

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

**WEEKLY BULLETIN**

**For Period  
4-10 October  
1948  
No.93**

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## SECTION I GENERAL

### Ministerial Instructions

Included with this issue of the Weekly Bulletin for information of Military Government Public Health Officers and Public Welfare Officers are lists of instructions sent from the various Bureau of the Ministry of Welfare to prefectural governments for the period 6 - 11 and 13 - 18 September (see Incl. #1).

### Health Center Organization and Personnel

A chart showing the organization and personnel of health centers is inclosed with this issue of the Weekly Bulletin for information of Military Government Public Health Officers and Public Welfare Officers. (Incl. #2). The organization follows the same general plan as was presented in March for the Model Health Center. Budgetary provisions have now been made for staff of 61, for each of the Model health centers, exclusive of sanitary team personnel which were provided for in the regular budget. The column headed "Non-professional employees" included second and third class officials as well as employees of other ranks.

### Technical Bulletins

The following Public Health and Welfare Technical Bulletin is inclosed with this Weekly Bulletin:  
Title: Daily Life Security Law (Seikatsu Hogo Ho)  
Short Title: TB-PH-WEL 17

## SECTION II PREVENTIVE MEDICINE DIVISION

### Preventive Vaccination: Letter to Prefectural Governors

The Vice-Minister of Welfare is publishing a letter subject, "Administration of Preventive Vaccination Law", to Prefectural Governors requesting them to publicize the purpose of the Law and emphasize certain matters regarding the Law's administration.

Stress is placed on the importance of public health education in obtaining the cooperation of the people so that the obligatory nature of the vaccination program will be less in evidence. With good publicity, compliance may thus be obtained willingly without resorting to compulsion.

Reference is made to other related Laws, such as Epidemic Disease Prevention Law (Infectious Disease Law), the Tuberculosis Prevention Law, the Health Center Law, the Labor Standards Act, and the National Health and Hygiene Act.

Delegation of the Law's administration to Chiefs of Health Centers is suggested.

It is suggested that, for the convenience of working people, the physicians supervising health of employees may vaccinate at places of employment, giving a temporary certificate of vaccination which each individual will take to the authorities at the place of residence for recording. Careful planning with attention to administrative and technical details is advised. The certificate and the record of vaccinations should be made with care, but the "Preventive Vaccination Card" will not be issued for the time being.

The basis for expenses necessary for enforcement is stated as being still under negotiation. In regard to collections of actual costs, no others than described in Art.3 of the Cabinet Order are to be collected. A separate report is to be made as to the method for determining the actual costs. Only applicants for aid under the Living Protection Law (Daily Life Security) or those in similar state are to be considered unable to pay costs and to receive vaccination without charge.

### Venereal Disease Prevention: Ministry Regulations

Ministry Regulations were published 24 September by the Ministry of Welfare regarding certain requirements of the Venereal Disease Prevention Law.

Some of the more important provisions follows: physicians are required to report the name, date of birth sex, occupation and address of patient, diagnosis, date of exposure, date of onset of symptoms, record of former treatment, and name, sex, address and occupation of contacts. Health officials empowered to perform health examinations must be physicians.

Prior approval by the Ministry of Welfare must be obtained for action under Article 12 of the Law (special measures by Governor) giving the locality and conditions of spreading venereal disease, the name and address of hospitals or clinics proposed for health examinations, the object of the examination, the means of examination and estimation and estimation of expense. A report of results of such special examinations is to be made to the Minister of Welfare promptly upon its conclusion.

Medical examinations for syphilis will include a darkfield examination, or more than two serological tests; for gonorrhea, a microscopic examination or culture; for lymphogranuloma venereum a Frei test.

Those unable to pay for examinations or treatment will submit, to the physician or hospital director who provided such care, a certification of such inability subject certificate will be obtained from the Chief of Health Center of their area of residence. This certificate will be the basis for payment by the prefectural government of the charges for such examination or treatment.

Applications will be made to the Ministry of Welfare for approval of establishing hospitals or clinics. This application will include reasons for establishment, name and site, means of management, outline of buildings and ground plan, list of equipment, number of staff and other personnel, proposed date of opening, and estimated annual expenses and incomes.

Substitute hospitals of clinics will be leased on an annual basis, subject to renewal, with applications for approval of the Minister of Welfare to include reasons for needing such a substitute hospital or clinic, name and personal history of director, name and location of the institution, number of staff and other personnel, outlines of building and equipment, capacity for out-patients and in-patients, monthly average of patients in the past, estimated expense, terms of lease and copy of proposed agreement.

A form for and identification card, to be carried by all health officials when carrying out examinations or investigations pertaining to venereal disease control is annexed to the regulations.

#### Venereal Disease Prevention: Cabinet Ordinance

The Cabinet has before it for consideration an ordinance which when passed will authorize subsidies of National Treasury funds to prefectural governments for certain Venereal Disease Preventive activities. Details will be published in a later issue of this Bulletin.

#### Maternal and Child Handbook

It is expected that a one reel film illustrating the "Maternal and Child Handbook" will shortly be produced under the guidance of the Maternal and Child Health Section, Children's Division, Ministry of Welfare. The scenario has already been approved. The purpose is to give the public a better understanding of the procedures indicated in the handbook.

#### Refresher Training Courses at the Institute of Public Health

During the period April 1947 to 30 September 1948, more than 1,000 students completed refresher training courses given at the Institute of Public Health in Tokyo. The number of graduates of the different courses is as follows:

Public Health (Medical) Officer	206
Public Health Nurses	268
Public Health Sanitarians	229
Public Health Veterinarians	136
Public Health Pharmacists	134
Public Health Nutritionists	38
Public Health Sanitary Engineers	34

These individuals, all of whom were engaged in public health work before taking these courses, came to the Institute from every prefecture and the larger cities of Japan. They were returned to their home prefectures to assume responsible positions in the local health organizations. It has been reported, however, that frequently local health organizations have not made good use of the personnel which they sent to the Institute for training. In some instances this is the result of having selected poorly qualified persons in the first place.

It is highly important that in the future well-qualified individuals, preferably younger persons showing evidence of leadership, be recommended to receive training at the Institute. Also, close surveillance should be exercised in order to ascertain that these people return and fill positions where their training will be used to the best advantage in furtherance of the public health program.

The next course scheduled at the Institute of Public Health will be for Public Health Nurses and will begin in December. Additional courses for other categories of personnel will be scheduled early in 1949. Announcement of the exact dates for the opening of courses will be made at a later date.

### SECTION III MEDICAL SERVICES DIVISION

#### Military Government

Public Health Officers are urged to bring to the attention of the local Japanese medical societies the importance of medical ethics in the life of the physician and the benefit that ethical conduct on the part of the physician contributes to the welfare of the community. It is realized that individual physicians do not, in all cases, understand the ethical code which governs the medical profession, or, if understanding is present, do not accept their social responsibility.

Under this code, which stems from the oath of Hippocrates, elaborated by the laws of Hippocrates, physicians, "Should, as good citizens, and because their professional training specially qualifies them to render this service, bear their full part in enforcing the laws of the community and sustaining the institutions that advance the interests of humanity. They should cooperate especially with the proper authority in the administration of sanitary laws and regulations. They should be ready to counsel the public on subjects relating to sanitary police, public hygiene and legal medicine.

Quoting further, from the principles of medical ethics, as promulgated by the American Medical Association, in reference to medical societies, it is stated that "in order that the dignity and honor of the medical profession may be upheld, its standards exalted, its sphere of usefulness extended, and the advancement of medical science promoted, a physician should associate himself with medical societies and contribute his time, energy and means in order that these societies may represent the ideals of the profession."

The medical societies, therefore, become the recognized organs for the expression of the ideals of the profession, and the voice of the profession at large in the matter of ethics. This places upon medical societies a responsibility for the conduct of their members.

The local medical associations represent the physicians of Japan, and therefore must assume responsibility and establish within their organizations a strong and qualified grievance committee with disciplinary powers to be exercised against those physicians who transgress the ethical code.

It would be well to call to the attention of the physicians of Japan that it is not by scientific achievement alone that the medical profession of a country gains respect and dignity in the minds of medical men of other countries, unless such achievements are coupled with the ethical aspects of medicine.

There are many factors in Japan that lead to transgression of the ethical code, such as the highly developed sense of personal loyalty and duty, and unfavorable economic conditions. Japanese physicians, either through professional timidity or audacity, are apt to circumvent ethical principles when ethical ideals are not constantly stressed and brought to their attention. Therefore, it becomes necessary to elaborate the principles of medical ethics as understood and accepted by the physicians of the Occidental world.

The Japan Medical Association has established a Grievance Committee within its organization, and has already impartially considered the alleged unethical conduct of several physicians in the Tokyo area. The impartial judgment expressed by the Committee and accepted by the society has been gratifying.

It is desirable that impetus be given to the functioning of similar committees in each of the local societies, and orientation given to the understanding of medical ethics held by the profession.

#### SECTION IV VETERINARY AFFAIRS DIVISION

##### Equine Encephalomyelitis

No new cases of equine encephalomyelitis have been reported in Hokkaido since 30 September according to the weekly report of 2 - 8 October, submitted by the Animal Hygiene Section, Ministry of Agriculture and Forestry. During the period 27 - 30 September a total of 101 new cases, all classified as suspects, were reported from Hokkaido but no new cases have been reported for October. To date Hokkaido remains the only Prefecture reporting new cases and the possibility of additional cases will be largely those that have been discovered in remote areas. With the rapid decline of equine encephalomyelitis cases, the quarantine will be lifted, effective 12 October, and the inter-island traffic of horses will be resumed. Official notification to all Prefectures has been sent by the Ministry of Agriculture and Forestry to lift quarantine on that date.

##### Food Sanitation

Recently, cases of food poisoning have been reported to this office. It is suggested Military Government Public Health Officers contact the Prefectural Food Inspection Section and recommend greater activity in the procuring of food samples for laboratory analysis and to stimulate a more active sanitary inspection by Food Inspectors in establishments producing and handling food items. All food that has been allocated to each prefecture for rationing and distribution should be inspected at the time of its receipt and during the time it is held in storage awaiting distribution. The responsibility for this lies with the Prefectural Food Sanitation Section. Recent disclosures indicate a failure on the part of the Food Inspectors to make recommendations as to the correct manner of storage and to allow violations of good sanitary measures to exist in distribution points during rationing periods uncontrolled.

##### Animal Diseases

<u>Prefecture</u>	<u>Disease</u>	<u>Number of Cases</u>
Hokkaido	Equine Encephalomyelitis	101
Aichi	Swine Plague	1
Niigata	Swine Plague	1
	Swine Erysipelas	1
Miyazaki	Swine Erysipelas	1

Note: Submitted by Animal Hygiene Section, Ministry of Agriculture and Forestry on Weekly Report of 2-8 October.

#### SECTION V SUPPLY DIVISION

##### Production

A total of 3,290 pieces of the various types of DDT Dusting and spraying equipment for insect control program was produced during the period 26 September - 2 October. Adequate inventory stocks are on hand to meet all requirements.

During the period 26 September - 2 October, 52,105 lbs. of 10% DDT dust, 8,625 gallons of 5% DDT residual effect spray, and 2,000 vials of typhus vaccine were distributed. At the same time, 44 lbs. of 10% DDT dust, 62,065 gallons of 5% DDT spray, and 2,000 vials of typhus vaccine were received, leaving inventory stocks on hand in regional warehouses of the Ministry of Welfare of 1,200,912 lbs. of 10% DDT dust, 398,709 gallons of 5% DDT spray and 52,046 vials of typhus vaccine.

##### Distribution

The distribution of 2,975 pieces of dusting and spraying equipment which were shipped to 19 prefectures during the period 26 September - 2 October is listed below:

Prefecture	DDT Duster	Knapsack Sprayer	Semiautomatic Sprayer	Hand Sprayer	Engine Sprayer
Hokkaido		10			2
Iwate		20	30		
Yamagata				50	
Fukushima			20	20	
Ibaraki		200		20	
Tochigi				200	
Saitama		19			
Chiba				200	
Tokyo		8		250	5
Toyama		20			
Ishikawa		20			
Shizuoka		6	1		
Aichi		15			
Hyogo	720				
Shimane	320				
Hiroshima	200		24		
Fukuoka		300	20	250	
Kumamoto		10	5		
Miyazaki		10			
Total	1,240	638	100	990	7

#### SECTION VI NARCOTIC CONTROL DIVISION

##### Narcotic Control Activities Report - August

The August report of narcotic control activities from the Ministry of Welfare contained the following information:

Total registrants	85,166
Arrest - Registered persons	27
Unregistered persons	68
Convictions - Registered persons	8
Unregistered persons	19
Thefts of narcotics (including 3 hospitals)	20
Losses by fire (including 9 in Fukui Prefecture)	10

Penalties for registrants varied from 1,000 yen fine to six months penal servitude including one suspended sentence. Penalties for non-registrants varied from 2,000 yen fine to one year penal servitude including nine suspended sentences. Charges against two non-registrants were dropped because of insufficient evidence. Fourteen registrants were admonished and four minor violations were disposed of administratively.

For the first time since June 1946 two defendants charged with narcotic violations were found not guilty by the courts.

The report also summarized the activities of narcotic agents as follows:

Inspection of registrants	1,117
Investigations originated	153
Investigations concluded	128
Investigations not concluded	359

Four persons were arrested for illegal cultivation of marihuana.

##### Monthly Reports

Prefectural narcotic offices, charged with the responsibility of forwarding monthly reports to the Ministry of Welfare for consolidation, continue to prepare reports which are in error since the tabulations will not balance with the figures for the previous month. The Narcotic Section, Ministry of Welfare, has been requested to advise the Narcotic Control Division if any future reports are in error in order that appropriate action may be taken to assure correct reports being forwarded.

## SECTION VII WELFARE DIVISION

### National Relief Association (Dobo Engo Kai)

References: Public Health and Welfare Weekly Bulletin No.79 (for period 28 June - 4 July), No. 80 (for period 5 - 11 July) and No.83 (for period 26 July - 1 August).

Thirty-nine Branch Offices (prefectural) of Dobo Engo Kai are to be participating members of the Community Chest and will be entitled to allocation of Chest Funds raised during the current Community Chest - Japanese Red Cross Joint Fund Campaign for the fiscal year 1948 - 49. The Branch Offices (prefectural) not participating in the Community Chest and who will conduct their own independent membership campaigns are: Iwate, Akita, Fukushima, Gumma, Saga, Nagasaki and Kagoshima.

### Japanese Red Cross Society

#### Disaster Relief and Preparedness:

a. Niigata City (Niigata Prefecture): On 23 August a fireworks exhibition was held near Bandai Bridge. The Red Cross Chapter, in anticipation of the large crowds that would assemble, established a Temporary Emergency Medical Aid and Relief Station and therefore were able to give immediate medical assistance to those persons injured when the bridge suddenly collapsed due to excess strain. Medical emergency treatment was given to 60 patients and 31 other persons more seriously injured were transported to Takegawa and Hasegawa Hospitals.

b. Nagahama City (Ehime Prefecture): One hundred eighty-five houses were totally destroyed and 15 houses were partially destroyed by fire, on 17 September, causing 786 persons to be homeless. No persons were killed and the injuries were minor. A Red Cross Relief Station was established within two hours and assistance was given to 125 people.

c. Saga Prefecture. Casualties in the prefecture, as of 19 September, resulting from a flash flood on 14 September included; 76 persons killed, 78 injured and 10 missing. The Saga Red Cross Chapter promptly dispatched six Medical Aid Teams into the affected areas and gave medical assistance as needed.

d. Nagasaki Prefecture. Casualties in the prefecture, as of 14 September, resulting from a flood on 12 September, included 74 persons killed, 39 injured and 51 missing. The Red Cross dispatched three Medical Aid and Relief Teams to the disaster area on 12 September and gave medical aid and assistance to the flood victims.

#### Volunteer Services:

a. Production: Great activity is noted in this very important program. One of the large production projects now underway in Tokyo, for example, is the remarking of 150,000 ditty bags (donated by the American Red Cross out of surplus) into children's garments.

#### Junior Red Cross:

a. Saitama Chapter: A Junior Red Cross meeting was held on 28 September and 160 persons, mostly outstanding students above the fifth grade of elementary schools, middle schools and teachers (representing 23 schools) attended. A full report on the Gora Youth Leadership Training Center was given by those delegates who attended camp this year.

b. The Junior Red Cross, National Headquarters, have representatives attending the Youth Organization Leadership Training Center, sponsored by the Ministry of Education and being held between 4 - 15 October. Other organizations being represented are the Ministry of Welfare, Y.M.C.A. and Boy Scouts.

Community Chest - Japanese Red Cross Joint Fund Campaign Goals (Prefectural and National)

The established Community Chest - Japanese Red Cross Joint Fund Campaign Goal (national) for 1948-49 is 1,178,950,000 yen, with 76% for Community Chest (898,717,800 yen) and 24% for Japanese Red Cross 280,232,200 yen).

The breakdown of the national goal on a prefectural basis giving the prefectural goals and the per centum agreed upon covering the allocation of all monies raised is given below:

Prefecture	Goal (1948-49)	Community Chest	Japanese Red Cross Society	%-CC	%-RC
Hokkaido	Yen 70,000,000	Yen 60,000,000	Yen 10,000,000	86%	14%
Aomori	11,000,000	6,600,000	4,400,000	60	40
*Iwate	17,000,000	12,050,000	4,950,000	71	29
Miyagi	16,000,000	11,000,000	5,000,000	69	31
Akita	10,000,000	5,560,000	4,440,000	56	44
Yamagata	25,000,000	20,000,000	5,000,000	80	20
Fukushima	20,000,000	15,000,000	5,000,000	75	25
*Ibaraki	15,000,000	10,500,000	4,500,000	70	30
Tochigi	21,000,000	17,664,800	3,335,200	84	16
*Gumma	12,000,000	6,999,000	5,001,000	58	42
*Saitama	16,000,000	10,000,000	6,000,000	63	37
Chiba	25,000,000	19,000,000	6,000,000	76	24
Tokyo	80,000,000	64,000,000	16,000,000	80	20
Kanagawa	70,000,000	58,333,000	11,667,000	63	17
Niigata	29,000,000	20,000,000	9,000,000	69	31
Toyama	13,000,000	10,000,000	3,000,000	62	38
Ishikawa	13,000,000	8,000,000	5,000,000	77	23
Fukui	13,000,000	9,500,000	3,500,000	73	27
Yamanashi	9,450,000	6,700,000	2,750,000	71	29
*Nagano	30,000,000	19,000,000	11,000,000	63	37
Gifu	20,000,000	15,000,000	5,000,000	75	25
Shizuoka	20,000,000	15,000,000	5,000,000	75	25
Aichi	66,000,000	54,000,000	12,000,000	82	18
Miye	16,000,000	10,666,000	5,334,000	63	37
Shiga	11,000,000	7,700,000	3,300,000	70	30
Kyoto	50,000,000	40,000,000	10,000,000	80	20
Osaka	85,000,000	65,450,000	19,550,000	77	23
Hyogo	60,000,000	48,000,000	12,000,000	80	20
Nara	12,000,000	9,000,000	3,000,000	75	25
Wakayama	9,500,000	6,750,000	2,750,000	71	29
Tottori	9,000,000	6,000,000	3,000,000	67	33
Shimane	10,000,000	8,000,000	2,000,000	80	20
Okayama	21,000,000	15,100,000	5,900,000	72	28
Hiroshima	30,000,000	22,500,000	7,500,000	75	25
Yamaguchi	26,000,000	20,000,000	6,000,000	77	23
Tokushima	15,000,000	10,435,000	4,565,000	70	30
Kagawa	14,000,000	10,500,000	3,500,000	75	25
Ehime	25,000,000	19,560,000	5,440,000	78	22
Kochi	13,000,000	8,700,000	4,300,000	67	33
Fukuoka	50,000,000	43,000,000	7,000,000	86	14
Saga	15,000,000	12,000,000	3,000,000	80	20
Nagasaki	20,000,000	14,500,000	5,500,000	73	27
Kumamoto	21,000,000	15,000,000	6,000,000	71	29
Oita	18,000,000	14,400,000	3,600,000	80	20
Miyazaki	10,000,000	6,670,000	3,330,000	67	33
Kagoshima	17,000,000	10,880,000	6,120,000	64	36
	1,178,950,000	898,717,800	280,232,200	76%	24%



\*Did not conduct Community Chest Campaign for 1947-48.

#### Allocation of LARA Relief Supplies to Meet Disaster Needs

An allocation of clothing was approved by the LARA Central Committee on 28 September 1948 for disaster relief purposes in areas recently visited by typhoon and accompanying floods. The clothing allocation is given below:

<u>Prefecture</u>	<u>Amount</u>	
Iwate	180	bales of clothing
Miyagi	90	"
Chiba	40	"
Shizuoka	10	"
Kanagawa	10	"
Gumma	10	"
Ibaraki	10	"
Saga	40	"
Nagasaki	50	"
*Fukui	<u>590</u>	"
Total	1030	bales of clothing (Approx. 150 pieces per bale)

\*Earthquake and subsequent floods.

#### Overseas Shipments of LARA Relief Supplies

LARA shipments, numbers 92 to 96, inclusive, for Japan, arrived in Yokohama between 20 August and 7 September. These shipments contained a total of 104.63 tons of relief supplies as given, by individual shipment, below:

- a. 92nd Shipment: Arrived aboard the S.S. Canada Mail on 30 August and contained 5 tons of clothing.
- b. 93rd Shipment: Arrived aboard the S.S. Britain Victory on 30 August and contained 40 tons of food.
- c. 94th Shipment: Arrived aboard the S.S. Julia Luckenbach on 3 September and contained 7.43 tons (clothing, including shoes).
- d. 95th Shipment: Arrived aboard the S.S. President Polk on 10 September and contained 19.77 tons (food - 15 tons, clothing - 4.1 tons, miscellaneous - .67 tons).
- e. 96th Shipment: Arrived aboard the S.S. American Transport on 7 September and contained 32.43 tons (food - 25 tons, clothing - 6.78 tons, miscellaneous - .65 tons).

The total LARA relief supply shipments to Japan now amount to 6,847.22 tons, consisting of the following:

Food	80.00 tons
Clothing (including shoes)	23.31 tons
Miscellaneous (including soap and seeds)	<u>1.32 tons</u>
Total	104.63 tons

#### Medical Social Work

In order to meet the growing need for medical social workers in Health Centers and various hospitals, the Japan Social Work Association is planning a special short term course in medical social work to be held at the Japan School of Social Work in Tokyo. It is anticipated that the course will be held every day from 1 to 5 p.m. but the dates have not been definitely determined. Fifty students at least 25 years of age will be admitted at a fee of 500 yen each and will include:

- a. Students of universities and technical schools who are interested in medical social work.
- b. Those who have had two years or more experience in social work and are interested in medical social work.
- c. Others who are approved by the school authorities as good material. A certificate will be given to each student upon completion of the course and it is expected that positions will be available in medical institutions.

Health Centers and hospitals which are looking for medical social workers or which have the possibility of establishing social service departments are to be informed of the course and are asked to select and send promising persons for this training. Inquiries should be sent to the Japan School of Social Work.

## SECTION VIII SOCIAL SECURITY DIVISION

### National Health Insurance

Observation in the field of current efforts to revive and reorganize National Health Insurance has yielded the following findings:

1. Meetings are being held in the Prefectures by representatives of cities, towns and villages of existing National Health Insurance associations, doctors, and other interested parties to determine the future course of National Health Insurance. Reportedly, large numbers of cities, towns and villages have expressed interest, through their representatives, in administering National Health Insurance on a municipal basis, as provided by the revised National Health Insurance Law. Likewise, a number of associations are reported to have indicated the intention of continuing in business in localities in which the municipality will not take over the administration of National Health Insurance.

2. Little appears to have been done, so far, to implement these professed intentions. The steps required are as follows:

- a. In those instances in which the city, town or villages intends to administer National Health Insurance, a resolution to this effect must be passed by the local assembly. If the local assembly does not favor municipal operation, any National Health Insurance Association or other juridical person administering National Health Insurance, existing or to be created, may administer National Health Insurance in the locality concerned. To effect this it must call a general meeting to obtain the consent of the membership.

3. The Prefectural Insurance Section, in particular the Subsection for National Health Insurances, has charge of the publicity required to acquaint the parties concerned and the population at large with these amendments to the National Health Insurance Law which became effective 1 July.

It was found that in some prefectures little has been done with respect to this. In other prefectures the reorganization has been misrepresented as compulsory. According to the Law as amended, no locality or association or other juridical person is to operate a National Health Insurance program unless a majority of the local residents eligible to belong, or of their elected representatives in the city, town or villages assemblies so desires. In this case, but only in this case, all eligible residents will be covered. While this is being encouraged, care must be taken not to give the appearance of compulsion.

## SECTION X MEMORANDA TO JAPANESE GOVERNMENT

None.

CRAWFORD F.SAMS  
Brigadier General, Medical Corps  
Chief

4 Incls.

1. List of Ministerial Instructions from Various Bureaus of the Ministry of Welfare to Prefectural Governments.

2. Organization and Personnel of Health Centers in Japan.
3. Report of Cases and Deaths from Communicable and Venereal Diseases in Japan, Week Ended 2 October, 1948.
4. Number of rate of cases and deaths from Communicable and Venereal Diseases in Japan, 4 week ended 25 September 1948.

**GENERAL HEADQUARTERS  
SUPREME COMMANDER FOR THE ALLIED POWERS  
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## SECTION I GENERAL

### Declassification of Public Health and Welfare Weekly Bulletins

All Public Health and Welfare Weekly Bulletins beginning with the one issued for the period 9 - 15 December 1945 and including Weekly Bulletin No.93 for the period 4 - 10 September 1948 have been declassified from "Restricted" to "Unclassified".

Beginning with this issue of the Bulletin, the main body will be "Unclassified". A "Restricted" Annex will be prepared for information of Military Government Teams which will contain data regarding contemplated programs and other information of interest only to Military Government Teams.

## SECTION II PREVENTIVE MEDICINE DIVISION

### Improvement in Sanitation

Reference Weekly Bulletin No.87 for 23 - 29 August in which comparison was made between certain prefecture morbidity rates for July 1948 with those for July 1947.

The August 1948 dysentery rate for all of Japan was only 28% as high as the August 1947 rate. The greatest improvement, when comparing the prefecture dysentery rates for August 1948 with those for August 1947, was shown by Yamanashi with 8% of the previous year's August rate. Others in order were Ishikawa (9%), Nagano (11%), Tochigi (13%), Nagasaki (14%), Fukushima (14%), Yamagata (15%), Tokushima (17%), Nara (19%), and Hyogo (19%).

The August 1948 typhoid fever rate for Japan was 3% of the August 1947 rate. When reviewed by prefectures, it is found that the greatest reduction in rates was shown by Kumamoto (no typhoid reported in August of this year), Yamanashi (8%), Ishikawa (12%), Wakayama (12%), Kagawa (16%), Gumma (18%), Shimane (18%), Yamagata (19%), Hiroshima (19%), and Ibaraki (20%).

During July 1948, the four prefectures of Tokushima, Ishikawa, Yamanashi and Kagoshima did not report any paratyphoid. During August 1948 there was no paratyphoid reported in Yamanashi, Nagasaki, Kagoshima and Okayama. However, paratyphoid fever rates are not considered as a reliable indicator of improvement in sanitation. Of the three intestinal infections here reported, reduction in dysentery is probably the best indication an effective sanitation program.

When the September rates are available, a review will be presented in this Bulletin summarizing the seasonal prefecture experience with dysentery, typhoid and paratyphoid fever.

### Port Quarantine

A new quarantine station at the port of Shimizu, Shizuoka Prefecture, was formally commissioned and dedicated on 13 October.

During the period from 1 October through 7 October, 7835 persons were repatriated to Japan: 121 from China, 1815 from Karafuto and 5899 from Siberia.

## SECTION III VETERINARY AFFAIRS

### Equine Encephalomyelitis

The only new cases of equine encephalomyelitis reported for period 9 - 16 October by the Animal Hygiene Section, Ministry of Agriculture and Forestry, were six cases in Yamagata Prefecture. It should be noted that no new cases were reported from Hokkaido, which has been the last prefecture reporting cases in considerable numbers.

### Animal Diseases:

<u>Prefecture</u>	<u>Disease</u>	<u>No. of Cases</u>
Yamagata	Equine Encephalomyelitis	6
Hokkaido	Swine Cholera	156

Note: Submitted by Animal Hygiene Section, Ministry of Agriculture and Forestry on Weekly Report of 9 - 15 October 1948.

#### SECTION IV NURSING AFFAIRS DIVISION

##### Model Demonstration School

The capping ceremony for the first year students was held 13 October at which 41 students received their caps. The nursery plans are developing very well and plans for a very practical formula room are underway. The graduate nurses are assuming much more responsibility in the school and in the supervision program on the wards.

##### Public Health Nurses Course

The sixth course for Public Health Nurses will open in December at the Institute of Public Health. The application blanks have been sent to all prefectures. This is the regular four-months course for Public Health Nurses.

A two day meeting was held by Japanese Nursing Affairs Section of the Ministry of Welfare on 12 and 13 October. All prefectures were represented and the program for the coming year and responsibility of the sub-sections in the prefectures was discussed.

The first Regional Institute for Public Health Nurses to be held in Hokkaido opened 4 October, sponsored by the Ministry of Welfare and the Nurses Association. There were about 150 in attendance for the seven days. Representative from SCAP attended and spoke on the various phases of public health work.

#### SECTION V SUPPLY DIVISION

##### Production

A total of 5440 pieces of the various types of DDT dusting and spraying equipment for insect control programs was produced during the period 3 - 9 October. Adequate inventory stocks are on hand to meet all requirements.

The following companies were selected by the Ministry of Welfare to manufacture DDT dusting and spraying equipment for the 1948 production program:

a. Shikutani Seisakusho Co., 1, Yamahamajima-cho, Taito-ku, Tokyo, Phone Shitaya (83) 1556, 2449; Odawara Factory, 470, Renshoji, Phone Odawara 870; Obata Factory, Obata-machi, Kita-Kanbugun, Gumma Ken, Phone Obata 9.

b. Shibazaki Seisakusho Co., 1, 1-chome, Kanda-Nishiki-cho, Chiyoda-ku, Tokyo, Phone Kanda (25) 1781; Factory 324, Shibazaki, Jindaimura, Kitatamagun, Tokyo, Phone Musashi Chofu 326.

c. Ushida Funmuki Kojo Co., 157, Shirokane-Sanko-cho, Minato-ku, Tokyo, Phone Mita (45) 1023; Factory and factory phone, same.

d. Maruyama Sesakusho Co., 1, 2-chome, Kanda-Kaji-cho, Choyoda-ku, Tokyo, Phone Kanda (25) 4331, 4333; Factory 1304, Inage-machi, Chiba; Phone, same.

e. Hatsuda Kogyo Co., Ltd., 1,3-chome, Edobashi, Chuo-ku, Tokyo, Phone Nihonbashi (24) 2023; Factory 1441, Owada-cho, Nishiyodogawa-ku, Osaka, Phone Yodogawa 1716, 1819.

Present schedule of prices of the various types of equipment manufactured by the five companies is listed below in yen:

Name of company	Hand Duster		Sprayer Knapsack type 3 gal. cap.		Sprayer Pump type semi-automatic		Sprayer Hand Type ½ gal. cap.		Power Duster	
	Mfgr's Price	Consu mer's Price	Mfgr's Price	Consu mer's Price	Mfgr's Price	Consu mer's Price	Mfgr's Price	Consu mer's Price	Mfgr's Price	Consu mer's Price
Shikutani	290	335	1,224	1,414	2,627	3,036	610	705	25,704	29,698
Hatsuda	290	335	1,224	1,414	2,530	2,923	610	705	25,704	29,698
Shiba-zaki	290	335	1,273	1,470	2,530	2,923	500	578		
Ushida			1,224	1,414	2,627	3,036				
Maruyama			1,273	1,470	2,530	2,923			25,704	29,698

The knapsack type, 3 gal. capacity sprayer produced by the Maruyama and Shibazaki Companies carries a consumer price 49 yen higher than the three other producers. This additional cost, the manufacturers claim, is to cover the additional production cost in the use of the metallic piston in this sprayer. For the same reason the semi-automatic pump type sprayer manufactured by the Shikutani and Ushida Companies carries a consumer price 97 yen higher than the three other producers listed.

The prices quoted above are exempted from the transaction tax. The packing and crating charges are taken care of by the manufacturer while the consumer pays the transportation fees.

During the period 3 - 9 October, 99,921 lbs. of 10% DDT dust and 24,597 gallons of 5% DDT residual effect spray were distributed. At the same time, 128,327 lbs. of 10% DDT dust, 16,850 gallons of 5% DDT spray, and 2,690 vials of typhus vaccine were received, leaving inventory stocks on hand in regional warehouses of the Ministry of Welfare of 1,372,318 lbs. of 10% DDT dust, 403,580 gallons of 5% DDT spray and 54,736 vials of typhus vaccine.

Distribution of DDT products and typhus vaccine during September totaled 478,638 lbs. of 10% DDT dust, 179,165 gallons of 5% DDT residual effect spray, and 5,870 vials of typhus vaccine. During the month, 932,401 lbs. of 10% DDT dust, 210,700 gallons of 5% DDT spray and 2,000 vials of typhus vaccine were received. A breakdown of distribution to prefectures and government agencies follows:

Prefecture or Department	10% DDT Dust		5% DDT Residual Effect Spray		Typhus Vaccine	
	lbs		gals		vials	
Hokkaido	90,000		6,355		370	
Aomori	10,000		3,000			
Iwate	13,000		1,600		2,000	
Miyagi	-		-			
Akita	17,000		1,000			
Yamagata	-		10,000			
Fukushima	-		-			
Ibaraki	10,600		400			
Tochigi	-		-			
Gumma	-		-			
Saitama	-		-			

Chiba	-	650	
Tokyo	-	-	
Kanagawa	50,000	2,100	
Niigata	18,700	17,610	
Yamanashi	-	5,000	
Nagano	-	-	
Gifu	-	-	
Shizuoka	30,000	-	
Aichi	30,000	20,000	
Mie	-	-	
Toyama	-	-	
Ishikawa	-	-	
Fukui	-	-	
Shiga	-	-	
Kyoto	-	-	
Osaka	-	-	
Hyogo	-	-	
Nara	5,000	-	
Wakayama	-	3,000	
Shimane	40,000	3,000	
Okayama	35,000	35,000	
Hiroshima	-	-	
Yamaguchi	-	-	
Tottori	-	5,150	
Tokushima	-	-	
Kagawa	18,000	10,000	
Ehime	-	-	
Kochi	1,400	150	
Fukuoka	20,000	30,000	
Saga	-	-	
Nagasaki	-	-	
Kumamoto	-	-	
Oita	-	-	
Miyazaki	30,000	-	
Kagoshima	50,000	-	
Ministry of Welfare	13		
Ministry of Agric.& For.		120	
Quarantine Station:			
Hakodate	5,000	1,000	
Yokohama	200	200	
Kobe	250	300	
Moji	990	600	
Maizuru		750	3,500
Ujina		300	
Sasebo		300	
Miike		200	
Ministry of Transportation			
Main Office	2,250		
Tokyo Railway Dept.		5,250	
Osaka		4,000	



Hiroshima		2,000	
Moji		3,000	
Sendai		4,000	
Sapporo		3,000	
Ministry of Finance	50	10	
Price Control Board	40	5	
Board of Trade	405		
Public Inspection Office	40		
Japan Mariners Assn.			
Yokohama Office	200		
Ujina Office	500		
Losses Intransit		15	
	478,638	179,165	5,870

#### Distribution

During the first and second quarters of the Japanese Fiscal Year 1948 (April-September), textile sanitary material allocations were made which included quantities originally scheduled for allocation during the third quarter (October-December). This was done because the weaving mills had withheld their production for several months in anticipation of price increases. The price increases were made early in the first quarter. The weavers then shipped large stocks of gauze and bandage to the finishing mills where they were bleached and packaged for distribution. The amounts actually purchased and total quantities allocated are shown in the tables below:

#### QUANTITIES PURCHASED

Period	Absorbent Cotton Kg.	Gauze meter	Bandage		
			Staple Fiber roll	Triangular piece	Lint piece
January	149,567				
February	64,110	513,714			
March	86,590	655,679			
April	86,975	1,159,454	3,132	55	
May	202,243	5,359,855	336,547	8,498	333
June	188,791	5,248,341	359,744	8,881	1,124
July	148,284	5,120,994	326,458	13,581	950
August	174,162	6,305,388	384,643	16,590	1,342

#### QUANTITIES ALLOCATED BY QUARTERS

Period	Absorbent Cotton Kg.	Gauze meter	Bandage		
			Staple Fiber roll	Triangular piece	Lint piece
Jan-Mar	700,195	3,731,929			
Apr-Jun	*600,000	*32,508,800	*1,400,000	*30,000	*16,540
Jul-Sep	430,625	17,022,000	600,000		14,742
Oct-Dec	460,375	7,500,000			

\*It will be noted that the allocations marked with an asterisk are substantial quantities, the result of the large releases made at the increased prices. The quantities actually purchased are smaller than the amounts allocated. This is because the ration tickets that were issued against the Apr-June and Jul-Sep quarterly allocations are valid for six months. Many purchasers wait until the end of the valid period before making purchases. This results in an overlap of ration periods and sizable stocks for which ration tickets are outstanding.

The absence of an allocation of bandage for the 3rd quarter Japanese Fiscal Year, October, November, December is because unclaimed rations are adequate to meet the requirements for the period, and the ration tickets outstanding are valid during the period. The raw materials which would go into bandage production during this period will be used to make gauze which is in shorter supply.

<u>Prefecture</u>	<u>Absorbent Cotton</u>	<u>Gauze</u>
Hokkaido	25,364 kgs.	394,777 meters
Aomori	7,654	114,588
Iwate	7,474	117,237
Miyagi	9,031	142,708
Akita	7,613	116,825
Yamagata	7,186	113,853
Fukushima	12,026	186,894
Ibaraki	11,462	180,108
Tochigi	8,984	142,717
Gumma	8,781	137,398
Saitama	12,289	190,284
Chiba	12,410	204,112
Tokyo	29,778	546,484
Kanagawa	13,093	219,872
Niigata	14,124	225,864
Toyama	6,530	98,997
Ishikawa	6,097	97,960
Fukui	4,160	66,790
Yamanashi	4,445	73,112
Nagano	10,522	175,511
Gifu	8,358	133,238
Shizuoka	13,312	211,544
Aichi	17,303	280,627
Mie	7,850	130,606
Shiga	4,374	72,898
Kyoto	9,731	172,746
Osaka	18,717	317,909
Hyogo	17,173	282,554
Nara	4,088	67,995
Wakayama	5,269	87,193
Tottori	3,247	53,589
Shimane	5,407	88,324
Okayama	9,248	155,954
Hiroshima	11,527	188,790
Yamaguchi	9,302	155,838
Tokushima	5,067	77,944
Kagawa	5,548	86,054
Ehime	8,526	131,231
Kochi	4,784	77,204
Fukuoka	23,082	377,923
Saga	5,986	99,638
Nagasaki	9,850	160,293
Kumamoto	10,485	173,813
Oita	7,190	119,225
Miyazaki	6,160	94,893
Kagoshima	9,768	156,156
Total	460,375 kgs.	7,500,000 meters

From 3 - 9 October a total of 5,733 pieces of dusting and spraying equipment were distributed to 19 prefectures as follows:

Prefecture	DDT Duster	Knapsack Sprayer	Semiautomatic Sprayer	Hand Sprayer	Engine Sprayer
Hokkaido				90	
Tochigi		120			
Ibaraki	312	125			
Tokyo		331			2
Toyama	96				
Ishikawa		50			
Fukui		100			
Nagano			22		
Kyoto	264				
Osaka	200				
Hyogo	816				
Hiroshima		10			
Tokushima				120	
Kagawa	300		30		
Fukuoka	400	225	150		
Saga	400	160	40	100	
Kumamoto	600				
Miyazaki		200	200		
Kagoshima	150	40	80		
Total	3538	1361	522	310	2

## SECTION VI NARCOTIC CONTROL DIVISION

### Local Wholesalers

In some prefectures local wholesalers have advised narcotic practitioners to personally inscribe their signatures on order forms in addition to the regular stamp of identification used by Japanese, as an added precaution against the activities of traffickers who are attempting to procure and forge narcotic order forms. This precaution, in addition to requiring the person to whom narcotics are delivered to be personally identified, will probably thwart some of the sort of identification from representatives of local wholesalers who personally appear to receive the narcotics.

### Narcotic Thefts

The Narcotic Section, Ministry of Welfare has limited the amounts of narcotics which can be purchased by certain hospital who have experienced loss of narcotics through thefts. The hospitals affected are those who lost narcotics through negligence or insecurity such as having narcotics stored in an ordinary room or cabinet locked only with ordinary door keys.

The restriction on the amounts of narcotics which can be purchased will not be removed until the hospital has produced evidence that remedial measures have been taken and have been subjected to an inspection by Narcotic Agents who recommend removal of the restriction to the Ministry of Welfare. Some prefectures have reported that physicians themselves are procuring steel cabinets relatively inexpensive in which to store narcotics. The cabinets are bolted to the shelf or wall and have combination locks. The proportion which thefts have reached has required that the above steps be taken to safeguard narcotics.

### Partially Used Narcotics

The Narcotic Section, Ministry of Welfare is advising all Narcotic Agents to inform local wholesalers that it is a violation of the Narcotic Law for any wholesaler to receive narcotics with damaged or broken seals or narcotics that have been partially used. In the future, narcotics belonging to a registrant who has had his license cancelled or to a deceased registrant will not be returned to local wholesalers if the narcotics are old, deteriorated, damaged or partially used or if the seal has been damaged or broken. Such narcotics may be disposed of to other practitioners or hospitals who desire to buy them. In case there is no such registered person desiring to receive them, the narcotics are to be dispatched to the Drug Disposal Committee for salvage. In no case will any monetary restitution be made for narcotics which are to be salvaged.

SECTION VII  
WELFARE DIVISION

Licensed Agencies for Relief in Asia (LARA)

LARA shipments, numbers 97 through 100, of relief supplies for Japan, have arrived in Yokohama. These shipments contained 62.16 tons of the following supplies:

- a. 97th Shipment: Arrived aboard the S.S. Pioneer Lake on 9 September and contained 10.12 tons (clothing, 9.73 tons; miscellaneous, .39 tons).
- b. 98th Shipment: Arrived aboard the S.S. Marina Snapper on 15 September and contained 21.1 tons (food, 20.3 tons; miscellaneous, .8 tons).
- c. 99th Shipment: Arrived aboard the S.S. Oregon on 29 September and contained 29.95 tons (clothing).
- d. 100th Shipment: Arrived aboard the S.S. Marine Flyer on 1 October and contained .99 tons (food, .9 tons; clothing, .83 tons; miscellaneous, .07 tons).

The total LARA relief supply shipments to Japan now amounts to 6,909.38 tons, consisting of the following:

	<u>Tons</u>
Food	5302.43
Clothing (including shoes)	1238.83
Medicines	59.37
Cotton (raw)	207.62
Miscellaneous (including soap and seeds)	<u>101.13</u>
Total	6909.38

Cooperative for American Remittances to Europe and to the East (CARE)

The first shipment of CARE food packages (oriental pack) arrived in Japan in July. The shipment totalled 9,982 packages and the following information covers status of distribution as of 30 September.

Total packages received	9982
Total packages damaged	203
Total packages delivered	2569
Total packages in process of delivery	<u>1869</u> <u>4641</u>
Total packages on hand and not consigned	5341

Community Chest - Japanese Red Cross Joint Fund Campaign

Reports received to date indicate that the "Joint -Fund Drive" has been well organized in each of Japan's 46 prefectures and that the campaign is well under way.

Prefectural progress reports, covering the campaign, are expected this week and will be reported, as officially received, in subsequent Public Health and Welfare Weekly Bulletins. Only the following five prefectural preliminary progress reports have been received to date and cover collections up to 6 October.

Ibaraki	Yen	7,700
Tokyo		4,000,000
Gifu		851,590
Toyama		1,558,297
Kochi		<u>108,614</u>
Total	Yen	6,526,201

The following information pertaining to the Joint-Fund Campaign is given to illustrate the varied activities carried on in support of the endeavor.

- a. Military Government representative, Chiba Prefecture, addressed the volunteer workers and solicitors in a campaign rally held in Chiba City on 1 October.

b. Military Government officials in Gumma Prefecture assisted campaign officials in dropping 100,000 campaign leaflets from the air.

c. Tochigi Prefectural campaign officials dropped 100,000 leaflets from the air with the assistance of Military Government officials.

d. In Tokyo on 6 October, 500 Buddhists marched from Ueno to Kudan via Asakusa to assist in the campaign solicitation.

e. On 7 October, a member of the Imperial Family made a tour of the City of Tokyo, for the purpose of visiting and encouraging the volunteer street solicitors.

f. Nation-wide broadcasts are being held in support of the campaign with the broadcast originating at different stations. One such broadcast was originated in Kofu City, Yamanashi Prefecture.

g. The "red feathers" which are given to each contributor are much in demand - Tokyo, Kanagawa, Shizuoka, Yamaguchi, Ibaraki, Kyoto and Akita have found it necessary to re-order in large quantities.

#### Japanese Red Cross Society

##### Volunteer Service:

Two important Volunteer Service meetings held in Tokyo on 8 October and are briefly outlined below:

- a. Approximately 120 teachers from 87 Tokyo Junior High Schools gathered at the National Headquarters to learn about the Volunteer Service projects. They have decided to participate in the production (sewing) program and will be responsible for the completion of several thousands of garments.
- b. Three hundred representatives of the Tokyo Chapter's Volunteers were encouraged to continue their endeavors and were also praised for their present volunteer activities by the Emperor 3rd Empress.

### SECTION VIII SOCIAL SECURITY DIVISION

#### National Health Insurance

A number of National Health Insurance Associations have expressed interest in obtaining medical facilities owned by organizations or companies being dissolved. Information on possible alternatives may be of assistance.

The local association may enter into direct negotiations with the organization or company concerned, or may pool resources with other associations and complete such negotiations and fiscal arrangements on a joint basis. In either instance, it may be possible to obtain financial assistance from the Ministry of Welfare. Where there is not a sufficient number of associations or their combined resources are inadequate, it is possible, as authorized by Section III, Local Autonomy Law, for two or more city, town or village governments to federate for a specific purpose, such as the establishment and operation of a medical facility.

### SECTION IX MEMORANDA TO JAPANESE GOVERNMENT

PHMJG	DATE	SUBJECT	SURVEILLANCE	DISTRIBUTION
77	10/7/48	Request for Approval for Incorporation of the Japanese Bereaved Families Welfare Federation	No	MG 8th Army

Note: Memoranda to Ministry of Welfare, Japanese Government disapproving application (subject as above) and advising such incorporation as suggested would develop a program of special and preferential treatment for selected groups contrary to the purpose and intent of SCAPIN 775 dated 27 February 1946.

CRAWFORD F.SAMS  
Brigadier General, Medical Corps  
Chief

1 Incl:

Summary Report of Cases and Deaths from Communicable Diseases and Venereal Disease in Japan for the week ended 9 October 1948.

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

**ANNEX TO WEEKLY BULLETIN**

**For Period  
11-17 October  
1948  
No.94**

SECTION I - Preventive Medicine  
SECTION II - Veterinary Affairs  
SECTION III - Welfare

SECTION I  
PREVENTIVE MEDICINE DIVISION

Survey of Beds for Tuberculosis Patients

The survey concerning availability of beds for tuberculosis treatment is nearing completion. Beds now available are:

Governmental:	National Sanitoria	32,646
	National Hospitals	6,749
Private:	Non-national Sanitoria	10,115
	Non-national Hospitals	<u>11,998</u>
	Total	61,508

Percentage occupancy of national sanitoria as of 31 July was about 81.5 %. Occupancy figures for the other institutions are not yet available.

There were 147,411 deaths from tuberculosis in 1947. The ration of beds available to deaths per year is .42.

This is far below the ration necessary for control of tuberculosis. A ratio of two beds per death is considered necessary. (It is actually 1.4 in the United States).

Plans are being drawn up to reactivate 12,352 beds by effecting the minor repairs necessary and an additional 14,507 by major repairs. All these beds will be those of national hospitals or sanatoria. This will give a bed death ratio of .546.

In addition, new construction is contemplated to bring the bed death ration in each prefecture up to .5. This will require 11,399 beds and will bring the national ration up to .695.

It is planned to have all repairs and new construction completed by March 1950. Action is now under way to secure the necessary funds.

Public Health Education

The prefectural health departments throughout Japan are conducting public health information-education programs, some of which are very good. In many instances, however, subject material is not carefully checked for factual accuracy and as a result a great deal of misinformation is being passed on to the Japanese public. A similar situation exists at the National level.

In order to remedy this situation at the National level, a "Screening Board" is in the process of organization within the Ministry of Welfare. This "Screening Board" is to be composed of persons qualified to judge the quality and accuracy of public health material included in all scripts, (radio, slide-film, motion pictures, press releases, exhibits, posters, etc.). The Board members are to be selected from among persons within the Ministry of Welfare and various other organizations interested in the furtherance of public health.

When this Board is properly functioning the quality of public health information-education, programs should show a definite improvement. A "Screening Board" would be of great value in the prefectural health department programs.

SECTION II  
VETERINARY AFFAIRS DIVISION

Veterinary Education

A survey of the majority of the 16 listed Veterinary colleges in Japan has been completed, and the results summarized for submission to the Japanese Council on Veterinary Education on 22 October. Lack of instructors both in number and training, scarcity of text-books and technical knowledge and properly equipped clinics appear



to be the outstanding deficiencies. Generally speaking, most Veterinary colleges are beginning to realize their sub-standard condition and their attitude bespeaks progress in the forthcoming year.

### SECTION III WELFARE DIVISION

#### Japanese Red Cross Society

Disaster Relief and Preparedness, Disaster Relief letter (DR No. 4) subject: "Administrative Organization for Disaster Relief" has been prepared and is being forwarded to all Red Cross Chapters (prefectural). A copy of this letter is inclosed with this issue of the Public Health and Welfare Weekly Bulletin, for the information and guidance of Military Government personnel (Inclosure 1).

### SECTION IV SOCIAL SECURITY DIVISION

#### Japanese Nationals Employed for Occupation Forces

Recent legislation in the field of public health and welfare by the Japanese Government and necessity of controlling expenditures from funds established to meet Occupation Force requirements has resulted in a review and formulation of revised policies with regard to Japanese Nationals employed for the Occupation Forces.

A proposed SCAPIN and Command instructions have been drafted to assure that the Japanese Nationals employed for the Occupation Forces will have the full protection provided by the Labor Standards Law, the Preventive Vaccination Law, the Food Sanitation Act, the Venereal Disease Prevention Law, the Law for Prevention of Infectious diseases and the health insurance programs.

Further these documents prescribe procurement instruments to cover expenses for services involving discretionary determination under the Labor Standards Law and for requirements beyond the intent and scope of the other aforementioned laws.

CRAWFORD F. SAMS  
Brigadier General, Medical Corps  
Chief

1 Inc 1. Administrative Organization for Disaster Relief - DR LETTER NO. 4.

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

**WEEKLY BULLETIN**

**For Period  
18-24 October  
1948  
No.95**

SECTION I - General  
SECTION II - Preventive Medicine  
SECTION III - Medical Services (Nutrition Branch)  
SECTION IV - Veterinary Affairs  
SECTION V - Nursing Affairs  
SECTION VI - Supply  
SECTION VII - Narcotic Control  
SECTION VIII - Welfare  
SECTION IX - Social Security  
SECTION X - Memoranda to Japanese Government

## SECTION I GENERAL

Attached hereto as Inclosure #1 are Ministerial Instructions to Prefectural Governments for period 30 September - 9 October 1948.

## SECTION II PREVENTIVE MEDICINE DIVISION

### Personnel Changes

Dr. Melville D. Dickinson, who recently arrived in Japan, has assumed the duties of Tuberculosis Control Consultant of Public Health and Welfare Section, GHQ, SCAP. Dr. Dickinson will replace Dr. A. P. Knight who recently returned to the United States.

### Press Releases Concerning Reorganization of the Health Center System

Reference Section II, Weekly Bulletin 92. Inclosed with this Bulletin are Nos. 3 and 4 (Inclosures 2 and 3) in a series of Press Releases on the Reorganization of the Health Center System in Japan. Subject inclosures concern the Nutrition Service and the Tuberculosis Control Service of the Health Center.

This material was released to the Press at press conference in Tokyo on 7 and 25 October. The material has been prepared in semi-journalistic style and may be utilized for Press Releases to the local press.

### Typhus Fever Control

The Ministry of Welfare reports that the typhus fever control program this year will be carried out in essentially the same manner as in past years. The program will stress early reporting of all suspect cases; serological examination of blood samples of all suspect cases; immunization and dusting of inmates of orphanages, old peoples' homes, vagrant camps, vagrant homes, labor camps, mental hospitals and other public institutions. Commuters in large centers of population will also be immunized.

The program also provides for the continuation of the rickettsiacidal spray program at 30 day intervals using 2% cresolis content in 5% DDT residual effect spray; continuation of dusting of all civilians (other than Allied personnel) using the Hakodate-Aomori Ferry; dusting and spraying techniques against fleas previous to rat control programs in the control of murine typhus. The need for early and sustained information-education programs is emphasized.

The Ministry of Welfare plans to investigate the possibility of manufacture and use of wettable DDT dust for use in future spray programs.

### Bacterial Rat Poison

While investigating outbreaks of dysentery last spring, it was learned that bacterial cultures of salmonella organisms were being used as the active ingredient of a "so-called" rat poison. It was also learned that subject rat poison was being prepared and distributed throughout Japan under the sponsorship of the Ministry of Agriculture and Forestry. At that time investigations showed that:

1. Material being distributed was ineffective as a rat poison.
2. Some of the organisms contained in the preparation were pathogenic for man.
3. Adequate quantities of effective chemical rodenticides were available.
4. The use of bacterial rat poison was both dangerous and unwarranted.

Action was taken in that time to prohibit the manufacture and distribution of the "so-called" rat poison made from bacterial cultures. Recently, however, it has come to the attention of this headquarters that bacterial rat poison is again being distributed in some prefectures. The Ministry of Agriculture and Forestry has again been advised that the use of this material is both dangerous and ineffective and that they should prohibit its use.

Military Government Health Officers should determine whether or not subject preparation is being used in their respective prefectures and if so, should take the necessary action to see that production, distribution and/or use of this preparation is promptly discontinued. Provisions should also be made to prohibit its use in the future.

#### Venereal Disease Prevention Law

The new Venereal Disease Prevention Law represents a great forward step in public health administration and involves much more than is evident at first reading. The intention of the Law is to place venereal disease control on a sound public health basis and to provide adequate safeguards against infringement upon personal liberties and human rights. It will be necessary to go into considerable detail in explaining to Japanese health officials, certain principles of public health practice which must be followed in the application of this Law. Such principles in fact apply to the enforcement of all public health laws.

Public health activities have been removed from police control by appropriate changes in Japanese law. The responsibility for the implementation of health laws and their enforcement is now in the hands of public health officials. When properly supported by an enlightened public health officials will seldom have to call upon law enforcement agencies for assistance in the enforcement of health measures. Even when it becomes necessary to request assistance of other branches of government in the enforcement of a health law, it is important to follow the correct legal procedure. This does not include the use of police except as a last resort when there is sufficient danger to the public health to warrant such an extreme action.

The starting point for a sound venereal disease control program is the patient. The physician who makes the diagnosis sends a report to the local health authorities, and instructs the patient as to treatment and correct measures to be taken for the protection of others. If the patient is unable to pay for necessary treatment, he may obtain a certificate to that effect from the local Health Center, preferably after his inability to pay has been determined by investigation of the case. If the patient should refuse treatment or discontinue treatment, this fact should be reported by the physician to the Health Center. Reasonable effort should be made by both physicians and Health Officers to obtain voluntary compliance with the requirements of the Law.

Health officials may, if necessary, obtain an order from the governor of the prefecture for the patient to report for treatment, or an order for the patient to take treatment, or an order for the patient to enter a hospital for the period of infectiousness. However, this procedure should be resorted to only when the cooperation of the patient cannot be secured otherwise, and when it is determined that treatment is necessary for the protection of the public health. If the patient disobeys any of the above orders he becomes liable to a fine of not over 3000 yen, and, if he should "reject, hinder, or avoid" the investigation by competent health officials he becomes liable to a fine of not over 5000 yen.

It must be noted here that there is no provision in the Law for physical restraint of diagnosed venereal disease patients. No police action is indicated unless all other means at the disposal of Public Health Officers have failed and a definite charge can be made of violation of the Law. Refusal to take treatment or an attempt to evade treatment carries only the legal restraint of prosecution in the courts and the imposition of a fine.

After the patient is diagnosed and under treatment, the next step is an investigation of contacts, or persons in close association with the patient. The identity of the contact must be established, as well as the likelihood that he or she may have venereal disease. Efforts should be directed toward obtaining voluntary medical examination of contacts and an order for compulsory examination should be issued only when the Health Officer is possessed of definite facts that give him reasonable grounds to suspect the existence of the disease, and then only when in his judgment such an examination is actually necessary for protection of the public health, and the contact cannot be persuaded to submit voluntarily.

Any person ordered to take a medical examination to determine the presence of venereal disease must be notified that he or she has a right of appeal prior to the examination of he or she should claim there is not reasonable evidence to suspect that he or she has venereal disease. In case of appeal, no examination may be performed while awaiting court decision.

The compulsory examinations for which provision is made in Articles 10, 11 and 12 of the Law are compulsory only to the extent that the individual becomes subject to a 3000 yen fine if he fails to obey a properly executed order for such an examination. There is no provision for physical restraint to be used in the performance of these examinations. Not until an individual has broken the Law may he be arrested by the police.

In the application of Articles 26, 27 and 28 of the Law it must be remembered that this is a health law and not an anti-prostitution law. Unless there were recognizable symptoms, a person could hardly be expected to know that he or she was infected unless a physician had made a diagnosis and had so informed him or her. Article 26 provides a maximum penalty of two years imprisonment or 10,000 yen fine for anyone performing prostitution while knowing she has venereal disease in an infectious form. Article 27 provides a maximum of three years imprisonment or 20,000 yen fine for soliciting, pimping or providing a place for prostitution either knowing of venereal disease likely to infect others, or being negligently unaware of the presence of venereal disease when reason would have indicated this. Article 28 provides a maximum of one year's imprisonment or 5000 yen fine if one knows he (or she) has venereal disease in an infectious stage and has intercourse, nurses a baby or has intimate physical contact likely to infect a second person, whether or not the second person becomes infected. The imposition of penalties for such violations of the Law are, of course, a matter for determination by the Japanese courts.

Public Health Officers must keep in mind basic principles of public health when applying health laws to particular situations. One of these principles is that the presence of disease is not a criminal offense. One of the primary purposes of public health law is to establish suitable control measures which will insure that the presence of disease will not endanger the public health. The enforcement of these control measures is a responsibility of health officials and it is the duty of every individual citizen to comply with the measures which are required for the protection of the public health.

### SECTION III MEDICAL SERVICES DIVISION

Results of the August 1948 Nutrition Survey are enclosed with this Bulletin (Inclosure No.4). They are given for Tokyo, Eleven Cities and Forty-Six Prefectures in Consumption Studies and Physical Examinations conducted during the Survey. The nutritive value of the Survey will be submitted with an analysis in next week's issue of this Bulletin.

### SECTION IV VETERINARY AFFAIRS DIVISION

#### Equine Encephalomyelitis

Sporadic outbreaks of new cases of equine encephalomyelitis still are appearing in Hokkaido. During the period 16-22 October, a total of 37 new cases were reported although each one was classified as a suspect. This brings the total number of cases since the initial outbreak to 3,647 of which 1,292 are classified as suspects. The fatality rate has decreased due to the mildness of the cases now being reported.

#### Food Inspection

A recent visit to Nara Prefecture disclosed conditions very favorable from the standpoint of sanitary methods employed by the processors and handlers of food and food-products. Of particular note is the adoption of standards by the prefecture in controlling sanitary measures. Compliance with these standards has been carried out with very good results and the liaison between the Nara Military Government Team and the Prefectural Officials is maintained on a cooperative and constructive basis.

#### Veterinary Education Council

A conference was held at the monthly meeting of the Veterinary Educational Council in which proposed changes were submitted to those in attendance for consideration in the initial step toward creating a veterinary education curriculum comparable to those now being utilized in veterinary schools of other countries.

#### Animal Diseases

The following diseases were reported by the Animal Hygiene Section, Ministry of Agriculture and Forestry for the period 16-22 October.

<u>Prefecture</u>	<u>Disease</u>	<u>No. of Cases</u>
Hokkaido	Equine encephalomyelitis	37
Iwate	Swine erysipelas	5
Miyagi	Swine cholera	1

Note: The cases of equine encephalomyelitis as reported were all classified as suspects.

SECTION V  
NURSING AFFAIRS DIVISION

Public Health Nursing Education

Regional Public Health Nurse refresher courses of 10 days duration will be held in all eight regions. The funds for the program have been given to the Nursing Affairs Division of the Ministry and each prefecture will receive its allotment. The committee has planned the curriculum and arrangements have been made with all regions. Three of the courses have been held to date in the Hokkaido, Shikoku and Chugoku Regions.

The next four-month's Public Health Nurse course will open 4 December at the Institute of Public Health. This will be the sixth course since the beginning of the program.

Midwifery Education

The National Midwifery program was explained to Midwives at the Institute held in Niigata from 10-14 October at which there were 600 midwives present. Many who attended the Regional meeting in June accepted teaching responsibility in this course.

SECTION VI  
SUPPLY DIVISION

Production

A total of 5,070 pieces of the various types of DDT dusting and spraying equipment for insect control programs was produced during the period 10-16 October. Adequate inventory stocks are on hand to meet all requirements.

During the period 10-16 October 42,603 lbs. of 10% DDT dust, 11,173 gallons of 5% DDT Residual Effect Spray and 1,150 vials of typhus vaccine were distributed. At the same time 42,800 gallons of 5% DDT spray were received, leaving inventory stocks on hand at regional warehouses of the Ministry of Welfare of 1,485,315 lbs. of 10% DDT dust, 405,757 gallons of 5% DDT spray, and 53,586 vials of typhus vaccine.

Distribution

During the quarter Jul - Sep, 64 dark field microscopes were distributed to 14 prefectures as follows:

<u>Prefecture</u>	<u>Quantity</u>
Iwate	1
Kanagawa	3
Saitama	1
Osaka	16
Niigata	12
Ibaraki	3
Shiga	5
Kochi	2
Fukushima	6
Ishikawa	5
Aichi	5
Tokushima	1
Kagawa	1
Gifu	3
Total	64

In addition to previously scheduled allocations of absorbent cotton and gauze the following released U.S. Army stocks of cotton sanitary materials were allocated for distribution during October, November and December.

Prefecture	Gauze Bandage 3" by 10 yds. (12's)	Absorbent Cotton 1 oz.	Gauze Bandage 3" by 6 yds. (72's)	Gauze Bandage 4" by 10 yds. (12's)
Miyagi	600			
Akita	600			
Yamagata	600			
Fukushima	600			
Ibaraki	600			
Tochigi	600			
Gumma	600			
Saitama	600			
Chiba	600			
Tokyo		5,500		
Kanagawa	626			
Niigata	2,250	4,989	1,165	
Toyama			200	
Ishikawa			200	
Fukui			200	
Yamanashi			200	
Nagano			200	
Gifu			200	
Shizuoka			200	
Aichi		1,500	200	
Mie			200	
Shiga			200	
Kyoto			200	
Osaka		3,000	200	
Hyogo	2,575	6,000	1,349	
Nara			200	
Wakayama			200	
Tottori	631	1,750	300	
Shimane			200	
Okayama		500	200	
Hiroshima		500	200	
Yamaguchi			218	
Ehime				1,000
Kagawa				1,000
Kochi				1,000
Fukuoka				1,000
Saga				1,000
Nagasaki				1,000
Kumamoto				1,000
Oita				853
Total	11,482	23,739	6,432	7,853

A total of 4,763 pieces of dusting and spraying equipment was distributed to 20 prefectures during the period 10 - 16 October.

Prefecture	DDT Duster	Knapsack Sprayer	Semiautomatic Sprayer	Hand Sprayer	Engine Sprayer
Hokkaido				50	
Aomori	500				
Yamagata	200				
Fukushima	200				
Ibaraki	360			100	
Tokyo		4	1		
Toyama	168				
Yamanashi	100				
Shiga		40			

Kyoto			10		
Osaka	200				
Okayama	500				
Hiroshima			10		
Tokushima	500				
Kagawa	500		20	500	
Ehime	100				
Fukuoka		50	50		
Saga			200		
Miyazaki			200		
Kagoshima	200				
Total	3,528	94	491	650	-

## SECTION VII NARCOTIC CONTROL DIVISION

### Disposal of Certain Narcotics

The Narcotic Section, Ministry of Welfare, on 15 October issued Pharmaceutical and Supply Bureau Instruction Yaku-Hatsu No.512, to all prefectural governors. The letter sets forth the manner in which certain excess narcotics and narcotics of deceased or former narcotic dealers shall be disposed of. The Yaku-Hatsu which is attached lists the narcotic preparations concerned (See Inclosure No.5)

Yaku-Hatsu No.511, issued by the Narcotic Section, Ministry of Welfare, on the same date, states that the list of narcotic preparations listed in the letter which have been confiscated and no longer needed as evidence shall be destroyed in the presence of two narcotic agents and a report thereof forwarded to the Minister of Welfare. Narcotics which are included in the list and which have been surrendered to narcotic agents for disposition shall be destroyed in like manner. A copy of this Yaku-Hatsu is also inclosed. (Incl. #6)

It is emphasized that only those preparations listed in the Yaku-Hatsu may be thus destroyed. These narcotics are not considered salvageable. No narcotics or narcotic preparations other than those listed will be destroyed.

The instructions will enable all narcotic dealers to clear their stocks of many preparations, which were manufactured prior to the enactment of the Narcotic Control Law. Most of the preparations contain a small percentage of Keshigara (poppy-shell) extract, have practically no medicinal value, and have simply been held as dead stock since 19 June 1946. The instructions when completely complied with will simplify monthly reports.

In the future exempt narcotic preparations will receive close scrutiny and clinical study by the Narcotic Section, and National Board of Pharmacy before authorization is granted for their manufacture.

## SECTION VIII WELFARE DIVISION

### Community Chest-Japanese Red Cross Joint Fund Campaign

A change has been made in the goal for Saga Prefecture as reported in the Public Health and Welfare Weekly Bulletin No.93 (for period 4-10 October). The goal for Saga has been changed from 15,000,000 yen to 12,500,000 yen (10,000,000 yen Community Chest and 2,500,000 yen Japanese Red Cross).

### Japanese Red Cross Society

The 10th Home Nursing Instructor's Course is being held at Japanese Red Cross Headquarters. The course started on 15 October and will finish on 28 October. The hours of instruction are from 8:30 AM until 4 PM.

The students taking the course are two from Osaka Chapter and one each from Gumma, Tochigi, Nara, Mie, Nagano, Tokushima, Oita and Miyazaki Chapters - total of 10 students.

According to reports received to date, 3,300 lay people have taken Home Nursing Courses sponsored by 36 Red Cross Chapters.



Those Chapters which have not conducted Home Nursing Courses are Chiba, Okayama, Kochi, Yamanashi, Niigata, Tochigi, Hiroshima, Tokushima, Shimane, and Kagawa. However, plans are underway to start the courses shortly.

### Child Welfare

Inclosed in this Weekly Bulletin is an official interpretation of Ji-Hatsu #50 issued 1 October 1948, subject: "Functioning of Family Care", (Inclosure No.7). This important regulation deals with foster family care and adoptions and sets up procedures for applications, approval and disapproval and defines responsibility.

### Public Assistance Report - August

The Ministry of Welfare has submitted the following figures for the month of August. Figures for July 1948 and August 1947 are for purposes of comparison.

	August 1948	July 1948	August 1947
Persons-Institutional	144,613	142,198	146,885
Persons-Non-Institutional	1,758,926	1,813,371	2,542,006
	1,903,539	1,955,569	2,688,891
In Cash*	420,431,334	399,900,645	293,209,803
In Kind	58,633,714	109,881,659	22,127,937
Total	479,065,048	509,782,304	31,537,740

\*Before deductions for repayment.

### Public Assistance Report by Prefecture

<u>Prefecture</u>	<u>Institutional</u>	<u>Non-Institutional</u>	<u>In Kind</u>	<u>Cash*</u>
Hokkaido	14,012	61,886	2,778,391	18,063,137
Aomori	1,761	30,004	147,842	6,878,122
Iwate	811	39,341	51,004	8,470,508
Miyagi	1,398	42,424	80	8,235,850
Akita	950	43,351	-	10,670,058
Yamagata	803	25,311	50,826	5,873,829
Fukushima	870	51,644	25,571	10,506,386
Ibaraki	1,236	36,814	71,913	5,812,367
Tochigi	906	23,318	3,862	4,876,279
Gumma	4,235	37,975	54,273	8,808,308
Saitama	1,373	41,997	357,622	10,300,841
Chiba	2,768	35,117	1,966,475	6,910,409
Tokyo	18,697	116,003	1,963,390	39,534,890
Kanagawa	4,832	41,784	-	12,434,970
Niigata	9,972	57,451	187,157	11,603,540
Toyama	1,339	28,455	687,186	6,512,588
Ishikawa	1,234	27,753	62,499	6,550,780
Fukui	495	20,645	20,096,911	5,223,425
Yamanashi	532	20,888	72,000	4,198,928
Nagano	3,188	45,781	156,596	11,235,937
Gifu	2,082	31,503	157,015	6,531,789
Shizuoka	5,253	45,830	2,079,414	10,755,273
Aichi	7,722	66,284	234,000	14,192,433
Mie	1,096	35,538	-	7,485,744
Shiga	560	25,188	-	4,230,986
Kyoto	3,507	46,689	3,928,599	11,459,359
Osaka	9,321	60,257	57,694	20,722,994
Hyogo	7,250	75,871	-	19,589,353

Nara	715	20,542	-	4,404,129
Wakayama	377	29,661	277,303	6,100,040
Tottori	944	17,349	857,516	4,059,104
Shimane	640	25,932	-	6,408,212
Okayama	3,250	39,688	36,324	9,694,518
Hiroshima	2,982	44,153	32,897	11,756,117
Yamaguchi	9,403	31,835	32,484	9,996,628
Tokushima	1,998	26,984	-	5,881,647
Kagawa	2,389	22,326	1,341,975	4,195,003
Ehime	808	33,027	146,020	8,236,405
Kochi	611	20,759	8,940	4,753,350
Fukuoka	2,033	18,696	1,570,295	5,105,412
Saga	2,638	35,332	1,170,610	5,109,408
Nagasaki	1,259	36,124	24,199	8,941,375
Kumamoto	1,658	36,798	196,349	8,574,881
Oita	1,839	22,400	15,973,053	4,769,876
Miyazaki	1,302	30,171	1,825,429	5,475,685
Kagoshima	1,564	52,047	-	9,132,738
Total	144,613	1,758,926	58,633,714	420,272,611

\*After deductions for repayment.

## SECTION IX SOCIAL SECURITY DIVISION

### Social Insurance Statistics

A summary of Japanese social insurance statistics for the fiscal years 1944/45-1946/47 covering the last phase of the war and the first part of the second year of the Occupation was released for the first time in July as an appendix to the Report of the United States Social Security Mission to Japan. Selected coverage and financial data for the fiscal year 1947/48 will be found in Summation of Non-military Activities in Japan, No.35, August 1948 and selected benefit statistics for that year in the forthcoming statistical supplement to the Summation.

With this background material available and a more comprehensive review of the Japanese social insurances in preparation, monthly benefit statistics will be published in this Bulletin beginning with the current issue. Complementary monthly data on coverage and finances are scheduled to appear soon in ESS Section, SCAP's Monthly Bulletin, "Japanese Economic Statistics".

Each issue of the Public Health and Welfare Weekly Bulletin will carry the latest available benefit data for one social insurance program. This issue is given over to the government-managed part of Health Insurance.

Health Insurance (Kenko hoken) has been in operation since 1 January 1927. Broadly speaking, it covers workers in establishments employing five or more of all major lines of industry and commerce. According to the latest available figure (July 1948) 5,179,235 persons were insured under this program. In addition, their dependents, estimated to number approximately 11,900,000 were protected to the extent of receiving medical and related benefits at half cost.

Roughly one half of the insured, as of July 1948 exactly 2,379,972, and their dependents belong to the government-managed part (Seifu Kansho) of the program. The management of this part is entirely in the hands of the government on both the national and local levels. It is financed from equal contributions by employers and employees, adding up to 3.6 percent of the first 8,000 yen of monthly wages, and reserves a small subsidy from the national government defraying a part of the administrative cost.

Benefits are granted under this program only for sickness and injury arising from other than occupational causes. They are given partly in kind and partly in cash. During the first four months of the current fiscal year (April through July 1948) benefits were granted as indicated in Inclosure No.8.

SECTION X  
MEMORANDA TO THE JAPANESE GOVERNMENT

Negative

CRAWFORD F.SAMS  
Brigadier General, Medical Corps  
Chief

9 Inclosures:

1. Ministerial Instructions by the Various Bureaus of the Ministry of Welfare to Prefectural Governments for period 20 Sep - 2 October 1948.
2. Reorganization of Health Center System Affects Nutrition Service.
3. Health Centers and Tuberculosis Control.
4. Nutrition Surveys for August 1948.
5. Pharmaceutical & Supply Bureau (YAKU-HATSU No.512).
6. Pharmaceutical & Supply Bureau (YAKU-HATSU No.511)
7. Functioning of Family Care.
8. Benefits Granted under Government-managed Health Insurance (April through July 1948).
9. Report of cases and deaths from Communicable and Venereal Diseases in Japan, week ended 16 October 1948.

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

**WEEKLY BULLETIN**

**For Period  
25-31 October  
1948  
No.96**

SECTION I - Preventive Medicine  
SECTION II - Veterinary Affairs  
SECTION III - Nursing Affairs  
SECTION IV - Supply  
SECTION V - Narcotic Control  
SECTION VI - Welfare  
SECTION VII - Social Security  
SECTION VIII - Memoranda to Japanese Government

## SECTION I PREVENTIVE MEDICINE

### Refresher Training Course for Nutritionists

The third two-month refresher training course for Nutritionists at the Institute of Public Health in Tokyo will be from 22 November to 29 January. Only qualified Nutritionists are eligible to attend. A special effort should be made to see that prefectures which failed to send students to the first two courses are represented in this next course. It is highly desirable that Nutritionists working in Health Center receive this training, a major portion of which consists of practical experience in the laboratory and in the field.

The course has been scheduled so as to allow students time for the New Year holiday and still not interfere with the quarterly National Nutrition Surveys. An official notice concerning the course has already been sent to prefectural governors by the Ministry of Welfare.

### Venereal Disease Prevention Law - Cabinet Ordinance

A Cabinet Ordinance implementing the Venereal Disease Prevention Law was passed on 26 October. This ordinance authorizes expenditure of funds from the National Treasury for venereal disease prevention as provided for in the Law. The State, (National Treasury) bears 50% of the net expense of the prefectural government for health examinations of contacts and others examined under Article 10, 11 and 12 of Law.

The State bears not over 50% of public health education expenses relating to venereal disease prevention as provided for in the annual budget. For budget planning purposes, each prefecture is to submit applications for funds required for this purpose with an outline of projected work.

The prefectural governor is authorized, according to the Cabinet Ordinance, to collect from patients able to pay, the actual cost of physical examinations and materials or supplies used in performing serological tests or microscopic examinations; for those treated, the actual cost of drugs and supplies used in treatment; the cost of procedures and operations necessary for treatment, and the routine hospital or clinic charges for those who are in-patients.

### Special Training Courses for Model Health Center Personnel

Three one-week courses of special instructions for key personnel from each Model Health Center are scheduled at the Institute of Public Health in Tokyo as follows: (1) Medical Officers in charge of tuberculosis control, 6 - 11 December; (2) Medical Officers in charge of venereal disease control, 6 - 11 December; and (3) Medical Officers in charge of maternity and child hygiene, 13 - 18 December.

The purpose of these courses is to give detailed instruction concerning the carrying out of the above mentioned functions in the Health Centers, particularly in relation to the national programs being developed in accordance with recently enacted laws. Since the Model Health Centers furnish the pattern for the functioning of all the other Health Centers, it is highly important that their work be done in conformity with present policies. Military Government Health Officers should exert their influence to insure that the proper individuals from all Model Health Centers, whether yet formally opened or not, attend these courses. Official notices concerning the courses have been sent by the Ministry of Welfare to all prefectural governors.

### Publicity Concerning Public Health Programs

Reference Section II Weekly Bulletin No.92. Enclosed with this Bulletin is one copy of The Sun Photo Times (Inclosure No.1) and an English translation of the photo titles (Inclosure No.2) for information of each Military Government Health Officer. On pages 2 and 3 of this newspaper are a series of photographs concerning activities of the Health Center. The article and photographs in this particular edition entitled "The Growing Public Health Nurse" concerns the public health nursing service in particular although three photographs more directly concern the nutrition service, the medical social service and the laboratory service.

This paper and translation is forwarded for the information of Military Government Public Health personnel, as an example of effective publicity concerning the public health program. Good publicity is of great value in the health information-education program and should be utilized to the greatest extent possible at the local board. It is suggested that this paper be displayed for a period of time in each Model Health Center.

SECTION II  
VETERINARY AFFAIRS DIVISION

Equine Encephalomyelitis

Sporadic outbreaks of new cases of equine encephalomyelitis still are appearing in Hokkaido. During the period 23-29 October, a total of 19 new cases were suspected of being equine encephalomyelitis although not confirmed. The total number of cases since the start of the epidemic now is 3,666 of which 1,311 were classed as suspects.

Food Inspection

Conference was held during this period with Ministry of Welfare Officials in order to project a plan adaptable to the newly formed Japan Food Association.

Rabies Control and Humane Handling of Dogs

Prefectural Public Health Sections have been notified by the Ministry of Welfare as to the proper handling and disposition of dogs placed in pounds during the periods of rounding up stray dogs. The clubbing of dogs to death in hereafter forbidden and death will be instrumented by the injection of Nux Vomica or a saturated solution of Magnesium sulphate directly into the heart. This work is to be carried out under the guidance of Prefectural veterinarians.

Animal Diseases

The following diseases were reported by the Animal Hygiene Section, Ministry of Agriculture and Forestry for the period 23-29 October.

<u>Prefecture</u>	<u>Disease</u>	<u>No. of Cases</u>
Hiroshima	Blackleg	2
Chiba	Filariasis (horse)	1
Fukui	Swine Erysipelas	12
Kochi	Swine Erysipelas	1
Niigata	Swine Erysipelas	1
	Piroplasmonis	1
Hokkaido	Equine Encephalomyelitis	19

Note: All equine encephalomyelitis cases were reported as suspects.

SECTION III  
NURSING AFFAIRS DIVISION

National Association

A two day meeting was held in Tokyo 29-30 October for all the Prefecture Branch Association presidents and the Board members of the National Association. Plans were discussed and formulated.

Publications

The third edition of the Nursing Procedure Manual is now available at the price of 120.00 yen. Send orders direct to Medical Friend, Dr. C. Ohta, Tokyo, Japan.

SECTION IV  
SUPPLY DIVISION

General

The first convention of the Japan Pharmaceutical Association was held in Kyoto 22 - 25 October. The newly elected officers of the Association were installed, and talks and papers presented by members.

On 24 October, the Chief, Public Health and Welfare Section addressed the convention stressing the importance of cooperation among the various members of the team composed of the professions concerned with public health and welfare in Japan, of which team the profession of pharmacy is a key member. He stated that "there is a new era in Japan, and there is a new era in pharmacy beginning right now". As example of a failure of the pharmaceutical profession, he cited the poor results from the recently distributed hexylresorcinol manufactured in Japan, which destroyed the faith of the public and of the doctors, nurses and nutritionists in this very important anthelmintic drug. "The day of dispensing non-potent drugs under fraudulent claims is over", he stated. He reminded the audience that the capabilities are here in Japan to carry out the obligation to procedure only first class drugs: the facilities for manufacture, the materials, either indigenous or imported, and the knowledge necessary.

In a talk at the opening session of the convention, the Chief, Supply Division, Public Health and Welfare Section, discussed the new Pharmaceutical Affairs Law and the responsibility of the profession of pharmacy in the enforcement of the provisions of this Law so that the status of pharmacy in the country can be raised.

### Production

A breakdown of fuel allocation (standard coal and lignite) by prefectures, for use in those hospitals attached to Universities, Medical Colleges, and other educational institutions under the jurisdiction of the Ministry of Education, is included in Inclosure No.3. This allocation covers the period October, November, December, the 3rd Quarter, Japanese Fiscal Year 1948. (Unit: Metric Tons).

A similar breakdown is furnished in Inclosure No.4 of solid fuel allocation (standard coal and lignite) by districts and prefectures, for October, November, December, the 3rd Quarter, Japanese Fiscal Year 1948, for use in National Hospitals and Sanatoria and for use in Public and Private Hospitals and Sanatoria. (Unit: Metric Ton). As in the case of Ministry of Education officials in the preceding paragraph, Ministry of Welfare officials have likewise mailed allocation tickets directly to the hospitals concerned.

A similar breakdown is furnished in Inclosure No.5 of solid fuel allocation (standard coal, substandard coal, and lignite) by districts and prefectures, for use in Public Bathhouses, for October, November, and December (Unit: Metric Ton). Allocation tickets are mailed direct to the consumers while the Ministry of Welfare, at the same time, notifies by mail each prefectural health office of its detailed prefectural allocation breakdown.

A breakdown of the plan of allocation of liquid chlorine for chlorination of water by the water treatment plants and by the prefectures, for the period October, November, December is included in Inclosure No.6. Allocation tickets were mailed on 24 October by the Ministry of Welfare direct to the cities and towns concerned. At the same time, the Ministry of Welfare notified each prefectural health office of the breakdown of allocations to the cities and towns within the given prefecture.

The total quantity allocated for this period, October - December, is a reduction below the quantities allocated for the previous two quarters of the Japanese Fiscal Year 1948. This reduction was necessitated by the critical shortage of fuel and power adversely effecting the production of liquid chlorine. Corresponding reductions, therefore, in prefectural and water treatment plants allocations, have become necessary.

A total of 3,940 pieces of the various types of DDT dusting and spraying equipment for insect control programs was produced during the period 17 - 23 October. Adequate inventory stocks are on hand to meet all requirements.

During the period 17 - 23 October, 65,642 lbs. of 10% DDT dust and 27,899 gallons of 5% DDT Residual Effect Spray were distributed. At the same time, 9,600 lbs. of 10% DDT dust and 55,800 gallons of 5% DDT spray were received, leaving inventory stocks on hand at regional warehouses of the Ministry of Welfare of 1,384,273 lbs. of 10% DDT dust, 432,608 gallons of 5% DDT spray, and 53,586 vials of typhus vaccine. Additional available stocks of typhus vaccine, already produced and passed national assay tests, in the hands of the biological manufacturing laboratories and factories, as of 1 October, totaled 620,460 cc.

### Distributions

During the period 17 - 23 October a total of 1908 pieces of dusting and spraying equipment was distributed to 17 prefectures as follows:

<u>Prefecture</u>	<u>DDT Duster</u>	<u>Knapsack Sprayer</u>	<u>Semiautomatic Sprayer</u>	<u>Hand Sprayer</u>
Iwate	504			50
Akita		12		
Yamagata	48			
Ibaraki				120
Saitama		1		
Tokyo	120	1		
Kanagawa			22	72
Toyama	96			
Fukui				100
Nagano	96			
Shizuoka		20		
Wakayama	224	56	6	
Shimane	100		20	
Yamaguchi				30
Tokushima				100
Fukuoka			40	
Saga		70		
Total	1,188	160	83	472

#### SECTION IV NARCOTIC CONTROL DIVISION

##### Narcotic Training School

The Third Training School for Narcotic Agents opened in Tokyo 26 October and will continue through 2 November. Sixty-three agents were scheduled to attend but only 61 agents registered for the school since, without prior notice, one prefecture failed to dispatch two agents who were engaged in an important investigation. The Narcotic Section, Ministry of Welfare, has notified the prefecture concerned that approval is not given to the action taken since the basic training is considered of primary importance.

##### Information Relative Investigations

Any information relative to a narcotic violation received by Military Government Teams should be passed immediately to narcotic agents in the prefecture. No special instructions need be given since all the narcotic agents have received instruction and training in the proper procedure. The information, when it reaches the Narcotic Control Division, Public Health and Welfare Section, will be passed with instructions to the narcotic agents through the Ministry of Welfare. However, there is a considerable loss of time occasionally through the latter procedure and the investigation will be speeded through prompt action on the part of Military Government Teams.

##### Penalties

One prefecture reported that eight defendants, adjudged guilty, were fined from 1500 yen to 2500 yen. Such minimum penalties will not act as deterrents to willful violators of the law. In those cases in which fines are indicated as sufficient punishment, maximum or near-maximum amounts for willful violators should be demanded by procurators.

#### SECTION V WELFARE DIVISION

##### Helen Keller Tour

Upon completion of a two-month schedule of public appearance which included appeals in behalf of the deaf and dumb and the blind, Miss Helen Keller and her companion, Miss Polly Thomson, departed for the United States aboard the U. S. A. T. David T. Shanks from Yokohama, 28 October.

During her tour in Japan, Miss Keller made visits in 15 urban centers, including the six largest cities and addressed more than 25 public assemblies and 30 press conferences as well as innumerable impromptu platform appearances at cities not included in the tour schedule. As an outgrowth of Miss Keller's second visit in Japan - her first visit being in 1937 - associations and societies for the deaf, dumb and blind have concurred in a plan to unite in



an informational organization to preclude duplication of services and to assure coverage of fields not now included within the scope of any current public or private rehabilitative activity.

The interest in the physically handicapped re-kindled by Miss Keller's visit will require local husbanding to maintain steady, forward progress, to obviate tangential movements or misplacement of long range objective.

#### Child Welfare

Attached to this Bulletin is a copy of informational material sent to prefectures by the Ministry of Welfare concerning the functions of the Child Welfare Official and the Child Welfare Worker. (See Inclosure No.7).

#### Cooperative for American Remittance to Europe and to the East (CARE)

The second shipment of CARE food packages (oriental pack) arrived in Yokohama aboard the S.S. Pioneer Tide on 16 October. This shipment totaled 9,997 packages.

CARE, Inc. has received import licenses to cover the import into Japan, through August 1949 of the following types of packages:

<u>Type</u>	<u>Quantity</u>
Food (oriental pack)	100,000
Cotton goods	20,000
Woolen goods	20,000
Blanket pack	20,000
Knitting wool	20,000

### SECTION VI SOCIAL SECURITY DIVISION

#### National Health Insurance

A copy has been received of the English Edition of Official Gazette, dated 15 August, 1948, which contains Ministry of Welfare Ordinance No.38 of Revised Enforcement Regulation to the National Health Insurance Law. This release, of special interest to Public Welfare Officers of Military Government Teams, can be obtained from the Government and Legal Offices of each Team. An English translation of the National Health Insurance Law, basic to the above-mentioned enforcement regulation, has been completed and is being released to each Military Government Teams.

#### Social Insurance Statistics

In continuation of the current publication of benefit statistics begun in the preceding issue of the Public Health and Welfare Weekly Bulletin, available data on the society-managed part of Health Insurance (Kumiai Kansho Kenko Hoken) are published in this issue (Inclosure No.8). For a brief summary of the Health Insurance program, particularly its government-managed part, reference is made to the preceding issue.

The society-managed part of the Health Insurance system is base on the national law and is supervised by the national and the prefectural governments. However, each of the Health Insurance Societies, (totaling 710, as of the end of July, established in enterprises employing not less than 300 workers,) administers its program independently. While all Health Insurance Societies must grant the statutory benefits, some of them grant more liberal benefits and most grant additional benefits over and above those prescribed by law. Their more liberal benefit policy is made possible chiefly by direct as well as indirect subsidization by employers over and above their contributions to match the employees' contributions as required by law. Thus total contributions often exceed 3.6% of the taxable wage (the first 8,000 yen per month). A small subsidy is received from the national government covering a part of the administrative cost.

As under government-managed Health Insurance, benefits are granted only for sickness and injuries of other than occupational origin. On 31 July, the number of primary insured under society-managed Health Insurance was 2,379,972. (In the last issue of the Bulletin this figure was given by mistake for the government-managed part of the program. This should have been 2,799,263).

Although monthly operational reports are received from all societies, it has proved impossible to prepare complete summations each month. Hence, a sample has been selected, with due regard to the industrial and size distribution among the Health Insurance societies, representing between one-eighth and one-ninth of the total number of societies and roughly 10% of the total number of insured. The figures shown here are based on this sample with minor variations due to delayed reporting.

SECTION VII  
MEMORANDA TO THE JAPANESE GOVERNMENT

Negative

CRAWFORD F.SAMS  
Brigadier General, Medical Corps  
Chief

11 Inclosures:

1. Copy of The Sun Photo Times re: Public Health Programs (for information to Military Government Teams only)
2. English translation of Photo Titles (for information to Military Government Teams only)
3. Fuel Allocation for Use in Ministry of Education Hospitals for October, November and December 1948.
4. Allocation of Standard Coal and Lignite to National Hospitals and Sanatoria and Public and Private Hospitals and Sanatoria for October, November and December.
5. Allocation of Standard Coal, Substandard Coal and Lignite to Public Bathhouses for October, November and December 1948.
6. Allocation for Liquid Chlorine for Water-works and Sewerage for October, November and December 1948.
7. Outline of the Functions of the Child Welfare Official and Child Welfare Worker.
8. Benefits granted under Society-managed Health Insurance (Kumiai Kansho Kenko Hoken), Fiscal Year 1948/49 by Month.
9. Monthly Summary of Vital Statistics in Japan - August 1948.
10. Weekly Report of Communicable Diseases and Venereal Disease in Japan, Week Ended 23 October.
11. Annex to Weekly Bulletin (Information to Military Government Teams only).