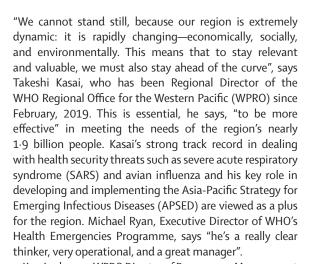


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Profile

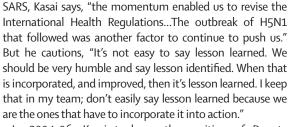
Takeshi Kasai: the health security thinker from Japan

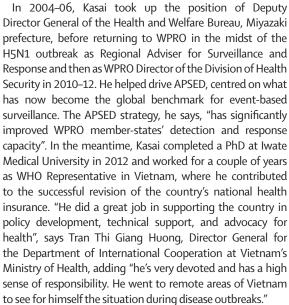


Kasai, who was WPRO Director of Programme Management and Deputy to the Regional Director before he took the helm at the regional office, was born in Iwate, Japan, and grew up on a university campus in Tokyo. His parents were teachers and it was his maternal grandfather, he recalls, "who was a medical doctor, and I was very close to him, that inspired me" to go into medicine. "He said our profession is not to make a living but to make life meaningful. So I chose a doctor's pathway." Kasai studied medicine at Keio University, graduating in 1990, and took a residency position in emergency medicine in Iwate prefecture, where he worked with Setsu Hashimoto. "Her activities in the community convinced me that public health is very dynamic and interesting work, and brings impact to people's health...I think her secret is always try to find some supporter in the community." Later, Kasai moved to Japan's Ministry of Health and Welfare as a medical officer and then, from 1996 to 2000, as Deputy Director and international infectious diseases adviser in the Division of Infectious Disease Control. It was a productive time during which he completed a master's degree in public health and a diploma in tropical medicine and hygiene. His work at the ministry meant he was closely involved in the preparation of health issues for the G8 summits in 1998 and in 2000 at Okinawa, where the idea of establishing the Global Fund to Fight AIDS, Tuberculosis and Malaria was first discussed by global leaders.

His first assignment as a medical officer with WPRO came in 2000–03 and Kasai was involved in the expansion of the WHO DOTS tuberculosis control strategy. But it was the impact of the 2003 SARS outbreak, especially the loss of his close friend Carlo Urbani and other colleagues, that triggered his determination to pursue ways to enhance preparedness for the next health crisis. "Carlo was working on malaria and other parasitic diseases, and he sent the signal to the regional office that he was seeing a strange disease", he recalls. After







Looking ahead, Kasai identifies a host of health challenges for the region. Improving the prevention and treatment of non-communicable diseases (NCDs) is key in a region where four out of every five deaths are caused by NCDs. "We anticipate this will continue to rise and we really have to prepare for (rapidly) ageing populations in China, Japan, Vietnam", he says. Other diseases, such as tuberculosis, drug-resistant malaria in the Greater Mekong subregion, and lymphatic filariasis in the Pacific, "we have to selectively address in a very intensive way", he explains. Dealing with antimicrobial resistance is another priority: "we are one of the high-risk areas", he notes, because of the overprescription behaviours "not only in the human sector but also in the animal sector". Reducing illnesses from pollution and poor air quality is also high on his agenda: "We own the problem but do not necessarily have the solutions, so we have to continue to present the data and advocate for that, but this also has a cross-boundary nature. So we have to come up with a platform to make every country do their effort for their people but also commit for others."

John Zarocostas

