



一般社団法人
Quality of Life Foundation
医科学研究者国際活動支援協議会

Overview of a Medical Observership Training Program by Quality of Life Foundation

Dr. Mauricio Borrero Franco

Gynecological Oncologist

Tokyo, Japan

April-May 2022

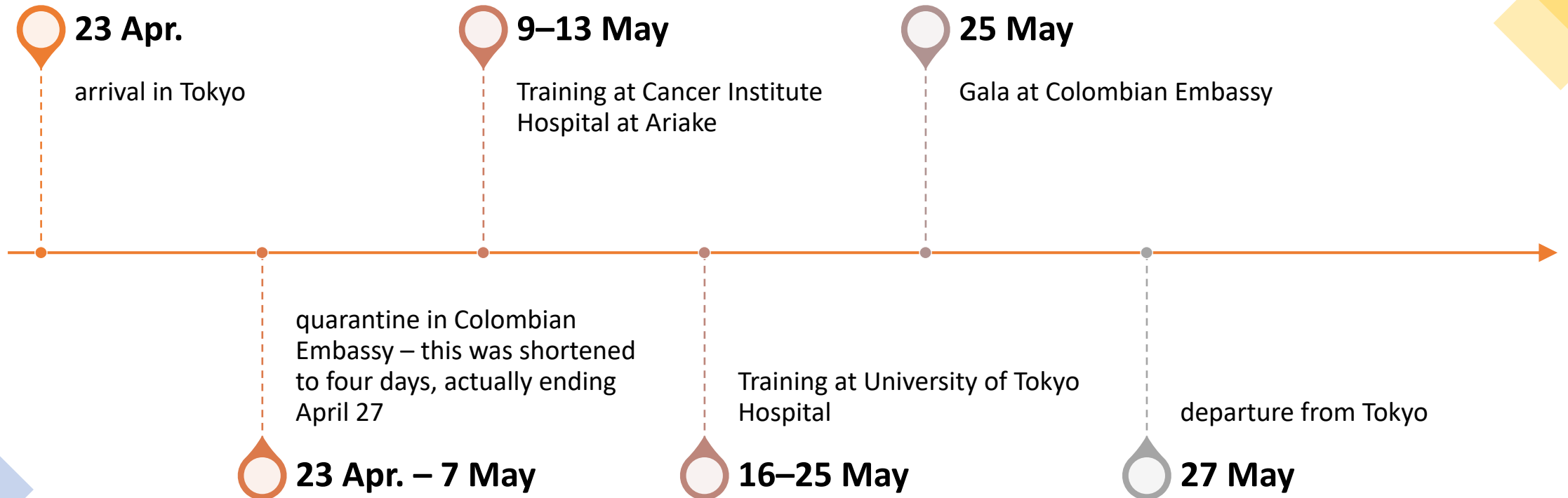
Dr. Mauricio Borrero Franco



- Gynecological oncologist from Medellín, Colombia
- Professor at the University of Antioquia Medical School in Medellín
- Expertise in:
 - breast cancer
 - gynecologic malignancies (cervical-ovarian-uterine-vulvar)
- Author / co-author of several journal papers and textbook chapters



Travel Schedule and Training Program at a Glance





Detailed Program: Part I. Cancer Institute Hospital in Ariake

May 9 -13

Supervising Professor: Dr Shinji Ohno, Director of the Breast Cancer Center

Activities at the Cancer Institute Hospital: May 9

Hospital tour with Ms. Akiko Shikano, International Services chief

Interview with Drs. Takeshi Sano, hospital director, and Shinji Ohno, which included update of cancer incidence and mortality in Japan and Colombia as well as resources for diagnosis and treatment in both countries

Breast cancer surgery: 2 patients underwent total mastectomy with sentinel lymph node biopsy. Dr Borrero assisted as observer to the first and as surgeon assistant to the second, which included first step breast reconstruction with retropectoral expander



Activities at the Cancer Institute Hospital: May 10

This was a day dedicated to breast cancer surgery

the first procedure was a partial mastectomy with axillary dissection (sentinel lymph node with frozen section) without breast reconstruction. Dr Borrero was observer.

Second procedure was a total mastectomy with sentinel lymph node. This was followed by a microsurgical breast reconstruction with deep inferior epigastric perforator reconstruction. Dr Borrero assisted as observer

At the end of the day there was a medical round where all breast cancer hospitalized patients were visited; most of them post-operative cases



Activities at the
Cancer Institute
Hospital: May
11

Medical Staff meeting first hour in the morning,
with detailed presentation and discussion of
breast cancer patients that have been
programmed for surgery in the following days

Attendance to partial mastectomy with sentinel
lymph node dissection by double technique
(technesium and isosulfan blue)

Attendance to delayed breast reconstruction
with DIEP following previous mastectomy;
indocyanine green angiography to check flap
blood flow

Activities at
the Cancer
Institute
Hospital:
May 12

- At first hour in the morning lecture by Dr. Borrero:
“Breast Cancer Mortality in Third World Countries: What is the way out?”
- Afterwards assistance to a highly sophisticated, innovative surgical procedure for patients with severe lymphedema after oncological treatment: Transference of lymph nodes with their lymphatic vessels. Surgeon Dr. Hidehiko Yosimatsu
- Visit to the new facilities of the department of radiation oncology with demonstration of its ultimate technology linear accelerator



Activities at the Cancer Institute on May 13

A day dedicated to gynecologic oncology surgery

Dr. Hiroyuki Kanao performed a radical hysterectomy with pelvic lymph node dissection for Stage IIB cervical adenocarcinoma, which is a challenging procedure. Dr. Borrero assisted as observer

Patients with Stage IIB adenocarcinoma are poor responders to concomitant chemo/radiotherapy, so they are offered radical surgery at the Cancer Institute

Dr Borrero participated in the processing of the pathologic specimen, which surgeons in Colombia don't do



With the Surgical Staff at the Cancer Institute



一般社団法人
Quality of Life Foundation
医科学研究者国際活動支援協議会

Detailed Program: Part II. University of Tokyo Hospital

May 16-25

Supervising Professor: Dr. Yutaka Osuga

Activities at Univ. of Tokyo Hospital: May 16

- Meeting with Ms. Misato Fujita of the International Medical Center and explanation of the rules for maintaining patients' confidentiality
- Meeting with Drs Yutaka Osuga and Sone Kenbun. Overview of goals and planning of training activities
- Surgery: hysterectomy and bilateral salpingoophorectomy for endometrial hyperplasia (assistance as observer)

Activities at Univ. of Tokyo Hospital: May 17

- Surgical day, with attendance as observer
- Laparotomy in a patient with advanced stage ovarian cancer, which included partial bowel resection with anastomosis, omentectomy and hysterectomy with salpingoophorectomy
- Radical vulvectomy with rotation of pudental thigh flap for vulvar reconstruction in a patient with vulvar Paget's disease, an unusual type of malignant tumor.



Activities at Univ. of Tokyo Hospital: May 18

- Assistance to outpatient gynecologic oncology clinic in the morning, which was a great opportunity to get acquainted with the diagnostic and therapeutic protocols for gynecologic cancer at the U. of Tokyo Hospital
- In the afternoon "rehearsal" of cases to be presented at next day's surgical staff
- This activity was particularly interesting because it shows a high grade of commitment with the orderly and thorough study and discussion of each case



Activities at Univ. of Tokyo Hospital: May 19

Participation as observer in a robotic hysterectomy with bilateral salpingoophorectomy and pelvic lymphadenectomy performed by Dr. Yuichiro Miyamoto

This surgery has never been done in Colombia, so it was like a science fiction trip to the author of these lines!

Attendance to weekly surgical staff, with an impeccable presentation and fascinating discussion of patients going to surgery the next week



Activities at
Univ. of
Tokyo
Hospital:
May 20

- Participation as observer at surgery: laparotomy for ovarian tumor with bone metastases which turned out to be a carcinosarcoma
- Visit to the pathology laboratory with participation in the preparation of surgical specimens
- Appreciation of the importance of surgeons' participation in the proper interpretation of surgical specimens by pathologist (in Colombia surgeons don't do this)

Activities at the U.
of Tokyo Hospital:
May 23

Attendance to surgery with Drs. Mori and Taguchi: hysterectomy with bilateral salpingoophorectomy, pelvic and paraaortic lymphadenectomy and omentectomy in a patient with clear cell ovarian carcinoma

Attendance to outpatient clinic with Dr. Eguchi, Which was a great opportunity to get acquainted with the diagnostic and therapeutic protocols for gynecologic cancer at the U. of Tokyo Hospital





Activities at the U. of Tokyo Hospital: May 24

- Surgery in the morning: Total abdominal hysterectomy with bilateral salpingoophorectomy and pelvic and paraaortic lymphadenectomy, with Dr. Yuichiro Miyamoto. Patient with advanced stage endometrial cancer with lymph node metasis. Admirable hemostasis.
- In the afternoon visit to the laboratory of molecular biology. This was guided by Dr. Sone Kenbun, expert in artificial intelligence applied to early diagnosis of endometrial cancer, who gave an in depth overview of the uses of artificial intelligence for gynecological cancer.



Activities at
the U. of
Tokyo
Hospital:
May 25 (last
day)

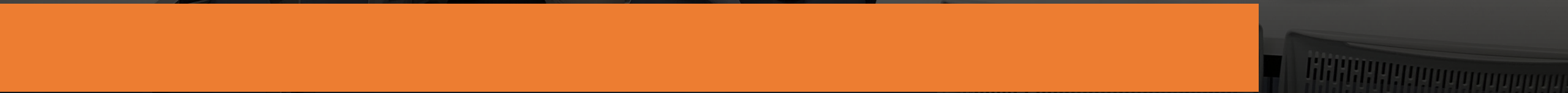
Surgical morning, assistance as observer

First surgery was a total abdominal hysterectomy with unilateral adnexectomy in a patient with a diagnosis of ovarian clear cell borderline tumor, which is a very rare tumor

In the afternoon preliminary meeting in preparation of next day's surgical staff, previously mentioned as "rehearsal" (see May 18 activities)



Surgical Staff at the University of Tokyo Hospital



Highlights of the Observership Program: What can be applied in Colombia?



一般社団法人
Quality of Life Foundation
医科学研究者国際活動支援協議会

Highlights: What was learned In Japan and could be applied in Colombia

In depth group discussion of all patients programmed for surgery

In Colombia only difficult cases are discussed

In both institutions I attended every patient going to surgery is presented at a surgical decision meeting

Given the high complexity of oncological patients this ensures the best procedure is being offered

Group discussion helps avoid complications and improves decision making

What could be applied in Colombia

In Japan surgeons get actively involved in the preparation of the surgical specimen, whereas in Colombia they don't

The surgeon is the one who best knows which parts of a specimen are of critical importance to the pathologist

This evidently improves pathology diagnosis

At the JFCR Cancer Institute orientation of the breast specimen is done by the surgeon: undoubtedly the surgeon knows better than anyone such orientation

What could be applied in Colombia

At the university of Tokyo pictures are taken of all surgical specimens

This aids in later review of a case

Also aids for investigation and publication purposes

Eventually is useful for legal purposes (legal claims)

What could
be applied
in
Colombia

Mammograms are taken of all
breast pathology specimens

this helps to determine if surgical
margins are appropriate

also plays a role in determining
precise location of tumors when
not palpable

What could be applied in Colombia

Organization and Standardization of the oncology departments

Both institutions have clearly defined surgical protocols which are followed by surgeons

There is a uniform, reproducible step by step attention for patients during surgery

This also ensures better results

Highlights of the Observership Program: What might not be applicable in Colombia

...but was nevertheless highly interesting and motivating!



Robotic
Surgery:
Fascinating
(science fiction
for Colombia!)



2 oncologic
surgeons per
surgery (although
easier to achieve
than robotic
surgery!)

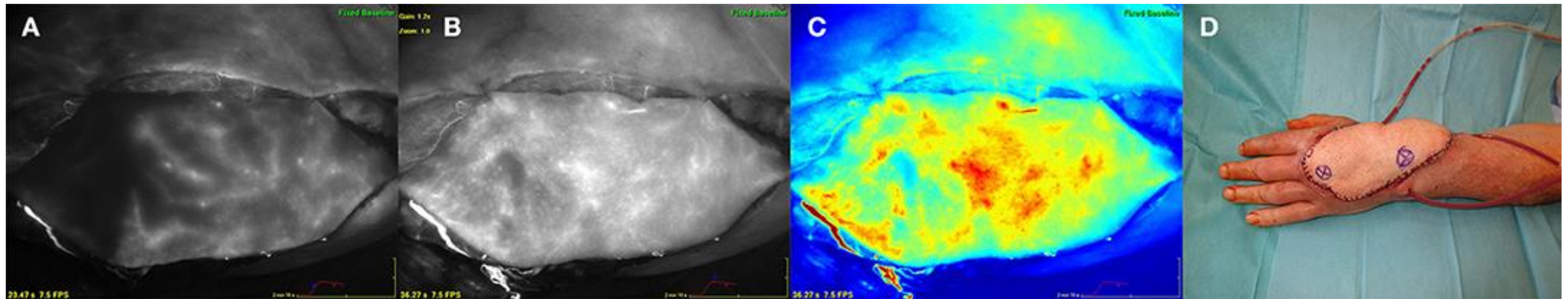


一般社団法人
Quality of Life Foundation
医科学研究者国際活動支援協議会

Immediate
Breast
Reconstruction
for so Many
Patients...



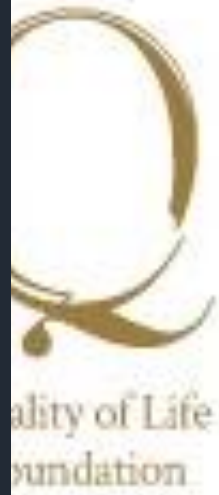
Indocyanine Green Angiography in Every Flap Reconstructive Surgery



Highlights of the Observership Program: The Unforgettable Personal Experience



The Unforgettable:
Quality of Life
Foundation



一般社団法人
Quality of Life Foundation
医科学研究者国際活動支援協議会



- **Ms. Hiroko Suzuki and her incredible commitment to helping cancer patients in low and middle income countries like Colombia**



The Unforgettable: Directors and Staff at JFCR Cancer Institute and University of Tokyo Hospital





The Unforgettable: The kindness of the Ambassador of Colombia, his wife and team



The
Unforgettable:
A beautiful
country like
Japan

The
Unforgettable:
Its people





ありがとうございました