

Preface

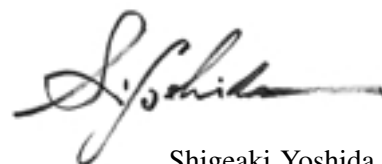
Fourteen years have passed in this year of 2006, since the National Cancer Center Hospital East (NCCHE) was opened with 425 beds in the city of Kashiwa on July 1, 1992. Having overcome many of the difficulties in early days, our clinical activities have been remarkably enriched during the past years. In April 1994, The National Cancer Center Research Institute East (NCCRIE) was opened at the same campus. As well as the original research works at the research institute, many joint projects have been well done between the institute and hospital in the fields of surgical pathology, molecular biology, psycho-oncology, and so on. In October 1, 2005, to promote the collaboration more efficiently, and to achieve the clinical translation of basic research works more successfully, NCCRIE was finally merged into NCCHE with its reorganization to be the “Research Center for Innovative Oncology” (RCIO). And NCCHE came to be having 8 divisions in clinical and 5 in research activities, as described on the following pages.

As of January 1, 2007, the staff of NCCHE is consisting of 96 physicians including 21 part-timers, 15 pharmacists including 5 part-timers, 47 technicians including 9 part-timers, 259 nurses including 5 part-timers and 58 residents. During 2006, we took care of 155,303 outpatients (5% increases in comparison with last year) including 7,774 newcomers (222 increases than in 2005) and 8,401 (586 increases than in 2005) inpatients. Also, The number of cases who underwent surgery under general anesthesia (2,320 cases) was much more than that (2,151 cases) in the last year, despite the very limited number of anesthesiologists and nurses. After all, the total number of patients treated still increases year by year, and more than 400 patients are always in the waiting list for admission, despite their great effort for shortening the hospital stay of inpatients (17.4 days in 2005 to 15.6 days in 2006). Nevertheless, all employees are trying their best to respond to the expanding demands of treating this increasing number of patients, though few increases is shown in the number of staff members.

Since the initial opening of Kashiwa campus, NCCHE has been challenging to develop the cancer therapeutics in the clinical bases, such as developments of positron emission tomography (PET) using specialized nuclear species, diffusion weighted MRI, narrow band imaging endoscopy, function preserving operations, curative chemoradiotherapy, proton therapy, palliative care, and so on. Also, in the research center, quite a few products, such as novel anticancer agents, or new findings in molecular imaging, drug delivery system (DDS) and micro-environmental pathology have been waiting for clinical applications, as well as regional distribution of psycho-oncology. Having overcome many difficulties and challenges, we are now confident of an integrated and well arranged cancer center, particularly of developmental therapeutics. Actually, quite a few papers listed on the following pages were published in various international journals in 2006, showing that our works here are of international importance.

I would like to express my sincere appreciation for the support that we have received from the Ministry of Health, Labor and Welfare, other governmental organizations, private organizations, individuals and the Foundation for the Promotion of Cancer Research. In addition, I am grateful for the diligence of my colleagues in the hospital, especially Drs. Nagahiro Saijo, Atsushi Ohtsu, Yosuke Uchitomi and Atsushi Ochiai who have devoted their efforts and talent to publishing this report.

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