European Society of Endocrinology

ECAS ESE Council of Affiliated Societies

Summit of the Presidents

Shaping the Future of Endocrinology

8-9 May 2026
Prague, Czech Republic

Speakers at the Summit of the Presidents

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Charlotte Höybye,
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KEYNOTE SPEAKERS

Elizabeth Macintyre,
former President of the Biomed Alliance

Pavel Telička,
former Member of the European Parliament and former European Commissioner

SPEAKERS & PANEL MEMBERS

Jérôme Bertherat,
ESE Past President and Chair of the ESE Public Affairs Committee

Frédéric Castinetti,
Chair of the ESE Clinical Committee

Mustafa Cesur,
Past President of the Turkish Society of Endocrinology and Metabolism

Kirsten Davidse,
Chair of the ESE Nurse Committee

Eleanor Davies,
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Dirk De Rijdt,
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Jan Tuckermann,
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Josanne Vassallo,
President of the European Union of Medical Specialists (UEMS) Section and Board of Endocrinology

Liesbeth Winter,
Officer, Dutch Endocrine Society

Introduction

The future of endocrinology depends on decisions made now at every level of government. Will the workforce be supported to meet growing demand for care? Will there be sufficient investment in endocrine science to improve diagnosis, treatment and understanding of hormone-related diseases? Will patients across Europe be able to access the medicines they need to manage their endocrine conditions?

The endocrine community cannot assume these issues will catch the attention of policymakers without our input. We must speak with a coordinated voice to ensure the interests of patients, healthcare professionals and researchers are reflected in policy decisions that affect the discipline.

Wiebke Arlt,
ESE President

Charlotte Höybye,
ESE Council of Affiliated Societies (ECAS) representative on ESE Executive Committee

This was the rationale for ESE's first Summit of the Presidents, held in Prague on 8 and 9 May 2026 ahead of the European Congress of Endocrinology 2026. Presidents of 37 ESE-affiliated national endocrine societies and representatives from some of ESE's specialist partners met to discuss how the endocrine community can make hormone health more visible in national and European policy.

Discussions focused on the policy priorities emerging from three major ESE projects: the State of Endocrinology workforce survey, the recently published *EndoCompass Research Roadmap – Policy Priorities for Better Hormone Health* in Europe and work to assess availability of endocrine drugs in Europe. These priorities should guide future policy and advocacy activities.

Throughout the two-day event, there was a strong sense of shared purpose and enthusiasm for working together to advocate for endocrinology. Now, that energy must be carried forward so those making future policy and investment decisions know that endocrinology and hormone health matters.

This report summarises the key takeaways from the event.

Part 1
Developing policy and advocacy priorities

Elizabeth Macintyre,
former President of the Biomed Alliance

KEYNOTE ADDRESS

The place of medical societies in European health and research policy making

The Summit opened with a challenge to national endocrine societies: get actively involved in policy discussions that affect endocrinology and do so with clear, coordinated messages.

Key points to consider:

- European medical societies have a largely untapped opportunity to form alliances to advocate for their specialties. Working collectively, including with industry and other partners, can also help smaller societies increase their influence.

- National endocrine societies should get involved in developing the policies and regulations that affect research, diagnostics, medicines and patient care, rather than responding after decisions have already been made.

- Regulatory frameworks are rarely designed around a single disease area or discipline, so specialties must learn to advocate for their field within medicine. This can be done by showing connections between specialties, rather than competing. Obesity, for example, links endocrinology with major policy priorities in cancer and cardiovascular health.

- Scientific breakthroughs only improve care if they reach patients. Helping to decide what gets implemented (through policy and advocacy) is a shared responsibility.

- The endocrine community, including endocrine societies, patient advocacy groups and other partners, need to advocate consistently at national and European levels, because fragmented messages are unlikely to achieve change. They need to "pick their battles" and prioritise issues that will make the biggest impact.

- Advocacy efforts must combine policy expertise with clinical credibility. Endocrinologists need to build their proficiency in advocacy and public affairs.

Emerging priorities from three major projects

Endocrine Workforce 2026

Reccommendations for a healthier endocrine future

European Society of Endocrinology

State of Endocrinology

Dirk De Rijdt,
Director of Strategic Partnerships, ESE

Jérôme Bertherat,
ESE Past President and Chair of the ESE Public Affairs Committee

Srđan Pandurevič,
Scientific Programmes Project Manager, ESE

1. The endocrine workforce: present and future

(Presented by Jérôme Bertherat, Dirk De Rijdt, Srđan Pandurevič and representatives of the State of Endocrinology project)

Workforce is a hot topic in European health policy, driven by growing demand for care, staff shortages and concerns about the sustainability of health systems. The World Health Organization predicts a shortfall of more than four million health workers in Europe by 2030.

However, specialist disciplines are missing from the discussion. This is a particular concern for endocrinology, where disease prevalence is increasing but the workforce is not being sufficiently developed and supported to meet future clinical and research needs.

The State of Endocrinology survey

The State of Endocrinology survey, launched in 2025, was designed to assess the trends, challenges and opportunities facing the endocrine workforce. In total, 2,398 healthcare professional and researchers, 258 nurses and 36 national endocrine societies contributed perspectives.

Findings and recommendations were analysed by working groups covering specific workforce themes, refined by the State of Endocrinology Steering Group and now presented to Summit participants for discussion.

From left to right: Kirsten Davidse, Gérald Raverot, Liesbeth Winter, Charlotte Höybye, Trine Finnes, Kristina Saravinovska, Josanne Vasallo, Jan Tuckermann and Jerôme Bertherat (not pictured: Wiebke Arlt)

35.2%
of early-career endocrine physicians may leave their job in the next five years

Key findings:

- There is worldwide consensus that the prevalence of endocrine diseases will continue to increase, putting a greater demand on the endocrine workforce.
- There is wide variation in the number of endocrinologists per capita across Europe, ranging from 0.9 to 11.7 per 100,000 population.
- The endocrine workforce is struggling to meet demand – nearly a quarter of endocrinologists report waiting times of more than 90 days for new patient appointments.
- The average working week for endocrine healthcare professionals is 44.3 hours, with 35.2% working more than 50 hours per week.
- Work-related stress and burnout are widespread, reported by 67.5% of physicians and 72.6% of nurses. Only 7.7% say their institution offers stress management support.
- Retention is a growing concern, as 35.2% of early-career endocrine physicians may leave their job in the next five years in search of a better work-life balance, income and job security.
- Time for research is limited, with 41% of respondents lacking the time to do research, despite the important returns this provides to patients, physicians and society.

Recommendations to meet future needs of endocrine workforce and patients

Members of the Steering Group showed how the data had informed recommendations in five core areas:

1. Recognition of the specific demands of a specialist discipline like endocrinology in healthcare workforce planning.
2. Redesign of healthcare systems with new ways of delivering clinical care to those with endocrine disease.
3. Improvement of working conditions to support flexible careers and wellbeing and ensure that early career healthcare professionals feel sufficiently supported.
4. Investing in research as a critical component of high-quality care and a thriving workforce.
5. Standardisation of training and education to support 'fair' workforce mobility.

"The time is now… we can represent endocrinology in the debate with our own data and recommendations."

The final recommendations will be published in a forthcoming report, *Endocrine Workforce 2026: Recommendations for a Healthier Endocrine Future*, providing a shared set of priorities for ESE and national endocrine societies to use when engaging with policymakers.

ESE aims to contribute to future workforce policy discussions involving the European Parliament's Committees on Employment and Social Affairs and Public Health, the WHO Regional Office Europe and other stakeholders in the field of the healthcare workforce policy. (Readers may find the European Parliament briefing paper on *EU legal pathways for addressing the health workforce crisis* to be of interest.)

ACTION POINT

National endocrine societies are encouraged to consider the report and its recommendations in the context of their country's workforce and use it to support policy and advocacy activities.

Panel discussion highlights

- Workforce planning must reflect national differences in how endocrinology is organised; recommendations should provide a common but adaptable framework.
- The growing prevalence of obesity and metabolic disease, and new treatments such as GLP-1 agonists, prompted discussion about the future role of endocrinologists, diabetologists, primary care and other specialists in managing these patients.
- Contributors stressed the importance of maintaining broad endocrinology training while ensuring opportunities to develop expertise in specific disease areas.
- Participants discussed the role of shared-care models involving primary care, dietitians and other healthcare professionals in helping the workforce meet growing demand for endocrine care.

Summit participants also took part in round-table discussions to consider each set of recommendations. Their input will inform the final set of recommendations before publication.

ACTION POINT

The specialty must adapt to changing patterns of disease by calling for better working conditions and finding new ways to deliver specialised endocrine care and attract new generations of clinicians and nurses. The recommendations in the report provide a framework that can be tailored to the situations in different countries. National endocrine societies, ESE and partners should continue discussions about the future role of the endocrinologist and how specialist care is delivered.

Eleanor Davies,
Chair of the ESE
Science Committee

Dirk De Rijdt,
Director of Strategic
Partnerships, ESE

Mischa van Eimeren,
EU Liaison Officer, ESE

2. EndoCompass Research Roadmap

(Presented by Eleanor Davies, Dirk De Rijdt, Mischa van Eimeren)

The second project update focused on the EndoCompass Research Roadmap, a joint initiative led by ESE and the European Society for Paediatric Endocrinology (ESPE). More than 200 experts from across Europe contributed to the project to identify the areas of endocrine science where funding could have the greatest impact.

At the Joint Congress of ESPE and ESE in 2025, former Portuguese science minister Manuel Heitor described EndoCompass as a good example of "scientific activism": a community coming together to define its research priorities and make the case for investment.

The Roadmap is a resource for the whole endocrine community to use and share. Participants were encouraged to cite EndoCompass in research papers and funding proposals, incorporate it into institutional and national research strategies, and use it to advocate for investment in endocrine science.

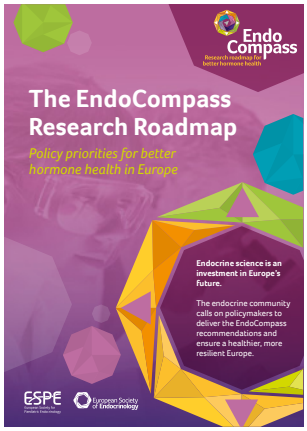
ESE has developed a toolkit containing key messages, communications materials and practical resources to assist dissemination.

Endocrine science receives
<4%
of biomedical and health funding under Horizon 2020

The policy opportunity

Planning is underway for the EU's next research framework programme, FP10, which is expected to run from 2028 to 2034. The stakes are high for endocrine science, which currently receives less than 4% of European health and biomedical research funding – much less than what might be expected given the burden of endocrine disease and its impact on healthcare budgets.

FP10 discussions suggest a strong focus on competitiveness and economic impact, which could disadvantage basic research that is further from the market. The endocrine community must show how endocrinology contributes to these goals and addresses wider European health challenges such as cancer, cardiovascular health, rare diseases, healthy ageing and environmental health.



A new policy paper

To support this work, ESE presented a new policy paper, *EndoCompass Research Roadmap – Policy Priorities for Better Hormone Health in Europe*, which translates the scientific recommendations into a format designed for policymakers, research funders and other stakeholders.

The paper identifies four priority areas for action:

- Tackling high-prevalence endocrine diseases, including diabetes, obesity and metabolic conditions
- Addressing the endocrine causes and consequences of cancer
- Finding cures for rare endocrine diseases
- Promoting endocrine health throughout life and in our environment.

These modules will be available as stand-alone documents to allow societies to draw on the sections most relevant to their national priorities and policy discussions.

Steps to influence FP10

ESE plans to use EndoCompass to influence FP10 discussions and the future research calls as part of this programme through engagement with the European Commission, the European Parliament and the Council of the European Union throughout 2026 and 2027. National societies were encouraged to play an active role, as Member States have significant influence over EU research priorities and funding decisions in addition to setting national research agendas.

How are national endocrine societies using EndoCompass?

Mustafa Cesur
Past President of the Turkish Society of Endocrinology and Metabolism

Mustafa Sahin
Treasurer of the Turkish Society of Endocrinology and Metabolism

Case study: Türkiye

(Mustafa Cesur and Mustafa Sahin)

The Turkish Society of Endocrinology and Metabolism has been using EndoCompass as "concrete implementation plan to modernise endocrinology practice and research in Türkiye." The Roadmap has been promoted through member communications and featured at two national congresses, including a presentation on the use of AI tools in endocrinology that used EndoCompass to frame future research opportunities. EndoCompass will also feature in future activities including a World Environment Day webinar, a webinar by the Society's early careers group and an obesity symposium.

"EndoCompass can be a catalyst during national meetings to ensure awareness and engagement among all members of the endocrine community."

Pedro Marques
Vice President of the Portuguese Society of Endocrinology, Diabetes and Metabolism

Case study: Portugal

(Pedro Marques)

The Portuguese Society of Endocrinology, Diabetes and Metabolism is using EndoCompass as a practical tool for outreach and advocacy. The Roadmap has been promoted through the Society's website, newsletters, social media channels and annual congress, where it was featured in the opening lecture. EndoCompass is also being used to develop materials for policymakers and helping researchers demonstrate the wider impact of their work.

"EndoCompass can help you explain the impact of your research and make the case for others to prioritise your research."

Ideas for using EndoCompass

- ✓ Develop multicentre studies in priority research areas and coordinate applications for national and international research funding
- ✓ Communicate educational messages more effectively
- ✓ Collaborate with other specialties and policymakers and organise programme meetings
- ✓ Lobby for endocrinology-related health policies and research funding
- ✓ Identify unmet needs in research and clinical practice.

Panel discussion highlights

- National endocrine societies should put EndoCompass on their meeting agendas, promote it at national and international events and use it to engage health and research decision-makers. The document will be available as a Word file to facilitate translation.
- Collaboration between ESE and ESPE will continue, including work to address specific paediatric endocrine research challenges. ESE's partner organisations will also be involved in future activities. A similar aligned approach was encouraged at national levels.
- Participants also discussed that the goal should be to secure not just a larger share of existing research funding but also to "make the pie bigger" by working with others to increase overall investment in medical research.

ACTION POINT **Use and share the EndoCompass Research Roadmap and policy paper! Find links and resources here: www.ese-hormones.org/endocompass**

Endocrine drug availability survey

European Society of Endocrinology

Frédéric Castinetti,
Chair of the ESE
Clinical Committee

3. Endocrine drug availability survey

(Presented by Frédéric Castinetti)

The third update covered the Endocrine Drug Availability Survey, initiated in response to concerns raised by ESE's Patient Advocacy Group community about the availability of medicines used to treat endocrine diseases.

The survey was conducted between June 2024 and June 2025 as a joint initiative involving ESE, the ESE PAG community, ESPE and Endo-ERN. Data were collected from 35 countries.

Initial findings:

- Drug availability issues appear to affect countries with lower GDP per capita incomes most severely.
- For highly prevalent endocrine conditions, including diabetes, hypothyroidism and hormone replacement therapy, physicians and patients generally have access to a range of treatment options.
- Drug availability issues occur to differing degrees in the management of rare endocrine diseases that require multiple medicines. These affect:
  - Older medicines that are considered first-line therapies, including hydrocortisone, cabergoline and fludrocortisone
  - Orphan medicines that have lost market exclusivity, such as pegvisomant
  - Orphan medicines approved within the last decade, such as osilodrostat, palopegteriparatide, setmelanotide and other innovative medication in the rare disease area.

Further analytical work is ongoing and project partners are discussing the next steps.

Panel discussion highlights

- 'Availability' and 'accessibility' are not the same thing. Even when a medicine is technically available, high costs can prevent patients from accessing treatment, particularly for rare endocrine diseases.
- The survey findings can support discussions with national policymakers by providing evidence of where access problems exist and how these compare with other countries.
- Inclusion of a medicine on the EU List of Critical Medicines can trigger coordinated action by the European Commission, Member States and regulators to address shortages and supply-chain vulnerabilities. However, the inclusion of a new medicine on the list requires a strong rationale and consolidated action from multiple stakeholders at both European and national levels, so there is a need to build stronger evidence on clinical importance and supply-chain risks.

Part 2
Making policy and advocacy work

Pavel Telička,
former Member of the European Parliament and former European Commissioner

KEYNOTE ADDRESS

How to make your public affairs and public relations activities a success in your Society

In the second keynote address, Pavel Telička offered a policymaker's perspective on how endocrine societies can increase their influence in public affairs. His take-home message was simple: if you are not part of the conversation, decisions will be made without you.

"Can you leave the decision-making to people who don't have your expertise?"

Key lessons:

- If endocrinologists do not engage with policymakers, decisions affecting the specialty will be made without their input. Policymakers can only act on the expertise and evidence they receive.
- The sooner societies engage in a policy process, the greater their opportunity to influence the outcome. It is difficult to change a proposal once it is already underway.
- Policymakers with health expertise are in the minority. Endocrine societies should not assume decision-makers understand the relevance of endocrinology or its links to current policy priorities.
- Endocrinology is more likely to gain attention when it is connected to issues already on the political agenda. Participants were encouraged to identify links with other health priorities, position health as an economic issue and show how prevention can cut costs.
- Clear, concise messages are essential. A one-page summary that defines the problem, presents supporting evidence and proposes solutions is often more effective than a lengthy report.
- Societies should identify the people who can help raise issues within political institutions and decision-making bodies. Building relationships with politicians' assistants and preparing the ground through media interest can be very helpful. Elections can be a good time to engage with candidates who are looking for fresh ideas.

57%
of respondents said their society is engaging in public affairs activities

European lobby café

In a pre-workshop survey, 57% of respondents said their society is engaging in public affairs activities. Of these, 85% expressed a strong interest to do more. Among those not conducting public affairs activities (43%), 50% would like to start and 37.5% said they were considering it. An interactive workshop gave participants an opportunity to discuss their experiences and share best practices.

Tips for getting involved in public affairs

- ✓ Work with patients: Patient organisations can help tell a compelling story about the real-life effects of the disease you are working with and often have advocacy experience to draw on. Politicians can be very sensitive to patients speaking out!
- ✓ Build alliances: Work with partner organisations, national medical organisations, researchers and academics with shared interests, and make use of their existing skills and expertise in public affairs. Build relationships with policymakers (and their assistants!) to increase influence.
- ✓ Make use of personal relationships: Scan your personal or professional environment for individuals that can provide advice, advance your case and put you in touch with the right people.
- ✓ Lead with the evidence and stay politically neutral: Your credibility lies in your scientific expertise, but evidence alone doesn't always change minds. Effective advocacy requires us to be 'politically savvy', aware of the political context and engage strategically when opportunities arise.
- ✓ Use the media to raise awareness: Make it easy for journalists to contact experts by putting a media spokesperson's contact details on the society's website and responding quickly. Promote research with a public appeal through press releases and use awareness events (such as World Hormone Day) to amplify key messages.
- ✓ Set realistic and achievable goals: Public affairs is a matter of small steps. To be successful, priorities should be selected based on what matters to patients, what's being discussed at national and European levels and what's most urgent. If you can translate your scientific arguments into a compelling economic case, you are more likely to succeed!
- ✓ Make clear and specific asks at the right time: Keep it simple and remember that timing is everything – even small activities can make a big impact if they happen at the right time.

"Getting endocrinology on the agenda takes consistent work, not just when proposals come up"

"This meeting was a great opportunity to discuss how policy and advocacy efforts will help us secure a better future for endocrine professionals and patients"

How ESE can help

ESE supports these activities through a wide range of training, resources and networking opportunities.

Societies can find materials to assist with policy and advocacy in the World Hormone Day Policy Toolkit. You will also find public-facing materials to use on social media in the World Hormone Day toolkit, along with webinars on public affairs, social media and media outreach which can be used any time.

If you have any questions about reaching out to policymakers or would like help preparing for meetings, please get in touch with the ESE team by emailing info@ese-hormones.org.

Conclusion

Influencing change is not easy. Policy and advocacy may be outside the comfort zone of clinicians and researchers who do not normally work in a political environment, but they are increasingly important if the specialty is to address the challenges ahead.

The Summit was a first step in identifying ways for the endocrine community to overcome those challenges and make its mark in policy discussions. Let's continue working together to speak up for endocrinology so hormone health receives the attention and investment it deserves.

For more information on the Summit or the projects and issues discussed in this report, please contact info@ese-hormones.org.

"Policy and advocacy may sometimes be outside of our comfort zone, but they are increasingly important if we want to influence change"

"Keep it simple and remember that timing is everything – even small activities can make a big impact if they happen at the right time."

European Society of Endocrinology

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