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Newsletter

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Associate Editors : Takashi Horie, Norbert Berend, J. Patrick Barron, H. Sato Cochrane

Message from the Congress President of the 10th Congress of the APSR/The 1st APSR/ACCP Joint Congress

Dear colleagues and friends

It gives me great pleasure to welcome you to the 10th Congress of APSR as well as the 1st Joint Congress of the APSR/ACCP. The event, to be held in Guangzhou, China, November 11-14, 2005, is being made possible by the joint efforts from the Asian Pacific Society of Respirology and the American College of Chest Physicians as co-organizers, and the Chinese Medical Association (CMA), the Chinese Society of Respiratory Diseases, the Guangdong Medical Association, Guangzhou Association of Science & Technology and Guangzhou Medical College as hosts. The Congress is definitely the first of its kind in bringing together such a wide range of experts in respiratory medicine from the East and the West.

A wide range of topics of interest will be covered in the scientific program, providing participants an excellent opportunity to keep abreast of the latest developments in respiratory and thoracic medicine and diseases.

Being one of China's largest and busiest cities, Guangzhou is the energetic trading center and heart of Guangdong province. Located north of the Pearl River Delta from which has been nurtured since time immemorial, this rich land was one of the starting points of the ancient Marine Silk Road connecting the East and the West. Its long history of more than 2,800 years leaves the city numerous scenic and historical sites that are perfect to visit any time of the year, providing precious memories that add to this modern east-meets-west trip thousands of years later.

On behalf of the Organizing Committee of the 10th Congress of the APSR and the 1st Joint Congress of the APSR/ACCP, we look forward to seeing you in Guangzhou in 2005.



A handwritten signature in black ink, appearing to read 'N. Zhong'.

Nanshan Zhong, M.D.
Congress President
The 10th APSR Congress
The 1st APSR/ACCP Joint Congress



10th Congress of the APSR
1st Joint Congress of the APSR/ACCP
November 11-14, 2005 Guangzhou, China

Message from the TSANZ President

The Thoracic Society of Australia and New Zealand is very pleased to be entering into a Memorandum of Understanding and a much stronger relationship with the Asian Pacific Society of Respiriology.

We believe that as Australia and New Zealand sit within the Asia Pacific region and to assure the future progress of respiratory medicine, strong relationships in research, teaching and clinical practice need to be established between our two societies. Many of our members already have significant involvement with many colleagues within the Asia Pacific region. This will be strengthened with the Memorandum of Understanding and our contribution to meetings, scientific presentations, research collaboration and strengthening our contribution to the Respiriology journal.

The opportunities through this association will also offer our emerging leaders in respiratory medicine, an opportunity for training and research collaboration.

At a time when there are many issues for medical staff and their practice, fostering new relationships will increase the opportunities to recruit and retain specialists in the respiratory field.

There are, through the availability of new technologies, many ways we can collaborate on clinical practice issues and these opportunities may well increase in the future.

We are therefore very committed to the partnership we are establishing and believe there are probably a myriad of opportunities which we may not have considered to date.

We look forward to building a stronger relationship in the future.

Rima Staugas, M.D.
President, TSANZ

Message from the Secretary General

The last few months have seen rapid progress for the Society. The MOU between the Thoracic Society of Australia and New Zealand and the APSR has been signed and negotiations with other Societies in the region are being pursued. The Strategic Planning Committee has finalised a series of additions and amendments to the Charter and Bylaws including a new protocol for the organisation

of the Annual Congresses and the formation of Assemblies. These have been approved by the Executive and can now be implemented.

The Assemblies are of great importance for the future of the APSR. Earlier in the year the membership was asked to express their preferences for a number of suggested Assemblies and the feedback provided useful information concerning the viability of a large list of possible interest groups. Now that the final list has been compiled it is time for the membership to indicate their wish to join up to 3 Assemblies. Please forward the list of Assemblies you wish to join to the secretariat by Email (kyu00671@nifty.com). The relevant sections of the Charter and Bylaws concerning Assemblies are provided below for your information. Membership of an Assembly will enable you to become active in its management for the Society and assist in producing a program for the Annual Congresses which will ensure that the Congress meets the research, clinical and educational needs of the membership. It is planned to have a launch meeting of Assembly members at the Guangzhou Congress in November.

Article 6 Scientific and Clinical Assemblies

6.1 There shall be Scientific and Clinical Assemblies in the following fields of respiratory medicine:

- Clinical Respiratory Medicine
- Cell and Molecular Biology
- Clinical Allergy and Immunology
- Environmental & Occupational Health and Epidemiology
- Respiratory Infections (non-tuberculous)
- Tuberculosis
- COPD
- Asthma
- Lung Cancer
- Respiratory Neurobiology and Sleep
- Critical Care Medicine
- Bronchoscopy and Interventional Techniques
- Paediatric lung disease
- Respiratory Structure and Function
- Pulmonary Circulation
- Interstitial Lung Disease

6.2 Terms of Reference

The roles of the Scientific and Clinical Assemblies shall be to:

- Produce clinical guidelines and position

- statements
- Submit proposals for one or more sections of the Annual Congress
- Review abstracts in their fields submitted to the Congress
- Assist in fostering and improving clinical practice and research in the region and beyond
- Address matters relevant to their fields at the request of the Executive

6.3 Membership

Members of the APSR can elect to become members of up to three Scientific and Clinical Assemblies but can vote in only one.

6.4 Headship

Each Assembly shall have a Head elected by the membership of the Assembly. The Head of the Assembly shall serve for 2 years with a second renewable term if re-elected. The Head shall have his/her primary residence in a member country or region and be a dues-paid member of the APSR. The Head of one Assembly cannot simultaneously be Head of another Assembly. The role of the Head shall be to convene a meeting of the Assembly at the Annual Congress and to prepare an Annual Report for the Executive. The Head shall communicate with members of the Assembly and the membership at large between Congresses as necessary. This should include a contribution to the APSR newsletter when appropriate.

The Assemblies will be divided into 2 groups and the Heads of the Assemblies in each group will elect one of their number to serve on the Executive Committee for a period of 2 years with full voting rights. The two Heads serving on the Executive will serve only one term in this capacity.

The Heads of the Assemblies shall serve on the Central Congress Committee and elect one of their number to serve as Chairperson of this Committee.

Norbert Berend, M.D.
Secretary General, APSR

Councillor's Report

Malaysia

The Malaysian Thoracic Society together with the Ministry of Health, Malaysia and the Academy of Medicine, Malaysia has developed "Clinical practice guidelines

on community acquired pneumonia" for Malaysia which is awaiting publication. The other clinical practice guidelines published by the society are "Clinical practice guidelines for the management of adult asthma" and "Guidelines for the management of chronic obstructive pulmonary disease". In line with the policy of the society to promote continuing medical education, several update lectures on respiratory tract infections, bronchial asthma and COPD by local respiratory physicians and visiting international lecturers were held since the beginning of the year.

Similar to previous years, a number of activities were held in conjunction with World Asthma Day 2005. These activities included press releases, radio advertisements on asthma and a jogathon which was held on 15 May 2005. For the first time, these World Asthma Day activities by the Malaysian Thoracic Society were co-organised with the Asthma Council Malaysia. A record number of 900 participants took part in the jogathon.

The annual scientific meeting of the Malaysian Thoracic Society with the theme "Practical Respiratory Medicine" and the annual general meeting are scheduled to be held from 15-17 July 2005. The scientific programme includes pre-conference workshops on pleuroscopy, diagnostic and interventional respiratory procedures and respiratory physiotherapy. Topics on asthma and COPD will be covered in the plenary lectures while respiratory infections, paediatric airway diseases, lung cancer, respiratory radiology, and respiratory emergencies, shall be covered in several symposia over the 3 days.

A bumper issue of Breathe, the society newsletter, will be out by the time of the annual scientific meeting.

Chong-Kin Liam, M.D.

Philippines

The Philippine College of Chest Physicians (PCCP) is an organization of chest physicians committed to: (1) the generation, assimilation, exchange and dissemination of knowledge in pulmonary medicine;(2) the establishment and maintenance of the standard of excellence in pulmonary training and practice for the promotion of health among Filipinos;(3) the enhancement of the members' feeling of identification and pride with the organization by promoting personal

growth, camaraderie and unity among members. This is the mission of our college.

Within the college, there are twelve (12) councils which constitute the “workhorse” of the college. These councils are: Asthma, COPD and Pulmonary Rehabilitation, Critical Care and Pulmonary Vascular Diseases, Diagnostics and Therapeutics, Lung CA, Occupational and Interstitial Lung Diseases, Tobacco or Health and Air Pollution, Tuberculosis, Lung Infection, Complementary & Alternative Medicine, Medical Informatics and Pulmonary Related Sleep Disorders. The Councils have developed and published consensus guidelines on Asthma, COPD and Pneumonia, all of which are updated and evidence-based. Current efforts are addressing TB, Lung Cancer, Chronic Cough, and Pulmonary Related Sleep disorders.

The activities of the college include an annual chest convention held in March and a mid-year convention usually held in one of the provinces, preparation and dissemination of clinical practice guidelines, interhospital symposia for fellows-in-training, community service through free clinics in various barangay centers in MetroManila, and involvement in relevant health programs on a national scale through advocacy. Scientific output of the college is published in the “The Philippine Journal of Chest Diseases”. The PCCP was responsible for initiating the formation of two advocacy groups: one is the Philippine Coalition Against TB (PhilCAT), a 61-member organization of professional societies, non-government organizations and TB stakeholders, working hand in hand with the Department of Health addressing TB control, and the National Asthma Movement (NAM). The other advocacy group is a group of asthma support groups nationwide which addresses primarily patient education programs.

This year, the PCCP held its 24th Annual Chest Convention on March 1-4 with the theme “24K- Excellence in Pulmonary Medicine”. We were fortunate to have twelve (12) foreign experts, amongst whom was Yoshinosuke Fukuchi, APSR President, who spoke on “COPD and Aging Lung”. The other foreign experts were: Richard Light, who discussed “Excellence in Pleural Disease-2005”, Sonia Buist, who gave an update on GOLD Guidelines and organized the “BOLD” to include participation from the PCCP COPD Council, Lee Reichman who talked on “TB: The Global Time Bomb”, Ral Antic who

woke us up with issues on “Obstructive Sleep Apnea”, Julio Ramirez who gave an expert lecture on “CAP: Quality of Care Rendered to Hospitalized Patients”, Ulrich Madeja gave the “Latest Guidelines in Pulmonary Hypertension”, and Adrian Frutiger lectured on “Quality Issues in Critical Care”. A very stimulating lecture on “Health Professionals in Tobacco Control” was delivered by Annette David, a staunch activist against tobacco. The convention offered a “holistic approach to learning” as it addressed state-of-the art current issues, updates and controversies in the field of Pulmonary Medicine. It was, to many participants, EXCELLENT!

PCCP members are recognized and respected experts who find fulfilment through their participation in the organization. The college has more than 700 members with clinical practice all over the 7,100 islands of the Philippine archipelago. There is a dearth of pulmonologists in rural areas and this is the challenge with which the college is faced. It is through scientific symposia that medical education and advancement of new knowledge is “echoed” to the rural health practitioners. Bringing to our shores the above experts in TB, COPD, Pleural diseases and organizing world-class conventions is PCCP’s way of “setting the standard in pulmonary medicine”.

The PCCP has applied for membership of the APSR, as an organization. At the moment, the college is rallying its membership to be a part of the APSR, individually and maybe later on, as a group. There are many challenges for pulmonologists in my country, foremost of which is the problem of TB and Lung Infection. We have to deal with new and emerging diseases which know no boundaries. As a developing country, we stand to learn from our colleagues in the Asia Pacific Region. True, we are in the midst of a financial crisis, political instability, poverty, monetary depreciation, and mass migration of doctors to other countries. This may be the main reason why some members have balked at becoming “active” members. We can, however, still participate, in whatever way we can, through exchange of consensus guidelines, research and interact on issues relevant to Asians as a whole.

Jennifer Ann Mendoza-Wi, M.D.

Korea

The Korean Society of Tuberculosis was established in 1961 as an independent scientific society for the promotion of researches and studies of respiratory diseases. Its name has changed by adding Respiratory Disease to the present form. It has more than 800 regular members and more than 1000 participants are attending its annual meetings. We hold two meetings, spring and autumn annual scientific meetings. This spring, we have celebrated our 100th annual meeting at Pyungchang Ski Resort Area on May 7, 2005. In the spring meeting we usually have specially invited lecturers from other countries and symposium. It is a half day meeting and held in local areas in rotation. The Autumn meeting consists of the presentation of original papers, symposia and special lectures for two days. It is usually held in Seoul. The next autumn meeting will be held in Seoul, from November 10-11, 2005.

KATRD is now seeking more active international relations with other societies. We expect closer relations with the APSR as well. For that purpose more attractive and interesting programs to draw young members' attention should be developed.

For further information you can access to our society' home page. www.lungkorea.com

Se Hwa Yoo, M.D.

Hong Kong

In response to increasing sophistication and commitment of physicians, surgeons and allied health professionals in respiratory medicine, the Hong Kong Thoracic Society was established in 1986. The Society is committed to promote advancement in study and research, coordinate and facilitate educational activities, and enhance the prevention and treatment of respiratory disorders in Hong Kong and surrounding regions. Over the last two decades, the activities, membership and profile of the Society have grown considerably. The Society is now widely recognized as the leading respiratory society in Hong Kong and hosts an annual scientific and an autumn meeting, around ten clinical and scientific meetings, sponsors members to attend international and regional scientific meetings, and publishes four issues of its highly popular Newsletters annually. There has been a steady membership of around 1,000, including local

leading physicians, surgeons and allied health professionals. The council members and office bearers of the Society are highly regarded local leaders in the respiratory field. The Society, along with other friendly associations, have successfully organized many recent important and hugely successful international meetings in Hong Kong, including the 20th International Union Against Tuberculosis and Lung Disease Eastern-Region Conference (1999), International Hong Kong Allergy Forum (1994 and 1996), the 13th Asian Pacific Congress on Diseases of the Chest (1994), and the 9th Congress of the Asian Pacific Society of Respiriology (2004).

Kenneth Tsang, M.D.

Taiwan

The 2005 annual meeting of the Taiwan Society of Pulmonary and Critical Care Medicine (TSPCCM) is scheduled on 10 and 11 December, the venue is the National Taiwan University Medical College, Taipei. The main theme of the meeting is the Holoscopic View of Respiratory Disorders in Asia. We intend to invite experts around this region to discuss several key respiratory diseases, such as asthma, smoking-related lung disease, and respiratory infections.

Also, in this annual meeting, the members of the society are going to vote for new members of the executive committee.

Chong-Jen Yu, M.D.

Message from the Editorial Office July 2005

There is a lot to report about the Respiriology Journal since our last newsletter and we are keen to share the good news with you.

The Journal is in the early stages of converting its manuscript submission operation to being fully on-line. We will be using the Scholar One (Manuscript Central) computer system, which is used by the ATS and the ERS for their journals, and is fully supported by our publishers, Blackwell. We are very excited about this development as it will streamline the production of the Journal and make it much more competitive in a number of areas. It will facilitate a more rapid processing of manuscripts, a more transparent reviewing process and will also enhance managing the Journal and its activities. Moving to Scholar One will ensure that our manuscript

processing will be on par with the best respiratory journals worldwide.

Although you are no doubt already aware about the Thoracic Society of Australia and New Zealand joining the APSR en bloc, *Respirology* would like to extend its own special welcome. We look forward to a mutually beneficial relationship and to the TSANZ membership becoming more involved in the Journal. The TSANZ will have its own print run of the Journal. This will carry some advantages, including advertising which will help offset membership costs, and also promote specific respiratory activities in Australia and New Zealand.

The Pleural Disease Series is drawing to a close and I would like to thank Dr. Gary Lee and Dr. Steve Mutsaers for their support in running this series. I am delighted that this is being followed by a unique publishing event in the form of the Presidents Series. We have secured the agreement of the President or immediate Past President of the APSR, the ATS, the ACCP and the ERS to write an article on their area of research interest. This will be a unique and wonderful series to read. We are also advanced in planning our next review series which will be on Lung Cancer. Professor Neil Watkins from John Hopkins University and Professor Wah Kit Lam from Hong Kong University will be the series editors. We are very keen that the Journal acts as a bridge between the laboratory and the clinic, and with this in mind, most issues will publish a clinical review and a basic science review side by side.

The Journal has received its first ever impact factor. Only about 10% of scientific journals have an impact factor and these days a journal has to undergo a one year evaluation prior to being accepted for impact factor assessment. The journal is then evaluated over a two year period and the citation rate is calculated divided by the number of original articles published. We were informed that first ever impact factors are rarely above 0.50 and so we were extremely delighted when we were given a factor of 0.93, close to our original goal of 1.0. This outcome is the result of a huge team effort and I would certainly like to acknowledge the efforts of all our staff, our Associate Editors and Board, and our publishers Blackwell, as all have contributed to this achievement. In particular, I would like to thank all authors who submitted their work to the Journal with faith that we could provide a good publishing platform for their original

work. The challenge now is to maintain this success and to then slowly improve our position. Our target is to reach an impact factor of 2.0 within the next three years.

I appreciate everyone's support of the Journal. I would be happy to interact with anyone who has ideas on how to foster *Respirology* and welcome your original scientific publications for consideration.

Phil Thompson, M.D.
Editor-in-Chief, APSR

FORTHCOMING MEETINGS

2005

International Conference on Endothelin
American Thoracic Society
11-16 September 2005, Park City, Utah
Website: www.thoracic.org

15th European Respiratory Society Congress
17-21 September 2005, Copenhagen, Denmark
E-mail: info@ersnet.org
Website: www.ersnet.org

CHEST 2005 - Annual International Scientific
Assembly of the American College of Chest
Physicians (ACCP)
29 October - 03 November 2005, Montreal,
Canada
E-mail: registration@chestnet.org
Website: www.chestnet.org

10th Congress of the APSR and the 1st Joint
Congress of the APSR/ACCP
11-14 November 2005, Guangzhou, China
E-mail: apsr2005@asia.cmpmedica.com
Website: www.apsr2005.com

Paediatric Assembly of the European
Respiratory Society
12-15 November 2005, Prague, Czech Republic
Website: www.ersnet.org/ers

2006

42nd Annual Meeting of the Society of
Thoracic Surgeons
30 January-01 February 2006, New Orleans, USA
Email: sts@sbs.com
Website: www.sts.org

62nd annual AAAAI Meeting
3-7 March 2006, Miami Beach, USA
Website: www.aaaai.org/members/meetings

TSANZ Annual Scientific Meeting
24-29 March 2006, Canberra, Australia
Website: www.thoracic.org.au

ATS 2006 International Conference
19-24 May 2006, San Diego, California, USA
Website: www.thoracic.org

46th Annual Meeting of the Japanese
Respiratory Society
1-3 June 2006, Tokyo, Japan
Website: www.jrs.or.jp

European Respiratory Society Congress
2-6 September 2006, Munich, Germany
Website: www.ersnet.org

CHEST 2006
Annual International Scientific Assembly of
the American College of Chest Physicians
21-26 October 2006, Salt Lake City, USA
Website: www.chestnet.org

Notice from the Secretariat

The First Assembly Launching Meeting!

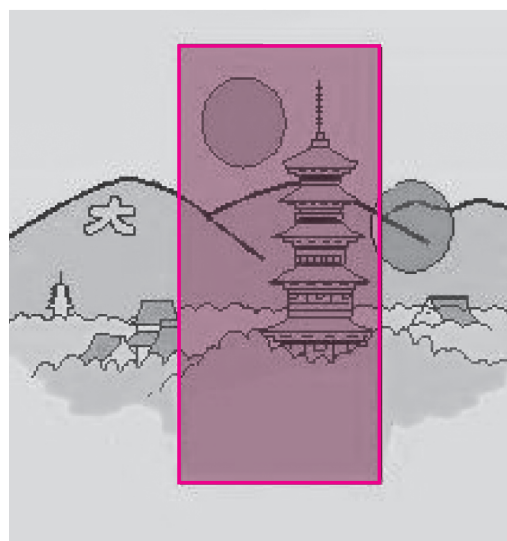
Please join "The First Assembly Launching Meeting" during the 10th Congress of the APSR. Details are as follows:

Time/Date: 17:30-19:00 Saturday,
12th November, 2005

Venue: Function Room 2-3, Dong Fang Hotel

Please see the message from the Secretary General on page 2-3 for more details.

11th Congress of the Asian Pacific Society of
Respirology (APSR)
19 – 22 November, 2006
Kyoto International Conference Hall, Japan



The APSR Annual General Meeting will be held
17:00-17:30 Saturday 12th November, 2005 in
Function Room 2-3, Dong Fang Hotel,
prior to the first Assembly launching meeting.

1st Asian Pacific Congress on Bronchology and Interventional Pulmonology

Date: November 26-27, 2005

Venue: International Conference Hall, Makuhari Messe
2-1 Nakase, Mihama-ku, Chiba City 261-0023 Japan
<http://www.m-messe.co.jp>

Submission Deadline for Abstracts: September 12, 2005

Registration Fee:

For non-members of the Japan Lung Cancer Society ¥ 20,000

Those who register for this congress may also participate in all of the programs of the 46th Annual Meeting of the Japan Lung Cancer Society (<http://www.jlcs2005.com>) to be held on November 25-26, 2005.

Official Language: English

Congress President: Takehiko Fujisawa, MD (Dept. of Thoracic Surgery, Graduate School of Medicine, Chiba University)

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Tel: +81-43-222-7171

Fax: +81-43-226-2172

E-mail: hai-geka@umin.ac.jp

Online registration is available at:

<http://www.apcb2005.com>

The Annual Meeting of the Japan Lung Cancer Society

<http://jlcs2005.com>

Officers of the APSR

President : Yoshinosuke Fukuchi
Congress President : Nan Shan Zhong
Congress President-elect : Yoshinosuke Fukuchi
Past President/Past Congress President : Wah Kit Lam
Secretary General : Norbert Berend
Treasurer : Takashi Horie
Editor-in-Chief : Philip J Thompson

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China:	You Ning Liu Chen Wang	Malaysia:	Chong-Kin Liam B.M.Z. Zainudin
Hong Kong:	Mary S-M Ip Kenneth W-T Tsang Yun W.T. Mok	New Zealand:	Allen Liang
Indonesia:	Faisal Yunus	Philippines:	Jennifer A. Wi
Japan:	Takayuki Kuriyama Masaharu Nishimura Toshihiro Nukiwa Hidetada Sasaki	Singapore:	Cynthia B-E Chee Oh M. Chay
		Taiwan:	Pan-Chyr Yang Hsu-Tah Kuo Chi-Yi Chen
		Thailand:	Chaivej Nuchprayoon

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Membership Committee:

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Education Committee:

Wan-Cheng Tan (Chairperson)

Past-Presidents: Michiyoshi Harasawa, Wan-Chen Tan, Wei-Ci Luo, Ann J. Woolcock, Shiro Kira, Wah Kit Lam

Presidents of the Congresses:

1st Congress	Tokyo	1988	Michiyoshi Harasawa
2nd Congress	Bali	1990	Hood Alsagaff
3rd Congress	Singapore	1993	Wan-Cheng Tan
4th Congress	Beijing	1996	Wei-Ci Luo
5th Congress	Sydney	1998	J. Paul Seale
6th Congress	Florence	2000	Ann J. Woolcock
7th Congress	Taiwan	2002	Kwen-Tay Luh
8th Congress	Selangor	2003	Chong-Kin Liam
9th Congress	Hong Kong	2004	Wah Kit Lam
10th Congress	Guangzhou	2005	Nan Shan Zhong

The Asian Pacific Society of Respiratory

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