

## The Voice of the Editor-in-Chief



### Dear Colleagues,

Just before the publication of this issue of “Clinical Diabetology”, the largest diabetes meeting in the world — 79<sup>th</sup> Scientific Sessions of the American Diabetes Association (ADA) — was held on June 7–11, 2019 in San Francisco, USA. During this congress, all clinical and scientific aspects of diabetes were raised in countless lectures, oral presentations and poster sessions. It is impossible to mention all of them, but I would like to draw your attention to the reports of the greatest interest of the congress participants. These were the reports presenting detailed analysis of the results of large clinical trials, such as PIONEER, REWIND, DECLARE-TIMI 58, CREDENCE, CAROLINA, assessing potential cardio- and nephroprotective effects of new classes of antidiabetic drugs, such as SGLT2 inhibitors or GLP1 analogs, as well as the cardiovascular and renal safety of linagliptin compared with a sulfonylurea. Thanks to these trials we now know for certain that the drugs assessed are safe in terms of cardiovascular and renal function in different patient populations. In addition, the analysis of the results of the CREDENCE study with canagliflozin, for the first time since the proven nephroprotective effect of RAA blockers, ACE inhibitors and sartans, proved that this is another nephroprotective drug for diabetic patients. Soon, we will also learn about the results of the trials assessing kidney function in patients treated with two other SGLT2 inhibitors, dapagliflozin and empagliflozin, which are also expected to confirm the class effect in this respect. This would allow the indications for their use in everyday practice to be extended. In addition, the results of the DECLARE-TIMI 58 trial showed that dapagliflozin therapy is associated with benefits in primary prevention of heart failure in diabetes, a complication that until recently was underestimated and now is considered as one of the major challenges of

modern medicine due to the increasing number of affected patients.

It should also be stressed here that this issue is being released in convergence with the next, large and very important scientific meeting of our community — the 20<sup>th</sup> Scientific Congress of Diabetes Poland that this year was held on May 16–18, in Lublin. During this meeting, apart from the very high scientific level, there was also space for interesting cultural events.

Among papers included in this issue of “Clinical Diabetology”, there is a particularly interesting paper by the authors from Egypt who discuss the correlations between microangiopathic complications in type 2 diabetes. Another article that is worth mentioning is the article about the DAWN (Diabetes Attitudes, Wishes and Needs) study. This article does not address the most frequently discussed aspects of organic complications in diabetes but focuses on the mental sphere of patients.

This very issue of “Clinical Diabetology” is special to me because this is my last issue as Editor-in-Chief. Managing “Clinical Diabetology” was a great adventure to me and now I am handing over the helm to the person who guarantees the further development of our journal, and, what I deeply believe, will soon introduce “Clinical Diabetology” into the PubMed and MEDLINE databases and then into a list of journals indexed in the ISI databases, Master Journal List, known in Poland as the Philadelphia List. The next Editor-in-Chief, appointed to this honorable position by the newly elected Main Board of Diabetes Poland, is Professor Leszek Czupryniak.

As usual, I would like to thank all the authors for submitting so many interesting manuscripts and I encourage you to further cooperation with the new Editor-in-Chief of “Clinical Diabetology”, a journal that is constantly growing thanks to your support.

Editor-in-Chief

A handwritten signature in black ink, appearing to read 'J. Gumprecht', written in a cursive style.

Prof. Janusz Gumprecht