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Profile

Takeshi Kasai: the health security thinker from Japan

"We cannot stand still, because our region is extremely dynamic: it is rapidly changing—economically, socially, and environmentally. This means that to stay relevant and valuable, we must also stay ahead of the curve", says Takeshi Kasai, who has been Regional Director of the WHO Regional Office for the Western Pacific (WPRO) since February, 2019. This is essential, he says, "to be more effective" in meeting the needs of the region's nearly 1.9 billion people. Kasai's strong track record in dealing with health security threats such as severe acute respiratory syndrome (SARS) and avian influenza and his key role in developing and implementing the Asia-Pacific Strategy for Emerging Infectious Diseases (APSED) are viewed as a plus for the region. Michael Ryan, Executive Director of WHO's Health Emergencies Programme, says "he's a really clear thinker, very operational, and a great manager".

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

SARS, Kasai says, "the momentum enabled us to revise the International Health Regulations...The outbreak of H5N1 that followed was another factor to continue to push us." But he cautions, "It's not easy to say lesson learned. We should be very humble and say lesson identified. When that is incorporated, and improved, then it's lesson learned. I keep that in my team; don't easily say lesson learned because we are the ones that have to incorporate it into action."

In 2004–06, Kasai took up the position of Deputy Director General of the Health and Welfare Bureau, Miyazaki prefecture, before returning to WPRO in the midst of the H5N1 outbreak as Regional Adviser for Surveillance and Response and then as WPRO Director of the Division of Health Security in 2010–12. He helped drive APSED, centred on what has now become the global benchmark for event-based surveillance. The APSED strategy, he says, "has significantly improved WPRO member-states' detection and response capacity". In the meantime, Kasai completed a PhD at Iwate Medical University in 2012 and worked for a couple of years as WHO Representative in Vietnam, where he contributed to the successful revision of the country's national health insurance. "He did a great job in supporting the country in policy development, technical support, and advocacy for health", says Tran Thi Giang Huong, Director General for the Department of International Cooperation at Vietnam's Ministry of Health, adding "he's very devoted and has a high sense of responsibility. He went to remote areas of Vietnam to see for himself the situation during disease outbreaks."

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 over-prescription 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."

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