

The 10th Korea–Japan Joint Stroke Conference (KJJSC) at Osaka: The First–Ever and Hopefully, the Last Virtual Conference

Kazunori Toyoda,^a Sohei Yoshimura,^a Kanta Tanaka,^a Kuniaki Ogasawara,^b Joung-Ho Rha^c

^aDepartment of Cerebrovascular Medicine, National Cerebral and Cardiovascular Center, Suita, Japan

^bDepartment of Neurosurgery, Iwate Medical University, Yahaba, Japan

^cDepartment of Neurology, Inha University School of Medicine, Incheon, Korea

The first Korea–Japan Joint Stroke Conference (KJJSC) was held in Seoul, Korea in 2002, which was the same year as the 17th Fédération Internationale de Football Association (FIFA) World Cup, also known as Korea–Japan 2002. In 2022, KJJSC celebrated its 20th anniversary (Table 1).

Stroke patients in Korea and Japan share some similarities, such as high percentages of small vessel disease, intracranial atherosclerosis, and moyamoya disease, and dietary and lifestyle habits are also comparable. The care system in Korea and Japan are also similar and both countries favor the use of cilostazol for secondary stroke prevention.^{1,2} Thus, it was natural that the core members of the Korean and Japan Stroke Societies (KSS, JSS) proposed the idea of holding regular stroke conferences together. Prof. Jae-Kyu Roh and Prof. Kwang Ho Lee from the KSS and Prof. Yukito Shinohara from the JSS first initiated the idea and pioneered the first joint conference.

At the organizers' meeting of the 9th KJJSC in November 2019, it was determined that the 10th KJJSC in 2021 would be held on-site in Osaka. There was no doubt about the feasibility of an in-person conference at that time. However, when the coronavirus disease 2019 (COVID-19) pandemic swept across the globe, our original plan had to change drastically. We conducted the first-ever virtual KJJSC conference from a small studio in Namba, Osaka, on September 17 (Saturday) and September 18 (Sunday) in 2022.

The theme of KJJSC 2022 in Osaka was "New friendship between K & J in the new standard era." At this conference, six official symposiums were set, and the current conditions of Korea and Japan were compared. For example, four complete or ongoing trials were introduced. The Korean investigators presented

the "Outcome in Patients Treated with Intraarterial thrombectomy: optiMAL Blood Pressure control (OPTIMAL-BP)" trial³ and the "Dual antiplatelet Use for extended period tarGeted to AcuTe Ischemic stroke with presumed atherosclerotic Origin (DURATION)" study, while the Japanese researchers discussed the "Recovery by Endovascular Salvage for Cerebral Ultra-acute Embolism Japan - Large Ischemic core Trial (RESCUE-Japan LIMIT)" trial⁴ and the "Stroke secondary prevention with catheter ABLation and EDoxaban for patients with non-valvular atrial fibrillation (STABLED)" study.⁵ In addition, presentations on machine learning for stroke subtype classification⁶ and digital stroke therapies⁷ were delivered by Korean speakers, and ring finger protein 213 (RNF213)-related arteriopathy⁸ and multi-lineage differentiating stress enduring (Muse) cell therapy⁹ were presented by Japanese speakers. Other interesting presentations included "Mechanical thrombectomy and the acute stroke care system," "Cerebral small vessel disease and cognitive/psychiatric disorders," "New pharmacotherapy for stroke (such as tenecteplase, nerinetide, factor XIa inhibitors, and prasugrel for stroke)," and "The social approach to stroke (health policy and academic support)." Moreover, the nine sponsored symposiums focused on implantable loop recorders for occult atrial fibrillation (AF), AF-related dementia, direct oral anticoagulants and their antidotes, angiotensin receptor-neprilysin inhibitors, patent foramen ovale closure, and acute mechanical thrombectomy.

Currently, the World Stroke Organization (WSO) Brain & Heart Task Force developed the "Brain & hEart globAl initiative (BEAT)" a pilot feasibility program aimed at establishing clinical collaborations between cardiologists and stroke physicians working at large healthcare facilities. In the Joint WSO, KSS, and JSS Sym-

Table 1. Past Korea–Japan Joint Stroke Conferences

	Host country	Year	Venue
1st	Korea	2002	Seoul
2nd	Japan	2004	Yokohama
3rd	Korea	2006	Jeju
4th	Japan	2008	Fukuoka
5th	Korea	2011*	Daegu
6th	Japan	2013	Osaka
7th	Korea	2015	Busan
8th	Japan	2017	Niigata
9th	Korea	2019	Incheon
10th	Japan	2022	Osaka (virtual)
11th	Korea	2023	Busan (scheduled) [†]

*The World Stroke Conference was held in Seoul in 2010. To avoid overlap, the 5th conference was held in 2011; [†]The 11th conference will be held again in an odd-numbered year.

posium, the current brain–heart relationship activities in Korea and Japan were presented after the keynote speaker, Prof. Luciano A Sposato, from Canada, introduced the WSO-BEAT.¹⁰ In another Joint Symposium of the Asia–Pacific Stroke Organization, KSS, and JSS, stroke care in Korea and Japan during COVID-19 was compared after the keynote presentation by Prof. Narayanaswamy Venketasubramanian Ramani, from Singapore.¹¹

In total, 278 delegates participated in the 10th KJSC, including 236 paid attendees and invited attendees from Korea, Japan, Taiwan, Thailand, Indonesia, Malaysia, Australia, Canada, and Singapore. There were 129 abstracts. All abstracts are available from the *Journal of Stroke's* home page, under "Browse Articles" (https://www.j-stroke.org/articles/abstract_book.php). Although we could not provide "omotenashi" in Osaka, the quality of our speakers and their presentations was high.

The 11th KJSC will be held in Busan in November 2023. We hope that the 11th KJSC will be an in-person conference. Hopefully, the 10th KJSC was the first and the last virtual conference.

References

- Kim JS. Stroke in Asia: a global disaster. *Int J Stroke* 2014;9:856–857.
- Toyoda K, Koga M, Hayakawa M, Yamagami H. Acute reperfusion therapy and stroke care in Asia after successful endovascular trials. *Stroke* 2015;46:1474–1481.
- Nam HS, Kim YD, Choi JK, Baik M, Kim BM, Kim DJ, et al. Outcome in Patients Treated with Intra-arterial thrombectomy: The optiMAL Blood Pressure control (OPTIMAL-BP) trial. *Int J Stroke* 2022;17:931–937.
- Yoshimura S, Sakai N, Yamagami H, Uchida K, Beppu M, Toyoda K, et al. Endovascular therapy for acute stroke with a large ischemic region. *N Engl J Med* 2022;386:1303–1313.
- Sakamoto Y, Nishiyama Y, Iwasaki YK, Daida H, Toyoda K, Kitagawa K, et al. Design and rationale of the STroke secondary prevention with catheter ABLation and EDoxaban clinical trial in patients with non-valvular atrial fibrillation: the STABLED study. *J Cardiol* 2019;74:539–542.
- Jeong HG, Kim BJ, Kim T, Kang J, Kim JY, Kim J, et al. Classification of cardioembolic stroke based on a deep neural network using chest radiographs. *EBioMedicine* 2021;69:103466.
- Song TJ, Baek IY, Woo HG, Kim YJ, Chang Y, Kim BJ, et al. Characteristics and factors for short-term functional outcome in stroke patients with atrial fibrillation, nationwide retrospective cohort study. *Front Neurol* 2019;10:1101.
- Ihara M, Yamamoto Y, Hattori Y, Liu W, Kobayashi H, Ishiyama H, et al. Moyamoya disease: diagnosis and interventions. *Lancet Neurol* 2022;21:747–758.
- Park YJ, Niizuma K, Mokin M, Dezawa M, Borlongan CV. Cell-based therapy for stroke: musing with Muse cells. *Stroke* 2020;51:2854–2862.
- World Stroke Organization. The WSO BEAT (Brain & hEart globAl iniTiative) update [Internet]. World Stroke Organization 2022 [cited 2023 Jan 3]. Available from: <https://www.world-stroke.org/news-and-blog/news/the-wso-beat-brain-heart-global-initiative-update>.
- Venketasubramanian N, Anderson C, Ay H, Aybek S, Brinjikji W, de Freitas GR, et al. Stroke care during the COVID-19 pandemic: international expert panel review. *Cerebrovasc Dis* 2021;50:245–261.

Correspondence: Kazunori Toyoda
Department of Cerebrovascular Medicine, National Cerebral and Cardiovascular Center, 6-1 Kishibe-Shimmachi, Suita, Osaka 564-8565, Japan
Tel: +81-6-6170-1070
E-mail: toyoda@nccvc.go.jp
<https://orcid.org/0000-0002-8346-9845>

Received: January 5, 2023
Revised: January 9, 2023
Accepted: January 9, 2023

The 10th KJSC was held under the sponsorship of the JSS and the auspices of the KSS, World Stroke Organization, Asia Pacific Stroke Organization, Japanese Society of Neurology, Japan Neurosurgical Society, and the National Cerebral and Cardiovascular Center.

We especially thank Ms. Azusa Tokunaga for her secretarial assistance.

The authors have no financial conflicts of interest.