Change of address for the Editorial Office of Diabetologia

With effect from **1 October 2003**, manuscripts should be submitted to the new Editor-in-Chief, Prof. Edwin Gale at:

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Electronic version of manuscript requested

Pending introduction of a web-based submission system, please submit two hard copies of your complete manuscript along with an electronic version (on CD, 3.5" floppy or zip disc). If possible, the electronic version should consist of a single consolidated file that contains all text, tables and figures, saved as a Word document or as a PDF (for a free on-line PDF creator see: <http://www.adobe.com>). If you are unable to create a PDF, the Editorial Office will convert your consolidated Word file to a PDF prior to peer review.

PsychoSocial Aspects of Diabetes Study Group

Report of the 8th Spring Scientific Meeting

The 8th Spring Scientific Meeting of the PsychoSocial Aspects of Diabetes (PSAD) Study Group of the European Association for the Study of Diabetes (EASD) took place at historic Hvidøre, near Copenhagen in Denmark. In the early 20th century Hvidøre was a royal summer residence but from 1938 to 1989, it functioned as a dedicated hospital for people with diabetes. More recently it has become a conference centre and is renowned for its gourmet kitchen, wine cellar and beautiful location overlooking the sea and, in the distance, Swedish coastline. The meeting was kindly hosted by Søren Skovlund and Lisbeth Vang of the Novo Nordisk DAWN (Diabetes Attitudes, Wishes and Needs) Programme. Thirty-two delegates attended from 12 countries (Belgium, Croatia, Denmark, Germany, Italy, the Netherlands, Romania, Russia, Slovenia, Sweden, the UK and the USA). After registration, delegates were welcomed to the meeting by the PSAD Chairman, Dr Frank Snoek (the Netherlands), and Søren Skovlund (Denmark).

Following the welcome, Dr Snoek invited Professor Claes-Göran Östenson (Sweden) to deliver the Anita Carlson Lecture, entitled: "Stress and diabetes:

the impact of psychosocial and socio-economic stress factors and development of Type 2 diabetes". Professor Östenson reported findings from the Stockholm Diabetes Prevention Programme, a large-scale, longitudinal study of predictors of Type 2 diabetes. Notably, he showed that, for women, the relative risk of developing Type 2 diabetes was a combination of psychosocial and socio-economic risk factors while for men risk was dependent upon socio-economic factors alone. Day two of the meeting opened with small group discussions of the implications of Professor Östenson's presentation. His keynote address stimulated a fascinating debate of methodology, questionnaire bias and the interaction between psychosocial and socio-economic influences.

The morning session continued with oral presentations of 'work in progress' chaired by Dr Norbert Hermanns (Germany). Dr Thomas Kubiak (Germany) presented details of a 6-month evaluation of a patient education programme for the treatment and prevention of hypoglycaemia-related problems in insulin-treated patients. The programme consists of six weekly sessions focussing on issues such as health beliefs, risk percep-

tion, causes of hypoglycaemic unawareness. Dr Mirjana Pibernik-Okanovic (Croatia) presented a comprehensive review of the increasingly popular “empowerment” approach to diabetes management. She argued that health empowerment comprises three distinct facets (perceived control, perceived competence and health goals internalisation) that are affected by the individual, the health professional and the wider health system. This was followed by details of the piloting of a new measure of empowerment designed to encompass the three facets and their interactions. Finally in this session, Julie Smith (UK) presented some preliminary findings from her PhD research, a qualitative study investigating stress in the lives of women with diabetes.

Following lunch, Jane Speight (UK) chaired an interactive poster session. In total 8 posters were presented, the topics of which were as interesting as they were varied. Marcel Adriaanse (the Netherlands) presented an update on the Hoorn Screening Study. One year after diagnosis of Type 2 diabetes, there were no significant differences in the well-being and perceived health status of screening-detected patients compared with those diagnosed routinely in general practice. Dr Mariana Costea (Romania) presented a retrospective analysis of the role of acute stress (the earthquake of 1977) and chronic stress in the aetiopathogenesis of Type 2 diabetes, suggesting that severe stress could be a precipitating factor in the development of diabetes. Anna Johansson (UK) reported findings from her MSc research into the causes, occurrences and manifestations of burnout in healthcare professionals.

Dr Maja Ravnik (Slovenia) and Dr Karin Kanc (Slovenia) presented a case study of a man with Type 1 diabetes whose career as a dance teacher had been impaired by episodes of severe hypoglycaemia. They reported the benefits of a multidisciplinary approach to his treatment, involving a clinical psychologist and a psychiatrist and recommended such an approach for other unique cases. Dr Elena Starostina (Russia) presented two posters. The first focussed on the validation of the Russian translation of the ADDQoL (measure of individualised diabetes-specific quality of life), which was shown to have good psychometric properties and be suitable for use with Russian-speaking adults with diabetes. The second focussed on the role of dietary barriers in 300 Russian adults with Type 2 diabetes. Interestingly, the number of dietary barriers was not gender-dependent but barriers were qualitatively different amongst men and women, suggesting implications for self-management and education. Finally, Dr Vibeke Zoffmann (Denmark) presented the results of a randomised controlled study of ‘guided self-determination’ in group training for people with Type 1 diabetes experiencing elevated blood glucose levels over a prolonged period. HbA_{1c} levels and diabetes-specific distress were reduced at 6 months.

For the social programme on Saturday evening, delegates and their guests enjoyed a guided canal boat

tour of Copenhagen followed by a superb dinner at the famous Kanalen restaurant.

On Sunday morning, the final session of the PSAD meeting (oral presentations of completed work) was opened and chaired by Dr Arie Nouwen (UK). Dr Mark Peyrot (USA) began the session with a presentation of the European results from the global DAWN (Diabetes Attitudes, Wishes and Needs) Study relating to ‘physician resistance to prescribing insulin’. There was substantial between-country difference, but, almost half of physicians were reluctant to prescribe insulin until it was absolutely essential. Soren Skovlund (Denmark) continued the session with a presentation of the DAWN results relating to patients’ ‘psychological resistance to insulin use’. Across the European countries, a majority of patients were worried by the prospect of starting to use insulin and, notably, half believed that starting insulin meant that they had not followed treatment recommendations properly. Both presentations stimulated interesting debate.

Dr Frank Petrak (Germany) gave an interesting presentation on the prevalence of psychiatric disorders in an onset cohort of adults with Type 1 diabetes, indicating that the rate of major depressive episodes in people with newly diagnosed diabetes was double that of the population as a whole. Dr Petrak concluded that the timing of the onset of depression (whether premorbid or immediate at diagnosis) remains to be investigated. Dr Frans Pouwer (the Netherlands) presented work performed by the EDID (European Depression in Diabetes) Research Consortium, investigating the extent to which depression and diabetes-specific emotional problems co-exist. Their findings indicate that diabetes-specific emotional problems and depression co-exist in a substantial number of patients, although there was great variation between countries (Croatia, the Netherlands and the UK), supporting the use of diabetes-specific measures that may help to target treatment and resources appropriately. Dr Nicole van der Ven (the Netherlands) reported on the characteristics of participants attending for Cognitive Behavioural Group Training (CBGT), who were mostly selected on the basis of persistent sub-optimal glycaemic control and readiness to join the study. Such patients did not lack knowledge or skills, nor did they deny the importance of adequate self-regulation. They were, however, seriously burdened by living with diabetes, as indicated by high levels of general and diabetes-related distress. Thus, a psychological intervention aimed at modifying beliefs and reducing the emotional burden of diabetes was considered likely to be effective in improving glycaemic control.

The meeting was closed by Dr Frank Snoek, who thanked our hosts, Soren Skovlund and Lisbeth Vang (DAWN Programme, Novo Nordisk, Denmark) for their excellent organisation of the meeting and for their hospitality. He also thanked Dr Nuha Saleh-Stattin (Sweden) for serving two excellent terms as Honorary Secretary and welcomed Dr Cathy Lloyd

(UK) to the position. The meeting had, once again, been thought-provoking, controversial and stimulating.

The PSAD provides an excellent forum for presentations by experienced and more junior researchers alike. New members are welcome to apply for membership in time for our next Spring Scientific Meeting, which will be held in Amsterdam, 23–25 April 2004. For further information, go to the PSAD website (www.emgo.nl/psad) or contact the Honorary Secretary:

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Travel grants are awarded each year to junior members and those from Eastern European countries on a competitive basis. Applications are made at the time of submission of abstracts (date to be announced). The PSAD Novo Nordisk Research Award (details available from the Honorary Secretary) will be awarded to the sole or main author of an outstanding peer-reviewed paper furthering our understanding of the psychosocial aspects of diabetes.

Diabetes Education Study Group

Chairman's Report for the Period 2002/2003

On the occasion of the 27th Meeting of the General Committee of the Diabetes Education Study Group of the EASD, I wish to express my deepest gratitude to Servier, for its continued unconditional support to our Study Group. In particular, I wish to thank Dr Jean-Philippe Seta, Chief Executive Officer, and Dr Laurence Alliot, Director of the Medical Affairs Department. I also wish to thank Dr Didier Halimi, who has recently retired from Servier, for his invaluable role in promoting along the years a unique partnership between the pharmaceutical industry and the scientific world.

I am especially grateful to the four new members of the Executive Committee who were elected last year: Dr Ilana Harman-Boehm (the Honorary Treasurer), Dr Andrew Brooks (the Director of Educational Strategies), Dr Rudolf Chlup, and Ms Barbara Semlitsch. Together with the two senior members: Dr Alain Golay (the Vice President), and Mr Godfrey Xuereb (the Honorary Secretary), they have given enthusiastic support and invaluable help to the activity of the Study Group. My warmest thanks go also to Ms Nina Bonagura Coscione, in the Rome secretariat.

Since the last General Committee meeting, Budapest, September 2002, a Workshop of the General Committee has been held, new Teaching Letters and new Patient Education Basics for Type 2 Diabetes have been published, and the DESG website has been updated.

Workshop of the General Committee Members

A Workshop entitled "Therapeutic Patient Education, the Great Challenges. Search of effective strategies to help: overweight reduction, regular exercise, COH counting, and pump therapy" was held in Celano, Italy, from 2–7 November, 2002.

Participants were 45 members of the DESG General Committee members from 25 Countries: Albania, Austria, Belgium, Bulgaria, Czech Republic, Egypt, Estonia, Finland, France, Georgia, Greece, Hungary, Israel, Italy, Latvia, Lithuania, Macedonia, Malta, Poland, Portugal, Russia, Slovenia, Spain, Switzerland, and Yugoslavia.

During the meeting, main lectures were devoted to an update of our knowledge of weight and eating control, the role of exercise, techniques for COH counting, and intensive insulin treatment with pumps. Group works were then run to develop educational guidelines derived from new evidence, and seek the most effective ways to educate people with diabetes accordingly. Sessions of experiential learning were also run on each topic.

During a special lecture, Marco Peruffo, the first person with Type 1 diabetes to reach the top of a 8000 mt mountain, mount Cho-Oyu, without oxygen bottles and without high altitude porters, told participants his life history.

After the workshop, a CD-rom was recorded with all the lectures, results of group works on Metaplan, samples of Role-playing sessions, and pictures of the experiential learning sessions, as well as of all participants. A copy was sent to all participants.

Publication and Update of Teaching Letters

Two Teaching Letters have been produced this year:

- No.27 entitled 'Physical activity and diabetes' (new)
- No.28 entitled 'Emotional intelligence in diabetes care' (new)

The next to be published are:

- No.29 entitled 'Assessing and Improving Quality in Diabetes Education' (new)
- No.30 entitled 'Quality of Life, a Parameter in Diabetes Care' (new)
- No.31 entitled 'Approaching the parents of a child with DM' (update)

These Teaching Letters have been or will be produced with the help of the current sponsor, Servier, and all DESG members will receive copies.

They, as well as other DESG productions, are being made available for consultation and free download on the DESG Website, in Acrobat (.pdf) format.

Patient education basics

This series of documents on different topics involving basic therapeutic education for people with Type 2 diabetes is being continued. Their aim is to provide easy-to-use educational tools for the Health Care Providers wishing to educate the diabetic patient, but who are unable to find time for a thorough systematic approach.

The Patient Education Basics issues produced this year were the following:

- No.17 'Drugs for Type 2 Diabetes'
- No.18 'When insulin treatment may be necessary'

The next Patient Education Basics to be published are:

- No.19 'The prevention of diabetic kidney disease'
- No.20 'The risk of transmitting diabetes to your children'

These documents are also being made available for consultation and free download on the DESG Website, in Acrobat (.pdf) format.

DESG Website

The DESG Website (<http://www.desg.org>), created by a DESG working group, and officially opened on

1 September, 1999, has completed its fourth year of activity.

This year the Website has gone through a complete revision which has made it even more intuitive and easier to explore than before.

Equally important, even if less visible from outside, all documents and links are now under 'content management' in order to decrease delays in publication and updating. Also the feedbacks and the reports of utilisation have been easier to manage from our secretariat.

As before, both the General Committee members' list and the complete list of members are in a restricted area of the site, accessible to members only. The majority of the site is still open and offers a source of information, publications, education tools, and a variety of material produced either by the DESG or by others in the field of therapeutic patient education. In particular, the DESG Teaching Letters, 5-minute survival kit, and Patient Education Basics are regularly published in the "materials" section and are made available in text or Acrobat (.pdf) format.

Two new levels of restricted access have been established: one for the members of the General Committee, and one for the Executive Committee. Restricted sections, including for example information about next meetings of either Committee, appear only after the introduction of the appropriate login and password.

From 1 July 2003, when the new website was put online, until 15 August, there have been 957 different visitors, with 1176 visits (about 1.22 visits/visitor), 6661 pages visited (about 5 pages/visit), and 24858 accesses (about 21 accesses/visit).

Updated list of members

The updated list consists of 798 members from 85 countries. This list is available in the members' area of the DESG Website, as well as the list of the General Committee members.

Thanks to a pressing joint action of the Honorary Secretary and Rome Secretariat, the number of national representatives in the General Committee has increased this year from 53 to 65 and the represented countries from 29 to 35.

For privacy reasons, only the names and contact information of current Executive Committee members can be viewed by the general public.

Participation in Paho-UDOP Conference

The 9th International PAHO-UDOP Conference, entitled "Living with Diabetes: Challenges in the Life Cycle", was held on 6–9 March 2003 at Ocho Rios, Jamaica.

The DESG Honorary Treasurer, appointed by the Caribbean Food and Nutrition Institute (CFNI), had an active role in the planning and organisation of this Conference. The DESG President participated in a Round Table devoted to 'Living with Diabetes' with a lecture entitled "Living with diabetes on Kilimanjaro".

Participation in Professional training and awards Participation in Grimentz Workshops

Grimentz Seminars represent a unique occasion for in-depth reflection on the specificity of long-term follow-up, and the interactive learning of specific educational skills. The DESG once again provided the funding for a few members' participation in two workshops held in Zinal, Valais (CH) in the periods 14-19 June, and 21-26 June 2003. The workshops were organised by the Division of Therapeutic Education for Chronic Diseases, Department of Internal Medicine, Geneva University Hospital, and chaired by Dr Alain Golay and Prof. Jean-Philippe Assal, respectively.

The first seminar was entitled «Reperer et favoriser le 'declic au changement' chez nos patients». The participants included about 60 doctors, nurses, psychologists, pedagogues, dieticians, etc. The DESG contributed the expenses of two participants.

The second seminar was entitled «Histoires de Vie. Entendre et utiliser les récits des patients pour mieux gérer les maladies chroniques». The participants included 120 health care providers. The DESG contributed the expenses of five participants. The DESG Chairman was invited as expert, and attended the whole seminar.

DESG Awards

In order to encourage research in the field of therapeutic patient education, two 600.00 Euro awards have been assigned by the DESG to the best abstracts accepted to the 18th IDF Congress, and one 600.00 Euro award to best abstract accepted to the Paris FEND Conference. The choice has been made by two DESG commissions.

Sponsorship of the DESG

The generous sponsorship of Servier has been confirmed for the next years and continues to be of the utmost importance to this Study Group. In addition to

the already mentioned Servier Board, I wish to thank particularly Dr Bertrand Renaud, Dr Aurelien Caillaud and Dr Nienke Feenstra, who have been an excellent interface between Servier and DESG in the last three years. To them and to the DESG we wish a most fruitful cooperation in the coming years.

Future Activities Workshop of General Committee Members

A 5 day workshop will take place in Celano (Italy) in December 2003, to which all national DESG representatives are invited.

The workshop will deal with some of the main challenges in the field of TPE: namely how to help people with Type 2 diabetes adopt and maintain a healthy lifestyle, and how to help people with Type 1 diabetes accurately match insulin, and COH uptake. The use of patients' emotional intelligence and of their life histories will be discussed.

Implementation of the DESG Curriculum

The Step 2 DESG-Servier Partnership Meeting, planned for March 2003 was cancelled. New such meetings, aiming at presenting worldwide the DESG Curriculum to HCPs who should be in the capacity to implement formal Curricula at the National level, will possibly be organised in the future.

In the meantime, based on the needs expressed by the HCPs, and the modular structure proposed by the DESG, both Local Step 2 Workshops and Step 3 Curriculum implementations have taken place or are being planned in several countries. The DESG contribution to these national activities, ranges from the planning phase, to the implementation, and to the evaluation phase.

The new improved DESG Website has the potential of becoming a very functional tool for patient education and communication for the health care providers involved in diabetes therapeutic education.

The promotion of research and training in therapeutic patient education will be continued, also by means of grants and awards.

New Teaching Letters and Patient Education Basics will be published and distributed.

Prof. Aldo Maldonato
President, Diabetes Education Study Group
September, 2002

8th Scientific Meeting of Hypertension and Diabetes Study Group

Castle Old Poelgeest, Oegstgeest, Leiden, The Netherlands

22–24 May 2003

Professor Coen Stehouwer hosted this year's HID meeting in the magnificent 17th century estate of Oud-Poelgeest close to the ancient medical city of Leiden. Attendees from Austria, Germany, Israel, Italy, Hungary, France, The Netherlands, Poland, Serbia and Montenegro, Sweden, Tunisia, Turkey and the United Kingdom were welcomed in a relaxed and informal atmosphere which led to a lively discussion of current issues on topics ranging from basic science to evidence-based clinical management.

The first session set a general tone for the "challenging of orthodoxies" with presentations of original systematic reviews of studies addressing blood pressure targets in patients with microalbuminuria and nephropathy (Kaiser, Cologne) and the use of angiotensin receptor blockers in diabetic patients (Siebenhofer, Austria). Professor Angela Shore (Exeter, UK) delivered a stimulating invited lecture on microvascular haemodynamics in diabetes and hypertension, focusing on her pioneering work on capillary pressure. Capillary pressure is elevated both in hypertension and diabetes, but is not further elevated in the presence of both – this introduced another general theme for the meeting i.e. how great is the additional risk burden of hypertension in diabetes, and in what sense do the shared intermediate phenotypes (endothelial dysfunction, insulin resistance, autonomic neuropathy) differ? She finished by emphasising the potential importance of paracrine and /or hormonal signalling between adipose tissue and the vasculature in the pathophysiology of complications.

The second session focused on vascular biology – a strong theme within the group. Speakers in this session highlighted the complexity and pleiotropy of insulin's vascular effects, and the tendency for these to be over-simplified in the literature. There was a consistent message from the groups in the Netherlands (Stehouwer) and Glasgow (Petrie) that signalling pathways other than those acting via PI 3-kinase are important in mediating these effects, and that mediators other than nitric oxide (endothelium, EDHF) require consideration.

Canny participants took a brisk walk after lunch, bearing in mind the findings from Glasgow (Al-Mamari) that the postprandial deterioration in endothelial function detected by laser Doppler iontophoresis can be prevented by a single prior session of moderate exercise. The third session focused on studies assessing responses of large vessels, and in particular data from the Hoorn study on flow-mediated dilation in large cohorts of unselected individuals categorised according to glucose tolerance: FMD was impaired in Type 2 diabetes, but not in impaired glucose tolerance *per se*, and was not related to indices of hyperglycaemia.

Andrea Natali (Pisa, Italy) followed with a characteristically thoughtful invited lecture on aspects of endothelial dysfunction in diabetes, once again challenging the orthodoxies. His detailed dissection of the various small clinical studies reminded the audience of the limited nature of the evidence of endothelial dysfunction in normoalbuminuric patients with Type 1 di-

abetes, and the lack of clinical (as opposed to laboratory) evidence of acute detrimental effects of glucose on the endothelium (consistent with the message from the Hoorn study discussed above). On his reading of the evidence, hypertensives with Type 2 diabetes do not appear to have poorer endothelial dysfunction than those without. Moreover, the field of cardiovascular disease in Type 1 diabetes seems set to emerge as a “hot” area in the coming months and years.

The final session of the afternoon reminded us of the realities of the clinic with a focus on pulse pressure in a large population from Turkey (Topsever, Istanbul).

The following morning’s first session was on the subject of autonomic dysfunction, and returned to the theme of shared aspects of pathophysiology, with hypertension (along with insulin resistance) increasingly implicated (Keresztes, Budapest; Baroni, Rome). A session on aspects of blood pressure measurement and epidemiology followed (Ben Khalifa, Tunisia; Stern, Tel Aviv, Israel).

The final invited lecture was by Professor de Leeuw (Maastricht, The Netherlands). He developed a novel theme, namely that the information from studies examining diabetes in primary hypertensive populations may give different messages than studies examining hypertension in primary diabetes populations. He pointed out that renal endpoints were emphasised as “primary” in the former, with cardiovascular endpoints in the latter; although all endpoints are collected, it may be unwise to base evidence for optimal management of diabetes on secondary endpoints from hypertension trials. He discussed the lack of evidence for blood pressure targets advocated in many guidelines (including the very recently published Joint National Committee JNCVII) – again following the theme of critical evaluation and challenging of orthodoxies. While evidence of formal equivalence between drug classes for the management of hypertension and diabetes is not available, and will be difficult to obtain, he emphasised the need for combination therapy in the vast majority of patients when treating to evidence-based targets.

In the final session, Dr Schram (Amsterdam) presented fascinating cross-sectional analyses of low grade chronic inflammation in the EURODIAB Prospective Complication study. A role for inflammation in mediating the association between body mass index and both micro- and macrovascular complications of Type 1 diabetes was proposed, although it was noted by Andrea Natali that insulin resistance may, yet again, play a regulatory role. An intervention study from Italy (Tucci, L’Aquila) emphasised the reversibility of low-grade inflammatory changes in the presence of negative energy balance and reminded delegates of the dangers of their forthcoming lunch. It was fortunate that the meeting was completed by this time, as a national Boy Scouts’ Convention had descended on the Oud-Oelgeest Castle despite the rain.

At the General Assembly, members were delighted to hear several proposals to host future meetings from delegates from Austria, Belgrade, Istanbul, Israel and Cologne. A barge tour of the old canal of Leiden (covered in view of the weather) followed on before dinner, with an opportunity to see traditional “Alms Houses” and also churches built around the time of the Reformation.

“Hid” is Hungarian for “bridge”. In the case of the vascular river, the section of the bridge originating on the “diabetes” bank is being built with solid foundations. We are delighted that a bridge is also under construction from the other (“hypertension”) bank. We in the HID group regard the joining of the two sections as being of critical importance in achieving implementation of evidence-based health care for European populations at risk of cardiovascular disease. We look forward to welcoming new members to this rapidly developing and highly stimulating study group next year (details under Announcement).

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European Foundation for the Study of Diabetes

The Research Foundation of the European Association for the Study of Diabetes

Report on an EFSD/MSD Travel Fellowship for Young Scientists 2003

Chidum E. Ezenwaka, Ph.D.

**The University of the West Indies, St Augustine, Trinidad and Tobago,
West Indies**

I wish to use this opportunity to thank the European Foundation for the Study of Diabetes for the EFSD/MSD Travel Fellowship award, which enabled me to visit Washington University School of Medicine in Saint Louis, Missouri, USA between July and August 2003. It was indeed an invaluable opportunity to interact with other scientists in the area of Type 2 diabetes research.

During the visit, I was specifically attached to the genetics research laboratory of Professor Alan Permutt but I was able to interact with other scientists involved in molecular biology aspects of Type 2 diabetes. In this regard, the benefits of my stay could be classified into the following sections:

A. Exposure and training

- i. **Polymerase Chain Reaction (PCR):** PCR is a routine technique in the genetics laboratory and it is ironical that whereas in our laboratory at the University of the West Indies we do not have a

single PCR machine, there are several PCR machines readily available for research studies in these laboratories.

- ii. **Pyrosequencing Technology:** It was exciting to be exposed to the new pyrosequencing technology established for simple and fast single nucleotide polymorphism (SNP) analysis. Using the SNP software and reagent kits in SNP analysis instrument, a highly accurate, reproducible SNP genotyping could be obtained. This technology is routinely used in this laboratory.
- iii. **Statistics in genetics study:** Although I did not practice any statistical data analysis based on the tests performed in the laboratory, I had the opportunity to discuss with a bio-statistician involved in statistical analysis in genetic studies. Indeed, she was useful in genetic research design we are planning in Trinidad.

B. Future Collaboration

As I indicated in my application form that my visit to Professor Permutt's laboratory would potentially pave the way for future research collaboration, I am glad to report that Professor Permutt has indicated interest in collaborating with me in some genetic studies of Trinidadian families. Trinidad and Tobago is a small Island Republic with a population of 1.2 million. The World Health Organisation has projected that 89,000 individuals will develop Type 2 diabetes in Trinidad by the year 2010 suggesting that this population is a most appropriate population for family genotyping to identify the diabetes gene.

I remain grateful to my dear European Foundation for the Study of Diabetes for the opportunity to visit Professor Permutt's Laboratory in Washington University in Saint Louis, USA.

Announcement

14th Meeting of the EASD Eye Complication Study Group

Munich, Germany, 21–23 May 2004

Scientific programme:

Keynote lectures will be given on the following topics:

- Peter Gaede (Denmark) – Results of Steno 2 study
- Hans-Peter Hammes (Germany) – Animal models of diabetic retinopathy
- Massimo Porta (Italy) – Screening with the London protocols: 12 years after
- Anselm Kampik (Germany) – Surgical options in diabetic retinopathy
- Case presentations
- Oral and poster presentations

EASDEC Board:

F. Bandello (President), P.J. Guillausseau (Vice-President), C.-D. Agardh (Past President), P. Massin (Secretary), M. Porta (Treasurer)

Scientific and Organising Committee:

F. Bandello, P.J. Guillausseau, P. Massin, C.-D. Agardh, M. Porta, A. Kampik, M. Ulbig, G. Lang

Travel Grants:

Three travel grants (Euro 1.000 each) for young scientists (under 35 years at the time of the meeting) are available. Applications for a travel grant should be done together with submission of the abstract.

For further information, please contact:

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Deadline for abstracts is **2 March 2004**.
Abstracts should be submitted electronically.

9th Scientific Meeting of the EASD Hypertension in Diabetes (HID) Study Group

Graz, Austria, 29 April–1 May 2004

Local Organiser:

Dr Andrea Siebenhofer

Abstracts should be sent
(preferably by email, j.r.petrie@clinmed.gla.ac.uk)
by **Friday 23 January 2004**.

EASD News Section 11/2003
DOI 10.1007/s00125-003-1242-1