



Foreword

This volume brings together two editors, Dr. Hamish Wallace, an oncologist, and Prof. Christopher Kelnar, an endocrinologist, who work closely together at the Royal Hospital for Sick Children in Edinburgh, UK. They have assembled an impressive list of international contributors to discuss experiences and review the latest scientific advances on key clinical topics related to childhood cancer therapy. As written in the Preface, this is a field which is constantly evolving and this volume offers a very relevant update. The editors have carefully put the care of the patient first and the chapters, which cover all the important areas of late-effects endocrinopathy, examine the evidence-base which is now available to optimize long-term care of childhood cancer survivors.

I am delighted to welcome this volume to the *Endocrine Development* series. It makes an excellent contribution to the series which it has been my privilege to edit during the last 7 years.

Martin O. Savage, London

Preface

Continuing advances in the management of childhood malignancies mean that the majority of children treated for cancer can realistically expect long-term survival and, indeed, nearly 1 in 700 of the adult population are now childhood cancer survivors. However, children, young people and adult survivors experience morbidity which is generally related to the treatment they received to cure their cancer (surgery, neurosurgery, radiotherapy, chemotherapy and/or bone marrow transplantation) rather than to the cancer itself. The challenges for doctors and other healthcare professionals looking after these patients is to sustain and further increase survival rates whilst reducing the incidence and severity of such treatment-induced 'late effects'.

Morbidities in this group of patients include second cancers, neurodevelopmental, cognitive and psychological problems, and renal, respiratory and hepatic dysfunction, but much significant but anticipatable, preventable and/or treatable morbidity is in the areas of growth impairment, puberty progression, fertility and diverse endocrine dysfunction. The prevention, diagnosis and management of growth-, puberty- and endocrine-related morbidity is thus of major and increasing importance.

There is an increasing, and increasingly rigorous, evidence-base behind the diagnosis and management of these problems but still much controversy over pathophysiology, optimal investigative and management protocols and follow-up strategies. In this volume leaders in the field of childhood cancer late effects bring a variety of clinical perspectives to the examination of these issues with chapters re-evaluating the effects of childhood cancer therapies on growth, puberty and hypothalamic and pituitary function, male and female fertility, obesity, and metabolic and bone problems, and discussion of long-term follow-up issues and strategies.

We thank our fellow contributors and hope that this volume will be of particular interest to paediatric endocrinologists, adult and reproductive endocrinologists, primary care practitioners, nurses and nurse practitioners and others involved in the planning and delivery of the holistic care which this increasingly numerous and important group of patients require.

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