



SAVE THE DATE

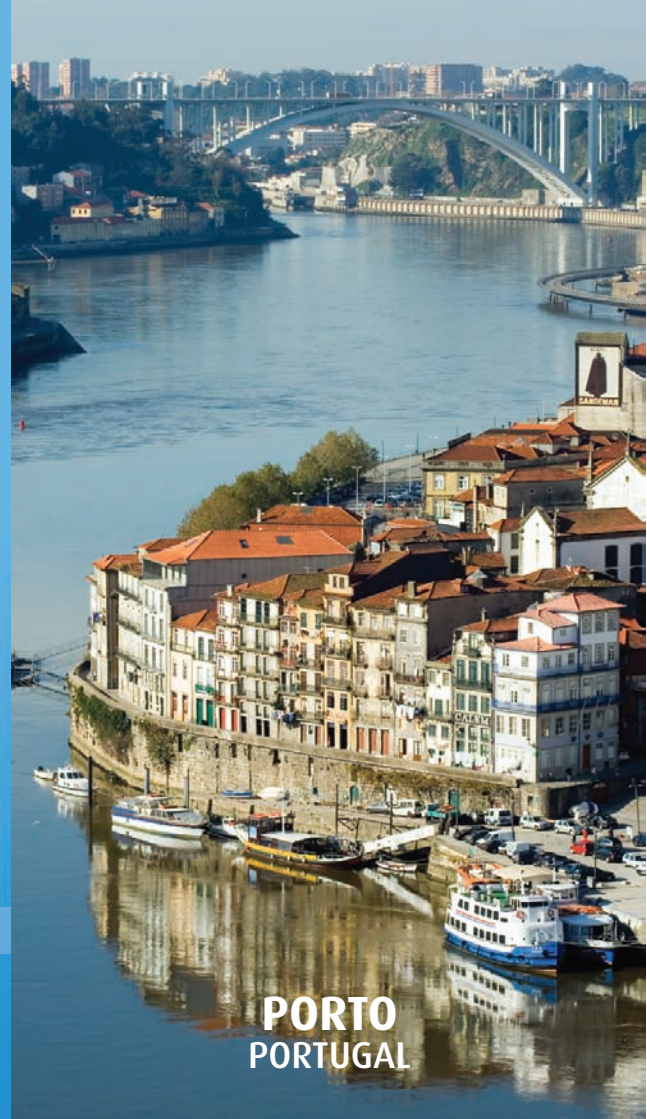
22-24 October 2010

PORTO PALACIO CONGRESS HOTEL, PORTO, PORTUGAL

The ESE Clinical Update Course is the first in an annual programme of international residential events providing essential training for all trainees and an update for established endocrinologists. The event is designed not only to give a vigorous update on current clinical practice but also to encourage networking between trainees and established endocrinologists.

To register your interest please email: info@euro-endo.org

 **European Society of Endocrinology**
www.euro-endo.org



PORTO
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Upon completion of this course, participants should be able to:

- ★ Review the role of endocrine disruptors
- ★ Discuss the genetic causes of pituitary diseases
- ★ Summarize the actions of vitamin D
- ★ Review the current treatment of prolactinoma
- ★ Consider the different types of bariatric surgery
- ★ Review the genetic causes of hypercalciuria
- ★ Assess different approaches to growth hormone replacement in adults
- ★ Consider therapeutic approaches to the patient with acromegaly
- ★ Consider the problem of differentiated thyroid carcinoma
- ★ Summarize the approach to medullary thyroid carcinoma
- ★ Review issues related to congenital adrenal hyperplasia in the adult setting
- ★ Summarize the approach to osteoporosis
- ★ Review issues related to patients with endocrine tumours
- ★ Discuss cases with hypothyroidism or thyrotoxicosis
- ★ Review case-based clinical pearls in patients with pituitary disorders
- ★ Review the management of the patient with hypercalcaemia
- ★ Review issues related to hyperaldosteronism
- ★ Discuss management of male hypogonadism
- ★ Review issues related to pheochromocytoma-paranglioma
- ★ Formulate approaches for the work-up of hyperandrogenism in women
- ★ Review the management of the patient with hypercalcaemia
- ★ Discuss the evaluation of the patient with hypercortisolism
- ★ Discuss the diagnosis and treatment of the ACTH-dependent Cushing's syndrome
- ★ Review the management of the patient with hyper-, or hypocalcaemia
- ★ Discuss lessons learned from patients