

Dear friends,

I bring the warmest and heartfelt greetings to all of you from the land of Lord Jagannath and the sublime, serene, scenic Odisha, the erstwhile Kalinga.

My journey through the association is of three decades. Since the inception of the IAES in 1992 by our father figure Prof S. Vittal, this talented, coherent and mutually supportive group of endocrine surgeons has developed from stature to stature and strength to strength. It is one of the most academic, vibrant and powerful chapter of ASI and brought several laurels being adjudged as the best section of ASI for several years.

We have never looked back. Our young brigade has enshouldered the tradition and goal of IAES and has played the most efficient and pivotal role in advancement of the Art and Science of Endocrine Surgery in our country. They are remarkable and outstanding.

Changeth is the new order and essence of any scientific research and advancement. Always our endocrine surgeons have adapted and practiced and embraced such inventions leading to incorporation of newer technologies and frontiers of science. Collaborative work for progress of scientific stuff and utilizing the same in better patient care and successful outcome of diseases is the motto of our scientists. We should harp upon this companionship with other groups such as ABSI, MIS and DFSI.

Diabetic foot is another armamentarium in Endocrine surgery's basket. The practice of diabetic neuropathic, Ischemic and Charcot foot are itself great pathologies and their management is fascinating, challenging and rewarding. This can expand our scope also.

I remember a quote here which is "In the confrontation between the Rock and the stream, it is the stream who always wins not due to strength but due to Perseverance". Our Association and each esteemed member is endorsed with both the qualities the rock-solid strength and the constant and continuous unflinching perseverance of the stream.

It is very heartening to know that some of our young and brave Endocrine surgeons have been doing very complicated and complex endocrine cases and setting example of reaching out to distant places. Thereby many Endocrine surgical conditions can be affordably and successfully managed at the doorsteps of people.

An endocrine surgeon is always confronted with work-life balance. The criticality and complexity of the surgery are often disturbing to bear with. Endocrine surgeons are different from other branches as he is to be well-versed with Anatomy, Embryology, Pathology, Radiology and newer nuances. In this context he is to take up the leadership of a multidisciplinary team.

The face of our association 'The IJESR' is a new baby and needs to be nurtured. It will be not out of place to congratulate the valiant efforts of all the team members of IJESR especially the hard and enduring work of the editor Dr Pooja. Please contribute sufficiently to the Journal.

To conclude I would draw the remark, Endocrine Surgery is a new subspecialty turning already to super speciality and needs everyone's commitment.

Thank you all

Long line IAES



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