



Join Your Colleagues in Vancouver for the ATA 76th Annual Meeting

The ATA's Annual Meeting in Vancouver, British Columbia, Sept. 29–Oct. 3, 2004, will continue its dual focus on basic and clinical aspects of thyroidology. It promises to be an exciting meeting not to be missed, according to Mary Samuels, MD, Clinical Medicine Co-Chair, and James Baker, Jr., MD, Basic Science Co-Chair.

Areas of emphasis at the meeting will be technology and its impact on thyroid

research, the effects of thyroid hormone on the brain and the heart, and a translational symposium on environmental toxicology and the thyroid.

There will also be a particularly important section on the impact of iodine nutrition on the thyroid,

which will be moderated by Lewis Braverman, MD, and dedicated to the memory of John Dunn, MD, who passed away in April 2004.

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ATA Mourns the Loss of President Clark Sawin



ATA President Clark T. Sawin, MD, died on Aug. 11 in Washington,

DC. Please see pp. 6 to 7 for more information about Dr. Sawin's life and his influence on the ATA and thyroidology.

Three Investigators Receive ATA Research Grants

Three new research projects in thyroid function and disease are being supported by the 2004 ATA Research Grant Program.

The ATA is committed to supporting research that will hopefully translate into better ways to diagnose and treat thyroid disease," said Jim Fagin, MD, Chair of the Research Committee. "The generosity of members, patients, industry, and other donors has enabled the ATA to award thyroid research grants of more than \$700,000 since the Research Fund was established."

The 2004 ATA research grant recipients are —

- **Orsolya Dohan, MD**, of the Albert Einstein College of Medicine in the Bronx, New York, for her research proposal *Regulation of the Sodium/Iodide Symporter (NIS) by Iodide*, and
- **Raymond S. Douglas, MD, PhD**, of Harbor-UCLA Research and Education Institute in Torrance, Calif., for his research proposal *Fibroblast Immune Activation in Graves' Disease*.

They will each receive a \$25,000-a-year, two-year grant funded solely by the ATA.

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“During the past one and a half decades, our knowledge of thyroid physiology in health and disease has increased at an unprecedented rate. Probably the most important reason for the rapid and continued growth in our knowledge of the thyroid is the fact that knowledgeable,

imaginative, and enthusiastic investigators from many and varied disciplines have been attracted by the problems of normal and morbid thyroid physiology.”

These words could have come from our recent Council retreat to define the mission and values of the ATA but, instead, were spoken almost 50 years ago by Dr. Rulon W. Rawson, of the Sloan-Kettering Institute. The occasion was the presidential address at the 1956 annual scientific meeting of the American Goiter Association — the previous name of our association. Dr. Rawson went on to emphasize that the unique value of our association was the interaction of clinicians and basic scientists from a range of disciplines to address issues of common interest in thyroidology.

“The ATA leads in promoting thyroid health and understanding thyroid biology.” This is the proposed mission statement developed at our spring Council retreat, and it closely matches the core activities of our association articulated by Dr. Rawson almost 50 years ago. Our stated values — in addition to the traditional areas of scientific inquiry, clinical excellence, and collegiality — have been extended to include public service, education, and collaboration. The challenge is to sustain and nurture our core activities while expanding our influence in related, but distinctly new areas. There have been growing pains, not unexpected, from the pace and scope of our expansion into these endeavors.

Our association has moved squarely onto the national stage as the voice for all thyroid-related issues, including public policy, public health, patient education, and research. The ATA has always been a source for public thyroid information; but over the past several years, we have become the place to which journalists, government, and the public come to first for answers. With the support of our Council and membership, we have devoted increasing resources to provide information that is accurate, timely, and widely accessible.

The ability to respond in this way is a direct result of the infrastructure developed by our executive director, Bobbi Smith. Our web site is the primary conduit of information for the public and media and allows for rapid response to issues. Bobbi and her staff work with our media consultant, Melanie Caudron, to process requests for information and develop a response plan. Depending on the request, the president, secretary, or various member experts are contacted to provide information. Policy or position statements are

generally developed in committee, reviewed by the Council, and then distributed.

How can an organization that includes individuals with such a diversity of opinions speak with one voice? In the past year, we have lifted our voice with that of the CDC and AACE to advocate the thyroid health of pregnant women, fetuses, and infants. We have contributed to stories for outlets as diverse as the Associated Press, *Readers Digest*, *Self*, *Parent Magazine*, *Cooking Light*, *Fitness*, *OB/GYN News*, *Environmental Health Perspectives*, and Dow Jones News Service, as well as radio and television stations around the country.

On occasion, speaking out puts us in the middle of contentious issues, especially those involving government agencies and industry. Recent examples are the health risks of perchlorate contamination in water supplies and the FDA approval of generic levothyroxine products. In both cases, ATA members are involved in these controversies in a variety of capacities, and we as an association must avoid conflict of interest and its appearance, especially in view of our industry support.

We have worked to build consensus through the Council and committees, and have attempted to propose positions best supported by the scientific evidence. Our highest priority has been to advocate for the safety of the public and thyroid patients.

Most important at this moment, we share in a profound sense of loss with the death of our president, Clark Sawin. There will be opportunities at our Annual Meeting to remember the impact Clark has had on our association and celebrate his contributions. We will be collecting the many tributes that continue to come to the office and make them available to members (see p. 7 for remembrances).

President-elect Paul Ladenson, as set out in our bylaws, became Acting President with Clark's passing. I have greatly appreciated Paul's support and guidance to me throughout this year and his visionary leadership of our association. Bobbi Smith and her staff have effectively and efficiently managed a large portfolio of activities, expanding the impact of our association while remaining true to our core mission and connecting personally with our membership.

I will close with something that I think Clark would have appreciated for its historical significance as well as its message. Dr. Rawson concluded his address in 1956 with words that remain true and challenge us today. “I predict that if we encourage and support well-trained students of medicine and its basic sciences, who are endowed with the qualities of open-mindedness, imagination, and serendipity, the horizons of the thyroidologist will be broadened to extents never previously imagined.”

A handwritten signature in black ink that reads "Gregory A. Brent".



AMERICAN
THYROID
ASSOCIATION
FOUNDED 1923

ATA Signal

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American Thyroid Association

Upcoming Meetings

European Thyroid Association Meeting

Sept. 18–22, 2004, Istanbul, Turkey

Thyroid Ultrasound and FNA Biopsy Accreditation Course

Sept. 27–28, 2004, Vancouver, BC, Canada

76th Annual Meeting of the American Thyroid Association (ATA)

Sept. 29–Oct. 3, 2004, Vancouver, BC, Canada

Annual Meeting, American Society for Bone and Mineral Research

Oct. 1–5, 2004, Seattle, Washington

Second Joint AACE-AME Congress

Nov. 5–7, 2004, Rome, Italy

AAAS Annual Meeting

Feb. 17–21, 2005, Washington, D.C.

ATA 2005: Thyroid Cancer Frontiers

April 15–17, 2005, Baltimore, Maryland

13th International Thyroid Congress

Oct. 30–Nov. 4, 2005, Buenos Aires, Argentina

For more information visit www.thyroid.org.

ATA Executive Council Meeting Highlights

June 17, 2004 — New Orleans

The president-elect and Council began the June meeting making special mention of concern and regard for Clark and Leslie for Clark's recovery.

The **2004 awards** were announced:

- **John Nicoloff, MD** – 2004 Distinguished Service Award
- **Sandra McLachlan, PhD** – 2004 Sidney H. Ingbar Distinguished Lectureship Award
- **Paul Walfish, MD** – 2004 Paul Starr Award
- **P. Reed Larsen, MD** – 2004 Pathophysiology Medal

ATA Secretary Greg Brent highlighted the progress of **strategic planning** from the April Council meeting and the ATA's leadership role in public health and policy issues. He also reported that the **maternal fetal conference** was a great success, with enduring materials for CME and online streaming video in development.

Dr. Brent commended Alan Farwell, Chair of the Patient Education and Advocacy Committee, for initiating several key collaborations with the Hormone Foundation and AACE to co-sponsor **patient forums** with the Alliance for Thyroid Patient Education at their respective meetings, in addition to collaborating on patient education materials.

Dr. Brent reported that Marty Surks, Chair of the Publications Committee, had

negotiated an excellent contract with Mary Ann Liebert to continue publication of *Thyroid*. Progress was made in a number of areas that will improve the journal and member access to its content.

Dr. Brent detailed the importance of research support by the ATA and noted the exceptional scientific program assembled by **Annual Meeting** Co-Chairs Mary Samuels and Jim Baker. Abstract submissions are on the rise, totaling 250 this year. He also expressed his appreciation to Susan Mandel and Alex Stagnaro-Green who presented at ACOG.

Thyroid cancer will be the focus of the April 15–17, 2005, clinical meeting. Dr. Brent closed with the advisory that the ATA's continued success depends on its ability to respond and adapt to the changing landscape in clinical care, research, and available resources.

Treasurer Charles Emerson reported that, as of June 4, 2004, invested **ATA funds** returned 1.7 percent, an annualized return of approximately 4.5 percent. The return since the inception of ATA investment accounts has ranged from a low of -10.14 percent to a high of 39.76 percent. The performance of the two largest funds, the Client Select and Calamos funds, exceeded the performance of the S&P 500 both years to date and since inception.

Make Your Voice Heard!

Cast Your Vote for ATA's President-elect and Directors

This year's ATA election process marks three years of holding competitive elections. ATA members will once again vote to select the president-elect and directors for the ATA Council. However, this year all of the voting will be done by mail. Members should have received a ballot in August and are asked to return it to the ATA headquarters no later than Sept. 17, 2004, to be counted in the election results.

Candidates for president-elect are David S. Cooper and Ernest L. Mazzaferri. The candidates for two director positions are Gilbert Daniels, Alan Farwell, Jayne Franklyn, Michael McDermott, Mary Samuels, and Steven Sherman.

"The committee was impressed by the many qualified nominees with superior records of experience, service, and

commitment to the ATA," explained Leonard Wartofsky, Chair of the Nominating Committee.

Results of the vote will be announced at the Annual Business Meeting on Thursday, Sept. 30, 2004, during the ATA Annual Meeting in Vancouver.

"The change in the ATA election process arose from a recommendation in the 2001 ATA Strategic Plan," said Dr. Wartofsky. "Bylaws were ratified in 2003 that complete the initiative for competitive elections and voting by mail ballot. This will be the first year that results of the mail ballot will be announced at the Annual Business Meeting. Competitive elections have been very successful in broadening member participation in choosing the society's future leaders."

ATA President-elect

One-year term of office (2004–2005), followed by one-year term as president (2005–2006)

Vote for One (1)



David S. Cooper, MD

Candidate for President-elect

David S. Cooper, MD, is Director of the Division of Endocrinology at Sinai Hospital of Baltimore, Professor of Medicine at the Johns Hopkins University School of Medicine, and Professor of International Health at the Johns

Hopkins School of Public Health.

Dr. Cooper served as ATA treasurer from 1998–2003 and has been an ATA member since 1980. He has also served on the ATA Council, and on the Public Health, Publications, Education, and Finance and Audit committees.

He also serves as a Contributing Editor of the *Journal of the American Medical Association* and as an Associate Editor of the *Journal of Clinical Endocrinology and Metabolism*. He is the author of more than 100 original articles, editorials, and book chapters on the thyroid and is the Editor of *Clinical Management of Thyroid Disease*, a textbook on thyroid therapy. He also is a co-author of *Your Thyroid*, a book on thyroid disease for patients.

Dr. Cooper graduated from Johns Hopkins University and Tufts University School of Medicine. He completed his internal medicine residency at Barnes Hospital/Washington University, and his fellowship training in endocrinology at the Massachusetts General Hospital.

"I am eager for the ATA to fulfill its mission to become *the* advocate for thyroid researchers and clinical thyroidologists. In the future, I want to see stronger links between the ATA and reputable thyroid patient advocacy groups."



Ernest L. Mazzaferri, MD

Candidate for President-elect

Ernest L. Mazzaferri, MD, is Adjunct Professor of Medicine at the University of Florida in Gainesville. He is a past chair of the American Board of Internal Medicine (ABIM) Subspecialty Board on Endocrinology, Diabetes

and Metabolism and recently completed a four-year term on the ABIM Board of Directors.

Dr. Mazzaferri received his medical degree from Ohio State University College of Medicine. He served as Chair of Medicine and Dean at the University of Nevada (1978–1984) and as Professor of Medicine and Physiology and Chair of Medicine at The Ohio State University (1984–1999). Research interests include the clinical management of thyroid disease, especially thyroid cancer.

He has been a member of the ATA for 25 years and has served as a member and chair of both the Awards Committee and the Development Committee and as a member of the Public Health Committee. He is the recipient of the Paul Starr Award, The Robert Graves' Award, and the Light of Life Award.

"I strongly support the Strategic Plan, particularly efforts to expand membership of and enhance outreach to young professionals. I also support plans to further enhance the recognition of the ATA as the source of thyroid-related patient information and outreach as well as collaborating with sister societies and others to benefit patients and members. My vision for the ATA is to support the provision of the best possible care of patients with thyroid disease by the finest providers."

ATA Executive Council Director

Four-year term of office (2004–2008) Vote for Two (2)



Gilbert H. Daniels, MD

Candidate for Director

Gilbert H. Daniels, MD, is Associate Professor of Medicine at Harvard Medical School and Co-Director of the Thyroid Clinic at the Massachusetts General Hospital. His primary interests are patient care and

physician and patient education.

A member of the ATA since 1978, he has served on various committees, including the Education Committee, which he chaired; the Distinguished Service Award Committee; the Standards of Care Committee; the Awards Committee; the Ad Hoc Committee on Thyroid Function Testing; the Clinical Affairs Committee; the Nominating Committee; and the Thyroid Orphan Drug Task Force, which he currently chairs.

“My major goals for the ATA are to continue to increase its national visibility, to promote collaborative efforts with patient-oriented thyroid organizations, and to explore ways to make the ATA attractive to young endocrinologists.



Alan P. Farwell, MD

Candidate for Director

Alan P. Farwell, MD, is Associate Professor of Medicine at the University of Massachusetts Medical School. He is an active clinician, teacher, and basic science researcher. His research focus is on hormonal

regulation of brain development and non-genomic actions of thyroid hormone.

Dr. Farwell has been a member of the ATA since 1990, serving on committees continuously since 1997. Currently, he is chair of the Patient Education and Advocacy Committee, a position he has held since the committee's inception in 2001. He also served as chair of the Education Committee from 1997–2000. Dr. Farwell is a member of the *ad hoc* Web Site Task Force and has served on the Program Committee and the Patient Education Task Force.

“Since the development of the Strategic Plan, the ATA has solidified its position as the leading voice in the study and management of thyroid disorders. I believe that collaborative efforts with our sister endocrine societies and with thyroid patient advocacy groups allow the coordination of efforts that will maximize advances in knowledge, disease management, patient care, and patient education and minimize overlap, redundancy, and cost.”



Jayne Franklyn, MD, PhD

Candidate for Director

Jayne Franklyn, MD, PhD, is Professor of Medicine at the University of Birmingham and a Consultant Endocrinologist at University Hospital Birmingham in the United Kingdom. She has had a longstanding

clinical practice in thyroidology, with research interests in pathogenesis, management, and long-term consequences of thyroid disease.

An ATA member since 1988, Dr. Franklyn has previously served as a keynote lecturer and symposium speaker at ATA meetings on topics such as thyroid hormone action, subclinical thyroid dysfunction, and Graves' disease management.

She serves on the editorial boards of *Thyroid* and the *Journal of Clinical Endocrinology and Metabolism* and as senior editor of *Clinical Endocrinology*. Dr. Franklyn was a member of a 2003 U.S. consensus panel evaluating the evidence base of subclinical thyroid dysfunction and is a council member of the British Thyroid Association and the British Thyroid Foundation.

“I am committed to helping enhance the role of the ATA as the largest authoritative international organization supporting clinical excellence and scientific research in thyroidology. I am also committed to finding ways to support practicing clinicians and patient education and enhancing the culture and opportunities for both basic and clinical research.”



Michael T. McDermott, MD

Candidate for Director

Michael T. McDermott, MD, is Director of the Endocrinology Practice at the University of Colorado Hospital in Aurora. Since joining the ATA in 1992, he has served on the Program Committee (1997–2000)

and the Publications Committee (2000 to the present).

“I want to encourage the ATA to continue to expand its support of practicing clinicians by regularly updating and expanding published clinical practice guidelines and by increasing advocacy about current clinical coding and reimbursement issues. The ATA's public education efforts are outstanding and should continue with a concurrent focus on providing expert perspectives on the areas of misinformation that continually emerge in the print and Internet media. The ATA has been the leading organization to encourage basic, translational, and clinical research. I would continue to advocate for the advancement of this support through the ATA Endowment, partnerships with industry, and strong advocacy for increased NIH funding for thyroid research.”



Mary H. Samuels, MD

Candidate for Director

Mary H. Samuels, MD, is Professor of Medicine at Oregon Health & Science University in Portland, Ore., in the Division of Endocrinology, Diabetes and Clinical Nutrition. She also serves as the Associate

Program Director of the OHSU General Clinical Research Center. Her interests and expertise are in the areas of dynamic TSH secretion, the effects of altered thyroid function on cognition, and thyroid cancer.

Dr. Samuels has been a member of the ATA since 1991 and currently serves as clinical co-chair of the 2004 ATA Annual Meeting and ATA Program Committee. She has also served on the editorial boards of *Thyroid*, the *Journal of Clinical Endocrinology and Metabolism*, and *Clinical Endocrinology*.

“The American Thyroid Association has been an integral part of my professional life since I attended my first ATA meeting as an endocrine fellow in 1987. It is a dynamic and close-knit organization that combines the best in rigorous science, the care of patients with thyroid disease, and a nurturing environment for young investigators. To continue this winning combination, I believe that the ATA should maintain and strengthen its commitment to translational research, training, and outreach to the broader community of physicians and the public.”



Steven I. Sherman, MD

Candidate for Director

Steven I. Sherman, MD, is an Associate Professor and Chair *ad interim* of the Department of Endocrine Neoplasia and Hormonal Disorders at the University of Texas M.D. Anderson Cancer Center.

Dr. Sherman is currently a director on the Executive Council, having been appointed by Presidents Singer and Sawin in 2003 to complete the director's term of the secretary-elect. He is also co-chair of the ATA Program Committee for Frontiers in Thyroid Cancer 2005 and has served on the Public Health and Education committees. Other leadership roles he holds include chairing both the National Comprehensive Cancer Network Thyroid Carcinoma Consensus Guidelines Committee and the National Thyroid Cancer Treatment Cooperative Study Group, and he serves on the Publications Committee of The Endocrine Society. Dr. Sherman has been an active member of the ATA since 1992.

“In addition to my administrative experience, I can bring to the ATA leadership a strong voice representing clinicians and academicians devoted to the highest standards for patient care, clinical research, and education of both physicians and patients.”



Clark T. Sawin, MD

May 23, 1934 – August 11, 2004

Clark T. Sawin, MD, American Thyroid Association (ATA) President and member for more than 30 years, died on Aug. 11 in Washington, DC.

Dr. Sawin joined the Tufts faculty in 1966 and was a Professor of Medicine at both Tufts and Boston University schools of medicine. He was Chief of the Endocrine-Diabetes Section at the Boston VA Medical Center from 1966–1998. Most recently, Dr. Sawin was the Medical Inspector for the Veterans Administration’s health care system in Washington, D.C., where he was responsible for monitoring quality of care.

Dr. Sawin graduated from Brandeis University and received his medical degree from Tufts University School of Medicine. He completed his internship at the University of Illinois Research and Educational Hospitals in Chicago. After serving in the U.S. Army Medical Corps in Korea and Massachusetts, he completed his residency in medicine at New England Medical Center Hospitals and the Boston VA Hospital. He launched his career in endocrinology while performing a U.S. Public Health Service Postdoctoral Research Fellowship in endocrinology at New England Medical Center Hospitals.

Dr. Sawin’s research interests were in clinical thyroid disease, especially focusing on issues around treatment of hypothyroidism and changes in thyroid function with aging. He made major contributions to understanding the epidemiology of thyroid disease using the longitudinal Framingham Study database. His observation on the association of subclinical hyperthyroidism and atrial fibrillation, published in the *New England Journal of Medicine*, had a major impact on the treatment of hyperthyroid patients. More recently, he was involved in a number of multicenter trials to optimize the care of diabetic patients. His major interest over the past two decades was the history of endocrinology. He published widely in this area and was a regular speaker at national and international endocrinology meetings on this topic. He was the Book Reviews and Historical Editor of *The Endocrinologist*.

Dr. Sawin supported patient education and was a member of the physician advisory board of the Thyroid Foundation of America. He also served on a number of national expert panels to set policy for thyroid testing and thyroid disease treatment.

An ATA member since 1972, Dr. Sawin served on and chaired the Education Committee. In addition, he chaired the

History and Archives Committee for 15 years before his presidential term and, for more than 10 years, gave a regular lecture on thyroid history at the ATA Annual Meeting.

As ATA president, Dr. Sawin focused on supporting the society’s efforts to raise funds for thyroid research, expanding the public’s knowledge of thyroid disease, and expanding the membership, particularly in efforts to recruit younger members.

As the long-time purveyor and keeper of ATA history, Dr. Sawin will be remembered as an integral part of the ATA’s story. In recognizing the benefit of recording the past, he once said, “We all realize the importance and value of the

ATA’s history and trust that on that foundation we will build a rich and full future.” He was not just about the past, but made carrying out the ATA’s Strategic Plan a central goal of his presidential term.

Dr. Sawin was very excited about the future of the thyroid specialty and the ATA, and he was an enthusiastic supporter of the ATA Endowment for thyroid research. Speaking about contributions to the Endowment, he said, “There is no greater gift to the future of the ATA and that of thyroidology than research.” He added, “New members are joining us with new

ideas and energy — especially the energy — for discoveries in thyroid research. This is all very gratifying to me and to the society. This society has been a home for many of us, filled with the support of friends over many years. We need to give back to the society so that she will be here for the future thyroidologist who needs a home.”

“Clark has left his mark on us and on the ATA in so many ways,” reflected Gregory Brent, MD, ATA Secretary. “His passion for history has influenced a generation of endocrinologists to have a much greater respect and appreciation for what has come before. His strong character and sense of truth is applied as a template for our judgments and decisions. He, of course, had a great passion for research and support of young investigators, and this will continue to be our focus for years to come. We will all deeply miss Clark, but are so appreciative of his life and dedication. He has had a lasting impact on our association, the field of thyroidology, and our personal lives.”

Dr. Sawin is survived by his wife, Leslie, of 22 years; his daughter, Jennifer Sawin Stoddard of Silver Spring, Md.; his sons, Philip Sawin of Cincinnati and Kenneth Sawin of Edinburgh, Scotland; his sisters, Loretta Pietrzak of Hingham, Mass., Jane Neri of Plainfield, Mass., and Judith Pradell of Boston; his brother, David Sawin of Boston; and two grandchildren, Sarah and Jack.

“His strong character and sense of truth is applied as a template for our judgments and decisions....He has had a lasting impact on our association, the field of thyroidology, and our personal lives.”

ATA Colleagues Recall Fond Memories of Clark Sawin

Former ATA President Clark T. Sawin was remembered by colleagues from around the country and world after his death on Aug. 11, 2004.

“Clark Sawin will always have a prominent place of his own in the history of thyroidology — one earned by his documentation of our heritage, his important clinical research contributions, and his leadership roles in the American Thyroid Association,” said Paul Ladenson, MD, ATA Acting President.

Dr. Sawin’s colleague—friends remembered him as a friend, mentor, and humanitarian.

“Clark was recognized and respected as a superb clinician, researcher, historian, writer, and teacher,” recalled Marvin Mitchell, MD. “But there was something more than his brilliance that set him apart. He possessed an innate decency and sensitivity in his relationship with others, regardless of their status or position.”

One colleague recalled how he enjoyed working with and learning from Dr. Sawin. “Working with Clark on a clinical



Clark Sawin, who took office as ATA President during the 2003 Annual Meeting

Solvay’s then—main offices in Charleroi, Belgium, were bombed by the Germans in World War II.

“During this long search, which took several weeks, I was regularly in contact with Clark and our expectations were high to perhaps recover this precious vial and one day display it at one of our thyroid meetings,” recalled Dr. Glinoyer. “Even though we were not successful in our quest for the thyroid ‘holy grail,’ we had great fun together and, after all, it is probably ‘the quest’ more than ‘the find’ that makes life worthwhile, at least for the medieval chevaliers that Clark and I were together in this amusing joint venture.”

Dr. Glinoyer added, “How Clark managed to get an eye on this long-forgotten French thesis will remain a total mystery for the generations to come! But that was Clark. As long as I live, I will keep the vivid memory of the nice person Clark was.”

Many colleagues valued the time that Dr. Sawin gave to them early in their careers, making a lasting impression as a friend, mentor, and colleague.

...There was something more than his brilliance that set him apart. He possessed an innate decency and sensitivity in his relationship with others, regardless of their status or position.

research project was always a great learning experience because he was so meticulous and yet practical,” said Jerome Hershman, MD. “Clark’s final version of the manuscript showed his masterful prose and his avoidance of jargon. His high standards usually resulted in acceptance of the work for publication with minimal or no revision.”

Dr. Sawin was an avid chronicler of thyroid history, wrote widely on the subject, and was invited to speak about his findings around the country and world. Daniel Glinoyer, MD, an ATA corresponding member and a member of the European Thyroid Association, recalled fondly of his work with Dr. Sawin on a history project.

During Dr. Sawin’s wide reading of history, he found an obscure French thesis, which he translated, and uncovered a little known story from around 1875 that described a man from the Belgian Solvay company presenting a sealed vial of pure iodine at a meeting of chemists. The iodine had been prepared by the discoverer of iodine a century before.

“Clark asked me to help him locate the vial, if still in existence,” said Dr. Glinoyer, remembering that Dr. Sawin called the vial the “holy grail” of thyroid history.

Dr. Glinoyer contacted a friend at the Solvay company who put him in touch with an archivist who had recently documented the company’s history. After contacting the archivist, he found out that the vial had been in existence until

David Cooper, MD, still appreciates the time that Dr. Sawin spent with him when he was a second year medical student at Tufts in 1971, introducing him to endocrinology. “He permitted me to spend the summer with him, learning about laboratory techniques, clinical research, clinical endocrinology, and seeing how a truly original thinker thinks.” Dr. Cooper added, “Clark is the single person most responsible for my choosing to be an academic endocrinologist. Over the years, we remained good friends, and he continued to be a valued resource and colleague. I will miss his wit, intelligence, and his wisdom.”

Dr. Sawin also guided ATA Secretary Greg Brent, MD, in his early career. Dr. Brent reflected on finding a mentor and a gentleman-scholar in Dr. Sawin while sharing a plane ride with him on a return trip to Boston after attending an endocrine meeting.

“We had a long conversation about academic careers in endocrinology, with Clark giving me advice on the stumbling blocks to avoid,” he recalled. “I would have had an easier time if I had taken all of his advice, but at least I took some of it. There was always a warmth and sparkle in his eye that came through his erudite manner.”

Dr. Brent also reflected on fond memories of Dr. Sawin in their ATA leadership roles. “I had the privilege of regular

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ATA, AACE, and The Endocrine Society Speak Out Against FDA Approvals of Generic Levothyroxine Products

The ATA, working with AACE and The Endocrine Society (TES), has taken the lead in speaking out regarding the FDA's June 23 approval of three generic levothyroxine products. In an official joint statement and in subsequent communications to the news media, the ATA, its sister societies, and patient advocacy groups have strongly voiced their concern and dismay at the FDA's decision to approve generic substitutes for levothyroxine products — without input from clinical endocrinologists.

Prior to the FDA's approvals, the ATA, AACE, and TES had repeatedly expressed their concerns about the FDA's process for considering bioequivalence issues. In that regard, the agency had indicated to the thyroid community that it would seek input from clinical endocrinologists and would carefully consider their views regarding standards of thyroxine bioequivalence and testing.

“Our organizations established a dialogue with the FDA over the past year about this matter and other issues of assessing levothyroxine therapy,” said Gregory Brent, MD, ATA Secretary in a June 28 news release, “only to have the FDA make this decision without our input. The goal of all concerned organizations continues to be the development of a responsible and scientifically informed approach to levothyroxine therapeutic substitution for the 13 million Americans who take these products,” added Dr. Brent. “The FDA's recent actions will result in patients being switched among a number of levothyroxine preparations, often without their or their doctors' knowledge, with the possibility of an increase in adverse events.”

Furthermore, the ATA recently received bioequivalence data that was used to acquire FDA approval for one of the generic levothyroxine products — Sandoz's levothyroxine sodium — showing that the generic is significantly more potent than Synthroid®. Information from bioequivalence studies submitted to the FDA show that this new generic may be as much as one-eighth more potent (+12.5%) as Synthroid. The ATA and AACE commented on this issue in an Aug. 11 joint news release. In addition, the Dow Jones news wire distributed a story on the issue, featuring comments from Dr. Brent and Paul Ladenson, MD, ATA Acting President.

“Unfortunately, this information confirms our concern that current FDA standards defining the equivalence of

levothyroxine products are too lax,” said Carlos Hamilton, MD, AACE President, in the joint news release. “Switching between two products could compromise the effectiveness of treatment and even result in serious side effects.”

In its statement and media outreach, the thyroid groups explained that levothyroxine's narrow toxic-to-therapeutic ratio can lead to significant clinical consequences, such as osteoporosis, atrial fibrillation, worsening of heart disease, preterm delivery in pregnancy, impaired fetal brain development, and high cholesterol.

Both the FDA and the societies recommend that patients switching between levothyroxine products have repeat thyroid blood testing to be certain that the treatment dose remains effective and safe. “Under a policy of allowing generic levothyroxine substitution,” said Dr. Brent, “more frequent thyroid function testing will be necessary. Regrettably, some patients and doctors will not even be aware of a change in preparation before adverse events occur.”

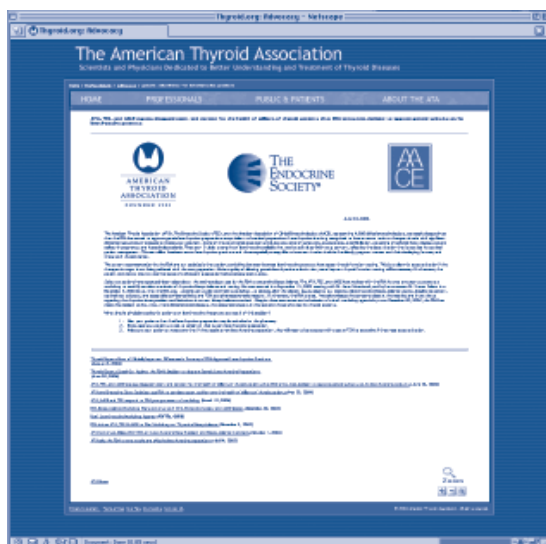
In several communications, the ATA, AACE, and TES have advised physicians caring for patients on levothyroxine therapy to —

1. Alert patients that their levothyroxine preparation may be switched at the pharmacy,
2. Encourage patients to remain on their current levothyroxine preparation when possible, and
3. Ensure that patients

understand if they receive a new levothyroxine preparation that they will need to repeat a TSH test four to six weeks later to determine if they need further dose adjustment.

The societies also strongly urge pharmacists, pharmacies, and health plans to respect the wishes of patients and physicians who choose to continue the same levothyroxine preparation. They caution those who dispense and pay for levothyroxine products that there can be serious health consequences if patients and their doctors are not fully informed about the potential risks of substitution and the requirement for retesting if they choose to switch to another levothyroxine preparation. In this regard, the Dow Jones news story focused on Aetna's recent decision to make the generic levothyroxine products the most accessible drugs on its formulary and urging the patients that it covers to switch from Synthroid to a generic.

The ATA's previous statements related to this matter can be found on the ATA's web site at: http://www.thyroid.org/professionals/advocacy/04_06_24_fda.html.



Rebecca Bahn Is New Editor of ATA Signal



Rebecca Bahn, MD, is the new editor of *ATA Signal*, having taken over responsibilities from Jeff Garber, MD, starting with this issue. Dr. Bahn is a consultant in endocrinology at the Mayo Clinic in Rochester, Minn., a Professor of Medicine at Mayo Clinic College of

Medicine, and a Director on the ATA Executive Council.

"I'm very pleased to assume this responsibility," said Dr. Bahn, "and hope to work with the past editors to update the format and content of the newsletter."

Dr. Bahn has been a member of the ATA since 1987 and has served on the Nominating and Program committees. As part of the Program Committee, she served as the basic science co-chair for the 2003 ATA Annual Meeting and helped plan the 12th

International Thyroid Congress, held in Kyoto in 2001.

She is a graduate of Mayo Medical School and completed her internal medicine and subspecialty training at that institution. Dr. Bahn's clinical interests lie primarily in the treatment of Graves' ophthalmopathy and Graves' disease, and she directs a laboratory-based program to study the pathogenesis of these conditions. She recently completed a term on the NIH Endocrinology Study Section and was past chair of the Abbott Thyroid Research Advisory Council.

"I am particularly excited about a new column that will feature recently published basic and clinical research developments by ATA members," added Dr. Bahn. "We will especially highlight promising work done by new investigators in the field."

ATA Research Grants, *continued from front page*

ATA 2003 research grant recipients who are in the second year of their awards are **Eric M. Jacobson, PhD**, of Mount Sinai School of Medicine in New York City for his research proposal *Molecular Determinants of the Presentation of Immunogenic Thyroglobulin Peptides by HLA-DR3* and **Jeffrey A. Knauft, PhD**, of the University of Cincinnati College of Medicine for his research proposal *Tyrosine Kinase Receptor Oncogenes and Prostanoid Biosynthesis: Role of RET/PTC-induced Activation of Prostaglandin E2 Synthase in Thyroid Tumorigenesis*.

The recipient of the 2004 ATA ThyCa Research Grant is **Sareh Parangi, MD**, of Beth Israel Deaconess Medical Center in Boston for her research proposal *Antiangiogenic Therapy of Thyroid Cancer*. She will receive a one-time \$25,000 research grant from ThyCa: the Thyroid Cancer

Survivors Association, Inc., specifically for research in thyroid cancer. This is the second year that ThyCa has awarded this ATA research grant.

ATA and ThyCa research awards are targeted to fund new investigators to obtain preliminary data that can lead to further work and funding from additional sources, such as the National Institutes of Health.

"The grant recipients received their awards in July to enable them to begin their research immediately," explained Dr. Fagin. "The names of the awardees will be announced at the ATA's Annual Business Meeting in Vancouver on Sept. 30. It is anticipated that their findings will be presented at future ATA meetings, lead to high impact publications, and provide advances that will increase our understanding of thyroid diseases in a way that will benefit patients."

Clark Sawin, *continued from page 7*

contact with Clark the past two years on the ATA Council and during his presidency," said Dr. Brent. "Clark always brought his keen intellect and reasoning to the issues at hand, often clarifying a point after a long discussion to bring the arguments into focus. Even as Clark became unable to fully participate in ATA business, his strong sense of fairness and respect of history and protocols guided our decisions."

Martin Surks, MD, remembers meeting Dr. Sawin, forming a quick friendship. "Clark and I met almost 35 years ago at an American Thyroid Association Annual Meeting. We learned that we were born only two days apart and formed an instant bond that grew over the years," he said. Their friendship was

about mutual respect, trust, and also humor. "I always reminded him that, to my knowledge, only he and Benjamin Franklin received full scholarships to the Boston Latin School. Franklin did not graduate!"

Dr. Surks also recalls the times they worked together on many projects, including one in late January just before Dr. Sawin became aware of his illness. "We had many laughs, dinners, drinks, and countless telephone calls and other times together over the years," he reflected. "He was a close friend who helped me in times of need as I tried to help him. My world is smaller without him."

**To become an ATA member, go to www.thyroid.org, and click on "Professionals."
Or call the ATA headquarters at 703-998-8890.**

Meeting-at-a-Glance

76th Annual Meeting of the American Thyroid Association

Westin Bayshore Resort & Marina
 Vancouver, British Columbia, Canada
 September 29–October 3, 2004



AMERICAN
 THYROID
 ASSOCIATION
 FOUNDED 1923



Time	Wednesday 9/29/04	Thursday 9/30/04	Friday 10/1/04	Saturday 10/2/04	Sunday 10/3/04
6:00	Exhibitors Move-In 8:00 - 11:00 am	Abbott Early Riser CME Symposium 6:00 - 7:45	Genzyme Early Riser CME Symposium 6:00 - 7:45	King Early Riser CME Symposium 6:00 - 7:45	
7:00	Endocrine Fellows Conference 6:45 am - 3:45 pm	Welcome 8:00 - 8:15 Keynote 8:15 - 9:00 Plenary: 4 oral abstracts 9:00 - 10:00	Van Meter Lecture 8:00 - 8:40 2 simultaneous symposia 8:45 - 10:00 Clinical Thyroid Nodules and Cancer	Paul Starr Lecture 8:00 - 8:45 Short calls: 5 oral abstracts 8:45 - 10:00	Breakfast 8:00 Symposium 8:30 - 10:00 Difficult Diagnostic and Management Issues - a case based approach
8:00	ATA Council Meeting 8:00 - Noon	Exhibit Hall open 9:30-4:00 pm Break in the Exhibit Hall 10:00 - 10:30	Break in the Exhibit Hall 10:00 - 10:30 Oral abstract sessions 10:30 - 12:00 Simultaneous (2)	Poster Review and Break 10:00-10:30 10:30 - NOON	
10:00		2 simultaneous symposia 10:30 - 12:00 Arthur Bauman Clinical Symposium Hashimoto's Thyroiditis	Clinical oral abstracts	Translational Symposium: Environmental Toxicology and Thyroid Disease	
10:30		Meet the Professor Luncheons Noon - 1:30 Amir & Koenig Pearce	Meet the Professor Luncheons Noon - 1:30 Mori & Yamada Franklyn		
11:00		Oral abstract sessions 1:30 - 3:00 Simultaneous (2) Clinical oral abstracts	Wondisford LaFranchi Zaidi Exhibit Hall Closes 1:30 Oral abstract sessions 1:30 - 3:00 Simultaneous (2)	Poster Review 12:00 - 1:30	
12:00	ATA Committees & Council Liaisons Luncheon Noon - 2:00 ATA Council meeting 2:00 - 5:00 pm Cmte Chairs Report 2:00-4:00	Oral abstract sessions 1:30 - 3:00 Simultaneous (2) Clinical oral abstracts	Oral abstract sessions 1:30 - 3:00 Simultaneous (2) Clinical oral abstracts	Oral abstract sessions 1:30 - 3:00 Simultaneous (2) Clinical oral abstracts	
		Plenary - Ingbar Lecture 3:00 - 3:45 Poster Review 3:45 - 5:00	Poster Review and Break 3:00-3:30 2 simultaneous symposia 3:30 - 5:00 Endocrine Grand Rounds: Funky Thyroid Function Tests	Poster Review and Break 3:00-3:30 2 simultaneous symposia 3:30 - 5:00 Clinical Iodine Nutrition and the Thyroid	
1:30	Exhibit Hall open 2:00-5:00 pm, 7:00-9:00 pm Registration open 2:00 - 6:00 pm	ATA Annual Business Meeting 5:00 - 6:30 pm ATA Members Only	Historical Vignette 5:00 - 5:30 King CME Symposium 5:30 - 6:45 Poster Review and Reception 6:45 - 7:30 Free Evening	5:00 - 5:45 Abbott State of the Art Lecture ATA Annual Gala Event 7:30 - 11:00 (admission by ticket only)	
2:00	Women in Thyroidology 5:00 - 6:00	ATA Social Event 6:30 - 10:00 Vancouver Aquarium & Marine Center Stanley Park			
3:00	Newcomers' Welcome 6:00 - 7:00				
3:30	Welcome reception				
5:00					
6:00					
7:00					

“As in past years, the award lectures promise to be a particular highlight of the meeting,” said Dr. Baker. The 2004 Sidney H. Ingbar Distinguished Lectureship will be given by Sandra McLachlan, PhD, on “An Odyssey in Thyroid Autoimmunity.” The Clinical Keynote Address will be given by Theo Visser, PhD, on “Thyroid Hormone Transport Into Cells.” Finally, the Paul Starr Award Lecture will be given by Paul Walfish, MD, on “Evolving Strategies in the Detection and Management of Thyroid Carcinoma: Past and Future Perspectives.”

The impact of technology on thyroid research will be examined in several sessions. One session will examine thyroid nodules and cancers with a panel of molecular markers, and a second will review the use of expression arrays in evaluating thyroid disease. “It is remarkable that many of the molecular techniques that have evolved over the past 20 years are now in standard use,” said Dr. Samuels, “not just in research but in clinical diagnosis and management. We believe that these advances will help improve the diagnosis of thyroid disorders and aid in the monitoring of thyroid hormone therapy.”

Clinical symposia at the meeting will focus on a number of areas where new and exciting data exist to guide clinical decision making for patients with thyroid disease. These areas include the evaluation of thyroid cancer, the spectrum of autoimmune thyroiditis, and iodine nutrition.

In addition, several CME symposia have been designed to address emerging information regarding the treatment of hypothyroidism and thyroid cancer, maternal and fetal thyroid health, and the use of T3. Finally, in response to numerous requests from past meeting attendees, there will

be two case-based symposia: one on unusual thyroid function tests and one on difficult management issues in hypothyroidism.

“The overall number of abstract submissions was up substantially from last year,” added Dr. Samuels, “and the quality of the accepted abstracts was uniformly very high.”

In the basic science program, several important areas will be emphasized. These include molecule markers of thyroid cancer that affect both diagnosis and prognosis. Studies in autoimmunity suggest a role for new receptors in the pathogenesis of immune-mediated thyroid disease, as well as further work on the differentiation of stimulating and inhibiting antibodies to the TSH receptor. Other basic abstracts focus on the action of thyroid hormone in the nervous system and the regulation of other enzyme and hormonal systems by deiodinases.

“Another area that appears to be of great interest is the pendrin protein and its effects on thyroid function,” added Dr. Baker. “Together, these studies document tremendous interest in the molecular and biochemical abnormalities that lead to thyroid disease.”

In addition, the clinical abstracts highlight a number of important areas in diverse aspects of thyroid disease. These include new markers for thyroid malignancy, preliminary data on radio- and chemotherapy for advanced thyroid cancer, the effects of thyroid disease during pregnancy, and the relationship between thyroid disease and cardiovascular risk.

Drs. Samuels and Baker welcome all of their ATA colleagues to join them in beautiful Vancouver for a stimulating and productive meeting.

Mark Your Calendar for Upcoming Events

Don't Miss the ATA Annual Business Meeting

Thursday, Sept. 30, 5 p.m.–6:30 p.m

ATA active members are invited to attend the Annual Business Meeting, Thursday, Sept. 30, from 5 p.m.–6:30 p.m. at Vancouver's Westin Bayshore Resort and Marina. The meeting will feature election results, committee reports, and important member issues.

ATA Alliance Holds Patient Forum

Tuesday, Sept. 28, 6:30 p.m.–8:30 p.m

On the eve of the ATA Annual Meeting, the ATA Alliance for Patient Education will be holding its annual educational forum for patients, titled “Thyroid Disease and You.” The event will be held on Tuesday, Sept. 28, from 6:30 p.m.–8:30 p.m. at the Westin Bayshore Resort & Marina in Vancouver.

Thyroid experts will present information on a variety of thyroid disorders as well as answer questions from patients and their families.

The Alliance, an organization supported by the ATA, is composed of the following thyroid patient education and advocacy groups: Thyroid Foundation of America, ThyCa: Thyroid Cancer Survivors Association, National Graves' Disease Foundation, and the Light of Life Foundation.



American Thyroid Association
6066 Leesburg Pike, Suite 650
Falls Church, VA 22041

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The American Thyroid Association invites you to attend the 76th Annual Meeting of the ATA ...

The Dartmouth-Hitchcock Medical Center designates this educational activity for a maximum of 33 category 1 credits toward the AMA Physician's Recognition Award. Each physician should claim only those credits that he/she actually spent in the educational activity.



The ATA Annual Meeting will feature interactive oral and poster sessions, innovative talks on cutting-edge topics, Meet the Professor luncheon workshops, and a great balance between basic science and clinical topics. The ATA's meeting is known for its state-of-the-art information, unparalleled networking opportunities, and warm collegiality.



Online meeting information: www.thyroid.org or call the ATA at 703-998-8890

Headquarters Hotel:

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