Greetings!

The PES Board of Directors had a highly successful meeting earlier this month during which we were joined by our newly elected members: Sharon Oberfield (President-Elect), Jack Fuqua (Treasurer), and Laurie Cohen (Director). We also hosted representatives from 11 of our 14 Mission Alliance Partners (MAP) for 2 half-day sessions during which we discussed areas of mutual interest and generated concepts for new collaborative initiatives. All MAP members were enthusiastically supportive of our upcoming standalone meeting and have taken advantage of a variety of opportunities for sponsorship and support. Speaking of our annual meeting, it is quickly approaching and the excitement is building! I am delighted to share with you that we received a very large number (239!) of outstanding abstracts that address the wide range of contemporary pediatric endocrinology, and based on the large number of early (!) registrations for the meeting, we are making location of additional hotel space a top priority. I am also thrilled to announce the selection of our named lectureships and awardees. The Blizzard lecture will be given by Robert M. Malina, PhD, the Kaplowitz lecture will be given by Jennifer Raymond, MD, MCR and the 2020 Judson J. Van Wyk Prize will go to Mark Sperling, MD. I am sure you will agree that this is a superb line-up of individuals and one that truly showcases the incredible depth and breadth of our specialty!

And now for something particularly special. This year, in lieu of the Lawson Wilkins Lecture, we have invited the Whittington family consisting of parents Hillary & Jeff, transgender son Ryland and sister Brynley to come and share their story with the PES membership. Hillary is the author of the highly acclaimed book “Raising Ryland” in which she recounts the experience of parenting a transgender child. This unique session is sure to be riveting and inspirational and you will not want to miss it!

**Early Bird rate has been EXTENDED to February 7, 2020**

PES Regular Meeting Registration ends March 15

Do not delay.... Register for the PES annual meeting TODAY! [https://apps.pedsendo.org/mtg/](https://apps.pedsendo.org/mtg/)
PES Board and MAP participate in a Build-a-bike teambuilding activity to benefit kids in need through the local YMCA during January Board meeting in VA.

**Welcome New Members**

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<th>Member</th>
<th>Organization</th>
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<tr>
<td>Carine Anka</td>
<td>Washington University School of Medicine</td>
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<td>Marcella Astudill</td>
<td>Texas Children's Hospital</td>
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<td>Jennifer Bracamontes</td>
<td>Seattle Children's Hospital</td>
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<td>Chelsi Flippo</td>
<td>National Institutes of Health</td>
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<td>Laura Forero</td>
<td>University of Connecticut - Connecticut Children's Hospital</td>
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<td>Lindsey Gaston</td>
<td>Boston Children's Hospital</td>
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<td>Elizabeth Greene</td>
<td>Duke University Hospital</td>
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<td>Camilia Kamoun</td>
<td>CHOP</td>
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<td>Catherine Kerr</td>
<td>UTHSCSA</td>
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<td>Alexa Marr</td>
<td>Children's Hospital of Eastern Ontario</td>
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<td>Apoorva Ravindranath Waikar</td>
<td>Yale - New Haven Hospital</td>
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<td>Lyndsey Reynolds</td>
<td>University of Michigan</td>
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<td>Elaine Sanderson</td>
<td>Perth Children's Hospital</td>
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<td>Swetha Sriram</td>
<td>UPMC, Children's Hospital of Pittsburgh</td>
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<td>Zoyah Thawer</td>
<td>University of Ottawa</td>
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<td>Zeinab Zorkot</td>
<td>Children's Hospital of Pittsburgh UPMC</td>
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Early Bird rate has been EXTENDED to February 7, 2020
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PES Regular Meeting Registration ends March 15th.
Click here for a current Schedule at a Glance

Lodging:
Our hotel block at the Worthington Hotel is sold out.
We have secured additional sleeping rooms at: The Courtyard Fort Worth Downtown/Blackstone at $185 per night

Book your group rate for Pediatric Endocrine Society Annual Meeting 2020

For more information about the 2020 PES Annual Meeting, please click here

PES Leadership Advantage Workshop:

Our next PESLA workshop is only three months away! Four separate modules: Influence, Engage, Inspire and Envision comprise the entire PESLA program. The Influence Module will be offered at the April 2020 Conference in Fort Worth. Here is a preview of the second topic in the Influence session: Managing your Time & Delegating Effectively.
As you grow professionally and demonstrate mastery of certain core skills, it only makes sense that you acquire more responsibilities. The way you distribute your time among varying tasks should change accordingly, and this shift is only possible through increased and effective delegation. Delegation saves time for leaders, and allows more work to be completed faster.

**Understanding and strengthening your Time Management and Delegation will ensure YOU:**

- Audit and determine which tasks should remain, be removed and be added to your plate in support of your leadership goals and upward mobility
- Through the completion of the “What’s My Time Style” assessment, make your personal time management style work to your advantage and better understand how to work with others who manage their time differently
- Redefine tasks as opportunities for direct reports to grow

This event is scheduled for Thursday, April 23rd in advance of the 2020 PES Annual Meeting. Session runs 11:00 AM – 5:30 PM, with lunch and break refreshments provided.


**New participants** can register here: [https://themalonegrp.com/product/pes-leadership-advantage-new-participant/](https://themalonegrp.com/product/pes-leadership-advantage-new-participant/)

For more information, please contact The Malone Group through Sharon Malone, (860) 674-9325 or sharon@themalonegrp.com or Lisa Milano, Psy. D. (917) 685-3827 or lisa@themalonegrp.com

**Call for Committee Interest!**

There will be a meeting of the PES Committees in Fort Worth, TX on Friday April 24, 2020 from 9:00am – 11:00am as part of the PES annual meeting. If you are interested in joining a committee, please see the list of committees here [https://www.pedsendo.org/members/CommitteesCouncils/index.cfm](https://www.pedsendo.org/members/CommitteesCouncils/index.cfm) and reach out to the leadership to demonstrate your interest. Now is the time to get involved! We look forward to seeing you in Fort Worth and hope that you will decide to join one of our exciting Committees!
SIG NEWS:
New Survey Available - Assessing Knowledge Gaps in Pediatric Bone and Mineral Disorders
Please consider taking this brief survey (5 minutes), entitled "Assessing Knowledge Gaps in Pediatric Bone and Mineral Disorders" to allow us to identify knowledge gaps regarding pediatric bone and mineral disorders. The information will be used to guide development of PES educational materials and resources to meet the needs of pediatric endocrinologists in everyday practice. We thank you for your time in completing this survey.
Marie-Eve Robinson, MD, on behalf on the PES Bone and Mineral SIG
Survey link: https://redcap.nchri.org/surveys/?s=7DCMYMLX8E

HOT OFF THE PRESS! The board of Directors is pleased to announce a new SIG: Endocrine Late Effects in Childhood Cancer!
The aim of this new SIG is to provide a forum for collaboration and discussion of the latest research and recommendations in screening, diagnosis, and management of endocrine late effects in childhood cancer survivors (CCS), to develop practice standards in this unique and important endocrine subspecialty, and to serve as a mentorship resource for providers interested in developing a career path specializing in the endocrine care of CCS.
If you are interested in participating, please contact one of the co-chairs: Laurie Cohen Laurie.Cohen@childrens.harvard.edu or Wassim Chemaitilly wassim.chemaitilly@stjude.org

Update from Diabetes SIG on the status of T1D Exchange Collaborative and its efforts in improving outcomes, redefining best practices and managing population health for patients with Type 1 Diabetes.
https://myglu.org/articles/t1d-exchange-quality-improvement-coalition-panel-tackles-issues-of-type-1-diabetes-care

MOC corner:

MOC Session co-sponsored by MOC-QI committee and the Ethics SIG:
Don’t miss an opportunity to get MOC part 2 credit! The Ethics SIG will be presenting the “Ethics in Pediatric Endocrinology Case Based Modules” on a broad range of topics during the MOC Part 2 session hosted by the MOC-QI Committee on Saturday, April 25, 2020 5:30-7:00pm.

2020 PES Obesity SIG MOC/CME Activity
Don’t miss out on the opportunity to earn MOC/CME credit! The Pediatric Endocrine Society is pleased to offer an Obesity MOC/CME Activity that contains approximately 60 multiple-choice items and detailed answer explanations. This activity reviews evidence-based clinical practice guidelines for pediatric obesity and focuses on a stepwise approach to the diagnosis and management of obesity and its comorbidities in pediatric patients.

https://www.pedsendo.org/secure/obsigexam/forminfo.cfm

PES- MOC Webinar session
The PES MOC-QI Committee has developed a webinar that would help PES Members navigate the ABP website to check MOC requirement status, identify, and develop QI projects that have relevance to pediatric endocrinology and meet ABP MOC Part 4 criteria. The webinar was presented on November 18, 2019 by Patricia Vuguin, Sarah
Corathers, Justin Indyk, and Erinn Rhodes called “MOC Webinar session”, available at the PES Education Committee Webinar Series.

https://www.pedsendo.org/quality_improve/index.cfm

WE NEED YOUR HELP! Please see below and share with your APPs
The Pediatric Endocrine Society (PES) has recently extended membership to advanced practice providers (APPs) in the field of pediatric endocrinology. However, it is unclear how PES can best serve this group. The Education Council of PES has created a survey with the goal being to get a better understanding of what PES can offer to APPs to meet their educational, career, and professional goals. Please share this survey with all the APPs in your practice (including those in clinic, hospital, research, and other roles). We hope that all APPs in the field of pediatric endocrinology can complete this survey once. The APP does not have to be a current member of PES to fill out the survey. Thank you for helping us publicize and distribute this survey!

Click here to take the survey
https://www.surveymonkey.com/r/C6W7Y8X

PER Volume 17 no. 2 now available:
Pediatric Endocrinology Reviews (PER)
Reviews (PER) has become an affiliated journal of our society. Hormone Research in Paediatrics remains our official journal. PER is an international peer-review journal (with ~ 800 subscriptions from 19 countries) that publishes review articles on topics related to pediatric endocrinology, diabetes, metabolism, nutrition, and genetics. PER also publishes extensive Meeting Reports, including those of our annual meeting, along with reviews of recently published books in the field of endocrinology. There are usually four issues each year, along with periodic supplements [last two on Noonan Syndrome (editor, Robert Rapaport, MD) and the 50-year history of growth hormone (editor, Adda Grimberg, MD)]. We will continue to provide links at the PES website to the PER Table of Contents.

You can subscribe to PER and receive access to current and future journal issues at the discounted rate of $100 (USD) per year, while individual articles can be purchased at the low discount rate of $39 each.

Click here for table of contents
Click here to subscribe
**Glucagon preparations**

The FDA has approved two new ready-to-use forms of glucagon, and these have been introduced to the market: an intranasal powder (Baqsimi, Eli Lilly) and a stable liquid form that does not require reconstitution (Gvoke, Xeris Pharmaceuticals). These innovative formulations provide the benefits of glucagon in reliable, ready-to-use formulations that can be administered quickly and simply.

*Baqsimi* is a single-use device that contains 3 mg glucagon in powdered form, and is approved for use in patients who are age 4 years and older. It can be stored at temperatures up to 86°F (30°C). When used as instructed, it is passively absorbed through the nasal mucosa and does not require inhalation by the recipient. It is effective even in patients with nasal congestion. Efficacy is >98% in raising blood glucose by 25 mg/dL within 20 minutes in children. In research trials, all caregivers were able to administer the glucagon intranasally within 2 minutes, most in Gvoke is a pre-mixed formulation of liquid glucagon that is approved for use in patients aged 2 years and older. It is currently available as a 0.5 mg/0.1 mL or 1 mg/0.2 ml single-use pre-filled syringe (Gvoke PFS) that does not require any preparation before subcutaneous administration. Children who weigh 12 years or weight >45 kg and adults should receive a 1 mg dose. A dose may be repeated if no response is seen after 15 minutes. It should be stored in the original, sealed foil pouch until time of use, at controlled room temperature, 68° to 77°F (excursion permitted between 59° to 86°F), and should not be refrigerated or frozen. *Gvoke* showed high efficacy (99-100%) in treating severe hypoglycemia in Phase III studies of adults and children with type 1 diabetes when compared with conventional glucagon emergency kits Most common adverse reactions (>5%) associated with *Gvoke* are nausea, vomiting and injection site edema. The incidence of nausea and vomiting is comparable to Glucagon Emergency Kit. The single-use *Gvoke* auto-injector (*Gvoke HypoPen)* is expected to become available in 2020.

**Increlex**

In response to findings of a safety signal report that there is reasonable suspicion of a causal association between use of Increlex® and childhood neoplasia, including malignancy, changes have been made to the Prescribing Information (PI) and Patient Package Insert (PPI) of Increlex® (*Mecasermin*, recombinant human insulin-like growth factor-1) manufactured by Ipsen pharmaceuticals.

For further details view the full document [HERE](#).

**Mentor/Mentee program REMINDER**

Mentor/Mentee Matching Time!

With the 2019-2020 academic year in full swing, do you have a clear vision of your future? Let us help! The PES Mentorship Program matches junior faculty and senior fellows with faculty across institutions, fostering the development of the next generation of pediatric endocrinology scholars! The PES mentor and mentee applications have been released. New mentors and mentees are encouraged to sign up early! In addition, current mentors and mentees should also “reapply” to continue their match. All will be invited to attend the Mentorship Workshop session at the PES meeting on April 25th! Save the date!
Fellows’ Spotlight
Kyle McNerney, MD

I am a 3rd year pediatric endocrinology fellow at Washington University in Saint Louis. I went to medical school at Case Western Reserve University School of Medicine, completed residency at Saint Louis Children’s Hospital, and stayed in Saint Louis for fellowship. Looking back, my first mentor in endocrinology was Dr. Louis Philipson at the University of Chicago, who guided me through diabetes research projects while I was an undergraduate. That early experience made me certain that I wanted to pursue endocrinology. Since then, I have been fortunate to have excellent mentorship including my current research mentor, Dr. Carlos Bernal-Mizrachi, my division chief Dr. Ana Maria Arbelaez, and a multitude of clinical mentors in pediatrics and pediatric endocrinology. Due in part to the great mentorship I have received, I am passionate about teaching medical students and residents and sharing the joy of pediatric endocrinology.

My research interests are in the prevention/treatment of type 1 diabetes, and the role of vitamin D and the immune system in type 2 diabetes and obesity. Clinically, I am a strong advocate for the use of technology in the treatment of type 1 diabetes. I am grateful to be treating diabetes at a time when technology such as CGM and hybrid closed loop is rapidly advancing, and I appreciate how patient and provider advocacy is helping to drive industry progress and improve insurance coverage of diabetes technology.

In Memoriam
Maurice D. Kogut
July 3, 1930 – November 25, 2019

It is with deep sadness that we note the death of Maurice Kogut, M.D., who passed away on November 25, 2019, at the age of 89. Maury was Professor of Pediatrics at the Keck School of Medicine of USC and Wright State University, and was formerly the Head of the Division of Endocrinology and Metabolism at the Children’s Hospital Los Angeles and Co-Chair of the Department of Pediatrics (1968-1980), and Chair of the Department of Pediatrics and Medical Director of the Children’s Medical Center in Dayton, Ohio (1980-1998). He was a member of the PES, APS, ADA, Endocrine Society, and WSPR. He served generously on the National Board of Medical Examiners, which in 2007 awarded him the Edythe J. Levitt Distinguished Service Award.

Besides clinical research, scientific publications, and patient care, what Maury loved the most was to teach, and he was indeed an excellent teacher. Hundreds of students, residents, and fellows benefited from his remarkable breadth of knowledge of pediatrics in general and pediatric endocrinology in particular. Before the age of UpToDate and Google, Maury was a well-read and insightful resource to his colleagues for their questions regarding all pediatric endocrinology problems. His remarkable teaching skills were widely admired and he was the recipient of many teaching rewards. He demanded a lot from house staff, fellows, and young attendings, but he was always ready to share his knowledge with anyone who needed help or direction. Maury is survived by his wife, three daughters, and a sister-in-law.
History Tidbit:
Does human prolactin differ from human growth hormone?
Alan D. Rogol, MD, Ph.D
Before the 1970’s animal prolactin was known to differ from growth hormone, but not for humans. Clinical observations revealed not all patients with acromegaly had galactorrhea or patients with galactorrhea had acromegaly. Or, as my mentor Bob Blizzard was wont to note, and here I paraphrase, “hPrl exists because women with GH deficiency lactate post-partum”. Using pituitaries from pregnant and lactating monkeys, Friesen and coworkers identified proteins of similar but not identical size and electrophoretic mobility (J Biol Chem 1972; 247:1955). Convincing data showed that the first 23 amino acids of putative hPrl were more like the animal prolactins than growth hormones (Rec Progr Horm Res 1973; 29:387). Additional work with dopamine agonists as inhibitors of Prl secretion, opened a medical treatment for some pituitary adenomas.

Sincerely,

Erica Eugster, MD
PES President

Michael Levine, MD
PES Board Member