

Prof. Mingyon Mun: enthusiasm is the key to success

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Expert introduction

Prof. Mingyon Mun is the vice director of the Department of Thoracic Surgical Oncology in Cancer Institute Hospital of Japanese Foundation for Cancer Research. He is also a member of Japan Surgical Society, Japanese Association for Thoracic Surgery, Japanese Association for Chest Surgery, and Japan Society for Endoscopic Surgery. Prof. Mun is an expert in minimally invasive surgery who has published numerous papers describing the surgical procedure and their results in the most influential medical journals (*Figure 1*).



Figure 1 Prof. Mingyon Mun, Department of Thoracic Surgical Oncology, Cancer Institute Hospital of Japanese Foundation for Cancer Research, Japan.

Editor's note

On October 28 and 29, 2017, the 16th Annual Meeting of Taiwan Association of Thoracic & Cardiovascular Surgery (TATCS) successfully ended. Established for 31 years, TATCS has developed into an association with a reputation for excellent scientific and educational value. This year, the event took place in Taipei, a city feathered by a glamorous blend of tradition and modernity.

With numerous of outstanding experts worldwide gathering together, this meeting was no doubt a grand feast which covered all the significant topics and latest developments across the field of thoracic and cardiovascular surgery. It provided participants with scientific sessions composed of keynote speeches, oral presentations, award-winning lectures as well as simulation workshop, and stormed everyone's brain by the high-quality discussion.

During the conference, Prof. Mingyon Mun, from Cancer Institute Hospital of JFCR, gave two impressive speeches on “*Thoracoscopic segmentectomy for small-sized peripheral lung cancer*” and “*Lobe-specific systemic node dissection by VATS—can it be performed en bloc?*”. In the keynote speech, “*Thoracoscopic segmentectomy for small-sized peripheral lung cancer*”, Prof. Mingyon Mun showed us the indication and results of thoracoscopic segmentectomy (TS-S) since the cases of small-sized peripheral lung tumor, such as ground-glass-opacity and metastatic lung cancer, has been increasing recently (*Figure 2*).

On behalf of the Editorial Office of *Journal of Thoracic*

Disease (JTD), I was honored to have the opportunity to interview Prof. Mingyon Mun and share with our readers his experience and enthusiasm as a thoracic surgeon.

Interview questions

JTD: Please introduce yourself briefly

Prof. Mun: I am Mingyon Mun from Cancer Institute Hospital in Tokyo, Japan. I am a vice director of thoracic surgical oncology department; therefore, thoracic oncology is no doubt my field of expertise. Especially, my specialty is minimally invasive surgery which includes video-assisted thoracoscopic surgery.

JTD: Among all your positions, which one do you enjoy being the most?

Prof. Mun: Apart from being a surgeon and vice director, I am also a member of Japanese Association for Chest Surgery and Japanese Society for Endoscopic Surgery. Now, I am in charge of the program of medical education for young thoracic surgeons, which I enjoy a lot.



Figure 2 Snapshot of Prof. Mingyon Mun's speech: Thoracoscopic segmentectomy for small-sized peripheral lung cancer.



Figure 3 Photo with Prof. Mingyon Mun after the interview.

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JTD: What inspired you to become a surgeon in the field of thoracic oncology?

Prof. Mun: The same as other Asian countries, the number of lung cancer patients has been increasing in Japan. However, there weren't that many thoracic surgeons in the old days. In addition, minimally invasive surgery has been widely accepted as a standard procedure for lung cancer patients. As a result, I wanted to be proficient in lung cancer surgery in order to help the people in need, and I enjoy performing the surgery very much, it's my great honor to give my patients the opportunity for a better life.

JTD: Please share with us your own experience or the challenges you had in performing the surgery

Prof. Mun: When deciding which surgical treatment my patient is going to receive, I will first consider the thoracoscopic surgery, which is one of the minimally invasive surgeries. For example, one of my recent cases is about oncological clearance, I chose to conduct thoracoscopic surgery since it offers a wider range of benefits for patients (*Figure 3*).

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Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

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