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Clinical Disorders of Bone and Mineral Metabolism

o clinicians not working directly in the area of bone and mineral metabolism it may at first glance seem excessive to devote almost 60 hours of concentrated activity to this seemingly narrowly focused area of clinical medicine, yet the Third International Symposium on Clinical Disorders of Bone and Mineral Metabolism that was held in May, 1988, under the sponsorship of the Henry Ford Hospital Bone & Joint Specialty Center, attracted 350 physicians from 25 countries in addition to the United States and Canada, for just that purpose. The guest faculty, each of whom was an acknowledged authority in his or her own right, was also recruited from all corners of the globe. The overriding theme of the symposium was an update and overview of activities in bone and mineral metabolism that have taken place since the last symposium in 1983. The main focus was on the current clinical application of breakthroughs that had been initiated, in many instances, in the research laboratory.

Review of the table of contents of this issue of the Journal should indicate to the reader just how many different disciplines of medicine were covered during the week's activities. Traditionally one thinks of endocrinologists and orthopedic surgeons when one discusses calcium metabolism and metabolic bone disease, but it is clear that the discipline also directly affects the practices of rheumatology, nephrology, hematology, oncology, gastroenterology, pediatrics, not to mention radiology and nuclear imaging. It should also be pointed out that despite the heavy concentration of activity during the week, the entire discipline of intracellular calcium metabolism affecting the biochemistry, physiology, and pharmacology of diverse groups, such as cardiology and neurology, could not even be adequately addressed during the time available.

Each of the invited faculty provided a manuscript to accompany their presentation. With such a broad-based audience as the symposium was able to attract, the organizers felt it imperative that ample time be allotted for all attendees to participate actively in the discussion. Fully one-third of the week was devoted to open discussion, all of which was duly recorded. The formal presentations plus the discussions are being published separately as the proceedings of the meeting. In this issue of the Journal, we have provided a synopsis of these proceedings in the form of overviews authored by the moderators of each session. They each have tried to provide a capsule summary of the important information for the busy, practicing clinician and also to whet your appetite to read more deeply into the subject material provided.

Medical knowledge is advancing at a rate and level of complexity that is impossible for all but a select few to absorb even in areas where they are practicing regularly. This issue of the Journal is our attempt in one small area of medicine to provide the reader with a synopsis of what is happening and a ready reference to seek further information for application to individual clinical problems as they arise. We hope it has achieved that goal.

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