

## Obituary for Osamu Kato (1946-2014)

Osamu Kato, MD, General Director of Kato Ladies Clinic, Tokyo, died on March 3, 2014. Kato's untimely death will ultimately leave a void with those who were fortunate to know him personally and those who worked with him professionally. Dr. Kato leaves behind a lasting legacy as a clinician, administrator and mentor in the field of reproductive medicine and will be remembered as a pioneer and statesman in the developments of natural and mild stimulation cycle IVF, vitrification of unfertilized embryos and oocyte banking for cancer patients, all the while remaining a beloved colleague and friend. Dr. Kato is survived by his wife, Takako, and two children Sakiko and Dr. Keiichi Kato.

Dr. Kato was born in Kanazawa in 1946. There he went on to attend Komatsu High School, and he was educated at Kanazawa University, School of Medicine in Kanazawa and received his medical degree with honours in March 1972. After his training in Obstetrics & Gynaecology, Dr. Kato took fellowship with Dr. Paul K. Katayama in Milwaukee, USA, and Dr. Ricardo Ash in Mexico where they started a collaboration with expertise in reproductive Medicine. From there, he began his work with his first IVF clinic, Towako Maternity Clinic of Komatsu, in November 1990. He moved to Tokyo in October 1993 and opened the Kato Ladies Clinic. It was here that Dr. Kato started to make innovative contributions to the rapidly growing field of reproductive medicine. He spearheaded new approaches in the treatment of clomiphene citrate ovarian stimulation and natural cycle IVF. During 20 years Dr. Kato established IVF clinics for natural cycle and minimal stimulation IVF, seven of which were established in Japan and four abroad, in Shanghai, New York, Irvine California and Manila.

Since 1978, In Vitro Fertilization and Embryo Transfer (IVF-ET) have come to be practiced all over the world. At the same time, Assisted Reproductive Technology has continued to make progress by leaps and bounds with better results. Various revolutionary techniques have been developed, solving even those problems that had been thought impossible to remedy. However, in regards to ovarian stimulation, protocols have not improved greatly, save for the use of different drugs. In the past, Dr. Kato's clinic also performed egg recovery in stimulated cycles. However, even though there had been no cases of severe OHSS, he encountered a case in which a patient developed loss of consciousness that seemed to be attributed to thrombosis. Since then he began to have doubts about stimulation cycles when the fertilization rate was poor despite the recovery of many eggs. He felt "doubts about the meaning of recovering a lot of eggs", which became a factor in re-thinking controlled ovarian stimulation. Stimulated cycles for IVF had been the basis for an expedient protocol and very convenient for care providers, but because of the unnecessary medication, repeated clinic visits, expense, and risk of adverse effects, such as ovarian hyperstimulation syndrome (OHSS), it did not seem to be the best strategy for the patient. In 1995, Dr. Kato switched from the global standard at the time of superovulation method, and began to take up the challenge of natural cycle egg recovery with 21-22 gage needle aspiration. Dr. Kato began and practiced unique protocols for oocyte retrieval of natural and minimal stimulation cycles, including the use of Gn-RH analogue as a trigger instead of HCG, which has the potential to induce severe OHSS. In addition to these protocols, he also started with single embryo transfer for the avoidance of multiple pregnancies and years ahead of world trends. Nowadays IVF has developed into a safe technique that can even be performed on an outpatient basis. Dr. Kato also developed the technique of transmyometrial embryo transfer for difficult transcervical embryo transfer cases which is known as the "Towako Method".



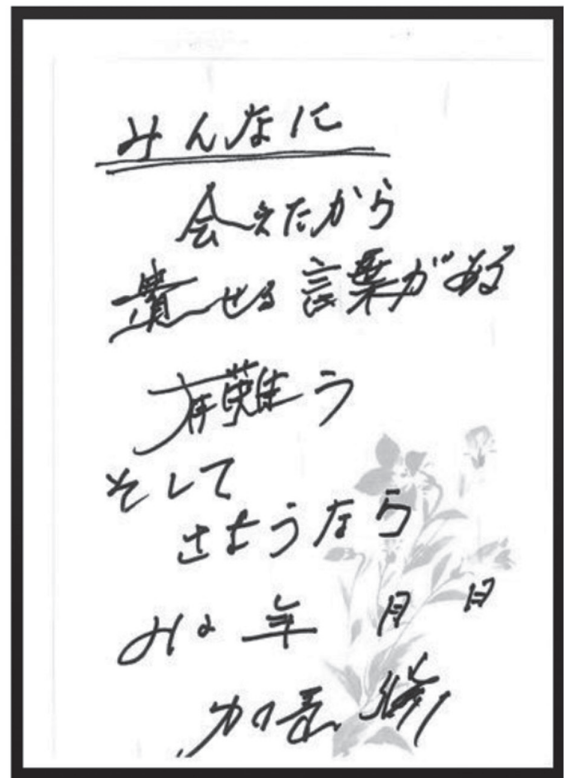
In the light of his work in Japan, Dr. Kato was asked to be the national congress president, for the 3<sup>rd</sup> World Congress on ISMAAR (The International Society for Mild Approaches in Assisted Reproduction), in Yokohama (2010), the 5<sup>th</sup> and 10<sup>th</sup> World Congress on A-PART (The International Association of Private Assisted Reproductive Technology) in Tokyo (2003 and 2011). In addition, three years before his death, Dr. Kato successfully and simultaneously organized the 16<sup>th</sup> World Congress on In Vitro Fertilization and the 29<sup>th</sup> national congress of the Japan Society of Fertilization and Implantation (JSFI) in Tokyo (2011). In addition to his congress presidency, he also served as a trustee to ISMAAR, president of A-PART, Vice-President of The World Association of Reproductive Medicine (WARM) and as an Executive Board Member of JSFI.

In 2011 Dr. Kato was put under treatment for Interstitial Pneumonia. After nearly two and a half years of treatment, Dr. Kato passed away peacefully at his home. In 2014, he was selected as honorary citizen by his hometown, the city of Nomi. A letter of appreciation was presented for his efforts and contributions for infertile citizens. He left a message of gratitude to his peers for attending his funeral before leaving on his peaceful journey.

“Since I was able to meet all of you in my life, I am able to say these last words “Thank you” and “Sayonara”

Hisao Osada, M.D.  
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A message of gratitude to his peers