ICMR International Travel Support for Non-ICMR Scientist

No. 3/2/TG-52(32)/HRD-2014

Name & Designation

Address

 Name of the International Conference/ Seminar/Symposium/Workshop

Title of the abstract accepted

Date & Venue

Money sanctioned

Money reimbursed

: Ms. Aayushi Garg, MBBS Student.

: Dept. of Academic Section,

AllMS, New Delhi-110029.

: ICE/ENDO-2014. The Endocrine Society.

A retrospective study of 438 patients.

: 21-24th June 2014, Illinois, USA.

: Rs 99,808/-

: Rs 99,808/-

Participation Report

The International Congress of Endocrinology (ICE) is the most widely attended medical conference of the field of endocrinology. The Endocrine Society's 96th Annual Meeting & Expo ICE/ENDO 2014 in Chicago was the world's largest ever gathering of endocrinologists and scientists working in hormone research. Endocrinologists from nearly 100 different countries of the world participated and shared their research experience. The 4-day conference included sessions on various endocrine disorders and shared knowledge and recent updates on their pathological basis, diagnostic protocol and management regimes. These sessions included topics related to adrenal gland, thyroid, pituitary, reproductive health and metabolic syndrome.

New development presented at the conference

Most of the developed as well as the developing world is experiencing the epidemic of obesity that is the root cause of many diseases like coronary artery disease, hypertension, diabetes, cerebro-vascular accidents and various cancers. Currently obesity is primarily treated by risk modification by exercise and diet control. In the refractor or extreme cases, drugs such as Orlistat and Sibutramine have been tried but without much success. In this conference, evidence regarding the promising role of GLP-1 inhibitors in the control of obesity was presented. Further research is needed to validate its role.

New development resulting from the conference

Presently the guidelines of American Thyroid association given in 2009 are being used by most of the thyroid oncologists for the treatment of thyroid cancer. Time-to-time modifications in the therapeutic guidelines are essential in promoting the better control of any disorder. In the present conference the role of low dose radioactive iodine was discussed in the treatment of low risk thyroid cancer patients. Post-operative radioactive iodine forms the mainstay of the treatment of thyroid cancer. However the long term side-effects of radio-iodine therapy such as second primary malignancy, gonadal failure and salivary gland atrophy have questioned the role of high dose radio-iodine in management of thyroid cancer. Therefore new ATA guidelines are being proposed that incorporates the importance of low dose radio-iodine in the therapy of thyroid cancer.

My contribution to the conference

Age greater than 45 years is a well-known poor prognostic factor in thyroid cancer patients and American Joint Commission on Cancer (AJCC) has recognised the same to stratify the thyroid cancer staging. However, among the patients >45 years, particularly poor prognosis has been observed among the elderly patients (>60 years). We observed that among the elderly population, the rates of distant metastases are 4-5 times higher than patients <60 years. It was also observed that elderly patients generally have more aggressive initial presentation and more overall disease related mortality. This study was the first report to study the prognostic factors in this subpopulation of extremely high risk thyroid cancer patients. Therefore, this study will serve as a crucial step in highlighting the behaviour of thyroid cancer in elderly patients as well as will provide an insight into the possible areas of amendments in the existing management protocols to better manage this particularly high risk subpopulation.

New development resulting from the conference

Presently the guidelines of American Thyroid association given in 2009 are being used by most of the thyroid oncologists for the treatment of thyroid cancer. Time-to-time modifications in the therapeutic guidelines are essential in promoting the better control of any disorder. In the present conference the role of low dose radioactive iodine was discussed in the treatment of low risk thyroid cancer patients. Post-operative radioactive iodine forms the mainstay of the treatment of thyroid cancer. However the long term side-effects of radio-iodine therapy such as second primary malignancy, gonadal failure and salivary gland atrophy have questioned the role of high dose radio-iodine in management of thyroid cancer. Therefore new ATA guidelines are being proposed that incorporates the importance of low dose radio-iodine in the therapy of thyroid cancer.

My contribution to the conference

Age greater than 45 years is a well-known poor prognostic factor in thyroid cancer patients and American Joint Commission on Cancer (AJCC) has recognised the same to stratify the thyroid cancer staging. However, among the patients >45 years, particularly poor prognosis has been observed among the elderly patients (>60 years). We observed that among the elderly population, the rates of distant metastases are 4-5 times higher than patients <60 years. It was also observed that elderly patients generally have more aggressive initial presentation and more overall disease related mortality. This study was the first report to study the prognostic factors in this subpopulation of extremely high risk thyroid cancer patients. Therefore, this study will serve as a crucial step in highlighting the behaviour of thyroid cancer in elderly patients as well as will provide an insight into the possible areas of amendments in the existing management protocols to better manage this particularly high risk subpopulation.