



**Luigi Meneghini** is a Professor in the Division of Endocrinology, Department of Internal Medicine, at the University of Texas (UT) Southwestern Medical Center, in Dallas, Texas, and Executive Director of the Parkland Health and Hospital System Global Diabetes Program. He recently joined UT Southwestern after a 20-year tenure at the University of Miami Miller School of Medicine where he was Professor of Clinical Medicine and Director of the Kosow Diabetes Treatment Center. Dr Meneghini's primary interests lie in improving the lives of patients with diabetes through the application of cutting edge therapies and technologies, and the implementation of these treatment strategies through patient and professional education activities. He has been involved in the development of treatment algorithms for glycaemic control of type 1 and 2 diabetes. At UT Southwestern he is charged with implementing a registry-based chronic care model and exploring opportunities for leveraging this infrastructure to optimise population-based health management and translational research. He is a frequent lecturer and has published numerous articles in peer-reviewed medical journals. Dr Meneghini has presented numerous projects at the Scientific Sessions of the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD).

Obesity continues to pose a substantial health and economic burden in both the developing and developed world. In the US, according to the Centers for Disease Control (CDC), 36 % of adults are obese, with non-Hispanic blacks having the highest age-adjusted rates (~50 %). An even bigger concern is the rates of obesity in children (~17 %) who will be exposed to obesity-related conditions, such as diabetes, cardiovascular disease and certain cancers from an early age.

Type 2 diabetes and pre-diabetes, often consequences of unhealthy weight gain, currently affect around 8.3 % and 35 % of the US population, respectively. Since 1990, there has been a steady increase in the prevalence of diagnosed diabetes in adults, and, if current trends continue, the CDC estimates that by 2050 one out of three adults will be affected by the disease. At the forefront of the current epidemic of diabetes has been the sedentary lifestyles and caloric excesses that have led to obesity and metabolic consequences. The interaction between genetics and environment in the past several decades has resulted in a substantial increase in morbidity and mortality. Unfortunately, the medical approach to this dilemma has been limited in scope and effectiveness.

While there are exciting and interesting discoveries currently being explored at the basic science and translational levels, as clinicians our current debate is focused on how to best implement available strategies, while trying to address the core concerns driving the explosion of obesity, diabetes and related health consequences. In this edition of *European Endocrinology*, expert clinicians and scientists not only discuss the role of pharmacological treatment, but also explore the relationship between nutrient intake and exercise in the management of diabetes, obesity and cardiovascular health. Related topics of cognitive dysfunction, adjuvant therapy, developing technologies, associated comorbidities and complications contribute to additional stimulating discussions in this area.

This issue of *European Endocrinology* also explores a number of other relevant and practical subjects for the practising endocrinologist. Topics include an update on the treatment of neuroendocrine tumours with octreotide, management of Addison's disease with dual-release hydrocortisone, an overview of osteoporosis in the patient with HIV and bone health following treatment for hyperparathyroidism.

*European Endocrinology* would like to take this opportunity to thank everyone involved in the production of this edition, from organisations and our valued media partners, to our ever-supportive Editorial Board. Our biggest thanks go to the expert authors who have taken the time to contribute such stimulating articles.

I am confident that you will find tremendous value and insight from these various contributions to the medical literature, and I invite the readership to provide feedback on topics and controversies that you might want us to address in future issues. ■