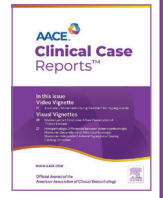




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Editorial

Editorial for May/June issue of AACE Clinical Case Reports

Dear Colleagues,

Welcome to another issue of AACE Clinical Case Reports (ACCR). ACCR continues to grow in both manuscript submissions and readership; this growth would not have been possible without the dedication of our associate editors, editorial board members, and editorial/publication staff. Special thank you to our excellent reviewers that provided meaningful and constructive reviews to help the educational value of the published cases.

The current issue includes interesting and educational cases to share. We will provide a summary of some of those cases below. For more details, please access ACCR online journal available at <https://www.aaceclinicalcasereports.com/>

Few adrenal and neuroendocrine cases were reported to highlight the rare but possible cortisol secretion in pheochromocytoma due to ACTH secretion, metastatic pheochromocytoma to the bones in a patient with neurofibromatosis type 1 (NF1), and the presentation of dopamine-secreting head and neck paragangliomas in a patient with succinate dehydrogenase subunit B (SDHB).¹⁻³ Moreover, a case reports on additional adverse events associated with immune checkpoint inhibitors in cancer patients.⁴

In transgender care, we highlighted the case Hematospermia in a Transgender Woman with Evidence for Endometrial Tissue in the Prostate in this ACCR issues as well as hosted a podcast to summarize the significance of this case at <https://pro.aace.com/podcast/episode-49-hematospermia-transgender-woman-evidence-endometrial-tissue-in-prostate>.⁵

On Diabetes and Metabolism, authors share their thoughts on how to minimize Hypoglycemia unawareness in patients with type 1 diabetes.⁶

In the area of Bone and calcium disorders, a case described dysphagia as a presentation of primary hyperparathyroidism,⁷ and a case of primary hyperparathyroidism in pediatric population.⁸

This issue includes variable collection of interesting visual vignettes describing bone complications in Systemic Mastocytosis,⁹ Sodium disorders in infiltrative pituitary disease,¹⁰ Another presentation of Malignant pheochromocytoma¹¹ and Malignant Insulinoma.¹² All are detailed in this issue for the readers.

As always, we truly appreciate all contributing authors, reviewers, editors, and staff that help improve our journal and create an educational platform to our readers to help best manage our patients.

Thank you again for your interest in ACCR. We welcome all feedback, questions, and comments from our readers. Please feel free to reach us at publications@aace.com.

Warmest regards,

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Sina Jasim, MD, MPH
Editor in Chief

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