Message from the President

Dear APSR members, friends and colleagues!

It is with great pleasure to write to you again as we near the halfway mark in the year. Hope that this finds you all well and enjoying a good work-life balance to avoid the many stresses that we all face in modern life.

The APSR has kept many of us busy due to the great opportunities that come up for us individually or collectively to contribute to improving lung health in our Asia-Pacific region. Not only are we working to come up with new initiatives and benefits for our members, we are also working to contribute to the global efforts to address lung disease and promote lung health.

For APSR members, we are working to develop new educational and training opportunities, and seeking funding to undertake these activities. We are trying to work out ways to bring educational activities to our en bloc member countries, to serve our members who are not able to attend our annual Congress for one reason or another. We know the high quality talks and presentations at our Congress are highly sought after, and we are considering how to bring “best of APSR” topics to our member countries after the Congress to share the learning and teaching from our superb Faculty.

In this regard, the 2017 Congress in Sydney is advancing nicely with many abstracts already submitted, and the programme is well advanced in preparation thanks to the hard work from the CCC and LCC teams, led by Philip Eng, Jane Bourke, Matthew Peters, and wonderfully supported by Tanya Buchanan and the TSANZ team.

Our members have also been very generous with donations to the APSR to enable it to achieve tax-free status which in turn will allow us to save every penny which can then be used to advance our APSR mission. Also the Members’ Honour Roll has been popular and allows each of us to pay respect and honour our own teachers and mentors www.apsresp.org/members/honour-roll.php.

In February, the APSR attended the FIRS annual meeting as a founder member and this organisation continues to grow and represent us and our Sister Societies on the global stage. GINA and GOLD are now associate FIRS members. Activities included the new FIRS Update on Global Impact of Respiratory Disease. The publication was subsequently launched at the ATS meeting and inaugural 70th World Health Assembly FIRS side event and available at www.firsnet.org/images/publications/The_Global_Impact_of_Respiratory_Disease.pdf.

In April, the FIRS held its side event with the Health Minister of Uruguay speaking with partners NCDA, Vital Strategies, The Union, and GARD. There, the new FIRS Charter for Lung Health, first proposed by the APSR at the FIRS Kyoto meeting in 2016, was launched to draw attention to the urgent need to address the large burden of disease due to lung disease, and is an important call to action for the world. We are looking for 100,000 signatories to show support and encourage the WHO and global health leaders to recognise and take action. If you haven’t yet signed up, please do so at www.change.org/p/the-director-general-of-the-world-health-organization-sign-the-charter-for-lung-health and encourage all your contacts and colleagues. Thanks!

The APSR had also proposed that the FIRS establish a new World Lung Day. This was formally announced at the 70th WHA side event, and the World Lung Day has been set for 25 September. There will be new public awareness activities to celebrate the day, ensuring visibility and impact to emphasize global lung health. If you have any ideas, please forward them to the Secretariat.

Lastly, our colleague and Pan African Thoracic Society (PATS) President, Heather Zar, has invited two APSR members to speak at the 2nd PATS conference in Durban, SA that will be held on 12-15 April 2018. PATS will kindly provide complimentary registration for their very unique conference to our two members, who will need to fund their own travel and accommodation. If you are interested, please send your self
nominated and brief CV to the Secretariat for us to submit on your behalf. First come first served so please don’t be shy.

That’s all for now, please do keep in touch, let us know how we can respond to your needs. We are always looking for active members to contribute, so please also email, text, WhatsApp, Facetime, iMessage or whichever platform you like, to the Secretariat – they are totally modern and tech-savvy! In this regard, please enjoy the website enhancements, the APSR Timeline and other initiatives that are coming, courtesy of our dedicated webmaster.

Bye for now and take care; see you in Sydney before too long; and thanks for your contribution to our mission which is the advancement and promotion of knowledge of the respiratory system in health and disease.

Kwun Fong

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Message from Editor-in-Chief of Respirology

Since taking over the editorship of Respirology in November 2016, we’ve been busy familiarizing ourselves with the journal’s editorial processes, soliciting Editorials, planning new Review Series, meeting authors and Editorial Board members, and talking to the publishing team.

The publisher recently shared their 2016 Annual Report and we’re delighted to see that Respirology’s article downloads have continued to increase at a rate of 25%, with Australia, China and Japan among the top five downloading countries. In addition, readers have been downloading articles via the Respirology journal app which was launched at the end of 2016. To further increase the visibility of Respirology online and via the mobile app, the journal is increasing its publication frequency from eight to twelve issues per year from 2018, meaning that APSR members will be able to access a new issue every month.

We’ve started increasing the number of Editorials per issue to draw more attention to the interesting research published by Respirology. It’s also an opportunity to give additional exposure to papers that contribute to a better understanding of region-specific health issues. Keeping regional health issues in mind, we’re preparing several new Invited Review Series that will be of significant interest to the APSR community, including a series on Emerging Infections in the Asia-Pacific scheduled to start publication in July, as well as a series on the latest updates in Tuberculosis research to be published in 2018. Currently, we highly recommend the review series on Respiratory Sleep Disorders and Seeking Innovative Solutions for Severe Asthma, both featuring excellent contributions by internationally recognized experts on recent developments and advances in the areas of sleep and asthma.

In April, Respirology participated in the quadruple publication of the Executive Summary of the 2017 Global Strategy for the Diagnosis, Management and Prevention of Chronic Obstructive Lung Disease. Previous executive summaries of the GOLD report were published exclusively in the American Journal of Respiratory and Critical Care Medicine, and we hope that this year’s co-publication in Respirology will facilitate access to the report by respiratory physicians in the Asia-Pacific region. In an Editorial in the May issue, Dr Nishimura, a member of the GOLD Board of Directors, discusses the major changes in the 2017 report. The release of the 2017 GOLD report happened to coincide with the publication of the final review in the Respirology series that highlighted the most important lessons learned over the past decade regarding the pathogenesis, diagnosis and management of COPD with a particular focus on the Asia-Pacific region. The key messages from the reviews in the series have been eloquently summarized in the series epilogue also published in the May issue.

At the recent TSANZ meeting in Canberra, we facilitated a Meet the Editor session and met with future authors. We hope to be involved with similar educational sessions at future APSR meetings. We’ve also met with several members of the Editorial Board at various meetings and we look forward to meeting other members in the near future. We warmly welcome two new Associate Editors to the Editorial Board – Stefano Aliberti (Italy) and Michael Keane (Ireland). These appointments followed the departure of Martin Kolb and James Chalmers who were offered positions at other journals. We thank Martin and James for their significant contributions and commitment to the journal and we wish them well in their new roles.

Martin Kolb has accepted the Editor-in-Chief position at the European Respiratory Journal. During the ten years Martin was with Respirology, he was instrumental in setting up and supporting the pre-screening step of submitted manuscripts, a process which has greatly improved the decision turnaround time.

Bob Hancox and Jeffrey Horowitz have kindly agreed to take over Martin’s pre-screening role.

We look forward to working with the Editorial Board, the APSR and Wiley to achieve the goals we set out for the journal; i.e. supporting and growing the APSR’s flagship journal with highly relevant and educational content for its Asia-Pacific readership. We thank the APSR Executive Committee and staff at the APSR Secretariat, as well as the staff at Wiley and the Editorial Office, for their continued professional support.

Philip Bardin
Paul Reynolds

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Message from Editor-in-Chief of Respirology Case Reports

I have just received the report from our...
publisher, Wiley, and I am pleased to see that Respirology Case Reports continues to grow. The number of downloads has continued to increase from the previous year to over 60,000 for 2016 and the journal’s readership is truly international which is very gratifying.

Respirology Case Reports continues to receive a steady stream of submissions from different countries, with an increase this year of submissions coming from the U.S. We also have seen a slight increase in the number of manuscripts received so far compared to the same period last year, and we have published more manuscripts this year so far compared to the same period last year. Our turn-around time (on average less than 20 days) and acceptance rate (80%) remain stable. The journal continues to be widely marketed by Wiley. The journal has an electronic table of content (eTOC) alerts. We have continued to advertise the journal on the Respirology and APSR websites, as well as those of other societies.

I would like to thank the members of the APSR and its en bloc member societies for their support of the journal, since 50% of the articles that we published last year were submitted by authors belonging to these societies. To reciprocate this support, we have negotiated with Wiley to keep the open access publication fee the same as it was last year for the APSR members while we had to increase the non-member fee this year. We hope that this will encourage authors to join the APSR and benefit from the many advantages society membership has to offer.

Christopher Lai

Message from the APSR Education Committee

The APSR Education Committee has continued to work with contributions from dedicated committee members including Dr Azuma Arata, Dr Shu Hashimoto, Dr Kazuhsia Takahashi, Dr Aliina Altymyysheva, Dr Sita Andarini, Dr Fumihiro Asano, Dr Helmy Haja Mydin, Dr Diah Handayani, Dr Meng-chih Lin, Dr Guy Marks, Dr Henry Marshall, Dr Patrick Gerald Moral, Dr Ngo-quy Cho, Dr Manil Peiris and Dr Chin-kook Rhee. Most of them represent APSR en bloc member societies.

Educational Seminar of APSR (ESAP)
We have just received applications for hosting ESAP in 2017. The Education Committee together with the APSR Executive Committee hope to approve relevant ones soon. We are looking forward to receiving further applications for hosting ESAPs in 2017.

APSR Virtual Library
With contributions from the APSR Executive Committee members and Assembly members, we have started to build up the APSR Virtual Library with educational cases deposited for members’ access and education. Members are encouraged to take this chance to share further cases with colleagues in APSR.

APSR Respiratory Updates
With continued support from the APSR Education Committee members and expert members in the region, we have continued to deliver APSR Respiratory Updates in 2017. We appreciate the contributions from experts and researchers from different regions. New and archived issues are all available on the APSR website: www.apsresp.org/publications/resp-updates.html. We continue to invite authors to share their views on update literature in their areas of expertise.

APSR Endorsement for CHEST Expert Panel Reports
Following a request from CHEST (American College of Chest Physicians), the APSR has reviewed and provided APSR endorsement for the following CHEST Expert Panel Report:

Anne B. Chang; John J. Oppenheimer, Miles M. Weinberger, Bruce K. Rubin, Cameron C. Grant, Kelly Weir and Richard S. Irwin

Dr Anne Chang is an active member of the APSR Paediatric Respirology Assembly. We would like to congratulate Dr Chang for authoring this important expert panel report. Two more CHEST Expert Panel Reports are under review.

Future Plans:
In 2017, the committee will keep working on the APSR Virtual Library which is available on the APSR website for members’ access. APSR members are strongly encouraged to submit cases for sharing.

I would like to take this opportunity to thank all the APSR Education Committee members, as well as the APSR Executive Committee and Councillors, for their continued support. We are looking forward to your continued participation in future APSR education activities.

David CL Lam

Message from co-chairs of the APSR Industry Taskforce

The Taskforce discussed the development of a Charter and prospectus for various activities and initiatives planned by the APSR. The sponsorship items included APSR Scholarships for Short-Term Research / Training, APSR Fellowships for Post-Graduate Training, APSR Annual Congress Static Electronic Library, APSR Annual Congress Live Streaming, APSR Virtual Case Library, Education Seminars (ESAPS), Best of APSR Roadshows, APSR Demonstration Projects, APSR Themed
Webinar Series, and APSR Industry Collaborative Educational Initiative. The prospectus will be sent to potential industry sponsors once approved by the APSR Executive Committee.

Norbert Berend
Lai Ngoh Hooi

Message from Assembly Heads

Paediatric Lung Disease
The Paediatric Lung Disease Assembly aims to develop and share new knowledge and research advances in all aspects of childhood respiratory diseases for members to increase their expertise in clinical research and practice. Another important aim of the assembly is to provide training and education opportunities for trainees, to equip them to be our next generation of leaders in this specialty. The main interests in the Paediatric Lung Disease Assembly include sleep-related breathing disorders, infectious diseases affecting both upper and lower airways, wheezing disorders, allergy, non-cystic fibrosis bronchiectasis, interstitial lung diseases, use of non-invasive ventilation for the management of acute and chronic respiratory conditions and home ventilation.

The Assembly actively enrolls APSR members who are keen to develop knowledge, establish contacts and networks, present research ideas, and build research collaborations in all aspects of Paediatric Lung Diseases. The Assembly welcomes APSR senior members who wish to share their knowledge in training and educating the next generation in this specialty. Lastly, the Assembly wishes to meet APSR members who are keen to submit ideas for talks and presentations in future APSR Annual Congresses.

Albert Martin Li

Respiratory Structure and Function
The Respiratory Structure and Function Assembly is pleased to announce that the Assembly will help young assembly members to attend the congress of the APSR in Sydney. Young assembly members under 40 years old, whose abstracts are accepted for the APSR 2017 Sydney Congress, are eligible to apply for the Respiratory Structure and Function Assembly Travel Grant. The Assembly will award USD 900 for three young Assembly members (USD 300 each). Please contact me via www.apsresp.org/login/login.php?from=assemblies/14-resp-struct-func.php or the APSR Secretariat for details.

Yasutaka Nakano

Message from the 22\textsuperscript{nd} Congress President

Excitement is building as the APSR Congress 2017 in Sydney is drawing nearer. Interest is pleasingly very high. As we approach the closure of abstract submission, over 600 abstracts have been received and the various Assemblies will commence the task of abstract review. In August, there will a call for late-breaking abstracts. The Organising Committee will be reserving some presentation opportunities for a limited number of high quality abstracts. The opening ceremony will pay special acknowledgment to Australian indigenous traditions. In a break with past practice, a major opening symposium will follow - this year the topic will be Air Pollution and Lung Health.

The social programme will commence with a Welcome Reception overlooking the spectacular Darling Harbour and will peak at the Conference Dinner.

There will be the opportunities to see the sights of Sydney from Darling Harbour at night, to the Harbour Bridge, that can be climbed by the adventurous on an organised tour, and the Opera House, or slightly further afield to Bondi or Manly Beach, or the world-famous Taronga Zoo. A range of dining venues are within walking distance, from casual to high-end, with food traditional to all corners of the globe.

All assemblies have prepared stimulating major symposia featuring local, regional and high quality international speakers. Post-Graduate Courses on offer will include such diverse topics as severe asthma and establishing a severe asthma service, pulmonary rehabilitation, tobacco control action at a community level, and managing nicotine dependence in inpatient and outpatient settings. APSR attendees will soon also have the opportunity to register for a full-day course on Thoracic Ultrasound. We look forward to welcoming you to exciting Sydney in November.
Report from APSR en bloc societies

Malaysian Thoracic Society (MTS)
CPD, CME and health promotional activities held under the auspices of the MTS
The MTS organised a number of educational activities including the first of the Respiratory Fellowship Lecture Series, KIDZ Asthma Education Programme Train the Trainer workshop and Basic Lung Function Test Certification Course 2017 Phase I.

CME grant and research grant under the auspices of the MTS
The CME grant disbursed funds for members to attend CME activities including educational meetings organised under the auspices of the MTS and related organisations, held both locally and overseas. The Research Grant Subcommittee approved a total of RM120,000 for each of the years 2016 and 2017 for six research projects undertaken by its members.

MTS Annual Congress 2017
The MTS 2017 Annual Congress will be held in Sunway Putra Hotel on 20-23 July 2017. It will be co-organised with the LFM. Dr Nurhayati Mohd Marzuki has been appointed as Organising Chair. Dr Helmy Haja Mydin heads the Adult scientific committee, Dr Asiah Kassim and Dr Surendran Thavagnanam are co-chairs of the Paediatric Scientific committee.

Sri Lanka College of Pulmonologists (SLCP)
World tuberculosis day; 24 March 2017
In parallel with “World TB Day” the SLCP conducted many events such as a media conference, academic events, a public awareness programme, health walks and art competitions island-wide, to improve public awareness on tuberculosis. The media conference was held in Colombo, which provoked public awareness about tuberculosis with the participation of many college members.

In Kandy, a symposium on tuberculosis was organized with participation of many other chest physicians, which included lectures on diagnostics in tuberculosis and clinical uses, tuberculosis in special circumstances, preventive measures in tuberculosis, and many other topics. In Anuradhapura, a public health walk and arts competition were organized by the District chest clinic. In Hatton, an awareness programme was conducted for estate medical assistants and estate health care workers to increase awareness on tuberculosis.

The national tuberculosis day programme was conducted in Kaluthara by national programme for tuberculosis control and chest diseases (NPTCCD), which included a health walk and art competition organized to create public awareness on tuberculosis.

Similar workshops and public awareness programmes were conducted by respiratory teams at Badulla and Kurunegala districts.

Jane Bourke
Matthew Peters

Picture 1: Media conference on improving tuberculosis awareness (23 March 2017) with the participation of Dr S Muhunthan (President), Dr K Gunasekera (Past President), and Dr G Perera and Dr D Yasaratne (Joint Secretaries).

Pictures 2 & 3: Tuberculosis walk at Eppawala, Anuradhapura, with the participation Dr D Yasaratne, consultant respiratory physician. The Regional Director of Health Services at Anuradhapura was also present.

Pictures 4 & 5: Tuberculosis awareness programme at Hatton, Nuwara Eliya, under the supervision of Dr D Dassanayake, consultant respiratory physician.

The national tuberculosis day programme was conducted in Kaluthara by national programme for tuberculosis control and chest diseases (NPTCCD), which included a health walk and art competition organized to create public awareness on tuberculosis.

Similar workshops and public awareness programmes were conducted by respiratory teams at Badulla and Kurunegala districts.

Pictures 6 & 7: National TB day programme at Kaluthara with the participation of Dr R Karunatillake, consultant respiratory physician.
Taiwan Society of Pulmonary and Critical Care Medicine (TSPCCM)

Pay-for-performance (P4P) programmes are being increasingly conducted worldwide in the healthcare system to improve effectiveness and efficiency of health care. COPD is currently the fourth leading cause of death and is predicted to become the third by 2020. In Taiwan, the prevalence of COPD was estimated to be 6.1% independent of the defined diagnostic criteria. To improve the health qualities and treatment outcomes of COPD patients, the Bureau of National Health Insurance (NHI) implemented a P4P programme for COPD in April 2017. This new programme provides financial incentives to motivate the participation of physicians who are able to establish patient-centered care and enhance the value of patient monitoring and management. The main objectives of this new payment programme are to offer a comprehensive care system, improve quality of healthcare, as well as reduce emergency department visits, ICU admission and the cost burden of COPD.

To provide a comprehensive care system for COPD, financial incentives, medical resources, educational training for participations and health education for patients, are integrated into this programme.

Hospitals/clinics that enrol in the programme can receive extra payment for case management, smoking cessation success, execution of pulmonary rehabilitation, medication adherence, and reduction in COPD-related emergency visits and hospitalizations. The Taiwan COPD Clinical Treatment Guideline is used to establish a unified standard for physicians and provide evidence-based analyses of individual agents commonly used in the treatment of COPD. Training certification classes for this programme are provided by the Taiwan Society of Pulmonary and Critical Care Medicine (TSPCCM) to improve the skill and knowledge of participating physicians, case managers and respiratory therapists.

Patient decision aid and self-management tools are provided by the TSPCCM for informing patients about available treatments, along with potential benefits, risks and costs, during clinical encounters.

T-COPD, the network referral system, creates direct communication between primary care providers and specialist reviewers. Public health campaigns are launched to raise awareness and educate the public about COPD. This payment programme aimed to provide a comprehensive care system and create a trilateral win-win situation for patients, physicians, and insurers, in the field of COPD.

Report of the APSR-ISRD Joint Session at the ATS International Conference in Washington DC, Saturday, 20 May 2017

This networking event highlighted the strengthening relationship between the APSR-ISRD and the TSANZ to help promote respiratory science in our Asia-Pacific region, and further the close ties and friendship that exist between our Societies. The meeting was particularly well supported with over 80 attendees who were pleased to participate in the 20 facilitated poster presentations and 21 mini-oral presentations chaired by Kwan Fung, APSR President, and Chunxue Bai, ISRD President.

Notably, young TSANZ member Jayne Carberry received the inaugural award for Best Abstract for the APSR-ISRD Joint Session at the ATS. Jade Jaffar also received an Abstract Award.

A number of informative and broad ranging presentations were made throughout the meeting including from James Beck, ATS Secretary-Treasurer, who also presented the Best Abstract award; Michiaki Mishima, APSR Immediate Past-President, who spoke on “COPD is a systemic disease”: Allan Glanville, TSANZ President, on “Viruses and the Lung: What you See is not What you Get!”; and Chunxue Bai, President of the ISRD 2017 and Chair of the APSR Research Committee on “Lung cancer in China”.

The meeting was graced by the presence of ATS President David Gozal, and ATS President-Elect Marc Moss, who met with the presenters and awardees. Jane Bourke, joint President of the next APSR Congress in Sydney 2017 was in attendance, as was Tanya Buchanan, CEO TSANZ.

A firm blueprint has now been established for ongoing scientific discussion at the ATS International Conference...
Conference to foster collaboration between our Societies and promote excellence in research endeavours. See you in Sydney at the APSR 2017!

Allan R Glanville

Report from the award winners who attended the ATS Congress

**APSR Travel Award**

Thank you for choosing me for an APSR Travel Award to attend the ATS International conference 2017 in Washington, DC. It was an honour to have received a wonderful award.

This conference offered a wide range of topics on respiratory medicine both for basic scientists and healthcare professionals, and provided me an important opportunity to learn the latest and the most advanced developments in the field.

I got an opportunity to conduct the research presentation in a thematic poster session entitled “C38. UNDERSTANDING THERAPEUTICS IN IPF”. The title of my poster was “Risk Factors for Hepatotoxicity of Nintedanib in Japanese Patients with Idiopathic Pulmonary Fibrosis”. Nintedanib was approved for idiopathic pulmonary fibrosis (IPF) and was clinically deployed from September 2015. However, after the commercialization of nintedanib in Japan, a high incidence of hepatotoxicity resulting in treatment interruption was noted in IPF patients treated with nintedanib in our hospital. This study aimed to clarify the risk factors for hepatotoxicity of nintedanib. In the present study, all consecutive cases of IPF newly treated with nintedanib at a dose of 150 mg twice daily from September 2015 to September 2016 were enrolled. Of the 68 patients enrolled in this study, 46 (67.6%) exhibited AST/ALT elevation and 16 (23.5%) also had a CTCAE grade ≥2. Body surface area (BSA) was significantly lower in the CTCAE grade ≥2 group than in another group (1.52 m$^2$ vs 1.67 m$^2$, p=0.0484). A multivariate logistic regression analysis showed that the association between BSA and AST/ALT elevation with CTCAE grade ≥2 was statistically significant (p=0.0457). Eight of ten patients who resumed nintedanib at a reduced dose of 100 mg twice daily after treatment interruption due to hepatotoxicity, did not again develop AST/ALT elevation. Recently, an interim analysis of the INPULSIS®-ON study showed that the beneficial effect of nintedanib on slowing disease progression was maintained and the change from baseline FVC was consistent over two years or more. Thus, it is very important to continue nintedanib treatment for as long as possible without interruption and/or discontinuation by setting the appropriate dosage for individual patients. For patients with a small physique, especially Japanese and East Asian patients with a BSA < 1.58 m$^2$, it would be a good option to start nintedanib at a dose of 100 mg twice daily and then increase the dose to 150 mg twice daily if possible after confirming its safety.

Satoshi Ikeda
Kanagawa Cardiovascular and Respiratory Center, Japan

There were concerns about my English skill and whether or not the attendees, especially from the US or Europe, have an interest in this issue. However, there was a large number of meaningful subjects in our session, thus many participants came to see. I was able to hear many valuable opinions, which will reinforce our future study.

Besides the poster sessions, I also participated in a post-graduate course (PG4), meet the professor sessions (MP406 and 508), sunrise seminar (SS105), PRO/CON DEBATE (A82), and Clinical Year in review (B1). I received a lot of encouragement from the industrious colleagues from around the world.

Once again, from the bottom of my heart, I am most grateful to have been given this opportunity to attend the ATS International Conference 2017.

**APSR Travel Award**

The American Thoracic Society (ATS) International Conference was held in Washington DC, USA (20-24 May 2017), where I presented both an oral and a poster presentation. The abstract I presented was titled ‘The effect of maternal hypoxia-induced intrauterine growth restriction and sexual dimorphism on airway responsiveness in juvenile mice’. The APSR also awarded me an Abstract Award and therefore, I was invited to present the same abstract as a poster at the special APSR-International Symposium of Respiratory Disease (ISRD) Joint-Session. The aim of my study was to show the impact of intrauterine growth restriction on the respiratory system. My maternal hypoxia-induced intrauterine growth restriction rodent model showed that low birth weight results in airway hyper-responsiveness and structure abnormalities, which may increase susceptibility to the development of asthma. Importantly, the impact of intrauterine growth restriction on the respiratory system is sex and age-dependent. I concluded that sexual dimorphism in the response to IUGR may contribute to differences in the prevalence of asthma between males and
females in childhood and adulthood.

Dr Michiaki Mishima (left), Dr Kimberley Wang (Middle) and Dr Kwun Fong (Right)

The main benefit of the trip was to be able to present my abstract as an oral presentation at the ATS International Conference. Opportunities to be able to present at international meetings is essential as it acts as a platform to expose your name and research expertise to scientists from all over the world. Through the question and answer sessions after my presentations, I had really good feedback on the interpretation of my results and what further experiments I should do. For example, one feedback suggested superimposing my maternal hypoxia-induced intrauterine growth restriction mouse model in an allergy or virus setting. I was also advised to further explore the epigenetics mechanism of the intrauterine growth restriction offspring. In addition, I was able to meet some respiratory scientists who were authors of papers I've been reading. It was good to be able to put a face to a name. In addition, there was a session about early origins research at the ATS International Conference, which is my research area of interest. I was able to ask questions to other scientists who were looking at a similar field as mine. I also participated in the ATS International Conference mentoring programme, which allowed me to get mentorship and discuss career development options with Dr. Reynold A. Panettieri Jr. He is the Professor and Vice Chancellor for Translational Medicine and Science at Rutgers University. This trip definitely met my expectations and further advanced my knowledge in the respiratory field. Lastly, I would like to sincerely thank the APSR Committee for providing me with an APSR Travel Award to attend the ATS International Conference 2017.

Kimberley Wang
Telethon Kids Institute, Australia

APSR Encouragement Award
I was highly honoured to have been chosen as the awardee of the Encouragement Award by the APSR at the 2017 American Thoracic Society (ATS) International Conference. As a young clinical researcher, ATS always provided me with great opportunities to learn about the latest clinical advancements and findings and to discuss my research speciality with other researchers from all over the world. I am grateful to the APSR for giving me the chance to visit ATS 2017 in Washington, DC.

I have been specializing in sleep medicine for eight years and focusing on the connection between sleep disorders and cardiovascular diseases in actual clinical settings. At the conference, I presented the results of our clinical randomized trial comparing the effect of adaptive servo ventilation (ASV) and nocturnal oxygen therapy for chronic heart failure (CHF) patients with sleep disordered breathing (SDB) in an abstract entitled “Association of improvement in heart function with changes in sleep parameters in chronic heart failure patients treated for sleep apnea”. (Washington Convention Center, 21 May 2017, Abstract number pA4500.) SDB is an independent risk factor for mortality among CHF patients and the clinical effects of several SDB treatment modalities, such as ASV and oxygen therapy, have been investigated. While some previous trials reported that ASV improved not only SDB but also cardiac function, a recent world-wide large clinical trial showed that all-cause and cardiovascular mortality were both increased with ASV therapy. Thus, the effects of ASV for CHF patients with SDB remain controversial and many sleep specialists and cardiologists are interested in this clinical topic.

Because of this background, many attendees visited my poster presentation. I enjoyed the fulfilling discussions with them. This experience motivated me to keep dedicating my career to clinical sleep medicine. The APSR Encouragement Award provided important support for my travel to Washington DC and my research career. I would like to show my deep appreciation for the APSR’s support and I hope that the APSR will continue to support young investigators to expand their research possibilities.

References

Kimihiko Murase
Kyoto University, Japan

**Message from FIRS Executive Director**

Taking stock of global lung disease, the International Respiratory Societies found alarming results: 65 million people suffer from chronic obstructive pulmonary disease and 3 million die from it each year, making it the third leading cause of death worldwide; 10 million people develop tuberculosis and 1.4 million die from it each year, making it the most common lethal infectious disease; 1.6 million people die from lung cancer each year, making it the most deadly cancer ever; 334 million people suffer from asthma, making it the most common chronic disease of childhood; pneumonia kills millions of people each year making it a leading cause of death in the very young and very old. At least 2 billion people are exposed to toxic indoor smoke; 1 billion inhale polluted outdoor air; and 1 billion are exposed to tobacco smoke. These are only a few of the formidable statistics—an additional tragedy is that many conditions are getting worse.

The Forum of International Respiratory Societies (FIRS), of which the Asian Pacific Society of Respirology is a founding member, brought this deplorable state to the attention of the world health community at the recent (70th) World Health Assembly meeting in Geneva, by introducing their new report on the impact of respiratory disease in the world www.firsnet.org/images/publications/The_Global_Impact_of_Respiratory_Disease.pdf.

At the same meeting, FIRS proposed a multipronged campaign to combat lung disease, including naming September 25 World Lung Day. At this event, the Health Minister of Uruguay told of its country’s struggle to develop the most comprehensive national anti-tobacco program in the Western hemisphere and how these lessons could be applied to other countries. Leaders from the World Health Organization and other organizations told of the threat of air pollution and the urgency for corrective action.

To empower a broad community, FIRS launched the World Charter for Lung Health (www.firsnet.org/publications/charter) inviting everyone to sign this petition addressed to the Director General of the World Health Organization to act on this direful health issue. FIRS aims to get 100,000 signatories and use it to rally activities around the world to reduce global lung disease. Please sign up, and share this call for action with your professional, advocacy, and social networks and those of your friends and families to do your part as global citizens to improve lung health. (www.change.org/p/the-director-general-of-the-world-health-organization-sign-the-charter-for-lung-health)

Dr Jorge Basso,
The Health Minister of Uruguay signing the Charter with Dr Kwun Fong guiding him

Dr Jørgen Vestbo (Left),
Dr Dean Schraufnagel (Middle),
Dr Kwun Fong (Right),

Working with its member organizations, the World Health Organization, and other partnering organizations, FIRS is committed to increasing awareness and increased action to promote lung health. FIRS also invites organizations to sign on join the fight with awareness and action.

Dean Schraufnagel

**Forthcoming Meetings**

**2017**

Respire 9: 2017 Annual Academic Sessions of the Sri-Lanka College of Pulmonologists
6-8 July
Colombo, Sri Lanka
Email: slcpsessions2017@gmail.com apsl@slt.net.lk
Website: www.cops.lk

Malaysian Thoracic Society Congress 2017
Kuala Lumpur, Malaysia
20 July: Congress workshops
21-23 July: Main Congress
Email: m.thoracicsociety@gmail.com, secretariat@mts.org.my
Notice from the Secretariat

Invitation to bid for the 2020 Congress!
We invite you to make a proposal to host the 25th Congress of the APSR in 2020. Bids will be considered at the next Executive Committee Meeting. You will be asked to present your thoracic society’s plans for the arrangements, financial planning and infrastructure of the event (Local Congress Committee, etc.). Please contact the Secretariat in Tokyo for more information. (apsrinfo@theapsr.org)