Education in endocrinology:

Sowing seeds for success

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Contents & Editorial

Editorial

‘You learn something new every day’ – so the old saying goes. And it is never truer than in our fascinating discipline of endocrinology.

But how much better it is if you have a hand to help you on your way. It is one of ESE’s principal aims to support your education, as Society members, at all stages of your career. In this issue of ESE News we look at the challenges in endocrine education across Europe, and at how your Society is working alongside others to provide equal, excellent educational opportunities for all.

On page 9, Hans Perild from the UEMS Section and Board of Endocrinology examines the current differences between educational provision in endocrinology across our region, and the issues that must be tackled. On page 7, Jens Bøllerslev, Chair of the ESE Education Committee, highlights the strategic ways in which ESE is identifying and addressing educational needs in our discipline. Taking a leading role in this crucial process is ECAS (the ESE Council of Affiliated Societies). On page 10, you can read about ECAS’s educational initiatives as well as the many other areas of progress that this group has made in the very successful year since its formation.

PCOS survey and position statement

Results of the recent survey of European endocrinologists about polycystic ovary syndrome (PCOS) and an accompanying position statement from ESE were published in the October issue of European Journal of Endocrinology (EJE).

You can find the papers as follows:

Bouchard P & Bauer FCJM 2014 PCOS: an heterogeneous condition with multiple faces for multiple doctors. EJE 171 E1–E2 (Editorial)

Conway G et al. 2014 The polycystic ovary syndrome: a position statement from the European Society of Endocrinology. EJE 171 P1–P29 (Position statement)

While we plan and strive to improve education, the process of learning is already all around us, and the rest of the issue reports back from ongoing activities. The European Young Endocrine Scientists (EYES) are just back from their 2nd Annual Meeting in Serbia (see our cover picture and story on page 5), and another successful Summer School has just taken place in Bregenz, Austria (page 5). On page 11, we can enjoy an action-packed day with endocrine trainee, Anneke van den Beukel, as we are reminded just how busy life can be during a PhD!

In the next issue of ESE News, we will of course be looking forward to a major educational opportunity in our calendar – but importantly also a great chance to renew old friendships and build new collaborations while having a great deal of fun! I am talking undoubtedly about the 17th European Congress on Endocrinology, taking place on 16–20 May 2015 in Dublin, Ireland. Abstract submission and registration are already open, so it is time to start writing up your data and making a firm date in your diary. I look forward to seeing you there!

Philippe Bouchard
ESE President
Co-Editor of ESE News

ECE 2015: Make a date for Dublin

17th European Congress of Endocrinology
Dublin, Ireland, 16–20 May 2015

ECE 2015 will welcome international delegates from the breadth of endocrinology, including scientists, clinicians and nurses – and the next generation of endocrinologists!

The congress takes place at Ireland’s award-winning Convention Centre Dublin. It will include Meet the Expert sessions on state of the art treatment and diagnosis of endocrine diseases, alongside new sessions on scientific approaches for basic scientists and interested clinicians. As well as two separate sessions for young endocrine scientists, endocrine nurses will have a dedicated strand encompassing multidisciplinary clinical and professional development sessions, poster presentations and networking opportunities.

Find out more and discover the 2015 programme at www.ece2015.org. We look forward to seeing you in Dublin!

Wieske Arf (UK)
Chair, Programme Organising Committee

Jenny Visser (The Netherlands)
Felix Beuschlein (Germany)
Joint co-Chairs, POC

Chris Thompson (Ireland)
Chair, Local Organising Committee

Prize lecturers

Professor Carlos Dieguez (Spain) will deliver the 2015 Geoffrey Harris Prize Lecture, ‘Understanding energy sensors, understanding neuroendocrine function’, while European Journal of Endocrinology Prize winner Dr Robert Semple (UK) will speak on ‘Insulin action in common metabolic disease: too little, too much, or both?’. Both lectures will take place during the ECE 2015 Opening Ceremony.

New for 2015!

We eagerly await lectures at ECE 2015 from Professor Andrew Hattersley (UK), recipient of the new Clinical Endocrinology Trust Award, and Professor C Ronaldo Khan (USA), winner of the 2015 Endocrine Regulations Prize from the Fondation Ipsen. The inaugural ESE European Hormone Medal will also be presented, to a recipient chosen by members of ECAS (ESE Council of Affiliated Societies).

Society News

Brazil welcomes ESE Summit

The ESE Summit, created by ESE with the Brazilian Society of Endocrinology and Metabolism (SBEM), took place in Curitiba, Brazil, on 6–7 September, during the 31st Brazilian Congress of Endocrinology and Metabolism (CBBM 2014). SBEM is the third largest endocrine society worldwide; its 2014 national meeting attracted a record 42,000 participants.

The Summit was the idea of Al van der Lely (European Advisor to the CBBM Scientific Committee) and Cesar Luiz Bogojeszki (CBBM Executive Committee Chair), and became a reality thanks to the support of ESE President Philippe Bouchard.

It opened with the ESE Conference on the CBBM 2014 theme ‘Endocrinology and sustainability’, led by Al van der Lely (The Netherlands) who discussed ‘Medication is safe, but the environment is devastated: the role of endocrine disruptors’.

Vera Popovic (Serbia) led the ESE Clinical Case Seminar, ‘Approach to the diagnosis of hypogonadism in real life’, while the 50th anniversary special talk (UK) delivered the ESE-SBEM Plenary Lecture, ‘Diabetes is a brain disease’. The ESE–SBEM Symposium ‘How safe is endocrine medicine?’ featured talks by Philippe Bouchard (France) on third and fourth generation oral contraceptives, Anton Bouchard (Austria) on oral antidiabetic drugs and Philippe Chanson (France) on dopamine agonists.

We thank the speakers for sharing their expertise, and the ESE staff, especially Liz Stone, for their incredible support. This successful event has opened the doors for future collaborative projects between ESE and SBEM.

Cesar Luiz Boguszewski

Thyroid course

2015 sees the return of the fantastic pre-congress Postgraduate Course in Thyroid Ultrasound on Saturday 16 May. The course will provide a review of the latest techniques, delivered through presentations, interactive discussions and practical sessions working with thyroid patients.

2015 European Society of Endocrinology - the European hormone society
ESE Nurses’ Working Group Nominations needed!

The ESE Nurses’ Working Group provides a support network and resources for endocrine nurses based in Europe and internationally. Our mission is to enable endocrine nurses to advance their role and practice and to have a common ground to share expertise and learn from one another. We also aim to develop and raise the profile of endocrine nursing throughout Europe. Nominations for membership of the Working Group are now invited. You do not have to be a member of ESE to make a nomination, but Working Group members must be members of ESE. The term of office for those in the Working Group is 3 years. Full details are available in the Working Group’s remit, which can be found at www.es-endo.org/about/committees/nurses.aspx.

ESE Short-Term Fellowship

This Fellowship funds research visits from 1 week to 3 months for early career ESE members, with the aim of promoting scientific collaboration between Society members. Fellowships are only awarded for exchanges between two laboratories in different countries. They cover economy class travel plus subsistence (lodging and per diem) for the Fellow and not for research costs, or expenses for any dependants. Applications should be submitted by 31 May and 30 November each year, and should reach the ESE Science Committee at least 2 months before the proposed starting date. Retrospective applications will not be considered. For more information, including the eligibility criteria and application form, see www.es-endo.org/prizes/ESEShortTermFellowship.aspx.

Small Meeting Grants

ESE was pleased to be able to provide a Small Meeting Grant to support the recent Remin-Angiotensin Aldosterone System (RAAS) Satellite to the Joint Meeting of the European and International Societies of Hypertension. Entitled ‘Putting the A back into RAAS’, the meeting took place on 10–12 June in Santorini, Greece, and attracted 50 international delegates. Sessions included presentations related to both angiotensin and aldosterone, so maximising the interaction between research groups. Young investigators and world experts alike featured in the programme. Discussion was active and at times, intense, as researchers compared results, techniques and ideas. We congratulate the organising committee, led by Louise Burrel and Susie Mhaidah. Sponsors in addition to ESE included the COST Network, Daichi Sankyo, Atoquatt, Dia Sorin, Mitsubishi-Tanabe and Servier.

2nd EYES Annual Meeting

24–26 September 2014, Belgrade, Serbia

An autumn meeting for the new spring of European endocrinology!

Belgrade was the venue for the 2nd EYES Annual Meeting, a successful sequel to last year’s event in Rotterdam. A motivational welcome speech by ESE Vice-President, Vera Popovic, left no doubt that ESE’s support for its young members will continue and strengthen.

Over 70 young endocrine scientists from 15 European countries were keen to participate, and 40 abstracts were selected from many high quality submissions. This was the first time that most of the authors had given a live presentation at an international meeting, but they all bravely and enthusiastically shared their results. The presentations were invariably followed by passionate discussions, to everyone’s benefit.

The topics covered spanned all fields of clinical and basic endocrinology. There was something for everyone, and an immense joy in sharing knowledge across all 3 days. It was most exciting to learn of new results and perspectives, and the diversity of research approaches added to the appeal. Witnessing the hard work and achievements of fellow young endocrinologists was inspirational.

All participants were fully focused on the talks and discussions. The Local Organising Committee and other young endocrinologists from Serbia made sure that the exchange of ideas continued after sessions, in a more relaxed atmosphere. Everyone enjoyed the chance to meet other young scientists and to forge new and forty old friendships, as you can see from this issue’s cover image!

And as the young participants return home, richer in knowledge and ideas, as well as priceless new friendships and networks, one thought is on everyone’s mind – European endocrinology has a bright future, and this autumn it was on display in Belgrade!

EYES 2014 Local Organising Committee

ESE Summer School on Endocrinology

Bregenz, Austria, 3–7 August 2014

The Bregenz Monastery Mehrerau near Lake Constance was once again the meeting place for young researchers and internationally renowned experts in endocrinology. In 74 its attendance, including MD and PhD students, post-doctoral researchers and senior scientists from 20 European and non-European countries, benefited from a highly interactive atmosphere with high level, attractive and informative lectures and lively seminars.

The focus of this Summer School was on interaction, getting useful feedback from experts and colleagues, and presenting one’s own results and discussing them with the other participants and lecturers. Most of the junior researchers presented their own recent results in short presentations. The lively discussions following the lectures and the poster presentations often continued during lunch and break times, so providing an excellent opportunity for networking and learning about new techniques, animal models, hormone analytics etc.

Aside from this, the Summer School gave the participants the chance to hear and meet experienced, world class experts such as Matthias Tschop (Munich, Germany), who opened the meeting with an exciting lecture about targeting of neuroendocrine systems to control systemic metabolism using newly developed drugs.

Based on participants’ feedback, the 2014 Summer School was again a big success. It provided an excellent opportunity for the next generation of endocrinologists to meet leading experts, to benefit from the scientific talks, the interactive seminars and the ensuing discussions that enhanced the knowledge and scientific understanding of the attendees, but also the poster presentations and time spent mingling with other young researchers and speakers during breaks or social activities.

We thank all participants and speakers for their valuable input, and look forward to meeting you again!

Rahel Buttler, Milena Doroszko, Annakathrin Keller, Susann Ludwig and Raffael Ott

EYES and VANE (Young Active Research in Endocrinology)
Continuous education in endocrinology

ESE is responsible for continuous education in endocrinology, aiming to attract participants from all areas of medicine with an interest in hormones and metabolism. The Society has established a portfolio of educational strategies, with a focus on the annual European Congress.

Looking forward

June 2014 saw a Strategic Education Workshop, embracing experience from across ESE, including the UEMS Board of Endocrinology. The Workshop’s overall vision is encapsulated in the table below.

**Workshop vision**

**WHO SHOULD WE SERVE?**
- Clinicians (endocrine)
- Scientists (endocrine basic and translational)
- Nurses
- Patients
- Related specialties
- Sub-specialties
- General internal medicine specialists
- All career stages
- Public
- Government
- European focus

**WHAT SHOULD WE OFFER?**
- Leadership on policy and patient education
- Template for educational materials, resources and activities
- Europe-wide certification
- Online support to enrich experience from meetings, such as networking, materials and videos of sessions
- Patient information
- Online courses for members
- Professional development services (e.g. writing grant applications)

**HOW SHOULD WE DO THIS?**
- Build strong collaborations with national societies and sub-specialties
- Establish carefully judged partnerships to fund educational initiatives
- Work with regional groups
- Complement national societies’ activities
- Personalise activities to the needs of individuals
- Link endocrinology to hormones more strongly

**WHAT MAKES US DIFFERENT?**
- Our network of expertise/experts
- Personal, interactive, face-to-face experience
- Fostering of multi-disciplinary groups
- Our unique European flavour
- Two-way learning
- Translational focus – bridging clinical and basic science

The Workshop focused on the Society’s European identity, and clinical and translational aspects. It sought to continue evidence-based educational activities, where the European strength in clinical, translational and basic science should be highlighted.

At the first ECAS meeting in Vienna in 2013, the question of European certification in endocrinology was raised. This topic has been further discussed within ESE and at the Workshop, and you can read more in Hans Pernild’s article on page 9.

**Developing courses**

ESE postgraduate courses have recently entered a new era, due to a 5-year unrestricted educational grant from Novo Nordisk. A steering committee for these courses has been established, with Jens Sandahl Christiansen as Chair and facilitator for the grant. It reports to our Education Committee. ESE plans to run low-budget/high impact postgraduate courses twice yearly, starting in Romania (November 2014) and Greece (spring 2015).

At present, Clinical Update (CU) courses are without specific sponsorship. A new initiative sees Endocrine, a Clinical Update run in collaboration with the Society of Endocrinology and Metabolism of Turkey and the Endocrine Society, with Renate Veld, new ESE Executive Committee member, as the event’s Secretary for 2014. Following his chairomanship of two successful previous courses, Karin Meeran is Chair of the 6th Clinical Update, in Abu Dhabi in January 2015, run with the Imperial College London Diabetes Centre, Abu Dhabi.

**Supporting meetings**

Another area of interest and with potential for further development is small themed meetings. ESE endorsed and supported the 6th Skeletal Endocrinology Meeting/1st ESE Translational Bone Course in Italy in March 2014. The Society is also calling for applications for small meeting grants (up to €2500), and has supported three meetings in 2014.

ESE’s education strategy is developing, trying to meet the demands of the future, while emphasising the European identity and strength of our specialty, and remaining devoted to our members in all areas of endocrinology. We aim to have constructive collaborations and synergies with our partners within the pharmaceutical industry, and to further develop education for our patients.

**Jens Bollerslev**
Chair, Education Committee

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**Educational cornucopia for basic scientists**

From your Science Committee:

Real progress in clinical medicine is not possible without a strong background in basic science. So it is vital that ESE promotes endocrine basic science in its activities. An array of educational activities is available on basic and translational topics, co-ordinated by ESE’s Education and Science Committees.

**ESE Summer School on Endocrinology**

For early career scientists, this event takes place in July/August in Bregenz, Austria. Various topics in basic and translational endocrinology and general research career strategies are presented in a congenial environment that allows lots of informal communication between speakers and attendees.

**Circulating basic endocrinology courses**

Taking place in various European locations on selected topics in basic/translational endocrinology, these annual courses are also aimed at early career scientists and are interactive in nature, providing ample opportunities for communication between speakers and audience. The next one is in early 2015 in Edinburgh, UK, on reproductive endocrinology, in collaboration with the Society for Endocrinology.

**ESE Symposium on Hormones and Cell Regulation**

This annual congress series concerns advanced topics in molecular and cellular endocrinology, and has taken place in the convent at Mont Sainte Odile in Alsace, France, every October since 1975. The series has been adopted as the scientific flagship of the ESE basic science events. It is aimed at those who, irrespective of length of career, would like an update on the leading science in the field.

**Basic science at ECE**

Part of the annual ECE programme is always dedicated to basic and translational science, so the congress is well worth attending for basic scientists. There are specific basic and translational science symposia, Meet the Expert sessions on basic science topics, and a large proportion of the poster sessions concern endocrine basic science. ESE provides ample funding to attend the various training events. For details on course programmes and funds available, see www.ese-hormones.org.

Ilpo Huhtaniemi
Science Committee Chair

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**Clinical Committee Update: Treatment of hypoparathyroidism in adults**

In 2013, the Clinical Committee decided to develop clinical guidelines from a European perspective, with the aim of presenting them at ECE 2015 in Dublin. The process involves close collaboration with CBO in Utrecht (the commissioned clinical research organisation for the ESE clinical guidelines), who are experts in literature search and grading (GRADE), the platform for evidence-based guidelines. The overall research question will be refined in relation to population, intervention, comparison, outcome and treatment (PICOT) style.

Hypofunction of the parathyroid glands is one of the few endocrine diseases still not treated systematically by substitution of the missing hormone (parathyroid hormone), a challenge for patients and their endocrinologists. The ESE guideline will focus on adults with chronic hypoparathyroidism, the overall refined research question being related to the most (cost-)effective treatment in terms of mortality, morbidity and relevant biochemical parameters, including quality of life.

A transdisciplinary and international guideline group was assembled in Amsterdam in January 2014 to work out research questions, plans and timelines for the project. Group members are Olaf Deekers (The Netherlands, Methodological Chair), Claudio Marcacci (Italy), Lars Rejnmark (Denmark), Dolores Shoback (USA), Wil van Besen (Belgium, nephrologist), Antonio Stocke-Serra (Spain, endocrine surgeon), CBO representatives and myself, Jens Bollerslev (the group’s Clinical Chair). During 2014, literature has been searched and graded. The plan is to further develop the guideline for discussion at a face-to-face conference in December, before finalising the document early in 2015 for review by ESE members, patient organisations and external reader(s), prior to presenting the guideline at ECE in Dublin. Subsequently, the guideline will be published in European Journal of Endocrinology, and patient leaflets drawn up.

**Jens Bollerslev**
Co-Chair, Hypoparathyroidism Guideline Group

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**Feature Article**

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Small medullary thyroid carcinoma: post-operative calcitonin rather than tumour size predicts disease persistence and progression

Small (≤1.5 cm) medullary thyroid carcinomas (MTCs) have recently been diagnosed more frequently, possibly because of routine calcitonin measurement in nodular disease. Their clinical significance and natural history are not clear.

To assess whether tumour size could predict their clinical behaviour, Katerina Saltiki et al. performed a retrospective study in 128 patients with small MTCs. The 10-year probability of lack of disease progression according to tumour size differed marginally between patients with tumours of 0.1–1.0 and 1.1–1.5 cm (96.6%, 81.3%, \( p^2 = 0.03, \) \( \phi = 0.045, \) log rank). Postoperative calcitonin was the only predictor significantly associated with the 10-year progression of disease. The authors conclude that tumour size may be of clinical importance only in patients with MTCs > 1 cm. Postoperative calcitonin levels are a more important predictor than tumour size for disease progression.

Read the full article in European Journal of Endocrinology 171 117–126

The Endo Explorer

UEMS (European Union of Medical Specialists) represents national associations of medical specialists in the EU and associated countries. The UEMS Section and Board of Endocrinology (UEMS Endo) support the highest possible standards in education and patient care in our specialty.

In response to the EU objective of ‘free movement of professionals’, the aim is to encourage the same high level of education across Europe. EU Directive 2013/55/EU introduces the European Professional Card, ensuring all doctors with a nationally issued specialist certificate can work in any European country: the Directive requires a minimum of 3 years’ specialised training in endocrinology. In contrast, UEMS Endo suggest a 4-year training period, preceded by at least 2 years’ study in internal medicine.

Postgraduate training in 2014

We recently surveyed the 32 UEMS delegates about postgraduate training in Europe. Representatives from 18 countries responded:

• only four countries had under 3 years’ training in endocrinology, as part of the training in internal medicine;
• the total educational period was 8–9 years in five countries, 6–7 years in seven countries, 5 years in three countries and 4 years in three countries; in several countries the training period is being reduced, supported by the EU Directive;
• evaluation of postgraduate training also differs: 11 out of 18 countries have an examination, while others use comparable examination during the programme.

Consequently, UEMS Endo consider it important to, in cooperation with the national endocrine societies, a minimum curriculum in postgraduate training in endocrinology, diabetes and metabolism. We recently decided to form a working group to establish an EU-wide examination in endocrinology to harmonise examination.

3F Fellowship

Our Exchange in Endocrinology Expertise (3E) programme (supported by Novo Nordisk and Novartis) has run for several years and facilitates the exchange of trainees specialising in adult endocrinology within Europe.

Asaf Perdil

The UEMS Board of Endocrinology Executive Committee is Anna Luger (President), Mariel Bolandowski, Giancarlo Ferrannini, Ayvan Iyare and Lars-Ingvar Dahlgren.

Further reading


The Society holds an annual national meeting in spring, attracting up to 1000 participants. It has a biennial thyroid congress, and local and regional courses, workshops and symposia organised by UEMS’s study groups. The Society’s official journal, Turkish Journal of Endocrinology and Metabolism, is published quarterly in English. The Society also has a quarterly bulletin and publishes guidelines which are prepared and updated annually. The Society has hosted international meetings including the European Congress of Endocrinology, ESE Postgraduate Course, and annual meetings of the European Neuroendocrine Association and the European Society of Endocrinology. In October 2013, SEMT launched an update meeting in clinical endocrinology called Endolink. Providing simultaneous translation into Russian, Arabic and Turkish for the first time, Endolink had 450 delegates from 16 countries.

The second Endocrine Meeting on 23–26 October 2014 in Antalya, Turkey, brought together experts in collaboration with ESE and the Endocrine Society (www.endo.org).

For further information about SEMT see www.turkendocrin.org

Bulent Yildiz

ESE General Secretary

European Society of Endocrinology - the European hormone society
ESE Council of Affiliated Societies: the new voice of European endocrinology

Paris is the venue of the third meeting of ECAS, the ESE Council of Affiliated Societies, which will be taking place shortly.

Launched only a year ago, ECAS has already made a great deal of progress towards its objective of providing a collaborative network to enhance the visibility of endocrine research, development and education – all of which are essential for the discipline. ECAS will allow ESE’s 38 European endocrine society members to get more deeply involved with ESE, to help advance endocrinology within Europe and to promote the role of endocrinologists in tackling global health issues.

A year of progress

Several important initiatives have already taken shape as a result of the first two ECAS meetings:

• ECAS members have elected George Mastorakos (Greece) to represent them as an ex-officio member of the ESE Executive Committee. This Committee manages ESE’s affairs, so this development will aid communication and ensure that the thoughts and priorities of the ECAS membership are regularly communicated to ESE.

• The European Hormone Medal is a prestigious new prize whose recipient will be nominated and chosen by ECAS members. It will be awarded to an international scientist who has made significant contributions to the field of basic or clinical endocrinology. The Medal will normally be presented at the European Congress of Endocrinology (ECE), where the recipient will present one of the main lectures. The first award will be presented at ECE 2015 in Dublin (www.ece2015.org).

• A full-time manager will be recruited to support ECAS, working out of the central ESE Office. ESE has made a significant investment in expanding its team by recruiting a member of staff to ensure that the ECAS initiatives move forward. The recruitment process is currently underway.

• The feasibility of a dual membership scheme is being investigated as a priority.

• Launching a European Hormone Day will be a major development for ECAS. It will encompass national and regional events that aim to engage and inspire the public and policymakers with a range of hormone topics, as well as showcasing the relevance of hormones to public health.

Taking a lead in education

ESE’s key objectives in education have been highlighted as a priority for the ECAS membership. Their meeting in Paris will focus on endocrine education, so that ESE can support educational requirements across Europe.

A survey conducted in the early autumn will inform the discussion. The survey has been designed to determine educational needs, including:

• the current status of endocrine education in each country
• endocrinologists’ career paths in each country
• the need for Europe-wide certification
• national educational needs and gaps
• topics of interest to members for future themed meetings
• interest in and current use of online learning services
• analysis of attitudes to and awareness of ESE’s current educational activities

All ECAS member national societies have been asked to distribute the survey to their members and to encourage them to participate. After forming a focus for the ECAS meeting, the results and the feedback from ECAS will enable ESE to finalise its educational strategy and ensure it fulfils requirements. You will be able to read about the survey results in a future issue of ESE News.

We look forward to our societies collaborating more closely to support the training of endocrinologists, and to enhance awareness of what endocrinologists do. This will truly maximise the benefit that our discipline gives to society.

Helen Gregson, ESE General Manager
Philippe Bouchard, ESE President

A Day in the Life of...

A trainee in endocrinology

07.15 I begin my day with a cup of coffee and some thoughts. Meanwhile, I’ve started my computer to check the new emails and to make a ‘to do’ list for the day ahead. I make a quick call to the surgeon, before he is beyond reach in the operating theatre, to remind him to call me when the operation is almost finished. He is to operate on a patient who participates in my study on brown fat tissue in patients with pheochromocytoma or Cushing’s syndrome.

08.30 Like a real Dutch person I go to work by bike. Then it’s time for a cup of coffee with colleagues in the lab and discussion of the latest news.

09.15 I gather everything I need to pick up the adrenal fat sample from the patient with pheochromocytoma, so that I will be ready when I get the surgeon’s call. Next week I have to present an update on one of my projects for my lab colleagues, so it’s a good chance to order my data and prepare some new slides of the results of our latest experiments where we treated mice with corticosterone pellets.

10.45 I take the samples from yesterday’s oral glucose tolerance test performed in a patient with Cushing’s disease, to the diagnostic lab to determine the insulin levels, and have a quick coffee with one of my fellow PhDs.

11.15 Until lunchtime I’m busy analysing the new data. The work discussions help me to get a good overview of my results and decide where additional experiments are needed and which parts are good enough to allow me to draw conclusions.

12.30 During lunch I’m called by the surgeon as he has almost finished the operation. I rush to the theatre to collect the fresh fat tissue. I really like where the atmosphere in the operating theatre: the small number of people forming a team responsible for the patient’s health. There is a mixture of close collaboration and full concentration on the operation that is being performed. I collect the fat tissue and store it for mRNA and protein analysis and histology, and keep a small piece to isolate stem cells for culture.

13.45 I store the samples and begin the first part of culturing the fat cells. This is not one of my favourite tasks, since I have to mince the fat tissue, which takes forever. Happily there is not too much fat today and it doesn’t take too long. I have to wait for half an hour before I can continue with the isolation of stem cells. That gives me a little time to make a transfer document of the organisation of the EYES weekend in Rotterdam for the next local organising committee in Belgrade. Finally I can proceed with the last step of culturing. Fingers crossed that there are enough isolated stem cells for culture. We will find out tomorrow!

16.00 Every Thursday we have our endocrinology work and literature discussion, given by two fellow PhDs. Once a month we have a lecturer from another institution. Hugo Vankelecom gives an inspiring talk on the development and potency of pituitary stem cells.

17.30 I eat my dinner (leftovers from yesterday), and answer some emails.

18.00 I carry out the last culture work on some other, previously isolated, stem cells. The potency of these cells to grow is really amazing! Once I clean up everything for today I go home (by bike again).

20.15 A friend comes along for a run, during which we discuss all the important things in life...

22.30 I prepare myself for the night and read a chapter of I Am Forbidden, a book by Anouk Markovits, which we will discuss next week at my book club. Tired, but satisfied with another day of translational research, I fall asleep.

Anneke van den Beukel
MD/PhD Student, Department of Internal Medicine, Erasmus MC, Rotterdam, The Netherlands
Coffee Break

Send us your solutions to this topical puzzle for your chance to win one of three €20 Amazon vouchers! Let us have your answers, along with your name and email address, by emailing them to info@euro-endo.org or faxing them to 0044 1454 642222. The first three correctly completed puzzles that we receive will win the prizes!

**Endo Prize Puzzle**

**Across**
1. Cell storing energy as fat (9)
2. Cluster of three nucleotides (5)
3. Location for ECE 2015 (6)
4. Common name for Stein-Leventhal syndrome (abbrev.) (4)
5. Gonadotrophin (abbrev.) (3)
6. Irish endocrinologist famous for work on the thyroid (6)
7. Treatment for menopausal symptoms (abbrev.) (3)
8. Recipient of Nobel Prize for discovery of human blood groups (11)
9. Mineral essential for haemoglobin production (4)
10. Can’t coil in? (anagram) Acts to reduce blood calcium (10)

**Down**
1. Disorder of GH secretion with enlarged facial features, hands and feet (10)
2. Vasoconstrictor affecting thirst and Na+/K+ balance (11)
3. Skull cavity containing organ of sight (5)
4. Mediator of local immune responses, released from mast cells (9)
5. Paget’s disease affects this tissue (4)
6. Hunger-stimulator produced by fundus of stomach (7)
7. Signalling pathway in embryogenesis (3)

**Answers to the puzzle in issue 23**

**Across:** 1. Plexus, 2. Funk, 5. Glucagonoma, 6. Testosterone, 8. EDTA, 10. Sklodowska, 11. Gynaecology

**Save the Dates!**

For more information about any ESE event see www.ese-hormones.org/meetings.

**15th ESE Postgraduate Course on Endocrinology, Diabetes and Metabolism**
27–30 November 2014
Cluj, Romania
Supported by an unrestricted education grant from Novo Nordisk

**6th ESE Clinical Update**
16–17 January 2015
Abu Dhabi, UAE

**ESE Basic Endocrinology Course: Reproductive Endocrinology**
18–20 February 2015
Edinburgh, UK

**17th European Congress of Endocrinology (ECE 2015)**
16–20 May 2015
Dublin, Ireland

**18th European Congress of Endocrinology (ECE 2016)**
28 May–1 June 2016
Munich, Germany

**Deadlines:**

- **30 November 2014**
  - ESE Short-Term Fellowship
- **15 January 2015**
  - ESE Endo International Endocrine Scholars Programme
  - ESE Small Meeting Grant
- **2 February 2015**
  - ECE 2015 – abstract deadline
- **28 February 2015**
  - Geoffrey Harris and European Journal of Endocrinology Prizes 2016
- **23 March 2015**
  - ECE 2015 – early bird registration deadline
- **31 March 2015**
  - ESE Small Meeting Grant

**Did you know?**

**A role for sunshine on the ‘silver screen’**

Movie actress Gwyneth Paltrow learned Hollywood’s pale and interesting trend can have serious health consequences. Like many stars, she insisted on staying out of the sun and covered up for summer trips. She also follows a strict macrobiotic diet. However as she reflected, ‘I suffered a pretty severe tibial plateau fracture a few years ago (requiring surgery) which lead the orthopaedic surgeon to give me a bone scan, at which point it was discovered I had the beginning stages of osteopenia.’

‘This led my Western/Eastern doctors in New York to test my vitamin D levels, which turned out to be the lowest they had ever seen (not a good thing). I went on a prescription strength level of vitamin D and was told to spend a bit of time in the sun!’

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