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Monthly Activities Report - Tochigi

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*SP 9 Feb ✓
from Dragan
L. Stengel Mr. Meurer*

HEADQUARTERS
TOCHIGI MILITARY GOVERNMENT TEAM
Utsunomiya, Tochigi Prefecture, Japan

APO 201
5 February 1949

SUBJECT: Highlights of Public Health Activities in Tochigi Prefecture
in 1948

TO : Commanding Officer, Headquarters Kanto Military Government
Region, APO 201.
Attn: Public Health Officer

Note: The following information was gleaned principally from the records
of the previous public health officer, since the present officer did not
assume his duties until 1 December 1948.

A. General:

1. Hospitals

a.) Constant surveillance on the part of the prefectural public
health dept. brought about increased sanitation and better admini-
stration. The physicians operating private offices and clinics
were goaded into making similar improvements. The project was
facilitated by spot checking on the part of the military govern-
ment public health section. A threat from said agency to close
the national tuberculosis sanitarium because of poor sanitation
brought a concerted clean-up campaign which produced remarkable
results. Prisoners and neighboring villagers helped in the work.

b.) Priorities given to hospitals by hydro-electric concerns
resulted in a more adequate and constant supply of electricity.

c.) Veterans with arrested cases of tuberculosis were cured of
their stubborn refusal to leave hospitals by stopping the supple-
mental rations which were being granted to them as patients.

d.) Hospital facilities were expanded. The prefecture took over
5 hospitals formerly owned by the Japanese Medical Treatment
Corporation. Some private hospitals and clinics were consolidated
into small general hospitals, in spite of the secret aversion to
competition manifested by many of the doctors concerned

Nikko Copper Works Hospital was expanded. Plans were formulated for a rehabilitation center for the mentally crippled survivors of the encephalitis epidemics; these plans have not, as yet, been executed.

2. Health Centers.

a.) The model health center in Utsunomiya was planned and constructed during the first half of the year. A grand opening was held in July. Plans were formulated for an annex. Construction was begun and nearly completed on the new Tochigi Health Center building.

b.) Roentgenological work was expedited by the loan of electrical transformers to the health centers by reparation plants.

c.) They performed admirably in aiding the control of the encephalitis epidemics, though their work was somewhat hampered by a lack of transportation.

d.) The main deficiencies in the 11 functioning health centers at the end of the year were inadequate space and incomplete staffs. Professional personnel were reluctant to become or remain employed by the health centers due to the pitifully small salaries offered.

3. Administration of health activities

a.) Closer cooperation between the military government and prefec-tural public health sections was effected. Mutual discussions of such problems as budget planning were held. Together they worked out a disaster plan for handling epidemics; it received a trial by fire in the late summer during the encephalitis epidemics, where widespread use of DDT and vaccines were employed.

b.) Better health standards were urged on such institutions as prisons.

c.) Candidates for Ministry of Welfare refresher courses on all phases of public health work were carefully selected and screened.

4. Professional associations

a.) The organization of Dentists was completed. Physician's, Veterinarian's and Pharmacist's Associations were already functioning. The adoption of a code of ethics by each of these associations was urged, to further general progress in public health.

b.) The military government public health section gave lectures before these associations on subjects related to current problems, and conducted tours of the 49th General Hospital for groups of members.

5. Health education.

a.) An extensive campaign was conducted on the subjects of sex education and venereal disease. Lectures were given, moving pictures were shown (to as many as 11,000 people daily), a traveling exhibit of posters and wax models covered most of the prefecture, and a monthly publication on these subjects was initiated by the preventive medicine section of the prefectural public health department.

b.) Propaganda against the purchase of unreliable black market drugs and against self treatment with potentially dangerous drugs was issued.

c.) Lectures on typhus control were given, and the value of the whole immunization program was repeatedly emphasized.

d.) Courses on home nursing and first aid were conducted by the local chapter of the Japanese Red Cross.

e.) Public health topics printed in both English and Japanese were issued to schools to be utilized in the study of English.

f.) During the encephalitis epidemics, the importance of full co-operation with physicians and health center workers was stressed, and the scientific value of autopsies was publicized.

g.) No information regarding birth control was issued, despite numerous requests for same.

h.) An increased lay interest in public health matters was gradually but constantly noted.

B. Veterinary affairs

1. Dairies

a.) Milk production increased steadily, but there was a tendency to rely too heavily on the value of pasteurization in milk sanitation. Proper handling of bottles, capping, and refrigeration were emphasized.

b.) Routine inspections brought an elevation of sanitary standards.

2. Slaughter-houses and butcher shops

a.) Meat production increased considerably but sporadically throughout the year. Animal epidemics and seasonal influences affected the monthly production figures.

b.) A modern, model slaughter-house was constructed in the city of Tochigi. Physical improvements were made in many of the others. Plans were completed for a model slaughter-house and meat packing plant in Utsunomiya.

c.) A year long drive for better sanitation showed fair results in both slaughter-houses and butcher shops. Poor water supply and drainage facilities still marred many of the slaughter-houses. Modern refrigeration is now noted in most of the butcher shops, but such details as screening are all too often neglected.

d.) The regional military government veterinarian made frequent visits to the prefecture. He made inspections, lectured to food sanitation inspectors, demonstrated the technique of intradermal tuberculin testing of cattle, and investigated the disposition of Lara goats; he found, frequently, that these goats had died through gross negligence.

C. Dental Affairs

1. The work of dentists was frequently hampered in early 1948 by a lack of some instruments and poor quality of others, as well as by a frequently interrupted supply of electricity. Most of these difficulties had been eliminated by the end of the year.
2. Dental hygiene is still generally poor.
3. The dentists have manifest great interest in the use of flourine to prevent dental caries.

D. Nursing Affairs

1. The greatest achievement in this field was the consolidation of the public health nurses, midwife's, and clinical nurse's organizations into one association. It has been meeting regularly for the discussion of mutual problems and for educational lectures. Their conferences have clearly shown a need for better education and training in their respective fields, and for better representation of their professions in the prefectoral public health organization.
2. The nurses have availed themselves of every opportunity to send representatives to the refresher courses sponsored by the Welfare Ministry in Tokyo.

E. Medical Supply

1. The introduction of the rationing system brought about much improvement in the situation. The system was well publicized, and medical materials were allotted to 26 established supply points on the basis of the number of doctors and people in the area served by each supply point. At the year's end, all materials were in adequate supply except for cotton sanitary goods and streptomycin (which has yet to be introduced to Japan).
2. Complaints registered with the producers brought better packing and shipping methods, which considerably decreased ampoule breakage.
3. A lack of refrigeration frequently precluded proper storage of biologicals, at first; but this situation is rapidly improving.
4. At the beginning of the year narcotic violations were numerous, apparently due to two factors. First, many of those handling narcotics had practically no knowledge of proper methods of narcotic accounting. Second, investigative methods were poor, prosecution uninspired, and penalties skimpy. Concerted effort to remedy these defects brought gratifying results.
5. A subsection for marijuana control was established due to the fact that this is a very large marijuana-hemp producing area.

F. Preventive Medicine Activities.

1. Tuberculosis seemingly increased during the year, but better diagnosis and better reporting undoubtedly accounted for the statistical rise.
2. The most dramatic epidemic was that of Japanese B encephalitis, which followed in the wake of an epidemic of equine encephalitis in the horses of the prefecture, in the general area of the floods of the autumn of 1947. 18 villages reported no epidemics of any sort; this is the first time in recorded history that this has been seen.
3. Typhoid and dysentery decreased markedly; this is ascribed to improved sanitation, and immunization.
4. There was no typhus. With considerable difficulty some typhus exposed repatriates were located, and appropriate prophylactic measures were taken.
5. Before the biologicals were called in for reassay, the small pox and triple typhoid immunization programs had surpassed goal figures and the diphtheria program had reached 50%. The only difficulty

encountered was a series of abscesses at the injection sites in Mibumachi due to unsterile technique on the part of the inoculating physician. Much work was necessary to counteract the damage to the public confidence which resulted from this incident. The BCG program is making satisfactory progress.

6. Other major control measures, such as the use of DDT in insect control, were widely and effectively used.
7. V.D. control has been retarded by many things. First, the age old profession of prostitution still flourishes in one form or another. Second, the officials have poor records of contact tracing and case holding - both of which they ascribe to the presence of numerous loopholes in the new Venereal Disease Law.

G. Sanitary Engineering Activities.

1. Water Supply. The filtration plant at Imaichi, which is the source of water for the city of Utsunomiya, was renovated.
2. Sewage disposal. Municipal public lavatories were constructed in many of the cities. A prefecture-wide campaign for the covering and screening of all latrines was fairly successful. Extensive remodeling of the lavatory facilities in the stations of the government owned railroads was conducted, most of the private railroad lines followed suit in making similar improvements. Good sanitation in these facilities was insured by a program of 1) cleaning them thrice daily, and 2) educating the public against littering up the latrines, by emphasizing the contribution which sanitation makes to disease prevention.
3. Garbage disposal. All of the cities now have plants for this work.
4. Insect and rodent control. Irrigation ditches were cleaned, DDT extensively utilized, and a rat extermination drive (3 million baits were placed out) resulted in the elimination of at least 300,000 rats.
5. Administration.
 - a.) Frequent meetings were held, by those responsible for I & R control on the village level, for the purpose of planning and integrating their programs and discussing mutually encountered difficulties. The public health (MG) officer frequently participated in these meetings.
 - b.) Prisoners were utilized for such general sanitation chores as the cleaning of streets, sewer drains, and public latrines. They performed this work thrice monthly, and it was repeated 2 more

time each month by the regular sanitary teams.

c.) The dissolution of the old sanitary association brought about:

1. Commercialized attempts by private concerns to fill-in.

2. Unfavorable propaganda by communists to the effect that the occupation authorities were purposely neglecting sanitation in the hopes that serious epidemics would scourge the people. This propaganda was countered with publication of the actual facts.

3. Successful establishment of the new governmental sanitary team system. 201 full time teams consisting of 653 men were formed, and 779 part-time teams consisting of 5,237 men were organized in this prefecture.

d.) Shortages of building materials prevented large scale renovations of existing facilities.

e.) The health centers initiated a program of routine sanitary inspections, and a concerted drive for general sanitation of private premises as well as public establishments was instigated.

H. Laboratory activities. The prefectoral laboratory continued to do the bulk of the work, although many of the health centers are now performing all of the simpler procedures. The prefectoral laboratory functions are retarded by a shortage of trained technicians. Plans are being made for an increased budget allotment to correct this situation.

I. Nutritional Activities. Frequent surveys are being conducted on the village level. They indicate that the average total caloric intake is in the neighborhood of 2000 per day. There are many local variables, and the urban and rural diets show distinctive qualitative differences.

M. W. Muir

M. W. Muir, Capt., MC
Public Health Officer

HEADQUARTERS
KANTO MILITARY GOVERNMENT REGION
APO 201

19 January 1949

✓ B
3 Feb.

319.1

SUBJECT: Information Request

TO : See Distribution

Please send a report on the following questions.

1. Budget for Public Health this coming year.
2. Have they set aside an special allotment to combat trachoma.
3. Is the Red Cross formulating plans for home nursing course to volunteers.
4. Have you sent to Kanto Military Government Region the names of heads of health department set up and of the doctors in health center.
5. Request a brief report of the field trips made by the Public Health Officer during each month.

BY ORDER OF COLONEL DAYTON:

DISTRIBUTION
"A"

Kenneth G. See
KENNETH G. SEE
1st Lt., QMC
Adjutant

1st Ind.

(19 Jan. 1949)

SUBJECT: Information Request

HEADQUARTERS TOCHIGI MILITARY GOVERNMENT TEAM, APO 201, 1 February 1949

TO : Commanding Officer, Headquarters Kanto Military Government Region,
APO 201

In answer

~~For compliance~~ to the above questions, the following is submitted:

- 1) See Enclosure #1
- 2) Yes, but the amount is small

- 00 00
- 3) Yes, the program has gotten underway
 - 4) Yes
 - 5) See Enclosure #2

Mark W. Muir
MARK W. MUIR
Captain, MC
Public Health Officer

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Expected budget for 1949 (Prefectural P. H. Dept.)

Hoken jo hi (Health Center expense)	28,730,394
Menkyo shiken oyobi yosei hi (Licence examination and training expenses)	303,546
Densen-byo yobo hi (Infectious disease prevention expenses)	18,766,027
Kekkaku yobo hi (Tuberculosis prevention expense)	1,560,938
Torahomu yobo hi (Trachoma prevention expense)	6,755
Seibyo yobo hi (VD. prevention expense)	2,544,408
Rai yobo hi (Leprosy prevention expense)	14,003
Shokuhin eisei hi (Provisions and sanitation expense)	4,058,063
Kankyo eisei shido hi (Environment sanitation steering expense)	921,256
Yakuji eisei hi (Medicine expense)	344,000
Eisei tokei hi (Sanitary statistics expense)	401,606
Yusei hogo hi (Eugenic protection expense)	639,050
Kyoken-byo yobo hi (Rabies prevention expense)	1,000,000
Chiho eisei hi kenkyu hi (Local Health Center expense)	4,101,866
Ken Shokuin hi (Prefectural officials expense)	6,218,597
TOTAL	<u>69,610,509</u>

Enclosure # 1