

**Diabetes and Endocrinology: Learning from other Specialists**  
**Thursday 7 October 2010**

Venue: Royal College of Physicians, 9 Queen Street, Edinburgh

**9.00**      **Registration** and Coffee

**9.25**      **Welcome** by Dr Neil Dewhurst, President, Royal College of Physicians of Edinburgh

**Session 1 – Thyroid disease**

Chair: Dr Mark Strachan, Consultant Physician, Metabolic Unit, Western General Hospital, Edinburgh

**09.30**      **How I manage dysthyroid eye disease**

Mr Geoffrey E Rose, Consultant Ophthalmologist, Moorfields Eye Hospital, London

\*activity scoring \*who to refer to an ophthalmologist \* role of intravenous glucocorticoids and other immune suppressants \* indications for radiotherapy \* when to operate

**10.00**      **Best practice and future prospects in thyroid cancer**

Dr Kate Newbold, Consultant Clinical Oncologist, Royal Marsden Hospital, London

\*recombinant TSH for everyone receiving radio-iodine? \*rising thyroglobulin but no radiologically evident disease \*managing metastatic disease \* what new treatments are in the pipeline?

**10.30**      **The happy thyroid consultation**

Mrs Janis Hickey, Director, British Thyroid Foundation

\*what makes patients unhappy at their thyroid clinic? \*what do patients want to improve their quality of care?

**11.00**      **Coffee / tea**

**Session 2 - Diabetes**

Chair: Dr Peter Leslie, Consultant Physician, Borders General Hospital

**11.30**      **Glycated haemoglobin – new units ..... and a diagnostic tool for diabetes?**

Professor Eric Kilpatrick, Consultant in Chemical Pathology, Hull Royal Infirmary/Hull York Medical School

\*why another change in the way we measure glycated haemoglobin? \*could HbA1c replace glucose in the diagnosis of diabetes?

**12.00**      **ENDOWED LECTURE**

Chair: Dr Neil Dewhurst, President, Royal College of Physicians of Edinburgh

**Is the brain a target organ in diabetes?**

Professor Christopher Ryan, Professor of Psychiatry, Psychology, Health & Community Systems and Clinical & Translational Science, University of Pittsburgh, USA

\*what have we learned from the DCCT? \*are children and the elderly more susceptible to cognitive decrements? \* can we do anything to prevent or treat cognitive impairment and dementia?

**12.45**      **Lunch**

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**Session 3 – General endocrinology**

Chair: Professor Jonathan Seckl, Moncrieff-Arnott Professor of Molecular Medicine and Director of Research, College of Medicine & Veterinary Medicine, University of Edinburgh

**13.45 A practical guide to pituitary radiotherapy**

Dr Sara Erridge, Consultant Clinical Oncologist and Honorary Senior Lecturer, Edinburgh Cancer Centre

\*benefits and toxicity of irradiating the pituitary – are there any advantages to alternative to standard radiotherapy?

**14.15 Androgen deficiency in older men ..... and women**

Professor Richard A Anderson, Professor of Clinical Reproductive Science, Queen's Medical Research Institute, University of Edinburgh

\*new insights into the aetiology of hypogonadism \* how extensive does investigation need to be in borderline hypogonadotrophic hypogonadism in older men? \*is therapy of any benefit in men ..... and women?

**14.45 Symposium feedback / tea**

**Session 4 – Evolving therapies for diabetes**

Chair: Professor Brian Frier, Vice-President, Royal College of Physicians of Edinburgh

**15.15 Solid pancreas and islet cell transplantation in Scotland**

Mr John Casey, Consultant Transplant Surgeon, Royal Infirmary of Edinburgh

\*outcomes of the solid pancreas transplant programme in Scotland to date \*new Scottish islet cell transplantation programme \* what are the outcomes and complications of islet cell transplantation? \* future prospects

**15.45 Poorly controlled Type 1 diabetes – structured education or diabetes technology?**

Professor Eric Renard, Professor of Endocrinology, Diabetes and Metabolic Diseases, University of Montpellier I and Head of Clinical Research and Innovation Department, Centre Hospitalier Universitaire de Montpellier, France

\*are structured education programmes really all they are cracked up to be? \*are insulin pumps just another toy? \* how do we select the correct management strategy for individual patients? \* do diabetes nurses have primacy in the management of poorly-controlled patients? \* clinical utility of continuous glucose monitoring

**16.15 Bariatric surgery in Type 2 diabetes**

Mr Duff Bruce, Consultant in General Surgery, Aberdeen Royal Infirmary

\*which surgical procedures are effective?\*who is best placed to assess suitability for surgery and follow-up bariatric surgery patients? \* how can services be better designed to cope with demand?

**16.45 Close**

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