

# Tomisaku Kawasaki Memorial Lecture

Presented by Hirohisa Kato, M.D. , PhD  
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**Tomisaku Kawasaki**  
(1925-2020)

(Formerly named) Hideko Ogawa Memorial Lecture

1995: Hirohisa Kato

1999: Malian Melish

2001: Stanford Shulman

2005: Kenshi Furusho

2008: Soichiro Kitamura

2012: Jane Burns

2015: Jane Newburger

2018: Hiroshi Yanagawa

(renamed) Tomisaku Kawasaki Memorial Lecture

2021: Hirohisa Kato

Dr. Tomisaku Kawasaki was born in Asakusa, an old traditional downtown area of Tokyo. He was interested in insects or animals and was heading for a biologist. After graduating from the School of Medicine in Chiba University in 1948, he began working at the Japanese Red Cross Central Hospital in Tokyo in 1950. He experienced various pediatric patients. In January 1961, he encountered a 4-year-old patient with several impressive symptoms that he could not diagnose. About 1 year later, when he was working night duty, he received a call from another doctor asking him to hospitalize a pediatric patient who seems sepsis. He received the patient, however, he almost shouted, because he saw the patient show the same facial appearance as the boy 1 year ago. He never forgot this patient and started to record these experiences in his 'God Only Knows' file. He accumulated 50 similar cases for 5 years and published a historical article in 'Arerugi' by 1967, and an English version was published in Pediatrics in 1974. These articles had a great impact worldwide, and the reprints were quickly out of stock.

The publication was one of the best case-series articles in medical history. Concerning the name of this disease, Dr. Kawasaki himself was modest to crown his name. But in honor of the discoverer's excellent observational ability, everyone gradually called this disease 'Kawasaki disease.'

After his publication, nationwide surveillance was attempted in 1970. The result frightened him that not a few sudden deaths occurred in children reported to have had this disease. Autopsies revealed large aneurysms of coronary arteries and an acute myocardial infarction due to thrombus coagulated inside.

This fact assigned a crucial challenge to the field of pediatric cardiologists. The opportunity for them to perform coronary ultrasonography, catheterization, and treatment of ischemic heart disease markedly increased. This development contributed to the rapid progress of pediatric cardiology.

Dr. Kawasaki relied on Professor Hirohisa Kato, the Department of Pediatrics, Kurume University, a pediatric cardiologist who reported the long-term prognosis of coronary artery aneurysm. They gave lectures all over the world and worked together as lifelong colleagues.

Dr. Kawasaki was always with Mrs. Reiko Kawasaki, who was also a pediatrician. The first paper supplied many impressive color photographs, which were very expensive to publish at the time. Dr. Kawasaki had financially hard days when he was young, and hesitated to use color photographs; however, Mrs. Kawasaki encouraged him that color photos were absolutely necessary for his article, and she managed the budget.

Dr. and Mrs. Kawasaki participated in almost all the meetings together. The resolution of the cause of Kawasaki disease has been a long-cherished wish for Dr. Kawasaki, and he was interested in all the presentations concerning the etiology. Therefore, it was very easy to find Dr. Kawasaki and his wife. They were always sitting in the front row of the venue and listened to all papers and discussions.

Even after a wheelchair became necessary for Dr. Kawasaki, he welcomed young doctors gathering around him to take pictures together and shake his hands at every meeting. However, the 12th International Kawasaki Disease Symposium in June 2018 was his last participation in the conference.

He received many commendations from both medical and social categories.

He encouraged young doctors warmly and rigorously, with the motto "Be Strict to Study Medicine, Be Warm-hearted to Care Patients."

Mamoru Ayusawa, M.D.