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EDITORIAL NOTE

COVID-19, diabetes mellitus type 2, endocrine genetics, and pituitary and adrenal diseases

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This is our first Editor's Note of 2023, a year during which we anticipate that endocrine research will undoubtedly forge ahead at an ever increasing pace and *Hormones* will continue to publish impressive new data from laboratories and clinics around the world.

Unsurprisingly, 3 years after the first emergence of coronavirus disease 2019 (COVID-19), the virus itself being known as severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), there is an abundance of new data on the disease. As mentioned last summer [1], *Hormones* continues to have keen interest in COVID-19, the endocrine morbidity associated with it, as well as what was initially called "long-COVID-19" syndrome, also known as "post-COVID-19 conditions" (PCC): the latter condition may, in fact, be in large part due to hormonal dysfunction [2]. The current issue of *Hormones* features reports and correspondence on the administration of the COVID-19 BNT162b2 mRNA vaccine, publications that add significantly to the field [3–6]. It is truly amazing what we are learning today about both the disease and the vaccinations together with their possible long-lasting effects. For example, a large cohort study recently identified a possible association between postural orthostatic tachycardia syndrome (POTS) and COVID-19 vaccination [7]; however, POTS is much more frequently associated with SARS-CoV-2 infection [8]. Indeed, POTS may be in part an adrenal dysfunction syndrome. On the subject of POTS and other manifestations of COVID-19 and PCC, we will continue to encourage submissions to *Hormones*.

Although not a diabetes journal per se, *Hormones* publishes a fair amount of data and findings on diabetes research. The most recent publication by Chantzaras et al. [9] and studies by a number of other authors previously underscore our abiding interest in the causes and pathophysiology, genetics, and treatment, as well as clinical complications of the various types of diabetes. In this issue, there are two excellent studies on BNP levels and erectile dysfunction in type 2 diabetes mellitus [10, 11], one focusing on continuous insulin infusion treatment [12], as well as an animal study of diabetic peripheral neuropathy [13].

Endocrine genetics is a rapidly developing new component of endocrinology and of everyday clinical endocrine practice. This issue of *Hormones* includes observations recently made in children with neurofibromatosis type 1 [14] and a case of salt-wasting congenital adrenal hyperplasia due to TNXA/TNXB chimera [15].

Publishing on pituitary and adrenal diseases forms, of course, a major part of any journal dedicated to endocrinology. The present issue of *Hormones* contains highly interesting and important articles on growth hormone excess and acromegaly [16–18] and on adrenal diseases and their diagnoses [19–22].

The other articles in this issue include Dellino et al. [23] who discuss the very important matter of hormone replacement therapy in patients who are carriers of the *BRCA1* and *BRCA2* gene variants that cause breast and ovarian cancers (while also predisposing to several other tumors). Sakiz et al. [24] have studied the prevalence and risk factors of simple renal cysts in primary hyperparathyroidism and Tripyla et al. [25] have evaluated the impact of classical music on pain and respiratory rate in patients after thyroidectomy. Although the latter study does not entirely belong to the field of endocrinology, there is no question that the effects of the arts, especially music, on pain perception and our patients' comfort are in part hormonal [26], a crucial issue given the number of our patients who undergo surgery.

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On behalf of our Editorial team, we wish to all a healthy and productive 2023. We thank you for your continuing support of *Hormones* and look forward to publishing yet again this year the best in all fields of endocrinology.

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