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Introduction

Recently I was reading the book entitled *A Short Life of Sir William Osler*. I am fond of medical history and this book written by Edith Gittings Reid was very enjoyable.

William Osler (1849–1919) was a fascinating personality, a worldwide known and appreciated Canadian-born clinician, teacher, and imaginative leader. His life, practice, teaching, and writings had a long-lasting influence on medicine. He was professor in Montreal, Philadelphia, Baltimore, and Oxford. He said that "Everywhere the old order changes and happy they who can change with it." Nobody can disagree with his statement today. We are living in a world of rapid transition, and those who cannot change will fall behind. It is an amazing feeling to witness the ongoing scientific revolution, the unbelievable rapid progress, the literature explosion, and the unprecedented increase in knowledge. Medicine today is not the same as it was even 10 years ago.

Spectacular advances were also accomplished in pituitary endocrinology. With the available laboratory and imaging methods, it is easier and more reliable to diagnose pituitary abnormalities. In pituitary pathology, in my area, progress is also considerable. Using immunohistochemistry, electron microscopy, *in situ* hybridization, and several other methods, it became possible to reach a precise diagnosis and to reveal the cellular composition and endocrine activity of pituitary tumors. The study of cell proliferation markers, receptors, and proteomics enabled pathologists to explore the biologic behavior of pituitary tumors. New molecular and genetic methods, the microarray technology, were developed; their wider application will lead to a better understanding of tumor pathogenesis and of the factors involved in tumor initiation and progression.

Substantial advances were also achieved in pituitary tumor treatment. Earlier, only surgery and/or irradiation were available. During the last few decades, several drugs and novel irradiation procedures were introduced. Despite the tremendous progress, many problems remained unresolved, and we did not achieve the final goal to eliminate the tumor in every case. We are, however, optimistic and believe that time will come in the foreseeable future when we will be able to prevent the development of pituitary tumors, will understand their pathogenesis, and will be able to provide a permanent cure.

This special issue of *Endocrine* focuses on the present status of treatment of pituitary tumors. Highly respected and internationally recognized experts and accomplished leaders were invited to contribute. The reviews reflect the present status of therapy. Obviously further development will lead to change. I am very much indebted to Dr. P. Michael Conn, the chief editor of *Endocrine* who encouraged me to edit this special issue and Ms. Mary V. Rarick for her active and valuable participation in the editing. I wish to thank Ms. Corinne Holubowich, Mrs. Maureen Molson, and Mr. Fabio Rotondo for their participation in the work. I am very grateful to the Jarislowsky Foundation and the Lloyd Carr-Harris Foundation for the generous support of my pituitary research. Last, but not least, I wish to express my appreciation and sincere thanks to the contributors. Their excellent work made the publication of this issue possible.

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