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Welcome to the latest edition of *European Endocrinology*, which features a wide range of topical articles covering various areas of endocrinology. We begin with a focus on diabetes. Insulin therapy remains the standard of care in type 1 and advanced type 2 diabetes, and the development of recombinant human insulins has increased the global availability of insulin at an affordable cost. Sandow and Lagdrif review the clinical efficacy and safety of recombinant insulins. However, insulin therapy places a substantial burden on patients and carers, and recent research has focused on reducing patient involvement, including development of a closed loop artificial pancreas. Levy, McCann and Finan report on the Hypoglycaemia-Hyperglycaemia Minimizer (HHM) System, which is able to predict changes in blood glucose and adjust insulin delivery accordingly to help maintain normal glucose levels. Self-monitoring of blood glucose is one of the challenges associated with insulin therapy. Price and Walker discuss the limitations of this method and the advantages of real-time continuous glucose monitoring.

Given the limitations of insulin therapy, oral anti-diabetic drugs (OADs) remain an area of active clinical development. The sodium-glucose co-transporter-2 (SGLT2) inhibitors are a newly developed class of OADs. Regulatory bodies require proof of cardiovascular safety for approval of all OADs. In an editorial, Gallwitz reports that the SGLT-2 inhibitor empagliflozin showed superiority to standard treatments, unlike the non-inferiority demonstrated by most OADs. In another editorial, Mathieu addresses the issue of increased risk of ketoacidosis in diabetic patients taking SGLT-2 inhibitors and concludes that the benefits of SGLT-2 outweigh the risks, but caution is advised.

Two further editorials address broader aspects of diabetes. Barnard and Weissberg-Benchell review the psychosocial aspects of the recent advances in diabetes technology discussed above, while Gagner outlines the recent International Diabetes Federation position statement on bariatric surgery, which has become a valuable treatment option for severely obese patients with diabetes.

Moving on to other endocrine disorders, Newbold discusses the advent of targeted therapies for medullary thyroid cancer, including a review of clinical evidence, when to initiate therapy and management of toxicities. An editorial by Grossman examines recent advances in the management of neuroendocrine tumours, including the use of everolimus, radiolabelled octreotide and telotristat etiprate, a 5-hydroxytryptamine (5-HT) synthesis inhibitor. Finally, Winer discusses the recent approval of recombinant full-length human parathyroid hormone (PTH 1-84), which represents an important milestone in the treatment of hypoparathyroidism.

European Endocrinology would like to take this opportunity to thank all participants on this edition, from organisations to individuals. A special thanks goes to our Editorial Board for their continuing support and guidance. In particular, we are grateful to the expert authors, who gave their valuable time and effort to produce these insightful 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. ■