Meet the Professor

Prof. Ramon Rami Porta: the internationalization of IASLC database should entail the contribution of data from China

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Expert introduction

Prof. Ramon Rami Porta (1) graduated from Barcelona University Medical School in 1980. He followed specialty training in thoracic surgery at the Jimenez Diaz Foundation, Madrid, and was board-certified in thoracic surgery in 1985. During his residency he also worked on a research project on malignant pleural effusion for his PhD degree that he received in 1986 from the Autonomous University of Madrid. In the last years of his medical training and during his residency, he visited several institutions in the United States of America for further training, and, as a certified thoracic surgeon, he was an overseas trainee at the National Cancer Centre in Tokyo. As a thoracic surgeon he worked in Barcelona and in Santiago de Compostela; he was attending thoracic surgeon at Hospital Universitari Mutua Terrassa, in Terrassa (Barcelona), from 1989 to 2016; and he was appointed Clinical Chief of Thoracic Surgery in 2017. His major interests are lung cancer staging, surgical treatment of lung cancer, and thoracic oncology in general. He is a member of several national and international medical societies. In the Spanish Society of Pneumology and Thoracic Surgery, he was a member of the group of coordinators of the Bronchogenic Carcinoma Cooperative Group (GCCB-S), a multicentre group whose project was to study lung cancer staging. He has been member of the International Association for the Study of Lung Cancer since 1990, is a member of its Staging and Prognostic Factors Committee, was Chair of this committee from 2009 to 2016, and is now Past-Chair of the committee. He also is a member of CIBERES-Lung Cancer Group, a government-supported network study group on lung cancer.

The 26th European Conference on General Thoracic Surgery (ESTS) was successfully held in Ljubljana, Slovenia from 27th to 30th May 2018, attracting many renowned scholars and surgeons from all around world to exchange new ideas and experience.

During the conference, Prof. Ramon Rami Porta, from Hospital Universitari Mutua Terrassa, chaired the ESTS—IASLC Joint Session on TNM Classification: from the 8th to the 9th Edition. Seizing this opportunity, the Editorial Office of Precision Cancer Medicine has the great honor to invite Prof. Ramon Rami Porta for an interview, sharing with us his opinions about the lung cancer database as well as his perspective to the construction of China’s database.

In the interview, Prof. Rami Porta indicated that the staging project of IASLC began 20 years ago in London in 1996 and the committee was established in 1998. Within the international database, TNM classification of lung cancer, mesothelioma, thymic tumor and esophageal cancer had been revised for the 7th and 8th database. One objective of the staging committee had at the beginning was that the database should be international. The previous editions had been based on a relatively large scale but only included Northern America database which was not really international. Therefore, the committee aims to create a more international database, including data from countries all around the world. However, on the published papers, there is not real balanced among the contribution of different continents. The 7th edition database was led by Europe and Asia, for the 8th edition, Asia was the major contributor. However, while Asia is a huge continent, China only accounts for a small fraction in the 8th edition. Since China is huge continent with many inhabitants with astronomic amount of lung cancer, the future contribution of more institutions in China will balance the geographical disparity of the IASLC database, providing a clearer picture of what lung cancer is around the world.

Prof. Ramon Rami Porta observed that if China has already established a database which contains elements that are necessary for revision of TNM classification, like basic academic logical data and follow up data, then it can be sent to the IASLC database for certification to select the needed fields for TNM analysis and revision. If China has not yet established the database, China can start from registering cases prospectively, using the electronic data capture system which is an online form and filled in real time. The
Advantage of the prospective registration is that it has more refined and in-detail data. Ideally, the committee favors the registration of prospective data, but if China has its own database, the committee now will consider retrospective databases from 2011 onwards (Figure 1).

**Interview questions**

(I) In your perspective, what is the role of Chinese data in the staging project of IASLC?

(II) What would be your expectation and advice on the lung cancer database in China?

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None.

**Footnote**

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

**References**


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