



## Curriculum Vitae

<b>Course Title:</b>	International Forum on ILD	
<b>Full name</b>	Jin Woo Song	
<b>Organization</b>	University of Ulsan College of Medicine, Asan Medical Center	
<b>Current Position</b>	Professor	
<b>Educational background</b> Degree (please check): <input checked="" type="checkbox"/> Doctoral Program <input type="checkbox"/> Master's Program <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Technical College <input type="checkbox"/> Junior College <b>*Please start with the most recent year.</b>		
From-To (MM/YYYY)	School / Department / Major	Degree
03/2009-02/2011	University of Ulsan. Seoul/ Internal Medicine	Ph.D.
03/2002-02/2004	University of Ulsan. Seoul/ Internal Medicine	M.S.
03/1993-02/1992	Chung Ang Univ/Medicine	M.D.
<b>Professional experience (Less than 5)</b> <b>*Please start with the most recent year.</b>		
From-To (MM/YYYY)	Institution / Organization	Title / Position
2020-	Department of Pulmonary and Critical Care Medicine, Asan Medical Center, University of Ulsan College of Medicine, Seoul, Republic of Korea	Professor
2014-2020	Department of Pulmonary and Critical Care Medicine, Asan Medical Center, University of Ulsan College of Medicine, Seoul, Republic of Korea	Associate Professor
2009-2014	Department of Pulmonary and Critical Care Medicine, Asan Medical Center, University of Ulsan College of Medicine, Seoul, Republic of Korea	Assistant Professor



## Lecture abstract

### \* Note:

- Abstracts must be written **in English**.
- **The ideal length of body is around 300 words.**
- Please do not exceed the words limit.

Pulmonary fibrosis, particularly Idiopathic Pulmonary Fibrosis (IPF), remains a devastating disease characterized by progressive lung scarring and a high mortality rate. While current antifibrotic therapies have marked a significant milestone in slowing disease progression, substantial therapeutic challenges persist, including limited efficacy in reversing fibrosis, significant side effects, and diverse patient responses.

This presentation delves into these challenges by integrating Real-World Data (RWD) and current research from Asan Medical Center. We analyze the gap between controlled clinical trials and actual clinical practice, highlighting the factors that influence long-term drug tolerability and patient outcomes. The data underscores the urgent need for a more nuanced approach to managing acute exacerbations and comorbidities in fibrotic lung disease. Furthermore, the presentation explores the landscape of emerging drugs currently in the pipeline. These next-generation candidates target novel pathways aiming to either arrest or potentially reverse fibrotic processes. We will discuss the shift toward combination therapies and the use of biomarkers to facilitate personalized treatment strategies.



Please attach one personal photograph (high-resolution JPEG or PNG).



## Curriculum Vitae

<b>Course Title:</b>	Collaboration and Clinical Research: Japanese ILD Registry and Real-World Evidence	
<b>Full name</b>	Takafumi Suda	
<b>Organization</b>	Hamamatsu University School of Medicine	
<b>Current Position</b>	Vice President/Executive Director	
<b>Educational background</b>		
Degree (please check): <input checked="" type="checkbox"/> Doctoral Program <input type="checkbox"/> Master's Program <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Technical College <input type="checkbox"/> Junior College		
<b>*Please start with the most recent year.</b>		
1993	Hamamatsu University School of Medicine, Japan	PhD
1986	Hamamatsu University School of Medicine, Japan	MD
<b>Professional experience (Less than 5)</b>		
<b>*Please start with the most recent year.</b>		
2024-Present	Hamamatsu University School of Medicine	Vice President/Executive Director
2012-2023	2 <sup>nd</sup> Division, Department of Internal Medicine, Hamamatsu University School of Medicine	Professor
1996-2012	2 <sup>nd</sup> Division, Department of Internal Medicine, Hamamatsu University School of Medicine	Assistant Professor
1994-1996	Department of Pathology, Massachusetts General Hospital, Harvard Medical School, Boston, USA	Post doctoral fellow



## Lecture abstract

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In recent years, the importance of real-world data (RWD) in elucidating the true nature of various diseases has been increasingly recognized across multiple diseases. In interstitial lung disease (ILD), a growing body of RWD has been accumulated worldwide, and its findings are progressively being translated into routine clinical practice, thereby influencing diagnostic strategies, treatment decisions, and prognostic assessments. In this lecture, I will present recent advances in RWD related to ILD. In addition, I will report epidemiological findings derived from analyses using the Japanese National Database (NDB), one of the largest health insurance claims databases in the world. In particular, I will highlight insights that can only be obtained from large-scale data, including those related to COVID-19, the effectiveness and real-world utilization of antifibrotic therapies, and the safety profiles of commonly prescribed hypnotics. Furthermore, as another important source of real-world evidence, I will introduce the results of nationwide ILD registry studies that we have conducted in Japan, including AMED, JIPS, and PROMISE/IBiS registries, all of which employed web-based remote multidisciplinary discussion (MDD) for diagnosis. These registries include 524, 800, and 2,788 cases, respectively. In these registries, DNA and serum samples were collected, and analyses were conducted in parallel to investigate genetic predisposition and to identify serum biomarkers using high-sensitivity proteomics. I will discuss their implications for understanding the epidemiology, disease behavior, and clinical outcomes of ILD in the Japanese population. I hope that this lecture will contribute to a deeper and more comprehensive understanding of ILD.



Please attach one personal photograph (high-resolution JPEG or PNG).



# 台灣分級醫療學會

Taiwan Association of Promoting Care Continuity

## Curriculum Vitae

<b>Course Title:</b>	<b>International Forum on Interstitial Lung Diseases</b>	
<b>Full name</b>	<b>Mishie Ann Tanino</b>	
<b>Organization</b>	<b>Asahikawa Medical University Hospital</b>	
<b>Current Position</b>	<b>Professor/Director</b>	
<b>Educational background</b>		
Degree (please check):		
<input checked="" type="checkbox"/> Doctoral Program <input type="checkbox"/> Master's Program <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Technical College		
<input type="checkbox"/> Junior College		
<b>*Please start with the most recent year.</b>		
From-To (MM/YYYY)	School / Department / Major	Degree
1987-1993	Asahikawa Medical University School/ Medicine	M.D.
2002	Hokkaido University Graduate School/ Medicine	Ph.D
<b>Professional experience (Less than 5)</b>		
<b>*Please start with the most recent year.</b>		
From-To (MM/YYYY)	Institution / Organization	Title / Position
2018-Present	Department of Diagnostic Pathology, Asahikawa Medical University Hospital	Professor/Director
2008-2018	Laboratory of Cancer Research, Department of Pathology, Hokkaido University Graduate School of Medicine	Assistant Professor
2003-2006	Division of Pulmonary and Critical Care Medicine, University of Washington, Seattle, USA	Post-doctoral Fellow
1993-2003	First Department of Internal Medicine, Hokkaido University School of Medicine	



台灣分級醫療學會

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A new statement on interstitial lung diseases was issued last year by the European Respiratory Society (ERS) and the American Thoracic Society (ATS). The major revisions include: (1) a shift from the previous focus on idiopathic diseases to a comprehensive framework encompassing all interstitial lung diseases, including secondary forms; (2) the introduction of new subcategories such as bronchiolocentric interstitial pneumonia (BIP), along with changes in terminology for several classifications; (3) a reorganization of the overarching category framework; and (4) the incorporation of an assessment of diagnostic confidence.

In this presentation, I will outline the background leading to these revisions, with particular emphasis on aspects that are important for pathological diagnosis. Meanwhile, it is also true that several issues remain unclear—such as the definition of BIP and the positioning of smoking-related changes—and that the statement has caused some confusion since its publication. I will therefore also discuss these challenges, future issues to be addressed, and practical approaches.

