Dear APSR members, friends and colleagues!

It is hard to believe that another year is past, as we look forward to the New Year. We hope that you have had a good year and thank you for your support for the APSR, as we work together to achieve our mission and vision of improving lung health in the Asia-Pacific region. It is only through the hard work of us all as proud members to contribute to help our communities enjoy healthy lungs and clean air.

It has been a busy year for the APSR, and I have had the wonderful honour and humbling experience of serving the APSR with the much appreciated support of APSR members, ranging from the senior members of our en bloc Societies to our newest members. These members inspire me with their kind care for people with lung disease, and excite me with their great new ideas and innovations for sustaining the APSR well into the future. Also a great thanks to the wonderful Secretariat led by Mr Yasutomi Yamanaka with Ms Suga Konno, Ms Rina Kishigami, Ms Reiko Matsui and Ms Shiho Minagawa, working hand in hand with the Office bearers and members of our wonderful Society.

2017 has been a busy year.

APSR achievements

APSR processes and procedures continue to modernise with the new Troika Leadership structure for the assemblies, starting with renewed energy and projects. Of course, they build on the foundation work of their predecessors and we thank Drs Philip Eng, Yasuhiro Yamauchi, Shu Hashimoto, Soon-Hee Jung, Charles Yu, Diahn-Warng Perng, Kittipong Maneechotesuwan, Kazuo Chin, Albert Li, Yasutaka Nakano, Hiroshi Kimura, Masahito Ebina, Hironori Sagara and Taisuke Jo who have served our assemblies by contributing their immense skills and diligence. This new Troika structure is working well, increasing opportunities for APSR members (including both senior as Head and Head-Elect, and junior as Deputy-Head) to be more involved, and with progress on roles, modernisation of nominations and elections, and funding support for the next generation of researchers.

The Chair of the Educational Committee, Dr David Lam, has recruited many more talented members to contribute to the vital job of helping us train and educate the next and current generations of lung clinicians. They have helped develop ESAPs, reviewed documents externally submitted for APSR endorsement and a range of other education activities as highlighted in their report.

Dr Yoichi Nakanishi, our Treasurer last year, continues to bring the highest level of care in ensuring our financial sustainability in challenging times, and we are very grateful for his careful work that will allow the APSR to achieve its aims.

Thanks to our continuing Industry Taskforce co-chairs (Dr Hooi and Dr Berend), the APSR is constantly improving its clear and transparent framework for working with industry and sponsors so that we can collaborate to help people with lung disease in accordance with the highest levels of ethical and responsible standards.

Respirology, under the leadership of Drs Paul Reynolds and Philip Bardin, stepping into the giant shoes of Dr Peter Eastwood, together with Respirology Case Reports Editor Dr Christopher Lai, continue to flourish, outstandingly supported by Lieve Bultynck and her highly skilled team. We are very appreciative for their diligence and commitment to producing the highest quality journals and this is well reflected by their output and extremely well-regarded reputation. Please continue to support and submit articles to our journal.
Our congress remains the focal point of our educational and scientific endeavours and we are incredibly grateful to Drs Matthew Peters and Jane Bourke, co-congress presidents, their team and the Thoracic Society of Australia and New Zealand, for their tireless work for another successful and memorable APSR Congress 2017 in Sydney that underpins our mission and vision. May I please encourage all of you to also plan for this year’s Taipei Congress (29 November-2 December) which is promising to be memorable, already in the preparation stage, and then for the 2019 Congress in Vietnam (14-17 November).

2017 has been a very positive year for collaborations on both individual / organisational and regional / global perspectives as we strongly believe in working together to achieve our mutual aim of better lung health for all. The APSR has been working with the FIRS and our sister societies to contribute to better lung health. The APSR supported the FIRS side-event at the WHO World Health Assembly meeting in May when the updated Global Report of Lung Diseases was announced with a Call to Action to interested parties to support a petition to the Director-General of WHO (please sign up to the Charter here, www.firsnet.org/publications/charter) and underpinned by the new World Lung Day on 25 September. We look forward to your support, thank you, especially as the Asia-Pacific region is host to many low and middle income countries (LMIC) where lung disease remains a major challenge for their populations.

At the Society level, we continue to enjoy excellent relationships with our sister societies, several of which will be at the APSR congress this year including the ATS, ERS, CHEST, and FIRS. And in our region we see an increase in the number of en bloc member countries with the most recent addition being the Singapore Thoracic Society; welcome to our new colleagues and long-standing friends. The APSR prioritises supporting our members and had representation at the major sister society meetings, and close support for events held by our members, such as the superb scientific meetings with the SLCP (Sri Lanka), JRS (Japan), VNRS (Vietnam) and ISRD (China); the latter three meetings where I was proudly attending.

At the individual member level, we have been very touched by our member’s generous donations to the APSR, thank you. Even a small donation is key to helping the APSR achieve an NPO tax-exempt status, so that all our funds can be used to help fulfil our mission and vision. For those who would like to help, please contact the Secretariat at APSRinfo@theapsr.org. We are also grateful for the selfless donations of Drs Norbert Berend, Peter Sly and Paul Zimmerman in partnering with the APSR to provide new travel awards for Young Investigators in their areas of interest for the next eight years, commencing at the Sydney Congress. We invite others to kindly follow their leadership, and co-fund these key enablers for our younger members.

Moreover, every member has the chance to nominate their respiratory mentor for inclusion in the APSR Members’ Honour Roll (please see www.apsresp.org/members/honour-roll.php). Not only does this allow each of us to thank our own personal professional role models, it also allows the APSR to record the vital contributions of the many outstanding Asia-Pacific region researchers, scientists and educators. Please help us grow the Members’ Honour Roll by nominating your mentor.

2017 has been a busy and productive year for the APSR, we are so grateful for our members’ support and contribution. There are so many wonderful people but insufficient room to name all of them, so thank you all collectively. Your passion for helping the APSR is a positive sign for the APSR’s future and fulfilling our mission and vision.

In 2018, we still have much to do to improve lung health in the Asia-Pacific region and globally; and we can best achieve this by working together as embodied in the spirit of the APSR. We wish you a wonderful and fulfilling New Year and every happiness in your personal and professional lives.

Thanks again for your help.

Message from Editors-in-Chief of Respirology

We have just returned from attending the successful APSR Congress 2017 in Sydney. At the meeting Respirology’s 2017 Annual Report was presented to members of the Editorial Board and the Executive Committee.

Respirology’s progress has been pleasing. The journal continues to receive almost a thousand submissions per year, the acceptance rate has remained around 15% and on average authors are notified of a first decision within 3 weeks. We’ve implemented some changes to the review process, which are expected to further improve turnaround time and quality of accepted papers. In 2018, the journal will increase its publication frequency to 12 issues per year so members can receive new content more often. We’ve also
introduced some new content in the form of thought-provoking commentaries and letters highlighting news and developments from the Asia-Pacific region. *Respirology* continues to be the go-to journal for Asia-Pacific respiratory medicine, with the majority of submissions (60%) and accepted papers (57%) originating from the region.

Australia, China and Japan feature in the top 5 countries for downloads of published papers. The number of full-text article downloads continues to go up and has exceeded 400,000 *Respirology* articles per year. The articles also attract a growing number of citations and *Respirology*'s latest impact factor increased to 3.256 (from 3.078 the previous year). Reviews are popular and among the most downloaded and cited articles reflecting the high quality of our invited experts. In 2017, *Respirology* published several interesting review series including papers on *Respiratory Sleep Disorders, Seeking Innovative Solutions in Severe Asthma and Respiratory Infections in the Asia-Pacific Region*. The reviews from these series can be found throughout the 2017 issues of the journal and they will also soon be available as collections in the *Topic in Focus* section on *Respirology*'s website.

Accessing content from *Respirology* has become much easier lately thanks to the mobile journal app for iOS and Android, which is available to download for free from the Apple App Store and Google Play Store. If you haven’t yet downloaded the app, we highly recommend that you try it out and start reading *Respirology* articles on the go.

As always, we are enormously grateful to all the Editors and Editorial Board members for their hard work and tireless support of the journal. We were pleased to see many of our members at the Editorial Board meeting and we greatly appreciated everyone’s valuable feedback. Since the publication of the last APSR Newsletter, we have appointed Helen Davies (UK) as Deputy Editor; Paul King (Australia), Yuben Moodley (Australia) and Phan Nguyen (Australia) as Senior Editors; and Alexander Larcombe (Australia) and Elisabetta Renzoni (UK) as Associate Editors to help us select the best research for publication. We would like to thank Deputy Editor José Porcel and Associate Editor Fabien Maldonado, who recently resigned, for their substantial contributions to the journal and we’re delighted they’ve agreed to stay on as Editorial Board members.

Finally, we would like to thank all of those people who work tirelessly behind the scenes to make the journal a success, in particular the Editorial Office team and the staff at Wiley. Both teams have played a significant role in organizing a workshop on ‘Publishing with Impact’ at the APSR Congress 2017 in Sydney. This was well-attended and received positive feedback. The presentations from this workshop are available to members on the APSR website (apsresp.org/education/publishing-with-impact/publishing-with-impact.php).

We’re also grateful for the continued strong support *Respirology* receives from the APSR Secretariat and Executive Committee. We look forward to continuing to produce a high-quality research publication that serves the respiratory medicine community in the Asia-Pacific region and beyond.

Philip Bardin
Paul Reynolds

**Message from Editor-in-Chief of Respirology Case Reports**

As we begin a new year, we are looking forward to an increased online presence for *Respirology Case Reports*. We will publish 9 issues this year to respond to the steady increase in papers submitted and published. We are also very pleased that *Respirology Case Reports* has been accepted into the Emerging Source Citation Index (ESCI).

Clarivate Analytics (formerly Thomson Reuters, formerly ISI) introduced a new product just over a year ago, called the Emerging Sources Citation Index (ESCI). The intention of this product was to provide exposure in Web of Science for journals identified as potentially suitable for eventual indexing in their flagship indices (the Science Citation Index (Expanded), the Social Sciences Citation Index, and the Arts & Humanities Citation Index). Journals in the ESCI will have exposure in Web of Science, but are not included in the Journal Citation Reports and do not have impact factors. However, inclusion in the ESCI is a first step towards applying for an impact factor for the journal. This is a long process and we will be working towards this goal over the next few years.

In 2017, *Respirology Case Reports* received 104 submissions (compared to 78 submissions for 2016) from 23 different countries, with the top countries of origin being Japan (43%), Australia (13%), and USA (11%). Approximately 72% of the manuscripts are accepted for publication. On average, the authors are informed of a first decision within 30 days of submission. In 2017, thanks to the changes we made to the number of issues published, we were able to reduce the turn-around time to online publication and PubMed Central listing. This will improve again this year with 9 issues published helping to make the manuscripts more easily accessible.

According to Wiley’s Annual Report, the number of full text downloads for *Respirology Case Reports* increased again reaching about 62,000 with a truly global readership. The top 10 downloaded
The journal continues to be widely marketed by Wiley and has 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. There have been advertisements in the WABIP and Wiley’s Respiratory Medicine Newsletters, and flyers at the APSR, ATS and ERS conferences. We send a message on Twitter each time a case report is published and have noticed that some case reports have attracted a lot of comments and activity on this social media.

We farewelled three Editorial Board members, Dr Helen Davies who accepted a position of Deputy Editor in our sister journal, Respirology, and Dr Demosthenes Bouros and Dr Ellis Hon who had come to the end of their terms in 2017, and welcomed Dr Nicole Goh and Dr Daniel Ng. We are indebted to our Editorial Board members for their work in reviewing all the case reports submitted to the journal and would like to thank each one of them for their expert advice and support and for championing the journal. We also acknowledge our Deputy Editors, Philip Bardin, Peter Eastwood, Gary Lee and Paul Reynolds who provide guidance and support to the journal. There is a hardworking team behind Respirology Case Reports who need to be acknowledged and thanked including Dr Lieve Bultynck, Managing Editor, Dr Christel Norman, Deputy Managing Editor and the rest of the Editorial Office staff, as well as the team at Wiley-Blackwell and the APSR Secretariat.

Christopher Lai

Message from the APSR Education Committee

Educational Seminar of APSR (ESAP)
In 2017, we had two ESAPs:

i. Lung cancer
   Date: 17 November 2017 (just before the APSR Congress 2017)
   Venue: Shanghai International Convention Center, Shanghai, China
   Host: Dr Chunxue Bai and Dr Yuanlin Song
   International speaker: Dr Gary Wong (Hong Kong)

   The event was hosted by Dr Chau Ngo Quy and Dr Le Thi Tuyet Lan from the VNRS, with Dr Gary Wong (Hong Kong) being the international faculty. This ESAP programme brought updated information on diagnostic investigation and management of asthma in children for practicing pediatricians in Vietnam.

ii. Pediatric Asthma
   Date: 9 December 2017
   Venue: Ho Chi Minh City, Vietnam
   Host: Dr Chau Ngo Quy, Dr Le Thi Tuyet Lan and Dr Vu Tran Tien Quan
   International speaker: Dr Gary Wong (Hong Kong)

   The event was hosted by Dr Chau Ngo Quy and Dr Le Thi Tuyet Lan from the VNRS, with Dr Gary Wong (Hong Kong) being the international faculty. This ESAP programme brought updated information on diagnostic investigation and management of asthma in children for practicing pediatricians in Vietnam.

APSR Respiratory Updates
With the support of experts in the region, we continue to release monthly the APSR Respiratory Updates. The list of topics reviewed in 2017 is listed in the following table.

The new and archived issues are all available on the APSR official website: www.apsresp.org/publications/resp-updates.html. We would continue to invite authors to share their views on update literature in their expert areas.

### APSR Respiratory Updates 2017

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Future Plan:
Application for hosting ESAPs in 2018 is open. Suggestions for topics from APSR members and potential hosts are most welcome. We would like to plan these activities ahead.

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

David CL Lam

Message from the APSR Membership Committee
A warmest Happy New Year 2018 and season greetings to all APSR members, with hope for a healthy, blessed and prosperous year to come.

As Chairperson of the APSR Membership Committee I would like to express my appreciation to all APSR members for the generous support and active participation for APSR activities during the past year.

The membership of the APSR includes physicians, nurses, pulmonologists, respiratory therapists, and researchers who are interested in collaborating to fulfill the APSR’s mission in respiratory health.

Currently there are more than 15,000 APSR members across over 40 countries worldwide, mostly in the Asia-Pacific region. The region has 60% of the world’s population - nearly 4.5 billion people - and therefore has the strongest influence world lung health. The Asia-Pacific region has unique characteristics, with its diversity in ethnicity, diseases, genetics, and economic strength, thus greater collaboration within the region to promote lung health is urgent.

I would like to encourage each country’s respiratory society to become an en-bloc member of the APSR, and would like to invite all physicians, researchers, nurses, respiratory nurses and technicians, pulmonologist and health care associates, to become members of the APSR.

The APSR helps its members to improve their practice skills through the latest advances shown in APSR publications, congresses and educational programmes; advance their careers through networking with respiratory leaders; develop leadership skills through partnering in committees, assemblies and organizational networking; promote togetherness and understanding in Asia-Pacific region; advocate lung health, and improve respiratory health within the region and the world.

Lastly, I am looking forward to the active participation of members and for them to enjoy their benefits of membership.

Sincerely,
Faisal Yunus

Message from the APSR Industry Taskforce Co-Chairs
The meeting of the Taskforce during APSR Congress 2017 was well attended by 10 members of industry, members of the APSR Executive Committee including the President, Immediate Past President and Treasurer, and representatives of the APSR Congress Committees for the Sydney congress and the next two congresses in Taiwan (2018) and Vietnam (2019). Dr L N Hooi was nominated by the APSR to continue as the co-chair of the Taskforce for another two years and Dr N Berend will continue as the co-chair representing industry, since there was no response to a call for nominations for the post. During the discussion sponsors provided feedback on various issues including the venue for sponsored sessions for APSR Congress 2017 and sponsorship costs of APSR Congress 2018.

The 2018 APSR sponsorship prospectus was presented which contains sponsorship opportunities for APSR Scholarships and Fellowships, APSR Annual Congress Live Streaming, the APSR Virtual Case Library, Education Seminars (ESAPS), APSR Demonstration Lung Health Projects and APSR – Industry Educational Initiatives.

The Taskforce co-chairs have given recommendations on the development of a Charter to ensure that the relationship with industry is transparent and meets the high ethical standards of both parties.

Norbert Berend
Lai Ngoh Hooi

Message from the 22nd APSR Congress President
Well, the dust has settled on the APSR Congress 2017 in Sydney. It seems an eternity since the Thoracic Society of Australia and New Zealand was entrusted with the honour of organising the congress during the APSR Congress 2014 in Bali. Sydney was at its beautiful best in late spring to welcome over 2,400 attendees. From our perspective, all went well with workshops, plenary sessions and original data presentations in the form of oral and poster presentations being of a very high standard. Overall, we observed a happy atmosphere.

We experimented with a new format with the signature opening symposium followed by the Welcome Reception. For those able to attend, the
performance of the Mt Druitt Children’s Choir as part of the Opening Ceremony was a joy to watch. These children sang in English and their traditional language.

This congress also saw the introduction of live streaming for the first time with the support of Novartis and the feedback that we have received suggests that this will be a success going forward. No matter the quality of any congress, practical access to as wide an audience as possible should be the aim if the APSR is to achieve its mission. It would be very useful for APSR members to provide additional feedback or suggestions to the Secretariat.

Inevitably, there were imperfect aspects and we acknowledge this. It was highly desirable to have the lunch and breakfast sessions near the sponsors displays but fire regulations prevented these from being full enclosed. We regret the acoustic issues created. There were also other events taking place at the Convention Centre. Such is the nature of convention complexes in major cities.

We are very grateful for the support provided by the Local and Central Congress Committees, the offices of the TSANZ and APSR and the assembly leadership. We wish Taiwan every good fortune and trust their wisdom in creating an outstanding APSR Congress 2018 in Taipei.

Jane Bourke
Matthew Peters

Awards presented at the 22nd APSR Congress

The following awards were presented during the APSR Congress 2017 in Sydney.

They include three new awards, each bearing the name of the award’s benefactor, who has a long-standing history of teaching and mentorship in their particular field, making significant contributions to respiratory medicine in the Asia-Pacific region.

From 2017, the APSR is proud and honoured to partner with these three eminent physicians, to continue helping future generations of researchers, by supporting Young Investigator attendance and presentation of their work at our annual APSR congress.

These awards are:

**APSR Peter Sly Paediatric Young Investigator Award**

**APSR Norbert Berend COPD Young Investigator Award**

**APSR Paul Zimmerman Physiology Young Investigator Award**

Further details of all awards can be seen at apspresp.org/awards/index.html
Message from the 23rd APSR Congress President

Dear APSR members, friends and colleagues,

First, I would like to congratulate the Thoracic Society of Australia & New Zealand (TSANZ) for the wonderful success of the APSR Congress 2017 in Sydney, Australia. We gained valuable findings and experiences, while we reconnected with friends and created new ones.

It is a great honour for us, the Taiwan Society of Pulmonary and Critical Care Medicine (TSPCCM), to invite all of you to join the 23rd Congress of the Asian Pacific Society of Respirology 2018 in Taipei from 29 November till 2 December 2018 at the Taipei International Convention Center (TICC). Plenary lectures, educational workshops, symposia and industry seminars are planned for both clinicians and researchers. The scientific committee represents a range of professional disciplines – all focused on the better understanding of lung disease resulting in better lung health for all our communities.

The congress venue, TICC, is equipped with state-of-the-art technology and technical support that makes every event a success. Sitting at the centre of Taipei city, set amongst restaurants and a vibrant public domain, TICC is also easily reached from the international airport by public transportation such as the Mass Rapid Transit (MRT).

The website: www.apsr2018.com is now live and further information will be posted there. Please sign up for the monthly newsletter so we can keep you updated on developments. Abstract submission will open in early 2018 and we encourage your participation in this most influential meeting in respirology, discuss the latest results, share experience and best practices, figure out more new ideas through the exchange and bring this world better medical treatments.

We look forward to welcoming you to the APSR Congress 2018 in Taipei, Taiwan!

Chong Jen Yu

Reports from the APSR Congress award winners

Fukuchi Award for the Best Original paper in Respirology

I had the pleasure of attending the 22nd Congress of the Asian Pacific Society of Respirology in November at the spectacular International Convention Centre in Sydney’s glistening Darling Harbour. The congress was packed with an array of international speakers and poster presentations delivered over four days. It included a Gala Dinner where I was very honoured to receive, on behalf of my Wellington-based (New Zealand) research team, the 2017 Fukuchi Award for the best original paper in Respirology.

The opening ceremony and symposium set the tone for me, beginning with acknowledgement of the traditional, indigenous custodians of the land, the Cadigal people of the Eora nation, and featuring the Mt Druitt Indigenous Choir. The symposium then introduced a number of topics under the congress theme of ‘Lung Health in a Changing World’. It highlighted some critical global public health issues, and I sought to follow these and related topics through the congress; in particular, the transboundary and intergenerational health impacts of our changing environment; the potential benefits and pitfalls of scientific innovation on respiratory health; and our ongoing battles with endemic, emerging and re-emerging infectious disease threats, including antimicrobial resistance.

Our windows of opportunity to prevent the worst effects of global environmental changes, including climate change and outdoor air pollution, are being increasingly well defined through international research. Dr Urs Frey opened the symposium reviewing the evidence for associations between perinatal exposures to air pollution and pulmonary health in childhood and adulthood. Dr Bin Jalaludin highlighted global inequities in the distribution and health impacts of air pollution. As is true with climate change, atmospheric particulate pollution knows no political boundary, particularly affects our most vulnerable populations, and should be all of our concern. Another congress highlight for me was a fascinating talk on Melbourne’s 2016 thunderstorm asthma event by Dr Bruce Thompson, describing the unexpectedly devastating impact of a triad of thunderstorm, high pollen count and a densely packed, sensitized, atopic population.

Numerous scientific innovations were discussed at the congress: from new medical diagnostics to the Big Tobacco-produced disruptive technologies, e-cigarettes, which may help and/or hinder health goals. It was great to see Dr Charles Yu’s presentation on the utility of modelling tools
to assess the impact of new technologies; in this case, TB diagnostics.

Finally, I was interested to see the use of whole genome sequencing in various settings, including tracking the molecular evolution of infectious diseases and antimicrobial resistance in the Asia-Pacific region.

In addition to providing new knowledge, the congress re-enforced for me the importance of collaborative, international and interdisciplinary research, and our role as health professionals and researchers, as well as members of our global and local communities, to find effective ways to translate evidence into policy action. As a public health physician and infectious diseases researcher, I hope to build on the messages of this congress, and work to develop collaborative interdisciplinary relationships to contribute to addressing the complex challenges of our rapidly changing world.

With thanks to the generous support of the APSR to attend the congress,

(Video: APSR Peter Sly Paediatric Young Investigator Award)

I was very grateful I was able to attend as a delegate and poster presenter during the APSR Congress 2017. This was my first international congress and my first time to visit Australia. I felt honoured and privileged to be chosen as the first recipient of the APSR Peter Sly Paediatric Young Investigator Award. This award was my stepping stone to APSR membership which has offered many opportunities to me as a fellow in training in paediatric pulmonology and critical care medicine.

One highlight of my attendance was the poster presentation of my case report entitled “Bilateral and Multilobar Congenital Pulmonary Airway Malformation type 2: a rare case”. The session was a good venue to hear and exchange ideas from experts in pulmonary medicine, share cases we encountered in our area and how they are approached and managed. We were also able to view the case reports and original research papers of other delegates, and gain additional knowledge from their cases and research studies. Another highlight of the congress was the gala dinner. This was an opportunity to meet and socialize with some respirologists in the Asia-Pacific region as well as young investigators from other countries, while enjoying the beautiful view of the Darling Harbour at night.

Thank you again APSR for the opportunity and for the great learning experience in Sydney.
APSR Norbert Berend COPD Young Investigator Award

It was indeed a great privilege and honour to be selected for the inaugural APSR Norbert Berend COPD young investigator award at the 22nd Congress of the APSR in Sydney. I had the opportunity to share our work on risk factors of COPD in a developing country and how it affects outcomes for the patients.

The congress, with its many lectures and symposia on COPD enhanced knowledge on therapeutics and newer management strategies, identified areas on research and thus ultimately I hope will benefit patients across all the Asia-Pacific region.

This award for young researchers from low income countries will certainly stimulate and recognize research from these countries with high burdens of COPD. I wish to express my gratitude to Dr Norbert Berend for initiating this award which will bring out much good research on COPD in the years to come.

Also I take this opportunity to thank the congress presidents and the committee, and acknowledge all my co-authors and my supervisor for their support and contribution.

Sumedha Samankantha Heenagamage

APSR Paul Zimmerman Physiology Young Investigator Award

It is my great honour to be the first awardee of the APSR Paul Zimmerman Physiology Young Investigator Award at the 22nd Congress of the Asian Pacific Society of Respiratory held in Sydney, Australia. It was also a great experience to take this opportunity to join the APSR Congress 2017. First of all, I sincerely appreciate this wonderful award that the respected Dr Zimmerman provides to young investigators, which strongly encourages us to work hard in our medical scientific field. Also I would like to express my deep appreciation to my supervisors Drs Wei Wang, Jian Kang and Frederic Series, who have given their tremendous support during my PhD study at China Medical University 1st Hospital and my visiting scholarship at Laval University (IUCPQ) in Quebec, Canada. I would not be here today without their direction and generous help!

During this congress, I had opportunities to share some of my research findings in terms of two oral presentations and one poster presentation in the field of sleep apnea. Most importantly, I was inspired by the assembly leaders and have benefitted a lot from their comments. I got a chance to know the latest and the most advanced developments in this field.

Sydney was truly a wonderful and friendly city, with very kind and lovely citizens that were always ready to help us foreigners. It was a really nice experience in Sydney. Once again, from the bottom of my heart, I am sincerely grateful to the APSR Local Congress Committee for providing me with this Young Investigator Award to attend the APSR Congress 2017, and I look forward to participating in future APSR congresses.
I am very honoured to have received the APSR Travel Award to attend the Asian Pacific Society of Respirology Congress in Sydney, Australia on 23-26 November 2017.

In this event, I had the opportunity to present my case report in the Tuberculosis 1 Session with the title of Recurrent Pyopneumothorax in Multi Drug Resistant Tuberculosis: A Case Report. I presented the case of a 26 year-old female with worsening dyspnea in the month prior to admission. Her chest x-ray showed the air fluid level and the pleural fluid was turbid white. The patient underwent chest tube insertion for 41 days until the pleural fluid decreased. The patient was unable to undergo decortication surgery because the other lung was also compromised. The sputum Xpert MTB/RIF showed m.TB, rifampicin resistant detected. The patient was then given the standard therapy of MDR TB. After two months her cough decreased and her weight increased but the chest x-ray showed hydropneumothorax with pus expectorate from her previous chest tube scar. Cases of MDR TB are difficult to treat. The long treatment duration increases the chance of drop out treatment. Pyopneumothorax is also difficult to treat with differences in drug penetration through the thickening wall of the pleura and the pleural fluid.

In this event, I also had the opportunity to be a chairperson for the Tuberculosis 2 Poster Session with Dr Jennifer Ann Mendoza-Wi from Philippines and Dr Greg Fox from Australia. This was the first time I had participated as chairperson. I found it very exciting to see and learn what all the participants wrote in their poster because their research and experience also increased my knowledge.

I also feel very honoured to have received a Young Investigator Award from the European Respiratory Society. I was invited to attend the Gala Dinner which allowed me to meet clinicians from around the globe and was invited to the stage to receive the award certificate.

Moreover, I had the opportunity to stroll around Sydney and admire the beautiful city, including Darling Harbour, Manly Beach and The Rocks. It was once in a lifetime experience.

I am so grateful to have been granted this award. I cannot wait to participate in another APSR event.

Dian Prastiti Utami

It is privilege and honour that the European Respiratory Society (ERS) selected me as one of the Young Investigator Awardees to participate at the 22nd Congress of the Asian Pacific Society of Respirology in Sydney, Australia. It was a fantastic experience to receive this international award. I would like to deliver my sincere gratitude to Dr Kazuhisa Takahashi and Dr Fumiyuki Takahashi of Juntendo University who gave their tremendous support during my doctoral study at the Juntendo University so that I could stand at the congress and have the opportunity to present the scientific advances of our research in lung cancer.

During the ERS Young Investigator Award session, I got feedback from another researcher that showed me the bright and promising future direction of our work. The atmosphere at the APSR congress was excellent, and also the congress provided a spot for me as a representative of young scientists to chase our curiosity and give our contribution to the scientific community of respiratory medicine.

It was my first visit to Sydney. The city was fanciful, very beautiful, had plenty of friendly people from different cultures and I enjoyed the city. I would like to deliver my gratitude to the ERS and APSR for providing me such a valuable and unforgettable experience. I await with pleasure for being part of future APSR congresses.
Moulid Hidayat

Award winner from the JRS
I am delighted to have been chosen for a JRS Young Investigator Award at the 22nd Congress of the APSR in Sydney. My trip to Sydney was amazing. It was a wonderful city where the sun and the sea breeze were comfortable, with delicious food and beautiful sightseeing spots.

I had an opportunity to present research at the Interstitial Lung Disease 2 oral presentation session in the evening of 26 November. The title of my presentation was “Long-term Clinical Course of Unclassifiable Idiopathic Interstitial Pneumonias Diagnosed by Surgical Lung Biopsy”.

The 2013 ATS/ERS statement on the classification of idiopathic interstitial pneumonias (IIPs) defined a new category, “unclassifiable IIPs (UCIP)”, in which a confident diagnosis may not be achieved even after multidisciplinary discussion. However, the most common reason for being UCIP was reportedly due to the unavailability of histopathological data, and little is known about UCIP with histopathological evaluation. So I conducted the study to clarify the clinical features and long-term disease courses in UCIP patients who underwent a complete diagnostic evaluation including surgical lung biopsy, and to compare those with idiopathic pulmonary fibrosis (IPF) and idiopathic nonspecific interstitial pneumonia (iNSIP) patients.

There were 90 IIPs patients with surgical lung biopsy in our respiratory centre during the two-year study period. Clinical characteristics of the biopsy showed 23 patients with UCIP and 31 patients with IPF. There was no statistical difference between the characteristics of UCIP and IPF. Regarding the diagnosis, the major reason for being unclassifiable was the discordance between clinical, radiological and pathological findings. The reasons for discordance were diverse, such as many multiple pattern combinations or new entities. In the new entity group, smoking possibly made the diagnosis difficult. The survival prognosis of UCIP was in between IPF and iNSIP. In this study, the survival of UCIP with histopathological data was intermediate between IPF and iNSIP. It was almost the same as previous studies including no histopathological data. Also FVC change of UCIP was in between that of IPF and iNSIP. In UCIP patients, those with a partial pathological UIP pattern had a poorer prognosis.

After my presentations, I had really good feedback on the interpretation of my results which will reinforce our future study.

I also had opportunity to attend as the mentor of the poster session of Interstitial Lung Disease 1 on 25 November. There were many interesting presentations at this session, and we could have a deep discussion with the people from various countries. It was a very good experience for me. I attended the Gala Dinner in the evening of 25 November wearing a formal Japanese kimono. I was able to talk with many participants at that time.

In conclusion, I greatly appreciate the support of my team members and family. Thank you for everything.

Erina Tabata

APSR Assembly Fund Award
The Assembly Fund Award started in 2017.

Environmental & Occupational Health and Epidemiology Assembly Awardees
Mirae Jang
Zewei Zhou
FIRS has a mission to unite all concerned organizations to reduce lung disease and promote lung health worldwide. Its core membership is the global professional respiratory organizations. To accomplish its goals, FIRS had to become better known and work with partners, especially the World Health Organization.

In 2017, FIRS published its Global Impact of Respiratory Disease, which reported the burden of lung diseases and their importance to a healthy world. The report has been a handy reference that was published on FIRS website along with Spanish and Portuguese translations and executive summaries in French, Spanish, English, Chinese, Russian, and Arabic. Slides were prepared from the text.

In May 2017, FIRS held a side-event at the World Health Assembly in Geneva and announced a World Lung Day, September 25. Thousands of individuals and 25 organizations signed on to a charter calling for measures to improve global lung health. Through this and other events in 2017, FIRS was recognized and invited to attend important WHO meetings and comment on WHO and UN documents.

With its partners, FIRS made its voice heard on WHO’s 13th General Programme of Work, 2019–2023, responded to G20 Leaders’ Declaration on “Shaping an Interconnected World,” advised the UN’s Environment Assembly of ministers, which met in December in Nairobi, and commented on other documents and occasions. FIRS was represented at important global health meetings in Brussels (GARD), Coimbra (urban development), Geneva (World Health Assembly), Guadalajara (The Union meeting), Montevideo (UNHLM on noncommunicable diseases), Moscow (UN ministerial meeting on tuberculosis), Sharjah (Non-Communicable Disease Alliance meeting), and Sydney (APSR).

FIRS Environmental Committee had several news releases and helped advise the UN Environmental ministerial meeting. FIRS helped fortify WHO’s Global Alliance for Chronic Respiratory Disease (GARD), which has had a rebirth under the leadership of Nils Billo. GARD is embarking on several projects and has applied for grants to cover the costs. FIRS’ website posted the clinical guidelines of its member organizations for viewing in one place.

In 2018, the United Nations High Level Meeting (UNHLM) on non-communicable diseases, tuberculosis, and antimicrobial drug resistance will raise attention to lung health. FIRS will be present and intends to speak up at these occasions. High-level meetings can change the course of these problems by getting commitments from many nations to address them. Through these and other activities, FIRS intends to continue its global advocacy and build partnerships for through World Lung Day and
other activities.

1. American College of Chest Physicians (CHEST), American Thoracic Society (ATS), Asian Pacific Society of Respirology (APSR), Asociación Latinoamericana De Tórax (ALAT), European Respiratory Society (ERS), International Union Against Tuberculosis and Lung Diseases (The Union), Pan African Thoracic Society (PATS), Global Initiative for Asthma (GINA), and Global Initiative for Chronic Obstructive Lung Disease (GOLD).

Dean Schraufnagel

Forthcoming Meetings

2018

PCCP 37th Annual Chest Convention
11-14 March
Mandaluyong City, Philippines
Email: secretariat@philchest.org
Website: www.philchest.org

125th Conference of the KATRD
14 April
Daegu, Korea
Email: katrd@lungkorea.org
Website: www.lungkorea.org

58th Annual Meeting of the Japanese Respiratory Society
27-29 April
Osaka, Japan
Email: 58jrs@jrs.or.jp
Website: www.jrs.or.jp/jrs58/

Sri Lanka College of Pulmonologists Annual Academic Sessions: Respire X
28-30 June
Kandy, Sri Lanka
Website: www.copsl.lk

MTS (Malaysian Thoracic Society) Annual Congress 2018
12-15 July
Kuantan, Pahang, Malaysia
Email: m.thoracicsoociety@gmail.com
Website: www.mts.org.my

PCCP 21st Midyear Convention
6-8 September
Bacolod City, Philippines
Email: secretariat@philchest.org
Website: www.philchest.org

5th Annual Congress of the Vietnam Respiratory Society
21-22 September
Da Nang, Vietnam
Email: hoihohapvietnam@gmail.com
Website: hoihohapvietnam.org/hoinghi.hoihohapvietnam.org/

National Respiratory Meeting 2018 (Pertemuan Ilmiah Khusus/PIK 2018)
Indonesian Society of Respirology
23-27 October
Semarang, Central Java, Indonesia
Email: pikpdpi2018@gmail.com
Website: www.pikpdpi2018.com (under construction)

126th Conference of the KATRD
8-9 November
Seoul, Korea
Email: katrd@lungkorea.org
Website: www.lungkorea.org

2019

59th Annual Meeting of the Japanese Respiratory Society
12-14 April
Tokyo, Japan

7th Conference of the International Union Against Tuberculosis and Lung Disease, Asia-Pacific Region 2019
The Union APRC Manila
23-26 April
Manila, Philippines
Email: secretariat@unionaprc2019.org
Website: www.unionaprc2019.org

24th Congress of the Asian Pacific Society of Respirology
14-17 November
Hanoi, Vietnam

2020

60th Annual Meeting of the Japanese Respiratory Society
24-26 April
Nagoya, Japan
Organization of the APSR

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- **Head**: Arata Azuma
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### Presidents of the Congresses:

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