Greetings!

We just returned from India where we had spent two weeks in Rajasthan before going to Hyderabad for the ISPAD meeting. In Udaipur, a lovely white city on a series of lakes, we hiked with a young guide named Keshan who took us through a series of mountain villages, ending up at a Shiva cave temple on the peak. Keshan was trying to build his guiding business that focuses on active trips, like hiking and biking, and began to hike through this area to scout hikes that would be of interest to foreigners. In the process, he became gradually accepted and trusted by the members of the minority tribe that inhabits the villages in the area. Over time, the villagers allowed Keshan to bring his guests to their homes to see the traditional lifestyle of the area and to have the opportunity to talk with the women, children, and seniors, visit their village temples, try their hand at making chapatti, and laugh. Eventually, Keshan established a fund to provide financial support to the village students and the village school - helping to purchase school uniforms, backpacks, and supplies. Meanwhile, Keshan’s tours developed a reputation as fun, meaningful, innovative, and good exercise, accomplishing his initial goal of building his business. At the same time, Keshan’s guests and their friends have helped to improve the lives of the families they met or heard about through donations. What struck me most was that this was one of the few places we visited where we were surrounded by children who were eager to walk with us, hold our hands, show us their homes, and mug for pictures, but never asked for money. They knew that we were somehow part of Keshan’s project to better their lives, but they expected nothing for themselves directly.

Anyone who has read my last few President’s Letter intros probably knows where I am going with this. This is a lovely example that it is possible to do good by doing well – there is nothing inherently wrong about being successful in business when it is tied to an earnest and heartfelt social mission. Thus, as I have discussed before, the PES Board of Directors has been working over the last few months to re-imagine our relationship with health care industry partners to better recognize that, while they are in business to make a profit, they also have missions that align, at least in part, with those of our Society. We are now pleased to present this new model, which starts with a change in name from PES Corporate Advisory Board (CAB) to PES Mission Alliance Partners (MAP). This name more clearly recognizes that many entities that participate in the field of endocrinology and diabetes have missions and values that are aligned with those of PES and some have long partnered with us to support our members and the patients for whom we provide care. Rather than the advisory role played by members of the CAB in the past, we envision the development of strategic partnerships between PES and MAP members to accomplish our shared goals. Moreover, we foresee an important transition from thinking about what the Society and companies can acquire from each other to one that focuses on what we can achieve together. As its name implies, it is our sincere hope that MAP will join with PES to navigate the complex currents of the changing healthcare landscape and together chart a course toward a vibrant future for pediatric endocrinology and for the patients and families to whom we are committed.

At the same time, this new model promotes greater transparency about the relationships that the Society has with stakeholder organizations through public and program-wide recognition of the support provided to PES as an academic society with a mission, rather than hiding this support because of arcane rules around CME or other limitations on participation. Furthermore, this model increases financial predictability for everyone because the core is a fixed financial contribution to PES in support of the
Society’s goals rather than requiring unpredictable and labor-intensive specific grant requests. The model also includes a tiered membership structure that allows partners to take into consideration their own mission and alignment with goals of PES to determine the degree to which they aspire to commit to this partnership.

We are currently in the process of discussing this with our current CAB members. So far, the reaction has been extremely positive, and we anticipate a successful inauguration of the MAP in January. We hope when fully established, these partnerships will provide new financial predictability to PES to support the programs to which we, and our MAP partners, are committed.

2018 Travel Awards
On a related note, I need to share the disappointing news that we have so far not managed to secure funding for the PES/PAS annual meeting travel awards that we have offered to Fellows in the past. The support for these awards, received in response to an annual grant request, has been dwindling due to changes in corporate granting policies over the last few years and we have received no funding this year. The Board of Directors has decided to use reserve funds to continue these awards, but in an altered form. This year, we will offer twenty $500 awards. Eligible recipients will be Fellow Members of PES who have had an abstract accepted for oral or poster presentation at the annual PAS meeting. The Selection of recipients will be made by members of the Research Affairs Committee and the Training Committee based on the submitted abstract, a brief CV, and a paragraph describing how the submitted research fits into research and career goals. Please watch for coming information on the opening of the PES Travel Award portal in the next few months as details are finalized.

Information on the upcoming PES/PAS Annual Meeting
Original Science Abstract Submissions NOW OPEN!

On behalf of the PAS Program Committee, I am pleased to announce the call for Original Science Abstracts is NOW OPEN for the PAS 2019 Meeting in Baltimore, MD, April 24 – May 1, 2019 (April 24-26 Pre-conference Events, April 27-30 PAS 2019 Meeting, May 1 Post-conference Events).

With its combination of cutting-edge original research, world-renowned experts in basic and clinical sciences, and network of cross-disciplinary colleagues, the PAS Meeting is the premier North American scholarly child health meeting.

Please note, submission will close on January 2, 2019. There will be No Late Breaker abstract submissions in 2019. Click here for more information on the PROGRAM page of the PAS website.

NEW THIS YEAR: ALL AUTHORS must complete Conflict of Interest Disclosures (COI) in the PAS Program and Events Center (PPEC).

Reminder: The Call for Workshops closes on Wednesday, Nov. 14, 2018 11:59 pm ET.

Questions? Email or call the PAS Program Office: +1.346.980.9717 or info@PASMeeting.org

Letter to the Editor of the New York Times
As President of PES, I sent a Letter to the Editor regarding the October 19th article about acts of sexual abuse allegedly committed by Dr. Reginald Archibald. For your interest, the link to this letter and the article it references can be found here: https://www.nytimes.com/2018/10/28/opinion/letters/child-sex-abuse.html

Congratulations to Dr. Scott A. Rivkees
Dr. Scott A. Rivkees, Professor and Chair at the University of Florida, Department of Pediatrics, was honored by the American Thyroid Association (ATA) as the 2018 Paul Starr Award recipient and lecturer. The Starr Award is presented to an outstanding contributor to clinical thyroidology. Dr. Rivkees delivered the Paul Starr Award Lecture on October 4, 2018, on “Unmasking the Problems with Antithyroid Medication Safety” at the ATA Annual Meeting in Washington, DC.
Leadership Development
Registration NOW OPEN!
Early Bird Registration for the 2019 Leadership Advantage Workshop - ENVISION - is now available!

PES Leadership Advantage provides physician leaders with the core skills key to becoming impactful voices at the leadership table. Offered in a blended learning setting centered around a live workshop, a learning module is offered annually as a pre-conference benefit to PES members. PES Leadership Advantage enhances three overarching areas of high performance: Leadership, Fundamentals, Leading & Influencing Others, and Navigating & Guiding Your Enterprise.

Four separate modules: Influence, Engage, Inspire and Envision comprise the program. The fourth module, Envision, will launch at the April 2019 Conference in Baltimore. However, the previous modules will again be offered at future conferences and can be taken in any order!

Click here for more information and to register

Election reminder
All those eligible to vote have recently been emailed a link to vote on elections (President-Elect and Director). Please be sure to submit your votes by November 21st!

Applications for the 2019 Research Fellowship Awards and Clinical Scholar Awards
Applications NOW OPEN!
NOTE: The timeline for RFA/CSA submission has shifted this year. The application process will begin and end a month earlier, but applicants will have the same amount of time to apply as past years. Deadline: December 3, 2018, 12:00 PM (Eastern)

Please click on the links below to access the detailed instructions, requirements, and the application forms.
PES Research Fellowship Awards
PES Clinical Scholar Awards

Spring Retreat
Applications NOW OPEN!
The Spring Retreat is held every year for Pediatric Endocrine Society (PES) members in their first or second year of Pediatric Endocrinology fellowship training. The Retreat is held in association with the Pediatric Academic Sciences (PAS)/PES meeting. The goals of the Spring Retreat are for participants to develop and practice critical thinking skills in clinical Pediatric Endocrinology, learn about different career trajectories within the field, and network with other pediatric endocrine fellows and faculty.

For more information and to apply click here.

2019 Membership Dues Renewal is NOW OPEN!
If you were a new member or renewed in 2018 your demographics are prepopulated for your convenience. Please review the data for accuracy. These data help us make informed decisions when developing new programs and resources and are essential to our mission. We thank you for your cooperation, and highly value your feedback!

Click here to renew your dues.

Regional Grants
PES Board has allocated $2000 per regional meeting with plans to fund up to four Pediatric Endocrinology regional meetings per year. The intent is to support meetings of established Pediatric Endocrine groups, with a focus on regional involvement of multiple institutions, and opportunity for fellow participation. The funds are provided to defray expenses of an invited speaker. There was
tremendous interest in these grants in 2018. Four regional conferences were awarded funds for 2018. We will be accepting grant applications for the fiscal year January 2019. Grant applications will be reviewed on a first-come basis and funds are limited. Please carefully review the instructions before you send in your application.

Please click here for access to the instructions.

**Mentor Program Solicitation**

The Research Affairs Council (RAC) is soliciting mentors and mentees to register for the next wave of the Mentoring Initiative. The initiative did very well in the first four years, and the feedback thus far has been excellent. The RAC is now working on setting up the next round of mentor-mentee matches. **Mentees** include faculty at various stages of their careers and fellows that would like to establish mentors outside their institution. We hope to recruit **mentors** who are willing to advise on careers in research, clinical practice, administration, industry and government, career advancement, as well as work-life balance.

Please click here to register as a mentor or a mentee.

*Please note, even if you have previously participated, you must register again to continue your participation.*

**Patient and Provider Education Materials**

The Education Committee of the PES has developed Written **Patient Education materials**
https://www.pedsendo.org/patients_families/Educational_Materials/index.cfm and **Provider Educational materials**

https://www.pedsendo.org/education_training/education_resources.cfm

The **Patient Education sheets** can be distributed to fulfill federally mandated ACA requirements to provide written materials to patients and families. The **Provider Educational materials** offer helpful information sheets for pediatricians and family practitioners for the initial evaluation of patients with suspected endocrine disorders. These can be shared with the referring physicians.

**History Tidbit provided by Alan D. Rogol, MD, PhD**

Pierre Marie and the Description of Acromegaly

Pierre Marie (1853-1940) published the first clinical description of the signs and symptoms of acromegaly in two patients [Rev Medicale 1886; 6:97], although its relationship to the pituitary gland was not described until the following year [Oskar Minkowski, Klin Wochenschr 1887; 24:371]. The most conspicuous signs were overgrowth of the hands and feet and of the head and face (the acral parts of the skeleton). In 1900 Clemens Benda showed that tumors causing acromegaly were composed mainly of hyperfunctioning eosinophilic cells [Klin Wochenschr 36:1205]. Multiple methods considered for therapy included transcranial and transsphenoidal surgery and radiation therapy, most of which have been optimized over the last century. Marie was an academic neurologist, contributing to the description of Charcot-Marie-Tooth disease.

**Development of a Global e-learning Curriculum in Pediatric Endocrinology and Diabetes for Front Line Health Care Providers in Resource-Limited Countries.**

This project aims at the development of a freely and globally accessible e-learning module containing teaching and instruction material related to pediatric endocrinology and diabetes specifically intended for three levels in Resource Limited Countries (RLC):

1. **Primary level** (basic or rural); staffed by a clinical officer or assistant medical officer.
2. **Secondary level** (district and regional hospitals); staffed by a pediatrician and/or pediatrician with interest in endocrine disorders.
3. **Tertiary level** (zonal referral hospitals and the main/national referral hospital);
staffed by pediatricians and/or pediatric endocrinologists.

The portal can be found on the ESPE website and as www.espe-elearning.org. This project is financially supported by a grant from Eli Lilly (2016-2018) [see attached].

**Promotion of Type 1 Diabetes Fellows Conference to PES members**
There is only one week left to apply for the Endocrine Society’s *Endocrine Fellow Series: Type 1 Diabetes Care and Management Conference*. This comprehensive conference for adult and pediatric endocrine fellows will be held March 19–21, 2019 in New Orleans, LA, in conjunction with ENDO 2019. If interested, apply by November 7, 2018, to attend this unique T1D program and learn from diabetes experts. Accepted fellows receive a travel stipend and housing to attend the conference, as well as complimentary registration to attend ENDO 2019.

**Celebrating today 3,000 followers on our PES Facebook page!**
When we started promoting our PES Facebook and Twitter social media in May 2018 we had a couple of hundred followers.

We are now 3,000 strong thanks to the superb and ongoing efforts of all in the Communications Committee, and particularly the tireless searches and postings by Drs. Priyanka Bakhtiani and Nidhi Gupta.

We now have followers from all over the world! In our next step, we will undergo a website redesign over the next 2 years!

As always, if you have relevant new guidelines or landmark papers you can share, please send them to the communications committee for review and to share with the membership on the website.

**Fellows Spotlight**
Petter Bjornstad, MD

I am an Assistant Professor in Pediatric and Medicine at University of Colorado School of Medicine. My primary appointment in Department of Pediatrics, Division of Endocrinology, and and secondary appointment in Department of Medicine, Division of Renal Diseases and Hypertension. I dedicate 80% time towards research and 20% clinical work. My clinical and translational research is focused on metabolic and hemodynamic mechanisms underlying the development of diabetic kidney disease and cardiovascular disease in adolescent and young adults with type 1 (T1D) and type 2 (T2D) diabetes.

My interest in endocrinology began during the pre-clinical teaching in medical school, where I was intrigued by the logic of endocrine physiology and how minute derangements can result in multi-organ dysfunction. During my clinical electives in pediatric endocrinology as a medical student, I saw the mental flexibility needed to entertain multiple differential diagnoses that subsequently pay dividends in an expeditious and productive work-up. Because I loved these diagnostic and therapeutic challenges, and always wanted to work with children and adolescents, pediatric endocrinology was the right career choice for me. During residency and fellowship, I became increasingly interested in the interplay between endocrinology and nephrology which shaped my current research endeavors.

I have been exceptionally fortunate with my team of mentors. During pediatric residency I started working with Dr. Kristen Nadeau and Dr. David Maahs. Dr. Maahs introduced me to epidemiological research in micro- and macrovascular complications in pediatrics and adults with type 1 diabetes, whereas Dr. Nadeau exposed me to translational research studies focusing on in-depth metabolic and vascular assessments including clamps and MRI methods. I also started working with Dr. David Cherney during residency and did a research elective with his lab during fellowship to acquire skills in gold standard assessments of renal physiology and pathophysiology.