



Newsletter

Editor : Yoichi Nakanishi

Associate Editors : Yoshinosuke Fukuchi, David CL Lam, Suga Konno

Message from the President



Dear members of the APSR,

Many of you will be involved with COVID-19 measures in various aspects. I would like to express my sincere respect to all medical professionals, including investigators, and administrative officers, who are engaged in the testing, treatment, care, and prevention of COVID-19 for their hard work.

Although we are forced to lead a tough life, we have been learning lots of things hard to experience in ordinary life. Firstly, through the COVID-19 issue, the hearts of the people of the world have become one. Everyone has understood and recognized how important and beneficial it is to keep social distance and to wash hands. In addition, the way of social activities has changed, for instance, the rapid spread of telework and online meetings.

For the APSR, we could confirm that webinar is a very useful education tool. We can obtain and exchange the latest information in real time, which has a new sense of value different from regular face to face meetings. The APSR has decided to increase the usage of this system.

Regarding COVID-19, although the situation is improving in some regions, it has become worse in others. However, we can see a silver lining in the dark cloud. Understanding and acceptance of social distancing, improvement of diagnostic technology and its diffusion, hope for effective drugs and vaccines. Although we are still half (or quarter) way to conquer SARS-CoV-2, let us work hard in the belief that human beings can overcome the virus in very near future. Fortune and misfortune are intertwined. Although this disaster has slowed down education, research and social activities, it should lead to further development in the future.

Yoichi Nakanishi

Message from the new Secretary General

It gives me great pleasure to be elected and appointed as the new Secretary General of the APSR in 2020. I would like to say thank you very much to all the seniors and councillors who have put their trust in me. This serves as a great driving force for me to plough in every effort I can to serve this Society in every aspect that I can.

My first challenge was indeed the coincidence of the COVID-19 pandemic. I was most lucky to have the guidance of Dr Nakanishi as the President and Dr Fong as the Immediate Past President, who gave us the inspiration of forming the APSR Taskforce on COVID-19. At the same time, I got much support from the APSR Education and Scientific subcommittees, and the Assemblies on the formation of this Taskforce and subsequent work.

It was also wonderful news for me to learn that a new Treasurer, Dr Yasuhiko Nishioka, was elected. I'm looking forward to work with the President, Immediate Past President, Treasurer, colleagues in the different APSR committees and assemblies, with the strong support from the expanded APSR Secretariat. We do hope to serve our members better and further in this difficult time of the pandemic.

David CL Lam

Message from the Editors in Chief of Respirology

Like many other journals around the world, *Respirology* has felt an impact of the global COVID-19 pandemic. Many of our editors and reviewers are on the frontline of this global pandemic and have

had to pause some of their editorial work. At the same time, the journal is experiencing an unprecedented influx of submissions - between March and May, the journal received double the number of submissions compared to the same period last year. Because our publisher Wiley is a signatory to the statement on data sharing in public emergencies, every COVID-19 submission is shared with the WHO (wellcome.ac.uk/coronavirus-covid-19/open-data). At the time of writing this message, *Respirology* published eight COVID-19 related papers. Among those is a *Letter from China* on the outbreak, by Drs Wei-Jie Guan and Nan-Shan Zhong. We have also invited authors from several other countries to write about the COVID-19 experience in their part of the world. All *Respirology* publications on COVID-19 are available through the APSR's COVID-19 News webpage at www.apsresp.org/archive/covid-19/covid-19.html

The devastating global health crisis almost makes us forget that this year marks the 25th anniversary of *Respirology*. It doesn't seem like an appropriate year for a celebration, but it highlights the importance of publishing respiratory research. *Respiratory* medicine and science, like *Respirology*, has come a long way in 25 years. In the January issue of this year (onlinelibrary.wiley.com/toc/14401843/2020/25/1), we look back at 25 years of developments in respiratory and sleep medicine through a series of commissioned commentaries, written by authorities in the field. In the same issue, Philip Thompson, one of *Respirology*'s first Editors, provides a fascinating historical perspective and insights about the early days of the APSR's official journal (onlinelibrary.wiley.com/doi/10.1111/resp.13731). Much of the progress in the field has been chronicled in the pages of *Respirology*, in which the contribution of the Asia-Pacific region to new knowledge has been a key focus.

Twenty-five years on, *Respirology* continues to expand its readership as confirmed by the 2019 Publisher's Report we received from Wiley last month. Full-text article downloads increased by 56% on the previous year and has reached more than 850,000 downloads per year. The US, China, Australia, UK and Japan continue to be the main readers of the journal, together comprising more than half of the readership. *Reviews* continue to be among the most downloaded. *Respirology* is currently publishing a series of reviews on *New frontiers in sleep disordered breathing*, edited by Matthew Naughton, Peter Cistulli and Philip de Chazal. This will be followed by a series of reviews on *Interventional Pulmonology Pearls*, edited by Phan Hguyen, Pyng Lee and Noriaki Kurimoto, to be published as a Special Issue in September.

Of particular interest to the APSR community, will be some of the recent *Respirology* publications by APSR writing groups. A writing group representing several APSR en bloc societies have

contributed a collaborative commentary on the "Efforts to control air pollution in the Asia-Pacific region" (doi.org/10.1111/resp.13800), which summarizes the present state and measurement of air pollution in the Asia-Pacific regions. Members of the APSR Lung Cancer Assembly have published a commentary in *Respirology* on "Molecular testing of metastatic non-small cell lung cancer in the Asia-Pacific region" (doi.org/10.1111/resp.13833), highlighting the key points of the Lung Cancer Assembly's position statement that was made available through the APSR website (apsresp.org/publications/posn-stmts/molecular-testing-of-metastatic-nscl.pdf).

We'd like to thank all our Editorial Board members and reviewers for continuing to support the journal in these very challenging times. We are not only grateful for your contributions to the journal, but also for the incredibly important role you currently play at the COVID-19 frontline. We offer our support and we hope you stay safe.

Philip Bardin
Paul Reynolds

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

As reported by the Editors of *Respirology* and many other journals around the world, *Respirology Case Reports* also has felt an impact of the global COVID-19 pandemic. We have experienced only minor disruptions to our peer-review activities despite having many of our editors and reviewers on the frontline of this global pandemic and I would like to take this opportunity to thank them for their dedication and for supporting our journal through this period. At the same time, the journal is also experiencing an unprecedented influx of submissions with the number of submissions doubling compared to the same period last year. Like *Respirology*, because our publisher Wiley is a signatory to the statement on data sharing in public emergencies, every COVID-19 submission to *Respirology Case Reports* is shared with the WHO (wellcome.ac.uk/coronavirus-covid-19/open-data). All published COVID-19 related manuscripts are available on our journal's website as a special [COVID-19 collection](#) as well as on the APSR website www.apsresp.org/archive/covid-19/covid-19.html

Our publisher, Wiley, has also just sent the 2019 annual publisher's report, and I am pleased to see that *Respirology Case Reports* continues to grow. The number of downloads has continued to increase from last year to over 200,000 for 2019 and the journal's readership remains truly international.

Respirology Case Reports is still publishing 9 issues a year. In 2019 we published 104 manuscripts and at this point in time, we predict a higher number for 2020 since we have already published

86 manuscripts to date, thanks to a regular increase over the last year as well as a recent surge in submissions in the last few months. Our acceptance rate remains similar to last year (about 70%). Our turn-around time (on average less than 25 days) keeps improving. To respond to the increase in submissions we are currently recruiting new Editors to join our team and will soon be announcing our new recruits.

I would like to thank the members of the APSR and its en bloc member societies for their support of the journal since over 70% of articles that we published last year were submitted by authors belonging to these societies. APSR members benefit from a 50% discount of the open access publication charge. We also hope that this will encourage our authors to join the APSR and benefit from the many advantages a membership to the APSR has to offer.

Christopher Lai

Message from the APSR Education Committee

We faced an unprecedented COVID-19 pandemic crisis in the medical fields and also learned a lot from many victims in the last six months¹. Several countries, including China, implemented strong sequestration policies based on the lessons learned from SARS and MERS, and succeeded in the first blockade. However, almost every country in the world is in the dark due to its unknown condition and the reality that there is no cure. For the purpose of transnational information sharing, the APSR held webinars for representatives of each country to report the current status of their domestic response (see the webinar reports at www.apsresp.org/archive/covid-19/covid-19.html). In the first place, there is no difference in propagation due to public health conditions, and the only way to prevent primary propagation is "isolation" even in modern times. While differences in secondary infections may remain associated with the public health status, COVID-19 mortality risk is not necessarily associated with the public health status. This can be inferred from the number of deaths in developed countries¹.

The pandemic recorded in 1918-1920 was the Spanish Flu², which affected about 500 million people and killed many healthy young adults³. That was in the midst of the First World War and resulted in "pouring oil on the fire"⁴. In the 21st century, humans have experienced the 2009 Swine Flu pandemic, but have been frequently exposed to the beta corona virus pandemic. It is speculated that this phenomenon is closely related to "borderless globalization" and propagated around the world at an unprecedented speed. COVID-19 also brought about quick information sharing. Many international societies planned webinars and promoted sharing of information

across countries, but at the time of the first action when there was no way to fight the virus, the public health of the whole society with "isolation / infection prevention measures" as the centre was maintained. It is essential to take a policy response⁴. The APSR is a group of specialists in respiratory medicine, and how to confront "viral mutation" that is expected to occur frequently as a natural phenomenon, by making full use of science and technology that promptly elucidates the pathology. For that purpose, it is necessary to discuss how to have a flexibility in thinking that can reconstruct changes in economic activity and social structure, beyond the framework of the state.

Reference:

1. covid19.who.int/
2. Frost WH. The Epidemiology of influenza. 1919. Public Health Rep. 121 Suppl. 1: 149-59, 2006.
3. Taubenberger JK and Morens DM. 1918 Influenza: the Mother of All Pandemics. Emerging Infectious Dis 12(1), 15-22, 2006.
4. Ashton J. COVID-19 and the 'Spanish' flu. J Royal Society Med. 113(5): 197-8, 2020.

Arata Azuma

Message from the Convenor of the APSR COVID-19 Taskforce

In response to the educational needs during the COVID-19 pandemic, an APSR Taskforce on COVID-19 was formed, with the following composition:

Advisors

Dr Yoichi Nakanishi, APSR President

Dr Kwun Fong, APSR Immediate Past President

Convenor

Dr David Lam, APSR Secretary General

Members

Dr Yasuhiko Nishioka, APSR Treasurer

Dr Kazuto Matsunaga, APSR Central Congress Committee Chair

Dr Arata Azuma, APSR Education Committee Chair

Dr Vu Van Giap, APSR Education Committee Deputy Chair

Dr Yuanlin Song, APSR Respiratory Infections (non-Tuberculous) Assembly Head

Dr Celeste Mae Campomanes, APSR Industry Taskforce (ITF) Co-Chair

Dr Kazuhiro Yatera, APSR Environmental & Occupational Health and Epidemiology Assembly Deputy Head

Dr Yeon-Mok Oh, APSR Research Committee member

With the invitation from the ATS, we held the first APSR-ATS webinar on COVID-19 on 28 March 2020 sharing management experience of COVID-19 by representatives from different regions, namely Yuanlin Song (China), David CL Lam, MP Lee and David Hui (Hong Kong),

Ser Hon Pua (Singapore) and Suh Gee Young (Korea).

This was followed by another APSR webinar on COVID-19 on 29 April 2020, with presentations from Rongchen Chen (China), Camilo Roa (the Philippines), Raymond Liu (Hong Kong), Fusun Oner Eyuboglu (Turkey), Young-Jae Cho (Korea) and Ser Hon Pua (Singapore).

All these webinars have been recorded and available for members' access on the APSR official website under APSR webinar/podcast series. We are working on subsequent podcasts and hope these have your support as well as on appointed APSR podcasters, and potential sponsors.

David CL Lam

APSR Webinars

A [webinar](#) was held on Wednesday 29 April, hosted by the APSR Secretariat. The panel of experts included the following, who gave an update of the situation in their respective countries/regions:

- Dr Rongchang Chen (China)
- Dr Camilo C Roa (Philippines)
- Dr Raymond Liu (Hong Kong)
- Dr Fusun Oner Eyuboglu (Turkey)
- Dr Young-Jae Cho (Korea)
- Dr Ser Hon Pua (Singapore)



The webinar was opened by Dr Yoichi Nakanishi, APSR President, and summarised by Dr Arata Azuma, Chair of the APSR Education Committee.

See its recording at youtu.be/7PEfxLxFGVc. You'll also see the webinar slides and the wide range of interesting questions raised.

An [earlier webinar](#) was similarly held on Wednesday 22 April, presented by:

- Dr Erlina Burhan (Indonesia)
- Dr Kuo-Chin Kao (Taiwan)
- Dr Tan Jiunn Liang (Malaysia)
- Dr Khondekar Mustaq Adnan (Bangladesh)
- Dr Dinesh Dassanayake (Sri Lanka)



As with the 29 April webinar, it was opened by Dr Yoichi Nakanishi, APSR President, and

summarised by Dr Arata Azuma, Chair of the APSR Education Committee.

The comprehensive Q&A can be seen at www.apsresp.org/archive/covid-19/apsr-webinar-20200422-qa.html

You can also see the presentation slides at www.apsresp.org/archive/covid-19/apsr-webinar-20200422-slides.php and a recording of the whole webinar at www.youtube.com/watch?v=rii8b07ZPiM&feature=youtu.be

Prior to the APSR webinars, a [joint ATS-APSR webinar](#) was held 27/28 March, now available to see on [YouTube](#).

The webinar was hosted by the ATS and featured eminent APSR respiratory specialists:

- Dr Yuanlin Song (China)
- Dr David C L Lam (Hong Kong)
- Dr David S C Hui (Hong Kong)
- Dr Man-Po Lee (Hong Kong)
- Dr Gee Young Suh (Korea)
- Dr Pua Ser Hon (Singapore)



APSR Podcasts

Podcasts of the webinars held on 22 and 29 April can be heard at anchor.fm/apsr/. Click [here](#) for the 22 April webinar programme, video, slides and Q&A, and [here](#) for the 29 April webinar programme, video, slides and Q&A.

Message of thanks from the APSR Secretariat, on behalf of patients from around the region

An Instagram of thank you messages from the around the Asia-Pacific region to the APSR members and all healthcare workers fighting COVID-19.



Doctors, nurses, hospital cleaners and everyone else on the front line, also researchers and others in the background, working for the benefit of patients and their families.

[instagram.com/p/B-8pFHJl69f/?utm_source=ig_web_copy_link](https://www.instagram.com/p/B-8pFHJl69f/?utm_source=ig_web_copy_link)

(Click [here](#) if you cannot access Instagram)

Announcement of Postponement of the APSR Congresses

25th Congress of the APSR

The 25th Congress of the APSR will be held at the Kyoto International Conference Center (ICC Kyoto), Japan, 18–21 November 2021, hosted by the Japanese Respiratory Society (JRS).



On 24 April 2020 the decision was announced to postpone the Congress from the originally scheduled date of 15-18 October 2020 to 18-21 November 2021. The venue in Kyoto is unchanged. Click [here](#) to read the full announcement.

For information on registration fees already paid, travel arrangements made, abstracts submitted, and any other issues, please see the Congress website at apsr2021.jp/about/information/

26th Congress of the APSR

The 26th Congress of the APSR will be held on 17-20 November 2022 in Seoul's premier conference and exhibition centre COEX, Korea, hosted by the Korean Academy of Tuberculosis & Respiratory Diseases (KATRD).



Message from the APSR Central Congress Committee

The following announcement was made on 24 April 2020.

Dear APSR members,

As officially announced, the APSR Executive Committee has regrettably decided to postpone the 25th Congress of the Asian Pacific Society of Respiriology originally scheduled in Kyoto, Japan for 15-18 October in 2020, hosted by the Japanese Respiratory Society (JRS) after careful evaluation of the potential risks to our members, delegates and communities caused by the COVID-19 pandemic. We would like to reiterate our gratitude for your kind support and solidarity for the 25th Congress of the APSR.

New dates of the Congress have been scheduled for 18-21 November 2021 at the Kyoto International Convention Center in the same

venue as we originally secure. Eventually the 26th Congress of the APSR in Seoul, Korea hosted by the Korean Academy of Tuberculosis & Respiratory Disease (KATRD) will also be postponed to 17-20 November 2022. I would like to express our sincere appreciations to the 2 host societies' great cooperation to the postponement.

We understand that you may have been concentrating on caring for patients and conducting important research during this critical time and hope our decision to postpone will enable respirologists all over our region to better care for affected people.

The APSR recognizes the vital importance of research and education for this virus and also other lung conditions especially the Chronic Respiratory Diseases (CRDs), and so we are planning a very active schedule of educational Webinars for COVID-19 and other lung conditions with colleagues, sponsors and others until the next Congress.

We look forward to seeing you at APSR 2021 Kyoto. Please take appropriate precautions to stay healthy.

Sincerely yours,

Kazuto Matsunaga

Assembly Newsletters

Assembly Newsletters are available via www.apsresp.org/about/assemblies.html (members only access)

Reports from the APSR en bloc societies

Malaysian Thoracic Society (MTS)

During the first few months of 2020, the MTS organised a number of workshops including a Paediatric Sleep Scoring Workshop, KIDZ Asthma Education for Asthma Educators and the 3rd UKMMC Hands-On Pleural workshop in the Klang Valley as well as a Primary Care Spirometry Course in Penang. From March 2020 onwards, numerous workshops and CME activities had to be cancelled due to the COVID-19 pandemic. These included the MTS Spirometry Certification Programme 2020 and 4th Interstitial Lung Disease Workshop 2020 amongst others.

A Movement Control Order (MCO) was imposed in Malaysia on 18 March 2020, and all gatherings and meetings were banned until 30 June 2020 by the authorities. As such the MTS organised educational events in the form of webinars. The first of these, on the topic "Managing Airway Diseases: Guidance during a Pandemic" was held on 9 May 2020 and was attended by 387 participants. Since then successful webinars have been organised on other topics including

lung cancer, asthma and COVID-19. The MTS Education website was launched in February 2020 with five online modules on asthma. Another three modules (recorded during the webinar held on 9 May 2020) have been added recently. All committee meetings have been held via video conferencing since March 2020. It is envisaged that online resources will be required for most activities in the near future.

The MTS Standards of Care Committee under the chairmanship of Dr Roslina Abdul Manap has produced two sets of recommendations: the first on Endoscopy Services during COVID-19 Pandemic (March 2020) and another one on Inhalational Therapy during the COVID-19 Pandemic (April 2020). The MTS partnered with Boehringer Ingelheim to donate 1,000 units of Aerochamber spacers for adult and paediatric use and these have been distributed to hospitals treating COVID-19 patients run mainly by the Ministry of Health Malaysia. The spacers were distributed together with our newly minted guidelines on Inhalational Therapy during the COVID-19 Pandemic.

The MTS has also been fairly active in advocacy. In March 2020, the MTS joined the Malaysian Health Coalition (MHC), a loose coalition of individuals and societies dedicated to improving the health of Malaysians, strengthening the Malaysian health system and stabilising Malaysia's society through health advocacy. The MHC has released 12 joint media statements since March 2020 related to the COVID-19 pandemic. On 11 May 2020, the MTS released its press statement on "Wearing Facemasks in Public is Key to Help Control Covid-19 during Extended Conditional MCO", which was picked up and widely reported in the local print and online media. During the Conditional MCO which started in early May 2020, there has been relaxation of lockdown rules and many businesses, including non-essential ones, have been allowed to resume.



Spirometry for Primary Care workshop held in Penang on 7 March 2020

The MTS 2020 Annual Congress will be held in Fraser Place, Puteri Harbor, Johor Bauru from 10-13 December 2020. The Congress had to be postponed from the original dates from 16-19 July 2020 due to the COVID-19 pandemic. Dr Rozanah Abd Rahman has been appointed as Organizing Chair. Dr Lalitha Pereirasamy heads the Adult Scientific Committee and Dr Asiah Kassim, Dr N Fafwati Faridatul Akmar Mohammad and Dr Eg Kah Peng head the Paediatrics Scientific Committee.



From top to bottom, Dr Pang Yong Kek, President of the MTS, Dr Teo Aik Howe and Dr Roslina Abdul Manap, Immediate Past President of the MTS at the MTS On Air Forum on Managing Airway Diseases: Guidance During a Pandemic" held on 9 May 2020.

Hooi Lai Ngoh, Secretary General of MTS

Singapore Thoracic Society (STS)

Singapore was one of the first countries outside of China to be affected by COVID-19, with the first case reported on 23 January 2020. Recognizing the severity of COVID-19, the Singapore government has promptly raised its Disease Outbreak Response System Condition (DORSCON) level from Yellow to Orange since 7 February.

DORSCON ALERT LEVELS (Disease Outbreak Response System Condition)				
	GREEN	YELLOW	ORANGE	RED
Nature of Disease	<p>Disease is stable</p> <p>OR</p> <p>Disease is recent but does not spread easily from person to person (e.g. HIV, TB, Hep)</p>	<p>Disease is stable and spread easily from person to person but is not spreading rapidly (e.g. Dengue)</p> <p>OR</p> <p>Disease is spreading in Singapore but it is not typically fatal (e.g. dengue fever) where there are no deaths reported. Local health systems are able to manage the disease (e.g. dengue fever) and it is being contained.</p>	<p>Disease is severe AND spreads easily from person to person and requires hospitalisation and/or intensive care (e.g. SARS, MERS, COVID-19)</p>	<p>Disease is severe AND is spreading widely</p>
Impact on Daily Life	<p>Minimal disruption e.g. minor closures, travel advice</p>	<p>Minimal disruption e.g. additional measures at border points, health care settings, schools, higher work and school absenteeism (daily)</p>	<p>Major disruption e.g. curfew, mandatory quarantine, extensive closure of schools, etc.</p>	<p>Major disruption e.g. school closures, work from home orders, significant number of deaths</p>
Advice to Public	<ul style="list-style-type: none"> Be socially responsible if you are sick, stay at home Maintain good personal hygiene Look out for health advisories 	<ul style="list-style-type: none"> Be socially responsible if you are sick, stay at home Maintain good personal hygiene Look out for health advisories 	<ul style="list-style-type: none"> Be socially responsible if you are sick, stay at home Maintain good personal hygiene Look out for health advisories Comply with control measures Avoid social gathering and crowded areas 	<ul style="list-style-type: none"> Be socially responsible if you are sick, stay at home Maintain good personal hygiene Comply with control measures Avoid social gathering and crowded areas

Medical Measures

Singapore public hospitals and clinics have put in measures to ensure readiness of coping with COVID-19 screening and treatment. Community care facilities have also been rapidly set up to house patients who are stable.



Tan Tock Seng Hospital, Singapore

Community Measures

A "Circuit Breaker" was implemented in Singapore from 7 April till 1 June inclusive. This entailed a set of safe distancing measures designed to break community transmission. Only essential services that support the daily needs of the population were allowed to open. The population was encouraged to stay home as much as possible and if necessary to leave home, to go out alone. Other measures included controlled access at areas susceptible to crowding, mask wearing when outdoors and home-based learning for schools.

Challenges

Despite the slew of successful measures, COVID-19 continues to pose significant challenges for Singapore. Whilst community spread has been reduced by the Circuit Breaker measures, a significant number of cases are still detected amongst work permit holders living in foreign-worker dormitories. Active case-finding and isolation of affected patients are ongoing. At time of writing (24 May), Singapore reports 31,593 COVID-19 cases and 23 mortalities.

Taiwan Society of Pulmonary and Critical Care Medicine (TSPCCM)

Big Data Analytics, Masks and Affordable Medical Care: Taiwan's COVID-19 Experiences

Despite being close to China, Taiwan has stopped the COVID-19 with big data analytics for case identification, containment, affordable comprehensive screening tests, and medical care for COVID-19, as well as encouraging people to wear a mask. Taiwan reported the first COVID-19 case on 21 January 2020. In 2019, 850,000 Taiwanese lived in mainland China and 400,000 worked there. Furthermore, 2.71 million mainland Chinese visited Taiwan in 2019.¹ Taiwan is one of the countries with the highest risk of the COVID-19 pandemic, but it has not happened. On 23 May 2020, Taiwan had reported 441 confirmed COVID-19 cases, 350 imported and 55 domestically transmitted, with only seven deaths.

Since 27 January, the National Health Insurance Administration (NHIA) and the National Immigration Agency integrated patients' past 14-day travel history with their NHI identification card data from the NHIA which allowed the government to track individuals at high risk because of recent travel history in COVID-19 affected areas. Those identified as high risk (under home quarantine) were monitored electronically and verbally through their mobile phones. On 18 February, the government proclaimed that all hospitals, clinics, and pharmacies in Taiwan would have access to patients' travel histories.

In European and American countries, it is generally believed that only infected patients need to wear a mask. However, it is very common for people to wear masks to prevent COVID-19 in Taiwan. The government of Taiwan also encourages people to wear masks in public places. On 24 January The Government of Taiwan imposed a ban on the export of face masks (www.cdc.gov.tw/En) until 1 June. To ensure an adequate resource of masks, Thailand, South Korea, and France announced the implementation of export controls on face masks starting from 4 February, 26 February and 3 March, respectively. On 4 April, the World Health Organization (WHO) called for all countries to boost their production of face masks.

Taiwan National Health Insurance (NHI) is a mandatory universal health insurance programme that provides affordable and comprehensive medical care to Taiwanese citizens (nhird.nhri.org.tw/en/index.htm). Taiwanese suspected to have COVID-19 can directly visit the emergency department of the nearest hospital for relevant medical examinations (including RT-PCR testing for COVID-19, blood tests, and X-ray imaging test) with no medical charge. All COVID-19 confirmed cases are hospitalized in an isolation room at no cost according to the policy of infection control.

On the basis of Taiwan's experience in the prevention of COVID-19: 1) we designed big data analytics for case identification, and containment, 2) we encourage people to wear face masks during the pandemic; 3) we ensure all citizens have access to affordable, comprehensive screening tests and medical care for COVID-19. We believe that these three approaches are the key factors contributing to the success in limiting the spread of COVID-19 in Taiwan.

Reference:

1. Wang CJ, Ng CY, Brook RH. Response to COVID-19 in Taiwan: Big Data Analytics, New Technology, and Proactive Testing. JAMA 2020.

Vincent Yi-Fong Su, Kuang-Yao Yang

Bangladesh Lung Foundation (BLF)

Year 2020:

1. We held three scientific seminars on Pulmonology Updates and Workshop on Chest Radiology in three different medical colleges:
 - On 14 January at Khulna Medical College, Khulna.
 - On 28 January at Sher-E-Bangla Medical College, Barisal.
 - On 6 March at Rajshahi Medical College, Rajshahi.
2. We organized a free health camp on 31 January for rural people in Swarpkathi, Pirajpur.
3. We are supporting doctors and other healthcare workers in different health institutions throughout the country by distributing PPE kits thereby enabling them to serve COVID patients.
4. We arranged three online live webinars on COVID-19:
 - On 5 May the topic was COVID-19: Pulmonologist's Perspective
 - On 10 May the topic was COVID-19: Management of Patients with Comorbidities
 - On 19 May the topic was Management of COVID-19 Patients: From home to ICU.

Year 2021:

We intend to organize the 7th International conference on lung health, Pulmocon 2021, during the month of October, but the venue and date are not yet fixed.

Stay safe, stay well.
Regards,

Hena Khatun

~ Obituary to the late Prof Barron ~

Prologue to the collection of tributes in memory of J Patrick Barron

J Patrick Barron passed away on the 17 August 2019 in Tokyo at the age of 71.

Professor Philip J Thompson, former Editor in Chief of *Respirology*, dedicated an obituary representing the journal and the APSR in late 2019.

Patrick remains in my memory as a legend in the history of the APSR. I feel almost obliged to make a personal memorial tribute to be shared widely among the younger generation of the Society before my memory fades. I will therefore limit myself to describe what I witnessed during my long time association with him. In addition, I have contacted Drs Teresita de Guia, Wan Cheng Tan and Norbert Berend to post their own tributes to Patrick. They all accepted in very positive manners. Thus, you will find the collection of tributes to Patrick by four longtime friends.



APSR Executive Meeting, Singapore July 1997. Standing (L to R): Sow-Hsong Kuo, Yoshinosuke Fukuchi, Hadiarto Mangunegoro, Aziah Ahmad Mahayiddin, J Patrick Barron, Norbert Berend, Wan-Cheng Tan, J Paul Seale, Suchai Charoenratanakul, YoungSoo Shim; Sitting (L to R): Sze-Piao Yang, Shiro Kira, Wei-Ci Luo, Ann J Woolcock, Teresita de Guia

Yoshinosuke Fukuchi

Tribute 1

It makes me sad and nostalgic to know that Patrick Barron has passed away.

Patrick had been with the APSR way back during its formative years. I came to meet and know him as a translator and interpreter, conversant in both English and Japanese. His presence during Executive and Committee meetings had been a huge help to our understanding of each other during discussions and deliberations. He facilitated the exchange of ideas between our Japanese colleagues and the diverse multinational membership during those formative years of the organization. Being an Englishman, his use of English was something I very much admired. He had been an instrument in our easy understanding during those initial years and moving forward.

Patrick will be greatly missed and personally his absence will be a void to the APSR.

Sincerely,

Teresita de Guia

Tribute 2

Patrick Barron was a man before his time. He was a pioneer in more ways than one; personable,

engaging, resourceful and effective in all professional activities over a span of more than 40 years while remaining remarkably focused on the furthering of medical communication, whether through hands-on local tasks, or organizational initiatives on the regional and international levels. Although his interest in medical communication in English began in response to the need for communicating Japanese work to the world, little did he know then that it was the fore-runner of the important and ubiquitous discipline of medical communication in the rest of the world as we know it today.

I had the honour and pleasure of being hosted by Prof Patrick Barron during my first visit to Tokyo Medical School in 1985 to observe the use of the YAG laser in interventional bronchology by Dr Kenichi Oho. During the visit I was impressed by the importance of effective English medical communication initiated by Patrick, experiencing first-hand the benefits of clear translation in the explanation of the procedures and in the facilitation of the subsequent discussion.

Patrick was also a deeply cultural person. He was a great advocate for oriental cultures, speaking Japanese fluently like a native speaker and endowed with a working knowledge of the Chinese language, attributes that stood him in good stead in all the years of involvement in the Asian Pacific Society of Respiriology of which he was among the founding members. His academic achievements are numerous and wide ranging, beyond the scope of this tribute. On a professional level he was a wonderful and efficient colleague who left his stamp on all he worked on. On a personal level, he was fun and empathic. We miss him greatly.

Wan Chen Tan

Tribute 3

Remembering Patrick Barron

All those involved in the formative stages of the APSR would fondly remember Patrick. Although he wielded great influence, he was not a dominant, charismatic individual. However, beneath what was sometimes a slightly disheveled appearance lurked a keen and politically astute mind. He spoke quietly but there was great wisdom in his words. His qualities were needed by the leadership of the APSR, particularly during the early stages of the Society. The task of forming a Society including members from culturally diverse countries, not sharing a common language, not being part of a political union and being at vastly different stages of economic development, was daunting. Professor Kira, who shouldered much of the responsibility of dealing with other Societies operating in our region and developing a *modus operandi* for the APSR, was, I know, heavily dependent on Patrick's input into every decision. Patrick provided great advice to the unique model of having member country *en bloc* Societies and, again, the key

decision to publish our own journal *Respirology* was strongly supported and fostered by Patrick. Above all, he was intensely loyal to the APSR, always working hard for and acting in the Society's best interests. He was there in person at every meeting, at every congress and on email in between, providing truly indefatigable support. In doing so he contributed greatly to the current success of the Society. Finally, he had an affable personality which made it a great pleasure to work with him and most importantly, to know him. He will be missed by the many friends he had in the APSR.

Norbert Berend

Tribute 4

He came to Japan in 1969 after graduating from the University of Pennsylvania and started his Japanese language study for four years at ICU (International Christian University) in Tokyo. In 1970 he met Professor Yoshihiro Hayata a distinguished thoracic surgeon at Tokyo Medical University. While working in association with Dr Hayata, Patrick became interested in helping English communication among academic medical professionals in conferences and research publications in Japan. Dr Hayata encouraged Patrick to develop his engagement in this area and supported him whenever necessary as a lifelong mentor in Japan.

In 1984, under the presidency of Dr Hayata, the Japanese Respiratory Society (JRS, established in 1961) established the International Relations Committee (IRC) to facilitate international exchanges in respiratory science worldwide, in particular within the Asia-Pacific region. The IRC consisted of Professor Shiro Kira as the chairman and seven members. I met Patrick in person for the first time and made a long lasting friendship thereafter. I soon found he had commanded Japanese just like a native with profound cultural knowledge of the country's history. After extensive consultation and discussion with leaders of major international respiratory organizations, the IRC made a final report to advocate a regional academic society in the Asia-Pacific region on their own initiatives.

In August 1985, the first international meeting in preparation of the launch of new regional respiratory society in this part of the world was held in Tokyo. Those members attended were S Bovornkitti (Thailand), T S de Guia (Philippines), M Hadiarto (Indonesia), K Kim (Korea), K M Moser (USA), J F Murray (USA), T Takishima (Japan), A J Woolcock (Australia); Hosts: M Harasawa, T Takizawa, T Yokoyama, S Kira, Y Fukuchi, P Barron.

The feasibility of inviting national societies in North and South America to join as members of the planned regional societies were discussed but not realized at that time.

In November 1986, the second preparatory meeting was held a day before an IUAT meeting was held in Singapore. Drs Harasawa, Takizawa, Takishima, Kira, Fukuchi and Barron attended from Japan. Patrick played an important role to convey a Japanese scheme for the launch of an Asian Respiratory congress. A unanimous decision was made to hold the first Congress in Japan under Dr M Harasawa being the APSR president in 1988. The logo and name of this new regional society was adopted as the Asian Pacific Society of Respirology (APSR), instead of a tentative name of the Asian Pacific Society of Pulmonology (APSOP). This change owed much to a strong provision offered by Dr Peter T Macklem who represented Canada, deputizing for Dr J C Hogg. It was also decided that the APSR Congress was to be held every two years and hosted by a selected national society within the region.

The APSR had to settle a very sensitive political issue of finding a rational approach by which mainland China (PRC) could accept Taiwan (ROC) under the same umbrella of national membership. Drs Kira, Fukuchi and Barron paid multiple visits to Beijing and Taipei in the fall of 1987. Both Dr Luo Wei Ci (Beijing) and Yang Sze-Piao (Taipei) gave their final agreement to adopt the city name before China. Patrick was instrumental during the negotiation through English and working Chinese conversation.

In October 1988, the first APSR Congress was held in Tokyo. Dr Michiyoshi Harasawa was president; Dr Shiro Kira served as secretary general (SG), Patrick and Dr Fukuchi were appointed as deputy SGs. The congress turned out to be a great success with more than 600 participants from 19 countries. He seemed to be firmly convinced that publishing an official journal of the APSR was mandatory to keep the Society more solidly armed with high scientific standard. He insisted that the Society should own the copyright of all published materials to avoid any unexpected abolishment by the publishing company. This was very wise advice in view of considerable income in relation to the copyright for the published articles in *Respirology*, growing progressively in recent years.

In 1996 the APSR started publishing *Respirology* as a quarterly official journal, but the financial burden turned out to be more than had been estimated. Patrick suggested making extended abstracts of original papers in Japanese to be purchased by local industries to compensate the deficit of the running cost.

There was another regional international organization; APCDC (Asian Pacific Congress of Disease of the Chest) which was established under the umbrella of the ACCP. Membership consisted of chest physicians, thoracic surgeons, cardiologists and ICU specialists. The congress

had been held every two years but neither a permanent office nor an official journal. Since the first APCDC held in Kyoto in 1969, it had offered an international forum of respiratory science within the Asia-Pacific region. The APSR wished to avoid any clash or competition with the APCDC, therefore Dr Kira (SG) and secretariat officers including Patrick and Dr Fukuchi, negotiated to find a unified arrangement of academic exchange forum. After years of discussions between the APSR and ACCP, a final agreement was completed in 2002. It confirmed that the APSR and APCDC would hold a joint congress every other year starting in 2005. The joint congresses were to be held three times, in 2005, 2007 and 2009 at the site of the APSR annual congress. Patrick had been on the editorial board of the CHEST and his presence at the negotiation on the APSR side added much credence.

Patrick was among the first to promote en bloc membership to give strength in the running of this new academic society. The JRS decided to adopt en bloc membership with the APSR in 2004 by a majority vote of the Board of Directors (Chaired by Dr Fukuchi). This new membership helped the APSR extend financial stability by an annual income of 30 million yen which was of vital importance to maintain active academic engagement thereafter. In 2005-2007, the TSANZ, TSPCCM and PCCP joined the league of en bloc memberships of the APSR.

In my personal memory, the life of Professor Patrick Barron might well be characterized with four Ds; Decision; Devotion; Diligence; Diversity. He made an enormous contribution to the APSR, worthy for him to be in the chair of "the legend" in her history.

Yoshinosuke Fukuchi

Forthcoming Meetings

2020

Annual Scientific Congress of Ho Chi Minh City Society of Asthma, Allergy & Clinical Immunology
26 July
Ho Chi Minh City, Vietnam
Email: acocu.vn@gmail.com
Website: www.hoihendumdlstphcm.org.vn

ATS 2020 Virtual
5-10 August
Website: conference.thoracic.org/index.php

ERS International Congress 2020 (virtual)
7-9 September
Website: erascongress.org/

60th Annual Meeting of the Japanese Respiratory Society (JRS) (web-based online meeting)
20-22 September
Email: 60jrs@jrs.or.jp

Website: www.jrs.or.jp/jrs60/en/index.html

Scientific conference with updates from The Congress of European Respiratory Society (ERS) 2020 (VNRS)
25-26 September
Hanoi, Vietnam
Email: Hoihohapvietnam@gmail.com
Website: hoihohapvietnam.org

The Congress of International Lung Health and World COPD Day 2020 (VNRS)
5-7 November
Hanoi, Vietnam
Email: Hoihohapvietnam@gmail.com
Website: hoihohapvietnam.org

130th Conference of the Korean Academy of Tuberculosis and Respiratory Diseases (KATRD)
12-13 November
Seoul, Korea
Email: katrd@lungkorea.org
Website: eng.lungkorea.org/

The Annual Congress of Vietnam Respiratory Society 2020 (combination of VNRS Congress and Association Franco-Vietnamienne De Pneumologie) and Pre-congress Workshop on Bronchoscopy
13-15 November
Da Nang city, Vietnam
Email: Hoihohapvietnam@gmail.com
Website: hoihohapvietnam.org

World COPD Day: Asthma & COPD Outpatient Care Unit (ACOCU) Network Day
15 November
Ho Chi Minh City, Vietnam
Email: acocu.vn@gmail.com
Website: www.hoihendumdlstphcm.org.vn

Malaysian Thoracic Society (MTS) 2020 Annual Congress
10-13 December
Johor Bahru, Malaysia
Email address: m.thoracicsociety@gmail.com;
secretariat@mts.org.my
Website: www1.mts.org.my/

2021
World Conference on Lung Cancer
26-29 January 2021
Singapore
Website: wclc2020.iaslc.org

61st Annual Meeting of the Japanese Respiratory Society (JRS)
23-25 April
Tokyo, Japan

ATS 2021
14-19 May
San Diego, CA, USA

25th Congress of the Asian Pacific Society of Respirology

18-21 November
Kyoto, Japan

Website: apsr2021.jp



2022

26th Congress of the Asian Pacific Society of Respirology

17-20 November
Seoul, Korea



Notice from the Secretariat

Invitation to bid for the 2023 Congress!

We invite you to make a proposal to host the 27th Congress of the APSR in 2023. 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)

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