

JCRPE

Journal of Clinical Research in Pediatric Endocrinology

March 2019

volume 11

issue 1

www.jcrpe.org

ISSN: 1308-5727

E-ISSN: 1308-5735



Official Journal of
Turkish Pediatric Endocrinology
and Diabetes Society

Editor in Chief

Feyza Darendeliler

Istanbul University Istanbul Faculty of Medicine, Department of Pediatric Endocrinology, Istanbul, Turkey
feyzad@istanbul.edu.tr ORCID-ID: orcid.org/0000-0003-4786-0780

Associate Editors

Abdullah Bereket

Marmara University Faculty of Medicine, Department of Pediatric Endocrinology, Istanbul, Turkey
abdullahbereket@gmail.com ORCID-ID: orcid.org/0000-0002-6584-9043

Damla Gökşen

Ege University Faculty of Medicine, Department of Pediatric Endocrinology, İzmir, Turkey
damla.goksen@ege.edu.tr ORCID-ID: orcid.org/0000-0001-6108-0591

Korcan Demir

Dokuz Eylül University Faculty of Medicine, Department of Pediatric Endocrinology, İzmir, Turkey
korcandemir@gmail.com ORCID-ID: orcid.org/0000-0002-8334-2422

Samim Özen

Ege University Faculty of Medicine, Department of Pediatric Endocrinology, İzmir, Turkey
samim.ozen@ege.edu.tr
ORCID-ID: orcid.org/0000-0001-7037-2713

Serap Turan

Marmara University Faculty of Medicine, Department of Pediatric Endocrinology, Istanbul, Turkey
serap.turan@marmara.edu.tr ORCID-ID: orcid.org/0000-0002-5172-5402

Editorial Advisor

Olcay Neyzi

Emeritus Professor, Istanbul, Turkey
oneyzi@superonline.com

English Language Editor

Jeremy Jones, Kocaeli, Turkey

© The paper used to print this journal conforms to ISO 9706: 1994 standard (Requirements for Permanence).

The National Library of Medicine suggests that biomedical publications be printed on acid-free paper (alkaline paper).

Reviewing the articles' conformity to the publishing standards of the Journal, typesetting, reviewing and editing the manuscripts and abstracts in English, creating links to source data, and publishing process are realized by Galenos.

Editorial Board

Ali Kemal Topaloğlu

Cukurova University Faculty of Medicine, Department of Pediatric Endocrinology, Adana, Turkey

Angel Ferrandez Longas

Children's Hospital Miguel Servet, Department of Pediatric Endocrinology, Zaragoza, Spain

Aysun Bideci

Gazi University Faculty of Medicine, Department of Pediatric Endocrinology, Ankara, Turkey

Fima Lifshitz

Pediatric Sunshine Academics, Inc., Santa Barbara, USA

Hüseyin Onay

Ege University Faculty of Medicine, Department of Medical Genetics, İzmir, Turkey

İlknur Arslanoğlu

Düzce University Faculty of Medicine, Department of Pediatric Endocrinology, Düzce, Turkey

Khalid Hussain

Great Ormond Street Hospital for Children, Department of Pediatric Endocrinology, London, United Kingdom

Merih Berberoğlu

Ankara University Faculty of Medicine, Department of Pediatric Endocrinology, Ankara, Turkey

Mitchell Geffner

Children's Hospital Los Angeles, Center for Endocrinology, Diabetes and Metabolism, Los Angeles, USA

Neslihan Güngör

Louisiana State University Health Sciences Center-Shreveport, Department of Pediatric Endocrinology, Louisiana, USA

Nurgün Kandemir

Hacettepe University Faculty of Medicine, Department of Pediatric Endocrinology, Ankara, Turkey

Oktay Özdemir (Statistical Consultant)

Yorum Consultancy Limited Company, Istanbul, Turkey

Ömer Tarım

Uludağ University Faculty of Medicine, Department of Pediatric Endocrinology, Bursa, Turkey

Pietro Galassetti

University of California, Pediatric Exercise and Genomics Research Center, Department of Pediatrics, California, USA

Robert Rapaport

Icahn School of Medicine at Mount Sinai, Kravis Children's Hospital at Mount Sinai, Department of Pediatric Endocrinology and Diabetes, New York, USA

Sandra L. Blethen

Emeritus Professor, Belmont, CA, USA

Thomas Allen Wilson

Stony Brook Children's Hospital, Department of Pediatric Endocrinology, New York, USA

Wayne Cutfield

University of Auckland, Liggins Institute, Department of Pediatric Endocrinology, Auckland, New Zealand

Galenos Publishing House
Owner and Publisher
Erkan Mor

Publication Coordinator
Burak Sever

Web Coordinators
Soner Yıldırım
Turgay Akpınar

Graphics Department
Ayda Alaca
Çiğdem Birinci
Gülşah Özgül

Project Coordinators

Eda Kolukisa
Hatice Balta
Lütfiye Ayhan İrtem
Sedanur Sert
Zeynep Altındağ

Project Assistants

Gamze Aksoy
Nurcan Acarçağ

Finance Coordinator
Sevinç Çakmak

Research&Development
Kerim Sancar Ölmez



Contact

Address: Molla Gürani Mahallesi
Kaçamak Sokak No: 21 34093
Fındıkzade, İstanbul-Turkey
Phone: +90 (212) 621 99 25
Fax: +90 (212) 621 99 27
E-mail: info@galenos.com.tr
Publisher Certificate Number: 14521
www.galenos.com.tr

Printing at:

Üniform Basım San. ve Turizm Ltd. Şti.
Matbaacılar Sanayi Sitesi 1. Cad. No: 114
34204 Bağcılar, İstanbul, Türkiye
Phone: +90 212 429 10 00
Certificate Number: 42419
Date of printing: February 2019
ISSN: 1308-5727
E-ISSN: 1308-5735

AIMS AND SCOPE

The Journal of Clinical Research in Pediatric Endocrinology (JCRPE) publishes original research articles, reviews, short communications, letters, case reports and other special features related to the field of pediatric endocrinology. JCRPE is published in English by the Turkish Pediatric Endocrinology and Diabetes Society quarterly (March, June, September, December). The target audience is physicians, researchers and other healthcare professionals in all areas of pediatric endocrinology.

JCRPE is indexed in EBSCO, SCOPUS, EMBASE, Engineering Village, Reaxys, Index Copernicus, CINAHL, ProQuest, GALE, Turk Medline, Tübitak Ulakbim TR Index, Index Medicus/PubMed, Türkiye Citation Index, PubMed Central (PMC), Science Citation Index-SCI-E and PubMed/MEDLINE.

JCRPE has an impact factor 1.163 in 2017.

The journal is printed on an acid-free paper.

Permissions

Requests for permission to reproduce published material should be sent to the publisher.

Publisher: Erkan Mor

Address: Molla Gürani mah. Kaçamak Sok. 21/1 Fatih, Istanbul, Turkey

Telephone: +90 212 621 99 25

Fax: +90 212 621 99 27

Web page: <http://www.galenos.com.tr/en>

E-mail: info@galenos.com.tr

Copyright Notice

The author(s) hereby affirms that the manuscript submitted is original, that all statement asserted as facts are based on author(s) careful investigation and research for accuracy, that the manuscript does not, in whole or part, infringe any copyright, that it has not been published in total or in part and is not being submitted or considered for publication in total or in part elsewhere.

Completed Copyright Assignment&Affirmation of Originality Form will be faxed to the JCRPE Editorial Office (Fax: +90 212 621 99 27).

By signing this form,

1. Each author acknowledge that he/she participated in the work in a substantive way and is prepared to take public responsibility for the work.
2. Each author further affirms that he or she has read and understands the "Ethical Guidelines for Publication of Research".
3. The author(s), in consideration of the acceptance of the manuscript for publication, does hereby assign and transfer to the Journal of Clinical Research in Pediatric Endocrinology all of the rights and interest in and the copyright of the work in its current form and in any form subsequently revised for publication and/or electronic dissemination.

Open Access Policy

This journal provides immediate open access to its content on the principle that making research freely available to the public supports a greater global exchange of knowledge.

This work is licensed under a Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License.

GENERAL INFORMATION

Manuscripts must be written in English and must meet the requirements of the journal. Papers that do not meet these requirements will be returned to the author for necessary revision before the review. Manuscripts submitted to JCRPE are evaluated by peer reviewers. Authors of manuscripts requiring modifications have two months to resubmit a revised paper. Manuscripts returned after this deadline will be treated as new submissions. The journal is in compliance with the uniform requirements for manuscripts submitted to biomedical journals published by the International Committee of Medical Journal Editors (NEJM 1997; 336:309-315, updated 2001). Upon submission of the manuscript, authors are to indicate the type of trial/research and provide the checklist of the following guidelines when appropriate: Consort statement for randomized controlled trials (Moher D, Schultz KF, Altman D,

for the CONSORT Group. The CONSORT statement revised recommendations for improving the quality of reports of parallel group randomized trials. JAMA 2001 ; 285 : 1987 - 91), the QUOROM statement for meta-analysis and systemic reviews of randomized controlled trials (Moher D, Cook DJ, Eastwood S, Olkin I, Rennie D, Stroup DF. Improving the quality of reports of meta-analyses of randomized controlled trials: the QUOROM statement. Quality of Reporting of Meta-Analyses. Lancet 1999; 354 : 1896 – 900) and the MOOSE guidelines for meta-analysis and systemic reviews of observational studies (Stroup DF, Berlin JA, Morton SC, et al. Meta-analysis of observational studies in epidemiology: a proposal for reporting Meta-analysis of observational studies in Epidemiology (MOOSE) group. JAMA 2000; 283: 2008 – 12). Keywords are included according to MeSH (Medical Subject Headings) National Library of Medicine.

Once the manuscript is accepted to be published in The Journal of Clinical Research in Pediatric Endocrinology, it receives a Digital Object Identifier (DOI) number. Uncorrected full text files can be reached online via PubMed and Ahead of Print section of the journal's website (<http://www.jcrpe.org/ahead-of-print>).

All contents will be printed in black and white. The payment of \$75 per article should be made if the author(s) wish their articles in color. For payment details, please contact the Editorial Office.

NEW

Article Publication Charges for accepted case reports is \$100. Please contact the editorial office for detailed information by the following link: info@jcrpe.org

All other forms of articles are free of publication charge.

MANUSCRIPT CATEGORIES

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

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

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

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

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

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

Letters to the Editor may be submitted in response to work that has been published in the Journal. Letters should be short commentaries related to specific points of agreement or disagreement with the published work.

Letters should be no longer than 500 words with no more than five complete references, and may not include any figures or tables.

Note on Prior Publication

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

MANUSCRIPT SUBMISSION PROCEDURES

JCRPE only accepts electronic manuscript submission at the web site www.jcrpe.org

After logging on to the website www.jcrpe.org click 'online manuscript submission' icon. All corresponding authors should be provided a password and a username after providing the information needed. If you already have an account from a previous submission, enter your username and password to submit a new or revised manuscript. If you have forgotten your username and/or password, e-mail the editorial office for assistance. After logging on the article submission system with your own password and username please read carefully the directions of the system to provide all needed information. Attach the manuscript, tables and figures and additional documents.

All Submissions Must Include:

1. A cover letter requesting that the manuscript be evaluated for publication in JCRPE and any information relevant to your manuscript. Cover letter should contain address, telephone, fax and e-mail address of the corresponding author.
2. Completed Copyright Assignment & Affirmation of Originality form. This form should be filled in thoroughly and faxed to the JCRPE Editorial Office at +90 212 621 99 27.
3. Completed Disclosure of Potential Conflict of Interest Form. The corresponding author must acquire all of the authors' completed disclosure forms and fax them to the editorial office at +90 212 621 99 27.

Authors must complete the online submission forms. If unable to successfully upload the files please contact the editorial office by e-mail.

JCRPE does not charge any fee for article submission or processing.

MANUSCRIPT PREPARATION

General Format

The Journal requires that all submissions be submitted according to these guidelines:

- Text should be double spaced with 2.5 cm margins on both sides using 12-point type in Times Roman font.
- All tables and figures must be placed after the text and must be labeled.
- Each section (abstract, text, references, tables, figures) should start on a separate page.
- Manuscripts should be prepared as word document (*.doc) or rich text format (*.rtf).

Title Page

The title page should include the following:

- Full title
- Authors' names and institutions.
- Short title of not more than 40 characters for page headings
- At least three and maximum eight key words. Do not use abbreviations in the key words

- Word count (excluding abstract, figure legends and references)
- Corresponding author's e-mail and post address, telephone and fax numbers
- Name and address of person to whom reprint requests should be addressed
- Any grants or fellowships supporting the writing of the paper
- The ORCID (Open Researcher and Contributor ID) number of the all authors should be provided while sending the manuscript. A free registration can be done at <http://orcid.org>.

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

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

What is already known on this topic?

What this study adds?

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

Review papers do not need to include these boxes.

Introduction

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

Experimental Subjects

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

Clinical Trials Registration

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

Experimental Animals

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

Materials and Methods

These should be described and referenced in sufficient detail for other investigators to repeat the work. Ethical consent should be included as stated above.

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

Results

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

Discussion

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

Study Limitations

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

Conclusion

The conclusion of the study should be highlighted.

Acknowledgments (Not Required for Submission)

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

Authorship Contribution

The kind of contribution of each author should be stated.

References

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

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

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

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

Books: List all authors or editors.

Sample References

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

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

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

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

Tables

Tables must be constructed as simply as possible. Each table must have a concise heading and should be submitted on a separate page. Tables must not simply duplicate the text or figures. Number all tables in the order of their citation in

the text. Include a title for each table (a brief phrase, preferably no longer than 10 to 15 words). Include all tables in a single file following the manuscript.

Figures Legends

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

Figures & Images

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

All images MUST be at or above intended display size, with the following image resolutions: Line Art 800 dpi, Combination (Line Art + Halftone) 600 dpi, Halftone 300 dpi. See the Image quality specifications chart for details. Image files also must be cropped as close to the actual image as possible.

Units of Measure

Results should be expressed in metric units.

Validation of Data and Statistical Analysis

Assay validation: Bioassay and radioimmunoassay potency estimates should be accompanied by an appropriate measure of the precision of these estimates. For bioassays, these usually will be the standard deviation, standard error of the mean, confidence limits. For both bioassays and radioimmunoassays, it is necessary to include data relating to within-assay and between-assay variability. If all relevant comparisons are made within the same assay, the latter may be omitted. Statistical analysis should be done accurately and with precision. Please consult a statistician if necessary.

Proofs and Reprints

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

Page and Other Charges

Archiving

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

Submission Preparation Checklist

As part of the submission process, authors are required to check off their submission's compliance with all of the following items, and submissions may be returned to authors that do not adhere to these guidelines.

1. The submission has not been previously published, nor is it before another journal for consideration (or an explanation has been provided in Comments to the Editor).
2. The submission file is in Microsoft Word, RTF, or WordPerfect document file format. The text is double-spaced; uses a 12-point font; employs italics, rather than underlining (except with URL addresses); and all illustrations, figures, and tables are placed within the text at the appropriate points, rather than at the end. Please do not send the manuscript in docx.
3. Where available, URLs for the references have been provided.
4. Upon acceptance of your manuscript for publication, a completed Copyright Assignment & Affirmation of Originality Form will be faxed to the JCRPE Editorial Office (Fax: +90 212 621 99 27)
5. The text adheres to the stylistic and bibliographic requirements outlined in the Author Guidelines, which is found in About the Journal.

6. Completed Disclosure of Potential Conflict of Interest Form. The corresponding author must acquire all of the authors' completed disclosure forms and fax them, together, to the editorial office along with the Author Disclosure Summary.

Privacy Statement

The names and email addresses entered in this journal site will be used exclusively for the stated purposes of this journal and will not be made available for any other purpose or to any other party.

Peer Review Process

1. The manuscript is assigned to an editor, who reviews the manuscript and makes an initial decision based on manuscript quality and editorial priorities.
2. For those manuscripts sent for external peer review, the editor assigns reviewers to the manuscript.
3. The reviewers review the manuscript.
4. The editor makes a final decision based on editorial priorities, manuscript quality, and reviewer recommendations.
5. The decision letter is sent to the author.

The Reviewer is Asked to Focus on the Following Issues:

1. General recommendation about the manuscript

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

2. Publication timing, quality, and priority

How important is the manuscript in this field?

Does it present original data?
Does it carry priority in publishing?

3. Specific questions regarding the quality of the manuscript

Does the title describe the study accurately?
Is the abstract informative and clear?
Do the authors state the study question in the introduction?
Are the methods clear?
Are ethical guidelines met?
Are statistical analyses appropriate?
Are the results presented clearly?
Does the discussion cover all of the findings?
Are the references appropriate for the manuscript?

4. Remarks to the editor

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

5. Remarks to the author

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

Editorial

- 1** Neonatal Screening for Congenital Adrenal Hyperplasia in Turkey
Abdullah Bereket, (Istanbul, Turkey)

Review

- 4** Neonatal Hypopituitarism: Approaches to Diagnosis and Treatment
Selim Kurtođlu, Ahmet Özdemir, Nihal Hatipođlu, (Kayseri, Turkey)

Original Articles

- 13** Neonatal Screening for Congenital Adrenal Hyperplasia in Turkey: A Pilot Study with 38,935 Infants
Tülay Güran, Başak Tezel, Fatih Gürbüz, Beray Selver Ekliođlu, Nihal Hatipođlu, Cengiz Kara, Enver Şimsek, Filiz Mine Çizmeciođlu, Alev Ozon, Firdevs Bař, Murat Aydın, Feyza Darendeliler, (Istanbul, Ankara, Adana, Konya, Kayseri, Samsun, Eskiřehir, Kocaeli, Turkey)
- 24** Androgen Insensitivity Syndrome: Clinical Phenotype and Molecular Analysis in a Single Tertiary Center Cohort
Maria Sol Touzon, Natalia Perez Garrido, Roxana Marino, Pablo Ramirez, Mariana Costanzo, Gabriela Guercio, Esperanza Berensztein, Marco A. Rivarola, Alicia Belgorosky, (Buenos Aires, Argentina)
- 34** Genetic and Clinical Characteristics of Patients with Vitamin D Dependent Rickets Type 1A
Fatma Dursun, Gamze Özgürhan, Heves Kırmızıbekmez, Ece Keskin, Bülent Hacıhamdiođlu, (Istanbul, Turkey)
- 41** Birth Size in Neonates with Congenital Adrenal Hyperplasia due to 21-hydroxylase Deficiency
Helmuth G. Dörr, Theresa Penger, Andrea Albrecht, Michaela Marx, Thomas M. K. Völkl, (Erlangen, Germany)
- 46** Evaluation of Renal Function in Obese Children and Adolescents Using Serum Cystatin C Levels, Estimated Glomerular Filtration Rate Formulae and Proteinuria: Which is most Useful?
Dilřah Önerli Salman, Zeynep Sıklar, Eda Nisa Çullas İlarıslan, Z. Birsin Özçakar, Pınar Kocaay, Merih Berberođlu, (Ankara, Turkey)
- 55** SLC30A8 Gene rs13266634 C/T Polymorphism in Children with Type 1 Diabetes in Tamil Nadu, India
Ramasamy Thirunavukkarasu, Arthur Joseph Asirvatham, Ayyappan Chitra, Mariakuttikan Jayalakshmi, (Madurai, India)
- 61** Epicardial Fat Thickness in Children with Classic Congenital Adrenal Hyperplasia
Kotb Abbass Metwalley, Hekma Saad Farghaly, Abdelrahman Abdelhamid, (Assiut, Qena, Egypt)
- 70** Effect of Telehealth System on Glycemic Control in Children and Adolescents with Type 1 Diabetes
Esra Döđer, Rukiye Bozbulut, A. Şebnem Soysal Acar, Şebnem Ercan, Aylin Kılınç Uđurlu, Emine Demet Akbař, Aysun Bideci, Orhun Çamurdan, Peyami Cinaz, (Ankara, Turkey)
- 76** Remarkable Increase in the Prevalence of Overweight and Obesity Among School Age Children in Antalya, Turkey, Between 2003 and 2015
Gamze Çelmeli, Yusuf Çürek, Zümürüt Arslan Gülten, Mehmet Yardımsever, Mustafa Koyun, Sema Akçurin, İffet Bircan, (Antalya, Turkey)

Case Reports

- 82** Congenital Hyperinsulinism and Evolution to Sulfonylurea-responsive Diabetes Later in Life due to a Novel Homozygous p.L171F *ABCC8* Mutation
Emregül Işık, Hüseyin Demirbilek, Jayne A. Houghton, Sian Ellard, Sarah E. Flanagan, Khalid Hussain, (Gaziantep, Ankara, Turkey, Exeter, United Kingdom, Doha, Qatar)
- 88** Inherited Deletion of 1q, Hyperparathyroidism and Signs of Y-chromosomal Influence in a Patient with Turner Syndrome
Alejandro F. Siller, Alex Shimony, Marwan Shinawi, Ina Amarillo, Louis P. Dehner, Katherine Semenkovich, Ana María Arbeláez, (Washington, USA)
- 94** Hyperphosphatemic Familial Tumoral Calcinosis in Two Siblings with a Novel Mutation in *GALNT3* Gene: Experience from Southern Turkey
Rabia Miray Kızıla Ekinci, Fatih Gürbüz, Sibel Balcı, Atıl Bişgin, Mehmet Taştan, Bilgin Yüksel, Mustafa Yılmaz, (Adana, Turkey)
- 100** Severe Neonatal Cholestasis as an Early Presentation of McCune-Albright Syndrome
Nicole Coles, Ian Comeau, Tatiana Munoz, Jennifer Harrington, Roberto Mendoza-Londono, Andreas Schulze, Sari Kives, Binita M. Kamath, Jill Hamilton, (Toronto, Montreal, Canada)

Brief Report

- 104** Extreme Premature Small for Gestational Age Infants Have Appropriate Catch-up Growth at Term Equivalence Compared with Extreme Premature Appropriate for Gestational Age Infants
Sze May Ng, Donatella Pintus, Mark A. Turner, (Liverpool, Southport, UK)

109 Erratum