## GENERAL HEADQUARTERS SUPREME COMMANDER FOR THE ALLIED POWERS Public Health and Welfare Section

#### WEEKLY BULLETIN

For Period 2 February – 8 February 1947 Number 6

SECTION I - General

SECTION II - Welfare

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#### SECTION I GENERAL

#### **Technical Bulletins**

The following Public Health and Welfare Technical Bulletins were mailed with the Weekly Bulletin on the dates indicated:

<u>TITLE</u>	DATE MAILED
Duties of Military Government Public Welfare Officers	10 January 1947
C1 (TC') NI	

Short Title: None

Duties of Public Health Military Government Officers 10 January 1947

Short Title: None

Foreign Nationals 7 February 1947

Short Title: TB - PH WEL 1

Smallpox 7 February 1947

Short Title: TB - PH - PREV. MED. 1

Manual for Diagnosis and Treatment of Pulmonary Tuberculosis 7 February 1947

Short Title: TB - PH - PREV. MED. 2

Public Health Nursing 7 February 1947

Short Title: TB - PH - Nursing 1

Dairy Inspection 7 February 1947

Short Title: TB - PH - VET 2

Meat Inspection 7 February 1947

Short Title: TB - PH - VED 3

Duties and Functions of Military Government Veterinary Officers 14 February 1947

Short Title: TB - PH - VED 1

SECTION II WELFARE

#### Reserve Relief Supplies

The incomplete report covering Reserve Relief Supplies (former Japanese Army and Navy stocks) for the month of December 1946 reflected that 241,621 kgs of biscuit and 1,242,221 kgs of canned goods were distributed, during the month, for relief purposes.

The balance of supplies remaining as of 1 January 1947 was reported to be 2,379,796 kgs of biscuits and 8,696,083 kgs of canned goods.

The above report did not include Ibaragi, Wakayama, Kochi, Fukuoka, Oita and Nagano Prefectures.

#### Children Welfare Law (proposed)

The "first reading" of the draft of the proposed subject law, which was referred to the Health and Welfare Ministry by the Central Social Work Committee, has been completed by representatives of Social Bureau, Welfare Ministry and Public Health and Welfare Section, SCAP.

The proposed "Children's Welfare Law" is a progressive move and provides, in its text, provision to better the opportunities for all children.

#### Foreign Nationals

The Netherlands Mission (Tokyo) has received 200 bundles of clothing from Batavia which will be distributed by the Health and Welfare Ministry to Netherlands subjects throughout Japan.

Each bundle weights 41 pounds and contains clothing which will fill a need now experienced by Netherlands subjects due to the shortage of suitable clothing within Japan.

#### SECTION III VETERINARY AFFAIRS

#### Animal Disease Report

The Ministry of Agriculture and Forestry (Bureau of Animal Industry) reported the following new outbreaks of disease during the period 2 Feb - 8 Feb 1947:

### ANNUAL REPORT OF ANIMAL DISEASES IN JAPAN FOR THE YEAR 1946

	EQUINE	ANTHRAX BL BOVINE	ACKLEG	INFECT ANEMIA	INFECT ABORTION	INFECT ABORTION
PREFECTURE	<u> </u>			EQUINE	BOVINE	EQUINE
AICHI	-	-	-	-	4	-
AKITA	-	-	-	102	-	-
AOMORI	-	-	-	30	-	3
CHIBA	-	4	-	-	30	-
EHIME	-	1	-	-	-	-
FUKUI	-	2	-	-	-	-
FUKUOKA	1	20	-	-	-	-
FUKUSHIMA	-	-	-	11	-	2
GIFU	-	-	-	-	-	-
GUMMA	-	1	-	-	-	-
HIROSHIMA	-	-	1	-	137	-
HOKKAIDO	1	3	-	128	-	65
HYOGO	-	-	1	-	39	-
IBARAKI	-	-	-	-	-	-
ISHIKAWA	-	1	-	-	-	-
IWATE	-	-	-	52	-	3
KAGAWA	-	-	-	-	-	-
KAGOSHIMA	2	6	-	-	26	-
KOCHI	-	-	-	-	-	-
KANAGAWA	-	1	-	13	22	12
KUMAMOTO	1	-	1	285	61	-
KYOTO	-	-	-	-	3	-
MIE	-	1	-	-	-	-
MIYAGI	3	-	-	12	-	-
MIYAZAKI	3	-	-	-	170	-
NAGANO	-	-	-	4	1	-
NAGASAKI	-	-	3	-	13	-
NARA	-	-	-	-	-	-
NIIGATA	-	-	-	-	-	-
OITA	-	-	1	-	167	-
OKAYAMA	-	-	-	-	-	-
OSAKA	-	-	-	-	26	-

SAGA	-	_	_	7	25	_
SAITAMA	-	-	-	-	3	-
SHIGA	-	-	-	-	-	-
SHIMANE	-	1	4	-	3	-
SHIZUOKA	-	-	-	-	4	-
TOCHIGI	-	-	-	5	-	-
TOKUSHIMA	-	-	-	-	-	-
TOKYO	-	-	-	-	-	-
TOTTORI	-	-	-	-	91	-
TOYAMA	-	-	-	-	-	-
WAKAYAMA	-	1	-	-	-	-
YAMAGATA	-	-	-	-	-	-
YAMAGUCHI	-	-	-	-	8	-
YAMANASHI	-	-	-	7	-	_
TOTALS	11	42	11	656	833	85

Prepared by: Public Health and Welfare Section, GHQ, SCAP (From Japanese Sources)

### ANNUAL REPORT OF ANIMAL DISEASES IN JAPAN FOR THE YEAR 1946

PREFECTURE	RABIES	SWINE	SWINE	SWINE	SCABIES	STARANGLES
AIGH		ERYSIPELAS	CHOLLERA		EQUINE	
AICHI	-	-	-	-	-	1
AKITA	-	-	-	-	1	183
AOMORI	-	-	-	-	-	1585
CHIBA	6	6	-	13	-	3
EHIME	-	-	-	-	-	-
FUKUI	-	-	-	-	-	-
FUKUOKA	-	-	-	-	-	-
FUKUSHIMA	-	-	-	-	-	-
GIFU	-	-	-	-	-	-
GUMMA	-	4	-	-	-	-
HIROSHIMA	-	-	-	-	-	-
HOKKAIDO	-	-	-	-	-	211
HYOGO	-	-	-	-	-	24
IBARAKI	-	-	-	-	-	-
ISHIKAWA	-	-	-	-	-	-
IWATE	-	5	-	64	6	534
KAGAWA	-	-	-	-	-	-
KAGOSHIMA	-	-	-	-	-	36
KOCHI	-	-	-	-	-	-
KANAGAWA	1	1	2	-	-	-
KUMAMOTO	-	1	-	-	1	7
KYOTO	-	-	-	-	-	3
MIE	-	-	-	-	-	-
MIYAGI	-	-	-	-	-	-
MIYAZAKI	-	1	-	-	2	38
NAGANO	1	4	-	_	-	68
NAGASAKI	-	-	-	-	-	-
NARA	-	-	-	-	-	-
NIIGATA	1	-	-	-	-	-

OITA	-	-	-	_	-	-
OKAYAMA	-	-	-	-	-	-
OSAKA	-	-	-	-	-	-
SAGA	-	-	-	-	-	35
SAITAMA	-	2	2	-	-	-
SHIGA	-	-	-	-	-	4
SHIMANE	-	-	-	-	-	-
SHIZUOKA	-	1	-	-	-	-
TOCHIGI	-	-	-	-	-	32
TOKUSHIMA	-	-	-	-	-	5
TOKYO	10	5	-	-	-	-
TOTTORI	-	-	-	-	-	-
TOYAMA	-	-	-	-	-	-
WAKAYAMA	-	-	-	-	-	-
YAMAGATA	-	-	-	-	-	-
YAMAGUCHI	-	-	-	-	-	-
YAMANASHI				-	-	6
TOTALS	19	30	4	77	10	2775

Prepared by: Public Health and Welfare Section, GHQ, SCAP (From Japanese Sources)

## ANNUAL REPORT OF ANIMAL DISEASES IN JAPAN FOR THE YEAR 1946

	TEXAS	FOWL	PULLORUM
PREFECTURE	<b>FEVER</b>	CHOLERA	DISEASE
AICHI	-	-	31116
AKITA	-	284	156
AOMORI	-	-	137
CHIBA	-	-	619
EHIME	-	-	42
FUKUI	-	-	1267
FUKUOKA	-	-	992
<b>FUKUSHIMA</b>	-	-	-
GIFU	-	-	1088
GUMMA	-	-	604
HIROSHIMA	-	-	186
HOKKAIDO	9	-	1626
HYOGO	-	-	1104
IBARAKI	-	-	-
ISHIKAWA	-	-	107
<b>IWATE</b>	2	_	325
KAGAWA	-	-	39
KAGOSHIMA	-	_	408
KOCHI	-	-	181
KANAGAWA	-	_	539
<b>KUMAMOTO</b>	276	-	753
KYOTO	1	-	376
MIE	-	-	194
MIYAGI	-	_	590
MIYAZAKI	-	-	308
NAGANO	-	-	199
NAGASAKI	30	-	707
NARA	-	-	23
NIIGATA	-	-	694
OITA	-	-	216
OKAYAMA	-	-	738

OSAKA	-	-	627
SAGA	6	-	941
SAITAMA	-	-	420
SHIGA	-	-	483
SHIMANE	-	-	261
SHIZUOKA	-	-	468
TOCHIGI	-	-	329
TOKUSHIMA	-	-	250
TOKYO	-	-	553
TOTTORI	-	-	193
TOYAMA	-	-	275
WAKAYAMA	-	-	108
YAMAGATA	-	-	29
YAMAGUCHI	-	-	411
YAMANASHI	-	-	410
TOTALS	324	284	51092

Prepared by: Public Health and Welfare Section, GHQ, SCAP (From Japanese Sources)

#### SECTION IV DENTAL AFFAIRS

Schedules and plans for the inspection and classification of dental schools were completed at meeting held at the Monbusho Feb. 3. The Board of Inspectors will complete the task of classification during the current month.

#### SECTION V NURSING AFFAIRS

The formal opening of the Public Health Nurses one month course for Instructors was held at the Welfare Ministry Monday 3 February 1947. This group consisted of the Tokyo-To Public Health Nurses who are to act as Instructors in the course that will open in April. Classes are being held every day and practical experience is being given in the Health Centers, in Tokyo, Chiba and Saitama.

#### SECTION VI SUPPLY

#### Production

Almost all raw materials employed in penicillin production are beginning to become limited. War Department states n-amyl acetate import program for 1947 cannot be filled and n-butyl acetate manufacture in Japan is being promoted as a rather satisfactory substitute. Other critical items for which production and allocation programs are intended include lactose, soy bean meal, activated carbon and acetone, the last two being most critical at this stage. When sufficient butyl acetate is available there will be released about 120 metric tons of ether, the Welfare Ministry's estimate of consumption for the remainder of 1947.

A conference was held on February 5, 1947 to discuss a draft of an outline for adjustment of production and allocation of drugs, medicines, etc. that was presented for review. Representatives from ESS, Welfare Ministry and Public Health and Welfare attended. The culmination of this meeting resulted in the omittance of several undesirable articles that were included in this draft; namely, 1- diet members included on advisory council, 2 - associations playing some part in the allocation of material, 3 - allocation fees. Strong support is being given in observing that this new allocation procedure is carried out and sufficient funds made available for its administration.

A report from the Welfare Ministry, Japanese Government, indicates production of 25 microscopes with dark field attachments during the month of January 47. Distribution of this quantity was made to prefectural health centers as indicated below:

<u>Prefecture</u>	<u>No.</u>	<u>Prefecture</u>	<u>No.</u>
Hiroshima	1	Saitama	2
Fukuoka	2	Toyama	1

Kanagawa	2	Gifu	1		
Nagasaki	1	Mie	2		
Fukushima	1	Tottori	2		
Osaka	1	Miyazaki	2		
Fukui	1	Kyoto	1		
Nara	1	Kagoshima	1		
Gumma	2	Nagano	1		
Total - 25					

Considerable difficulty is being encountered in conducting assays on Japanese produced typhus vaccine due to a shortage of guinea pigs. In an effort to improve this situation a meeting was called with officials of the Welfare Ministry, representatives of the Agriculture Ministry, Animal Growers Association and Natural Resources Section, SCAP. The Japanese were instructed to organize a committee, establish requirements of laboratory animals for assaying biologicals, determine sources of supply, supervise distribution to proper laboratories, increase production to meet demand, establish necessary liaison with transportation ministry officials and work out plans to provide feed and necessary cages. A report of the committee's activities to attain these objectives was requested not later than 19 February.

#### Distribution

Recommendations were submitted covering requirements of Korea for insect and rodent control supplies during the balance of the fiscal year 1947. From information available at this time, it appears that sufficient DDT powder is now on hand. Steps are being taken to provide additional spraying and dusting equipment together with 80,000 lbs. of DDT concentrate.

A report received from the Welfare Ministry indicates that over 2,000,000 yen of former Japanese Army Navy supplies have been disposed of through 31 December 1946, in Kanagawa prefecture, through direct sales to hospitals, physicians, dentists and veterinarians.

#### Narcotics

The December Narcotic report, the final 1946 report and the sixth received since the effective date of Japanese narcotic regulations, reflects much progress has been made by Japanese officials, both national and prefectural, under the Narcotic Control program. Directions implementing the program are now carried out in an orderly and effective manner as exemplified by the following.

As directed by the Narcotic Control Officer most excess stocks were returned to local wholesalers before the end of 1946. The following figures in the December report are indicative of the supplies thus made available to all retailers and practitioners in Japan:

### Summary of Local Wholesalers' Reports (amounts in grams)

Name of Drug	Stock on Hand	Excess Stocks Received	Stocks Sold to Practitioners Retailers	Stock on Hand 31 Dec 46
Cocaine Hydrochloride	75,962	89,245	18,674	146,533
Tincture of Opium	609,554	316,638	157,252	768,940
Morphine Hydrochloride	131,446	85,558	24,762	192,242
Codeine Phosphate	107,728	48,041	32,693	123,076
Codeine Sulfate	84,568	17,868	18,048	84,388

The above stocks, as well as 114 other narcotic items, were accurately reported by 210 local wholesalers to prefectural narcotic officials throughout Japan, who forwarded the reports to the Japanese Government for consolidation and reporting to SCAP's Narcotic Control Officer.

Persons registered as narcotic dealers in Japan reached a total of 85,881 by the end of 1946. All dealers are required to re-register annually. From advance reports received it is evident practically 100% re-registration was effected during January 1947.

Thefts continue to be the greatest source for diversion of narcotics. While prefectural officials must investigate all thefts, police are able to give material aid in preventing the thefts and in apprehending the responsible persons. The Narcotic Control Officer met with representatives from every police station in Tokyo outlining the duties and responsibilities of police in narcotic matters and citing examples of successful investigations resulting from close cooperation between narcotic enforcement officers and the police. An immediate result was obtained the following day when a bicycle thief apprehended by the police was reported to Tokyo Narcotic inspectors as an addict.

#### SECTION VII PREVENTIVE MEDICINE

#### General

A report was received of another episode of reaction to tinned food similar to that which was reported in Osaka during the previous week. In the present instance 75 children were said to have been affected out of 800 participating in a school lunch program in Tochigi City, Tochigi Prefecture. Again, the symptoms, which were similar to those which occurred in Osaka, were alleged to be attributable to tinned beef taken from former Japanese Army stocks. Military Government health officers are requested to be on the alert for and to report immediately any similar occurrences, and are requested further to see that local Japanese health authorities make prompt and adequate investigations of such occurrences.

#### **Typhus Fever**

The Welfare Ministry, Imperial Japanese Government, in their report on 5 February 1947 on the incidence of typhus fever in Japan show a total of 330 cases since 1 January 1947, as compared to a total of 612 for the same period in 1946. It is not known how many cases are murine typhus.

In Tokyo only <u>one case</u> of a total of 61 reported cases has actually been proven to be louse-borne (epidemic) typhus based on complement fixation tests.

The comparative incidence figures are encouraging and indicates that Military Government Teams throughout Japan have well organized an effective typhus control program.

#### Port Quarantine

The Repatriation Reception Center at Otake has been officially closed. Ujina, the other center in the Kure area, remains on an active status. Since the opening of the repatriation program these two centers have processed 552,000 incoming and 47,000 outgoing repatriates. The only quarantinable disease reported during this time has been smallpox of which there were two cases in February and three cases in March 1946.

#### Quarantinable Disease at Ports of Entry

Week ending 26 January - Negative

Week ending 1 February - Repat. ship Yahiko Maru, from Dairen to Sasebo (5 February), smallpox, 1 case, no deaths, date diagnosis 27 January.

#### SECTION VIII SOCIAL SECURITY

A series of conferences have been participated in by officials of the Insurance Bureau of the Ministry of Welfare and representatives of the Labor Division of the Economic and Scientific Section and the Social Security Division, with respect to the proposed Workmen's Compensation Bill and revisions of the Seamen's Insurance Law.

#### Workmen's Compensation Bill

The Workmen's Compensation Bill is to be introduced in the Diet as companion legislation to the pending Labor Standards Bill to supplant the employers' liability provisions of the latter bill in certain fields. Two elements

which have been the subject of considerable discussion are the questions as to whether benefits should be paid directly to the injured worker or as reimbursement to the employer.

A new draft of the bill has been completed and is now in the hands of the translators. The operations of the Employers' Liability Act of 1931 have strongly influenced the Welfare Ministry in considering the Workmen's Compensation Bill as legislation similarly insuring the employer for his risks under the Labor Standards Bill. However, it is understood that the new draft of the bill will provide for payment of benefits directly to the worker. It is the current intention to provide in the Workmen's Compensation Law that the manner of payment, as to lump-sums or installments, is to be specified by ordinance. It is believed that the lump-sum payment will be employed in the beginning but that, when administrative experience has been gained and inflationary conditions have been overcome, a later ordinance will provide for payment in monthly or quarterly installments.

Consideration has been given to programs under the Insurance Bureau devoted to the promotion of safety and to vocational training and rehabilitation. Responsibility for these activities may be placed in bureaus of the proposed Ministry of Labor, however.

#### Seamen's Insurance Law:

The special legislation customary for seamen as compared to industry in general is reflected in the pending Seamen's Law, which is comparable to the Labor Standards Bill. Concurrently with the drafting of the Seamen's Law, attention is being given to the revision of the Seamen's Insurance Law provisions which now relate to compensation for occupational accidents and diseases.

Among changes suggested by the Ministry of Welfare in a preliminary draft of proposed revisions are the following:

The law now provides that benefits for disability due to accident or occupational disease shall be at the rate of 60% of the average daily wage and shall be paid for a period not to exceed three moths. It is proposed that full wages be paid for four months, then at the rate of 60% of the wage while under medical care, plus one month, but not to exceed two years.

Single men have not been granted allowances while hospitalized and it is proposed to extend allowances to single men, as well as men with families, during hospitalization but only when hospitalization is necessary in a port other than the legal residence of the individual.

The "short-term benefits" (medical expenses and limited cash allowances, as compared to the long-term pensions) are not paid under the present law for care required Japanese territory, and it is proposed to make provision for such expenses and benefits regardless of where the disability occurs and care is needed.

It is proposed that the qualifying period of covered employment for eligibility for benefits as a result of an off-duty accident be reduced from three years to six months.

The law now bases benefits on the average of all wages received as a seaman in covered employment. In view of the fluctuating economic conditions, it is proposed to look to either the average of all such wages, or only the wage rate being paid on the date of the accident, whichever is the greater. ("Wages" include everything by "family allowances". The size of the family affects the amount of benefits only as to survivors' benefits payable after the death of the injured worker.)

#### SECTION IX MEDICAL SERVICES

The hospital report for the period ending 20 December 1946 showed a total of 3,047 hospital with a capacity of 216,354 beds, of which 102,842 were occupied. During this period 262,494 out patients were treated.

SECTION X
CONSULTANT

#### **Nutrition Survey**

Nutrition surveys throughout Japan were begun 3 February 1947.

In Tokyo on 6 February, conduct of the surveys was observed by Colonel Sams, Chief of Public Health and Welfare Section, Colonel Harrison, and other members of the Food and Fertilizer Mission, Washington, D. C.

The results November 1946 for the additional eight prefectures by group are presented in the following tables.

#### RESULTS OF NUTRITION SURVEYS - JAPAN - 1946

Nutrients in grams and calories, and grams of various classes of food consumed per capita per day.

#### Hokkaido (Sapporo Area)

Tohoku (Sendai Area of 2 Prefectures: Iwate and Miyagi)

Nutrients in Grams and Calories per Capital per Day

vember
4087
0.923
9.1
57.7
66.8
14.7
461.8
200
73
2021
11
2305
2

Source: Imperial Japanese Government.

Grams of Various Classes of Food Consumed per Capita per Day from Nutrition Surveys - Japan - 1946

	HOKKAIDO May	August	November	TOHOKU May		
		August	November	IVIAV	August	November
Grains	·	1108000	11010111001	1.143	1108000	1,0,0111001
Rice	142.8	109.1	144.9	326.3	237.6	303.7
Wheat	_	92.3	34.0	(	66.4	25.3
Barley	$\int 162.2$	34.8	53.7	₹ 39.9	30.9	31.1
Others	67.9	147.7	88.3	101.0	76.7	106.6
Total	372.9	383.9	320.9	467.2	411.6	466.7
10111	312.7	303.7	320.7	407.2	711.0	400.7
Nuts, Etc.	-	1.8	0.1	-	-	3.7
Potatoes						
Sweet	21.6	_	13.2	0.5	_	238.5
White	907.2	445.0	286.0	35.2	485.6	78.1
Others	6.5	135.2	44.4	0.4	-	3.7
Total	935.3	580.2	343.6	36.1	485.6	320.3
10001	700.0	200.2	2.2.0	20.1	.00.0	020.0
<u>Sugars</u>	0.5	0.2	1.5	-	-	-
<u>Oils</u>	0.7	0.7	0.5	0.1	0.3	0.4
<u>Legumes</u>						
Soya		1.2	2.1		4.1	2.0
Soya products	<i>∫</i> 62.3	36.7	53.4	<i>∫</i> 74.9	63.7	68.8
Other beans	9.6	5.5	13.8	0.6	7.0	4.2
Total	71.9	43.4	69.3	75.5	74.8	75.0
Total	71.7	73.7	07.3	73.3	74.0	75.0
Animal Foods						
Fish	83.0	16.4	35.1	28.3	17.8	48.6
Meat, Poultry	2.5	1.5	1.9	0.1	0.1	0.4
Eggs	4.7	1.9	1.7	0.5	0.2	0.1
Milk	46.7	71.4	34.5	2.4	7.0	2.3
Total	136.9	91.2	73.2	31.3	25.1	51.4
Total	130.9	91.2	13.2	31.3	23.1	31.4
Leafy, Green & Yellow Vegetables	179.4	481.4	687.8	116.6	149.4	83.6
Other Fruits &						
<u>Vegetables</u>						
Citrus, Tomatoes	-	38.5	-	-	0.8	-
Other Fruits	-	125.4	8.6	-	1.5	4.6
Other Vegetab.	41.0	155.0	253.8	34.4	60.3	320.1
Total	41.0	318.9	262.4	34.4	62.6	324.7
Seaweeds	5.1	0.8	0.3	32.3	4.9	0.2
Processed Veg.						
Dried	_	_	_	4.4	0.1	-
Pickled	49.6	151.1	151.6	39.4	66.9	155.2
Total	49.6	151.1	151.6	43.8	67.0	155.2
2 0 0002	.,.0	10111	101.0	.5.0	37.0	155.2
<u>Flavours</u>	18.5	16.8	13.3	5.5	4.4	3.3
Others	-	-	-	-	-	-

#### RESULTS OF NUTRITION SURVEYS - JAPAN -1946

Nutrients in grams and calories, and grams of various classes of food consumed per capita per day.

Hokuriku (Kanazawa Area of 3 prefectures: Toyama, Ishikawa, and Fukui)

Shikoku (Matsuyama Area of 2 prefectures: Ehime and Kochi)

Futrients in Grams and Calories per Capita per Day

	HOKURI (Kanazaw			SHIKOKU (Matsuyama Area)			
<u>Number</u>	May 2654	August 2594	November 2591	May 1549	August 1461	November 1444	
Pop. Ratio Adult Unit No. persons	0.930	0.847	0.853	0.898	0.933	0.933	
<u>Protein</u>							
Animal	14.1	6.4	8.3	13.2	12.0	25.0	
Vegetable	51.3	50.4	53.1	50.1	37.9	42.6	
Total	65.4	56.8	61.4	63.3	49.9	67.6	
<u>Fat</u>	9.5	14.6	12.0	10.6	10.6	14.3	
Carbohydrate	445.8	401.9	464.6	397.5	317.8	458.8	
Calories							
Ration	315	300	45	842	439	437	
Free Market	59	48	63	467	233	250	
Home Production	1756	1624	2277	571	906	1603	
Gift	17	3	2	43	15	26	
Total	2147	1975	2387	1923	1587	2316	

Source: Imperial Japanese Government.

Grams of Various Classes of Food Consumed per Capita per Day from Nutrition Surveys - Japan - 1946

	HOKURIKI (Kanazawa			SHIKOKU (Matsuyan		
	May	August	November	May		November
<u>Grains</u> Rice	507.4	347.3	446.4	306.7	179.7	240.9
Wheat		55.7	2.8	_	142.3	7.1
Barley	₹ 37.3	32.7	13.8	₹ 119.0	23.2	83.6
Others	1.8	6.7	1.3	3.1	21.9	0.5
Total	546.5	442.4	464.3	428.8	367.1	332.1
Nuts, Etc.	0.16	0.3	0.2	-	-	-
<u>Potatoes</u>						
Sweet	16.3	12.2	328.7	66.7	25.9	710.5
White	22.0	188.6	14.8	0.2	33.4	0.8
Others	7.2	0.1	60.8	4.5	1.6	30.4
Total	45.5	200.9	404.3	71.4	60.9	741.7
<u>Sugars</u>	-	-	0.3	-	-	0.3
<u>Oils</u>	0.03	0.3	0.2	0.04	0.5	1.0
<u>Legumes</u>						
Soya	<i>S</i> 53.1	1.8	3.7	<i>f</i> 13.2	0.7	2.9
Soya products	)	44.3	50.8	)	7.8	12.9
Other beans	1.0	7.5	12.3	41.1	3.0	0.1
Total	54.1	53.6	66.8	54.3	11.5	15.9
Animal Foods	(1.2	24.4	20.2	57.0	56.0	110.2
Fish	64.2	24.4	39.2	57.9	56.8	110.2
Meat, Poultry	0.06 0.3	0.3	1.0 0.1	1.2	1.2 1.8	1.1 0.3
Eggs Milk	2.8	1.0	0.1	0.4	1.0	0.3
Total	67.4	25.7	40.3	59.5	59.8	111.7
	07.4	23.1	40.5	37.3	37.0	111.7
Leafy, Green &	1444	222.0	170.1	150 0	252.3	99.3
Yellow Vegetables	144.4	233.9	179.1	150.8	232.3	99.3
Other Fruits & Vegetables						
Citrus Tomatoes	0.2	14.4	0.4	0.9	4.6	21.8
Other Fruits	-	33.6	7.6	0.04	1.6	5.8
Other Vegetab.	67.4	200.4	196.3	47.9	61.8	59.4
Total	67.6	248.4	204.3	48.8	68.0	87.0
Seaweeds	0.8	1.1	1.7	1.0	2.1	1.0
Processed Veg.						
Dried	3.0	0.1	0.1	5.3	1.0	0.1
Pickled	34.7	32.3	40.9	48.6	31.4	29.5
Total	37.7	32.4	41.0	53.9	32.4	29.6
Flavours	17.5	7.8	11.4	9.6	22.8	23.9
<u>Others</u>	1.7	-	-	1.7	-	-

SECTION XI MEMORANDUM TO IMPERIAL JAPANESE GOVERNMENT PHMJG- 13  $\,$  30 Jan 47 - National Food and Nutrition Council for the Japanese.

CRAWFORD F. SAMS Colonel, Medical Corps, Chief, Public Health and Welfare Section

#### 2 Incls:

- 1. Summary Report of Cases and Deaths from Communicable Diseases in Japan week ending 1 February 1947, with digest.
- 2. Weekly Summary Report of Venereal Diseases in Japan week ending 1 February 1947.

# GENERAL HEADQUARTERS SUPREME COMMANDER FOR THE ALLIED POWERS Public Health and Welfare Section

#### WEEKLY BULLETIN

For Period 9 February – 15 February 1947 Number 7

SECTION	I	– Welfare
SECTION	II	<ul><li>Veterinary Affairs</li></ul>
SECTION	III	<ul><li>Dental Affairs</li></ul>
SECTION	IV	<ul> <li>Nursing Affairs</li> </ul>
SECTION	V	<ul><li>Supply</li></ul>
SECTION	VI	<ul> <li>Preventive Medicine</li> </ul>
SECTION	VII	<ul> <li>Social Security</li> </ul>
SECTION	VIII	<ul> <li>Medical Services</li> </ul>
SECTION	IX	<ul><li>Consultants</li></ul>
SECTION	X	<ul> <li>Memorandum to I.J.G.</li> </ul>

#### SECTION I WELFARE

#### Public Assistance Report for December 1946

The Ministry of Health and Welfare Public Assistance Report for December 1947 shows an increase in total number of persons assisted and a substantial increase in grants over November. The grant increase, (average of 75.10 yen per person in December as against 49.24 yen in November) is the result of the 50% allowable increase in daily relief grants as authorized by letter dated 21 November 1946 from the Ministry of Health and Welfare to the prefectural governors.

Comparative figures for the months of November and December are given below:

	<u>November</u>		<u>December</u>
Number of persons (not in institutions) assisted	2,577,884		2,744,429
Number of persons (in institutions) assisted by Government	80,885		92,778
Total number persons assisted	2,658,769		2,837,207
Net cash grants	115,222,349	yen	144,075,959 yen
Grants in Kind (cost)	15,686,330		62,845,606
Total Grants	130,908,379	yen	206,121,565 yen

#### Japanese Red Cross Society

Mrs. Audrey Bassett, Consultant on Junior Red Cross Services, American Red Cross has been assigned as a consultant to the Japanese Red Cross to assist in development of their Junior Red Cross services. Mrs. Bassett was a special consultant to the Philippine Red Cross during its reorganization immediately following the liberation and she has also had long experience in the domestic program of the American Red Cross.

The proposed budget of the Japanese Red Cross Society for the first six month period of 1947 anticipates sufficient income to meet the expected operational expenses. The budget covering estimated income and expenditures is shown below:

*Estimated income		
Headquarters	yen	97,385.80
Chapters & Hospitals		7,541,709.00
Total		7,639,094.80
*Estimated Expense		
Headquarters	yen	578,936.68
Chapters & Hospitals		6,772,281.00
Total		7,351,217.68

<sup>\* (</sup>Computed on basis of income and expenditures for the last six months of 1946).

#### SECTION II VETERINARY AFFAIRS

#### Field Trip to Okayama Prefecture

A representative of the division conducted a survey of veterinary affairs in Okayama Prefecture.

#### Livestocks

A gradual reduction is in programs due to concentrate feed shortage.

#### **Dairy Inspection**

Dairy farms and milk plants are being systematically inspected on a monthly basis improvement in sanitation resulting. Lack of modern pasteurizing equipment and a shortage of chemical reagents used for laboratory tests are lowering the standard. Where sanitary measures were improperly practiced, responsible officials were directed to initiate corrective measures. The Supply Division, Public Health and Welfare Section, GHQ, SCAP and the Ministry of Welfare, Japanese Government were contacted with reference to the release of critical items.

#### Meat Inspection

Veterinary inspectors are not adequately instructed in the procedure for conducting ante and post mortem inspections. Responsible officials were directed to make available all possible information on this subject.

#### **Animal Disease Control**

The tuberculosis eradication campaign will be completed in March 1947.

A program for the immunization of all dogs against rabies will be instigated in March 1947.

#### Education

A comprehensive program for the education of farmers concerning sanitary requirements and the improvement of dairy herds is now in progress. This program, initiated by the Meat and Milk Inspection Section of the Prefecture Government, has accused considerable interest on the part of farmers.

#### Conclusion

Veterinary activities in Okayama Prefecture are receiving competent supervision by prefecture officials. An increase in the effectiveness of performance of veterinary duties can be expected after distribution of proper instructions and the addition of more equipment.

#### **Distribution of Technical Bulletin**

For the purpose of furnishing information and guidance to veterinary officers on duty with Military Government units and medical officers in the absence of veterinary officers, Technical Bulletin, TB-PH-Vet 1, subject: "Duties and Functions of Military Government Veterinary Officers" has been distributed.

#### **Animal Disease Report**

The Ministry of Agriculture and Forestry, (Bureau of Animal Industry) reported that no new outbreaks of disease occurred during the period 9 - 15 January 1947.

#### SECTION III DENTAL AFFAIRS

The Board of Education of Tokyo-To has responded the dental hygiene program in public schools with an appropriation of 1,010,000 yen for 1947.

The 726 primary schools will be furnished part-time dentists. All students of the primary school will be examined once each year, but treatment will be limited to first year students.

The mobile dental clinics are under construction for use in outlying districts.

#### SECTION IV NURSING AFFAIRS

Miss Elizabeth Pickens, Public Health Nurse Consultant has been assigned to Nursing Affairs Division.

#### Education

The Nursing Education Council met on 12 February to discuss the final draft of the now legislation.

#### SECTION V SUPPLY

#### Production

An additional ration of rise was granted the Pharmaceutical Workers in the Tokyo Area. This additional ration will coincide with that of other prefectures and should ease the unrest of the pharmaceutical worker caused by the feed shortage.

Owing to the unavailability of amyl acetate from America, the substitution of Japan available n-butyl acetate in the manufacture of penicillin has been initiated. Its use is only slightly less desirable than amyl acetate. Negotiations are underway to import the special penicillin stimulating ingredient, corn steep liquor. Arrangements are progressing for manufacture of penicillin bottles with rubber stoppers and aluminum caps, all similar to American bottles. First drafts of flow sheets and detail design drawings of the Government Penicillin Pilot Plant were completed and examined; alterations and criticisms are expected to be made and final drafts available in about one week, construction to commence immediately thereafter. Fermentation and extraction phases are included.

The DDT products production program by the Japanese Government is progressing satisfactorily. Sizable quantities of 10% DDT dust, DDT residual effect spray and typhus vaccine are now in Japanese stocks. Decision has been made to supply Japanese needs for DDT products and typhus vaccine from Japanese sources on and after 1 March 1947. Instructions covering distribution methods have been furnished all prefectures by the Welfare Ministry, Japanese Government. Military government officials must maintain close liaison with prefectural officials to coordinate releases of DDT products.

A complete survey has now been made to determine the number of photorcentegraphic machines available in Japan for utilization in the anti-tuberculosis campaign in children of school age. Additional reports have been received which indicate a total of 405 machines in good condition and 156 machines which may be repaired. Decision has been made to repair 95 machines and produce 100 new machines. This will provide 600 photoroentographic machines which is considered adequate for this program. Production of 6 new machines has been accomplished. Production of the remainder will be completed on or about 1 April 47. A small

#### 原史料の1ページ欠損

- 2. Number of hectares under hemp cultivation showing number of plots or fields, by prefecture.
- 3. Quantities of matured stalks gathered, by prefecture.
- 4. Number and amount of transactions in marihuana seeds and plants, by prefecture.

The violations are to be reported in accordance with SCAPIN 1319-A, 23 May 1946, subject: "Establishment of an Effective System for Narcotic Control in Japan". Marihuana Control Regulations will be issued by the Ministry of Welfare within ten days. The penalties provided will be three years penal servitude and 5000 yen fine or both.

A narcotic investigation involving at least 19 persons has resulted in the arrest of 9 Japanese including three doctors, one dentist and one unregistered pharmacist. Tokyo narcotics officials, working with Narcotic Control officers, have seized 1,050 grams of codeine, 700 grams of cocaine hydrochloride and 500 grams of Narcopon. The narcotics were originally stolen from the Japanese Navy Meguro Medical Supply Arsenal, Tokyo, near the end of the war.

#### SECTION VI PREVENTIVE MEDICINE

#### Typhus Fever

<u>Comparative Score</u>: Typhus fever as reported by the Ministry or Welfare. (Includes figures of 12 February for both years.)

1946 - 984 cases 1947 - 360 cases

#### Education

1000 colored sets of 24 each of Kami-Shaibi posters on "Shirami Fufu" and 100 film strip copies in full color have been produced by the Ministry of Welfare and are being distributed to the prefectures of Japan by the Ministry of Education. These posters portray in a semi-comic manner the essentials of typhus control and were designed to reach the school children particularly.

On 16 January 1947 the Ministry of Education and the Ministry of Welfare jointly issued a letter of instruction to the prefectural governors requesting a training program for primary school on typhus and its control. It was suggested that at least one teacher from each primary school attend a meeting conducted for them by prefectural health office. They were to return to their respective schools and instruct the pupils. A following letter of instruction to the prefectural health officers, dated 20 January 1947 suggested the minimum subject matter to be covered. Both of these letters should have reached the prefectures by the first week in February 1947.

#### Venereal Disease Control

The health department is the proper agency primarily responsible for the prevention, and control, of communicable diseases in its area. No other public service has this primary function and it cannot be left to private operation. The health department, therefore, has the primary responsibility for the establishment of public clinics for the diagnosis and treatment of the venereal diseases. Until recently in Japan this responsibility for operating venereal disease diagnostic and curative clinics for the entire people was never acknowledged or assumed by the public health agencies. It is necessary therefore to stress the primary responsibility for this work to health department officials continuously.

In addition to curative venereal disease clinics in health centers, a number of Military Government health officers are supervising out-patient venereal disease clinics in municipal, prefectural and national hospitals. These out-patient clinics for the general public are to be encouraged but need extremely close supervision. No interference or direction by the "bosses" of the prostitute areas should be tolerated.

Prostitutes, promiscuous persons and other patients diagnosed as having venereal diseases in the course of a routine, periodic examination will be quarantined until not infectious.

In the case of gonorrhea and chancroid, this means until the patient is cured. It should be remembered that one course of sulfonamides probably does not cure 30% of females chronically infected with gonorrhea. Any clinical evidence of gonorrhea should be sufficient for another course of sulfonamides. Three consecutive negative Gram stained smears (or preferably cultures) must be obtained at daily intervals, and it is a good practice to obtain a smear following the next menstrual period. If all these laboratory reports are negative <u>and</u> the patient appears clinically cured, quarantine may be lifted.

If the diagnosis of syphilis is made on any of the patients listed above, the patient will be quarantined until at least 20 arsenicals and 20 heavy metals have been given. This is a minimum amount after which the remaining 20 arsenicals and 20 heavy metals may be given on an outpatient status.

#### Port Quarantine

The repatriation of German Nationals is now under way. The Marine Jumper, the first two ships engaged for this work is now loaded and ready to sail from Uraga Fort 15 February. Quarantine processing was carried out without event. A few cases of convalescent scarlet fever and a small number of whooping cough cases have been boarded and are being maintained in isolation.

A complete set of forms and declarations for use in quarantine operations has been designed and assembled by Military Government, Headquarters, 8th Army. It is expected that these forms will soon be available to those in the field.

The Port of Hakodate remains inactive due to the temporary stoppage in repatriation from the northern areas. The medical officer at that station has been called to Yokohama to assist in port operations there.

Report on incoming quarantinable disease: - No reports received this period.

#### SECTION VII SOCIAL INSURANCE

Budgets for the coming year present current problems, as it is considered of essential importance this insurance program be kept actively alive by adequate Government appropriation pending a more comprehensive study. The social security and insurance program will have considerable effect on the potential economic security of the low income class of people.

#### National Health Insurance

Considerable emphasis is heeded in order to keep this program active and efficient until the economic situation becomes more stabilized. The National Health Insurance is for the rural population where essential health facilities are needed in order to make adequate medical service available to all people. The establishing of clinics in localities which need them is considered necessary in providing preventive and curative measures for large groups. Additional Government subsidy has been requested by the Ministry of Welfare to assist in providing economical medical services and to establish a widespread systematic health education and examination programs for the purpose of detecting early health defects.

#### Welfare Pension Insurance Act

The Ministry of Welfare submitted translations of completed drafts of the new Workmen's Compensation Bill and proposed amendments to the Welfare Pension (Worker's Annuity) Insurance Act. The Ministry hopes to have both the Workmen's Compensation Bill and the Labor Standards Bill acted upon by this session of the Diet. Amendments to the Welfare Pension Act are concerned mainly with deleting from that law those provisions relating to occupational accidents and diseases which are covered by the Workmen's Compensation Bill, and in standardizing comparable requirements contained in these two measures and the Seamen's Insurance Law.

#### SECTION VIII MEDICAL SERVICES

Japanese Civilian Hospital Strength Report for the period ending 27 December 1946 shows 3,051 hospitals with a capacity of 216,416 beds, 101,868 of which were occupied. During this same period 254,691 outpatients were treated.

### SECTION IX CONSULTANT

#### Nutrition

The data obtained from the nutrition surveys 1946, on the physical examinations and the consumption of nutrients and weight of food groups were assembled and reorganized for use by the Food and Fertilizer Mission examining the food situation in Japan. The information was of particular importance since it forms the background for the presentation of the nutritional status for the Japanese population.

### SECTION X MEMORANDUM TO IMPERIAL JAPANESE GOVERNMENT

None

CRAWFORD F. SAMS
Colonel, Medical Corps,
Chief, Public Health and Welfare Section

#### 2 Incls:

- 1. Summary Report of Cases and Deaths from Communicable Diseases in Japan week ending 8 February 1947, with digest.
- 2. Weekly Summary Report of Venereal Diseases in Japan week ending 8 February 1947.

# GENERAL HEADQUARTERS SUPREME COMMANDER FOR THE ALLIED POWERS Public Health and Welfare Section

#### WEEKLY BULLETIN

For Period 16 February – 22 February 1947 Number 8

SECTION	I	<ul><li>General</li></ul>
SECTION	II	– Welfare
SECTION	III	<ul> <li>Veterinary Affairs</li> </ul>
SECTION	IV	<ul><li>Dental Affairs</li></ul>
SECTION	V	<ul><li>Nursing Affairs</li></ul>
SECTION	VI	<ul><li>Supply</li></ul>
SECTION	VII	<ul> <li>Preventive Medicine</li> </ul>
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SECTION	X	<ul><li>Consultant</li></ul>
SECTION	XI	<ul> <li>Memorandum to I.J.G.</li> </ul>

#### SECTION I GENERAL

#### **Technical Bulletins**

The following Public Health and Welfare Technical Bulletins was mailed with the weekly bulletin on 28 February 1947.

<u>Title</u>

Rickettsial Diseases in Japan and Korea Short Title: TB-PH PREV MED 3

The following Public Health and Welfare Technical Bulletins have been turned over to the Welfare Ministry for translation into Japanese:

TB-PH-PREV-MED 1, 2 and 3

TB-PH-NURSING 1

TB-PH-VET 2 and 3

It is expected these translations will be distributed by the Welfare Ministry to all Prefectural Health Departments, Health Centers and to such other Japanese health workers as may be necessary in order to effect proper coordination of public health activities between the Military Government and prefectural health organizations.

#### SECTION II WELFARE

#### Public Assistance

The present cash relief allowable, which was increased 50% in November 1946, is still not adequate to provide minimum living requirements on a rising (inflationary) market and an additional increase in relief grants is necessary. Therefore a new schedule of allowable daily grants is given below (in yen) which becomes effective 1 March 1947.

Number of Persons in Family						Each AdditionalPerson
	1	2	3	4	5	
Largest Cities	7.50	12.80	15.80	18.80	21.00	2.20
	(7.70)	(13.10)	(16.20)	(19.30)	(21.70)	(2.40)
Intermediate Cities	6.70	11.30	14.00	16.70	18.70	2.00
	(6.80)	(11.90)	(14.30)	(17.00)	(19.10)	(2.10)
Towns & Villages	5.80	9.90	12.20	14.50	16.30	1.80
	(6.00)	(10.10)	(12.50)	(14.90)	(16.70)	

Note: Amounts in ( ) indicate increases allowable over basic grants by order of prefectural governors. Increases over these ( ) amounts requires the approval of Health and Welfare Ministry.

The above allowances apply to persons both in and out of institutions. Family income, except for small casual, amounts, is to be deducted in determining allowances.

Food for infants, (under 1 year of age), will not be charged against the family relief grant.

School lunches, served to children who are members of families receiving relief grants, will not be charged against the family relief grant.

It is requested that Military Government personnel insure that (1) these standards are put into effect and (2) provisions are made for additional in cash or kind, or both, when necessitated by cases of unusual hardship or circumstances.

#### Private Welfare

It has been the policy, once each year, of the Health and Welfare Ministry to distribute lump sum cash grants to certain selected private welfare agencies under the provisions of the Social Work Law, Article 11, which

reads "The government within the limit of budget may pay subsidy to a person who manages a social work." The amount of subsidy paid has varied although prior to the end of the war certain selected private welfare organizations received amounts in excess of 50% of operating costs.

The last subsidy paid by the Japanese Government, through the Health and Welfare Ministry, in accordance with the provisions of the Social Work Law, was in February 1946 and amounted to 750,000 yen.

The Health and Welfare Ministry selected 896 private welfare agencies to share in a similar grant this year. The payment of this grant was not approved since it was reverting to the old system of paternalistic lump-sum grants which is contrary to SCAPIN 775 "Public Assistance" and the established "SCAP Policy on Subsidies to Private Welfare Institutions" transmitted to the Health and Welfare Ministry on 30 October 1946.

Clarification and interpretation pertaining to government financial support of private or quasi-official welfare agencies is contained in Memorandum from GHQ, SCAP, file AG 091.4 (7 Nov 46) PH, reference; Inclosure 3 to Operational Directive 9, Hqs Eighth Army, dated 14 January 1947.

#### Foreign Nationals

Tokyo-To in conjunction with the Meidi-Ya Co., Ltd., opened a new store, on 27 February 1947, to serve foreign nationals in the Tokyo area. The store is larger than the one previous and has added other features such as vegetables and meats.

#### SECTION III VETERINARY AFFAIRS

#### Field Trip to Aichi prefecture

A representative of the Division conducted a survey of veterinary affairs in Aichi Prefecture. Accompanied by representatives of the Military Government Team and Prefecture Government, Dairy farms, milk plants, slaughter houses and livestock farms were visited.

#### Animal Disease Control

Animal disease control measures are effective. The 1947 Tuberculin test is in progress. Plans are being made to immunize all dogs against rabies.

#### Meat Inspection

Ante and post mortem inspection is being maintained in all slaughter houses in a satisfactory manner. Sanitation and disposal of wastes are comparatively good.

#### **Dairy Inspection**

Dairy farms and milk plants are receiving a monthly inspection and the "Score Card System" is in use. Milk is pasteurized in autoclaves at a temperature of 95 degrees F. for 20 minutes and distributed hot. The bulk of this milk is being manufactured into powdered skim milk and butter. The bacterial examination is partially neglected due to destruction of laboratories and equipment in Nagoya and other cities.

#### Summary

In those instances where defects were found to exist, officials concerned were instructed to institute necessary corrective measures.

Under the guidance of Public Health Office of the Military Government Team, the veterinary service in this Prefecture appears to be functioning in an approved manner and rapidly approaching pre-war standards.

#### Animal Disease Report

The Ministry of Agriculture and Forestry (Bureau of Animal Industry) reported that no new outbreaks of disease occurred during the period 16-22 February 1947.

#### SECTION IV DENTAL AFFAIRS

During the past month, 13 dentists were reestablished in practice. The total number rehabilitated since the termination of hostilities is 4886. This represents over 80% of those bombed out.

#### SECTION V NURSING AFFAIRS

Members of the staff have assisted in the classes for nurse instructors being held by the Institute of Public Health. To date lectures and practical demonstrations have been given in Maternity Hygiene, Child Hygiene, Tuberculosis, Venereal Disease, Principles of Public Health Nursing and Supervision in Public Health Nursing.

#### SECTION VI SUPPLY

#### General

The Chief of the Supply Division has been designated to represent Public Health & Welfare Section on the Controls Coordinating Committee, which has been organized at SCAP for the purpose of coordinating activities with respect to industrial controls and related economic problems.

A conference was held with interested staff sections of SCAP and Japanese ministries concerning stocks of relief clothing. The purpose of the conference was to clarify the status of stocks earmarked for relief. A definite decision was reached concerning the amount of clothing available to the Welfare Ministry and steps will now be taken by that Ministry to effect necessary redistribution between prefectures. In this connection it should be noted that only certain portions of former Japanese Army-Navy clothing have been set aside for direct relief. This is in accordance with the policy of SCAP, under which the Japanese Government is authorized to determine the amounts of former Japanese Army and Navy materials that are to be distributed for direct relief. Effective 1 April 1947, stocks of former Japanese Army-Navy clothing which are uncovered will be released to the Ministry of Commerce and Industry for distribution. The Welfare Ministry will prepare a yearly program of relief clothing requirements, and the Ministry of Commerce and Industry will supply stocks to the Welfare Ministry as required for direct relief. Under this procedure the inventory held by the Welfare Ministry will be kept at a low level, sufficient to cover only emergency requirements.

#### **Production**

The below listed releases of 10% DDT have been approved by the Welfare Ministry, Japanese Government, during the past week.

<u>Prefecture</u>	Quantity
Osaka	10,000 lbs.
Hiroshima	4,000 "
Ishikawa	2,000 "
Shizuoka	1,000 "
Kagawa	1,000 "
Nagasaki	5,000 "
Akita	1,000 "

Release of the below listed quantities of typhus vaccine has been approved by the Welfare Ministry:

<u>Prefecture</u>	Quantity
Nagano	250 vials
Aomori	50 "
Fukushima	500 "

The above releases represent initial releases of DDT products by the Japanese Government. These quantities are small and were approved by Public Health and Welfare Section in order to provide experience in handling these products and further to fulfil actual needs in prefectures indicated above. Production schedule for DDT products is progressing satisfactorily and stocks will be adequate to provide for all civilian needs by 1 March 47. The Welfare Ministry Japanese Government had advised all prefectures that requirements for DDT products and typhus vaccine will be fulfilled by the Japanese Government on and after 1 March.

A conference with officials of the Japan Injection Needle Industrial Association revealed that the current monthly production approximates 500,000 with an average sale per month of 250,000. A total of 52 factories are engaged in this production and 40 of the factories are located in the Tokyo area. No reports indicating a shortage of injection needles in Japan have been received by this section and it is assumed that current production is exceeding the demand. The Association reports a total of 500,000 needles in stock at present. Injection needles are not controlled and the entire output is sold on the open market. The possibility of increasing production sufficiently to permit export is being investigated.

Monthly report of the Pharmaceutical Affairs Section, Welfare Ministry, indicates production of Insect and Rodent control supplies during January 1947 as follows:

Antu (rat poison)	2,895,540 (3 gram packages)
Nekoirazu (rat poison)	1,944 kgs.
Rat traps, spring type	25,000
Rat traps, cage type	1,000
DDT concentrate	39,777 lbs.
10% DDT dust	454,200 lbs.
Mixing & milling of 10% DDT	
dust from American furnished	
DDT concentrate	74,580 lbs.
DDT dusters	7,842

The above production of 10% DDT dust by Japanese factories during the month of January was approximately a 300% increase over previous monthly productions during 1946. Production of other items remained approximately the same.

In order to provide laboratory animals for assaying potency of Japanese produced typhoid vaccine, request was submitted to the War Department for 300 females and 50 males of typhoid susceptible Swiss white mice. A production of sufficient typhoid vaccine to immunize all individuals in Japan over the age of 5 years is planned. Considerable time will be required to produce sufficient white mice from the small increment requested in order to assay large quantities of Japanese produced typhoid vaccine.

The monthly report of the Welfare Ministry, Japanese Government, indicates production of the principal biologicals during January as follows:

	<u>Production</u>		Stock on Hand - 31 January		
<u>Vaccine</u>	Crude Vaccine	Finished Vac.	Crude Vaccine	Finished Vac.	
Cholera	-	-	628,500 cc	549,380 cc	
Plague	-	-	-	562,800 cc	
Typhus	-	1,839,154 cc	-	3,631,161 cc	
Triple Typhoid	10,000 cc	121,780 cc	2,096,925 cc	1,735,218 cc	
Smallpox Vaccine	45,550,600 ds.	17,996,800 ds.	23,981,050 ds.	1,713,950 ds	
Diphtheria Antitoxin	-	156,800 cc	-	426,653 cc	
Diphtheria Toxoid	-	14,800 cc	-	551,235 cc	

Production of typhus vaccine continues to increase over all previous monthly outputs. However, the shortage of necessary laboratory animals to continue proper assay will delay distribution of this vaccine. Production of all vaccines is considered satisfactory. Production of approximately 180,000,000 cc of typhoid vaccine will be started on or about 1 April.

A Japanese committee comprising officials of the Welfare Ministry, Japanese Government, the Agricultural Ministry, Japanese Government, and the Laboratory Animals Producing Association had been formed

as a committee to alleviate the shortage of necessary laboratory animals (guinea pigs), rats and mice in all laboratories producing biologicals. A plan has been made by this committee to increase production to meet requirements during 1947, to provide sufficient feed for increased production of these animals and to conduct distribution in order to insure that biological laboratories are given first priority in distribution. Monthly meetings will be held with this committee to determine action of the committee in carrying out the objectives of the plan. Representatives of Public Health and Welfare Section and Natural Resources Section will be present at these meetings. A specific report will be submitted monthly by the committee indicating the following:

- a. Actual production of animals.
- b. Number of animals furnished each laboratory.
- c. Amount of animal food furnished.

#### Narcotics

Information has been received that several ships, engaged in smuggling operations with narcotics as part of the cargo, have been seized. It is imperative that the Narcotic Control Branch, Public Health and Welfare Section, GHQ, SCAP, receive the following information on all ships carrying contraband narcotics: Name and registry of the ship; port of departure, ports of call and port of arrival with dates; quantity and disposition of narcotics and other action taken. This information is the subject of reports compiled by the Narcotic Control Branch for International Narcotic Control Bodies.

An investigation involving three Japanese narcotic officials, one other government official, one druggist, one pharmacist and seven doctors has been completed in Yamanashi Prefecture. One of the narcotic officials who resigned a year ago removed a large quantity of narcotics from a former Japanese Navy Hospital. After dividing the loot with two other narcotic officials a large quantity was sold to various persons for thousands of yen. Registered doctors who received the narcotics failed to report them at time of registration. All of these defendants will be tried in Provost Court.

Recent investigations indicate that large quantities of narcotics were probably removed from Japanese Military Hospitals and Medical Depots near the end of the war and are now being sold and held illegally. Military Government Teams should insure that Japanese narcotic officials and police made every effort to determine if such diversions occurred and to apprehend the violators and seize the narcotics.

#### SECTION VII PREVENTIVE MEDICINE

#### Typhus Control

Comparative score: (Including reportings of 19 February)

1946 - 1,467 1947 - 408

#### **Immunization of Commuter Groups**

An extensive program for the immunization of commuter groups in the two greatest "danger zones" of Japan will be launched on 25 February 1947 in the Tokyo-Yokohama area and on 1 March 1947 in the Osaka-Kobe area. This program will include over one million persons. The plan calls for the administration of 1 cc. injections of Cox-type typhus vaccine to commuters holding commuter passes in the two areas mentioned. The Ministry of Welfare has issued a letter of direction to the prefectures concerned.

SCAP memoranda to the Imperial Japanese Government, AG 710 (21 Nov 45) PH, (SCAPIN 331) dates 21 November 1945, subject: "Prevention and Control of Typhus Fever in Japan; and AG 710 (29 Nov 45) PH, (SCAPIN 368) dated 29 November 1945, subject: "Prevention and Control of Typhus Fever in Japan" have been rescinded. A new memorandum, AG 710 (12 Feb 47) PH, (SCAPIN 1523) dated 12 February 1947, subject: "Prevention and Control of Typhus Fever in Japan" replaces the two memoranda as listed above.

#### Venereal Disease Control

It is necessary at this time to have certain information on diagnostic and treatment facilities. Each Military Government Health Officer is referred to enclosure No. 1 to this Bulletin. It is desired that he fill in the required information and return to Public Health and Welfare Section immediately.

#### Port Quarantine

Report on incoming quarantinable disease:

Week-ending 8 February - Negative

Week-ending 15 February - Repatriation Ship Tibadack from Batavia to Ujina (2 February) Typhus Fever, 1 case, no deaths. Date of diagnosis, 13 February 1947.

#### SECTION VIII SOCIAL SECURITY

For the information and guidance of Military Government, Public Health and Welfare officers, the following organizational setup of the Social Security Division is published.

#### Mission and Function

The function of the Social Security Division is a continuous review of those activities of the Imperial Japanese Government which affect social security. Particular concern is with administrative procedures, policies, and the nature of benefits paid by insurance bureaus and government-sponsored insurance associations. Similar emphasis is placed upon the study of the relationship of social insurance programs to other welfare service agencies and public relief programs.

The Social Security Division maintains liaison with other Staff Section and with agencies of the Japanese Government in evaluating the soundness of existing social security programs and to assure the effective and continuing operation of the plan designed to relieve unnecessary dependency and to provide protection from the hazards of old age, illness, unemployment, accidents, and other conditions over which the individual has no control and which might result in social unrest prejudicial to the occupation.

The Division receives and compiles regular statistical reports from agencies and sources which may bear on the general welfare and economic status if the social security program. Representatives of the Division make periodic surveys on national, regional and prefectural levels to render technical assistance and guidance to welfare personnel of military government, lower echelons and Japanese agencies in their social problems and policies. Recommendations are made to higher authority on plans, programs, policies and procedures when necessary to coordinate and consolidate current social security systems or to eliminate such social security or insurance programs as may be prejudicial to the occupation.

The Division's operations are divided among three Branches, designated as: "Social Insurance," "Health Insurance," and "Economic Analyst."

Within the Division, the Social Insurance Branch is responsible for the appraisal of existing and proposed legislation in those social insurance programs planning security against risks other than illness and accident. This branch is charged with the development of an integrated social security program in which social insurance and public assistance programs are combined to meet basic needs of the population without major gaps or overlapping and with maximum simplicity of operation. It is responsible for the development and application of appropriate policies dealing with old age security, aid to the blind and to dependent children, and other measures, such as Seamen's Insurance and family allowances, to assure security of income. In addition, it reviews, and maintains liaison with other Sections in the consideration of such other programs as unemployment insurance, workmen's compensation, mutual aid associations, and postal insurance and annuities.

The Health Insurance Branch initiates, directs and supervises the application of policies in the field of insurance providing security against wage-loss resulting from disabling illnesses and accidents. It is concerned with aid for crippled children and maternal and child health, and ascertains needs for health insurance programs involving general and specialized care by physicians and surgeons, hospitalization, home nursing, medicines and dentistry.

The Economic Analyst Branch evaluates and integrates economic date obtained from governmental sources which is required to properly assay social security proposals in relation to (a) national income, (b) the extent and character of economic insecurity resulting from various cases, (c) the probable cost of contemplated changes in

the programs, and (d) the economic effect of various methods of financing. It prepares recommendations concerning the economic aspects of social security, covering such questions as the extent of employer and employee contributions, governmental contributions from general revenues, relation of benefit structures to wages, and effect of benefits on employment.

#### CONDITIONS AS FOUND UPON ARRIVAL BY ARMED FORCES IN JAPAN

Insurance systems created by the Japanese Government prior to the occupation, and which may be characterized as social insurance or related thereto, are the following:

<u>Health Insurance</u> (1922) - A compulsory system for certain industrial, mining, commercial and transportation employees; paying limited cash benefits during incapacitation and providing medical and dental care, maternity care, and funeral expenses. This type of insurance was further expanded in 1934.

<u>National Health Insurance</u> (1938) - A program in extension of "Health Insurance" and sponsoring voluntarily organized health associations which are supported by members' premiums and a government subsidy; providing medial care and hospitalization to the rural population.

<u>Seamen's Insurance</u> (1939) - A composite social insurance program for seamen with provision for medical care, limited cash benefits to the insured seamen for sickness, invalidity due to occupational accidents, and in old age, and to his surviving dependents, and funeral expenses.

<u>Welfare Pension Act (Formerly "Workers' Annuity Insurance")</u> (1941) - A compulsory system for practically the same group as are covered by "Health Insurance" and providing cash benefits for old age, permanent disability and aid to survivors on death.

<u>Employers' Liability Insurance</u> (1931 and revised in 1941) - A system of compensation for occupational disabilities, providing medical care and cash benefits to injured workers in engineering, construction and lumber industries, and assistance to survivors of such workers.

<u>Post Office Insurance and Annuities</u> - Two programs administered by the Ministry of Communications and which are comparable to the usual life and endowment or retirement commercial policies, but due to their extremely wide application (over 91 million policies with more than 26 billion yen face-value are currently effective), consideration must be given to these systems in appraising the social insurances.

Considerable revision of the laws governing the health, old age, and accident insurances are being drafted by the Ministry of Welfare. In addition, new legislation embodying principles of unemployment insurance and workmen's compensation are under consideration.

There is no possibility of giving an accurate picture of the number of persons who would be covered by these programs under "normal" conditions. Wartime figures reflect a peak in industrial employment that may not reappear in Japan for many years, while post war figures represent a period of abnormally low industrial activity and extensive inflation and are of only transitory value.

Review of Past Activities: Immediately following the activation of the Public Health and Welfare Section in October, 1945 the Social Insurance Bureau of the Ministry of Health and Welfare was directed to submit current statistics on coverage, contributions, benefits paid, reserve funds, and related subjects. From information obtained it was apparent that contributions paid into social insurance funds before the end of hostilities far exceeded benefits grants under any of the programs. The Ministry reported in January, 1946, that on 31 December 1945 there were 10,443 local insurance agencies and organizations administering the five social insurance programs and that 41,409,450 individuals were insured.

Attention was directed to the Health Insurance and National Health Insurance programs at an early date. Field studies indicated that insufficient transportation facilities and low fees for doctors in the face of inflationary prices were the chief underlying causes of the deficiencies in the operation of the programs.

The bulk of the preliminary study made of the social insurance programs was accomplished by Social Insurance Consultants of the Labor Advisory Committee and their recommendations led to the creation of the Social Security Division in May, 1946.

A series of conferences were held between representatives of the Labor Advisory Committee, the Public Health and Welfare Section, the Labor Division in the Economic and Scientific Section, the Bureau of Insurance in the Ministry of Welfare, and the Japanese Social Insurance Investigation Committee. This latter committee was created by the Japanese Cabinet with membership drawn from labor, employers, the faculty of leading universities of Japan, and officers of the Japanese Government.

Many tentative drafts of partial revisions and amendments of the social insurance programs were submitted by the Insurance Bureau and reviewed by the Labor Advisory Committee and the Public Health and Welfare and Economic and Scientific Sections. Difficulty has been encountered, however, in obtaining complete and accurate translation of existing laws and pertinent ordinances.

The Labor Advisory Committee prepared a detailed report of its studies and conferences and this has served as the foundation for the operations of the Social security Division.

The Committee found that the legal framework of Japanese social insurance is of relatively recent date. Compulsory health insurance for industrial workers and miners, although introduced in 1922, was in its initial form very limited in scope and social value. Even more restricted in its coverage and in the level of its benefits was social insurance against industrial accident as established in 1931.

The broader development of social insurance legislation occurred largely during the period of preparation and prosecution of the war and, in many ways, was influenced by wartime objectives. It was found that modern Japan, in the field of social insurance as in many other fields, had taken over Western institutions without accepting their basic philosophies. The principles that the insured worked acquires the right to benefits and services as firm as any contractual right, and that he acquires the right to participate in the formulation of policies for and in the management of social insurance programs, were not in fact recognized. The paternalistic and authoritarian character of the Japanese regime had definitely influenced their social insurance program.

While the Labor Advisory Committee deemed it impossible to make detailed proposals for a comprehensive social insurance system until the policies with respect to Japan's economic future are more definitely formulated, it did reach conclusions with respect to implementing the existing structure and these findings now serve as a guide to the Social Security Division.

<u>Current Projects</u>: Based upon the surveys and recommendations of the Social Insurance Consultants of the Labor Advisory Committee, the current projects have centered around health insurance, workmen's compensation and unemployment insurance. Investigations and surveys of the health insurance program have brought forth such important factors as keeping the program alive during the inflation; adjusting finances to assure survival of the program; instituting measures to raise the standards of service; extending medical service to these groups not now covered and arranging for broader participation of the employer and the insured in the management of the program. Through consultations and conferences directions were conveyed for raising standards, improving methods, and emphasizing hospital and sanatorium use as a part of an extensive medicine program.

The low patient census in health insurance hospitals and sanatoriums caused a survey of procedures and operations. As a result, a revision in the hospital and sanatorium procedures has been directed in an effort to increase efficiency in the use of equipment, facilities, and professional personnel. Each institution surveyed was found to be well-staffed and sufficiently financed to render service to a larger number of people. Heads of governmental insurance departments have initiated a program to bring about a cooperative plan among all government insurance agencies in making efficient use of insurance hospitals and sanatoriums.

With problems confronting the unstable labor conditions, constant supervision has been exercised in the development of the Employers' Liability Insurance for employees in case of accidents. The program has been extended to many small organizations not previously covered under Health Insurance. Concerted efforts have brought about the inclusion of such provisions as the furnishing of artificial aids, rehabilitation programs, longer periods of benefit payments on the installment plan, paying direct to the employee by the insurance office rather than through the employer under the old procedure, and the providing of an easier appeal system.

The Post Office Insurance and Annuities, two programs administered by the Ministry of Communications, and which are comparable to the usual life and endowment or retirement commercial policies, have been surveyed due to the extremely wide application and the possible application they might have in the Social Insurance program.

Budget adjustments and requirements are under current supervision, with a view toward reallocating the use of the Welfare Pension Fund in the National Health Program. Government subsidy being essential in the over-all requirement, constant demands are made for increased allotments for improving health facilities for the benefit of the low income and unemployed class.

<u>Future Programs</u>: Social insurance is unavoidably weakened during a period of inflation. Therefore, the urgent need confronting the Insurance Bureau of the Ministry of Welfare is maintaining the present status for a limited time as necessary measures are taken to assure a higher degree of coordination in their activities and more adequate governmental supervision. There are some issues which clearly enough justify immediate recommendation, while others need further exploration before decisions are reached.

This Division sees the need for intensive study of the entire social insurance program, with the thought of readjusting and coordinating the coverages and benefits of the various types of insurances. Chief among these are the old age and survivors' insurance, family allowance and health benefits.

Administrative procedures seem to be a weakness in the Japanese system. A particular fallacy is that many provisions appear on paper, but few people are generally informed; another is the lack of adequate investigations, surveys and deliberations by a representative group of the people. Therefore, the leading point in the future program would be extending the scope, authority and public representation on the committee established by the Japanese Cabinet for investigation of the Social Insurance Program. Another point in need of emphasis, end of no less importance, is the administrative supervision of operations from the national as well as from the prefectural level. This will mean a more adequate staff of qualified personnel to serve as a field force so the whole process of supervision will include statistical reporting and standardization of procedures to assure complete and effective control.

Additional programs, which are immediate and future in character, include:

Added efforts in order to keep the social insurance program alive during the period of inflation.

Adjustments of financial measures to assure survival of the National Health Insurance and Sickness Insurance programs as to income and government subsidy.

To emphasize coordination and cooperation between the government insurance officials and the medical associations in raising the standards of medical services to the insured and fee-for-service allowance to doctors. Also, effecting a definite program for extending medical care to a larger group of people not now covered.

Encouraging broader participation by the insured in the social insurance program.

Developing the information, education and orientation program as to the value and benefits of social insurance.

Initiating the development of unemployment insurance with provisions to establish an adequate financial reserve for providing greater security to workers currently unemployed.

The establishing of a workmen's compensation insurance to assure security against industrial accidents and occupation diseases.

While appeal provisions appear in practically all schemes, they are hardly ever used, as no information is given that they are available. To overcome this weakness, the insured will be encouraged, by a simplified and non-partisan method, to make more use of the appeal privileges, which should increase individual participation in the program.

Even though special projects have been mentioned as a part of the future program, the entire field of social security and social insurance is in need of intensive study before a more comprehensive program can be announced.

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#### **Social Insurances**

The social insurance program is a long range project and considerable emphasis and study is immediately needed to maintain active interest in keeping it alive. Health and pension insurances will be regulated in accordance with the industrial labor requirements.

#### **Health Insurance**

The Ministry of Welfare has prepared a revised Health Insurance (Industrial) Law to be presented to the Diet. The revised law was necessary with the development of the Workmen's Compensation Law. The original Health Insurance Law had covered illness and injuries incurred in the line of duty as well as off duty. With the enactment of the Workmen's Compensation Law all occupational injuries and illness will be the responsibility of this law. The Health Insurance Law will then cover only illness and injuries incurred which are not in the line of duty.

#### National Health Insurance

A partial survey indicates that approximately 10% of the associations have suspended operation during the past year. The principal reasons given, was the increased cost in medical care by private physicians, the deficiency of medical supplies, the neglect by government in rendering adequate assistance and the lack of a clinic for medical examination and group treatment.

Three associations which are functioning efficiently have been recently visited and it was found that each had a central clinic for rendering economical group medical care. Those which are functioning efficiently, however, are not free of difficulties. The opinions expressed were that these associations will have to meet the advancing costs by increasing premiums, however, this must be encouraged by improvement of government interest and assistance by additional subsidy for medical treatment and a more adequate distribution of medical supplies. The clinic seems to be the logical solution for rendering economical and adequate medical care.

### SECTION IX MEDICAL SERVICES

Japanese Civilian Hospital Strength Report for the period ending 3 January 1947 shows 3,047 hospitals with a capacity of 215,755 beds, 98565 of which were occupied. During this same period 233,640 outpatients were treated.

### SECTION X CONSULTANT

#### Nutrition

A summary of the nutritional survey for 1946 covering the three prefectures - Fukuoka, Saga, Kumamoto (Fukuoka Area) of Kyushu, is given for the nutrients in grams and calories and the various classes of food consumed per capita.

### RESULTS OF NUTRITION SURVEYS - JAPAN - 1946

Nutrients in grams and calories, and grams of various classes of food consumed per capita per day

KYUSHU (Fukuoka Area)

#### 3 Prefectures Fukuoka, Saga, Kumamoto

Nutrients in Grams and Calories per Capital per Day

	February	May	August	November
<u>Number</u>	2644	3583	3636	3394
Pop. Ratio Adult Unit No. persons	0.819	0.849	0.868	0.900
Protein Animal Vegetable Total	7.6 55.0 62.6	4.6 56.5 61.1	7.0 50.2 57.2	7.0 50.5 57.5
<u>Fat</u>		12.1	13.4	11.3
<u>Carbohydrate</u>		393.3	398.5	485.4
Calories				
Pation	334	180	264	86
Free Market	104	27	40	70
Home Production	1460	1749	1615	2169
Gift	55	10	19	12
Total	1953	1966	1938	2337

Source: Imperial Japanese Government

	Grams of Various Classes of Food Consumed per Capita						
	per Day fron	n Nutrition Su	rveys - Japan -				
	February	May	August	November			
<u>Grains</u>	No date						
Rice		273.2	222.6	337.0			
Wheat		<u> </u>	134.3	21.8			
Barley		158.7	107.3	76.9			
Others		145					
		14.5	16.9	1.2			
Total		446.4	481.1	436.9			
Nuts, Etc.				0.1			
D-4-4							
Potatoes		100.4	24.1	455.0			
Sweet		100.4	24.1	455.8			
White			23.8	0.2			
Others		13.0	1.9	78.4			
Total		113.4	49.8	534.4			
a			0.02	0.04			
<u>Sugars</u>			0.02	0.04			
Oils		0.6	1.3	0.3			
Legumes							
Soya		<b>`</b>	2.6	0.4			
Soya products		52.6	22.8	47.0			
		124					
Other beans		12.4	2.9	5.1			
Total		65.0	28.3	52.5			
Animal Foods							
Fish		17.5	16.4	28.0			
Meat, Poultry		0.4	0.7	1.0			
Eggs		0.9	0.7	0.3			
Milk		0.7	0.4	0.04			
Total		19.5	18.2	29.3			
Leafy Green and							
Yellow Vegetables		85.2	238.0	65.2			
Other Fruits and							
<u>Vegetables</u>							
Citrus, Tomatoes		0.07	0.4	0.4			
Other fruits			1.0	0.1			
Other vegetables		129.7	144.0	124.5			
Total		129.7	145.4	125.0			
<u>Seaweeds</u>		1.9	1.2	0.4			
D 137							
Processed Veg.							
Dried		2.9	0.1	0.9			
Pickled		82.7	25.1	38.8			
Total		85.6	25.2	39.7			
<u>Flavours</u>		3.7	12.0	16.8			
<u>Others</u>		0.3					

#### **SECTION XI** MEMORANDUM TO IMPERIAL JAPANESE GOVERNMENT

None

CRAWFORD F. SAMS Colonel, Medical Corps, Chief, Public Health and Welfare Section

#### 3 Incls

- 1. Venereal Disease Control Form
- 2. Summary Report of Cases and Deaths from Communicable Diseases in Japan week ending 15 February 1947, with digest.
- 3. Weekly Summary Report of Venereal Diseases in Japan week ending 15 February 1947.

Venereal Disease Control:			
-	directly on this sheet and	nning for future facilities with the Welfare M I returned to Oscar M. Elkins, M.D., Consul- , GHQ, SCAP, APO 500.	•
line)		along	this
PREFECTURE			
MIL. GOV. HEALTH OFFICER	F	PREFECTURAL VDCO	
OUT-PATIENT CLINICS FO	R THE DIAGNOSIS AN IN THE GENERAL P	ID TREATMENT OF VENEREAL DISEASI OPULATION	3
(Do not report private clinics or clini	cs in prostitute or geisha	areas now being used entirely by prostitutes)	
Location of Public Out-patient Clinic	Number of Venereal Disease Out-patient Clinics now operating -	Additional Number of Public V.D. Out-patient Clinics to be in operation by 1 June 1947	

In Prefectural Health Centers

In Municipal Health Centers

In Municipal Hospitals

In prefectural Hospitals

In National Hospitals

In Medical School Hospitals

In other locations (state where)

Your informal suggestions and comments on the V.D. control situation in your Prefecture are solicited.

Feb. 1947

# GENERAL HEADQUARTERS SUPREME COMMANDER FOR THE ALLIED POWERS Public Health and Welfare Section

#### WEEKLY BULLETIN

For Period 23 February – 1 March 1947 Number 9

SECTION	I	<ul><li>Welfare</li></ul>
SECTION	II	<ul> <li>Veterinary Affairs</li> </ul>
SECTION	III	<ul><li>Dental Affairs</li></ul>
SECTION	IV	<ul><li>Nursing Affairs</li></ul>
SECTION	V	<ul><li>Supply</li></ul>
SECTION	VI	<ul> <li>Preventive Medicine</li> </ul>
SECTION	VII	<ul> <li>Social Security</li> </ul>
SECTION	VIII	<ul> <li>Medical Service</li> </ul>
SECTION	IX	<ul><li>Vital Statistics</li></ul>
SECTION	X	<ul><li>Consultants</li></ul>
SECTION	XI	<ul> <li>Memorandum to I.J.G.</li> </ul>

## SECTION I WELFARE

## Public Assistance

The following incomplete report (40 prefectures) covers Public Assistance statistics for January 1947.

Individual persons assisted (institutional & non-institutional) 2,364,601 Total relief cost (grants in cash and kind) ven 210,942,465

## Rehabilitation of Repatriates

Japanese governmental programs for "War Sufferers and Repatriates" include a number of special projects designed to meet the need of not only those made homeless by the war and its attendant destruction, but also for the millions of returning civilians, many of whom are coming to Japan for the first time.

Already 5,100,000 persons have been returned to Japan and it is estimated that 1,400,000 persons are still to be repatriated.

To meet the problem facing these persons a number of programs are in operation. Japanese reports include the following activities:

- a. Reception centers at Hakodate, Uraga, Mizuru, Ujina, Otake, Nagoya, Hakata and Sasebo, and Kagoshima.
  - 1. Money is exchanged in a sum not to exceed 1,000 yen; a certificate of repatriation is issued.
  - 2. Free room and meals are furnished at the center, and a free ticket to destination and five days food there after is given; clothing and bedding if needed, plus a gratis issue of 500 yen if the repatriate is without funds is also allowed.
  - 3. Free medical care is furnished including hospitalization at a national hospital as indicated by reception center doctor.
- b. Enroute from reception centers to place of destination, usually the official residence of the respective family, the national and local governments provide places for rest and feeding, and medical treatment in the main stations along the route.
- c. After the repatriate has reached the selected place of residence he either secures work in his profession or trade through the local employment bureau or through his family. If nothing is available locally he is advised of the location of work and assisted in reaching it.

If the repatriate is unable to find employment or otherwise to care for himself and his family, he receives care under the provisions of the "Daily Life Security Act" and also receives necessary cooking and household equipment, ration cards and sufficient relief funds to purchase food, and a free but limited issue of clothing. Distribution varies from prefecture to prefecture dependent in part on local resources. Through the local Social Affaire offices, housing is provided by the utilization of former factories, barracks and warehouses and similar large unused structures. However, by the end of 1947 only 15% of the repatriated will be so housed, the remainder securing shelter by "doubling up" with relatives and friends.

Business loans not in excess of 3,000 yen are available through the Peoples' Banks for use in establishing small business enterprises or in purchase of hand tools. These loans draw no interest for one year, 6% for the next four years and are due at the end of five years. Applications have exceeded the 1,000,000,000 yen loan fund and demands are now being made for additional funds, a larger loan limit figure and a longer term for the individual loans.

A repatriate wishing to settle on the land may purchase land through the Agriculture and Forestry Ministry and may borrow up to 10,000 yen for this purpose, or he may rent land from others and borrow from the ministry for farm tools, equipment, seeds and fertilizers.

A repatriate upon returning to his place of residence presents his certificate of repatriation and returns to full citizenship of the nation. Certain residence laws will not permit voting until he has lived in his ward or ku for six months, although this law has been suspended from time to time to permit large groups of repatriates to exercise their franchise. However, the repatriate who wishes to file for public office may do so the day he returns.

## Japanese Red Cross Society

The American Junior Red Cross confirms the allocation of the following supplies, to be distributed to Japanese school children through the auspices of the Japanese Junior Red Cross and the Ministry of Education.

50,000 Gift Parcels 500,000 Pencil Tablets 500,000 Pencils 500,000 Erasures

Plans are now being perfected for the authority to ship these supplies, for supervision and control of their distribution and for warehousing and transportation.

The Japanese Red Cross has published the first issue of a Monthly Bulletin, devoted to an interpretation of Red Cross activities and subjects of general interest in the field of public health and welfare. The initial distribution will be limited to Red Cross organizations and selected government and private agencies. As additional resources and materials become available, the Japanese Red Cross plans to publish sufficient copies for general distribution to those individuals and organizations interested.

## SECTION II VETERINARY AFFAIRS

#### Monthly Meat Inspection Report

Following is a summary of the monthly meat inspection report for December 1946, submitted by the Ministry of Welfare.

	<b>Cattle</b>	<u>Calves</u>	Sheep & Goats	Swine	<u>Horses</u>
Number slaughtered	35960	727	466	8755	7501
Condemned ante mortem	2	0	0	0	0
Condemned post mortem					
Total	12	1	0	1	5
Partial	394	6	0	13	271
Viscera	6247	47	0	2398	781

## Monthly Animal Disease Report

Following is a summary of the monthly dairy inspection report for December 1946, submitted by the Ministry of Welfare.

Special	Mılk

Farm inspections	1
Samples examined	6
Over bacterial standards (50,000 per cc)	0
Under butterfat standards (3.3 percent)	1
Plant inspections	
Over bacterial standards (50,000 per cc)	5
Under butterfat standards (3.3 percent)	2
Ordinary Milk	
Farm inspections	5687
Samples examined	8061
Over bacterial standards (2,000,000 per cc)	608
Under butterfat standards (3.0 percent)	878
Plant inspections	2786
Over bacterial standards (2,000,000 per cc)	196
Under butterfat standards (3.0 percent)	352
Goat Milk	

Farm inspections	37
Samples examined	77
Over bacterial standards (2,000,000 per cc)	3
Under butterfat standards (3.0 percent)	0

## Animal Disease Report

The Ministry of Agriculture and Forestry, (Bureau of Animal Industry), reported the following new outbreaks of disease during the period 23 Feb to 1 March 1947.

<b>Prefecture</b>	<u>Disease</u>	Cases
Fukuoka	Anthrax	1

## SECTION III DENTAL AFFAIRS

The value of dental materials reported produced for the month of January totalled 1,180,095,00 yen; dental instruments totalled 604,468,00 yen.

## SECTION IV NURSING AFFAIRS

Prefectural surveys of the Schools of Nursing on Honshu, Shikoku and Hokkaido, have been completed. Six in Kyushu remaining to be surveyed.

## SECTION V SUPPLY

## **Distribution**

It is apparent that excessive stocks of medical supplies are held in the various echelons of distribution. This is due somewhat to the policy of control companies, both at the national and prefectural levels, of distributing only once each quarter. Close supervision is maintained over the central distributing company with a view to increasing the distribution cycle and thus provide a more rapid flow of materials to prefectures. Local distributing companies should be required to review inventories at frequent intervals and make distribution whenever available stocks warrant such action.

Complaints have been received of inability of physicians and hospitals to purchase medicines expect during regular distribution periods. All medicine distributing companies maintain reserves for emergency use and are required to sell medicines whenever required for actual treatment of a patient.

As previously announced, the Welfare Ministry assumed responsibility for distribution of DDT products and typhus vaccine on 1 March 1947. Under the plan as set-up, prefectural health officers will submit request for these items direct to the Ministry of Welfare, attention: Pharmaceutical Affairs Section. The ministry will advise prefectural health officers as to specific amounts approved for release and the source from which these supplies may be purchased. A similar notification will be sent to the designated wholesaler who will be authorized to ship upon request of the prefecture. Military Government officials should exercise necessary supervision in this connection to insure validity of request submitted to the Welfare Ministry and proper storage and distribution by operating agencies.

The number of controlled medicines has been reduced from 201 to 124. This action will relieve somewhat the financial burden of distribution companies, encourage free trade and permit greater concentration of effort in distribution of the more important medicines remaining in a critical supply status. The following is a revised list of controlled medicines and sanitary materials. All other medical supplies and equipment are being distributed through normal commercial channels:

#### MEDICINES

1. ACETOPHENETIDIN - POWDER (Phenacetine)

```
2.
              IJ
                    Tablets
3.
       ACRINOL (Rivanol)
        ACETYLSALICYLIC ACID (Aspirin) POWDER.
4.
5.
                               " TABLETS.
        ACETO-SULFAMILAMIDE - Injection.
6.
7.
        ALCOHOL, ETHYL 90%
8.
       ALCOHOL, DILUTED 60%
9.
       ALCOHOL, DISINFECTANT
10.
        ALBUMIN TANNATE
11.
       AMINOPYRINE - POWDER
12.
       AMINOPYRINE - TABLET
13.
        ATROPINE SULPHATE
14.
       BAGNON INJECTION
15.
       BARBITAL
16.
       BISMUTH SUBNITRATE
17.
       BISMUTH SUBSALICYLATE
18.
                  IJ
                         Injection.
19.
       BITTER TINCTURE
20.
       BROMISOVALERYLUREA - POWDER
21.
                                    TABLETS.
22.
       Caffeine with Sodium Benzoate
23.
       Calcium Lactate
24.
       Carbromal, (Bromdithlacetyl urea)
25.
       Castor oil
26.
         " " Aromatic.
27.
       Calcium Chloride
28.
               " - Injection
29.
       Collodial Silver
       Cinchona
30.
31.
       Cinchona Tincture
32.
       Cinchona Fluid Extract.
       Chloroform for Anesthesia
33.
       Digitalis Preparation – Powder
34.
35.
                IJ
                   Injection
36.
       Dextrose.
       Epinephrine Hydrochloride (Epirenamin)
37.
38.
       Ether for Anesthesia
39.
       Extract of Scapolia
40.
       Ethyl Chloride
       Ephedrine Hydrochloride.
41.
42.
       Euipan
       Ergot
43.
       Emetine Hydrochloride
44.
45.
       Glycerine
       Hydrogen Peroxide
46.
47.
       Hydrochinin
       Hydrus Wool Fat (Lanolin)
48.
49.
       Insulin.
50.
       Indramin
51.
       Iodine
           Diluted
52.
53.
           Purified
54.
         " Tincture
55.
       Lobeline Hydrochloride
56.
                     Injection
57.
       Lysol, Saponated (Saponated Cresol Solution).
```

Mapharsen, (Mapharsol)

Mercuric Chloride Disinfectant

58. 59.

- 60. Mercurochrome
- 61. Magnesium Oxide
- 62. Nupercaine
- 63. Nux Vomica Extract.
- 64. Oil Sesame
- 65. Ointment Japanese Wax.
- 66. Procaine Hydrochloride
- 67. " " Injection
- 68. " Tablets
- 69. Phenol, Crystal
- 70. "Liquid
- 71. " Disinfectant
- 72. Paste of Tar and Sulphur
- 73. Powder of Japanese Chiretta
- 74. Phenobarbital
- 75. " Tablets
- 76. Protein Silver
- 77. Potassium Bromide
- 78. Penicillin
- 79. Potassium Iodide
- 80. Pilocarpine Hydrochloride
- 81. Pyridin "B" Carbonic Diethylamide (Amino Cordin)
- 82. Pituitrin
- 83. Quinine Sulphate
- 84. " " Tablets
- 85. " Hydrochloride
- 86. " " Tablets
- 87. " Ethylcarbonate (Euichinin)
- 88. " " Tablets
- 89. " Iron
- 90. " " Ampules
- 91. " Injection.
- 92. Remijin (Ethyl Hydro Cuprein)
- 93. Sulfanilamide-methyltiazol Powder
- 94. " " Tablets
- 95. " Tiazol Powder
- 96. " " Tablets
- 97. " Guanidin Powder
- 98. " " Tablets
- 99. " Pyridine Powder
- 100. " " Tablets
- 101. " " Injection
- 102. Solution of Potassium Acetate.103. Sulfadiazine Powder (Sulfapridimine)
- 104. " Tablets
- 105. Sulfanilamide Powder
- 106. " Tablets
- 107. Sodium Chloride Solution Physiological
- 108. Simple Ointment.
- 109. Santonine
- 110. " Tablets
- 111. Sodium Salicylate
- 112. Sodium Bicarbonate
- 113. Sodium Bicarbonate Tablets
- 114. Soluble Saccharin
- 115. Solution of Formaldehyde
- 116. Scopolamine Hydrobtomide

- 117. Silver Nitrate
- 118. Thiantol
- 119. Theobromine w/Sodium Salicylate (Diuretine)
- 120. Theophylline w/Sodium Acetate (Theo Phyllol)
- 121. Zinc Oxide Powder
- 122. " " Ointment
- 123. " " in oil
- 124. "Sulphate.

#### SANITARY MATERIALS

- 1. Depurated Absorbent Cotton.
- 2. Absorbent Cotton
- 3. Sanitary Cotton
- 4. Gauze
- 5. Bandages
- 6. Abdominal Bandage
- 7. Triangular Bandage
- 8. Absorbent Lint.

## **Production**

The Welfare Ministry approved release of 10% DDT Dust and Typhus Vaccine as indicated below during the past week:

	Typhus Vaccine
Prefecture &/or Port	Quantity
Maizuru	350 vials
Tokyo	50,000 "
Osaka	60,000 "
Kanagawa	6,000 "
Miyagi	1,000 "
Hyogo	12,5000 "
Kyoto	2,520 "
	10% DDT
Prefecture &/or Port	Quantity
Miyagi	10,000 lbs.
Osaka	6,000 "
Ibaragi	3,000 "
Hakodate	10,000 "
Maizuru	20,000 "
Sasebo	20,000 "
Ujina	7,000 "
Hakata	2,000 "

The DDT products program shows continued satisfactory progress. Approximately 1,000,000 lbs. of 10% DDT Dust is now in stock.

## **Narcotics**

Reports have been received that some Japanese National Hospitals are holding large stocks of narcotics. With it is realized National Hospitals could probably justify holding a ten to twelve months' supply, if the proper security is provided, it is imperative that all excess stocks, including those in National Hospitals, be returned to local wholesalers and become part of the working stock of narcotics in Japan. The Ministry of Welfare has been instructed to direct inspections of National Hospitals and to take the proper action. Ministry Government teams

should assure that prefectural narcotic officials have returned excess narcotic stocks to local wholesalers. Records of consumption held by all registrants since June 1946 should be a suitable basis for determining the amounts required for a six to eight months' supply.

Control Regulations governing the growing of Marihuana (Cannabis Sativa L.) for fiber purposes in twelve prefectures have been drafted by the Ministry of Welfare and should be promulgated within a few days.

## SECTION VI PREVENTIVE MEDICINE

#### General

A staff visit to the island of Kyushu showed, the communicable disease situation to be satisfactory; the diphtheria immunization program had been brought to a good level; smallpox and typhus fever were at a low level and had so far not developed to a significant public health problem; the population had been revaccinated against smallpox during November and December. The majority of the prefectural health departments were already setting up plans for extensive typhoid vaccination and for measures to be undertaken against dysentery and cholera.

#### **Tuberculosis Controls**

At a meeting of the Japanese prefectural health officers, held in Tokyo, a lecture was given on the present status of the tuberculosis situation in Japan.

#### Maternal and Child Health

An inspection was made of the Imperail Gift Aiiku Kai Foundation, in regard to its activities in maternal and child health. This is the only institution in Japan, so far as is known, which offers facilities related to the mental health of children.

#### Typhus Fever Control

Comparative Score: - (includes figures of 27 Feb.)

1946 - 2999 1947 - 449

In order to determine a more accurate incidence of typhus fever in Japan it is necessary that complement fixation tests be performed on serum samples taken from patients in the second or third week of illness or during convalescence or recovery. We would like to receive a 10cc blood sample from each reported case of typhus fever that has occurred since 1 January 1947. The blood samples should be sent to Major T. O. Berge, 406th General Medical Laboratory, APO 500 as expeditiously as possible through the RTO or by courier. Blood collected should be allowed to separate either by clot formation or by centrifugation; properly labeled and iced if possible. Date accompanying each blood specimen should include: -

Date case reported

Name of case - age - sex

Locality (city, town, village and prefecture)

Vaccination against typhus. Yes or No. and Date

#### Sanitation

Plans for mosquito and fly control should be made now. Estimates of material and equipment required, worked out and requests submitted through supply channels. Materials left from last season should be checked. Emphasis should be put on environmental sanitation. By systematically cleaning up block by block, burying garbage and refuse, opening and cleaning drainage ways, much unemployed labor can be utilized and permanent insect and rodent control effected.

## Venereal Disease Control

The Venereal Disease Division of the Welfare Ministry has prepared REPORT CARDS which will be distributed to all physicians and clinics through the prefectural health departments.

Every physician making a diagnosis of a venereal disease will report the patient on this card. The cards will be sent to the local health centers who will then forward them to the prefectural health department. Every venereal disease patient whether under the care of a private physician or a public clinic will be reported.

Every patient's chart should have a space on it to indicate that a report card was forwarded. Date taken from these cards should aid the prefectural V. D. Control Officer in making out his monthly report of V. D. Control activities for the V. D. Division in the Ministry.

#### Port Quarantine

Port facilities in and around Yokohama were inspected to find a suitable location for the port quarantine activities of the Yokohama - Tokyo area. At the present time the Military Government Quarantine Officers at Yokohama operate from the Office of The Surgeon, Second Major Port.

90,000 repatriates are expected to be returned from Dairen in the month of March. To reduce the load on Sasebo, and to avoid the longer passage to Maizuru. The Hakata Reception Center is being reopened.

A program is under way to obtain chest plates on all incoming repatriates as a part of the current tuberculosis control campaign. The first of these units will use 35mm. x-ray film and will be put into operation at Sasebo within the near future.

A complete set of forms and declarations for use in Quarantine operations has been designed and assembled in Military Government Headquarters, Eighth Army. These forms will be released simultaneously with the Eighth Army Operational Directive covering SCAP Circular #10 "Foreign Quarantine Regulations for Japan" (28 Oct. 1946). Also available to Quarantine officers at that time will be detailed instructions regarding standard operating procedures at Air and Maritime Quarantine Stations.

The first of two lifts intended to complete the repatriation of German Nationals was made during the past month. One case of scarlet fever was reported among the 1200 repatriates sailing from Uraga aboard The Marine Jumper, 15 February 1947. A few cases of convalescent scarlet fever and whooping cough were also boarded.

Repatriation Stations now in operation are as follows:

Uraga Ujina Maizuru

Hakata (Reopened to process repatriates from Dairen

During the month of March).

Sasebo

## SECTION VII SOCIAL SECURITY

#### National Health Insurance

Petitions and requests have been informally received from several sections of Japan expressing the desires and wishes of the people for additional governmental assistance in providing facilities for improving preventive medicine and medical treatment programs through insurance. This is an indication of the attitude of the people regarding their interest in the health insurance program. Additionally, reports have been received from two towns where industrial and non-industrial activities were so interwoven through out the population that a coordinated program has been effectively functioning, involving Health and National Health Insurance, on a mutual basis.

## Pension and Workmen's Compensation

Tentative agreements have been obtained in coordinating the benefits received from Workmen's Compensation and Welfare Pension Insurance regarding occupational illness or injury. The arrangement will provide for continuous care for invalidity disability resulting from occupation. This in no way will affect the normal provisions provided by the Welfare Pension Insurance for old age or invalidity disability from cause other than Occupation.

## SECTION VIII MEDICAL SERVICE

Japanese Civilian Hospital Strength Report for the period ending 10 January 1947 shows 3,054 hospitals with a capacity of 216,864 beds, 97,195 of which were occupied. During this same period 253,432 outpatients were treated.

# SECTION IX VITAL STATISTICS

<u>Births</u>: The number of births (275,221) declared in January 1947 is the highest number recorded in the 7 months since the new reporting system went into effect, and represents an increase of approximately 50 percent over the number (183,965) declared in December. This, however, is in line with past experience. January was the peak month for births during the 10 year period 1934-1943, and the number ranged from 50 to more than 100 percent greater than the December number throughout this period. The birth rate per 1,000 population increased approximately 50 percent from 29.6 in December to 44.3 in January. The increase was general throughout the country and about the same in city and non-city areas.

<u>Deaths</u>: Deaths increased 15 percent from 102,103 in December to 117,489 in January. This too follows the pattern of previous years. The death rate increased approximately 15 percent from 16.4 to 18.9 per 1,000 population. The increase in the rate of city areas was nearly 25 percent and more than twice as great as in non-city areas where the rate increased only 11 percent.

<u>Infant Deaths</u>: The number of infant deaths (20,840) in January was nearly 25 percent greater than the number (16,739) in December. The infant death rate per 1,000 live births, however, declined approximately 17 percent from 91.0 to 75.7. This is explained by the fact that the relative increase in live birth was greater than the relative increase in infant deaths. The number of infant deaths in city areas increased more than 40 percent compared with an 18 percent increase in non-city areas.

<u>Stillbirths</u>: The number of still births increased 10 percent from 9,350 in December to 10,338 in January. The rate per 1,000 live births, however, declined more than 25 percent from 50.8 in December to 37.6 in January. This, too, is explained by the fact that the relative increase in live births was greater than the increase in stillbirths. As in the case of live births, the change in numbers and rates was about the same in both city and non-city areas.

<u>Marriages</u>: For the fourth consecutive month marriages increased and reached a new high point for the past 7 months. The number declared in January (72,760) was approximately 13 percent higher than the number (64,393) in December. The marriage rate per 1,000 population was 11.7 in January compared with 10.4 in December. The city rate increased only 7 percent from 9.0 to 9.6 and the non-city rate increased nearly 15 percent from 11.0 to 12.6.

<u>Divorces</u>: The number of divorces (6,649) in January remained about the same as in December (6,627). There was a slight decrease in divorces in city areas compensated by a slight increase in non-city areas. The divorce rates per 1,000 population remained the same; 1.1 for all Japan, 1.0 in city areas, and 1.1 non-city areas.

<u>Corrections</u>: Further November and December reports received too late to be included in the respective summaries are shown below:

Months & Prefecture	Birth	Death	Infant Death	Stillbirt h	Marriage	Divorce
November:						
Total	5	8	2	_	_	-
Kumamoto	5	8	2	-	-	-
December:						
Total	2	18	-	-	3	-
Tokyo	-	-	-	-	3	-
Tokushima	2	18	_	_	_	_

NUMBER OF BIRTHS, DEATHS, INFANT DEATHS, STILLBIRTHS, MARRIAGES

## AND DIVORCES REPORTED ACCORDING TO PREFECTURE, JANUARY 1947

Prefecture	Births	Deaths	Infant Deaths	Still <u>Births</u>	Marriages	Divorces
All Japan Total all	275,221	117,489	20,840	10,338	72,760	6,649
"Shi" Total all	82,673	37,062	6,223	3,542	18,120	1,888
"Gun"	192,548	80,427	14,617	6,814	54,640	4,761
Aichi	10,497	4,583	862	364	2,384	190
Akita	4,982	1,852	375	231	1,704	169
Aomori *	5,469	1,521	351	154	1,255	97
Chiba	7,963	3,290	649	264	1,725	114
Ehime	5,467	2,190	374	172	1,559	147
Fukui	2,412	1,105	189	86	692	89
Fukuoka	12,445	5,041	890	436	3,067	306
Fukushima	6,265	2,765	515	253	2,052	234
Gifu	4,933	2,173	348	159	1,374	134
Gumma	5,868	2,102	377	231	1,450	91
Hiroshima	7,778	2,975	474	260	2,200	220
Hokkaido	14,851	5,439	1,193	540	3,333	267
Hyogo	10,087	4,611	730	417	2,446	253
Ibaraki	7,215	2,923	620	302	1,497	120
Ishikawa	3,844	1,424	278	135	1,178	120
Isiiikawa	3,044	1,424	278	155	1,170	122
Iwate	4,445	1,933	460	185	1,333	162
Kagawa	3,671	1,556	322	125	875	91
Kagoshima	6,022	2,874	401	211	1,700	197
Kanagawa	7,104	2,782	492	270	1,452	132
Kochi	3,131	1,458	191	85	864	111
Kumamoto	6,763	2,690	427	250	1,873	177
Kyoto	5,322	2,741	400	193	1,121	147
Mie	4,622	2,478	454	172	1,193	94
Miyagi *	5,768	2,009	385	219	1,755	117
Miyazaki	4,331	1,581	327	166	1,035	104
Nagano	6,244	2,639	405	280	2,016	132
Nagasaki	5,548	2,805	422	174	1,769	141
Nara	2,251	1,330	228	88	639	65
Niigata	7,779	3,128	469	371	3,709	239
Oita	4,695	2,189	415	176	1,222	102
Okayama	5,880	2,797	498	231	1,434	147
Osaka	9,752	5,254	827	479	1,994	240
Saga	3,625	1,709	367	88	970	97
Saitama	8,313	3,085	591	348	2,021	105
Shiga	2,671	1,586	234	94	698	84
Siliga	2,071	1,360	234	94	098	04
Shimane	3,393	1,471	222	135	912	113
Shizuoka	8,155	3,345	541	285	2,233	214
Tochigi	5,586	2,047	370	215	1,429	104
Tokushima	3,190	1,582	266	157	815	61
Tokyo	14,617	6,888	1,314	554	3,029	253
Tottori	2,018	804	118	96	611	53

Toyama	4,394	1,448	326	115	1,481	149
Wakayama	2,867	1,582	209	92	835	89
Yamagata	4,396	1,950	390	179	1,579	145
Yamaguchi	5,694	2,507	356	208	1,492	149
Yamanachi	2,898	1,247	188	93	755	82

Japanese source: Cabinet Bureau of Statistics.

BIRTH, DEATH, INFANT DEATH, STILLBIRTH, MARRIAGE AND DIVORCE RATES ACCORDING TO PREFECTURE, JANUARY 1947

	Birth*	Death*	Infant	Stillbirth	Marriage*	Divorce *
<u>Prefecture</u>	Rate	Rate	Death	Rate**	Rate	Rate
			Rate**			
All Japan	44.3	18.9	75.7	37.6	11.7	1.1
Total all						
"Shi"	43.8	19.7	75.3	42.6	9.6	1.0
Total all						
"Gun"	44.5	18.6	75.9	35.4	12.6	1.1
Aichi	42.3	18.5	82.1	34.7	9.6	0.8
Akita	49.1	18.2	75.3	46.4	16.8	1.7
Aomori	59.1	16.4	64.2	28.2	13.6	1.0
Chiba	46.7	19.3	81.5	33.2	10.1	0.7
Ehime	46.6	18.7	68.4	31.5	13.3	1.3
Fukui	40.8	18.7	78.4	35.7	11.7	1.5
Fukuoka	50.5	20.5	71.5	35.0	12.4	1.2
Fukushima	38.4	17.0	82.2	40.4	12.6	1.4
Gifu	40.2	17.7	70.5	32.2	11.2	1.1
Gumma	45.3	16.2	64.2	39.4	11.2	0.7
Hiroshima	48.2	18.4	60.9	33.4	13.6	1.4
Hokkaido	50.1	18.4	80.3	36.4	11.3	0.9
Hyogo	42.0	19.2	72.4	41.3	10.2	1.1
Ibaraki	43.8	17.7	85.9	41.9	9.1	0.7
Ishikawa	51.6	19.1	72.3	35.1	15.8	1.6
Iwate	43.0	18.7	103.5	41.6	12.9	1.6
Kagawa	49.6	21.0	87.7	34.1	11.8	1.2
Kagoshima	43.5	20.8	66.6	35.0	12.3	1.4
Kanagawa	41.4	16.2	69.3	38.0	8.5	0.8
Kochi	46.2	21.5	61.0	27.1	12.8	1.6
	40.0					
Kumamoto	48.8	19.4	63.1	37.0	13.5	1.3
Kyoto	38.6	19.9	75.2	36.3	8.1	1.1
Mie	39.7	21.3	98.2	37.2	10.2	0.8
Miyagi	46.4	16.2	66.7	38.0	14.1	0.9
Miyazaki	53.2	19.4	75.5	38.3	12.7	1.3
Nagana	26.0	15.0	C4.0	4.4 O	117	0.0
Nagano	36.2	15.3	64.9	44.8	11.7	0.8
Nagasaki	46.1	23.3	76.1	31.4	14.7	1.2
Nara	35.6	21.0	101.3	39.1	10.1	1.0
Niigata	39.4	15.8	60.3	47.7	18.8	1.2
Oita	48.2	22.5	88.4	37.5	12.5	1.0
Olzavama	45 O	21.4	017	20.2	11.0	1 1
Okayama	45.0	21.4	84.7	39.3	11.0	1.1
Osaka	38.6	20.8	84.8	49.1	7.9	0.9

<sup>\*</sup> Report includes all declarations made for 1 Jan to 31 Jan and declarations of January events filed from 1 Feb - 15 Feb. Reports for all other prefectures include only declarations filed during January.

Saga	49.8	23.5	101.2	24.3	13.3	1.3
Saitama	48.2	17.9	71.1	41.9	11.7	0.6
Shiga	37.8	22.5	87.6	35.2	9.9	1.2
Shimane	47.1	20.4	65.4	39.8	12.6	1.2
Shizuoka	42.5	17.4	66.3	34.9	11.6	1.1
Tochigi	43.7	16.0	66.2	38.5	11.2	0.8
Tokushima	45.3	22.5	83.4	49.2	11.6	0.9
Tokyo	41.1	19.4	89.9	37.9	8.5	0.7
Tottori	42.6	17.0	58.5	47.6	12.9	1.1
Toyama	55.5	18.3	74.2	26.2	18.7	1.9
Wakayama	36.2	20.0	72.9	32.1	10.5	1.1
Yamagata	40.0	17.7	88.7	40.7	14.4	1.3
Yamaguchi	48.7	21.5	62.5	36.5	12.8	1.3
Yamanashi	42.8	18.4	64.9	32.1	11.2	1.2

<sup>\*</sup> Per Annum rates per 1,000 population.

# SECTION X CONSULTANTS

## **Nutrition**

The initial report on the February Nutrition Survey for the food consumption of Tochigi (rural) prefecture has been submitted by the Japanese Ministry of Welfare. Comparison with the November Data indicated a decrease in the sweet potatoes and leafy green yellow vegetables consumed.

Following are tables on the activity of members of Japanese families studied in the November Nutrition Surveys in terms of percentages of adult male unite for various degrees of activity for male and females. Included are nine cities, twenty-seven prefectures and coal mines.

## Nutrition Survey in Japan - 1946

Activity of all members of Japanese families studied in nutrition surveys in terms of the percentages of adult male units for various degrees of activity for males and females of different ages based on the total number of persons examined. Adult male unit of 1.0 and 0.8 represent a moderately active degree of work for men and women respectively.

## NINE CITIES \*

MALES -	Number	examined:	17 154

Degree of Activity Number	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
of Persons	273	316	427	1332	1174	2487	4233	3930	1036	959	926	59
Percent of Total	1.591	1.842	2.489	7.765	6.844	14.498	24.676	22.910	6.051	5.591	5.398	0.34

## FEMALES - Number examined: 17,826

0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
275	301	412	2754	3336	7491	2497	508	219	30	3	0
.543	1.689	2.311	15.449	18.714	42,023	13.991	2.850	1.229	0.168	0.017	0
	275	275 301	275 301 412	275 301 412 2754	275 301 412 2754 3336	275 301 412 2754 3336 7491	275     301     412     2754     3336     7491     2497	275 301 412 2754 3336 7491 2497 508	275 301 412 2754 3336 7491 2497 508 219	275 301 412 2754 3336 7491 2497 508 219 30	275 301 412 2754 3336 7491 2497 508 219 30 3

<sup>\*\*</sup> Per Annum rates per 1,000 live births.

TOTAL - Number examined: 34,980

Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
Number of												
Persons	548	617	839	4086	4510	9978	6730	4438	1257	989	929	59
Percent												
of Total	1.566	1.764	2.398	11.681	12.893	28.524	19.240	12.687	3.593	2.827	2.656	0.10

<sup>\*</sup> Tokyo, Nagoya, Osaka, Kure, Fukuoka, Sapporo, Sendai, Kanazawa, and Matsuyama.

## 27 PHEFECTURES \*

MALES - Number examined: 23,675

Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
Number of												
Persons	348	465	619	1748	1743	2445	2461	3475	886	2508	6305	678
Percent												
of Total	1.470	1.964	2.615	7.383	9.362	10.327	10.395	14.678	3.742	10.593	26.631	2,863

FEMALES - Number examined: 25,084

Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
Number of												
Persons	327	476	587	3300	3210	5145	3922	6150	1791	138	29	9
Percent												
of Total	1.304	1.898	2.340	13.156	12.797	20.511	15.635	24.518	7.140	0.550	0.116	0.036

TOTAL - Number examined: 48,759

Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
Number of												
Persons	675	941	1206	5048	4963	7590	6383	9625	2677	2646	6334	681
Percent												
of Total	1.384	1.930	2.473	10.353	10.158	15.566	13.091	19.740	5.490	5.427	12.991	1.397

<sup>\*</sup> Ibaraki, Tochigi, Gumma, Saitama, Chiba, Tokyo, Kanagawa, Shizuoka, Aichi, Shiga, Kyoto, Osaka, Hyogo, Wakayama, Okayama, Hiroshima, Fukuoka, Saga, Kumamoto, Hokkaido, Iwate, Miyagi, Toyama, Ishikawa, Fukui, Ehime, Kochi.

# COAL MINES \*

MALES - Number examined: 1815

Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
Number of												
Persons	52	49	56	184	173	247	174	106	85	127	304	258
Percent												
of Total	2.865	2.710	3.085	10.138	9.532	13.609	9.587	5.840	4.683	6.997	16.749	14.215

## FEMALES - Number examined: 1703

Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
Number of												
Persons	44	31	55	265	322	503	278	107	87	9	2	0
Percent	2.584	1.820	3.230	15.561	18.908	29.536	16.324	6.283	5.109	0.528	0.117	0

of Total

TOTAL - Number examined: 3518

Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	1.3	1.4
Number of												
Persons	96	80	111	449	495	750	452	213	172	136	306	258
Percent												
of Total	2.729	2.274	3.155	12.763	14.070	21.319	12.848	6.055	4.889	3.866	3.698	7.334

<sup>\*</sup> Hokkaido - Bibai Coal Mine Fukushima - Joban Coal Mine

Fukuoka - Miile and Yamano Coal Mines

## SECTION XI MEMORANDUM TO IMPERIAL JAPANESE GOVERNMENT

PHMJG-11 26 Feb 47 - Estimated Requirements of Dangerous Drugs, 1947, Japan - Supervisory Body, United Nations.

CRAWFORD F. SAMS
Colonel, Medical Corps,
Chief, Public Health and Welfare Section

## 3 Incls

- 1. Weekly Summary Report of Cases and Deaths from Communicable Diseases in Japan week ending 22 February 47, w/Digest.
- 2. Venereal Diseases Report for week ending 22 February 47.
- 3. Summary of Cases and Deaths from Communicable Diseases in Japan for four week period ending 22 Feb 47, w/Digest.