The Fifth Congress President Message

The Fifth World Congress of the International Society for Diseases of the Esophagus was held at the Kyoto International Conference Hall from August 5 through 8, 1993. Participating countries numbered 33, the participants numbered in the vicinity of 600, and nearly half of the participants including accompanying persons were from abroad, making this congress unquestionably international. The Scientific presentations selected from 508 submitted titles, were 396 in all and these were presented during the three-day congress. Enthusiastic discussions were held during the three Special Lectures, six Panel Discussions, Video Sessions and others, and it is my firm belief that we were able to achieve our aim for a truly international Congress.

At the Opening Ceremony held on the 5th, the Mayor of Kyoto City kindly gave us his Welcome Address. The attractions at the Congress consisted of performances of traditional Japanese instrument such as the Koto and Shakuhachi. Fireworks were also enjoyed by all. A performance of a 'No' drama was given at the Congress President's Reception, appropriately named "Japan Night", and many took part in the dance party at the Official Banquet. There was much personal as well as scientific communication. From this Congress, it was recognized that even more than had been previously realized research projects exist and it is my fervent wish that results of these will be presented at the next congress.

(K. Nabeya)
NEW COMING PRESIDENT ADDRESS

D. R. Skinner, M.D.
5th President of ISDE

All present will agree that this has been an outstanding Congress. We are indebted to Professor Nabeya and his colleagues for the excellent scientific, as well as the social program. This Congress will be long remembered, and everyone joins in applauding and congratulating Professor Nabeya.

The past three years, since the Chicago Congress in 1989 have been important for ISDE. The Society has achieved international recognition as the premier organization of physicians and surgeons interested in esophageal diseases. We have successfully launched the journal Diseases of the Esophagus, and have broadened the membership and leadership to create a truly international organization. President J. Rudiger Siewert is to be greatly congratulated for his strong leadership and these achievements. The membership is also greatly indebted and appreciative of the efforts of Professor Kinichi Nabeya and his staff who have developed such an efficient and thoughtful Secretariat in Tokyo. Both President Siewert and I greatly appreciate Professor Inokuchi’s wise judgement on a number of important matters for the Society.

I am grateful to all of you for electing me your President for the next three years. This will be an exciting time as the world of health care overall, and specific matters related to the diseases of the esophagus are undergoing rapid change. Refinements in diagnostic procedures such as the increasing experience with endoscopic ultrasonography, and the role of magnetic resonance imaging (MRI) in the evaluation of benign and malignant esophageal diseases offers greater precision in diagnosis and selection of operative vs. medical therapy. Everyone one in this room is effected by the new technology of minimally invasive surgery including laparoscopic and thoroscopic operations on the esophagus. The impact of pharmaceutical agents on esophageal diseases is changing the indications and the needs for surgical treatment. The effect of the focus on the management of reflux esophagitis is a dramatic example. In the treatment of esophageal cancer, staging and refinements in determining prognosis have made it possible to select among a number of competing therapies in the best interest of the individual patients. The esophageal surgeon in the 1990’s needs to be fully familiar with the indications for, and management of, combined modality treatment as well as several different surgical techniques.

All of these changes have lead the Executive Committee and leadership of ISDE to agree that the Society needs to broaden its membership and the scope of its interest. Accordingly, we need to include experts on the management of esophageal diseases from the gastroenterology community, from amongst radiation therapists, medical oncologists, and specialists in imaging, as well as basic scientists and others who study the esophagus and its disorders. During the next three years and with the support of the Council and Executive Committee, I shall take steps to expand and broaden the membership to include other disciplines. At the 1995 Congress, I hope and expect to see a much more diverse attendance and program without losing surgical leadership which has been the historical strength of this Society.

I am pleased to announce that it appears that the journal Disease of the Esophagus will incorporate the journal Gullet and be published in the future by Churchill Livingston. Negotiations are near completion for this to take place during 1993. This will strengthen Diseases of the Esophagus by combining the enthusiasm and interest of those interested in Gullet, and insuring an increased flow of strong manuscripts and a broader readership for our papers. Each member of the Society is urged to submit their important work to the Editorial Board of Diseases of the Esophagus which will be under the Editorship of Professor J. Rudiger Siewert in Munich during the years immediately ahead.

These are exciting times, and I am enthusiastic about the opportunities to expand the breath and scope of our Society and its Journal. Thank you one again for electing me your President.

(David B. Skinner)
HONORARY MEMBERS' DEDICATION

World famous, outstanding two professors - Prof. Morio Kasai (left, Japan) & Prof. Spencer Payne (right, USA) were bestowed the title of Honorary Member of ISDE at the official banquet at the 5th World Congress in Kyoto.

GET-TOGETHER OF YOUNG RESEARCHERS

Tetsuro Nishihira, M.D., FACS
Associate Professor of Surgery
Tohoku Univ., School of Med.

Once again 60 young researchers, including both those young in age and those young in spirit, gathered at the Fifth World Congress of ISDE in Kyoto to get better acquainted, to discuss mutual concerns and to freely exchange ideas on matters of experimental science including such aspects as oncogenes related to esophageal cancer, clinical work concerning many kinds of postoperative complications, and social problems.

Unfortunately, due to time constraints, the meeting was held on the last day of the conference in the early afternoon, and thus some colleagues couldn't attend. It is hoped that the next such get-together can be held on an evening midway through the Congress so that more colleagues can attend in a relaxed atmosphere. In any event, it was nice to be able of renew old friendships as well as extend our circle to acquaintances, and we feel that we were able to achieve our goal of promoting mutual understanding.

I would like to thank all those that helped to organize this meeting and those who were able to participate. Thanks are also due to Professor Nabeya and other executive committee members who gave us the opportunity to hold this get-together.

(T. Nishihira)
1) Report on the election of the national representatives; Dr. Inokuchi reported the background and the results of the 1992 voting.

2) Amendment of Charters and Bylaws According to demands from members, a new category of member, senior members was proposed and agreed to do so with the amendment of Charters.

3) Nomination of candidates for new officers. According to Dr. Siewert’s report on the process of selection of new Vice-president in the Executive Committee, Dr. Moreno-Gonzalez was recommended and approved for this position. Dr. Siewert explained the current status that the Congress Chairman should be determined 6 years advance to the Congress in order to ensure enough time for preparation, and concerning the 6th Congress Chairman for 1995 reported the process of selection at the 8th Executive Committee meeting held in Munich which resulted on the recommendation of Dr. Peracchia. Dr. Peracchia was approved for this position. Dr. Siewert next reported the process of selection of the 7th Congress Chairman, 1998 at the Executive Committee Meeting and recommended Dr. Duranceau and Dr. Pinotti. After each gave a speech of invitation for the 1998 Congress, voting was held (Duranceau:Pinotti 19:10). Therefore Dr. Duranceau of Montreal was elected to this position. ISDE International Officers and Research Committee members for 1992, 8, 9 – 1995, 8,26 were approved.

4) Professor Spencer Payne and Professor Mario Paoi were confirmed as Honorary Members and Professor George Beherer and Professor Dimitrios Astrides were recommended as Senior Members.

5) Membership Committee: Dr. Inokuchi reported the total number of membership as of July 10, 1992 to be 693, almost the same as the previous year.

6) Scholarship Committee: Dr. Siewert reported that 19 scholars were given awards from 1990 to 1992, totaling 31 since 1989.

7) Newsletter Committee: It was reported that issue No. 11 was published recently.

8) Journal Committee: After Dr. Siewert reported the progress of the discussion of the Journal Committee concerning how to look for a new publisher to make the ISDE journal more attractive, Dr. Inokuchi presented the detailed proposals from 4 publishers and the final conclusion of the Executive Committee that the ISDE-Pmillon in Chill Livingstone instead of Masson, incorporating the current journal Gullet under the conditions showing in the document and that the new journal would be funded by US$30,000 markup per annum in the membership fee plus US $10,000 per annum donation from Japan for the time being. The proposals were all agreed upon.

9) Research Committee: Central Research Committee chairman, Professor Skinner reported the process of discussion of each four Research Committee Meetings held Aug. 4 and 5, 1992. Each Chairman of the Research Committee was asked to submit the summary which will be published on the coming issue of the ISDE Newsletter.

10) Financial report: The accounts from 1989 to 1991 were reported on and accepted.

11) Others: Dr. P. Y. Wang commented that Taiwan, should be listed as the Republic of China. Dr. Inokuchi replied that this item will be studied carefully and responded to appropriately.

A GIANT STAR HAS PASSED AWAY

Professor Jean-Louis Lortat-Jacob died on Wednesday 1 July 1992 at the age of 83 years. The surgical world has lost one of its finest and noblest figures. He has greatly influenced an entire generation of surgeons, whether by his technical innovations, the rigor of his observations, or his exceptional competence in the field of digestive surgery. He was the first in France to succeed in performing, in 1944, anastomosis for carcinoma of the oesophagus, and in 1951 he did the first formal right hepatectomy in the history of surgery. Elected President of the National Order of French Doctors in 1970, he continued despite this enormous responsibility to direct his hospital department and to confer on his entire school the benefit of his exceptional personality: the exclusive care of the patient, probity in indications and procedure, the wise authority of the head of a surgical unit, intellectual strictness and objectivity of judgment. In conformity with the finest and noblest traditions of honor, Jean-Louis Lortat-Jacob had faith in the future of humanity. His whole activity was a message of life. I had the extreme good fortune of being associated with him almost daily for nearly 35 years. He was involved at first hand, with every important episode of my professional life, and I was at his bedside when the attack occurred which was to take him from us. This recollection further seals and magnifies in me, if it were necessary, the vividness of memory and emotion that I experience in writing these few lines.

(R. Gulli)
REGIONAL ACTIVITY

ITALY

In 1992 Genoa, Italy, was celebrating the Quincentenary of the great voyage the Americas by C. Columbus, who was born in Genoa, with Expo '92. As a consequence of this event, "International Congress on Cancer of the Esophagus" was held in Santa Margherita Ligure (Genoa) on June 7-10, 1992.

The president of the Congress was Dr. L. Santi, Scientific Director, Istituto Nazionale per la Ricerca sul Cancro, Genoa, Italy. Scientific Coordinators were Dr. H. Aste, Head Dept. Gastroenterology, Istituto Nazionale per la Ricerca sul Cancro, Genoa and Dr. M. Crespi, Head Dept. Gastroenterology, Istituto Nazionale per la Ricerca sul Cancro, Genoa and Dr. M. Crespi, Head Dept. Gastroenterology and Epidemiology, Istituto Regina Elena, Rome.

The aim was to provide a forum for the presentation of original research and clinical trends, scientific interactions and critical evaluations of recent diagnostic and therapeutic modalities in the field of esophageal cancer. World experts in these fields discussed recent developments in the biological and clinical aspects of esophageal cancer. The scientific programme included teaching lectures, symposia, round tables, video exhibitions and proffered papers.

(M. Endo)

JAPAN

REPORT ON THE 8TH CONGRESS OF THE JAPAN SECTION OF THE INTERNATIONAL SOCIETY FOR DISEASES OF THE ESOPHAGUS

The Eighth Congress of the Japan Section of ISDE was successfully held on Saturday, November 28 at the Sandai Hotel in Sendai with over 80 participants from all over Japan, including not only surgeons but also internists, radiologists, etc.

The theme chosen by the Congress Chairman, Professor Shozo Morii at Tohoku University School of Medicine, was "Evaluation of Malignant Factors in Esophageal Carcinoma." The 18 presentations dealt with various topics related to this theme, including molecular biological aspects (expression and/or amplification of various genes), analysis of DNA content using flow cytometry and clinicopathological findings, and their correlation with prognosis. More specifically, the titles of the presentations and the presenters were as follows: The change of number of epithelial growth factor receptor in cultured esophageal cancer cells after addition of antineoplastic drug, M. Yoshioka; immunohistochemical study on the expression of HLA-DR antigen and lymphocyte infiltration in human esophageal carcinoma, H. Yamanaka; Effects of the synthetic proteinase inhibitors on hypercoagulability after surgery for esophageal carcinoma, A. Ikeda; Isodose of primary undifferentiated small cell carcinoma with multidisciplinary treatment, A. Kobayashi; Significance of growth factor-receptor systems in human esophageal carcinomas, K. Yoshida; Expression of matrix metalloproteinases in esophageal cancer, Y. Shimada; Evaluation of DNA analysis, argyrophilic nucleolar organizer regions and the expression of proliferating cell nuclear antigen as prognostic factors for esophageal carcinoma, M. Ikebe; P53 overexpression in human esophageal carcinoma—an immunohistochemical and two-parameter flow cytometric study—, Y. Goukon; aberrations of tumor suppressor genes (P53, MCC and Rb) detected by PCR-SSCP analysis in esophageal squamous cell carcinoma, C. Maesawa; DNA content, HST-1 amplification and p53 point mutation for evaluating malignant potential of esophageal carcinoma, T. Saito; The genes on amplification unit at human chromosome 110 13 in esophageal cancer, H. Inaki; Analysis of chromosomal translocations (11q and 14q) in esophageal cancer by fluorescence in situ hybridization, F. Yamagishi; Significance of ERB-B and INT2/HST-1 oncogene amplification in choice of surgical treatments for superficial esophageal cancer patients, Y. Ikeda; A point mutation of C-YR-RAS gene was found in human esophageal carcinoma cell lines but not in primary esophageal carcinomas, C. Shimazaki; Correlation between the expression of EGFR/EPDR and the malignant potential of esophageal carcinoma, A. Kawaguchi; Clinicopathological studies on squamous cell carcinoma of the esophagus with esophageal gland-like transformation, Y. Naka; Clinicopathological significance of PCNA staining in esophageal cancer patients, Y. Morisaki; and Clinicopathological evaluation of malignant factors in the 0-1 type esophageal carcinoma, T. Nakamuta.

The invited lectures, given by Associate Professor Kanji Ishizaki the Radiation Biology Center of Kyoto University entitled "Loss of 17p, mutation of the p53 gene, and overexpression of 017, mutations of the p53 gene, and overexpression of P53 protein in esophageal squamous cell carcinomas," was greatly appreciated by all.

In addition to the papers, the participants heard reports from the ISDE Secretariat and the ISDE Scientific Research Committee and had opportunities to renew old acquaintances in the field of diseases of the esophagus, as well as to make new friends.

The efforts of all the participants were greatly appreciated, and it is hoped that this congress contributed to the treatment of esophageal carcinoma in Japan. (T. Nishihira)

*THE 9TH ANNUAL MEETING OF THE JAPAN SECTION* ISDE

Site: Tokyo, Japan
Date: November 26, 1993
President: Prof. Mitsuo Endo
1st Dept. of Surgery
Tokyo Med. & Den. University
REPORTS FROM RESEARCH COMMITTEE MEETINGS

TNM

1. Registration of Patients

2,020 patients with esophagectomy were registered from eight countries during 1988-1990. T-classification: 42% belonged to T3, followed by T1 (18%), T4 (17%), T2 (16%), and only 3% belonged to T1s.

N-classification: 59% of patients were classified as being N1.

M-classification: 17% of patients were classified as being M1, but 81% of these were M1-LYM.

R-classification: There were considerable numbers of patients with R1. From the data in Italy, 51% of registered patients were classified as R1. Regarding the R-classification, the following two points were discussed:

1) The R-classification is decided macroscopically during surgery as being R0, R1 or R2. After pathological examination, the final decision of R0 R1 R2 classification is performed.

2) Almost all members of the TNM Research Committee agreed that the R-classification should be based on overall evaluation of T, N, and M-category. This question will be asked of Prof. Suenaga, President of the National Cancer Center and member of the UICC Committee of TNM Classification.

2. Survival rates based on TNM-classification

The materials consisted of 986 Japanese patients, registered from 1988 to 1989, excluding patients with carcinoma in the cervical esophagus, esophagectomy without thoracotomy, histology of adenocarcinoma or undifferentiated carcinoma, one field lymphadenectomy, and R2 residual tumor. The survival rate of these patients was 45% at 1500 days.

T-classification: The patients with T1 had the best survival, followed in order by those with T2, T3, and then with T4. There were significant differences in the survival curves of each T group, except for the T1 and T4 curves.

N-classification: There was a statistically significant difference between N0 and N1. The number of patients with cervical and celiac nodes affected the survival curves greatly.

3. Appraisal of cervical and celiac nodes

The degree of differences in the survival curves of N1 and N1-LYM vary depending upon tumor location.

With respect to the cervical nodes; there was a significant difference in the survival curves of middle and lower thoracic esophageal cancer, but there was no difference in cases of the upper thoracic esophagus.

With respect to the celiac, common hepatic, and splenic nodes; there was a significant difference in the survival curves of patients with carcinoma in the middle and lower thoracic esophagus. There was no patient with carcinoma in the upper thoracic esophagus with metastasis to the celiac nodes in this series. More cases are needed for an appropriate statistical evaluation.

4. Proposal for future revision of the N-category in the TNM classification

Based on the above-mentioned data, the following proposal was made. The Committee suggests the M1-LYM should be re-designated as N2 for all locations of thoracic esophageal carcinoma.

This analysis is based on the recent data on 986 cases from 1988 and 1989 which are more uniform and standardized.

5. Proposal for future meetings of the TNM Research Committee: The number of positive nodes and areas, and sites of positive nodes will be discussed as the prognostic factors in the next Meeting.

(G. RIZU)
Barrett’s

The 1992 meeting of the Barrett’s Research Committee was held in Kyoto on August 4, under the chairmanship of Dr. F. H. Ellis, Jr. Also present were S. Stipa, R. Giulii, T. Lerut, A. Durancou, T. Aoki and I. Cecconeillo. Absenti: P. Keeling and M. Gringeri. (1) The minutes of the last meeting in Munich August 30, 1991 were reviewed. Since they consisted almost entirely of summaries of the Barrett’s Research protocol, Dr. Giulii summarized the protocol emphasizing its simplicity in spite of the size of its multipage form. Endoscopy was a mandatory part of the study using Savary’s criteria for evaluating esophagitis. Neither pH monitoring nor manometry are required. Systematic biopsies were not defined nor was a specific time frame for their performance established.

(2) Dr. Giulii provided a progress report stating that 60 teams from 20 countries had agreed to participate in the Barrett’s protocol. He has already received 55 reports of varying completeness and is currently investigating the possibility of providing follow-up funding in the amount of $200,000 per year from the Quinta Medical Company.

(3) Dr. Stipa’s report on flow-cytometry was discouraging in spite of the lack of expense required of the participants. None of nearly a hundred potential participants responded to his inquiries. In view of this negative response, the committee agreed to eliminate the request for flow-cytometry material from the present Barrett’s protocol. The committee also expressed concern that questions in the protocol related to “esophagitis” may be duplicate information currently being obtained by the newly established subcommittee on "Gastroesophageal Reflux".

(4) Dr. Ellis reviewed the current literature and the committee’s response to the question of the value of close surveillance of benign Barrett’s patients in terms of early detection of cancer and improved post resection survival obtained thereby. Most of the available information is anecdotal but the four more or less formal studies already published on the subject, (Altorki, Marciniak, Laheny Clinic, and Lerut) clearly show its advantages.

Approximately three quarters of surveillance patients have stage 0, 1, or ITA lesions at detection whereas three quarters of cancer in Barrett’s esophagus patients not under surveillance were in stages III or IV. Five year post resection survival of 62.2 %, 66.7 %, and 90 % have been reported.

The committee recommended that the society approve a surveillance program for patients with benign Barrett’s mucosa or low grade dysplasia by annual endoscopy, resection being recommended for those with high grade dysplasia/carcinoma in situ and, of course, invasive carcinoma.

(5) The following steps are suggested for further study:

a. The cost effectiveness of close surveillance of benign Barrett’s patients as described above.

b. The natural history of low grade dysplasia.


d. A search for more sensitive markers than currently available to detect which patients with benign Barrett’s mucosa are destined to develop cancer.

(T. Lerut)
The Faculty of Medicine, University of Natal, is located on the coast of South Africa, in Durban. The main teaching hospital is King Edward VIII Hospital (2000 beds) and Wentworth Hospital (650 beds), where I was allocated to the Cardio-thoracic department, attached to the main Department of Cardiothoracic Surgery, under the leadership of Professor John Robbs.

In view of the frequent pathology related to the esophagus with an epidemic proportion of cancer of the esophagus, the Department of Surgery has created a special esophageal unit with 40 beds. I was privileged to be appointed to this unit under professor A. Haffejee, well known researcher. This unit is a referral centre from all other hospitals collecting patients from the east coast of South Africa, mainly Natal and Transkei.

The latter has proved to be the geographical area with the highest incidence of carcinoma of the esophagus in the world. Our department is receiving 500 new patients with cancer of the esophagus per annum. The majority of our admissions are related to patients from distant rural areas. Patients were usually in a poor general condition, cachetic with advanced clinical pathology. Each patient was thoroughly investigated and assessed.

The treatment pattern is similar to that of other leading world centers. Resection was performed in only a minor percentage of patients 15%, due to the advanced pathology. These patients were treated in a palliative manner with pulson intubation with a locally developed Proctor-Livingstone esophageal tube. 10% of admissions died prior to any surgical intervention. The locally developed method of pulson intubation is the best form of treatment in view of the rapid turnover of beds, patient welfare and general low hospital costs.

This method was also applied in esophageo-respiratory tract fistulae which consisted of 10% of our total admissions. 75% of the above patients were relieved from respiratory and digestive discomfort. In 30% of patients the survival is less than one year. The esophageal center has tried different methods of palliative treatment like retrosternal gastric bypass and came to the conclusion that the present method is the best available in view of limited side effects, nutritional advantages, patient comfort and shorter time of hospitalization.

In summary, I am extremely grateful to the International Society for Disease of the Esophagus which supported my research in Durban, the fellow researchers of the Faculty of Medicine, University of Natal, for their cordial hospitality and assistance. I am sure that the experience gained from the work will be well applied at my Department of Surgery in Wroclaw. (M. Kornaszewska)

Tsunomu Nakamura, M.D.
Institute of Gastroenterology
Tokyo Women's Medical College
Tokyo, Japan

I have stayed in the Department of Surgery, Technical University of Munich, Germany, from the 1st November 1991 to the 30th October 1992. After the recent political change in Europe, Munich became a central city of Europe thus it was a little bit crowded due to many foreigners or refugees. However, it has good public security and many beautiful sights. The hospital "Klinik der Isar" literally located in the right side of the Isar river across the central of the city. Professor Sievert is not only an active surgeon but a director who manage a lot of scientific researches. Assistant Professor Hoelscher who is chief of esophageal surgery has kindly taken care of foreign scholars like me. I was impressed by endoscopic dissection of the esophagus transmediastinal esophagectomy. This operation was far different from the blunt dissection of the esophagus that we have performed, mainly in patients at risk, without opening the thoracic cavity. They performed lymphnode dissection of the upper abdomen and the lower thorax by opening the diaphragm. Furthermore, the endoscopic dissection of the esophagus is very useful to resect the whole esophageal wall without any complication. I feel that this operation is one of the most suitable operations for patients with Barrett's esophageal carcinoma. I performed my research in the onological laboratory, one of the laboratories of the Department of Surgery. Dr. Nekarda, a professor of the laboratory, who is experienced in pathology organized my research well, and the other doctors and technicians kindly helped me. At first, I studied the pathology of Barrett's esophageal carcinoma under Dr. Becker in the Department of Pathology. Then, I measrued DNA content of Barrett's esophageal carcinoma and Barrett's metaplasia by flow cytometry using paraffin-embedded resected specimens and endoscopic biopises, and analyzed c-erbB-2 oncprotein expression using the same materials. Finally, I made a presentation on my research at the German Cytometric Symposium in Heidelberg on November 23rd, 1992. There are few patients with Barrett's esophagus in Japan, but I have demonstrated that Barrett's esophageal carcinoma is different from adenocarcinoma at the gastric cardia of which we have a lot in Japan. Therefore, I appreciated the value of my experiences in Technical University of Munich which is one of the frontier institutes of Barrett's esophagus. Finally, I would like to thank the ISDE scholarship committee for giving me the opportunity to perform research in Munich. (T. Nakamura)
My stay at Tohoku University School of Medicine proved to be highly beneficial and enabled me to gain new insights and increase my knowledge under the expert guidance of Professor Mori, Associate Professor Nishihira and their colleagues.

I was greatly impressed with all aspects of examination, diagnosis and treatment. Patients at this institution undergo thorough and meticulous examination for early detection of thoracic cancer. In addition to contrast x-rays, computerized tomography and intraluminal echography of the esophagus are employed. When cancer is diagnosed and surgery is scheduled, I observed placement of the Swan-Ganz catheter and subsequent washing of the atrial cavity with physiological solution which offers great safety with regard to pulmonary ventilation during surgery. In addition, complete data on the patient’s condition obtained from detailed laboratory and cardiological studies facilitates safe surgical treatment.

In the operating room, I noted the thorough preparations and the presence of advanced equipment and surgical devices. I was also impressed by the tight organization of the operating team, the chief surgeon of whom thoroughly briefs members of the team on the details and explains the progress of the operation at each step with regard to procedures and techniques, demonstrating a deep knowledge of anatomy. The performance of the anesthesiologist, who left nothing to chance, was also impressive, as was the skill demonstrated by all members of the operating team. In addition, follow-up of patients was very conscientious, including discussion with and reexamination of the patients.

The high quality treatment mentioned above is offered in comfortable, well-equipped, up-to-date facilities which can accommodate patients suffering from any type of pathology. The medical school also includes an excellent library of which I made full use at my discretion.

In conclusion, I feel that I greatly benefited from my stay at Tohoku University School of Medicine and appreciate this chance afforded by the I.S.D.E. scholarship.
RECENT PUBLICATION

Currently several competing techniques to obtain improved cure rates of esophageal cancer have been developed. These include several variations of extensive surgery and combinations of therapy, including chemotherapy and radiotherapy irradiation. To enable comparison of results from different treatment extensiveness of surgery precise staging of the disease is essential. However, in esophageal cancer the difficulties in defining the region to be resected and the lack of general understanding of the lymphatic anatomy and drainage pathways make the design and comparison of surgical techniques much more controversial and difficult than for treatment of cancer in other digestive tract organs.

The Color Atlas of Surgical Anatomy for Esophageal Cancer gives the surgeon who wishes to perform adequate esophageal surgery the optimal anatomical and surgical fundamentals to do this. This Atlas is of enormous benefit to students of esophageal cancer as it provides a clear description of the anatomical features of esophageal surgery. The lymphatic pathways are clearly illustrated through the author's sophisticated study based on precise data from human autopsies. A basis for international understanding of the staging system is well presented in this book. It might even be called the "ISDE Textbook of Modern Esophageal Surgery". (R. Ide)

NEW JOURNAL OF ISDE

Based on the decision of the ISDE Business Meetings in Kyoto, August, 1992, the Secretariat hereby announces the new form of the ISDE official journal "Diseases of the Esophagus" as follows:

(1) "Diseases of the Esophagus" is at present published by Masson Co. Masson will terminate their involvement with the "Diseases of the Esophagus" as of No.2 1992 (December 1992).

(2) Continued publication of "Diseases of the Esophagus" will be made by Churchill Livingstone Co., including their previously published journal "Gullet", 4 issues of 80 pages each in A-4 (8.5 x 11 inches) format per year.

(3) For the sake of transit preparation the first revised issue will appear on July 1st, 1993 with another issue within 1993.

(4) The new version of "Diseases of the Esophagus" will welcome high quality papers from a broader range of subscribers including more gastroenterologists and other specialties, in addition to the field of surgery.

(5) Further details will be provided in the next Newsletter.

Editor-in-Chief:
Professor J. R. Siewert, M.D.

Saddening News

We have to announce the most grievous news that Prof. Seiichiro Kobayashi (Tokyo) passed away on January 4th, 1993 due to cardiac insufficiency. Truly, the ISDE has lost one of its finest and most generous members. The late Prof. Kobayashi devoted himself as treasurer from the inauguration of the ISDE - 1980 to last year -1992. His efforts for collecting funds for the ISDE were truly outstanding. Respectfully we pray for the repose of the soul of the late great Prof. Seiichiro Kobayashi.

(B. S. BHANUSHALI)
NEW OFFICERS DURING THE 5TH TRIENNIAL TERM  

President: D. B. Skinner  
Vice President: E. Moreno-Gonzalez  
Immediate Past President: J. R. Siewert  
Secretary General: K. Inokuchi  
President: H. Akiyama  
President: J. W. Wong  
President: A. G. Little  
President: H. W. Pinotti  
President: S. Stipa  
President: J. Kiss  
President: C. G. Brenner  
President: K. Nabeya  
President: A. Perrachia  
Editor-in-Chief of Journal: J. R. Siewert  
Congress Chairman (6th): A. Duranceau

CONGRESS NEWS ***************

1993  
* 15TH WORLD CONGRESS OF SURGERY  
INTERNATIONAL SOCIETY OF SURGERY  
INTERNATIONAL SURGICAL WEEK  
Site: HONG KONG  
Date: August 22-28, 1993  
Chairman: J. W. Wong, M.D.  
Department of Surgery  
University of Hong Kong  
Queen Mary Hospital

* 4th INTERNATIONAL CONGRESS OF O.E.S.O.  
POUTH INTERNATIONAL POLYDISCIPLINARY CONGRESS  
The Esophageal Morcosa  
Site: Paris, France  
Date: September 1-4, 1993  
President: G. N. J. Teytger and T. R. DeMEESTER  
Director: Robert GIULI, M.D.  
Service de Chirurgie Digestive  
Hôpital Beaujon

* THE 11th ASIA PACIFIC CANCER CONFERENCE  
Site: Bangkok, Thailand  
Date: November 16-19, 1993  
Chairman: Phisut Phanthumachinda, M.D.

THE 9TH ANNUAL MEETING OF THE JAPAN SECTION  
* OF ISDE  
Site: Tokyo, Japan  
Date: November 20, 1993  
President: Prof. Mitsu Endo  
1st Dept. of Surgery  
Tokyo Med. & Den. University

1994  
* NICK XVI INTERNATIONAL CANCER CONGRESS  
Site: New Delhi, India  
Date: October 30 – November 5, 1994  
Secretary General: Prof. P. B. Desai  
Tata Memorial Centre  
Parel, Bombay-400 012

* XXIX WORLD CONGRESS  
INTERNATIONAL COLLEGE OF SURGEONS  
Site: London, UK  
Date: November 13 – 16, 1994

1995  
* SIXTH WORLD CONGRESS OF ISDE  
Site: Milan, Italy  
Date: August 23 – 26, 1995  
President: Alberto Peracchia, M.D.

1998  
* SEVENTH WORLD CONGRESS OF ISDE  
Site: Montreal, Canada  
Date: September 2 – 5, 1998  
President: Andre Duranceau, M.D.  

National Representatives  
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