Preface

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Considerable progress has been made in the application of growth hormone (GH) treatment in GH-deficient patients of all ages, as well as in children with other forms of short stature. Longitudinal data on GH therapy in several thousand patients continues to be documented within the framework of KIGS (Pharmacia & Upjohn International Growth Database) and KIMS (Pharmacia & Upjohn International Metabolic Database). These surveys reflect the current use of GH in a multitude of disorders and have established a unique basis for the evaluation of its efficacy and safety. Despite sustained efforts to maintain the highest standards in data collection, the medical community's recognition of the function of these surveys as a tool towards accumulating scientifically valid evidence has been rather hesitant. The reasons for this attitude are complex and range from sophisticated reasoning on their methodological limitations to an instinctive rejection of anything other than scientific knowledge and personal judgement as the twin bases of clinical practice.

Beyond doubt, one of the fundamental prerequisites for conducting valid studies and surveys on a global scale is the standardization of methodology. This standardization has been the main objective of a series of expert meetings, which provide a forum not only for discussing basic topics related to GH therapy, but also to exchange views on the disputed aspects of auxology, diagnostics, analytical tools and the treatment of growth disorders. The 1st KIGS Expert Meeting was held in November 1995 in Positano, Italy, and was attended by clinicians, auxologists and statisticians. The expert contributions to this meeting on auxological standards for height, the problem of bone maturation and bone age rating, and on the definition of idiopathic short stature were published as a supplement to *Hormone Research* (1996, vol. 45, suppl. 2). The 2nd KIGS Expert Meeting was held in November

1996 at Lake Como, Italy, the topics of discussion being the evaluation of body composition in children and various issues of short stature and growth relating to children born small for gestational age; this led to a second publication (*Hormone Research*, 1997, vol. 48, suppl. 1). The present supplement includes contributions from the 3rd KIGS/KIMS Expert Meeting, held in November 1998 in Sorrento, Italy.

The topics chosen for the third meeting focused on methodological issues related to KIGS and KIMS. In the first series of contributions, various aspects of GH measurement are discussed, and, ultimately, a consensus was reached on how GH should be measured in a clinical setting. In the second series of papers, the relevance and value of large-scale databases, such as KIGS and KIMS, to clinical decision-making is established. They occupy an important intermediate position between the analytical rigour of the randomized controlled trial and observational study, on the one hand, and the intuitive expertise of the experienced clinician and clinical team, on the other. The strengths of these contrasting modes of inquiry and practice are well known, but they also have their limitations, as the various papers in this series demonstrate. High-quality modelling, based on high-quality databases, is a necessary part of the solution to the problems produced by these limitations.

The participants would like to express their sincere gratitude to Ms Annika Wallström, Dr. Patrick Wilton, and Pharmacia & Upjohn, Stockholm, for their continuing support of these expert meetings, and for making this publication possible. The editors hope that those involved in the care of short children will find the results of the 3rd KIGS/KIMS Expert Meeting useful and interesting, and that the organizers will extend their support of this endeavour in the years to come.