

### GROWTH HORMONE AS A THERAPEUTIC AGENT

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Twenty years have passed since recombinant human growth hormone (rhGH) was approved by the FDA for clinical use in patients with growth hormone deficiency (GHD). This was a major breakthrough, as the only previous source of GH was naturally-occurring GH extracted and purified, to a variable extent from human pituitaries removed at autopsy. This human GH (hGH) was first prepared and studied by Raben<sup>1</sup> in 1958 and was shown to produce growth in a sexually undeveloped adolescent. The supply of hGH for investigation and/or therapy was very limited until rhGH became available in 1985, when the supply suddenly became unlimited and the new modern era of GH as a therapeutic agent began. Genentech developed the recombinant techniques to synthesize rhGH, and also developed the necessary testing leading to approval by the FDA of rhGH for human use.

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#### From The Editor's Desk

This issue's lead article commemorates the 50 years of human growth hormone (hGH) as a therapeutic agent and the 20th anniversary of recombinant hGH (rhGH) for the treatment of hypopituitary children. The personal recollections of Dr. Robert Blizzard bring to the reader a clear historical perspective of the developments that brought about the rise and fall of hGH. It also highlights the synthesis and approval of rhGH and the major strides made with the unlimited availability of rhGH.

We also commemorate 2 decades of *Growth, Genetics & Hormones (GGH)*. This journal was established in 1985 to provide a high-quality educational resource to physicians. The journal accomplished its mission, and more. Dr. Blizzard's leadership, the hard work of the Editorial Board, and an unrestricted educational grant from Genentech made it all possible. In 2002 www.GGHjournal.com was launched. This enabled us to bring *GGH* to most pediatric endocrinologists around the world. From their comments, we know they treasure the content and erudite comments of the Editorial Board. The on line archives of the journal constitute the repository of the fundamental advances that have occurred in the field of growth since the beginning of *GGH*.

Each year we have given readers more material and added features without an increase in budget. However, *GGH* may cease publication next year as the educational grant that we have enjoyed since its inception will not be available after April 2006. Thus, we are searching for sponsorship and have requested grant support from all manufacturers of rhGH. The pharmaceutical companies that compete for market share have a common responsibility to provide high quality educational resources to physicians who prescribe rhGH. I challenge them to promptly fill the void so we may continue bringing state-of-the-art, unbiased, valuable information in the field of growth to our colleagues worldwide. It has been estimated that the annual sales of rhGH are \$1.5-\$2 **billion**; 30% of the sales being for FDA approved indications to treat children and adults (Perls TT, Reisman NR, Olshansky SJ. *JAMA*. 2005;294:2086-2090.) Thus, there *must* be funds available to be allocated for the continuation of *GGH*, a highly regarded educational journal.

We will continue to explore sources of support to enable us to provide you with *GGH* on a complementary basis—as it has been done since 1985. On line subscribers recently received a survey to evaluate their interest in helping shape the future of the journal. I am gratified by their response; more than 40% indicated a willingness to pay for a subscription to the journal. I urge all of you to complete the one question survey (www.GGHjournal.com) or to send me a note indicating your interest in a paid subscription (editor@GGHjournal.com) so we may plan the future of *GGH*.

Respectfully,  
Fima Lifshitz, MD