TURKISH JOURNAL OF SURGERY
OFFICIAL JOURNAL OF TURKISH SURGICAL ASSOCIATION

FROM THE EDITOR-IN-CHIEF'S DESK

Behind the Scenes: Summer Dedication and Editorial Continuity

As the golden hues of summer fade and the autumn air takes hold, our surgical departments experience the familiar, sharp surge in clinical and operative volume. The end of the summer season typically brings a transition from vacation coverage back to full capacity, accompanied by a marked increase in our surgical workload. Operating theaters are once again running at peak capacity to address elective cases deferred over the summer months, while emergency departments see a steady rise in complex, acute surgical presentations. While this seasonal influx tests our physical endurance, human resources, and institutional logistics, it also invigorates our shared calling.

It serves as a timely reminder of our steadfast commitment to clinical rigor, surgical excellence, and the ongoing advancement of scientific knowledge. Behind the scenes of this comprehensive September 2026 issue lies months of relentless dedication and hard work. Even during the peak of the summer season, our Editorial Board and reviewers worked tirelessly without interruption. Throughout these warm summer months, we maintained our rigorous peer-review processes, carefully evaluated a high volume of manuscript submissions, and meticulously curated the diverse scientific content presented here. We are profoundly grateful to every member of our editorial team and our expert reviewers, whose silent, continuous efforts over the summer made the timely publication of this issue possible.

In this September 2026 issue of the Turkish Journal of Surgery, we are proud to publish an exceptionally rich and diverse selection of clinical, educational, and experimental studies addressing critical challenges across the spectrum of modern surgery: Atlı and Koc conduct a retrospective analysis of 244 patients to evaluate how graft bile duct anatomy and anastomosis techniques (duct-to-duct vs. Roux-en-Y) affect postoperative morbidity and early mortality in living- and deceased-donor liver transplantation. Picchio et al. present a retrospective case-control study of 196 patients, showing that postoperative betamethasone infusion significantly reduces the incidence of biochemical and symptomatic hypocalcemia and early postoperative pain. Oruc et al. examine pre-procedural risk factors among 364 critically ill patients undergoing percutaneous endoscopic gastrostomy and identify active systemic infection, severe hypoalbuminemia, and elevated urea levels as strong independent predictors of in-hospital mortality. Erdogrul et al. evaluate 120 patients with adhesive small bowel obstruction, demonstrating that oral administration of low-osmolar iohexol is safe and significantly accelerates the time to restoration of bowel passage compared with standard conservative management. Ozcinar et al. analyze national survey data from 156 surgical educators across Türkiye, revealing significant gaps between written core curricula and practical implementation and calling for standardized competency-based training models. Sekerci et al. report the results of a nationwide survey of 147 general surgeons, noting that although over 94% of surgeons support incorporating interventional POCUS into the residency core curriculum, structural barriers and a lack of dedicated devices still limit its use in daily practice. In a 1:1 age- and sex-matched study of 696 patients, Gulcek et al. demonstrate that individual complete blood count indices (PLT, PCT, PDW, MPV, RDW) do not discriminate between papillary thyroid carcinoma and benign nodules, suggesting that prior positive literature may reflect demographic confounding. Tali et al. investigate 505 patients undergoing resection for stage II–III colorectal cancer and report that lower preoperative Hemoglobin, Albumin, Lymphocyte, and Platelet (HALP) scores are independently associated with a higher risk of postoperative anastomotic leakage. Yavuz et al. evaluate 83 adult patients with electrical burn injuries and conclude that markers of deep muscle necrosis and systemic inflammation (LDH, ALT, NLR, and HALP score) are far more predictive of limb loss than surface burn area or voltage levels. In a prospective study of 536 trauma patients in India, Yadukrishna et al. validate the rSIG score as a highly effective triage tool for predicting early blood transfusion requirements and in-hospital mortality. Bulut et al. translate and cross-culturally adapt the CCS for 85 patients with a median follow-up of 79 months, establishing the Turkish CCS as a robust, disease-specific instrument for evaluating chronic pain, mesh sensation, and movement limitation after inguinal hernia repair. This issue also features innovative video articles on esophageal reconstruction challenges after sleeve gastrectomy and on Thiersch's procedure for rectal prolapse, a narrative review on artificial intelligence in head and neck surgery, and engaging letters to the editor.

TURKISH JOURNAL OF SURGERY
OFFICIAL JOURNAL OF TURKISH SURGICAL ASSOCIATION

As we navigate the heightened clinical demands of the autumn season, we express our profound appreciation to our authors for choosing the Turkish Journal of Surgery as their academic home, and to our peer reviewers and editorial team, whose rigorous evaluations uphold our publication's high standards. We trust that the scientific evidence presented in this issue will inform your clinical decisions and ultimately enhance patient care.

As always, thanks to our readers…

Prof. M. Umit UGURLU
TurkJSurg Editor-in-Chief