Introduction

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This issue of *Hormone Research* presents the Proceedings of the XVth International Symposium on Endocrinology and Development (ISED), held in Paris, France on November 28-30, 1996. This symposium continues in the tradition of the ISED series, providing an update on basic and clinical endocrine research. In particular, it afforded us the opportunity to review developments in thyroid function, type 1 diabetes and the use of growth hormone (GH).

Dr Blum started off the proceedings with a stand-alone presentation giving an overview of the role of leptin in the regulation of body weight. The first symposium concerns GH and related areas such as insulin-like growth factor (IGF). Of particular interest is Dr Carlsson's paper which addresses the problem of treating children with short stature who are not GH deficient (GHD).

GH treatment in this group gives unpredictable results and this paper raises the need to investigate further the aetiology of their growth failure. The plenary lecture, 'Gonadotrophin and thyrotrophin receptors', presents the new approach of cloning receptors, such as luteinizing hormone (LH) receptor, enabling us to look further at receptor structure and function.

The second symposium was devoted to disorders of the thyroid gland, particularly genetic aspects. Mutations of the thyroid hormone (TH) receptor β gene and the thyroid stimulating hormone (TSH) receptor have been identified with regard to TH resistance and hyperthyroidism, respectively. The influence of genetic, environmental and endogenous factors on autoimmune thyroid disease are also discussed.

Insulin-dependent diabetes mellitus (IDDM) continues to be a favourite with ISED. This year, two papers focus on the use of animal models such as the non-obese diabetic (NOD) mouse. Dr Maclaren's paper, in particular, looks at the protective effects of insulin and glutamic acid decarboxylase (GAD) against diabetes in NOD mice. The genetic basis of IDDM is addressed by Professor Philippe Froguel, who covers the latest developments in identifying IDDM genes and the potential for detection and cure. From the treatment viewpoint comes a presentation illustrating the need for specific strategies when managing diabetes in adolescents. This section also includes an interesting overview of projects carried out to assess why Sardinia has become an epidemiological anomaly, with an incidence of IDDM that has risen to the same level as Finland, the highest in the world.

Finally, I would like to thank the speakers and chairmen of the meeting for sharing the results of their work and their ideas.

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