

*News and Announcements
from
The Endocrine Society*



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Coble to Become AMA President

by n/a

Coble to Become AMA President

Endocrinologist Elected

On June 19, 2002, Yank Coble, Jr., M.D., an endocrinologist from Jacksonville, Florida, will take over as President of the American Medical Association (AMA). Dr. Coble will not be the first endocrinologist to serve as President of the AMA, however, endocrinologist presidents have been few and far between within the organization. As he explains, this leadership role in the AMA is important because the AMA represents the entire medical community as well as the field of endocrinology.

Dr. Coble is a Clinical Professor of Medicine at the University of Florida, Jacksonville and is the former Chairman of the Department of Community Health and Family Medicine and Professor of Medicine and Family Medicine at the University of Florida, Gainesville.

The AMA's House of Delegates sets the organizations priorities each year. However, during his presidency, Dr. Coble intends to focus on several issues that relate to the practice of medicine, for example the importance of science and standards in medical practice. He will work with specialty societies, such as The Endocrine Society, to promote practice guidelines and performance measures for quality enhancement for physicians.

"We are also working hard to enhance funding for research agencies such as the NIH, CDC, AHRQ and FDA," says Dr. Coble. "In addition we will try to enhance the placement of physicians and scientists in positions of leadership to address medical and scientific matters."

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Dr.Coble notes that access to quality medical care and regulatory issues are major concerns facing the medical community today. He recognizes that Medicare regulations are difficult to comply with, from a financial standpoint, and create difficult barriers to patient care.As the AMA President, he will work to identify the specific areas that prevent patients' access to choice and hopes to break down these barriers.


As an endocrinologist who has become intricately involved with the leadership of the AMA over the past decade,Dr. Coble feels that it is essential for endocrinologists to join the organization.

"Endocrinology is a small specialty and it is hard to accomplish much alone," he explains. Dr. Coble notes that joining the AMA can help endocrinologists raise their visibility as well as help raise support for endocrine research and education. Becoming a member of the AMA, he explains, is like being a citizen of the United States.

"Endocrinologists are citizens of the practice of medicine," he says."We all share the fundamental traditions of our own profession, ethics, caring and science. The AMA is a democracy with many diverse opinions. How can we have the same effectiveness if we do not all participate?"

Despite their small numbers,Dr.Coble believes that endocrinologists have become increasingly more visible and active within the AMA. He also says that specialty and service societies, such as The Endocrine Society, play an important role within the organization and were, in part, responsible for his own nomination as President-Elect.

As he prepares to take over as President,Dr.Coble hopes that endocrinologists, other members of the medical community and the public,will focus on the AMA's long list of accomplishments in the areas of patient education,physician education, science, ethics and volunteer activities instead of some of the negative attention that the organization has received in recent years. He feels that any organization



can have isolated negative events. However, these events should not define the organization.

In looking at the profession of medicine, Dr. Coble feels that there has never been a more challenging time, nor one in which we have more reason to be enthusiastic and optimistic. He strongly believes that the future of medicine lies in the youth of today, who are dedicated to the profession of medicine.

"It is essential that we mentor and support young people and foster their involvement in science," says Dr. Coble. "It is their involvement that will result in changes to the health system and their involvement that will help patients and the public."

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Member Honors

Member Honors

Luis S. Haro, Ph.D., has been elected President of the Society for Advancement of Chicanos and Native Americans in Science (SACNAS) for 2003. Dr. Haro is an associate professor of bio-chemistry in the division of Life Sciences at the University of Texas, San Antonio and a current member of The Endocrine Society's Minority Affairs Committee. His current research is focused on the biomedical heterogeneity of human growth hormone.

Klaus-Martin Schulte, M.D. of the Clinic Clinic of General and Trauma Surgery, University Clinics of Düsseldorf, Heinrich-Heine-University, Germany, received the Cancer Research Award 2001 of the Dr. Günther-Wille-Foundation for his research on the genetic basis of clinical features of the multiple endocrine neoplasia type 1.

Evan Simpson, Ph.D., Director of Prince Prince Henry's Institute of Medical Research in Australia has recently been awarded the Asia and Oceania Medal Lecturer of the Society for Endocrinology (UK) for 2002. He will present a lecture at the annual meeting of the Society in London in November. Dr. Simpson also received the Transatlantic Medal Lecturer of the same Society in 1990.

Paul G. Walfish, M.D., Professor of Medicine, Pediatrics & Otolaryngology at the University of Toronto Medical School and a Senior Consultant in the Department of Medicine, Endocrine Division, Mount Sinai Hospital, Toronto, has been awarded a 2001 Jonas Salk sponsored by the Ontario March of Dimes award recognizes Dr. Walfish's

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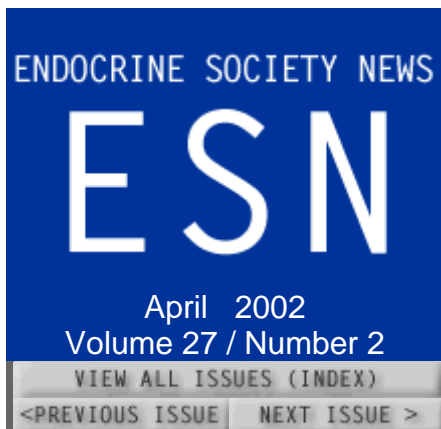
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research contributions, which have resulted in the development of a newborn newborn screening program for detecting detecting congenital hypothyroidism and preventing the mental and physical disabilities that would have otherwise developed if thyroid hormone replacement therapy had not been commenced within the first month after birth.



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MAC reaches out to Native American and Alaskan Students and Institutions

MAC reaches out to Native American and Alaskan Students and Institutions

The Minority Affairs Committee (MAC), in its continued mission to increase cultural diversity in the Endocrine Society and in the field of endocrinology, participated in the American Indian Science & Engineering Society (AISES) conference, which was held November 16-17, 2001 in Albuquerque, NM. AISES is the nation's premier event for Native Americans interested in pursuing careers in the sciences and engineering fields.

MAC's mission at the conference was to increase visibility of The Endocrine Society and MAC's outreach programs with the Native American and Alaskan communities. The Society's exhibit booth provided a platform to encourage undergraduate and graduate Native American students to participate in MAC's outreach programs. MAC was successful in its efforts to increase shortcourse awareness and participation, recruit new members for The Endocrine Society and develop networking possibilities with Native American educational leadership. In addition, AISES selected a MAC member to join the team of judges for the student poster/abstract sessions.

If you would like additional information about the MAC, please contact Veronica Parcan at vparcan@endo-society.org or 301-951-2601 or Kirsta Suggs at ksuggs@endsociety.org or 301-941-0244.

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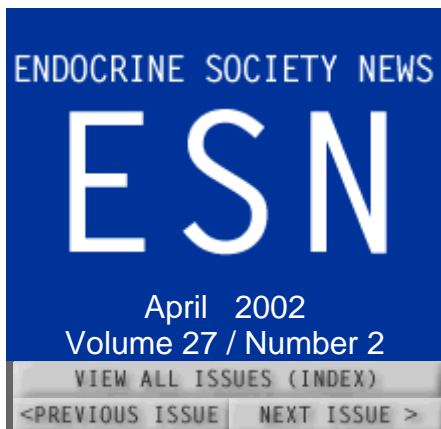
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JCE&M to Publish More Clinical Trials

JCE&M to Publish More Clinical Trials

In conjunction with Endocrine Society President Bill Crowley's Clinical Trials initiative, the Publications Committee and the Corporate Liaison Board (CLB) announce a major initiative to publish more clinical trials in *The Journal of Clinical Endocrinology & Metabolism* (JCE&M). The goal is to establish JCE&M as a citable resource of clinical trial results in endocrinology for the science community. The committees are working on the specific details of the plan, which will be shared with the Society's members in the near future.

"We welcome the submission of clinical trials because such rigorous, evidence-based data is key to our understanding and, ultimately, our usage of new endocrine therapies," said JCE&M Editor-in-Chief John P. Bilezikian.

A 2001 study of JCE&M's readers showed that

- 80 percent are M.D.s
- 67 percent are in medical practice
- 86 percent are employed in a hospital, medical school or private practice
- 91 percent present at medical meetings
- 65 percent publish a minimum of one paper per year in peer-reviewed journals

JCE&M is a pipeline to rapid publication of important clinical trial results that guide the science and practice of endocrinology. The journal is an ideal source for the publication of industry and government sponsored clinical trial results because:

- **Timeliness**—*JCE&M* maintains a turnaround time that beats the industry standard for medical publishing. The peer review process—from manuscript submission to decision—is completed within an average of 24 calendar days. Publication, in both print and online editions of *JCE&M*, averages

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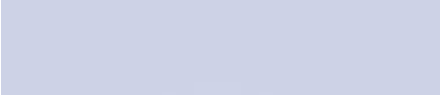
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only 90 days from the date of acceptance.

- **Impact**—*JCE&M* is one of the most highly cited medical journals in the world, with an Impact Factor ranking in the top 97th percentile, which matches other highly respected medical journals including the *New England Journal of Medicine*, the *Journal of the American Medical Association*, *Diabetes* and *Lancet*.
- **Exposure**—Articles published in *JCE&M* receive the highest exposure and are indexed in all major databases, including MEDLINE, EMBASE and Index Medicus, and distributed far beyond the journal's circulation by physician distributors, including MD Consult, Adonis, and Ovid and by CrossRef, a global citation linking among 5,100 online journals.
- **Audience**—With an international circulation of 10,000—57 percent of which are in the United States—*JCE&M* readers are widely regarded as thought leaders in the field of medicine. The Journal's readers directly influence the treatment of disease and the prescribing of pharmaceuticals through consultations and by teaching or mentoring medical students.

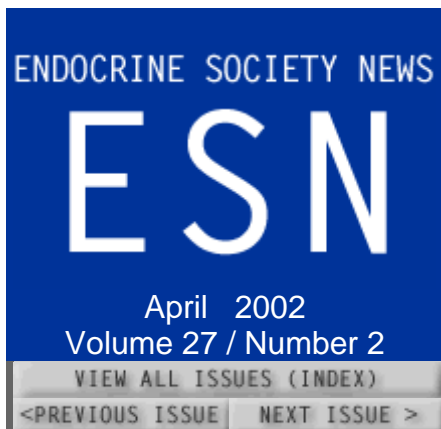
Recognizing the leadership of *JCE&M* and its readers, pharmaceutical companies have made the journal their top media vehicle to the endocrine market. "The CLB is committed to enhancing The Endocrine Society as a venue for presentation of key clinical trials with endocrine mechanisms," said CLB chair Elizabeth Stoner, M.D.

This new clinical trials initiative is only one of the many new activities that directly serve the needs of the Society's clinician members. ENDOTrials, the Web-based Endocrine Clinical Trials Network, features listings of endocrine related clinical trials, clinical trial results and FDA approvals. It also provides Society members with the ability to track endocrine-related clinical trial activity and keep up with the latest in scientific and drug development. Additionally, at ENDO 2002, the Society will present an educational activity entitled, "Building a Clinical Trials Program: a Management and Professional Conference." This educational program focuses on an overview of the clinical trials industry and includes setting up and running a clinical trial, regulatory issues and ethics, and location grant opportunities and recruiting study volunteers.



*For more information about submitting
clinical trials to JCE&M contact [jcem@endo-
society.org](mailto:jcem@endo-
society.org) For additional information about
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Ethics Corner

Ethics Corner

"Point"

The question of industry funding of medical research is a thorny one. Traditionally, the two sectors within which research is carried out have worked in close cooperation with each other, with industry supplying resources and materials and the universities and research institutes supplying trained personnel and cutting edge knowledge and technology.

Despite the benefits of co-operation, however, the underlying interests of industry and academia are not identical. The primary aim of pharmaceutical and biotechnology companies is to make a profit. The basic aims of the academic sector are more varied and include education of scientists and clinical practitioners; contributing to the understanding of the basic processes of nature, and developing social policies for preventing disease and reducing the need for drug use.

Historically, a delicate balance has been maintained between the corporate and academic centers in medical research. In recent years, the balance has shifted, and there has been a marked tendency for pharmaceutical companies to utilize private contract research organizations and by directly employing physicians and investigators to write protocols and conduct research projects. Thus, between 1991 and 1997 the proportion of clinical research conducted within academia fell from 80 percent to 40 percent and payments to private research companies increased by \$2 billion.

These trends may have far-reaching consequences. They will likely result in a reduced commitment to basic research because the lack of prospects for shortterm profits is not attractive to investors. Additionally, they will lead to the erosion of an independent, critical center from which the activities of pharmaceutical and biotechnology companies can be scrutinized. And they will lead to the undermining of public confidence in the integrity of the research

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process.

Research conducted by investigators with vested interests can be distorted relatively easily. ¹A new drug can be tested not against the best existing therapy but against an inferior alternative. To prove effectiveness, the highest tolerable dose can be tested, whereas to prove absence of toxicity the lowest dose can be chosen. The populations studied can be ill defined or can be selected to include those in whom positive outcomes are most likely. Results can be published in non-peer reviewed supplements of respected journals. This is not to suggest that most research by the pharmaceutical and biotechnology industry is conducted in anything other than a highly ethical manner; nonetheless, the possibility remains that distortions of various kinds are possible.

There is abundant evidence that sponsorship affects research outcomes. For example, a survey of studies of cancer drugs showed that 95 percent of company-sponsored research produced positive results for the product, whereas the figure for non-profit funded trials was only 62 percent.²

Clearly, a healthy balance in medical research between the corporate sector and an independent academic sector needs to be preserved. How to achieve this is a big question. Nonetheless, the preceding discussion suggests some minimal requirements. ³First, institutions need to establish clear rules to guide the conduct of both researchers and sponsors. These should include assurances that investigators will not derive personal or financial benefit from the conduct of pharmaceutical company sponsored clinical trials and that decisions regarding planning and monitoring of research designs and interpretation and publication of results are independent of funding organizations. Second, complete public disclosure of pecuniary and other interests of researchers should become universal. Third, all research conducted by private practitioners should be subject to assessment and monitoring by properly constituted ethics committees. Fourth, publicly accessible registries of clinical trials should be established, with mandatory reporting of all results. The final condition is the most important, but probably the most difficult to



achieve: government and other funding bodies should provide sufficient resources and the community sufficient encouragement and support to allow the universities and institutes to preserve their traditional functions as independent and critical centers of thought and knowledge.

1 Bero L. Int J Technol Health Care. 1996; 12: 209-37.

2 Friedberg. JAMA 1999; 282: 1453-7.

3 See also "Code of Ethics of The Endocrine Society". Endocrinology 142 (8), August 2001.

"Counterpoint"

A balanced perspective on the relationship between academic and industry-sponsored medical research is important.

The previous discussion notes that the basic aims of industry and academia may differ, in that industry is motivated by profit, and the motivation in academia includes education, scientific inquiry, and disease prevention. These points represent a somewhat oversimplified viewpoint. Industry certainly must strive to make a profit, but it also supports a great deal of research on the natural history and epidemiology of disease, not directly tied to drug sales, and of broad scientific interest. Industry also supports a great deal of basic science discovery effort, which contributes to knowledge of disease processes. Further, the efforts of academia are not purely altruistic, as many universities have established for profit affiliated companies in order to take financial advantage of internal discoveries. Thus, we live in an age where the traditional boundaries between industry and academia are often blurred, and motivations are complex.

The article expresses concern about the trend for industry to perform research at contract research organizations (CROs), rather than at academic institutions. Use of CROs is not likely to replace the use of academic centers in pharmaceutical studies, but will contribute to overall efficiency in pharmaceutical development. A number of

academic centers have recognized this need, and have adopted a CRO-type model internally to better compete for clinical trials.

There is concern expressed about the industry trend toward "directly employing physicians and investigators to write protocols and conduct research projects."The scientific standards of regulatory agencies are extremely rigorous. Development of internal expertise in industry is critical to maintaining the highest scientific and regulatory standards required for pharmaceutical development.This expertise does not supersede the need to obtain the advice of academic experts on specific scientific issues.

The article expresses concern that the current paradigm for pharmaceutical development results in changes in the "delicate balance" between the corporate and academic sectors in medical research, which "is likely to lead to a reduced commitment to basic research."Although there has been a change over time resulting in some pharmaceutical development outside of academic centers, it seems a stretch to imagine that this evolution of clinical trials would adversely impact basic scientific research.

There is concern expressed that the changed relationships between researchers and industry "will lead to the erosion of an independent, critical center from which the activities of pharmaceutical and biotechnology companies can be scrutinized" and "to the undermining of public confidence in the integrity of the research process."However, it is not clear that academia currently plays the role of an independent critical center for the purpose of scrutinizing industry. Further, direct pharmaceutical sponsorship of research should not impair the ability of academic centers to comment on the scientific validity of this research. Public confidence is maintained by the internal standards of reputable companies, the knowledge that there is regulatory oversight of pharmaceutical development and the subjection of study-based publications to the peer-review process.

The article observes that sponsorship may affect research outcomes. However, in double or triple-blind placebo controlled trials, it is unlikely that the sponsor could affect the outcome of the study.There are alternative explanations for this

observation. First, there could be a reporting bias: are we evaluating published studies, or all studies? Companies may tend to publish positive studies and not negative ones—which is a different ethical issue. Also, one might argue that studies that are sponsored by industry may be better designed, and more likely to be adequately powered than independent studies and, therefore, more likely to detect a treatment effect. One cannot necessarily conclude that increased rate of reporting positive studies by pharmaceutical sponsors is attributable to poor science.

In summary, while there is always a risk of bias in clinical trials, regulatory oversight scrutinizes studies carefully for this. Use of CROs in the conduct of clinical trials is a maturing area, and provides the opportunity for rapid enrollment without sacrificing the quality of clinical data or the opportunity for academic review of clinical trial data. Pharmaceutical companies should publish both positive and negative clinical trials, such that these important data are in the public domain.

Point-Counterpoint from the Ethics Advisory Committee: Corporate Funding of Medical Research: The Need to Maintain a Balance

"Ethics Corner" is a regular feature of the Endocrine Society Newsletter provided by the Ethics Advisory Committee. It aims to present ideas and stimulate discussion about the ethical and social aspects of medicine and medical research. It is intended to provide a forum for the expression of diverse viewpoints, some of which, we hope, will be controversial and will provoke ongoing debate.

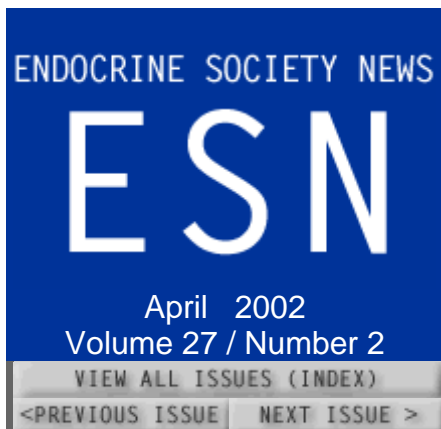
The Endocrine Society strongly supports the principle of fostering open debate and critical reflection on contemporary issues. It is important to stress, however, that the opinions expressed in this column are presented in this spirit and do not represent the official views of the Society.

Readers are invited to submit contributions on

any topic of potential interest to the membership of the Society. Letters in response to articles will also be welcomed. Submitted articles will be reviewed by the Ethics Advisory Committee and, where appropriate, by independent reviewers.

If you have any queries please feel free to contact us. You may call or e-mail the Society directly to reach the Ethics Advisory Committee at 301-951-2612 or jdow@endo-society.org or email the chair, Paul Komesaroff at paul.komesaroff@baker.edu.au

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FOCUS: The Impact of The Human Genome on Endocrinology

You are cordially invited...

All ENDO 2002 meeting attendees are invited to join colleagues for refreshments and fellowship at the Opening Reception, which will take place on Wednesday, June 19 at 6:30 pm on the Exhibit Hall Floor and will feature musical entertainment by The Blues Daddies.

This event is supported by an unrestricted grant from Abbott Laboratories.

Experience the Future: Discover the Power of Genetics

ENDO 2002 meeting registrants will have an opportunity to take part in an interactive, educational simulation of genetics testing and counseling. To participate, visit one of the "Experience the Future" kiosks located in the convention center and pick up a randomly assigned genotype, and then visit the Counseling Center located on the Exhibit Hall floor.

The Endocrine Society thanks the American College of Medical Genetics and the National Society of Genetic Counselors, Inc. for participating in this program.

This event is supported by Abbott Laboratories, Genentech, Inc., Genomics Collaborative and Millennium Pharmaceuticals, Inc.

Early Bird Registration Ends on April 26

Register now for ENDO 2002 and secure your housing reservations through The Endocrine Society's online registration site. The fast and

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easy online registration process will provide you with an automatic confirmation. Simply go to www.endo-society.org and click on the ENDO 2002 link to get started. By registering early you will save money and receive your *Program and Abstract Book* by mail before the meeting. The deadline for early registration is April 26, so register today!

[Organize with Online Itinerary Builder](#)

Starting in May, you will be able to build your own personal schedule for use at ENDO 2002. Now in its sixth year, the Itinerary Builder will allow you to search by topic, title, author, affiliation, presentation format or presentation time. In addition, the Itinerary Builder will include the full text of all accepted abstracts. New this year, the Itinerary Builder will be personal desk assistant (pda) compatible! This tool is guaranteed to save you time, and ensure that you don't miss any exciting events at ENDO. Watch ESN Live! for the launch date.

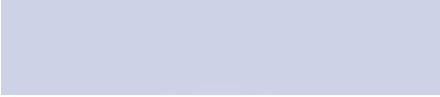
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[Use the Online Exhibit Planner](#)

Get the most out of your exhibit hall experience and create a personalized exhibit planner that you can print out and take with you to ENDO. Browse through product descriptions of all ENDO 2002 exhibitors or search by product category, city, state, or company name. Watch ESN Live! for the launch date in early spring.

[ENDO Abstracts on CD-ROM](#)

As was indicated last year Society members that do not attend ENDO 2002 will receive abstracts in a CD-ROM format instead of the traditional abstract book. Only meeting attendees will receive an abstract book. The CD-ROM allows all abstracts to be searched by topic, title, author and affiliation and also provides easy access to the ENDO 2002 science. Meeting attendees may also pick up a complimentary copy of the abstracts on CD-ROM at the Glaxo SmithKline booth at ENDO 2002.



This product is supported by an unrestricted grant

ENDO 2002 Sets Abstract Record!

Over 2500 abstracts have been submitted for ENDO 2002. Submissions were received from over 70 different countries—an estimated 40 percent of all ENDO abstract submissions are from outside of the United States.

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The Associates Council and the Student Affairs Committee are excited to announce several special activities for fellows and students at ENDO 2002.

Career Development Workshop

The Fourth Annual **Career Development Workshop** will be held on Tuesday, June 18. Clinical and basic fellows, as well as undergraduate, graduate and medical students, are encouraged to take advantage of unique opportunities to develop and enhance essential career skills. The workshop will begin with a panel of distinguished endocrinologists discussing their diverse careers in clinical research, industry, academia, non-profit and government. Then, participants can choose among five in-depth career path discussions to suit their career goals as each faculty member will lead separate small groups. In the afternoon, there will be several breakout sessions with topics that include grant writing, strategies for effective teaching, getting published, making effective slides and posters, and financial planning.

Fellow and Student Reception

The **Fellow and Student Reception** will be held on Tuesday, June 18, immediately following the Career Development Workshop. All fellows and students attending ENDO are invited to attend this popular event.

Fellow and Student Lounge

A new **Fellow and Student Lounge** will be open at ENDO 2002 for fellow and student members of The Endocrine Society to work, meet and relax.

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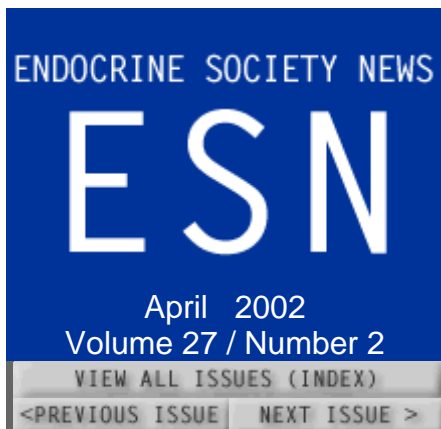
For those seeking a position in the fields of endocrinology, plan to participate in the Society's Job Fair at ENDO 2002.

The Fellow and Student Reception and Lounge are supported by an unrestricted educational grant from Genentech, Inc.

For more information on the Job Fair, please visit the Society's placement service Web pages at www.endosociety.org/membership/membersonly.cfm For complete information on all other fellow and student activities at ENDO, please visit the Society's trainee Web pages at www.endo-society.org/students/index.cfm If you have any questions, please contact Colleen Gorman at cgorman@endo-society.org or 301-951-2611.



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President's Message

by William Crowley, M.D.; Margaret
Shupnik, M.D.

President's Message

Introducing the Strategic Plan

Dear Endocrine Society Member,

This is a special message that comes from Margaret Shupnik, Ph.D. and me. In addition to serving ably as the Secretary-Treasurer of the Society, Peggy chaired our Strategic Planning Committee for the past year. Together, we are proud to present to you the newly approved Strategic Plan for The Endocrine Society.

As you know, Council initiated the strategic planning process by establishing this committee, engaging an expert consulting firm, reaching out to its members and staff and consulting with other future-thinking organizations in crafting this roadmap for our future. It took a year of effort to develop this document and to resolve some challenging dilemmas it posed to us along the way.

At each key step in the process, all Society members were asked for comments. Hopefully you'll be able to recognize those inputs in the plan that has emerged. We thank you all for your time and interest.

We now invite all of you to review this plan carefully again. The full text is included as an insert in this issue of the ESN. You may also access the plan online through the Society's Web site at www.endo-society.org

We undertook an ambitious goal of

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deliberately reorienting our Society to be capable of maintaining a leadership role on its members' behalf in order to define the field of endocrinology in the future. In so doing, we recognized that


- We are a very diverse society and that is one of our greatest treasures and strengths;
- We only succeed through well-orchestrated contributions from this broad range of disciplines;
- We need to enfranchise all constituencies at the highest level;
- We need to strengthen our services to all constituencies of our membership; and, perhaps most importantly,
- We need to focus on strategic growth to position our Society to have greater impact on the environments in which all of our members function.

The Endocrine Society is a rich tapestry of creative researchers and thoughtful clinicians who join together for a single mission—to be leaders in furthering excellence in research and the care of patients with endocrine diseases. Our society's active membership has evolved such that today it consists of roughly equal numbers of basic scientists and practicing clinicians, followed closely by physician scientists. To build an organization that truly cherishes, serves, and involves its many components is a very real challenge. However, we ultimately agreed that to create a comfortable home for all members and to provide them with top quality products and services, we need to involve all major constituencies in a direct way at the highest levels of the Society's leadership. To accomplish these goals we also need to strengthen the representation of all constituencies in those top positions.

Highlights of the Plan

The plan is organized around five strategic directions:

1. To maintain the leadership position of The Endocrine Society in advancing innovation and excellence in the science and clinical practice of endocrinology;
2. To encompass in our membership the broad range of professional interest groups in the field of endocrinology and to provide the highest quality service to each component member group (hence the term "strategic growth");
3. To build broad public awareness of hormones in health and disease and of the importance of endocrine research and practice;
4. To build strong advocacy for endocrine-



related governmental and non-governmental policy
in both the scientific and clinical areas;

5. To create a dynamic, mission-oriented entity
suited to our future vision through appropriate and
fair changes in Society organization and governance.

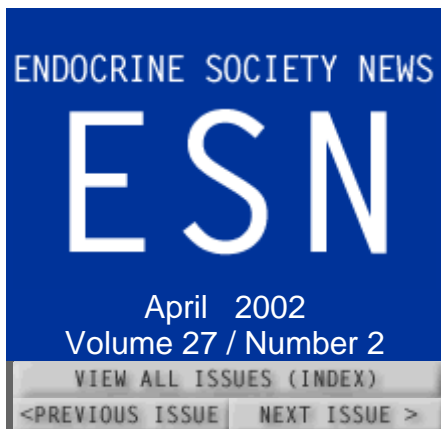
Our plan is aggressive, but achievable. It does require some departure from some Society traditions, such as implementing the new tripartite rotation of the presidency that accurately reflects our constituencies, and establishing vice president positions for each of these constituencies. It involves building trust and working together in new ways. It necessitates more "give and take" among constituency groups for the good of the whole. The Council and the leaders contributing to this process agree that the Society we build as a result is well worth the effort.

We hope you share our enthusiasm for our newly charted path. The Council has created an oversight task force, chaired by Kelly Mayo, Ph.D., to lead the Society through the changes envisioned in the plan. One of the first responsibilities of the task force is to oversee the process of developing precise, measurable outcomes with expected timeframes and required budgetary resources. We encourage you to share your reactions to our plan freely with us, especially your suggestions about priority activities and about outcomes, which are included in Appendix B of the insert. Please communicate directly to us at president@endo-society.org

Sincerely yours,

Bill Crowley Margaret Shupnik

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Since its launch in December of 2001, over 22,000 co
site each month. The highly interactive site— [www.](#)
information and resources for patients, including the
visited resource on the site.

The referral database is compiled from The Endocrir
indicated that they are taking new patients. When pati
provides them with a list of specialists in, or near, th
also provide details about each doctor's areas of ex
search. This service is also available to patients via the

*If you are interested in being listed in the online r
members, please contact Society Services at [societyse](#)
would like more information about The Hormone F
call 1-800-HORMONE.*

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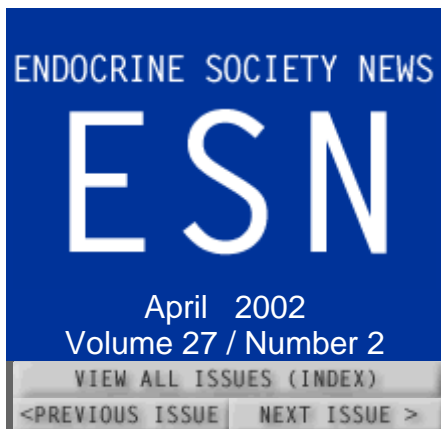
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Dr. Judy Rosener to Speak at WE Dinner

The Women in Endocrinology Annual Dinner and Meeting will be held on Wednesday June 19, 2002 at 7:30 PM in the Moscone Convention Center. Judy Rosener, Ph.D. , a Professor in the Graduate School of Management, University of California at Irvine, will be the featured speaker at the dinner. The topic of her presentation will be "Why Gender Matters." Dr. Rosener's lecture, which is aimed at women at all stages of their career, will address issues that are important for women in the workplace—how women can succeed and how businesses and universities should utilize the potential of women to their advantage. Dr. Rosener was a columnist for the Sunday Business Section of the *Los Angeles Times* and currently writes a column for the *Los Angeles and Orange County Business Journal*. In addition, she was a commentator on the PBS TV show "Life & Times" on KCET in Southern California.

For additional information about the dinner and meeting, please contact Synthia H. Mellon mellons@obgyn.ucsf.edu or visit the Women in Endocrinology Web site at: <http://www.women-endo.org>

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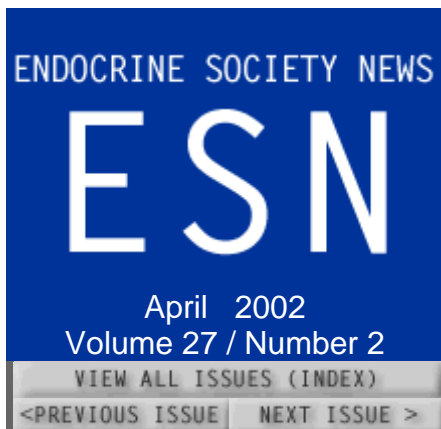
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Introducing REP—Rapid Electronic Publishing

A New Feature to The Endocrine Society's Journals Online

The Endocrine Society is very pleased to announce a new benefit for journal authors and readers. Beginning this Spring, *Molecular Endocrinology* will publish manuscripts upon acceptance on The Endocrine Society Journals Online Web site. The program will be called Rapid Electronic Publishing (REP). With the launch of REP, research papers will be accessible to subscribers up to 12 weeks before the print and online journals are published.

Features of REP

- New accepted manuscripts posted weekly
- Searchable PDF format
- Citable by unique Digital Object Identifier(DOI), which also appears in the final printed article
- Title, authors and abstract deposited with Pub Med and articles are cited immediately
- Published as a new initiative of The Endocrine Society Journals with the assistance of Stanford University Libraries' HighWire Press

Important Notes for Authors

PDF's of accepted manuscripts will be published in REP as is, without copy editing, reformatting or corrections. The REP manuscripts cannot be edited once they are published online.

Therefore, it is essential that authors submitting to *Molecular Endocrinology* take extra care to ensure that the title, abstract, author names, figures, and references are

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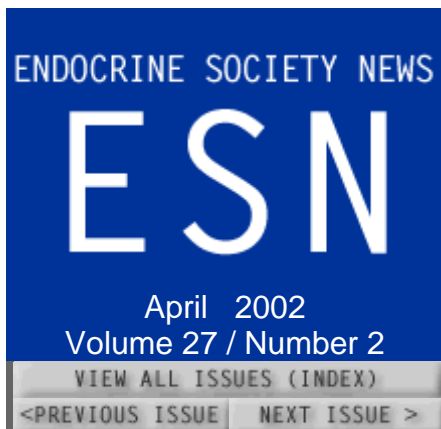
complete and accurate when the manuscript is submitted. For authors submitting online, please upload only the manuscript and figure files. Do not include cover letters, supplementary data, or information intended only for reviewers in your submitted files. Also, be sure that all figures and tables are clearly numbered.

Authors will still have the opportunity, as they do now, to make corrections for the copy edited manuscript that will appear in print and in the final online version. When the final version of the article is published in print, it will also be published online and will replace the REP version. The REP version will be archived and will remain available for reference.

*For more information please contact
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Full text of The Endocrine Society from 1992 is now available online. The articles are searchable in a PDF format and access is open to all. The Committee recognized that online access to back-file information was essential to the research community and directed the Society's journals department to create online journal archives.

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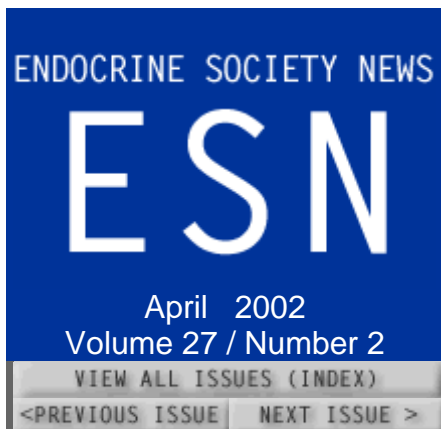
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Recent Progress In Hormone Research Now Online

Volumes 56 and 57 of the highly acclaimed Recent Progress In Hormone Research (RPHR) are now available online as well as in print. Fully searchable, the new online format is available to subscribers of the print volumes. RPHR Online can be accessed from the journals Web site at www.endojournals.org or directly at <http://rphr.endojournals.org> RPHR is an authoritative reference of important research by leading experts in the field. It is the source for current findings in hormone research, edited by Anthony R. Means, Ph.D. and published annually.

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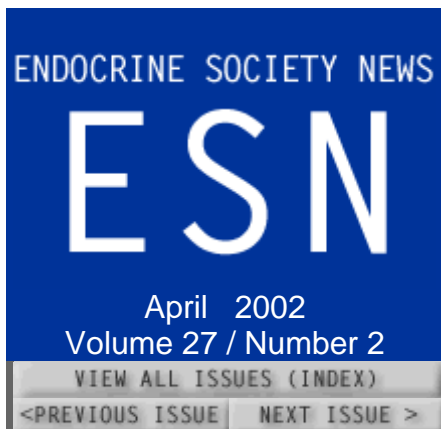
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Mentors Needed for ENDO 2002 Minority Mentoring Reception

Mentors Needed for ENDO 2002 Minority Mentoring Reception

The Minority Affairs Committee is currently seeking mentors for the Minority Mentoring Reception, which will take place during ENDO 2002. The reception will be held on Thursday, June 20, 2002 from 7:00p.m. to 8:30p.m. and is open to all student ENDO 2002 registrants. During the reception, mentors will be asked to sit at topic tables addressing different career challenges facing minority students, postdocs, fellows and faculty. The event provides students and mentors with a great networking opportunity. Member participation is greatly encouraged.

For more information on how to become a mentor, please contact Veronica Parcan or Kirsta Suggs at 1-888-ENDOCRINE or mac@endo-society.org

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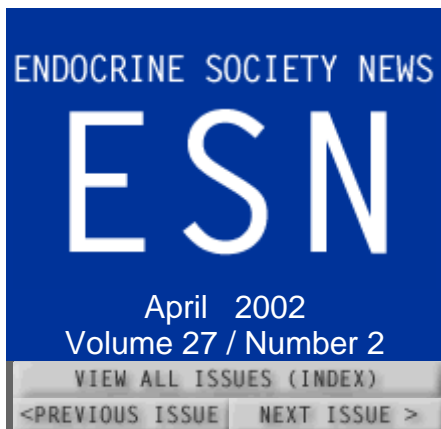
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Coding for Endocrinology

by Richard A. Dickey, MD, FACP, FACE,
RUC Advisor for The Endocrine Society

Coding for Endocrinology

Recently, The Endocrine Society has become intricately involved with the coding reimbursement process. The current procedural terminology system to code for physician services was created by the American Medical Association (AMA). Commonly called Current Procedural Terminology (CPT), these codes are the HCFA Common Procedure Coding System (HCPCS) level I codes. CPT codes are five digit numeric codes such as those commonly used for outpatient services and inpatient services.

CPT codes are created and revised regularly by the CPT Editorial Panel of the AMA. The panel includes physicians nominated by their specialty societies and representatives of other interested parties. Physician members are then appointed by the AMA Board of Trustees.

A body called the Resource Based Relative Value Update Committee (RUC) considers the valuation of CPT codes. This body is a joint effort of the AMA and the specialty societies. Membership includes nominees from professional services specialty societies and representatives of Centers for Medicare and Medicaid Services (CMS).

Endocrine Society members can participate in this process to help modify, clarify and create new codes. The process by which codes and reimbursement for the services of endocrinologists are determined offers an opportunity for involvement of the members of the clinical endocrine community.

Since becoming a member of the AMA House of Delegates, The Endocrine Society has taken advantage of this opportunity by appointing a

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CPT advisory committee member and a RUC advisor .These volunteer physicians and the staff of the Society receive information from the CPT and RUC staff inviting them to comment on new or revised codes, propose coding changes as well as new codes, and provide information on the value of codes. All Endocrine Society members can participate in this process by submitting proposals for new codes or changes to current codes, through the assessment of code values by responding to surveys of the membership, and by attending or presenting to the CPT Editorial Panel or the RUC. These activities can help us guarantee that the coding process faithfully represents the position and interests of the clinical endocrine community.

The CPT Editorial Panel members are expected to remain unbiased in their deliberations on codes. In spite of this, professional organization advisors to the CPT panel and RUC can not only serve as expert professional resources but they can also advocate on behalf of their own specialty's members' position and interests.

Examples of the importance of the direct and active involvement of The Endocrine Society and its members in these processes are legion. Recent examples are the creation of new codes specific for bone mass measurement and continuous glucose monitoring. The value for 95250, the 72 hour glucose monitor technical service, increased from \$52.00 to \$110.00! These codes were created and valued properly in large part because of the vigilance, presence, input, and careful tracking of the processes by specialty society representatives for endocrinology. Without these important changes, payers would have continued to have misunderstandings and physicians would have continued to experience hassles and underpayment, if payment was made at all, with regard to these services. It is only since the active engagement of clinical endocrinologists in the process of coding and reimbursement that some of the services of the endocrinologist have been recognized.

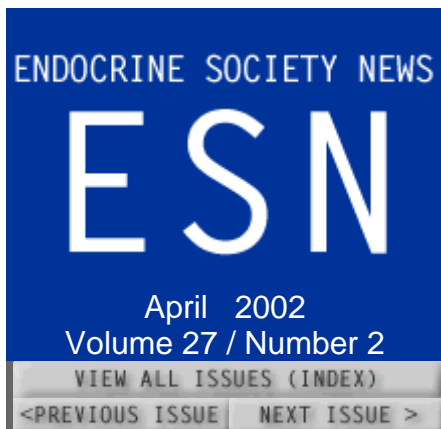
Much has been written already about the importance of coding and reimbursement of



those practicing endocrinology. This article was planned to help highlight, how you, as a member of the society, can contribute to these important aspects of healthcare practice and how important your society's representatives are to your day-to-day interests. So when you are called upon to respond to a survey, when you become aware of the need for a new code or a change in coding or reimbursement, or when you are asked to serve as a representative of The Endocrine Society, please be prepared and willing to give freely of your skill and time and make your contribution.

Please feel free to contact Richard Dickey, M.D. at 828-495-1230 or email mdrad@charter.net if you have any specific questions regarding coding procedures. For a list of coding references and resources, you may contact Vince Socorso, Public Affairs Coordinator, at 301-941-0254 or email vsocorso@endo-society.org to obtain more detailed information.

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CMES Launches Audio Conference Series

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Continuing to expand the delivery of education to our members and allied health professionals, The Endocrine Society will launch a series of live audio conferences in 2002, which will be supported by an unrestricted educational grant from GlaxoSmith-Kline. Preliminary topics include:

- "Early Treatment: Identifying Underlying Factors in Patients with Type 2 Diabetes"
- "The Pathophysiology of Type 2 Diabetes and How it Relates to Treatment Decisions"
- "Type 2 Diabetes: Beta-cell Dysfunction and Treatment Choices"
- "Using Combination Therapy to Treat Type 2 Diabetes: The Goal of Efficacy"
- "Understanding the Metabolic Syndrome"
- "Recognizing the Many Faces of the Insulin Resistance Syndrome: The Asian Population"
- "Approaches to Treatment in the Hispanic Population: Understanding Disease Perception"
- "African Americans and Diabetic Complications: Knowing the Risks"

The first program launched in March. A full program schedule is available on The Endocrine Society's Worldwide Endocrine Events Calendar at www.endo-society.org

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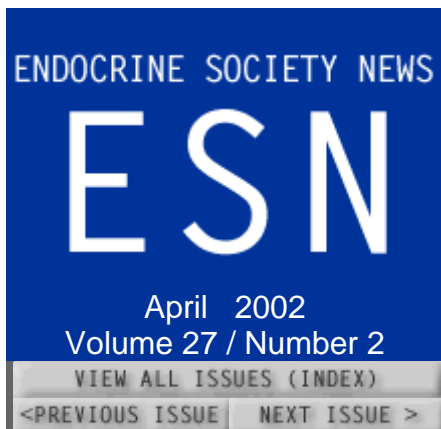
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Thanks to the generosity of several Society members, the History Project has received some extremely interesting and unusual items to display at ENDO 2002. Please plan to visit the History Project exhibit in The Endocrine Society booth at ENDO 2002 to view the newly donated items and the archives. Remember-save historic endocrine-related items to donate to the Society's archives and library of antique, classical or out-of-print endocrine texts. Many old letters, especially those of past presidents correspondences and presidential addresses are invaluable to the Society's collection.

If you have any questions regarding the History Project or donations, please contact Dr. Adolph Friedman at 301-951-2607 or afriedman@endo-society.org

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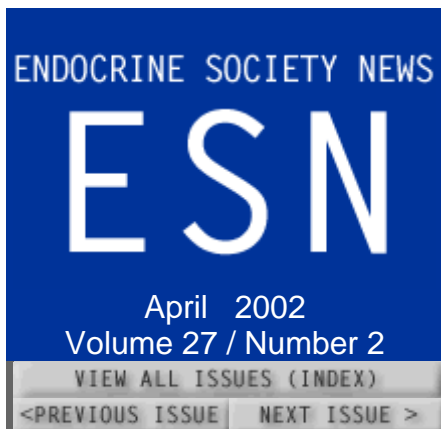
History Project Receives
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Corporate Liaison Board to Host Fourth Annual Forum at ENDO 2002

Corporate Liaison Board to Host Fourth Annual Forum at ENDO 2002

The Corporate Liaison Board (CLB) invites ENDO 2002 attendees to the 2002 CLB Forum titled "*Genomics: Unlocking the Future to Drug Discovery in Endocrinology*," on Thursday, June 20, 2002, 6:30 p.m. at the San Francisco Marriott, Yerba Buena, Salon Eight. The annual forum, which is hosted by the CLB, is designed to strengthen the relationship between The Endocrine Society and industry. The forum will provide ENDO attendees with an opportunity to hear unique perspectives on the role of genomics in drug discovery. This year's forum will feature experts from industry, academia and the FDA who will address the future of drug discovery, clinical applications and surrounding ethical, legal and regulatory issues. Please join the CLB for an interesting and thoughtful session.

The CLB has invited the following guest speakers to participate in the forum:

- **Thomas Bumol, M.D., Ph.D.,** *Eli Lilly & Company* "Impact of Genomics on the Future of Drug Discovery"
- **Rudy Leibel, M.D.,** *Columbia University* "Genomic Approaches to the Molecular Genetics of Type 2 Diabetes"
- **Henry Greely, J.D., A.B.,** *Stanford University* "Pharmacogenomics: Ethical & Legal Issues"
- **Dr. Shiew-Mei Huang,** *Office of Clinical Pharmacology and Biopharmaceutics, FDA* "TBD"

All ENDO attendees are invited to participate in this exciting program designed to provide insight into the world of genomics and its

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impact on drug discovery and the field of endocrinology. This session will conclude with an update on the collaboration between The Endocrine Society and industry.

To receive the latest information about the forum visit The Endocrine Society's Web site at www.endo-society.org/industry/clubforum.cfm



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