NEW ZEALAND SOCIETY OF ENDOCRINOLOGY

Minutes

Date: Friday, 16 June 2017
Time: 12 pm
Venue: Teleconferencing

Present: Greg Anderson, Michael Pankhurst, Joe Yip, Stephen Bunn, Kathy Mountjoy, Susannah O'Sullivan, Richard Carroll and Chris McMahon, Stella Milsom (joined 12.10pm)

Apologies: Ryan Paul

Approve Minutes of previous meeting: Correction to Item #1 – removing a sentence.

Matters arising from Minutes dated 09 May 2017:

1. Greg to send an email to all NZSE members re David Stewart and MedSci (Sent on the 15th of June)
2. Greg to email Jill Cornish to inform her the outcome and welcome her to the society (Sent on the 10th of May)
3. Greg will propose requirements for becoming a life member to be circulated to the exec (Discussed in item #2)
4. A final email to be sent to to expired members (from the president) informing them that they will be removed from the NZSE membership and email list unless they renew (sent on the 24th of July)

Incoming Correspondence:

1. **16 May 2017** *Dr Andrew Cleland, Chief Executive, RSNZ*
   Seeking for feedback on a recent published video on '*Antimicrobial resistance – Implications for New Zealanders*' royalsociety.org.nz/antimicrobial (See appended)

   Committee to select which incoming information to be circulate to all the members of the society. This includes incoming correspondence #4 and #5

2. **17 May 2017** *Phillipa Gardiner, Chief Operating Officer, RSNZ*
   Informing the switch of website host to Hoppon (*See appended*)

3. **23 May and 7 June 2017** *Dr Jo Perry, Senior Research Fellow, University of Auckland*
   Confirming that Dr Yue Wang, Miss Lekha Jain and Miss Man Lu are her PhD students and supporting their application for NZSE student membership

4. **31 May 2017** *Dr Marc Rands, Senior Researcher, RSNZ*

Announcement of the launching of a report on the future of the science technician workforce, their needs and opportunities and their education and career pathways in New Zealand. (See appended) Report link: https://royalsociety.org.nz/what-we-do/our-expert-advice/all-expert-advice-papers/science-technicians-workforce-panel/

5. **7 June 2017** *Stephanie Gartrell, Senior Executive Officer Australasian Paediatric Endocrine Group (APEG)*
   Circulating their recently completed Evolve top-5 recommendations on low value practices (See appended).

5. **8 June 2017** *Dr Siobhan Kirk, Assistant Research Fellow,Centre for Neuroendocrinology*
   Submitted an application for NZSE International Conference Travel Award to support her attendance to FASEB meeting in Colorado, USA to present her research entitled "Prolactin actions on the median eminence induce novel signalling and reduce permeability" 23-28 July 2017. (see appended)

6. **16 June 2017** *Dr Papillon Gustafson, Post-doc Fellow, Centre for Neuroendocrinology*
   Submitted an application for NZSE International Conference Travel Award to support her attendance to FASEB meeting in Colorado, USA to present her research entitled "The role of prolactin receptor in the regulation of Crh mRNA expression late pregnancy in the mouse" 23-28 July 2017. (see appended)

   Both Dr Kirk and Dr Papillon were granted for the International Travel Award (NZ$1000 each) with the condition that their abstract for presentation are accepted. No more international travel funding will be available for the remaining of 2017.

Outgoing Correspondence:

1. **15 June 2017** *Greg Anderson to all NZSE members including expired members*
   Newsletter, including MedSci announcement, David Stewart obituary
   and encouragement to renew membership.

Items:

1. NZSE website host
   - We have received an email notification from RSNZ on the 17th of May regarding the sitching of website host from RSNZ to "Prefer", a commercial website designer. The matter was flagged at the most recent RSNZ Constituent Organisation meeting, but there wasn't any NZSE attendee hence we only found this out recently.
   - The decision to switch needs to be made urgently as the RSNZ hosting service will be ceased soon.
   - Background - NZSE current website hosted by RSNZ at a rate of $40 per annum. The site is managed by Andrea Van Rinsvelt's wed design company SizzleSites at a cost of $180 per annum for basic maintanence (excluding extra development cost). We are able to do some basic management, i.e. posting new information within the existing layout of the website. It is budgetted at $660 for year 2017 based on recent bills.

- Potential changes - The cost of rebuilding a website with Prefer is between $3500 to $5500 and there will be ongoing costs which may and may not be covered by RSNZ. At this stage, there is only one example of website designed by Prefer (https://www.population.org.nz/).
- Options available:
    - Host and maintained by SizzleSites (cost unknown).
    - "Prefer" as the new host and maintainance.
    - Other host (cost unknown) and SizzleSites to remain maintaning the site.

SizzleSites:
Advantages:
- We are familiar with the current website
- Sizzlesites has been maintaining the current website for many years.

Disadvantages:
- Inconsistent with the other RSNZ Constituent Organisations and unsure if RSNZ will share our society website link on RSNZ website.
- Clunky functions i.e. managing membership and membership payment options.

Prefer:
Advantages:
- Consistent with other RSNZ Constituent Organisations
- Improve the clunky functions from current website

Disadvantages:
- Rebuild cost of ~$5000
- May have ongoing cost
- Rebuilding the website

- Decision – Find out the info below before making a move.

Action required:
- Find out the hosting cost from SizzleSites.
- Find out if current Prefer users are satisfied, and if they demonstrate expertise of managing membership lists in their websites

2. Life membership for Prof Ian Reid

Draft of life membership nomination process (for discussion):

Award description
"From time to time (but not more than once annually), life membership may be offered to long-standing (20+ years) Society members in recognition of outstanding leadership in fundamental or clinical endocrinology, as

exemplified by their sustained contributions and those of their trainees and associates to teaching, research, and/or clinical practice. Service on the Society Management Committee and contributions to annual Society meetings will be viewed favourably, but nominees should not be current Management Committee members."

The above description has to be revised base on the purpose of the award. We proposed that the purpose of the award is to include retired members to be able to continuously contributes to the society by 1) mentoring younger members, 2) eliglbility to be elected as exec members and 3) attending NZSE annual meeting at MedSci Congress. The age opf a life member is expected to be set at 60 years old and above. Active management is required to look for eligible life member on annual basis. An award certificate will be awarded to thre recipient during MedSci or Clinical meetings. (Action required: new draft and to be discussed in the next meeting)

Nomination Submission Process
Nominations will be in writing, normally from a member of the Society Management Committee, but may be accepted from other long-standing members. The nominator is to identify the accomplishments of the nominee as they pertain to the award description (1 page maximum). A current curriculum vitae should accompany the nomination. Nominations will be considered and approved by a Management Committee vote.

3. Possibility for NZSE to commission and endorse clinical practice guidelines for NZ endocrinologists (it is likely that a letter from the patient representative of AMEND (Association for Multiple Endocrine Neoplasia Disorders) will come to NZSE about this soon). Action required: to be adjourned to next meeting since Ryan was absent in this meeting.

Treasurer's Report:

Note: Our PayPal account no longer does auto transfer. Therefore we still have $6000.00 available in the PayPal account to be transferred back into our business account.

Account balances:

Business account: $ 18,271.18
Term Deposit 1: $ 40,000.00
Term Deposit 2: $ 12,318.90
Term Deposit 3: $ 21,544.81
Paypal Account: $ 5,918.10

Transactions since last meeting:

Outgoing: Sizzle Sites – Website maintenance $180.00

Incoming: None

New Member applications: 5

1. **Prof Ahmed Al-Jumaily**, Research student, Auckland University of Technology, No nomination; Research of interest: Autism therapy (non existing email address) **(Action required** – Contact someone in AUT for endorsement)

2. **Miss Lekha Jain**, Research student, University of Auckland, nominated by Dr Jo Perry (accepted)

3. **Dr Yue Wang**, Research student, University of Auckland, nominated by Dr Jo Perry (accepted)

4. **Miss Man Lu**, Research student, University of Auckland, nominated by Dr Jo Perry (accepted)

5. **Miss Bo Sun**, Research student, University of Auckland, nominated by Dr Kathy Mountjoy (accepted)

Full members: Current: 44 paid, 47 "expired" (Previous meeting: 41 paid, 48 "expired")
Student members: Current: 1 paid, 38 "expired" (Previous meeting: 1paid, 39 "expired")
Life Members: 4

Other Business:
Editorial board of Journal of Neuroendocrinology is requesting for endorsement from NZSE for an open journal policy – we agreed to endorse.

Meeting closed: 1pm (Richard Carroll and Chris McMahon left early at 12.50pm)

Next Meeting: 28 July 2017

Appendix

Feedback on published video:

Kia ora

One of the functions of the Royal Society Te Apārangi under its Act of Parliament is to provide advice on important issues to the Government and the community.

The Society has prepared a summary of evidence on '*Antimicrobial resistance – Implications for New Zealanders*', which will be published on Wednesday 17 May along with a short video summarising the

key points. The objective is to raise awareness about antimicrobial resistance in New Zealand and its potential and current implications for health.

The Society has produced the summary and video in collaboration with researchers from New Zealand and Australia with expertise in Antimicrobial Resistance. The summary and video will be available to download from the websiteroyalsociety.org.nz/antimicrobial from Wednesday morning 17 May. Further summary material in Te Reo Māori and English, and additional short videos aimed for a public audience, will be added later.

I hope you find this material useful and please share this link after it goes live with anyone you think may find this work of interest. If you have any feedback or comment in relation to these resources, please contact Dr Francine Harland in our Expert Advice team (francine.harland@royalsociety.org.nz).

Ngā mihi

Nāku noa, nā

Dr Andrew Cleland FRSNZ

Chief Executive

Web hosting email:

Dear Greg & Joe,

At both the CO and Branch Forums and then by email late last year the Society advised that we would not be continuing to provide website hosting via HTTPme post 30 June 2017, which is where, according to information we have on hand, your current website is hosted.

30 June is now only 6 weeks away and so your organisation needs to urgently make some decisions about the future of its website.

We have an arrangement with Prefer who will host the Hoppon solution in future, this will continue to be paid for by the Society.

Attached again is the original brochure that was sent out to our organisation members. Please have a look at this because you will need to advise me what action you are going to take to ensure that your website remains viable. If I do not hear from you, then the assumption will be made that you no longer require website hosting provided by the Society.

You will note that Martijn Verhoeven is copied to this message, this will enable you to contact him directly to discuss how Hoppon can work for you organisation and the options available for moving forward.

Please let me know if you have any questions.

Regards
Phillippa

Phillippa Gardiner
Chief Operating Officer

Royal Society Te Apārangi
11 Turnbull Street, Thorndon, Wellington 6011
PO Box 598, Wellington 6140, New Zealand
ROYALSOCIETY.ORG.NZ

Report on Science Technician Workforce:

Dear Constituent Organisation

The Royal Society Te Apārangi is today launching a report on the future of the science technician workforce, their needs and opportunities, and their education and career pathways in New Zealand. The report, produced by a Society Panel chaired by Professor Jim Johnston and with the help of our Constituent Organisations, also considers the qualification structure underpinning New Zealand's science technician workforce and how to ensure it produces graduates suitable to meet the changing needs of employers.

This item ran on Morning Report in regard to the report which will be workshopped with stakeholders this afternoon:http://www.radionz.co.nz/national/programmes/morningreport/audio/201845794/science-technicians-not-science-grabs-needs-to-future

The key messages in the report are:

- A strong resilient technician workforce is vital for a growing and increasingly technologically sophisticated economy
- Too many graduates applying for science technician roles require significant on the job training as they lack technical aptitude and transferable practical skills
- Too few students are selecting the diploma route through polytechnics, even though this route was demonstrably fit for purpose, and led to excellent career outcomes
- The need for a two-fold approach for the future involving both the Level 6 Diploma in Applied Science delivered in polytechnics, and core requirements in laboratory practice for certain science degrees
- That interested employers provide practical work experience for students during their undergraduate training, lessening the on-the-job training they otherwise have to provide to overcome the deficit of transferable practical skills of new employees.

The report link if you wish to share it is: https://royalsociety.org.nz/what-we-do/our-expert-advice/all-expert-advice-papers/science-technicians-workforce-panel/

Yours sincerely

Marc Rands

Dr Marc Rands
Senior Researcher

Royal Society Te Apārangi

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Text for consultation: Australasian Paediatric Endocrine Group (APEG) top-five recommendations on low-value practices

1. Do not rely on random measures of circadian hormones for diagnostic purposes

Numerous hormones, such as growth hormone and testosterone, are subject to circadian rhythms. Relying on random measures of these hormones is therefore of limited diagnostic utility as their levels may peak and plateau at particular times throughout the day. Unless adjustments are made to these random readings they will not be very informative.

EVIDENCE SUPPORTING RECOMMENDATION 1

Ayling J. More guidance on growth hormone deficiency. *J Clin Pathol.* 2004; 57(2): 123–125.
Brambilla DJ, Matsumoto AM, Araujo AB, McKinlay JB. The Effect of Diurnal Variation on Clinical Measurement of Serum Testosterone and Other Sex Hormone Levels in Men. *The Journal of Clinical Endocrinology and Metabolism.* 2009; 94(3):907–913.
Hawkes C, Grimberg A. Measuring Growth Hormone and Insulin-like Growth Factor-I in Infants: What is Normal? *Pediatr Endocrinol Rev.* 2013; 11(2): 126–146.

2. Do not rely solely on bone age measurement for assessing growth in young children with short stature under 2 years of age

There is no consensus protocol on bone-age assessment of younger children and infants, particularly those under the age of two. Skeletal growth and maturation is most rapid in infants and toddlers, so accurate bone-age assessment in these children is challenging.

Of the bone-age measurement techniques available, one of the most popular methods is subject to a major limitation: the limited change in the appearance of the ossification centres of the hand/wrist change in the first months of life. Not surprisingly, a recent survey found much lower rates of confidence in the accuracy of this technique when applied to the one-to-three-year-old group. Even a recently reported and validated bone-age measurement technique based on fibular shaft length – while found to outperform other methods – still yielded significant errors when applied to infants (under one year). Because of the high degree of uncertainty in estimates based on bone age for younger children, it is recommended that bone-age measurement not be relied on for assessing growth in young children with short stature aged two and under.

EVIDENCE SUPPORTING RECOMMENDATION 2

Breen, M.A., Tsai, A., Stamm, A. et al. Bone age assessment practices in infants and older children among Society for Pediatric Radiology members. *Pediatr Radiol* (2016) 46: 1269.
Tsai A, Stamoulis C, Bixby SD, et al. Infant bone age estimation based on fibular shaft length: model development and clinical validation. *Pediatr Radiol* (2016) 46:342–356.

3. Do not routinely measure insulin-like growth factor binding protein 3 (IGFBP-3) for workup and diagnosis of childhood short stature

Particularly given its low sensitivity, insulin-like growth factor binding protein 3 (IGFBP-3) does not significantly contribute to the diagnosis of childhood short stature resulting from growth-hormone deficiency (GHD), which can lead to the under identification of GHD. It should therefore not be used as a routine measure for workup and diagnosis of children with short stature. However, IGFBP-3 testing may have a role, along with IGF-1 testing, as an auxiliary diagnostic index for provocative testing.

EVIDENCE SUPPORTING RECOMMENDATION 3

Boquete HR, Sobrado PG, Fideleff HL, et al. Evaluation of diagnostic accuracy of insulin-like growth factor (IGF)-I and IGF-binding protein-3 in growth hormone-deficient children and adults using ROCplot analysis. *J Clin Endocrinol Meta* 2003; 88:4702–8
Cianfarani S, Liguori A, Boemi S, Maghnie M, et al. Inaccuracy of insulin-like growth factor (IGF) binding protein (IGFBP)-3 assessment in the diagnosis of growth hormone (GH) deficiency from childhood to young adulthood: association to low GH dependency of IGF-II and presence of circulating IGFBP-3 18-kilodalton fragment. *J Clin Endocrinol Metab.* 2005;90(11):6028–34.
Shen Y, Zhang J, Zhao Y, et al. Diagnostic value of serum IGF-1 and IGFBP-3 in growth hormone deficiency: a systematic review with meta-analysis. *Eur J Pediatr.* 2015;174(4):419–27.

4. Do not initiate gonadotropin-releasing hormone (GnRH) analogue treatment in children outside of central precocious puberty, for the target outcome of delaying puberty and improving final adult height

While there is some evidence that the use of GnRH agonists can achieve improvements in height in females with early puberty, it is also associated with the development of polycystic ovary syndrome (PCOS) in adolescence and risks compromising bone health. Thus its use outside of clinical trials is still not recommended. Given that the treatment duration must also be lengthy for its benefits to be manifested, it is not recommended to augment height in adolescents with short stature and normally timed puberty.

EVIDENCE SUPPORTING RECOMMENDATION 4

Chiavaroli V, Liberati M, D'Antonio F, et al. GnRH analog therapy in girls with early puberty is associated with the achievement of predicted final height but also with increased risk of polycystic ovary syndrome. *Eur J Endocrinol.* 2010;163(1):55–62.
Dunkel L, Treatment of idiopathic short stature: effects of gonadotropin-releasing hormone analogs, aromatase inhibitors and anabolic steroids, *Horm Res Paediatr.* 2011;76 Suppl 3:27–9.
Wit M, Visser-van Balen H, Kamp GA, Oostdijk W. Benefit of postponing normal puberty for improving final height. *European Journal of Endocrinology* 2004;151:S41–S45
Yanovski JA, Rose SR, Municchi G, et al. Treatment with a luteinizing hormone-releasing hormone agonist in adolescents with short stature. *N Engl J Med.* 2003; 348(10):908–17

5. Do not routinely prescribe aromatase inhibitors to promote growth in children with short stature

Aromatase inhibitors are used as adjuvant therapy for breast cancer. There is growing acceptance of their use to increase the adult height of children with short stature and some evidence that aromatase inhibitors can at least improve short-term growth outcomes. One recent clinical trial of aromatase inhibitors used in paediatric patients found them to be safe and effective. Even so, there is still little evidence overall that this treatment improves final adult height or is sufficiently safe. An earlier study found a significant proportion of pre-pubertal boys undergoing this treatment suffered mild morphological abnormalities of their vertebrae. More evidence is needed to demonstrate safety and efficacy of aromatase inhibitors before they can be routinely prescribed to promote growth in children with short stature.

EVIDENCE SUPPORTING RECOMMENDATION 5

Diaz-Thomas A, Shulman D. Use of aromatase inhibitors in children and adolescents: what's new? *Curr Opin Pediatr.* 2010; 22(4):501–7.
Mauras N, Ross JL, Gagliardi P, et al. Randomized trial of aromatase inhibitors, growth hormone or combination in pubertal boys with idiopathic short stature. *J Clin Endocrinol Metab.* 2016; 6:jc20162891.
McGrath N, O'Grady MJ. Aromatase inhibitors for short stature in male children and adolescents. Cochrane Database of Systematic Reviews 2015; 10: CD010888..
Wit JM, Hero M, Nunezs SB. Aromatase inhibitors in paediatrics, *Nature Reviews Endocrinology.* 2012;8:135–147.

Application for NZSE International Conference Travel Award

1. Name: Dr. Siobhan Kirk

2. Postal and email address: 270 Great King Street, Dunedin, 9016.
siobhan.kirk@otago.ac.nz

3. Occupation and Employer: Assistant Research Fellow, University of Otago.

4. Title and authors of abstract to be presented: "Prolactin actions on the median eminence induce novel signalling and reduce permeability" Authors: Dr. Siobhan Kirk, Prof. David Grattan, Assoc. Prof. Stephen Bunn.

5. Applicant's NZSE membership subscription payment status: Full member paid for 2017.

6. Purpose of grant: To support travel to the Growth hormone/Prolactin family in Biology and Disease meeting (Steamboat Springs, Colorado), July 23-28, 2017.

7. Previous awards from NZSE: $20 subsidy for registration to Queenstown research week Medical Science Conference in 2015.

8. Financial details
(a) Total amount sought: $1000

(b) Breakdown of costs:
Registration & Accommodation: USD$1250
Flights: NZD$2767

9. Other financial support applied for/obtained:
Applied for internal departmental funding of ~$2000

10. Contact details for one referee:
Assoc.Prof. Stephen Bunn,
stephen.bunn@otago.ac.nz
ph. 64 3 479 7366

11. Should funding be granted, a brief report of the activity supported by the travel award will be forwarded to the NZSE Secretary within 1 month following the conference.

International conference travel application

Dear NZSE Secretary,

I would like to apply to the NZSE for funding to travel to an international conference as detailed below.

Name: Dr Papillon Gustafson

Postal address: Department of Anatomy, 270 Great King Street, Dunedin Central, Dunedin, 2016

Email address: papillon.gustafson@otago.ac.nz

Occupation and employer: Postdoctoral Fellow, University of Otago

Title of abstract to be presented: The role of the prolactin receptor in the regulation of *Crh* mRNA expression late pregnancy in the mouse

Authors of abstract to be presented: Papillon Gustafson, Stephen Bunn and David Grattan

Applicant's NZSE membership subscription payment status: Paid Full Member (for 2017), previously registered as a Student Member (2015 and 2016)

Purpose of grant: To fund travel to the FASEB 2017 Growth Hormone/Prolactin Family in Biology and Disease conference, Steamboat Springs, July 23-28 2017

Previous awards from NZSE: medi'Ray Student Speaker Prize 2015

Financial details:

Total amount sought: $1000

Breakdown of costs:

Registration ($1400 USD, includes food and accommodation at the conference) …….$1900
Return flights…….…….$2602.13
Additional accommodation (overnight stay in Denver)/car to Steamboat springs/airport shuttle …$400
Insurance……..$30

Total cost of conference: $4932.13

Other financial support applied for/obtained: Application to the Centre for Neuroendocrinology ($1000)

Contact details for one referee: Professor Dave Grattan dave.grattan@otago.ac.nz

A brief reported will be provided to the NZSE secretary within 1 month of return from the conference summarising the outcome of attending this meeting.

Thank you for considering my application,
Papillon