## International Diploma Course in Dermatology— Education of dermatologists and sexually transmitted disease specialists in the Asia-Pacific region

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In the Asia-Pacific region, the climate, culture and people's lifestyles have contributed to the high incidence of dermatological diseases such as superficial and deep fungal infections, leprosy, and skin tuberculosis, and infectious diseases such as syphilis and other sexually transmitted diseases (STDs). These diseases have been a considerable burden on public health in this region for a long time. More recently, the number of allergic dermatoses, autoimmune dermatoses, genodermatoses, and HIV patients seen by dermatologists is increasing. Skin disease patients comprise 15-20% of all patients attending medical facilities in this region. This figure ranks second to third for the total number of patients seen in hospital outpatient departments (OPD). However, the number of dermatology specialists and doctors who treat skin problems is extremely low. There are only 500 dermatology specialists even in Thailand, which has a population of 64 million, when a population of this size requires at least 1,500 dermatology specialists.

Since 1976, the Governments of Thailand and Japan have worked together to train dermatology consultants and specialists in the countries of the Asia-Pacific region (**Table 1**). A grand total of 30 countries have participated in this project during the 34 years of its existence (**Table 2**).

The main facility in this international medical cooperative project is the National Institute of Dermatology (IOD) in Bangkok. At this institute, the Government of Thailand, in cooperation with Japan, organized a 1-month dermatology

training course in 1976, and because of the extreme need for such a program, 3-month courses were offered between 1978 and 1983. A total of 117 physicians were trained through this certification course. With these experiences in hand, the Governments of Thailand and Japan agreed to offer a 10-month diploma program in 1984 (**Table 1**). The chief organizers in Thailand were the Directors of the IOD: Dr. Renoo Kotrajaras (1976–1987), Dr. Preya Kullavanijaya (1987–2002), Dr. Pimonpun Gritiyarangsan (2002-2005), and Dr. Jirot Sindhvananda (2005present). Since 1978 I have been the person in charge or the chief organizer in science from Japan. Close, efficient, and friendly cooperation between the scholars of Thailand and Japan has resulted in the very successful operation of these programs. The project is critically evaluated and extended every 5 years by the Governments of Thailand and Japan.

Each year, around 30 doctors who are selected by their governments meet in Bangkok. For a period of 10 months, while receiving full support including living expenses, they receive intensive clinical training and instruction on advanced techniques in dermatology along with lectures providing specialist knowledge. This post-graduate (diploma course) program is a very extensive course composed of 4 main modules, namely 1) lecture classes, 2) OPD and inpatient department (IPD) attendance, 3) Laboratory and Subspecialty Clinic, and 4) Field trips to some special hospitals and other training centers in Bangkok

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Table 1 Number of Participants & Organization of the International Dermatology Training Courses at the Institute of Dermatology Bangkok for Medical Doctors of Asian and Pacific Oceanic Countries

0, 0					
1) 1 month Training Course	1976	5			
2) 3 month Training Course	1978–1983	112	Organized by Thailand in cooperation with Japan. Dr. Ogawa was the only Japanese expert supported by JICA from 1978 to 1983		
3) 10 month Diploma Course	1984–2008	648	Joint program between the Governments of Thailand & Japan from 1984		
4) 11 month Diploma Course	2009–2010	60			
——— Organizers in Chief———					
Dr. Ogawa (Japan side): 1978-			Dr. Renoo (Thai side): 1976–1987 Dr. Preya (Thai side): 1987–2002 Dr. Pimonpun (Thai side): 2002–2005 Dr. Jirot (Thai side): 2005–		
Total		825			

Table 2 Distribution of Participants (1976–2010) in the International Dermatology Training Courses at the Institute of Dermatology Bangkok for Medical Doctors of Asian and Pacific Oceanic Countries

1) Afghanistan       12       16) Myanmar         2) Australia       2       17) Nepal         3) Bangladesh       57       18) Netherlands         4) Bhutan       9       19) Pakistan         5) Cambodia       23       20) Papua New Guinea         6) China       57       21) Philippines         7) Fiji       7       22) Saudi Arabia         8) India       9       23) Singapore         9) Indonesia       30       24) South Africa         10) Iraq       1       25) Sri Lanka	17 33 1
3) Bangladesh 57 18) Netherlands 4) Bhutan 9 19) Pakistan 5) Cambodia 23 20) Papua New Guinea 6) China 57 21) Philippines 7) Fiji 7 22) Saudi Arabia 8) India 9 23) Singapore 9) Indonesia 30 24) South Africa	
4) Bhutan       9       19) Pakistan         5) Cambodia       23       20) Papua New Guinea         6) China       57       21) Philippines         7) Fiji       7       22) Saudi Arabia         8) India       9       23) Singapore         9) Indonesia       30       24) South Africa	1
5) Cambodia 23 20) Papua New Guinea 6) China 57 21) Philippines 7) Fiji 7 22) Saudi Arabia 8) India 9 23) Singapore 9) Indonesia 30 24) South Africa	
6) China 57 21) Philippines 7) Fiji 7 22) Saudi Arabia 8) India 9 23) Singapore 9) Indonesia 30 24) South Africa	82
7) Fiji 7 22) Saudi Arabia 8) India 9 23) Singapore 9) Indonesia 30 24) South Africa	3
8) India 9 23) Singapore 9) Indonesia 30 24) South Africa	83
9) Indonesia 30 24) South Africa	1
	1
10) Iraq 1 25) Sri Lanka	1
.   25/ 5:: 24:::14	26
11) Jordan 1 26) Thailand	289
12) Korea 7 27) Timor Leste	2
13) Laos 16 28) Tonga	1
14) Malaysia 23 29) U.A.E	2
15) Maldives 6 30) Vietnam	23
Total	825

and other provinces such as leprosy hospitals, STDs hospitals, infectious diseases hospitals, and the Tropical Skin Center in southern Thailand. The course content is difficult, requiring participants to achieve proficiency in several activities and pass examinations. In Japan, the Japan International Cooperation Agency (JICA) and the Ministry of Foreign Affairs are both promoting

this project. Around 10 renowned Japanese professors of an international standard each spend 2 weeks in Bangkok to provide approximately 30 hrs of intensive lectures and clinical teaching in English.

The remaining hours are taught by Thai dermatology specialists who provide clinical training and pre-clinical scientists who teach related

academic topics. The number of applicants is increasing every year. Those who are not selected sometimes participate at their own expense. Some participants receive scholarships from organizations other than JICA and TICA (Thailand's equivalent organ to JICA) such as the World Health Organization (WHO), National Institute of Health (NIH), Juntendo University International Center (JUIC), and Japanese Dermatological Association (JDA) which recently joined the project (in 2010) as a supporting organization. Thus, a total of 648 individuals have participated in this 10-month educational program (diploma course) between 1984 and 2008. For the 26th course (held in 2009) the organizers (Drs. Ogawa & Jirot) decided to add one more month (creating an 11-month course) so as to include some cutting-edge subjects such as anti-aging, dermatosurgery, and laser surgery to make the course more modern and interesting.

Over the 34 years of the project, 24 Japanese specialists\*2 have unselfishly sacrificed their free time to teach in Thailand and have strongly supported this project. These individuals are all first class scholars who are often invited to speak at conferences of academic societies in Europe and USA. On the Thai side, more than 100 dermatology specialists and resource clinicians and technicians from various faculties contribute to this course. These facilities are the IOD, Mahidol University (Siriraj Medical School, Ramathibodi Medical School, Faculty of Science, Faculty of Pharmacology, Faculty of Public Health, Faculty of Tropical Medicine), Department of Communicable Diseases Control, Leprosy Institute, Institute of Health Research, Bangrak (STDs)

Hospital, Faculty of Medicine Chulalongkorn University, Faculty of Medicine Chiangmai University, Pramongkul Klao Army Hospital, Bhumibol Adunyadej Air Force Hospital, Rajavithi General Hospital, Queen Sirikit National Institute of Child Health, and WHO Thailand Office.

This project, launched in 1976 under the motto 'A grain of wheat, let it survive,' has produced 825 specialists in 30 countries (Table 2). After gaining their diploma, graduates return to their workplaces in their respective countries. Some work in remote areas as dermatologic practitioners to serve their countries by treating skin diseases and resolving public health problems, while others continue studying in the field of dermatology and eventually work in universities and research institutions as instructors, clinicians, or dermatologists. Through the program participants gain much knowledge, not only for themselves, but also for their patients and for their nations. They can establish networks of academic cooperation and strong, close friendships with other participants. In this context, the International Diploma Course in Dermatology (DCD) is not only concerned with obtaining achievement in science, but also with establishing more fruitful relationships among the peoples living in Asia-Pacific countries. In this age, the world seems to be getting smaller than it used to be. In particular, in the world of medical sciences there are no borders between nations. I sincerely hope that program graduates keep their hearts strong, further enhance their scientific knowledge, and increase their friendships on an international level.

<sup>\*2</sup> The number of visits (around 2 weeks stay/visit) by Japanese professors for the 10–11 month diploma course (in chronological order); OGAWA Hideoki, Juntendo Univ. (52); SUZUKI Hiroyuki, Nihon Univ. (26); TAGAMI Hachiro, Hamamatsu Univ. & Tohoku Univ. (14); IMAMURA Sadao, Kyoto Univ. (19); NISHIOKA Kiyoshi, Kitasato Univ. & Tokyo Medical and Dental Univ. (9); ICHIHASHI Masamitsu, Kobe Univ. (13); KANZAKI Tamotsu, Kitasato Univ., Nagoya City Univ. & Kagoshima Univ. (20); MUNAKATA Atsushi, Nippon Medical School (10); JIMBOW Kouichi, Sapporo Medical Univ. (1), MIKI Yoshiharu, Ehime Univ. (2), NISHIMAWA Takeji, Keio Univ. (2), MISHIMA Yutaka, Kobe Univ. (3); NIIZUMA Hiroshi, Tokai Univ. (2); OHKAWARA Akira, Hokkaido Univ. (3); MIZUNO Nobuyuki, Nagoya City Univ. (4); ONO Tomomichi, Kumamoto Univ. (14); MIYACHI Yoshiki, Gunma Univ. & Kyoto Univ. (13); HORIO Takeshi, Kansai Medical Univ. (1); YOSHIIKE Takashi, Juntendo Univ. (3); SHIMADA Shinji, Yamanashi Univ. (14); KITAJIMA Yasuo, Gifu Univ. (13); WATANABE Shinichi, Teikyo Univ. (6); HASHIMOTO Koji, Ehime Univ. (6); and SHIRASAWA Takuji, Juntendo Univ. (1)