International Editorial Board

Ziya AKÇETİN  
Gronau and Erlangen-Nürnberg University, Germany

Peter ALKEN  
Department of Urology, Heidelberg Medical School, Ruprecht Karls University, Mannhein, Germany

Barış ALTAY  
Department of Urology, Ege University School of Medicine, Izmir, Turkey

Dean ASSIMOS  
Department of Urology, Alabama University School of Medicine, Alabama, USA

Ali ATAN  
Department of Urology, Gazi University School of Medicine, Ankara, Turkey

Gopal H. BADLANI  
Long Island Jewish Medical Center, New York, USA

Derya BALBAY  
Department of Urology, Koç University Hospital, Istanbul, Turkey

Michael L. BLUTE  
Department of Urology, Mayo Clinic, Minnesota, USA

Guy BOGAERT  
Department of Urology, UZ Leuven University, Antwerp, Belgium

Collin P. DINNEY  
Department of Urology, University of Texas MD Anderson Cancer Center, Houston, Texas, USA

Michael E. DISANTO  
Department of Urology, Albert Einstein College of Medicine of Yeshiva University, Bronx, NY, USA

Roger Roman DMOCHOWSKI  
Department of Urology, Vanderbilt University Medical Center, Nashville, USA

Shin EGAWA  
Department of Urology, Jikei University School of Medicine, Tokyo, Japan

Bülent EROL  
Istanbul Medeniyet University Göztepe Training and Research Hospital, Istanbul, Turkey

Randy FAGIN  
Texas Institute for Robotic Surgery, Texas, USA

Rüştü Cankon GERMİYANOĞLU  
Department of Urology, Ondokuz Mayis University School of Medicine, Samsun, Turkey

Selçuk GÜVEN  
Department of Urology, Medipol Hospital School of Medicine, Istanbul, Turkey

H. Barton GROSSMAN  
Department of Urology, University of Texas M. D. Anderson Cancer Center, Houston, TX, USA

Sender HERSCHORN  
Department of Urology, University of Toronto, Toronto, Ontario, Canada

Didier JACQMIN  
Department of Urology, Hospital Civil, Strasbourg, France

Klaus Peter JUENEMANN  
Department of Urology and Paediatric Urology, Keil Campus of University Hospital Schleswig-Holstein, Kiel, Germany

Ateş KADIOĞLU  
Department of Urology, Istanbul University Istanbul School of Medicine, Istanbul, Turkey

Muammer KENDİRÇİ  
Department of Urology, İstinye University School of Medicine, Liv Hospital Ulus, Istanbul, Turkey
Martin KOYLE  
Division of Urology, Seattle Children’s Hospital, Seattle, WA, USA

Sanjay Balwant KULKARNI  
Kulkarni School of Urethral Surgery, Pune, India

Victor NITTI  
Department of Urology, School of Medicine, New York University, New York, USA

A. Rahmi ONUR  
Department of Urology, Marmara University School of Medicine, Istanbul, Turkey

Athanasios PAPATSORIS  
2nd Department of Urology, National and Kapodistrian University of Athens, School of Medicine, Sismanoglio Hospital, Athens, Greece

Anup PATEL  
Nationwide Children’s Hospital and The Ohio State University College of Medicine Columbus, OH, USA

Louis L. PISTERS  
Department of Urology, MD Anderson Cancer Center, Houston, Texas, USA

Hein Van POPPEL  
Department of Urology, University Hospitals Leuven, Leuven, Belgium

Glenn PREMINGER  
Division of Urologic Surgery, Duke University Medical Center, Durham, NC, USA

Kemal SARICA  
Department of Urology, Kafkas University, School of Medicine, Kars, Turkey

Paul F. SCHELLHAMMER  
Department of Urology, Eastern Virginia Medical School of Virginia, Norfolk, VA, USA

İlker SEÇKİNER  
Department of Urology, Gaziantep University School of Medicine, Gaziantep, Turkey

Ajay K. SINGLA  
Department of Urology, Toledo University School of Medicine, Ohio, USA

Hans-Göran TISELIUS  
Division of Urology, Department of Science, Intervention and Technology, Karolinska Institute, Stockholm, Sweden

Burak TURNA  
Department of Urology, Ege University School of Medicine, İzmir, Turkey

Barış TÜRBËY  
Molecular Imaging Program, National Cancer Institute, National Institutes of Health, Bethesda, MD, USA

Kadir TÜRKÖLMEZ  
Department of Urology, Ankara University School of Medicine, Ankara, Turkey

Mustafa USTA  
Department of Urology, Akdeniz University School of Medicine, Antalya, Turkey

Ali ÜNSAL  
Department of Urology, Gazi University School of Medicine, Ankara, Turkey

Wolfgang WEIDNER  
Department of Urology, Justus Liebig University, Giessen, Germany

M. Önder YAMAN  
Department of Urology, Ankara University School of Medicine, Ankara, Turkey

Selçuk YÜCEL  
Department of Urology, Marmara University School of Medicine, Istanbul, Turkey
AIMS AND SCOPE

Turkish Journal of Urology (Turk J Urol) is the scientific, peer reviewed, open access publication of the Turkish Association of Urology. The journal is a bimonthly publication, published on January, March, May, July, September and November and its publication language is English.

The aim of the Turkish Journal of Urology is to contribute to the literature by publishing scientifically high-quality research articles as well as reviews, editorials, letters to the editor and case reports.

The journal's target audience includes, urology specialists, medical specialty fellows and other specialists and practitioners who are interested in the field of urology.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), Council of Science Editors (CSE), Committee on Publication Ethics (COPE), European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

Turkish Journal of Urology is currently indexed/abstracted by-PubMed Central, Web of Science-Emerging Sources Citation Index, TUBITAK ULAKBIM TR Index, Scopus, HINARI, EBSCO, CINAHL, GALE and ProQuest.

Processing and publication are free of charge with the journal. No fees are requested from the authors at any point throughout the evaluation and publication process. All manuscripts must be submitted via the online submission system, which is available at www.turkishjournalofurology.com. The journal guidelines, technical information, and the required forms are available on the journal's web page.

All expenses of the journal are covered by the Turkish Association of Urology. Potential advertisers should contact the Editorial Office. Advertisement images are published only upon the Editor-in-Chief’s approval.

Statements or opinions expressed in the manuscripts published in the journal reflect the views of the author(s) and not the opinions of the Turkish Association of Urology, editors, editorial board, and/or publisher; the editors, editorial board, and publisher disclaim any responsibility or liability for such materials.

All published content is available online, free of charge at www.turkishjournalofurology.com. Printed copies of the journal are distributed to the members of the Turkish Association of Urology, free of charge.

Turkish Association of Urology holds the international copyright of all the content published in the journal.

The journal is printed on an acid-free paper

Editor in Chief: Murat Bozlu
Address: Mersin Üniversitesi Tip Fakültesi, Üroloji Anabilim Dalı, Mersin, Turkey
Phone: +90 324 241 00 00 (Extension: 1390)
Fax: +90 324 241 00 98
E-mail: muratbozlu@yahoo.com

Publisher: AVES
Address: Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey
Phone: +90 212 217 17 00
Fax: +90 212 217 22 92
E-mail: info@avesyayincilik.com
Web page: avesyayincilik.com
Turkish Journal of Urology (Turk J Urol) is the scientific, peer reviewed, open access publication of the Turkish Association of Urology. The journal is a bimonthly publication, published on January, March, May, July, September and November and its publication language is English.

The aim of the Turkish Journal of Urology is to contribute to the literature by publishing scientifically high-quality research articles as well as reviews, editorials, letters to the editor and case reports.

The journal’s target audience includes, urology specialists, medical specialty fellows and other specialists and practitioners who are interested in the field of urology.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Council of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), the Council of Science Editors (CSE), the Committee on Publication Ethics (COPE), the European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal conforms to the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

Originality, high scientific quality, and citation potential are the most important criteria for a manuscript to be accepted for publication. Manuscripts submitted for evaluation should not have been previously presented or already published in an electronic or printed medium. The journal should be informed of manuscripts that have been submitted to another journal for evaluation and rejected for publication. The submission of previous reviewer reports will expedite the evaluation process. Manuscripts that have been presented in a meeting should be submitted with detailed information on the organization, including the name, date, and location of the organization.

Manuscripts submitted to the Turkish Journal of Urology will go through a double-blind peer-review process. Each submission will be reviewed by at least two external, independent peer reviewers who are experts in their fields in order to ensure an unbiased evaluation process. The editorial board will invite an external and independent editor to manage the evaluation processes of manuscripts submitted by editors or by the editorial board members of the journal. The Editor in Chief is the final authority in the decision-making process for all submissions.

An approval of research protocols by the Ethics Committee in accordance with international agreements (World Medical Association Declaration of Helsinki “Ethical Principles for Medical Research Involving Human Subjects,” amended in October 2013, www.wma.net) is required for experimental, clinical, and drug studies and for some case reports. If required, ethics committee reports or an equivalent official document will be requested from the authors. For manuscripts concerning experimental research on humans, a statement should be included that shows that written informed consent of patients and volunteers was obtained following a detailed explanation of the procedures that they may undergo. For studies carried out on animals, the measures taken to prevent pain and suffering of the animals should be stated clearly. Information on patient consent, the name of the ethics committee, and the ethics committee approval number should also be stated in the Material and methods section of the manuscript. It is the authors’ responsibility to carefully protect the patients’ anonymity. For photographs that may reveal the identity of the patients, releases signed by the patient or their legal representative should be enclosed.

All submissions are screened by a similarity detection software (iThenticate by CrossCheck).

In the event of alleged or suspected research misconduct, e.g., plagiarism, citation manipulation, and data falsification/fabrication, the Editorial Board will follow and act in accordance with COPE guidelines.

Each individual listed as an author should fulfill the authorship criteria recommended by the International Committee of Medical Journal Editors (ICMJE-www.icmje.org). The ICMJE recommends that authorship be based on the following 4 criteria:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the work or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity
of any part of the work are appropriately investigated and
resolved.

In addition to being accountable for the parts of the work he/
she has done, an author should be able to identify which co-
authors are responsible for specific other parts of the work. In
addition, authors should have confidence in the integrity of the
contributions of their co-authors.

All those designated as authors should meet all four criteria for
authorship, and all who meet the four criteria should be identi-
fied as authors. Those who do not meet all four criteria should
be acknowledged in the title page of the manuscript.

Turkish Journal of Urology requires corresponding authors to
submit a signed and scanned version of the authorship contribu-
tion form (available for download through www.turkishjournalo-
urology.com) during the initial submission process in order to
act appropriately on authorship rights and to prevent ghost or
honorary authorship. If the editorial board suspects a case of
“gift authorship,” the submission will be rejected without further
review. As part of the submission of the manuscript, the corre-
sponding author should also send a short statement declaring
that he/she accepts to undertake all the responsibility for author-
ship during the submission and review stages of the manuscript.

Turkish Journal of Urology requires and encourages the authors
and the individuals involved in the evaluation process of submit-
ted manuscripts to disclose any existing or potential conflicts
of interests, including financial, consultant, and institutional,
that might lead to potential bias or a conflict of interest. Any
financial grants or other support received for a submitted study from individuals or institutions should be disclosed to the
Editorial Board. To disclose a potential conflict of interest, the
ICMJE Potential Conflict of Interest Disclosure Form should be
filled in and submitted by all contributing authors. Cases of a
potential conflict of interest of the editors, authors, or reviewers
are resolved by the journal’s Editorial Board within the scope of
COPE and ICMJE guidelines.

The Editorial Board of the journal handles all appeal and com-
plaint cases within the scope of COPE guidelines. In such cases,
authors should get in direct contact with the editorial office
regarding their appeals and complaints. When needed, an
ombudsperson may be assigned to resolve cases that cannot
be resolved internally. The Editor in Chief is the final authority
in the decision-making process for all appeals and complaints.

When submitting a manuscript to the Turkish Journal of Urology,
authors accept to assign the copyright of their manuscript to
the Turkish Association of Urology. If rejected for publication,
the copyright of the manuscript will be assigned back to the
authors. Turkish Journal of Urology requires each submission
to be accompanied by a Copyright Transfer Form (available for
download at www.turkishjournalofurology.com). When using
previously published content, including figures, tables, or any
other material in both print and electronic formats, authors must
obtain permission from the copyright holder. Legal, financial
and criminal liabilities in this regard belong to the author(s).

Statements or opinions expressed in the manuscripts published
in Turkish Journal of Urology reflect the views of the author(s)
and not the opinions of the editors, the editorial board, or the
publisher; the editors, the editorial board, and the publisher
disclaim any responsibility or liability for such materials. The
final responsibility in regard to the published content rests with
the authors.

MANUSCRIPT PREPARATION

The manuscripts should be prepared in accordance with ICMJE-
Recommendations for the Conduct, Reporting, Editing, and
Publication of Scholarly Work in Medical Journals (updated
in December 2018-http://www.icmje.org/icmje-recommenda-
tions.pdf). Authors are required to prepare manuscripts in accord-
ance with the CONSORT guidelines for randomized research
studies, STROBE guidelines for observational original research
studies, STARD guidelines for studies on diagnostic accuracy,
PRISMA guidelines for systematic reviews and meta-analysis,
ARRIVE guidelines for experimental animal studies, and TREND
guidelines for non-randomized public behavior.

Manuscripts can only be submitted through the journal’s online
manuscript submission and evaluation system, available at
any other medium will not be evaluated.

Manuscripts submitted to the journal will first go through a
technical evaluation process where the editorial office staff will
ensure that the manuscript has been prepared and submitted
in accordance with the journal’s guidelines. Submissions that do
not conform to the journal’s guidelines will be returned to the submitting author with technical correction requests.

Authors are required to submit the following:
• Copyright Transfer Form,
• Author Contributions Form, and
• ICMJE Potential Conflict of Interest Disclosure Form (should be filled in by all contributing authors)
during the initial submission. These forms are available for download at www.turkishjournalofurology.com.

Preparation of the Manuscript

Title page: A separate title page should be submitted with all submissions and this page should include:
• The full title of the manuscript as well as a short title (running head) of no more than 50 characters,
• Name(s), affiliations, and highest academic degree(s) of the author(s),
• Grant information and detailed information on the other sources of support,
• Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
• Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

Abstract: An abstract should be submitted with all submissions except for Letters to the Editor. Submitting a Turkish abstract is not compulsory for international authors. The abstract of Original Articles should be structured with subheadings (Objective, Material and methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

Keywords: Each submission must be accompanied by a minimum of three to a maximum of six keywords for subject indexing at the end of the abstract. The keywords should be listed in full without abbreviations. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (https://www.nlm.nih.gov/mesh/MBrowser.html).

Manuscript Types

Original Articles: This is the most important type of article since it provides new information based on original research.

The main text of original articles should be structured with Introduction, Material and methods, Results, and Discussion subheadings. Please check Table 1 for the limitations for Original Articles.

Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. Br Med J 1983; 7; 1489-93). Information on statistical analyses should be provided with a separate subheading under the Materials and Methods section and the statistical software that was used during the process must be specified.

Units should be prepared in accordance with the International System of Units (SI).

Editorial Comments: Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the research article published in the journal. Authors are selected and invited by the journal to provide such comments. Abstract, Keywords, and Tables, Figures, Images, and other media are not included.

Review Articles: Reviews prepared by authors who have extensive knowledge on a particular field and whose scientific background has been translated into a high volume of publications with a high citation potential are welcomed. These authors may even be invited by the journal. Reviews should describe, discuss, and evaluate the current level of knowledge of a topic in clinical practice and should guide future studies. The main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the limitations for Review Articles.

Case Reports: There is limited space for case reports in the journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include Introduction, Case presentation, and Discussion subheadings. Please check Table 1 for the limitations for Case Reports.

Letters to the Editor: This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously
published article. Articles on subjects within the scope of the
journal that might attract the readers’ attention, particularly
educative cases, may also be submitted in the form of a “Letter
to the Editor.” Readers can also present their comments on the
published manuscripts in the form of a “Letter to the Editor.”
Abstract, Keywords, and Tables, Figures, Images, and other
media should not be included. The text should be unstructured.
The manuscript that is being commented on must be properly
cited within this manuscript.

Table. Limitations for each manuscript type

<table>
<thead>
<tr>
<th>Type of manuscript</th>
<th>Author limit*</th>
<th>Word limit</th>
<th>Abstract word limit</th>
<th>Reference limit</th>
<th>Table limit</th>
<th>Figure limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Original Article</td>
<td>6</td>
<td>3500</td>
<td>250</td>
<td>30</td>
<td>6</td>
<td>7 or total of 15 images</td>
</tr>
<tr>
<td>Review Article</td>
<td>2</td>
<td>5000</td>
<td>250</td>
<td>50</td>
<td>6</td>
<td>10 or total of 20 images</td>
</tr>
<tr>
<td>Case Report</td>
<td>4</td>
<td>1500</td>
<td>200</td>
<td>15</td>
<td>6</td>
<td>10 or total of 20 images</td>
</tr>
<tr>
<td>Letter to the Editor</td>
<td>4</td>
<td>500</td>
<td>No</td>
<td>5</td>
<td>No</td>
<td>No media</td>
</tr>
</tbody>
</table>

* If the number of authors exceeds the limits, correspondent author should contact Editorial Office with a completed ‘Authorship Contribution Letter’.

Tables

Tables should be included in the main document, presented
after the reference list, and they should be numbered consecu-
tively in the order they are referred to within the main text. A
descriptive title must be placed above the tables. Abbreviations
used in the tables should be defined below the tables by foot-
notes (even if they are defined within the main text). Tables
should be created using the “insert table” command of the
word processing software and they should be arranged clearly
to provide easy reading. Data presented in the tables should
not be a repetition of the data presented within the main text
but should be supporting the main text.

Figures and Figure Legends

Figures, graphics, and photographs should be submitted as
separate files (in TIFF or JPEG format) through the submission
system. The files should not be embedded in a Word document
or the main document. When there are figure subunits, the sub-
units should not be merged to form a single image. Each subunit
should be submitted separately through the submission system.
Images should not be labeled (a, b, c, etc.) to indicate figure
subunits. Thick and thin arrows, arrowheads, stars, asterisks, and
similar marks can be used on the images to support figure leg-
ends. All information that may indicate an individual or institution
should be omitted from the submitted images to ensure a blind
evaluation process. The minimum resolution of each submitted
figure should be 300 DPI. To prevent delays in the evaluation pro-
cess, all submitted figures should be clear in resolution and large
in size (minimum dimensions: 100 × 100 mm). Figure legends
should be listed at the end of the main document.

All acronyms and abbreviations used in the manuscript should
be defined at first use, both in the abstract and in the main text.
The abbreviation should be provided in parentheses following
the definition.

When a drug, product, hardware, or software program is men-
tioned within the main text, product information, including the
name of the product, the producer of the product, and city and
the country of the company (including the state if in USA), should
be provided in parentheses in the following format: “Discovery St
PET/CT scanner (General Electric, Milwaukee, WI, USA)”. 

All references, tables, and figures should be referred to within
the main text, and they should be numbered consecutively in
the order they are referred to within the main text.

Limitations, drawbacks, and the shortcomings of original articles
should be mentioned in the Discussion section before the con-
clusion paragraph.

References

While citing publications, preference should be given to the lat-
est, most up-to-date publications. Authors should avoid using
references that are older than ten years. The limit for the old ref-
ence usage is 15% in the journal. If an ahead-of-print publica-
tion is cited, the DOI number should be provided. Authors are
responsible for the accuracy of references. References should
be cited in brackets within the main text. Journal titles should
be abbreviated in accordance with the journal abbreviations in
Index Medicus/MEDLINE/PubMed. When there are six or fewer
authors, all authors should be listed. If there are seven or more
authors, the first six authors should be listed followed by “et al.”
In the main text of the manuscript, references should be cited
using Arabic numbers in square brackets and superscript characters. The reference styles for different types of publications are presented in the following examples.


**Editor(s) as Author:** Huizing EH, de Groot JAM, editors. Functional reconstructive nasal surgery. Stuttgart-New York: Thieme; 2003.


**Manuscripts Accepted for Publication, Not Published Yet:** Slots J. The microflora of black stain on human primary teeth. Scand J Dent Res. 1974.


**REVISIONS**

When submitting a revised version of a paper, the author must submit a detailed “Response to the reviewers” that states point by point how each issue raised by the reviewers has been covered and where it can be found (each reviewer's comment, followed by the author's reply and line numbers where the changes have been made) as well as an annotated copy of the main document. Revised manuscripts must be submitted within 30 days from the date of the decision letter. If the revised version of the manuscript is not submitted within the allocated time, the revision option may be canceled. If the submitting author(s) believe that additional time is required, they should request this extension before the initial 30-day period is over.

Accepted manuscripts are copy-edited for grammar, punctuation, and format. Once the publication process of a manuscript is completed, it is published online on the journal's webpage as an ahead-of-print publication before it is included in its scheduled issue. A PDF proof of the accepted manuscript is sent to the corresponding author and their publication approval is requested within 2 days of their receipt of the proof.

**Editor in Chief:** Murat Bozlu
**Address:** Mersin Üniversitesi Tıp Fakültesi, Uroloji Anabilim Dalı, Mersin, Turkey
**Phone:** +90 324 241 00 00 (Extension: 1390)
**Fax:** +90 324 241 00 98
**E-mail:** muratbozlu@yahoo.com

**Publisher:** AVES
**Address:** Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey
**Phone:** +90 212 217 17 00
**Fax:** +90 212 217 22 92
**E-mail:** info@avesayincilik.com
**Web page:** avesyayincilik.com
INVITED REVIEWS

Urooncology
Prostate MRI and transperineal TRUS/MRI fusion biopsy for prostate cancer detection: clinical practice updates
Eugenio Martorana, Giacomo Maria Pirola, Maria Cristina Aisa, Pietro Scialpi, Aldo Di Blasi, Giovanni Saredi, Alfredo D’Andrea, Stefano Signore, Riccardo Grisanti, Michele Scialpi

Implications of the Fracture Risk Assessment Algorithm for the assessment and improvement of bone health in patients with prostate cancer: A comprehensive review
Ashish Sharma, Rahul Janak Sinha, Vishwajeet Singh, Gaurav Garg, Samarth Agarwal, Siddharth Pandey

ORIGINAL ARTICLES

Andrology
A comparison between the efficacy and safety of microscopic inguinal and subinguinal varicocelectomy
Şaban Oğuz Demirdöğen, Fatih Özkaya, Ahmet Emre Cinislioğlu, Mehmet Sefa Altay, Şenol Adanur, Özkan Polat, Isa Özbey

Urooncology
Is active surveillance an appropriate approach to manage prostate cancer patients with Gleason Score 3+3 who met the criteria for active surveillance?
Saleh Ghiasy, Amir Reza Abedi, Afshin Moradi, Seyed Yousef Hosseini, Morteza Fallah Karkan, Ghazal Sadri, Mohammadreza Davari

Robotic-assisted perineal versus transperitoneal radical prostatectomy: A matched-pair analysis
Volkan Tuğcu, Oktay Akça, Abdulmuttalip Şimşek, İsmail Yiğitbaşi, Selçuk Şahin, Mustafa Gürkan Yenice, Ali İlhan Taşçı

Prognostic significance of tumor budding in muscle invasive urothelial carcinomas of the bladder
Ülkü Küçük, Sümeyye Ekmekeç, Ebru Çakır, Zübeyde Ekin, Batuhan Ergani, Gökhan Rahmi Ekin

Brain metastases from prostate cancer: A single-center experience
Gül Kanyılmaz, Meryem Aktan, Berrin Benli Yavuz, Mehmet Koç

General Urology
Artificial urinary sphincter revision with Quick Connects® versus suture–tie connectors: does technique make a difference?
Jack R. Andrews, Brian J. Linder, Joseph A. Scales, Daniel S. Elliott

The effect of α-and δ-tocopherol-lipoic acid ester co-drugs on the response of the rabbit bladder to in vitro ischemia/reperfusion
Robert M. Levin, Catherine Schuler, Robert E. Leggett, Martha A. Hass
Safety and efficacy of Intravesical hyaluronic acid/chondroitin sulfate in the treatment of refractory painful bladder syndrome

Is there a difference in the number of interstitial cells, neurons, presence of fibrosis and inflammation in ureteropelvic junction tissues of patients with ureteropelvic junction obstruction with and without crossing vessels?
Hayriye Tatlı Doğan, Abdullah Erdem Canda, Bahri Gök, Ural Oğuz, Sinem Gümüştaş, Ali Fuat Atmaca, Erdem Vargöl

Reconstructive Urology
Characteristics of the urethroplasty and our approach-Experience in patients with urethral stricture
Mehmet Akyüz, Emre Tokuç, Emrah Özsoy, Orhan Koca, Hüseyin Kanberoglu, Metin Öztürk, Ramazan Topaktaş

Pediatric Urology
Innocent heart murmurs and enuresis: Examining a possible link
Pietro Ferrara, Federica Di Ruscio, Margherita Zona, Antonio Ruggiero

CASE REPORTS

Urooncology
An unusual natural history of a rare bladder tumor: Primitive neuroectodermal tumor
Mehdi Kardoust Parizi, Arman Mousavi, Niloofar Sadeghyar

Pediatric Urology
Can Wilms’ tumor recur in the ureteric stump?
Krishnakumar Govindarajan, Bhawana Badhe, Biswajit Dubashi, Ramesh Ananthakrishnan

Hair tourniquet syndrome of penis: A rare situation in boys with serious complications if not recognized
Burak Özçift, Koray Ağras
Dear colleagues,

As the editorial board, with your scientific support and motivation, we have prepared the fourth issue of this year, which includes studies on uro-oncology, andrology, pediatric urology, reconstructive urology, and general urology. In our July 2019 issue, we continue to maintain our diversity of publications with articles that contain the elaborate reviews, original research articles, and case presentations that you carefully prepared and submitted to our journal.

As you know, prostate cancer is one of the most common cancers in men. Today, prostate needle biopsy is the gold standard for the diagnosis of prostate cancer. Different techniques are used for this process. Although initially, it was only guided by finger examination, great advances have been made in prostate biopsy techniques with advances in imaging techniques. In this issue, Eugenio Martorana et al. reported on the latest developments regarding this topic in a review entitled “Prostate MRI and transperineal TRUS/MRI fusion biopsy for prostate cancer detection: clinical practice updates.”

Among urologic cancers, prostate cancer is one of the most common cancers causing bone metastases. Pathologic fractures and skeletal-related morbidities are important in bone metastases observed in advanced-stage prostate cancer. In our July 2019 issue, the review by Ashish Sharma and colleagues titled “Implications of the Fracture Risk Assessment Algorithm: A comprehensive review” compiles current studies on this subject which are not frequently focused on and emphasizes the current algorithms needed to prevent skeletal-related events and morbidity.

Nowadays, radical prostatectomy is performed by many different methods, and the results of these methods are compared with those of different studies. In this issue, in the article “Robotic-assisted perineal versus transperitoneal radical prostatectomy: A matched-pair analysis,” Volkan Tugcu et al. compared the results of robotic-assisted perineal radical prostatectomy with those of robot-assisted transperitoneal laparoscopic radical prostatectomy. We believe that this study will be a strong reference for similar studies in the future.

One of the main goals of scientists is to share their work, which is the product of their intensive labor and precious time. One of the most important ways of achieving this goal is journals which comply with scientific and universal ethical rules. I would like to remind you that this year, the 28th National Congress of Urology will be held from October 10, 2019 to October 13, 2019, in Antalya/Turkey. Abstracts of 50 best papers submitted to the Congress will be published in the special issue of our journal. We are waiting for your precious studies with high scientific quality prepared for the same.

Best Regards,

Prof. Dr. Murat Bozlu
Editor in Chief