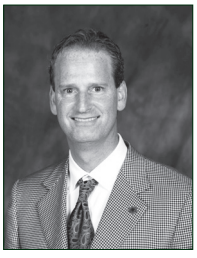

Jeffrey Mechanick, MD, FACP, FACE, FACN, ECNU, is Clinical Professor of Medicine and Director of Metabolic Support in the Division of Endocrinology, Diabetes, and Bone Disease at Icahn School of Medicine at Mount Sinai, New York City, and is also responsible for training endocrine fellows in nutrition and metabolic support at that institution. He is also in private practice in endocrinology and metabolic support in New York City. He is the 2013–14 President of the American Association of Clinical Endocrinologists and Past President of the American Board of Physician Nutrition Specialists. Dr Mechanick is a member of the President's Council on Fitness, Sports and Nutrition (PCFSN) Science Board and is Lead Editor of the PCFSN Research Digest, and chairs the International Transcultural Diabetes Nutrition Algorithm Working Group. He is Section Editor for both *Current Opinion in Clinical Nutrition and Metabolic Care* and *Current Opinion in Endocrinology and Diabetes*. He co-edited *Nutritional Strategies for the Diabetic and Prediabetic Patient*, *Power of Prevention: The Complete Guide to Lifelong Nutrition*, *Thyroid Cancer: From Emergent Biotechnology to Clinical Practice Guidelines*, and co-authored *Diabetes Mellitus Pocket*. Furthermore, he has authored over 215 articles in endocrinology, metabolism, and nutrition support. His research interests range from predictive modeling in critical illness, to thyroid cancer, metabolic bone disease, diabetes, and nutrition. Dr Mechanick received his MD degree from Mount Sinai School of Medicine and completed Internal Medicine residency at Baylor College of Medicine and Endocrine Fellowship at Mount Sinai.

In recent decades, the incidence of obesity and Type 2 diabetes (T2D) has risen to epidemic proportions, and future projections suggest an immense challenge for healthcare systems. These two significant health concerns form the focus of this issue of *US Endocrinology.* Current therapeutic approaches to T2D still face innumerable problems, including continued unhealthy lifestyles, decreased medication adherence, risks for hypoglycemia, as well as potential adverse cardiovascular and neoplastic risks impeding governmental approval processes. Current advances in insulin therapy address many of these challenges and enrich our antidiabetes armamentarium, which is the focus of our first article. The importance of nonmedical interventions and technologies in reducing the risk for diabetes and obesity is also addressed in this issue. Monitoring of blood glucose is central to the management of diabetes and we discuss the implications of new accuracy standards in self-monitoring. We explore the important concept and supporting evidence regarding energy balance in combating obesity, in addition to the role of physical activity and obesity in the prevention and management of T2D. This issue also discusses EPODE, an intervention for preventing childhood obesity, which has been adopted in several countries worldwide. Craig A Johnston, PhD, Brian Stevens, BSc and John P Foreyt, PhD, review the role of dietary sweeteners in T2D. It has been suggested that consumption of fructose is fueling the diabetes epidemic, but there is no conclusive evidence that fructose is harmful and it may even have advantages for glycemic control, especially at small doses. Low-calorie sweeteners also play a major role in T2D prevention and management.

Vitamin D is an important metabolic regulator and the extra-osseous roles of vitamin D have received great attention recently and worldwide. This issue features articles on the links between vitamin D deficiency and obesity, particularly in pregnancy, and explores evidence for the role of vitamin D in preventing and treating cancer. Another article reviews the drug ezetimibe, a cholesterol absorption inhibitor, which offers the potential for effective combination therapy with statins in patients with metabolic diseases. Two articles focus on acromegaly and the implications of the introduction of somatostatin analogs. Finally, we review new therapeutic options in growth hormone deficiency. The broad scope of articles presented herein reflects resurgence in endocrine translational research in response to a growing threat of metabolic disease; this is a global problem attracting attention from the United Nations and other international organizations.

US Endocrinology would like to take this opportunity to thank all contributors to this edition, from organizations to individuals. A special thanks goes to our Editorial Board for their continuing support and guidance. In particular, we would like to thank the expert authors, who gave their precious time and effort to produce an insightful selection of articles. The expert discussions and the variety of topics covered ensure there is something of interest for every reader and we hope you find this edition useful and thought provoking. ■