

PREFACE

Actions Taken by the Turkish Surgical Society on COVID-19

*Dear Readers and Authors of the Turkish Journal of Surgery,
Dear Members of the Turkish Surgical Society,*

As you all know, the world is facing COVID-19 pandemic since December 2019, and the number of people infected, in the ICU or deceased are increasing. Currently, every country is affected, and WHO has issued a public health emergency of international concern. There is evidence suggesting that transmission mode is human to human. Major route of transmission of COVID-19 is droplet and close contact. The spectrum of clinical presentations of COVID-19 has been reported to be ranging from asymptomatic infection to severe respiratory failure. Common clinical laboratory findings include leucopenia and lymphopenia. Lymphopenia is a cardinal feature of COVID-19. Lactate dehydrogenase and creatinine kinase are all elevated. Half of the patients had abnormal liver function, with elevated alanine aminotransferase or aspartate aminotransferase. Although radiologic manifestations of COVID-19 infected patients are diverse, the most common manifestations are patchy ground-glass opacities and patchy consolidation, which were mainly distributed in the middle and outer zone of the lung.

Although a good contact history, systemic symptoms, and radiographic changes of pneumonia make the diagnosis likely, laboratory diagnosis is more reliable. Real time-polymerase chain reaction (RT-PCR) is routinely used to detect causative viruses from respiratory secretions. The results suggest that the sensitivity of chest CT in suspected patients is 97% based on positive RT-PCR result and 75% based on negative RT-PCR results. These findings indicate that chest CT is a sensitive modality to detect COVID-19 infection. Healthy people should be aware of the severity of COVID-19 and take measures to protect themselves, such as staying at home, limiting social contacts, and wearing protective masks in public.

As the time goes on, health-service professionals, doctors, nurses and hospital staff will be under risk of contamination as they will face more and more infected patients. Although all scheduled elective operations have been cancelled or postponed, surgeons and nurses are still under high risk as they will operate on COVID-19 positive patients or patients with high suspicion of infection because of emergency conditions.

Turkish Surgical Society has taken action and prepared an article for the surgical community, which is being published in the present issue of the journal both in Turkish and in English (1,2). Precautions and suggestions by the Society will also be updated regularly and released on the web page of the Society. The announcements will be mailed to all members and health authorities.

In the present issue of the Turkish Journal of Surgery, you can also find fifteen original articles, two case-reports and two letters to the editor. Although all are very important studies, I would like to call attention to two important articles on manpower in surgical practice written by Yasti et al. (3) and an evaluation of the surgical theses during the last 20 years in Turkey by Ferhatoglu et al. (4). These two articles provide noteworthy information not only on the level and the quality of surgical service in Turkey but also give assumptions on the level of surgical education.

I am in strong belief and hope that we will win this battle with as little loss as possible for which I expect from you to follow the suggestions and rules released by the government authorities and our society.

Meanwhile, please do take care of yourself and enjoy the articles,

Yours Sincerely,

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