DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775 013

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Tokyo-To

APPY

TRANSLATION

HEADQUARTERS
KANTO CIVIL AFFAIRS REGION
PUBLIC HEALTH SECTION
APO 500

19 December 1949

SUBJECT: Report of Typhoid Cases at Toshima Hospital

Name of Patients:

Internes	Age	Onset Date	Confirmed
1. Kitayama, T.	27	25 Nov.	1 Dec.
2. Murayama, Y.	24	27 Nov.	1 Dec.
3. Aizawa, T.	24	26 Nov.	2 Dec.
4. Shuzui, M.	24	24 Nov.	2 Dec. - Died
5. Kobayashi, A.	24	27 Nov.	2 Dec.
6. Hoshi, K.	23	25 Nov.	2 Dec.
7. Murakami, Y.	24	1 Dec.	3 Dec.
8. Kotani, K.	25	1 Dec.	4 Dec.
9. Sakai, K.	26	27 Nov	2 Dec.

Remarks: Total number of Interns -

Male	22
Female	8
Total	30

Family of Janitor:	Age		Onset Date	Confirmed
1. Ishikawa, M.	47	Janitor	27 Nov.	30 Nov.
2. " S.	41	Wife	25 Nov.	30 Nov.
3. " I.	25	First son	24 Nov.	30 Nov.
4. " M.	15	Second son	24 Nov.	30 Nov.
5. " M.	23	First daughter	28 Nov.	30 Nov.
6. " S.	8	third daughter	1 Dec.	8 Dec.
7. " S.	4	Fourth daughter	29 Nov.	30 Nov.

Remarks: Living in two rooms house (ten tatamis) and using well water (closed type)

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Onset Date

14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1
							X ate croquettes			3	3	1	4	1	1	0	3

The three internes were absent.

1. The occurrence of the typhoid cases ~~of~~ at this time at Toshima Hospital is very peculiar, because the sufferers are limited in the small group such as, interns and the family of a employees. Consequently the source of the infection supposed to be from the same one.

2. All of the patients has eaten on the 21st of November the croquettes which were brought by a food vender.

3. The croquettes were brought in four dishes into the rooms of male interns, female interns, doctors and clerks.

4. The janitor Ishikawa brought back to his home five croquettes which were left over in the room of male interns and eaten ~~it~~ them.

5. Two male interns, Mr. Mitsunaga and Sawada, who had never eaten the croquettes, are not sufferers.

6. Also the three interns, who were absent since 14th to 26th of November, being sent to Musashi Sanatorium has not suffered.

7. The two member of the family of Ishikawa, the second daughter and the third son, has also not eaten the croquettes and not suffered.

8. The employees of the croquette-manufacturers were examined, but the result of the stool examination was all negative. The second stool examination and blood examination are now under progress.

9. The symptom:

   Started with chills or periphrixis and turn up the entero-hemorrhage.

10. Conclusion:

   The contamination of the food supposed to be not in the time of processing of the food.

   It must be after the processing, in the room of the male intern, because only the persons who ate the croquettes which were brought to the room.

   But in what chance the food were contaminated, nobody knows and now under investigations.

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豊島病院内に発生せる
腸チフス患者について

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腸チフス患者氏名（インターン生）

番號	氏名	年令	発病	決定	備考
1	北山俊彦	27	一一・二五	一二・一	
2	村山陽一郎	24	一一・二七	一二・一	
3	相澤廉	24	一一・二六	一二・二	
4	守隨滿	24	一一・二四	一二・二	一二日午前七時十五分死亡
5	小林晃	24	一一・二七	一二・二	
6	星和夫	23	一一・二五	一二・二	
7	村上義次	24	一一・一	一二・三	
8	小谷喜市郎	25	一一・一	一二・四	
9.	酒井一夫	26	一一・二七	一二・二	

インターン生 男子 二二 女子 八 計 三〇名

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陽チフス患者氏名（用務員家族）

板橋町一〇、二六六三

番號	氏名	年令	発病	決定	備考
1	石川眞雄	47	一一、二七	一一、三〇	
2	妻 静江	41	一一、二五	〃	
3	長男 一郎	25	一一、二四	〃	輪の内屋
4	次男 眞澄	15	一一、二四	〃	
5	長女 美代子	23	一一、二八	〃	
6	三女 定子	8	一二、一	一二、八	
7	四女 幸子	4	一一、二九	一一、三〇	

畳數 一〇畳半（六畳、四畳半）

飲料水 共同井戸（閉鎖式）

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患者発生日別図

11月																	12月
14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1
										○	○	○	○	○	○		○
							コロッケを買った日			○	○		○				○
										○	○		○				○
													○				

←----------→

14日～26日の間インターン生 光永 笠間 斉藤の三名は武蔵療養所（精神病院）に修練に行っていたために感染を免かれたものと思はれる

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傳染経路

一、今次発生の患者は男子インターン生と用務員及び其の家族に限られているのが特異で両者は発病の日時症状等より同一の原因によるものと想像せらる

二、両者に共通の飲食物としてコロッケを挙げることが出来る

三、配達方法。容器四個にコロッケを入れて男子インターン室女子インターン室、醫局及び事務室に夫々配達する

四、石川用務員は十月三十日月曜日に男子インターン室の賄い残りのコロッケ五個を購い持帰った事実がある。

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五、インターン生で一度もコロッケを買ったことのない光永、澤田の両名は罹患していない。

又十月十四日から仝月二十六日迄國立武藏療養所に修練に行っていて不在だった光永、笠間、斉藤の三名は発病を免かれている。

用務員の家族でコロッケを食べなかった次女孝子、三男忠義は健在である。

六、とんかつ屋従業員の検便オ一回は陰性で目下二回目の検便と血液の検査中である。

症状。

七、発病は悪寒又は悪寒戦慄を以って発病し比較的早期に脳症或は腸出血を起す等濃厚感染を思はせるものがある。

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以上の所見によって インターン生及び用務員家族は
十一月三十日に腸チフス菌によって汚染された コロッケを
食べて感染したものと推定せらる。
コロッケの汚染は製造過程中でなく、製造後しかも
男子インターン室のものゝみが汚染された事は明らか
であるが、さて如何なる機会にそして誰によって
汚染されたかについては目下調査中である。

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Shakai Hoken Yamate Hospital (Public)
Address: 37 3-chome Nishiokubo, Shinjuku-Ward, Tokyo
Tel: (37) Yodobashi 2641
Director, Dr. Kiyoshi Shimizu
Chief nurse, Miss Mine Ito, Assistant chief, Miss M. Yoshioka
Chief clerk, Mr. B. Tsuji
Date Nov. 28.1949

1. Personnel: 11 doctors, 4 interns (1 Keio, 1 Jikei, 2 Nippon University), 15 graduate nurses, but no student nurses. Housekeeper has been appointed in October 1949 having 3 assistants. Two X-ray technicians, 4 laboratory technicians, no dietitians, and 11 clerks. Nurses' dormitory is maintained in the hospital, and maintains its kitchen and dining room.

2. Physical plant: 70 bed capacity (T.B. none, C.D. none) T.B. cases are at present referred to Chiba or Keio University Hospitals. It is being planned to establish the T.B. ward for the surgical cases and run the quick turnover system for the early cases. The hospital maintains all units excepting otolaryngology and psychiatric. Central kitchen is not functioning yet, but is being planned to establish it very soon. Although no routine tests are done on admission of the patients into the hospital, well equipped clinical laboratory is maintained. X-ray set up is well equipped.

Number of patients:

Out - Average daily, 150 (80% Health Insurance, Approximately 10% Livelihood Protection, 30% Private)

In - Average 29-35 (60% Health Insurance, 10% Livelihood, 30% Private)

Patients are preparing their own meals by the family attendants who are sleeping in the patients' rooms.

Finance: Average monthly income and expense.

Income (October 1949)

Health Insurance	¥438,094.80
National Health Insurance	51,040.00
Miscellaneous	137,678.20
Private	212,454.80
Total	¥839,267.85

Expense

Running expenses	¥386,365.50
Personnel	435,589.60
Miscellaneous	281,063.43
Total	¥1,103,018.53

Inspected and reported
by Dr. H.W. Toyoda

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HEADQUARTERS
KANTO CIVIL AFFAIRS REGION
PUBLIC HEALTH SECTION
APO 500

24 November 1949

SUBJECT: Investigation of Typhoid Outbreak at Toshima Hospital, Tokyo-To.

TO: Chief, Public Health Section, KCAR

FROM: Regional Public Health Nurse, KCAR

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HEADQUARTERS
KANTO CIVIL AFFAIRS REGION
PUBLIC HEALTH SECTION
APO 500

24 November 1949

SUBJECT: Investigation of Typhoid Outbreak at Toshima Hospital, Tokyo-To.

TO: Chief, Public Health Section, KCAR

FROM: Regional Public Health Nurse, KCAR

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1. Number of Internes

Female	9
Male	21
	30

Number of Janitors

Male	4

2. Number of Beds

General	120
Tbc	150
CD	66
	336

3. Number of Patients Hospitalized for Typhoid Fever

October 49	12	
15 November	6	
13 December	19	Internes-7, Janitors-7

4. Data Concerning Onset and Diagnosis of Interne Patients

	Internes' Name	Age	Onset	Hospitalization	Diagnosis	Disposition
1.	Mitsuru Shuzue	24	24 Nov.	2 Dec.	4 Dec.	died 12 Dec.
2.	Toshiko Kitayama	26	25 Nov.	1 Dec.	1 Dec.	
3.	Kazuo Hoshi	23	25 Nov.	2 Dec.	2 Dec.	
4.	Kiyoshi Aizawa	25	26 Nov.	2 Dec.	2 Dec.	
5.	Akira Kobayashi	24	27 Nov.	2 Dec.	2 Dec.	
6.	Yoichiro Murayama	24	28 Nov.	1 Dec.	1 Dec.	
7.	Yoshiji Murakami	24	30 Nov.	3 Dec.	4 Dec.	
8.	Kiichiro Kotani	25	1 Dec.	4 Dec.	5 Dec.	
9.	Kazuo Sakai	?	27 Nov.	2 Dec.	2 Dec.	Admitted - Tokyo University Hosp.
10.	Toshiko Miwa	24	9 Dec.	11 Dec.	14 Dec.	

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5. Data Concerning Onset and Diagnosis of Janitor's Family

	Name		Age	Onset	Hospitalization	Diagnosis
1.	Ishikawa, Shino	Father	47	22 Nov.	30 Nov.	30 Nov.
2.	" Ichiro	M	25	22 Nov.	30 Nov.	30 Nov.
3.	" Masumi	M	15	24 Nov.	30 Nov.	30 Nov.
4.	" Shizue	Mother	41	25 Nov.	30 Nov.	30 Nov.
5.	" Miyo	F	23	28 Nov.	30 Nov.	30 Nov.
6.	" Sachiko	F	4	29 Nov.	30 Nov.	30 Nov.
7.	" Sadako	F	8	1 Dec.	8 Dec.	8 Dec.

Information obtained from Interviews on 12 December 1949.

No similar outbreak has occurred in this hospital recently. On 1 November, one male interne was dismissed with four other hospital employees. Some nurses and doctors resigned voluntarily. One male interne whose political beliefs are in question still remains on the payroll. This particular interne was not one of the internes to develop typhoid fever.

Recognition of Disease and Reporting: Within a two week period, a total of seventeen persons became ill with typhoid fever; (ten of the hospital's twenty-one internes and seven members of the janitor's family of nine persons).

Janitor's Family: Reportedly, the janitor became ill on 22 November as did his son. On the 30 November, after other members became ill, a private physician was called. Laboratory specimens were obtained and submitted to the nearest Branch Laboratory, the diagnosis determined and the patients admitted to the Toshima Hospital.

Hospital Internes: The first interne to become ill, became ill at the same time as did the janitor and his son. After the diagnosis was made in each case, the patient was admitted to one of the hospital's two CD wards.

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During the month of November, none of the internes worked on the CD wards.

Isolation and Concurrent Disinfection: The majority of patients were admitted to the hospital quickly. In some cases, the delay in isolation totalled four days. The Medical Director reported the hospital's technique to be satisfactory.

Quarantine: No quarantine measures were imposed by the hospital authorities.

Immunization: The hospital authorities have initiated a three dosage series for all employees. The Medical Director was unable to give the exact status for individual employees. Some of the patients had received immunizations within this past year. (A visit to the Itabashi Health Center by this investigator, revealed some information concerning the immunization status of the janitor's family. Some of the school age children received immunization and contracted typhoid. Child who received no immunization, has not contracted typhoid fever.

Investigation of the Source of the Infection: The Sanitary Engineer, KCAR and the Tokyo-To Health Bureau visited this hospital prior to this investigator. The hospital receives water from the City and samples reveal no pathological organisms. No carriers have been found in specimens from hospital employees. Methods of waste disposal seem adequate. This investigator made no inspection of buildings.

Impression: The interne bring their own lunch. At noon-time, they convene in one room and prepare their own tea. Adjacent to the interne's room, is the janitor's room. It would be possible for the janitor to share food from the internes but this possibility would not answer the janitor's entire family. A visit to the Health Center was made to learn more about the sanitary environment and water supply for the janitor's family. They

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obtain water from a community well. While this well is in need of repair, and could be considered unsafe, there have been no other cases of typhoid fever reported in this area. The Health Center doctors felt that food was most likely the source of infection but no information had been obtained to substantiate their beliefs. When the janitor's physical condition permits, further information may be obtained.

The nature of this outbreak presents an unusual picture because no facts can be obtained which relate to the consumption of contaminated food or water. Further investigation should be continued until more satisfactory data has been obtained.

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Komagome Hospital (Foundation, Heiwa Kyokai Organized in April 1949)
Address: 778 1-chome, Kamiuma Setagaya-Ku
Tel: Setagaya 2423
Director, Dr. R. Tazawa
Chief clerk, Miss Sakino Shiota
Chief nurse, Miss Yajima, T.
Date: nov. 18, 1949

1. Organization: The foundation is primarily aiming at the promotion of cultural standard of the children with the cooperation of school authorities. It has the central office at 649 Araimachi Nakano-Ku, Tokyo. Tel: Nakano 357. The director of the foundation is Dr. Tazawa, 68 years old.

2. Personnel: 5 doctors, 9 nurses (including 1 midwife of old system training school) no interns, 1 dietitian, 4 cooks, 3 servants, 4 clerks.

3. Physical plant: Total bed capacity 61. (42 T.B., C.D. none)
Built in 1919. Maintain Int. Med. Surgery, Orthopedics, Maternity and Gynecology. Central kitchen is functioning. Operating room is maintained fairly satisfactory except the wet floor. X-rays, direct and portable .
38 in-patients (1 private, 29 health insurance, 8 livelihood protection)
50-60 daily out-patients (more than 90% are of health insurance patients).
Maternity cases, 4-6 per month.

Average of monthly income:
(out and in combined)

Health Insurance	¥468,000	(usually get 0.5% reduction by investigating committee)
Livelihood Protection	¥ 80,000	
National Insurance	¥ 13,000	
Private	¥120,000	
Total	¥676,000	

Expenses including personnel salaries are just barely covered by the income.

T.B. ward: Private properties are found kept under patients' beds. Attendants sleep in the patient's rooms. 2450 calories for T.B., 2100 calories for general patients. Right next to the central kitchen, T.B. pantry is attached with glass sliding door partition, which should be made permanently fixed and sealed up with the proper materials, such as, paper and paint. Cleadiness of the kitchen is fairly satisfactory. Food storage room built next to the kitchen was found disorderly and dirty.

In the X-ray room ceiling and walls were not found portected with the proper materials. Delivery room is well maintained but no running water available.

Nurses' dormitory was found in the main building. Four rooms. They prepare their own meals. Materials supplied by the hospitals. One incinerator of good size is available. Environmental sanitation is not satisfactory. Hundreds of empty bottles piled up outside of the window across the delivery room.

Inspected and reported
November 1949
by Dr. H.S. Toyoda

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Tokyo Kyosai Hospital (Foundation)
Address: 2-chome No. 1 Meguro-Ku, Nakameguro, Tokyo
Tel: (49) 0604
Director: Dr. J. Yada
Chief nurse: Miss Horikiri

1. Organization: Established in 1935. Reorganized as foundation in October 1945. Formerly the hospital was maintained by the Navy employees as the voluntary group insurance hospital; and then was dissolved in 1945. Reorganized again in 1945 as the Kyosaikai foundation for the function of general hospital open to general public.

2. Personnel: 14 doctors, 30 graduate and 26 student nurses (the training school for nurses of old standard is maintained. Give ¥1,600 monthly for first year. ¥2,000 monthly for second year. Uniform, meals and room are supplied). Two dietitians, 4 cooks, no housekeeper (being planned to employ), 3 servants under chief clerk's supervision, 9 interns (get ¥200 per month, but food and room are not supplied), and 4 technicians.

3. Physical plant: Total bed capacity, 108. (including 25 T.B. beds; C.D. none). Concrete 3 story building. Elevator is available which requires repair for the safety. Central kitchen is functioning. T.B. ward is equipped with pantry, toilets and nurses' station; however, the method used for the sterilization is of very unsatisfactory. Dilute solution of 5% cresol solution is kept in a 5 gallon metal tank with a wooden cover which is not entirely clean. They claim that solution is changed daily. Food residues are kept in a open garbage can. Steam pressure sterilizer is under consideration. The boiler which used to supply steam for the general use in the hospital has been assigned as the reparation item. (Dr. Manitoff and Dr. Edelman helpted to release the reparatory assignment of this particular boiler) Central kitchen is maintained for the general meal supply. 2,200 calories for T.B., 2,000 calories for general patients. General sanitary condition is not satisfactory, especially the cooking utensils are not well kept up. Orderliness not satisfactory. Especially food stock (storage) room is badly kept and disorderly. Thorough scrubbing is necessary. X-ray is functioning. Clinical laboratory is well maintained, but not functioning in full capacity. It is desirable to have general routine laboratory tests on admission for every patient (including urinalysis, blood chemistry and hematological tests). This attitude of doing the general routine laboratory tests is very desirable in helping establishing the diagnosis. This method has been encouraged for number of years in the past, but practically very few hospitals do it. Chief objection is the expenses incurred upon this procedure, however, which in most of the cases will be turned out to be more economical financially and physically for the welfare of the patients.

Physical plant - B
Maintenance - C
Cleanliness - C-
Administration - C-
Efficiency - C-

Inspected and reported
by H. W. Toyoda
16, nov. 1949.

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Shitaya Hospital (Nippon Iryodan, foundation which has been dissolved immediately after the war.)
Address: 24 Nakanegishimachi, Daito-Ku, Tokyo
Tel: (84) 217, 3318, 218, 3834
Director, Dr. Sakaguchi
Chief clerk, Mr. Tatsuo Nomura
Chief nurse, Miss Horikawa
Det nov. 2, 1949

1. Organization: The hospital was one of those units of Nippon Iryodan Organization during the war. The building was of Tokyo Medical Association which sold it at ¥1,500,000 to Iryodan. The hospital is negotiating with Koseisho so that the government would buy the whole outfit at the cost of ¥87,520,000. Tokyo-To has been approached in the early part of 1949 at the cost of ¥43,760,000, although Tokyo-To broke up the negotiation. The building is of three story concrete, but badly damaged on account of mal-maintenance. It would cost at least ¥10,000,000 for over whole repairing.

2. Personnel: 28 doctors, 30 graduate and 18 student nurses, 20 interns (Keio, Jikei, Chiba and Maebashi), 2 dietitians, no housekeeper, 13 clerks and 7 cooks.

3. Physical plant: 176 beds (including 25 T.B. and 9 C.B)
It maintains all units except psychiatric and urogenital (dermatology). It has X-rays (direct and indirect, and deep therapy equipments), and clinical laboratory. The central kitchen is functioning but the sanitary condition in the kitchen is quite unsatisfactory.

Nurses' training school had been established in 1929 under the old system.

In-patients, 96

Health Insurance)
Livelihood Protection) - 70%, payment delays usually two months.
Private 30%

Out-patients average daily, 250.

Average monthly income ¥2,790,591 (average of July, August and September 1949)

Expenses ¥2,573,506

T.B. pantry: T.B. ward has no proper pantry. The central kitchen supply the meals, and the personal attendants carry the trays for T.B. patients back and forth. The attendants wash dishes with cold water. No proper sterilization system is observed. Garbage disposal system for T.B. patient ward is very unsatisfactory. All the dishes are kept in the ward rooms.

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Personal attendants sleep also in the patient's room.

Hospital building tsubo - - - - - - - -	1263.5 tsubos
Nurses' dormitory - - - - - - - -	108.0 tsubos
Ground area - - - - - - - -	1046.6 tsubos

Operating room: Maintenance and orderliness should be carried out emphatically and systematically. Delivery room is being used by the surgeons to change clothings for operation. Found stock of private clothings piled up on the operating table. Both T.B. and general patients are receiving 2400 calories.

Inspected and reported
by Dr. H.W. Toyoda