For those of you who read my last report, you will recall it was written from Spain. Running the ESA from the Iberian peninsula has a number of attractions but substantial and ongoing practical difficulties forced the return of the President’s office from Toledo to the Austin Hospital, Heidelberg, Victoria.

At the start of a new Council it is wise to address the question of what the Council, the Executive and the President of the ESA actually do. The unkind may say the answer to this question is to meet regularly, have the occasional meal together and allow Ivone Johnson to get on with the task of running the Society. It turns out that the current Council is quite keen to listen to the views of the members to see whether any changes are required. For many members their only contact is coming to the occasional meeting. The view that the ESA’s main function is to organise high quality, scientific and clinical meetings is accurate. This is our main approach to facilitating high quality, research and clinical endocrinology.

The Council has been discussing possible changes to the ESA and we look to the members for feedback.

Changes to Council
The ESA Council can have quite a significant turnover in any one electoral cycle. We do not seem to have a formal role for the outgoing President nor do we have a President elect. Several changes to the Council structure might improve its corporate memory. These changes include:

a) Creating the position of past President, in order to capture the expertise of the outgoing President for another two year cycle.
b) Changing the position of Vice President to that of President elect.
c) Electing half the Council at a time for either a 2 or 4 year cycle.

Financial Changes
Those in the know may realise that the ESA is in a very sound financial state. We have come to a decision point, should we continue building our reserves or should we use the interest from these reserves for fellowships or research grants. A midway position would be to use some of the money for these purposes but continue to build reserves with the rest of our income. We look to you for feedback on these matters. The names and email addresses of Council members were published in the last edition of the newsletter, are in this newsletter and are available on the web site. Please feel free to contact any of us about these matters. If we wish to change something substantial it will need to be done at the Annual Scientific Meeting in September 2005 for implementation the following year.

Details of Annual Scientific Meeting
Abstracts Due: 9 May 2005
Application details for 2005 Servier Award
ESA Mayne Pharma Bryan Hudson Clinical Endocrinology Award
Novartis Junior Scientist Award

Details of ESA Travel Grants

Sponsors of the Endocrine Society of Australia:
The Society gratefully acknowledges support from the following sponsors:

Major Corporate Sponsors
• GlaxoSmithKline
• Servier Laboratories (Australia)

Corporate Sponsors
• Ipsen Pty. Ltd.
• AstraZeneca Pty. Ltd.
Clinicians and Scientists
As a clinician who does basic endocrine research, I spend time in several different worlds which overlap less than I would like. It disappoints me that many practising endocrine physicians have little knowledge of research, other than that related to the immediate practical questions regarding treating their patients efficiently and effectively. Conversely, it never ceases to surprise me how little some practising endocrine scientists know of clinical endocrinology. I see one of the main functions of the ESA to break down the barriers between endocrine scientists and endocrine clinicians. The ideal place for this is at the scientific meetings. Suggestions on how to do this are welcome.

Jeffrey Zajac

IMPORTANT DEADLINES:
AWE Travel Awards 15th April 2005
Abstract deadline 9th May 2005
Novartis Junior Scientist Award 9th May 2005
Servier Award 9th May 2005
ESG Mayne Pharma Bryan Hudson 9th May 2005
Clinical Endocrinology Award 9th May 2005
ESG Travel Grants 9th May 2005
ESG International Travel Award 1st August 2005

REMINDER TO PAY YOUR SUBSCRIPTION DUES
All ESA membership subscriptions are due by the end of June 2005. If paid after this date a late fee will apply. 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. Membership to the ESA permits access to all meetings, obtaining membership registration, opportunity to apply for the various ESA awards/Travel Grants and the ESA newsletter.

You will be sent your subscription renewals shortly.

AUSTRALASIAN WOMEN IN ENDOCRINOLOGY
“WE” are delighted to announce that the Annual AWE Travel Grants from Diagnostic Systems Laboratories, Novo Nordisk and Abbott-Medisense have been increased to $1500 each, and are available to attend ENDO 2005. These awards are to assist senior PhD students and post-doctoral fellows who are AWE members and presenting at ENDO 2005 in San Diego. Application forms are available from the ESA website, and the deadline for receipt of applications is April 15th 2004. The 6th meeting of AWE will again be supported by DSL-Australia and will be held on Sunday September 4th, in conjunction with the commencement of the ESA-SRB conference in Perth. Please register for the 6th Women in Endocrinology reception in advance when you register for the ESA/SRB conference.

Cathie Coulter
Founder and Director, AWE

2005 CLINICAL WEEKEND DETAILS
The 2005 ESA Clinical Weekend will be held at The Novotel Vines Resort on September 2-4. On behalf of the Organizing Committee, we look forward to welcoming you to a weekend of conviviality in the relaxing environment of the Swan Valley, ~45 minutes from central Perth. The educational value is important, however, and directly proportional to the instructiveness of the cases presented. The Organising Committee is now calling for cases to be submitted from trainees and their supervisors to allow a preliminary program to be structured. Could supervisors please discuss potential cases further with their trainees and then, with the trainee, forward summaries of the cases, with comments about the educational points raised by the case to:

Dr. Seng Khee Gan
For the Clinical Weekend Organising Committee
Department of Diabetes and Endocrinology
Royal Perth Hospital
Wellington St Campus
Box X2213 GPO
Perth, WA 6847
Fax (08) 9224 7044
E. seng.gan@health.wa.gov.au
ENDOCRINE SOCIETY OF AUSTRALIA
COUNCIL AND OFFICE BEARERS

Professor Jeffrey Zajac (President)
Department of Medicine
Austin & Repatriation Medical Centre
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Tel: (03) 9496 5198
Fax: (03) 9496 5485
Email: j.zajac@unimelb.edu.au

Professor Leon Bach (Vice-President)
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Fax: (03) 9457 5485
Email:l.bach@unimelb.edu.au

Dr Mark McLean (Honorary Secretary)
Department of Endocrinology
Westmead Hospital
Hawkedbury Road
Westmead NSW 2145
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Fax: (02) 9635 5691
Email: mmclean@med.usyd.edu.au

Dr Vicki Clifton (Treasurer)
Mothers and Babies Research Centre
John Hunter Hospital
Locked Bag #1
Hunter Region Mail Centre
Newcastle NSW 2310
Tel: (02) 49 855 641
Fax: (02) 49 214 394
Email: vclifton@mail.newcastle.edu.au

Dr David Torpy
Endocrinology & Metabolic Unit
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Royal Adelaide Hospital
Adelaide SA 5000
Tel: (08) 8222 5520
Fax: (08) 8222 5908
Email: david.torpy@adelaide.edu.au

Dr Catherine Choong
School of Pediatrics & Child Health M561
University of Western Australia
Princess Margaret Hospital for Children
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Fax: (08) 9388 2097
Email: catherinee@ichr.uwa.edu.au

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Fax: (03) 9594 6125
Email: evan.simpson@phimr.monash.edu.au

Professor David Healy
Department of Obstetrics & Gynaecology
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Fax: (03) 9594 6389
Email: david.healy@med.monash.edu.au

Dr David Phillips (Newsletter Editor)
Monash Institute of Medical Research
Monash Medical Centre
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Fax: (03) 9594 7114
Email: david.phillips@med.monash.edu.au

ESA Secretariat
Mrs Ivone Johnson
145 Macquarie Street
Sydney. NSW. 2000
Tel: (02) 9256 5405
Fax: (02) 9251 8174
Email: esa@racp.edu.au

Mobile: 0414 454 085
Office Hours: 10.00am - 4.00pm
Tuesday, Thursday and Friday

SIGNIFICANT MEMBER HONOURS

Jock Findlay has been awarded the 2006 UK Society for Endocrinology Dale Medal. The medal is the highest accolade bestowed by the Society and acknowledges the level of excellence in reproductive health research. Jock is one of only five Australians to have ever won the award and he was recognised for his contribution towards a better understanding of the ovary, leading to improved knowledge of fertility and treating infertility in women.

A major light in reproductive research, Jock has worked in the field for more than 30 years and was one of the original collaborators on the first papers produced regarding hormone replacement in women receiving IVF (in vitro fertilisation) treatment. He has served on a number of advisory committees for the Reproductive Health and Research Department of World Health Organisation in Geneva, Switzerland and ultimately was Chair of the WHO Scientific and Technical Advisory Group on Reproductive Health.

In 2001, he was recognised in Australia for his contributions by being made a Member of the Order of Australia. Congratulations, Jock, from the ESA on this prestigious award!

EN3OCRINE SOCIETY OF AUSTRALIA TRAVEL GRANTS

Applications are called for travel grants to the 2005 Annual Scientific Meeting, with these grants intended to assist junior members of the society to attend the meeting.

Applications should be addressed to:
Dr Mark McLean
Honorary Secretary
Endocrine Society of Australia
145 Macquarie Street
Sydney NSW 2000
Email applications will not be accepted.

The applications should include
5 copies each of:
• submitted abstracts
• a brief CV.

Closing Date: 9th May 2005

Eligibility:
1. Only members of the society may be awarded travel grants. (Membership must be ratified by Council.)
2. The categories of applicant in order of decreasing priority for consideration are:
   • Full time student (postgraduate) presenting an abstract
   • Research assistant/research officer (NH&MRC scale)
   • Full time student (postgraduate)
   • RA/RO.
3. The supervisor should certify the category and advise whether any other specific support is available from the institution, i.e. travelling scholarship/grant.
4. Generally ineligible for a travel grant are:
   • Members in higher positions than RO
   • Members who are physicians or PhDs more than 7 years post-doctorate
   • Members resident in a country other than Australia.
NEW MEMBERS

The Society welcomes the following new members: Damon Bell, Suresh Bohra, Kenneth Chen, Will Dransfield, Iwona Gileff, Veena Jayadev, Sue Lau, Niranjala Peris, Kunwarjit Sangla, Kjiana Schwab, Casey Smith, Natacha Sorour and Gregory Wilcox.

DIABETES, PSYCHOTIC DISORDERS AND ANTIPSYCHOTIC THERAPY: A CONSENSUS STATEMENT

Assoc Prof Tim Lambert and Dr Leon Chapman, on behalf of the Consensus Panel.

This Consensus Statement represents the collaborative work of multidisciplinary professionals following an independent meeting in August 2003. It was revised based on reviewer comments in April 2004 and submitted for publication in June 2004. The Companion Document for Consumers and Carers and Diabetes and Psychotic Disorders were developed by the Mental Health Council of Australia in collaboration with the National Consumer and Carer Forum and reviewed by the Chairs of the Consensus panel.

These documents represent the work of dedicated professionals without whose contribution the outcomes would not have been possible. Further details of the Consensus Statement and accompanying documentation can be accessed through: http://www.psychiatry.unimelb.edu.au/open/diabetes_consensus/

ANNUAL SCIENTIFIC MEETING

PERTH, 4TH-7TH SEPTEMBER, 2005

This year’s program has an exciting line-up of plenary speakers. The Harrison Lecturer is Prof. Richard Pestell (USA), the Taft Lecturer is Prof. David Dunger (UK), the Japan-Australia Lecturer is A/Prof. Hiroyuki Namba and our other plenary lecturer is domestic speaker Prof. Roger Smith. Planned symposium topics include ‘Endocrine aspects of tumorigenesis’, ‘When the adrenal goes awry’, ‘Glycation and diabetes: from monitoring to pathogenesis’, ‘The genome-environment interaction in determining life course trajectory’, ‘Advances in primary and secondary osteoporosis’ and ‘Biological clocks in neuroendocrinology’, including joint sessions with SRB, ADS, ANZBMS and Neuroendocrinology. Two clinical meet the expert sessions are also planned, including one addressing thyroid conditions. Free-oral communication sessions, and unopposed poster sessions, will again feature at the Scientific Meeting.

Details of the program are at the conference website: http://www.esa-srb.org.au

Call for abstracts

The abstract deadline is Monday, 9th May 2005. There will be no hard copy submissions and abstracts can only be submitted by e-mail. As well as the instructions below, the conference website has details for abstract submission, including a checklist that must be completed.

Presentation Types

Submissions will be accepted for two types of presentation: oral and poster. Although authors may indicate their preference for type of presentation, the final acceptance with regard to presentation type will be at the discretion of the ESA Program Organising Committee.
**2005 SERVIER 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 ESA early in their career. The award is given for the best presentation at the Annual Scientific Meeting by an advanced trainee or by a person enrolled for a higher degree (PhD, MD, FRACP). Nominees must be members of the Endocrine Society of Australia. Applicants will be judged initially on the basis of their submitted abstract 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. In addition to submitting their abstract to the above address (esa-srb@asnevents.net.au), applicants should email their abstract, a brief CV and a supporting letter from their supervisor as attachments to Dr Stephen Twigg, Chair, POC at stwigg@med.usyd.edu.au

Please type ‘Novartis award application’ in the subject line. Additionally, a hard-copy declaration that the work is the applicant’s own must be signed by both the applicant and supervisor and sent to Dr Stephen Twigg, Discipline of Medicine (D06), University of Sydney, NSW 2006. Applications must be received by the abstract deadline (Monday, 9th May).

**2005 NOVARTIS JUNIOR SCIENTIST AWARD**

The Novartis Junior Scientist Award is given for the best presentation at the Annual Scientific Meeting by an advanced trainee or by a person enrolled for a higher degree (PhD, MD, FRACP). Nominees must be members of the Endocrine Society of Australia. Applicants will be judged initially on the basis of their submitted abstract 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. In addition to submitting their abstract to the above address (esa-srb@asnevents.net.au), applicants should email their abstract, a brief CV and a supporting letter from their supervisor as attachments to Dr Stephen Twigg, Chair, POC at stwigg@med.usyd.edu.au

Please type ‘Novartis award application’ in the subject line. Additionally, a hard-copy declaration that the work is the applicant’s own must be signed by both the applicant and supervisor and sent to Dr Stephen Twigg, Discipline of Medicine (D06), University of Sydney, NSW 2006. Applications must be received by the abstract deadline (Monday, 9th May).

**2005 ESA MAYNE PHARMA BRYAN HUDSON CLINICAL ENDOCRINOLOGY AWARD**

This Award, now running for the second year, has been introduced to promote research in Clinical Endocrinology and the profile of Clinical Endocrinology Research at the Annual Scientific Meeting of the Society. The Award will be made for the best presentation in the field of clinical endocrinology by an active member of the Endocrine Society of Australia early in their career. Society members who are less than 45 years of age or who are within 10 years of obtaining professional qualifications, and who are current financial members of at least 12 months standing, are eligible to apply. The 2005 ESA Mayne Pharma Bryan Hudson Clinical Endocrinology Award applications need to be made directly to ESA, not the conference secretariat. Please note that all abstracts with a predominant clinical content will be eligible for assessment, as long as the applicant meets the criteria described.

Visit the ESA Website:
http://www.racp.edu.au/esa/awards.htm#hudson

Closing Date: 9th May 2005
ESA INTERNATIONAL TRAVEL GRANTS

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

Eligibility
Applicants must have been financial members of ESA for at least 12 (twelve) months prior to the closing date for applications. Applicants must possess a higher degree (MD, PhD or equivalent), and be within 5 (five) years of the award of that degree. Compensation will be given for those applicants who have spent periods outside the workforce (due to illness, family leave etc). In these cases the criterion of 5 (five) fulltime equivalence will be applied, and the applicant must verify their absence from the workforce in the application.
Applicants must be attending a recognized meeting of a learned society or organization within the general field of Endocrinology.

Award
$A2,500 given twice a year

Selection Criteria:
In addition to the above, preference will be given to applicants:
1. who are giving a presentation at the meeting they wish to attend;
2. who will visit a laboratory(ies) and/or clinic(s) associated with their field of endocrinology;
3. who are active members of the society as evidenced by attendance at the Annual Scientific Meeting and other activities;
4. who are more the 2 (two) post the receipt of their higher degree.

Applications
Four (4) copies of the application should be sent to the Honorary Secretary of the Society by the closing dates (see below). The application should include a covering letter outlining the proposed itinerary and what benefits the applicant intends to obtain from the travel, a letter of support from their supervisor (who preferably is a member of the Society), details of the meeting they wish to attend (including submitted abstracts), details of the laboratories/clinics they wish to visit (including letters of invitation, where appropriate), and a brief CV (highlighting degrees, awards and published works).
Where an applicant is claiming the consideration of an extension of the time from the award of a higher degree (see eligibility criteria), they should providing supporting evidence of their reason for extension.

The applications to be sent to:
Dr Mark McLean
Endocrine Society of Australia
145 Macquarie Street
Sydney NSW 2000

Selection Panel:
A panel comprising the President, Vice-President, Honorary Secretary and Treasurer shall rank the applicants using the above criteria. If any member of the panel is unavailable, the council of ESA may co-opt another member of the society to the panel.

Closing dates:
Feb 1 and Aug 1 of each year.

Past winners of ESA International Travel Awards:
2003 - Emma Ball
2004 - Gordon Howarth
- Sophie Chan
- Vincenzo Russo
2005 - Stuart Ellem

IS VERTEBROPLASTY AN EFFECTIVE AND SAFE TREATMENT FOR OSTEOPOROTIC VERTEBRAL FRACTURES?

• Do you have a patient with a painful spinal fracture of less than 6 months duration?
• Was it due to osteoporosis?

IF YES, THEY MAY BE SUITABLE FOR OUR TRIAL.

We are conducting a randomised double-blind placebo-controlled trial into the efficacy and safety of vertebroplasty for the treatment of acute, painful osteoporotic vertebral fractures.

Participants in the trial will either receive a vertebroplasty or a sham vertebroplasty procedure and will be assessed at baseline, 1 week, 1, 3, 6, 12 and 24 months.

All procedures are free of charge for the participants.

We would be really grateful for your help in recruiting eligible people. Main inclusion criteria’s are:
1. patients who have one or two acute osteoporotic vertebral fractures and
2. back pain of 6 months or less duration

If you have a potentially eligible patient, please call the research co-ordinators:
Ms Lainie Wengier or Dr Jo Youd on Ph: 9508 1652

Please note:
• the trial is being conducted at the Cabrini, Royal Melbourne & Alfred Hospitals, and Monash Medical Centre
• the trial has ethical approval from Cabrini, Royal Melbourne & Alfred Hospitals, Monash Medical Centre, Monash University and Northern Health
• funding has been provided by the NHMRC with contributions from the Arthritis Foundation of Australia, Cook Australia and the Cabrini Education and Research Institute

Please feel free to contact us if you have any questions about the trial:
Rachelle Buchbinder for the Collaborative Vertebroplasty Research Group.
(rachelle.buchbinder@med.monash.edu.au)
Refrigerated storage of thyroxine tablets: a dangerous fallacy?

Since May 2004 Sigma, the Australian supplier of L-thyroxine sodium, has directed that tablets should be stored refrigerated. This move appears to stem from interaction between Sigma and the TGA in an effort to extend the shelf-life of thyroxine tablets (in sealed bottles) from 12 to 18 months. The refrigeration issue may seem trivial, but there are important consequences. For those whose medical classification could be downgraded if they become dependent on a refrigerated medication, for example in the military, the change could be a disaster and refrigerated storage is obviously a nuisance when medications need to be organized in Webster packs. While this instruction appears to have been accepted rather passively by pharmacists and physicians, it has puzzled those who have taken thyroxine for years. In response to enquiries from the major patient support groups, Sigma conceded within a few weeks that thyroxine could be safely stored at room temperature (<25°C) for up to a month, although refrigeration is still recommended.

There is concern and uncertainty about the potency, stability and bioavailability of synthetic thyroxine preparations, in particular, differences between the various generic and brand preparations available in the United States (1). However, the Australian directive that patients should store thyroxine, including already-opened bottles, at refrigerator temperature appears to be unique. None of the co-authors of an international website on thyroid disorders (2), has heard of a similar instruction anywhere else. If there is something unique about thyroxine in Australia, the facts should be made known to pharmacists, physicians and over 200,000 people who use thyroxine.

Most important, could storage of thyroxine at refrigerator temperature have an adverse effect? That synthetic thyroxine needs to be kept dry to preserve its stability is widely accepted (3). Anyone who has repeatedly opened and closed a refrigerated glass container is aware of condensation. A bottle containing thyroxine tablets will probably be opened about 200 times in a period of about six months. If the bottle is refrigerated, the contents will gradually become damp - gradual loss of potency would give the impression of progressive under-treatment. I now realize that I may have seen unexpected increases in serum TSH several times, in previously compliant patients, since refrigeration of tablets was introduced. Upward dose adjustment would be an obvious response. Change to a fresh preparation at the adjusted dose could then result in over-treatment, with significant danger, especially in the elderly.

I am not aware of data that show whether refrigeration of sealed bottles of thyroxine actually enhances shelf-life, but this could be a wise precaution for tablets in sealed bottles. However, repeated opening of refrigerated bottles in current use may be counterproductive and potentially dangerous. Until some obvious questions are sorted out, it may be safer to instruct patients NOT to store opened bottles of thyroxine at refrigerator temperature. If stability for up to 6 months at room temperature is really a problem, it may be necessary to consider dispensing less than 200 tablets in one bottle, as is generally done in the USA. In the face of pressure towards evidence-based practice in medicine, it may be worth applying the same principles to pharmaceutical practice, in both its manufacturing and regulatory branches.


2. Thyroid Disease Manager. www:thyroidmanager.org


Jim Stockigt
Epworth Hospital, Richmond 3121
Department of Endocrinology and Diabetes and Monash University Department of Medicine, Alfred Hospital, Melbourne, 3004
jrs@netspace.net.au
FUTURE MEETINGS

Australia & NZ:

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<thead>
<tr>
<th>2005</th>
<th>2006</th>
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<tr>
<td>ESA Clinical Weekend</td>
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<td>2-4 September 2005</td>
<td>ESA Annual Scientific Meeting</td>
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<td>The Novotel Vines Resort, Swan Valley, WA</td>
<td>4-7 September 2005</td>
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<td>Contact: ASN Events</td>
<td>Perth Convention Centre, Perth, WA</td>
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<td><a href="http://www.esaclinicalweekend.org.au/">http://www.esaclinicalweekend.org.au/</a></td>
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<td>ESA Annual Scientific Meeting</td>
<td>ADS/ADEA Annual Scientific Meeting</td>
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<td>4-7 September 2005</td>
<td>7-9 September 2005</td>
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<td>Perth Convention Centre, Perth, WA</td>
<td>Perth Convention Centre, Perth, WA</td>
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<td>Contact: ASN Events</td>
<td>Contact: Conference Action</td>
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<tr>
<td><a href="http://www.esa-srb.org.au/">http://www.esa-srb.org.au/</a></td>
<td><a href="mailto:emma@conferenceaction.com.au">emma@conferenceaction.com.au</a></td>
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<td>ANZBMS ASM</td>
<td>Sydney Bone and Mineral Group Meetings</td>
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<td>7-9 September 2005</td>
<td>Held on the 2nd Tuesday of March,</td>
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<td>InterContinental Burswood Resort, Perth, WA</td>
<td>Royal Sydney Yacht Squadron</td>
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<tr>
<td>Contact: Conference Action</td>
<td>May, July, September and November.</td>
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<tr>
<td><a href="mailto:emma@conferenceaction.com.au">emma@conferenceaction.com.au</a></td>
<td>33 Peel St, Kirribilli</td>
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<tr>
<td><a href="http://www.anzbms.org.au">http://www.anzbms.org.au</a></td>
<td>Time: 6pm for drinks and canapés, 6.30-8</td>
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<td>pm three 30 minute presentations</td>
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<td>Parking: Available underneath the venue,</td>
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<td></td>
<td>free of charge</td>
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<td>ESRA Annual Scientific Meeting</td>
<td>2006 Annual Meeting, American Society for</td>
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<td>21-23 August 2006</td>
<td>Bone and Mineral Research</td>
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<td>Gold Coast</td>
<td>23-27 September 2005</td>
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<td>Contact: ASN Events</td>
<td>Gaylord Opryland Hotel, Nashville,</td>
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<td><a href="http://www.esa-srb.org.au/">http://www.esa-srb.org.au/</a></td>
<td>Tennessee, USA</td>
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<td>Contact: Ms Ivone Johnson</td>
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<td>Email: <a href="mailto:anzbms@rACP.edu.au">anzbms@rACP.edu.au</a></td>
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International:

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<th>2005</th>
<th>2006</th>
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<tr>
<td>4th Asian-Pacific Congress of Hypertension (APCH2005)</td>
<td>13th International Thyroid Congress</td>
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<td>1-4 June 2005</td>
<td>30 October-4 November 2005</td>
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<td>Millenium Seoul Hilton, Korea</td>
<td>Buenos Aires, Argentina</td>
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<td>‘New Paradigm for Target Risk Control’</td>
<td>Contact: <a href="mailto:lothse@sion.com">lothse@sion.com</a></td>
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<td>ENDO 2004: 86th Annual Meeting</td>
<td>World Congress of Neurology</td>
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<td>4-7 June 2005</td>
<td>5-11 November 2005</td>
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<tr>
<td>San Diego Convention Center, San Diego, USA</td>
<td>Sydney</td>
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<td>Website: <a href="http://www.endo-society.org/scimeetings/futuremeetings.cfm">www.endo-society.org/scimeetings/futuremeetings.cfm</a></td>
<td><a href="http://www.aan.org.au">http://www.aan.org.au</a></td>
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<tr>
<td>Symposiwm on ‘Post-Meiotic Approaches to Male Contraception’</td>
<td>8th European Congress of Endocrinology</td>
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<td>8-10 June 2005</td>
<td>1-5 April 2006</td>
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<td>Hong Kong</td>
<td>SECC, Glasgow, UK</td>
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<td>A Satellite Meeting of the 8th International Congress of Andrology</td>
<td>Contact: Society for Endocrinology,</td>
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<tr>
<td><a href="http://www.psi.cuhk.edu.hk/Post-meiotic_Male_Contraception/">http://www.psi.cuhk.edu.hk/Post-meiotic_Male_Contraception/</a></td>
<td>22 Apex Court, Woodlands,</td>
</tr>
<tr>
<td>SSR 2005: 38th Annual Meeting of Society for the Study of Reproduction</td>
<td>Bradley Stoke, Bristol BS32 4JT,</td>
</tr>
<tr>
<td>24-27 July 2005</td>
<td>UK.</td>
</tr>
<tr>
<td>Quebec City, Quebec, Canada</td>
<td>Tel: +44 (0)1454 642212,</td>
</tr>
<tr>
<td><a href="http://www.ssr.org/Meetings.html">http://www.ssr.org/Meetings.html</a></td>
<td>Fax: +44 (0)1454 64222</td>
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<tr>
<td>7th European Congress of Endocrinology</td>
<td><a href="http://www.endocrinology.org/SFE/">http://www.endocrinology.org/SFE/</a></td>
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<tr>
<td>3-7 September 2005</td>
<td>confs.htm</td>
</tr>
<tr>
<td>Göteborg, Sweden</td>
<td>ENDO 2006, 88th Annual Meeting of The Endocrine Society</td>
</tr>
<tr>
<td>Contact: Congrex Göteborg AB Tel:,+46 31 708 6000</td>
<td>24-27 June 2006 Boston</td>
</tr>
<tr>
<td>Fax:+46 31 708 6025</td>
<td>Convention &amp; Exhibit Center, Boston,</td>
</tr>
<tr>
<td><a href="mailto:ece2005@gbg.congrex.se">ece2005@gbg.congrex.se</a></td>
<td>MA, USA</td>
</tr>
<tr>
<td>ESPE/LWPES 7th Paediatric Endocrinology Joint Meeting in collaboration with APEG, APPES,</td>
<td><a href="http://www.endo-society.org/">http://www.endo-society.org/</a></td>
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<tr>
<td>JSPE and SLEP</td>
<td>educationevents/annual/index.cfm</td>
</tr>
<tr>
<td>Lyon, France</td>
<td>July 29-August 1 2006 Omaha,</td>
</tr>
<tr>
<td><a href="http://www.congrex.se/espe-lwpes2005">http://www.congrex.se/espe-lwpes2005</a></td>
<td>Nebraska, USA</td>
</tr>
<tr>
<td>23-27 September 2005</td>
<td>Annual Meeting, American Society</td>
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<tr>
<td>Gaylord Opryland Hotel, Nashville,</td>
<td>for Bone and Mineral Research</td>
</tr>
<tr>
<td>Tennessee, USA</td>
<td>15-19 September 2006 Philadelphia</td>
</tr>
<tr>
<td>Phone: (202) 367-1161</td>
<td>Convention Center,</td>
</tr>
<tr>
<td>Fax: (202) 367-2161</td>
<td>Philadelphia, Pennsylvania, USA</td>
</tr>
<tr>
<td><a href="mailto:asbmr@smithbucklin.com">asbmr@smithbucklin.com</a></td>
<td>Phone: (202) 367-1161</td>
</tr>
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<td>Fax: (202) 367-2161</td>
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