

ATA Signal



AMERICAN
THYROID
ASSOCIATION
FOUNDED 1923

VOLUME 10 NO.2, SEPTEMBER 2007

THE NEWSLETTER OF THE AMERICAN THYROID ASSOCIATION

The ATA To Meet in Manhattan

The ATA heads to the heart of Manhattan for its upcoming 78th Annual Meeting. Please join us at the Sheraton New York Hotel and Towers, October 4-7, 2007 in New York City to share the newest clinical and basic science research on thyroid disease.

Program Chairs Peter Kopp and Mike McDermott have prepared an outstanding scientific program.



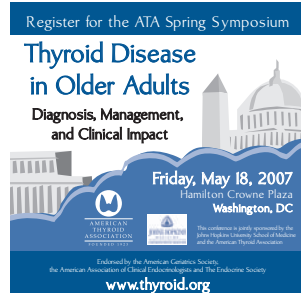
“The program is designed to address important management questions in clinical thyroidology and it contains cutting-edge information about recent basic science developments,” said Dr. Kopp. “Moreover, it has a strong emphasis on

translational aspects, e.g. presentations on emerging therapies for advanced thyroid *continued on page 13*

ATA Spring Symposium Highlights Thyroid Disease in Older Adults

Thyroid and geriatrics experts convened for the first time in ATA’s history to share the latest information on the impact of thyroid disease on older adults at the ATA’s spring symposium, “Thyroid Disease in Older Adults: Diagnosis, Management, and Clinical Impact.”

The meeting, co-sponsored by the Johns Hopkins University School of Medicine, took place on May 18 in Washington, DC and drew more than 80 attendees. ATA Member Jerome Hershman and American Geriatrics Society (AGS) Member Linda Fried co-chaired the symposium.



“The meeting was an unqualified success,” said ATA President David Cooper. “It was a forum for geriatricians and

endocrinologists to share their views and discuss areas of common interest. Perhaps more importantly is the fact that we have initiated a dialogue that will lead to a closer collaboration between the ATA and the geriatrics community in the future.”

The various speakers were outstanding in covering the topics of subclinical hypothyroidism and hyperthyroidism in the elderly, the impact of subclinical dysfunction on the *continued on page 8*

President’s Message



As I write this message, I am flying over the Atlantic on my way back

from two international meetings. The first, which took place on the Greek island of Santorini, focused on “Thyroid Cancer and the Environment.” It was sponsored by The European Thyroid Association and organized by ATA Member Prof. Leonidas Duntas of the University of Athens.

The second, which occurred three days later, was *continued on page 4*

IN THIS ISSUE

Treasurer’s Report
Page 2

Secretary’s Report
Page 3

Editor’s Corner
Page 5

In Memoriam
Page 7

Thyroid EIC Selected
Page 9

Staff News
Page 9

**Annual Meeting
Registration Form**
Page 15

Important ATA Member Notices

- Register for the Annual Meeting — www.thyroid.org (page 15)
- Candidate statements for ATA’s President-elect and Directors (pages 10–12)

Treasurer's Report



The ATA maintains bank and money market accounts for operational activities and a bond and money market account for operation reserve funds. Permanently designated funds are invested in bond, equity, and money market accounts. On April 30, 2007, the value of ATA operational accounts was \$633,928 and the value of accounts for permanently designated funds was \$2,930,823.

The audit for 2006 was performed by Dalal and Company. In 2006, support and revenue was \$408,549 over the budget of \$1,579,205. Expenses were \$78,833 over the budget of \$1,580,022. As of December 31, 2006, total assets of the ATA were \$3,618,675. Monetary assets were \$3,452,373, a gain of \$277,684 from the beginning of 2006.

On January 29, 2007, the ATA management became aware of transactions involving fraud and embezzlement by an employee. The employee directed the ATA's credit card clearinghouse to issue refunds of credit card receipts to several of the employee's personal credit card accounts, rather than depositing the original receipts to ATA bank accounts. The 2006 audit reflected \$51,215 that should have been deposited into ATA bank accounts. In April 2007, the ATA filed claims to receive reimbursement of \$119,267 for the embezzlement that occurred in 2006 and the preceding years. These claims were recently settled in the amount of \$118,267.00 (after deductibles equaling \$1000) by the ATA's insurance carriers.

The value of permanently restricted ATA endowment and designated funds at the end of 2006 was \$2,759,419. This was a gain of \$186,840 from 2005. The end year values for each fund were as follows.

	2005	2006
Ingbar Fund	\$ 112,865	\$ 121,852
Endowment Fund	\$ 372,759	\$ 403,007
Campaign Fund	\$ 1,892,306	\$ 2,022,412
Pathophysiology Fund	\$ 33,984	\$ 36,690
USC Fellows Fund	\$ 41,773	\$ 45,099
Arthur Bauman Fund	\$ 68,892	\$ 76,377
Sawin Fund	\$ 50,000	\$ 53,982

The ATA experienced a substantial gain in the assets of its accounts in 2006. This was due to the favorable experience in the equity markets and the diligent management of income and expenses by Executive Director Smith, working with President Cooper, Secretary Brent, and the Board. Efforts to strengthen the financial processes of the ATA will continue along with the growth in its programs. It is imperative that this growth be funded by diverse sources and is sufficient to maintain the preeminence of the ATA as a worldwide leader. This will require at least a five-fold expansion of its restricted assets in the next ten years.

Almost four years ago, I inherited the position of treasurer from our President David Cooper. Since then I have come to appreciate Dr. Cooper's decision to begin a long range investment plan for the ATA's restricted funds and to value the untiring efforts of our Secretary Greg Brent and Executive Director Bobbi Smith. This October, I will turn over the duties of treasurer to David Sarne, whose experience as chairman of the Finance and Audit Committee will serve the ATA well in the coming years. I thank the ATA for giving me the opportunity to serve as treasurer, on the Executive Committee and on the Board. The wisdom and efforts of those around me has made it an enjoyable, challenging, and valuable experience.

Charles H. Emerson — Treasurer



AMERICAN
THYROID
ASSOCIATION
FOUNDED 1923

ATA Signal

Editor

Rebecca S. Bahn, MD

Managing Editor

Barbara (Bobbi) R. Smith, CAE

Contributing Editor

Jennifer Reising

Officers and Directors 2006–2007

President

David S. Cooper, M.D.
Baltimore, Maryland

Secretary

Gregory A. Brent, M.D.
Los Angeles, California

Treasurer

Charles H. Emerson, M.D.
Worcester, Massachusetts

President-Elect

Rebecca S. Bahn, M.D.
Rochester, Minnesota

Secretary-Elect

Richard T. Kloos, M.D.
Columbus, Ohio

Treasurer-Elect

David H. Sarne, M.D.
Chicago, Illinois

Directors

Ernest L. Mazzaferri, M.D. (2007)
Bryan R. Haugen, M.D. (2007)
Sandra M. McLachlan, Ph.D. (2007)
Gilbert H. Daniels, M.D. (2008)
Steven I. Sherman, M.D. (2008)
Matthew D. Ringel, M.D. (2009)
Mary H. Samuels, M.D. (2009)
Antonio C. Bianco, M.D., Ph.D. (2010)
Alan L. Farwell, M.D. (2010)
Michael T. McDermott, M.D. (2010)

Executive Director

Barbara R. Smith, CAE

Published by the

American Thyroid Association
6066 Leesburg Pike, Suite 550
Falls Church, Virginia 22041
Phone: 703 998-8890
Fax: 703 998-8893
E-mail: bsmith@thyroid.org
Web: www.thyroid.org

Please notify the ATA of changes in contact information.

Copyright 2007
American Thyroid Association



"It is the greatest job in the thyroid world." It was at Universal studios, the site of our latest (and arguably greatest) large-scale social event, that Marty Surks spoke those words. Marty, former ATA secretary, was not discussing a top position in practice, academics or industry, but was referring to my succession to secretary-elect of the ATA in just a few days. It was a statement that I have reflected on over the past four years, only occasionally questioning the veracity, but never the sincerity with which it was made.

Paul Ladenson, my predecessor, and Treasurer David Cooper were completing their term, leaving an ATA that was fiscally strong, professionally managed by a newly-installed executive director, characterized by a growing membership that was increasingly younger and more diversified, a burgeoning web presence, a growing meeting calendar, and a recognition that despite its relatively narrow focus and smaller membership, it was a peer organization with the larger endocrine associations.

Clark Sawin, the first president I served with, would point out that it is way too early on a historical scale to assess any impact of my tenure as ATA secretary. I fully agree, and plan to spend my last opportunity to communicate through the *Signal* as secretary to express my gratitude for serving in this position.

Shortly after the 2003 Palm Beach meeting when I took over as secretary, I returned to my office to find a mailbox full of messages from some of our most treasured and long-standing members, who were very angry about a decision that had been presented at the just completed meeting. I won't mention the details of the issue, as it has not been brought up since, but it is sufficient to say that I feared having the shortest secretary tenure in ATA history. I listened to the concerns, worked to clarify the rationale for the decision, and sought counsel from those I trusted.

This was an approach I was to repeat for most of the difficulties that I faced. I would like to say that the issue was resolved by my skilled diplomacy, great interpersonal skills, and the confidence that many had in my leadership. In reality, I expect that none of these factors was the case.

In the end, these members moved past the issue and remained in the ATA because they decided that they loved our association more than they cared about the issue that had bothered them. Isn't this how most disputes are resolved within a group that cares deeply for each other? It is the great passion we feel about our association that makes us quick to express criticisms and concerns, but also quick to resolve issues, to forgive, sacrifice, and work to move towards a stronger association.

It is well-worn imagery to refer to the ATA as a family, but it fits in so many ways. Essentially all ATA members can trace their position somewhere in the ATA "pedigree." Through a mentor or a colleague, we were drawn to the ATA by someone who is connected to someone, who is connected to one of the giants of our field. Some of you are those giants, but others have at most one or two degrees of separation from these individuals. At one time, only a handful of programs were the centers of research and training in thyroid disease, but trainees from these institutions have gone on to initiate their own programs throughout North America and the world. Our diversity of geography, disciplines, and backgrounds is our strength.

I have benefited greatly from the wise counsel and friendship of the four presidents I have served with: Clark Sawin, Paul Ladenson, Ernie Mazzaferri, and David Cooper.

Clark's term was tragically cut short by his illness and death while in office, but his impact on our association is still being felt in many ways.

The opportunity to build relationships with these highly accomplished thyroid academicians, learn from them, and count them as friends has been one of the greatest benefits of my term as secretary. I have had constant support and encouragement from our board members and committee chairs, the workhorse and backbone of our organization. The pool of past secretaries has been a rich source of guidance, and in many cases, has been willing to take on a sensitive or difficult task. I want to recognize the help and encouragement I have received from Paul Ladenson, Marty Surks, Len Wartofsky, and Lew Braverman. Terry Davies has maintained the editorial independence of *Thyroid*, but has been cooperative and eager to facilitate the publication of many ATA-initiated symposia and statements, as well as the transition of the editorial operations to the ATA headquarters. ATA members with major leadership positions in AACE, including Hossein Gharib, Jeff Garber, and Dan Duick, have worked hard to help facilitate our many cooperative initiatives and always made themselves available to me. We have had unparalleled connection to The Endocrine Society during my term with the help and support of Presidents Chip Ridgway and Len Wartofsky. Finally, I greatly appreciate the support and counsel of my mentors, who I regularly turned to for help, Reed Larsen and Jerry Hershman, my connections to the ATA pedigree.

I will be forever grateful to have had the privilege to serve my term with Charles Emerson as treasurer. Charles is a thoughtful, calm, insightful individual who has kept the ATA finances strong and made key contributions in day-to-day decisions about our governance. He protected the ATA from

continued on page 6

Our diversity of
geography, disciplines,
and backgrounds is
our strength.

President's Message, *continued from front page*

a symposium on "TSH: Clinical Issues for 2007" that took place during the annual meeting of the Italian Endocrine Society. It was co-sponsored by the The Endocrine Society and organized by Endocrine Society President Len Wartofsky and Italian Endocrine Society President and ATA member Prof. Enio Martino of the University of Pisa. The symposium speakers were ATA Past Presidents Chip Ridgway and Len Wartofsky, myself, and Prof. Aldo Pinchera, the inaugural president of the newly formed Italian Thyroid Association.

These two meetings brought to mind two other international meetings that I was privileged to attend earlier this year. In February, I was fortunate to have been invited to speak at the Asia-Oceania Thyroid Association (AOTA) meeting in Manila, the Philippines, and in April I was honored to be a presenter at the Latin American Thyroid Society (LATS) meeting in Santiago, Chile.

Interacting with colleagues from all over the world who have a common passion for "all things thyroid" was not only intellectually stimulating, but also served as a reminder of the importance of the ATA's international relationships and the need to strengthen them whenever possible. One example of these efforts is the development of a symposium on iodine deficiency by Annual Meeting Co-chairs Peter Kopp and Mike McDermott. This symposium will be co-sponsored by the International Council for the Control of Iodine Deficiency Diseases (ICCIDD) and will include a talk on iodine deficiency in the developing world by an official from UNICEF. This was arranged by Jerry Burrow, the present ICCIDD chairman and a member of our Public Health Committee.

On the home front, I am pleased to report that our May 18th meeting on "Thyroid Disease in Older Adults," co-sponsored by the American Geriatrics Society (AGS) was a great success. The day's talks were splendid and led to a great deal of provocative interchange with colleagues in geriatrics and other medical disciplines.

The next day, there was a meeting to discuss opportunities for thyroid research in aging, organized by Greg Brent and co-chaired by Greg and Paul Ladenson, in association with colleagues from the National Institute on Aging (NIA). The meeting has led to a very promising dialogue between the ATA and the NIA that I hope will lead to future opportunities for research funding in the areas of thyroid physiology and thyroid disease in aging. Another dividend of these meetings is the announcement that the ATA has been invited to participate in a "Thyroid Disease in the Elderly" symposium at the 2008 AGS national meeting next May.

I want to acknowledge Greg Brent's outstanding leadership for the past four years in generating ideas and

curricula for the ATA public health symposia that we have held each spring. These meetings have not only been educationally valuable, but they also have served to bring the ATA into the public spotlight. He has led the way as well, by creating innovative partnerships with the CDC, the March of Dimes, and the NIA, all of which will place the ATA at the forefront of promoting public awareness of thyroid health and disease, and the importance of thyroid research.

Our clinical practice guidelines on Medullary Thyroid

Cancer and Hyperthyroidism, under the leadership of Rick Kloos and Rebecca Bahn, respectively, are proceeding on schedule. In addition, the revision process of our Thyroid Nodule and Differentiated Thyroid Cancer guidelines has begun. I am pleased to report that the latter task force has been expanded to include ATA Members Dave Steward, a head and neck surgeon from the University of Cincinnati, as well as two thyroid cancer luminaries from Europe, Prof.



ATA Past-president Wartofsky, current ATA President Cooper and Italian Endocrine Society President Enio Martino.

Martin Schlumberger from the Institut Gustave-Roussy in Paris and Prof. Furio Pacini from the University of Siena. The addition of Martin and Furio to our thyroid cancer task force, and the inclusion of Prof. Peter Laurberg from Aarhus Denmark on the Hyperthyroidism task force, are consistent with our strategy to work more closely with international colleagues.

There are many other ATA activities that have taken place "behind the scenes." One of the most important has been the selection of Treasurer Charlie Emerson to be the next editor-in-chief of our Society's journal, *Thyroid*. I am sure that everyone will recognize that he will be as outstanding as an editor-in-chief as he has been as a treasurer. I want to congratulate him and also thank him for agreeing to accept this very important and challenging leadership position in our Society.

I hope that this brief summary has given you an idea of how busy the executive team and many of our members have been over the last few months. We are indebted to Greg Brent, our secretary and chief operating officer, Charlie Emerson, our treasurer, and especially the hard work of our administrative team, ably led by Executive Director Bobbi Smith. It is hard to believe that my term of office will end in a few short months. As always, it has been a pleasure and an honor to serve as ATA president, and I welcome any suggestions or comments on how the ATA can grow and more effectively serve our members.

David S. Cooper
ATA President

Editor's Corner: Physician-Investigators: A Historical Perspective on the "Endangered Species"



Rebecca S. Bahn, MD, ATA Signal Editor

The number of physician-scientists applying for National Institutes of Health (NIH) funding during the 1960s was clearly in decline¹. In response, the NIH put in place novel initiatives to support both the career development and the educational loan repayment of patient-oriented researchers. The recent doubling of the NIH budget offered additional encouragement to physicians considering jumping into the NIH grant application pool. Despite these positive developments, concern that physician-investigators are an "endangered species" remains, and is in fact heightened by the current flattening of the NIH budget and its diminishing purchasing power.

PhDs appeared to be due to a difference in both the rate of reapplication and the success rate. Finally, MDs who proposed clinical research were funded at lower rates than MDs proposing nonclinical research (23% vs 29%, respectively; $P < .001$). The same held true for MD-PhD applicants (28% vs 35%; $P < .001$).

These data are certainly not encouraging to young physicians considering a career in clinical research. However, it should be noted that attrition from the NIH RO1 grant applicant pool does not necessarily mean an exit from research itself; these data did not capture success with other sources of research funding, including industry and foundations. Furthermore, this study didn't assess the impact of some of the recent NIH roadmap initiatives aimed at revitalizing the

Continued commitment from the NIH
and other funding sources, including specialty societies,
and the development of innovative funding mechanisms will be needed
to nurture the next generation physician-scientists.

A recent longitudinal study by investigators from the Association of American Medical Colleges sought to gain an accurate perception of the "perseverance and comparative success" of physician-scientists between 1964 and 2004². Data regarding the fate of NIH RO1 grant applications from first-time applicants were collected and stratified according to the PI's major degrees (MD, PhD, or MD-PhD) and their proposed involvement in clinical research, as defined by the study of humans or human tissues.

The number of first-time applicants with an MD degree was found to be quite stable over the 4 decades (mean of 707; range 537–983). During the same period, however, the number of PhD applicants more than doubled from 1423 in 1964 to 2869 in 2004, and MD-PhD applicants increased from 79 to 511. Even during the doubling of the NIH budget (1998–2003), the number of MD applicants was largely unchanged, while PhD applicants rose by 43% and MD-PhD applicants increased by more than 100%.

MD applicants were less successful in obtaining funding (28% mean annual percentage) than either PhDs (31%; $P = .03$) or MD-PhDs (34%; $P < .001$). Among those who did obtain an RO1 grant, MDs were consistently less likely (70%) than PhDs (73%; $P = 0.4$) or MD-PhDs (78%; $P < .001$) to obtain a subsequent grant. The difference in subsequent success rates of MDs compared with MD-

physician-scientist career pipeline. Additional good news on the horizon is that women now constitute almost half of the new MD applicant pool for research project grants, and their funding success is not different from that of men³.

The past 40 years has seen the unprecedented growth of scientific discovery with the potential for translation into clinical practice. Clearly, physician-investigators bring to the table unique skills and perspectives essential to the delivery of these scientific advancements to the bedside, clinic and community. Continued commitment from the NIH and other funding sources, including specialty societies, and the development of innovative funding mechanisms will be needed to nurture the next generation physician-scientists. In addition, it is incumbent upon the "older generation" to actively mentor and encourage our younger colleagues.

1. Wyngaarden JB. The clinical investigator as an endangered species. *N Engl J Med* 1979;301:1254-1259.
2. Dickler, HB, Fang D, Heinig SJ, Johnson, E, Korn D. New physician-investigators receiving National Institutes of Health research project grants; a historical perspective on the "endangered species". *JAMA* 2007; 297: 2496–2501.
3. Ley, TJ, Rosenberg LE. The physician-scientist career pipeline in 2005; Built it, and they will come. *JAMA* 2005;294: 1343–1351.

Annual Meeting Symposium Spotlights

Iodine Deficiency Disorders

For the first time in its history, the ATA will be offering a translational symposium on iodine deficiency disorders (IDD) to discuss the current needs and challenges associated with this important public health issue. Mark your calendars to attend this special symposium on Sunday, October 7 from 10:30 a.m. to Noon, which marks the end of the annual meeting.

“This symposium will outline the global scope of iodine deficiency and the approach to the sustainable elimination of the world’s leading cause of preventable mental retardation through universal salt iodination,” said Gerard Burrow, who will be moderating the symposium.

Kul Gautam, assistant secretary-general of the United Nations and deputy executive director of the United Nations Children’s Fund (UNICEF) will be making a special appearance to talk about the sustainable elimination of iodine deficiency.

Elizabeth Pearce will be discussing iodine associated with pregnancy. “Pregnant women need to increase their dietary iodine intake in order to prevent the development of goiter, obstetric complications, and neurocognitive deficits in their

offspring,” said Dr. Pearce, “Worldwide iodine deficiency in pregnant women is a major public health problem. There are concerns that some pregnant women in the United States may be at risk for mild to moderate iodine deficiency.”

Michael Zimmermann, of the International Council for Control of Iodine Deficiency Disorders (ICCDD) will be speaking about the status of worldwide iodine. “Despite remarkable progress in the control of the iodine deficiency disorders, they remain a major global public health problem, affecting nearly 2 billion people

worldwide,” said Dr. Zimmermann. “There have been significant recent advances in assessing the severity of IDD and monitoring progress of salt iodization programs, and this will be the focus of my lecture.”

In addition to this special symposium, the ATA will be highlighting the IDD issue in other initiatives. Dr. Burrow, a member of the ATA Public Health Committee, will be chairing a sub-committee on this important public health issue. The ATA is also developing a web brochure and will be conducting media outreach on the IDD issue.

“Worldwide iodine deficiency in pregnant women is a major public health problem.”

Secretary’s Report, *continued from page 3*

vulnerabilities that I did not even know were possible, and I have greatly valued his counsel and friendship. I know that he will serve the ATA in an outstanding fashion as editor-in-chief of our journal, *Thyroid*.

The closest connection in our governance structure is between the secretary and executive director, which has been my experience throughout my tenure. Bobbi Smith has been a tactful and effective teacher, prodder, confidant, and valued colleague. She brings great experience and wisdom to her position as executive director and has effectively managed that difficult balance between the staff and volunteers. She is the heart and soul of our operation and her vision and leadership has been at the core of our success.

I am incredibly grateful for the opportunity that I have had to serve our association for the past four years. We should continue to look at the reason we are all here, what makes the association great. I have heard and read variations of, “The ATA should....,” throughout my term. The members, not the officers, staff, or board, are the ATA. The “they” is you. If you don’t like something, then speak up. If you have an initiative you want addressed, then volunteer.

If you see a need, then fill it. Continue to reach out to your colleagues to join this unique family. It is our members and our members alone that make us great.

I have had the occasion recently, and in full sincerity, to pass on to my able successor, Rick Kloos, the same words that Marty passed on to me. “This is the greatest job in the thyroid world.” The leadership transition has been going on for almost a year, and Rick and Treasurer-elect David Sarne are a strong and experienced team that will bring enthusiasm and new ideas. They are sure to position the ATA to grow larger and stronger, with even greater impact in the coming years. My long-time colleague, Rebecca Bahn, will be an outstanding president. The ATA is in great hands and I ask you to give the same wonderful support and encouragement that I have received to this new team.

It has been a privilege to serve as your secretary,



Gregory A. Brent
ATA Secretary

In Memoriam

François Delange

François Delange, one of the most prominent physicians of his time in the fight against iodine deficiency in the world, died of heart failure on June 15, 2007.

“François Delange, a pediatrician, worked tirelessly to ensure that children would be born with the capacity to attain optimal intellectual development,” said Gerard Burrow, chairman of the International Council for Control of Iodine Deficiency Disorders (ICCIDD). “From clinical studies of myxedematous cretinism, to seminal work on newborn thyroid screening, to utilizing universal salt iodization to eliminate iodine deficiency world-wide, he was a driving force. His legacy lies in the millions of children that have been protected as a result of his efforts.”

As a professor of pediatrics at the University Hospital Saint-Pierre, Brussels, Belgium, he became involved in its deleterious effects, especially in children, since the 1960's. Dr. Delange's most important and groundbreaking work started in Zaïre, where he and his collaborators described for the first time the myxedematous type of cretinism. This condition was not recognized before as a separate entity and appeared to be caused by iodine deficiency, in combination with a damaged thyroid gland. His group performed numerous field studies that enriched the



François Delange

knowledge about iodine deficiency tremendously.

“For more than three decades, François Delange led the global effort to eradicate iodine deficiency,” said Michael Zimmermann, editor of IDD newsletter of the ICCIDD, at the Human Nutrition Laboratory, Swiss Federal Institute of Technology, Zurich, Switzerland.

“Beginning with his ground-breaking work on cretinism in central Africa, he was a tireless advocate for universal salt iodization, and his eloquence and dedication were an inspiration to many,” said Dr. Zimmermann, “He was a man of integrity, with fierce loyalties to his family and friends.”

Dr. Delange was honorary executive director and a long-time board member of the ICCIDD for many years, its executive director from 1995–2001 and the regional coordinator for Europe from 1986–2001.

He authored more than 300 peer-reviewed publications and edited or contributed to ten books and chapters. Dr. Delange was a frequent speaker and a long-term member of the European Thyroid Association. He had been honored several times and received two Honorary Doctorates. Dr. Delange was also a consultant to many international

bodies, including the WHO, UNICEF, and IAEA, and visited most iodine deficient countries in the world one or more times.

“For more than three decades, François Delange led the global effort to eradicate iodine deficiency.”

ATA In The News

The following media outlets are publishing information about the ATA in 2007. Special thanks to our ATA spokespeople for their tireless efforts in answering reporters' copious questions about thyroid disease.

Consumer Magazines

Better Homes and Gardens (Highest circulation women's magazine in the U.S.)

Fit Pregnancy

Quick & Simple

Reader's Digest (America's 2nd top circulation publication with 10 million readers)

Real Simple

Saturday Evening Post

Self

Woman's Day

Medical Trade/Health Care Publications

Clinical Endocrinology News

Community Magazine Group

Endocrine News

Endocrine Today

Internal Medicine World Report

The First Messenger

Newspapers

Independent (Holmdel, NJ)

Websites

About.com

Executive Leadership in Academic Medicine (ELAM)

Books

First Year: Hypothyroidism, (second edition),
by Maureen Pratt

Boris Catz Honored



Boris Catz was awarded special recognition at the ATA 2006 annual meeting for his longtime career and clinical leadership in the treatment of thyroid disorders. He has been an ATA member for 53 years and received the ATA Distinguished Service Award in 2002.

"I'm 84 years old and still love to work," said Dr. Catz. "My motto has always been to read patients, not tests. It's important to speak to patients and really see how they're feeling."

“It's important to speak to patients and really see how they're feeling.”

ATA Spring Symposium Highlights, *continued from front page*

cardiovascular system, the effect of thyroid dysfunction on the brain, and the management of thyroid nodules and thyroid cancer in the elderly, explained Dr. Hershman. "The audience especially appreciated the case-oriented panel discussions."

The challenge to those who attended this meeting was to consider the diagnosis and treatment of the array of thyroid disorders that are especially common and often present atypically in the oldest, most frail, most complex patients with multiple co-morbidities, according to AGS Member William Hazzard, who concluded the day-long meeting.

"What is different and what is the same as compared with patients who are younger and less beset with competing priorities in diagnosis and management, including social and psychological issues?" posed Dr. Hazzard. "And as a thyroidologist, will you play the role of a consultant and adviser or the primary care physician who manages all of these issues in their broadest context?"

"The conference highlighted the need for additional research in several areas," added Dr. Hershman, "and these research needs were discussed at a research summit the following day."

The meeting also caught the interest of trade reporters who cover thyroid disease and aging issues. Look for articles about the meeting in current or upcoming issues of *Internal Medicine World Report*, *Endocrine Today*, *Clinical Endocrinology News*, *Endocrine News*, and *The First Messenger*.

The spring symposium was endorsed by AGS, American Association of Clinical Endocrinologists, and The Endocrine Society. The program was supported in part by unrestricted educational grants from Abbott Laboratories and Genzyme, Inc.

Meeting presentations will soon be available in streaming video at http://www.thyroid.org/professionals/education/video_broadcasts.html.

Research Summit

More than a dozen endocrinologists, internists, and geriatricians participated in a half-day research summit the

next day to build on the state-of-the-science information on thyroid disease in the older population presented at the symposium and identify knowledge gaps and research opportunities in the areas highlighted by the symposium speakers. This half-day meeting was co-chaired by Gregory Brent, Paul Ladenson, and Susan Nayfield, National Institute of Aging (NIA).

"The multidisciplinary group provided a unique opportunity to set priorities for future research reflecting input from many perspectives," said Gregory Brent, ATA's secretary and chief operating officer. "The bridge built between endocrinologists and geriatricians with an interest in thyroid disease will have many lasting benefits."

"The participation from staff at the NIA and the National Institute of Digestive, Endocrine, and Kidney Diseases (NIDDK) helped us to recognize current resources, as well as ways to focus resources to this important area," continued Dr. Brent.

One important outcome is a planned program announcement that is based on the priorities discussed at this summit. In addition to this, a variety of cooperative programs are planned between the ATA and NIA in thyroid education and research.

"The spring symposium and research summit represent the first steps in what we hope to be a long-lasting collaboration among the ATA, NIA, and other sponsors, including the AGS, to better integrate the specialty of endocrinology into geriatrics practice and to increase the awareness of geriatric issues among endocrinologists who treat older adults," said Dr. Nayfield. "The recommendations of the research summit will assist NIA in program planning to address this important interface between these specialties."

As an immediate result of the summit, an application was submitted (and subsequently accepted) to the AGS for a symposium on "Subclinical Thyroid Disease in Older Adults" to be held at the May 2008 AGS annual meeting in Washington, DC.

Charles Emerson Selected as Editor-in-Chief of *Thyroid*

The ATA board of directors recently chose Charles H. Emerson, professor emeritus of medicine at the University of Massachusetts Medical School, to serve as the next editor-in-chief (EIC) of *Thyroid*, the official journal of the ATA. Dr. Emerson was selected by the EIC Search Committee, led by Ken Hupart, after a systematic and careful review of candidates. He will begin his term on January 1, 2008.

Dr. Emerson's research and clinical interests include the metabolism of thyroid hormones in the placenta and periphery, maternal and fetal thyroid function during and after pregnancy, TRH and TSH as influenced by age, thyroid and sex status, nutrition, and neuropeptides, the physiological effects and clinical utility of recombinant human TSH, and the pathogenesis of thyrotoxicosis.

He received his M.D. from the University of Virginia in 1967 and completed his medical residency at the Hospital

of the University of Pennsylvania in 1970. As Dr. Emerson was considering endocrine fellowships, his awareness of the thyroid was kindled by Gerald Burke's review of the "Long Acting Thyroid Stimulator" of Graves' Disease. Discussions of this remarkable disorder with Robert Utiger cemented his interest. After an endocrine fellowship with Dr. Utiger, he began an academic career at the University of Illinois in Chicago, where he studied the metabolism of TRH.

In 1980, Dr. Emerson was recruited to the University of Massachusetts by Lewis Braverman.

He has been a member of the ATA since 1974. Dr. Emerson most recently has served as the ATA treasurer.

Terry Davies will complete his term as the editor-in-chief on December 31, 2007 and has guided the journal over the last six years with great skill and dedication.



ATA Staff News



Adonia Calhoun Coates, CMP, is the new Director of Meetings and Program Services for the ATA. Ms. Coates has held her CMP (Certified Meeting Professional) designation since July 2002. She has managed regional, national and international education, professional, medical and health-related meetings ranging in size from approximately 20–30,000 attendees in the non-profit environment for ten years.

Adonia comes to the ATA from the Association of Community College Trustees (ACCT), where as the Coordinator for Education and Outreach, she managed the annual convention program and outreach initiatives. Prior to ACCT, she worked at Palladian Partners, Inc. as the Project Director and Senior Conference Manager to multiple government contracts for administrative, logistical, research, publication and web support to the Offices of the Director for the National Institutes of Health Office of Communications and Public Liaison, the National Cancer Institute Office of Liaison Activities and the National Institute on Child Health and Human Development Office of Science Policy, Analysis and Communication. Her career began at the American Psychological Association within the Science Directorate.

Adonia received her BS in psychology from Morgan State University. She lives nearby in Fort Washington, MD and is a native of Washington, DC.



Jared Hoke is the new Publications and Administration Associate at the ATA. He has been on board since February working with the Research, Awards and Membership Committees. He was the point person for the logistical planning for the Sister Society meeting in July, and the exhibit booths at AACE and The Endocrine Society annual meetings. He is organizing the exhibitors and other administrative tasks for the annual meeting. Most recently, he has begun the electronic administrative management of the journal, *Thyroid*.

His work experience includes Pharmacy Operations and System Configuration for Health Alliance, a managed care plan in the Midwest, where he was responsible for client services and had significant interaction with providers and members. He has also been involved in event planning and media coordination for local and national music festivals and events. In 2005, Jared helped implement a new non-profit radio station called Radio Free Urbana.

Jared holds a BS from the University of Illinois in Urbana-Champaign, majoring in Consumer Economics with a minor concentration in Chemistry. He is from Herod, IL and currently resides in Alexandria, Va.

Your Vote Matters

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

We encourage you to take part in selecting the president-elect and new directors for the ATA Board of Directors by casting your vote. The ATA Nominating Committee, chaired by Susan A. Sherman, brought forth the slate of candidates, which was then approved by the ATA board of directors.

Candidates for president-elect are Kenneth Burman and

Sheue-yann Cheng. The candidates for two director positions are Ian Hay, James Hennessey, Irwin Klein, and R. Michael Tuttle.

Active ATA members received a ballot in August and are asked to return it by **September 14, 2007**. Results of the vote will be announced at the ATA membership meeting on Thursday, October 4 at 5:45 p.m. during the ATA's 78th Annual Meeting in New York.

ATA President-elect

One-year term of office (2007–2008), followed by one-year term as president (2008–2009) and one-year term as a director (past-president) 2009–2010; Vote for One (1)



Kenneth D. Burman, MD

Candidate for President-elect

Kenneth D. Burman, MD, is Chief, Endocrine Section, Department of Medicine at Washington Hospital Center in Washington, DC. He is also program director, Integrated Georgetown University/Washington Hospital Center Endocrine Fellowship Program, and a

professor, Department of Medicine at Georgetown University and the Uniformed Services University of the Health Sciences.

Dr. Burman had previously been Chief, Endocrine Section at Walter Reed Army Medical Center and a consultant to the Surgeon General and to the Attending Physician's Office at the United States Capitol.

He has served on the Executive Council of the ATA and is currently on the editorial board of *Thyroid*. Dr. Burman has also served on the editorial board of the *Journal of Clinical Endocrinology and Metabolism*. He has been a member of the ATA for 32 years. Dr. Burman was a local arrangements co-chair of the ATA Annual Meetings held in Washington, DC in 1987 and 2001. He has served as a member and chair of the ATA's Public Health Committee and as a member of the Finance, Awards and Education Committees.

His research efforts are focused on thyroid cancer, autoimmune thyroid disease and translational clinical thyroidology. Dr. Burman was honored with the ATA Van Meter Award in 1984. He is a member of the American Society of Clinical Investigation, a master in the American College of Physicians and serves on the FDA's Endocrine Advisory Board.

Dr. Burman obtained his undergraduate degree from Washington University in St. Louis, Mo. and his medical degree from the University of Missouri. He took his Internal Medicine training at Barnes Hospital, Washington University and his Endocrine Fellowship at Walter Reed Army Medical Center in Washington, DC.

"It has been a privilege to be a member of the ATA, my most valued and important society. I think our continued success as a society depends to a large degree on our ability to maintain and enhance our clinical and scientific interactions with various other disciplines and to attract young physicians and scientists to actively participate in the ATA. We must be the leaders in clinical, academic, social and political thought and action in matters relating to the thyroid and we must continue our relationship with patient-oriented advocacy groups."



Sheue-yann Cheng, PhD

Candidate for President-elect

Sheue-yann Cheng, PhD, is the Chief of the Gene Regulation Section in the Laboratory of Molecular Biology at the National Cancer Institute (NCI) and an advisor for women scientists at the Center for Cancer Research at NCI. She is on the editorial boards of *Thyroid*,

Endocrinology, *Expert Review of Endocrinology and Metabolism*. Dr. Cheng currently serves as a regular member of the NIH Molecular and Cellular Endocrinology Study Session (2005–2008).

She has been a member of the ATA for 27 years. In addition to serving as a member of the Awards, Finance, and Publication Committees, Dr. Cheng was a director of the ATA's Executive Council (1999–2003), chair of the Membership Committee (1989–1990), and chair of the Program Committee for the 1998 ATA Annual Meeting. She was an ATA representative on the Program Committee for the 13th International Thyroid Congress in Buenos Aires, Argentina in 2005. Dr. Cheng received the ATA Distinguished Service Award in 2006 for her outstanding service and contributions.

Dr. Cheng received her PhD from the University of California, San Francisco Medical Center and fellowship training at the University of Chicago and the National Institute of Diabetes, Digestive and Kidney Diseases. Her work focuses on creating mouse models for human disease, including thyroid follicular carcinoma, resistance to thyroid hormone, pituitary tumors, and dwarfism. They provide a platform for translation of basic research to prevention, diagnosis, and treatment. For her work, Dr. Cheng received several awards, including the ATA's prestigious Sidney H. Ingbar Distinguished Lectureship Award, the NCI's Charles Harkin Award, and The Endocrine Society's Abbott Thyroid Research Clinical Fellowship Mentor Award.

"My vision for the ATA is for it to be the world's finest organization for thyroid research and clinical practice at all levels. I strongly support efforts to draw on the strengths of the ATA to reach out to young professionals by providing opportunities to further their career development, to expand the membership by attracting researchers and clinicians not currently involved in the ATA, and to enhance the visibility and the leadership role of the ATA by forging strong alliances and actively engaging in collaborations with other societies to advocate for patients, for the public good, and for the benefit of clinical and research thyroidologists. The ATA should also continue as a key resource for benefiting patients with thyroid disease by providing them with information, education, and support. The meetings of the ATA should always strike a balance between the presentation of ground-breaking research and the inclusion of educational material of interest to basic and clinical scientists and practitioners."

ATA Board of Directors

Four-year term of office (2007–2011); Vote for Two (2) of the four candidates



Ian D. Hay, MD, PhD

Candidate for Director

Ian D. Hay, MD, PhD, who received his medical and doctorate degrees from the University of Glasgow in Scotland, is a professor of medicine and the Dr. Richard F. Emslander Professor of Endocrinology at the Mayo Clinic

College of Medicine in Rochester, Minn. He has been a consultant in the Division of Endocrinology, Metabolism, Nutrition and Internal Medicine at the Mayo Clinic since 1983.

Dr. Hay has been an ATA member since 1980. He is a corresponding ETA member and an honorary LATS member. Since 1984, Dr. Hay has served on the ATA Education, Finance, Nominating and numerous Program Committees. He has chaired the Thyroid Function Testing Committee and the Education Committee, and was the first CMES coordinator in 2001–2002. Dr. Hay was the recipient of the Paul Starr Award in 1994 and previously served as a director on the ATA Executive Council from 1995–1999.

Dr. Hay has been involved in thyroid research since 1974 and has given presentations to the ETA, ATA and ITC on an annual basis from 1976 through 2007. His early interests ranged from the effects of prenatal iodine deficiency on fetal brain development, through dyshormonogenesis, to the metabolism and stereospecific detection of dextrothyroxine. Since his return from Edinburgh to the Mayo Clinic in 1983, Dr. Hay's daily work has been devoted to "finding answers for patients with thyroid cancer." He has a particular interest in papillary thyroid cancer and has published extensively in this area since 1986. He wrote the original AACE clinical practice guidelines for the management of thyroid carcinoma in 1997.

"I am proud of the contribution of the Mayo Clinic to the ATA since 1933 and honored to be invited to be considered for a second term as an ATA director. I am personally concerned about the present influence of the pharmaceutical industry on decision-making in clinical thyroidology. Since 1984, I have observed the progressive rise in popularity of thyroid carcinoma as an ATA discussion topic. If elected, I am determined to ensure that patients with thyroid malignancy get the best possible advice from their caregivers who are ATA clinician-members."



James V. Hennessey, MD

Candidate for Director

James V. Hennessey, MD, is clinical director, Division of Endocrinology, Beth Israel Deaconess Medical Center in Boston Mass. on the faculty of Harvard Medical School.

Until May 2007, he was associate professor of medicine at Brown Medical School, associate director for clinical education within the Division of Endocrinology and endocrine pathophysiology course leader at Brown Medical School. Dr. Hennessey has been a practicing thyroidologist for over 20 years and has conducted clinical research in both the thyroid and osteoporosis areas.

He joined ATA in 1989 after completing a fellowship in Endocrinology at Walter Reed Army Medical Center. Dr. Hennessey saw thyroid patients at USAF Medical Center Wright Patterson, Ohio through 1993 before joining the endocrine division at Brown. During his time in Providence, he completed 25 years of military service with the Air National Guard and was Governor of the American College of Physicians' Rhode Island Chapter before beginning his present position.

Dr. Hennessey has provided service to the ATA on the Education Committee, initially as a member, then chair from 1999–2001 and pulled together the first collection of common patient education brochures. He subsequently has served on the Patient Education and Advocacy Committee and as an ATA representative on the Thyroid Foundation of America's board from 2002–2005. Dr. Hennessey has been a member of the Public Health Committee since 2004. He has served as a reviewer for our journal, *Thyroid*, and was appointed to the editorial board in 2005. He has represented the ATA on several occasions before the FDA on issues of L-thyroxine bioequivalence and is currently spearheading the effort to summarize data collected through the Pharmacovigilance website.

"I believe the ATA must continue to play a pivotal role in providing a clinical balance between advances in the knowledge of the pathophysiology of thyroid diseases realized by the basic scientist, the application of new therapeutic approaches focused on these mechanisms and the evaluation of outcomes of both new and current therapies. Our role allows us to apply these aspects of discovery for the benefit of those with thyroid disease and makes it possible to communicate these advances to the physician community and to our patients."

(Continued on next page)

ATA Board of Directors (continued)

Four-year term of office (2007–2011); Vote for Two (2) of the four candidates



Irwin Klein, MD

Candidate for Director

Irwin Klein, MD, is professor of medicine and cell biology at NYU School of Medicine and associate chairman in the Department of Medicine at North Shore University Hospital.

He is an active clinician, researcher and educator. In addition to his clinical practice which is directed toward thyroid disease, Dr. Klein maintains an active basic science research lab focused on thyroid hormone effects on the heart and cardiovascular system.

A member of the ATA since 1982, he has served on the Education and Research Committees, most recently as the chair of the Research Committee. Dr. Klein currently serves on the Tri-societies Committees for clinical practice guidelines in the treatment of hypothyroidism and hyperthyroidism. He was a founding member of the National Thyroid Cancer Cooperative Treatment Study Group, an active member of the American Heart Association's Basic Science Council and has been on the editorial boards of *Thyroid*, *Journal of Clinical Endocrinology and Metabolism*, *Endocrinology*, and *Clinical Practice*. He authors the chapters on thyroid disease and heart in Braverman and Utiger, as well as in Braunwald's "Heart Disease."

"As a board member, my goals will be to maintain the high quality of clinical education that the ATA provides for all its members. I will strive to maintain the ATA as an attractive organization for young clinicians and new investigators and to promote the field of translational research as a way to enhance thyroid clinical science. It is my intention to advocate for increased funding for ATA programs through NIH, industry and private funding sources."



R. Michael Tuttle, MD

Candidate for Director

R. Michael Tuttle, MD, is an associate member at Memorial Sloan Kettering Cancer Center and associate professor of medicine at the Joan and Sanford I. Weill Medical College of Cornell University in New York, N.Y. He is

an active clinician and researcher specializing in the management of advanced thyroid cancer. An excellent teacher, Dr. Tuttle travels extensively both within the U.S. and abroad lecturing on the difficult management issues in thyroid cancer. His research projects in radiation-induced thyroid cancer have taken him from Kwajalein Atoll in the Marshall Islands, to the Hanford Nuclear power-plant in Washington State, to regions in Russia that were exposed to fallout from the Chernobyl accident.

Since joining the ATA in 1997, Dr. Tuttle has been a member of the Standards of Care Committee from 1999 to 2005, the *ad hoc* Web Site Advisory Group since 2003, and chairman of the Clinical Affairs Committee from 2002 to 2005. He currently serves on the Membership Committee and continues to participate in the development and updating of the guidelines on thyroid nodules and thyroid cancer. Other leadership roles he holds include being a member of the National Comprehensive Cancer Network Thyroid Cancer Panel, the FDA's Endocrinologic and Metabolic Drugs Advisory Committee, and Chairman of the Scientific Project Panel of the Chernobyl Tissue Bank.

"The ATA has been my professional home since I attended my first meeting as a young endocrine fellow in the early 1990's. By combining a nurturing environment for young investigators with a demand for the highest quality thyroid research, the ATA has provided the support, encouragement, and forum for me to evolve from an endocrinology fellow with a vague interest in thyroid disease into a specialist on the management of advanced thyroid cancer. I am committed to continuing and expanding the role of the ATA in the development of the highest quality clinicians, clinical researchers, and basic science researchers. It is through the active, intentional development of the next generation of thyroid researchers and clinicians that the ATA can ensure it will continue to be the leading voice for all things thyroid-related in the years to come."

**Ballots were mailed separately to all ATA Active Members.
Please return your ballot by September 14, 2007.**

cancer that are based on recent insights into the molecular pathogenesis of these malignancies.”

Highlights of the program include, among others, a keynote lecture given by Tony Bianco on *The Role of Thyroid Hormone in the Regulation of Metabolism*. “I’ll be speaking about a new metabolic pathway through which bile acids stimulate extrathyroidal conversion of T4 to T3 via activation of a G-protein-coupled receptor, TGR5,” said Dr. Bianco. “While in mice, this pathway protects against obesity and insulin resistance, in human skeletal muscle cells bile acids also stimulate T3 production, opening the possibility that selectively targeting TGR5 and T3 production in humans can be used to treat the metabolic syndrome.”

A translational symposium will highlight how the syndrome of *Resistance to Thyroid Hormone* has led to the discovery of the fundamental mechanisms underlying thyroid hormone action. Arthur Schneider will describe his studies of the consequences of radiation exposure to the thyroid in the *Clark Sawin Historical Lecture*. Craig Thompson will illustrate how programmed cell death can be used as a means to enhance cancer treatment.

“The ATA meeting will provide a wide range of educational opportunities for all those interested in thyroid disease and research,” said Dr. McDermott. “It will offer stimulating symposia, lectures, meet the professor sessions, workshops and poster sessions covering a broad spectrum of clinical, translational and basic science topics by an international group of experts in the field of thyroidology.”

Clinical symposia will explore the latest approaches to care of thyroid patients, including sessions on thyroid cancer, pediatric thyroidology, and thyroid surgery. Thyroid Grand Rounds will address *Challenges in the Management of Hyperthyroidism*.

Translational and basic science symposia will apply the latest laboratory findings to clinical care and includes, *Genetics of Thyroid Cancer* and the *Role of HPT Axis in Fuel Metabolism*.

The first day will feature a translational symposium on *Resistance to Thyroid Hormone (RTH) and Thyroid Hormone Action – 40 years later*, with Samuel Refetoff, providing a historical perspective.

The meeting will end with a translational symposium on *Iodine Deficiency Disorders* that will highlight the successes and current challenges of this important public health issue that needs our continuing attention. Kul Chandra Gautam, assistant secretary-general of the United Nations, deputy executive director of the United Nations Children’s Fund (UNICEF), will be among the speakers in this special symposium.

The number of abstracts submitted has reached an unprecedented level. The oral presentations and the poster sessions will provide an ideal forum for presenting new information and constructive discussion.

New Basic Fellows’ Track

For the first time, the meeting will offer a basic fellows’ track, alongside the clinical fellows’ track, which has proven to be highly successful. Over 75 clinical and basic fellows will be invited to attend the meeting and participate in these special programs. Bryan Haugen and Kathryn Schuff will chair the clinical fellows’ track, while Antonio Bianco and Sheue-yann Cheng will design the basic fellows’ track. These integrated programs feature specialized and customized workshops targeted to the fellows, all woven into the regular scientific meeting.

Register now for the ATA meeting by going to
http://www.thyroid.org/ann_mtg/2007_78th/registration.html

Upcoming Meetings

**European Thyroid Association
32nd Annual Meeting**
September 1–5, 2007
Leipzig, Germany
www.eurothyroid.com

**American Thyroid Association
78th Annual Meeting**
October 4–7, 2007
New York City
www.thyroid.org

**8th Workshop on Resistance
to Thyroid Hormone and Action**
October 9–11, 2007
Ponta Delgada, San
Miguel, Azores/Portugal
www.8thiwrth.org

For more information, visit www.thyroid.org

MEETING-AT-A-GLANCE

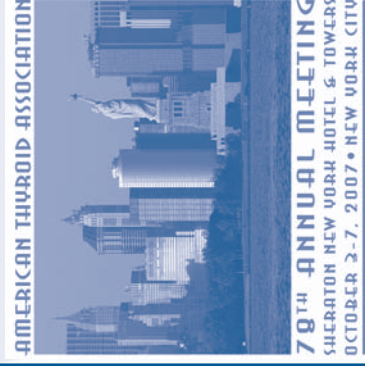
AMERICAN THYROID ASSOCIATION

78th Annual Meeting of the American Thyroid Association

Sheraton New York Hotel & Towers • New York, NY • October 3 - 7, 2007

Time	Wednesday 10/3/07	Thursday 10/4/07	Friday 10/5/07	Saturday 10/6/07	Sunday 10/7/07
6:00	Exhibitors Move-In 8:00 - Noon	Early Risers CME Symposium 6:30 - 7:45 am	Early Risers CME Symposium 6:30 - 7:45 am	Early Risers CME Symposium 6:30 - 7:45 am	
7:00	Endocrine Fellows Conference 6:45 am - 3:45 pm	Welcome : 8:00 - 8:15 am Plenary: 4 Oral Abstracts 9:00 - 10:00 am	Paul Starr Lecture: 8:00 - 8:45 am Simultaneous Symposia: 8:45 - 10:00 am	Van Meter Lecture: 8:00 - 8:45 am Simultaneous Symposia: 8:45 - 10:00 am	Plenary: Oral Abstracts: 8:00 - 9:00 am Simultaneous Symposia: 9:00 - 10:15 am
8:00	ATA Board of Directors Meeting 7:30 - 1:00 pm	Keynote Speaker: 8:15 am - 9:00 am Plenary: 4 Oral Abstracts 9:00 - 10:00 am	Thyroid Grand Rounds Translational	Pediatric Thyroidology Autoimmunity	Clinical Translational
10:00	Registration Open: 10:00 am - 9:00 pm	Exhibit Hall Open: 9:00 am - 3:45 pm Break in Exhibit Hall: 10:00 - 10:30 am	Exhibit Hall Open: 9:00 am - 3:15 pm Break in Exhibit Hall: 10:00 - 10:30 am	Exhibit Hall Open: 9:00 am - 1:00 pm Break: 10:00 - 10:30 am	Refreshment Break: 10:15 - 10:30 am Translational Symposium 10:30 am - Noon
11:00	ATA Committees & Board Liaisons Noon - 2:00	Translational Symposium 10:30 - 11:45 am Poster & Exhibit Review 11:45 am - 12:45 pm	Simultaneous Symposia: 10:30 - 11:45 am Arthur Bauman Translational Clinical Symposium	Short Calls 6 Oral Abstracts: 10:30 - Noon	
12:00	Advanced Ultrasound Symposium (Requires Pre-Registration) 1:00 - 5:00 pm	Meet the Professor Workshops 12:45 - 1:45 pm Thyroid Disease & Reproduction: <i>Margaret Wierman</i> Thyroid Disease in Older Adults: <i>Kathryn Schuff</i> Euthyroid Sick Syndrome Updates: <i>Jonathan Lo Presti</i>	Meet the Professor Workshops 1:00 - 2:00 pm Ultrasound Evaluation of the Postoperative Neck: <i>Jill Langer</i> Pediatric Thyroid Cancer: <i>Steve Waguespack</i> Graves' Ophthalmopathy: <i>Mike Kazim</i>	Meet the Professor Workshops 1:00 - 2:00 pm Thyroid Disease and the Brain: <i>Mary Samuels</i> Thyroid Emergencies: <i>Victor Bernet</i> Radioactive Iodine and the Salivary Glands: <i>Louis Mandel</i>	78th ATA Annual Meeting Ends at Noon
2:00	ATA Board of Directors Meeting 3:00 - 5:00 pm	Oral Abstract (6) Sessions: 1:45 - 3:15 pm Clinical Basic	Ingbar Award Lecture 2:00 - 2:45 pm Poster Review & Break: 2:45 - 3:15 pm Oral Abstract (6) Sessions: 3:15 - 4:15 pm Clinical Basic	Abbott State of Art 2:00 - 2:45 pm Break: 2:45 - 3:15 pm Oral Abstract (4) Sessions: 3:15 - 4:15 pm Clinical Basic	
3:00	ATA Board of Directors Meeting 3:00 - 5:00 pm	Historical Vignette 3:45 - 4:30 pm	Oral Abstract (6) Sessions: 3:15 - 4:15 pm Clinical Basic	Oral Abstract (4) Sessions: 3:15 - 4:15 pm Clinical Basic	
5:00	Women in Thyroidology 5:00 - 6:00 Newcomers' Welcome 6:00 - 7:00 Welcome Reception 7:00 - 8:30	CME Symposium 4:30 - 5:45 pm ATA Annual Business Meeting 5:45 - 6:45 pm (ATA Members Only) Free Evening	2 Simultaneous Symposia: 4:15 - 5:30 pm Clinical Translational CME Symposium 5:30 - 6:45 pm Academy of Clinical Thyroidologists (ACT) Meeting: 6:45 - 9:00 pm	2 Simultaneous Symposia: 4:15 - 5:30 pm Clinical Translational ATA Banquet 7:30 - 11:00 pm (Admission by ticket only)	

Meeting schedule may change.
Check www.thyroid.org for Meeting updates.



78th ANNUAL MEETING OF THE AMERICAN THYROID ASSOCIATION (ATA) REGISTRATION FORM Deadline for receipt of advance registration is September 27, 2007.

FIRST NAME _____

LAST NAME _____

NICKNAME FOR BADGE _____

PROFESSIONAL DEGREE (PLEASE CHECK ONE): MD, DO PhD MD, PhD RN OTHER

ORGANIZATION _____

ADDRESS 1 _____

ADDRESS 2 _____

CITY _____ STATE _____ ZIP CODE + 4 _____

IF OUTSIDE THE U.S., COUNTRY/CITY CODE: _____

COUNTRY _____

() ()
PHONE FAX

E-MAIL ADDRESS _____

1. I require a CME certificate for my attendance at this meeting. _____
The CME form to be completed will be in your registration packet. Please complete and hand in the bottom portion of the form to the CME desk at the meeting. The top portion is your actual certificate.
 2. I consider myself primarily (please list one): _____
a. Clinician b. Educator c. Scientist d. Exhibitor e. Other _____
 3. My work is best described as (please list one): _____
a. Adult Endocrinology c. Pediatric Endocrinology e. Surgery
b. Basic Science d. Internal Medicine f. Other _____
 4. My place of work is (please list one): _____
a. Academic d. Hospital g. Managed Care
b. Private Practice e. Government/Military
c. Administration f. Corporate/Industry
 5. Registration fees (please circle applicable fees):
- | | EARLY BIRD
(RECEIVED BY
AUGUST 3) | DISCOUNTED
(RECEIVED
AUG. 4 TO SEPT. 7) | FULL FEE
(RECEIVED SEPT. 8
TO OCT. 7) |
|---|---|---|---|
| (M) ATA MEMBER | \$475 | \$500 | \$525 |
| (N) NON-MEMBER | \$675 | \$735 | \$760 |
| (A) FELLOWS/STUDENT/RA | \$175 | \$175 | \$275 |
| <i>Please fax a letter from your program director to 703-998-8893.</i> | | | |
| (B) NON-MEMBER 1-day/wkd fee | \$225 | \$275 | \$300 |
| Indicate day: <input type="checkbox"/> (T) Thursday <input type="checkbox"/> (F) Friday <input type="checkbox"/> (S) Sat.-Sun. | | | |
| (G) SPOUSE/GUEST | \$125 | \$125 | \$125 |
| Name badge admits guest to welcome reception, Ruth Volpe suite, coffee breaks, discount on banquet, exhibit hall and special events | | | |
| Spouse/guest name: _____ | | | |
| (U1) LECTURE AND PRACTICUM | \$125 | | |
| <i>Wed., Oct. 3 before the meeting.</i> | | | |
| Satellite Advanced Ultrasound Lecture and Practicum. | | | |
| <i>Limited space—first come, first served basis. You must be registered for the 78th Annual meeting to register for this satellite course. Admission by ticket only.</i> | | | |

In case of emergency, please contact:

Name _____

Daytime Phone _____

Evening Phone _____

All requested information must be provided to process registration.

6. **MEET THE PROFESSOR WORKSHOPS**
Thursday, October 4, 12:45 – 1:45 pm (please circle one)
 admission by ticket only:
T1-Thyroid Disease and Reproduction Margaret Wierman
T2-Thyroid Disease in Older Adults Kathryn Schuff
T3-Euthyroid Sick Syndrome Update Jonathan Lo Presti
T4-Nuclear Cofactors Ronald Cohen
T5-Proteomic Profiling Richard Robbins
T6-Thyroid Hormone Transport by MCT8 Alexandra Dumitrescu
Friday, October 5, 2007 1:00 – 2:00 pm (please circle one)
 admission by ticket only:
F1-Ultrasound Evaluation of the Postoperative Neck Jill Langer
F2-Pediatric Thyroid Cancer Steve Waguespack
F3-Graves' Orbitopathy Mike Kazim
F4-TRalpha in Adipocyte Development Sheue-yann Cheng
F5-Perchlorate and Other Environmental Disrupters ... Gregory Brent
F6-DIO2 Knockout Valerie Anne Galton
Saturday, October 6, 1:00 – 2:00 pm (please circle one)
 admission by ticket only:
S1-Thyroid Disease and the Brain Mary Samuels
S2-Thyroid Emergencies Victor Bernet
S3-Radioactive Iodine and the Salivary Glands Louis Mandel
S4-The Role of CoRepressors in TH Action Tony Hollenberg
S5-Technical Aspects of Measuring Iodide Sam Pino
S6-TR Action and STORMs John Baxter
 7. **Special events (please circle events that you plan to attend):**
REC-Welcome Reception: FREE for meeting attendees and registered guests (Name badge required) Wednesday, Oct. 3, 7–8:30 pm;
(Actual cost: \$60)
BAN-Annual Banquet, Saturday, Oct. 6, 7:30 – 10:30 pm;
 Ticket: \$95 *(Actual cost: \$150)*
 8. **Total fees (please total each line item if more than one)**
 _____ Attendee registration fee
 _____ Spouse/guest fee (**\$125**)
 _____ Annual Banquet fee (**\$95 for one, \$190 for two**)
 _____ Advanced Ultrasound Satellite—limited space available (**\$125**)
 _____ Donation to Fellows' Travel Fund
 _____ **TOTAL**
 9. **Wed., October 3 Meetings (please circle events that you plan to attend):**
ACO-ATA Committee, Wednesday, Oct. 3, Noon – 2:00 pm
WIT-Women in Thyroidology, Wednesday, Oct. 3, 5:00 – 6:00 pm
NEW-Newcomers/Fellows, Wednesday, Oct. 3, 6:00 – 7:00 pm
 10. **Submission and payment** — Make checks and money orders for registration payable to the **American Thyroid Association** in U.S. dollars drawn on a U.S. bank.
 MasterCard VISA American Express
- CARD NUMBER _____
- EXPIRATION DATE (MONTH/YEAR) _____
- PRINT CARDHOLDER'S NAME _____
- SIGNATURE _____
- REGISTER ON-LINE** at the secure ATA web site www.thyroid.org.
FAX your completed form with credit card payment (no checks or money orders) to 678-341-3081. If you **FAX**, DO NOT MAIL, or you will risk duplicate charges. **MAIL** your completed registration form with payment to: ATA Registration, c/o QMS, 6840 Meadowridge Court, Alpharetta, GA 30005. Phone 678-341-3056. **REFUND POLICY:** Refund requests must be submitted by email to thyroid@thyroid.org and receipt confirmed. Requests received before September 8, 2007 will receive a registration refund less a 25% processing fee. Requests dated Sept. 8 – 21, 2007 will receive a refund less a 50% processing fee. No refunds will be made if dated after September 21, 2007. Refunds will be processed 45 days after the meeting. **PLEASE KEEP A COPY OF THIS FORM.**

ATA **Signal**



AMERICAN
THYROID
ASSOCIATION
FOUNDED 1923

PRESORTED
FIRST-CLASS
U.S. POSTAGE
PAID
BOWIE, MD
PERMIT NO. 4434

American Thyroid Association
6066 Leesburg Pike, Suite 550
Falls Church, VA 22041

Forwarding Service Requested

AMERICAN THYROID ASSOCIATION
INVITES YOU TO THE



78TH ANNUAL MEETING
SHERATON NEW YORK HOTEL & TOWERS
OCTOBER 3-7, 2007 • NEW YORK CITY

WWW.THYROID.ORG

A Publication of the American Thyroid Association