

"How to fish, how to dig a well"

As we take part in international cooperation related work, we sometimes hear proverbs or sayings reminding us of how we as humans divide time. Let me tell you about one that impressed me greatly.

There is a group called International Water Project which digs wells around the world in regions with insufficient water. A leader of the group said that we're "not just giving water, but teaching people how to dig a well." This teaching comes from a common African saying, "if you see a hungry friend, do not just give her a fish, but teach her how to fish." This means that just giving fish to a person who is suffering from a hunger is not enough as he may end up in the same situation again; thus, the true solution is teach how him how to fish so he can always provide for himself. "Teaching how to dig a well" will stimulate self-reliance, which is the essence of the spirit of international cooperation. It helps us to avoid short-term thinking and learn how to think of long-term positive factors on behalf of local peoples. .

Currently, I teach endoscopy technique to doctors in Chile, and when I see their day-to-day progress I feel increasing confidence in their ability to acquire Japanese medical techniques. However, teaching medical treatment is very troublesome even between Japanese. Usually, such techniques should be taught on a theoretical level, but there are practical aspects to endoscopy that can only be recognized by a surgeon. I am always concerned about how to teach this practical element in foreign countries, such as Chile, given the language and cultural differences.

When the inspections carried out by my students in Chile have been slow-going, it has occurred to me that the endoscopy might have been done faster and safer if I had done it myself. However, this would be counterproductive as the students would not grow and merely regress to their original starting point after we had left. At such times, I am reminded of the saying to teach "how to fish, how to dig a well," so that even after we are gone, the project will be carried forward by the next leader and bearer of Japanese medical techniques.

Here are the words from Ms. Sadako Ogata, the former the United Nations High Commissioner for Refugees.

"Peace that exists solely in your country is no peace, because every nation's fate is bound up in that of others."

Takuya Okada, LACRC, Department of Esophageal and General Surgery









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## Major progress on project in Ecuador

TMDU concluded an agreement with the Ministry of Health, Ecuador, in October 2012, to collaborate on colorectal cancer screening. Since then, a colorectal cancer screening program has been established at Pablo Arturo Suarez National Hospital in Quito, which serves as the base hospital for the project. Meantime, TMDU has continued to support the project centered on the LACRC. Thanks to the success of the first screening, the project is slated to develop into a national project, expanding to other hospitals and other regions.

## Progress report on the project in Ecuador



Basic information of Republic of Ecuador

Capital: QuitoLanguage: Spanish

Population: 15,298,268 people (399

Japanese residents in

Ecuador)

\*Area: 283,560 km2 (About 2/3 of

Japan)

President: Rafael Correa

The colorectal cancer screening program using immunologic fecal occult blood testing (iFOBT) was conducted at Pablo Arturo Suarez National Hospital as a pilot program. In 2013, the results of the pilot program showed that out of a total 4253 screening participants, 146 were tested via endoscopy, 51 of whom were identified as having neoplastic lesion, and 12 identified as having colorectal cancer.

Among those found having colorectal cancer were a number of early colorectal cancer cases, which was an unprecedented find in Ecuador. This discovery raised expectations about the usefulness of this project. It is anticipated that this project will decrease the mortality rate of colorectal cancer in the future and also curb medical expenses by increasing the ratio of early colorectal cancer which does not require surgery or chemotherapy.

The Ministry of Health, Ecuador, took a serious view of the results of this pilot program, and made plans to expand the colorectal cancer screening program to several medical institutes in Quito, Guayaquil, the largest city in Ecuador , and in Loja located in the south, which is known as a region with a high incidence of colorectal cancer. Currently, Dr. Montalvo, who is the project leader at Pablo Arturo Suarez National Hospital, is pushing to develop general protocols for inspection, diagnosis, and treatment, and to construct a database network and other operations.

The Ecuador government recognizes that the cooperation of TMDU in this screening program is essential, and has requested guidance not only in endoscopy, endoscopic diagnosis, and pathological diagnosis but also in the development of protocols and construction of a database. Further, plans to construct a screening program in the fields of gastric cancer, cervical cancer, prostate cancer, and breast cancer, in addition to colorectal cancer, are proceeding. Finally, the government plans to adopt Japanese methods of diagnosis and treatment for early gastric cancer in the near future.

TMDU's assistance to Ecuador is highly appreciated by the Japanese Embassy there, especially its support to the base hospital for the promotion of the project.

As mentioned so far, the project in Ecuador has made enormous progress this year, and the cooperation of TMDU on colorectal cancer and gastric cancer has proved all the more crucial. We at LACRC will make every effort to contribute to the treatment of cancer in Ecuador.

#### 2nd Ecuador Japan Intestinal Lesion Lecture

From June 3rd to 6th, 2014, in Quito, Ecuador, the "2nd Ecuador Japan Intestinal Lesion Lecture" was held. This lecture was held under the joint sponsorship of the Ministry of Health, Ecuador, and TMDU, with Junior Associate Professor Kawachi and Assistant Professor Okada participating as lecturers from the LACRC. About 60 people including staff from Pablo Arturo Suarez National Hospital, and doctors from institutions planning to take part in the project, participated in the lecture. In the endoscope division, Professor Okada was in charge and gave lectures on the topics of "prior treatment of endoscope and how to insert" and "problems and solutions regarding the start of colorectal cancer screening" on the first day. After the lecture, Professor Okada demonstrated endoscopy in front of the participants and explained about how to insert and practice endoscopic mucosal resection. The demonstration was a great success as the inspecting room overflowed with 20 doctors. In the pathology division, Professor Kawachi explained the pathological findings while demonstrating a case using a microscope and discussing it with participants. Further, he offered introductory lectures on classification of colorectal cancer in Japan, a method for diagnosing early cancer, and other lectures. At the last day, endoscope division and pathology division jointly held a clinical conference, which focused on discussion of diagnosis and treatment. In Ecuador there are many endoscopists and pathologists who lack sufficient experience due to the lack of cases of early cancer, which is all the more reason for LACRC to continue giving support.

During our stay, we visited and inspected on Hospital Carlos Andrade Marin, one of the institutions planning to take part in project.



Opening ceremony



Pathological specimen examination at Hospital Carlos Andrade Marin



Commemorative photograph with participants after the course



Lecture on colonoscopies at Pablo Arturo Suarez National Hospital

# Progress report on PRENEC

The following is a recent report on the main mission of LACRC, which is the diagnosis of early colorectal cancer project (PRENEC). This project is a screening project using immunologic fecal occult blood test (iFOBT), and is currently being carried out in the states of Valparaiso and Punta Arenas, and the capital city of Santiago. Additional screenings are planned for the states of La Serena (Coquimbo) and Osorno.

## Lecture held in Antofagasta City



The state of Antofagasta, located in northern Chile, is blessed with abundant mineral resources, and the world largest open-air copper mine, Chuquicamata.

A briefing session regarding the initiation of PRENEC was held in a state government building on June 20th and 21st. Professor Kawachi and Professor Okada from the LACRC and Dr. Lopez, Dr. Zarate, Dr. Reyes, Dr. Uribe, and nurse Ponce from CLC have participated and Professor Kawachi and Professor Okada gave lectures on the role of the pathologist in PRENEC and treatment for colon pol.

A huge model of a large intestine was displayed, which has garnered a lot of interest from citizens.

Going forward, the LACRC will support the opening of the PRENEC in Antofagasta.



A huge model of a large intestine displayed in front of the Antofagasta state government building. In the center, Dr. Zarate is explaining the colorectal cancer screening program to participant.

## Visiting the Ministry of Health in Chile

In Chile, the new administration of President Bachelet was inaugurated in March. With the installment of the new government, the personnel of the ministries were revamped, with Dr. Molina from pediatrics being appointed as the Minister of Health. As is the case in any country, a change in government administration is also accompanied by changes in government policy. A matter of concern is whether or not the project with TMDU will continue to have the support of the new administration.

June 19th, Director Tejias, Trustee Goycolea, Director Lopez, form CLC, director Estela form San Borja national hospital, Professor Kawachi and Professor Okada from the LACRC made a courtesy visit to Ministry of Health. In the talks, Dr. Lopez reported the cancer detection rate and the number of treatments by endoscope among 10,000 participants of PRENEC and discussed the decrease in colorectal cancer mortality. Dr. Estela explained the training at San Borja Hospital. In addition, Ambassador Murakami and Secretary Yamaguchi from the Embassy of Japan in Chile visited and discussed with the Mr. Molina, the Minister of Health, the necessity of ensuring the continuation of the project.

The minister listened closely and said he would discuss the issue further within the ministry and the possibility of expanding the project.



With new Minister of Health Molina after the meeting.

## Colonoscopy training at San Borja Hospital

To increase the number of doctors who can practice colonoscopy in Chile, a training course for colonoscopy was established in Japan-Chile gastrointestinal disease laboratory in San Borja hospital, Santiago starting in October of 2013, with Professor Okada from the LACRC serving as the core instructor in the training.

Dr. Carvajal from Sotero del Rio Hospital joined the course as a 2nd trainee from April to June of 2014. He was trained on how to safely insert a colonoscopy, find lesions, and practice therapeutic endoscopy, which led to spectacular improvements in his skill high enough to join allow him join the PRENEC. It was our goal that Dr. Carvajal would be able to participate actively in PRENEC after the completion of the training course.



Dr. Carvajal (on the right) on training, Professor Okada, and others.

# Report of TMDU delegation

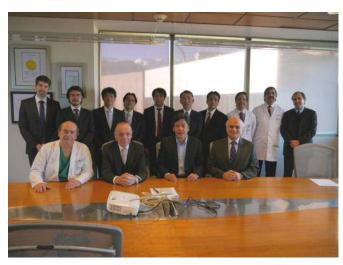
TMDU delegation consists of Professor Hiroshi Asahara, Associate Professor Hiroyuki Uetake, Project Professor Takashi Yoshida, Manager Koji Shimoda, and Deputy Manager Makoto Tsuchiya visited Chile from June 16th to 18th.

The main purpose of this visit was to make arrangements for the Joint Degree Program concluded between TMDU and University of Chile, as well as activities regarding the on-going colorectal cancer screening project in Chile and activities regarding observation and technical guidance by Professor Asahara and others on CLC oncogene laboratory. Also, our delegation made a curtsey visit to the Embassy of Japan in Chile and mingled with project semester students.

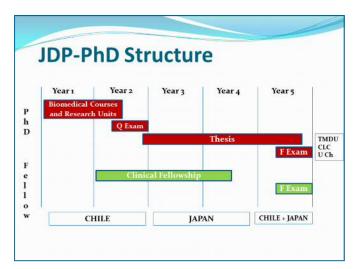
## Discussion in CLC (JDP)

TMDU is planning to start a Joint Degree Program with the University of Chile in the spring of 2016. It is a PhD program based on fundamental research, which targets gastroenterological surgeons and gastroenterologists in Chile and Latin America, and offers a unique combination of specialist training centered on clinical digestion, such as endoscopy, surgical technique, and other aspects. Students who complete this program will be awarded the degree of PhD and will be qualified to practice as a digestive surgeon or specialized physician in Chile. The duration of the program is planned to be 5 or 6 years, and students will be coming and going to Japan and Chile while researching and training.

Current adjustments are being made to the curriculum and regulations, such as schedule, required units, and etc., to enable the establishment of this course. Ongoing discussions at this time between TMDU and Chile (doctors from University of Chile and CLC) are focused on specific contents of clinical training and guidance structure for fundamental research.



Courtesy visit to chief director of CLC prior to discussions



Outline of Joint Degree Program (UCh: University of Chile)



Meeting regarding Joint Degree Program

# Courtesy visit to the Embassy of Japan in Chile and University of Chile

The delegation and teaching staff of LACRC made a courtesy visit to the Embassy of Japan in Chile on June 17th. Professor Yoshida explained the progress of the colorectal cancer screening program and the plan for the joint degree program to ambassador Murakami. Ambassador Murakami listened closely and promised to support the activities of TMDU.

The next day, the delegation and teaching staff of LACRC, and the project semester students paid a courtesy visit to President Vivaldi of the University of Chile.

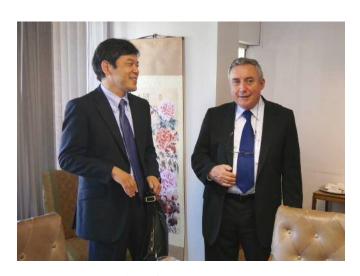
Mr. Vivaldi was Vice Dean of Faculty of Medicine until May 2013, and arranged for the reception of the project semester students. Mr. Vivaldi has deep connections with TMDU based on his visits to Japan for academic conference, as well as his visits to TMDU.

In the meeting, Professor Asahara, Professor Uetake, and Professor Yoshida explained about the joint degree program. Also, the project semester students introduced themselves.

President Vivaldi highly valued the interaction between TMDU and University of Chile and expressed an active interest in further developing the joint degree program and deeper interaction.



With Ambassador Murakami at Embassy of Japan in Chile



President Vivaldi and Professor Asahara having a pleasant chat



At the entrance of University of Chile

# LACRC report

#### Participation in Santiago Digestive Organ Symposium

Digestive Organ Symposium "IMAGENES EN PATOLOGIA DIGESTVIA" was held over a period of 3 days in Santiago, Chile, from May 28th to 30th. This symposium was under the joint sponsorship of CLC and San Borja Arriaran Hospital, and in addition to Chilean doctors, lecturers were invited from the United States, Brazil, Argentine, and from the LACRC. Professor Kawachi gave lectures on the "classification of penetration depth of early colorectal cancer" and the "pathology of traditional serrated adenoma," and Professor Okada gave lectures on the "diagnosis of early esophageal cancer" and the "diagnosis of early colorectal cancer." Also in a study meeting featuring actual cases, Professors Kawachi and Okada gave precise explanations on the case of esophageal cancer, which garnered much interest among the participants.

The lecturers invited from Johns Hopkins Hospital and Harvard University in United States and doctors from LACRC had a lively discussion. It was a good opportunity to highlight superior Japanese techniques for diagnosis and treatment of digestive organs cancer.



Presentation by Assistant Professor Okada



Commemorative photograph at the front of TMDU



Discussion by Junior Associate Professor Kawachi and Assistant Professor Okada after presentation



Presentation by Junior Associate Professor Kawachi

## **Project Semester**

## Project semester 2014 has started

TMDU has dispatched 4th year medical students in the project semester course to research institutes in Chile for 5 months at a time since 2010, with support from the LACRC for their research and living situation. This year 6 students arrived safely to Chile on June 9th. Of the 6 students, 3 students were dispatched to a laboratory in CLC and the other 3 were dispatched to a laboratory at the University of Chile. Once the administrative procedures, such as resident registration, were completed, the academic supervisors and others gathered together at CLC and held a welcome meeting for the students on June 9th. The students introduced themselves in English and recently-learned Spanish and discussed their research with academic supervisors. On 16th, they dined together with the TMDU delegation and developed close relationships.

The study abroad will continue until November. The students seemed to enjoy their valuable time outside study time, such as interacting with Chilean students. LACRC will continue to support the students to ensure a rich and safe experience.

#### Introduction of the blog by TMDU project semester students

You can see how students are doing at Chile via the blog they created URL: http://tmduchile2014.blogspot.com/





Commemorative photograph with supervisors at CLC after the welcome meeting



With TMDU delegation at the Chilean restaurant "El Apero"

#### **Editorial note**

From the 6th of this month, the LACRC office and CLC were filled with excitement about the 2014 FIFA World Cup. Unfortunately, the Japanese national team was eliminated in the group stage, but despite that disappointment we had an enjoyable time watching the Japan vs Chile match with Professor Kawachi and students. We intend to report the activities of LACRC and experience of the students in Chile via this newsletter . (Jaime)

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