DEAR GLOBAL COLLEAGUES AND FRIENDS,

Thank you for making the 10th International Meeting of Pediatric Endocrinology such a great success.

Culminating 3 years of planning and preparation by your International Programme Organising Committee and the expert DeMon support staff, the Pediatric Endocrine Society (PES) welcomed nearly 4000 colleagues from around the world to Washington, DC, USA. Here they shared new knowledge, developed collaborations, strengthened existing friendships and began new ones.

The meeting’s theme, ‘Celebrating the global community of pediatric endocrinology’, got off to a great start, with an array of highly attended, energetic and productive Special Interest Groups. Stellar plenary lectures, beginning with Mohamed Abdullah’s inspirational story of bringing endocrine care to Sudanese children, amplified and sustained this spirit of international connectedness throughout the meeting.

Invited faculty expertly covered an immense range of topics and controversies, and preliminary feedback has indicated very high ratings for both the quality and the content of the offerings. ‘There was just too much good stuff to choose from’ was the most common complaint!

New initiatives, such as inclusion of allied endocrine care providers and highlighting Young Investigator Awardees in a distinct platform session, were well received. And the relatively compact yet accommodating venue, complete with on-site lunches, seemed successful in facilitating interactions among attendees and increasing personal contact traffic for the over 1200 poster presenters and exhibitors.

Most of all, to each of you who attended, the meeting was made a great experience by your presence, enthusiasm, curiosity and contributions. And so, on behalf of the PES and the International Programme Organising Committee, thank you so much for your support of the 2017 International Meeting!

David B Allen
President, 10th International Meeting of Pediatric Endocrinology, 2017
Professor of Pediatrics, University of Wisconsin School of Medicine and Public Health, Madison, WI, USA

You can read about the ESPE award winners on pages 3–4
Welcome continued from page 1

Highlights from the *Yearbook of Pediatric Endocrinology* can be found on page 6, thanks to the editors Ze’ev Hochberg and Ken Ong. They have singled out two outstanding papers, one on height variation and the other on the genetic background to type 2 diabetes.

ESPE is now over 50 years old. On page 7 we look back at the early years – it is truly inspirational to see how far we have progressed since 1962. Much of ESPE’s history is captured in the book *ESPE – The First 50 Years*, edited by Wolfgang Sippell, published by Karger and available at www.karger.com/Book/Home/255429.

ESPE activities continue apace, and you can find out about the new ESPE Science Symposium and the latest news from the ESPE e-Learning portal below. We strongly encourage you all to make use of your free access to the e-Learning portal which is a fantastic teaching resource. Page 5 includes an update on the extremely productive work of the Clinical Practice Committee.

Please do send us your own news to include in future issues, as well as suggestions for topics that you would like us to cover.

Yours sincerely,
Dr Sarah Ehtisham, Editor, ESPE Newsletter
Sarah.Ehtisham@mediclinic.ae

EDITORIAL BOARD
Dr Assimina Galli-Tsionopoulou (Thessaloniki, Greece)
Dr Abel López-Bermúdez (Girona, Spain)
Dr María Salomón Estébanez (Manchester, UK)

ESPE update

We currently have vacancies on the Clinical Fellowship Committee and the Summer School Steering Committee, so please do apply to espe@eurospe.org by 30 November if you’d like to become more involved in the ESPE community.

Members voted for the location of the ESPE Meeting in 2022 during the ABM. We now eagerly await a wonderful meeting in Rome, Italy, with Stefano Cianfarani as President. Meanwhile, the current Programme Organising Committee is busy putting together a packed programme for ESPE 2018 (on 27–29 September in Athens, Greece). The meeting’s topic is ‘Narrative and precision medicine in paediatric endocrinology’. You will be able to submit an abstract or register as a delegate at www.espe2018.org very shortly.

Having celebrated a host of deserving award winners in Washington, we look forward to receiving nominations for next year’s awards (see www.eurospe.org/grants-awards/awards). The deadline is 10 December 2017. Awards include prizes for researchers and clinicians at different stages of their careers, both within Europe and internationally.

As always, we welcome your feedback, so do feel free to get in touch (www.eurospe.org/contact). Thank you for all your comments from those involved all the more worthwhile! Hannah Bonnell, Joanne Fox-Evans and Laura Dudley, ESPE Team espe@eurospe.org

ESPE Science Symposium

UP TO €30,000 IS AVAILABLE for the organisation of the 2018 ESPE Science Symposium.

Aimed at paediatric clinicians and basic researchers, this brand new initiative seeks to promote the dissemination of new scientific knowledge within the paediatric endocrinology community, closing the gap between research and patient care.

Applications to host the meeting are now open and ESPE members are invited to apply. For applications and further information, see www.eurospe.org/education/espe-science-symposium. The deadline is 30 November 2017.

e-Learning news

THE ESPE e-LEARNING WEB PORTAL provides an interactive learning environment for up to date information in paediatric endocrinology. Medical students, residents, fellows, specialists, consultants and teachers around the world can share and develop knowledge in a flexible way.

Recent updates include a new case in the section on thyroid disorders, entitled ‘A 16-year-old girl with a thyroid nodule’, which considers the investigations that should be undertaken. The sections on growth and growth regulation and on disorders of sex development have also been updated recently, as has the student course area.

You can register free of charge and find out what is available at www.espe-elearning.org.

Follow ESPE online...

Keep an eye on the latest ESPE news and activities at www.eurospe.org
You can also follow ESPE on Facebook and Twitter

www.twitter.com/EuroSPE
www.facebook.com/EuroSPE
ESPE award winners at the 10th International Meeting of Pediatric Endocrinology

We congratulate the many ESPE award winners who received their prizes at the meeting in Washington, DC, in September.

ESPE Andrea Prader Prize
Kerstin Albertsson-Wikland (Gothenburg, Sweden) received the ESPE Andrea Prader Prize, in recognition of her lifetime achievement in teaching and research, outstanding leadership and overall contribution to the field of paediatric endocrinology.

ESPE Outstanding Clinician Award
Feyza Darendeliler (Istanbul, Turkey) was presented with the ESPE Outstanding Clinician Award, in recognition of her outstanding clinical contribution to the practice of clinical paediatric endocrinology.

ESPE International Award
Tsutomu Ogata (Hamamatsu, Japan) received the ESPE International Award. This is presented to an outstanding paediatric endocrinologist from a country outside Europe and the Mediterranean basin.

2018 ESPE Awards
Remember to make your nominations by 10 December 2017
For further details see www.eurospe.org/grants-awards

ESPE International Outstanding Clinician Award
Margaret Zacharin (Melbourne, Australia) received the ESPE International Outstanding Clinician Award, in recognition of her contribution and commitment to clinical paediatric endocrinology in a country outside Europe and the Mediterranean basin.

ESPE Research Award
Heiko Krude (Berlin, Germany) received the ESPE Research Award, in recognition of research achievements of outstanding quality in basic endocrine science or clinical paediatric endocrinology.
ESPE Young Investigator Awards

These awards for young paediatricians, in recognition of their scientific publications, were presented to:

- **Phillipe Lysy** (Brussels, Belgium) whose award lecture was entitled ‘Insights into β-cell mass evolution in type 1 diabetes and into growth excess during childhood’
- **Antti Saari** (Toivala, Finland) whose award lecture was entitled ‘Auxological screening facilitates early detection of growth disorders in children’

Henning Andersen Prizes

These prizes for the best original papers published in Hormone Research in Paediatrics were presented by Stefano Cianfarani to:

- **Kerstin Albertsson-Wikland** (Gothenburg, Sweden) for Demir et al. ‘First morning voided urinary gonadotropin measurements as an alternative to the GnRH test’ (2016 85 301–308; Original Paper)
- **Jan Lebl** (Prague, Czech Republic) for Stoklasova et al. ‘A rare variant of Turner syndrome in four sequential generations: effect of the interplay of growth hormone treatment and estrogens on body proportion’ (2016 86 349–356; Novel Insights from Clinical Practice)

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ESPE Activities

ESPE Memorial Forest 2008

AS ESPE PRESIDENT FOR THE 47th ANNUAL MEETING in Istanbul, Turkey (20–23 September 2008), I was proud, along with my team, to instigate the planting of the ‘ESPE 2008 Memorial Forest’.

My intention was to create something different for the Society, which would long be remembered, to mark the first ESPE Meeting in Turkey (a land linking Europe and Asia). In order to support nature as well as science, Francesco Chiarelli (ESPE Secretary), the conference organisers and I had decided that the meeting should be as environmentally friendly as possible, minimising its carbon footprint and use of printed materials, and setting a precedent for future ESPE Meetings. What better way to improve the environment than to plant more trees? I consequently contacted the Aegean Forest Foundation and Novo Nordisk – Turkey (who partly supported the project).

More than 2000 colleagues attended the meeting, which was scientifically very successful. Each delegate had a tree planted on their behalf and received a commemorative certificate. During the meeting, we increased the number of trees to over 3000, to represent future members. As far as I know, this was the first social project in ESPE’s history.

The forest continues to symbolise the Society’s ‘growing’ future. It is located on the Gorece afforestation zone, 22km from the centre of Izmir, which was the location of my department at that time. Members wishing to visit or learn more should contact Sirma Bugdayci (Tel: +90 (0)232 4645160) at the Aegean Forest Foundation, which maintains the forest. She tells me the trees are growing healthily and thanks ESPE for supporting nature.

Atilla Büyükgebiz
Istanbul, Turkey

You can read about the planting of the forest in issue 9 of the ESPE Newsletter at www.eurospe.org/media/1032/espenewsletter09.pdf.

ESPE Clinical Practice Committee news

THE CLINICAL PRACTICE COMMITTEE (CPC) supports paediatric endocrinologists by providing high quality evidence in an easily accessible format for ESPE members worldwide.

Our main activity is the development of guidelines and consensus statements on the management of paediatric endocrine disorders. We also assist the Programme Organising Committee (POC) in planning the clinical aspects of education for the ESPE Annual Meetings, especially the ‘Meet the Expert’ sessions.

In July 2016, ESPE (jointly with the European Society for Endocrinology (ESE) and the Pediatric Endocrine Society (PES)) hosted and funded a consensus meeting on Turner syndrome in Cincinnati, OH, USA. This led to the development of a new guideline, published recently in European Journal of Endocrinology (2017 177 G1–G70). Subsequently, in March 2017, ESPE (with the European Network for Human Congenital Imprinting Disorders (EUCID) and the EuroPHP Network) funded a consensus meeting on pseudohypoparathyroidism (PHP/PPSD). The consensus document is under development.

In addition, a consensus document on the diagnosis and management of lipodystrophy syndromes was published in Journal of Clinical Endocrinology & Metabolism (2016 101 4500–4511) in December 2016, while one on the diagnosis and management of Russell-Silver syndrome was published in Nature Reviews in Endocrinology (2017 13 105–124) in February 2017. A consensus guideline on endocrine treatment of gender-dysphoric/gender-incongruent persons has just been published in Journal of Clinical Endocrinology & Metabolism (2017 102 3869–3903), while one on congenital adrenal hyperplasia due to steroid 21-hydroxylase deficiency is currently under review.

At present, consensus guidelines are being developed on neonatal diabetes (jointly with the PES), as well as on the management of polycystic ovary syndrome (PCOS) (with the Australian National Health and Medical Research Council (NHMRC) Centre for Research Excellence in PCOS, the European Society of Human Reproduction and Embryology (ESHRE), and the American Society for Reproductive Medicine (ASRM)).

Finally, the patient and parent leaflets are being revised with a view to extending both the topics and the languages available.

I am most grateful to all members of the CPC, ESPE Council, ESPE Working Groups and international paediatric endocrinology societies, the ESPE Senior Operating Officers and the ESPE Team for their hard work, dedication and significant contributions.

Evangelia Charmandari
Chair, ESPE Clinical Practice Committee

For further details of the CPC, including a list of current members, see www.eurospe.org/about/committees.
**Yearbook of Pediatric Endocrinology: Editors’ preview**

*Editors Ze-ey Hochberg and Ken Ong pick out outstanding papers from the Yearbook of Pediatric Endocrinology.*

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### Genetic and environmental influences on height from infancy to early adulthood

**Jelenkovic A et al. 2016 Scientific Reports 6 28496**

**BACKGROUND:** Height variation is known to be determined by both genetic and environmental factors, but a systematic description of how their influences differ by sex, age and global regions is lacking.

**METHODS:** The authors conducted an individual-level pooled analysis of 45 twin cohorts from 20 countries, including 180 520 paired measurements at ages 1–19 years.

**RESULTS:** The proportion of height variation explained by shared environmental factors was highest in early childhood, but remained detectable until early adulthood. Accordingly, the relative genetic contribution increased with age and was highest in adolescence (up to 0.83 in boys and 0.76 in girls). Comparing geographic–cultural regions (Europe, North America and Australia, and East Asia), genetic variation was highest in North America and Australia and lowest in East Asia, but the relative proportion of genetic variation was roughly similar across these regions.

**CONCLUSIONS:** These findings provide further insights into height variation during childhood and adolescence in populations representing different ethnicities and exposed to different environments.

### The genetic architecture of type 2 diabetes

**Fuchsberger C et al. 2016 Nature 536 41–47**

**BACKGROUND:** Type 2 diabetes shows strong familial clustering and high estimated (genetic) heritability, ~70% in twin studies. However, only ~10% of that genetic susceptibility has yet been explained by genome-wide association studies (GWAS), despite having data on ~50 000 cases of T2DM and even more controls.

It had been proposed that the ‘missing heritability’ might lie in gene variants that are infrequent, rare or even private to sub-populations. Such variants are not captured by GWAS genotyping arrays, but instead require high depth whole exome or even whole genome DNA sequencing.

Here, in a heroic international effort, Fuchsberger *et al.* perform such a huge undertaking in ~8000 T2DM cases and the same number of controls, but with strikingly little reward. Apart from confirming various common variant (minor allele frequency, MAF≥5%) associations with T2DM, they found only one low frequency variant associated with T2DM, at **CCND2** (MAF 2.6%), and even that had been previously reported in an Icelandic study. They conclude that there is limited evidence of a role for lower frequency variants, whether protein coding (exomes) or genome-wide, in the susceptibility to T2DM.

**CONCLUSIONS:** Comprehensive enumeration of sequence variation during childhood and adolescence in populations representing different ethnicities and exposed to different environments.

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**COMMENTS**

This study of 180 000 paired measurements from 86 000 complete twin pairs in 20 countries revealed that environmental factors shared by co-twins contribute to the inter-individual variation in height from infancy to early adulthood, but infancy is probably the most sensitive phase regarding external influences. The relative proportion of shared environmental factors was greatest during the first years of life, representing almost half of the variation at age 1, and decreased over childhood and adolescence.

The most consistent result was the increasing genetic influence with age, reaching its peak at around 13 years in girls and 14 years in boys. After that point, even if mean height continued to increase, genetic variance started to decrease so that, in late adolescence, the magnitude was similar to that before puberty.

Comparison between geographic–cultural regions showed that mean height and its genetic contributions were highest in North America and Australia and lowest in East Asia.

The accompanying viewpoint was pessimistically entitled ‘Diabetes: still a geneticist’s nightmare’ (*Nature* 536 37–38). So, where next for T2DM genetics? The findings here did provide direct reassurance that the widely used ‘GWAS-array-genotyping-followed-by-mathematical-dense-genotype-imputation’ approach does provide good coverage of the genome and – although not for the faint-hearted – give encouragement to extend that approach to even larger GWAS.
Six decades of **ESPE**
The 1960s

ESPE is now more than 50 years old. Your Society has been uniting paediatric endocrinologists ever since its formation, aiding communication and education and improving patient care. In this article, we look back at the Society’s formative years in the 1960s.

**1962**
Professor Andrea Prader, Director of the Kinderspital in Zurich, Switzerland gathered 32 paediatricians and endocrinologists to attend a small informal meeting. Prader had been disappointed by the lack of paediatric endocrinology during the annual Acta Endocrinologica Congress in the previous week. This first unofficial meeting of paediatric endocrinologists ran from 8 to 10 July 1962. Its success resulted in the formation of an unofficial ‘Paediatric Endocrinology Club’, whose members agreed to meet once yearly in a different European city.

**1963**
In the following year, 31 attendees from 9 countries and 20 Dutch guests gathered in Groningen, The Netherlands for a meeting organised by Hendrick (Henk) Visser. During the 2-day event (for which so many papers were submitted that some had to be rejected), Visser recommended the formation of a society with clearly defined membership criteria, to ‘give new impulses to paediatric endocrinologists throughout Europe’.

**1964**
The election of a first Council, with Hendrick Visser serving as Secretary/Treasurer, took place in Hamburg, Germany. Visser presented the first constitution, in Dutch, which was to be voted on at the following year’s meeting. The newly founded association was named the European Society for Paediatric Endocrinology, and 30 founding members with an active scientific interest in the field were identified to attend the subsequent meeting, which was to be the official founding meeting of the Society.

**1965**
In February, Visser wrote to each of the proposed founding members with a copy of the draft constitution (now in English), seeking their approval. ESPE was officially founded in August 1965, with the approval of the formal constitution. The unofficial paediatric endocrinology club had become an official scientific society. Its primary aim was to ‘promote knowledge of paediatric endocrinology in the widest sense’. It was to achieve this by organising conferences and meetings, bringing people together who had an active interest in the field, arranging exchange visits between members and collaborators, promoting joint projects, and stimulating contacts with other societies – all of which ESPE continues to do to this day.

**1966**
It had been agreed that a yearly membership of $10 would be charged, but by the middle of the year only 12 members had paid! At this time in ESPE’s history, to become a full (Ordinary) member, it was usual to be invited to the ESPE Annual Meeting as a guest of an existing member, and subsequently to be put forward as a candidate for election at the Annual Business Meeting. The 5th ESPE Annual Meeting in Glasgow, UK, was attended by 20 members and 50 guests. It comprised four sessions with a total of just 33 presentations.

**1967**
Different types of presentation were introduced at the Annual Meeting. The 6th Meeting in Haifa, Israel, saw sessions with invited lectures of 20–30 minutes, as well as sessions where short papers were given, each lasting 10 minutes, with 5 minutes for discussion. The abstracts were sent to all the members before the meeting. It was around this time that the Newsletter became an important form of communication, with regular updates to members on the progress of the forthcoming ESPE Meeting.

**1968**
The 7th ESPE Annual Meeting in Vienna, Austria, was held in collaboration with the European Club for Paediatric Research. Corresponding members (who could be based outside Europe, unlike Ordinary members) and an Honorary member were elected to ESPE for the first time.

**1969**
An idea to include a less formal element within the ESPE Meetings led to the introduction of two sessions for free papers at the 8th Annual Meeting in Malmö, Sweden. For the first time, there were also negotiations with a pharmaceutical company about financing a research fellowship.

**The founding members:**
Henning Andersen* (Denmark)
Carl-Gustav Bergstrand (Sweden)
Jean Bertrand (France)
Jürgen Bierich* (Germany)
Methven Cathro (UK)
Andreas Fanconi (Switzerland)
José M Francés Antonin (Spain)
René François* (France)
Emile Gautier (Switzerland)
William Hamilton* (UK)
Douglas Hubble (UK)
Ruth Illig (Switzerland)
Dietrich Knorr (Germany)
Zvi Laron (Israel)
Paul Malvaux (Belgium)
Gertrud Mürset (Switzerland)
Lars Nilsson (Sweden)
Michel Pierson (France)
Andrea Prader* (Switzerland)
Raphaël Rappaport (France)
Pierre Royer (France)
Alfred Schwenk (Germany)
Robert Steendijk (The Netherlands)
Walter Swoboda (Austria)
James Tanner (UK)
Walter Teller (Germany)
Markus Vest (Switzerland)
Hendrick Visser* (Netherlands)
Koos van der Werfften Bosch (The Netherlands)
Egon Werner (Germany)

*Members of the first ESPE Council.

Much of ESPE’s history is captured in the book *ESPE – The First 50 Years* edited by Wolfgang Sippell, published by Karger and available at [www.karger.com/Book/Home/255429](http://www.karger.com/Book/Home/255429)
**Future meetings**

See [www.eurospe.org/meetings](http://www.eurospe.org/meetings) for details of all future meetings

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**Other events**

**ASPED-ESPE School**  
13–17 December 2017  
Abu Dhabi, UAE

**ESPE Winter School**  
23 February–1 March 2018  
Ain Sokhna, Egypt

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**Deadlines**

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

- Science Symposium Host applications: 30 Nov 2017
- Clinical Fellowship Committee Vacancy applications: 30 Nov 2017
- Summer School Steering Committee Vacancy applications: 30 Nov 2017
- ESPE Andrea Prader Prize nominations: 10 Dec 2017
- ESPE Research Award nominations: 10 Dec 2017
- ESPE Young Investigator Award nominations: 10 Dec 2017
- ESPE Outstanding Clinician Award nominations: 10 Dec 2017
- ESPE International Outstanding Clinician Award nominations: 10 Dec 2017
- ESPE International Award nominations: 10 Dec 2017
- IFCAH-ESPE Letters of Intention submission: 15 Jan 2018

See the ESPE website at [www.eurospe.org](http://www.eurospe.org) for further details and the application or nomination process.

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**HELP RUN YOUR SOCIETY**

Vacancies arise regularly on ESPE Committees. To see which opportunities are currently available, check [www.eurospe.org/about/vacancies](http://www.eurospe.org/about/vacancies).