Original Investigations

Sodium levels and hospitalized Turkish patients: Multi-center, retrospective and observational
Burçak Kılıçkıran Avcı, et al; İstanbul-Turkey

MMPS are targets in mct-induced pulmonary hypertension: effects of alagebrium and everolimus
Özlem Atlı, et al; Eskişehir-Turkey

Effects of aging on the expression of aquaporin 1 and aquaporin 4 protein in heart tissue
Hikmet Bıçakçı, et al; İzmir-Turkey

Thymopentin improves chronic heart failure
Cao Xiaojing, et al; Beijing-China

Endothelial nitric oxide gene polymorphisms and their association with coronary disease in Tunus
Letaief Afef, et al; Sousse-Tunisia

Subendocardial viability ratio and, ventricular systolic improvement with cardiac rehabilitation
Emre Aslanger, et al; İstanbul-Turkey

Editorial comment: Arterial tonometry, subendocardial viability and disease: the jury
Sergio Bravo Baptista; Amadora-Portugal

Modified limb lead ECG system, ECG wave amplitudes and frontal plane axis in sinus rhythm
Sivaraman Jayaraman, et al; Chennai-India

Editorial comment: Modified limb lead system: amplitudes and axis in surface ECG
Vimal Prabhu Pandiyani; Telangana-India

Epicardial adipose tissue, carotid intima-media thickness and atherosclerotic plaque; but LDL?
Sinan Altan Kocaman, et al; Ankara-Turkey

Editorial comment: Epicardial fat: a novel marker of subclinical atherosclerosis?
Niki Katsiki, et al; London-UK

Framingham risk score and metabolic syndrome in psoriasis: A cross-sectional study in Turkish
Ayşe Esra Koku Aksu, et al; İstanbul-Turkey
AIMS AND SCOPE

The Anatolian Journal of Cardiology is an international monthly periodical on cardiology published on independent, unbiased, double-blinded and peer-review principles. The journal’s publication language is English however titles of articles, abstracts and Keywords are also published in Turkish on the journal’s web site.

The Anatolian Journal of Cardiology aims to publish qualified and original clinical, experimental and basic research on cardiology at the international level. The journal’s scope also covers editorial comments, reviews of innovations in medical education and practice, case reports, original images, scientific letters, educational articles, letters to the editor, articles on publication ethics, diagnostic puzzles, and issues in social cardiology.

The target readership includes academic members, specialists, residents, and general practitioners working in the fields of adult cardiology, pediatric cardiology, cardiovascular surgery and internal medicine.

The editorial and publication processes of the journal are conducted in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), the Council of Science Editors (CSE), the European Association of Science Editors (EASE), the Committee on Publication Ethics (COPE) and the HEART Group.

The Anatolian Journal of Cardiology is indexed in Science Citation Index Expanded, PubMed/MEDLINE, EMBASE, Scopus, EMCare, CINAHL, Gale/Cengage Learning, EBSCO, DOAJ, ProQuest, Index Copernicus and TÜBİTAK ULAKBİM TR Index.

The requirements for submission of manuscripts and detailed information about the evaluation process are available in the published journal and also as ‘Instructions for Authors’ on the web site (http://www.anatoljcardiol.com).

Statements and opinions expressed in the Anatolian Journal of Cardiology reflect the views of the author(s). All liability for the advertisements rests with the appropriate organization(s). The Turkish Society of Cardiology, the editor-in-chief and KARE PUBLISHING do not accept any responsibility for these articles and advertisements.

Subscriptions
The Anatolian Journal of Cardiology is printed on acid-free paper. Applications for subscriptions should be made to the Editorial Office. The abstracts and full texts of published articles can be accessed free of charge at http://www.anatoljcardiol.com.

Financial support and advertising
The revenue of the Anatolian Journal of Cardiology is derived from subscription charges and advertisements. Institutions wishing to place an advertisement in the printed version of the journal or on the web page should contact KARE PUBLISHING.

Owner : Turkish Society of Cardiology
Address : Çobançeşme Sanayi Cad., No: 11, Nish İstanbul, A Blok, No: 47-48, 34196, Yenibosna, Bahçeşievler, İstanbul, TURKEY
Phone : +90 212 221 17 30 / +90 0212 221 17 38
Fax : +90 212 221 17 54
E-mail : tkd@tkd.org.tr

Editor-in-Chief : Prof. Bilgin Timuralp
Address : ESOGÜ Tıp Fakültesi, Merkezi Derslikler, Kat: 3, No: 1, 26480, Meşelik, Eskişehir, TURKEY
Phone : +90 222 229 15 65 / +90 538 480 43 30
Fax : +90 222 229 15 65
E-mail : info@anatoljcardiol.com

Publisher : KARE PUBLISHING
Address : Altayçeşme Mah., Samanyolu Sok., Mecit Varlı Apt., No: 19/6, 34843 Maltepe, İstanbul, TURKEY
Phone : +90 216 550 61 11
Fax : +90 216 550 61 12
E-mail : kareyayincilik@gmail.com
The Anatolian Journal of Cardiology is published in accordance with the principles of independent, unbiased, and double-blinded peer review. It publishes original research related to clinical, experimental and basic sciences on cardiology, editorial comments, reviews covering current issues, educational articles, scientific letters, case reports, letters to the editor, original images, articles on history of medicine and publication ethics, diagnostic puzzles, and interviews deemed appropriate for the purposes and scope of the journal.

The journal evaluates only the manuscripts submitted through its online submission system on the website http://www.anatolijcardiol.com. Manuscripts sent by other means will not be accepted.

The primary conditions for the acceptance of manuscripts for publication are originality, scientific value and citation potential.

STATEMENTS AND GUIDELINES

Statements

• All statements and opinions expressed in the manuscripts published in the Anatolian Journal of Cardiology reflect the views of the author(s). All liability for the advertisements rests with the appropriate organization(s). The Turkish Society of Cardiology, the Editor-in-Chief and KARE do not accept any responsibility for articles and advertisements.

• The manuscripts submitted to the journal, except abstracts, presentations, reviews and parts of theses, should not have been accepted and published previously elsewhere in electronic or printed format. Manuscripts evaluated and rejected by other journals must mention any previous submissions and supply reviewer’s reports. This will help to accelerate the evaluation process. If the submitted manuscript has been previously presented at a meeting, the name, date, city and country must be specified.

• The authors transfer all copyrights of the manuscript in the framework of national and international regulations to the Turkish Society of Cardiology as of evaluation process. A Copyright Transfer Form signed by corresponding author in order must be submitted to the journal with manuscript. After acceptance of manuscript, all of authors must fill and sign Copyright Transfer form. A separate form for each manuscript should be submitted. Manuscripts submitted without a Copyright Transfer Form will not be accepted. In the case of rejection, all copyrights transfer to the authors again. Authors must confirm that they will not submit the work to another journal, publish it in the original or another language and or allow a third party to use the manuscript without the written permission of the Turkish Society of Cardiology.

• All contents are the authors’ responsibility. All financial liability and legal responsibility associated with the copyright of submitted tables, figures and other visual materials protected by national and international laws rest with the authors. The authors take responsibility for any legal proceedings issued against the journal.

• Rejected manuscripts will not be returned except for artwork.

• To clarify scientific contributions and responsibilities and any conflict of interest issues relevant to the manuscript, all parts of the ‘Authors’ Contribution’ form must be completed by the corresponding author and the ‘ICMJE Uniform Disclosure Form for Potential Conflicts of Interest’ must be completed online by all authors. Both forms should be included in the manuscript at the time of original submission.

Guidelines

• The format of the manuscripts must be in accordance with the ICMJE Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals (updated in December 2014: http://www.icmje.org/icmje-recommendations.pdf).

• The presentation of the manuscripts must be in accordance with international guidelines. COVID-19 guidelines should be used for randomized trials, STROBE for observational studies, STARD for diagnostic studies, PRISMA for systematic reviews and meta-analyses, ARRIVE for animal studies, and TREND for non-randomized behavior and public health studies.

Ethics

• All manuscripts will be vetted by the Editor-in-Chief’s Office for possible plagiarism and duplication. Sanctions will be imposed in accordance with the guidelines of the Committee on Publication Ethics (COPE) and the principles of the HEART Group.

• All contents are the authors’ responsibility. All financial liability and legal responsibility associated with the copyright of submitted tables, figures and other visual materials protected by national and international laws rest with the authors. The authors take responsibility for any legal proceedings issued against the journal.

• Rejected manuscripts will not be returned except for artwork.

• To clarify scientific contributions and responsibilities and any conflict of interest issues relevant to the manuscript, all parts of the ‘Authors’ Contribution’ form must be completed by the corresponding author and the ‘ICMJE Uniform Disclosure Form for Potential Conflicts of Interest’ must be completed online by all authors. Both forms should be included in the manuscript at the time of original submission.

• All manuscripts will be vetted by the Editor-in-Chief’s Office for possible plagiarism and duplication. Sanctions will be imposed in accordance with the guidelines of the Committee on Publication Ethics (COPE) and the principles of the HEART Group.

• All contents are the authors’ responsibility. All financial liability and legal responsibility associated with the copyright of submitted tables, figures and other visual materials protected by national and international laws rest with the authors. The authors take responsibility for any legal proceedings issued against the journal.

• Rejected manuscripts will not be returned except for artwork.

• To clarify scientific contributions and responsibilities and any conflict of interest issues relevant to the manuscript, all parts of the ‘Authors’ Contribution’ form must be completed by the corresponding author and the ‘ICMJE Uniform Disclosure Form for Potential Conflicts of Interest’ must be completed online by all authors. Both forms should be included in the manuscript at the time of original submission.

A. Manuscript types

• Original Research

• Structured Abstract: It should be structured with Objective, Methods, Results and Conclusion subheadings and should be limited to 250 words.

• Keywords: This section should contain a minimum of three and a maximum of six items in accordance with Medical Subject Headings (MeSH) terms prepared by the National Library of Medicine (NLM) and should be placed just below the abstract.

• Main Text: It should consist of Introduction, Methods, Results, Discussion, Limitations of the Study and Conclusion sections and should not exceed 5000 words excluding the references.

• References: The reference list should be provided following the Main Text. Limiting the number of references to 50 is usually sufficient.

• Tables, Figures and Images: They should be placed below the reference list and numbered according to their consecutive order in the main text.

• Title, Structured Abstract and Keywords should also be provided in Turkish for manuscripts submitted by Turkish authors or from Turkey. However, translations of these sections for manuscripts submitted by foreign authors outside Turkey will be the responsibility of the publisher.

Statistical Analysis: Statistical analysis should be conducted in accordance with the guidelines on reporting statistical data in medical journals (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. Br Med J 1983; 7: 1489-93 and Lang T, Altman D. Basic statistical reporting for articles published in clinical medical journals: the SAMPL Guidelines. In: Smart P, Masonneuve H, Polderman A (editors). Scive Editors’ Handbook, European Association of Science Editors, 2013.). The software used for statistical analysis must be described. Data must be expressed as mean ± standard deviation when parametric tests are used to compare continuous variables. For nonparametric tests, data must be expressed as median (minimum-maximum) or percentiles (25th and 75th percentiles). In advanced and complex statistical analyses, relative risk (RR), odds ratio (OR) and hazard ratio (HR) must be supported by confidence intervals and p values. The outcomes of statistical analyses and interpretation of the results must be in evidence-based scientific language (Editors of Heart Group journals. Statement on matching language to the type of evidence used in describing outcomes data. Anatolian Journal of Cardiology 2012;12:709).
• Editorial Comment

Authors are selected and invited by the Editor-in-Chief. This type of manuscript aims at providing a brief commentary on an article published in the journal by a researcher who is an authority in the relevant field or by the reviewer of the article.

- Title
- Main Text: It should not include subheadings and should be limited to 500 words.
- References: The reference list should follow the main text and the number of references should be limited by 15.
- Abstract, Keywords, Tables, Figures, Images and other visuals are not included in editorial comments.

• The title should also be provided in Turkish for works submitted by Turkish authors or from Turkey. The title of the manuscripts submitted by foreign authors outside Turkey will be translated into Turkish by the Editor-in-Chief’s Office.

• Review

Reviews prepared by authors with extensive knowledge on a particular field, which has been reflected in international literature by a high number of publications and citations, are evaluated. The authors may be invited by the Editor-in-Chief. A review should be prepared in the format describing, discussing and evaluating the current level of knowledge or topic that is to be used in the clinical practice and it should guide further studies.

- Title
- Abstract: It should not include subheadings and should be limited to 250 words.
- Keywords: This section should contain a minimum of three and a maximum of six items in accordance with Medical Subject Headings (MeSH) terms prepared by the National Library of Medicine (NLM) and should be provided just below the abstract.
- Main Text: It should include Introduction, other subheadings and Conclusion sections and should be limited to 5000 words excluding the references.
- References: The reference list should be placed just below the main text and the number of references should not exceed 50.
- Tables, Figures and Images: They should be provided after the reference list according to their order of appearance in the text.
- For reviews submitted by Turkish authors or from Turkey, Title, Abstract and Keywords should also be provided in Turkish.

• Original Image

Impressive and rare images that reflect significant findings based on clinical science, shed light on fundamental mechanisms of diseases, emphasize abnormalities or introduce new treatment methods are accepted for publication.

- Title
- Main Text: It should not include subheadings and should be limited to 250 words.
- Tables, Figures and Images: They should be provided after the main text according to their order of appearance in the text and should be limited to two.
- Abstract, Keywords and References are not included.

• For original images submitted by Turkish authors or from Turkey, the Title should also be written in Turkish. For images submitted by foreign authors outside Turkey, the translation of this section into Turkish will be carried out by the publisher.

NOTE 1: Those manuscripts with video images have a better chance of publication.

NOTE 2: Manuscripts prepared in accordance with original image criteria are published only on the Anatolian Journal of Cardiology.

• Scientific Letter

Manuscripts which announce a new scientific invention, are clinically significant, and are in the form of a preliminary report are accepted for publication as scientific letters.

- Title
- Main Text: It should include Introduction, other subheadings and Conclusion sections and should not exceed 900 words excluding the references.
- References: The reference list should be provided just below the main text and the number of references should be limited to 10.
- Tables, Figures and Images: They should be provided after the reference list according to their order of appearance in the main text.

• Case Report

Since a limited number of case reports is published, only reports which are related to rare cases and conditions that constitute challenges in diagnosis and treatment, offer new methods or suggest knowledge not included in books, and are interesting and educational are accepted for publication.

- Title
- Main Text: It should include Introduction, Case Report, Discussion and Conclusion sections and should not exceed 700 words excluding the references.
- References: The reference list should follow the main text and the number of references should be limited to 10.

• Scientific Puzzle

Images obtained directly or on operation, visuals revealed through XEG and/or imaging methods, and macroscopic-microscopic anatomical, pathological findings of attention grabbing and rare cases can be published. Unlike original images, the diagnosis and outcome of the case and image are hidden at the beginning in diagnostic puzzles. Four multiple-choice questions are prepared. In the following pages of the journal, the correct answer in terms of precise diagnosis and outcome is given with an explanation and didactic images and then discussed. The Editor-in-Chief will convert suitable images into the format of a diagnostic puzzle with the authors’ permission.

- Title
- Main Text: It should not exceed 900 words.
- References: The reference list should follow the main text and the number of references should be limited to 10.
- Tables, Figures and Images: They should be placed after the reference list according to their order of appearance in the text and limited to two.
- Abstract and Keywords are not included.

• For articles submitted by Turkish authors or from Turkey, the Title should also be written in Turkish.

- Scientific Article

These articles include current information on research and publication ethics and also cases of ethical violation.

- Title
- Main Text: It should not exceed 900 words.
- References: The reference list should follow the main text and the number of references should be limited to 10.
- Tables, Figures and Images: They should be placed after the reference list according to their order of appearance in the text.
- Abstract and Keywords are not included.

• FOR manuscripts submitted by Turkish authors or from Turkey, the Title should also be written in Turkish.

The Anatolian Journal of Cardiology must be contacted for subscription procedures.

A-V
For diagnostic puzzles submitted by Turkish authors or from Turkey, the Title should also be provided in Turkish. For diagnostic puzzles submitted by foreign authors outside Turkey, the translation of this section into Turkish will be carried out by the publisher.

MISCELLANEOUS
This type of manuscript covers important events and obituaries.

Title
Main Text: It should not exceed 1000 words.
References: The reference list should follow the main text and the number of references should be limited to 10.
Tables, Figures and Images: They should be placed after the reference list according to their order of appearance in the text and should be limited to five. Abstract and Keywords should not be included.
For manuscripts submitted by Turkish authors or from Turkey, the Title should also be provided in Turkish. For manuscripts submitted by foreign authors outside Turkey, the translation of this section into Turkish will be carried out by the publisher.

B. References
References should be numbered in the order in which they are cited within the main text.
Only manuscripts published or accepted for publication should be cited.
Recent publications related to the topic of the manuscript should be reviewed.
References that are inaccessible and not indexed in any database should not be cited. The titles of journals should be abbreviated in accordance with the NLM style guide for authors, editors, and publishers (Internet). 2nd ed. Wendlong DL, technical editor. Bethesda (MD): National Library of Medicine (US); 2007 [updated 2011 Sep 15; cited Year Month Day].
For references with six and fewer authors, all authors should be listed. For references with more than six authors, the first six authors should be listed, followed by 'et al'. The style and punctuation of the references should be formatted as in the following examples.


C. Special Terms and Conditions
For double-blinded peer-review process, the names of the corresponding author and other authors, their affiliations and any information on the study centres should not be included in any part of the submitted manuscripts and images, except the Title Page. This information should be added to the relevant section of the online submission system and included in the Title Page.
Pharmaceutical products should be written with their generic names and brand and company names, city and country should be specified for medical equipment and devices.

3. Tables, Graphs and Figures
Tables, Graphs, Figures and other visuals should be numbered in the order of their citation within the text and names of patients, doctors and institutions should not be disclosed.
Tables should be prepared in a Microsoft Office Word document using the command ‘Insert Table’ and inserted at the end of the references in the main text.
Tables should not be submitted in JPEG, TIFF or other visual formats. For microscopic images, the magnification ratio and staining technique used should be specified in addition to figure legends.

All visuals should have a high resolution (minimum 300 dpi).
The thickness of the lines in graphs should be sufficient to minimize loss of quality if size reduction is needed during the printing process. The width of the graphs should be 9 cm or 18 cm. Drawings should be performed by professionals. No grey colours should be used.
Abbreviations should be explained in alphabetical order at the bottom of the tables, graphs and figures.
Roman numbers should be avoided in tables and figures within the text and their titles.
Decimal numbers used in text, tables and figures should be separated by commas in Turkish sections and by dots in English sections.
Tables should be easily understandable and should not repeat the data in the main text.
In addition to the pictures included in case reports and original images, video and movie images are published on the journal's website. These images should be prepared in MPEG format with a maximum size of 2 MB. They should be submitted to the journal with the manuscript documents. The names of patients, doctors, institutions and places should be omitted from all documents.

NOTE: All visuals in the manuscripts are printed in black and white without charge. However, 300 TL per article must be paid if colour is required. The Editor-in-Chief's Office of the Anatolian Journal of Cardiology should be contacted for payment.

EVALUATION AND PUBLICATION
The main text submitted to the journal should be in English. Manuscripts written in other languages are not accepted. Citation potential is higher for manuscripts in English.
The Editor-in-Chief's Office checks the conformity of the manuscript with the journal's general guidelines before sending it to associate editors and reviewers. Any manuscripts not prepared in accordance with the journal's guidelines will be returned for revision. The evaluation period is limited to 21 days. If revision is requested, authors should submit their revised manuscripts within 24 days. Manuscripts and revisions should be submitted through the online manuscript submission system at the website http://www.anatoljcardiol.com. Manuscripts sent by e-mail will not be accepted.
Manuscripts are evaluated in accordance with the principles of double-blinded peer review. Of the submitted manuscripts, those considered to be suitable are subjected to preliminary evaluation by the Editor-in-Chief’s assistants in terms of style, format, etc. and by the Editor-in-Chief in terms of their content. Manuscripts considered to be scientifically adequate are assigned to four reviewers. These reviewers are independent experts and members of the editorial board who have published internationally on the topic of the manuscript. Research articles, systematic reviews and meta-analyses are also evaluated by the Editor-in-Chief’s statistician counsellors in addition to peer review. When needed, the manuscripts are scanned by the Editor-in-Chief’s Office using the iThenticate program for determination of plagiarism and non-ethical situations. Also, all manuscripts are reviewed and edited for compliance with the rules of English grammar. All contributing authors of a manuscript accepted for publication are deemed to have accepted the right of editors to make corrections provided that no fundamental change is made to the basic meaning of the original text. Manuscripts not accorded priority for publication by the Editor-in-Chief, Editor, Associate Editors and Referees are rejected.
The retraction requests of the manuscripts close to the final decision in evaluation process, without any reasonable explanation (not contrary to the Publication Ethics) is considered in the scope of rejection decision. Manuscripts that are not revised and resubmitted within the specified time and fail to notify the journal accordingly will be rejected.
Once a manuscript is accepted for publication, addition to the author list, removal from the author list and order change cannot be effected.
Manuscripts accepted for publication are prepared as 'Epub ahead of print articles' and published with an assigned DOI on the journal website http://www.anatoljcardiol.com.
Information on the latest status of manuscripts submitted for evaluation and other information about the journal are available on the website http://www.anatoljcardiol.com. Contact details for the Editor-in-Chief's Office and the publisher are given below.

Owner: Turkish Society of Cardiology
Address: Cibaneşne Sanayi Cad., No. 11, Nish İstanbul, A Blok, No: 47-48, 34196, Yeşignoba, Bahçelievler, Istanbul, TURKEY
Phone: +90 212 221 17 36 / +90 212 221 17 38
Fax: +90 212 221 17 54
E-mail: tdk@tkdi.org.tr

Editor-in-Chief: Prof. Bilgin Timurul
Address: ESDÜ Tıp Fakültesi, Merkezi Dersi, Kat: 3, No: 1, 26480, Meşelik, Eskişehir, TURKEY
Phone: +90 222 229 15 65 / +90 538 480 43 30
Fax: +90 222 229 15 85
E-mail: info@anatoljcardiol.com

Publisher: KARE PUBLISHING
Address: Alataşçeşme Mah., Samanyolu Sok., Mecit Varlı Apt., No: 19/6, 34843 Maltepe, İstanbul, TURKEY
Phone: +90 216 550 61 11
Fax: +90 216 550 61 12
E-mail: kareyamculik@gmail.com
EDITORIAL

As another new year of this century approaches
Bilgin Timuralp; Eskişehir-Turkey

ORIGINAL INVESTIGATIONS

Relation between serum sodium levels and clinical outcomes in Turkish patients hospitalized for heart failure: a multi-center retrospective observational study
Burçak Kılıçkıran Avcı, Murathan Küçük, Haldun Müderrisoğlu, Mehmet Eren, Merih Kutlu, Mehmet Birhan Yılmaz, Yüksek Çavuşoğlu, Zeki Öngen; İstanbul, Antalya, Ankara, Trabzon, Sivas, Eskişehir-Turkey

Matrix metalloproteinases are possible targets in monocrotaline-induced pulmonary hypertension: investigation of anti-remodeling effects of alagebrium and everolimus
Özlem Atlı, Sinem Ilgın, Bülent Ergun, Dilek Burukoğlu, Ahmet Musmul, Başar Sırmagül; Eskişehir-Turkey

Investigation of the effects of aging on the expression of aquaporin 1 and aquaporin 4 protein in heart tissue
Hikmet Braçakçı, Mustafa Sarsılımaz, Seda Ocaklı, Murat Uysal, Hilal İrmak Sapmaz, Tolgahan Acar, İsmet Demirtaş, Rauf Açıkgoz; İzmir, Tokat-Turkey

Thymopentin improves cardiac function in older patients with chronic heart failure
Cao Xiaojing, Li Yanfang, Guo Yanqing, Cao Fangfang; Beijing-China

Endothelial nitric oxide gene polymorphisms and their association with coronary artery disease in Tunisian population
Letaief Afef, Benothonme Leila, Charfeddine Bassem, Ernez Hajri Samia, Guider Jridi, Limem Khalifa; Sousse-Tunisia

Baseline subendocardial viability ratio influences left ventricular systolic improvement with cardiac rehabilitation
Emre Aslanger, Benjamin Assous, Nicolas Bihry, Florence Beauvais, Damien Logeart, Alain Cohen-Solal; İstanbul-Turkey, Paris-France

Editorial Comment: Arterial tonometry-derived subendocardial viability ratio in coronary artery disease patients: the jury is still out
Sergio Bravo Baptista; Amadora-Portugal

Modified limb lead ECG system effects on electrocardiographic wave amplitudes and frontal plane axis in sinus rhythm subjects
Sivaraman Jayaraman, Venkatesan Sangareddi, R. Periyasamy, Justin Joseph, Ravi Marimuthu Shanmugam; Chennai, Raipur-India

Editorial Comment: Modified limb lead system: Its effects on wave amplitudes and axis in surface ECG
Vimal Prabhu Pandiyan; Telangana-India

An increase in epicardial adipose tissue is strongly associated with carotid-intima media thickness and atherosclerotic plaque, but LDL only with the plaque
Sinan Altan Kocaman, Oben Bayran, Mustafa Çetin, Tuğba Kayhan Altunen, Ezgi Polat Ocakli, Murtaza Emre Durakoğlugil, Turan Erdoğan, Mustafa Remzi Karaoguz; Ankara, Rize-Turkey

Editorial Comment: Epicardial fat: a novel marker of subclinical atherosclerosis in clinical practice?
Niki Katsiki, Dimitri P Mikhailidis; Thessaloniki-Greece, London-UK

Age and gender differences in Framingham risk score and metabolic syndrome in psoriasis patients: A cross-sectional study in the Turkish population
Ayşe Esra Koku Aksu, Zeynep Nurhan Saraçoğlu, Selma Metintaş, Ilham Sabuncu, Yıldız Çetin; Eskişehir, Kütahya-Turkey
CASE REPORT

Ticagrelor-associated thrombotic thrombocytopenic purpura
Ali Doğan, Behzat Özdemir, Hamit Bal, Emrah Özdemir, Nuri Kurtoğlu; İstanbul-Turkey

LETTERS TO THE EDITOR

Balloon postdilatation is a mandatory step in the deployment of bioresorbable vascular scaffold
Ahmet Karabulut; İstanbul-Turkey

Letter to the editor regarding the article “A case of hypertrophic and dilated cardiomyopathic sudden cardiac death: de novo mutation in TTN and SGCD genes”
Mahmut Çerkez Ergören, Sehime Gülşün Temel; Nicosia-Turkish Republic of Northern Cyprus, Bursa-Turkey

Role of ABO blood groups in prosthetic valve thrombosis
Fidel Manuel Caceres-Loriga; Lubango-Angola

Heart rate variability in Eisenmenger syndrome and its correlation with echocardiographic parameters and plasma BNP, high sensitivity troponin-I level
Burak Sezenöz, Gülten Aydoğdu Taçoğ, Serkan Ünlü, Belma Taşel, Sedat Türkoğlu, Yakub Alsancak, Gökhan Gökalp, Atiye Çengel; Ankara, Mersin-Turkey

CRT-D or CRT-P in CRT-indicated patients?
Adnan Kaya, Mustafa Adem Tatlısu, Ahmet İker Tekkesin, Ahmet Taha Alper; Şanlıurfa, İstanbul-Turkey, Texas-United States

E-PAGE ORIGINAL IMAGES

Incomplete Kawasaki disease presenting with abdominal pain diagnosed by echocardiography
Hao Yang, Hui Wang, Xiaoling Zhang, Li Rao; Chengdu-China