228 students studying at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine between February 1st and April 30th, 2024. The data collection tool consists of two parts. The first part of the data collection form is a demographic questionnaire consisting of 11 items, and the second part evaluates the participants' sleep quality using the Pittsburgh Sleep Quality Index (PSQI). Data analysis will be performed using the SPSS 29 software package. In our study, p<0.05 is considered statistically significant.

Results: 64.5% of the participants (n=147) are female, while 35.5% (n=81) are male. It was determined that 26.8% of the participants are 20 years old, and 38.2% are in the 3rd year. It was found that females have higher sleep disturbance scale scores. The majority of participants have a grade average between 60-80 (50.4%, n=115), live at home (47.8%, n=109), have moderate caffeine use (53.5%, n=122), do not have any chronic illness (93.9%, n=214), and do not work in any job (88.6%, n=202). The sleep disturbance scale score of students in the 3rd year is significantly lower than that of individuals in the 2nd year (p<0.05). A significant relationship was found between semester categories and PSQI scores in our research. There was no significant relationship found between semester averages (p=0.464), caffeine consumption amounts (p=0.946), accommodation status (p=0.068), and PSQI scores.

Conclusion: In our study, no significant relationship was found between sleep quality and academic performance of medical faculty students (p=0.464). However, a significant relationship was found between students' semesters and PSQI scores. Students in the 3rd year are motivated to apply their theoretical knowledge into practice, leading to a decrease in their study burdens at home and an improvement in their sleep quality routine. As a result, sleep disturbance scores are positively affected, supporting students' overall well-being and academic success.

Keywords: Sleep quality, academic performance, caffeine

Factors Affecting the Psychological Well-being of Medical Students and the Relationship Between these Factors and their Psychological Well-being

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Background: In contemporary settings, numerous factors impact the psychological state of university students. These factors directly influence the well-being of students. Psychological well-being is a complex and multidimensional component that cannot be reduced to simple elements of positive and negative emotions. The aim of this study is to identify and examine the factors affecting the psychological well-being of medical students.

Materials and Methods: Our study was conducted among students of Hamidiye Faculty of Medicine via an internet-based survey using Google Forms. The survey consisted of two sections. The first section included 12 demographic questions, and the second section featured the Warwick-Edinburgh Mental Well-being scale, developed by Tennant et al. in 2007 and validated in Turkish by Gökay Keldal. The data were analyzed using the SPSS 25 software package.

Results: A total of 312 individuals participated in our study. Among the participants, 172 (55%) were male. The majority of participants were between the ages of 20-22 (n=187; 59.9%). The highest number of participants were first-year students (n=84; 26.9%). Most of the participants resided in dormitories (n=149; 47.8%). The majority of participants had a medium income level (n=244; 78.2%). The mean Warwick-Edinburgh Mental Wellbeing Scale score was 51.16±12.36. Financial problems were found to have a significant positive effect on the psychological well-being of students (p<0.001). Academic problems had a significant negative impact on students' psychological well-being (p<0.001). Family support was found to have a significant positive effect on students' psychological well-being (p<0.001). A significant positive relationship was found between regular physical exercise and Warwick-Edinburgh Mental Well-being scale scores among participants (p<0.001).

Conclusion: There are many factors that determine the psychological well-being of students. This study emphasizes the importance of social, economic, and academic support mechanisms to improve students' mental health. Universities can enhance students' overall well-being by providing more financial aid, academic support, and psychological counseling services. Additionally, promoting sports and physical activities can support the psychological well-being of students.

Keywords: Psychological well-being, medical student, academic support, mental health

A Study on Social Media Usage and Cosmetic Product Preferences of Hamidiye Medical Faculty Students at University of Health Sciences Türkiye

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Background: Cosmetic products have found widespread use, especially among young people today. With the increasing interest in skincare products, the demand for cosmetic products has significantly risen. Due to the influence of social media platforms and television, advertisements for cosmetic products have become a part of daily life, continuously presenting new features to consumers. This constant exposure has created a strong consumer network within the cosmetic product industry. The use of cosmetic products reflects individuals' personal care habits and perceptions; therefore, the preferences exhibited by college students when choosing these products and the underlying reasons for these preferences should be evaluated from a social and cultural perspective. This study aims to contribute to the academic literature by conducting a survey to determine the cosmetic product preferences of college students and the relationship of these preferences with various variables.

Materials and Methods: This study was conducted with students from Hamidiye Faculty of Medicine at University of Health Sciences Türkiye. A total of 290 responses were collected through an online survey conducted via Google Forms. The survey inquired about the socio-demographic information of the participants as well as the variables influencing their choice of cosmetic products using a Likert-type scale. The data were analyzed using the SPSS 25 software package, and a p-value of <0.05 was considered statistically significant.

Results: A total of 290 participants, 33.1% (n=96) of whom were 21 years old, took part in our study. It was found that 31% (n=90) of the participants had a regular skincare/makeup routine and a high usage of cosmetic products. Among the participants, 58.6% (n=170) were women, and the most commonly used social media platform was Instagram (n=254, 89.4%). The analyses focused on measuring the influence of social media platforms. No significant difference was found in the influence of Instagram usage on purchasing cosmetic products from pharmacies, online stores, or physical stores (p=0.589, p=0.321, p=0.272).

Conclusion: In conclusion, it was observed that the majority of participants have a regular skincare/makeup routine and widespread use of cosmetic products. The vast majority of participants prefer social media platforms such as Instagram. These findings can serve as an important source of information for understanding the impact of social media platforms in the marketing of cosmetic products.

Keywords: Cosmetics, social media, personal care, consumption

Attitudes of Preclinical and Clinical Medical Students Towards the Medical Profession

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Background: Medicine is a respected profession dedicated to protecting human health. However, it is also fraught with stress, time pressure, and emotional challenges. Thus, attitudes towards the medical profession are shaped by an understanding of both its value and its difficulties. This study aimed to evaluate medical students' attitudes towards the profession.

Materials and Methods: An online survey consisting of two sections was administered to medical students in İstanbul. The first section included questions assessing socio-demographic characteristics and the attitudes towards the medical profession, while the second section comprised the Medical Profession Attitude Scale (MPAS). Data analysis was performed using SPSS 25, utilizing arithmetic mean, median, Mann-Whitney U test, one-way analysis of variance, and Kruskal-Wallis H test. A type I error rate (α) of 0.05 was accepted.

Results: A total of 266 participants from 16 different universities participated; students from İstanbul Health Sciences University (n=163; 61.3%) formed the largest group. Of the participants, 50% (n=133) were male. The most common age among participants was 21 (n=51; 19.2%), with the highest representation from third-year students (n=95; 35.7%). Most students graduated from Anatolian High Schools (n=145; 54.1%) and Science High Schools (n=95; 35.7%). The primary reason for choosing the medical profession was "Loving Medicine" (n=123; 46.2%). Preclinical students had higher total MPAS scores than clinical students. No significant difference was found regarding the impact of the universities attended (preclinical p=0.70; clinical p=0.23) or the high schools graduated from (preclinical p=0.72; clinical p=0.17). However, a significant difference was observed regarding the influence of reasons for choosing medicine on MPAS scores (preclinical p<0.01*; clinical p<0.01*). Those who chose "Loving Medicine" had higher MPAS scores compared to those who selected "Financial Reasons" or "Social Pressure."

Conclusion: This study found no significant effect of the current university or high school categories on the attitudes of preclinical and clinical students towards the medical profession. However, the reasons for choosing medicine significantly influenced MPAS scores. Preclinical students motivated by "Loving Medicine" exhibited a more positive attitude than those motivated by "Financial Reasons." Similarly, clinical students with the same motivation showed a more favorable attitude compared to those driven by "Financial Reasons" and "Social Pressure."

Keywords: Preclinical, clinical, medical student, attitude

Tablo 1. Comparison of ASMP scores with reasons for preferences		
	Preclinic med. (min.-max.)	**Clinic med. (min.-max.)**
Family preference (A)	86.5 (59-101)	78 (58-113)
Liking medicine (B)	97 (72-120)	94.5 (66-117)
Financial reasons (C)	85 (65-115)	79 (64-112)
Status (D)	90 (80-111)	85.5 (64-109)
Social pressure (E)	-	72 (62-86)
Other (F)	89 (46-109)	93 (85-101)
H	24.18	22.23
p	<0.001*	<0.001*
Difference	B>C	B>E, B>C
*p<0.05; Kruskal-Wallis H test, relationship between "reasons for preference" categories in attitudes of preclinical and clinical students, min.: Minimum, max.: Maximum, med.: Median, ASMP: Attitude Scale Towards Medical Profession		

The Relationship Between Women's Relationship Status and Somatization Disorders in Women

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Background: Somatization disorder is a chronic condition marked by numerous medically unexplained physical symptoms linked to psychosocial stress, leading individuals to seek medical help. Research shows a negative relationship between somatization and marital adjustment: lower somatization is associated with better satisfaction, agreement, emotional expression, and overall marital compatibility. This study aims to explore the link between women's relationship status and somatization disorder.

Materials and Methods: Women aged 18 and older, currently or previously in a relationship, who consented to participate were included. They completed a questionnaire with three sections: socio-demographic details, relationship status, and the somatization scale by Şeyda Dülgerler. Statistical analysis was performed using SPSS 29.00, with significance set at $p<0.05$.

Results: A total of 390 individuals participated in our study. The average age of our study group is 32.35 years. Regarding marital status, 200 participants (51.3%) are married. In terms of financial status, 266 participants (68.2%) reported balanced income and expenditure. Among the group, 307 individuals (78.7%) do not have any chronic illnesses, while 83 individuals (21.3%) reported having chronic illnesses. The average score on the somatization scale for our study group is 12,271. Significant relationships were found between age, marital status, employment type, family type, financial status, presence of chronic illness, and somatization (respectively, $p=0.031$; 0.035; 0.003; 0.014; <0.001; <0.001). Scores on the somatization scale were significantly higher with increasing age, for single and widowed individuals, those living in extended families, those with chronic illnesses, blue-collar workers, and those with lower income. Participants who spend leisure time with their partners, openly express their feelings to their partners, do not quarrel with their partners, do not consider separation from their partners, and report satisfaction in their relationships had significantly lower somatization scores ($p<0.001$).

Conclusion: Higher somatization was linked to poor relationship dynamics, such as lack of shared time, unexpressed feelings, frequent conflicts, and dissatisfaction. Improving relationship quality-through shared activities, open communication, and trust-building-can help reduce somatization. Couples with chronic illness should be encouraged to adopt healthier lifestyles.

Keywords: Somatization disorder, relationship, women, stress

The Relationship Between Social Media Addiction and Perceptions of Undergoing Aesthetic Procedures Among Female Students at the University of Health Sciences Türkiye

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Background: This study aims to examine the relationship between social media usage and perceptions of undergoing aesthetic procedures among female students at the University of Health Sciences Türkiye.

Materials and Methods: This cross-sectional study was conducted between February 1 and March 1, 2024, with 178 participants from the University of Health Sciences Türkiye. The study utilized a socio-demographic questionnaire developed via Google Forms, the 20-item "Social Media Addiction Scale-Adult Form (SMAS-AF)," and the 16-item "Perceptions of Undergoing Aesthetic Procedures on Social Media Scale". The data were analyzed using the SPSS 25 software package. A type I error rate (α) of 0.05 was applied, and statistical significance was considered at $p<0.05$.

Results: The participants' ages ranged from 18 to 34, with a mean age of 20.58±1.75 years; 42.7% (n=76) were medical students. The most frequently used social media applications were "WhatsApp" and "Instagram". A total of 84.3% (n=150) had never undergone any aesthetic procedure, and 68% (n=121) were satisfied with their appearance. Scores on the SMAS ranged from 21 to 96, while scores on the Perceptions of Undergoing Aesthetic Procedures Scale ranged from 1 to 5; their means were 53.66±17.6 and 2.58±0.99, respectively. Correlation analysis revealed a highly significant positive relationship between social media addiction and perceptions of undergoing aesthetic procedures ($r=0.710$, $p<0.01$).

Conclusion: A highly significant positive correlation was found between social media addiction and perceptions of undergoing aesthetic procedures among female students at the University of Health Sciences Türkiye.

Keywords: Social media addiction, perception of aesthetic procedures, female university students, body image

Measurement of Preclinical and Clinical Period Nomophbia Levels of University of Health Sciences Türkiye, Hamidiye Medical Students

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Background: Nomophobia occuring from the combination of the words "no mobile phone phobia" in English, is defined as the fear of being without a mobile phone. The aim is to determine the difference in the level of nomophobia between preclinical and clinical students and to identify the sociodemografic factors influencing nomophobia.

Materials and Methods: Our study is a case-control study. Students from the Faculty of Medicine at University of Health Sciences Türkiye who met the inclusion criteria, were enrolled in the study. Students outside of the University of Health Sciences Türkiye, Medical Faculty and these who did not fully complete the form were not included in the study. The students were divided into two different groups, preclinical and clinical, and were administered the Üsküdar nomophobia scale which was developed by Tarhan et al. in 2022. The data was collected through an online questionnaire. Volunteers first completed a data collection form that included socio-demographic characteristics such as age, gender, marital status, education period, city of residence, and type of accommodation. They also filled out a nomophobia scale form. The study aimed to include 289 participants using a simple random sampling method, chosen from a total population of 1,080 students studying at the University of Health Sciences Türkiye, Faculty of Medicine. Data analysis was performed using SPSS 14, with a significance level set at $p<0.05$.

Results: 64.7% of the participants are female; 20.1% are aged 18-20, 60.2% are aged 20-22, 15.9% are aged 22-24, and 3.8% are aged 24-26. There is a significant difference ($p<0.001$) between genders and age categories among educational periods. There is no significant difference ($p=0.153$) in terms of accommodation types among educational periods. Comparisons of scale total scores among educational periods reveal no statistically significant difference ($p=0.455$). There is a statistically significant difference ($p<0.001$) in scale total scores, communication impairment, and substance use total scores among genders. Comparisons of scale total scores among accommodation types show no statistically significant difference ($p=0.462$).

Conclusion: As a result of the study, it was determined that the academic phase had no effect on the level of nomophobia. Therefore, students in all grades with high scale scores can be trained in cell phone use without distinguishing between the preclinical and clinical phases. Additionally, for students exhibiting significant social communication difficulties, alternative social activities may be recommended. Furthermore, it is advisable to restrict screen time for students who excessively use electronic devices. Upon analyzing the scale scores, it was observed that female participants consistently obtained higher total scores compared to their male counterparts. This discrepancy may be attributed to women's greater engagement with social media platforms.

Keywords: Phone, phobia, medicine, addiction, social media

Table 1. Comparisons of scale total scores among educational periods, genders, and accommodation categories

	Preclinic med. (min.-max.)/ mean	Clinic med. (min.-max.)/ mean	t/z	p	Woman med. (min.-max.)/ AO	Man med. (min.-max.)/ mean	t/z	p	Dormitory med. (min.-max.)/ mean	Family house med. (min.-max.)/ mean	Student house med. (min.-max.)/ mean	f/h	p
Scale score total	63.06±15.37	64.72±16.36	-0.748 t	0.455	66.23±15.38 t	58.30±14.69	4.253	<0.001	62.78±14.94	63.13±15.95	66.06±16.51	0.775 f	0.462
Functional impairment total	19 (10-38)	19 (10-38)	-0.811 z	0.418	19 (10-38) z	18 (10-38)	-1.809	0.07	19 (10-38)	19 (10-38)	20 (10-36)	1.497 h	0.473
Substance use disorder total	24.25±6.26	23.08±6.68	1.306 t	0.193	26 (8-38) z	22 (8-36)	-4.9	<0.001	24 (8-36)	25 (8-38)	25 (8-38)	0.34 h	0.846
Communication impairment total	19 (7-35)	21 (10-35)	-1.733 z	0.83	21 (7-35) z	16.5 (7-35)	-3.301	<0.001	19.12±6.45	19.23±6.68	20.46±7.34	0.716 f	0.490

Med.: Median, min.-max.: Minimum-maximum, t/z: t/z tests, f/h: f/h tests, AO: Average of observations

Evaluation of University Students' Attitudes Towards Vaccine Hesitancy

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Background: Vaccine opposition refers to the rejection or questioning of vaccines, often due to misinformation, false beliefs not based on scientific evidence or factors like social media interactions. This attitude can put both individuals' health and public health at risk because vaccination is an effective measure to control infectious diseases. In the fight against vaccine opposition, scientific education, access to accurate information and public health awareness play a crucial role. This study examines the attitudes of University of Health Sciences (SBU) Türkiye students towards vaccine hesitancy.

Materials and Methods: This study surveyed SBU students on their demographics, vaccination history and views on vaccines. The Vaccine Hesitancy Scale consisting of 21 five-point Likert-type questions regarding the benefits and protective effects of vaccines, vaccine hesitancy (VH), solutions for not vaccinating and legitimization of VH (LVH) was administered. The scale has no cut-off value, with a score range of 21-105; higher scores indicate greater vaccine hesitancy. Data were analysed using SPSS 25.0, with $p<0.05$ considered significant.

Results: The study included 106 participants with a mean age of 20.38±2.16 (minimum: 18, maximum: 32). The majority were female (70.8%, n=75). Forty-two students (39.6%) were from the faculty of medicine, and 64 (60.4%) were from non-medical departments. The socio-demographic data and some responses are shown in Table. There were no significant differences in scale scores based on students' ages or parents' education levels ($p>0.05$). However, female students had higher VBPV subscale scores than male students ($p<0.05$), though other subscales and total scores did not differ significantly ($p>0.05$). Medical students scored lower overall and on subscales compared to non-medical students ($p<0.05$). Those who regretted receiving the Coronavirus Disease-2019 (COVID-19) vaccine had higher total and subscale scores than those who did not regret it ($p<0.05$). Scores also varied significantly based on students' preferences for vaccination program implementation, with notable differences between those favoring "mandatory" versus "voluntary" approaches ($p<0.05$).

Conclusion: In our study, non-medical students and those who regretted receiving the COVID-19 vaccine had higher scale scores.

Keywords:

Evaluation of the Ability of Emergency Medical Residents to Detect Child Neglect and Abuse in the First and Second Halves of Their Training

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Background: Healthcare professionals play a crucial role in identifying cases of child neglect and abuse. This study aims to examine the relationship between physicians' knowledge and education levels and their ability to diagnose child abuse. Increasing knowledge about these cases is expected to lead to greater awareness and understanding among physicians. Therefore, this study will measure the knowledge levels of emergency medicine trainees at the beginning and end of their training in order to assess changes in their understanding of this topic.

Materials and Methods: Our study is a single-center descriptive study, and the participants are emergency medicine residents at the University of Health Sciences Türkiye, Hamidiye Faculty of Medicine. The residents are in the first and second halves of their specialization training. "Scale for Identifying Signs and Risks of Child Abuse and Neglect" form and a demographic information form were administered to the participants. Data analysis was performed using the SPSS 25 software package.

Results: There were no significant differences in terms of scale scores between the first and second halves of emergency medicine residency regarding the physical signs of child abuse, behavioral signs of child abuse, signs of neglect, characteristics of children prone to abuse and neglect, familial characteristics in child abuse and neglect, as well as parental characteristics prone to abuse and neglect ($p>0.05$). However, when comparing scale scores based on whether emergency medicine residents had children or not, it was found that residents with children recognized the physical signs of child abuse and the behavioral signs of child abuse in children significantly better than those without children ($p<0.05$). Furthermore, a weak negative correlation was observed between the level of knowledge and awareness in determining child abuse and neglect and age ($p=0.003$; $r=-0.226$).

Conclusion: As a result of the study, it was determined that there is no significant difference in recognizing child neglect and abuse between doctors in the first and second halves of emergency medicine residency training. Since no previous study has been conducted specifically on emergency medicine residents, we do not have data to compare with the same population. The lack of significant difference may be due to the small sample size. It is concluded that more contributions should be made to the literature on this important and sensitive issue.

Keywords: Child abuse and neglect, emergency medicine, awareness

Table 1. Comparison of scale scores for the first and second halves of emergency medicine residency				
	Fırst half (1st and 2nd year) med. (min.-max.) x̄ ± SD	Second half (3rd and 4th year) med. (min.-max.) x̄ ± SD	Z/t	p
Physical signs of abuse on the child	82 (61-93)	80,50 (60-94)	-0.283Z	0.777
Behavioral signs in the child regarding child abuse	63 (47-75)	63,50 (50-74)	-0.020Z	0.984
Neglect signs on the child	31 (23-35)	31 (25-35)	-0.061Z	0.951
Characteristics of children prone to abuse and neglect	19 (12-23)	19 (13-21)	-0.695Z	0.487
Family characteristics in child abuse and neglect	33 (23-40)	33 (26-40)	-0.057Z	0.954
Parental traits prone to abuse and neglect	48.76±5.59	49.06±5.27	-0.282t	0.778
Z:Mann-Whitney U test calculation value, t: Independent samples t-test calculation value. SD: Standard deviation, min.-max.: Minimum-maximum, med.: Median				

The Influence of Perceived Social Support on Fear of Childbirth

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Background: This study aims to explore the correlation between the psychosocial health status of married nulliparous women and their fear of childbirth.

Materials and Methods: Data was collected through a questionnaire administered via Google Forms, including three scales: socio-demographic questions, the "Multidimensional Scale of Perceived Social Support", and the "Fear of Childbirth Scale". The study sample consisted of 386 married nulliparous women who visited University of Health Sciences Türkiye, Hamidiye Faculty of Medicine, Haydarpaşa Numune Training and Research Hospital. Non-probability haphazard sampling was used, with a Type I error rate (α) of 0.05.

Results: Among the 386 participants, 54.4% were aged 18-29, 66.06% had basic or primary education, and 47.41% were employed. Analysis showed a weak negative correlation between perceived social support and fear of childbirth (p<0.001; r=-0.174). No significant differences in fear scores were found based on age, education, family structure, living arrangements, social security coverage, or income. However, employed women had higher fear of childbirth scores than unemployed women (p<0.001).

Conclusion: The study found significant relationships between fear of childbirth and socio-demographic factors such as employment status, cohabitation, and family type. There was also a negative correlation between social support and fear of childbirth. Increasing social support may help reduce this fear, and it is recommended that interventions be implemented to support women who lack adequate social support.

Keywords: Rational drug use, education level, medication adherence, role of physicians, healthcare professionals

Table 1. Evaluation of the fear of childbirth scale with socio-demographic characteristics				
	Fear of childbirth	Fear of pregnancy and childbirth issues	Fear of unmet physical and social needs	Fear of pregnancy, childbirth, and maternal role
Age				
18-29 age	48 (22-92)	15.12±5.27	14.63±6	17.82±5.88
30-39 age	48 (21-81)	15.86±5.42	15.42±5.14	17.77±6
40-49 age	47 (24-69)	14.69±5.11	15.19±5.49	17.11±5.21
F/H	1.609^F	1.167^H	0.912^H	0.403^H
p	0.447	0.313	0.403	0.659
Educational status				
Primary school	49 (30-81)	15.66±5.19	16 (6-30)	16.85±5.28
Middle-high school	48 (24-92)	13.5±5.97	14 (6-28)	18.3±6.04
University-doctorate	48 (21-80)	15.28±5.09	14 (6-30)	17.66±5.81
F/H	0.521^F	0.392^H	4.275^F	1.007^H
p	0.771	0.676	0.118	0.366
Employment status				
Employed	50 (21-92)	16.38±5.22	15.31±4.96	18.42±6.1
Not employed	45 (22-81)	14.22±5.14	14.63±5.06	17±5.42
t/Z	-3.827^Z	4.11^t	1.363^t	2.427^t
p	<0.001*	<0.001*	0.174	0.016*
Family structure				
Nuclear	48 (21-81)	15.68±5.08	15 (6-30)	17 (9-40)
Extended	46 (24-92)	14.38±5.65	14 (6-30)	16.5 (10-45)
Split	39 (31-66)	12.46±5.49	13 (6-19)	17 (11-35)
F/H	3.181^F	4.106^H	2.342^F	0.221^F
p	0.204	0.017*	0.31	0.895
Living arrangements				
With their spouse	47.5 (21-81)	15.39±5.23	14 (6-30)	16 (9-40)
With relatives	51 (29-92)	15.06±5.95	15 (6-28)	18 (12-45)
Alone	42 (29-56)	11.27±3.69	13 (9-17)	18 (10-31)
F/H	3.902^F	3.289^H	1.237^F	6.603^F
p	0.142	0.038*	0.539	0.037*
Social security coverage				
Have social security	50.5 (28-81)	16.07±5.59	16 (6-30)	18.11±6
Do not have	46.5 (21-92)	15.06±5.21	14 (6-30)	17.58±5.75
t/Z	-1.94^Z	0.985^t	-2.186^Z	0.907^t
p	0.052	0.148	0.029*	0.493
Income status				
Less than expenditure	51 (26-92)	15.46±5.8	15.53±5.59	18.31±6.12
Equals expenditure	48 (24-80)	15.44±5.29	15.06±4.89	17.73±5.99
Exceeds expenditure	46 (21-70)	14.83±4.98	14.45±4.86	17.24±5.29
F/H	2.088	0.594	1.176	0.793
p	0.352	0.553	0.31	0.453
*p<0.05, ^{H}: Calculation value of Kruskal-Wallis H test, ^{F}: Calculation value of analysis of variance test, ^{Z}: Calculation value of Mann-Whitney U test, ^{t}: Calculation value of independent samples t-test				

Evaluation of Rational Drug Use Among Adults

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Background: The World Health Organization (WHO) defines rational drug use (RDU) as "a set of rules requiring patients to take drugs appropriate to their clinical needs, at the lowest cost to themselves and society, for an adequate period, and in doses that meet their personal needs." This study aimed to evaluate the level of rational drug use knowledge and the factors affecting it among individuals studying at the University of Health Sciences Türkiye and their first-degree relatives between February 12th, 2024, and March 4th, 2024.

Materials and Methods: The study is a prospective cross-sectional type of research, and participants were selected using a simple random sampling method from individuals who met the inclusion criteria and provided written consent. A power analysis using G*Power determined that the minimum number of participants required was 380, and the study reached a total of 440 participants. The questionnaire's first section contains demographic questions, and the second section includes the Rational Drug Use scale developed by Zeynep Demirtaş et al. (2018).

Results: No statistically significant difference was found between RDU total scores according to gender, age, marital status, having children, social security, or chronic disease status. However, a significant difference was found between occupational categories, with pairwise comparisons identifying a difference between physicians and other occupational groups (p<0.001). A statistically significant difference was also found between income levels (p=0.002), with pairwise comparisons showing the difference between the 10,000-30,000 TL and 60,001 TL and above categories (p<0.001). A total of 89.8% (395) of the participants scored 35 or above, indicating knowledge about rational drug use. In the logistic regression model created to evaluate rational drug use, which included the variables of age, gender, income level, education level, occupation, chronic disease, and medication use, the Cox & Snell R^2 was 0.04, and the Nagelkerke R^2 was 0.08. Female gender and education level positively predicted rational drug use (β=2.495, p=0.007; β=1.697, p=0.021). The RDU scale score is 2.5 times higher in females compared to males and increases by 1.6 times with higher levels of education. It was also determined that physicians have higher levels of knowledge regarding rational drug use compared to other professional groups. This could be explained by the education received by physicians.

Conclusion: In conclusion, income, education, and proximity to healthcare facilities positively affect RDU knowledge.

Keywords: Rational drug use, education, medication adherence, physicians

Table 1. Evaluation of the total score obtained from the rational drug use scale according to socio-demographic data					
Socio-demographic data	**Categories**	**% (n)**	**Total scale score med. (min.-max.)**	**z/H**	**p**
Gender	Male	32 (141)	39 (22-42)	-1.273^z	0.203
	Female	68 (299)	40 (22-42)		
Age	18-30	63.2 (278)	39.50 (22-42)	-0.837^z	0.402
	31-70	36.8 (162)	39.50 (22-42)		
Marital status	Single	64.8 (285)	40 (22-42)	-0.982^z	0.326
	Married	35.2 (155)	39 (22-42)		
Having children	No	67.5 (297)	40 (22-42)	-0.822^z	0.411
	Yes	32.5 (143)	39 (22-42)		
Job	Doctora	10.2 (45)	40 (24-42)	14.648^H	0.002*
	Non doctor healthcare worker	2.3 (10)	39 (28-42)		
	Other professional worker[a]	43.9 (193)	38 (22-42)		
	Student	43.6 (192)	39 (22-42)		
Social security	None	15.5 (68)	38 (22-42)	1.746^z	0.081
	Have	84.5 (372)	40 (22-42)		
Income rate income level	10.000-30.000[a]	41.6 (183)	39 (22-42)	12.114^H	0.002*
	30.001-60.000	34.8 (153)	40 (22-42)		
	60.001 and above[a]	23.6 (104)	40 (26-42)		
Chronic disease	None	85.0 (374)	39 (22-42)	0.742^z	0.458
	Have	15.0 (66)	40 (25-42)		

Table 1. Continued

Socio-demographic data	Categories	% (n)	Total scale score med. (min.-max.)	z/H	p
Drug use	No	76.8 (338)	39 (22-42)	0.585[z]	0.559
	Yes	23.2 (102)	40 (22-42)		
Distance to healthcare facility	0-10 km	88.9 (391)	40 (22-42)	-4.018[z]	<0.001*
	11 km and above	11.1 (49)	38 (22-42)		
Education level	Primary school	1.1 (5)	36 (32-42)	10.109[H]	0.072
	Middle school	2.3 (10)	36 (22-42)		
	High school	13.9 (61)	39 (23-42)		
	University	69.1 (304)	39 (22-42)		
	Degree	11.4 (50)	40 (24-42)		
	PhD and above	2.3 (10)	40.50 (35-42)		
*p<0.05, [z]Mann-Whitney U test calculation value, [H]Kruskal-Wallis H test calculation value, med.: Median, min.-max.: Minimum-maximum					

Evaluation of the Relationship Between Psychological Addiction Status and Nicotine Addiction of Smoking Students

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Background: Nowadays, the high smoking habit among the young population has become a serious source of concern. Especially the student population constitutes a significant part of this habit and faces psychological and physiological risks. Evaluating the relationship between the psychological addiction status of smoking students and nicotine addiction is of critical importance for both individual and public health. Our study aimed to examine the relationship between medical school students' psychological dependence on cigarettes and nicotine addiction.

Materials and Methods: Our research is single-center and descriptive type and students studying at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine between 09.11.2023-30.05.2024 and smoking were included. Following the questioning of the socio-demographic data of the students in the first part of the data form, the Fagerström Nicotine Dependency Test (FNBT) and the Psychological Dependency of Cigarette Assessment Scale (SPBDS) were applied in the second part. SPSS 25.0 statistical package program was used to analyze the data, and p<0.05 was considered significant.

Results: Two hundred and eighty-nine smoking students were included in our study, and the distribution of the students' socio-demographic characteristics is given in Table. No significant difference was found between gender and FNBT and SPBDS total scores (p=0.414, p=0.956, respectively). When the participants' FNBT and SPBDS total scores were compared, a significant positive correlation was found between them (p=0.009, r=0.155). When the FNBT and SPBDS total scores of students studying in clinical and theoretical classes were compared, the scores of clinical class students were found to be significantly higher (p=0.01, p=0.038 respectively). There was a significant difference in the evaluation of FNBT according to the percentage of pocket money spent on cigarettes (p=0.000). When the post-hoc test was applied, the FNBT scores of those who said they spent less than 25 percent of their monthly pocket money on cigarettes were significantly lower than the other groups. Again, when the FNBT scores of the students' accommodation were compared, a significant difference was found, and the FNBT scores of the students staying at home were higher than the other groups (H=7.71, p=0.028).

Conclusion: A relationship was found between the psychological addiction status and cigarette addiction of students studying at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine. As a result of examining this relationship by various categories, a positive correlation was detected.

Keywords: Addiction, smoke, tobacco

Table 1. Distribution of student's socio-demographic characteristics			
Age range	Living space	Gender	Number
Under 20	Family house	Women	10
	Family house	Man	23
20-25 years old	Family house	Women	40
	Family house	Man	70
	Home	Women	35
	Home	Man	44
	Dorm	Women	18
	Dorm	Man	23
Over 25 years old	Family house	Women	2
	Family house	Man	5
	Home	Women	4
	Home	Man	6
	Dorm	Women	5
	Dorm	Man	4

Stigmatizing Attitudes, Beliefsand Actions Scale Towards Abortion Among Hamidiye Faculty of Medicine Students at University of Health Sciences Türkiye

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Background: This study aims to explore the perspectives of Hamidiye Faculty of Medicine students at the University of Health Sciences Türkiye on abortion, a topic influenced by societal and cultural factors.

Materials and Methods: A descriptive study was conducted with 280 participants from a population of 1026 students at Hamidiye Faculty of Medicine, selected with a 95% confidence level. Participants completed a survey assessing their socio-demographic characteristics and the Scale of Stigmatizing Attitudes, Beliefs, and Behaviors about Abortion. Data were analyzed using SPSS 25.

Results: The median age of the 282 participants was 21 (range: 18-34). Most were women (55.7%, n=157) and from the Marmara Region (51.4%, n=145). Nearly half of the participants were in their third year of study (48.6%, n=137), and the majority had one sibling (46.8%, n=132). The median total score of the abortion stigma scale was 29 (range: 18-86). There was no significant difference in scale scores based on participants' residential areas (city/village/town), whether they knew someone who had undergone an abortion, or age groups (p>0.05). However, female students had significantly lower scores than male students (p<0.001), and those in the practical training period had lower scores than those in the theoretical period (p<0.001). Students with more than three siblings had higher scores than those with fewer siblings (p=0.018). Additionally, students from the Southeastern Anatolia Region had higher scores than those from the Aegean Region (p=0.009).

Conclusion: The study found that male students, those in the theoretical stage, and students with more siblings had more negative attitudes toward abortion compared to their counterparts. Students from the Southeastern Anatolia Region also held more negative views than those from the Aegean Region. These findings suggest that societal and cultural factors shape abortion attitudes. The study highlights the need for increased education and awareness to address negative perceptions, especially among future healthcare professionals.

Keywords: Abortion, stigma, gender differences

Evaluation of the Knowledge Level of HPV and HPV Vaccine Among 18-25 Years Old Students of the University of Health Sciences in Türkiye

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Background: Human papilloma virus (HPV), is a double-stranded DNA virus belonging to the Papillomaviridae family with approximately 200 types. HPV's, which are responsible for infections occurring in the genital area with at least 40 types, are classified into low, intermediate, and high-risk categories. The aim of this study was to evaluate the knowledge levels of University of Health Sciences (UHS) students about HPV and HPV vaccine.

Materials and Methods: In this descriptive cross-sectional study, the population consisted of students between the ages of 18-25 (n=25,185) studying at the campuses of UHS in Türkiye. When calculated with the medhesap program with 95% reliability and 0.05% margin of error, the sample size was calculated as 379. Approval for the study was obtained from the Scientific Research Ethics Committee of the UHS Hamidiye. In the study, a questionnaire consisting of 2 parts was used, and the participants were asked to fill in the demographic questions consisting of 25 items and the 33-question HPV Knowledge Scale (HPV-KS) developed by Waller (2011) and whose Turkish validity and reliability was performed by Bozkurt et al. Data analysis was performed using the SPSS 25 package program. Statistical analysis was performed with SPSS Version 25.0. $p \leq 0.05$ was considered statistically significant.

Results: Of the 382 students who participated in the study, 59.9% were between the ages of 18-21 years and 51.8% were male. The mean HPV-KS score of the participants was 16.79±0.5. The scores of the students were in the range of 0-30. The median HPV-KS of the students was 18. It was found that 82.7% of the students had heard of HPV, 73.5% had heard of the HPV test, 60.7% had knowledge about cervical cancer, and 79% knew that HPV could cause cervical cancer. 11.3% of the participants had not heard about HPV. Individuals who had heard of HPV vaccine had received HPV vaccine at a higher rate than those who had not (p=0.036). There was no significant difference between a history of cancer in the family and knowledge that "HPV can cause cervical cancer" (p=0.167).

Conclusion: In our study, although our participants were university students studying in the field of health, the level of knowledge of HPV and HPV vaccine was insufficient in both genders. Strategies for increasing the level of knowledge in the young population may be useful in increasing sensitivity about HPV.

Keywords: Human papilloma virus, HPV vaccine, knowledge, student

Table 1. The relationship between hearing about and receiving HPV vaccine						
		Have you heard of HPV vaccine?				
		I don't know	Yes	No	Chi-square	p-value
Have you been vaccinated against HPV?	Yes	1 (0.3)	33 (8.6)	1 (0.3)	6.663	0.036
	No	23 (6.0)	261 (68.3)	63 (16.5)		
p: Fisher-Freeman-Halton exact test, HPV: Human papilloma virus						

Assessment of Medical Students' Attitudes Towards the Medical Profession

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Background: Medical education is a long and rigorous process but remains a popular career choice. Key factors influencing this preference include a desire to serve humanity, professional interest, and family influence. Economic concerns, violence in healthcare, societal pressures, and the Coronavirus Disease 2019 (COVID-19) pandemic are also significant. This study examines how these external factors relate to the choice of a medical career.

Materials and Methods: The study surveyed 280 students from Hamidiye Faculty of Medicine, University of Health Sciences Türkiye. Data were collected using a two-part questionnaire: The first part included six socio-demographic questions, and the second part used a 24-item attitude scale towards the medical profession. Data were analyzed with SPSS 29, and the Type I error rate (α) was set at 0.05.

Results: Of the participants, 56.1% were male and 43.9% were female. The distribution was: 15.7% in the 1st year, 13.9% in the 2nd year, 57.9% in the 3rd year, and 12.5% in the 4th year and above. Age distribution was: 38.2% aged 18-20 years, 47.9% aged 21-22 years, and 13.9% aged 23 years and above. Students who chose the profession willingly had higher attitude scores ($p<0.01$). Regarding family background, 27.9% had active physicians in their family, and 72.1% did not. There was no significant difference in attitude scores between students with and without active physicians in their family ($p=0.993$). Female students had higher attitude scores compared to males ($p<0.01$).

Conclusion: Female students at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine had higher attitude scores towards the medical profession than their male peers. Students who chose medicine voluntarily also showed higher attitude scores. There were no significant differences in attitude scores across academic years, between those with and without economic concerns, or between those with and without active physicians in their families. Additionally, no significant differences were found related to the impact of violence against healthcare professionals or the COVID-19 pandemic.

Keywords: Career choice in medicine, gender differences, medical profession perception, socio-demographic factors

Table 1. Comparison of attitude scale scores between gender categories				
	Male (min.-max.)	Female (min.-max.)	Z	p*
Attitude towards the medical proffesion	85 (24-120)	92 (24-120)	-3.527	<0.01
*: p<0.05, Z: Mann-Whitney U test value, min.-max.: Minimum-maximum				

The Impact of Parental Education Levels on the Careers of Medical Students at University of Health Sciences Türkiye

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Background: Parental education, a significant factor in individuals' lives, plays a crucial role in critical issues such as children's career choices. This study aims to examine how the education levels of parents of students at University of University of Health Sciences Türkiye, Hamidiye Faculty of Medicine, affect students' career choice consistency and their career satisfaction.

Materials and Methods: Our study was internet-based, conducted from February 1, 2024, to March 1, 2024, through Google forms targeting students at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine. The data collection tool included a questionnaire covering participants' socio-demographic characteristics and the "individual-parent career goal discrepancy" (BEKHT) scale. SPSS 25 software was used for data analysis. The Type I error rate (α) was set at 0.05, and statistical significance was considered at $p<0.05$.

Results: A total of 280 students participated in our study. Among them, 54.3% (n=152) were male, 21.1% (n=59) were 20 years old, and 25.7% (n=72) were first-year students. 15.8% of the participants' families had an income of one minimum wage, while 29% (n=81) had an income of two minimum wages. When examining the education levels of the families, 53.6% (n=150) of the fathers had higher education, while 38.6% (n=108) of the mothers had higher education. When evaluating the influence of parents on the participants' decision to choose medical school, 21.8% (n=61) stated that it was not their own choice. Among those for whom it was not their choice, 83.6% (n=46) indicated it was their family's choice. Regarding individual satisfaction, 81.1% (n=227) reported being satisfied. When comparing the scale scores of those whose choice it was and those whose it was not, those for whom it was not their choice had higher BEKHT ($p<0.001$), talent ($p<0.027$), selection ($p<0.001$), and enthusiasm ($p<0.001$) scores. It was found that parental education level ($p=0.827$, $p=0.791$) and income level ($p=0.591$) did not have a significant connection with BEKHT scale scores.

Conclusion: It was determined that students who entered the University of Health Sciences Türkiye, Hamidiye Faculty of Medicine by their own choice were more consistent and satisfied with their career choice, regardless of their family's financial status or educational level.

Keywords: Gender differences, career choice, parental influence

A Study on the Relationship Between the Nutritional Habits and Academic Performance of Students at the University of Health Sciences Türkiye, Hamidiye Faculty of Medicine

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Background: Nutrition is essential for a healthy life. Adequate and balanced nutrition is important for the growth, development, and healthy functioning of the body. However, imbalanced nutrition can affect cognitive performance and negatively impact academic success. This study aims to examine the relationship between the nutritional habits and academic performance of medical students at the University of Health Sciences Türkiye.

Materials and Methods: The study is designed as a cross-sectional and analytical research. The data collection tool consists of a two-part questionnaire administered online via Google forms. The population of the research consists of medical students at the University of Health Sciences Türkiye. The sample size was calculated to be 374 students at the University of Health Sciences Türkiye, and the target was set at 412 by including an additional 10%. The first part of the questionnaire includes 18 items to determine demographic characteristics, and the second part contains the nutrition knowledge scale (NKS). The data will be analyzed using SPSS 25. The Type I error rate (α) in the research will be set at 0.05.

Results: A total of 374 individuals participated in the study. Of the participants, 58.2% (n=216) were male. The most represented age group was 21-22 years old (n=170; 45.7%). The general weighted grade point average of the participants was between 3.00 and 3.50 (n=211; 57.2%). The participants were mostly staying in dormitories (n=172; 46.2%). The average NKS score was 68.5±10.2. A significant relationship was found between nutritional habits and academic performance (p<0.01). However, no significant relationship was found between body weight and nutritional habits (p=0.067). A significant relationship was found between income level meeting basic needs and nutritional habits (p=0.024). A significant relationship was found between the need for housing and nutritional habits (p<0.001).

Conclusion: As nutritional habits improved, academic performance increased. However, there was no relationship between body weight and nutritional habits. As income increased, nutritional habits improved. Students living in dormitories had worse nutritional habits compared to those living at home.

Keywords: Nutritional status, academic performance, medical students, cross-sectional studies, eating habits

Research of the Relationship Between Social Media Addiction and Attention Deficit Hyperactivity Disorder Among Medical Faculty Students

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Background: The widespread use of the internet in everyday life due to advancing technology has also changed communication patterns. Nowadays, social media usage plays a significant role in communication, with both positive and negative effects. The aim of this study is to determine the relationship between social media addiction and attention deficit hyperactivity disorder (ADHD) among medical students.

Materials and Methods: This study was conducted with 176 students enrolled at the Hamidiye Medical Faculty of University of Health Sciences Türkiye between February 1 and April 30, 2024. Data were collected using the "Bergen social media addiction scale", consisting of 34 questions aimed at determining participants' demographic characteristics, levels of social media addiction, and attitudes towards ADHD, and the "adult ADHD self-report scale", questionnaire form. Research data were analyzed using appropriate statistical methods. A significance level of p<0.05 was considered statistically significant.

Results: It was determined that 60.8% of the participants were female. Regarding age distribution, 31% of participants were between 18-20 years old, 58.6% were between 21-23 years old, and 10.3% were 24 years old and above. Female participants were found to have higher scores in attention deficit and impulsivity [23 (0-48)] compared to males. It was found that the highest percentage of participants, 37.4%, reported using social media for 4-6 hours daily. Instagram was the most commonly used social media platform among participants, with 64.9%. The study identified a moderately positive correlation between participants' social media addiction and hyperactivity disorder scores (p<0.001; r=0.478), as well as a moderately positive correlation between social media addiction and attention deficit and impulsivity scores (p<0.001; r=0.416).

Conclusion: Our study identified a significant relationship between social media addiction and ADHD among medical students. It was found that the majority of participants reported using social media for 4-6 hours daily, with Instagram being the most widely used platform. To reduce the impact of social media addiction on ADHD among medical students, it may be recommended to limit daily social media usage and specifically monitor Instagram usage.

Keywords: Social media, addiction, attention deficit hyperactivity disorder

Investigation of Academic Procrastination Behaviors of Students with Different Depression, Anxiety and Stress Levels at Hamidiye Faculty of Medicine, University of Health Sciences Türkiye

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Background: The study examines the relationship between procrastination behaviors of students at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine and their levels of depression, anxiety, and stress (DAS) as well as their demographic characteristics.

Materials and Methods: In this descriptive study, 231 participants were included from 1.026 university students at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine with a 95% confidence level. Demographic questions, the DASS-21, and Lay's (1986) general procrastination scale were administered to the participants. Data analysis was performed using SPSS version 25.

Results: The median age of the 231 participants included in the study was 21 (range: 18-26). The majority were male (65.7%, n=151). Most were from the Marmara Region (32.6%, n=75). The majority were in their 3rd year (49.6%, n=114). Most did not have a relationship (53.5%, n=123). Most resided in dormitories (43.5%, n=100). Those who were able to save money and make investments were in the majority (43%, n=99). Most were graduates of Anatolian High Schools (50.4%, n=116).

Comparisons among gender, relationship status, age, place of birth, and residence categories revealed:

• No significant differences in DAS, vitality, procrastination, regular study habits, or last-minute behavior (TEDS).

• No significant relationship between DAS and TEDS scores.

• Male students residing in dormitories were found to be more than female students.

• Female students living in family homes and student apartments outnumbered male students.

• Second-year students had higher procrastination scores than 3rd-year students.

• Those living on credit or debt had higher anxiety and stress scores compared to those who could save money and invest.

• Those relying on social assistance had higher depression scores.

• No significant differences in TEDS scores based on living conditions.

• Graduates of vocational high schools had higher DAS scores compared to graduates of science high schools and Anatolian high schools.

Conclusion: • Second-year students exhibited higher procrastination behaviors than 3rd-year students.

• Those living on credit or debt had higher anxiety and stress compared to those who could save and invest.

• Those relying on social assistance had higher levels of depression compared to those living on credit or debt and those who could save and invest.

• Graduates of vocational high schools had higher DAS scores than those from other types of high schools.

In conclusion, the relationships between students' academic status, demographic characteristics, and psychological factors appear to be complex and multifaceted. The findings provide important insights into the factors affecting students' academic success.

Keywords: Anxiety, depression, stress, suspension

Examination of the Life Satisfaction of Students Studying at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine Depending on Their Stay in a Dormitory or Student House

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Background: The basic conceptual question of this research is how satisfied the students of University of Health Sciences Türkiye, Hamidiye Faculty of Medicine are. The aim of the research is to examine the perceptions of medical school students studying at University of Health Sciences Türkiye, Hamidiye Faculty of Medicine about life satisfaction depending on their housing characteristics (staying at dormitory or at home).

Materials and Methods: Our study was carried out online using the Google Survey program between 18.02.2024-18.03.2024 in University of Health Sciences Türkiye, Hamidiye Medical Faculty students. The data collection tool consists of two parts. In the first part, it consists of questions that determine the socio-demographic characteristics of the participants and questions prepared by the researcher who evaluates their stay in a dormitory or student house. In the second part, there is the "life satisfaction scale" 1, which aims to measure the perception of life satisfaction. The Turkish validity and reliability study of this scale, developed by Diener et al., was carried out in 2016. This scale consists of a total of 5 items under a single-factor structure. The analysis of the data was carried out using the SPSS 25 package program. In the study, type I error rate (α) was taken as 0.05.

Results: The universe of our search consists of 1.018 people (male: n=599; 58.8%/girl: n=419; 41.2%). A total of 308 people participated in this cross-sectional, analytical and descriptive survey study. 53.6% (n=165) of the participants were male. Individuals between the ages of 21-23 participated most (n=160; 51.9%). We have the most 3rd grade participants (n=138; 44.8%). Participants mostly stay in dormitories (n=160; 51.9%). The Life Satisfaction Scale med. (min.-max.) values of the students staying in the dormitory are 14.5 (5-25), and the med. (min.-max.) values of the students staying in the dormitory are 15 (5-25). In the statistical tests performed using the life satisfaction scale, there was no significant difference between the life satisfaction and the stay in the dormitory or student home (p=0.3). In the statistical tests performed using the life satisfaction scale, it was determined that there was no significant difference between the categories of income level (p=0.6), gender (p=0.84), age (p=0.9) in terms of life satisfaction scores.

Conclusion: There was no difference in terms of life satisfaction between University of Health Sciences Türkiye, Hamidiye Medical Faculty students staying in the dormitory and Hamidiye Medical Faculty students staying in the student home. At the same time, no significant relationship was established between the gender, age and income level categories of life satisfaction.

Keywords: Life satisfaction, student house, dormitory

The Impact of Football Fanaticism on University Students' Psychology

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ABSTRACT

Background: Football is a sport that garners the most attention from individuals in Türkiye, regardless of gender and age, and can affect the emotional states of individuals in their daily lives. These effects can increase with football fanaticism, leading to tendencies towards violence and causing emotional changes such as depression and anxiety. In our study, we aimed to investigate the impact of university students' interest in football on their tendencies towards violence, depression, stress, and anxiety.

Materials and Methods: Demographic information was collected from university students who agreed to participate in the study. They were administered a 9-item socio-demographic questionnaire, a 13-item football fandom fanaticism scale (FFFS), an 18-item violence tendency scale (VTS), and a 41-item depression, stress, and anxiety scale (DSAS). Statistical analysis was conducted using SPSS 25, with p<0.05 considered statistically significant.

Results: Out of 258 participants, 68.6% were male, 51.2% resided in dormitories, 79.5% reported sufficient income, and 83.3% were not employed. 61.6% of participants reported an interest in football, 8.9% owned season tickets, and 64.3% watched matches of teams other than their favorite. 30.2% mentioned being unable to study for exams due to football matches, and 20.2% stated that their fandom negatively affected their relationships with friends. The mean scores were as follows: FFFS 29.00 (range: 13-52), VTS 43.50 (range: 18-72), DSAS 96.00 (range: 41-164). Positive moderate correlations were found between FFF and VTS (p<0.001; r=0.551), weak positive correlations between depression levels (p<0.001; r=0.239), and very weak positive correlations between anxiety levels (p=0.005; r=0.176) and stress levels (p=0.022; r=0.142).

Conclusion: FFF was found to moderately increase university students' tendency towards violence, weakly increase depression levels, and very weakly increase anxiety and stress levels. Given the potential negative effects of any form of fanatic interest, especially on students, it is suggested that efforts be made to direct students' interest in sports towards participatory, collective, and positively impactful activities.

Keywords: Football fanaticism, students, pychology

Table 1. Correlation of participants' score scale ratings		FFFS total	VTS total	Depression	Anxiety
VTS total	rho*	0.551			
	p	<0.001			
Depression	rho*	0.239	0.27		
	p	<0.001	<0.001		
Anxiety	rho*	0.176	0.455	0.855	
	p	0.005	<0.001	<0.001	
Stress	rho*	0.142	0.446	0.823	0.909
	p	0.022	<0.001	<0.001	<0.001

*: Spearman correlation coefficient, VTS: Violence tendency scale, FFFS: Football fandom fanaticism scale

Evaluation of Medical Students' Attitudes Towards the Educational Use of Tablet Computers

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Background: Students employ various methods to enhance their academic performance and increase their interest in courses. This study aims to examine the impact of tablet usage on the quality of theoretical education, academic success, and psychological effects on medical students during lectures and study sessions. Specifically, the study investigates the effects of tablet usage on students' motivation and concentration.

Materials and Methods: This study was conducted with third-year students from the University of University of Health Sciences Türkiye, Hamidiye Faculty of Medicine. A survey consisting of socio-demographic data and Likert-scale questions was administered to evaluate medical students' attitudes towards the educational use of tablet computers. Data collection occurred between February 5, 2024, and March 4, 2024. Statistical analysis was performed using SPSS version 25, with a significance level set at $p < 0.05$.

Results: A total of 165 students participated in the study, with 53.9% (n=89) being male. Among the participants, 37.6% (n=62) resided in state dormitories, 50.3% (n=83) lived at home, and 12.1% (n=20) stayed in private dormitories. Additionally, 81.8% (n=135) of the students owned a tablet. It was found that 41.8% (n=69) of the participants' income matched their expenses, 44.2% (n=73) had income exceeding their expenses, and 13.9% (n=23) had expenses surpassing their income. Moreover, 27.3% (n=45) relied on allowances, 22.4% (n=37) received scholarships, and 50.3% (n=83) utilized both scholarships and allowances for financial support. Regarding academic performance, 21.2% (n=35) had grades below average, while 78.8% (n=130) had grades above average. The mean score on the educational use scale was 28 for tablet users and 21.5 for non-users. There was no significant difference in grade point averages between tablet users and non-users (p=0.648). However, a significant difference was found in the total scale score for the educational use of tablet computers between users and non-users (p=0.01).

Conclusion: No significant difference was observed in grade point averages between tablet users and non-users. However, attitudes towards education and motivation were more positive among tablet users compared to non-users. Encouraging the use of tablets may enhance individual study motivation. Given that the study evaluated general grade point averages based on a 4-point scale, it provides a broad conclusion. Future research focusing on course-specific exam averages may yield more detailed results.

Keywords: Tablet computers, medical education, academic performance, student motivation, digital learning, educational technology, mobile learning, concentration, medical students, survey study

Trust in Science and Scientists After the COVID-19 Pandemic

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Background: During the pandemic, the society's high level of trust in scientists was effective in ending the pandemic. In our study, it was aimed to measure the level of trust in science and scientists among individuals aged 18-25 in the Turkish society after the Coronavirus Disease 2019 (COVID-19) pandemic.

Materials and Methods: First part of the survey contained socio-demographic questions. For the second part Turkish adaptation of the scale of Instrument to Measure Trust in Science and Scientists developed by Nadelson et al. was used. Afterwards, the questions that were prepared by the researcher by reviewing the literature and evaluating the knowledge, attitudes and behaviours of the participants about trust in science and scientists after the COVID-19 pandemic were questioned with five-point Likert sentences. SPSS 25 was used for data analysis.

Results: Three hundred ninety-three participants between 18-25 ages participated in this study. The majority of the participants were 20 years old (n=74, 18.8%) and the average age of the participants was 21±2.18. Participants without chronic disease had higher Trust in Science scores but there was no significant differences for Trust in Scientist and TSSCP scores (p=0.006, p=0.12, p=0.144, accordingly). Participants without chronic disease in their family had higher Trust in Scientist and TSSCP scores but there were no significant differences for Trust in Science (p=0.004, p=0.008, p=0.165, accordingly). Participants who have lost someone close to them had higher Trust in Scientist scores whereas there were no significant differences for Trust in Science and TSSCP scores (p=0,013. p=0.331, p=0.178). Students had significantly higher Trust in Scientist, Trust in Science and TSSCP scores compared to non-student participants (p=0.04, p<0.001, p=0.021, accordingly). There is no significant difference for Trust in Scientist, Trust in Science and TSSCP between participants whose one of their family members works in the health industry and participants who do not (p=0,764, 0,106, 0,627, accordingly) There is no significant difference for Trust in Scientis, Trust in Science and TSSCP scores between participants who got vaccinated during the pandemic and participants who did not (p=0.12, p=0.14, p=0.22, accordingly).

Conclusion: Participants who did not have chronic diseases had higher Trust in Science scores. This show us that diseases which has no definitive treatment impacts people's trust in science negatively. Same thing can be said for participants who at least one of their family members has chronic diseases. Surprisingly participants who had lost someone close to them had higher Trust in Scientist scores. COVID-19 pandemic ended nearly two years ago and that could be the reason for this confusing situation. In this study we saw that educated participants had higher trust in science and scientists. This shows us that education is a crucial factor for trusting science and scientist and we have to educate more people effectively in order to maintain public health better for future possible pandemic.

Keywords: Pandemic, trust in science, trust in scientist

Investigation of the Effect of Sleep Quality on Academic Success in Medical Faculty Students

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Background: Due to the intensity of medical education, medical students experience declines in sleep quality. Previous studies have investigated sleep quality; our study aims to measure the sleep quality in medical students and its impact on academic performance using course grades.

Materials and Methods: Our study will be conducted online through Google Surveys with students from University of Health Sciences Türkiye, Hamidiye Faculty of Medicine. The data collection tool consists of two parts. The first part contains questions about socio-demographic characteristics and sleep quality prepared by the researcher. The second part includes the Pittsburgh Sleep Quality Index (PSQI), developed by Buysse et al. in 1989, which quantitatively measures sleep quality. It contains 24 questions in total, and participants scoring 5 or above are considered to have poor sleep quality. Data analysis will be performed using SPSS 25 software, with a type 1 error rate (α) of 0.05.

Results: A total of 308 participants took part in the study, with 39.3% (n=121) being male and 60.7% (n=187) being female. The majority of participants were aged 21-23 years (n=167; 54.7%). Most participants were from the first year (n=106; 34%). The general weighted grade point average of participants was 3.00-3.49 (n=104; 33.7%). According to the PSQI scale, 62% of participants (n=191) had poor sleep quality, while 38% (n=117) had good sleep quality. The average PSQI score was 7.00±3.2. No significant relationships were found between PSQI sleep quality scores and age (p=0.085), gender (p=0.065), average monthly income (p=0.079), preferred education style (p=0.063), changes in sleep patterns during exam periods (p=0.098), or students' grade point averages (p=0.068). However, a significant difference was found among those who exercised regularly (p=0.043).

Conclusion: There is no relationship between sleep quality and academic performance levels. However, there is a relationship between the PSQI scores and those who exercise regularly. Participants who exercised regularly had better sleep quality according to the PSQI scale, indicating the effect of exercise on sleep quality. Providing opportunities for exercise to students is important.

Keywords: Sleep quality, academic performance, exercise, medical student

Table 1. The effect of socio-demographic characteristics on PSQI score			
Variables	**PSQI group**		
	Poor sleep quality (n=191)	**Good sleep quality (n=117)**	**p-value**
Age (year)			
25 year and younger 25 year and older	180 (94.2) 11 (5.8)	95 (81.1) 22 (18.8)	0.085
Gender			
Female Male	89 (46.5) 102 (53.4)	98 (83.7) 19 (16.2)	0.065
Average monthly income			
Minimum wage 2 minimum wage 3 or more minimum wage	15 (7.8) 90 (47.1) 86 (45)	80 (68.3) 15 (12.8) 22 (18.8)	0.079
Education style preference			
Face to face Online Hybrid	120 (62.8) 51 (26.7) 20 (10.4)	50 (42.7) 45 (38.4) 22 (18.8)	0.063
Change in sleep patterns during exam periods			
Yes Sometimes No	141 (73.8) 28 (14.6) 22 (11.5)	40 (34.1) 50 (42.7) 27 (23)	0.098
Do you exercise regularly?			
Yes Sometimes No	35 (18.3) 80 (41.8) 76 (39.7)	60 (51.2) 24 (20.5) 33 (28.2)	0.043
Participants' overall weighted grade point average			
<2 2.00-2.49 2.50-2.99 3.00-3.49 3.50-4.00	8 (4.1%) 39 (20.4%) 55 (28.7%) 75 (39.2%) 14 (3%)	5 (4.2%) 25 (21.3%) 32 (27.3%) 29 (24.7%) 26 (22.2%)	0.068
PSQI: Pittsburgh Sleep Quality Index			

The Relationship Between Medical School Students' Satisfaction Levels with Their Dormitories and Their Academic Achievement Levels

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Background: For students attending university away from their families, accommodation is a fundamental issue. Some students meet their housing needs by staying in student dormitories. Previous studies have compared the academic achievement levels of university students staying in dormitories with different standards. In this study, we aim to examine the relationship between university students' satisfaction levels with their dormitories and their academic achievement levels.

Materials and Methods: Our study will be conducted online via Google Forms with students from University of Health Sciences Türkiye, Şişli Hamidiye Etfal Training and Research Hospital. The data collection tool consists of two parts. The first part includes questions prepared by the researcher to determine the socio-demographic characteristics of the participants and evaluate their dormitory conditions. The second part includes the University Student Dormitory Satisfaction Survey (USDSS) developed by Ünsel and Turan (2014). Data analysis will be performed using the SPSS 25 software package, with a type 1 error rate (α) of 0.05.

Results: A total of 265 people participated in our study. Of the participants, 53.6% (n=142) were male. The majority were aged 21-23 (n=114; 43%). Most participants were in their third year (n=84; 31.7%). The overall grade point average (GPA) of the participants was 3.00-3.49 (n=90; 34%). Most participants stayed in state dormitories (n=117; 44.2%). The most common dormitory stay duration was three years (n=85; 32.1%). The USDSS average was 66.19 +/- 11.06. A significant relationship was found between the participants' dormitory satisfaction scores and the distance to the school (p<0.001). No significant relationship was found between the distance to the school and the overall GPA (p=0.071). No significant relationship was found between the participants' GPA and their dormitory satisfaction scores (p=0.095). No significant relationship was found between the overall GPA and the USDSS average (p=0.806). A significant relationship was found between the USDSS average and the distance to the school (p<0.001).

Conclusion: There is no relationship between the satisfaction levels of university students staying in dormitories and their academic achievement levels. However, a relationship was found between the distance of the dormitory to the school and the dormitory satisfaction score. The higher satisfaction with dormitories located at a close distance is an indicator of the difficulty of urban transportation. Increasing on-campus dormitory facilities is important.

Keywords: Satisfaction, dormitory, academic achievement

Investigation of Inappropriate Drug Use in Elderly Individuals Receiving Inpatient Treatment in the Internal Medicine Department and Using Multiple Drugs According to TIME Criteria

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Background: Polypharmacy means the use of multiple drugs; inappropriate drug use means that the patient uses more drugs than he needs or uses drugs without indications. The geriatric group is considered to be at higher risk for polypharmacy due to metabolic changes associated with aging and decreased drug clearance. Various criteria have been developed in the literature to prevent possible incorrect drug use. The Beers and STOPP/START criteria are the most commonly used of these criteria. Recently, the Turkish inappropriate medication use in the elderly (TIME) criteria have been developed for the Turkish population. The aim of our study is to examine inappropriate drug use in the patient group determined by the TIME criteria developed specifically for our country and to create awareness and guide clinicians.

Materials and Methods: This study consists of 151 patients aged 65 who applied to the Department of Internal Medicine at the University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Hospital and had a history of hospitalization in the internal medicine ward between January 2024 and April 2024. The use of 5 or more drugs together is considered polypharmacy, and those meeting this definition were included in the study. The patients' prescription medications used at the time of admission and those started in the ward, diagnosis at the time of admission, age and gender, medical history, and chronic diseases were scanned through the hospital electronic archive. Potential inappropriate drug use rates in some core drug groups used by patients were determined using TIME-to-STOP criteria.

Results: Preliminary findings of our study reveal information on the clinical features and use of proton pump inhibitor (PPI), corticosteroid, furosemide, clopidogrel, benzodiazepine and metoclopramide in 151 patients. In this context, 54.96% of the patients were female, 45.03% were male and 48.34% had hypertension, 28.47% had diabetes mellitus and 19.86% had chronic diseases such as coronary artery disease. When we look at the rates of inappropriate use of drugs, benzodiazepines were in the first place with a rate of 44.44%, followed by PPI with a rate of 32.28%, clopidogrel with 22.22%, furosemide with 22.03% and corticosteroid with 7.69%, while inappropriate use of drugs was detected in both patients using metoclopramide.

Conclusion: The high prevalence of chronic diseases in many patients may be one of the reasons for polypharmacy. Our preliminary study results indicate that PPIs, the most commonly used drug group, are used inappropriately in this patient profile with a rate of approximately 32%. Benzodiazepines, which are from the anxiolytic drug class, are another drug group with the highest frequency of inappropriate drug use in our study with a rate of 44%. Due to their use for more than 4 weeks and their undesirable effects such as sedation and balance disorder, their use in patients with a high risk of falling qualifies as inappropriate use. Our study results are preliminary findings and reveal that we need strategies to reduce inappropriate drug use in the geriatric population. Since this population is a patient group where we frequently see polypharmacy and fragility, which come with a variety of chronic diseases, it is very important to develop policies and practices that will ensure that the drugs used are evaluated with a holistic discipline.

Keywords: Polypharmacy, geriatrics, TIME to STOP, TIME to START

Table 1. Distribution of number of patients using and inappropriate use		
Drugs	**Number of patients using the drug (%)**	**Number of patients using drug inappropriately (%)**
Proton pump inhibitor	127 (84.10)	41 (32.28)
Corticosteroid	78 (51.65)	6 (7.69)
Furosemide	59 (39.07)	13 (22.03)
Clopidogrel	27 (17.88)	6 (22.22)
Benzodiazepine	9 (5.96)	4 (44.44)
Metoclopramide	2 (1.32)	2 (100)

Investigation of the Awareness of Diabetes Patients About Diabetes Symptoms and Consequences

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Background: To evaluate what measures patients can take to protect themselves from diabetes complications. To teach what precautions can be taken to prevent diabetes complications from occurring late or these complications from occurring. We are doing this study in order to reduce the expenditures of the state for diabetes patients.

Materials and Methods: The data will be collected by self-notification method between April 2024 and June 2024. "Interview form" and "multidimensional diabetes questionnaire" were used as data collection tools. The scale, the original structure of which was seven sub-dimensions, showed a six-factor structure according to the exploratory factor analysis. The analysis of the data was carried out using the SPSS 25 package program.

Results: A total of 209 female patients and 141 male patients were included in the study. The mean age was 53.4±8 diabetes 59.7% of people with diabetes whose age is 8.6±6 years are women. The basic socio-demographic and clinical characteristics of people with diabetes are shown in Table.

Conclusion: As a result of the data obtained in our survey in the first part, where we focused on the perception of diabetes and social support, consisting of 3 sub-sections and 16 items, the average of responses to items related to disability perception was evaluated and a moderate correlation value between 0.58-0.84 values, the average of responses to items related to severity perception was evaluated and a strong correlation value between 0.62-0.69 values, the average of responses to items related to social support perception was evaluated and a moderate correlation value between 0.58-0.84 values was reached ($p<0.001$). The presence of scales used in this determination reduces the cost of the disease to the state by determining the awareness of diabetes patients.

Keywords: Diabetes, symptom, complication, insulin, glucose, neuropathy, retinopathy

Table 1. Descriptive statistics			
Sub-dimensions	Number of substances	Item-total score correlation	Test-retest reliability
Obstacle	9	0.58-0.84	0.90
Seriousness	3	0.62-0.69	0.95
Support	11	0.58-0.84	0.98
Support behaviors based on incorrect guidance	4	0.58-0.77	0.87
Self-efficacy	7	0.62-0.77	0.97
Outcome expectancy	6	0.65-0.80	0.95

Investigation of Differences in Breast Cancer Diagnosis Stages Before and After the COVID-19 Pandemic

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Background: The coronavirus disease 2019 (COVID-19) pandemic has disrupted the diagnosis and treatment processes of many diseases, including breast cancer, one of the most common cancers in women. During the pandemic, difficulties in accessing healthcare services and patients' hesitations to visit hospitals may have delayed breast cancer diagnoses. The aim of this study is to investigate the differences in breast cancer diagnosis stages before and after the COVID-19 pandemic. By evaluating the effects of the pandemic on the breast cancer diagnosis stage, it is aimed to contribute to the determination of future health policies.

Materials and Methods: The study includes 802 patients diagnosed with breast cancer at University of Health Sciences Türkiye, Prof. Dr. Cemil Taşçıoğlu City Hospital between January 2018 and December 2022. Diagnosis stages of patients diagnosed between January 2018 and January 2020 (pre-pandemic) were compared with those diagnosed between April 2020 and December 2022 (during and post-pandemic). Clinical data such as diagnosis stage, method, tumor size, and TNM stage were analyzed. Independent samples t-test and Mann-Whitney U test were used, with a type 1 error rate of 0.05. IBM SPSS v29 was used for data analysis.

Results: A total of 801 patients were included, 442 (55.2%) diagnosed pre-pandemic and 359 (44.8%) post-pandemic. No significant differences were found in pathological tumor invasion, lymph node metastasis, tumor size, or age at diagnosis between pre-and post-pandemic patients. The study concluded that the pandemic did not significantly impact breast cancer diagnosis and staging processes.

Conclusion: This study shows that there was no increase in breast cancer diagnosis and staging before and after the pandemic. However, other studies in the literature indicate that the pandemic caused delays in breast cancer diagnosis. Therefore, it is important to consider both the direct and indirect effects of the pandemic when evaluating its impact on breast cancer diagnosis and staging processes. Future studies should more thoroughly examine the reasons for delays in breast cancer diagnosis and treatment during the pandemic and determine the necessary measures.

Keywords: Coronavirus Disease 2019, COVID-19, breast cancer diagnosis, pandemic impact, breast cancer stage

Table 1. Descriptive statistics		Frequency	Percent	Valid percent	Cumulative percent
Valid	Before	442	55.2	55.2	55.2
	After	359	44.8	44.8	100.0
	Total	801	100.0	100.0	

Retrospective Evaluation of 170 Patients Presenting to the Urology Clinic with Microscopic Hematuria

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Background: Asymptomatic microscopic hematuria (AMH), defined as the presence of 3 or more red blood cells in urine analysis in the absence of genitourinary symptoms, is quite common. Community-based studies estimate that 40.9% of adults in the United States have this finding on urine analysis. A complete urological examination is mandatory for all patients presenting with AMH. However, the long-term outcomes of patients in whom no pathology is detected on initial evaluation and AMH persists are uncertain. The aim of this study is to evaluate the initial evaluation results of patients presenting with AMH to our clinic and the findings obtained during their 5-year follow-up.

Materials and Methods: The files of patients presenting with AMH between January 2019 and December 2023 were retrospectively reviewed. The results of a complete urological evaluation including urine analysis, urine culture, blood biochemical evaluation, cystoscopy, urinary ultrasonography, and IV contrast-enhanced abdominal computed tomography were recorded for all patients after their initial visit. The medical histories of the patients were recorded. Patients in whom no pathology was detected on initial evaluation were followed up with urine analysis every 3 months in the first year and every 6 months thereafter. Patients who completed the first year of follow-up and had positive findings in three consecutive urine analyses were considered to have persistent hematuria. Consultation with nephrology was requested for patients with ongoing hematuria accompanied by proteinuria, and their nephrological follow-up was recorded. Patients with incomplete initial evaluations and no regular follow-ups for 5 years were excluded from the evaluation.

Results: A total of 170 patients meeting the criteria were included in the study. Of these, 102 were male and 68 were female. Cancer was detected in 10 male and 5 female patients at the time of initial diagnosis. The initial evaluation results of the patients are presented in Table. No pathology was detected in 127 patients at the initial visit, including 73 (71.5%) of male patients and 54 (79.4%) of female patients. Negative urine test findings were observed in 90 (70.8%) of the 127 patients during their 3-year follow-up. Although intermittent hematuria was observed in these patients during their follow-up, no pathology was detected in any of them after 5 years. Proteinuria was detected in 8 of the 37 patients with ongoing hematuria, and they were referred to nephrology. Kidney biopsy was performed in 2 of these patients, and immunoglobulin A nephropathy was diagnosed. These patients were subsequently treated by nephrologists and had normal serum creatinine levels. Macroscopic hematuria developed in only 4 of the 32 patients, and bladder cancer was detected in all of them.

Conclusion: Complete urological evaluation of patients presenting with microscopic hematuria is important. Even if no pathology is detected on initial evaluation, patients should be encouraged for regular follow-up.

Keywords: Microscopic hematuria, malignancy, bladder, kidney

Table 1. Initial evaluation results of the patients		
	Initial evaluation results	
Diagnosis	**Male (n=102)**	**Female (n=68)**
Age (mean ± SD)	54.3±9.8	53.6±2.82
Malignancy (n, %)	10 (10.2)	5 (7.3)
Benign prostatic hyperplasia (n, %)	10 (10.2)	
Kidney stone (n, %)	5 (4.9)	4 (5.8)
Renal cyst (n, %)	4 (3.9)	5 (7.3)
No pathology (n, %)	73 (71.5)	54 (79.4)
SD: Standard deviation		

Evaluation of Perinatal Anemia During Pregnancy

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Background: It is reported that maternal anemia during pregnancy can be associated with fetal complications such as intrauterine growth retardation, prematurity, postmaturity, oligohydramnios, polyhydramnios, mode of delivery, neonatal intensive care admission, gravida, parity, and abortion; as well as maternal complications such as preeclampsia, eclampsia, diabetes mellitus, chronic hypertension, thyroid disease, multiple pregnancies, and age. The aim of our study is to examine the relationship between anemia and adverse perinatal outcomes in pregnant women who gave birth in our hospital and to draw attention to the importance of maternal anemia. Our study is designed retrospectively. In our research, the relational research model, which is one of the quantitative research models, was used.

Materials and Methods: Our study was designed as a retrospective study. The correlational research model was used in our research.

Results: When comparing hemoglobin values between the presence and absence of preeclampsia, it was found that there was no significant relationship between hemoglobin values and the presence or absence of preeclampsia (p=0.353). When comparing hemoglobin values between the presence and absence of prematurity, it was found that there was no significant relationship between hemoglobin values and the presence or absence of prematurity (p=0.514). When comparing hemoglobin values between the presence and absence of intrauterine growth retardation, it was found that there was no significant relationship between hemoglobin values and the presence or absence of intrauterine growth retardation (p=0.353). When comparing hemoglobin values between the presence and absence of polyhydramnios, it was found that there was no significant relationship between hemoglobin values and the presence or absence of polyhydramnios (p=0.631). When comparing hemoglobin values between the presence and absence of neonatal intensive care admission, it was found that there was no significant relationship between hemoglobin values and the presence or absence of neonatal intensive care admission (p=0.160). When comparing hemoglobin values in terms of mode of delivery, it was found that the group with higher hemoglobin values had higher rates of normal delivery (p=0.012).

Conclusion: Comparing hemoglobin values between the presence and absence of preeclampsia, prematurity, intrauterine growth retardation, polyhydramnios, oligohydramnios, and neonatal intensive care admission, no significant relationship was found between hemoglobin values and these parameters. However, comparing hemoglobin values in terms of mode of delivery, it was found that the group with higher hemoglobin values had higher rates of normal delivery. According to our study, since hemoglobin values within normal limits are associated with normal delivery, hemoglobin levels are important for reducing cesarean rates.

Keywords: Anemia, pregnancy, prematurity, normal delivery

Analysis of Children's Emotions and Thoughts in Letters to Their Parents Regarding Tobacco Addiction: A Qualitative Study

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Background: Tobacco use is still one of the leading public health problems in our country, causing diseases and reducing life expectancy at birth (Turkish Statistical Institute). Tobacco use often begins at an early age, leading to addiction over time, affecting both the individual and their surroundings in multiple ways (World Health Organization). Parents' smoking is a risk factor for children to use the most common tobacco product, cigarettes (Yeşilay). The aim of this study is to evaluate the emotions and thoughts in letters written by middle school students to their parents about tobacco addiction through qualitative analysis.

Materials and Methods: This study is designed as a qualitative research. Middle school students whose one or both parents smoke were included in the study using purposive sampling, a non-probability data collection method. Written consent was obtained from students and their parents prior to the study. A researcher-prepared information form was used to gather descriptive characteristics as the data collection tool. Another data source was the letters written by students, expressing their thoughts and emotions about their parents' smoking, which were evaluated qualitatively through document analysis. Ethical approval was obtained. The qualitative analysis was coded by two researchers and analyzed using thematic content analysis. Codes that were found to be similar and related were grouped under certain concepts and themes, which were interpreted. After completing the themes, discussions were held with the research team, and agreements were reached before reporting the study.

Results: Letters were collected from 13 students, aged between 11 and 13 years old. Ten students were girls, and three were boys. Five students had both parents smoking, one had only their mother smoking, and seven had only their father smoking. Document analysis of the letters revealed eight different themes. The themes reflecting students' thoughts and emotions about their parents' smoking were: Health risks, discomfort with the smell, economic concerns, fear of harm to other family members, fear of losing a loved one, sadness, suggestions for quitting, and loss of time spent together.

Conclusion: Smoking affects children emotionally, physically, and socially, as much as it impacts individuals themselves (Wilkinson et al.). The letters written by children included references to these effects. Interventions addressing parents' smoking, which may negatively influence children's health behaviors, should be conducted (Keskinoğlu and Aksakoğlu). The letters written in this study will be sent to the parents, and a follow-up study using in-depth interviews will evaluate how families are affected after reading these letters.

Keywords: Tobacco addiction, parental smoking, parent-child relationship, thematic content analysis

Relationship Between Multiparametric Prostate MR Staging and PSA Antigens in Prostate Cancer Patients

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Background: Prostate cancer is the second most common cancer in men. The most commonly used screening method for early detection of prostate cancer is serum prostate-specific antigen (PSA). PSA is a glycoprotein enzyme secreted from prostate epithelial cells. Serum levels may increase in prostate diseases (benign prostatic hyperplasia, prostatitis, prostate cancer) and after prostate manipulation (prostate massage, prostate biopsy). Multiparametric magnetic resonance imaging (MpMRI) is used because it provides clearer information about cancer spread. The Prostate Image Reporting and Data System (PI-RADS) categorization allows lesions detected on MpMRI to be systematically evaluated to estimate their potential risk for prostate cancer. With the PI-RADS, MpMRI images are categorized between 1 and 5. In our study, we aimed to evaluate the relationship between MpMRI staging and PSA values in patients diagnosed with prostate cancer.

Materials and Methods: The study group consists of 109 patients diagnosed with prostate cancer by transrectal ultrasound-guided biopsy after serum PSA value and MpMRI between 2018 and 2023 in the Clinic of Urology at University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Hospital. Patients' ages, pre-biopsy PSA values and PI-RADS scores on MpMRI will be recorded. Exclusion criteria were patients with metastasis to the prostate, no PSA values and no MpMRIs. Data analysis was performed using SPSS 25 package program.

Results: One hundred and nine patients participated in the study. The mean PSA values of the patients according to MpMRI staging are shown in Table 1. It was concluded that there was a weak positive correlation between MpMRI and PSA values (r=0.266; p=0.005).

Conclusion: A general positive correlation was observed between MpMRI and PSA antigen. While no increase in PSA averages was observed between stages 2 and 3, a significant increase and relationship was observed in stages 4 and 5.

Keywords: Multiparametric MRI, prostate staging, prostate cancer, PSA

Table 1. MpMRI staging and PSA average table		
MpMRI staging	**PSA average**	**n**
2	18.75	13
3	12.22	19
4	34.20	26
5	92.65	51
Total	55.87	109
MpMRI: Multiparametric magnetic resonance imaging, PSA: Prostate-specific antigen		

Reasons for Admission of Patients Admitted to the Service with Acute Kidney Injury Due to Chronic Renal Failure and Effect on Prognosis

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Background: Chronic kidney disease (CKD) is a condition that manifests itself with the gradual deterioration of kidney functions as a result of progressive nephron loss and a permanent decrease in glomerular filtration rate. Acute kidney injury (AKI) is a sudden loss of kidney function failing urine excretion, increasing in the amount of blood urea nitrogen and serum creatinine. CKD is an important risk factor for the development of AKI. In this study, it was aimed to investigate the relationship between the prognosis of patients diagnosed with AKI developing on the basis of CKD, the risk factors that will contribute to the development of the disease, and the reasons for hospitalization of these patients.

Materials and Methods: This study includes 403 patients from the Clinic of Internal Medicine at University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Hospital, who were hospitalized for acute renal failure secondary to chronic renal failure between 2013 and 2023. The study analyzed

patient demographics (age, gender), habits, chronic diseases, mortality, etiology of AKI, reasons for hospitalization, kidney imaging, and dialysis needs using IBM SPSS v25.0. Frequency and percentage values were reported for qualitative variables, and the chi-square test was used for comparisons between categorical variables, with a type I error rate set at 0.05.

Results: Our study included 403 patients. AKI etiologies of the patients participating in our study were determined as prerenal in 309 (76.6%), renal in 48 (11.9%), and postrenal in 46 (11.41%). A significant relationship was found between the etiologies of AKI and the reasons for hospitalization and renal imaging of the patients.

Conclusion: AKI has been associated with prolonged hospitalization, renal failure requiring dialysis, the development and progression of CKD, and death. Decreased estimated glomerular filtration rate and albuminuria, two key measures of CKD, are risk factors for AKI. Diabetes and hypertension often coexist with CKD and may alter kidney disease outcomes. Additionally, both have been associated with increased risks of AKI. In our similar study, unlike this study, no significant relationship was detected between etiology and mortality or between etiology and dialysis need. In parallel with this study, in our research, in the presence of CKD, the reasons for hospitalization listed in Table are risk factors for the development of AKI.

Keywords: CKD, AKI, prognosis, prerenal, renal, postrenal, etiology

Table 1. Comparison in terms of etiology and reasons for hospitalization				
Reasons for hospitalization	Prerenal	Intrarenal	Postrenal	Total
Pneumonia	54 (13.3%)	6 (1.4%)	3 (0.7%)	63 (15.6%)
Urinary tract infection	30 (7.4%)	11 (2.7%)	3 (0.7%)	44 (10.9%)
Heart failure	44 (10.9%)	5 (1.2%)	6 (1.4%)	55 (13.6%)
Sepsis	44 (10.9%)	5 (1.2%)	3 (0.7%)	52 (12.9%)
Gastrointestinal bleeding	18 (4.4%)	2 (0.4%)	5 (1.2%)	25 (6.2%)
Copd	5 (1.2%)	1 (0.2%)	0 (0%)	6 (1.4%)
Anemia	7 (1.7%)	2 (0.4%)	5 (1.2%)	14 (3.4%)
Pleural effusion	12 (2.9%)	3 (0.7%)	6 (1.4%)	21 (5.2%)
Upper respiratory tract ınfection	2 (0.4%)	1 (0.2%)	0 (0%)	3 (0.7%)
Pyelonephritis	20 (4.9%)	2 (0.4%)	3 (0.7%)	25 (6.2%)
Glomerulonephritis	10 (2.4%)	2 (0.4%)	4 (0.9%)	16 (3.9%)
Vasculitides	2 (0.4%)	1 (0.2%)	0 (0%)	3 (0.7%)
Tubulopathy	1 (0.2%)	0 (0%)	0 (0%)	1 (0.2%)
Lung-stomach cancer	3 (0.7%)	0 (0%)	0 (0%)	3 (0.7%)
Electrolyte disturbance	4 (0.9%)	0 (0%)	0 (0%)	4 (0.9%)
Stone	3 (0.7%)	2 (0.4%)	0 (0%)	5 (1.2%)
Kidney-bladder cancer	4 (0.9%)	0 (0%)	2 (0.4%)	6 (1.4%)
Hypertension	2 (0.4%)	0 (0%)	2 (0.4%)	4 (0.9%)
Drug toxicity	1 (0.2%)	0 (0%)	0 (0%)	1 (0.2%)
Cirrhosis	4 (0.9%)	1 (0.2%)	0 (0%)	5 (1.2%)
Renal artery vein stenosis	1 (0.2%)	1 (0.2%)	0 (0%)	2 (0.4)
Total	309 (76.6)	48 (11.9)	46 (11.4)	403

Is the Presence of Obesity in Women a Risk Factor for Anemia?

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Background: Obesity is defined by an excessive increase in body fat relative to lean mass, resulting in body weight surpassing desired levels for a given height. One condition that may arise from unhealthy nutrition is anemia. The relationship between iron deficiency anemia and obesity can be attributed to high-calorie but nutrient-poor diets. Obesity is often accompanied by chronic inflammation, which raises hepcidin levels. Hepcidin inhibits iron release from macrophages and reduces iron absorption from erythrocytes, contributing to iron deficiency anemia. This study aims to investigate the relationship between obesity and anemia.

Materials and Methods: After obtaining ethical committee approval, we retrospectively reviewed data and test results from reproductive-aged women at University of Health Sciences Türkiye, Prof. Dr. Cemil Taşçıoğlu City Hospital, Department of Family Medicine, Patients whose tests were conducted between 01.01.2023 and 01.06.2023 were included. We examined age, height, weight, and blood test results, including complete blood count, iron, iron binding capacity, ferritin, vitamin B12, folate, and C-reactive protein (CRP). Data analysis was performed using SPSS 25.

Results: The study involved 260 female patients: 130 were normal weight, and 130 were obese. Hemoglobin (Hb) levels were below the anemia threshold (12 g/dL) in 28 obese patients and 50 normal weight patients. Other blood values for both groups fell within normal ranges. Obese patients showed significantly higher levels of Hb, iron, vitamin B12, ferritin, and folate compared to normal weight patients (p=0.001). There were no significant differences in iron binding capacity, mean corpuscular volume (MCV), and red cell distribution width values between the groups (p=0.571). Normal weight patients had significantly higher CRP levels compared to obese patients (p≤0.001).

Conclusion: Our study did not find significant differences in anemia parameters between obese and normal weight patients. This contrasts with other studies that have reported varying findings. For example, a study in Düzce found higher ferritin levels in obese and metabolic syndrome individuals. Altunoğlu et al. observed lower Hb levels in obese individuals and an inverse relationship between weight gain and serum iron. Similarly, the National Health and Nutrition Examination Survey study found lower serum iron and MCV levels in obese women, with a higher prevalence of anemia. The absence of significant findings in our study might be due to the small sample size. In conclusion, our study did not identify a significant relationship between obesity and anemia.

Keywords: Obesity, anemia, iron, vitamin B12, ferritin

Investigation of the Relationship Between Blood Glucose Levels, HbA1c Levels and Serum Electrolyte Levels in Patients with Type 2 Diabetes Mellitus

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Background: Type 2 diabetes mellitus is a chronic condition marked by elevated blood glucose levels. Recent data from the International Diabetes Federation reveals that approximately 15% of the Turkish adult population aged 20-79 has diabetes. Hemoglobin A1c (HbA1c) is a critical blood test that reflects average blood glucose levels over the past two to three months, indicating diabetes control and potential complication risks. Electrolytes, such as sodium, potassium, calcium, chloride, and magnesium, are crucial for fluid balance, acid-base homeostasis, and neuromuscular function. Some studies suggest a correlation between HbA1c levels and serum electrolyte levels. Understanding these relationships in type 2 diabetic patients could enhance diabetes management and overall health by monitoring electrolyte balance and preventing complications.

Materials and Methods: Data were extracted from University of Health Sciences Türkiye, Prof. Dr. Cemil Taşçıoğlu City Hospital,'s automation system, including 376 randomly selected type 2 diabetic patients aged over 18, who had undergone blood biochemistry tests in 2023. This sample represents the entire type 2 diabetic cohort from the hospital's internal medicine clinic with a 95% confidence level and a 5% margin of error. Diagnostic International Classification of Diseases codes E11, E13, and E14 were applied. We recorded glucose, HbA1c, albumin, sodium, calcium, potassium, magnesium, and chloride levels. Normality of data distribution was assessed using the Shapiro-Wilk test, and Spearman's correlation test was employed to examine the relationships between blood glucose, HbA1c, and serum electrolytes.

Results: Spearman's correlation analysis revealed a high positive correlation between glucose and HbA1c. Glucose showed weak negative correlations with albumin, sodium, and chloride, and a very weak negative correlation with magnesium. No significant correlation was found with potassium. HbA1c had weak negative correlations with sodium and chloride, and a very weak negative correlation with magnesium. There were no significant correlations with albumin, calcium, and potassium.

Conclusion: This study's findings align with Khan et al., highlighting that monitoring electrolyte levels in type 2 diabetes patients can significantly improve patient outcomes and reduce healthcare costs. Early detection of electrolyte imbalances may prevent complications and enhance patient quality of life.

Keywords: Diabetes mellitus, electrolyte, glucose, HbA1c

Table 1. Correlation test results				
Variable	**Glucose**		**HbA1c**	
	p-value	**r**	**p-value**	**r**
Albumin	<0.001	-0.255	0.452	-0.039
Sodium	<0,001	-0.227	<0.001	-0.233
Potassium	0.113	-0.082	0.653	0.023
Calcium	<0.001	-0.193	0.433	-0.041
Magnesium	0.009	-0.135	0.017	-0.123
Chloride	<0.001	-0.268	<0.001	-0.265
Glucose	-	-	<0.001	0.627
HbA1c	<0.001	0.627	-	-
HbA1c: Hemoglobin A1c				

One-Year Evaluation of Needlestick Injuries Among Healthcare Workers in a City Hospital

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Background: Healthcare workers are at high risk of infection due to biological agents like blood and body fluids during daily activities. Exposure to biological agents often occurs through percutaneous injury with sharp instruments or contact with mucosal tissues. It is estimated that globally, approximately 32.4-44.5% of healthcare workers report at least one needlestick injury annually. Needlestick injuries are most frequently caused by needles but also occur with other sharp instruments and cutting tools. Guidelines and directives have been developed to protect workers from bloodborne pathogens through training on the safe use of instruments and procedures to follow after exposure. The most common viruses transmitted through these injuries are hepatitis B, hepatitis C, and human immunodeficiency virus. Factors such as the type of injury, the amount of blood exposed, and the viral load can influence the development of infection. This study aims to retrospectively evaluate the needlestick injuries that occurred in a city hospital over the course of one year in 2023.

Materials and Methods: Approximately 162 of the 240 work-related accidents in 2023 were needlestick injuries. For the retrospective analysis, information such as the profession of the personnel, the unit where the accident occurred, the cause of the accident, and the follow-up after the accident will be recorded from the forms of personnel who experienced approximately 162 needlestick injuries in 2023. The names of individuals will remain confidential. For statistical analyses, IBM SPSS Statistics 17 (IBM SPSS Türkiye) software will be used. Descriptive analyses (mean, standard deviation, frequency) will be performed, and the chi-square test will be used for comparing categorical data, while the Student's t-test will be applied for continuous data comparisons.

Results: The most common reasons for needlestick injuries among workers at Prof. Dr. Cemil Taşçıoğlu City Hospital are unsafe behavior and a disorganized environment. The areas where needlestick injuries most frequently occurred are wards, emergency rooms, and operating rooms/delivery rooms, respectively.

Conclusion: Penetrating and sharp instrument injuries frequently occur in hospital settings. To prevent such incidents, healthcare workers should receive appropriate training and be made aware of the associated risks. By doing so, a significant portion of these injuries can be effectively prevented.

Keywords: Needlestick, injuries, workers, hospital

Table 1. Descriptive statistics		
Workplace	**n**	**Percentage**
Intensive care	13	8.0
Ward	61	37.7
Emergency	31	19.1
Outpatient	6	3.7
Phlebotomy	13	8.0
Operating room/delivery room	22	13.6
Imaging	4	2.5
Sterilization	5	3.1
Other	7	4.3
Profession	**n**	**Percentage**
Technician	4	2.5
Doctor	22	13.6
Nurse	35	21.6
Intern	60	37.0
Midwife	3	1.9
Lab technician	6	5.6
Cleaning staff	23	3.7
Other	9	14.2

Table 1. Continued		
Workplace	**n**	**Percentage**
Cause	**n**	**Percentage**
Unauthorized work	3	1.9
Equipment misuse	4	2.5
Fatigue/sleeplessness	10	6.2
Unsafe behavior	92	56.8
Noise	1	0.6
Disorganized environment	32	19.8
Faulty equipment	2	1.2
Low morale/fear/distractedness	2	1.2
Slippery surface	1	0.6
Lack of protective equipment	1	0.6
Improper speed	7	4.3
Other	7	4.3
Actions taken after the accident	**n**	**Percentage**
Returned to work without loss of productivity	159	98.1
Received a medical report	3	1.9

Determining the Relationship Between Height, Weight, and Body Mass Index with Breast Cancer in Patients with *BRCA1* and *BRCA2* Gene Mutations

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Background: Breast cancer is generally an adenocarcinoma originating from the epithelium at the junction of the lobule and terminal duct. Before progressing to invasive ductal carcinoma, cancer goes through stages such as atypical ductal hyperplasia and ductal carcinoma *in situ*. Initially, cancer cells are confined to the milk ducts but can eventually spread to connective tissue, allowing metastasis. Risk factors include female gender, advanced age, family history, genetic mutations, early menstruation or late menopause, smoking, alcohol, obesity, and radiation. The research aims to examine the relationship between height, weight, and body mass index with breast cancer risk in women with *BRCA1/BRCA2* mutations, aiming to expand screening.

Materials and Methods: The study will be conducted using data from patients with and without *BRCA1/BRCA2* gene mutations, as well as a placebo group, obtained from the records of the breast/endocrinology outpatient clinic at İstanbul Prof. Dr. Cemil Taşcıoğlu Training and Research Hospital. The data will be transferred to electronic format using Microsoft Excel and statistically analyzed using IBM SPSS. Quantitative variables will be reported with mean and standard deviation, and qualitative variables with frequency and percentage values. The distribution of variables will be examined using the Shapiro-Wilk test.

Results: Normally distributed groups will be analyzed using a one-way analysis of variance and an independent samples t-test, while non-normally distributed groups will be analyzed using the Kruskal-Wallis H test and the Mann-Whitney U test. Categorical variables will be analyzed using the chi-square test, and relationships between two variables will be examined using Pearson's or Spearman's correlation tests. The study population consists of female patients who attended the breast/endocrinology outpatient clinic at İstanbul Prof. Dr. Cemil Taşcıoğlu Training and Research Hospital between 01.01.2018 and 26.01.2024. The sample includes 30 breast cancer patients with *BRCA1/BRCA2* mutations, 30 breast cancer patients without these mutations, and 30 healthy women as a placebo group.

Conclusion: No significant relationship was found between height and weight among women with breast cancer mutations, healthy women, and women without mutations. A larger sample size is recommended for future studies.

Keywords: Breast cancer, weight, height, BRCA1/BRCA2 mutations, body mass index

Table 1. Comparison of height and weight between women diagnosed with breast cancer with mutations, healthy women, and women diagnosed with breast cancer without mutations

		Height (cancer with mutations)
Height (healthy)	Pearson's correlation	-0.057
	p-value	0.764
Height (cancer without mutations)	Pearson's correlation	-0.009
	p-value	0.961
		Weight (cancer with mutations)
Weight (healthy)	Spearman's rho	0.345
	p-value	0.062
Weight (cancer without mutations)	Spearman's rho	-0.118
	p-value	0.535

No significant relationship was found between height and weight among women with mutations, healthy women, and women without mutations (p=0.764), (p=0.961), (p=0.062), (p=0.535)

Retrospective Evaluation of Child and Adolescent Psychiatry Consultations Requested from Pediatric Wards and Emergency Services at Prof. Dr. Cemil Taşçıoğlu City Hospital Between January 2023 and January 2024

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Background: The presence of physical illness requiring hospitalization can lead to psychosocial and psychiatric adversities in children. The correlation between physical illnesses and psychiatric disorders in children is frequently observed. There are few studies related to this issue in our country.

Materials and Methods: This study is a retrospective analysis of consultations requested from the pediatric emergency and inpatient services of Prof. Dr. Cemil Taşçıoğlu City Hospital for children and adolescents aged 0-18 who were diagnosed with psychopathology according to DSM-5 criteria between January 2023 and January 2024.

Results: Out of 163 consultations requested from the pediatric emergency and inpatient services, 72 (44.2%) were related to suicidal ideation, 13 (8.0%) to depression, and 12 (7.4%) to behavioral disorders, among other reasons. The consultations yielded multiple findings: 54 (33.1%) cases were diagnosed with depression, 33 (20.2%) had no diagnosis, and 15 (9.2%) were diagnosed with generalized anxiety disorder. Psychotropic medications were initiated in 62 (38%) of the 163 patients; 22 (13.5%) received antidepressants, 24 (14.7%) received a combination of antidepressants and antipsychotics, and 16 (9.8%) were prescribed antipsychotics.

Conclusion: Our study revealed that the number of female patients was significantly higher than that of male patients, indicating that psychiatric issues are more prevalent among girls aged 2-18. Among the 163 patients, 43 had chronic illnesses, with psychiatric problems more frequently associated with male patients due to chronic conditions. Notably, chronic kidney disease and type 1 diabetes were the most prominent chronic illnesses. Prior to consultation, only 45 (27.6%) of the 163 patients had a known psychiatric diagnosis, suggesting insufficient referrals to psychiatry. Analysis of the consultations indicated that suicidality was the most common reason for referral (44.2%), predominantly among female patients. Depression was identified as the most frequently diagnosed psychiatric disorder, occurring in 33.1% of cases. Medications were initiated in 62 of the 163 consulted patients, with antidepressants being the most commonly prescribed medication.

Keywords: Psychiatry consultation, pediatric, suicide

Socio-demographic Characteristics and Reasons for Application of Mothers Applying to Lactation Clinic

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Background: It is universally accepted that breast milk is the most suitable special food source for babies in their first six months and the only way to ensure healthy nutrition for children up to the age of two and beyond. It is observed that problems originating from the mother or the baby are encountered during the breastfeeding process. Our research aims to increase the quality of lactation consultancy services and to know the reasons for breastfeeding mothers' application and how they benefit from the service.

Materials and Methods: The sample of our study is 420 patients who applied to the Lactation Clinic at Prof. Dr. Cemil Taşçıoğlu City Hospital. Data analysis was performed using IBM SPSS Statistics.

Results: The proportions of children who applied to the breastfeeding clinic were 63.96% who were 1-30 days old, 33.41% who were 1-12 months old, 1.43% who were >1 year old, and 1.93% who were born prematurely and could not complete the 40th week. The percentages of reasons for bringing small for gestational age (<2500 g), normal birth weight (2500-4000 g), and large for gestational age (>4000 g) babies to the breastfeeding clinic are summarized in Table.

Conclusion: The findings of this study highlight the importance of professional support in the breastfeeding process by revealing the socio-demographic characteristics and reasons for applying to the lactation clinic. It is important for lactation clinics to provide customized services according to the needs of different baby groups.

Keywords: Lactation, breast milk, breast feeding

	Reason for coming	Percentage
PRETERM	Premature follow-up	33.33
	Child clinic	24.79
	Milk insufficiency concerns	23.93
	Control	17.09
	Breast refusal	0.85
TERM	Child clinic	41.61
	Milk insufficiency concerns	25.17
	Control	21.33
	Premature follow-up	8.04
	Child emergency	1.05
	Pregnant	0.70
	Breastfeeding cessation counseling	0.70
	Breast refusal	0.70
	Hyperbilirubinemia education	0.35
	Child cardiology	0.35
POST-TERM	Milk insufficiency concerns	50.00
	Child clinic	31.25
	Control	12.50
	Hyperbilirubinemia education	6.25
SGA	Premature follow-up	40.48
	Child clinic	20.24
	Milk insufficiency concerns	20.24
	Control	17.86
	Breast refusal	1.19

Table 1. Percentages of reasons for preterm, term and postterm children coming to the outpatient clinic and percentage of SGA, NAD and LGA children coming to the outpatient clinic

Table 1. Continued

	Reason for coming	Percentage
NAD	Child clinic	41.85
	Breastfeeding cessation counseling	26.84
	Control	18.85
	Premature follow-up	8.95
	Child emergency	0.96
	Pregnant	0.64
	Hyperbilirubinemia education	0.64
	Breast refusal	0.64
	Breastfeeding cessation counseling	0.32
	Child cardiology	0.32
LGA	Control	40.91
	Breastfeeding cessation counseling	31.82
	Child clinic	22.73
	Breastfeeding cessation counseling	4.55

SGA: Small for gestational age, NAD: Normal birth weight, LGA: Large for gestational age

Mediolateral Episiotomy and Its Emergency Complications

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Background: Episiotomy is a surgical incision made from the posterior vaginal wall to the perineum towards the end of the second stage of labor to widen the vaginal outlet. Vaginal tears may occur spontaneously during labor. Episiotomy may be preferred in terms of facilitating and accelerating labor, pelvic floor relaxation, reducing and preventing sexual dysfunction or fecal incontinence. Our study aimed to evaluate the short- and long-term effects of episiotomy types and preferences on patients.

Materials and Methods: This retrospective study was conducted at İstanbul Prof. Dr. Cemil Taşcıoğlu City Hospital. The records of 403 women who gave birth between January 1 and December 31, 2022 were retrospectively reviewed. Four hundred and three women were included in the study. Data for the study were collected by examining birth records from archive records. The birth records included women's ages, birth methods, and birth numbers. In the evaluation of the data, the Social Sciences Statistical Package 20 package program was used. Categorical measurements were given as numbers and percentages, and numerical measurements were given as mean and standard deviation. Chi-square and analysis of variance tests were used. Statistical significance was accepted as $p < 0.05$.

Results: In the statistical analysis performed in terms of episiotomy rate, a significant difference was found between the groups. As in developing countries, the episiotomy rate was found to be high in our study.

Conclusion: Episiotomy rate was determined as 93.3% in primiparous women and 30.2% in multiparous women. While the episiotomy-free stitch delivery rate was 0.6% in primiparous women, this rate was 7.4% in multiparous women. A significant difference was found between the groups in the statistical analysis (p<0.05). In our study, the majority of patients had perineal pain lasting 72 hours or longer (34.3%), difficulty walking in 61 (29.1%), and perineal discomfort in 37 (17.6%). Wound infection was observed in only 4 (1.9%) and wound dehiscence in 1 (0.4%). None had a 3rd or 4th degree perineal tear or any complaints suggesting depression or anxiety.

Keywords: Episiotomy, complications, short and long term effects

Table 1. Post-episiotomy complications	
Types of complications	**Frequency, n (%)**
Perineal pain	72 (34.3)
Difficulty walking	61 (29.1)
Perineal discomfort	37 (17.6)
Difficulty in breastfeeding	12 (5.7)
Difficulty in defecation	10 (4.8)
Perineal asymmetry	8 (3.8)
Perineal bleeding	5 (2.4)
Wound infection	4 (1.9)
Wound opening	1 (0.4)

Effect of Breast Radiotherapy on Patient Quality of Life

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Background: The most common type of cancer among women in the world and in our country is breast cancer. Breast-conserving surgery (BCS) and modified radical mastectomy (MRM) are two surgical approaches applied to patients along with systemic treatment. Surgery and radiotherapy are included in the local treatment of breast cancer, while hormonotherapy, chemotherapy and targeted therapies are included in the systemic treatment. Radiotherapy is an integral part of the multidisciplinary approach to breast cancer. Although the beneficial effect of postoperative radiotherapy for breast cancer is well documented, this treatment may be associated with a number of complications that may affect patient quality of life and survival such as heart and lung damage, lymphedema, brachial plexopathy, impaired shoulder mobility and secondary malignancies. The aim of this study is to compare the effects of breast radiotherapy on patient quality of life in patients who underwent BCS and MRM.

Materials and Methods: A survey study was conducted using the European Organization for Research and Treatment of Cancer Quality of Life Scale (EORTC QLQ-C30) and the Breast Cancer Specific Quality of Life Scale (EORTC QLQ-BR23) to measure the quality of life of patients over the age of 18 who applied to the General Surgery Clinic of Ümraniye Training and Research Hospital between 2021-2024 and received radiotherapy after being diagnosed with breast cancer and receiving BCS and MRM methods. In addition, the duration of chemotherapy and radiotherapy was also questioned. Result of the survey was examined retrospectively.

Result: As a result of the analysis, it was determined that the scores of individuals who underwent BCS were significantly higher than those who underwent MRM in terms of QLQ-C30 and QLQ-BR23 scale scores (p<0.05). No significant relationship was found between the duration of chemotherapy and radiotherapy and the scores of the scale. As a result, the negative effects of breast radiotherapy on the quality of life of individuals who underwent BCS were less common than those who underwent MRM.

Conclusion: Our findings underscore the significant impact of both chemotherapy and RT on the quality of life in breast cancer patients undergoing MRM or BCS. We found notable correlations between patient age, treatment duration, and QoL outcomes, highlighting the importance of individualized treatment strategies. While BCS consistently resulted in better functional outcomes and lower symptom burden compared to MRM, further research is needed to explore the long-term effects of RT and its absence in various surgical groups. In conclusion, personalized treatment plans that consider patient age, symptom management, and RT protocols may enhance overall quality of life and should be a focus of future research in breast cancer management.

Keywords: Breast cancer, modified radical mastectomy, breast-conserving surgery, radiotherapy, quality of life, QLQ-C30, QLQ-BR23

Table 1. Comparison of the effects of postoperative breast radiotherapy on the quality of life of patients who underwent MRM and BCS according to QLQ-C30 and QLQ-BR23 scales

Scale	Score type	Surgery type	n	Median (min.-max.)	p-value
QLQ-C30	Functional score	BCS MRM	58 40	60 (11.11-93.33) 46.66 (6.67-91.11)	0.005
	Symptom score	BCS MRM	58 40	67.94 (28.21-97.44) 58.97 (33.33-89.74)	0.001
	General health score	BCS MRM	58 40	66.66 (0-100) 37.5 (1-75)	<0.001
QLQ-BR23	Functional score	BCS MRM	58 40	57.77 (15.56-93.33) 44.44 (6.67-84.44)	0.008
	Symptom score	BCS MRM	58 40	87.5 (67.19-100) 84.375 (71.88-95.31)	0.045

MRM: Modified radical mastectomy, BCS: Breast-conserving surgery, QLQ-C30: Cancer Quality of Life Scale, QLQ-BR23: Cancer Specific Quality of Life Scale, min.-max.: Minimum-maximum

One-Year Analysis of Patients Monitored in the Observation Area at Prof. Dr. Cemil Taşcıoğlu City Hospital Pediatric Emergency Department

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Background: We aimed to present new information about patient groups and diagnoses required hospitalization by investigating the demographic characteristics, diagnoses, ward-intensive care unit admission rates of patients observed in the pediatric emergency department observation area over a year.

Materials and Methods: Between January 1, 2023, and December 31, 2023, 6846 patients were monitored in the observation area of the Pediatric Emergency Department of the University of Health Sciences Prof. Dr. Cemil Taşcıoğlu City Hospital. Information such as the admission date, time, age, gender, diagnosis, disease group, duration of stay in observation, ward admission, intensive care unit admission, referral unit, chronic disease, discharge, treatment refusal, previous ward and intensive care unit admission history were added to the data forms. Inclusion Criteria: Patients who were observed in the pediatric emergency observation area between January 1, 2023, and December 31, 2023.

Materials and Methods: Patients over 18 years old, patients not monitored in the observation area. SPSS 15.0 for Windows program was used for statistical analysis. Descriptive statistics were given as number and percentage for categorical variables, and mean, standard deviation, minimum, maximum, median for numerical variables. Comparisons of numerical variables in groups were made using the Kruskal-Wallis test for more than two independent groups and the Mann-Whitney U test for two groups since the normal distribution condition was not met. Subgroup analyses were interpreted with Bonferroni Correction. Ratios in groups were compared with the chi-square test. The alpha significance level was accepted as $p < 0.05$.

Results: Admission to the pediatric emergency observation was most frequent in infancy. Observation admissions were most common in January; during the day, it was most common between 14:00-15:00. 15.8% had a previous intensive care unit admission history, and 31.86% had a ward admission history. 34.24% were admitted to the ward, and 1.97% were admitted to the intensive care unit. 5.49% were referred to other units in hospital, with the pediatric infectious diseases ward being the most referred department. 3.61% were referred to external centers. 56.24% were discharged. 4.85% refused treatment.

Conclusions: Infancy needs close monitoring. The increase in January may be related to the increase in infectious diseases in winter. In the pediatric emergency department, we examined the most common disease groups admitted to the observation area were respiratory and gastrointestinal diseases, similar to the literature. More studies are needed in pediatric emergency departments to identify and develop solutions to problems in the observation area.

Keywords: Pediatric emergency, emergency admission

Table 1. Disease groups			
		n	%
Disease groups	Respiratory system	1580	23.22
	Gastrointestinal system	1571	23.09
	Neurological	1220	17.93
	Infectious diseases	1088	15.99
	Intoxication	539	7.92
	Haematologic	135	1.98
	Surgical	109	1.60
	Allergy	104	1.53
	Cardiology	96	1.41
	Endocrine	83	1.22
	Musculoskeletal system	77	1.13
	Rheumathological	69	1.01
	Trauma	68	1.00
	Nephrology	42	0.62
	Psychogenic	10	0.15
	Obstetrics and gynaecology	4	0.06
	Inability to walk	3	0.04
	Drug-related side effects	2	0.03
	Dermatologic	1	0.01
	Dental	1	0.01
	Genetics	1	0.01
	Urologic	1	0.01
	Total	**6804**	**100**
	Undefined	45	0.66

Frequency of Hepatitis B, Hepatitis C and HIV (Human Immunodeficiency Virus) in Patients with Thalassemia Major

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Background: Thalassemia major is a genetic disorder characterized by a significant defect in hemoglobin production and often requires regular blood transfusions. This can increase patients' risk of infection. Hepatitis B, Hepatitis C and human immunodeficiency virus (HIV) are among these infections, but data on their frequency and effects in patients with thalassemia major are limited. This study aims to determine the frequency of hepatitis B, hepatitis C and HIV infections in patients with thalassemia major.

Materials and Methods: University of Health Sciences Türkiye, İstanbul Prof. Dr. Cemil Taşcıoğlu City Hospital pediatric hematology clinic between August 1, 2023 and February 1, 2024, 133 patients with thalassemia major were included in the study. Hepatitis B surface antigen (HBsAg), Hepatitis C antibody (anti-HCV) and HIV antibody (anti-HIV) test results were evaluated. Patient demographics, transfusion history and general health status were also analyzed. Data were statistically analyzed and infection frequencies were calculated. According to the study results, Hepatitis B surface antigen was found to be positive in 1.8% of patients with thalassemia major. Hepatitis C antibody positivity was 0.01%, while HIV antibody positivity was 0%. The increased incidence of hepatitis B infections is associated with regular blood transfusions and inadequate sterilization practices. The Tables below summarizes the frequency of infections.

Results: Hepatitis B infections are significantly more common in patients with thalassemia major. Hepatitis C and HIV infections have a lower frequency. These findings emphasize the importance of taking additional measures to monitor and prevent infections in patients with thalassemia major. The development of infection control strategies and regular screening programs play a critical role in the health management of these patients. Compared to previous years, there has been a significant decrease in the risk of transfusion-transmitted diseases. The introduction of hepatitis B vaccine in the national vaccination calendar since 1998, achievement of a high vaccination rate throughout the country, meticulous selection of donors in blood

banks, detailed questioning, exclusion of the risky group at this stage and the use of advanced technological methods have contributed greatly to this decrease. However, perinatal transmission of hepatitis B is still a problem for our country and in order to protect babies, attention should be paid to screening pregnant women for HBsAg and also for anti-HCV and anti-HIV.

Conclusion: Hepatitis B infection was found to be more prevalent among thalassemia major patients, highlighting the importance of routine screening and proper tranfusion protocols. Preventive strategies should be reinforced, especially among high-risk groups and during pregnancy.

Keywords: Thalassemia major, hepatitis B, hepatitis C, HIV, blood transfusion, seroprevalence

Table 1. Comparison of hepatitis, HIV markers and liver enzyme values among thalassemia major patients by nationality

	Nationality				
Total (n=133)	T.C. (n=107)		Syira (n=26)		
	n	%	n	%	p
HBsAg	2	1.8	0	0	1.000
Anti-HBc	2	1.8	0	0	1.000
Anti-HBs	69	64.4	10	38.4	0.188
Anti-HIV	0	0	0	0	-
Anti-HCV	0	0	5	19.3	0.048
	Mean ± SD	Min.-max. (median)	Mean ± SD	Min.-max. (median)	p
Anti-HBs	178.9±325.0	0-1000 (34.3)	201.2±380.8	2-1000 (5)	0.285
ALT (U/L)	29.5±17.4	8-69 (25)	37.1±40.3	6.1-157 (29.5)	0.907
AST (U/L)	31.7±16.2	8-86 (28)	41.8±23.1	21-105 (37)	0.111
Ferritin (ng/mL)	2153.4±1244.8	268.4-4941 (1827)	274.1±2012.7	317-7000 (1674)	0.848

HBsAg: Hepatitis B surface antigen, Anti-HBc: Hepatitis B core antibody, Anti-HBs: Hepatitis B surface antibody, Anti-HIV: Antibody to Human immunodeficiency virus, Anti-HCV: Antibody to hepatitis C virus, SD: Standard deviation, Min.-max.: Minimum-maximum, ALT: Alanine aminotransferase, AST: Aspartate aminotransferase

Table 2. Comparison of demographic data and transfusion characteristics of thalassemia major patients by nationality

	Nationality				
Total (n=133)	T.C. (n=107)		Syria (n=26)		
	n	%	n	%	p
Gender					
Male	61	57	11	42.3	0.302
Female	46	43	15	57.7	
Year of brith ≥2000	89	83.1	26	100	0.329
Transfusion frequency (weeks)					
3	79	73.87	15	57.6	
4	28	26.2	11	42.4	0.475
	Mean ± SD	Min.-max. (median)	Mean ± SD	Min.-max. (median)	p
Age (years)	12.1±7.4	2-32 (11)	8.8±4.7	1-15 (9)	0.241
Age of first tranfusion (months)	14.0±8.8	2-36 (12)	9.8±4.7	3-18 (12)	0.226
Total number of transfusions	187.6±128.3	11-553 (163)	134.9±73.4	12-215 (163)	0.350

SD: Standard deviation, Min.-max.: Minimum-maximum

Comparison of Lipid Profile Characteristics in Healthy Individuals, Subclinical Hypothyroidism, and Overt Hypothyroidism Cases

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Background: Subclinical hypothyroidism refers to elevated thyroid stimulating hormone (TSH) levels despite normal thyroid hormones, while overt hypothyroidism indicates abnormal thyroid hormones and TSH levels. Thyroid hormones also affect the lipid profile. Hyperlipidemia was detected in 90% of overt hypothyroidism patients. The aim of this study is to examine the lipid profiles of healthy individuals and patients with subclinical and overt hypothyroidism.

Materials and Methods: The sample size was calculated as 159 by power analysis. Inclusion criteria: patients older than 18 years who do not use drugs that could affect the lipid profile. Exclusion criteria: diabetes, pregnancy, hypercortisolism, pituitary gland diseases, and patients using drugs that could affect the lipid profile. Data of 32 healthy, 32 subclinical, and 32 overt hypothyroidism patients who applied to University of Health Sciences Türkiye, Prof. Dr. Cemil Taşçıoğlu City Hospital between January 2020 and December 2023 were collected. Data were transferred to Excel and SPSS. A retrospective and quantitative relational model was used. Quantitative variables were reported as mean, standard deviation, frequency, and percentage. The suitability of the data for normal distribution was tested with the Shapiro-Wilk test. Those not conforming to normal distribution were analyzed with Kruskal-Wallis H and Mann-Whitney U tests.

Results: 32 overt hypothyroidism, 32 subclinical hypothyroidism, and 32 healthy individuals were included. 67 of the patients were female (69.8%), 29 were male (30.2%). 11 were young adults (11.5%), 61 were middle-aged (63.5%), and 24 were early elderly (25%). A significant difference was found between age and total cholesterol (p=0.024). Young adults had higher total cholesterol levels. A significant difference was found between gender and low-density lipoprotein (LDL) (p=0.011). Men had higher LDL values. No significant difference was found in total cholesterol (p=0.624), high-density lipoprotein (p=0.976), LDL (p=0.883), and triglycerides (p=0.372) values between thyroid peroxidase positive and negative overt hypothyroidism, subclinical hypothyroidism, and healthy individuals.

Conclusion: The disruption of lipid profile in patients with hypothyroidism has been demonstrated in many studies. In this study, we believe that the lack of a significant difference in lipid profiles between overt hypothyroidism, subclinical hypothyroidism, and healthy individuals is due to the data being collected from a tertiary healthcare institution; most of the patients participating in the study had their TSH and T4 levels controlled with medication, and therefore there was no significant difference in lipid profiles compared to healthy individuals. These results show that Levothyroxine treatment positively contributes to maintaining normal lipid profiles in hypothyroid patients.

Keywords: Hypothyroidism, lipid profile, thyroid hormones

Table 1. Comparison of lipid profiles across gender categories						
Gender	n	Mean rank	Total rank	W	Z	p-value
Women	67	44.41	2975.5	2975.5	-2.533	0.011
Men	29	57.95	1680.5	-	-	-

The Effect of Blood Lactate Levels on Mortality in Febrile Neutropenia

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Background: Febrile neutropenia is a disease with high mortality and morbidity, especially due to the use of chemotherapeutic drugs, characterized by a decrease in absolute neutrophil count. It is important to evaluate the mortality risk in these patients and to identify prognostic markers. Many factors influence mortality, including patients' demographic characteristics such as age, gender, comorbid diseases, and body mass index. A meta-analysis showed that changes in hemogram values in patients with febrile neutropenia affect mortality. Additionally, the importance of certain genetic tests in predicting mortality has been highlighted. Serum lactate levels are a good biomarker that indicates the hypoxic state at the cellular level. In many studies, serum lactate levels have been shown to be a good biomarker for predicting mortality in various diseases, including trauma patients. The aim of our study is to predict mortality by determining the serum lactate levels of patients with febrile neutropenia.

Materials and Methods: This retrospective cohort study will be conducted on patients with febrile neutropenia who presented to the Emergency Clinic of University of Health Sciences Türkiye, Prof. Dr. Cemil Taşçıoğlu City Hospital in the last year. Data such as the patients' demographic characteristics, hematological malignancies, treatment protocols, and clinical outcomes will be obtained from hospital records. Blood lactate levels will be evaluated based on the values measured during the patients' emergency department visits. Statistical analyses were performed to assess the relationship between blood lactate levels and mortality.

Results: (a) Gender: The average blood lactate level in male patients is higher than in females. The number of patients with high lactate levels is greater in men, with a mortality rate of 25% in men and 20% in women. This finding suggests that men may have higher lactate levels and, consequently, higher mortality rates. (b) Age: The average blood lactate level in male patients is higher than in females. The number of patients with

high lactate levels is greater in men, with a mortality rate of 25% in men and 20% in women. This finding suggests that men may have higher lactate levels and, consequently, higher mortality rates.

Conclusion: Elevated blood lactate levels in patients with febrile neutropenia are an important indicator for predicting mortality. Especially in men and elderly patients, high lactate levels are associated with higher mortality rates. In the management of febrile neutropenia patients in emergency departments and intensive care units, the measurement and monitoring of blood lactate levels can be used as an important prognostic tool.
Keywords: Febrile neutropenia, blood, lactate, mortality, emergency

Table 1. Effect of blood lactate level on mortality rate	
Lactat level	**Mortality rate**
>2 mmol/L (High)	%30
<2 mmol/L (Low)	%10

Etiology of Patients Admitted to the Internal Medicine Clinic Due to Symptomatic Anemia

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Background: Anemia is a decrease in the number of erythrocytes and/or hemoglobin levels below the normal values seen in healthy individuals. The World Health Organization defines anemia as a hemoglobin concentration below 12 g/dL (women) and 13 g/dL (men). Topics such as anemia in adolescents, anemia during pregnancy, and the frequency of anemia in children have been addressed in other studies. Our study investigate the causes of anemia in patients admitted to the internal medicine department with symptomatic anemia and examine the relationship between anemia and factors (symptoms, age and gender).

Materials and Methods: In the power analysis, the sample size was calculated as 289 when the confidence level was 95%, the margin of error was 5% and the disease prevalence was 25%. Patients aged >18 years treated in the Internal Medicine Clinic of University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Hospital (01.01.2022-31.12.2023) were included in the study and pregnants were excluded. The study has the records of 865 anemic patients. Our study is a descriptive research of quantitative research types. Quantitative variables are reported as mean and standard deviation; qualitative variables as frequencies and percentages. The distribution of the variables was examined by the Shapiro-Wilk test. Normally distributed variable groups were analyzed by one-way analysis of variance and independent samples t-test; the difference between non-normally distributed variable groups by Kruskal-Wallis H and Mann-Whitney U tests. Dependency between categorical variables was analyzed using the chi-squared test. The relationship between two variables was analyzed with Pearson's correlation (for normally distributed) or Spearman's correlation (for non-normally distributed).

Results: In the study; 45.9% are male, and 54.1% are female. 33.98% iron deficiency anemia, 20.23% colon cancer, 14.45% stomach cancer, 11.09% vitamin B12 deficiency anemia, 4.62% ulcerative colitis, 4.62% gastritis and duodenitis, 4.22% Folic acid deficiency anemia, 4.16% hemorrhoids, 2.54% peptic ulcer. A difference was found between etiology, hemoglobin values and ages (p<0.001). There is a significant relationship between gender and etiologies (p<0.05). Iron deficiency anemia and peptic ulcer are more common in women; Vitamin B12, folic acid deficiency anemia, stomach and colon cancer, ulcerative colitis, gastritis and duodenitis are more common in men.

Conclusion: A difference was found between the etiology of anemia and hemoglobin values and age, and a relationship between the etiology of anemia and gender. Understanding the diverse and complex etiology of anemia will contribute to the development of preventive measures and treatments specifically for anemia.

Keywords: Anemia, etiology, gender, age, hemoglobin

Table 1. Hemoglobin values and ages according to anemia etiologies median (minimum-maximum) values						
	Hemoglobin values			**Age**		
Etiology	**Med. (min.-max.)**	**Statistics**	**p**	**Med. (min.-max.)**	**p**	**Statistics**
Iron deficiency anemia	6.9 (2-14.3)			63 (20-97)		
Vitamin B12 deficiency anemia	8 (3.6-16)			62.5 (18-93)		
Folic acid deficiency anemia	10.3 (4.4-17.4)			69 (19-91)		
Stomach cancer	9.3 (3.8-15.4)			67 (29-92)		
Ulcerative colitis	11.1 (5.9-15.7)			45 (18-90)		
Peptic ulcer	10.5 (5-15)			65.5 (25-83)		
Gastritis and duodenitis	12.65 (6-16.9)			54 (24-86)		
Hemorrhoids	7.9 (3.7-13.7)			64 (19-93)		
Total	8.9 (2-19)	145.463	0.001	64 (18-97)	0.001	32.847
Min.: Minimum, Max.: Maximum, Med.: Median						

The Relationship between Neutrophil/Lymphocyte Ratio and Mean Platelet Volume with Pressure Ulcer Stage in Patients Receiving Home Health Care

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Background: Pressure ulcers are localized tissue injuries occurring over bony prominences due to pressure or shear. Neutrophil/lymphocyte ratio (NLR) and mean platelet volume (MPV) are accessible proinflammatory markers. In community-acquired pneumonia, NLR values over 13 in hospitalized patients and over 18 in ICU patients are linked with high mortality rates, especially when NLR exceeds 23. Additionally, NLR values above 2.57 have been associated with chronic inflammatory conditions like diabetes and hypertension. This study aims to evaluate whether NLR and MPV at admission can predict high risk for pressure ulcer development.

Materials and Methods: This study is cross-sectional and retrospective, focusing on patients diagnosed with decubitus ulcers who were registered with Home Health Services and had recent complete blood counts. Data were collected from the Korteks system, which records home health service information. The study first compared average NLR, MPV, C-reactive protein (CRP), and albumin levels with the stages of pressure ulcers. In the second part, we analyzed the relationships between these markers and patient mortality. Statistical analysis was performed using SPSS 23.

Results: The study included 113 patients, of whom 64% were female and 36% male. The average NLR value was 3.16, but no significant difference was observed between NLR values and pressure ulcer stages (p=0.188). The average MPV was 9.3 and similarly, no significant correlation with pressure ulcer stage was found (p=0.076). The average CRP level was 31.5, with no significant association to ulcer stage (p=0.150). The mean albumin level was 32.3 (reference range: 35-52), and no significant difference was noted in relation to pressure ulcer stages (p=0.778). These findings suggest that NLR, MPV, CRP, and albumin may not be reliable indicators for pressure ulcer severity in this patient.

Conclusion: In the study, when pressure stage and NLR were compared, no significant difference was found between stage and NLR value. When pressure stage and MPV value were compared, no significant difference was found between stage and MPV value. No significant difference was found when pressure stage was compared with CRP and albumin values. As a result, it should be considered that pressure ulcers need to be approached comprehensively, and patients should frequently change positions in all directions and be monitored by family members. Furthermore, we can say that NLR and MPV values did not affect the development of pressure ulcer stages in our study.

Keywords: Pressure ulcer, health service, albumin, lymphocyte ratio

Table 1. Blood test values by pressure stages (NLR, MPV, CRP, albumin)				
Pressure stage	**Average NLR**	**Average MPV**	**Average CRP**	**Average albumin**
Stage 1	3.7	10.1	34.7	33.1
Stage 2	2.6	9.8	21.9	33.8
Stage 3	2.9	9.5	29.3	32.3
Stage 4	3.7	9.3	47.8	32.2
Recovery	2.8	9.8	31.2	32.3
NLR: Neutrophil to lymphocyte ratio, MPV: Mean platelet volume, CRP: C-reactive protein				

Comparison of Metacognition, Obsessive Beliefs, and Impulsivity in Bipolar Disorder and Unipolar Mania Patients

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Background: Bipolar disorder is a chronic illness characterized by recurrent episodes of depression, mania, and mixed states, leading to significant impairment in functioning and often associated with comorbid conditions and complications. Unipolar mania, on the other hand, is a mood disorder where individuals experience only manic episodes. Due to the lack of consensus on diagnostic criteria, the rarity of the condition, and inconsistent study results, unipolar mania is not included in the diagnostic and statistical manual of mental disorders or international classification of diseases classifications.

Materials and Methods: The study included 24 patients diagnosed with unipolar mania, identified based on the following criteria: No history of depressive episodes, being monitored for at least four years, having experienced at least four manic episodes, and currently being in a euthymic state. Additionally, 16 patients with a confirmed diagnosis of euthymic bipolar disorder according to Diagnostic and Statistical Manual of Mental Disorders, 5th Edition were also included. Data were analyzed using SPSS. Participants completed the socio-demographic form, the Young Mania Rating Scale, and the positive and negative syndrome scale through either in-person or phone interviews with the researchers. Subsequently, they responded to the Metacognition Questionnaire, Obsessive Beliefs Questionnaire, and Barratt Impulsiveness Scale.

Results: There was no significant difference between bipolar disorder and unipolar mania patients regarding impulsivity and metacognition. However, a significant difference was found in obsessive beliefs (p=0.002). Psychiatric history in relatives was observed in 81.3% of individuals with bipolar disorder and 45.8% of those with unipolar mania, with a significant difference between the groups (p=0.035).

Conclusion: Although there are studies in the literature investigating the relationship between metacognitive processes, coping styles, and major depressive disorder and bipolar disorder separately, and studies suggesting that unipolar mania and bipolar disorder may be different clinical diagnoses, no study has examined the relationship between metacognitive processes and coping styles in bipolar disorder and unipolar mania together. This study aimed to reveal the relationship between obsessive beliefs, metacognition, and impulsivity-factors shown to predict psychopathology-between patients with unipolar mania and bipolar disorder and to contribute to the literature on determining psychotherapeutic targets that may be effective for each disorder.

Keywords: Bipolar disorder, impulsivity, cognitive level, mania

Table 1. Barratt Impulsiveness Scale		
Diagnosis	**Mean (SD)**	**Significance level (p)**
Bipolar Disorder	62,3750 (8.38)	0.948
Unipolar Mania	40,6250 (10.33)	
Metacognition Scale		
Bipolar Disorder	106,7500 (14.49)	0.477
Unipolar Mania	73,9167 (19.11)	
Obsessive Beliefs Scale		
Bipolar Disorder	109,1250 (49.12)	0.002
Unipolar Mania	87,3333 (31.94)	
SD: Standard deviation		

Comparison of Aesthetic and Functional Results in Reconstruction Techniques After Surgical Excision of Facial Skin Tumors

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Background: Skin tumors are most commonly located on the face. From a cosmetic perspective, the face is the most important anatomical region for most of the patients. Therefore, it poses a great challenge in the treatment of malignant tumors of the facial skin. Oncologic surgery prevents compromise between functional and cosmetic outcomes. Similar to most other cancers, the most common treatment for skin tumors is wide surgical excision. The aim of treatment is to cure the disease with the lowest percentage of relapses and the best possible functional and cosmetic outcome. The choice of surgical technique used varies depending on the tumor type, lesion size, tumor location and risk of recurrence. In the study, we aim to

compare functional and cosmetic surgical techniques (Primary closure, Flap repair and Graft repair) used in the treatment of skin tumors located on the face. As a result of this comparison, we aim to evaluate the applied techniques in terms of patient benefit and determine the appropriate technique.

Materials and Methods: The patients included in the study, who were between ages of 17-97, whose primary tumor was located in the skin, and who were followed up for at least three years. The study was carried out with the information collected from the records of 600 patients who applied to the Plastic, Reconstruction and Aesthetic Surgery Clinic of University of Health Sciences Türkiye, Şişli Hamidiye Etfal Training and Research Hospital between 01/01/2015-01/01/2024 and underwent surgical operations with a diagnosis of facial skin tumor. The information obtained from the records was transferred to electronic environment via Microsoft Excel program and statistical analysis was performed with IBM SPSS 22.0 program. The study was designed retrospectively. In the research, quantitative variables, which are among the quantitative research models, are reported with mean and standard deviation, and qualitative variables are reported with frequency and percentage values. The distribution of variables was examined with the Shapiro-Wilk test. Normally distributed variable groups were examined with one-way analysis of variance and independent sample t-test, and the difference between non-normally distributed variable groups was examined with Kruskal-Wallis H and Mann-Whitney U tests. Relation between categorical variables was examined using the chi-square test.

Results: There is no significant difference between tumor type and tumor size (p>0.05). There is a significant difference between tumor size and type of surgery (p<0.001). There is a significant difference between tumor type and the age at which it is seen (p<0.001). There is a significant difference between the type of tumor and the area where it is located (p=0.001). The type of tumor and the surgery performed. There is a significant difference between types (p=0.003). There is a significant difference between tumor type and presence of metastasis (p=0.001).

Conclusion: As a result of our research, the flap technique is most frequently used in basal cell carcinoma and squamous cell carcinoma (SCC), and the graft technique is most frequently used in basosquamous cell carcinoma and malignant melanoma. The incidence of tumor increases with age. We found that SCC is seen at older ages.

Keywords: Basal cell carcinoma, skin tumors, flap, graft, malignant melanoma, squamous cell carcinoma

Table 1. Comparison of tumor type and type of surgery					
	Flep	**Greft**	**Primer closure**	**Chi-square**	**p-value**
BCC	204 (45.5)	109 (24.3)	135 (30.1)		
SCC	51 (44)	32 (27.6)	33 (28.4)		
Basosquamose	3 (25)	9 (75)	0 (0)		0.003
Malign melanom	3 (15.8)	7 (36.8)	9 (47.4)	23.422	
Others	3 (30)	3 (30)	4 (40)		
SCC: Squamous cell carcinoma, BCC: Basal cell carcinoma					

Comparison of PSMA PET, MRI, and Pathology Findings in Prostate Cancer Patients

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Background: Prostate cancer is one of the major health threats to men and is the second most common cancer type among males. This disease typically occurs in older men and is more prevalent among those with a family history of prostate cancer and African-American individuals. It is most commonly found in the 65-74 age group, with a prevalence of 41.8%. While Prostate-specific antigen (PSA) and digital rectal examination are widely used for early diagnosis of prostate cancer, the Gleason score is the most robust and widely accepted pathological system for tumor staging. The Gleason score ranges from 1 (well-differentiated) to 5 (poorly differentiated) and varies from 2 to 10 in total. Multiparametric magnetic resonance imaging (MRI) is preferred for identifying and localizing clinically significant prostate cancer. MRI results are assessed using the 5-point the Prostate Image Reporting and Data System (PI-RADS), with scores of 3 and above recommended for biopsy. Additionally, prostate-specific membrane antigen (PSMA)-positron emission tomography (PET) can be used to determine the need for targeted biopsy in suspected prostate cancer cases. A study by Scheltema and colleagues showed that PSMA-PET has higher diagnostic accuracy and sensitivity compared to multiparametric MRI (mpMRI).

Materials and Methods: The population of our study consists of male patients over the age of 18 who have been diagnosed with prostate cancer in the Republic of Türkiye and have applied to or been referred to the urology department at University of Health Sciences Türkiye, Bakırköy Sadi Konuk Training and Research Hospital. Our research will utilize the Relational Research model, a type of quantitative research model.

Results: The majority of surgeries performed were robot-assisted radical prostatectomies (n=216, 94.3%), with non-lymph node dissection procedures being more prevalent (n=149, 65.1%). Most patients had an acetylsalicylic acid score of 2 (n=201, 87.8%). Patient demographics included a median age of 63 (range 41-75), median PSA value of 8 (range 2.13-72), median PSA density of 0.2 (range 0.05-1.62), median prostate volume of 40 (range 15-130), and median tumor percentage of 20 (range 1-90). Significant findings included higher PSMA-PET lymph node involvement in patients with MR-detected lymph node positivity (p=0.01) and lower involvement in those without (p=0.01). Patients with an ISUP grade of 5 had significantly higher mpMRI PI-RADS 5 scores (<0.001), while those with an ISUP grade of 1 had higher mpMRI PI-RADS 2 scores. Furthermore, PSMA-PET lymph node involvement was significantly higher in patients with an ISUP grade of 5 (<0.001).

Conclusion: MR findings and the PI-RADS scoring system, which are used in the diagnosis and staging of prostate cancer, can yield results consistent with pathology ISUP grading. MR findings are also considered an important predictive method for lymph node involvement in patients undergoing PSMA PET imaging.

Keywords: Prostate cancer, PSMA, Gleason score

Table 1. Descriptive statistics	
	n (%)
Type of operation	
Robotic radical prostatectomy	216 (94.3)
Laparoscopic radical prostatectomy	2 (0.9)
Open prostatectomy	11 (4.8)
Lymph node dissection	
Performed	80 (34.9)
Not performed	149 (65.1)
ASA score	
1	11 (4.8)
2	201(87.8)
3	17 (7.4)
Median (min.-max.)	
Age	63 (41-75)
PSA	8 (2.13-72)
PSA density	0.2 (0.05-1.62)
Prostate volume	40 (15-130)
Tumor ratio	20 (1-90)
min.-max.: Minimum-maximum, PSA: Prostate-specific antigen, ASA: Acetylsalicylic acid	

Analysis of Computed Tomography Parameters of Distal Tibiofibular Syndesmosis in Turkish Population

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Background: Diagnostic test system injuries disrupt the stability of the ankle and usually seen together with malleolar fractures. To our knowledge, no study has been conducted to define ankle parameters in Turkish population. This study aims to examine the morphometry of the distal tibiofibular syndesmosis based on computed tomography (CT) imaging in Turkish population.

Materials and Methods: The CT of patients over 18 years of age who applied to the emergency department and underwent ankle tomography were evaluated retrospectively. The healthy side of patients who had an ankle injury on one side and underwent CT scans on the healthy side for comparison purposes were included in the study. Patients <18 years of age, those with a history of previous ankle/foot trauma or surgery, those with rheumatological diseases, and those with any congenital or developmental deformities were excluded from the study. Radiologic evaluations were performed using axial CT images taken 1 cm proximal to the tibial plafond. Anterior tibiofibular distance (aTFD), posterior tibiofibular distance (pTFD), tibia thickness (d), shows the longitudinal length of the fibula (e), transverse length of the fibula (f), fibula longitudinal/transverse ratio (e/f), distal tibiofibular joint anterior facet length (a), distal tibiofibular joint posterior facet length (b), angle between anterior and posterior facets (c), anterior/posterior facet length ratio (a/b), tibia fibular angle were measured.

Results: Of the 100 participants, 57 (57%) were male and 43 (43%) were female. The mean aTFD was 5.71 mm. The mean ATFD was 5.8 mm and 5.6 mm for males and females, respectively. The mean pTFD was 7.3 mm. The mean pTFD was 8.07 mm and 7.28 mm for males and females, respectively. The mean anterior facet length was 10.5 mm. It was found that it was 11.0 mm and 8.85 mm for men and women, respectively. The mean posterior facet length was 13.2 mm. It was found that it was 13.5 mm and 12.4 mm for men and women, respectively. The mean ratio between the anterior and posterior facets was 0.81. The mean longitudinal length of the fibula was 15.3 mm, and the mean transverse length of the fibula was 11.4 mm. The mean ratio between the longitudinal and transverse length of the fibula was 1.3. The mean tibia thickness was 38.4 mm. The mean angle between the tibia and fibula was 57.1°.

Conclusion: Previous studies in different populations have reported that the morphometry of the distal tibiofibular syndesmosis varies. It is unclear whether the measurements in these studies can be used as reference standards to define abnormalities in the Turkish population. This study was conducted to define normal standard parameters for the Turkish population.

Keywords: Tibia, fibula, syndesmoz

Comparison of Maternal and Neonatal Outcomes in Healthy and Preeclamptic Pregnant Women

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Background: Preeclampsia, a condition occurring after the 20th week of pregnancy, is marked by proteinuria and involves abnormal placental vascular development, inadequate placenta perfusion, and maternal endothelial changes. Risk factors include previous hypertensive disease, diabetes, chronic hypertension, nulliparity, advanced maternal age (over 40), and a family history of preeclampsia. Women with preeclampsia face higher risks of stillbirth, intrauterine growth restriction, and low birth weight compared to healthy pregnant women. The APGAR score, assessed at one minute after birth, evaluates the newborn's condition and potential need for urgent intervention, with scores below 7 indicating severe outcomes. This study aims to compare maternal and neonatal outcomes between healthy and preeclamptic pregnancies to identify significant differences.

Materials and Methods: We analyzed data from 249 healthy and 117 preeclamptic pregnant women at University of Health Sciences Türkiye, Prof. Dr. Cemil Taşçıoğlu City Hospital. Data collected included maternal age, comorbidities, medication use, smoking status, screening results, delivery mode, birth week, neonatal mortality, APGAR scores, birth weight, and neonatal intensive care unit (ICU) admissions. Laboratory tests for complete blood count, urinalysis, urea, creatinine, C-reactive protein (CRP), lactate dehydrogenase (LDH), alanine aminotransferase (ALT), aspartate aminotransferase (AST), bilirubin, and albumin were also included. Data analysis was performed using IBM SPSS v25.0, with normal distribution tested via the Shapiro-Wilk test. Chi-square, Mann-Whitney U, and independent samples t-tests were used for comparing qualitative and quantitative variables.

Results: Our study of 366 patients revealed significant differences between preeclamptic and healthy women. Medication use (p<0.001), smoking (p=0.002), and neonatal ICU admissions (p<0.001) were notably different. Cesarean sections were more frequent among preeclamptic women (p<0.001). Preeclamptic women had earlier deliveries and lower APGAR scores (p<0.001) and birth weights (p<0.001) compared to healthy women. Significant differences were found in laboratory values: platelet (p=0.045), red blood cell (p=0.012), creatinine (p<0.001), urea (p<0.001), urinalysis protein (p<0.001), urinalysis erythrocytes (p=0.002), CRP (p<0.001), LDH (p<0.001), ALT (p<0.001), AST (p<0.001), and albumin (p<0.001).

Conclusion: Maternal age and medication use may be risk factors for preeclampsia, while smoking might be unexpectedly protective. Preeclamptic women generally require cesarean deliveries, have earlier births, lower APGAR scores, and lower birth weights. Increased neonatal ICU admissions are also noted. Laboratory abnormalities are different compared to healthy pregnant women. Raising awareness about preeclampsia and ensuring regular prenatal care are crucial for early detection and management.

Keywords: Preeclampsia, hypertension, pregnancy, proteinuria, APGAR

Table 1. Comparison of preeclampsia in terms of qualitative and quantitative variable categories				
		Preeclampsia		p-value
		Available	Absent	
Maternal comorbidity				
	Available	36.36	63.63	0.205
	Absent	29.79	70.2	
Medication use				
	Available	62.162	37.83	<0.001
	Absent	18.82	81.17	
Cigaratte use				
	Available	12.5	87.5	0.002
	Absent	35.01	64.98	
Type of uirth				
	Normal Delivery	2.04	97.95	<0.001*
	Cesarean Delivery	42.91	57.08	
Neonatal intensive care unit admission history				
	Available	76.19	23.8	0.001
	Absent	29.27	70.72	
Neonatal post-op mortality				
	Available	60	40	0.176
	Absent	31.57	68.42	

Table 2. Parameters in which significant differences were found between healthy and preeclamptic pregnant women	Median (min.-max.)	Z	p-value
Age			
Preeclamptic pregnant	31 (18-47)	-2.565	0.010*
Healthy pregnant	29 (18-42)		
Birth week			
Preeclamptic pregnant	33+4 (24+4-39)	-11.789	<0.001*
Healthy pregnant	38+1 (22+2-42+1)		
PLT			
Preeclamptic pregnant	200 (22-394)	-2.004	0.045*
Healthy pregnant	216 (21-522)		
RBC			
Preeclamptic pregnant	3.64 (1.76-5.42)	-2.520	0.012*
Healthy pregnant	3.8 (2.12-4.85)		
Creatinin			
Preeclamptic pregnant	0.57 (0.33-3.03)	-5.955	<0.001*
Healthy pregnant	0.5 (0.2-1.05)		
Urea			
Preeclamptic pregnant	19 (5-62)	-4.762	<0.001*
Healthy pregnant	14 (0.1-51)		
Urinalysis protein			
Preeclamptic pregnant	1 (0-3+)	-10.294	<0.001*
Healthy pregnant	0 (0- 3+)		
Urinalysis eriythrocyte			
Preeclamptic pregnant	5 (0-3472)	-3.140	0.002*
Healthy pregnant	3 (0-5360)		
CRP			
Preeclamptic pregnant	22.7 (0.3-188.1)	-7.253	<0.001*
Healthy pregnant	5.8 (0.3-276.4)		
LDH			
Preeclamptic pregnant	285 (29-1501)	-7.301	<0.001*
Healthy pregnant	220 (119-2239)		
ALT			
Preeclamptic pregnant	16 (5-370)	-6.807	<0.001*
Healthy pregnant	11 (3-653)		
AST			
Preeclamptic pregnant	28 (9-478)	-7.691	<0.001*
Healthy pregnant	17 (2-278)		
Albumin			
Preeclamptic pregnant	29.1 (21.2-42)	-11.371	<0.001*
Healthy pregnant	35.7 (3.03-50)		
APGAR			
Preeclamptic pregnant	8 (0-8)	-5.447	<0.001*
Healthy pregnant	8 (0-8)		
Birth weight			
Preeclamptic pregnant	1980 (440-4575)	-9.981	<0.001*
Healthy pregnant	3070 (560-4910)		

p<0.05*. min.-max.: Minimum-maximum, PLT: Platelet, RBC: Red blood cell, CRP: C-reaktif protein, LDH: Laktat dehidrogenaz, ALT: Alanin aminotransferaz, AST: Aspartate aminotransferase

Activated Protein C Resistance and Qanadli Score in Pulmonary Embolism Patients Is there?

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Background: Activated Protein C (APC) resistance increases the risk of pulmonary embolism (PE). The Qanadli Score provides a standardized and quantitative assessment of clot burden, aiding in risk stratification, prognostication, treatment decisions, and research analysis. The relationship between the APC and the Qanadli Score is unclear. Our aim in this study was to examine the relationship between APC resistance and Qanadli Score in patients with PE.

Materials and Methods: The PE patients followed up at University of Health Sciences Türkiye, Yedikule Chest Diseases and Chest Surgery Training and Research Hospital were retrospectively reviewed. Patients whose examinations were performed between 01.01.2020 and 01.06.2023 were included in the study. Age, gender, stage and mortality status were examined from the patients' file information. Data analysis was carried out using SPSS 25 package program.

Results: APC was found positive in 22 patients. 40 patients were found positive in Qanadli the cut-off value (above 9.5) was found to be positive. Qanadli a significant relationship (p=0.005) was found between the cut-off value and APC resistance.

Conclusion: Qanadli it was determined that there was a significant relationship between the cut-off value and APC resistance (p=0.005).

Keywords: Pulmonary embolism, resistance, Qanadli score,, risk classification

Table 1. Qanadli comparison of cut-off and APC resistance.				
	Qanadli (9.5+)	Qanadli (9.5-)	Chi-square	p-value
APC resistance (+)	16 (18.8)	6 (7)	7.850	0.005
APC resistance (-)	24 (28.2)	39 (45.8)		
APC: Activated protein C				

The Effect of the Highest Out-of-Range Values in Fasting, 1-Hour, and 2-Hour Measurements on a 75-Gram Oral Glucose Tolerance Test on Baby Health During Pregnancy

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Background: Gestational diabetes mellitus is considered a typical condition of glucose intolerance that occurs during pregnancy in the second or third trimester in women who have not previously been diagnosed with impaired fasting glucose, impaired glucose tolerance, or diabetes mellitus. Therefore, it can be defined as any degree of glucose intolerance first recognized during pregnancy. The oral glucose tolerance test (OGTT) is currently the gold standard for diagnosing diabetes. OGTT interpretation is based on the venous plasma glucose results before and at 1 and 2 hours after a 75 gram oral glucose load. Our study retrospectively compares the impact of the highest out-of-range fasting, 1 hour, and 2 hour values from a 75 gram OGTT performed between the 24th and 28th weeks of pregnancy on fetal birth weight, gestational age, mode of delivery, Appearance, Pulse, Grimace, Activity, and Respiration (APGAR) scores, and neonatal intensive care unit (NICU) admission in pregnant women aged 18-45 diagnosed with gestational diabetes.

Materials and Methods: Our study is a single-center, retrospective analysis conducted at University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Hospital. We examined data from 100 women aged 18-45 who had no history of impaired fasting glucose, impaired glucose tolerance, or diabetes and were registered between 28.04.2019 and 16.04.2024. Data were collected from patient records and analyzed using SPSS 25.0 with one-way-analysis of variance, the Kruskal-Wallis test, and chi-square tests.

Results: It was concluded that there was no significant difference between the fasting, 1-hour, and 2-hour values on the OGTT of pregnant women diagnosed with gestational diabetes and the newborn's birth weight being above or below 4000 grams (p=0.129), the gestational age being above or below 37 weeks (p=0.704), the mode of delivery being normal spontaneous delivery or cesarean section (p=0.163), the necessity of NICU admission (p=0.193), and the 1st and 5th-minute APGAR scores.

Conclusion: The statistical data obtained in our study suggest that the highest out of range values detected in fasting, 1 hour, and 2 hour measurements on OGTT do not have a direct effect on the relevant parameters of the babies. However, future studies with larger samples may allow for a more in-depth investigation of this relationship and could verify our results.

Keywords: Oral glucose tolerance test, APGAR, neonatal intensive care unit

Table 1. Comparison of the values of gestational diabetes patients at 0, 1 and 2 hours of OGTT with other variables
Large baby <4000 gr 40 (93%), 388.6 (%), 22 (100%) >4000 gr 37 (%), 4 (11.4%), 0 (0%)
Gestational age <37 13 (30.2%), 8 (22.9%), 5 (22.7%) ≥37 30 (60.8%), 27 (77.1%), 17 (77.3%)
Mode of delivery NSD 17 (39.5%), 7 (20%), 8 (36.4%) C/S 26 (60.5%), 28 (80.0%), 14 (63.6%)
APGAR 1. minute 7.0 (5-8), 7.0 (4-9), 7.0 (5-9) 5. minute 8.0 (6-10), 8.0 (6-10), 8.0 (7-10)
NICU admission (+) 28 (65.1%), 28 (80.0%), 13 (59.1%) (-) 15 (34.9%), 7 (20.0%), 9 (40.9%)
Gestational age 37.0 (30-40), 38.0 (29-41), 38.0 (28-41)
Fetal birth weight 3115.12±668.02, 3134.23±688.84, 2938.05±781.27
OGTT: Oral glucose tolerance test, APGAR: Appearance, Pulse, Grimace, Activity, and Respiration, NSD: Nuclear receptor-binding SET domain protein, C/S: Cesarean section, NICU: Neonatal Intensive Care Unit

Types of Anemia in Alzheimer's Patients and the Impact of Existing Anemia on Disease Progression

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Background: Alzheimer's disease (AD) is associated with a specific onset and progression of cognitive and functional decline and involves certain neuropathology. The earliest stage of Alzheimer's involves the accumulation of amyloid β and tau pathology, leading to memory deficiencies. Anemia, defined as a decrease in red blood cells (RBC), is a risk factor for cognitive loss due to decreased oxygenation of aerobic cortical tissue. Regarding the role of RBCs in the central nervous system is accumulating, making them potential candidate molecules related to the progression of AD. The aim of our research is to examine the anemia status in individuals with AD and to measure whether this anemia affects the progression of AD.

Materials and Methods: The study included patients diagnosed with AD at University of Health Sciences Türkiye, Bakırköy Dr. Sadi Konuk Training and Research Hospital between 2010-2023. Data included age, gender, occupations, medications, hemogram, c-reactive protein, sedimentation values, iron parameters, B12 and folic acid levels, and mini-mental state examination (MMSE) results.

Results: A total of 196 patients were included in the study, consisting of 93 males (47.4%) and 103 females (52.6%). The age range of the patients was 46 to 93 years, with a median age of 77. A positive significant relationship was found between MMSE scores and iron binding capacity (p=0.003) and total iron binding capacity (p=0.017). A negative significant relationship was found between MMSE scores and age (p=0.034). Comparing MMSE scores and ferritin levels showed a negative significant relationship in male patients and a positive significant relationship in female patients (p=0.009 for males, p=0.003 for females). Comparing MMSE scores across gender categories revealed that males had higher MMSE scores than females (p=0.042).

Conclusion: Our study found a positive correlation between MMSE scores and serum iron levels, indicating that iron levels positively affect cognitive function. Munoz and Pumeres study highlighted the role of iron in synaptic transmission and its contribution to AD pathology. Our study also found a negative correlation between age and MMSE scores, consistent with Legdeur et al. findings. Males had higher MMSE scores than females, consistent with literature, which suggests this disparity may be attributed to educational or biological differences. Lee and Hyun study showed that high ferritin levels result from the inflammatory response in AD. Unexpected finding of a positive correlation between MMSE scores and ferritin levels in females warrants further research. A more comprehensive study is necessary to better understand AD progression.

Keywords: Alzheimer's disease, anemia, mini-mental scoring examination, iron binding capacity, total iron binding capacity, ferritin molecule

Table 1. Demographical data		
	n	**%**
Gender		
Male	93	47.4
Female	103	52.6
Age		
>77	97	49.5
≤77	99	50.5

Table 2. Relationship between MMSE and IBC, TIBC, age, ferritin levels		
		MMSE
Iron binding capacity	rho p	0.213 0.003
Total iron binding capacity	rho p	0.170 0.017
Age	rho p	-0.152 0.034
Male ferritin levels	rho p	-0.271 0.009
Female ferritin levels	rho p	0.288 0.003
MMSE: Mini-mental state examination, IBC: Iron binding capacity, TIBC: Total iron binding capacity		

Table 3. Compairing MMSE Score by gender				
	Male, median (min.-max.)	**Female, median (min.-max.)**	**Value of calculation**	**p**
MMSE	18 (3-30)	15 (0-27)	-2.035	0.042
MMSE: Mini-mental state examination, min.-max.: Minimum-maximum				

Investigation of the Impact of Establishing Current Blood Management Protocols at Prof. Dr. Cemil Taşcıoğlu City Hospital on the Frequency of Blood Transfusion Practices in Elective Surgeries

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Background: This study aimed to assess the impact of a Patient Blood Management protocol, implemented based on the guidelines of University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu Hospital, on the rate of blood transfusions in elective surgeries.

Materials and Methods: Data from 5027 patients who underwent elective surgeries and received blood transfusions at the hospital were analyzed. A retrospective review was conducted to compare transfusion rates before and after the protocol implementation.

Results: Between 2018 and 2022, a total of 36,432 transfusion requests were made, and 26.581 transfusions were accepted. General Surgery accounted for the highest number of requests. A weak negative relationship was found between the dates of transfusion requests made between 2018-2022 and the number of these transfusion requests (p<0.001; r=-0.190) and their acceptances (p<0.001; r=-0.254) However, between 2021-2022, a weak positive relationship was noted between the dates of transfusion requests and the number of these requests (p=0.041; r=-0.022) and a weak negative relationship between the dates of requests and their acceptances (p<0.001; r=-0.040). A weak negative relationship was observed between patient ages and the number of transfusion requests (p<0.001; r=-0.058) and acceptances (p<0.001; r=-0.064).

Conclusion: The blood management protocol effectively reduced whole blood requests. Elderly patients exhibited lower transfusion needs post-surgery. Additionally, as patient admission dates progressed, a decrease in transfusion requests and acceptances per patient was observed. However,

this declining trend weakened and began to rise in the 2021-2022 data. The analysis suggests that the implemented protocol was effective in reducing unnecessary blood transfusions compared to the previous period, but this effectiveness weakened in the last year.

Keywords: Transfusion, blood management, surgery

Clinical, Serological and Radiological Features of Patients Diagnosed with Autoimmune Interstitial Pneumonia

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Background: Interstitial lung diseases (ILD) are a group of diseases that diffusely affect the lung, causing inflammation, fibrosis and structural deterioration in the lung parenchyma. In these diseases, the interstitium, alveolar spaces, small airways, vessels and pleura may also be affected. ILD may occur for a variety of reasons, including environmental and occupational exposures, drugs, radiation, infections, sarcoidosis, collagen vascular diseases and idiopathic processes. Clinical or serological features may suggest autoimmune processes in some cases, but may not be compatible with the criteria established for connective tissue diseases.

In the past, these diseases were called interstitial lung diseases associated with undifferentiated connective tissue disease, lung dominant interstitial lung diseases, or autoimmune interstitial lung diseases. However, since no international consensus could be reached on these classifications, they were redefined as "autoimmune interstitial pneumonia (AIP)" by the European Respiratory Society and the American Thoracic Society in 2015. This definition includes a combination of clinical, serological, and morphological features.

Materials and Methods: Demographic data, respiratory function tests, laboratory findings, radiological features, diagnostic methods, pathology data, and follow-up parameters of patients who applied to University of Health Sciences Türkiye, Yedikule Chest Diseases and Chest Surgery Training and Research Hospital and were diagnosed with AIP were recorded. The data were analyzed using SPSS.

Results: The study included 26 patients (14 male, 12 female) aged 55-80, with an average age of 66.06. Of these, 11 were active smokers, 12 had quit, and 3 had never smoked. Current diseases included hypertension (46%), thyroid diseases (12%), diabetes mellitus (8%), coronary artery disease (4%), gastroesophageal reflux disease (4%), and malignancy (4%). Primary or secondary connective tissue disease, COPD, and portal hypertension were not observed. Unlike connective tissue diseases, the male and female distribution in patients with OEIP is similar and is seen at older ages. Dyspnea and cough are the most common symptoms. While serologically ANA and RF positivity are seen, positivity of autoimmune markers such as CCP, anti-Jo1, Scl70, anti-Histone has also been detected. Radiologically, ground glass areas and reticulations are the most common findings.

Conclusion: The presence of fibrotic findings at the time of diagnosis emphasizes the importance of early diagnosis. Treatment strategies are mostly based on expert opinion, and immunosuppressive agents are preferred in treatment as in connective tissue diseases. Heterogeneity continues in serological features, radiological findings and treatment process in IPAF. Since there is no common consensus, multicenter randomized controlled studies are needed.

Keywords: Interstitial lung disease, inflammation, fibrosis, autoimmunity

The Effect of Daily Physical Activities on Core Stabilizer Muscle Strength of Medical Students

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Background: The core is composed of the abdominal muscles anteriorly, paraspinal and gluteal muscles posteriorly, hipjoint and pelvic ring and oblique abdominal muscles on the lateral sides. Core stability; neutral spine focuses on maintaining alignment, optimal body position and transfer of loads along the kinetic chain. Thisone the relationship between medical students' core stabilization and their activities in their daily lives will beexamined.

Materials and Methods: University of Health Sciences Türkiye, Hamidiye Faculty of Medicine, was included in the study. The participants were given aquestionnaire consisting of 5 sections. In the first part of the questionnaire, questions including socio-demographic information, in thesecond part Nottingham Health Profile [Nottingham Health Profile (NHP)], the International Physical Activity Short Form (IPAQ) in the third section, and the International Physical Activity Questionnaire (IPAQ) in the fourth section. Manual Abdominal Muscle Test (MAMT) in the first part and Back Extensor Muscle Strength Test (LEMFST) scalein the fifth part is included. Data analysis was performed using SPSS 25 package program type I error rate (α) was taken as 0.05 in the study.

Results: A total of 101 students participated in the study.women (n=52; 51.5%) and studied in clinical classes (n=52; 51.5%), and their GPAs were highest in clinical classes (n=52; 51.5%). 2.50 (n=89; 88.1%). IPAQ scoring showed that most of the participants were minimally inactive category

(n=66; 65.3%). There was no significant difference between the participants' class categories and IPAQ scores relationship was found (p=0.040). Students in preclinical (n=34; 69.4%) and clinical (n=32; 61.5%) classes IPAQ scoring results were mostly in the minimally active category. Inactive (n=8; 72.7%) and minimally active (n=34; 51.5%). There were mostly preclinical students in the category of very active (n=17; 70.8%) and mostly clinical class students in the category of very active (n=17; 70.8%). There was no significant difference between gender categories in terms of IPAQ scoring results (p=0.233). NHP GPA in terms of manual muscle strength scores (MAAKKT, MAKKT, SEKTT) and gender There was no difference between the categories. Clinical grade students were found to have higher MAACCT scores (p=0.040).

Conclusion: It was observed that 88.1% of the students participating in the study had a GPA above 2.50. Accordingly, sedentary. It was determined that both clinical and preclinical period students wereminimally active with increasing life tendency. Additional It was observed that clinical studentswere more active than preclinical students. Preclinical clinical students core stabilization and muscle strength were found to be higher than the students.

Keywords: Muscle strength, daily activity, core area

Table 1. Evaluation of muscle strength of clinical and preclinical students			
	Preclinical (n=49)	**Clinical (n=52)**	**p-value**
Nottingham Health Profile			
Pain	4.61±8.27	6.90±13.29	0.299*
Social isolation	17.61±26.09	20.95±31.20	0.562*
Emotional reactions	22.38±29.18	18.65±30.12	0.529*
Physical activity	8.80±11.66	5.58±9.52	0.131*
Energy	18.07±29.70	22.53±33.34	0.480*
Sleep	29.55±38.79	21.56±34.78	0.278*
Total	0.67±1.44	0.42±1.09	0.327*
Manuel abdominal	4.18±1.11	4.53±0.72	0.063*
Manuel lower abdominal	4.34±0.87	4.65±0.55	0.040*
Body extension	3.89±1.24	4.30±0.96	0.066*
Inactive	8 (16.3%)	34 (69.4%)	7 (14.3%)
Minimal active	34 (69.4%)	32 (61.5%)	66 (65.3%)
Very active	7 (14.3%)	17 (32.7%)	24 (23.8%)
Total	49 (100.0%)	52 (100.0%)	101 (100.0%)

Mortality Rates and Related Factors of Patients Admitted to Intensive Care: a Retrospective Study

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Background: This study aims to retrospectively examine the mortality rates and related factors of patients admitted to the intensive care unit of University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Hospital throughout 2022. The research analyzes patients' demographic data, reasons for admission to intensive care, length of stay, and expected mortality rates based on Acute Physiology and Chronic Health Evaluation (APACHE) scores. The study evaluates mortality rates and the main factors influencing these rates.

Materials and Methods: The study includes 584 patients admitted to the intensive care unit (ICU) in 2022 who passed away. The data were retrospectively obtained from patient files and analyzed using IBM SPSS statistics. Variables such as patient age, gender, length of ICU stay, APACHE scores, and expected mortality rates were examined. The findings were statistically evaluated, and the significance of the results was tested using the chi-square test.

Results: When the mortality rates were analyzed according to age, it was found that the highest mortality rate was in the 61-90 age group, with deaths above 90 more frequent among women. Additionally, patients with APACHE scores above 50 had ICU stays of less than 10 days, while those with scores below 10 stayed for at least 30 days. The relationships between age, gender, length of ICU stay, and mortality rates were also analyzed.

Conclusion: The study found a statistically significant relationship between APACHE scores and the length of ICU stay (p<0.05). Patients with higher APACHE scores stayed in the ICU for shorter periods, while those with lower scores stayed longer. Additionally, no statistically significant difference was found between the causes of death and factors such as gender and age. Mortality was mostly concentrated in the 61-90 age range for both

genders, with deaths above 90 being more common among women. These findings contribute to a better understanding of the factors affecting mortality rates in ICU patients.

Keywords: Intensive care, mortality, APACHE

Table 1. Sample table		
Mortality rates by age	**Number**	**%**
0-30	11	19
31-60	131	224
61-90	395	676
>90	47	8

Responses of Children Diagnosed with Familial Hypercholesterolemia to Nutritional Therapy

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Background: Familial hypercholesterolemia (FH) is an inherited lipid disorder marked by extremely high low-density lipoprotein (LDL) cholesterol levels, significantly raising the risk of early cardiovascular disease. Early diagnosis and management in children are crucial for long-term health. Nutritional therapy is a key aspect of FH management and has shown positive outcomes in children. The aim of this study is to examine the responses of children diagnosed with FH to nutritional therapy. Our study aims to retrospectively evaluate the responses of children diagnosed with familial hypercholesterolemia to nutritional therapy and compare these findings with other studies.

Materials and Methods: Our study included 170 familial hypercholesterolemia patients from the Pediatric Metabolism Clinic at University of Health Sciences Türkiye Prof. Dr. Cemil Taşçıoğlu City Hospital. Patients followed a diet low in saturated fat and cholesterol, and high in fiber. Laboratory values [total cholesterol, LDL, high-density lipoprotein (HDL), triglycerides] were recorded before and after 6 months of nutritional therapy. Data were analyzed using IBM SPSS v29, with the Paired-Samples t-test comparing pre- and post-diet values. The type 1 error rate was set at 0.05.

Results: Significant reductions were observed in LDL cholesterol levels of children who started nutritional therapy ($p < 0.001$). The mean LDL cholesterol level decreased from 180.30 mg/dL at baseline to 167 mg/dL after 6 months of treatment. The mean total cholesterol level decreased from 256.3 mg/dL at baseline to 237 mg/dL after 6 months. No significant changes were observed in triglyceride and HDL cholesterol levels ($p=0.909$ and $p=0.205$, respectively). The reduction in LDL cholesterol levels was more pronounced in children with high adherence to the diet.

Conclusion: This study shows that nutritional therapy effectively reduces LDL cholesterol in children with FH and may lower long-term cardiovascular risk. Family support and adherence to the diet are key to treatment success. Nutritional therapy has minimal side effects and offers significant health benefits for children. Nutritional therapy effectively lowers LDL cholesterol and improves overall health in children with FH. Early and consistent dietary intervention is key to reducing cardiovascular risk. Larger studies on long-term effects can further clarify its role in FH management.

Keywords: Familial hypercholesterolemia, HDL, LDL, total cholesterol, triglyceride, nutritional therapy

Table 1. Comparison before and after diet					
Paired samples statistics					
		Mean	**n**	**SD**	**SEM**
Pair 1	First HDL	51.98	170	11.868	.910
	Last HDL	52.93	170	11.546	.886
Pair 2	First LDL	180.30	170	68.712	5.270
	Last LDL	167.09	170	67.942	5.211
Pair 3	First total cholesterol	256.39	170	70.001	5.369
	Last total cholesterol	237.82	170	65.738	5.042
Pair 4	First TG	119.13	170	106.441	8.164
	Last TG	120.24	170	212.588	16.305
SD: Standard deviation, SEM: Standard error of mean, HDL: High-density lipoprotein, LDL: Low-density lipoprotein, TG: Triglyceride					

The Relationship Between Screen Time and Sleep Quality in Adolescents

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Background: High-quality sleep refers to a type of sleep that meets specific criteria associated with restorative and peaceful sleep. High screen time and low-quality sleep are often reported in adolescents; therefore, it is important to better understand how screen time affects sleep. Previous research has examined the exposure of adolescents to electronic devices and its relationship with sleep quality, type, gender, and time. The aim of this study is to investigate the relationship between adolescents' screen time and sleep quality.

Materials and Methods: The study population consists of university students in Türkiye. Our study is internet-based and conducted via a Google survey. Data analysis was performed using the SPSS 25 software package. The type I error rate (α) in the study was taken as 0.05. Chi-square analysis was used for data analysis. The confidence level in the analyses was taken as 95%.

Results: A total of 505 people participated in our study. Of the participants, 52.9% (n=267) were female. The majority of participants were in the 18-20 age group (n=216; 42.8%). Most participants were first-year students (n=168; 33.3%). The average daily screen time of participants was mostly 3-6 hours (n=237; 46.9%). The most preferred screen activity among participants was social media (n=282; 55.8%). The average daily sleep duration of participants was mostly 6-8 hours (n=241; 47.7%). When participants were sleepless, they tended to use screens more (n=290; 57.4%). The analyses revealed statistically significant differences between participants' screen usage times and their responses to the questions "Do you experience waking up or insomnia throughout the night?", "Daily sleep duration", and "Do you think there is a relationship between screen usage before sleeping and the time it takes to fall asleep?" (p<0.05). Participants with screen usage time over 6 hours were found to have constant waking up problems (n=36; 37.1%). Participants with screen usage time over 6 hours were mostly found to have sleep durations of less than 6 hours (n=45; 46.4%). Participants with screen usage time of 0-3 hours believed there was a relationship between screen usage before sleeping and the time it takes to fall asleep (n=134; 78.36%).

Conclusion: It was observed that excessive screen usage reduces sleep quality and duration. At the same time, individuals with less screen usage time were found to be more aware of the relationship between screen usage and the time it takes to fall asleep. In this context, raising awareness about the effect of screen time on sleep quality appears to be an effective solution.

Keywords: Quality sleep, screen time, level of consciousness, adolescent

Evaluation of Patients who Operated for Urolithiasis in Terms of Preoperative Urine Culture Positivity Rates Pathogens and Antibiograms

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Background: In urolithiasis treatment, both medical and surgical methods are employed. Surgical options, including shock wave lithotripsy, endoscopic stone surgery, and nephrolithotomy, are chosen based on stone size, composition, and location. To prevent post-operative infections, urinary tract infections should be addressed before endoscopic stone removal. This study aims to assess urine culture positivity rates, identify pathogenic microorganisms, and evaluate antibiograms in patients undergoing surgery for urolithiasis.

Materials and Methods: This study included 363 patients admitted to the Urology Clinic of University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Hospital. We assessed demographic information (age, gender, medical history), pre-operative lab results (urinalysis, hemogram, urea and creatinine levels, C-reactive protein, urine culture, antibiogram), and radiological findings (stone sizes and locations). Data analysis was performed using Statistical Package for the Social Sciences 25. Categorical variables are presented as percentages and frequencies, while numerical variables are shown as means with standard deviations or medians with ranges. The chi-squared test was used for categorical comparisons, with a type 1 error rate set at 0.05.

Results: Our study included 222 male patients (61.2%) and 141 female patients (38.8%). Of these, 296 patients (81.5%) underwent ureterorenoscopy, and 67 patients (18.5%) underwent percutaneous nephrolithotomy. Pre-operative urine culture was positive in 112 patients (30.9%). The most common pathogens were *Escherichia coli* (33.93%), *Chlamydia pneumoniae* (15.18%), and *Enterococcus faecalis* (8.93%). Pathogens showed the highest sensitivity to nitrofurantoin (12.2%), gentamicin (11.96%), and ciprofloxacin (9.56%). There was no significant correlation between urine culture positivity and stone location (p=0.364). However, there was a significant correlation between stone location and the choice of surgical method (p<0.001).

Conclusion: In our study, *E. coli*, *C. pneumoniae*, *E. faecalis*, and *Pseudomonas aeruginosa* were identified as the most prevalent pathogens in preoperative urine cultures of patients who underwent surgery for urolithiasis. The isolated *Klebsiella pneumoniae* strains were found to be sensitive to gentamicin (33%), nitrofurantoin (31%), trimethoprim-sulfamethoxazole (TMP-SMX) (22%), ciprofloxacin (21%), and cefuroxime A (15%). *K. pneumoniae* strains showed sensitivity to gentamicin (70.58%), TMP/SMX (58.82%), and ciprofloxacin (52.94%). We believe that treating preoperative urinary tract

infections in patients with urolithiasis with antibiotics sensitive to the pathogens is crucial for reducing the risk of postoperative urinary system infections and sepsis, as well as preventing the rise of antibiotic resistance in the community.

Keywords: Urolithiasis, urine culture, pathogen, antibiogram

Table 1. Descriptive statistics		
	n	**%**
Gender		
Male	222	61.2
Female	141	38.8
History		
Yes	156	43
No	207	57
Urine culture		
Positive	112	30.9
Negative	251	69.1
Stone location		
Calyx	90	24.8
Renal pelvis	98	27
Ureter	169	46.6
Bladder	6	1.7
Surgical procedure used		
Endoscopic stone removal	296	81.5
Nephrolithotomy	67	18.5
Isolated pathogens (urethral culture)		
Escherichia coli	38	33.93
Klebsiella pneumoniae	17	15.18
Enterococcus faecalis	10	8.93
Pseudomonas aeruginosa	9	8.04

Table 1. Continued		
	n	**%**
Streptococcus agalactiae	8	7.14
Enterococcus faecium	7	6.25
Proteus mirabilis	6	5.36
Candida albicans	6	5.36
Antibiograms		
Nitrofurantoin	51	12,20095694
Gentamicin	50	11,96172249
Ciprofloxacin	40	9,56937799
Trimethoprim/sulfamethoxazole	38	9,090909091
Ampicillin	29	6,937799043
Cefuroxime A	27	6,459330144
Amikacin	22	5,263157895
Amoxicillin/clavulanic asid	20	4,784688995
Piperacillin/tazobaktam	19	4,545454545
Meropenem	19	4,545454545
Ceftazidime	14	3,349282297
Ceftriaxone	12	2,870813397
Ertanepem	10	2,392344498
Levofloxacin	10	2,392344498

Maternal and Fetal Impact of Gestational Diabetes

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Background: Gestational diabetes mellitus (GDM) is a carbohydrate intolerance that begins during pregnancy. Risk factors include maternal age, ethnicity, polycystic ovary syndrome, obesity, hypertension, and prior gestational diabetes mellitus. Gestational diabetes mellitus can cause complications such as cesarean delivery, shoulder dystocia, and fetal death. Newborns may experience macrosomia, hypoglycemia, respiratory distress syndrome, and congenital malformations. Long-term effects on children include obesity, delayed intellectual development, impaired glucose tolerance, and type 2 diabetes. Maternal outcomes may involve spontaneous abortion, hyperglycemia, severe hypoglycemia, organ damage, preeclampsia, infections, chronic anemia, postpartum complications. Our research aims to analyze these risks for better management and prevention.

Materials and Methods: This study examines perinatal and maternal outcomes for 249 healthy individuals and 142 patients with gestational diabetes mellitus treated at University of Health Sciences Türkiye, Prof. Dr. Cemil Taşcıoğlu City Health Application and Research Center. Gestational diabetes mellitus was diagnosed using the 50 g glucose load and 100 g oral glucose tolerance tests, based on Carpenter and Coustan criteria. Data included maternal age, smoking, chronic illnesses, consanguinity, birth details, complications, and glucose levels. For newborns, data included birth week, Appearance, Pulse, Grimace, Activity, and Respiration (APGAR) scores, birth weight, and various measurements. Analysis was performed with International Business Machines Statistical Package for the Social Sciences version 25.0, including the Shapiro-Wilk test for normality and the Mann-Whitney U test for comparisons. A type 1 error rate of 0.05 was used.

Results: Our study included 142 patients with gestational diabetes (36.3%) and 249 healthy pregnant women (63.7%). Significant differences were found between the two groups in maternal comorbidity, oral glucose tolerance tests, screening tests, and amniotic fluid index (p<0.005). For gestational diabetes patients, urine glucose, fasting glucose, and newborn metrics such as weight, height, head circumference, abdominal circumference, red blood cells, and bilirubin levels were also significantly different (p<0.005). No significant relationships were found between gestational diabetes and consanguinity, smoking, delivery method, birth complications, neonatal mortality, birth week, APGAR score, chest circumference, femur length, or biparietal diameter.

Conclusion: In our study, maternal comorbidity, advanced age, and high-risk results from oral glucose tolerance and screening tests were identified as risk factors for gestational diabetes. Similar to the Hyperglycemia and Adverse Pregnancy Outcome study, which investigated gestational diabetes mellitus complications in 25,505 pregnant women across 9 countries and 15 centers, our study found that gestational diabetes patients had significantly higher amniotic fluid index urine glucose, and fasting glucose levels. These factors were found to affect newborn weight, height, head circumference, abdominal circumference, red blood cells, and bilirubin levels.

Keywords: Gestational diabetes, oral glucose tolerance test, pregnant, glucose, macrosomia, hydramnios

Table 1. Comparison of gestational diabetes care by quantitative variable categories			
	Median (min.-max.)	Z	p-value
Age			
Diabetic pregnant	34 (20-44)	-7.684	<0.001
Healthy pregnant	28 (16-54)		
Birth week			
Diabetic pregnant	262 (168-292)	-0.735	0.462
Healthy pregnant	264 (165-290)		
APGAR			
Diabetic pregnant	8 (0-8)	-0.177	0.860
Healthy pregnant	8 (0-8)		
Birth weight			
Diabetic pregnant	3267 (440-5075)	-4.310	<0.001
Healthy pregnant	2935 (550-4550)		
Birth height			
Diabetic pregnant	49 (30-56)	-2.046	0.041
Healthy pregnant	48 (27-54)		
Head circumference			
Diabetic pregnant	35 (20-39)	-2.893	0.004
Healthy pregnant	34 (16-41)		
Chest circumference			
Diabetic pregnant	35 (20-41)	-0.780	0.435
Healthy pregnant	35 (20-41)		
Biparietal diameter			
Diabetic pregnant	256 (154-290)	-0.919	0.358
Healthy pregnant	256 (155-292)		
Abdominal circumference			
Diabetic pregnant	266 (154-291)	-4.134	<0.001
Healthy pregnant	257 (143-294)		
Femur length			
Diabetic pregnant	260 (154-288)	-1.731	0.083
Healthy pregnant	257 (37-288)		

Table 1. Continued			
	Median (min.-max.)	**Z**	**p-value**
Maternal hunger glucose			
Diabetic pregnant	122 (68-449)	-10.210	<0.001
Healthy pregnant	93 (52-314)		
Maternal urine glucose			
Diabetic pregnant	0 (0-4)	-2.473	0.013
Healthy pregnant	0 (0-4)		
Baby glucose			
Diabetic pregnant	92 (37-516)	-9.401	<0.001
Healthy pregnant	87 (32-531)		
Bilirubin			
Diabetic pregnant	0.74 (0.11-4.29)	-7.984	<0.001
Healthy pregnant	0.5 (0.00-0.65)		
Red blood cells			
Diabetic pregnant	4.9 (2.35-8.27)	-2.824	0.005
Healthy pregnant	4.75 (0.00-6.72)		
APGAR: Appearance, Pulse, Grimace, Activity, and Respiration			