EDITORIAL

The Cambridge Symposium has long been renowned for felicity in choosing an area of general fascination to the ophthalmologic community and, within the space of a two-day meeting, encapsulating what is known about the subject from molecular biology to clinical consequences and treatments. Diabetes mellitus is suited perfectly to this forum. It is a common and terrible disease – or rather, group of diseases, since the syndrome embraces more than fifty separate disorders. By the World Health Organization's own estimate, around 3% of the world population suffers from the diabetic syndrome. Each year it consumes enormous quantities of health care resources and brings the miseries of gross disability and premature death to many of its victims. The commonest specific complication in all forms of diabetes is retinopathy, in which incidence is governed almost entirely by duration of clinical diabetes; to our shame, this remains (despite provision of admirable ophthalmologic treatment) the commonest cause of blindness in persons of working age in all the developed countries.

Thus there are excellent reasons for ophthalmologists to know more about a disease which affects so many of their patients and the prime manifestations of which they are inevitably called upon to treat. Imparting such knowledge in palatable form is not easy when the subject is vast, the disease is multisystem and the pace of new knowledge is continuing to accelerate. The task is formidable and the symposium was fortunate in attracting acknowledged experts from many academic centres to discourse on topics which ranged from pancreatic pathology, the definition of diabetes and its epidemiology through molecular biology, modern diabetic therapy, the origins of microangiopathy and its clinical manifestations. The diabetic eye has not been neglected but is set in its proper perspective against a very large background.

The end result, the current issue of *Eye*, is best conceived as a series of snapshots which, when taken together, form a kind of album of modern concepts on the origins, manifestations and treatment of diabetes mellitus and its complications. Some portraits are clear-cut: read Foulis on the pathology of the endocrine pancreas. Others are youthful but full of promise: consider what is now known of molecular mechanisms in diabetes and how far this field is likely to extend. Others still are ornate, with a wealth of background detail: see Barnett on microangiopathy or Garner on ocular histopathology. There are twenty-two papers in all and each should reward careful study by ophthalmologists and (to my certain knowledge) by most diabetologists. No modern specialist can now pretend to claim comprehensive knowledge of this most catholic of diseases and we can all take the opportunity to learn from the distilled wisdom of our colleagues.

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