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

WEEKLY BULLETIN

For Period 6 April – 13 April 1947 Number 15

SECTION I - Welfare

SECTION II - Veterinary Affair

SECTION III - Dental affairs

SECTION IV - Nursing Affairs

SECTION V- Supply

SECTION VI- Preventive Medicine

SECTION VII- Social Security

SECTION VIII- Medical Services

SECTION IX- Vital Statistics

SECTION X- Consultants

SECTION XI - Memorandum to I.J.G.

SECTION I WELFARE

General

Monsignor Edward J. Flanagan of Boy's Town, Nebraska is expected to arrive in Tokyo on 16 or 17 April 1947.

As a consultant to SCAP, Father Flanagan will devote his full time to conferences with Japanese Welfare agencies active in programs involving the rehabilitation of orphans and abandoned children. It is also anticipated that his presence and work here will serve to call general public attention to the difficult position of orphaned and neglected children in Japan at the present time. Out of this interest, community organizations can be developed that will permanently serve to encourage local action for the betterment of the condition of orphaned and homeless boys and girls.

Public Assistance

PUBLIC ASSISTANCE PREFECTURAL REPORTS February 1947

	No. of Persons	No. of Persons	Cost of Assistance	Cost of Assistance
Prefecture	Non-institutional	in Institutions	in Cash	in Kind
Aichi	91,996	5,164	yen 5,932,351	yen 189,997
Akita	52,907	1,643	2,653,469	
Aomori	46,638	1,853	2,338,979	9,826
Chiba	37,435	2,493	2,420,372	45,217
Ehime	38,470	642	2,224,125	2,577,104
Fukui	62,741	2,899	2,701,479	97,742
Fukuoka	110,751	1,470	3,259,329	1,102,953
Fukushima	86,563	1,141	3,891,049	200,135
Gifu	77,697	3,008	3,069,218	2,669,503
Gumma	65,758	614	3,956,267	116,765
Hiroshima	62,699	3,631	3,980,750	227,491
Hokkaido	66,399	3,056	5,265,362	247,090
Hyogo	101,845	1,919	7,034,670	23,902
Ibaragi	52,946	1,919	2,734,346	70,100
Ishikawa	30,272	1,321	2,013,062	85,348
Iwate	54,228	196	2,746,678	112,648
Kagawa	26,227	4,640	1,420,557	258,135
Kagawa Kagoshima	136,152	169	5,529,605	534,428
Kanagawa	46,272	3,770	4,020,349	286,762
Kanagawa Kochi	31,340	551	2,333,710	1,309,375
Kumamoto	44,493	690	2,475,597	1,507,575
Kyoto	79,385	3,426	5,502,114	168,767
Mie	39,078	403	2,393,421	385,442
Miyagi	59,854	803	2,517,537	66,264
Miyazaki	39,357	327	1,804,050	567,664
Nagano	92,430	720	4,592,730	241,978
Nagasaki	41,291	484	2,398,382	211,570
Nara	22,264	298	1,463,527	30,791
Niigata	70,240	6,666	4,605,726	160,074
Oita	22,988	2,181	1,107,601	4,327,633
Okayama	41,888	3,713	2,592,094	71,705
Osaka	81,244	9,644	6,988,889	20,660
Saga	32,870	180	2,002,630	1,609,773
Saitama	65,908	605	3,074,158	502,175
Shiga	28,436	320	1,009,337	
Shimane	36,095	1,258	2,623,999	1,140,379
Z.IIIIIIII	No. of Persons	No. of Persons	Cost of Assistance	Cost of Assistance
<u>Prefecture</u>	Non-institutional	in Institutions	in Cash	in Kind

Shizuoka	63,709	3,451	yen	4,315,182	yen	70,747
Tochigi	38,650	298	•	2,148,522	•	237,100
Tokushima	30,832	448		1,681,255		156,074
Tottori	30,591	504		3,296,762		71,319
Toyama	40,015	553		2,598,147		18,337
Wakayama	29,920	94		1,684,916		74,737
Yamagata	58,652	439		4,284,582		114,284
Yamaguchi	49,305	2,627		3,600,181		334,820
Yamanashi	22,310	142		1,414,935		259,760

Licensed Agencies for Relief in Asia (LARA)

During the past few months, new personnel have been attached to Military Government Teams and the following statement on LARA is presented for their information and guidance.

Licensed Agencies for Relief in Asia (known as LARA) was organized in March 1946 by the Committees of Japan and Korea of the American Council of Voluntary Agencies for Work Abroad (ACVA) as a committee to coordinate all voluntary agencies seeking to do relief work in the occupied countries of Asia.

Contributions for Japan from November 1, 1946 - April 1, 1947 approximates one million dollars in value and consists of non-perishable food, clothing and medicine.

Two LARA representatives, Father Michael J. McKillop and Miss Esther B. Rhoads arrived in Tokyo June 1946. An agreement was reached with SCAP permitting the importation by LARA of relief supplies (up to 2,000 tons a months) to be distributed through "existing channels" by the Japanese Government.

The responsibility of administering the LARA program has been placed in the hands of the Social Affairs Bureau of the Ministry of Health and Welfare. This Bureau has in turn set up an advisory committees (called the LARA Central Committee) of 20 public and private welfare workers who meet with representatives of SCAP, 8th Army, LARA and the Ministry of Health and Welfare.

This committee has studied needs and selected certain projects. The lack of milk for babies whose mothers cannot feed them, the need of more food in orphanages so that the war waifs can be kept off the streets, the lack of food for Tubercular patients, the need of the handicapped, clothing for repatriates and other war sufferers and the school lunch program have all claimed the attention of the committee.

Geographic areas of greatest need have also been studied by this committee using the findings of SCAP and the Japanese Government.

All distribution is on the basis of need without respect to birth, religion or political affiliation. Most of the recipients are children under 13 years of age.

Because of the great danger of LARA goods getting into the black market, most of the supplies are distributed to institutions rather than to families or individuals. Each institution selected is recommended, by prefectural bureaus of welfare, as being able to administer the supplies impartially.

LARA Operations

The LARA representatives are notified that a shipment is on the way. The Japanese Ministry of Health and Welfare is, upon arrival of the shipment, solely responsible for warehousing and transportation and a LARA representative as consignee meets the boat, and turns the shipment over to the Ministry of Public Health and Welfare. The supplies are trucked to a special four story warehouse in Yokohama where they are classified and checked for loss.

The LARA Committee works out a general plan of allocation for approval by SCAP and the Ministry of Health and Welfare. The prefectures included in the allocation are then notified that they may recommend institutions to receive supplies. These recommendations are reviewed by the Central Committee and when approved, the shipments are made.

In order to maintain a unity of the programs a Japanese Welfare official of each prefecture has been called to a conference in Tokyo and the LARA program explained in detail. The agenda includes an explanation of LARA, the motivation of the sending agencies, program in Japan, and emphasis placed on security and proper use of supplies.

These Japanese officials return to their respective prefectural Welfare Bureaus and prepare the list of institutions for approval by the LARA Committee and the Ministry of Health and Welfare. Next, a conference is held in each prefecture where representatives of the institutions to receive supplies are called together for a conference and discussion of the program. An official of the Ministry accompanied by a LARA representative participates in these conferences and the local Military Government should be represented.

The LARA representative making such visits checks with the Military Government, allows time for consultation with the Welfare Officer, attends the conference, meets local Japanese welfare officials and workers, visits a few representative institutions and sees that warehousing is adequate.

The supplies are then distributed. To prefectures in the Tokyo-Yokohama area, supplies are sent direct by truck to the using agencies. To the prefectures more distant, they go by special sealed freight and are met by welfare officials and the warehouse company (Mitsui) representatives who have been notified by wire. The breakdown is then made at the local warehouse according to the plan worked out in advance and distribution made by the Mitsui Company on behalf of the Japanese Government. All expenses of distribution in Japan are borne by the Ministry of Health and Welfare.

Outline of LARA Projects

1. Social Welfare Institutions

- a. Sustained Programs
 - 1. Milk for babies whose mother cannot feed them. Distributed through carefully selected hospitals, clinics and institutions caring for abandoned or sick infants. Total of 6000 babies.
 - 2. Supplemental ration of 500 calories a day to children in orphanages. Distributed once in 3 months with a review at the beginning of each period. Total 15,000 children.
 - 3. Supplemental ration of 500 calories a day to T.B. Sanatoria emphasizing preventative and incipient care. Total 6,000 T.B. patients.

b. Special Programs

- 1. Gift of 5 1bs. of food and some clothing to war sufferers and repatriates living in hostels or camps where there is adequate supervision.
- 2. A slightly larger contribution to persons in selected leprosaria, homes for deaf, blind and aged.
- 3. Emergency relief supply grants made after clearance with other agencies to avoid overlapping, such as allocation of milk and clothing to earthquake area in January and similar grants to centers receiving repatriates at the parts of Sasebo, Maizuru and Hakkodate.

2. School Lunch Program

Allocation handled by Ministry of Education and combined with food from Japanese sources.

- 3. <u>Distribution of Medical Supplies</u> through about 40 selected hospitals and clinics in 8 cities.
- 4. <u>Distribution of clothing</u> to persons in projects listed above and through other authorized channels such as a distribution by the Tokyo Education Bureau of over 12000 pairs of underdrawers and socks to the neediest teachers of Tokyo.

Out of LARA Distribution

Note: Areas for distribution are divided into 4 groups, namely A, B, C and D on the basis of most urgent (A) to areas of less need (D).

December 1946

1st allocation of food to Group "A" areas

Tokyo 183 Institutions 22,535 Persons 207,237 Pounds

Kanagawa	43	IJ	2,792	IJ	55,090	"
Aichi	58	IJ	7,200	IJ	55,090	"
Kyoto	35	IJ	2,461	IJ	48,259	IJ
Osaka	75	IJ	9,724	IJ	110,280	IJ
Hyogo	45	IJ	2,344	IJ	43,241	"
Hiroshima	20	IJ	1,663	IJ	18,153	"
Nagasaki	28	IJ	907	IJ	9,971	"

January-February 1947

- 1. Earthquake relief to Wakayama, Kochi, Tokushima (Milk and clothing about 9 tons)
- 2. Repatriate relief at ports Sasebo, Maizuru, Hakkodate (Milk and clothing).
- 3. Clothing distribution in Group A areas through nearby institutions.
- 4. School Lunch Program in Tokyo, Kanagawa and Chiba Ken. 220,000 lbs. to 820 schools feeding 669,521 children. This Supplemental ration is combined with food from Japanese sources.

February-March 1947

1st allocation to Group "B" areas

1. Hokkaido	4. Saitama	7. Ibaragi	10. Okayama
2. Niigata	5. Chiba	8. Tochigi	11. Fukuoka
3. Miyagi	6. Shizuoka	9. Mie	12. Kagoshima

Approximately 2,000 babies, 4,000 children in institution, 2,000 T.B. patients, 16,000 special. (Supplies total approximately 200 tons)

April 1947

School lunch allotments doubled for Spring Term $(400,000\ 1bs)$

Group C First allocation now being planned Delivery during April

1. Aomori	6. Gifu	11. Shiga	16. Ehime		
2. Fukushima	7. Toyama	12. Wakayama	17. Kumamoto		
3. Kochi	8. Ishikawa	13. Yamaguchi			
4. Gumma	9. Fukui	14. Tokushima			
5.Yamanashi	10. Nagano	15. Kagawa			
(Estimated total 100 tons)					

SECTION II VETERINARY AFFAIRS

Animal Disease Report

The Ministry of Agriculture and Forestry (Bureau of Animal Industry) reported the following new outbreaks of animal disease during the period 6-12 April 1947.

<u>Prefecture</u>	<u>Disease</u>	No. Cases
Fukuoka	Anthrax	1
Kumamoto	Blackleg	1
Kumamoto	Texas Fever	17
Chiba	Swine Erysipelas	1

SECTIONIII DENTAL AFFAIRS

Recently formed the "Nippon Dental Dealers' Association" comprises some 600 members throughout the nation. The announced purpose of the organization is to assure equable and free distribution of dental supplies and to render a better service to the practitioners.

SECTION IV NURSING AFFAIRS

The one month refresher course for Nursing Education Leaders, held at the Red Cross Hospital was completed 10 April 1947. Certificates were issued to 41 of the prefectural representatives who completed the full course.

A representative of the Nursing Affairs Division attended the prefectural meeting in Tottori.

SECTION V SUPPLY

Distribution

The Welfare Ministry issued a directive No.146 Raku, Setsu, Kei, Go, from the Director of Bureau of Medical Treatment, to all Governors, 13 February, pertaining to the establishment of medical facilities and procurement of medical supplies for the treatment of Japanese Nationals employed for the Occupation Forces.

The directive in general provided for the following:

Medical supplies to be furnished each established dispensary.

Each established or, to be established dispensary, will be provided with a basic list of medical supplies and furniture. Items which are not on the basic list may be requisitioned if required.

Doctors will be furnished by the governor or his representative in the prefecture concerned.

Each dispensary or clinic will have a full time nurse on duty.

The recruiting and assigning of nurses will be the responsibility of the prefectural Governors, or his authorized agent.

Officials responsible for the payment of doctors, nurses and medical supplies will be the prefectural governor who is a disbursing officer, or the Director of the Local Liaison in the case of a local district.

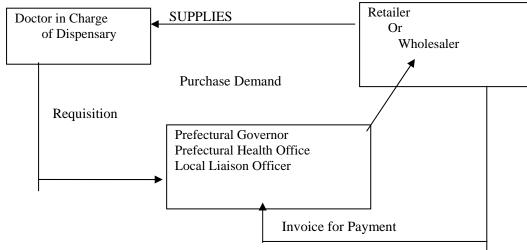
The expenditures will be made from the following:

Expenditures involving medical supplies will be drawn from Miscellaneous Equipment Expenses included in the Post-War Disposal Fund.

Doctors and nurses will be paid out of Miscellaneous Allowances included in Post-War Disposal Fund.

Doctors operating dispensaries will submit their requirements for medical supplies to the prefectural health office, who will procure them, and see that they are delivered to the requesting dispensary, and forward the invoice for payment to the Prefectural Government, or Director of the Local Liaison office for payment thereof.

The following drawing is the flow chart pertaining to the above:



Reports from the field indicate that the prefectural officials when reporting to the Welfare Ministry on matters pertaining to supply and narcotic control, are not always able to contact the proper officials and as a result, quite often do not accomplish their mission. Following are the supply officials in the Welfare Ministry:

Mr. H. Kamiya - Chief Pharmaceutical Affairs Section (Distribution and manufacture of miscellaneous equipment)

Mr. I. Keimatsu - Chief Drug Manufacturing Unit (Manufacture of medicines and insecticides)

Mr. H, Kamiya – Acting Chief Narcotic Section (Narcotic Control)

The Welfare Ministry issued comprehensive instructions to Prefectural Governors on 20 March 1947(No. 22, S.B) on the subject of "Distribution of Former Japanese Military Clothing". These instructions supplement Notification No.1,009 S.B., 2 December 1946 issued by Director, Social Bureau, Welfare Ministry and Director, Investigation Bureau, Home Ministry and set a target date of 30 April 1947 for completion of distribution.

Production

The Welfare Ministry approved releases of DDT products and typhus vaccine during week as follows:

FO/ DDT Dagidual

Prefecture	10% DDT Dust	Typhus Vaccine	Effect Spray
Yamaguchi	2,000 1bs		
Akita	30,000 1bs		
Shizuoka		2,592 Vials	
Aichi			3,000 gallons
Hokkaido			15,000 gallons

Narcotics

Thefts of narcotics reported in Japan for the month of February show a decided decrease, from 52 thefts reported in January to 29 reported in February. This decrease is partially due to the emphasis placed upon the safeguarding of narcotic stocks by registered persons and hospitals, and of their purchase of narcotic supplies in small quantities as needed, rather than quantities for several months in a single order. Also, partially due to instructions issued to hospitals to allow their narcotic stocks to be inspected only by persons presenting the correct authorization to do so, thus eliminating inspections by bogus inspectors resulting in thefts from hospital stocks.

Violations and arrests of registered and non-registered persons indicates a trend from the registered to the non-registered persons, tending to show that physicians, pharmacist and hospitals are becoming more acquainted with the provisions of the Narcotic Laws and are complying with these regulations; and that the majority of future narcotic violations will be committed by addicts in efforts to relieve their addiction and by persons purchasing and selling narcotics for a monetary consideration. Records of narcotic violations indicate 31 registered persons and 18 non-registered persons arrested in January 1947 as compared to 18 registered and 45 now registered arrested in February.

SECTION VI PREVENTINE MEDICINE

Typhus Fever Control

Comparative Score (includes cases of 10 April)

1946 - 17246 1947 - 626

Typhus Outbreak

A minor outbreak of typhus fever has occurred at a large poor farm in the Tokyo area. Twenty-seven (27) suspected cases have been reported – inmates were found to be 1 ouse-infested. Blood is being tested to determine if epidemic or murine typhus or both are present. No secondary cases have been reported outside the institution as yet!

This emphasizes the fact that we are still in the typhus season and that an epidemic of sizeable proportions is still possible. An excellent job has been bone to date, but this recent outbreak in Tokyo should make all concerned realize that typhus control efforts should not be relaxed.

The Ministry of Welfare will, by telegram, remind all prefectures to carry out to the fullest extent typhus control procedures with emphasis o Poor Farms, Orphanages, Vagrant homes, jails prisons and similar institutions.

Blood Samples

The cooperation in the task of collecting and submitting blood samples for complement fixation tests for typhus fever is gratifying. Some lots have been completed. Other lots received are undergoing a screening process to rule out the negatives by use of a soluble antigen. Final results will be furnished at the earliest possible time.

Campaign against head lice in school children

Plans have been completed and the contemplated nation-wide campaign against head lice will soon be underway.

Venereal Disease Control

The Disease Prevention Bureau of the Welfare Ministry has agreed to support 118 venereal disease treatment clinics in existing health centers and 50 similar clinics in various public hospitals by 1 July 1947. Since we already have more than this number in operation, it indicates national support of this work.

The Osaka Health Department was assured 1,650,000 yen by the Ministry, which represents one-third of their budget for the next year for venereal disease control.

The Disease Prevention Bureau of the Welfare Ministry has been advised of the following salient features which should be included in a venereal disease control program for the nation. These points have been translated and will be distributed to the prefectural health departments.

NATIONAL PROGRAM FOR VENEREAL DISEASE CONTROL

The Welfare Ministry is responsible for planning and coordinating a comprehensive program for the prevention, control, and cure of venereal disease for all the people of Japan.

- 1. Provide financial support and professional stimulation, leadership and guidance to the prefectural health department authorities in the development of preventive and curative facilities for venereal disease control for the general public.
- 2. Initiate and direct education, information, and further training for public health venereal disease control physicians in order to raise professional techniques to modern acceptable levels, and to inculcate public health methods of venereal disease control.
- 3. Initiate, direct, and conduct a continuous campaign of sound public education in venereal disease control to tell the people what the venereal disease are, how they are transmitted, how they can be prevented, and stressing the availability of free, public, diagnostic and treatment centers.

4. Provide capable laboratory personnel and adequate laboratory facilities for the laboratory diagnosis of these diseases, and to aid the prefectural health departments in the development of similar diagnostic laboratories.

Conferences were held with the branch managers in each office and there were many indications of the personal initiative, industry and interest of the managers in achieving progressive improvement of the social insurance program. Although serious problems exist as to medical care for insurance beneficiaries, the branch offices have taken original and active steps to remedy the situation in some degree. In an attempt to solicit the cooperation of the 271 doctors in his district, one manager urged them to form a committee or association to consider the problems of the doctors and the social insurance beneficiaries. Such an association has been formed by 80 of the doctors who meet monthly and evidence a genuine interest in the questions involved.

A large share of the permanent insurance records were burned during bombings but, in the course of a year, secondary evidence has been obtained from employers and the records are now virtually replaced.

Every branch office manager brought out the serious need for an adequate informational service to acquaint the public with the social insurance program. Numerous instances were cited showing almost all criticisms of the program were due to misunderstanding and misinformation. Representative meetings with employers' associations and labor unions, were said to result in general cooperation and support on the part of those to whom the principles of the laws were explained. It is known that many benefits are lost or forfeited through lack of knowledge and the cost of administration could be substantially diminished through well organized dissemination of headed information.

Mutual Aid Associations

The Mutual Aid Associations are a type of social insurance, but operated separately by the Government departments and restricted to their own employees. These Associations have not been under the supervision or control of the Insurance Bureau of the Ministry of Welfare, but have operated independently. The Salary Allowance Division of the Ministry of Finance is the only Government department to which the Associations make any financial reports. There are some Associations of a similar type being operated by municipal governments for their employees, in cities other than Tokyo. The mutual aid insurances provide health, pension and survivors' benefits. A study has been initiated with a view toward coordinating and possible unification of those various systems into an over-all Government employee insurance.

The former Naval Mutual Aid Association (Navy Department employees) is in the process of being dissolved. A request has been made by the Association that the Insurance Bureau of the Ministry of Welfare assume operational control of the Association for the purpose of continuing the benefits provided by previous contributions. This Association has a number of former naval mutual aid hospitals which are a part of its assets. It is possible that these hospitals will become a part of the coordinated national hospital system and associated with the Health Insurance program.

Health Insurance

The Health Insurance Law provides that a portion of the reserve fund may be used for establishing hospitals and clinics where there is a lack of adequate medical service facilities. For the past two years, this fund has been conserved, but it is possible that a part of the fund may be available during the year. Additional information is now being compiled as to where hospitals and clinics are critically needed for improving the Health Insurance program.

Conferences have been held regarding fee-foe-service rate to doctors serving insurance patients. An effort is being made to increase this rate with a view toward improving the relationship between doctor and insured patient. It may, however, be delayed due to the possibility of a change in the cost of medical supplies. A new rationing system now being developed for the distribution of medical supplies should greatly improve the medical service for members of the Health and National Health Insurance Program.

SECTION VIII MEDICAL SERVICE

Japanese Civilian hospital Strength Report for the period ending 21 February 1947 shows 3,089 hospitals with a capacity of 217,761 beds, 110,385 of which were occupied. During this same period 285,065 outpatients were treated.

Medical Education

At a recent special three day session of the Japan Council on Medical Education, the problem of premedical education was discussed at great length. The Council voted unanimously to present the following recommendations to the Ministry of Education reaffirming previous recommendations made in August of 1946.

- (1) Minimum requirements for entrance into medical school should be three years of a university or college level liberal arts course, including certain science courses considered basic to the study of medicine.
- (2) A school normally offering liberal arts education on a university or college level should prepare students for medical school. Preparatory courses set up for the purpose of satisfying only the minimum basic medical requirements should be eliminated.

SECTION IX VITAL STATISTICS

Conferences on Vital Statistics and registration problems were held in Takamatsu, Kochi, Matsuyama, Kure and Hiroshima with Japanese Government officials. They were attended by prefectural court, health and statistical representatives.

SECTION X CONSULTANTS

Legal

Action was taken to revoke the license of a medical impostor. He had been granted a medical license by the Welfare Ministry upon his representation that he was a graduate of Johns Hopkins University which was found to be untrue.

Nutrition

The Japanese Nutrition Conference held in Yamaguchi City, April 7-8, was attended by representatives of SCAP, and two Japanese members of the Ministry of Welfare, Tokyo.

Yamaguchi City and surrounding area, with the assistance of the Military Government officers, have undertaken a plan of supplying a school lunch to the children. They have also initiated nutrition surveys aside from those conducted by the Japanese Ministry of Health.

SECTION XI MEMORANDUM TO IMPERIAL JAPANESE GOVERNMENT

None

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

2 Incls:

- 1. Weekly Summary Report of Cases and Deaths from Communicable Disease in Japan, week ending 5 April 1947 w/digest.
- 2. Venereal Disease Report for week ending 5 April 1947.

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

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SECTION VII- Social Security
SECTION VIII - Medical Services
SECTION IX - Consultants
SECTION X - Memorandum to I.J.G.

SECTION I WELFARE

General

The Japanese Government has submitted to PHW, SCAP for study and suggestions, a draft of a National Disaster Plan. The plan sets responsibility for action and will make funds available at the national government level. Further reports as to its progress and content will be reported in the Weekly Bulletin.

SECTION II VETERINARY AFFAIRS

Animal Disease Report

The Ministry of Agriculture and Forestry (Bureau of Animal Industry) reported the following new outbreaks of animal disease the period 13-19 April 1947:

<u>Prefecture</u>	<u>Disease</u>	No. Cases
Nagano	Anthrax	1

SECTION III DENTAL AFFAIRS

The Council on Dental Education established a Committee on Textbook Revision and a committee to study procurement of supplies for dental schools. A committee for improving the method of teaching the basic science subjects was also appointed.

SECTION IV NURSING AFFAIRS

Surveys of Schools of Nursing

All 46 prefectures have now been surveyed.

New students arrived in Tokyo this week to take entrance examinations for the Demonstration College of Nursing.

SECTION V SUPPLY

Production

The following releases of DDT products were approved by the Welfare Ministry during the period 14-20 April.

Prefecture & Ports	10% DDT	5% DDT Spray	Typhus Vaccine
Yamaguchi	2,900 1bs.	300 gal.	200 vials
Kagawa	10,000 "		250 "
Tochigi		3,975 "	
Nagoya			500 "
Ichikawa	3,500 "		
Hakodate, Maizuru,			
Sasebo, Ujina	76,417 "		

The following stocks of DDT products and typhus vaccine were stored in Japanese depots on 12 April:

10% DDT	1,566,930	1bs.
5% DDT Spray	94,060	gal.

Typhus Vaccine 163,478 vials

The below stocks are in transit:

10% DDT 437,940 1bs. 5% DDT Spray 16,600 gal.

Production of principal biologicals during the month of March was accomplished as follows:

	<u>Production</u>		Stocks on Hand	31 March
<u>Vaccine</u>	<u>Crude</u>	<u>Finished</u>	<u>Crude</u>	<u>Finished</u>
Cholera	20,000 cc		861,000 cc	306,870 cc
Typhus		1,325,758 cc		6,506,733 cc
Triple Typhoid	2,222,000 cc	396,620 cc	4,319,900 cc	840,348 cc
Smallpox	1,828,000 cc	3,988,648 ds.	23,878,550 ds.	2,046,379 doses
Diphtheria Anti-toxin		59,000 cc		583,932 cc
Diphtheria toxoid		90,000 cc		461,675 cc
Tetanus Toxoid		15,000 cc		210,000 cc

Production of insect and rodent control supplies during the month of March was accomplished as follows:

Antu (rat poison) 3,945,431 packages 3 gram

Nekoirazu (rat poison) 2,627 kgs.

10% DDT Dust from American furnished

DDT concentrate 650,091 1bs. 5% DDT Spray 68,733 gal.

Production of pyrethrum emulsion was started on 1 April. The entire production for 1947 will be an emulsion requiring dilution with thirty parts water prior to actual spraying. Production of 23,950 gal. was accomplished by 10 April. A production of 198,750 gal. is planned by 25 April. A total production of approximately 700,000 gal. is planned for the 1947 program.

Distribution

A shipment of 180,000 one quarter pound cans of anesthetic ether arrived in Japan. This ether is part of the medical supplies on the import program for civilian use for 1946, and will greatly aid in bolstering the stocks of ether now available in Japan. Distribution thereof will be made to all prefectures in the near future.

Approval was given for the sale of U.S. surplus x-ray apparatus to Korea.

Narcotics

Using modern methods of investigation introduced by the Narcotic Control Officers, Japanese Narcotic Inspectors of the Narcotic Division, Kanagawa Prefecture, successfully pursued and completed an investigation relative to narcotic violations by the proprietor of a pharmacy. Purchasing narcotics from the defendant and seizing a considerable quantity of narcotics from his residence, culminated in his arrest.

The successful completion of this investigation marks the passing of another milestone in the march towards narcotic control in Japan and is the culmination of a concerted effort by Narcotic Control Officers, to indoctrinate Japanese Narcotic Officials to the use of modern investigating methods.

At a meeting of the Japanese Dental Association of Chuo-ku, Tokyo-to, on 14 April, Narcotic Division and Narcotic Control Officials clarified many points of the Narcotic Laws found troublesome to the association members.

An inspection trip through northern Honshu revealed narcotic inspectors are making numerous superficial inspections of registrants with the result that little good is being accomplished. Many doctors, hospitals and other registrants are being permitted to retain stocks far beyond the amount needed for a six to eight months' supply. Conferences with Japanese narcotic inspectors throughout Japan will be held in Fukushima and Nara prefectures on the 6th and 13th of May respectively, at which times instruction will be given in the proper procedure of making inspections and investigations.

First hand information was also obtained that sufficient preparation has not been made to license appropriate farmers with designated areas for cultivation of marihuana for commercial fiber purposes. In one prefecture it was planned to license 30,000 farmers to grow marihuana for home use of fiber. This cannot be done since the required records and control would be so voluminous as to cause a breakdown in the marihuana enforcement program. The Ministries of Welfare and Agriculture have been advised to limit the number of producers of marihuana for fiber to approximately 30,000 for all the area (5,000 hectares) authorized for such cultivation in Japan. Appropriate corrective action has been taken on the national level and Military Government teams in the 12 prefectures concerned should determine that the number of farmers licensed for the authorized cultivation is as nearly as possible in proportion to the national program.

Some local wholesalers have not carried sufficient levels of narcotics to supply the area concerned. It is again stressed that local wholesalers by use of order forms may purchase narcotics at any time from central wholesalers all of whom now have adequate stocks on hand.

The Ministry of Welfare has been advised to take appropriate action against any narcotic dealer who advertises narcotic items for sale. Narcotics will be furnished only as the legitimate medical needs of the Japanese people require but not as part of any sales promotion program.

SECTION VI PREVENT MEDICINE

Typhus Fever Control

Comparative Score: (includes figures of 18 April)

1946 - 19,646 1947 - 686

Outbreak of Typhus in Tokyo Poor House

As of 18 April, 57 suspect cases of typhus fever have been reported from the Oyama Poor House in Itabashi Ku. Results of Well-Felix and complement fixation tests performed to date are as follows:

	Positive		Negative	No Date	Total	
	1:40	1:80	1:160			
Weil – Felix	14	17	21	2	3	57
Complement Fixation			No r	<u>eport</u>		

Based on this outbreak, the Ministry of Welfare and the Ministry of Justice has issued instructions to all prefectures to execute a dusting program in poor houses, vagrant homes, orphanages jails, prisons and similar institutions to prevent a similar occurrence in other parts of Japan.

<u>Training Course for Laboratory Technicians in Tests Relating to Laboratory Diagnosis of the Typhus Fever.</u>

On 14 April 1947, a representative from each of six prefectures in Japan met in the Infections Disease Institute in Tokyo for the first session of the ten day course designed to train qualified selected laboratory technicians to perform Well-Felix and complement fixation tests in the laboratory diagnosis of typhus fever. Similar courses will be held during the coming months for other groups of selected technicians from other prefectures of Japan.

Poster Contest by School Children

A nation-wide poster contest emphasizing typhus fever is being sponsored by the School Hygiene Association; an association subsidized by the Japanese Government. Posters depicting other phases of public health may be submitted in this contest.

Laboratory Control

During the past four months officials from the Welfare Ministry have been devising a system to supervise and aid laboratories throughout Japan. Many conferences have been held with Japanese representatives which resulted in their submitting a plan for the "Establishment of a National Laboratory Control Program" to which SCAP had no objections. (Ref. PHMJG-17)

In brief, the Welfare Ministry is adding a Laboratory Control Section to the Preventive Medicine Bureau to attend to the overall administrative details. A National Institute of Health, staffed by skilled scientific men, is being created to carry out the practical assay work and undertake various research projects. This will be a relatively independent agency with an extremely wide range of latitude as regards the scope of its activities, which will be decided by the scientific director and his staff.

The highly technical assay procedures on biologicals and anti-biotics will be carried out here. Certain sensitive unstable diagnostic sera, reagents, and items such as plague and rabies vaccine which are technically difficult to make and infrequently used will be produced and distributed to peripheral ken health offices. Research will be undertaken on the etiology, pathogenesis, prophylaxis and therapeutics of infectious and other specific diseases. Vaccines will be produced for experimental evaluation only, and if improvements are noted, bulletins will be dispatched to all manufacturers in Japan.

National Institutes for Cancer, Tuberculosis and Cardio-Vascular Disease Research, etc. will be set up as component units of the parent organization.

A system of national and local inspectors to maintain surveillance over all biologics manufacturing and eventually all clinical diagnostic laboratories is being evolved.

On the 15th, 16th and 17th of April, the first group of laboratory instructors received the initial instruction course in Tokyo. The following kens were represented:

<u>Ken</u>	Representatives	
Aichi Prefecture	Dr. Minoru Yamamoto	Dr. Kazuo Tomoyama
Chiba Prefecture	Dr. Ren Ishikawa	Dr. Takeo Takano
Fukuoka Prefecture	Dr. Somaki Ono	
Fukushima Prefecture	Dr. Yukiyasu Maniwa	
Hiroshima Prefecture	Dr. Minoru Okinami	
Hyogo Prefecture	Dr. Taro Yamazaki	
Ibaragi Prefecture	Dr. Mizuho Henada	Dr. Masami Kawasaki
Ishikawa Prefecture	Dr. Takeo Kanedo	Dr. Ko Yoshida
Kagawa Prefecture	Dr. Korehiro Hamada	Dr. Hideo Okamoto
Kanagawa Prefecture	Dr. Takeshi Kodama	Dr. Kenjiro Yamada
Kumamoto Prefecture	Dr. Tateyoshi Tsuchiya	
Kyoto Prefecture	Dr. Tatsuo Yoshida	
Niigata Prefecture	Dr. Hiroshi Mizutani	Dr. Itaru Shinokawa
Oita Prefecture	Dr. Katsumi Ninomiya	
Okayama Prefecture	Dr. Tatsuo Kuwabara	Dr. Susumu Yamagami
Osaka Prefecture	Dr. Michinori Hori	Dr. Masao Matsubara
	Dr. Kyoji Yamaguchi	Dr. Shinji Nishimura
Shiga Prefecture	Dr. Mitsusaburo Kawash	ima
Tokyo Prefecture	Dr. Akinori Tada	Dr. Fumihiko Morita
	Dr. Masao Nagai	Dr. Minoru Ishido
Yamaguchi Prefecture	Dr. Kinichi Yamaguchi	Dr. Y. Sato

The following regional epidemic Control Officers attended:

Tohoku Dr. J. Matsui
Tokai-Hokuriku Dr. K. Goto
Shikoku Dr. T. Matsuura
Chugoku Dr. K. Shimizu
Kyushu Dr. K. Taise

The above individuals were instructed to render a complete report to the ken Director of Public Health when they returned to their respective kens; and then to visit the Military Government Public Health Officer and review the details of their instruction course, enumerating the responsibilities which the Welfare Ministry had entrusted to them.

This is the first time that such a system of inspectors has been organized in Japan. Another instruction course which is being planned for the second group of inspectors, will take place approximately two months.

Sanitation

<u>Mosquito Control</u>. In order to be successful, mosquito control must be carried on largely by the individual. By the use of posters, news articles, lectures in schools shorts on the radio and such, the public should be informed us to what the individual must do to assist in the overall program. It is of vital importance that this be done immediately as the mosquito breeding season has already begun.

Both the Culex and Aedes, important disease vectors and the source of greatest annoyance, are largely domesticated and breed in fire reservoirs, urns, ornamental basins and incidental water in and around human habitats. Containers that catch and hold rain water can often be emptied or filled with sand, reservoirs for night soil and irrigation water storage tanks can be covered, and clogged drainage ditches on private property can be cleaned out by the individuals.

If breeding areas found that cannot be corrected, these should be reported to the Ku Health Office.

The elimination of mosquito production is the fundamental requisite of mosquito control. This requires, in addition to full cooperation of the individual, a well-planned overall program consisting of:

- 1. Field inspection by trained personnel to locate mosquito breeding places and determine the type of control most applicable.
- 2. Well trained and equipped crews to carry out control measures.

Emphasis must be put on complete coverage of areas. The plan must not only include treatment of all breeding places but be continuous throughout the entire breeding season.

The prefectural governments must provide transportation for insect and rodent control teams and supplies, otherwise the program will not succeed. Surplus U.S Army vehicles have been made available to the Welfare Ministry for this purpose and it is expected that the Welfare Ministry will allocate these vehicles to prefectural governments for insect and rodent control purposes.

Post Quarantine

The immediate objectives of the plan to make cyanide fumigation facilities available to all ports of entry have been accomplished. Trained Japanese teams are now active in this work at the key ports of Yokohama, Kobe, Kure and Moji. These services are thus reasonably accessible to all but the two Hokkaido ports of Otaru and Hakodate. When the demand is great enough, cyanide will be available in that area. In the meantime, sulfur is being used for such fumigations as must be done.

Weekly report of incoming quarantinable disease: Week ending 12 April – Negative (No telegram received from port of Nagoya)

SECTION VII SOCIAL SECURITY

Social Insurance

Recent investigations revealed that the Japanese Government has a procedure for providing pensions for government career employees, somewhat similar to that provided by the U.S. Civil Service Retirement Act. Some aspects of the law seem to have been inaugurated as early as 1871. The program is administered by the Government Pension Bureau, which is attached to the Office of the Prime Minister. A 2% deduction is made from the basic wage of each employee, except for teachers and policemen, from whom only one percent is deducted.

The benefits include ordinary, invalidity and survivors' pensions, with the qualifying period for ordinary pensions being seventeen years. Policemen, however, are qualified after 12 years of service. The pension provides one-third of the basic wage at the tine of retirement, with an increased monetary increment for each year of service in excess of qualifying period. The maximum pension is payable after 40 years of service. The most any individual would be eligible to receive would be 50% of basic salary.

Worker' Accident Compensation Insurance

The new Labor Standards Law precludes complete administration of the Workers' Accident Compensation Insurance program by one ministry, therefore, it is necessary for the functions to be the responsibility of the Ministry of Welfare and the new Ministry of Labor.

Health Insurance

The Japanese Medical Treatment Corporation is in the process of being dissolved. The hospitals belonging to the corporation have handled some of the medical service for members of the Health and National Health Insurance Associations. Plans, however, have been proposed for reorganizing these hospitals under a national hospital system to be coordinated with the National Health Insurance program. The former Medical Treatment Corporation hospitals are continuing their operations pending disposition by Ministry of Welfare.

The Ministry of Welfare has appointed a Board of Council for Social Insurances to determine the rate of medical examination fee to be charged members of health insurance associations by doctors, hospitals and clinics. The council is composed of representatives of the Insurance and Medical Bureaus within the Ministry, also, representatives of the medical, dental, employers, and employees associations, and individuals engaged in sociological research.

National Health Insurance

Recent surveys have revealed that the All-Japan National Agricultural Association has approximately six hundred hospitals located in rural areas. These hospitals have, in numerous instances, participated in the administration and operation of the National Health Insurance Associations. The Agricultural Association is among those associations which are to be dissolved and will probably be re-organized into cooperative agricultural organizations. It is expected their hospitals will then be coordinated with the over-all national hospital system as a part of the national health program.

SECTION VIII MEDICAL SERVICE

Japanese Civilian Hospital Strength Report for the period ending 28 February 1947 shows 3131 hospitals with a capacity of 217,047 beds. 109,996 of which were occupied. During this same period 286,382 outpatients were treated.

SECTION IX CONSULTANT

Nutrition Surveys

The February Nutrition Survey results on the average deviation of body weights for the twenty-seven prefectures and families of special workers (Coal mines – copper mines and railway workers), are given in the attached tables.

NUTRITION SURVEY – FAMILIES OF SPECIAL WORKERS - 1946

Average deviation of body weights of more than 10% in families of Special Workers from the Japanese stand sex, height and weight in percentage of the number examined in each age group (shown in parentheses). Included in this group are 4 #### mines (Bibai of Hokkaido, Joban of Fukushima, Mitsui Miike and Mitsui Yamano of Fukuoka). Kosaka Conner Mine of Akita and Rail-way workers of Tokyo. Only the under weights are shown for May and August.

4 Coal]	No. Age Gro		0-1		2-5		6-10	1	1-15	1	6-20	2	1-30	3	1-40	4	1-50		51-	Ave	erage
Mines			%	Kg	%	Kg	%	Kg	%	Kg	%	Kg	%	Kg	%	Kg	%	Kg	%	Kg	%	Kg
	May	6175 Less	23.2	2.0	11.7	2.3	7.2	2.8	7.4	4.6	9.9	6.6	10.2	6.9	13.4	7.1	15.7	7.8	36.6	8.4	12.6	5.6
				301		873		1021		890		553		722		856		631		328		6175
	Aug	5994 Less	26.4	1.6	15.1	2.1	13.3	2.8	18.6	4.6	19.3	6.8	18.4	7.3	24.6	7.4	31.7	8.0	49.0	8.6	21.1	5.8
	Nov	5884 Less	22.3	1.6	10.9	2.2	5.1	3.5	4.4	4.7	5.1	5.7	6.4	6.0	8.8	7.5	11.4	7.3	21.7	7.8	8.8	5.8
	Feb	6340 Less	23.8	1.7	17.8	3.4	13.2	3.6	7.8	5.5	8.9	7.9	5.8	6.9	6.4	7.3	10.7	6.9	27.4	7.8	11.6	5.3
	47	\pm		59.4		55.3		54.9		60.3		62.3		67.9		66.1		70.3		61.9		62
		Ove	r 16.8	1.5	26.9	2.2	31.9	3.5	31.9	5.4	28.8	8.3	26.3	8.2	27.5	8.2	19.0	8.3	10.7	7.4	26.4	5.9
				315		781		961		878		628		900		887		654		336		6340
Akita	May	2508 Less	24.4	1.6	8.3	2.3	5.0	6.1	6.4	7.2	10.4	6.7	9.0	7.9	11.2	7.0	16.3	7.2	35.5	8.6	11.6	6.8
Comme	er Mine			82		168		200		283		384		500		473		294		124		2508
	Aug	2000 Less	39.2	1.4	30.4	2.3	15.5	3.7	20.1	7.4	29.1	7.4	18.4	8.0	18.3	7.8	32.7	8.3	38.6	8.3	25.3	6.6
				51		148		238		209		209		288		360		339		158		2000
	Nov	1981 Less	20.0	1.6	6.1	2.2	3.7	3.3	6.5	5.2	8.0	7.2	5.9	7.2	7.9	8.2	12.6	7.2	32.8	9.0	9.0	5.1
				45		195		323		339		200		226		292		230		131		1981
	Feb	1986 Less	36.2	1.2	11.4	1.9	5.3	2.3	3.2	6.8	3.4	6.2	3.3	6.5	3.2	7.1	8.4	7.5	14.0	7.5	6.6	6 4.7
	47	±		36.1		65		63.1		60		59.6		63		68.4		65.6		75.7		63.9
		Ove	r 27.7	1.7	23.6	2.3	31.6	3.5	36.8	5.1	38.1	8.3	33.7	7.9	28.4	8.3	26.0	8.3	10.3	7.9	27.5	6.1
				47		220		342		285		146		273		310		227		136		1986

NUTRITION SURVEY – FAMILIES OF SPECIAL WORKERS – 1946(Cont'd)

No.	No.	Age		0-1	2-5	(6-10	1	1-15	16-20	2	21-30	3	1-40	4	1-50		51-	Ave	erage
			%	Kg	% Kg	%	Kg	%	Kg	% Kg	%	Kg	%	Kg	%	Kg	%	Kg	%	Kg
May		1200 Less	12.5	1.8	19.0 2.7	10.5	4.3	17.6	6.5	17.6 7.7	19.7	7.5	34.3	8.0	46.6	8.7	71.2	9.4	28.3	3 7.8
				24	84		95		142	221		157		169		249		59		1200
Aug		982 Less	22.7	1.6	24.1 2.0	21.4	2.8	30.0	6.3	24.4 7.9	32.4	1 8.3	37.7	8.1	52.7	9.2	838.8	8.8	37.7	7 7.9
				22	54		70		120	168		136		138		207		67		982
Nov		1142 Less	25.0	1.2	19.7 2.8	13.0	2.7	16.9	4.5	22.9 6.0	18.6	5 7.5	38.0	3.0	42.5	8.4	64.5	8.5	29.0	0 6.9
				24	66		92		136	223		156		150		233		62		1142
Feb		981 Less			20.5 1.6	11.3	4.4	11.6	5 4.9	12.0 6.7	11.8	3 7.5	23.8	8.2	27.5	8.6	29.8	9.0	17.9	9 7.3
	147			60	61.3	;	80.3		73.7	70.3		79		69.3		67.2	(67.4		71.1
		Over	40.0	1.5	18.2 2.7	8.5	3.0	14.7	6.0	17.7 6.9	9.2	2 6.0	6.9	6.8	5.3	8.2	1.8	5.0	11.0	0 5.9

NUTRITION SURVEY-27 PREFECTURES-1946-1947

Average deviation of body weights of more than 10% in Japanese rural population from the Japanese standard weight for a given age, sex, height and weight in percentage of the number examined in each age grown (given in Parentheses). For May, August and November 1946 only the under weights are shown while the complete findings are presented for February 1947. The February 1946 results are not given as they were examined for 5% deviation instead of 10%.

			0-1	2-5	6-10	11-15	16-20	21-30	31-40	41-50	51-	Average
	Month	No.	% Kg									
19 Pref.	May	59,181 Less	27.5 1.6	14.2 2.1	6.5 3.2	6.9 4.8	7.1 6.8	11.3 6.8	16.3 7.4	22.1 7.7	34.8 8.1	14.8 6.3
			1773	5894	11,711	8737	5053	6141	5634	5564	8001	56,181
	Aug	59,482 Less	23.2 1.5	10.6 2.1	6.5 3.3	8.6 4.9	10.6 6.8	16.9 7.3	24.5 7.5	32.3 7.7	46.2 8.1	19.2 6.7
			1826	6225	10,235	9019	5472	6849	6081	5668	8109	59,482
	Nov	56,924 Less	20.2 1.5	11.3 2.2	5.6 3.3	6.7 5.2	5.8 6.8	8.4 7.3	14.1 7.4	19.7 7.3	33.6 7.7	12.9 6.2
			1745	6104	10,907	9115	5044	5982	5490	5174	7363	56,924
	Feb	57,248 Less	22.5 1.6	13.0 2.2	4.5 3.7	4.3 5.6	5.9 6.3	6.2 6.9	9.7 7.0	14.5 7.1	24.9 7.4	10.6 5.8
		<u>+</u>	52.5	64.2	65.7	62.2	61.5	70.4	73.7	71.7	65.7	66.2
		Over	25.0 1.5	22.8 2.3	29.8 3.4	33.4 5.4	32.6 7.8	23.4 7.9	16.6 7.7	13.8 7.9	9.3 7.7	23.2 5.6
			1905	5620	9404	8580	5316	6813	5754	5742	8114	57,248
8Pref.	May	16,582 Less	21.5 1.7	10.8 2.4	5.8 3.3	4.9 5.7	5.2 7.1	6.2 7.5	8.9 7.2	13.8 7.6	25.2 7.9	10.4 6.1
			622	1866	2760	2333	1681	1987	1689	1519	2125	16,582
	Aug	15,540 Less	31.8 1.8	17.8 2.4	8.8 3.5	9.1 5.1	9.7 6.1	9.5 7.4	14.7 7.4	21.4 7.6	32.8 7.8	15.4 5.9
			479	1744	2542	2410	1582	1876	1584	1422	1891	15,540
	Nov	15,378 Less	21.9 1.6	17.0 2.3	6.4 3.2	5.5 4.8	4.8 7.2	6.2 6.9	9.1 6.9	13.9 7.6	25.1 7.4	10.8 5.4
			479	1810	2898	2544	1470	1649	1425	1372	1731	15,378
	Feb	16,288 Less	20.2 1.4	14.1 2.7	5.9 3.1	4.9 5.4	3.4 7.1	4.0 7.2	5.9 6.8	9.8 6.8	19.8 7.6	8.9 5.3
	147	<u>±</u>	53.8	63	59.3	54.9	52.1	59.4	65.4	67.3	65.1	60.2
		Over	26.0 1.6	22.9 2.5	34.8 3.5	40.2 5.7	44.5 8.4	36.6 8.4	28.7 8.3	22.9 8.3	15.1 8.1	30.9 6.2
			673	1907	2573	2486	1493	1971	1776	1424	1985	16,288

NUTRITION SURVEY-27 PREFECTURES-1946-1947 (Cont'd)

			0-1	2-5	6-10	11-15	16-20	21-30	31-40	41-50	51-	Average
	Month 1	No.	% Kg									
27Pref.	May	75,763 Less	25.9 1.6	13.4 2.2	6.4 3.2	6.5 5.0	6.7 6.8	10.1 7.0	14.6 7.4	20.3 7.7	32.8 8.1	13.8 6.3
			2395	7760	14,471	11,070	6734	8128	7323	7083	10,126	75,763
	Aug	75,022 Less	25.0 1.6	12.2 2.2	6.9 3.4	9.5 5.0	10.4 6.7	15.3 7.3	22.5 7.5	30.1 7.7	43.7 8.1	18.4 6.5
			2305	7969	12,777	11,429	7054	8735	7665	7090	10,000	75,022
	Nov	72,302 Less	20.5 1.5	12.6 2.2	5.8 3.3	6.5 5.1	5.6 6.9	7.9 7.2	13.1 7.3	18.5 7.4	31.9 7.6	12.4 6.0
			2224	7914	13,850	11,659	6514	7631	6915	6546	9094	72,302
	Feb	73.536 Less	21.9 1.6	13.3 2.3	4.8 3.5	4.8 5.6	4.8 5.6	5.4 6.4	5.7 6.8	13.6 7.1	23.9 7.4	10.2 5.7
	147	土	52.8	63.9	64.3	55.9	59.4	67.9	71.7	70.8	65.6	64.9
		Over	25.3 1.6	22.8 2.4	30.9 3.4	32.3 5.5	35.2 8.0	26.4 8.0	19.5 7.9	15.6 8.0	10.5 7.8	24.9 5.8
			2578	7527	11,977	11,066	6809	8784	7530	7166	10,099	73,536

SECTION X MEMORANDUM TO INPERIAL JAPANESE GOVERNMENT

PHMJG-17 - 17 April - Establishment of a National Laboratory Control Program.

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

2 Incls:

- 1. Weekly Summary Report of Cases and Deaths from Communicable Diseases in Japan, week ending 12 April 1947 w/digest.
- 2. Venereal Disease Report for week ending 12 April 1947.

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

WEEKLY BULLETIN

For Period 20 April - 26April 1947 Number 17

SECTION I - Welfare
SECTION II - Veterinary Affair
SECTION III - Dental affairs
SECTION IV - Nursing Affairs
SECTION V - Supply
SECTION VI - Preventive Medicine
SECTION VIII - Social Security
SECTION VIII - Medical Services
SECTION IX - Consultants
SECTION X - Memorandum to I.J.G.

SECTION I WELFARE

General

The Rt. Rev. Msgr. Edward J. Flanagan arrived in Tokyo 23 April 1947. Father Flanagan is best known for his work at Boys Town, Nebraska.

Father Flanagan's purpose while in Japan will be to reawaken the interest of the Japanese people and Government in children. His interest will be devoted to all children with no greater emphasis on delinquency than on other problems concerning children.

Licensed Agencies for Relief in Asia (LARA)

Allocation and distribution of LARA relief supplies are based on 4 groupings of areas, namely A, B, C, and D; the most urgent, (A), to areas of less need (D). The first allocation was made to Group "A" areas in December 1946, reference; Public Health and Welfare Section, SCAP, Weekly Bulletin #15 for period 6 April-13 April, page 5.

The first allocation and distribution of LARA supplies to Group "B" areas began in March 1947 and will be completed in April 1947. The following chart shows the allocation and destitutions to institutions in Group "B".

Prefecture		Institutions (infants)		Institutions (children)		Institutions (tubercular)		titutions ecial)	Tot	al
	No	. Residents	No. Re	sidents	No.	Residents	No. 1	Residents	Inst'	's Resident
Shizuoka	3	90	6	230	1	130	23	2,100	33	2,550
Saitami	3	120	6	165	1	50	1	70	11	405
Miyagi	6	155	4	165	2	90	7	255	19	665
Mie	4	110	3	120	1	90	8	1,975	16	2,295
Ibaragi	1	60	4	70	1	100	5	1,700	11	1,930
Niigata	4	110	2	135			13	2,700	19	2,945
Okayama	2	150	5	480			8	2,920	15	3,550
Kagoshima	3	90	5	150	2	40	4	2,295	14	2,575
Chiba	3	90	6	200			14	1,965	23	2,255
Tochigi	1	60	2	60	2	150	8	2,560	13	2,830
Hokkaido	8	270	11	470	2	90	12	830	33	1,660
Fukuoka	7	300	14	690	3	70	7	280	31	1,340
Total	45	1,605	68	2,935	15	180	110	19,650	238	25,000

Recent Fire Disasters (Summary)

A series of serious fires during the past ten days was climaxed with a tragic conflagration at Iida on 20 April 47. The fires were in widespread areas as indicated below:

NAGANO PREFECTURE

Iida City: The fire started at 1215 on 20 April 47 and continued to rage until midnight. Two-thirds of city was damaged with 3,984 homes destroyed and 17,814 persons homeless. Casualties were; 1 dead, 10 serious injuries and 170 minor injuries. Homeless are receiving temporary shelter in school houses and in homes of friends or relatives in adjacent areas. Estimated property damage 1,200,000,000 yen. Prefectural Governor has established disaster relief headquarters with Prefectural Welfare Chief in charge of relief operations.

AOMORI PREFECTURE

Aomori: The fire started at 1510 on 18 April 47 and burned out at 1720 on same date. 500 homes destroyed with 2500 persons homeless.

Damaioka: (fire on 16 April 47) 42 homes destroyed with 552 persons homeless.

Towada: (fire on 15-16 April 47) 27 homes destroyed with 178 homeless (15 April) 68 homes destroyed with 346 persons homeless (16 April)

MIYAGI PREFECTURE

Uguisuzawa: The fire started at 1200 on 18 April and was put under control at 1610 the same date. 28

homes destroyed with 422 persons homeless. 30 other buildings also destroyed. Estimated

property damage 9,320,000 yen.

Ryotu: The fire started at 1540 on 17 April 47 and burned out at 2030 the same date. 350 homes were

destroyed with 1900 homeless.

Yokohama: Fire during the afternoon of 17 April 47. 250 homes were destroyed with 1900 homeless.

FUKUSHIMA PREFECTURE

Kagamiishi: The fire discovered at 1520 on 17 April 47 and brought under control at 1700 on the same date. 40 homes destroyed with 300 persons homeless.

AKITA PREFECTURE

Wada: Fire broke out at 1230 on 18 April 47 and extinguished at 1430 on the same date. 94 homes destroyed with 600 persons homeless. Casualties: 1 dead

TOCHIGI OREFECTURE

Arakawa: Fire of two hours duration on 17 April 47. 16 homes destroyed with approximately 100

homeless. 30 other buildings destroyed. Estimated damage to property 150,000 yen.

Casualties: 1 injury.

All prefectures reported their ability to meet emergency relief needs and have expressed gratitude for guidance and assistance by Military Government Units.

SECTION II VETERINARY AFFAIRS

Field Surveys

Representatives of PHW, SCAP conducted the following field surveys:

Hiroshima Prefecture

Livestock

A gradual increase is in progress due to the trend of people toward farm life. There is a shortage of concentrate feed.

Animal Disease Control

Animal disease control measures are effective. The 1947 Tuberculin testing program was started on 1 April; rabies immunization will begin in May 1947; a Pullorum disease control program will be initiated in June 1947.

Meat Inspection

Inspection is maintained in all slaughter houses but inspection methods are faulty. Proper ante and mortem procedure was demonstrated.

Dairy Inspection

The "Score Card" system of dairy farm and milk plant inspection is being utilized.

Summary

Prefecture officials are exercising insufficient supervision over field inspectors. Where defects were found to exist, responsible officials were advised to take corrective action. The Public Health Section of Hiroshima Military Government Team has recently inaugurated a satisfactory surveillance program over veterinary affairs.

Gifu Prefecture

Livestock

Considerable grazing land is being utilized river bottoms in certain areas. Where grazing is not available, dairy cattle are underfed due to grain shortage.

Animal Disease Control

Animal disease control measures are effective. The 1947 Tuberculin test of dairy cattle and rabies immunization of dogs has been inaugurated.

Meat Inspection

Inspection is maintained in all slaughter houses, but procedures are faulty because insufficient areas in the carcass are examined. Proper inspection methods were demonstrated. Sanitation is satisfactory, except in the disposal of wastes. Many pits have inadequate walls and covers.

Dairy Inspection

The "Score Card System" is being utilized. Some dairy farms were scored too high. Sanitation is satisfactory expect in the matter of manure disposal.

Summary

The first land on the island of Honshu actually being utilized for grazing purposes was observed. Approximately 300 cattle were scattered along a river bottom. The grass was plentiful and the animals appeared to be in good condition.

Where defects were found to exist, responsible officials were advised to take corrective action.

The Public Health Section of the Military Government Team is exercising excellent surveillance over the Prefecture veterinary service.

Animal Disease Report

The Ministry of Agriculture and Forestry (Bureau of Animal industry) reported that no new outbreaks of animal disease occurs during the period 20-26 April 1947.

SECTION III DENTAL AFFAIRS

There were 13 dentists reestablished in practice during the month of March. Manufacturers' price of dental instruments produced during March amounted to 402,322,100 yen, while that for dental materials amounted to 298,283,895 yen.

SECTION IV NURSING AFFAIRS

Personnel

Miss Thompson and Miss Collins left for U.S.A. 21 April 1947.

The first annual meeting of the National Association (Midwives, Public Health Nurses and Clinical Nurses) is being held in Tokyo 27,28, 29 April.

SECTION V SUPPLY

Field trips to prefectures in central Honshu reveal that the distribution of medical supplies leaves much to be desired. Particular attention was given to the distribution of former Japanese military medical supplies and controlled medicines. There is a general laxity on the part of prefectural health officials in supervising this distribution.

In regard to the former military supplies, it was found that there are still large stocks of these in the Medical Distributing Companies' warehouses and in the warehouses of National Hospitals. The Welfare Ministry has issued instructions to prefectural authorities to dispose of these supplies to consumers. These instructions have either been disregarded or have not been carried out completely.

Plans for the distribution of controlled medicines seem satisfactory as formulated, but in operation prove very unsatisfactory. Too much authority is delegated by the responsible prefectural officials to other agencies, such as the Medicine Distributing Companies and Doctors' Associations. The Doctors' Associations should be advisory, not operating agencies, but in practice they become operating agencies. Due to the lack of proper supervision of prefecture government officials, the individual practitioner is deprived of his due share of these vital medical supplies. He is thus very often forced to seek relief by purchases on the black market. The situation may be summed up by saying that the distribution warehouses are too full, the individual practitioner's cabinet too empty.

It is not necessary to dwell on the importance to public health of the adequate distribution of medical supplies. It is desirable that Military Government Health Officers make every effort to discourage this hoarding of supplies in warehouses, and make constant checks to see that these supplies are distributed promptly and equitable, according to the needs of the individual practitioner. Only the authorized emergency reserve level of 5% is to be kept at the Medicine Distribution Company's warehouse.

Production

The following tabulation indicates releases of DDT products and typhus vaccine during week 20 - 26 April:

<u>Prefecture</u>	10% DDT Dust	5% DDT Spray	Typhus Vaccine
Aomori	8,000 1bs		300 vitals
Wakayama	1,980 "		
Saga	2,000 "	1,500 gal	
Okayama	3,300 "		
Aichi	50,000 "		
Kagawa	5,000 "	1,000 "	
Iwate	10,000 "		
Ibaragi	11,880 "	5,200 "	1,000 vials
Gifu	10,180 "		
Miyagi	10,000 "		
Ehime	1,000 "		
Mie	6,000 "		
Nara	2,500 "		
Hokkaido			77,200 vials
Ujina (Quarantine Station)			500 "
Nagoya	2,200 "	250 "	200 "
Kanagawa	50,000 "		
Gumma	3,000 "		
Saitama	3,700 "	7,000 "	
Toyama	20,000 "		
Total	200,740 lbs.	14,950 gal.	79,220 vials

Narcotics

An inspection trip through western Honshu revealed similar conditions as ascertained in northern Honshu, with the Japanese narcotic inspectors making superficial inspections of registrants resulting in little good being accomplished. Some physicians, pharmacists and hospitals still retain far more than the normal six to eight months supply; and some hospitals and local wholesalers stock far too little in the amounts and varieties of narcotics in general use. It was again stressed that excess stocks of narcotics should be transferred from practitioners and retailers to local wholesalers for normal distribution, and that practitioners and retailers may purchase necessary narcotics, by use of order forms, from the local wholesalers, who in turn may secure all necessary stocks from the Central Wholesalers.

The registration of farmers for the licensed cultivation of Marihuana (Taima) in the prefectures allocated Marihuana cultivation areas, is progressing in a satisfactory manner, with corrective action being taken relative to eliminating the cultivation of small patches for the farmer's own home consumption.

Special emphasis was given to the safeguarding of narcotic stocks, and especially to precautions against loss by fire of local wholesalers stocks.

Two narcotic officials in Yamanashi Prefecture who were charged with embezzlement of narcotics and malfeasance in office were sentenced in Provost Court on 24 April to 4 1/2 years penal servitude plus a 20,000 yen fine and 3 years at hard labor plus a 10,000 yen fine. A former prefectural official, charged with participation in the above narcotic violation, was sentenced in Japanese court to 2 1/2 years imprisonment at hard labor.

SECTION VI PREVENTIVE MEDICINE

Typhoid Fever

Triple typhoid vaccine is being manufactured and an immunization program is being developed in an effort to immunize as many people as possible throughout Japan. Originally it was planned that the entire population of Japan would be immunized against typhoid and the para-typhoid fevers this summer. The problems of supplying sufficient potent vaccine for this program have been great and it now appears there will not be sufficient vaccine to take care of the needs of the entire nation. The Welfare Ministry is preparing a plan for the proposed typhoid immunization program.

Typhus Fever

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Comparative Score (includes figures of 24 April)
1946 - 21,975
1947 - 722
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Typhus Fever in Tokyo

Reports through 24 April 1947 show a total of 62 suspect cases have occurred in the poor farm in Itabashi Ku. No cases were found on 20 and 23 April. The outbreak has been brought under control through the prompt action of responsible Military Government and Tokyo health officials. Complement-fixation tests performed on early cases demonstrated the presence of murine typhus.

Training Course for Laboratory Technicians.

The first in the series of 10 day courses being conducted in Tokyo designed to train Japanese laboratory technicians in the techniques of the Well-Felix and complement fixation tests was completed on 23 April 1947. The second 10 day course is scheduled for 12 May 1247.

The technicians have received a through training and have now returned to their respective areas to be of service in the laboratory diagnosis of typhus fever.

Technicians representing the following prefectures were present.

Miyagi Prefecture	Mr. T. Sakuraba
Tokyo "	Dr. K. Kuratsuka
Niigata "	Dr. T. Shinokawa, Mr. K. Toyama
Osaka "	Dr. Y. Hachiwada
Kagawa "	Dr. K. Yamaoka
Fukuoka "	Dr. T. Kawamura
Kumamoto "	Dr. T. Kaizuka, Dr. N. Ueno

Scrub-Typhus

The Ministry of Welfare submitted a plan of research dealing with scrub-typhus and its control. Work will begin on 1 May 1947 in cooperation with the Public Health and Welfare Section, SCAP, and the 406th Medical General Laboratory.

Sanitation

1. Environmental Sanitation

The following programs have been initiated in each prefecture:

- a. Cleaning of rubble, debris and garbage.
- b. Cleaning and repairing sewers and drains
- Filling unused war emergency water reservoirs, bomb craters and low areas subject to collecting and water.

A considerable amount of work has been done in the large urban areas. Public works programs utilizing unemployed labor are largely designed for this purpose, and inestimable value is being derived there-from. By proper coordination of these programs, effective results can be attained that would otherwise be lost.

2. Insect and Rodent Control

a. Mosquito Program.

Plans for 1947 program have been completed and are already underway in most of the southern prefectures. There are sufficient insecticides and insecticide equipment ready for immediate distribution to the prefectures. Training conferences have been scheduled for Military Government and Japanese Public Health Personal for 6-10 May at Kyoto and 13-16 May at Sendai.

A limited amount of transportation has been proposed for assignment by the Welfare Ministry to insect and rodent control work in the prefectures from U.S. Army surplus vehicles recently transferred to the Japanese Government.

Port Quarantine

On Okinawa, arrangements are nearing completion to receive 281 lepers now in Japan, whose homes are in Okinawa and Amami-Oshima. These people will be brought together at the Sasebo Repatriation Reception Center and embarked for Okinawa about the fifteenth of May.

Weekly Report of Incoming Quarantinable Disease: Week ending 19 April – Negative

SECTION VII SOCIAL SECURITY

Personnel

Dr. Lee D. Janis has joined Public Health and Welfare Section as Chief, Health Insurance Branch, of the Social Security Division.

Health Insurance

Recent information obtained through prefectural surveys indicates there is a large decrease in the number of persons formerly employed by industrial organizations carrying Health Insurance and the number now employed.

Additionally, Insurance offices in the prefectures do not have sufficient information as to the disposition of those formerly employed by industrial organizations and how they are now obtaining Health Insurance benefits.

Social Insurance

A social Insurance Medical Examination Fee Council, appointed by the Minister of Welfare, increased the charge per point rates by doctors and hospitals in rendering medical care to insured patients. The council was composed of representatives of the government, insured, employers, doctors, dentists, hospitals and persons engaged in sociological research. The rates are divided into three classes; (1) large cities, (2) smaller cities, and (3) communities and rural areas.

SECTION VIII MEDICAL SERVICES

The civilian hospital strength report for the week ending 7 March 1947 shows 3140 hospitals with a capacity of 217,992 beds of which 113,878 are occupied. Out-patients treated for this same period were 310,564.

SECTION IX CONSULTANTS

Nutrition

Nutrition Survey in Japan – Feb. 1947

Activity of all members of Japanese families studies in nutrition surveys in terms of the percentage 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 represents a moderately active degree of work for men and women respectively.

TOKYO MALES Nu Degree of	CITY mber ex	amineo	1: 6663		e Unit: ().912						
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of Persons	56	73	122	483	487	967	1743	1376	468	494	381	13
Percent of Total	0.84	1.10	1.83	7.25	7.31	14.51	26.16	20.65	7.02	7.41	5.72	0.20
	Number	exami	ned: 66	553	Avera	ıge Unit:	0.739					
Degree of Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of Persons	54	76	122	945	1221	3335	704	172	22	2	0	0
Percent of Total	0.81	1.14	1.83	14.21	18.35	5 50.13	3 10.58	8 2.59	0.33	0.03	0	0
TOTAL Nu	ımber ex	kamine	d: 1331	.6	Avera	ge Unit:	0.834					
Degree of Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of Persons	110	149	244	1428	1708	4302	2447	1548	490	496	381	. 13
Percent of Total	0.83	1.12	1.83	10.72	12.83	3 32.31	1 18.38	8 11.62	2 3.68	3.72	2 2.8	6 0.10
EIGHT CITIE MALES No	ES * umber ex	xamine	d: 1050)1	Avera	ge Unit:	0.893					
Degree of Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of Persons	198	186	224	775	750	1457	2719	2478	586	617	467	44
Percent of Total	1.89	1.77	2.13	7.38	7.14	13.87	25.89	23.60	5.58	5.88	4.45	0.42

FEMALES Number examined: 11302 Average Unit: 0.752 Degree of													
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4	
Number of Persons	188	187	268	1834	2165	4348	1874	290	127	21	0	0	
Percent of Total	1.66	1.65	2.37	16.23	19.16	38.47	16.58	2.57	1.12	0.19	0	0	
	Number e	xamine	ed: 2180	03	Avera	ge Unit	: 0.820						
Degree of Activity Number of	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4	
Persons Percent	386	373	492	2609	2915	5805	4593	2768	713	638	467	44	
of Total *Nagoya, C	1.77 Osaka, Kur	1.71 e, Fuku				26.62 , Kanag			3.27 iyama.	2.93	2.14	0.2	
	CTURES* Number ex	xamine	d: 23,4	42	Averag	ge Unit:	0.908						
Degree of Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4	
Number of	410	40.5	550	1710	1500	2.50.5	1606	7.402	000	1015	1500	210	
Persons Percent	419	435	550	1710	1738	2605	4626	7402	898	1217	1532	310	
of Total	1.79	1.86	2.35	7.29	7.41	11.11	19.73	31.58	3.83	5.19	6.54	1.32	
FEMALES	Number	exami	ned: 24	,764	Ave	rage Ur	nit: 0.77	' 6					
Degree of Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4	
Number of	205	260	5 4 4	2410	2010	0720	2024	1721	710	42	0	0	
Persons Percent	385	369	544	3419	3919	9720	3924	1731	710	43	0	0	
of Total	1.55	1.49	2.2	13.81	15.82	39.25	15.85	6.99	2.87	0.17	0	0	
TOTAL	Number	examin	ed: 48	,206	Ave	erage U	nit: 0.90	00					
Degree of Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4	
Number of Persons	804	804	1094	5129	5657	12325	8550	9133	1608	1260	1532	310	
•	1.67 Fochigi, G na, Okaya hime, Kocl	ma, Hi	Saitan	na, Chil	oa, Tok		nagawa	, Shizuc					

Hyogo, shikawa, Fukui, Ehime, Kochi,

COAL MINES*

MALES Nur	nber exa	mined:	1719		Avera	ge Unit	: 0.933					
Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of												
Persons	37	53	54	177	148	225	159	58	81	127	345	255

Percent of Total	2.15	3.08	3.14	10.3	8.61	13.09	9.25	3.37	4.71	7.39	20.07	14.84
FEMALES	Numbe	r exami	ned: 3	340	Δv	erage I	Jnit: 0.8'	71				
Degree of	rvamoe	r exami	nea. 3.	540	711	crage c	, iii. 0.0	/ 1				
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of												
Persons	87	97	99	432	440	747	380	160	155	140	345	258
Percent												
of Total * Hokkaido - Fukushima - Fukuoka - I	– Joban (oal Mir Coal Mi	ne ine			22.37	11.38	4.79	4.64	4.19	10.33	7.73
COPPER MI	NE*											
MALES	Numbe	r exami	ined: 5	97	Ave	rage Uı	nit: 0.95	2				
Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of												
Persons	7	12	16	73	62	91	76	30	3	15	199	13
Percent	1 17	2.01	2.60	10.00	10.20	15.04	10.70	5.02	0.50	0.51	22.22	2.10
of Total	1.17	2.01	2.68	12.23	10.39	15.24	12.73	5.03	0.50	2.51	33.33	2.18
FEMALES	Numl	oer exai	nined:	660	Av	erage U	Jnit: 0.7	37				
Degree of												
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of												
Persons	7	12	14	115	181	257	45	16	11	1	1	0
Percent	1.05	1.00	2.12	15.10	27.12	20.04	- 0 -	2.42	4 -=	0.4 =	0.4.	
of Total	1.06	1.82	2.12	17.42	27.43	38.94	6.82	2.42	1.67	0.15	0.15	0
TOTAL	Numbe	er exam	ined: 1	257	Av	verage U	Jnit: 0.8	341				
Degree of	0.2	0.4	o -	0.5	0.5	0.0	0.0					
Activity	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1	1.1	1.2	1.3	1.4
Number of Persons	14	24	30	188	243	348	121	46	14	16	200	13
Percent	14	∠4	30	100	243	340	141	40	14	10	200	13
of Total	1.11	1.91	2.39	14.96	19.33	27.69	9.63	3.66	1.11	1.27	15.91	1.03

^{*} Akita – Kosaka Copper Mine

SECTION X MEMORANDUM TO JAPANESE GOVERNMENT

PHMJG-18 22 Apr 47 – Plan for Allocution of Surplus U.S. Motor Vehicles Released to the Welfare Ministry.

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

2 Incls:

- 1. Weekly Summary Report of Cases and Deaths from Communicable Diseases in Japan, week ending 19 April 1947 w/digest.
- 2. Venereal Disease Report for week ending 19 April 1947.

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

WEEKLY BULLETIN

For Period 27 April – 3 May 1947 Number 18

SECTION I - Welfare
SECTION II - Veterinary Affair
SECTION III - Nursing Affairs
SECTION IV - Supply
SECTION V - Preventive Medicine
SECTION VI - Social Security
SECTION VII - Medical Services
SECTION VIII - Consultants
SECTION IX - Memorandum to I.J.G

SECTION I WELFARE

Monthly Report of Public Assistance

		February 1947		March 1947
No. of Persons (not in institutions) assisted		2,602,833		2,773,603
No. of persons (in institutions) Assisted by Govt.		98,837		108,420
Total No. Persons Assisted		2,701,670		2,882,023
Cash Grants	yen	156,671,451	yen	201,012,453
Grants in Kind (Cost)		20,365,204		51,951,732
Total Grants	yen	177,036,655	yen	252,964,185

Average size of family receiving assistance is 3.7 members.

Average monthly cash grant to families is 255.90 yen.

Average monthly cash grant per person is 72.47 yen.

SECTION II VETERINARY AFFAIRS

Monthly Meat Inspection Report

Following is a summary of the monthly Meat Inspection Report for February 1947, submitted by the Ministry of Welfare:

	<u>Cattle</u>	<u>Calves</u>	Sheep & Goats	<u>Swine</u>	<u>Horses</u>
Number slaughtered	15604	524	360	4783	3830
Condemned ante-mortem	0	0	0	0	3
Condemned post-mortem					
Total	19	1	0	1	10
Partial	252	12	0	13	225
Viscera	3458	33	0	1964	468

Monthly Dairy Inspection Report

Following is a summary of the monthly dairy inspection report for February 1947, submitted by the Veterinary Hygiene Section, Ministry of Welfare:

<u>Disease</u>	Number of cases
Anthrax	3
Blackleg	2
Brucellosis	7
Trichomoniasis	42
Texas Fever	19
Equine Infectious Abortion	33
Swine Erysipelas	5
Strangles	174
Rabies	3
Equine Infectious Anemia	41
Pullorum Disease	2005

Weekly Animal Disease Report

The Ministry of Agriculture (Bureau of Animal Industry) reported the following new outbreaks of disease during the period 27 April - 3 May 1947:

<u>Prefecture</u>	<u>Disease</u>	Number of Cases
Saitama	Swine Erysipelas	2

SECTION III

NURSING AFFAIRS

National Association

The National Association of Midwives, Clinical Nurses and Public Health Nurses held a 3 day meeting in Tokyo at which all prefectures were represented. The New officers were elected for the ensuing 2 years and committee appointed for the proposed programs. There are #### active members enrolled at present.

Demonstration School

There are 59 new first year students enrolled at the Demonstration College of Nursing for classes which opened 2 May.

SECTION IV SUPPLY

Production

Concurrence was given to application of the following #### #### permission to negotiate a loan for #### #### production:

Mitsubishi Chemical Co., Ltd. Mitsui Chemical Co., Ltd

1ページ原稿抜け

activities throughout the various prefectures. The total number of vehicles involved is as follows:

Truck 3/4 ton, weapons carrier	347
Ambulances	145
Command cars	58
Trailers 1 ton	175
Trailers 1/4 ton	145

The Ministry of Health & Welfare was requested to submit an informal quarterly report which will include general information as to the distribution and use being made of surplus U.S. medical equipment and supplies, except trucks, purchased by the Japanese Government.

The estimated yearly requirement of clothing required for direct relief purposes has been computed by the Welfare Ministry at 23,263,794 pieces. This estimate has been submitted to the Ministry of Commerce and Industry for planning purposes. In order to obviate holding large stocks of relief clothing in storage by the Welfare Ministry, it is planned that quarterly requests will be submitted to the Ministry of Commerce and Industry covering relief clothing requirements. In accordance with present agreement between the Ministries concerned, all stocks of former Japanese Army-Navy clothing uncovered in the future will be turned over to the Ministry of Commerce and Industry for disposition.

Narcotics

Conference with Japanese narcotic officials and representatives of the companies concerned resulted in the following preparations being classified as exempt narcotics:

<u>Company</u>	Address	<u>Preparation</u>
Tomimatsu Phar. K.K.	Tokushima	Opiel
Taisei Phar. K.K.	Osaka	Allinda
Taisho Phar. K.K.	Tokyo	Papaxin
Taiwa Phar. K.K.	Nagoya	Keshinol
Nakakita Phar. K.K.	Nagoya	Opinarco

The above companies held considerable quantities of the named preparations and the Ministry of Welfare is granting temporary compounders' licenses to them to permit marketing of the products on hand and to compound the preparations from the materials in stock.

The Taisho Company is being required to reduce the narcotic content of Pabron and Papaveraekisu, which they have in stock, to within the exempt narcotic level. All the companies were advised it is their responsibility to keep the preparations compounded within the allowable narcotic content which is to be shown on the labels. The preparations which are in the stocks of wholesalers and which contain more than the exempt narcotic percentage allowable, are to be sold as regular narcotics to registered practitioners and pharmacies.

There out of four sizeable burglaries reported during the week were from National Hospitals. The Narcotic Section, Ministry of Welfare, has been advised this situation must be corrected and thefts curtailed. Narcotic agents are being instructed to prefer charges against and demand prosecution of registrants, under Article 48 of the Narcotic Regulations, who fail to keep narcotic stocks in a place considered reasonable safe from theft and burglary.

As a result of advice recently given in modern narcotic investigative procedure by Narcotic Control Officers to a group of Japanese narcotic agents, one prefecture has reported the arrest of a Korean with a large stock of illicit narcotics. The narcotic agents kept a known narcotic addict under surveillance to determine his source of narcotic. The trail led to the Korean. The surveillance is continuing and other arrests are expected as a result of the illicit trading being carried on by the addict.

SECTION V PREVENTIVE MEDICINE

Typhus

Comparative score 1 Jan to 2 May

1947 735 1946 24,234

Prophylactic Vaccination Programs

Hokkaido has started a louse-borne typhus vaccination program in the larger cities and coal-mining areas. Complete courses of vaccination are to be given this spring and a booster dose next November.

In Niigata, a limited number of scrub typhus vaccinations will be given in infected areas, as a field trial of the new scrub typhus vaccine.

Laboratory Activities

(Ref. PH&W Weekly Bulletin #10 and 16)

A series of conferences have been held by the Japanese Council on Cholera Vaccine. Military Government Health Officers will receive through the Weekly Bulletin English Translations of the Official Minimum Requirements which were drawn up during these sessions. As before, thru Japanese channels, the Welfare Ministry is forwarding identical English copies and literal Japanese translations to each Ken director of Public Health and to each biologics manufacturer in Japan.

It is suggested a check be made by 20 May to insure that copies have been received.

A complete list of biologics manufacturing laboratories is given in PH&W Weekly Bulletin #10, 2-8 March.

A recent inspection of laboratories in the Osaka, Kyoto, Kobe, Nagoya Area revealed that manufacturers had failed to initiate mass production of triple typhoid vaccine due to failure of the Welfare Ministry to notify them as to their quota. These notices were sent out by the Ministry on 21 April and should now have reached each manufacture.

The current TAB vaccine production program is an urgent one. In order to insure optimum production immediately it is suggested that:

- 1. The Military Government health officers check to see that all producing laboratories are making maximum efforts to meet production quotas.
- 2. Inform laboratories to store final diluted vaccines under refrigeration for a 3 to 5 day period and then have the local inspectors collect and send samples to the central assay laboratory in Tokyo.
- 3. Check the details of collecting samples with the local inspectors in your prefecture. (Ref. Min. Req. Typhoid Vaccine dtd 2-27-47, Sect. V par 2).

An increase in the price of the triple typhoid vaccine is now under consideration by the Welfare Ministry. As soon as it is approved by the Price Control and Rationing Board, the manufacturers will be notified of the new price through official Japanese channels.

Venereal Disease Control

A number of Military Government health officers have asked for suggestions in planning a prefectural V.D. control program. The following suggestions are submitted as a basis upon which each prefecture can make adaptations according to its own needs.

PREFECTURAL PROGRAM FOR VENEREAL DISEASE CONTROL

With the national support of the Welfare Ministry and with the local advice and recommendations of the Military Government Health Officer, the Prefectural Health Departments should:

- 1. Establish and maintain a Division of Venereal Disease Control, whose function shall be to conduct a comprehensive program for the prevention, control and cure of venereal diseases for all the people of the prefecture.
- 2. Appoint a full-time chief of the division of Venereal Disease Control who should devote his entire time to the duties of his office. The chief of this division should be a qualified doctor of medicine who is best informed as to modern public health methods of venereal disease control, and who is best able to teach these methods to other public health physicians. The chief of the division of Venereal Disease Control should be given such assistants as are necessary to carry out the provisions and purposes of this program.
- 3. The chief of the division of Venereal Disease Control (Prefectural Venereal Disease Control Officer) and his assistants, should perform and discharge all of the powers, duties, purposes and functions which are herein or may hereafter by law be vested in them to carry out effectively the national and prefectural programs.
- 4. Organize, establish and supervise, in national, prefectural and municipal hospitals and all health centers, such in-patient and out-patient diagnostic and treatment facilities as are necessary to furnish adequate services for the general population. Private facilities will not be used by government agencies where public buildings exist.
- 5. Provide, with the support of the Welfare Ministry, adequate laboratory personnel and facilities to carry on the program effectively.
- 6. Initiate, direct, and conduct a continuous program of sound public education which will tell the people what these diseases are, how they are transmitted, how they are diagnosed, and telling where the people can obtain free public diagnostic and treatment services.
- 7. Establish effective cooperation for modern venereal disease control with private physicians, local medical societies, scientific groups, and other agencies which will help in the development of the program. This can be done through conferences, provision of consultation services, distribution of helpful literature, provision of laboratory services, and such other assistance which will lead to more willing participation in the health department's program.
- 8. Organize and supervise contact tracing, effective treatment schedules and follow-up services. Study and supervise efficiency of these epidemiologic and clinical procedures.
- 9. Collect, record, consolidate, and forward to the Welfare Ministry, Division of Venereal Disease Control, monthly reports of venereal disease control activities.
 - 10. Cooperate with other governmental agencies for the prevention, control and cure of venereal diseases.

Port Quarantine

An agreement was reached during the past week whereby the Welfare Ministry will provide the port authorities at Yokohama with Japanese personnel to assist in the work of Port Quarantine. This personnel will assist the USN Quarantine Officer in maintaining quarantine liaison through the Welfare Ministry. They will also handle the immunization of Japanese dock workers and assist in the port Rodent Control program.

Weekly Report of Incoming Quarantinable Disease

Week ending 26 April – Negative.

SECTION VI SOCIAL SECURITY

Social Insurance

Surveys reveal the Japanese Government did not foster social insurance programs in Korea.

No objections were made to proposed ordinances by the Ministry of Welfare incorporating features prescribed by the New Constitution into the administration of the Welfare Pension Insurance program. They included:

- a. Granting of equal status to all children involved as survivors instead of giving sole consideration to eldest male child.
- b. Participation of elected officials of prefectural government in administration of program.

The Insurance Bureau, Ministry of Welfare, has initiated a program for assembling data on industrial conditions with a view toward establishing an unemployment insurance program.

National Health Insurance

Representatives of the Visiting Nurses Association of the National Health Insurance Associations presented a request to the Ministries of Welfare and Finance that additional appropriations be made to the national health program in order that more adequate medical care can be provided in the rural areas.

An inquiry regarding the budget allotment for National Health Insurance during 1947 has revealed that a tentative amount had been approved, which may be increased by the Diet under provisions of the New Constitution.

The nurses further revealed that a majority of the people in the rural areas desire a national health program. Most of the Associations that had to suspend operation were in low income areas or small communities where finances and lack of clinical facilities are a problem.

SECTION VII MEDICAL SERVICE

Japanese Civilian Hospital Strength Report for the period ending 14 March 1947 shows 3,147 hospitals with a capacity of 218,641 beds, 102,174 of which were occupied. During the same period 307,034 out-patients were treated.

SECTION VIII CONSULTANTS

Nutrition

The Japanese Society of Food and Nutrition, recently organized, held its initial conference 1 and 2 May at Keio University, Tokyo. Membership in the Society included all individuals trained in the basic science of nutrition as well as those professionally interested in food.

The Chief of the Public Health and Welfare Section, SCAP, addressed the members on the opening day of the conference. The Chief Nutrition Consultant, SCAP, addressed the group on the topic, "Broadening the Field of Nutrition for National Health".

Nutrition Surveys

Scheduled for the May nutrition surveys were received from Miyagi, Tochigi, Kanazawa, Gunma and Chiba.

SECTION IX MEMORANDUM TO IMPERIAL JAPANESE GOVERNMENT

None

CRWFORD 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 26 April 1947 w/digest.
- 2. Venereal Disease Report for week ending 26 April 1947.
- 3. Monthly Summary Report of Cases and Deaths from Communicable Diseases in Japan, for four week period ending 26 April 1947 w/digest.