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EDITORIAL

Dear Colleagues,

With the exception of the Africa continent, population growth all around the world is on a decline. This observation has changed the agenda of most nations in terms of efforts towards creating a younger society. While the population growth is on a decline, people in general now have higher life expectancy. From this premise, the last ten years' experience in the developed world asks for larger budget share for social security and larger health spending for keeping the quality of living for the elderly. If priorities make up the strategies, ageing per se is the single biggest risk factor for developing diabetes and impaired glucose tolerance. Over the age of 80, approximately 40% of Americans are diabetic. In a 1997 survey of elderly colored Capetonians 28.7% were found to have type 2 diabetes and a further 15% to have IGT. The management of elderly diabetics is complicated by the presence of co-morbid disease, multiple drug use and, often, reduced functional status.

This reminds us that we are living in a world where relations between social, economic, demographic and health factors are showing strong correlations. This increases the importance of interdisciplinary research to have a broader perspective in developing statistically significant solutions towards the ongoing health problems.

For the fall 2013 issue we will focus on; The Risk of Severe Hypoglycemia in Patients with Type 2 Diabetes Mellitus Starting Insulin, HFE Gene mutation among Turkish type 2 diabetic patients, Telmisartan versus Losartan: The Impact on Insulin Sensitivity, Contributors to secondary osteoporosis in patients referred for treatment with teriparatid, Plasma levels of osteoprotegerin before and after treatment of thyroid dysfunctions, The prevalence of incidental adrenal mass found using diagnostic imaging techniques, Undiagnosed glucose metabolism disorders in angiography patients, Cervical approach to substernal goiter: Do we need sternotomy? Cerrahpasa experience, Steroid use in sepsis, Panhypopituitarism due to hemochromatosis, Coexistence of Thyroglossal Duct Papillary Carcinoma and Thyroid papillary Microcarcinoma and Dengue preceding diabetic ketoacidosis.

Dear Colleagues,

As you remember I made important announcements in my editorial of Turk JEM's September issue. I would like to reiterate this very important points for your attention. We have started the use of QR Code during the recent two issues (March and June 2013) which enables us to reach to Turk JEM articles with our smart phones. With this new feature, all we have to do is downloading "QR Code" from the market of our smart phones. Second announcement is related to the language of Turk JEM articles. From January 2014 on all articles should be in English. You can find the new rules of the papers in our Journal's instructions for authors pages. Third announcement is related to financial support offered by The Society of Endocrinology and Metabolism of Turkey (SEMT) to original articles accepted internationally will also be applicable to Turk JEM. Articles published on Turk JEM cited in international publications will also be supported.

I hope with all my heart that the holiday season and the new year of 2014 will bring less suffering and hope for all nations. On the behalf of TURK-JEM, I would like to express my warm thanks to the contributors' with their valuable research contribution. Hope to meet on a 2014 TURK-JEM issue.

With my highest regards.

Nilgün Başkal
Editor-in-Chief