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Welcome to Leipzig

I LOOK FORWARD to welcoming you to the 51st Annual Meeting of ESPE in Leipzig on 20-23 September. More than 3000 clinicians, scientists, psychologists and nurses will attend, from at least 80 countries, and over 1000 abstracts have been submitted for discussion.

Topics encompass aspects of endocrine care ranging from obesity to water metabolism. The meeting's theme, 'Translating science into clinical practice', is reflected by the excellent keynote lectures. You will hear eminent scientists, including Dr Jean-Jaques Hublin on the evolution of human childhood, Dr Annette Grüters on the importance of congenital hypothyroidism screening worldwide, and Dr Andrew Sinclair on the application of whole genome analysis in unravelling gonad development. Read the selection of previews by keynote speakers below for a taste of the event.

On a musical note, do join us at a concert celebrating the work of Johann Sebastian Bach at St Thomas' Church. The proceeds will benefit the Foundation of the Children's Hospital for children with special needs and the Foundation for the High School for Music and Performing Arts. A further social gathering at the historic Moritzbastei will mark the conference in style.

So, dear colleagues and attendees, members of ESPE and members of societies around the world, come to Leipzig! We eagerly await your participation to make this yet another exceptional ESPE meeting. I extend my warm regards to you all.

Professor Wieland Kiess, President, ESPE 2012

Don't forget - the last date to register for ESPE 2012 at the standard rate is 2 August.

Keynote previews

The evolution of human childhood

Humans have evolved in a unique way to give birth, grow and reproduce. Our cognitive abilities, social complexity and some of our psychological traits are direct consequences of adaptations, such the extension of volumetric brain growth after birth.

Jean-Jacques Hublin, Leipzig

Evolution – lactase persistence and dairying in Europe

Around one-third of people have persistent lactase, yet this genetically determined trait originated in the last 10 000 years and shows one of the strongest signatures of natural selection in the human genome. A comprehensive explanation of why adult consumption of milk is advantageous remains elusive.

New techniques in evolutionary theory, ancient DNA, analysis of archaeological remains and computer simulation show that integrating past demography is essential in order to understand the evolution of this trait and the culture of dairying.

Mark Thomas, London

Familial glucocorticoid deficiency

This inherited failure of cortisol-producing cells in the adrenal may be lethal if untreated. Understanding its genetic causes provides novel insight into disease mechanisms and adrenal biology, and in some cases may provide exciting therapeutic avenues. While the several genetic causes identified to date will be discussed at the meeting, others remain to be discovered.

Adrian Clark, London CONTINUED ON PAGE 2 ⊗

Welcome to issue 19

DEAR FRIENDS AND COLLEAGUES,
This issue starts with a preview of some keynote lectures from the forthcoming ESPE meeting in Leipzig, to whet your appetite! Don't forget to register by 2 August to take advantage of the standard delegate rate (www.espe2012.org). Visit the ESPE booth for updates from the Accreditation and Syllabus Subcommittee, and to share experience from your country with us.

Members expressed their appreciation of the *Yearbook of Pediatric Endocrinology* previews in the last issue. We are delighted that Ze'ev Hochberg and Ken Ong have selected new articles to include this time.

Inside, the Spanish Paediatric Endocrine Society features in the first of our introductions to national societies. We thank our Spanish colleagues for sharing their information with us. In other ESPE news, we look at the e-Learning Portal and the Clinical Practice Committee.

We, as the Editorial Board, will do our best to maintain a high quality newsletter, enriched with members' feedback. Do get in touch (espe@eurospe.org)!
Yours sincerely,

Professor Feyza Darendeliler
Editor, ESPE Newsletter

EDITORIAL BOARD

Indi Banerjee, Gabriel Martos Moreno

Keynote previews *continued from page 1***Height determination and chondrocyte development**

Several signalling systems are involved in chondrocyte development and play a role in height determination. CNP/NPR-B/cGMP is a key player, with abnormalities resulting in short stature or overgrowth in mice and humans. I will present data on the gain-of-function mutations in the NPR-B gene causing overgrowth. The overproduction of cGMP may be a target for drug development for human diseases including short stature.

Keiichi Ozono, Osaka

Whole genome analysis for disorders of gonad development

The usual cause of disorders of sex development (DSD) is a breakdown of the complex network of gene regulation responsible for proper development of testes or ovaries, and most DSD patients cannot be given an accurate diagnosis. We are using massively parallel sequencing approaches to identify the underlying causative mutation, by means of high throughput targeting of key DSD genes and whole exome sequencing in a clinical diagnostic setting. The tremendous power of this method will transform our understanding of DSD and result in rapid identification of the disease-causing mutations, providing appropriate diagnoses.

Andrew Sinclair, Melbourne

Long term outcomes of childhood obesity

Around 25% of European youths are overweight or obese. Early establishment of excess weight increases the chance of developing co-morbidities such as diabetes, high blood pressure and lipid disorders in childhood and adolescence. Although it is suspected that these children will face future health problems, reports on hard end-points are surprisingly sparse. I will summarise the evidence, and identify future research directions to improve our understanding of the future health of today's children.

Jennifer Baker, Copenhagen

e-Learning Initiative

The ESPE e-Learning Portal (www.espe-elearning.org) provides a rich source of information on growth, puberty, diabetes and disorders of sex development (DSD). A range of international specialists has contributed to various chapters describing pathology and practical clinical management. There are over 140 pages of real-life cases with interactive diagnostic and management problems. The portal has been well-used since its launch in 2010, with login requests from more than 150 users from over 40 countries. Anonymous feedback from fellows and experts has given it a thumbs-up, with responses such as 'very positive' and 'I think it's excellent'.

Future plans

Expansion to cover bone metabolism, thyroid and adrenal is already underway. There will be a focus on improving the quality of learning by suggesting core and developmental competencies, with a plan for summative assessments for accreditation in the future. In May 2012, the Portal received an unrestricted educational grant from the Lilly Grant Office in the USA, with a specific focus on the further development of assessment.

You can help

We would welcome your active contribution to the Portal. In November, an international project group will start to develop and validate different forms of assessment (e.g. self-assessments and peer or expert feedback). Experts and fellows are invited to take part in these activities. For more details, please contact Conny de Vugt at espe@keepshooting.nl.

Stenvert LS Drop, Co-ordinator, ESPE e-Learning Programme

Clinical Practice Committee

THE CLINICAL PRACTICE COMMITTEE (CPC) HAS A BROAD REMIT, ranging from reacting to urgent clinical matters in the press and through the European Medicines Agency to running international consensus meetings and responding to queries from individual clinicians and families.

Each committee member has a speciality and an excellent general overview. We recently held a consensus on congenital hypothyroidism diagnosis and management in Rome (to be published soon), while others on vitamin D, GH safety and growth screening/growth charts are planned. We are also responsible for public relations and education – areas ripe for development.

We are very aware that ESPE members desire good clinical guidance. The clinical practice pages in *Hormone Research in Paediatrics* will continue with edited versions of the Meet the Expert sessions at the annual meeting.

Clinical guidance requires input from more than the six members of the CPC. We seek enthusiastic clinicians, including those in training. We propose new subcommittees covering media and public relations, patient and family education, and database development including surveillance of treatment safety – all roles being less onerous than full CPC membership. Do contact me if you would like to be involved (gary.butler@ucl.ac.uk). There will also be vacancies on the main CPC from September 2013.

Gary Butler, Chairman, CPC

Current CPC members: Gary Butler (UK, Chairman), Carlo Acerini (UK), Lia Charmandari (Greece), Jovanna Dahlgren (Sweden), Martin Wabitsch (Germany).

Yearbook focus

Recent outstanding papers from the Yearbook of Pediatric Endocrinology, selected by Editors Ze'ev Hochberg and Ken Ong.

Antenatal thyroid screening and childhood cognitive function

Lazarus JH *et al.* *N Engl J Med* (2012) **366** 493-501.

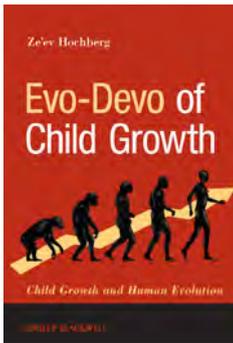
Maternal hypothyroxinaemia in pregnancy can negatively affect the child's cognitive function. There has been little evidence for beneficial outcome in infants of hypothyroxinaemic mothers after iodine or T4 supplementation in early gestation. Lazarus *et al.* performed a large scale prospective controlled randomized study comparing treatment vs observation in early gestation. The study found no significant differences in child IQ at 3 years or the proportion of children with IQ < 85 when starting treatment at 13 weeks of gestation.

Was the time point of screening and treatment too late? Could postnatal iodine deficiency be a confounding factor affecting the results? This study does not provide new arguments for universal screening of maternal hypothyroidism, but trials are ongoing.

Mortality after fluid bolus in African children with severe infection

Maitland K *et al.* *N Engl J Med* (2011) **364** 2483-2495.

WHO recommends reserving fluid resuscitation for children with advanced shock (characterised by a capillary refill time greater than 3 seconds, weak and fast pulse, and cold extremities) in poor-resource settings, such as sub-Saharan Africa. This trial shows that earlier use of fluid resuscitation is not beneficial. Both bolus therapy groups showed increased 48-hour mortality, in the absence of features of fluid overload. The vasoconstrictor response in shock may confer protection by reducing perfusion to non-vital tissues, with rapid reversal with fluid resuscitation proving deleterious. Other possible adverse consequences of fluid boluses include reperfusion injury, subclinical effects on pulmonary compliance, myocardial function, or intracranial pressure. In such settings, fluid bolus therapy should be reserved for children with clear signs of hypotension.



Evo-Devo of Child Growth: Treatise on Child Growth and Evolution

Ze'ev Hochberg, Wiley-Blackwell,
February 2012, Hbk, 240 pp, €112.20,
ISBN 978-1-1180-2716-5



We measure children, we plot charts, but we don't often give much thought to the developmental origins of human growth. Tanner last dealt with this a generation ago in 'A History of the Study of Human Growth'. Now Ze'ev Hochberg has taken up this challenge again. This treatise centres around the juvenility hypothesis – where this phase of development between childhood and adolescence is seen as something separate. Whether or not you accept this approach, the book presents a very thoughtful debate as to the special aspects of humankind that differentiate us from animals.

The concepts of evolution in relation to human growth are taken all the way back beyond Darwin. Hochberg brings the comparative assessment of growth between human subspecies present and past, the environment, cultural and external influences, all together, as well as comparing ourselves with our nearest animal relatives, the great apes. He delves into the developmental origins of human disease. This book gives a very comprehensive and credible account of evolutionary aspects of body size adaptation, taking into consideration energy availability, and how these factors have influenced growth over many millions of years, and also over just a few generations latterly. If you don't understand the importance of epigenetics, then this is the book for you.

We are all used to the Karlberg infancy-childhood-puberty model of growth. This book builds on this by investigating the nutritional, geographic, epigenetic and pathological influences on the transition points. Central to the author's purpose is the proposition of the existence of a new stage

in growth and development – 'juvenility'. Juvenility centres around adrenarche, the possible existence of a mid-childhood growth spurt, the obesity rebound, and the subsequent period of growth deceleration towards adolescence. As someone who has put forward an alternative explanation of mid-childhood growth, the 'cyclical growth' theory, I found myself fighting with some of the arguments. Hochberg devotes a chapter to this debate, presenting the examples of precocity and obesity where such a theory is challenged. Each reader must make their own mind up as to whether they accept it.

Hochberg's style requires you to read carefully, as so many fascinating arguments are developed. Colleagues have contributed sections, rather like very extended footnotes to elaborate on certain topics. To my mind, these other very different styles, some resembling complicated textbooks, interrupt the train of thought and do not always add to the arguments.

Sometimes we as paediatricians pay too little attention to the underlying principles of how our patients grow. Growth is a curious process. You would certainly understand the process better after reading this treatise, and it may help you develop your own concepts of this fascinating phenomenon.

Gary Butler

Sociedad Española de Endocrinología Pediátrica (SEEP)

SEEP, the Spanish Society for Paediatric Endocrinology, formed in 1977 and has 225 members, led by President Prof. Luis Antonio Castaño González.

Members' interests are represented by nine working groups: thyroid, diabetes, sex differentiation disorders, molecular biology, bioethics, congenital adrenal hyperplasia, precocious puberty, obesity, and small for gestational age (SGA).

SEEP organises an Annual Meeting, as well as an Annual Postgraduate Course (Update in Paediatric Endocrinology). Sessions on Paediatric Diabetes and Advances in Paediatric Diabetes take place every other year. There is one Working Group Session per year, which the groups take turns to host, with the SGA Working Group leading the 2012 Session.

Free access to their journal, Revista Española de Endocrinología Pediátrica, is available at www.seep.es, along with clinical guidelines and patient and parent leaflets, and a list of reference centres for special studies.

The SEEP Foundation awards a grant annually for each of clinical investigation and basic investigation, and there is also a grant for exchange stays in paediatric endocrinology units. These are in addition to a wide range of prizes.

Currently, the Government, Education Ministry and Spanish Association of Paediatrics do not officially acknowledge paediatric endocrinology as a sub-specialty. SEEP is the only body issuing accreditation, upon demonstration of clinical and investigation activity in the field for at least 5 years.

For further information, email seep@seep.es.



Sociedad
Española de
Endocrinología
Pediátrica

9th Joint Meeting of Paediatric Endocrinology

19–22 September 2013 MILAN, ITALY



This prestigious occasion will reunite ESPE with sister societies worldwide.

The theme of the Joint Meeting, to be held in the newly built Fiera Milano Conference Centre, is 'Predictive medicine to improve the care of children'. This increasingly relevant topic will be explored through stimulating plenary lectures, symposia and 'meet the expert' sessions. You are all invited to submit your best abstracts.

My colleagues and I keenly anticipate welcoming you to Milan, home to the internationally renowned La Scala opera house and Italy's largest cathedral, the Gothic Duomo di Milano. This charismatic city is the historic gateway to Italy from Europe, and high-speed rail links mean that Venice, Florence and Rome are only a little over 2 hours away.

An inspiring scientific programme and Milan's evocative architecture, together with a warm Italian reception, await you!

Prof. Franco Chiarelli, ESPE President 2013
Chairman, Joint Programme Organising Committee



4th Clinical Post-fellowship Meeting

VARNA, BULGARIA, 27–29 APRIL 2012

Many of the young clinicians and scientists attending were from the Balkan countries. The group included former ESPE Clinical Fellows, young associates of former fellows and paediatric endocrinologists. We focused on areas that remain problematic in the region in terms of resources, know-how and local practice. Experienced ESPE senior members helped identify solutions, and every session included discussion of interesting unresolved cases.

Many issues were identified for each discussion area: Disorders of sex development, Late sequelae of childhood cancer, and Childhood bone disease. Special emphasis was put on working with non-governmental patient organisations to increase benefits for patients, especially for those with rare diseases.

The group parted as good friends and future collaborators. We are indebted to the ESPE, especially former ESPE Clinical Fellowship Chair Chris Kelnar and Secretary Jan Lebl, whose ideas and financial help were invaluable.

Violeta Iotova, Secretary, ESPE Clinical Fellowship Committee



7th ESPE Advanced Seminar in Developmental Endocrinology: Developmental Biology of the Adrenal Gland

BERN, SWITZERLAND, 30–31 MAY 2013

This seminar will focus on young physicians and researchers in paediatric/developmental endocrinology.

Up to 25-30 students can be accommodated, who should be:

- Clinicians with good experience of paediatric endocrinology/ clinical research, e.g. at the senior registrar or 'chef de clinique' level, or
- Postdoc scientists and/or PhD students with a documented special interest in paediatric or developmental endocrinology

The cost of the seminar, including one overnight stay in Bern, will be covered by the organisers. Travel and additional overnight stays will not be covered.

As space is limited, please apply promptly, and no later than 31 January 2013.

The programme includes slots for case presentations, lab results, etc. Please state the title of your presentation on your application so that it may be selected if appropriate.

The Co-ordinator is Prof. Primus Mullis. Applications should be sent to Christa Flück (christa.flueck@insel.ch), with the subject 'ESPE Seminar'. For programme details see www.eurospe.org/education/education_DevEndoSeminar.html.

FUTURE MEETINGS

See www.eurospe.org/meetings for details of all future meetings

51st Annual ESPE Meeting

20–23 September 2012
LEIPZIG, GERMANY

53rd Annual ESPE Meeting

18–21 September 2014
DUBLIN, IRELAND

9th Joint Meeting of Paediatric Endocrinology

19–22 September 2013
MILAN, ITALY

54th Annual ESPE Meeting

9–12 September 2015
BARCELONA, SPAIN

Deadlines

Please note these fast-approaching deadline dates and submit your applications as soon as possible.

ESPE 2012 standard fee registration	2 Aug 2012
ESPE Winter School applications	1 Oct 2012
ESPE Visiting Scholarship	31 Oct 2012
ESPE Young Investigator Award	15 Jan 2013
ESPE Outstanding Clinician Award	15 Jan 2013
ESPE Visiting Scholarship	31 Jan 2013
ESPE Summer School applications	1 Feb 2013
ESPE Research Fellowship	1 Mar 2013

See the ESPE website www.eurospe.org for further details and application forms



European Society for Paediatric Endocrinology

Improving care of children with endocrine diseases by promoting knowledge and research

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ESPE Secretariat

The ESPE Secretariat is managed by BioScientifica Limited, headed by Managing Director Leon Heward-Mills.

Joanne Fox-Evans, BioScientifica's Secretariats Manager, oversees the day-to-day relationship with ESPE, liaising with the ESPE Council and committee members as well as being the main point of contact for ESPE enquiries. She undertakes projects requested by the Secretary General, providing him with assistance and attending ESPE Council and committee meetings. The Secretariat handles membership renewals and payments and deals with subscriptions to *Hormone Research in Paediatrics*.

BioScientifica also manages the Corporate Liaison Board which deals with industry sponsors, and is also responsible for publication of the ESPE newsletter.

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