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Clinical endocrinology has witnessed many surges in activity over the past year. Many events have been exciting and responsive to innovations and discoveries destined to improve healthcare, but many events have also posed tough challenges to the way patient care can be practiced. For instance, the recent UN resolution 64/265 drawing attention to global problems of unhealthy diets, diminished physical activity, type 2 diabetes, and cardiovascular risk expanded the scale of the metabolic disease problem. The global and domestic problems of overnutrition co-exist with problems of undernutrition and cachexia, commonly encountered in hospitals and impoverished areas. This UN resolution underscores the mandate for more physicians to become experts in nutritional medicine and resonates with the emerging epidemics of obesity and diabetes. How can this shortage of physician nutrition experts be addressed? Education, professional society collaboration, and standardization of clinical practice are key factors to the solution. Clinical endocrinologists have also sensed the explosion of biotechnologic advances with the advent of novel biologic and small molecule therapies. These interventions target metabolic disorders, including osteoporosis, cachexia, and thyroid disease, at the cellular and molecular levels.

On the other hand, the accelerating science and translation of findings to patient care are throttled down by intensified governmental regulatory efforts and economic pressures for cost-savings. Reduced availability of new anti-obesity and anti-diabetes drugs is incongruous with the epidemiology of these disorders. Physician-industry relationships are subjected to greater scrutiny, impacting the format and accessibility of continuing medical education. Physician frustration with learning new and multiple electronic health record products and functions, reduced reimbursements, and administrative hurdles to deliver state-of-the-art care to their patients compounds the problem.

It is ultimately the complex interplay among scientific discovery, clinical practice, socioeconomic factors, and political forces that will dictate the healthcare system of the future. The use of clinical practice guidelines can assist physicians in this arena with efficient and effective decision-making. This is especially true with those guidelines that incorporate a transparent evidence base, credentialed expert opinions, socioeconomic and other subjective factors, diligent review processes, and facile implementation tools. This edition of *US Endocrinology* provides perspective for all of these issues.

US Endocrinology would like to take this opportunity to thank all contributors to this edition. From organizations to individuals, all support and participation is gratefully acknowledged. *US Endocrinology* expresses its continuing gratitude to the members of the Editorial Board, an invaluable source of guidance and wisdom, and special thanks goes to the experts who have contributed this insightful selection of articles and thrown a spotlight on these pertinent issues. ■