

Curriculum Vitae

Name in Full	Gwang Ha Kim	Country	Republic of Korea
Affiliation	Department of Internal Medicine, Pusan National University School of Medicine		
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Educational Background

1987-1993: Pusan National University College of Medicine, M.D.
1994-1996: Pusan National University Postgraduate School, Master Degree
2001-2003: Pusan National University Postgraduate School, Ph.D.
1993: Medical Doctor (Korea) No 50775
1998: Board of Internal Medicine (Korea) No 5720
2002: Board of Gastrointestinal Endoscopy No 2002-2854
2004: Board of Gastroenterology Subdivision No 1-04-713

Professional Career

- 1993-1998: Intern and Resident at Department of Internal Medicine, Pusan National University Hospital
- 1998-2001: Military Service as Medical officer in Korean Army (rank: Captain)
- 2001-2003: Fellowship, Gastroenterology and Hepatology Section, Department of Internal Medicine and Gastroenterology division at Pusan National University Hospital
- 2003-2007: Assistant Professor, Department of Internal Medicine and Gastroenterology division at Department of Internal Medicine, Pusan National University School of Medicine
- 2006: Visiting Scholar at Kitasato University East Hospital
- 2007-2015: Associate Professor, Department of Internal Medicine and Gastroenterology division at Department of Internal Medicine, Pusan National University School of Medicine
- 2014-2015: Visiting Scholar at Harborview Medical Center University of Washington
- 2016- : Professor, Department of Internal Medicine and Gastroenterology division at Department of Internal Medicine, Pusan National University School of Medicine

Research Field

Therapeutic endoscopy in upper gastrointestinal tract
Endoscopic ultrasonography
Gastric cancer
Esophageal cancer
Image analysis

Papers, Books, etc. presented or published by your name

(topic title, year, conference name or presenting books)

1. Jeon HK, Kim GH, Lee BE, et al. Long-term outcome of endoscopic submucosal dissection is comparable to that of surgery for early gastric cancer: a propensity-matched analysis. *Gastric Cancer* 2018;21:133-143.
2. Jeon HK, Lee SJ, Kim GH, et al. Endoscopic submucosal dissection for undifferentiated-type early gastric cancer: short- and long-term outcomes. *Surg Endosc* 2017.
3. Kim JK, Kim GH, Lee BE, et al. Endoscopic submucosal dissection for esophagogastric junction tumors: a single-center experience. *Surg Endosc* 2017.
4. Kim TW, Kim GH, Park DY, et al. Endoscopic resection for duodenal subepithelial tumors: a single-center experience. *Surg Endosc* 2017;31:1936-1946.
5. Lee HJ, Kim GH, Park DY, et al. Endoscopic submucosal dissection for papillary adenocarcinoma of the stomach: is it really safe? *Gastric Cancer* 2017;20:978-986.
6. Shin DH, Kim GH, Lee BE, et al. Clinicopathologic features of early gastric carcinoma with lymphoid stroma and feasibility of endoscopic submucosal dissection. *Surg Endosc* 2017;31:4156-4164
7. Song BG, Kim GH, Lee BE, et al. Endoscopic Submucosal Dissection of Gastric Epithelial Neoplasms after Partial Gastrectomy: A Single-Center Experience. *Gastroenterol Res Pract* 2017;2017:6395283.
8. Jhi JH, Kim GH, Kim A, et al. Negative pathology after endoscopic resection of gastric epithelial neoplasms: importance of pit dysplasia. *Korean J Intern Med* 2017;32:647-655.
9. Kang HM, Kim GH, Jeon HK, et al. Circulating tumor cells detected by lab-on-a-disc: Role in early diagnosis of gastric cancer. *PLoS One* 2017;12:e0180251.
10. Kim SJ, Kim GH, Lee MW, et al. New magnifying endoscopic classification for superficial esophageal squamous cell carcinoma. *World J Gastroenterol* 2017;23:4416-4421.
11. Park CH, Kim GH, Lee BE, et al. Two staging systems for gastrointestinal stromal tumors in the stomach: which is better? *BMC Gastroenterol* 2017;17:141.
12. Lee MW, Kim GH. Is a Cytopathologist Always Needed during Endoscopic Ultrasonography-Guided Tissue Acquisition? *Clin Endosc* 2017;50:311-312.
13. Seo JH, Kim GH, Jhi JH, et al. Endosonographic features of esophageal tuberculosis presenting as a subepithelial lesion. *J Dig Dis* 2017;18:185-188.
14. Kim GH. Endoscopic Submucosal Dissection for Early Gastric Cancers with Uncommon Histology. *Clin Endosc* 2016;49:434-437.
15. Han SY, Kim GH. Clinical Manifestations of Laryngopharyngeal Reflux. *J Neurogastroenterol Motil* 2016;22:351-2.
16. Han SY, Kim GH. Pectus excavatum: a rare cause of gastric subepithelial lesion. *Korean J Intern Med* 2017.
17. Han SY, Kim GH. Collision tumor arising from a gastric duplication cyst. *Gastrointest Endosc* 2017;86:738-739.
18. Jeon HK, Kim GH. Second-Look Endoscopy after Endoscopic Submucosal Dissection: Can We Obtain Valuable Information? *Clin Endosc* 2016;49:212-3.
19. Jeon HK, Kim GH. Can Nocturnal Acid-breakthrough Be Reduced by Long-acting Proton Pump Inhibitors? *J Neurogastroenterol Motil* 2017;23:145-148.
20. Jeon HK, Kim GH, Lee NK, et al. Analysis of computed tomographic findings according to gastroesophageal flap valve grade. *Korean J Intern Med* 2016.

21. Kim GH, Cho YK, Cha JM, et al. Efforts to increase image quality during endoscopy: The role of pronase. *World J Gastrointest Endosc* 2016;8:267-72.
22. Kim GH, Liang PS, Bang SJ, et al. Screening and surveillance for gastric cancer in the United States: Is it needed? *Gastrointest Endosc* 2016;84:18-28.
23. Ok KS, Kim GH, Park do Y, et al. Magnifying Endoscopy with Narrow Band Imaging of Early Gastric Cancer: Correlation with Histopathology and Mucin Phenotype. *Gut Liver* 2016;10:532-41.
24. Yoon JM, Kim GH, Park DY, et al. Endosonographic Features of Gastric Schwannoma: A Single Center Experience. *Clin Endosc* 2016;49:548-554.
25. Lee JS, Kim GH, Park do Y, et al. Endoscopic Submucosal Dissection for Gastric Subepithelial Tumors: A Single-Center Experience. *Gastroenterol Res Pract* 2015;2015:425469.
26. Lee HJ, Kim GH, Park do Y, et al. Is endoscopic submucosal dissection safe for papillary adenocarcinoma of the stomach? *World J Gastroenterol* 2015;21:3944-52.
27. Kim TK, Kim GH, Park do Y, et al. Risk factors for local recurrence in patients with positive lateral resection margins after endoscopic submucosal dissection for early gastric cancer. *Surg Endosc* 2015;29:2891-8.
28. Kim GH, Kim NY. How could we increase the impact factor of the journal of neurogastroenterology and motility? *J Neurogastroenterol Motil* 2015;21:143-4.
29. Kim GH, Cho YK, Cha JM, et al. Effect of pronase as mucolytic agent on imaging quality of magnifying endoscopy. *World J Gastroenterol* 2015;21:2483-9.
30. Kim GH, Bang SJ, Hwang JH. Learning models for endoscopic ultrasonography in gastrointestinal endoscopy. *World J Gastroenterol* 2015;21:5176-82.
31. Kim GH, Bang SJ, Ende AR, et al. Is screening and surveillance for early detection of gastric cancer needed in Korean Americans? *Korean J Intern Med* 2015;30:747-58.
32. Kim GH. Understanding Growth Patterns of Signet Ring Cell Carcinoma of the Stomach Is Necessary for Successful Endoscopic Resection. *Gut Liver* 2015;9:695-6.
33. Jeon HK, Kim GH. Endoscopic Management of Dieulafoy's Lesion. *Clin Endosc* 2015;48:112-20.
34. Jang YS, Lee BE, Kim GH, et al. Factors Associated With Outcomes in Endoscopic Submucosal Dissection of Gastric Cardia Tumors: A Retrospective Observational Study. *Medicine (Baltimore)* 2015;94:e1201.
35. Baek DH, Kim GH, Park do Y, et al. Gastric epithelial dysplasia: characteristics and long-term follow-up results after endoscopic resection according to morphological categorization. *BMC Gastroenterol* 2015;15:17.
36. Bae JH, Kim GH, Lee BE, et al. Factors associated with the outcomes of endoscopic submucosal dissection in pyloric neoplasms. *Gastrointest Endosc* 2015;81:303-11.
37. Ryu KD, Kim GH, Park SO, et al. Treatment outcome for gastric mucosa-associated lymphoid tissue lymphoma according to Helicobacter pylori infection status: a single-center experience. *Gut Liver* 2014;8:408-14.
38. Moon JY, Kim GH, Kim JH, et al. Clinicopathologic factors predicting lymph node metastasis in superficial esophageal squamous cell carcinoma. *Scand J Gastroenterol* 2014;49:589-94.
39. Lee MW, Kim GH, I H, et al. Predicting the invasion depth of esophageal squamous cell carcinoma: comparison of endoscopic ultrasonography and magnifying endoscopy. *Scand J Gastroenterol* 2014;49:853-61.
40. Lee KJ, Kim GH, Park do Y, et al. Endoscopic resection of gastrointestinal lipomas: a single-center

experience. *Surg Endosc* 2014;28:185-92.

41. Lee BE, Kim GH. How to perform and interpret balloon expulsion test. *J Neurogastroenterol Motil* 2014;20:407-9.
42. Kim HH, Kim GH, Kim JH, et al. The efficacy of endoscopic submucosal dissection of type I gastric carcinoid tumors compared with conventional endoscopic mucosal resection. *Gastroenterol Res Pract* 2014;2014:253860.
43. Kim GH, Kim KB, Lee SH, et al. Digital image analysis of endoscopic ultrasonography is helpful in diagnosing gastric mesenchymal tumors. *BMC Gastroenterol* 2014;14:7.
44. Kim GH, Kim JI, Jeon SW, et al. Endoscopic resection for duodenal carcinoid tumors: a multicenter, retrospective study. *J Gastroenterol Hepatol* 2014;29:318-24.
45. Kim GH, Jee SR, Jang JY, et al. Stricture occurring after endoscopic submucosal dissection for esophageal and gastric tumors. *Clin Endosc* 2014;47:516-22.
46. Kim GH, Cho YK, Kim EY, et al. Comparison of 22-gauge aspiration needle with 22-gauge biopsy needle in endoscopic ultrasonography-guided subepithelial tumor sampling. *Scand J Gastroenterol* 2014;49:347-54.
47. Jung JI, Kim GH, I H, et al. Clinicopathologic factors influencing the accuracy of EUS for superficial esophageal carcinoma. *World J Gastroenterol* 2014;20:6322-8.
48. Joo DC, Kim GH, Park do Y, et al. Long-term outcome after endoscopic submucosal dissection in patients with superficial esophageal squamous cell carcinoma: a single-center study. *Gut Liver* 2014;8:612-8.
49. Jeon HK, Kim GH. Does standard triple therapy still have a role in first-line *Helicobacter pylori* eradication in Korea? *J Korean Med Sci* 2014;29:619-20.
50. Ham YH, Kim GH. Plastic and biodegradable stents for complex and refractory benign esophageal strictures. *Clin Endosc* 2014;47:295-300.
51. Choi YY, Kim GH, Park do Y. An incidental subepithelial mass in the esophagus. Lymphoepithelioma-like carcinoma appearing as a subepithelial tumor in the esophagus. *Gastroenterology* 2014;146:e1-2.

