

Current Status of GI Endoscopy in Thailand and Thai Association of Gastrointestinal Endoscopy (TAGE)

Rungsun Rerknimitr, M.D., FASGE, FRCP (London)*, Thawatchai Akaraviputh, M.D., FRCST**, Thawee Ratanachu-Ek, M.D., FRCST***, Pradermchai Kongkam, M.D.*, Nonthalee Pausawasdi, M.D.****, Pises Pisespongsa, M.D.*****

*Department of Medicine, Chulalongkorn University, Bangkok 10330, **Department of Surgery, Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok 10700, ***Department of Surgery, Rajviti Hospital, Bangkok 10400, ****Department of Medicine, Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok 10700, *****Bamrungrad International Hospital, Bangkok 10110, Thailand.

ABSTRACT

Endoscopy practice in Thailand is being performed and serviced by both surgeons and gastroenterologists. The number of endoscopy performed by each specialty is very much comparable. Before 2000, the services were done independently. On 15th December 2005 the Thai Association of Gastrointestinal Endoscopy (TAGE) has been found there is a rapid progression in GI Endoscopy service, research, and teaching in Thailand and its neighbor. Since then the workload for the current number of endoscopists is still overwhelmed by day-to-day service. Thailand and TAGE require the support and collaboration from oversea to expand their need and to serve better for GI Endoscopy practice in Thailand.

Keywords: Thai Association of Gastrointestinal Endoscopy; endoscopist; Thailand Siriraj (Med J 2018;70: 476-478)

INTRODUCTION

Endoscopy practice in Thailand is being performed and serviced by both surgeons and gastroenterologists. The number of endoscopy performed by each specialty is very much comparable. Before 2000, the services were done independently. On 15th December 2005 the Thai Association of Gastrointestinal Endoscopy (TAGE) has been found (Fig 1). Since then, the collaboration between the two groups of endoscopists has been united and supervised directly by the Royal Colleges of Surgeons and the Royal Colleges of Physicians (Thailand), respectively.¹



We found TAGE

Fig 1. When the Thai Association of Gastrointestinal Endoscopy (TAGE) was found on December 15th, 2005.

Correspondence to: Rungsun Rerknimitr

E-mail: ercp@live.com

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Endoscopy Service

Due to a paucity of endoscopists in the country, in the early years the priority and workloads were based on emergency and urgent conditions such as upper or lower gastrointestinal bleeding and acute cholangitis. Over the last decade, the services have expanded to elective gastrointestinal conditions and more advanced procedures such as endoscopic ultrasonography (EUS), endoscopic submucosal dissection (ESD), and third space endoscopy. However, some of these special services are only available in university hospitals and large referral endoscopic centers. So far, 99 Endoscopic units in Thailand provided endoscopic retrograde cholangiopancreatography (ERCP) covering about 87% of healthcare-service area in the country. Meanwhile, EUS is being performed in 30 hospitals but limited to only large provincial hospitals and medical schools. ESD and third space endoscopy are limitedly available in a few hospitals and not in every university hospital. In 2017, the nationwide colon cancer screening by immunochemical fecal occult blood test (i-FOBT) has been launched and more colonoscopy performed due to positive i-FOBT is expected (Fig 2).²⁻³ As a result, Endoscopic service in Thailand could face another challenge in the disproportion between workloads and human resource. The country definitely requires more number of endoscopists and their associates. In addition, the additional training to achieve a high level of quality in GI endoscopy is warranted.



Fig 2. Nationwide colonoscopy screening in Thailand has started in 2018.

Domestic GI Endoscopy training

The standard curriculum for gastroenterologist is a 2-year fellowship that continues after the 3-year of residency training in medicine. However, those who would like to pursue their career as the expert in GI endoscopy usually continue their third year at high volume centers. However, this third-tier does not require license or board

examination. The other counter-part endoscopists, surgical training offers their basic endoscopy during 4-year surgical residency training and advanced endoscopic teaching through the minimally-invasive-surgery fellowship. To date, the overall number of endoscopists graduating from a formal training program is less than 50 graduates a year. This number is still far beyond the necessity of endoscopic workload in this country because the day-to-day workload requires at least 5 times more.

International GI Endoscopy training

According to the geography of Thailand, our country is in the perfect central area for trainees in the South-East Asia (SEA). All major cities in the SEA countries can reach Bangkok within one and a half hour by airplane. In 2006, the Siriraj Endoscopy Unit – Faculty of Medicine Siriraj Hospital, Mahidol University has been recognized as one of the World Gastroenterology Organization (WGO) Training Center. Under the sponsorship of the Asia Pacific Digestive Endoscopy (APSD) and other local supporters, many Thai endoscopy masters have joined other Asian faculties to teach many endoscopists from Myanmar, Laos, Vietnam, Indonesia and the Philippines. There are various training formats including 1) at the local site; outreach hands-on workshop, train the trainer on site, or 2) bringing the trainees to Thailand for observers in advanced procedures (Fig 3), training with the models at the sponsor-funded Endoscopy Training Center e.g. Olympus T-TEC. Moreover, the annual Live Endoscopy meeting organized by TAGE, involving all basic and advanced procedures performed by world experts, has been well attended by overseas endoscopists every year. Recently an Endoscopy Conference via internet called ECE (Endoscopic Club E Conference) has been used as the additional platform to teach other endoscopists who may miss the opportunity to participate face-to-face meeting in Thailand. The format of this meeting is using the internet to present and discuss the video clip on many interesting cases of GI Endoscopy. This platform has been evaluated as one of the excellent tools in GI Endoscopy teaching.⁵

TAGE History and its output

After the foundation of TAGE, there has been a rapid progress of its output in harmony by the two types of endoscopists. Up until now, TAGE has organized more than 15 International Live Endoscopy Demonstrations that attained with over 400 attendees including the overseas faculties from the US, EU, and Asia Pacific countries. In addition, TAGE has published 7 GI Endoscopy Atlases



Fig 3. International trainees from Myanmar and Vietnam attended the workshop and Live Endoscopy course in Thailand.

that can be downloaded freely from its website (<http://www.thaitage.org/en/>). Moreover, three small handbooks in Thai language that suitable for young endoscopists and GI Endoscopy nurses/associates are also available online. Under TAGE as co-author there are two GI endoscopy guidelines have been published in the leading GI Endoscopy peer-review journals.⁶⁻⁷ Regard to the number of trainee, TAGE masters have conducted the hands-on teaching for more than 500 of domestic and international trainees in a variety of procedures including ERCP, EUS, ESD, POEM, etc.

CONCLUSION

Since TAGE has been found there is a rapid progression in GI Endoscopy service and teaching in Thailand and its neighbor. However, the workload for the current

number of endoscopists is still overwhelmed by day-to-day service. Thailand and TAGE require the support and collaboration from oversea to expand their need and to serve better for GI Endoscopy practice in Thailand.

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