



Hic gaudent mortui viventes docere

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Technical innovation always requires a restructuring of the traditional education system underlying the relevant speciality, especially when it comes to expertise involving the human body. For instance, there was an upsurge in use of the cadaver surgical training (CST) system worldwide following the development of surgical procedures requiring a higher level of skill and the introduction of minimally invasive surgery. Compared to North American and European countries, however, Japan lagged in the official implementation of CST around 2010, owing to legal issues surrounding the Penal Code and the Post-mortem Examination and Corpse Preservation Act (PECP). The lag was also partly due to a popular Japanese opinion on life and death, which is well reflected in the Act on Body Donation for Medical and Dental Education (ABD).

Only 10 years ago, we first stipulated a guideline by organizing the Japan Surgical Society (JSS) CST Promotion Committee (JSS CST PC) in collaboration with the Japanese Association of Anatomists (JAA), to promote CST across the country. Almost simultaneously, the government pledged financial support to implement CST in medical schools. As of 2021, approximately 40 universities (47% of the 81 medical schools in Japan) have launched CST programs on their premises (Shichinohe et al., this issue). To commemorate the 10th anniversary of Japan's introduction of the CST and to update the latest information concerning CST, we are bringing out a Special Issue on CST entitled 'Cadaver Surgical Training: *Status quo* in Anatomy and Surgery', consisting of 12 informative articles.

The issue covers broad topics in CST, including the body donation system (Balta), ethical issues (Kobayashi and Nudeshima, Kadooka), core facilities in Japan (Suzuki et al.), infection control (Ogami-Takamura et al.), and the

use of various embalming methods to preserve the softness of tissue for conducting CST (Ferrer et al., Morizane et al., Shirai et al., Hirai et al., Nagase et al.). Moreover, we have prepared an English version of the Japanese CST guidelines to clarify the legal and ethical standpoints of the Japanese system. We expect this will greatly facilitate an understanding of the short history of CST in Japan. For the convenience of readers, the guidelines have been made available free of charge.

The guidelines were established to set a standard for conducting any type of clinical anatomy procedure using a human cadaver. Significant attention has been paid to avoid any legal conflicts and accusations under the Penal Code or PECP and to follow the spirit of the ABD. Moreover, we have instructed all organizers of CST to submit a protocol to the respective Institutional Review Board (IRB) to scrutinize the aims and procedures from both ethical and scientific standpoints. This will ensure that the CST is a legal activity without any complications, such as violating the cadaver's dignity.

When we take a close look at the ethical issues in handling cadavers from a global perspective, such as the recent scandal in France at the Université Paris-Descartes that drew special attention from the public, there emerge many lessons regarding CST, as concisely reported by Kobayashi and Nudeshima. The scandal in question started with the use of cadavers in crash tests for automobiles (Jouan and Guéguen 2020). While the procedures followed were legal, they unveiled unprofessional management of the cadavers at the Université Paris-Descartes, which is one of the representative cadaver centres in Europe.

The dissection room at some medical schools display a plaque in Latin announcing '*Hic gaudent mortui viventes docere*' (this is the place where death delights to help the living). We must take steps to create and maintain an environment in which the cadaver is treated with dignity.

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