Editorial

The EASD at the crossroads

P.J. Lefebvre

Chairman of the Organising Committee of the 35th Annual Meeting of the EASD

Knowing the past enables us to understand the present and prepare the future

On Thursday, 30th September 1999, shortly after 4 o'clock, a German doctor arrived at the registration desk of the 35th Annual Meeting of the European Association for the Study of Diabetes (EASD). Having missed an earlier flight to Brussels, he was not in a good mood. This changed immediately when he was greeted with a bottle of champagne and a box of Belgian chocolates and informed that his registration fee would be waved: well deserved because his was the ten thousandth registration for the Congress! This anecdote seemed to me a good starting point for this editorial which is written at the invitation of Werner Waldhäusl the Editor-in-Chief of the EASD's official journal.

EASD: the past. It was in the early sixties that some leading diabetologists including J. P. Hoet (Belgium), E. Martin (Switzerland) and F. Young (Great Britain) envisaged the creation of a European society for diabetes. After various preliminary contacts, a group of 65 physicians and researchers, originating from 11 European countries, convened at the 5th Congress of the International Diabetes Federation in Toronto and established themselves as the "founding group". Their aim was to set up an association which "will gather all individuals interested in any aspect of diabetes throughout Europe". They considered a report prepared by E. Martin and "the following was voted on as agreed, the vote being unanimous, no dissenting vote being cast:

1. The formation of a European Association for the Study of Diabetes was agreed upon in principle.
2. Geneva was selected as Headquarters and Dr A. E. Renold was asked to take on the job of Secretary.
3. The publication by the Association of a journal "Diabetologia" was agreed upon in principle and Dr

K. Oberdisse was asked to proceed with the planning of the activities of the journal, Springer being the probable publisher".

The first meeting of the EASD was held in April 1965 in Montecatini (Italy) under the chairmanship of J. P. Hoet and the first Council elected F. G. Young as President and A. E. Renold as Secretary. The two mainstays of the association, its Annual Meeting and Journal were then firmly established. A detailed report on the first 20 years of the EASD has been published by its first executive director J. G. L. Jackson [1]. Annual Meetings have been held all over Europe. The journal, *Diabetologia*, is internationally recognized as a leading publication in the field. The association has created numerous "study groups" for specialists to gather in small numbers and exchange data and ideas. The Postgraduate Education Subcommittee has organised postgraduate courses in many European countries. The list of the recipients of the Minkowski, Claude Bernard and Castelli Pedrolì prizes and lectureships represents a kind of "who's who" in diabetes research and care in Europe and in the world.

The EASD should be proud of its past.

EASD: the present. As at 31st December 1998, the EASD can count 5379 members from 95 countries, many outside Europe. It functions democratically: the General Assembly elects a Council out of which an Executive Committee executes the decisions. The administration runs smoothly in the headquarters under the guidance of the Executive Director. The finances are positive and the expenditures carefully controlled. The association has just created a European Foundation for the Study of Diabetes that will be used for charitable purposes and to encourage research in diabetes. Contacts with the European Union have been established both with the European

Parliament and Commission. Diabetes research and care are adequately safeguarded in the various EU programmes.

The journal *Diabetologia* has a circulation of 7000 and an impact factor of 4.99. The 35th annual meeting in Brussels had a record audience of 10 039 participants from 101 different countries. Travel and accommodation grants helped many young colleagues to attend the congress.

The EASD should be pleased with its present.

EASD: the future. Looking into the crystal ball is not a scientific practice. It seems however reasonable to guess that the coming 35 years of the EASD will be quite different from its first 35 years. The main challenges for the future, perhaps the very near future, lie in the size and the nature of the annual meetings and the future of its journal.

Organising and holding a congress with 10 000 participants is not an easy task. Many cities do not have the congress and hotel facilities for such a large event. Consequently, if the size of the EASD annual meetings continues to grow, many countries will not be able to host the congress. For those that can, the interests of such mammoth meetings are questionable. Plenary lectures for thousands of delegates require sophisticated and expensive audio-visual settings and practically exclude any direct scientific exchanges. Multiplying parallel sessions require not only space but are also increasingly difficult to programme. For the EASD'99 in Brussels, an auditorium with 2000 seats was reserved for a session on oral agents for the treatment of Type II diabetes, with six other sessions running in parallel. Some colleagues complained that it was not possible to attend this session because the number of participants exceeded the number of seats available.

The number of non-EASD members in Brussels was almost twice that of members. Is this positive or negative? For me it is both. It is positive because many of these participants, invited to the congress by the pharmaceutical industry, had the opportunity to appreciate the remarkable vitality of diabetes research in Europe and be up-dated on the current knowledge of a disease that is recognised as increasing in prevalence and incidence world-wide. It is probably negative for the 644 EASD members under 35 years of age who, certainly actively involved in basic or clinical research, could have been lost in the large crowd and missed most of the exchanges with their European fellows that they had hoped for. Undoubtedly, the EASD will face a difficult challenge in matching the consequences of diabetes being a fast growing problem with its attraction in terms of marketing and the requirements of the scientists

who expect a forum for exchanging data, protocols and ideas at the annual meetings. A solution was provided, in part, this year in Brussels by the acknowledged success of the 113 "poster sessions" in which all posters arranged in groups of six to ten were discussed under the leadership of a recognised senior in the field.

Another challenge for the EASD is its journal, *Diabetologia*. As reported at the General Assembly by the Editor-in-Chief, the rejection rate is currently close to 80 %. Lack of space is a critical factor in the difficult decisions made by the editors. Like many other learned societies, including the American Diabetes Association, the EASD could consider dividing its publishing activities into a basic science and a clinical journal but there are more cons than pros. Although some good papers are rejected simply because of lack of space this loss must be balanced against the number of other journals that there are already dealing with diabetes and the cost of creating a second journal for both the association and its membership. Many academic libraries are cutting down their journal subscriptions rather than increasing the number of titles on their shelves. More important even than these considerations is the need for a multidisciplinary journal fostering cross-fertilisation between basic and clinical sciences, which interaction is in high demand.

Another debate is the development of electronic publication. The scientific associations and their respective journals in the United States are faced with the recent proposal by the director of the National Institutes of Health to establish a public electronic publishing site, E-biosci, which aims to do away with several of the problems of traditional publishing (high cost to authors and end-users, lack of wide accessibility and the lengthy delay between submission and publication). The development of such a system poses major problems, particularly in terms of the necessary peer review, the increasing possibility of publication of poor and erroneous data and the need to sieve through overwhelming quantities of information. I have too much pleasure in reading my paper copy of *Diabetologia* on Sunday afternoon at home in my garden in the summer or near my open fire in the winter. Having to read it on the screen of a computer looms for me as a potential nightmare.

Potentially the issues raised could become difficult choices in the near future!

Reference

1. Jackson JGL (1985) European Association for the Study of Diabetes: 1965–1984. *Diabetologia* 28: 185–194