Research Interests

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General Research Interests

- Colorectal Surgery
- Minimal Invasive Surgery
- Emergency Surgery
- Experimental research on Sepsis
- Regenerative Medicine- Stem cell innovation
Clinical Research

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ORIGINAL ARTICLE

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Elastic one-stage cutting seton for the treatment of high anal fistulas: preliminary results

Received: 22 December 2003 / Accepted: 6 July 2004

Abstract Background The management of high and complicated anal fistulas remains a therapeutic challenge, and the oldest and theoretically the simplest technique is to use a seton. In this article, we document our recent experience in managing high anal fistulas with a simple modification of the cutting seton. Patients and methods Surgical outcomes of patients treated by the elastic cutting seton for 4 patients (20%). However, the postoperative incontinence score (0.70±1.22) did not differ significantly from the preoperative score (0.41±0.41; p=0.059, Wilcoxon’s test). Conclusions The preliminary results of this series suggest that the elastic cutting seton may be a valid alternative for the treatment of high anal fistulas. The possible positive contribution of the slow and stable cutting of the sphincter
Clinical Research

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Urgent Laparoscopic Cholecystectomy Is the Best Management for Biliary Colic

Salman B. · Yüksel O. · Irkörücü O. · Akyürek N. · Tezcaner T. · Doğan İ. · Erdem Ö. · Tatlicioğlu E.

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Results of Lateral Internal Sphincterotomy for Chronic Anal Fissure With Particular Reference to Quality of Life

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PURPOSE: The aim of this study was to investigate the effects of lateral internal sphincterotomy on quality of life of patients with chronic anal fissure. The Gastrointestinal Quality of Life Index (GIQLI) scores of the patients were compared with those of the control group. The results showed that the GIQLI score of those without complications was significantly lower than that of the control group (41.43 vs. 48).
ORIGINAL ARTICLE

The Value of Breast Ductoscopy in Radiologically Negative Spontaneous/Persistent Nipple Discharge

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Abstract: Breast ductoscope is a fiberoptic endoscope used for examining the distal breast ducts under direct vision in order to identify the source of pathologic nipple discharge. The purpose of this study was to investigate the reliability of intra-operative breast ductoscopy in patients with pathologic nipple discharge, which could not be identified by radiologic tests. Between April 2002 and March 2007, breast ductoscopy was performed in 34 patients who had pathologic nipple discharge with no radiologic evidence about the source. The procedures were carried out under general anesthesia and ductoscopic findings were as well as the histopathology of the specimens were recorded and documented. In 88%, (30 of 34) of the patients, endoscope was successfully introduced into the external orifice of the ducts at the nipple and proximal breast ducts were successfully visualized. Ductoscopy revealed intraductal lesions (i.e., ductal obstruction, intraductal papilloma, red patches, and erythematoid platter) in 20 patients (66%). Among the 20 patients with visible endoluminal pathology, nine had a papilloma and eight had signs of either acute inflammation (bleeding, erythema) or previous inflammation with healing (adhesions and blocked ducts). In two cases, invasive breast carcinoma was identified, one of which was ductal carcinoma in situ (DCIS) with minimal invasion. In both cases, there had been blocked ducts. In one case DCIS was identified. Breast ductoscopy is a reliable and easy-to-use method to demonstrate the source of
Clinical Research

Hepatik portal vende gaz: Olgu sunumu

Hepatic portal venous gas: a case report

Osman YÜKSEL, Mustafa ŞARE, Buğent SALMAN, Öküzay IRKÖRÜCÜ, Tugan TEZCANER, Öge TAŞÇILAR, Nusret AKYÜREK, Ertan TATLIÇIOĞLU


Gas in hepatic portal vein is a rare entity after mesenteric ischemia, blunt abdominal obstruction, and intra-abdominal gas was detected by direct abdominal gas of a man who was admitted to our emergency abdomen. On computed tomography, intestinalis, and occlusion of vein and artery were detected. The patient had significant concomitant operative risks. Gas in portal vein is a good predictive management, and prognosis. This sign early surgery and also it may help to not for surgery.

Case Report

Acute hemiscrotum due to inguinocrotal Littre hernia: a case report

Abstract

Meckel diverticulum (MD) is the most common congenital anomaly of the gastrointestinal tract that is generally asymptomatic and only manifests in a specific way when complications exist. An unusual complication of MD is known as Littre hernia. It comprises less than 1% of all MD. Littre hernia is the protrusion of an MD examination confirmed an inflamed MD, lined by normal ileal and heterotopic gastric mucosa.

Littre hernia is the protrusion of an MD through a potential abdominal opening [3]. In 1700, French surgeon Alexandre de Littre described for the first time a new form of inguinal hernia. This hernia varied from the known forms of hernias in its clinical course and in the postmortem examination results performed by Littre himself [4]. Although MD is a relatively common anomaly, herniation of these embryological remnants is an exceedingly rare event. It is difficult to diagnose Littre hernia
Clinical Study

Adnexal Masses Treated Using a Combination of the SILS Port and Noncurved Straight Laparoscopic Instruments: Turkish Experience and Review of the Literature

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Objective. To report our experience treating adnexal masses using a combination of the SILS port and straight nonroticulating laparoscopic instruments. Study Design. This prospective feasibility study included 14 women with symptomatic and persistent
Delayed duodenal obstruction after intramural hematoma in a patient with paroxysmal nocturnal hemoglobinuria: A case report

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ABSTRACT

INTRODUCTION: Paroxysmal nocturnal hemoglobinuria (PNH) is a clonal stem cell disorder of hematopoietic cells. Gastrointestinal complications of PNH are rare and mostly related with intravascular thrombosis or intramural hematoma.

PRESENTATION OF CASE: We describe a case of a man with PNH complicated by intramural duodenal hematoma initially treated with supportive care. Three months after his first admission; he was admitted to the emergency department with abdominal pain, nausea and vomiting. He had undergone to surgery because of duodenal obstruction was treated with duodenojejunal by-pass surgery.

DISCUSSION: Patients were healed from gastrointestinal complications could suffer from gastrointestinal strictures, which cause wide spread symptoms ranging from chronic abdominal pain and anorexia to intestinal obstruction.

CONCLUSION: We report a rare intestinal obstruction case caused by stricture at the level of ligamentum Treitz with PNH. The possibility simply has to be borne in mind that strictures can be occurring at hematoma, ischemia or inflammation site of gastrointestinal tract.
ORIGINAL RESEARCH

The Effect of Platelet Activating Factor Antagonist BN 52021 on Bacterial Translocation and ICAM-1 Expression in Experimental Obstructive Jaundice

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BETA-GLUCAN ATTENUATES INFLAMMATORY CYTOKINE RELEASE AND PREVENTS ACUTE LUNG INJURY IN AN EXPERIMENTAL MODEL OF SEPSIS

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ABSTRACT—Sepsis is one of the most important risk factors in acute respiratory distress syndrome (ARDS). β-glucan is a potent reticuloendothelial modulating agent, the immunobiological activity of which is mediated in part by an increase in the number and function of macrophages. In this study, we investigated the putative protective role of β-glucan against sepsis-induced lung injury. Sepsis was induced by cecal ligation and puncture (CLP) in Wistar rats. The control group received saline, and the treatment groups received β-glucan or β-glucan + β-1,3-o-glucanase. Five hours thereafter, plasma tumor necrosis factor (TNF) α, interleukin (IL) 1β, and IL-6 levels were determined. Presence of lung injury was determined via lung tissue myeloperoxidase (MPO) activity, intercellular adhesion molecule (ICAM) 1 levels, and histopathological examination at 18 h after CLP. In a separate set of experiments, survival was monitored for 7 days after CLP. β-Glucan treatment led to a significant increase in survival rate (63% in glucan-treated rats vs 38% in saline-treated rats). Administration of the β-glucan inhibitor abrogated β-glucan’s survival benefit (50%). After CLP, plasma TNF-α, IL-1β, and IL-6 concentrations were increased in control animals. When β-glucan was administered, it completely blocked the increase in TNF-α, IL-1β, and IL-6. Administration of β-1,3-o-glucanase suppressed glucan-induced decrease in cytokines. Animals treated with β-glucan showed a significant reduction in lung injury score, a marked decrease in ICAM-1 expression, and a significant decrease in MPO levels. In contrast, β-1,3-o-glucanase caused a significantly increased MPO
Exogenous Recombinant Adiponectin Improves Survival in Experimental Abdominal Sepsis

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**Background:** Adiponectin, which has anti-inflammatory features, is an important substance in several metabolic mechanisms.

**Aims:** The aim of this study is to evaluate the effects of exogenous intraperitoneal administration of adiponectin on the survival, intrabdominal adhesion and inflammatory cytokine levels in an experimental sepsis model.

**Study Design:** Animal experimentation.

**Methods:** Ninety rats were divided into a control group, adiponectin group and sham group. A cecal puncture abdominal sepsis model was performed in the adiponectin and control groups. Every three hours, macrophage inhibitory factor levels, and the activity of nuclear factor (NF)-kB. The remaining rats were followed for survival.

**Results:** The plasma levels of TNF-\(\alpha\), soluble ICAM-1, IL-6, and macrophage inhibitory factor were significantly higher in the control group than in the adiponectin and sham group (p<0.05). The increase in inflammatory cytokines with time was more prominent in the control group. The activity of NF-kB in the control group was higher than in the adiponectin group (p<0.05). The survival rate of the adiponectin group was higher than in the control group.

**Conclusion:** Administration of exogenous adiponectin to the perito-
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