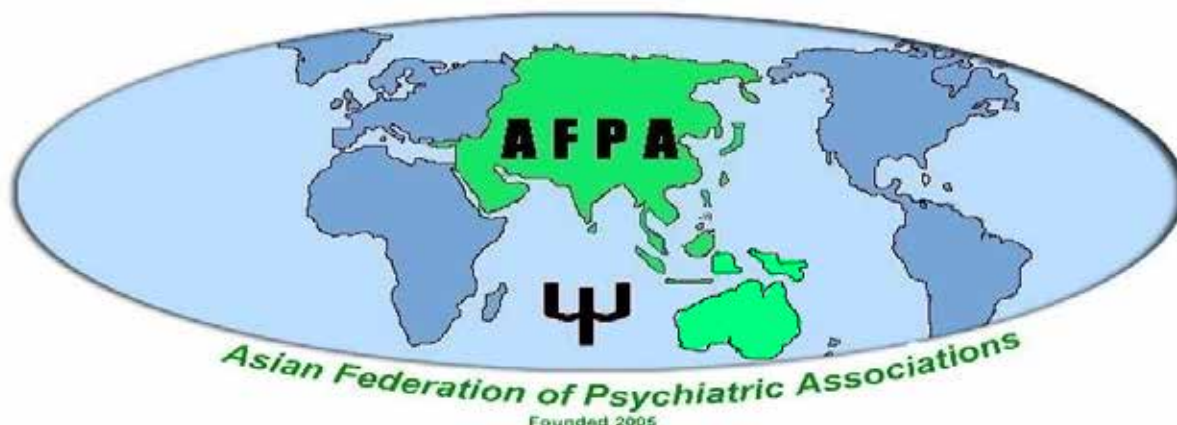


The Bulletin of the AFPA

The Winter 2021 Issue



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AFPA President's Messages



Dear colleagues! Welcome to the latest edition of our Bulletin of the Asian Federation of Psychiatric Associations, the newsletter of the AFPA. Once again I would like to thank all of our contributors and of course our tireless editor Winston W. Shen.

I write to you at a time that the COVID pandemic is still effecting all of us to varying degrees, but hopefully we are beginning to see the impact of vaccination on infection and particularly severe case rates. From my recent contact with other members of the AFPA executive and others

across Asia, I know that the vaccination role out is a great hope and is clearly the topic of much discussion. I also think what will ultimately be just as important is dealing with all of the mental health consequences of the pandemic, including those produced through economic consequence. It has been very interesting to see the adaptation that has occurred during this time in how we deliver mental health care, including in the increased use of telemedicine in many countries during the lockdown periods. Whilst the technology involved is not necessarily new, its uptake in many of our countries has been slow – sometimes due to clinician conservatism and sometimes due to limited availability. Certainly, in Australia the take up has been very large during the pandemic period and patient acceptance high. Although this should not be seen as a panacea to solve all workforce and distribution issues, telemedicine is likely to be a bigger part of our work as we go forward and the issues involved in funding and regulation are deserving of our attention. The AFPA executive have considered this a future priority area for consideration.

Finally, I could not say goodbye without noting the successful completion of the recent virtual WPA Congress, based in Bangkok. I want to congratulate both the WPA under the leadership of our Immediate Past President Professor Afzal Javed, and the Psychiatric Association of Thailand for their innovation. I also join all of you in encouraging the WPA to continue to hold such major meetings in Asia and hope that soon they will involve the opportunity to see each other face to face again. (The author reports no conflicts of interests in writing the message.)



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on 12 December, 2016.*

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*(Editor's note: Hopwood is the president of the Asian
Federation of Psychiatric Associations, 2019-2021.)*

New Office Bearers of the WPA from the AFPA Countries

Afzal Javed (Pakistan), the president-elect of the World Psychiatric Association 2017-2020, assumed the president of the WPA in October 2020. Helen Herrman (Australia), the president of the WPA (2017 -2020) stepped down the position.

The elected Zonal Representatives effective from October 2020 are:

- Seyed Ahmad Jalili (Iran) for Zone 15 (Central and Western Asia)
- Pichet Udomratn (Thailand) for Zone 16 (Southern Asia)
- Yong Chon Park (South Korea) for Zone 17 (Eastern Asia)
- Allister Bush for Zone 18 (Australasia and the South Pacific)

Roger M. K. Ng (Hong Kong) assumed his second three-year term position for the WPA secretary for education in October 2020. (The author reports no conflicts of interests in writing this feature.)

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*(Editor's note: Shinfuku is a founding president of the
AFPA. Javed and Udomratn are past presidents of the
AFPA.)*

FROM PRESIDENTS OF AFPA NATIONAL PSYCHIATRIC SOCIETIES

News from the Royal Australian and New Zealand College of Psychiatrists

Given restrictions on travel due to the COVID-19 pandemic, this year I have attended many conferences online for the first time.

In September 2020, I was pleased to pre-record a presentation for the Japanese Society of Psychiatry and Neurology Annual Meeting on the mental health of culturally and linguistically diverse people of Australia and New Zealand. The RANZCP and JSPN have a long association of participating in each society's annual meeting and I am pleased technology enables us to continue this collaboration.

In December 2020, I was honoured to be the keynote speaker at the Hong Kong College of Psychiatrists Annual Scientific Symposium, presenting via Zoom on smoking cessation and mental health. I also had the opportunity to be an external examiner via Zoom in Part III of the Fellowship Examination.

The RANZCP has joined the #RaiseTheAge campaign to advocate for the age of criminal responsibility to be raised to 14 in Australia. Australia's low age of minimum criminal responsibility is well out of step with international standards and although we were disappointed with a recent decision not to raise the age of criminal responsibility, the RANZCP will continue to advocate for the age of criminal responsibility to be increased at federal, state and territory levels.

The RANZCP has recently updated its position statement on voluntary assisted dying. This update reflects legislative developments that have occurred over the past few years in Australia, recognising that some psychiatrists may be involved in the assessment of those with terminal illness. Importantly, the RANZCP's position is that no psychiatrist should be mandated to participate in the voluntary assisted dying process against their wishes. (The author reports no conflicts of interests in writing the feature.)

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(Editor's note: Allan is the president of the RANZCP.)

The JSPN Annual Meeting Was Held in Sendai, Japan, 28-30 September, 2020

The 116 th annual meeting of the Japanese Psychiatry and Neurology (JSPN116) was originally scheduled for June in 2020, as it has been routinely organised in the past. But the COVID-19 pandemic and the government's issuance of the Declaration of the State of Emergency prompted it to be postponed to 28-30 September, 2020.

Although a hybrid meeting with both in-person and through virtual viewing had been entertained as an option, the entire meeting was ultimately conducted through virtual viewing. In addition to the three-day live streaming, the meeting was made available on-demand three streaming until October 31, 2020.

The virtual viewing was delivered from the base station located in the spacious Special Exhibition Room of the Sendai International Center, where the conference was originally scheduled to take place.

Eighteen web devices corresponding to Halls A–R were placed in the base station booths in accordance with the social distancing requirements. Upon entering, all staff members were checked for their body temperature, and they disinfected their hands with alcohol. Unfortunately, this total online format forced us to restrict conference participants to the registered JSPN members only.



Base station booth placement (Sendai International Center)

The highlight was the special session with Robert Yanagisawa of Mount Sinai Hospital, "From New York to Tohoku, Sharing Experiences of 9/11 and 3/11 Disasters." The lecture was also open to be accessible to the general public. This session, held every year since the 2011 Great East Japan Earthquake, introduced the international support and exchange activities that have been implemented for the victims of 11 September, 2011 in New York and the 3/11 Great East Japan Earthquake, organized by the Japanese Medical Society of America (JMSA), International Services Department of Mount Sinai Hospital, New York, and Fukushima Medical University with the support of Rotary International.



The session introduced the activities of a US medical team that has been bringing September 11th Families' Association, formed by victims of the World Trade Center terrorist attack, to visit various locations that were affected by the Great East Japan Earthquake to join and build relationships between victims jointly with local disaster psychiatry teams. The session, still available at the website below, is being well-received.



Body temperature measurement at entry President's Greetings Box

Totally, we had 870 presentations (242 sessions). The meeting was shown live from 28-30 September, 2020 and viewing request on demand until 31 October, 2020. We had registered 8,791 participants. By the end of the on-demand viewing period, the total numbers of viewers reached 174,048. Some sessions were found to be particularly attractive to viewers: these, each drawing about 4,000 viewers, include "Critique on psychiatry today as a signpost for the next 10 years," "Contemporary psychiatry to the test: ideal prospects for psychiatry without biomarkers," "First Responses to Eating Disorders from Physical and Psychological Approaches," "Current pharmacotherapy for schizophrenia and challenges" and "Employment and Social Rehabilitation for Adult Developmental Disorders."



The topics of main symposia included "interface between physical and mental disorders," "COVID-19 pandemic on mental health," "esketamine treatment in patients with major depressive disorder and suicidal ideation," "early screening of psychiatric disorders ineffective," "pediatric and young adults," and so on.

We have always aimed to realise a Japanese proverb, "A misfortune in a turn of events bears fortune awards. (*Wazawai tenjite fuku wo nasu,*)" and we believe that this was indeed at least partially accomplished. We express our sincerest gratitude to the participants and society members, as this success would not have been possible without their cooperation and support. Although it was unfortunate that the participants could not see each other in person, we believe that it was well-compensated by all that was gained. (The author reports no conflicts of interests in writing this feature.)

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(Editor's note: Yabe was the president of the 116th JSPN annual meeting.)

KNPA Had a Successful Fall Congress in Daegu, Korea 30-31 October, 2020

Korean Neuropsychiatric Association (KNPA) succeeded fall congress in Daegu, Korea, 30-31 October, 2020. Due to COVID-19 pandemic situation, the congress held in semi-virtual way. We had 1 plenary lecture, 3 special lectures, 22 symposia, 1 workshop, 1 CME, and 1 oral presentation session in 5 separate rooms. Because Daegu had had the first and severe stricken with COVID-19 in Korea, the venue was meaningful for KNPA to make effort to overcome COVID-19 pandemic.

At the spring congress of the KNPA, we processed the congress with thorough preventive measures against coronavirus infection. The theme of the congress was "Integration and Convergence in Psychiatry." Many psychiatrists talked about mental health and COVID-19 in many areas.

In 2021, KNPA will host the 19th International Congress of the Pacific Rim College of Psychiatrists (PRCP2021) in Seoul at April 8 to 10, 2021. The PRCP2021 will also held in semi-virtual way, so psychiatrists in many countries can participate this international congress conveniently. The theme of this congress will be 'Towards safe and equitable mental health care for all.' As part of efforts to encourage more participation, PRCP2021 will offer financial support through various awards. The topics of main symposia

will be "interface between physical and mental disorders," "COVID-19 pandemic on mental health," "esketamine treatment in patients with major depressive disorder and suicidal ideation," "early screening of psychiatric disorders in pediatric and young adults," and so on. (The authors report no conflicts of interests in writing feature.)

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the director of communication and strategy committee,
respectively, of Neuropsychiatric Association of Korea.)*

The TSOP Annual Meeting Was Held in Tainan, Taiwan 31 October – 1 November, 2020

The Taiwanese Society of Psychiatry held its 2020 annual meeting in National Cheng Kung University, Tainan, Taiwan as scheduled from 31 October to 1 November 2021, in the middle of COVID-19 pandemic.



A photo for a lecture "Treatment of Bipolar Depression"

From left: Shih-Ku Lin, chair, sitting; Chau-Hsiung Lee, speaker, standing at the podium

This was the 59th year of academic conference, and the main themes focused on "Psychiatry in a Rapidly Changing World," including telemedicine/ online consultation, trust and distrust in a pandemic era, and human rights protection in treatment and infection control. This two-day annual meeting consisted of 40 symposia and workshops, 3 plenary lectures, and 154 poster presentation.



A photo taken at the rest area of the TSOP annual meeting at the venue at National Cheng Kung University, Tainan

This conference may be one of the few academic conferences held in 2020, thanks to Taiwan's successful policy and management of epidemic prevention without lockdown. The society hosted its 1,421 delegates with full delight of physical contact interaction, banquets, and tours. (The authors report no conflicts of interests in writing this feature.)

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general, respectively, of the Taiwanese Society of
Psychiatry.)*



Congress of the RANZCP To be Held in Hobart, Tasmania, Australia, 16-20 May, 2021

The annual congress of the Royal Australian and New Zealand College of Psychiatrists will be held 16-20 May 2021 in Hobart, Tasmania, Australia. The theme of the congress is "Influencing and being influenced by the world around us." We come together to think about psychiatry's place in a very changed world.

Congress 2021 will have options to access the academic programme content both in person and remotely and we hope colleagues from the region will join us for the virtual program. More information at: www.ranzcp2021.com.au. (The author reports no conflicts of interests in writing this announcement.)

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FROM PRESIDENTS OF AFPA-AFFILIATED NATIONAL SOCIETIES

The Projects of IMHTCT and REBAMP at Kaohsiung Municipal Kai-Syuan Psychiatric Hospital

Most hospitals in Taiwan have got involved in some projects in the New Southbound Policy. Some hospitals in Taiwan have even volunteered to train some specialty training of a particular field in a given Southbound country. Since 2016, International Mental Health Training Center Taiwan has been established at the Kaohsiung Municipal Kai-Syuan Psychiatric Hospital. This center has helped and trained Vietnamese mental health staff starting from southern Vietnam, then middle Vietnam and currently in northern Vietnam. So far, 764 trainees in Vietnam, Indonesia, Thailand, the Philippines, Cambodia, Myanmar, Malaysia, India have been receiving training from IMHTCT. Kai-Syuan Psychiatric Hospital has also has signed memoranda for training collaboration with various institutes or psychiatric hospitals in Vietnam, Cambodia, and the Philippines. We also have hold three successful international training conferences in Taiwan, and about 10 workshops in various countries in South East Asia, south Asia, Australia, and New Zealand.

Another project of the Southbound Policy is Research and Education Center of Bridging Asian Mental Health and Psychiatry (REBAMP). In 2018, Yen Kuang Yang at National Cheng Kung University Hospital also started the project of REBAMP supported through Ministry of Health and Welfare, Taiwan. The project was planned to explore new connections of hospital or university between Taiwan and South East Asia This center was originally started at National Cheng Kung University Hospital in Tainan. This project is intended to do the "bridging work" stressing on research and education of mental health and psychiatry between Taiwan and South East Asian countries. The focuses of REBAMP are somewhat different from those of IMHTCT, which is stressing on hand-on clinical skill.



A total of 70 trainees and experts participating in the 2019 SeminarKaohsiung Municipal Kai-Syuan Hospital sponsored a seminar in 2019. Disaster medicine was part of the topics of the seminar. The visitors made an education tour to visit Xiaolin Village Memorial Park in Shanlin District, Kaohsiung City.

Because of pandemic situations, the activities of IMHTCT and REBAMP have been put on hold. We are pretty sure that those Southbound activities will become active again after the COVID-19 is under controlled. (The authors declare no conflicts of interest in writing this report.)

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(Editor's note: Chen is a ex-president of Taiwanese
Society of Psychiatry. Chen and Wang are project directors
of both IMHTCT and REBAMP.)

The First TSfN 2020 Interdisciplinary Neuroscience Congress Was Held in Taipei, 11-13 September, 2020

The First Taiwan Societies for Neuroscience (TSfN) Congress was successfully held at Academia Sinica, Taipei, 11-13 September, 2020. This three-day Congress was attended in person inside the buildings of Academia Sinica. The number of total attending delegates was about 565. Due to the impact of COVID-19, everyone was wearing a mask and required to fill in a health questionnaire before entering the venue buildings.



A photo of the first Taiwan Societies for Neuroscience (TSfN) Congress. The photo showed that all seats were almost occupied.



The inaugural ceremony and press conference for the TSfN congress. Sixteen societies sent delegates to attend the opening ceremony. From left: Unidentified, Wen-Sung Lai, Po-See Chen, Denise H. Wu, Wei-Zen Sun, Shu-Ping Chao, Sho-Tone Lee, Chung-Chuan Lo, Chih-Cheng Chen, Y. Henry Sun, Shuu-Jium Wang, Jaw-Lin Wang, Unidentified, Shang-Te Hsu, Ming-Hong Hsieh, and Bing-Wen Soong.

Taiwanese Society of Biological Psychiatry and Neuropsychopharmacology (TSBPN) is one of the member societies of the Taiwan Neuroscience Alliance (TNA). TNA has 16 society members include Taiwan

Neuroscience Society, TSBPN, Taiwan Pain Society, Taiwan Society for Neuro-Oncology, Taiwan Society of Cognitive Neuroscience, Taiwan Dementia Society, Taiwan Magnetic Resonance Society, Taiwan Society for Nutritional Psychiatry Research, Taiwan Academy of Physical Medicine and Rehabilitation, Taiwan Neurological Society, Taiwanese Society of Biomedical Engineering, Society for Neurological Rare Disorders-Taiwan, Taiwan Society for Stereotactic Functional Neurosurgery and Radiosurgery, Taiwanese Society for Computational Neuroscience, Taiwan Neurosurgical Society, and Taiwan Neurotrauma Society.

The programme included keynote speeches, plenary lectures, nanosymposia, plenary sessions, oral blitz session, and poster presentations. The keynote speakers consisted of Kaj Blennow (Sweden), Tadashi Isa (Japan), Mu-Ming Poo (USA), and Henry Sun (Taiwan). Due to the precaution of pandemics and 14-day quarantine requirements, all foreign speakers did not attend the meeting in person, and their lectures were changed into online presentation.

At noon of the third day (13 September) of the TSfN congress, TSBPN held a board meeting. Chau-Hsiung Lee (Makay Hospital) also gave a lunch seminar on the topic "Orexin antagonist for insomnia: new mechanism and new conception." (The authors declare no potential conflicts of interest in writing this feature.)

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(Editor note: Huang and Chen are the secretary and the
secretary general, respectively, of the TSBPN, November
2018 - November 2011.)

The 2021 TSBPN Spring Meeting on 27 February, 2021

The 2021 Taiwanese Society of Biological Psychiatry and Neuropsychopharmacology (TSBPN) Spring Meeting was held at Evergreen International Convention Center, Taipei, Taiwan on 27 February, 2021. Totally we had 113 registrants.

In the morning, we had eight speakers who were the winners and received the TSBPN academic awards in the



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(Editor note: Chen is the secretary general of the TSBPN, November 2018 - November 2021.)

past two years to share their study findings. The speakers at this meeting included Mong-Liang Lu (on adjunctive fluvoxamine on clozapine), Pei-Chi Tu (trait impulsivity in patients with bipolar disorder), Po-Han Chou (near-infrared spectroscopic study on occupational stressed persons), Vincent Chin-Hung Chen (protective effect of risperidone on colorectal cancer), Cheng-Ta Li (repetitive transcranial magnetic stimulation study in patients with treatment-refractory depression), Mu-Hong Chen (antisuicidal effect of D-cycloserine in ketamine-infused treatment for treatment-refractory depressed patients), Jane Pei-Chen Chang (omega-3 polyunsaturated fatty acid in treating patients with cardiovascular disease and major depressive disorder).

In the afternoon, the training workshop “the Non-invasive Brain Stimulation” was organised by Cheng-Ta Li, Ming-Kuei Lu, Chih-Ming Cheng, Hu-Ming Chang, and Hsing-Chang Ni gave lectures related to basic principles and safety, treatment for depression and pain, substance abuse, as well as autistic disorders of repeated transcranial magnetic stimulation, respectively.

Although the CINP 2021 conference was changed to an online virtual Congress, our enthusiasm for participating in the CINP congress remained unchanged. We also showed the whole virtual CINP 2021 plenary lecture “Big data analyses for neuropsychopharmacology.” from 15:30-16:30 given by Tung-Ping Su.



All TSBPN meeting participants looking at the big screen for the virtual CINP Congress

From left: Tung-Ping Su (speaker) and Winston W. Shen (a co-chair)
Not seen was Toshiaki A. Furukawa (another co-chair in Japan)

At the board meeting of the TSBPN, 12 new member applicants were approved. The TSBPN autumn meeting was also decided on 2 October, 2021 in Taipei. The actual venue will be decided later.

At this TSBPN spring meeting, we also had two lunch seminars and one evening symposium. The topics of seminars were “treatment for patients with major depressive disorder” and “cognitive deficits in patients with major depressive disorder.” The topic of the dinner symposium was “updates in the management of schizophrenia.” (The author declares no conflicts of interest in writing this announcement.)

The WPA Thanks the AFPA for Their Visible Presence in the Scientific Programme of the 20th WPA Virtual Congress, 10-13 March, 2021

The World Psychiatric Association is extremely happy about the success of the 20th WPA Congress (WCP20) that took place on 10-13 March, 2021. The WCP20 was WPA's first Virtual WPA Congress, but it was truly a unique experience for all participants. Just like WPA's normal congresses, we found experts from all around the world discussing the latest trends and developments in our field using the latest virtual technology. Some of the salient features of the congress were:

- The participants enjoyed a truly immersive and personalised virtual experience. We were able to share the new, fully personalised, interactive virtual platform with more than 3,000 participants from wherever we were in the world.
- WCP20 was spread over four days filled with inspiration, learning and networking along with several symposia, scientific presentations, e-posters. Debates, panel discussions and virtual exhibition and networking with colleagues. Thanks to Norman Sartorius and Helen Herrman for their efforts to shape the programme of the congress that has certainly met the expectations of our membership.
- There were live sessions and pre-recorded sessions. With over 190 sessions (including, plenary, accepted symposia, special lectures, panel discussions, presidential symposia etc.), the scientific committee prepared an exceptionally interesting and diverse scientific programme that was all available live and on-demand to watch at participants convenience!
- Networking with peers, even though we were virtual, participants still have the chance to engage with and learn from world-renowned international practitioners, researchers, and professionals. We joined in chats and video groups, sent questions to presenters, and of

course, connected via social media.

- The virtual exhibition hall discovered the latest developments from the industry at their booths and were available to speak directly with the organisation's/company's representatives.
- Learn on-demand was an exciting experience from the virtual platform. Registered participants will be able to access the entire scientific content whenever and wherever they want for up to three months after the Congress.
- CME credits! Participate in the scientific programme were eligible to receive 31 CME credits attributed to the WCP20 Virtual Congress.
- WPA TV! Through our new virtual studio, a unique and exciting experience, we are able to view the worlds' leading mental health experts discussing current global challenges.
- And last but not the least, social event with mind reader - Shane Black was a fun congress experience, still available on congress website to all registered delegates. From astounding feats of mind-reading to unbelievable demonstrations of influence, not only we were amazed, but were inspired to implement some of these tactics in your daily practice!

I may also add that WCP20 highlighted AFPA and other regional organisations in a big way. The AFPA president and other office bearers participated in special sessions on "Global psychiatrist associations: strengthening alliances" and "Interorganizational symposium in collaboration with the Asia Psychiatric Association: Challenges and achievements of psychiatry in Asia" in addition to many other invited and submitted sessions. Thanks to AFPA leadership for their support and participation in this academic event. These sessions are still available in our recorded sessions on the website.

Whilst we would of course prefer to meeting you all in person, I am confident that this virtual congress is still an important scientific event contributing extensively to the psychiatric and mental health world. Thanks for your patronage. Special thank is made to Chawanun Charnsil, the president of Psychitric Association of Thailand for his his enthusiastic support to host this virtual congress. (The author reports no conflicts of interests in writing this feature.)

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(Editor's note: Javed is the WPA president (2020 - 2023). The WPA web site address is www.wpanet.org. Javed is also an immediate past president of the AFPA. Sartorius

[Switzerland] is a past WPA president and a current council member of the AFPA. Herrman [Australia] is an immediate past WPA president. Due to the delay of the publication of this issue of the Bulletin of the AFPA, an announcement on WPA Virtual Congress written by Kamonporn Wannarit [Thailand], Chawanun Charnsil [Thailand], Pichet Udomratn [Thailand] and Malcolm Hopwood [Australia] was omitted.)

The 19 PRCP International Congress Is To Be Held in Seoul Korea, 8-10 April, 2021

In 2021, Korean Neuropsychiatric Association will host the 19th International Congress of the Pacific Rim College of Psychiatrists (PRCP2021) in Seoul, 8-10 April, 2021.

The PRCP2021 will also held in semi-virtual way, so psychiatrists in many countries can participate this International Congress conveniently. The theme of this congress will be "Towards effective, safe and equitable mental health care for all." As part of efforts to encourage more participation, PRCP2021 will offer financial support to participants through various awards. The topics of main symposia will be "Interface between physical and mental disorders," "COVID-19 pandemic on mental health," "Esketamine treatment in patients with major depressive disorder and suicidal ideation," "Early screening of psychiatric disorders in pediatric and young adults," and so on. (The authors report no conflicts of interest in writing this feature.)

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(Editor's note: Park and Hong are president and director of communication and strategy committee, respectively, of the KNPA. Due to the delay of publication of this issue of the Bulltin of the AFPA, the follwing feature was adapted from an e-mail message of 15 April, 2021 sent out by Park after the this PRCP Internation Congress was taken place.)



The 19th PRCP International Congress Was Successfully Completed, 8 - 10 April, 2021

The 19th International Congress of the Pacific Rim College of Psychiatrists (PRCP 2021) was held in Seoul, Korea, 8 (Thursday) – 10 (Saturday) April, as an online and offline hybrid congress under the tough conditions of the ongoing COVID-19 pandemic.

On behalf of the Organising Committee, I extend my sincerest gratitude to all participants for making your time to join us at PRCP 2021. We welcomed nearly 1,000 participants from 22 countries, and 155 abstracts were presented through free communication and e-poster presentations. Taking this opportunity, I would also like to thank the members of the Organizing Committee, board members of PRCP and all speakers and chairs and also all the participants who enabled us to derive a high-quality and well-structured program underlying the success of the congress.

Under the theme of “Towards effective, safe and equitable mental health care for all,” PRCP 2021 covered the various topics and fields and latest advances in the field of psychiatry through rich scientific programmes including 1 keynote lecture, 4 plenary lectures, 3 special lectures, and 24 symposia with a total of 144 presentations.

Despite the challenges of the COVID-19 situation, the Organizing Committee tried our best to propose a highly diverse Scientific Program. I hope that the PRCP 2021 hybrid congress gave everyone a chance to strengthen and widen their knowledge, and provided you with an opportunity to innovate and prosper.

Lastly, I wish to point out that we are now collecting feedback on our congress for future improvement. Please take your time to complete our quick survey by visiting our virtual platform and clicking the “feedback survey” button on the main page.

Thank you once again for your indispensable support and contribution to PRCP 2021. I look forward to meeting all of you again, my dear colleagues and friends, at the next PRCP congress (The author declares no conflicts of interest in printing this feature.)

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*(Editor's note: This feature is adapted verbatim from
Park's e-mail message on 15 April, 2021.)*

COMMENTARIES

(The opinions expressed here are authors' personal opinions, and they do not necessarily reflect on those of any organisations.)

Challenges and Opportunities of Psychiatry circa 2021

Welcome and greetings from the World Psychiatric Association! It is indeed a pleasure to start my term as president of the WPA and to lead this prestigious organisation over the coming triennium. It is my honour to represent our membership as we work together to strengthen our profession – especially during this difficult period.

Psychiatry is currently facing several challenges, and although our profession may be being under threat, there are many opportunities that can help us consolidate psychiatry as an inspiring branch of medicine. WPA, being the umbrella organisation for psychiatrists worldwide, therefore has a major responsibility for leading the profession. This leadership can only be achieved through the full participation of our members and the engagement of our professional colleagues.

The Action Plan of the WPA

It is also gratifying to note that the WPA General Assembly approved the proposed Action Plan. As you know, the WPA Action Plan for 2020 - 2023 defines emerging needs and priorities from a worldwide perspective. Looking at the global situation, only a minority of people with mental disorder receive any treatment. There is an outstanding need to improve access to high quality mental health care in all countries and to support psychiatrists and other mental health professionals in their important roles as policy makers, direct service providers, trainers and supporters of health care workers in primary and community health care systems. The key goals of the Action Plan are as follows:

- To promote psychiatry as a medical specialty in clinical, academic and research areas and to promote public mental health as a guiding principle.
- To highlight the specific role of psychiatrists in working with other professionals in health, public health, legal and social aspects of care
- To ensure WPA's positive engagement with member societies and WPA components, mental health professionals and general health care workers

The 2020-2023 Action Plan also looks at targeted areas that need attention with input from various WPA components during the next triennium. It will work within an international perspective focusing specifically

on improving coverage of interventions to treat mental disorder, prevent mental disorder and to promote mental wellbeing including through relevant training of mental health and other professionals. This Action Plan will also build on the 2017-2020 Action Plan to ensure continuity in the WPA's work.

Six Areas of the WPA Action Plan 2020-23

Public mental health

Population approach to mental health to sustainably reduce mental disorder and promote mental wellbeing by improving coverage of effective interventions to treat mental disorder, prevent associated impacts, prevent mental disorder and promote mental wellbeing

Child, adolescent and youth mental health

Improving coverage of public mental health intervention including for higher risk groups such as those with learning disability, autism, early onset of psychosis and refugees

Addressing co-morbidity in mental health

Training, capacity building and engagement with other mental health professionals

Developing partnerships for joint collaborative work and strengthening partnerships with mental health and other organisations

- Continuation and completion of previous Action Plans

All the areas covered in the proposed Action Plan are of high priority. However, due to time limitations and scarcity of resources, there will be greater focus on specific areas. The WPA has established working groups that have started formulating plans and pilot projects in different areas of the proposed Action Plan outlined in this document. Once the findings of these pilot projects are available, we will share these reports and seek funding to implement these ideas in different settings and countries.

I am mindful that the rapid spread of COVID-19 around the world is further increasing risk of developing mental disorder, relapse of existing mental disorder and poor mental wellbeing which requires action at a population level.

Joining Forces from Member Societies

It is hoped that the 2020-23 will set new directions for all WPA components to develop guidelines and directions for future work. Furthermore, our plans to get guidance from our member societies, board, council and affiliated associations and collaboration with other



professional organisations working in mental health will certainly strengthen our global efforts for ensuring a continuity in our efforts for the promotion of mental health in international perspectives.

I look forward to receiving support, active input, and advice from our membership in setting these priorities and making a real difference in mental health. (The author does not report any conflicts of interest in writing this commentary.)

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(Editor's note: Javed started his three-year term of the president of the WPA in October 2020. The WPA web site address is www.wpanet.org.)

Neuroscience-based Nomenclature (NbN): Current Situation and Challenges



Neuroscience-based Nomenclature (NbN) has been developed to replace the current indication-based nomenclature and to provide a framework for more scientifically valid and better informed pharmacological decisions. The current nomenclature is based on clinical indications; for example, drugs used for mania and

psychosis they are classified as “mood stabilizers” and “antipsychotic drugs,” respectively. While this conventional nomenclature has been widely used, there are serious limitations. First, boundaries among various categories of psychotropic drugs, using the current nomenclature, are unclear. “Antipsychotic drugs” and “antidepressants” are good examples; antipsychotic drugs are used for not only schizophrenia, but also mood disorders, including bipolar disorder and treatment-resistant depression. Likewise, antidepressants are also indicated for anxiety disorders. This discrepancy between their names and indications often confuses patients and their caregivers and sometimes leads to a misunderstanding of the effects of prescribed medications, resulting in poor treatment adherence and treatment discontinuation. Second, up-to-date scientific knowledge on the psychotropic drugs has not been reflected on the current nomenclature. This is a serious issue since the current system was created nearly half a century ago. For example, dopamine receptor antagonists and a partial dopamine receptor agonist are currently included in the same category of “antipsychotic drugs” despite the difference in their drug profiles. Moreover, the involvement of the serotonergic system also has to be taken into account for some drugs, but such differences are not reflected on the current system.

The ECNP initiated a taskforce for NbN

A taskforce for psychotropic nomenclature was established to overcome those limitations of the current nomenclature. This taskforce was an initiative of the European Congress of Neuropsychopharmacology (ECNP), with representatives from five international organizations – the ECNP, Asian College of Neuropsychopharmacology (AsCNP), American College of Neuropsychopharmacology (ACNP), International College of Neuropsychopharmacology (CINP), and International Union of Basic and Clinical Pharmacology (IUPHAR). The mission of this taskforce is to provide a pharmacologically driven, rather than indication-based, nomenclature that includes the most recent neuroscience understanding of psychotropic drugs [1-3].

NbN is a pharmacologically driven nomenclature

The NbN provides a pharmacologically driven nomenclature focusing on pharmacology and mode of action, which reflects current knowledge and understanding about the targeted neurotransmitter, molecule, system being modified, and mode/mechanism of action. The NbN also includes four additional dimensions (www.nbn2r.com/):

- approved indications
- efficacy and side effects
- "practical note" which summarizes the clinical knowledge that has been prioritised by filtering" through the taskforce's opinion sieve"
- neurobiology.

In addition, the information on the use during pregnancy has recently been added. The easiest and recommended way to access the newest version of the NbN is to use the approved app (Figure 1), which is freely available on the project's website of Neuroscience-based Nomenclature of the ECNP (www.nbn2r.com/). This app has been downloaded more than 80,000 times as of January 2021.

Having been endorsed by the JSPN, the APA, *Lancet* and *Neuropsychopharmacology*

Numerous major national academic bodies such as the Japanese Society of Psychiatry and Neurology and the American Psychiatric Association, as well as leading journals in the field, including *American Journal of Psychiatry*, *Lancet* group, and *Neuropsychopharmacology*, have endorsed this nomenclature. Taking into account new findings and new insights, including feedback from users, the NbN is constantly updated. Since it is not always easy to leave the familiar language behind, some expected and unexpected responses from the field may arise. However, such responses and feedback will surely improve the quality of the NbN, which in turn will be beneficial for clinicians, researchers, patients as well as their caregivers. (The author declares no conflicts of interest in writing this commentary.)

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(Editor's note: Uchida is a member of taskforce of the Neuroscience-based Nomenclature.)

Cognition and Rehabilitation
A New English Journal Was Launched
in December 2020



A Landscape of psychiatry-related journals in Japan

There are more than 20 journals in psychiatry, including *Folia Psychiatrica et Neurologica Japonica* (the official journal of the Japanese Society of Psychiatry and Neurology [JSPN]), *Clinical Psychiatry (Arc Media)*, *Psychiatry (Igaku Shoin)*, and others, but most of them are in Japanese language. As far as I am aware, there are only three psychiatry-related journals in English language published in Japan. Hiroshi Kurita and I served as the editors-in-chief to restart *Psychiatry and Clinical Neurosciences* as the official English journal by the JSPN. Now, *Psychiatry Clinical Neurosciences* has grown up as a hub journal of Asian psychiatrists with impact factor 3.351, owing to the efforts of Shigenobu Kanba and Tadafumi Kato as the present editors-in-chief.

In 2000, I worked hard to launch *Psychogeriatrics* as an official journal of Japanese Psychogeriatric Society. After retirement from Osaka University, I stepped down from editor in-chief of *Psychogeriatrics*, and Toshihisa Tanaka succeeded the rôle of the editor-in-chief to increase its impact factor to 1.75 in 2019, and I was asked again to serve as the editor-in-chief of *Psychogeriatrics* in April 2020. Japanese Society of Neuropsychopharmacology switched Japanese language journal into English online journal *Neuropsychopharmacology Reports* in 2018.

***Cognition and Rehabilitation* is owned by OKRU**

I personally believe that communication is essential in developing any science including psychiatry, and that



the rôle of English journal to share the research outputs among international peers is so important in developing science. I hope that a new English journal *Cognition and Rehabilitation* will function as an organ to promote science and research in the field of rehabilitation and psychiatry.

I am working at Osaka Kawasaki Rehabilitation University (OKRU) to educate rehabilitation professionals. We could not open university campus owing to the governmental declaration of emergency in April and May 2020, but we have continued face-to-face classes after June because we believe person-to-person teaching is essential to educate rehabilitation specialists. But in December 2020, we have changed into the hybrid classes, combination of remote and face-to-face, to reduce the risk of Covid-19 infection of our students. We have reluctantly decided to postpone the field research scheduled in December 2020 for the local elderly people as a part of the longitudinal cohort survey of the elderly people in this area to promote the healthy life of the elderly. The Covid-19 definitely had a massive negative influence on education and research activities.

We believe that education and research are essential to any university that will contribute to the future of society. OKRU's mission is the education of rehabilitation specialists who can understand the importance of mental function in the field of rehabilitation, and the integration of rehabilitation and psychiatry. In spite of the difficult time of with-corona life, we want to continue the academic activities, and we are happy to announce the launching of a new English journal *Cognition & Rehabilitation* with 15 original and review papers, which will be the academic platform to be shared and used by professionals in rehabilitation science and psychiatrists. (The author does not report any conflicts of interest in writing this commentary.)

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(Editor's note: Contributing authors can submit manuscripts for publication in Cognition & Rehabilitation at cogrehab@kawasakigakuen.ac.jp. Takeda is a past president of the JSPN and the immediate past secretary for meetings of the World Psychiatric Association.)

Esports:

A Booming Gaming Enterprise or a Clinically Significant Concern?

Esports is an organised activity involving competitions, typically between professional players. It is also one of the variants of video gaming. The prevalence of gaming ranges from 10% to 15% for gaming disorders/addiction among young people in Asian countries, whereas Western countries ranges from 1% to 10% [1]. The 2013 *Diagnosical and Statistical Manual of Mental Disorders, the Fifth Edition (DSM-5)* includes Internet gaming disorder in the appendix as a condition warranting further research. In June 2018, the WHO included gaming disorder as a mental health condition in the *International Classifications of Diseases (ICD-11)* [2, 3]. Gaming disorder (with online and offline) is characterized by impaired control over gaming, increasing priority given to gaming over other activities to the extent that gaming takes precedence over other interests and daily activities, continuation, or escalation of gaming, despite the occurrence of negative consequences. It results in significant impairment in personal, family, social, educational, occupational, or other important functioning areas. The inclusion of gaming as a mental condition in the ICD-11 prompted health professionals to explore Esports activities and their role in contributing towards problematic gaming. There is a need to understand Esports in entity as a sport or a clinical disorder.

Esports as a Legitimate Gaming Opportunity

Cognitive capabilities of an Esports player

While various studies have established the negative effects of gaming, some studies have also mentioned the increased cognitive and mental faculties required while playing online games. Professional gamers (pro-gamers) have been known to know the game, quick and strategic decision making, positive attitude, focused attention, proper communication among teammates and trust among members that encourage successful performance [4].

Esports players also need enhanced hand-eye coordination, and motor movements, which can be achieved only through dedicated practice. According to a paper by P. Vorderer and colleagues presented at the 2003 second international entertainment computing conference in Pittsburgh, Pennsylvania, USA, professional video gamers play with the purpose of the competition, whereas casual gamers often play for leisurely purposes.

Stress and demands of Esports

In mainstream sports, an individual is required to make important decisions under time constraints. According to a paper by K. Rudolph and colleagues, presented at the 2016 first international Esport

conference in Bayreuth, Germany, 2016, the underlying psychological mechanisms while playing online sports are similar to those off offline sports. Individuals experience an increase in heart rate and cortisol levels while competing in Esports. This would imply that Esports gamers experience stress levels under factors like competition and decision making. Serious Esports athletes also focus on training, practice and physical exercise a lot more than those who play in a “casual manner.” A study showed that 73% of professional football Esportsmen focus on performing high intensity exercise for at least three days a week, which fulfils the World Health Organisation recommended levels of exercise [5].

Esports as a potential clinical entity

Impact on physical health

Esports is also known to have a significant effect on an individual's physical health. The increased screen time during gaming can cause detrimental effects on sleep. It can also lead to musculoskeletal complaints due to excessive motor strain. It can also lead to neck and back pain eye strain (along with eye problems like carpal tunnel syndrome, asthenopia, and other visual disturbances) [6]. This can be due to the posture and eye-related demands, gaming puts on the individual.

Impact on cognitive and mental health

ICD-11 and DSM-5 have recognised “gaming disorder” as a mental health concern, due to its impact on an individual's mental health. Gaming can cause individuals to neglect aspects of their social and occupational life. It can also lead to academic decline, increased aggression, social isolation, academic decline, cessation of hobbies, a decline in relationship with parents over time, decreased life satisfaction, and attention problems. Other psychological factors associated with problematic gaming can be depression, impulsivity, and poor quality of interpersonal relationships [2, 3].

It is estimated that problematic gaming affects only a small proportion of gamers [7]. Hence, it is important to realise that while problematic gaming can impact an individual's mental health, various other factors make them more susceptible to its ill effects. While Esports can have a significant detrimental effect on an individual's mental and physical health, it is also known to require, proactive and training skills. If the field is regulated, it can be incorporated within the structure of other sports competitions by ensuring structure and better rules. But a significant barrier to the same is that the game publishers get paid for the video game, which is against most sports organisations [1]. With ICD-11 and DSM-5 recognising

online gaming as a clinical entity, the attention is bound to shift at the potentially harmful psychological consequences of Esports, however an extensive research focussing on the gaming pattern of Esport players are required to identify the status of their clinical or sporting condition. (The authors do not report any conflicts of interest in writing this commentary.)

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LETTER-TO-THE EDITOR

What Is the Research on Asian Psychotropic Prescription Patterns?

It is a great pleasure for me to introduce the Research on Asian Psychotropic Prescription Patterns (REAP) to the AFPA members. The prescription patterns of psychotropic drugs differ greatly among Asian countries. But limited information about the differences and factors that influence them is available in a comparable manner. In addition, prescription patterns change with time. Since 2001, Asian psychiatrists and pharmacologists have conducted collaborative research to elucidate these questions using a unified research protocol. This research is known as REAP.

REAP has carried out a series of international collaborative surveys in patients with schizophrenia and depression over the past 20 years.

REAP has undertaken six large scale international collaborative surveys from 2001 to 2016. The survey on prescription of psychotropic drugs for patients with schizophrenia, carried out from April to June 2016, was joined by 15 countries and areas in Asia: China, Korea, Japan, Hong Kong, Taiwan, Singapore, Thailand, Malaysia, India, Indonesia, Vietnam, Sri Lanka, Myanmar, Bangladesh, and Pakistan.

In 2018, REAP completed a survey on prescriptions for patients with bipolar disorder and on the use of mood stabilizers. In 2019, another survey involving case vignettes of patients with schizophrenia receiving polypharmacy was conducted among 350 psychiatrists in 34 countries.

REAP has become the largest and lengthiest international collaborative research on psychiatry in Asia. REAP has promoted research collaborations in psychiatry among developed and developing countries in Asia. Furthermore, many young psychiatrists, graduate students, and health professionals in Asia have been well-trained and supervised in clinical research by leading researchers. Consequently, many recent publications associated with the REAP project were contributed by young Asian researchers. More than 90 papers based on REAP surveys have been published.

REAP members organized the symposium based on the REAP surveys at the World Congress of Asian Psychiatry (WCAP). We believe that our REAP network will contribute to better clinical practice in psychiatry and better mental health globally. Please visit the home page of the REAP at www.reap.asia/index.html. (The author does not report any conflicts of interest in writing this letter-to-the editor.)

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