

Rayaz A Malik was appointed Professor of Medicine at Weill Cornell Medical College, Doha, Qatar and New York City, New York, US, in June 2014. He was a Professor of Medicine and Consultant Physician in Manchester Royal Infirmary and the Centre for Endocrinology and Diabetes, University of Manchester from 2008 to 2014. His research focuses on the pathogenesis, assessment and treatment of diabetic neuropathy and cardiomyopathy, which is funded by the National Institutes of Health (NIH), the Juvenile Diabetes Research Foundation Ltd (JDRF) and Diabetes UK. Professor Malik graduated in Medicine from the University of Aberdeen in 1991, obtained his PhD from the University of Manchester in 1997 and was elected a fellow of the Royal College of Physicians (UK) in 2007.

It is my pleasure to provide a foreword for this issue of *European Endocrinology*, which coincides with a landmark 50th annual meeting of the European Association for the Study of Diabetes (EASD) in Vienna. This meeting promises to be a comprehensive international update on the pathophysiology and treatments of type 1/2 diabetes and its complications. I congratulate my good friend and collaborator Professor Solomon Tesfaye for receiving the Camillo Golgi prize, which will focus on his life-long research on the 'Cinderella' complication of diabetic neuropathy.

In this issue of *European Endocrinology* a wide range of endocrine- and diabetes-related topics is covered. Chantal Mathieu and Lut Overbergh provide an overview of the main components of the successful multinational Framework 7 collaboration, which addressed the aetiology and the development of novel immunomodulatory treatments to abort or delay the development of type 1 diabetes. Drs Rodbard and Karoliky review the major findings of the FullSTEP study, published recently in *The Lancet*, which provides important insights for practising clinicians in relation to introducing prandial insulin in patients with type 2 diabetes. Given the recent positive opinion of the Committee for Medicinal Products for Human Use (CHMP) on the combined use of degludec and liraglutide, Baptist Gallwitz provides a timely overview on the future of these combinations in patients with type 2 and perhaps type 1 diabetes. In keeping with the theme of therapies that improve glycaemic control and lead to weight loss, Rene Oliveros and colleagues review the current literature demonstrating the positive effect on cardiovascular outcomes in relatively short-term clinical trials of sodium glucose co-transporter 2 inhibitors in patients with type 2 diabetes. Alin Striban and Lutz Heinemann consider the potential of assessing skin autoflourescence as a non-invasive surrogate marker for establishing the risk of diabetes and cardiovascular disease. For those patients with the sight-threatening complication of macular oedema, Marco Medeiros and colleagues consider the role of intravitreal dexamethasone implants.

Obesity is, of course, a major driver of the epidemic of type 2 diabetes and its complications. Gregory Hand and Steven Blair provide novel mechanistic insights into the role of energy flux in driving both obesity and metabolic disease and Robin Shook and colleagues go on to consider the reasons behind the worldwide increase in body weight.

Increased cardiovascular (CV) risk is of course evident in not only those with diabetes but also a range of endocrine disorders. Leonidas Duntas and Luca Chiovato consider the basis and potential treatment strategies for addressing the increased CV risk in patients with subclinical hypothyroidism. And Pier Bassareo and colleagues from Cagliari consider the role of impaired arterial compliance in driving the increased CV risk in Cushing's syndrome. José Sáez provides a comprehensive review on the molecular basis of primary hyperparathyroidism and Tahmer Shalaby considers the expanding role of denosumab, the receptor activator of nuclear factor kappa-B ligand (RANKL) inhibiting monoclonal antibody, in the treatment of hypercalcaemia in patients with primary hyperparathyroidism. In keeping with novel therapies, Barbara Jarzab and Jolanta Krajewska provide insights into the main reasons for the effectiveness of the multikinase inhibitors, which simultaneously block a number of key cancer pathways, including mitogen-activated protein kinase and angiogenesis, providing a new indication in progressive metastatic medullary thyroid cancer.

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. We hope you find this edition as useful and insightful as those before it. ■

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