

Prof. Jianxing He: ones with more motive power and willpower, a better traveler he is

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Expert's introduction

Jianxing He, Professor, MD, mentor of doctorate candidates, President of the First Affiliated Hospital of Guangzhou Medical University (FAHGMU), and Chief of the Department of Thoracic Surgery of FAHGMU (Figure 1). He is a Fellow of the American College of Surgeons, a Fellow of the Royal College of Surgeons (RCS) in the UK, member of the American Association for Thoracic Surgery (AATS), member of the STS & European Society of Thoracic Surgery (ESTS), chairman of the Guangdong Chest Diseases Society, deputy chairman of Guangdong Medical Association, deputy chairman of Guangdong Medical Doctor Association, deputy chairman of Guangdong Hospital Management Association, vice president of Guangdong Health Management Association, vice president of Guangdong Precision Medicine Society, first chairman of Guangdong Society of Thoracic Surgery, first chairman of the Guangdong Medical Doctor Association Thoracic Surgeon Branch, executive director of Guangdong Ming-Yi Foundation for Medical Charity, Ministry of Health Young and Mid-aged Experts with Outstanding Contributions, Central Health Care Expert, founder and Executive Editor-in-Chief of the *Journal of Thoracic Disease* (indexed by SCI), co-Editor-in-Chief of the *Annals of Translational Medicine*, member of the editorial board of the *European Journal of Cardiovascular Surgery* (thoracic surgery). He was the winner of the “2014 China Doctor Prize”, “2014 China’s Top Ten Doctors with Good Reputations”, and “100 Outstanding Figures in Guangdong”. He is also listed as one of the State Council Special Allowance Experts. He also serves as the honorary president of Anyang Tumor Hospital of Henan Province.

Introduction

A real traveler is unrestricted by borders, and an observer of one's internal rules will not be easily shaken.

Prof. Jianxing He has been a surgeon for 32 years, during



Figure 1 Professor Jianxing He.

which he has obtained more than 20 international “firsts” both in the Asia Pacific region and in China. A total of 23 patent applications for his inventions (including 3 international patents) and 28 patent applications for his utility models have been lodged. Outside of these current applications, he has successfully obtained 8 patents for his inventions, and 17 for his utility models. To this day, he has a total of 218 published articles in SCIE-indexed journals, including *Lancet* and *JCO*, with a total impact factor of 1,082.443. He is the founder of an SCI-indexed journal: *Journal of Thoracic Disease* (*JTD*), and more than 30 outstanding doctors and postdoctoral fellows have been under his wing.

With the disposition of a gentleman, Prof. He had a fine temperament and demeanor, a just man who stood firm in righteousness and selflessness. When we first met Prof. Jianxing He for the first time, President of the First Affiliated Hospital of Guangzhou Medical University, he had a learned and refined aura, a real gentleman without doubt. Later I was told that his colleagues liked to refer to him as “Commander He”—As a commander, he must be able to explore and expand boundaries with the input



Figure 2 Prof. Jianxing He and his colleagues in the Department of Cardiothoracic Surgery in FAH of Guangzhou Medical University.

of all staff members. Not only does he own the skillful fingers of a surgeon, but the brain of an inventor. His technical innovations in thoracic surgery have influenced many doctors at home and abroad, and transforming is still ongoing and in the process of being created.

On his way from FAHGMU to the Guangzhou Baiyun Airport, Prof. He accepted an interview by AME. His next stop would be Frankfurt, Germany. He said he wanted to see what new developments had been made internationally.

A true traveler is unrestricted by borders. He is always on the journey to be the best (*Figure 2*).

The motive power decided how long he have travelled

Knowledge is limited. Imagination encircles the world.—Albert Einstein

The inventor—a new interpretation to “making your dreams a reality”

“If Prof. He was no longer a doctor, what do you think he would do?”—AME

“He would have been an inventor! His brain always runs so fast.”—Ying Chen, nurse, FAHGMU.

Prof. Jianxing He is one of China’s pioneers in video-assisted thoracoscopic surgery (VATS) and has long been at the forefront of technological innovation.

In 1994, he took the lead in China to perform video-assisted thoracoscopic (VATS) lobectomy. In 1995, he was the first surgeon in China to carry out VATS chest lymph node dissection. In the same year, he introduced hybrid minimally invasive incision-based thoracic surgery

into China to replace conventional large-incision thoracic surgery. In 1996, globally, he was the first surgeon to perform microthoracoscopic surgery; in China, he was also the first to perform VATS thymectomy. Also in 1996, he carried out VATS lung volume reduction for pulmonary emphysema and proposed its new mechanism, which was voted by the *Chinese Journal of Surgery* as one of the “50 major events in the history of surgery in China”. In 1999, he successfully completed the first case of tracheal allotransplantation in the Asia Pacific region. In 2000, he was the first surgeon who performed hybrid resection and reconstruction of bronchus and carina. After 2009, he began to carry out trachea/carina resection and reconstruction by using a single-incision thoracoscopic technique. So far, he has completed more than 300 cases, and some of these complex operations have been broadcasted live on the Internet, which to Dr. Douglas James Mathisen, Director of Division of Thoracic Surgery at Massachusetts General Hospital, is “absolutely unbelievable”. In 2003, he successfully completed the first case of single-lung allograft transplantation in Southern China. In 2007, he used transferred myocutaneous flaps for the reconstruction of large tracheal defects and the treatment of tracheal tumors, which was the first reported case worldwide. In 2008, he repaired giant tracheoesophageal fistula with esophageal tracheal replacement, also the first reported case worldwide. In 2010, he was the first surgeon who performed VATS resection of the upper vena cava in the Asia Pacific region. In 2011, he pioneered non-intubated lobectomy and lymph node dissection under local anesthesia. In 2012, he completed thymectomy for myasthenia gravis without muscle relaxants and lung volume reduction surgery for severe pulmonary dysfunction, the case reported to be the first worldwide. In 2014, under his leadership, VATS surgery under non-intubated spontaneous breathing anesthesia was widely applied in the Department of Thoracic Surgery. In 2015, he invented the first glasses-free 3D endoscopic display system and began to carry out glasses-free 3D minimally invasive thoracic surgeries. In 2016, he participated in the development of the lung cancer resection guidelines and the standards of lymph node dissection and published a series of relevant articles in the renowned journal *JCO*...

He has interests far beyond medicine. Jingrun Chen, a Chinese mathematician who made significant contributions to the Goldbach conjecture, and Elon Musk, CEO and product architect of Tesla Motors and CEO/CTO of Space Exploration Technologies (SpaceX) are two of a few names



Figure 3 The world's first glasses-free 3D VATS radical resection of lung cancer (the operator at the center is Prof. He).

on his list of idols.

In 2015, he led his team to develop the world's first glasses-free 3D thoracoscopy display system. With clinical needs as its focus, a comprehensive solution was put forward while considering the various aspects of graphics, images, optical design, and technological processes. Also, the glasses-free 3D thoracoscopy display system was highly efficient in the transmission and processing of HD frequency stream and the other key technical issues. In May 5, 2015, he completed the first two cases of glasses-free 3D thoracoscopic radical surgery in lung cancer, bringing the endoscopic display system from 2D and auxiliary 3D into an era of glasses-free 3D (Figure 3).

But he did not stop there. Instead, he and his team constantly optimized their display technology. "Today, the glasses-free 3D display system has become more stable and stereoscopic, and has been applied in many departments with great levels of success, including the department of obstetrics and gynecology, and the department of gastrointestinal surgery. To date, our team has completed surgeries via the glasses-free 3D display system in about 800 cases," said Prof. Jianxing He.

Not only did the scope of application of the display technique expand, it has increasingly been used in more complex surgeries. On November 9, 2015, Prof. He and his team successfully performed a highly difficult and complex operation—total VATS bronchoplasty, arterioplasty, and angioplasty of the superior vena cava with the assistance of glasses-free 3D display system (1). Dr. Keng Ang, a visiting scholar at First Affiliated Hospital of Guangzhou Medical University from Nottingham City Hospital, observed and participated in the whole operation. He commented in a later article: "I can only describe the skills and expertise of Prof. He's team in this extremely challenging and rarely seen operation

as 'exciting' and 'unforgettable!'".

Prof. He rejects any negative thinking. He would like to try everything before saying no. His abilities and actions have defined the term 'execution power', and his new interpretation of the phrase 'making your dreams into a reality' is: You think it, you do it.

"A man of great energy levels, one who is exceptionally active" would be his colleagues' overall evaluation of him as a person.

"He's very demanding of himself, and he sees every surgery as an artwork for him to perfect. When minimally invasive incisions have been optimized, he kept asking himself, 'Can we do better in enhanced recovery after surgery'? I joined the Department of Thoracic Surgery in FAHGMU in 2001. During my years from a resident to a chief physician, Prof. He was my tutor and was a beacon that shone light on my work, study, and life. What impresses me most is that he is always imaginative, creative, and innovative," said Dr. Shuben Li, a team member of Prof. He's in FAHGMU.

According to Prof. He, "innovation can be divided into two types: original innovation and hybrid innovation. Today, technology in all fields is developing rapidly. The integration of different disciplines will bring about multiple perspectives and new innovations."

As a doctor, he believes that the driving forces of his innovation are "the pursuit of better efficacy and the needs of patients". He thinks that innovation is achieved by "constant thinking", and an innovation is assessed mainly by "whether or not it has practical value".

The game changer—time to change: newer, easier, and wider

"Who is HE?"

"Dr. Sleeve."

What Prof. He brought to the community of thoracic surgery was not only limited to technical innovations, but also the changes in the concept of surgical therapy.

In 1994, he and his team took the lead in performing minimally invasive surgery in lung cancer in more than 10,000 Chinese patients. With these successful experiences, he proposed the concept of "treatment based on specific diseases in specific individuals". As a result, an individualized minimally invasive surgical system for lung cancer that covers a process chain including preoperative anesthesia, intraoperative resection, and postoperative prognosis was developed.

"This system provides strong evidence for the change in surgical procedures for lung cancer and has made significant contribution

in establishing VATS as a new standardized treatment,” said Dr. Peter Paul Yu, 2014–2015 President of the American Society of Clinical Oncology (ASCO).

In 2011, he and his team developed VATS surgery under non-intubated spontaneous ventilation anesthesia, which dramatically shortened postoperative recovery time, and took first steps in making fast-track recovery a reality, thoracic surgery evolving to become a day surgery. Furthermore, he and his team completed the world's first case of mediastinoscopic tracheal tumor resection plus tracheal resection and reconstruction under autonomous breathing anesthesia (2).

Prof. He told us that when he started performing lung surgery under non-intubated anesthesia, he and his team also faced great challenges, not only in terms of techniques but also the shift in ideas: Cardiac surgeries can be performed when the heart beats or stops beating, and pulmonary surgeries can be performed with or without ventilation. Since heart bypass surgeries can be successfully performed even when the heart is still beating, is it then possible to carry out a variety of surgeries on different technical levels even when the lungs keep working?

As it turns out, they were right.

In 2015, he and his team put forward the concept of “Tubeless VATS”, and in December of the same year, the team he led held the first international workshop on minimally invasive non-intubated surgery. The workshop had a theme: “Simple to Simplest”, which was well-recognized by his peers in China and abroad.

To Prof. He, the best things are the simplest things. *“From large incision to minimally invasive techniques, we have been exploring the way to solve complex problems in a simple way. Our priority is to minimize the patient's injury and optimize the efficacy of treatment. The development of catheterization in the field of cardiology is a good example,”* said Prof. He.

However, it is a well-known fact that new ideas are easy to propose but are difficult to promote. This is especially true on the international stage, where few foreign experts have doubts about the skills of Chinese thoracic surgeons. How do we break out of this predicament?

“I call it ‘video communication’. We show recorded surgical videos to our audience during international meetings, and it's easy to tell straight away whether or not they're doing a good job” was his answer.

Ms. Grace Li, an editor of AME Publishing Company who participated in the 22nd European Society of Thoracic Surgeons (ESTS) Annual Meeting in 2014 with Prof. He, witnessed He's performance in the meeting: the video on

the sleeve resection performed by Prof. He impressed the audience. During the tea break, an expert asked, “Who is HE?” Another attendant replied with a witty pun, “HE is Dr. Sleeve.”

Someone once said, *“The hardest thing in the world is to put an idea into someone else's head.”* Instead of words, Prof. He has made this challenge a reality through sheer ability and treatment efficacy.

He was among the first group of Chinese thoracic surgeons to stand on the international stage, and has influenced many doctors at home and abroad with his superb medical skills and revolutionary surgical ideas. Since 1995, he has trained global thoracic surgeons in three forms: national training courses, Greater China VATS Surgery Training Institute, and webcast platform. Under his leadership, the FAHGMU Minimally Invasive Thoracic Surgery Training Center passed the accreditation of Royal College of Surgery, UK, in 2014 and was approved to use the logo and certificate of the college.

In one of his lectures, Dr. Diego Gonzalez-Rivas, a Spanish VATS expert, mentioned that he received training on non-intubated VATS surgeries in 2012 under the instruction of Prof. He. “Prof. He is my master,” he would say, proud to introduce his tutor to each and every European thoracic surgeon he meets.

After listening to Prof. He's lecture in the 2016 Pan-Pacific Asia Thoracic Surgery Forum, Prof. Toshiaki Morikawa, a professor from the Department of Surgery, the Jikei University School of Medicine, Tokyo, Japan, and also the executive member of the Academic Committee of Japan Society for Endoscopic Surgery (JSES), wrote a letter to Prof. He and sang high praises of his Tubeless accelerated rehabilitation system. *“I felt some evolutionary issue is coming real.”* he wrote, *“This is one of the most revolutionary innovations since the adoption of thoracotomy in the past 100 years.”*

Dr. Xia Feng, a professor from FAHGMU attended the “2016 Symposium on Awake Non-intubated Single-Incision Carinal Reconstruction and VATS Surgeries on Lungs and Thymus III” and commented that “the thoracic surgery team led by Professor He and the anesthesiology team led by Dr. Qinglong Dong have made groundbreaking innovations. They can do every kind of anesthesia for airway surgery that you can possibly imagine.”

At the 95th Annual Meeting of the American Association for Thoracic Surgery (AATS) in 2015, Prof. He was elected as a member of the AATS, becoming one of the few Chinese thoracic surgeons to receive this honor (3). AATS has strict requirements on its member qualification, and only



Figure 4 Prof. Jianxing He (left) receiving the AATS Member certificate from Dr. Pedro J. del Nido (right) at the AATS annual meeting.



Figure 5 Prof. Jianxing He performing heart-lung transplant (right).

surgeons with an international reputation in cardiothoracic surgery and have made significant contributions to the development of this field can apply for it. Becoming an AATS member is yet more proof to show that Prof. He's outstanding contribution to thoracic surgery has been globally recognized (Figure 4).

The challenger—conquering the Everest in medicine

“You have always been taking on difficult surgeries. Do you feel nervous before an operation?”—AME

“You must be daring in your thinking, but careful in your actions. If you have already thought about every detail before going to an operating table, you will always be confident.”—Jianxing He

The heart-lung transplant surgery has long been known as “the Mount Everest in the medical profession”. For Prof. He, he has already conquered this peak. In 2015, Prof. He and his team completed the first heart-lung transplant, making FAHGMU the only Ministry of Health-approved heart and lung transplant center in southern

China. To date, the transplant team has completed 148 lung transplant cases, 6 cardiac transplant cases, and 2 heart-lung transplant cases. Among these patients, the youngest lung transplant recipient was only 21 years old, and the longest postoperative survival period reached 14 years and 2 months. He and his colleagues also broke the global record of lung transplantation age limit of 81, now 83 (Figure 5).

“Prof. He is very bold. He was trained on lung transplantation in the United States in 1999, and after his return, he believed it was a very promising procedure and began to promote it. However, at that time, only Beijing Anzhen Hospital had successfully performed this surgery. Even in the face of an immense amount of criticism and pressure, he led a group of graduate students and practiced the procedure in more than 40 animals. Finally, on January 22, 2003, he and his team completed the first case of lung transplantation in southern China, and the patient had survived for a long period of time,” Dr. Xin Xu, a surgeon in FAHGMU, recalled emotionally. *“Prof. He is always sensitive to new technology, and he knows what is worth the effort. He is also decisive, daring to do what he believes is right; and more importantly, he fights no battle unprepared. He constantly strives for perfection, a trait that ensures the interests of patients.”*

He has always been a “challenger” against our “preconceived ideas” and the “technical limits”.

In 2015, he published an article titled “The impact of visceral pleural invasion in node-negative non-small cell lung cancer: a systematic review and meta-analysis” in *Chest*. *“This article, for the first time, quantitatively describes the prognostic value of pleural infiltration and provides important evidence for the revision of the T-staging of lung cancer,”* commented Dr. Frank C. Detterbeck from Yale University, USA.

In 2016, when interviewed by *Lancet Oncology*, Prof. He said, “improving the technology and increasing the challenge are key priorities in the development of VATS.” (4).

For him, there are two challenges: one is a highly demanding major surgery, and the other is to perform a surgery extremely skillfully and to accelerate postoperative recovery. Some surgeries may seem extremely complex and difficult, however, if you are fully aware of their mechanisms and are well-prepared for each step, you will be confident in performing a procedure. A good driver will be more confident when driving a car if he separates the parts of the vehicle in his mind, and clearly understands the mechanisms and structures of the vehicle.

“You must be daring in your thinking, but careful in your actions. Patients’ safety should always come first at any time,” he emphasized.

The willpower decided how long he have insisted

What is well established cannot be uprooted.—Tao Te Ching

Be an editor with independent thinking

On June 14, 2017, the Journal Citation Reports published an impact factor (IF) of 2.365 for the *JTD* in the year of 2016. As the Executive Editor-in-Chief and co-founder of *JTD*, Prof. He shared his sentiments in his 'WeChat Moments': "Let's take it one step at a time, working together to improve medicine and research in a creative, open, and inclusive way as we become the leaders in setting international standards!"

Back in 2009, there was no well-recognized SCIE-indexed medical journal in the field of respiratory medicine and thoracic surgery in mainland China. Many Chinese original articles could only be published in foreign journals and often could not be published timely. Prof. Nanshan Zhong, Academician of Chinese Academy of Engineering, made a bold prediction that establishing SCIE medical journals by Chinese scholars will become the future trend. "Creating more SCIE-indexed journals so that our research, data, and copyrights will be for our use".

Prof. He shared Prof. Zhong's thoughts and managed to bring his technical innovations to the table, and suggested to Prof. Zhong: "Let's create a professional journal, so as to provide a platform for global thoracic disease clinicians to communicate and exchange experiences!"

"Acting on his words" is exactly what Prof. He did. With the guidance of Prof. Zhong, Prof. He, together with Mr. Daoyuan Wang, founder of AME Publishing Company and Mr. Guangqiao Zeng, director of the editorial branch office of *JTD*, formally launched *JTD*. In order to resolve the problem of the lack of a working space, Prof. He offered his own place of residence to be *JTD*'s editorial office, his home becoming the cradle of the journal.

Seven years have gone by since then, and *JTD* grows gradually and steadily, publishing quarterly, bi-monthly, to monthly. As the Executive Editor-in-Chief, Prof. He never forgets his initial intention—to make *JTD* an academic platform for global clinicians and researchers to publish their findings and achieve efficient exchanges.

"As an editor, you must be able to judge a manuscript independently and scientifically. You must rely on the experts but should not blindly follow them," said Prof. He. "While I do have some smaller goals in mind, I will not be in blind pursuit of impact factor. *JTD* should not be overwhelmed by evaluation systems and lose its inherent innovativeness, openness, and inclusiveness."

Be a competent doctor

A teacher is the one who propagates the doctrine, imparts professional knowledge, and resolves doubts.—On the Teacher, Han Yu

Two of Prof. He's students, Dr. Shen and Dr. Liang, also accepted our interview. To them, Prof. He is a trailblazer who always walks at the forefront and is the human embodiment of what it means to be a good doctor.

"Prof. He proposed the concept of 'precise surgical treatment for lung cancer' many years ago. He also discussed the procedures (on lobes and sub-lobes) and lymph node dissection for early-stage small-cell lung cancer as well as refined surgical incisions, precise diagnosis and detection, and improved anesthesia, with an attempt to minimize surgical trauma and thus maximize the therapy benefits for patients. These ideas are followed by a series of studies such as comparisons of surgical procedures for $\leq 2\text{cm}$ non-small cell lung cancer and quantitative lymph node sampling during surgery for early lung cancer. Later, he led us to publish these research results in *JCO*, offering more choices for patients receiving individualized therapy," said Dr. Shen.

He was particularly impressed by what Prof. He had said during a lecture: "At first you don't see it, but when you finally do, before you recognize its importance, you'll realize that you no longer understand it, and later down that path, you realize that you cannot catch up with it, no matter how much you try. The development of new techniques and theories has always been controversial. The process of perfecting something less than satisfactory is one that is filled with conviction, hard work, sweat, and perhaps even grievances."

"I call Prof. He 'Master'. For more than 6 years, the knowledge I've learned from him far exceeds the scope of academics and medicine, and this valuable experience influences my entire life," said Dr. Shen.

Dr. Liang, another student of Prof. He shared Dr. Shen's thoughts. "Prof. He often tells us to 'be imaginative and never be self-satisfied'. We should try our best to integrate thoracic surgery with other disciplines, so as to push forward the entire field of research."

"For every technical detail," Liang continued, "if Prof. He can think of it, he can perfect it, so that patients' benefits can be maximized." On top of surgical excellence, Prof. He also keeps a close eye on fields that are often made little of, such as preoperative anesthesia. For example, Prof. He proposed the possibility of using genomic methods to genotype patients, so as to observe the sensitivity of the patients to drugs, and to ensure the precise use of anesthetic and analgesic drugs based on their individual conditions.

According to Dr. Shen and Dr. Liang, Prof. He has

always had a clear understanding of the overall conditions of each patient.

“When Prof. He receives a patient’s medical history, he always has a smile on his face, and provides treatment recommendations based on the patient’s specific conditions. He always tells us that we should provide patients with a variety of treatment options and inform them of the pros and cons of each option before making a treatment decision. Surgeons cannot operate just for the sake of an operation, they should instead take into full account the overall condition of the patient.”

Prof. He is also lauded for his keen clinical observations. Once, a patient with recurrent “yellowish ascites” visited FAHGMU. He had sought treatment in many other tertiary hospitals but the symptom persisted. After careful observation, Prof. He said, “*it might be urine instead of ascites.*” A laboratory test confirmed his assumption. Subsequently, the patient was found to have suffered from a rupture of his ureter.

“As an outstanding surgeon, he is equally brilliant when it comes to his sensitivity in the scope of internal medicine. He truly is a doctor of great skill.”

Be a caring doctor

“*You have many titles: hospital director, professor, chairman... Which one do you prefer?*”—AME

“*I would say doctor. Being a doctor is my principal job.*”—Jianxing He

As the President of FAHGMU, he has demonstrated his impressive management skills. Under his leadership, FAHGMU has adopted the 3H standard (Hospital—the essential functions of the hospital, including health care, medical equipment management, and construction, use, and maintenance of buildings; Home—allow the patients to feel the warmth of home when they are in the hospital; and Hotel—to learn the high-quality logistics management in top hotels), in order to create a more professional, humanized, and standardized hospital.

As a mentor, he gets along well with his students and freely discusses any issues or concerns with them. He leads them on to the right paths and is patient in providing advice when they encounter difficulties. “*Try harder every day,*” is what he says to encourage his students.

As the chairman of Guangdong Society of Chest Diseases, he outlines the blueprint and integrates a variety of resources to establish scientific research cooperation platforms and promote the academic prosperity and the

popularization of related medical technology.

However, he did not hesitate in choosing the title “doctor”. He joked that doctor was the career that he would never end.

“*For a long period of time, I have maintained constant innovation and enthusiasm in surgeries, seminars or workshops,*” he says. “*From patients’ needs and treatment efficacy to postoperative recovery, pain reduction, and shortening of the duration of pain... each step requires rethinking and improvements, and helping the patients to smoothly take each step is a doctor’s ultimate goal.*” (3).

“*A newspaper in America once organized a discussion on ‘The happiest people in the world’. There were four answers, and the first was: a doctor who finally saves the life of a critically ill patient after a risky surgery. When the patient ultimately recovers, the doctor will experience ‘a burst of happiness akin to falling into love’.*” Prof. He agrees with this strongly.

“*I am the one.*” He smiled.

A renowned doctor, a Ming doctor

“*Would you use one Chinese character to describe your pursuits and achievements?*”—AME

“*‘Ming’ (in Chinese, literally means ‘wise’ or ‘bright’). I hope to treat disease and cure pain with my wisdom and to bring light to patients.*”—Jianxing He

“Stand Up for the People”, this is precious spiritual values and ideology in guiding scientific research passed on by his senior, Academician Nanshan Zhong for FAHGMU. Prof. He uses this motto every day in his career.

“*We realize the common value of ‘it is a greater blessing to give than to receive’ by helping others,*” said Prof. He.

In 2012, Prof. He founded the Ming-Yi Medical Charity Foundation of Guangdong Province. So far, the foundation has funded many children with congenital heart disease, launched a grant program to support the tuition fees of ten undergraduate medical students in Guangdong Province, established the Guangdong Provincial Grassroots Physician Award, and carried out free screening for early lung cancer and other public welfare activities.

He has lived up to his promise—“it will be worthwhile for the medical staff to increase their work as long as the patients’ difficulties are solved”.

A few days ago, Prof. He and his team successfully performed an operation on a patient with a suspected “malignant tumor”. In order to make a definitive diagnosis, he deliberated carefully and decided on two biopsies. Finally, he concluded that the lesion could be a mature teratoma. The

patient was a 20-year-old girl who did not want to leave a huge scar on her chest after thoracotomy. Prof. He therefore decided to perform a highly challenging minimally invasive surgery. The operation went smoothly, and the postoperative pathology confirmed Prof. He's accurate judgment before the surgery. The girl affectionately wrote a letter to thank Prof. He and his team for giving her a chance to be reborn, "*finally my summer became bright again, and my future is clear again. For the first time, I saw for myself the beauty of the summer sunshine, a colorful sight.*"

"Prof. He is a knowledgeable scholar who is open to change and new ideas, a researcher who is always conquering technological peaks, and, more importantly, a surgeon who fights against diseases for his patients. Many critically ill patients have survived for 5 years, 10 years, and even longer due to his efforts." Dr. Wenlong Shao, a surgeon in the Department of Thoracic Surgery of FAHGMU, said with admiration.

Albert Pine said, "*What we do for ourselves dies with us; what we do for others and the world remains and is immortal.*"

Prof. He is extremely knowledgeable, and has superb surgical skills. Most importantly, his virtue has brightened his career and brought light to his patients.

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Footnote

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