

# EVOLUTION OF THE U.S.–JAPAN PROGRAM

During the past 40 years, the USJCMSP has changed and grown, influenced by emerging health needs in Asia, the comings and goings of delegates and panel members, and new scientific opportunities that were inconceivable in 1965. Today, at the close of 2004, the USJCMSP includes nine Joint Panels and a Joint Board on Immunology, double the number that existed in 1965. Interdisciplinary research is becoming the norm, and the Joint Committee is playing a larger role in the overall management and direction of the Program. Other changes are also evident. The USJCMSP now sponsors a series of conferences and workshops, international in scope and outside the boundaries of the USJCMSP Panels. Chief among them are the annual International Conferences on Emerging Infectious Diseases in the Pacific Rim, which will mark their 10<sup>th</sup> anniversary in 2005. The discussion that follows is a summary of the evolution and scientific advances of the U.S.–Japan Program and its Panels and Boards.

## 40 YEARS OF CHANGE

In April 1965, Japanese and U.S. members of the Joint Planning Committee had chosen five disease areas for study: cholera, leprosy, parasitic diseases, tuberculosis, and virus diseases.<sup>1</sup> Later that year, the Joint Delegation established Japanese and U.S. Panels for each of the disease areas. Already, delegates were considering the serious problem of malnutrition, and in 1966, the Japanese and U.S. Panels on Malnutrition were formally established.

For the first 7 years of its existence, the U.S.–Japan Program enjoyed the participation of its original leaders. That changed in February 1972, when U.S. Delegation Chair Dr. Colin MacLeod died in a London hotel while en route to Dacca, East Pakistan (now Dhaka, Bangladesh), to conduct a review for NIH of the Cholera Research Laboratory in Dhaka. [See PROFILE: Colin Munro MacLeod, p. vii.] Dr. Ivan Bennett, Jr., replaced Dr. MacLeod as Chair of

the U.S. Delegation and served in that position until his death in 1990. Dr. Toshio Kurokawa, the original Chair of the Japanese Delegation, continued to serve in this position until 1979. [See PROFILE: Toshio Kurokawa, p. v.]

Also in 1972, the USJCMSP Joint Committee approved the creation of the Japanese and U.S. Panels on Environmental Mutagenesis and Carcinogenesis. Industrial pollution was being associated with severe health problems, and the new Panels were established to study a range of problems related to environmental contamination.

At their 13<sup>th</sup> annual meeting, held in Bethesda, Maryland, in June 1977, members of the Joint Committee discussed new initiatives and expanded the guidelines of the Joint Cholera Panels to include other bacterial enteric diseases. They also considered establishing a new panel on hepatitis, and discussed how the U.S.–Japan Program could incorporate the burgeoning fields of cellular immunology and immunogenetics. The next year, the 14<sup>th</sup> meeting of the Joint Committee in Tokyo included a Hepatitis Symposium, and Joint Committee members approved the formation of the Japanese and U.S. Hepatitis Panels, pending the acceptance of proposed guidelines.

In 1979, significant changes again occurred in the leadership of the U.S.–Japan Program, as well as in the evolution of its Panels. In January 1979, Dr. Toshio Kurokawa resigned as Chair of the USJCMSP Japanese Delegation and Co-chair of the Joint Committee, positions he had held since the beginning of the Program. Dr. Norio Suwa, a pathologist and then professor emeritus at Tohoku University in Tokyo, replaced Dr. Kurokawa as Chair of the Japanese Delegation. Dr. Suwa had been a member of the Japanese Delegation since 1974, and he served as its Chair until 1987.

The same year, at its 15<sup>th</sup> meeting, held at NIH in Bethesda, Maryland, the Joint Committee approved

guidelines for the new Japanese and U.S. Hepatitis Panels. The members also recommended that a symposium on immunology be held in 1980, prior to the Joint Committee's next meeting. The strategy was to use the symposium as a basis for deciding whether immunology should be included as the U.S.–Japan Program's first discipline-oriented panel. The symposium was a success and, in 1981, the USJCMSP added the Joint Immunology Boards to its repertoire of disease-based panels. The funding for the Japanese Immunology Board was supplied by the Ministry of Education, Culture and Sports, rather than the Ministry of Health, Labour and Welfare, which supported the activities of all the disease-oriented Panels.<sup>2</sup> In the United States, the National Institute of Allergy and Infectious Diseases (NIAID), a component of the National Institutes of Health (NIH), agreed to fund the new U.S. Immunology Board.<sup>3</sup>

From July 18–19, 1985, members of the U.S.–Japan Program met in Washington, D.C., and celebrated the 20<sup>th</sup> anniversary of the organization. Dr. Norio Suwa chaired the Japanese delegation and Dr. Ivan Bennett Jr. chaired the U.S. delegation. U.S. Secretary of State George Schultz hosted a reception for USJCMSP members in the Great Hall of the National Academy of Sciences. The fourth five-year report, entitled “Two Decades of Progress: The United States–Japan Cooperative Medical Sciences Program,” released in July 1985, is dedicated to Dr. Bennett (Chairman of the U.S. Delegation, 1972–1990, and Co-chairman of the Joint Committee), and to Dr. Theodore Woodward (member of the original U.S. Delegation from 1965–1995, and now emeritus member).

At the 23<sup>rd</sup> meeting of the USJCMSP Joint Committee, held at NIH in July 1987, Dr. Anthony Fauci, Director of NIAID and U.S. Delegation member (1986–present), gave a presentation about acquired immunodeficiency syndrome (AIDS). Since its recognition as a disease entity in 1981, AIDS had become a serious public health problem in the United States and was spreading to other countries. That year, the USJCMSP Joint Committee agreed to establish new Japanese and U.S. Panels on AIDS.

Meanwhile, in 1987, Dr. Shiro Someya, an eminent microbiologist at the Institute of Public Health, succeeded Dr. Suwa as Chairman of the Japanese

Delegation. Dr. Someya had become a member of the Japanese Delegation in 1987, and he served as its Chair from 1977–1992.<sup>4</sup>

In the summer of 1990, the USJCMSP lost another important participant. Dr. Ivan Bennett, who had been a member of the U.S. Delegation from 1965–1972, and had become Chair (after Dr. Colin MacLeod's death in 1972), died in Tokyo, shortly after receiving a special honor. As part of the Silver Jubilee celebration for the U.S.–Japan Program, Dr. Bennett was awarded “... a decoration bestowed by His Majesty the Emperor of Japan, the Order of the Sacred Treasure, Gold and Silver Star, in recognition of his dedicated contributions to the Program and for his advancement of medical research in Japan.”<sup>5</sup> On his way back to the hotel, after receiving the award at the Japanese embassy, Dr. Bennett suffered a stroke. He died several days later in a Tokyo hospital. Dr. Charles Carpenter, who was then a professor of medicine at Brown University and had been a member of the U.S. Delegation since 1972, became U.S. Delegation Chair.

Two years later, in 1992, Dr. Tadao Shimao became Chairman of the Japanese Delegation. At the time, Dr. Shimao was Chairman of the Board of the Japan Anti-Tuberculosis Association; he had been a member of the Japanese Delegation to the USJCMSP since 1978.

**USJCMSP recipients:**

**The Order of the Sacred Treasure, Gold and Silver Star**

- Dr. Ivan L. Bennett Jr. 1990
- Dr. Theodore E. Woodward 1990
- Dr. Charles C. J. Carpenter 1998
- Dr. Edward Watson Fuch Jr. 1998

The Order of the Sacred Treasure, Gold and Silver Star is a decoration bestowed by His Majesty the Emperor of Japan.

**The Order of the Rising Sun, Gold and Silver Star**

- Dr. Richard M. Krause 2004

The Order of the Rising Sun, Gold and Silver Star is a decoration bestowed by His Majesty the Emperor of Japan.

Outside factors have also influenced the activities and evolution of the USJCMSP. For example, in July 1993, U.S. President William J. Clinton and Japanese Prime Minister Kiichi Miyazawa (November 1991–August 1993) signed the Common Agenda for Global Cooperation, which enhanced collaboration through bilateral programs, including the Children’s Vaccine Initiative (CVI). The AIDS Panels of the USJCMSP enthusiastically endorsed the bilateral Common Agenda and hosted discussions among government policy representatives and scientists. These led to agreement on the importance of expanding bilateral efforts on CVI-related research and development, particularly in the area of acute respiratory infections.<sup>6</sup>

The subject of controlling the AIDS pandemic was again a major point of discussion in 1994, at a meeting between Japanese Prime Minister Tomiichi Murayama (1994–1996) and U.S. President Clinton entitled the “U.S.–Japan Framework for a New Economic Partnership.” To help prepare for the meeting between the two heads of state, Dr. Wataru Mori (member of Japanese Delegation 1982–2002), who also served as a medical official in the AIDS/ Infectious Diseases Control Division of the Japanese Ministry of Health and Welfare; Dr. Charles Carpenter (member of U.S. Delegation 1972–1990; Chair of U.S. Delegation 1990–2000); and Dr. Richard Krause (member of U.S. Delegation 1976–1984 and 1991–2005) helped organize scientific and technical materials pertaining to AIDS.

Within the past decade, the USJCMSP Panels have refocused their research activities and modified their titles to reflect the changing health needs of Asian countries. In 1996, after extensive review and discussion, the Joint Committee decided to combine the Japanese and U.S. Panels on Leprosy with the Panels on Tuberculosis. Done in part to alleviate budget constraints, the merger of the Panels also helped pave the way for the establishment, also in 1996, of the Japanese and U.S. Panels on Acute Respiratory Infections. In 1997, the Japanese and U.S. Malnutrition Panels were renamed the Nutrition and Metabolism Panels and, in 1998, the Joint Committee adopted the recommendation to change the name of the Cholera Panels to the Panels on Cholera and Other Bacterial Enteric Infections.

Three years later, at its 37<sup>th</sup> meeting, held July 24–25, 2001, in Princeton, New Jersey, the members of the Joint Committee began an intense effort to plan for the future of the USJCMSP. They endorsed the Joint Subcommittee recommendation that USJCMSP reporting be simplified and focused on Joint Panels and Board guidelines, Joint Panels and Board activities, U.S.–Japan bilateral collaborative activities, and U.S.–Japan collaboration in other countries. The Joint Subcommittee also discussed how to increase exchange between the USJCMSP and new multilateral initiatives such as the G8 Economic Summit Infectious Diseases Initiative, activities of the United Nations General Assembly on AIDS, and the Global Fund for HIV/AIDS, Malaria, and Tuberculosis. To pursue these and other objectives, the Co-chairs of the Joint Committee organized a Task Force of U.S. and Japanese members, which included Drs. Yoshifumi Takeda, Adel Mahmoud, John La Montagne, Carole Heilman, and Toshinobu Sato. At the same meeting, reviewers for the Environmental Mutagenesis and Carcinogenesis Panels recommended approval of proposed new guidelines, and approved changing the name of the Panels to the Japanese and U.S. Panels on Environmental Genomics and Carcinogenesis.

Other important changes in 2001 occurred in the leadership of the U.S. and Japanese Delegations to the USJCMSP. Dr. Adel Mahmoud, a member of the U.S. Delegation since 1994 and President of Merck Vaccines, succeeded Dr. Carpenter as U.S. Delegation Chair. Dr. Yoshifumi Takeda, Director-General of the National Institute of Infectious Diseases and member of the Japanese Delegation since 1993, succeeded Dr. Shimao as Chairman of the Japanese Delegation.

During the past decade, USJCMSP panels have approached health problems from an increasingly interdisciplinary perspective. Several Panels have held joint meetings, and to underscore the emphasis on interdisciplinary approaches to health problems, many Panels have revised their guidelines. At its March 2004 meeting in Hawaii, the Joint Subcommittee developed a new conference organization and format to promote cross-fertilization among the nine Panels and the Immunology Board.

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*International Conferences on Emerging Infectious Diseases in the Pacific Rim.* Since 1996, the U.S.–Japan Program has sponsored International Conferences on Emerging Infectious Diseases (EID) in the Pacific Rim to which scientists from all over the world are invited. The USJCMSP held the first of these meetings, then called the “Conference on Emerging Diseases,” from July 27–28, 1996, in Kyoto. The current Japanese Delegation Chair Dr. Takeda was the driving force behind the conferences, which will celebrate their 10<sup>th</sup> anniversary in 2005. The International EID Conferences have become important international forums for scientific exchange and discussion about diseases that have gained worldwide notoriety, such as West Nile virus, Severe Acute

Respiratory Syndrome (SARS), and avian influenza, as well as the diseases that have long been a focus of the USJCMSP.

Each year, the International EID Conferences convene in a designated country in the Pacific Rim. Each conference focuses on two or three major health problems in Pacific Rim countries that also fall within the purview of USJCMSP Panels and Boards. Participants meet in plenary sessions and working groups led by Japanese, American, and other experts from the region in the area of emerging infectious diseases. The Japanese Ministry of Health provides a small research grant to help other Asian scientists attend these meetings.

### International Conferences on Emerging Infectious Diseases in the Pacific Rim

	Date	City/Country	Topics	Local Chairs
1 <sup>st</sup>	July 27–28, 1996	Kyoto, Japan	General Review	Tadao Shima
2 <sup>nd</sup>	March 6–8, 1997	Bangkok, Thailand	Enteric Infections Viral Infections	Wanpen Chaicumpa
3 <sup>rd</sup>	March 28–30, 1998	Bali, Indonesia	Malaria Tuberculosis Hepatitis Infection and Malignancy	Pratiwi Sodermono
4 <sup>th</sup>	March 2–4, 1999	Bangkok, Thailand	Parasitic Infections Influenza	Wanpen Chaicumpa
5 <sup>th</sup>	January 7–9, 2000	Chennai, India	Tuberculosis and Leprosy HIV/AIDS	N.K. Ganguly
6 <sup>th</sup>	January 13–15, 2001	Manila, Philippines	Bacterial Diarrheal Diseases Viral Zoonotic Diseases	Benjamin C. Vitasa Mario R. Festin
7 <sup>th</sup>	October 31– November 1, 2002	Shanghai, China	Acute Respiratory Infections Parasitic Zoonoses	Linhua Tang Yumei Wen Zheng Feng
8 <sup>th</sup>	December 11–12, 2003	Dhaka, Bangladesh	HIV/AIDS Cholera and other Bacterial Enteric Infections	A.F.M. Sarwar Kamal
9 <sup>th</sup>	December 10, 2004	Kyoto, Japan	Influenza	Yoshifumi Takeda

## Footnotes

- <sup>1</sup> Study Report on U.S.–Japan Cooperative Medical Science Programme: 1965. Japanese Committee; U.S.–Japan Cooperative Medical Science Programme, p. 5.
- <sup>2</sup> In Japan, the Japanese Ministry of Health and Welfare supports the activities of the disease-related Panels; the Ministry of Education, Science, Sports and Culture supports the Immunology Board; and the Ministry of Foreign Affairs supports the Joint Committee and Subcommittee meetings, and the International Conferences on Emerging Infectious Diseases.
- <sup>3</sup> In the United States, the NIAID funds 8 of the 10 USJCMSP panels and boards. The exceptions are the Environmental Genomics and Carcinogenesis Panel, which is funded by the National Institute of Environmental Health Sciences, and the Nutrition and Metabolism Panel, which is funded by the National Institute of Diabetes and Digestive and Kidney Diseases.
- <sup>4</sup> Dr. Shiro Someya died in 2004.
- <sup>5</sup> 30 Years of Progress. U.S.-Japan Cooperative Medical Science Program. Sixth Five Year Report: 1990-1995, p. vii.
- <sup>6</sup> “Beginning in 1993, special symposia were held to focus on different aspects of CVI, including: a U.S.-Japan CVI Meeting on Vaccine Research and Development, Workshop on Acute Respiratory Infections in July 1993; a Japan–U.S. CVI Meeting on Vaccine Research and Development in August 1994; and a third Japan–U.S. CVI workshop on measles in July 1995.” [From: Future Directions, Sixth Five Year Report. <http://www.niaid.nih.gov/publications/japan/future.htm>]

## EVOLUTION AND SCIENCE ADVANCES OF THE USJCMSP PANELS AND BOARDS

Since the U.S.–Japan Program began in 1965, new research findings and advances in medical care have greatly enhanced the diagnosis, prevention, and treatment of a wide range of infectious diseases and other health problems. The USJCMSP has played

an important role in many of these scientific and medical advances, which the scientific Panels and Immunology Boards report annually and summarize in the USJMSP five-year reports. The pages that follow describe the evolution of the USJCMSP Panels and Boards and present a selection of scientific and medical advances that have occurred during the 40-year history of the U.S.–Japan Program. Where possible, emphasis is placed on advances to which USJCMSP-affiliated scientists contributed directly.

### CHRONOLOGY: Evolution of the USJCMSP Panels and Boards

Date Panels/Boards Established	Panel/Board Name	Change in Panel/Board Name (Date)
1965	Cholera Panels	<b>Cholera and Other Bacterial Enteric Infections Panels</b> (1987 and 2001)
1965	Leprosy Panels*	<b>Tuberculosis and Leprosy Panels</b> (1996)
1965	Parasitic Diseases Panels	
1965	Tuberculosis Panels*	<b>Tuberculosis and Leprosy Panels</b> (1996)
1965	Viral Diseases Panels	
1966	Malnutrition Panels	<b>Nutrition and Metabolism Panels</b> (1997)
1972	Environmental Mutagenesis and Carcinogenesis Panels	<b>Environmental Genomics and Carcinogenesis Panels</b> (2001)
1979	Hepatitis Panels	
1981	Immunology Boards	
1987	Acquired Immunodeficiency Syndrome (AIDS) Panels	
1996	Acute Respiratory Infections Panels	

Current names are shown in bold.

\*Leprosy and Tuberculosis Panels were amalgamated in 1996.