

Preface

From April 1, 2010, the National Cancer Center (NCC) changed its status to an Independent Administrative Institution (IAI) from an institution controlled directly by the Ministry of Health, Labour and Welfare, Japan. This status change was in line with the "Act on Independent Administrative Agencies Where Researches of Advanced Specialized Medical Service Are Conducted" enacted in December 2008. The purpose of an IAI is to pursue tasks decided by the Government, in the performance of which the Government itself has limitations.

I myself was a director of a national university hospital when the Act on transformation of national universities into independent administrative entities was passed by the National Diet. I was relaxed about reforms with this change in status because I was reforming the organization anyway. But I realized it DOES matter after reading three books about corporate organizations which had copied the British model. I became anxious regarding the loss of direct governmental control. Did this change in status mean that the country will no longer support us?

On the other hand, it is also true that any organization under direct governmental control can become tired and begin to stagnate - so I changed my way of thinking. Instead, I regarded it as a great opportunity to revitalize the national universities in line with the people's expectations.

There are many drawbacks to being an organization tied to the Government. For example, we encounter problems such as limitations regarding hiring government officers, and the single-year budget rule. Under these new changes, however, we will still receive operation subsidies from the nation's tax coffers for tasks that private companies cannot pursue, such as basic research and enlightenment activities. As an independent organization, the NCC will be able to cut out unnecessary expense.

After Japan started to fall behind in cancer research and treatment, the concept of building the National Cancer Center came from Dr. Takeo Tamiya, a former Dean of the Faculty of Medicine, the University of Tokyo, who realized that a research unit which would look exclusively at cancer, could not work within a faculty of medicine in a university hospital. Some two years in the creation, the NCC was built in 1962 where the Naval Hospital used to be.

Sometimes study is completed by a single researcher but most study comes from broad areas and it grows large, as history shows. In that context there were "Giants of Study" in the NCC who became pioneers later, such as Dr. Yoichiro Umegaki, who specialized in particle radiation therapy; Dr. Heizaburo Ichikawa, who developed the double contrast study for the gastrointestinal tract; Dr. Shichiro Ishikawa, a thoracic surgeon; Dr. Takashi Sugimura, who led internationally biochemical research projects; and Dr. Kiyoji Kimura, who poured energy into the development of pioneering chemotherapeutic regimens. They built the foundations of today's NCC. These pioneers attracted outstanding physicians and researchers from all parts of Japan, regardless of the universities they were from and they cut across networks. The NCC's accomplishments in the field of cancer led Japan and the rest of the world.

The work of the early Presidents' was notable: Dr. Takeo Tamiya (studied basic medicine, at Tokyo University), Dr. Yoshitatsu Hiki (basic medicine, Tokyo University), Dr. Masaru Kuru (clinical medicine, Tokyo University), Dr. Kenpo Tsukamoto (clinical medicine, Tokyo University), Dr. Waro Nakahara (basic medicine, Cornell University), Dr. Shichiro Ishikawa (clinical medicine, Keio University), and Dr. Takashi Sugimura (clinical medicine, Tokyo University). The subsequent Presidents, too, did a world-class job.

Unrecognized by those within the NCC, however, it faced institutional fatigue. For the past 10 years, from the viewpoint of outside specialists, the NCC's tasks tended to be standardized jobs, rather than the Center's own clinical work or research. Let us remember that the original mission of NCC was supposed to be something others cannot do. Perhaps past presidents should have noticed the institutional fatigue sooner and should have taken advanced actions, but it is easy to be wise after the event.

Now the NCC will be reborn from a National Center to gain the status of an Independent Administrative Institute. All of us in the NCC, physicians, nurses, researchers, and administrative workers, will start work under the new slogan, "All Activities for Cancer Patients"! Every single staff member is potently and highly motivated, I'm sure you'll be satisfied with our service. As from June 1st, 2010, the NCC's functions will



include clinic services, nursing, research, enlightenment activities, providing cancer information and policy making. You can review our course of action, which is posted on the NCC website, at "Vision and Mission".

Finally, I would like to extend my thanks to everyone who contributed to this report, and I look forward to continuing to work at the head of this distinguished group of professionals.

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