(4) Permeation of anti-tuberculos is knowledge by school education

To advance the knowledge at home through students & pupils taught by their teachers who will be given necessary anti-

- Seeing conspicuous resuts of tent hospitals, they will be continued in future.
- (D) Collective medical examination

X-ray photographing and minute examination. B.C.G. inoculation for youthe from 7 to 29 years of age and health offices will be made to give galdance to patients discovered. This will be carried out in Sept.

- (E) Medical guidance for tuberculosis patients.
 - (1) Guidance and control of patients at home.
 - (2) Medical examination of patients & their families and guidance.
- nutriments as much as possible to tuberculosis.

 Patients who are regarded to need them in lisison with the quarters concerned.
- (F) Improvement of tuberculosis sanatorium.

The tuberculosis sanatorium at Shin-tamachi, Takamatsu, run by Kagawa Branch of Japan Medical Cooperation became a national sanatorium in April this year. It is almost completed with 200 sick-beds and will be able to receive patients.

It is intended to leave nothing desired in further improvement in cooperation with that institute besides mediation of admission.

(G) Enforcement of ". G. inoculation and improvement of its

As etated in (D), youths who are 7 to 29 will be inoculated will be pried out in Sept.

EHIMEKEN

XXXIII is xeemplies with your letter No. 207 dated June in

"Tuberculosis Control"

2x Since 1942, the connected officials in this prefecture have drafted a 5-years connter-tuberculosis program to be materialized into various forms of tuberculosis control measures. In accordance with the instructions of the Welfare Ministry, however, steps have been taken to draw up another blueprint of antituberculosis campaign to wipe out the diseases, and it is partially put into operation.

2.3 Summeray of program:

a. Reinforcement of counter-tuberculosis institutions in Ehime-ken.

Some 15 health stations are set up in this prefecture, where X-ray apparatus and other diagnosis facilities are expected to be reinforced. To our great regret, however, the two big stations at Matsuyama and Imabari were reduced to ashes due to the airraid. Full equipment of the existing institutes as well as the reconstruction of the burnt down stations is eventually under way.

Augmentation of personnel.

Of all activities of health stations, priority has been given to that of counter-tuberculosis. Though we are in preparation for the increased personnel to be assigned to respective institutions, the budget and plan of the Welfare Ministry is not yet fixed against our will.

c. Establishment of working committee cooperative with the Welfare Ministry.

Hitherto, a committee composed of government officials has been organized to cope with the disease. A reorganization program is under way to reshuffle and renovate the committee by mobilizing the brains and faculties of non-official experts. In accordand with the instruction issued by the Welfare Ministry, a countertuberculosis service committee is scheduled to be established at each city, town and village.

d. Improvement and expansion of medical, laboratory, nutritional and hospital facilities for the care of tubercular patients.

There are three national hospitals in this prefecture to accommodate some 700 tubercular patients, in addition to the non-official sanatoriums furnished with 50 beds.

At present only three-thirds of those beds are utilized by patients because of the acute shortage of foodstuffs. Improved nutritional supply and ameliorated facilities will make the patients utilize fully these hospitals.

e. Distribution of anti-tuberculosis information throughout the school system.

Short courses re anti-tuberculosis have been held for teachers to disseminate counter-measures against tuberculosis among their pupils. Besides, anti-tuberculosis pamphlets will be distributed among the citizens and ken populace through block and neighbourhood associations.

f. Continued use of B.C.G. vaccine.

Reinforcement of B.C.G. vaccination is slated to be enforced because of the successful result of the inoculation of B.C.G. given to the youth, upon whom the tuberuculin vaccine had negative effect since 1942.

g. Diagnosis of tuberculosis.

We are to earry out diagnosis to find out tuberculesis cases as early as possible and eliminate the discase in good time. The greater part of the ken populace have undergone tuberculin test and those who showed positive reaction have been diagnosed by X-rays.

h. Guidance of patients who showed positive reaction against tuberculin test.

For one year after tuberculin test positive, guidance for the suspected patient is given to prevent the attack of the disease. The same guidance will be continued hereefter.

Bringing up of experts.

As in the past, short courses will be held to train doctors and nurses and other experts who can manage executive planning of anti-tuberculosis measures.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 7750/3

j. Difficulties in anti-tuberculosis measures.

The following are the main battleneck of counter-tuberculosis measures and are to be crafked through by dint of the help and assistance of the Military Government as well as our utmost effort.

i. Shortage of material.

Photo materials for X-yays test are wanting due to their diminished output.

ii. No adequate experts.

Counter-measures against tuberculosis are difficult to realize, because of the lack of experienced experts.

idi. Expenditures curtailed too much.

The expenses cut down in extreme cause the unsurmoutable obstacles to the anti-tuberculosis drive. Increased budget for the execution of the movement is requested to establish a new civilized Japan thanks to the due consideration of the authorities concerned.

shows x amores and x

GOVERNOUX OAX Flui meeksexx

S:KA

Kochi-ken

Tuberoulosis Prevention Measures.

- Increasing in number of staff in thurst, of Tuberculosis. Pr vention Measures. Though the budget of Welfare Office has not yet been decided, we expect that the number of special doctors of tuberculosis, public health nurses, and olerks in charge of general affairs will be increased. This year, at five (5) public health officers, we designated each one person in charge of tuberculosis prevention business. at present, there are eight (0) non-regular members in the Tuberculosis Prevention Association. We have two officials in charge of general affairs, and one sanitary expert in Hygienic Section.
- 2. Tuberculosis Frevention Committee.

In order to form the Committee, preparation is now being done.

- 3. Improvement and enlargement of various equipments of medical studies, dietetic studies, and hospitals for tuberoular patients.
 - (1) Medical Treatment.

The first Tuberculosis Sanatorium in this prefecture was opened on May 15, this year, making an epoch for medical treatment. Amound medical practitioners, some are practising artificial Pacumo Thorat (Jinko Kikyo) and phrenicus Crushing (O-kakumaku-shinkei-Atsuza), . . . but they are very rere.

(2) Studies.

as a subject of study for the members of Medical Association, Artificial Pneumo Phorat (Jinko Kikyo) was picked up at first. About the middle of March, 150 members of Medical Association met together, when explanations, lectures, and discussions were made on the method of Artificial Pneumo Thorat.

(3) Nourishment.

Special distrabution of staple foodstuff for tubercular patients has been enforced since last april. The quantity of distribution is 140 gr. per day per capita. The patients number 12b, as of June 1, namely:

-66 Rochi Red Cross Hospital Rochi Central Hospital of Medical Corporation 22 National Kochi Hospital Osato Shoken-Eyo Eoryo Hospital Racho Hospital Usa Kokuho Hospital

Sukumo Hospital Mikke Dyo National Sametorium

Total

126

No food is distributed, at present, except staple food.

(4) Equipment of Hospital

The Urado-smo, national sanatorium, was established as mentioned before. This santorium is provided with 100 sick-beds, 50 out of which are un-occupied at present. The rest are occupied by the patients of National Lochi Despital which were burnt down lately. We have now 73 patients who have applied for entrance into the sanatorium, but the beas available number 50, so that it has been decided to select those catients, first, who are soriously 111, feared of contagion, and are in bad household eircumstances, and to accommodate them in the sanatorium by the end of this month.

4. Distribution of "Manual on prevention of tuberculosis".

None.

5. Incomiation with B. Q. G.

In the last discal year, non-infected persons with Suberoulosis, from 10 years bld to 20 were inoculated with B. C. G. as same as the demobilized, repatriates and family having tubercular patients.

In this fiscal year, persons concerned from 10 years to 25 or 30 will be incoulated within the limits of financial circumstances and the same action will be taken for the demobilized and others.

Period of indoulation: 4 months from Sept. to Dec. It will be started serially in the area having petients according to a degree of contagion.

Tokushima-ken Matters carried out for preventing the spread of tuberculosis.

1. Diffusion of the knowledge of anti-tuberoulosis control:

The following matters were carried out to diffuse the proper knowledge of anti-tuberculosis control.

(1) Opening of a short course:

A short course of anti-tuberculosis control was given to teachers in charge of children's health, or teacher nurses of various schools and health nurses in this Ken.

(2) Opening of a conversatione:

A conversazione on the control of tuberculosis was held at middle schools, factories and others in this Ken.

(3) Propagation by means of newspapers:

The account on the control of tuberculosis appeared in the newspapers with the co-operation of the daily presses.

(4) Distribution of printed matters:

6,000 leaflets on anti-tuberculosis control was printed for distribution.

2. Mass health examination:

Health examination was made to the following objectives in order to prevent and detect early the outbreak of tuberculosis.

(1) Teachers of various schools:

Number of the teachers examined: 6,234.

(2) Factory workers and employees of business shops:

Number of workers examined: 5,000.

(3) Women entertainers such as "geisha girls", waitresses, etc.;

Humber of those examined:

1.000.

3. Supply of nourishments to the tuberculosis patients:

Special distribution of staple food and fool has been made to the tuberculosis patients in sanitariums of this Ken for the purpose of supplying the patients with better nourishments since March this year.

The condition for the period of a month from April 16 to May 15 is shown on the annexed paper.

4. Inoculation of B.C.G. vaccine:

B.C.G. vaccine inoculation was carried out as follows for the prevention of the outbreak of tuberculosis.

- (1) Tuberculin effect examination was made to 84,770 boys and young men of between 11 and 20 years old. Out of them 30,499 were dormant and had B.C.G. vaccine inoculated.
- (2) Tuberculin effect examination was made to 83,000 of families of tuberculosis patients, demobilized persons and other ordinary persons in this Ken. Out of them 52,809 were found dormant and had B.C.G. vaccine inoculated.

Condition of supply of nourishments.

From: April 16 To: May 15.

| Name of Estab dis hments | Number of beds for patients | Present number of patients | Rice | Flour | Fish | Imported Corn- flour | Sweet- potato flour | |
|---------------------------------------|---|-------------------------------------|-------|-------|---------------|----------------------------|---------------------------|--|
| Tokushima National Sanitarium | 530 | 237 | 136.5 | | Kan 61.500 | 205 | 577.8 | |
| Pokushima National Nospital | 320 | 36 | 92.5 | 61.8 | 7.400 | | | |
| Banzai Sanitarium | 230 | 25 | 53.6 | | 1.500 | | | |