



Professor David B Skinner

Dear Colleagues

We have to announce the most grievous news that Professor David B. Skinner (USA) passed away suddenly on 24th January 2003, due to a massive stroke.

Cruelly, the ISDE has lost one of the finest and most generous members.

Professor Skinner organized the 4th World Congress of the ISDE in Chicago, 1989 and chaired the Society from 1992 to 1995 as the Society President. His efforts for the development and stability of the ISDE were truly outstanding.

Respectfully we pray for the repose of the late great Professor Skinner's soul.

Important dates

*ISDE 9th World
Congress 2004*

27-30 May 2004

Madrid Congress Hall, Madrid, Spain

ISDE NEWS

No 35 March 2003



**The International Society for
Diseases of the Esophagus**

SECRETARIAT

The Office of the Secretariat of ISDE
The Institute of Gastroenterology,
Tokyo Women's Medical School
8-1 Kawada-cho, Shinjuku-ku
Tokyo 162-8666, JAPAN
Tel: 81-3-3358-1435
81-3-3353-8111 ext. 252229
Fax: 81-3-3358-1424
Email: isde@home.email.ne.jp
Homepage: <http://www.isde.net/>

EDITOR-IN-CHIEF

Nobutoshi Ando, M.D. (Tokyo Dental College)

MEMBERS:

Harushi Udagawa, M.D. (Toranomon Hospital)
Soji Ozawa, M.D. (Keio University)
Tatsuyuki Kawano, M.D. (Tokyo Med. & Dent.
Univ.)
Yoko Murata, M.D. (Tokyo Women's Med. Sch.)

ADVISER:

J.P. Barron (Int. Med. Commun. Center,
Tokyo Med. College)

SECRETARIAT:

Alkiko Masubuchi (Tokyo Women's Med. Sch.)

EASY & FAST CONNECTION

We now have a homepage.
Send your email address to:

isde@home.email.ne.jp
<http://www.isde.net/>

to get all the latest ISDE news

Call for Scholarships

2003 ISDE Scholarship

Source of Funds

The Japanese Research Foundation for the Multidisciplinary Treatment of Cancer.

Purpose

To encourage the transfer of information concerning the diagnosis and treatment of esophageal diseases among specialists in various countries.

Eligibility

- 1) Applicants must be ISDE members who have fully paid their dues for at least the two years (2001 and 2002) prior to the calendar year in which the Scholarship is to be received.
- 2) Applicants must submit an outline of the research they wish to undertake, and give their reasons for choosing the proposed host institution. The host institution should preferably be one with experienced and qualified staff members who have contributed to the ISDE.
- 3) Applicants must provide evidence of acceptance at the proposed host institution.
- 4) Applicants must attach a letter of recommendation from the chief of his or her department.
- 5) Applicants must be on the staff of a University teaching hospital, research laboratory or similar institution.
- 6) In principle, applicants for Research Scholarship must be under the age of 45, and must be able to work for a minimum of 3 months at the intended host institution.
- 7) Professors or chiefs of departments are eligible only for short-term grants (Visiting Scholarships).

Financial Support

Stipends for Research Scholarships will be granted towards the cost of tourist/economy class fares and accommodations in the host country. No allowance will be given for dependents. In the case of Visiting Scholarships (item 7 above), only the cost of the airfare and not of accommodation will be granted. This grant does not necessarily exclude the receipt by the grantee of other stipends to enable him or her to conduct the intended research.

Maximum Support per award

US\$5 000.

Total Amount of Support per Annum

Approximately US\$10 000.

Number of Awards

2 per annum.

Applications

In 2003 applications (one original and 10 copies with attached photographs – not copies) should be received by the ISDE by 15 April 2003, including proof of acceptance from the intended host institution(s). Notification of awards will be made by 31 March 2003 and the grantee should then finish his or her research by the end of 31 March 2004.

Limitations

This scholarship will not be awarded for the sole purpose of attending conferences or visiting institutions.

Other

Applicants for Visiting Scholarships are required to submit the documents outlined in items 2, 3 and 4 above.

Additional Information and Application forms

Additional information and application forms may be obtained from the Secretariat of the ISDE at the following address:

The International Society for Diseases of the Esophagus
The Institute of Gastroenterology,
Tokyo Women's Medical University,
8-1 Kawada-cho Shinjuku-ku Tokyo 162-8666
Japan
TEL +81-3-3358-1435
FAX +81-3-3358-1424
Email isde@home.email.ne.jp

Obligations

The grantee must submit a report of about 800 words within 3 months after completion of the scholarship, which will be published in the ISDE Newsletter.

Addendum

Of the total funds available for any given year, the ISDE reserves the right to provide additional special supplementary grants to recipients with special extenuating circumstances, such as those from economically troubled countries. However, the maximum total amount of such grants is not to exceed \$10 000 per annum.

Scholarship Report

Roberto R Taruselli, MD

Pasteur Hospital and Medical School, Montevideo, Uruguay

Host Scientist: Professor Yuji Tachimori, National Cancer Center of Tokyo, Japan

Collaborating Scientists: Professor T Kawano, Professor H Udagawa, Professor M Tsurumaru, Professor T Matsubaru

Research Period: 1 July – 30 September 2002

Title: Treatment of esophageal cancer: Three-field lymph node dissection – technical aspects

First, I would like to thank the ISDE Scholarship Committee for giving me the great opportunity to visit the National Cancer Center in Tokyo, which is one of the most well-known hospitals for the treatment of esophageal cancer.

Professor Yuji Tachimori, the head of Esophageal Surgery Division was my host and I was extremely grateful for his support and hospitality.

Not only did I contribute in the Surgery Division, but also in the Endoscopy Division where I attended endoscopic ultrasound, as well as mucosal endoscopic resection carried out in early gastric and esophageal neoplasm.



Dr Roberto R Taruselli and Professor Yuji Tachimori

Every week I attended the operating room, where I learnt the technical aspects of this surgery, and then I went to the Pathology Division with residents to perform lymph node dissection. It was there that we meticulously dissected the different lymph node groups, placed them in separate containers for histological examination, made a detailed draft of the dissection and took several pictures of the tumor.

Besides this, I participated with follow-up on postoperative patients together with the Chief of Residents, Dr. Fukaya, in intensive care unit and wards.

I also had a weekly meeting with doctors at the Medical Oncology Division, Radiation Oncology Division and Endoscopy Division. There are numerous randomized controlled clinical trials, JCOG 9204, JCOG 9907, JCOG 9708 and JCOG 9907, which investigate the results of the association of chemoradiotherapy with surgery, surgery alone and chemoradiotherapy alone.

I was extremely impressed with the high response rate to chemoradiotherapy on patients with squamous cell carcinomas at stages I and II, taking into consideration that it is the only treatment carried out on them.

Scholarship Report continued on page 4

Scholarship Report continued from page 3

Three-field lymphadenectomy has been the standard technique in Japan for the last two decades. It has been greatly improved by Japanese surgeons and as a result of this, both morbidity and mortality rates have decreased. This is due to many factors: highly qualified surgeons work together as a team performing three surgeries a week, which is a uniform surgical technique with little variation, paying enormous attention to the precise anatomy and meticulous bloodless dissection in carefully defined planes.

Among what I have learned, I would like to stress the fact that Bronchoscopy both intraoperative and postoperative, is essential in order to diminish respiratory problems.

It is also worthy to note that after an 8-hour surgery, patients are able to talk and do not suffer from any pain. The reason for this is that the analgesic is given through an epidural catheter by the anesthetist.

I also had the opportunity to visit other centers in Tokyo, courtesy of Professor Tachimori. I first went to Tokyo Medical and Dental University Hospital where I met Professor Kawano who performs hand-assisted videothoracoscopy esophagectomy.

I then attended Juntendo University where I saw three-field lymph node dissection with some variations performed by Professor Tsurumaru.

After that, I met Professor Udagawa, head of Surgery Division at Toranomon Hospital, who carries out the former technique with minimal thoracic approach.

Finally, I had a meeting with Professor Matsubara at the Cancer Institute Hospital who performs cervicothoracic approach.

The types of surgery mentioned above are performed in these centers because they have enough resources and research fields that allow them to meet this dedication.

I do think this technique could be performed in other countries and that similar results could be achieved. Professor N Altorki from New York has recently published an article regarding this technique in *Annals of Surgery*.

In conclusion, it has been an enriching experience in different respects. I have learned about Japanese culture, made friends with Simon Dexter from England, Chan from Malaysia, and Fukaya from Japan, and tried the local lifestyle. In spite of the big cultural, religious gap, I had a pleasant stay in Japan. However, as for cuisine, I must admit I really missed eating meat, which is something Uruguayan people usually include in their diet.

Lastly, I would like to thank Dr. H Kato and Dr. H Igaki for their support and kindness.