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from the president

I have just returned from ENDO 2015. Australia was well represented at the meeting, which overall was excellent. ESA is strengthening ties with the US Endocrine Society with strong representation on relevant committees, including the program organizing committee. We are also undertaking other special initiatives including a jointly sponsored symposium at the 2015 ESA meeting. This symposium is designed to support early career clinicians and academics and will be held on the first day of the ESA scientific meeting with speakers including Dick Santen, the President of the US Endocrine Society, and national Australian leaders in endocrinology.

International partnership activities continue to add value to ESA. ESA's adoption of Clinical Endocrinology as our official Society Journal is working well and Australian publications are common and high calibre. ESA members have free access to the online version of the Journal via the ESA member site, and for those wanting a print version, there is a substantial ESA discount. The ESA logo is included and ESA is well represented with several of us on the editorial board. The Clinical Endocrinology Board has approved priority access for publication of the best case presentation at the ESA Clinical Weekend meeting. Clinical Endocrinology is also now running an educational module program based on recent published papers.

Council would encourage you to consider submitting your work here along with the other two journals we have partnered with published by BioScientifica, Journal of Endocrinology and Journal of Molecular Endocrinology, so that basic and translational members of the ESA also benefit from Journal associations. ESA members have electronic access to both Journals via the ESA website. Bioscientifica will also sponsor a 'How to get published' education session at the ESA conference each year. ESA members are eligible for a discounted publishing fee when publishing case reports in the open access publication, Endocrinology, Diabetes & Metabolism Case Reports (submit online via www.edmcasereports.com).

The new Early Academic Career Development meeting continues to evolve and has now been moved to align with the clinical weekend before the ESA annual meeting, Belinda Henry has elaborated on this later in the newsletter. We have established a scientific strengthening committee including council members and senior members who sit on international endocrine committees. Tim Cole has outlined the important role of this new committee in the newsletter. The ESA seminar meeting has an excellent line up of speakers and is well subscribed. Planning for the ESA Annual Scientific Meeting in Adelaide in August is very close to completion being expertly guided by Ann McCormack and her team with key speakers including Professor Dick Santen, Professor Bill Rainey and Professor Mike Tuttle, with these speakers also speaking at the clinical weekend and ESA ECR Career Development Workshop

ESA continues to be in a strong financial position with ongoing support for ESA Postgraduate Scholarships and Fellowships. These funding schemes were well subscribed with highly quality applicants and the successful scholarship was awarded to Lucia Gagliardi and the fellowship to Dilys Leung. The benefaction from the estate of ESA Founder, Dr Ken Wynne, continues to provide funding for the \$25,000 Ken Wynne Memorial Scholarship, recently awarded to Kristy Brown. In 2015 we will be offering two scholarships and two fellowship top ups. We will also be supporting our seminar, clinical weekend, scientific meeting and the newly established ESA ECR Career Development Workshop (run on the weekend prior to the ESA scientific meeting).

I look forward to seeing you at the upcoming meetings.



**Helena Teede,
President ESA**

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SCIENCE STRENGTHENING COMMITTEE

Announcing the formation of the ESA Scientific Strengthening Committee

Following discussions at the ESA Council Strategic Planning meeting in late 2014 it was decided to form a specific sub-committee of the ESA Council to focus on scientific strengthening across the basic and clinical research activities of ESA. This scientific strengthening committee will oversee the support of the POC, support strengthening activities in endocrine research, lead the new ECR Career Development Weekend, evaluate award nominations, drive representation on the POC of international committees, promote Australian engagement in international meetings, committees and awards, and foster links with international scientific societies.

The Committee will be chaired by Tim Cole (Hon Secretary) and include the following Council members Belinda Henry, Nicolette Hodyl, Craig Harrison, Chen Chen, and Bu Yeap, and also two co-opted senior ESA members, Peter Fuller and Gail Risbridger. The first major activity of the committee will be the organisation of the inaugural ESA ECR Career Development Weekend that will precede the ESA Annual Scientific Meeting in Adelaide in late August. We strongly encourage all postgraduate students and ECR members to attend this weekend that will focus on career planning and development.

The committee also welcomes other ideas and suggestions from all ESA members on the approaches and initiatives we can develop to continue to support the scientific endeavours of ESA and its members.

Tim Cole,
Chair, ESA Scientific Strengthening Committee
Helena Teede,
President, ESA

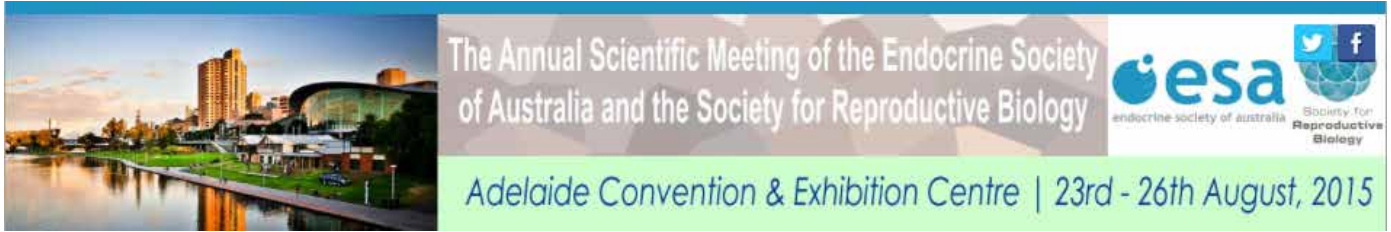
IMPORTANT DEADLINES:

Life member nominations	1 May 2015
ESA Mid Career Award	29 May 2015
Abstract deadline	12 June 2015
Novartis Junior Scientist Award	12 June 2015
Servier Award	12 June 2015
ESA Bryan Hudson Clinical Endocrinology Award	12 June 2015
ESA Travel Grants	12 June 2015
ESA IPSEN International Travel Grant Award	1 August 2015

REMINDER TO PAY YOUR SUBSCRIPTION DUES

ESA membership subscriptions are now due.

Please ensure that the Secretariat has all the correct mailing and contact details, particularly email addresses, as we rely on these to maintain contact with you and keep you informed of ESA activities.



ESA/SRB Annual Scientific Meeting

The 2015 ESA Annual Scientific Meeting will take place at the Adelaide Convention Centre between 23rd-26th August. Registration recently opened and in the past couple of months there has been constant activity through the meeting website including close to 200 new visitors. Sponsorship is strong for this year's meeting. This year there are 3 highly distinguished ESA Plenary speakers. Professor Richard Santen, current President of the American Endocrine Society will deliver the Harrison Plenary lecture and internationally renowned expert in thyroid cancer, Professor Michael Tuttle (USA), will give the Taft Lecture. Professor William Rainey (USA) will also deliver a plenary in the field of adrenal disease. In addition, Professor Steven Kahn has been invited to give the ESA/ADS plenary.

The POC are now finalising the symposia speakers with some great sessions lined up including themes such as “Novel Uses of Bone therapies in the cancer setting”, “Tumour Profiling in Endocrine Cancer” and “Skeletal fragility beyond BMD”. For the first time we are introducing a new joint ESA/ US Endocrine Society symposia, this year's theme entitled “Empowering the next generation of clinical and academic endocrinologists – what are the challenges?”. Abstract submissions will open soon.

**Ann McCormack,
Chair Programme Organising Committee**



**ESA Seminar – May 1-3, 2015
Novotel Sydney Manly Pacific**

The ESA Seminar again promises to provide a rewarding and thought-provoking educational experience, this year concentrating on Reproductive Endocrinology. We are very fortunate to have a stellar group of speakers, headlined by Professor Brad Anawalt from the University of Washington, USA. Sessions will include symposia on testosterone management and maximising fertility outcomes, case-based panel discussions on PCOS, Turner's syndrome, and amenorrhoea diagnosis and management, talks on HRT prescribing, gynaecomastia, managing gender dysphoria, Andrology Australia, and the ever-popular masterclass with Professor Anawalt.

An RACP supervisor's workshop will also be available for interested Endocrinologists on the Saturday afternoon, in addition to the usual social activity offerings. Attendance at a supervisor's workshop is an excellent opportunity to improve supervisory skills, and is likely to become compulsory for all RACP Advanced Trainee Supervisors into the future.

Registration for the ESA Seminar has been strong, although space is still available. All program and registration details can be found at www.esaseminar.org.au. We look forward to seeing you there.

**Don McLeod
Chair, ESA Seminar Organising Committee**



The Organising Committee welcomes all students and interested scientists to the 2015 ESA Basic Career Development Weekend.

Website:

<http://esamentorworkshop.org/>

When:

22-23rd August

(immediately preceding the Annual Scientific Meeting).

Where:

Stamford Grand, Glenelg, Adelaide.

Focus:

The weekend is focussed on mentorship and career development. There will be a number of leading Australian researchers who will provide insight into career development.

International Plenary:

We welcome Professor William Rainey (University of Michigan), who will provide personal insight into the development of an internationally renowned career.

Included Topics:

Fellowship funding: how to stay one step ahead.

Alternative sources of funding:

looking beyond NHMRC

How do basic scientists develop translational strengths?

Travel grants will be available for students and early career researchers (5 years post-doctoral).

Further information will be shortly available.

We look forward to seeing you in Adelaide.

Dr Belinda Henry

Chair, Organising Committee



ESA Clinical Weekend

Website: <http://www.esaclinicalweekend.org.au/>

We are looking forward to welcoming all trainees, supervisors and interested clinicians to the 2015 ESA Clinical Weekend. This weekend meeting will be held on the weekend preceding the Annual Scientific Meeting (Friday August 21st to Sunday August 23rd) at the Stamford Grand in the beach town of Glenelg, Adelaide.

We look forward to stimulating case discussions based on presentations by our advanced trainees supported by plenaries by our international guests, Professor Richard Santen and Professor Michael Tuttle, both renowned speakers and clinicians in the fields of breast cancer and advanced thyroid cancer respectively.

Advanced trainees, get thinking and writing! Case study submissions are now open! We are particularly interested in "Reproductive Endocrinology" and "Thyroid Cancer" cases to reflect the interests of our international guest speakers, but all interesting diabetes and endocrine cases will be considered.

Uncommon endocrine conditions are often considered interesting, but we also welcome common endocrine cases that represent a clinical conundrum, have important take home messages, or display the use of novel diagnostic techniques or therapies.

Once again this year Clinical Endocrinology, as the ESA's clinical journal, has offered to fast track the publishing of a paper relating to the best clinical case presentation. We will also have a short session introducing trainees and clinicians to the free monthly online education modules Clinical Endocrinology has developed specifically for clinical endocrinologists. These can be viewed at <http://www.wileyhealthlearning.com/cen>.

We look forward to seeing you in Glenelg!

Tilenka Thynne

Endocrinologist and Clinical Pharmacologist, Flinders Medical Centre, Adelaide

On behalf of the 2015 Clinical Weekend Organising Committee.

ESA MEDICAL AFFAIRS SUB-COMMITTEE REPORT

Steady stream of tasks and enquiries for Medical Affairs

RACP-related:

Sexual Orientation, Gender Identity and Intersex Rights Report – written with assistance of Prof Garry Warne (life member). Submitted

Evolve – Choosing Wisely – identifying 5 areas of practice per sub-specialty which are unnecessary, inappropriate or ineffective clinical interventions and not cost-effective. Meeting in Sydney 4 March 2015 attended by Warrick Inder who spoke regarding the process ESA went through. Over 40 specialty societies represented at the meeting. Unanimous resolution was passed to proceed with this initiative. ESA to work with ADS, ANZBMS, ADIPS/SOMANZ and APEG, given areas of common interest. This project is ongoing.

Capacity to Train – Warrick Inder working on this

Newborn screening programs – Forwarded to APEG, but with invitation to submit a joint response. In particular the initiation of a screening program for CAH is required in Australia, as already exists in New Zealand (see JCEM 2015, 100:1002-8)

ESA MEMBERS RECOGNITION

Professor Susan R. Davis (Monash University) received the US Endocrine Society Laureate Award for International Excellence in Endocrinology at the 97th Annual Meeting of the Endocrine Society (San Diego, CA March 5-8, 2015)

This award is presented to an endocrinologist who has made exceptional contributions to endocrinology in their own country and/or internationally. Davis is internationally known for advancing the understanding of the role of androgens and estrogens in women, with research encompassing numerous aspects of women's health including breast cancer, cardiovascular function, obesity, cognitive function, mood, sexual function and musculoskeletal health. Her groundbreaking research has had a significant impact globally on women's health. She co-established the Jean Hailes Foundation, Australia's leading women's health educational organization, and has been recognized for her work with the Australian Aboriginal community.

Other:

ANZBMS position statement on secondary prevention of fracture – endorsed by ESA with suggestion of some minor modification

Androgen working group – Henry Burger to chair

TGA consultation regarding stem cell therapies - submitted

PCOS guidelines – aromatase inhibitors. Bronwyn Stuckey and Warrick Inder working on response to this by the end of March

Lucy Rose Clinic Jetstar advertisement – raised by ESA member. Letter to be written to member stating that ESA agrees with him that such clinics do not practice evidence based medicine but that unless specific instances of poor outcome are reported and/or complaints by the public made, we are unable to take any specific action.

Warrick Inder,
Chair ESA medical affairs sub-committee



Dr. Davis is a National Health and Medical Research Council of Australia Principal Research Fellow, Chair of Women's Health and Director of the Women's Health Research Program, School of Public Health and Preventive Medicine at Monash University, and Head of the Women's Specialist Health Clinic at the Alfred Hospital in Melbourne, Australia.

ANNUAL GENERAL MEETING

The Annual General Meeting of ESA will be held at
Adelaide Convention Centre on
Tuesday 25th August 2015 at 5.00pm
All members are encouraged to attend this meeting.

ESA WOULD LIKE TO THANK ESA AWARD SPONSORS

Ipsen Pty Ltd
Novartis Pharmaceuticals Australia Pty Ltd
Servier Laboratories (Australia)

HOT TOPICS

Mathis Grossmann's group has published a series of important papers on testosterone treatment in men with type 2 diabetes. Testosterone treatment in men with type 2 diabetes who have lowered testosterone levels but no evidence of pathological hypogonadism is controversial. In a randomised controlled clinical trial, the group from the University of Melbourne Austin Health reported that testosterone treatment, despite reducing fat mass and increasing muscle mass did not improve glucose metabolism in such men. In addition, in a secondary analysis there was no benefit in constitutional or sexual symptoms. In a subsequent meta-analysis of randomised clinical trials, testosterone treatment did not improve glycemic control or symptoms.

Effects of testosterone treatment on glucose metabolism and symptoms in men with type 2 diabetes and the metabolic syndrome: a systematic review and meta-analysis of randomized controlled clinical trials. Grossmann M, Hoermann R, Wittert G, Yeap BB. *Clin Endocrinol (Oxf)*. 2014 doi: 10.1111/cen.12664. [Epub ahead of print]

Effect of testosterone treatment on constitutional and sexual symptoms in men with type 2 diabetes in a randomized, placebo-controlled clinical trial. Gianatti EJ, Dupuis P, Hoermann R, Zajac JD, Grossmann M. *J Clin Endocrinol Metab*. 2014 99(10):3821-8.

Effect of testosterone treatment on glucose metabolism in men with type 2 diabetes: a randomized controlled trial. Gianatti EJ, Dupuis P, Hoermann R, Strauss BJ, Wentworth JM, Zajac JD, Grossmann M. *Diabetes Care*. 2014 37(8):2098-107.

Dr Jun Yang and Dr Morag Young's work

(GEMIN4 functions as a coregulator of the mineralocorticoid receptor. Jun Yang, Peter J Fuller, James Morgan, Hirotaka Shibata, Colin D Clyne and Morag J Young 2015 54:149-160) made the front cover of *Journal of Molecular Endocrinology*.

The mineralocorticoid receptor (MR) is critical in controlling sodium and potassium transport in epithelial cells, most notably in the kidney. However inappropriate activation of the MR can have devastating cardiac consequences such as heart failure. The wider use of MR antagonists to combat heart failure is often associated with unwanted epithelial effects such as hyperkalemia. To rationally design a tissue-selective MR modulator, it would be important to identify and appreciate the selectivity of coregulators, which mediate MR activity. In this study, we identified GEMIN4 as a novel corepressor of the mineralocorticoid receptor (MR). This finding significantly adds to the currently limited repertoire of known MR coregulators. Furthermore, it enhances our understanding of the molecular mechanisms underlying cell- or tissue-specific regulation of gene transcription by the MR, and may contribute to the rational development of a tissue-specific MR modulator.



Jyotsna Batra's group has published a large scale study in *Cancer Discovery*:

A large scale analysis of genetic variants within putative miRNA binding sites in prostate cancer 2015 Feb 17. [Epub ahead of print]. Shane Stegeman, Ernest Amankwah, Kerenaftali Klein, Tracy A. O'Mara, Donghwa Kim, Hui-Yi Lin, Jennifer Permuth-Wey, Thomas A. Sellers, Srilakshmi Srinivasan, Rosalind Eeles, Doug Easton, Zsofia Kote-Jarai, Ali Amin Al Olama, Sara Benlloch, Kenneth Muir, Graham G. Giles, Fredrik Wiklund, Henrik Gronberg, Christopher A. Haiman, Johanna Schleutker, Børge G. Nordestgaard, Ruth C. Travis, David Neal, Paul Pharoah, Kay-Tee Khaw, Janet L. Stanford, William J. Blot, Stephen Thibodeau, Christiane Maier, Adam S. Kibel, Cezary Cybulski, Lisa Cannon-Albright, Hermann Brenner, Radka Kaneva, Manuel R. Teixeira, PRACTICAL Consortium, Australian Prostate Cancer BioResource Amanda B. Spurdle, Judith A. Clements, Jong Y. Park, Jyotsna Batra.

microRNAs (miRNA) are well known endogenous, small non-coding RNA molecules with a key role in the regulation of gene expression. Genetic variations within the miRNA gene or within its target genes (collectively called miRSNPs) can affect the base-pairing between miRNAs and mRNAs, and hence, can create or abolish miRNA target sites- the concept used by Stegeman et al in their recent publication in *Cancer Discovery*. The authors investigated the role of 2,169 putative miRSNPs within the cancer related genes in prostate cancer by evaluating the genetic association of these miRSNPs in a large cohort approximately 50,000 individuals recruited through 23 studies involved in PRACTICAL consortium. This is the first large scale study conducted on miRSNPs in prostate cancer which led to the identification of Twenty-two miRSNPs to be associated with prostate cancer risk. As expected, these miRSNPs are mostly close to the previously identified prostate cancer risk region identified by Genome-wide Association studies; however, this study has narrowed down these regions

HOT TOPICS

of putative causal SNP lying within the potential candidate genes, thus leading to identification of PHC3, GMEB2, PDK1, ARL3, MCAT, TLLI2, TMEM17 candidate genes, whose function in cancer pathogenesis need to be evaluated in future study. The authors also reported two miRSNPs, rs1010 in VAMP8 and rs311497 in GMEB2, to be associated with aggressive prostate cancer.

It is interesting to note that the known prostate cancer biomarker PSA (encoded by KLK3 gene), has been highlighted using this approach. The authors also undertook functional validation studies and could actually demonstrate that over-expression of miRNA miR-3162-5p resulted in a 20% decrease in luciferase signal for the KLK3 rs1058205 SNP T allele vector construct whilst no significant change was observed for the C allele suggesting that miR-3162-5p has a specific affinity for the T allele. Further validating these results, they observed a 36% reduction in cellular KLK3 protein expression following miR-3162-5p over-expression in the LNCaP cell line (TT rs1058205 SNP), demonstrate that decreased KLK3 expression induced by miR-3162-5p targeting of the T-allele represents a mechanism by which the rs1058205 T-allele may be associated with increased prostate cancer risk. These observations are further supported by the association of KLK3 rs1058205 SNP with the serum PSA levels. The genetic factors influencing PSA expression may have implications in prostate cancer risk prediction, and interpretation of PSA screening might therefore need correction for these risk associated functional KLK3 genetic variants.

The authors also provided proof of concept by demonstrating the functional role of an miRSNP in VAMP8, which is associated with aggressive disease. It would be interesting to establish the functional impact of all 22 miRSNPs identified in this study on miRNA binding. It would also worth studying the combination of miRSNP and the affected miRNAs for their potential as diagnostic and prognostic biomarker for prostate cancer.

Dr Sally Abell, Dr Jessie Teng, Dr Anthony Dowling, Prof Michael Hofman, Prof Richard Maclsaac and Dr Nirupa Sachithanandan have published “Prolonged life-threatening hypoglycaemia following dose escalation of octreotide LAR in a patient with malignant polysecreting pancreatic neuroendocrine tumour” in *Endocrinology, Diabetes and Metabolism Case Reports* (Jan 2015).

The paper provides important learning points for the attention of physicians managing neuroendocrine tumours. It reports a rare case of metastatic pancreatic polysecreting neuroendocrine tumour with recurrent presentations attributed to hormonal oversecretion. Intervention required a multi-disciplinary approach including surgical, oncology, endocrinology and nuclear medicine input. The article focuses on the management of refractory hypoglycaemia due to insulin hypersecretion. Multiple medical therapies were trialed with limited success and the patient was hospital dependent for glycaemic supports.

The authors detail the unusual and concerning side effect of paradoxical hypoglycaemia post long-acting octreotide despite initial tolerability. They discuss the pitfalls of somatostatin analogue therapy, the mechanisms that may contribute to hypoglycaemia, and need for close supervision of therapy. A brief but comprehensive discussion of currently available and novel therapies for insulinoma follows.

The patient achieved disease stabilization and gradual resolution of hypoglycaemia with peptide receptor radionuclide therapy, an emerging therapeutic option for metastatic neuroendocrine tumours with high efficacy and low toxicity.

Dr Beverly T Rodrigues, Zulfiquer Otty, Kunwarjit Sangla and Vasant V Shenoy have published “Ipilimumab-induced autoimmune hypophysitis: a differential for sellar mass lesions” in *Endocrinology, Diabetes and Metabolism Case Reports* (Dec 2014).

In summary, this case report documents the clinical progression of 2 patients at our centre who developed autoimmune hypophysitis, which was treated with different regimens and produced good endocrine outcomes. The era of immune modulation using anti-CTLA-4 biological therapy (Ipilimumab) against advanced cancers like metastatic melanomas has now resulted in a new form of hypophysitis being increasingly recognised under a spectrum of immune-related adverse events (IRAEs). Drug-related autoimmune hypophysitis (AH) often presents with subtle symptoms and a pituitary mass, with the potential for fatality necessitating

NOMINATION FOR LIFE MEMBERSHIP

Nomination by any ESA member (of at least 5 year membership), to be seconded by another ESA member and accepted by the nominee (via a nomination form).

Considered and approved by a Council vote at the May 2015 ESA Council meeting. Life Membership will normally be limited to one recipient per year.

Criteria for ESA Life Membership:

- Age over 55.
- Member of ESA for 25 years or more.
- May have served on ESA Council, but have been off Council for a minimum of 2 years.
- Has made an outstanding contribution to research or clinical practice in the field of endocrinology in Australia.
- Is recognised as a high quality mentor/teacher through either supervision of higher degree candidates and/or clinical advanced training in endocrinology.

ESA Life Membership nomination form 2015

Provide your CV including the information listed below.
Contribution to ESA-POCs /meetings/Committees-
Endocrine Track Record (Publications)
Endocrine Track Record – Endo & General awards
Mentoring or teaching of HDR or clinical trainees

Deadline: Friday 1st May 2015

Download life member nomination form from:
<http://www.endocrinesociety.org.au/life-members.asp>

ESA AWARDS

Website:

<http://www.endocrinesociety.org.au/awards-and-grants.asp>

ESA Senior Plenary Award

This award recognises an outstanding research career in the field of Endocrinology in Australia. The award comprises a plaque and a plenary lecture at the Annual Scientific Meeting, and complimentary meeting registration.

Eligibility:

Active ESA member with extensive research experience, output and impact in any field of Endocrinology post-higher degree (PhD, MD or FRACP). The awardees must attend the ASM to present their lecture.

Applications Close: 12 June 2015

ESA Mid-Career Research Award

This award is designed to recognise an outstanding mid-career researcher in endocrinology. The award comprises a plaque and 20-minute lecture at the Annual Scientific Meeting, and complimentary meeting registration.

Eligible applicants are active ESA members with five to 12 years' research experience post-higher degree (PhD, MD or FRACP) at the deadline of application (exceptions can be made for career interruptions). The winner must attend the ASM to present their lecture. The award will be made by a selection committee comprising the ESA Council members and the Chair of the ESA POC.

Applicants will be notified at the close of abstract submissions for the ASM, and the winner will be asked to provide an abstract for their lecture within three weeks of notification, to be included in the ASM Proceedings.

The ESA encourages all eligible members to apply for this new award.

Application Deadline: 29 May 2015

Bryan Hudson Clinical Endocrinology Award

The Bryan Hudson Clinical Endocrinology Award will recognize the best clinical research presentation at the Annual Scientific Meeting by an active member of the Endocrine Society of Australia early in their career. It will be made on an annual basis.

Eligibility:

Society members who are less than 45 years of age, or are within 10 years of obtaining professional qualifications and who are current financial members of at least 12 months standing.

Applications Close: 12 June 2015

ESA Travel Grants to attend the ASM

The ESA will provide funds to support travel to the 2015 Annual Scientific Meeting of the Endocrine Society of Australia to be held on 23-26 August 2015, Adelaide, Australia. The amount of funding and the individual success of applicants will be decided by Council. Preference will be given to full time students funded by a scholarship and presenting an abstract at this meeting.

Applications close: 12 June 2015

ESA / IPSEN International Travel Grant Award

Aim:

To support younger members of the society to travel to international meetings, laboratories and/or clinics to further their training and knowledge in Endocrinology.

Awards:

One award of \$3500 will be granted to assist with the costs of international travel.

Deadline:

1 August 2015

Further information:

<http://www.endocrinesociety.org.au/awards-and-grants.asp#esa>

ESA-Novartis Junior Scientist Award

The ESA-Novartis Junior Scientist Award is given for the best presentation at the Annual Scientific Meeting by an advanced trainee or a person enrolled for a higher degree (PhD, MD, FRACP). Applicants will be judged initially on the basis of their Abstracts and a short list of applicants will be chosen to present in a special session. Applicants will be informed of the session in which they are to present when acceptances of Abstracts are sent out.

Eligibility:

Nominees must be members of the Endocrine Society of Australia and be an advanced trainee or a person enrolled for a higher degree (PhD, MD, FRACP).

Application Deadline: 12 June 2015

Servier Young Investigator Award

The Servier Award is made annually to recognise the best scientific paper published in the 12-month period preceding the closing date for abstracts for the Annual Scientific Meeting by an active member of the Endocrine Society of Australia early in their career.

The award is given for a single publication although up to two additional papers may be submitted in support of the application.

Eligibility:

Society members who are within 8 years of having obtained a higher degree or diploma (i.e. PhD, MD, FRACP) and who are currently financial.

Application Deadline: 12 June 2015

FIND AN ENDOCRINOLOGIST

The Endocrine Society of Australia receives regular enquiries to recommend an endocrinologist with particular interests or expertise. Endocrinology is a broad field, which includes some very common conditions, but also some very rare ones. As a result, people who have rare conditions may benefit from seeing a specialist with additional experience or expertise. The Society comprises clinical endocrinologists and also scientists, who research endocrine disorders but do not see patients. Clinical members of the Society have been invited to submit their contact details and self-nominated areas of interest. Please note that the Endocrine Society of Australia is providing this as a community service to help patients find a suitable endocrinologist (considering both geographical issues and area of interest). The Society is not endorsing or recommending any of the listed clinicians or their degree of expertise.

The general public will be able to search for an Endocrinologist in this section: <http://www.endocrinesociety.org.au/search-for-an-endocrinologist.asp>

If you would like to be listed in 'Find an Endocrinologist' Log in at the ESA homepage: <http://www.endocrinesociety.org.au/>
Go to edit my details

FIND A RESEARCHER

NEW ESA INITIATIVE!

ESA Council would like to provide a facility for members to explore research interests represented within the Society, identify researchers who are willing to review manuscripts or grants, and those willing to receive invitations to speak at local or national meetings. The primary aim is to encourage research interactions and collaborations, the secondary aims are to raise the profile of emerging and early career researchers and establish the Society's membership as a valuable national resource for peer review activities related to research.

Council encourages ESA members to "opt in" by providing details of their qualifications, training, current position, research interests and "top 5" recent publications to a member-access database. The database will provide a means for researchers to identify potential collaborators, and promote interactions between clinical and laboratory-based researchers within the Society. These data will be accessible only to other members of ESA.

If you would like to be listed in 'Find a Researcher' Log in at the ESA homepage: <http://www.endocrinesociety.org.au/>
Go to resources

PATIENT RESOURCES IN ENDOCRINOLOGY

A partnership between ESA and the US Endocrine Society



<http://www.endocrinesociety.org.au/patient-resources/index.asp>

The Endocrine Society of Australia have established an international collaboration with the US Endocrine Society to adapt patient information to the Australian setting and make them readily available.

These resources are rigorously developed, evidence based and aimed to support patients to understand their endocrine condition with the support of their doctor.

<http://www.hormone.org/audiences/international-resource-center/australia>
These are available in both English and Chinese.

*This information is designed to be informative and educational. It is not intended to provide specific medical advice or replace advice from your doctor.

***Please note that only the information on the Australian link above is adapted to national settings including medications and tests. Other resources on the US website may be helpful but may not be consistent with Australian practice.**

FUNDING GRANTS FOR WOMEN IN THE HEALTH CARE SECTOR

2015 NATIONAL INDUSTRY SCHOLARSHIP GRANT INITIATIVE

FOR THE DEVELOPMENT OF WOMEN'S LEADERSHIP ACROSS ALL INDUSTRY



In 2015 Women & Leadership Australia is administering a national initiative to support the development of female leaders across all sectors.

From March 2015 the initiative will provide women in the Health care sector with grants for leadership development. More specifically, grant applications are open to women employed in the Health care sector at three levels. Please click on the preferred program link for program and Grant Application details.

1. Senior Management and Executive level Women Leaders can apply for \$11,000 Individual Grants to undertake the Advanced Leadership Program.
2. Women Managers can apply for \$4,500 Individual Grants to undertake the Accelerated Leadership Performance Program.

3. Women at all management levels can apply for a limited allocation of subsidised seats to attend the Australian Women's Leadership Symposium in the following locations:

Adelaide Brisbane Canberra Melbourne Perth
Sydney Darwin Hobart

Should you wish to discuss the initiative in more detail please contact Shreya Aggarwal at the office of the National Industry Scholarship Program, Australian School of Applied Management on 03 9270 9000 or via SAggarwal@asam.edu.au

GENETIC STUDIES OF BILATERAL MACRONODULAR ADRENAL HYPERPLASIA

An independent investigator initiated study

Principal Study Investigators: Dr Lucia Gagliardi, Professor David Torpy, Professor Hamish Scott

Dear Colleagues

As many of you will be aware, for some time we have studied the genetic basis of bilateral macronodular adrenal hyperplasia causing Cushing's syndrome. Recently, we and others have reported on various germline mutations in Armadillo-repeat containing 5 (ARMC5) as underlying the cause of BMAH in many cases. The cause of BMAH in patients who do not have ARMC5 mutations is unknown. In addition, many patients with BMAH have been reported to have non-adrenal tumours – whether there is a common genetic mechanism underlying adrenal and non-adrenal tumours is not well understood.

We are currently recruiting for our ongoing studies which aim to add to the catalogue of ARMC5 mutations underlying BMAH, as well as potentially identify other genes responsible for BMAH in ARMC5 mutation negative patients. We also aim to determine the pathogenesis of non-adrenal tumours occurring in patients with BMAH.

We are recruiting patients with bilateral macronodular adrenal hyperplasia (at least one nodule of at least 1cm diameter in each adrenal) and any of:

1. Cushing's syndrome
2. subclinical Cushing's syndrome
3. primary aldosteronism
4. sex steroid hypersecretion
5. no hormone hypersecretion

If you have a patient who may be interested in participating, then please contact Dr Lucia Gagliardi (lucia.gagliardi@health.sa.gov.au), with a brief clinical history and the patient's contact details. We will send an information sheet to the patient, consent them for the study and arrange for sample collection. We may be in touch with you for further clinical details after enrolling the patient in our study, but otherwise volunteering your patient for our study should not add to your workload. This study is being conducted at the Royal Adelaide Hospital and Centre for Cancer Biology, SA Pathology, and has been approved by the Royal Adelaide Hospital Human Research Ethics Committee.

ESA JOURNALS

Access all journals at <http://www.endocrinesociety.org.au/esa-journals.asp>

- Clinical Endocrinology
- Journal of Endocrinology
- Journal of Molecular Endocrinology
- EDM Case Reports
- Australian Endocrinology Research Review
- Australian Endocrinology Research Review

THE CLINICAL ENDOCRINOLOGY EDUCATIONAL MODULES

In 2013, the Endocrine Society of Australia joined the Society for Endocrinology (UK) in adopting Clinical Endocrinology (CEN) as their Society's official journal.

This was a stimulus for the Editors to activate an initiative, which had been planned for 2 years, to “unlock the educational potential” of the Journal. Although the Journal's Impact factor (currently 3.3) remains the key benchmark, the Editors believe that articles published in a Society's clinical journal should also be tailored for continuing education and specialist training. With this goal in mind, CEN Educational modules are based on articles which are in press or recently published in CEN. The module expands the paper into a topic by including:

- Revision Material to provide background
- Take Home messages to emphasise the clinical points
- Expert Commentary to integrate the material from the article into the current literature which it is intended to be useful for preparation of Journal Club and other clinical presentations.
- Multiple Choice Questions (using FRACP format and standard) to test understanding of the module content.
- Historical Context to provide a broader understanding of the Art and History of Endocrinology.

The modules identify the components of the RACP and RCP's curricula which are covered by the module and each module has clearly defined Learning Objectives. On completion of the module, a printed certificate documenting time spent on the module can be downloaded for CPD purposes.

The modules are accessible by registering at:
www.wileyhealthlearning.com/cen

To date the website contains the following modules:
and 21 Hydroxylase deficiency and Transition care.

- Module 10 Anti-Müllerian Hormone and PCOS
- Module 11 BRAFV600E Mutations and the Prognosis of Papillary Thyroid Carcinoma
- Module 12 Vitamin D Deficiency and replacement in Primary Hyperparathyroidism
- Module 13 Diagnosing unilateral primary (Hyper) aldosteronism

Modules due for release during 2015:

- Module 14 Investigation of adrenal tumours: how to spot adrenocortical carcinoma
- Module 15 Glucocorticoid replacement therapy in adrenal insufficiency
- Module 16 Diagnosis and management of Graves' thyrotoxicosis
- Module 17 T cell receptor rearrangement excision circles in Graves' – challenging the current paradigm of immune senescence in autoimmunity

Each module is written by either an advanced trainee or a consultant endocrinologist with an interest in the particular topic from Australia or the UK. The module is then reviewed by an expert in the field to ensure balance and validity of the material.

Rebecca Reynolds (R.Reynolds@ed.ac.uk) is the CEN Editor responsible for selecting papers for the modules and arranging authors and reviewers. She invites comments and contributors for this project.

DATES FOR THE DIARY

2015

15-18 April 2015

The 8th International DIP Symposium on Diabetes, Hypertension, Metabolic Syndrome & Pregnancy
Berlin, Germany
Website: <http://www.comtecmec.com/dip/2015/>

16-17 April 2015

Sydney Diabetic Foot Conference
Liverpool Hospital, Sydney

24-26 April 2015

2nd SAFES (South Asian Federation of Endocrine Societies) summit
Dhaka, Bangladesh, India
Website: <http://2ndsafessummit2015.com/>

25-28 April 2015

ECTS IBMS Joint Meeting
Rotterdam, The Netherlands
Website: <http://www.ects-ibms2015.org/>

30 April-3 May

2015 Seoul International Congress of Endocrinology and Metabolism (SICEM)
Walkerhill Hotel, Seoul, Korea
Website: www.sicem2015.org

1-3 May 2015

ESA Seminar Meeting
Novotel, Manly Pacific, Sydney
Website: <http://www.esaseminar.org.au/>

16-20 May 2015

17th European Congress of Endocrinology (ECE 2015)
Dublin, Ireland
Website: <http://www.ece2015.org/>

18-19 May 2015

AACB 4th Harmonisation Workshop
Adina Apartments, Mascot, Sydney
Website: <http://www.aacb.asn.au/events/event/harmonisation-workshop-2015>

24-27 May 2015

RACP Congress 2015
Breaking Boundaries Creating Connections
Cairns, Australia
Website: <http://www.racpcongress2015.com/>

27-30 June 2015

7th International Conference on Children's Bone Health
Salzburg, Austria
<http://www.iccbh.org/>

21-23 August 2015

ESA Clinical Weekend
Adelaide, SA
Website: <http://www.esaclinicalweekend.org.au/>

23-26 August 2015

ESA/SRB ASM
Adelaide Convention Centre
Website: <http://www.esa-srb.org.au/>

27-29 August 2015

Sex, steroids, fat and breast cancer
Uluru Meeting Place

27-29 August 2015

8th International Congress on Farm Animal Endocrinology
Billund, Denmark
Website: <http://anis.au.dk/en/icfae-2015/>

27-29 August 2015

ADS/ADEA ASM
Adelaide Convention Centre
Website: <http://www.ads-adea.org.au/>

25-27 September 2015

19th Congress of the Australian Menopause Society
Canberra
Website: <https://www.menopause.org.au/health-professionals/ams-congress-centre>

7-10 October 2015

ISPAD/APEG Annual Meeting
Brisbane, QLD
<http://www.ispad-apeg.com/>

9-12 October 2015

ASBMR 2015
Seattle, Washington, USA
<http://www.asbmr/meetings>

1-4 November 2015

ANZBMS ASM
Hobart, Tasmania
Website: <https://www.anzbms.org.au/>

10-13 December 2015

AFES 18th Congressis jointly organised by the Malaysian Endocrine and Metabolic Society and the ASEAN Federation of Endocrine Societies
Kuala Lumpur Convention Centre, Malaysia
Theme: Advancing the Frontiers of Endocrinology in Southeast Asia.
Email: afes2015sec@gmail.com

DATES FOR THE DIARY

2016

1-4 April 2016

ENDO

Boston, MA

Website: <https://www.endocrine.org/meetings/endo-annual-meetings>

28 May – 1 June 2016

18th European Congress of Endocrinology (ECE 2016)

Munich, Germany

Website: <http://www.esa-hormones.org/meetings/>

19-21 August 2016

ESA Clinical Weekend

Queensland

Website: <http://www.esaclinicalweekend.org.au/>

21-24 August 2016

ESA/SRB Annual Scientific Meeting

Gold Coast Convention Centre

Website: <http://www.esa-srb.org.au/>

25-28 August 2016

ADS/ADEA Annual Scientific Meeting

Gold Coast Convention Centre

Website: <http://www.ads-adea.org.au/>

31 August – 4th September 2016

ICE/ENDO

Beijing, China

Website: <http://www.endosociety.com/events.html>

16-19 September 2016

ASBMR Annual Meeting

Atlanta, Georgia, USA

Website: <http://www.asbmr.org/meetings/annualmeeting.aspx>

6-9 November 2016

AHMRC

Gold Coast Convention Centre

Website: <http://www.ahmrcongress.org.au/>

2017

1-4 April 2017

ENDO

Orlando, Florida

Website: <https://www.endocrine.org/meetings/endo-annual-meetings>

17-21 June 2017

ANZBMS/IBMS Joint Meeting

Brisbane, Queensland

Website: <https://www.anzbms.org.au/>

2018

1-4 December 2018

ICE 2018

Cape Town, South Africa

Website: <http://www.endosociety.com/events.html>

ENDOCRINE SOCIETY OF AUSTRALIA – COUNCIL AND OFFICE BEARERS 2015

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