



# Brief history of the Asiatic International Society of Hematology: our roots of international cooperation with Asian countries

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## Abstract

This year, 2018, marks the 60th anniversary of the Asiatic International Society of Hematology founded in 1958 and it seems to be a fitting occasion on which to reflect on our roots of the international cooperation with Asian countries. The Japanese Society of Hematology held the first meeting of the Asiatic International Society of Hematology in 1958 in Nagoya. Hematologists representing at least 10 Asian countries or districts, including Australia, Burma, Ceylon, Hong Kong, India, Indonesia, Korea, Philippines, Taiwan, and Thailand, participated. This meeting was perhaps the first International Congress of any kind in the medical field in Japan after World War II. In 1968, the Asian-Pacific Society of Hematology converged to join the International Society of Hematology (ISH) and became one of the three divisions of ISH (Asian-Pacific Division of ISH). The Annual Reports of the Society were published in Nagoya from 1969 to 1991. The meetings of the Asiatic International Society and the Asian-Pacific Division of ISH, and the distributions of the Annual Report to Asian countries, including China and Korea, seemed to help promote hematology in those countries, particularly in the early days.

**Keywords** International Society of Hematology (ISH) · Asian-Pacific Division of ISH · Promotion of hematology

## Background

Hematology, both basic and clinical, has a long tradition in Japan. The Japanese Society of Hematology was founded in 1937; it is the second oldest hematology society in the world, next to the French Society of Hematology (SFH, Société Française d'Hématologie) founded in 1931. The official journal of the Society, *Acta Haematologica Japonica* (now *the International Journal of Hematology*), also began its publication in 1937. Before World War II, the knowledge of hematology was mainly imported into Japan from Germany. Anemia, leukemia, and hemophilia were well-known clinically, but their pathophysiology was poorly understood. After the war, the influence of American hematology began to increase. As early as in 1952, a few Japanese hematologists attended the International Society of Hematology (ISH) which was founded in 1946 in USA. In 1956, the ISH council decided to hold the 8th Congress in Japan in 1960 with Dr. Seizo Katsunuma as President. Yet, the level of

hematology is not high in most Asian countries, and Asian hematologists were not able to participate in ISH, because they could not afford long-distance traveling expenses. In anticipation of the 8th ISH Congress to be held in 1960, the Japanese Society of Hematology organized a small-scale international meeting for Asian hematologists in 1958. This year, 2018, marks the 60th anniversary and it seems to be a fitting occasion on which to reflect on our roots. This review is based on the booklet published by the Japanese Society of Hematology in 2005 [1] and on the documentation filed at the Department of Medicine in Nagoya University School of Medicine.

## First meeting in Nagoya (March 28, 1958)

The first meeting of the Asiatic International Society of Hematology (later called the Asian-Pacific Society of Hematology) was held in Nagoya under the competent leadership of Professor Susumu Hibino (Nagoya University School of Medicine) in March 28, 1958. The Congress took place concomitant with the 20th Annual Meeting of the Japanese Society of Hematology. Incidentally, it was 1958 when the first official meeting of the American Society of Hematology

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(ASH) was held in Atlantic City, USA [2]. According to Dr. Hibino's memorabilia, the idea of holding the meeting as a preparation for ISH Congress was also shared by Dr. Shigeyasu Amano (Chief Editor of *Acta Haematologica Japonica*) at Kyoto University. There was very little information regarding hematologists in Asian countries at that time, and it was a huge task to organize an international meeting from "square one". Dr. Hibino sent invitation letters to many universities with the help of the Japanese embassy in each country. Fortunately, hematologists representing at least ten countries or districts, including Australia, Burma, Ceylon, Hong Kong, India, Indonesia, Korea, Philippines, Taiwan, and Thailand, participated (Fig. 1). The constitution and by-laws, the councilors and the subsequent venue were proposed and agreed upon at the organizing committee for the inauguration. The registration fee was 1000 Japanese Yen (3 US dollars). The Congress was a big success with more than 1500 participants. Following the meeting, the foreign participants were invited to a tour of the Ise Shrine and the Mikimoto Pearl Island: a prototype of the post-Congress tour of the international meeting. This was perhaps the first International Congress of any kind in the medical field in Japan after World War II. It was a significant event that became a trigger for the promotion of hematology progress in Asia.

The program of the Congress (Table 1) reflected the level of hematology at that time. The majority of the presentations were related to clinical and statistical studies of anemia and leukemia, since no effective treatment for leukemia was available in Asia. Of note is the presentation on the incidence and mortality of leukemia among persons who had

been exposed to atomic radiation in Hiroshima in 1945. It is interesting to note that the presentations from India and the Philippines included thalassemia and hemoglobinopathy such as hemoglobin E. These topics have piqued high intrigue among the Japanese scientists who had never seen such blood diseases.

## Subsequent meetings and activities of the Asian-Pacific Society of Hematology

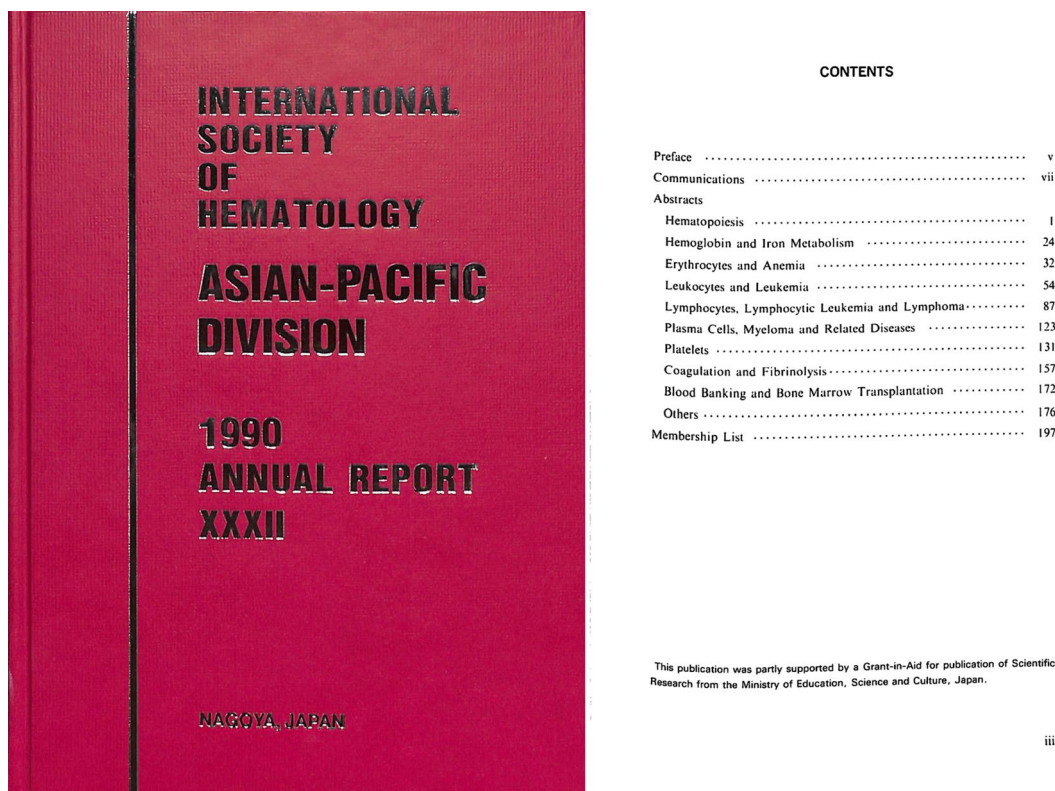
The second meeting was held in Manila, Philippines in 1961 (President: Stransky E). The third meeting took place in Jerusalem in 1964 (President: Rachmilewitz M). It is noteworthy that Israel belonged to the Asian-Pacific Society at that time. The program included, among other topics, folic acid and vitamin B<sub>12</sub> metabolism, megaloblastic anemia, abnormal hemoglobin, leukemia, malignant lymphoma, and heparin. The fourth meeting was held in New Delhi, India in 1967 (President: DasGupta CR). The program ranged from myeloproliferative disorders, hemolytic disorders, nutritional anemias, hemorrhagic disorders, to immunology and genetics. Hematology was still a developing discipline in many countries in the Asia-Pacific region. And yet there was a need for an international organization through which hematologists from various countries could exchange information and experience in both basic and clinical hematology. For most Japanese hematologists, the Asian-Pacific Society of Hematology functioned as an occasion by which they experienced their first international meeting.

**Fig. 1** Group photo at the First Congress of the Asiatic Society of Hematology, March 28, 1958



**Table 1** Program of the first Congress

Speaker	Title
Kawakita Y (Kumamoto, Japan)	Statistics of anemia
Sano T (Sendai, Japan)	Statistics of anemia in infants and children
Mikamo Y et al. (Tokyo, Japan)	Statistical studies on the cases of anemias treated at the medical clinic of Tokyo University Hospital
Nakae R (Nagoya, Japan)	Epidemiological observation on anemia in infants and children
Chatterjea JB et al. (Calcutta, India)	Hemoglobinopathy in India
Soonu S et al. (Bombay, India)	Observations on thalassemia
Stransky E (Manila, Philippines)	On hemoglobin E and hemoglobin E disease in the Philippines
Ting N, Hwang T-s (Taipei, Taiwan)	Hypoplastic anemia with a report of 14 cases
Keng KL, Odang O (Djakarta, Indonesia)	Megaloblastic anaemia of infancy and childhood in Djakarta
Lee M (Seoul, Korea)	The studies in iron metabolism
Wakisaka G (Kyoto, Japan)	Clinical and statistical research of leukemia in Japan, especially in the Kinki district
Ota K (Nagoya, Japan)	Clinical and statistical studies of leukemia in the Tokai district in Japan
Watanabe S, Wago M (Hiroshima, Japan)	Trends in incidence and mortality rate of leukemia among persons who had been exposed to atomic radiation at Hiroshima in 1945
Hayes RA (Melbourne, Australia)	Leukemia in Melbourne in 1946–1955
Chatterjea JB et al. (Calcutta, India)	Observations on leukemia in India
Kimura K (Nagoya, Japan)	On the chemotherapy of leukemia in Japan
Desai RG (California, USA)	Treatment of chronic granulocytic and lymphocytic leukemia and allied disorders with Myrelan and Leukeran in Indian subjects



**Fig. 2** Annual Report of the Society

Dr. Hibino (Secretary-General) and his associate, Dr. Yutaka Hirota, published in Nagoya *the Annual Report of the Society* (Fig. 2) from 1969 to 1991. The Report

contained activities of the hematology society of each country, abstracts of papers published by the Asian-Pacific hematologists and the membership list. The distribution of

the Annual Report to Asian countries, including China and Korea, seemed to help promote hematology in those countries, particularly in the early days.

### Incorporation into the International Society of Hematology (ISH) and the role of the Asian-Pacific division (APD-ISH)

In 1968, the Asian-Pacific Society of Hematology converged to join the International Society of Hematology (ISH) and became one of the three divisions of ISH (APD-ISH) along with the European Society of Hematology (European and African Division, EAD) and the Inter-American Division, IAD (Fig. 3). Each division of ISH has a Vice-President and a Secretary-General. Dr. Hibino served as the Secretary-General of the Asian-Pacific Society of Hematology and APD-ISH from 1958 to 1972. The Secretary-General, a core of the Society, keeps a correct and permanent record of the meetings, and the transactions of the Society, and also updates the membership roster. The following persons served this job successively: Dr. Kiyoharu Takikawa (1972–1978), Dr. VA Lovric (Australia, 1978–1984), Dr. Murice Rozenberg (Australia, 1984–1992), Dr. Shiro Miwa (1992–1996), Dr. Hidehiko Saito (1996–2005), Dr. Tomomitsu Hotta (2005–2012), and Dr. Tomoki Naoe (2012–the present). Dr. Miwa served as Chairman of the ISH Council from 1996 to 2000, following the Secretary-General of APD-ISH.

The Vice-Presidents of APD-ISH from Japan were Dr. Susumu Watanabe (Hiroshima), Dr. Susumu Hibino (Nagoya), Dr. Kiku Nakao (Tokyo), Dr. Gyoichi Wakisaka (Kyoto), Dr. Satimaru Seno (Okayama), Dr. Takeshi Abe (Tokyo), Dr. Haruto Uchino (Kyoto), Dr. Minoru Okuma (Kyoto), Dr. Hideaki Mizoguchi (Tokyo), and Dr. Hidehiko Saito (Nagoya). During 1996–2000, the council consisted of members from 12 countries (Australia, Hong Kong, India,

Indonesia, Japan, Korea, Malaysia, New Zealand, Philippines, Singapore, Taiwan, and Thailand). It should be noted that no member represented China in the council meeting. The reason has been that the Chinese Society of Hematology does not want to sit side by side with Taiwan hematologists unless Taiwan agrees to put the word “China” before or after the name of the society. China maintained a strong objection against the “Two China” issue. This problem was resolved in 2004 at the APD-ISH Divisional Congress in Nagoya, Japan. The number of membership has been around 500–700 from 26 countries. The membership fee was 40 US\$ for 2 years, which is reasonably inexpensive. But the financial basis of the Division was fragile.

After the incorporation into ISH, ISH Congresses were held in a rotation of the Inter-American, the European and African, and the Asian-Pacific Divisions every 2 years. However, the Asian-Pacific Division (APD-ISH) continued to hold its own Congress as well. The mission of the Divisional Congress was somehow different from the ISH Congress and it was to foster clinical hematology mainly via an educational program rather than by cutting-edge science presentations. For example, APD-ISH has an Education and Training Committee that has organized an excellent hematomorphology course. It seems that APD-ISH has been playing an important role in sharing and communicating our experiences in clinical hematology in Asian countries. However, in recent years the young Asian hematologists have little interest in attending our Society, because of advanced information communication technology (ICT) and the overwhelming power of ASH and EHA (European Hematology Association). With the Congress in Sydney, Australia in 2011, APD-ISH terminated the Divisional Congress. Perhaps, globalization does not allow a local society to survive.

### Future perspective

It is amazing to see that ASH, founded in the same year (1958) as APD-ISH, has grown to an enormous size, with the annual meeting attracting more than 20,000 participants. The attendance of the first ASH meeting was said to be around 300 [2]. ASH became the largest society of hematology worldwide and now it has an outreach program covering Asia. One of the factors that made ASH very powerful and attractive is the high level of cutting-edge science. The official journal of ASH, *Blood*, enjoys a high impact factor, and it is very appealing to the membership as well as to industries which sponsor advertising. Unfortunately, neither ISH nor APD-ISH was able to have an excellent journal. With the demise of APD-ISH Congress, many Asian hematologists may have lost a society where they feel at home. In recent years, the Japanese Society of Hematology has been organizing an Asian symposium in which many Asian

## History of ISH-APD

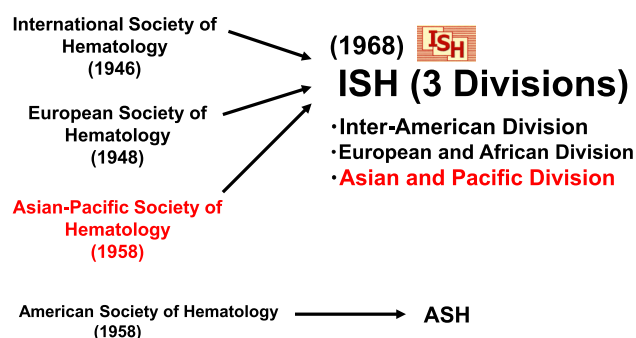


Fig. 3 History of APD-ISH



hematologists have participated by giving a presentation. We hope that this initiative will create a platform to replace APD–ISH in the near future.

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### **Compliance with ethical standards**

**Conflict of interest** We have no conflict of interest in this review.

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