

GHQ/SCAP Records (RG 331, National Archives and Records Service)

Description of contents

- (1) Box no. 2826
- (2) Folder title/number: (8)
Newspaper Clippings - Tokyo

(3) Date: Jan. 1948 - Nov. 1949

(4) Subject:

Classification	Type of record
9611, 9750	S

(5) Item description and comment:
Tokyo

(6) Reproduction: Yes No

(7) Film no. _____ Sheet no. _____

(Compiled by National Diet Library)

DIGEST

Yamanashi
Yamanashi Nichinichi
19 Nov. 1949

1. Headline: To Increase the Live-stock-breeding, Expediting Team Formed

Yamanashi Prefectural Government had expediting teams organized in each town and village to formulate the general and special programs for live-stock breeding as fit to the existing conditions.

2. Headline: Construction of "Street of Mother & Child" and 11 other Petitions adopted at the Prefectural Assembly.

Twelve (12) out of thirty-two (32) petitions submitted during the Prefectural Assembly session were adopted by the Assembly on 17 Nov.

3. Headline: A Leper Detained at a Prison Set Free ✓

While keeping a leper in detention, inadvertently set him free. He committed crimes.

YAMANASHI PREFECTURE
Yamanashi Nichinichi Shinbun
19 Nov. 1949
Circulation: Unknown
Scanned by Kazuko Watanabe

"Food Thanksgiving Festival" held.

71A
AKM

A "Food Thanksgiving Festival" was observed on Nov. 23rd at the Sports Center in Shiba Park under the joint sponsorship of the Processed Foods Society and the Food Thanksgiving Association. Dr. Manitoff, chief of the Public Health Section of the Tokyo Civil Affairs Team, made a lecture, followed by greetings by Yasui Tokyo-to Governor, and acting chief of the Food Board Abiko.

A resolution expressing the gratitude of the Japanese to the Allied Forces was handed over to the GHQ by representatives of the Consumers' Association and school children at 2:30 p.m.

Nihon Keizai Shinbun
24th Nov. 1949
Circulation: 340,000
Translated by: Sumiko Kosugi

~~please pass to Health~~

T.B. Prevention Week to be Observed

~~71A~~
dflm

Tuberculosis Prevention Week is scheduled to be observed beginning 10 Nov. sponsored by the Welfare Ministry. Temporary clinics are to be set up on the streets and some 600,000 people will be inoculated with B.C.G. vaccine against T.B. during the period.

TOKYO PREFECTURE
Asahi Shimbun
9 November 1949
Circulation: 1,427,000
Tokyo : 413,000
Translated by Minako Hirata

~~copy~~ please pass to Health

T.B. Prevention Week to be Observed

Tuberculosis Prevention Week is scheduled to be observed beginning 10 Nov. sponsored by the Welfare Ministry. Temporary clinics are to be set up on the streets and some 600,000 people will be inoculated with B.C.G. vaccine against T.B. during the period.

TOKYO PREFECTURE

Asahi Shimbun

9 November 1949

Circulation: 1,427,000

Tokyo : 413,000

Translated by Minako Hirata

*Public Health**(71A) OKY**Mc.**WE*Morning

- 7 -

t-11

FEWEST PERSONS DIED OF T.B. IN
JAPAN THIS YEAR SINCE 1901

JIJI PRESS

TOHYO, Nov. 8 - Deaths from tuberculosis in Japan this year was an alltime low since 1901, it was announced by the Welfare Ministry Tuesday.

Officials of the Ministry under whose auspices a T.B. prevention week will be held throughout the country from Nov. 10 predicted a marked drop of death rates from this dreaded disease in Japan this year.

Last year 18 of every 10,000 people in this country died of the plague but this year the officials estimate that the rate will drop from the present 18 to 17.

According to a survey by the Ministry the number of T.B. patients in the country reached its peak in May and so far a total of 139,449 persons died of the disease, - an alltime low since 1901.

(more)

Morning

- 8 -

t-12

The heaviest tolls were paid by children between 10 and 14, the survey said.

Deaths among those aged between 25 to 59 declined appreciably and for the first time in Japanese medical history the death rate for those between 30 and 59 declined.

Classified according to sex the death rates among men dropped while those among aged women increased.

The highest death rate was seen among the residents in Hokkaido to be followed by those who live in Iwate, Miyagi, Toyama, Ishikawa, Mie, Kyoto, Osaka, Nara, Tokushima, Tochi and Miyazaki Prefectures.

Since 1934 T. B. has been the first on the list of causes of death from sickness, and during last year a total of 145,259 persons died of it.

If deaths from pneumonia and chronic peritonitis and bronchial catarrh were added, the number of the dead caused directly and indirectly by T.B.

(,ore)

Morning

- 9 -

t-13

would reach the 210,000 mark, the survey reported.

The officials also said that during the coming T.B. Prevention Week, first to be observed in Japan after the end of the war, BCG (anti-T.B. Injections) enough to vaccinate 600,000 persons will be distributed for ready use to all public health centers all over the country by the Ministry.

L/t

.....

P/Health 0

APR

Headline: 1,400,000 grams of Streptomycin will soon be imported from America.

On opening the "T.B. Preventive Week", Dr. Dickinson, chief of Tuberculosis Control Branch and Lt. Col. Thomas of the Preventive Medicine Division, PH & W Section, GHQ, interviewed with reporters on 12th Nov. where they told that a special step of importing 1,400,000 grams of Streptomycin from America will soon be taken.

The medicine imported so far is 200,000 grams in March and 400,000 grams in October.

Yomiuri Shinbun
12th Nov. 1949
Circulation: 1,756,000
Tokyo: 493,000
Translated by Sumiko Kosugi
Checked by S. Ezawa

TOKYO

*Put Health**arm* (71A)

Headline: T.B. Prevention Week being observed by the Metropolis; application of medical examination being accepted at main railway stations

During the T.B. Prevention Week being observed from the 10th through the 16th Nov., when medical examinations of passersby will be carried on at request at 11 places in the Metropolis, the Metropolitan authorities are going to accept applications for mass medical examinations of any school students and workers in various places of jobs during the week.

With the ban on tuberculine and BCG removed, they desire that people will avail themselves of the occasion. It will cost Yen 60. to have an indirect X ray picture taken with tuberculine and BCG shots administered. The places of medical examination on the streets will be:

Ueno Matsuzakaya Department Store, Koiwa, Shinbashi, Ikebukuro, Kichijoji, Ochanomizu and Shibuya Stations, and Sukiya-bashi, basement of the Marunouchi Building, and some place in Setagaya Ward.

TOKYO PREFECTURE
Nippon Fujin Shinbun
11th Nov. 1949
Circulation: 147,000
Translated by Sumiko Kosugi
Checked by S. Ezawa

O
Put
Hessoth
arm 71A

Headline: T.B. Prevention Week being observed by the Metropolis; application of medical examination being accepted at main railway stations

During the T.B. Prevention Week being observed from the 10th through the 16th Nov., when medical examinations of passersby will be carried on at request at 11 places in the Metropolis, the Metropolitan authorities are going to accept applications for mass medical examinations of any school students and workers in various places of jobs during the week.

With the ban on tuberculine and ECG removed, they desire that people will avail themselves of the occasion. It will cost Yen 60. to have an indirect X ray picture taken with tuberculine and BCG shots administered. The places of medical examination on the streets will be:

Ueno Matsuzakaya Department Store, Koiwa, Shinbashi, Ikebukuro, Kichijoji, Ochanomizu and Shibuya Stations, and Sukiya-bashi, basement of the Marunouchi Building, and some place in Setagaya Ward.

TOKYO PREFECTURE
Nippon Fujin Shinbun
11th Nov. 1949
Circulation: 147,000
Translated by Sumiko Kosugi
Checked by S. Ezawa

Morning(Tuesday)

- 7 -

t-10

HEALTH INSURANCE
UNION HOLDS MEETING

JIJI PRESS

Public Health

TOKYO, Nov. 7. - The National Health Insurance Union held its convention on Monday morning at Ryoritsu Hall in Nanda, Chiyoda Ward, with Public Welfare Minister Joji Hayashi and SCAP officials in charge of public health attending.

The convention adopted resolutions which, among other things, called for more government financial assistance to the union in its management.

These resolutions are expected to be relayed on Tuesday by union representatives to the Public Welfare Minister, Lower House Speaker, Upper House President and other quarters concerned.

k/t

.....

WPM
71A

Health for people

Evening

- 22 -

t-19

LETROBY EXPERT TO
ENLIGHTEN PHYSICIANS

JIJI PRESS

AKU

TOKYO, Oct. 4. - Prominent physicians specialized in prevention and cure of leprosy in this country will gather at the Matsugaoka Leprosarium, Higashi-Tsugaru country, Aomori Prefecture, to hear from Dr. Keizo Nakamura how he succeeded in the artificial cultivation of bacillus leprae, the micro-organism that causes the dreaded disease, it was learned today.

The leper-house will be the seat of the 22nd national meeting of the Japan Leprosy Researchers' Council, to be held for two days from October 6.

The artificial cultivation of bacillus leprae which had hitherto been considered impossible become a reality last fall, thanks to the untiring efforts for the past quarter-century by Dr. Nakamura of the preventive medicine department of the Matsugaoka Leprosarium, it was further learned.

Successful experiments on the cultivation of the bacillus were reported out at the 21st meeting

(over)

Evening

- 23 -

t-20

of the Japan Leprosy Researchers' Council, creating a great sensation among physicians and scientists in the field of medicine all over the world.

Results of additional tests conducted for the past year at Tokyo and Kyushu Universities as well as at the Tama Zenseien, leper-colony here, to prove Dr. Nakamura's theory on the cultivation of bacillus leprae will be reported to the 22nd meeting by Doctors Tadayasu Kanimura of Osaka University, Kaoru Urabe of Kurume University and Yoshio Koshio of the Zenseien.

Officials of the Welfare Ministry today reported that the additional tests conducted by researchers of the Zenseien today proved successful.

The cultivation of bacillus leprae, proved possible by Dr. Nakamura and awaiting official confirmation by the said three doctors, will doubtless make a great contribution to medical development in the world, like BCG injections for tuberculosis cure.

Evening

- 24 -

t-31

The officials today declared that Dr. Nakanura would probably become the first Japanese to receive the Nobel Prize.

.....

End Evening Edition

l/t

Tuesday, October 4, 1949

*Health for file**WRM*Evening

- 20 -

t-7

SLEEPING SICKNESS IS
TO DIE OUT BY MID-OCTOBER

JIJI PRESS

TOKYO, Sept. 29 - The Japanese sleeping sickness epidemic which flared up along the Tokaido with Aichi and Shizuoka Prefecture at the center with the turn of September will die out by mid-October, officials of the epidemics prevention section of the Welfare Ministry predicted today.

They revealed that a total of 2,641 cases were reported in the country up to September 29 of which 659 died of the disease.

The epidemic reached its peak during the middle 10 days of September, and has been on the decline since, the official said, adding that it will probably die out by the middle of October.

Largest hit by the epidemic this year were the Tokai and Hokuriku districts, and unlike last year comparatively few cases broke out in the Tohoku district.

Its largest victims were found among boys aged

(more)

Evening

- 21 -

t-8

between six and 10, who constituted about one-third of all cases this year.

The officials stated that the death rate among the sufferers was about 30 per cent as against 34 per cent last year.

Cases reported in Japan from the beginning of the year to September 28, classified according to prefecture were: (Bracketed figures indicate deaths)

Hokkaido	.....	2 (1)
Aomori	.....	3 (0)
Iwate	.....	14 (0)
Miyagi	.....	5 (3)
Akita	.....	7 (5)
Yamagata	.....	3 (0)
Fukushima	.....	1 (0)
Ibaragi	.....	41 (9)
Tochigi	.....	10 (3)
Gunma	.....	20 (2)
Saitama	.....	73 (12)
Chiba	.....	30 (6)
Tokyo	.....	278 (63)

(more)

Evening

- 22 -

t-9

Kanagawa	.....	96 (18)
Niigata	.....	17 (0)
Toiyama	.....	89 (32)
Ishikawa	.....	27 (7)
Fukui	.....	90 (15)
Yamanashi	.....	36 (9)
Nagano	.....	41 (8)
Gifu	.....	55 (18)
Shizuoka	.....	171 (54)
Michi	.....	213 (10)
Wio	.....	51 (10)
Shiga	.....	87 (24)
Kyoto	.....	41 (10)
Osaka	.....	98 (31)
Hyogo	.....	136 (20)
Nara	.....	43 (14)
Wakayama	.....	41 (23)
Tottori	.....	12 (2)
Shimane	.....	31 (8)
Okayama	.....	85 (13)
Hiroshima	.....	119 (32)

(more)

Evening

- 23 -

t-10

Yamaguchi	.....	85 (13)
Tokushima	.....	54(19) 12
Kogawa	.....	37 (11)
Shime	.....	44 (7)
Kochi	.....	8 (0)
Fukuoka	.....	52 (11)
Saga	.....	16 (4)
Negasaki	.....	9 (4)
Kumamoto	.....	174 (56)
Oita	.....	11 (3)
Miyazaki	.....	49 (13)
Magoshima	.....	26 (3)
Total	.....	2,641 (659)

L/t

.....

10 Health for file
11 Communists Forced to Leave
Kiyose Sanatorium

M.H.

Despite the fact that the tubercular patients in the country number 2,500,000, beds available to them in the national and private hospitals total only 70,000. Voices calling for increase of beds, doctors and nurses are now heard very often among the people concerned. Under such circumstances, it is quite natural from the humanitarian point of view that personnel cut of 170 staff-members of the national hospitals or sanatoriums should be the target of adverse criticisms.

Here in Kiyose Sanatorium where 280 staff-members are taking care of 750 inmates, Mr. Tatsuo Iwamoto, a communist cell, and 10 others were notified of the discharge for the reason that they had taken the lead in the struggle for increase of beds. The superintendent demanded them to return all the things loaned to them by 24 Sept. and leave the Sanatorium on 25th. Some policemen are said to be stationed at the Tanashi Police Station and Kodaira Police School to suppress any actions that might be taken by the communists to be dismissed.

It is true that the management, the labor union and the patients' self-governing body used to confer together on the operation and increase of facilities of the institution as well as the improvement of the treatment of patients. Budget has always been announced before the patients. As a result of the joint struggles centering around the communist cells, 400 patients, 60 % of all the inmates, could win financial aid of the Government in accordance with the Livelihood Protection Law and 100 of them are furnished with ¥ 350 living allowance every month. Besides that, they have succeeded in the fight demanding increase of 100 beds recently.

In opposition to the discharge, the cells will fight against the management, appealing the labor union, Osaka Sengokuso Sanatorium, the Japan Patients' League and the Federation of the Medical Labor Unions and other democratic organizations. Shigemasa Shimada, chief of Kiyose Village, declared that he will also take part in the struggle against the unwarranted suppression.

Akahata
26 Sept. 1949
Circulation: 110,000
Tokyo : 20,000

H File

ARM

Nippon Times

11 December 1948

Circulation: 50,000
Tokyo: 30,000

BLOOD BANK SET TO AID PATIENTS

Bill to Regulate Supplies
To Be Presented Soon to
Metropolitan Assembly

The Metropolitan Government's Bureau of Hygiene decided Thursday to establish a blood bank after the American pattern to supply blood and serums to patients under an independent statute regulating such supplies and to present a bill to the Metropolitan Assembly for the purpose in the middle of this month.

The decision was made at the first meeting of the Blood-Transfusion Committee of the Bureau at which medical experts of the metropolitan government, Welfare Ministry, Japan Red Cross Society, Tokyo University, Metropolitan Police Board, and Dr. A. R. Manitoff, Chief, Health Division, Health and Welfare Section, Tokyo Military Government, discussed safe transfusion in view of the recent unfortunate contamination cases.

The plan adopted as a result of discussions was that the Serum Institute of the Metropolitan Government should be made the headquarters of a blood bank with Tokyo University and the Japan Red Cross Society as branches.

The institute is presently distributing 500 packages of dried serum each containing 200 grams which it produces monthly to various hospitals but as the actual demand is estimated to be 800 packages the production is to be increased, while blood in the raw is also to be preserved at the various hospitals.

PH Section file
Nippon Times

30 November 1948

Circulation: 50,000
Tokyo: 30,000

40 MORE VICTIMS HIT BY POISONED NOODLES

Forty additional persons, involving 21 families residing in the vicinity of the Fuyoso Apartments in Nakano Ward, have been poisoned after eating rationed noodles. On November 24, the first case of mass poisoning from noodles was reported at the Fuyoso Apartments.

The latest food poison case has raised the total victims to 73, reported Kyodo yesterday. All of them obtained the noodles rationed by the Takeda 1-chome Distribution Center.

Investigations conducted by the metropolitan authorities are said to have revealed that the rationed noodles contained aluminum and calcium. It was reported that the manufacturer of the noodles, Michiyuki Hamura of the Marusan Food Manufacturing Company at Suginami Ward, is being held for questioning for alleged violation of the food sanitation law.

775013

Public Health file entry

Nippon Times
24 November 1948

Circulation: 50,000
Tokyo: 30,000

DAMAGES SOUGHT IN SYPHILIS CASE

Woman Patient Files Suit
Against Todai Hospital
For Contracting VD

Dr. Shigeru Nambara, president of Tokyo University, faces a ¥1,200,000 damage suit from a woman who claims that she contracted syphilis from a blood transfusion given to her by a clinic operated by the university.

The woman's lawyer Juzo Niwa is now reported to be preparing accusatorial proceedings for presentation to the Tokyo District Procurator's office.

The unusual medical case involves a former girls' high school teacher named Mrs. Yoshiko Takahara of Itabashi Ward, who underwent an operation at the University's Oimatsu-cho branch clinic earlier this year, reports Kyodo.

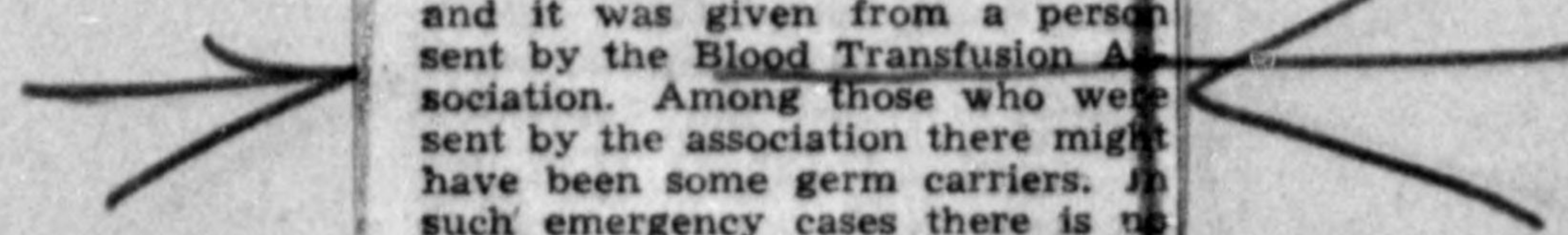
During the period from February until March, the woman received blood transfusions from four persons. After she left the clinic on March 3, she experienced eye hemorrhage and again consulted the clinic. On May 28, her latest trouble was diagnosed as resulting from syphilis. As the woman had had no prior contact with this disease, she began an intensive investigation. Her efforts subsequently led to the revelation that one of her blood donors had been a venereal disease carrier.

With this evidence, she decided to file a damage suit against president Nambara claiming ¥1,200,632.72 as compensation for negligence on the part of the University's clinic.

Concerning the syphilis infection through the blood transfusion at the University's clinic, Tsutomu Ishii of the University Office, made the following statement to the Nippon Times yesterday:

"The case became clear Monday afternoon when the head of the branch hospital reported it to my office. A woman patient came to the hospital in October, and received a major operation for uterine cancer. It became necessary to give blood transfusion, and it was given from a person sent by the Blood Transfusion Association. Among those who were sent by the association there might have been some germ carriers. In such emergency cases there is no time to test the blood. This is due to the imperfect medical system. Our hospital discovered the infection and there was no malicious intention on our part to harm the patient. Nor was it done intentionally. Therefore, there is no ground for a charge of professional negligence and the patient cannot demand any payment for damages."

*Dr. Manittoff
is responsible?*



*Public Health Section
file copy*

" IMPORTED SUGAR NO HARM "

Released by TMGT:

As the result of an extensive test made by SCAP have proved that the imported sugar being rationed in Japan is containing no harmful substances, Tokyo Military Government Team Public Welfare Officer stated 27 Oct., 1948.

According to the explanations of the same officer, the quality and purity of the imported sugar is investigated at both loading and unloading. The Japanese Government is also taking special care when the sugar reaches consumers.

The rumors spread among certain groups as if the sugar is contaminated or any disease could be acquired by eating it, are absolutely absurd.

Asahi Shinbun: 27 Oct., 1948
Circulation : 3,500,000
Tokyo : 1,417,000

輸入砂糖は無害
東京軍政部長 二七日東京軍
政部長公署衛生課長は、陸司令部
の検査に試験の結果、日本で配給
されている輸入砂糖には有害物を
ふくんでいないと発表した。
さらに同課長官の説明によると、
輸入砂糖の品質と純度は船
荷と荷下しのとき検査される
し、日本政府も消費者に配給す
るに特別な注意を払っている
が、砂糖がよわつてくるとか、
これに砂糖がよわつてくるとか
えらわいといふ噂は全くないが
と云ふ。

*Public Affairs
Section
file copy*

AMM

**Nippon Times
27 October 1948**

**Circulation: 50,000
Tokyo: 30,000**

**SCAP, TMGT OFFICIALS
STATE SUGAR IS PURE**

Extensive SCAP tests have proved that imported sugar now being received through ration points in Japan is not contaminated and contains no harmful substances, the Tokyo Military Government Team Public Health Officer stated yesterday.

"The quality and purity of the imported sugar is assured by inspections both on loading and unloading," he said. "The Japanese Government also takes special precautions to see that sugar is pure when it reaches consumers."

The TMGT official called "absolutely absurd" rumors spread by subversive Japanese groups that the sugar is contaminated or that any disease could be acquired by eating it.

Public Health Section file copy

Nippon Times
26 October 1948

Circulations: 50,000
Tokyo: 30,000

CONTROL OF TB VITAL IN JAPAN

Disease Is Greatest Single
Cause of Death Here,
Says SCAP Official

Tuberculosis is the greatest single cause of death among the Japanese people and therefore one of the most important public health problems of the day, declared Lt. Col. L. G. Thomas, Chief of the Preventive Medicine Division of SCAP's Public Health and Welfare Section, at a press conference yesterday.

Colonel Thomas in explaining the work being done to combat tuberculosis under the Health Center Law said that prior to the passage of the Health Center Law, functions and activities of the then existing health centers were limited to giving 'guidance and instruction' in only a few of the fields of public health.

He said a legal basis has been established by the new law, for the reorganization of the health center system, which provides the administrative authority, facilities and trained personnel needed for the present full scale program of public health.

Broadly expanded, the tuberculosis control program is one of the most important health center activities, he declared. The work of the tuberculosis control clinic, is only one of the many activities of the Tuberculosis Control Division of the Health Center.

The program of the Division (including the clinic) as established within the Health Center, has four main objectives: (1) To perform diagnostic work on individuals including X-ray, and laboratory diagnostic procedures. BCG inoculations are given when indicated, (2) To arrange for treatment in existing medical facilities of patients who have acquired tuberculosis, (3) To locate all sources of tuberculosis infection within the Health Center district, and (4) To control the spread of tuberculosis through the education of the general public.

Colonel Thomas said public health nurses visit the homes of all tuberculosis patients found by individual or mass examinations conducted at the Health Center or elsewhere. They also visit patients confined to their homes and all patients returned from sanatoriums. In all instances the public health nurse provides the patient and family with informative material concerning the rules governing proper home care.

In consultation, he said, the nutritionist provides the patient and family with individual information and guidance, and the medical social worker, when necessary, makes home visits in order to study the home conditions of the patient and plan for family aid.

While maintaining close coordination with the Tuberculosis Control Program at the prefectural and national levels, Colonel Thomas said the Health Center also maintains liaison with outside agencies, particularly welfare agencies, practicing physicians, and organizations interested in or concerned with tuberculosis problems.

775013

Recd

- SO
- Adm
- Econ
- CIAE
- Labor
- Korean
- LG
- RI&W
- ORD RM
- Proc
- Bank Japan

To Public Health Section In file

WY/LS

PREVENTIVE SECTION,
IDS

...yo Military Government Team commended
of Preventive Bureau sources of Tokyo
panese encephalitis was raging, and
ent.
...ese encephalitis was prevailing Tokyo
cially Preventive Section has done
r cooperation was devotional. It is
ess and restless efforts of doctors and
I have saved many lives.

献身的な防疫課
 慶政部長は、今度の日本防疫課の
 時における東部の衛生官の
 献身的活動を称賛して廿日次
 の電報を送った
 今度の日本防疫課は、特に防疫課は、同様な
 京部衛生局、特に防疫課は、同様な
 成果を挙げた。その功績は、
 く、防疫課のものがあつた。多数
 患者を救済した。在立、防疫課の
 功。防疫課の不懈不休の努力
 が多くの生命を救つたことは、
 な。防疫課の

HEADQUARTERS TMGT

APO 181

Date 1948

TO:FROM:	TO:FROM:
C.O.	Labor
Ex. O	PH
Adj	PW
Sgt. Maj.	CPC Whse
Pers. Sgt	Orderly RM
Econ.	Motor Pool
CI	Bk Of Japan
CE	Korean Affairs
Legal	

REMARKS:

In PH file for CI

TMGT Head Lauds Yosano

Col. F. A. Hollingshead, commanding officer of the Tokyo Military Government Team, has commended the Tokyo Metropolis Public Health Bureau, especially the Preventive Medicine Section under the leadership of Dr. Hikaru Yosano for its splendid work during the recent Japanese sleeping sickness epidemic

Nippon Times
26 September 1948

Circulation: 50,000
Tokyo: 30,000

TMGT Head Lauds Yosano

Col. F. A. Hollingshead, commanding officer of the Tokyo Military Government Team, has commended the Tokyo Metropolis Public Health Bureau, especially the Preventive Medicine Section under the leadership of Dr. Hikaru Yosano for its splendid work during the recent Japanese sleeping sickness epidemic.

Col. Hollingshead Inspects Food Processing Plants

Col. Hollingshead Commanding Officer of Tokyo M.G. Team and Dr. Manitoff Chief of Public Health Section made an inspection starting local 17 Sept. at Tabata Meat Processing Plant in Kanda, Fish Market at Tsukiji, Nisshin Cattle Industry at Kita-Shinmonzen-machi Azabu and Suzuki Meat Processing Plant.

Fish meat plant processing Kamaboko and Hampen was very insanitary and needs much improvement, but both of the meat processing plants were good. At Suzuki Meat Processing Plant they made a through inspection on processing ham, sausage and whale meat.

This kind of inspection will be made continuously on such plants concerned with the public health.

Tokyo Shimbun
18 Sept. 1948

Circulation: 500,000

魚加工は不衛生

本軍政部長、食卓工場を視察

第八軍東京軍政部長ホーリングスヘッド大佐、マニトフ公衆衛生課長は十七日午前十時から食品関係衛生状況視察のため神田多畑魚肉加工場、築地魚市場、麻布北新門前日産重工業、鈴木食肉加工場を視察した。

当日の成績は、よれば方マホコ、なおこの視察はこの種公衆衛生店

パンパンなど魚肉加工場はすこぶる不衛生、今後十分研究の余地があるが、食肉加工場は加工工場とも良好との概評、最後の鈴木加工場ではハム、ソーセージ、鯨の加工状況をつぶさしく視察した。



全般にわたって今後が計能言われる「写真係視察中のホ大佐とマニトフ課長」

775013

*Public Health
file copy*

Stars and Stripes
13 Sept. 1948

Circulation: 8,608

**Some Fish Poisonous,
Health Officer Says**

A number of persons in the Tokyo Metropolitan area have been poisoned from eating fish and fish products recently, according to a report by the Public Health officer, Tokyo Military Government team.

All persons are cautioned that purchase of fish and fish products from unsanitary or non-inspected dealers may result in poisoning.

Fish should not be purchased from dealers without refrigerator facilities, because such products are extremely dangerous. Occupation members are also warned that shell fish may become poisonous during the current season if not properly stored.

明
菜地市場は落第
 東京農政庁で衛生検査
 東京農政庁公衆衛生課マニツ
 博は東京農政庁司令官ホーリン
 グスヘツト大佐らとともに十七日
 午前十時から都内の食肉会社や市
 場衛生事務所を視察して回つた
 西工場は概して成績上々だつ
 のにひきかえ菜地の畑市場の
 場では豚糞や加工水産物がむ
 出しで陳列され、ホコリやハ
 がたかりほうだいという有様
 七曜調査一行もこれは落第と
 西の側で、公衆衛生課では今後
 も一般家庭の台所に直接つたが
 る各種食品の工場検査をドシ
 く行い一般の衛生検査調査を
 つたす

YOMIURI SHINBUIN SEPT. 18, '48

うどん粉で中毒

江戸川・荒川両区で三件

四日朝野新聞衛生係に小松川と江戸川から配給のうどん粉によるとみられる中毒が報告された。

○その一 江戸川区小松川一の一三六飲食店研究所(責任者 山口 篤)で所員その他廿八名が配給されたうどん粉を廿一日のひとと夜すいとんとうどんにして食べたところ一日朝六時ごろから十七名が下痢と腹痛をおこし、なかの一人 長谷川左近平さん(七)は朝飯

○その二 同区東小松川三の三五 一丸齋田アパート内百濟勝太郎さん(七)は配給の食用粉を一日夜食

べたとともに下痢腹痛をおこした。

○その三 荒川区日暮里七の三八 八中野飯家さんは九名はやはりうどん粉を一日夜食べたとともに下痢腹痛をおこした。

なお新聞でははたして配給粉によるものか否かを調査中

Sept. 5. 1948
Tokyo minpo

Aug 28 1948
Nippon Times

Epidemic Cases Drop
 Twenty new cases of Japanese sleeping sickness were reported within the Metropolis as of 3 p.m. yesterday, bringing the total to 1,772. The epidemic is believed to be declining for yesterday's figure is only 15 per cent of the highest figure of 136 on August 13.

MOLLOHAN CLARIFIES ANTI-EPIDEMIC SERUM
 Vaccine Must Be Given Before Exposure to Be Effective

By the United Press
 An official of SCAP's Public Health and Welfare Section said yesterday that mass immunization of the Japanese populace through use of U.S. Army anti-encephalitis serum would not be effective in checking the current epidemic.

Col. C. S. Mollohan, Deputy Chief of the GHQ Section, said sleeping sickness vaccine must be given well before exposure to be effective and this was impossible once the epidemic had started.

Japan has no locally-manufactured encephalitis serum and would have to call on the Occupation forces for supplies to use in an immunization program.

Colonel Mollohan blamed failure of the Japanese Government to provide funds for a planned mosquito-control program as the chief cause of the current epidemic. He said top priority had been given to plans for instituting local production of encephalitis serum.

26. 7147

八月廿八日發行

775013

Aug 24 1948

Nippon Times

**1,664 Epidemic Cases,
313 Deaths Reported**

The outbreak of 41 additional cases during the past 24 hours raised the number of persons within the Metropolis stricken by Japanese sleeping sickness to 1,664, as of 11 a.m. yesterday. Fatalities were reported now to have increased to 313.

Ota Ward led all other metropolitan wards with the greatest number of cases—148, followed by Setagaya with 125 and Adachi with 111.

**ARMY REPORTS 1 CASE
OF SLEEPING SICKNESS**

9 Occupationaires Placed on Suspected List

General Headquarters announced last week that only one case of Japanese sleeping sickness among occupational personnel has been confirmed in the Far East Command, and that 64 cases of poliomyelitis have been confirmed since June 1, 20 of which were the paralytic type.

At present there are 13 suspected cases of sleeping sickness, four in Okinawa and nine in the Tokyo-Yokohama area. In addition to the confirmed cases of polio there are ten suspected cases in FEC, seven of which are in Japan.

Maj. Gen. J. A. Bethea stated that "the incidence of encephalitis is declining, but at present there is no indication of a decline in polio, which is much milder than the 1947 summer season."

Aug 27 48
NIPPON TIMES, FRIDAY

SWALLOW IS HELD

TO CEMENT CADDIES

In its laborers, and yet we... requires less technical... industry, the building in-... compared with other lines is... together... undergoes the necessary... that unskilled cheap... through the boss... by their employers... to the work assigned... cheap laborers attend pro-... to see to it... recruited. Secondly, these... in the agrarian districts... cheap labor scattered... it is through them... for three reasons, the... exploitation of cheap labor... system for the sake of... capital supports the labor... the... blow to it... rally bound to deal a de-... their elimination is... of labor to this in-... hitherto been the sole... Labor bosses... to make a clean sweep... building industry because... much perturbation in... primarily motivated, is now

Kobe Sprayed With DDT

During one week Kobe City was sprayed with 8,000 gallons of DDT by U.S. Army medical authorities as precaution against any outbreak of sleeping sickness.

BCOF Reports 3 Polio Cases

BCOF medical authorities reported yesterday that no cases of Japanese sleeping sickness have been recorded among service or civilian members of the British Occupation Forces. Three cases of poliomyelitis have been confirmed, one a fatality. The polio struck one New Zealander and two Australians.

Epidemic Cases Increase

Thirty-seven new cases of sleeping sickness bringing the total to 1,732 in Tokyo were reported as of 3 p.m. yesterday. Also 11 more deaths were disclosed raising the toll to 340 in the city.

Aug 26 1948

八月廿四日
発行

775013

Aug 21 1948
EPIDEMIC HITS HORSES

829 Deaths Reported in Three Months Throughout Nation

Sleeping sickness cases of horses from May to August 14 totaled 829 in Tokyo and 22 other prefectures, according to the Agriculture-Forestry Ministry yesterday. Out of this number 109 horses died, 22 recovered while 21 were killed.

The prefecture which suffered most is Tochigi with 188 horses dead; Ibaraki, 152; Gumma, 74; Fukushima, 68; and Miyagi, 47. Tokyo reported 23 deaths. It is believed that by the end of this year the epidemic will exceed last year's 1,109 cases and run up to about 1,500.

Aug 21 1948
Epidemic Toll Increases

Eighty new sleeping sickness cases and 80 deaths reported in the city as of 3 p.m. yesterday raised the number of cases to 1,537 and 282 fatalities.

928 PERSONS SMITTEN WITH B-ENCEPHALITIS

Aug 14 1948
Cool Spell Keeps Down Outbreaks in Tokyo

The outbreak of 165 additional cases of Japanese B encephalitis Thursday has sent the number of victims contracting sleeping sickness within the Metropolis to 928.

Cases of infection which had been rising steadily, however, showed a decline of 15 as compared to the previous day's figure of 134. As low temperature was considered to be the reason for the smaller number of outbreaks, authorities hoped that the same factor would serve to keep the incidence rate down.

Fifteen additional deaths yesterday raised the fatality toll to 124.

Meanwhile, the Associated Press reported yesterday that the first two suspected cases of Japanese B encephalitis was noted among American occupation personnel.

The news agency said the Surgeon General's Office is making a full diagnosis of the suspected cases—an American child and a woman.

Aug 21 1948

Encephalitis Outbreak Shows Downward Trend

Aug 17 1948

The outbreak of Japanese sleeping sickness showed a downward trend as only 84 cases was reported Sunday as compared to the daily average of more than 100 cases during the past few days.

There were 1,237 cases of sleeping sickness reported in Tokyo as of Sunday with 203 deaths.

Sleeping Sickness Tops 500 Mark in Tokyo Area

According to the latest figures released by Japanese health officials, the toll of Japanese B Encephalitis cases within Tokyo-to has risen to 502 with 72 fatalities. To date, all cases are being referred to Komagome National Hospital, Ebara Municipal Hospital and both the First and Second National Hospitals, although it is expected that additional Tokyo hospitals will soon be set aside for "sleeping sickness" treatment if the current epidemic persists.

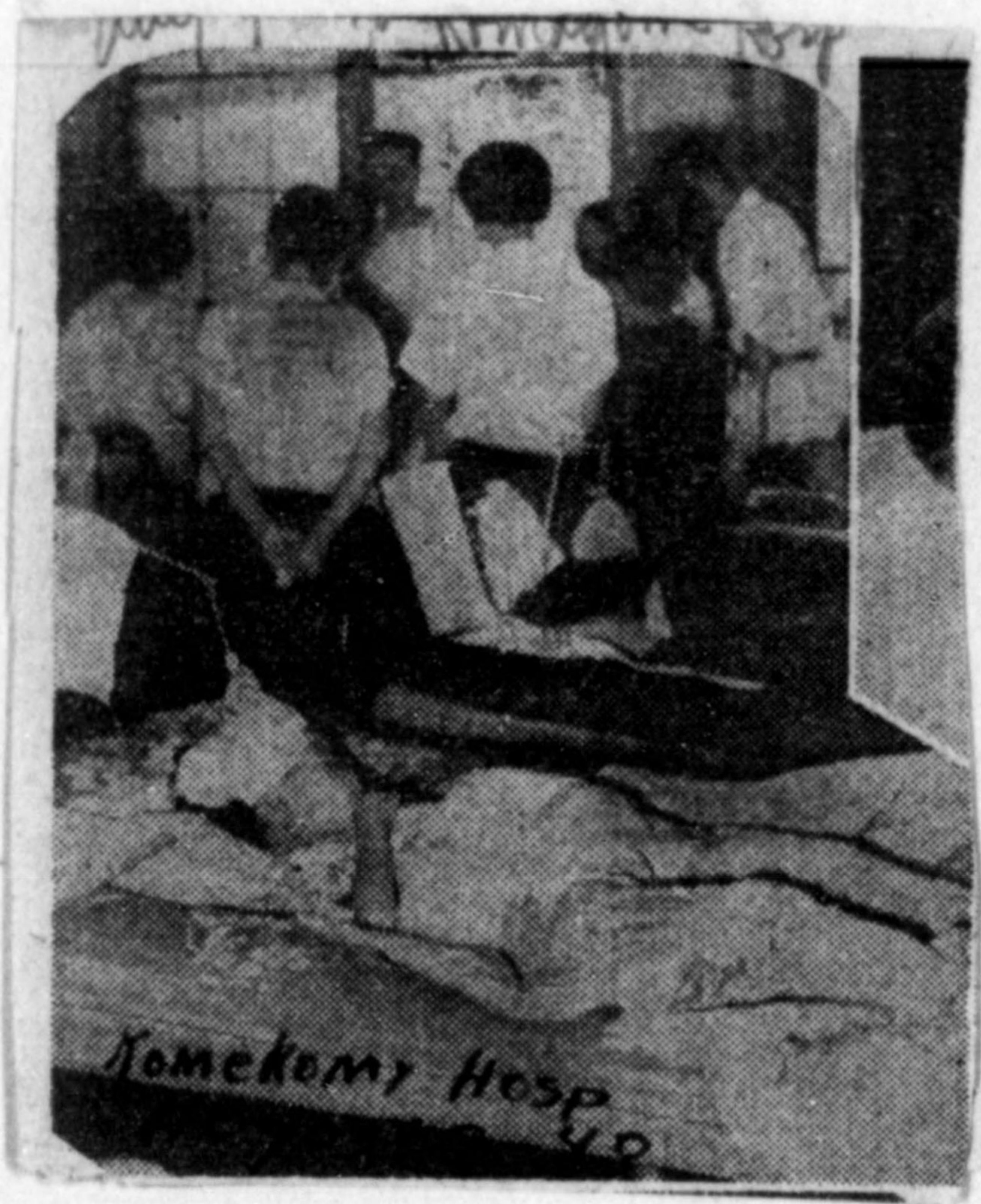
In commenting on the recent outbreak of this disease, Lt. Col. L. G. Thomas, Chief of the Preventive Medicine Division of SCAP's Public Health and Welfare Section, stated, "Japanese B Encephali-

Kyodo reported that as of 3 p.m. Tuesday, the number of Japanese afflicted with Japanese B Encephalitis has risen to 557 with 74 fatalities in Tokyo alone. Welfare Ministry figures listed the number of cases throughout the nation on Monday at 651 in one city and 14 prefectures.

tis has been known in Japan since 1871, and the country has become used to annual attacks during July, August, and September.

"It is also interesting to note from past medical records that there is a cycle of severity for Japanese B Encephalitis, which is highlighted by a nation-wide epidemic about every 10 to 15 years. In 1924 there were more than 6,000 cases of sleeping sickness reported throughout Japan and again in 1935 the norm of one or two thousand cases was boosted to more than 5,000. As a result of this data, PH&W officials have more or less been expecting an outbreak of encephalitis the past two summers. If the number of cases continued to rise during the next few weeks, 1948 may be the peak year in this decade."

Chiangs on Vacation



**39 PATIENTS HERE DIE
FROM ENCEPHALITIS**

Aug 8-48

**254 Cases Are Reported With
Boys Outnumbering Girls**

As of 4 p.m. yesterday there were 254 cases of the Japanese sleeping sickness in Tokyo. Of the number 39 ended fatally. Sixty-one new cases were reported on Friday, the largest number ever discovered in a day.

Persons under 10 years were dominant among the patients. There were 144 of them, 88 males and 56 females. Patients of from 11 to 20 years numbered 58, 33 males and 25 females, while there were 33 patients who were over 21 years, 21 males and 12 females.

CAMPAIGNS AGAINST SLEEPING SICKNESS



(Kyodo)

With sleeping sickness cases rapidly mounting in Tokyo, health authorities have started a city-wide drive to clean up the city where the epidemic is reported. On Wednesday, Brig. Gen. Crawford F. Sams, chief of the Public Health and Welfare Section, SCAP, accompanied by Japanese ward officials witnessed the work of the sanitation corps in spraying DDT. Photo shows General Sams during an inspection of an alley near Sanko-cho, Shirokane, Minato-ku.

FIRST EPIDEMIC CASES REPORTED HERE IN 1924

Aug 9 '48
Health Laboratory Head Says
Disease Is Periodic

The spread of the Japanese sleeping sickness in the country recalled the first outbreak of the epidemic in the country about 25 years ago.

Rokuzo Kobayashi, president of the Preventive Sanitation Laboratory, who has been devoting himself to the study of the origin of the sickness in the past years, told Kyodo he notes that the epidemic in Japan has thus far been periodic. It was in the summer of 1924 that the epidemic broke out for the first time in Japan in Toyama Prefecture, where 700 patients were affected. The same prefecture reported nearly 600 cases in 1925. The rate of mortality in the epidemic was 20 per cent.

In 1934 the Encephalitis Committee was set up. This marked the start of an organized effort by the medical world to control the sickness.

After 1925 cases were reported almost every year but they were small in number. The epidemic prevailed again in 1935 and raged throughout the country through 1936 and a part of 1937. Okayama Prefecture alone reported 1,200 cases in 1937 and the rate of mortality was 30 per cent. The epidemic began to subside at the beginning of September 1937. There were few cases of the sickness reported during the war.

EPIDEMIC CLAIMS 52 PATIENTS HERE

Aug 10 - 48
397 Cases Are Reported;

Disease Spreading in
Other Prefectures

Metropolitan health authorities disclosed that as of 2 p.m. yesterday 397 cases of sleeping sickness were reported in the city alone and that of the total 52 have died. On Sunday, 90 new cases and 10 fatalities were reported.

The epidemic was reported fast spreading in some sections of the Kanto district over the weekend.

According to information available here yesterday, the epidemic affected four additional patients in Ibaraki Prefecture Sunday, 18 and two in Saitama and Tochigi prefectures, respectively, during August 7 and 8. Two of the eight patients in Ibaraki and one of the three in Tochigi already died of the sickness. Patients in Saitama number 28.

In Chiba Prefecture, five patients have died since the outbreak of the epidemic.

Yamanashi Prefecture reported that as of Sunday 23 horses in the prefecture have been affected of which 12 have already died.

At Nagoya City, another case of the epidemic was reported Saturday bringing the total number of patients in the city to nine. Three fatalities have already been reported.

At Moji, a 42-year-old man was found Friday to be suffering from sleeping sickness.

ALARMING INCREASE IN SLEEPING SICKNESS

761 Cases Reported in Metro-
polis Alone; 109 Dead

Despite the enforcement of vigorous medical measures to cope with the alarming increase in sleeping sickness cases, Metropolitan authorities yesterday reported that the number of victims within the Metropolis had shot up to 761 with the outbreak of 134 additional cases Wednesday.

Cases of fatalities also were said to have increased to 109 from 28 additional instances of death during the past 24 hours.

The first cases of Japanese B. Encephalitis were reported from Sendai and Osaka. Scores of new cases were reported from Saitama, Ibaraki, Toyama and Nagano prefectures.

23 PATIENTS DIE FROM EPIDEMIC

Sleeping Sickness Cases
Total 187 in the City;
Y'hama Reports 20

The outbreak of 39 new cases of the Japanese "B" encephalitis Friday sent the score of persons stricken with sleeping sickness within the metropolitan area to 187 as of 2 p.m. yesterday. The entire metropolitan area except Minami-Tama-gun and Nishi-Tama-gun is infected.

The death toll also rose to 23.

The Welfare Ministry reported that so far 214 cases of sleeping sickness have been reported throughout the country. It said that Tokyo topped the list with 174 cases, followed by Yokohama with 20 and Shizuoka with three.

At Nagoya, the epidemic has spread to the city and the deaths of two boys have been reported. Another boy has been isolated for medical observation.

Saitama, Mie and Kumamoto reported two cases each, while Aichi, Akita, Kochi, Ibaraki and Gifu had one case each.

The Ministry's figures show that 273 cases of sleeping sickness were recorded last year of which 118 or 40 per cent resulted in death.

Sleep Malady In Big Increase

Sleeping sickness cases are on the increase in Tokyo with 22 Japanese dead out of a total of 170 suspected and confirmed cases, according to Public Health and Welfare section, SCAP.

Spreading throughout the city, the sickness has hit every ward.

On Thursday morning, Kyodo press releases said that suspected and confirmed cases numbered 116 and by 3 p.m. of the same day, reported cases had risen to 148. The 22 additional new cases were reported yesterday morning.

A total of ten new cases were reported from Yokohama by Jipi Press in Nagoya, two boys were reported dead, while another boy was isolated for medical observation.

Encephalitis Found Here

Japanese physicians have reported 47 cases of Japanese B encephalitis among residents in the Tokyo area. This is the first outbreak of "sleeping sickness" in the Tokyo area since the beginning of the occupation.

To date no cases have been reported among occupation personnel. However, Maj. Gen. J. A. Bethea, Medical section, GHQ, requests all occupation personnel in the Tokyo area to insure that their Japanese B immunizations are up to date.

Persons who have not yet received Japanese B encephalitis shots should report to the nearest dispensary immediately. Homes and billets should be carefully sprayed with DDT and individuals who are planning to be outdoors after dusk should use insect repellent.

EPIDEMIC CLAIMS 5 VICTIMS HERE

Phrenitis Spreads in City;
47 Persons Stricken
Since Mid-June

Aug 4-48

Forty-seven persons have been stricken, five fatally, by a growing epidemic of Japanese phrenitis (sleeping sickness) within the Metropolis since mid-June up to August 2.

Two initial cases broke out in mid-June, with 20 additional infections being recorded in mid-July. Health authorities reported that 17 new suspected cases were reported Monday and nine additional cases were being checked yesterday.

The germs of the Japanese phrenitis are mosquito-borne. Susceptibility is highest among children under 10, as shown by the fact that 13 of the 20 cases recorded up until the end of July were children.

According to medical authorities, the fatality rate for Japanese phrenitis runs as high as 60 per cent. Persons contracting the illness register a high temperature and begin losing clarity of their senses within a day or two. After this, the patients fall into deep slumber, accompanied by spasmodic twitching of their limbs.

EPIDEMIC CASES SPREAD IN CITY

Aug 5-48

65 Suffer From Sleeping
Sickness, 12 Succumb;
Horses Affected Too

With an additional 27 persons ascertained as suffering from Japanese "B" Encephalitis (sleeping sickness) the total number of patients in the city reached 65 Tuesday.

The 27 new cases were reported in Meguro, Shinagawa, Toshima, Ota, Chuo, Sumida, Minato, Adachi and Kita wards. More than half of the patients are children 10 and 12 have already died. The fatality rate which is as high as 60 per cent is highest among older people. Those who have once suffered from this illness cannot recover completely as their brains, limbs and arms become affected.

As of August 1 two cases in Kumamoto and Mie, three in Shizuoka, one in Gifu and three in Okayama were reported, bringing the total number of patients throughout the country to 74.

Meanwhile, a similar epidemic of brain fever is spreading among horses. Susceptibility is higher than among human beings. Two hundred and five horses were affected as of August 1, including 54 in Ibaraki, 48 in Fukushima, 28 in Gumma, 21 in Yamanashi, nine in Chiba, eight in Miyazaki, three in Nagano, two in Gifu, one in Yamagata and nine race horses at the Fuchu race track, Tokyo. Racing horse owners mourn the loss as each horse costs from ¥500,000 to ¥600,000. As compared with last year susceptibility among human beings is three times higher and among horses five times higher.

116 CASES OF EPIDEMIC REPORTED IN THE CITY

Aug 6-48

One More Death Disclosed
Raising Toll to 13

The epidemic of Japanese "B" encephalitis (sleeping sickness), which is fast spreading over the entire Metropolis, was reported as of 11 o'clock yesterday morning to have swelled the number of confirmed or suspected cases of contagion to 116.

In less than 24 hours since 3 p.m. Wednesday, 26 additional cases have cropped up. Another death also was reported, raising the number of fatalities since the outbreak of the epidemic to 13. Nerima has now become the only ward in the city which has so far escaped the epidemic.

Meanwhile, 11 cases of sleeping sickness were reported from Kanagawa Prefecture to the Welfare Ministry. Since July 20, eight cases were disclosed in Yokohama, two in Kawasaki and one in Yokosuka.

**都立第一保健所
落成す**

震災を被り甚窮になつた都内各保
護所施設強化の第一陣として文京
区小石川水道町六に新築中だつた
都立第一保健所がこの程しゆん工
したので廿九日午後二時から同所
で落成式を行つたこの保健所は本
道二階建、二百五十三坪のスマー
トな建物で新保健所法施行後初の
充實した都民の公衆衛生機関とし
てその活動が期待される

As the first new Health Center in Tokyo-To, Daiichi Health Center which was under construction was completed and the ceremony was held at 2 P.M. on 29th. It is the wooden building with two stories, including 253 tsubo. We are expecting their work as the health institute according to the new Health Center Law.

THE NIHON KEIZAI SHIMBUN

15 January 1948

Circulation: 340,000

Tokyo: 74,800

インチキ「スルフォ」剤に注意せよ

(東京、神奈川軍政地区東京支部 十四日発表) 最近米國のアツンジヨ、リリー製薬会社の商標をかたつたいかもの「スルフォ」が「スルファアヂアシ」
「スルファアソール」と称して販賣されている事案があるので東京、神奈川軍政地区東京支部衛生官なら

びに東京衛生局は十四日(六)週刊以内にヤミでスルフォ剤を調入した者に警告を発した。これらインチキ薬は普通のでん粉、砂糖、小麦粉だけでつくられ、それ自体害はないが全然効かず、東京憲兵司令部ではこのほかこれらインチキ薬製造者ならびに販賣者一味の手入れを行い、十一名を逮捕、近く裁判が開かれる。

Released by Tokyo-Kanagawa Military Government District, Tokyo Detachment.

BE CAREFUL OF FALSE SULPHA DRUGS

Tokyo-Kanagawa Military Government District, Tokyo Detachment, Health Section officers and Tokyo Health Bureau gave a warning yesterday to those who obtained sulpha drug in the blackmarket during the past six weeks. It was found that false sulpha drugs which had forged trade marks either of Upjohn Pharmaceutical Company or of the Lilly Company, had been out in the markets.

These false drugs are a mixture of only starch, sugar and wheat flour. While not harmful in themselves, they do no good at all. Tokyo Provost Marshal made a raid upon those drug manufacturers and salesmen. Eleven men are awaiting trial.

*14 July '48***NEW VD CLINICS OPEN****Four Health Centers Are Also
Operating at Evening**

All Health Centers in Tokyo will now have venereal disease clinics instead of the few as heretofore, the public health officer of Tokyo Military Government Team announced yesterday.

Citizens should inquire just what days and hours these clinics are operating in their neighborhood and obtain examinations as soon as possible.

In addition, four Health Centers now have evening clinics, so people who are working can come after their work for examinations, the officer added. The schedule of these clinics and hours are:

Suginami H.C. Tuesday & Friday
4-6 p.m.
Chuo H.C. Monday & Friday 4-
6 p.m.
Adachi H.C. Tuesday & Thursday
4-6 p.m.
Shinagawa H.C. Monday &
Thursday 4-6 p.m.

Publicity
東 京 新 聞 紙

都に初の婦人課長

日赤の平野女史・看護課へ



平野みどり女史

都初の婦人課長が生れる——これは衛生局に新設される看護課の初代課長に日赤青年赤十字看護婦の平野みどり女史(こ)に白羽の矢が立つてその内職をえたもの。同課は保健婦、助産婦、看護婦の教育と指導監督を主として四人のうち三人までは女性とするという案とも女性による女性のための課で今月中に発足する。平野女史は昭和一年から昭和加病院で保健婦、公衆衛生の仕事に二十一年近くもたずさわった経験をもつ人で、この女性ばかりのお母院には大きな期待をもたれている。

平野女史談 兼にお話した何事も覚えておられません、明かすやうなことを仕事と同じものとして、責任をもつてお話しします。また、二階にお話しかけたいと思ふので、これからはあるか打合せをしてからよく覚えておきます。平野みどり

入った

安全運轉を準備

【宇都宮】国鉄宇都宮支店機関区分室では去る十一日宇都宮管理部長に六月分はう給の繰上支給方を輸入していたが拒絶され、十五日午後機関大会を結果四八五対八四で十六金運轉に入ることを決断し、安全運轉について意見を述べた。それから一部列車の運轉である。

司揚 相談

日赤東京 明かす

各世回

akm

Evening

- 8 -

C-6

TMO TO SET UP A
NURSING SECTION

JIJI PRESS

TOKYO, June 19. - The Tokyo Metropolitan Govern-
ment has set up an office which will be entirely run
by women from chief down to page.

This is the nursing section, a new addition to
the government's Health Bureau.

The section composed of the public health, mid-
wifery and nurse divisions, will be headed by .50-
year-old Midori Hirano, a graduate of Columbia Univer-
sity nursing course, and one-time professor at the St.
Luke Hospital nurse school here.

In a press interview this afternoon, the new
section chief declared that she has no definite plan
yet as to how her section will be operated, but she
will run it with special emphasis on the practical
education of nurses.

TMO TO SET UP A
NURSING SECTION

JIJI PRESS

TOKYO, June 19. - The Tokyo Metropolitan Govern-
ment has set up an office which will be entirely run

THE MAINICHI SHIMBUN

14 January 1948

Circulation: 3,342,000

Tokyo: 360,329

病院へ電力増配

東京、神奈川軍政地区東京及び十
 三口の邦交によれば、軍政地区
 総司令部厚生局補給部長、同上省
 代表、関東配電局、東京部衛生
 局長は十二日電力増配について
 協議、この結果関東配電では
 度大きな病院その他の衛生施設に
 対し、その最低需要量の二五パー
 セント以上の電力増配を行うこと
 になった

一方これら衛生施設は目下戦上
 省と交渉、レントゲン機を有
 効に使用出来るよう電圧引上
 に必要な装置資料を入手すること
 に努力している、今回の電力増
 配により今までのように手術が
 出来なかつたり、消費が十分
 だつたり病院の生産に支障を来
 したりするようないことが非常
 に緩和されると見られるが、なお
 個人経営の諸衛生施設も各自必
 要とする電力種を調べた上、も
 密りの関東配電支社、出張所に
 することが要求されている

Increase of Electricity Allotment to Hospitals

As a result of the conference held on the 12th to discuss electricity matters, the Kanto Haiden will increase the electricity allotment to hospitals and other health centers from 25 percent to 43 percent of their minimum requirements, Tokyo-Kanagawa Military Government District, Tokyo Detachment announced yesterday. In addition to the Military Government officers, Supply Section Chief of SCAP, officials of the Kanto-Haiden and section chiefs of Tokyo Health Bureau attended the conference.

An attempt is being made to obtain from the Ministry of Commerce and Industry the critical items needed to increase the voltage in hospitals and health centers so that X-ray might be fully used. There will be no more trouble in operations, sterilization and drug-manufacturing due to the electricity allotment increase to public health centers.

Private health institutes are urged to study their needs and contact the local offices of the Kanto-Haiden.

THE ASAHI SHIMBUN

14 January 1948

Circulation: 3,500,000

Tokyo: 1,417,000

病院へ電力増配

東京、神奈川軍政地区東京支那
 十三日の発表によれば、関東配電で
 は、公立大きな病院その他の衛生所
 設に対しその最低需要量の二五％
 から四三％の電力増配を行うこと
 になつた。

一方これら衛生施設は自下施工
 省と交渉、レントゲン機械を有
 部に調和される

効に使用出来るよう確保し、
 に必要な緊急器材を入手する
 に努力している、今回の電力増
 配により、いままでのように手術
 が出来なかつたり、消毒が不十
 分なつたり、薬品の生産に支障
 を来したりするようはことな非
 常に調和される

INCREASE OF ELECTRICITY ALLOTMENT TO HOSPITALS

The Kanto-Haiden will increase the electricity allotment to hospitals and other health centers from 25 percent to 43 percent of their minimum requirements, Tokyo-Kanagawa Military Government District, Tokyo Detachment, announced yesterday.

An attempt is being made by those hospitals and health centers to obtain from the Ministry of Commerce and Industry critical materials needed to increase voltage so that X-ray can be used efficiently. This increase of allotment to health centers will alleviate the present critical situation of hospitals and other health centers, making their operations and sterilization available, and removing obstacles to drug-manufacturing.

THE NIHON KEIZAI SHIMBUN

14 January 1948

Circulation: 340,000

Tokyo: 74,800

手術難も解決

病院用電力を増配

東京神奈川軍政地区東京支部十三日の発表によれば同軍政部隊、総司令部厚生局補給隊長、職工代表、関東配電幹部、東京市衛生局長各代表は十二日電力問題につき協議した結果、関東配電では今後大きな病院その他の衛生施設に對しその最低需要量の二割五分な

いし四割三分の電力増配を行うことになった、一方これら衛生施設は目下職工省と交渉レントゲン機等を有効に使用できるよう電圧引上げに必要な感電材料を入手することに努力している
今回の電力増配によりいままでのように手術ができなかつたり消費が不十分たりたり薬品の生産に支障を来したりするようないことが非難し緩和されるとみられる
なお個人経営の衛生施設も各自必要とする電力増を調べた上電料りの関東配電や社、出張所に連絡することを要請されている

NO MORE TROUBLE IN OPERATION

Increase of Electricity Alletment to Hospitals was Decided

Tokyo-Kanagawa Military Government District, Tokyo Detachment, announced yesterday that as the result of the conference held on the 12th to discuss the problems of electricity alletment, the Kanto-Haiden would increase the electricity alletment to hospitals and other health centers from 25 percent to 43 percent of their minimum requirements. The conference was attended by Military Government Officers, Chief of Supply Division, Welfare Section, SCAP, officials of the Kanto-Haiden, and section chiefs of the Tokyo Health Bureau.

An attempt to obtain from the Ministry of Commerce and Industry those critical materials needed to increase the voltage so that X-ray can be used is being made by hospitals and other health centers.

As the result of this increase of alletment, there will be no more trouble in operations, sterilization, and drug-manufacturing.

The private health institutions are urged to study their needs and to contact with the local offices of the Kanto-Haiden.

病院用電力を増配

東京、神奈川軍政地区東京支部十三日の発表によれば、同軍政支部将校、司令部厚生局補給課長、商工省代表、関東配電幹部長、東京都衛生局各課長は十二日電力問題について協議、この結果関東配電では今度大きな増配を他の衛生施設にたいし、その最低需要量の二十五%ないし四十三%の電力増配を行うことになった、一方これら衛生施設は目下商工省と交渉、レントゲン機械を有効に使用できるよう電圧引上げに必要な緊急資材を入手することに努力している

今回の電力増配により今までのように手術できなかつたり消毒が不十分だつたり、薬品の生産に支障を来したりするようなことは非常に緩和されるとみられるが、なお個人経営の諸衛生施設も各自必要とする電力増配を調べた上最寄り

の関東配電支社、出張所に連絡することが要望されている

TOKYO TOMIN SHIMBUN

15 January 1948
 Circulation: 33,000
 Tokyo : 33,000

病院に電力増配

命とり停電に明るい朗報

東京、神奈川軍政地区東京支部十三日の発表によれば、同軍政支部将校、司令部厚生局補給課長、商工省代表、関東配電幹部長、東京都衛生局各課長は十二日電力問題について協議、この結果関東配電では今度大きな病院その他の衛生施設にたいし、その最低需要量の二十五%ないし四十三%の電力増配をおこなうことになった、一方これら衛生施設は目下商工省と交渉、レントゲン機械を有効に使用できるよう電圧引上げに必要な緊急資材を入手することに努力している

今回の電力増配により今までのように手術できなかつたり消毒が不十分だつたり、薬品の生産に支障を来したりするようなことは非常に緩和されるとみられるが、なお個人経営の諸衛生施設も各自必要とする電力増配を調べた上最寄りの関東配電支社、出張所に連絡することが要望されている

の関東配電支社、出張所に連絡することが要望されている

JIMMIN SHIMBUN

16 January 1948
 Circulation: 50,000
 Tokyo : 17,500

病院用電力増配

関東配電の試み

東京、神奈川軍政地区東京支部十三日の発表によれば、同軍政支部司令部厚生局補給課長、商工省代表、関東配電幹部長、東京都衛生局各課長は十二日電力問題について協議、この結果、関東配電では今度大きな病院その他の衛生施設に對し、その最低需要量の二十五パーセントないし四十三パーセントの電力増配を行うことになった、一方これら衛生施設は目下商工省と交渉、レントゲン機械を有効に使用できるよう電圧引上げに必要な緊急資材を入手することに努力している、今回の電力増配により今までのように手術できなかつたり、消毒が不じゆうふんだつたり、薬局の生産に支障をきたしたりするようなことは非常に緩和されると見られるが、なお個人経営の諸衛生施設も各自必要とする電力増配を調べた上最寄りの関東配電支社出張所に連絡することが要望されている

ISHINOMAKI SHIMBUN

17 January 1948
 Miyagi Prefecture

調配で病院
へ電力増配

東京神奈川
埼玉茨城
栃木群馬

厚生部十三日の発表によれば、同部
政務次官兼電力局長の藤田正武代
表閣僚記者会見で、電力問題
につき協定の結成は、配電では今
度大きな病院その他の衛生施設に
対しその最低限度の廿五%乃至
四十三%の電力増配を行うことに
なつた、今回の電力増配により今
までのように手術出来なかつたり
消毒が不十分だつたり、製品の生産
に支障を来すようなことは、稀和さ
れるとみられる。

YAMAGATA SIMBUN

17 January 1948
Yamagata Prefecture

WARNING AGAINST FALSE SULPHA DRUGS

Tokyo-Kanagawa Military Government District, Tokyo Detachment, Public Health Section officers, and Tokyo-to Health Bureau officials gave a warning on the 14th to those who obtained sulpha drugs in the blackmarket during the past six weeks. The warning was issued because it was discovered that false sulpha drugs, "Sulphadiazine" and "Sulphathisol", were sold under the forged trade marks either of the Upjohn or of the Lilly Pharmaceutical Company.

These false drugs are made of starch, sugar and wheat flour only and though harmless in themselves do not do any good at all to those patients suffering from social diseases, pneumonia and other sickness which would be cured by sulpha drugs.

Tokyo Provost Marshal conducted a raid on these drug-manufacturers and salesmen and arrested eleven.

The same kind of article appears in the following papers:

The Tokai-Yukan
The Kita Nippon Shimbun
The Nanshin Nichinichi Shimbun
The Tokushima Shimbun
The Shikoku Shimbun
The Osaka Jiji Shimpo
The Kyoto Nichinichi Shimbun
The Hokuriku Yukan
The Tokai Mainichi Shimbun
The Hokkoku Mainichi Shimbun
The Kyoto Shimbun
The Fukui Shimbun
The Jimmin Shimbun
The Isnikawa Shimbun

KYOTO HIBI SHIMBUN

17 January 1948
Kyoto Prefecture

偽ズルフオン
にご注意を

【神奈川軍政地区東京支部十四日
発表】最近米國のアツフジョン、

リリー製薬会社の商標をかたつた
たいかものズルフオン剤が「ズル
フオンアツフジョン」「ズルフア
ツフアツフジョン」と称して販賣され
ている事案がある。この東京、神奈川
軍政地区東京支部衛生官ならびに
東京都衛生局は十四日午後、六週
間以内にヤミでズルフオン剤を購
入したものに警告を発した。これ
らインチキは普通のでんぷん、砂
糖、小麦粉だけで造られたそれ自
体毒はないが全然効かず、これに
よる性病、肺炎その他の病気の患
者はいつまでも病気がなおらず、
結局病勢は進み場合によっては死
んでしまうことになる。東京憲兵
司令部ではこのほどこれらインチ
キ製薬者ならびに販賣者一味の
手入れを行い十一名を逮捕、近
く裁判が開かれる。

インチキ「ズルフ
オン」剤にご注意を

【神奈川軍政地区東京支部十四日
発表】最近米國のアツフジョン、
リリー製薬会社の商標をかたつ
たたいかものズルフオン剤が「ズル
フオンアツフジョン」「ズルフア
ツフアツフジョン」と称して販
賣されている事案がある。この
東京、神奈川軍政地区東京支部
衛生官ならびに東京都衛生局は
十四日、ここ六週間以内にヤミ
でズルフオン剤を購入した者に
警告を発した。これらインチキ
は普通のでんぷん、砂糖、小
麦粉だけでつくられ、それ自体
毒はないが全然効かず、これに
よる性病、肺炎その他の病気の
患者はいつまでも病気がなおら
ず結局病勢は進み場合によつて
は死んでしまうことになる。東
京憲兵司令部ではこのほどこれ
らインチキ製薬者ならびに販
賣者一味の手入れを行い、十一
名を逮捕、近く裁判が開かれる。
(東京)

FUKUI SHIMBUN

17 January 1948
Fukui Prefecture

米國製をかたる
インチキズルフオン剤

【東京、神奈川軍政地区東京支
部発表】最近米國のアツフジ
ョン、リリー製薬会社の商標を
かたつたたいかものズルフオン
剤が「ズルフアツフジョン」「ズ
ルフアツフアツフジョン」と称して販
賣されている事案がある。この
東京、神奈川軍政地区東京支部
衛生官ならびに東京都衛生局は
十四日、ここ六週間以内にヤミ
でズルフオン剤を購入した者に
警告を発した。これらインチキ
は普通のでんぷん、砂糖、小
麦粉だけでつくられ、それ自体
毒はないが全然効かず、これに
よる性病、肺炎その他の病気の
患者はいつまでも病気がなおら
ず結局病勢は進み場合によつて
は死んでしまうことになる。東
京憲兵司令部ではこのほどこれ
らインチキ製薬者ならびに販
賣者一味の手入れを行い、十一
名を逮捕、近く裁判が開かれる。

JIMMIN SHIMBUN

17 January 1948
Circulation: 50,000
Tokyo : 17,500

インチキスルフ
オン剤にご注意
 (東京、神奈川、川軍政地区東支隊十四日発表)
 最近米國のアツプジョン、リリー
 製薬会社の商標をかたつたか
 もの「スルフオン剤」が「スルフア
 アジン」スルフアチアソールと称
 して販賣されている事があるの
 で東京、神奈川軍政地区東支隊
 衛生官ならびに東京府衛生局は十
 四日、この大體間内を以てスルフ
 オン剤を輸入した者には警告を出し
 た。これらインチキスルフ普通の減
 粉、砂糖、小麦粉だけで作られ、
 それ自体毒はないが、突然効かすこ
 れは慢性病、肺炎その他病気の

TOKAI MAINICHI SHIMBUN
 16 January 1948
 Aichi Prefecture

患者はいつまでも病気が治らず結
 核菌が肺に結合して死んでしま
 うことにもなる、東京府は
 司令部ではこのほかこれらインチ
 キスルフ製者ならびに販賣者一俣の
 手入れを行い十一名を逮捕、近く
 裁判が開かれる

**飲んで
 なおらぬ**
 東京神奈川
 川軍政地区東支隊
 衛生官ならびに東京府衛生局は十四日、
 この大體間内を以てスルフオン剤を
 輸入した者には警告を出した。これら
 インチキスルフ普通の減粉、砂糖、小麦
 粉だけで作られ、それ自体毒はないが、
 突然効かすこれは慢性病、肺炎その他
 病気の患者はいつまでも病気が治らず
 結核菌が肺に結合して死んでしまうこ
 ともなる、東京府は司令部ではこのほ
 かこれらインチキスルフ製者ならびに
 販賣者一俣の手入れを行い十一名を捕
 獲、近く裁判が開かれる

HOKKOKU MAINICHI SHIMBUN
 15 January 1948
 Toyama Prefecture

TOKUSHIMA MIMPO
 17 January 1948
 Tokushima Prefecture

**インチキ「スルフ
 オン剤」にご注意**
 (神奈川軍政地区東支隊十四日
 発表) 最近米國のアツプジョン、リ
 リー製薬会社の商標をかたつた
 いかもの「スルフオン剤」が「スルフ

アジン」スルフアチアソールと称して販賣されている
 事がある、東京、神奈川軍政
 地区東支隊衛生官ならびに東京
 府衛生局は十四日午後六時以内
 にヤミでスルフオン剤を輸入した
 らるに警告を出した。これらインチ
 キスルフ普通の減粉、砂糖、小麦
 粉だけで作られたこれ自体毒は
 ないが突然効かすこれによる性
 病、肺炎その他病気の患者はいつ
 までも病気が治らず結核菌が肺
 に結合して死んでしまうこと
 にもなる
 東京府司令部ではこのほかこ
 れらインチキスルフ製者ならびに
 販賣者一俣の手入れを行い十一名
 を逮捕、近く裁判が開かれる

インチキスルホン割横行

京浜軍政地区東京支部の注意

インチキスルホン割に注意せよ、東京神奈川軍政地区東京支部十四日発表、最近アメリカのアツプシヨン、リリー製薬会社の商標をかたうたいかきスルホン割が「スルファンアジン」として販売されている事実があるのを東京神奈川軍政地区東京支部衛生官ならびに東京神奈川軍政地区東京支部衛生局は十四日午後六時以内に関でスルホン割を購入したものに警告を出した、これらインチキスルホン割は普通の砂糖、小麦粉だけで造られ、それ自体毒はないが、余熱が加わると急性の肺病、肺炎その他の病気の患者はいつまでも病気が癒えず結局肺病は進む場合に近づいては死んでしまうことになる

TOKUSHIMA SHIMBUN
16 January 1948
Tokushima Prefecture

東京神奈川軍政地区東京支部衛生官ならびに東京神奈川軍政地区東京支部衛生局は十四日午後六時以内に関でスルホン割を購入したものに警告を出した、これらインチキスルホン割は普通の砂糖、小麦粉だけで造られ、それ自体毒はないが、余熱が加わると急性の肺病、肺炎その他の病気の患者はいつまでも病気が癒えず結局肺病は進む場合に近づいては死んでしまうことになる

インチキ「スルファン」横行

（東京、神奈川軍政地区東京支部十四日発表）最近アメリカのアツプシヨン、リリー製薬会社の商標をかたうたいかきスルホン割が「スルファンアジン」として販売されている事実があるのを東京神奈川軍政地区東京支部衛生官ならびに東京神奈川軍政地区東京支部衛生局は十四日午後六時以内に関でスルホン割を購入したものに警告を出した、これらインチキスルホン割は普通の砂糖、小麦粉だけで造られ、それ自体毒はないが、余熱が加わると急性の肺病、肺炎その他の病気の患者はいつまでも病気が癒えず結局肺病は進む場合に近づいては死んでしまうことになる

KITA NIPPON SHIMBUN
16 January 1948
Toyama Prefecture

NANSHIN HIBI SHIMBUN

16 January 1948
Nagano Prefecture

インチキ「スルホン」に注意

（東京、神奈川軍政地区東京支部十四日発表）最近アメリカのアツプシヨン、リリー製薬会社の商標をかたうたいかきスルホン割が「スルファンアジン」として販売されている事実があるのを東京、神

奈川軍政地区東京支部衛生官ならびに東京神奈川軍政地区東京支部衛生局は十四日午後六時以内に関でスルホン割を購入した者に警告を出した、これらインチキスルホン割は普通の砂糖、小麦粉だけで造られ、それ自体毒はないが、余熱が加わると急性の肺病、肺炎その他の病気の患者はいつまでも病気が癒えず結局肺病は進む場合に近づいては死んでしまうことになる、東京神奈川軍政地区東京支部衛生官ならびに東京神奈川軍政地区東京支部衛生局は十四日午後六時以内に関でスルホン割を購入したものに警告を出した、これらインチキスルホン割は普通の砂糖、小麦粉だけで造られ、それ自体毒はないが、余熱が加わると急性の肺病、肺炎その他の病気の患者はいつまでも病気が癒えず結局肺病は進む場合に近づいては死んでしまうことになる

インチキ「スルフオン」剤横行

軍政部一般の注意を喚起

【東京神奈川軍政地区東京支部十四日発表】最近米國のアツアツヨ、リリー向製薬会社の商標をかたいたいかも「スルフオン」剤が「フルファンデイアジオン」「スルフアチアゾール」と称して販賣されている事がある。東京、神奈川軍政地区東京支部衛生官ならびに東京都衛生局は十四日午後六時以内、ヤミで「スルフオン」剤を購入したものに警告を発した。之らインチキ薬は普通の薬粉、砂糖、小豆粉などでつくられた、それ自体毒はないが全然効かず、これによ

る性別、肺病その他の病気の患者はいつまでも病気がなおらず結局病勢は進む場合によつては死んでしまふこととなる。東京、神奈川軍政地区東京支部衛生官ならびに東京都衛生局は十四日午後六時以内、ヤミで「スルフオン」剤を購入したものに警告を発した。これらインチキ薬は普通の薬粉、砂糖、小豆粉などでつくられたそれ自体毒はないが、全然効かず、これによつては、肺病、肺病その他の病気の患者はいつまでも病気がなおら

OSAKA JIJI SHIMPO

15 January 1948
Osaka Prefecture

インチキ「スルフオン」剤に注意せよ
【神奈川軍政地区東京支部十四日発表】最近米國のアツアツヨ

SHIKOKU KEIZAI SHIMBUN

16 January 1948

ン、リリー向製薬会社の商標をかたいたいかも「スルフオン」剤が「フルファンデイアジオン」「スルフアチアゾール」と称して販賣されている事がある。東京、神奈川軍政地区東京支部衛生官ならびに東京都衛生局は十四日午後六時以内、ヤミで「スルフオン」剤を購入したものに警告を発した。これらインチキ薬は普通の薬粉、砂糖、小豆粉などでつくられたそれ自体毒はないが、全然効かず、これによつては、肺病、肺病その他の病気の患者はいつまでも病気がなおら

ず、結局病勢は進む場合によつては死んでしまふこととなる。東京、神奈川軍政地区東京支部衛生官ならびに東京都衛生局は十四日午後六時以内、ヤミで「スルフオン」剤を購入したものに警告を発した。これらインチキ薬は普通の薬粉、砂糖、小豆粉などでつくられたそれ自体毒はないが、全然効かず、これによつては、肺病、肺病その他の病気の患者はいつまでも病気がなおら

偽「スルフオン」剤に注意

進駐軍から警告

【神奈川軍政地区東京支部十四日発表】最近米國のアツアツヨ、リリー向製薬会社の商標をかたいたいかも「スルフオン」剤が「フルファンデイアジオン」「スルフアチアゾール」と称して販賣されている事がある。東京、神奈川軍政地区東京支部衛生官ならびに東京都衛生局は十四日午後六時以内、ヤミで「スルフオン」剤を購入したものに警告を発した。これらインチキ薬は普通の薬粉、砂糖、小豆粉などでつくられたそれ自体毒はないが、全然効かず、これによつては、肺病、肺病その他の病気の患者はいつまでも病気がなおら

SHIKOKU SHIMBUN

16 January 1948

イカサマの「東京
ズルフォン劑 神奈川
さかぬから御用心 軍政地
支部發表」最近アメリカのア
ブジョン、リリー兩製藥會社の
商標をかたつたイカサマのズル
フォン劑が「ズルフォンダイア
ジン」・「ズルファアゾール」
と稱して販賣されている事實が
あるので、東京神奈川軍政地
東京支部檢井官ならびに東京都
衛生局は十四日午後六時間以内
にヤミでズルフォン劑を輸入し
たものに警告を發した
これらインテキ薬は御通ので
ん粉、砂糖、小麥粉だけでつ
くられそれ自体は毒ではない
が、全然さかすこれに充てる
性質、肺炎その他の病氣の患
者はいつまでも病氣がなおら
ず結局病勢は進行し場合によつ
ては死んでしまうことになる
東京憲兵司令部ではこのほど
これらインテキ薬製造者なら
びに販賣者一味の手入れを行
い十一名を逮捕、近く裁判が
開かれる

ISHIKAWA SHIMBUN

19 January 48
Ishikawa Prefecture

THE YOMIURI SHIMBUN

15 January 1948

Circulation: 1,690,000

Tokyo: 350,000

偽スルフォン剤注意
 最近米國のアップジョン、リリー、同製薬会社の商標をかたつたいかもの「スルファジアジン」
 「スルファチアゾール」が製造されて
 いるので東京、神奈川、軍政地区東
 京支庁、衛生官ならびに東京都衛生
 局は十四日、最近六週間以内にヤ
 ミでスルフォン剤を購入した者に
 警告を出した。
 これらは澱粉、砂糖、小麦粉を
 けりつぶして、東京、神奈川、
 同令部では製造者と販賣者一
 十一名を逮捕、近く裁判が開か
 れる。

WARNING AGAINST FALSE SULPHA DRUGS

Tokyo-Kanagawa Military Government District, Tokyo Detachment, Public Health Section officers, and Tokyo-to Health Bureau officials gave a warning yesterday to those who have obtained sulpha drugs from blackmarkets during the past six weeks. It was found that false drugs, represented as sulphadiazine or sulphathiazol, were sold under the forged trade marks of either the Upjohn or of the Lilly Pharmaceutical Company in America. These drugs are made of starch, sugar and wheat flour only. Eleven of those manufacturers and salesmen were arrested by Tokyo Provost Marshal, and are awaiting trial.

浮浪者を消毒

上野地下道にDDT

東京都衛生局防疫課では、東区と勝方四十名の防疫隊を動員十三日午後五時半から上野地下道生活者に発しんチフスの予防注射とDDTの散布を実施した。同七時半開演野防疫課長の案内で第八軍軍政部公衆衛生課長マニトフ女史も現れ実施状況を熱心に観察した。上野地下道は元日以來八名の死者を出したが、いずれも発しんチフスの潜伏患者と判明。潜伏者の濃厚な接触で市民を感染するに至ったため今回の措置が講ぜられた。

お役人の到来と聞けば、早く通過する浮浪者たちも「お込みはいやだがシラミ退治自分たちのためだ」とすすんで頭から真白い粉をかむつたり、なかにはよれよれのふんどしまをひろげるものもあつて、たちまち二百名分のDDTを消費してしまつた。

マニトフ女史は地下道の隅隅、駅長室にも立寄つて簡直の駅員に地下道から八名の発しんチフス患者が出たことを知っているかと鋭い質問を投



げ、数々の細い注意を與えて、同八時過ぎ東京駅の浮浪者宿舎に向つた。

マニトフ女史は、都の民生局と衛生局とが協力してこれらの不幸な浮浪者たちに適切な注意をひいたのは年少の浮浪者たちを消毒するだけではならぬ、例えは浮浪者の養育をするところ、職業訓練や傳染病の予防に際して役立つのではなからうか、それから今後には私射撃の証明書を負せる浮浪者)

宿舎たちの多いことだ、子供たちは早急に保護するところが必要だ

(東京はマニトフ女史は注)

January 14, 1948.

Article in
Tokyo Mainichi Shimbun

Immunize the Vagrants
spray D.D.T. Uyeno Subway

Tokyo-To health bureau prevention section co-operated with the Dia-to Ku and mobilized a team consisting of forty men on Jan. 13, at five thirty p.m. and gave preventive injection of Typhus fever and a spray of DDT to the people who live in the Uyeno subway. Same day at 7:30 p.m. Dr. Manitoff, chief of Public Health Section of the Military Government 8th Army, showed herself conducted by Dr. Yosano the chief of prevention section eagerly inspected the inforcement condition. From Jan. first the Uyeno subway has had eight unnatural deaths, which all have suspects of Typhus fever. This method was taken because it was a threat to the Tokyo To men, as a "Hot bed of Disease".

When the vagrants hear the government officials are coming, they usually run away, but this time they stucked their heads out, all covered with white powder of the spray saying "We don't like round-up, but if it is a louse subjugation it is for us." Right away a quantity of DDT for one thousand two hundred people was empty.

After the subway inspection Dr. Manitoff went to the station master's room and asked the railroad official who was on night duty if he knew that there was 8 typhus patients in the subway, and she gave lots of fine advices and left there about 8:00 p.m. for Tokyo station vagrant inspection.

Dr. Manitoff's speech.

"The welfare section and health section of Tokyo To must co-operate together and must take pertinent manage of the poor vagrants, for instance, taking registration of the vagrants, this may be a good use of prevention against criminal action and communicable disease, and to-night I specially took caution of the minor vagrants are so numerous. The children must be necessarily protected as soon as possible."

This picture is showing the vagrants showing Dr. Manitoff the certificate of injection.

TOKYO WOMEN PROTEST JAP POLICE ACTION

Authorities Reportedly
Subjecting 'Innocent'
Girls To Examination

By United Press *llc*

Working Japanese women organizations in Tokyo have agreed to conduct a joint campaign against the Japanese police, demanding a halt to alleged indiscriminate rounding up of "clean working women as well as virgins" in periodic drives against "street girls," the United Press learned.

They planned to call a mass meeting of women workers to demand police recognition of their civil rights in "new democratic Japan."

A newspaperwoman told the United Press, "we agree something should be done in controlling the so-called 'yami no onna—angels of the dark'—but we revolt against the police arresting any woman who walks out at night."

"There have been too many cases where office girls and telephone operators returning home at night have been indiscriminately arrested by the police, then taken to the police station and thereafter to the police hospital and subjected to humiliating physical examination. It must stop."

The Fujin Minshu Shimbun, or women's democratic newspaper, charged in a recent roundup of so-called "angels of the dark" by police in a Tokyo district, more than half of those arrested were "virgins."

The newspaper quoted a woman office worker as saying she was arrested at about 7 p.m. when she left Shibuya station en route home. Despite protest she was a worker and not a street girl, she said a policeman took her to the police station and then to the police hospital, using "insulting" language to her.

"After the physical examination," the girl was quoted by the newspaper. "I was told to go but I had to spend the night in the hospital because there were no tramcars running at that late hour."

DECEMBER 11, 1946

WAR ON CANCER PUSHED

Seven-Pronged Attack Made
On Disease in US

MINNEAPOLIS, (AP)—The University of Minnesota is attacking cancer by seven different lines of research—biology and heredity, hormones, chemistry, diet, anatomy, medicine and human case histories.

Four of these researches deal with extremely minute particles known to be connected with cancer. The particles are of three kinds—the milk agent, genes and hormones.

The milk agent particle is invisible. It appears in the milk of certain strains of mice. If female young receive this milk for only a few hours, they usually get breast cancer when they become adults.

Searching to learn whether human mothers may be carriers of a milk cancer agent, Dr. Clarence Oliver, who recently transferred to Texas, studied 200 persons with breast cancer in Minnesota. Nearly all said they believed they had been breast-fed babies. No conclusions could be reached from this human survey. To be sure that there may be a nursing influence for human breast cancer, it is probable that a comparison must be made from birth in babies born to the same parents, some of whom are breast-fed and some bottle-fed. That might take 50 years.

Dr. John J. Bittner, George Case Christian Professor of Cancer Research in the Division of Cancer Biology, and his associate, Robert A. Huseby, a Doctor of Medicine and a Doctor of Philosophy in cancer biology, in experiments with mice, found that the invisible particles of the milk agent are not confined to milk, but are present in all body tissues. This finding opened the possibility that a mouse which eats the flesh of another mouse might thereby acquire the cancerous particles.

C. P. Barnum, Jr., in the Department of Physiological Chemistry, obtained a concentration of these particles which, when diluted a million times, still contained enough of

TOKYO WATER FIT FOR MILITARY USE

Army Authorities Approve
Supply, Stop Treatment

Headquarters Eighth Army announces that the Tokyo City water supply which is taken directly from the city system and not supplemented by wells or booster pumps is fit for use by military personnel without further chlorination.

The area supplied with water from Tokyo City water supply includes all of the area of Tokyo, except certain outlying portions which are not now furnished with water from the municipal pipe network.

In those sections where booster pumps are required, or where private wells are interconnected with the city supply, individual and unit chlorination will have to be continued. Approval of these water supplies will continue to be on an individual basis, handled through Eighth Army Headquarters.

BLACKMART SELLING PHONEY PENICILLIN

Col. Riordan Says Imitation
Drug Menaces Health;
Cautions Public

Japanese individuals who purchase penicillin in the black market are being subjected to the most vicious kind of fraud. Lt. Col. B.N. Riordan, chief of Supply Division of SCAP's Public Health and Welfare Section, warned Thursday.

Some material represented as penicillin was found by PH&W, to be a fraud and worthless as a drug. All penicillin produced in Japan is dispensed in standardized glass ampoules, Col. Riordan said, and any so-called penicillin marketed in the form of pills, ointment or liquid is a fake.

Moreover, penicillin deteriorates readily under certain conditions, and even genuine penicillin purchased through illegal channels is of doubtful

half of those arrested were "virgins."

The newspaper quoted a woman office worker as saying she was arrested at about 7 p.m. when she left Shibuya station en route home. Despite protest she was a worker and not a street girl, she said a policeman took her to the police station and then to the police hospital, using "insulting" language to her.

"After the physical examination," the girl was quoted by the newspaper. "I was told to go but I had to spend the night in the hospital because there were no tramcars running at that late hour."

"The most revolting of the entire affair was that I was charged 5 yen for the physical examination. I ask where is the so-called democratized improvement of the Japanese police?"

The newspaper quoted a police spokesman as apologizing for the "embarrassment" caused the "innocent" women. However, the spokesman conceded "we cannot be too careful when we have to round up a large number."

23 *file* Fellowship for Public Health

WASHINGTON, (USIS).—The United States Public Health Service is offering American college graduates fellowships leading to a Master's degree in Public Health.

The fellowships are financed by the National Foundation for Infantile Paralysis, and will be for one year's training, including eight or nine months of academic work and three months of supervised field experience in community health education activities.

Biology, and his associate, Robert A. Huseby, a Doctor of Medicine and a Doctor of Philosophy in cancer biology, in experiments with mice, found that the invisible particles of the milk agent are not confined to milk, but are present in all body tissues. This finding opened the possibility that a mouse which eats the flesh of another mouse might thereby acquire the cancerous particles.

C. P. Barnum, Jr., in the Department of Physiological Chemistry, obtained a concentration of these particles which, when diluted a million times, still contained enough of the milk agent to cause breast cancer when injected into test animals. Heating the concentrated sediment to about the temperature of milk in pasteurization killed the unseen agent. This suggests that a similar agent in human milk could be killed by pasteurization.

Dr. Robert G. Green, of the Bacteriology and Immunology Department, theorized that cancer particles act like viruses. They sometimes get inside healthy tissue cells. There they alter the hereditary characteristics of the cells they penetrate. Each normal cell grows only in one definitely fixed pattern. The control that fixes a cell is another minute particle—a gene. It too, is invisible. Dr. Green says cancer particles effect these genes. Thereupon the healthy cell loses its identity and becomes something different and usually fast growing.

Bittner and Huseby have established that the genes appear to play two roles in the milk agent cancer. One causes hereditary susceptibility. The other affects the sex hormones that also play some part in cancers of mice and men. Mouse sex hormones parallel loosely hormones in certain human cancer. In man, cancer of the prostate gland sometimes is controlled by sex hormones, either by getting rid of the man's own male hormones, or by giving him female hormones. Either treatment gives at least temporary improvement but neither helps all men.

Minnesota scientists also are studying porphyrins—chemical compounds present in human and other tissues, and researchers believe it porphyrins have a role in causing cancer, it probably is through their relation to hormones.

Dr. M. B. Vischer, head of the University's Department of Physiology, and his associate, Dr. Joseph

of Supply Division of SCAP's Public Health and Welfare Section, warned Thursday.

Some material represented as penicillin was found by PH&W, to be a fraud and worthless as a drug. All penicillin produced in Japan is dispensed in standardized glass ampoules, Col. Riordan said, and any so-called penicillin marketed in the form of pills, ointment or liquid is a fake.

Moreover, penicillin deteriorates readily under certain conditions, and even genuine penicillin purchased through illegal channels is of doubtful value, he added.

Small doses of penicillin serve no purpose, and in some instances do more harm than good, since small doses may allow the disease-producing bacteria to develop resistance to the drug, Col. Riordan stated.

Authorized manufacturers are not licensed to package penicillin in quantities of less than 30,000 oxford units and allocation is directed by the Government Penicillin Allocation Committee under the jurisdiction of the Health and Welfare Ministry. Each lot must meet specifications of the assay laboratory before being authorized for sale.

Physicians and hospitals requiring penicillin should make application to the Health and Welfare Ministry, Col. Riordan explained. He warned that under no circumstances should penicillin be purchased through illegal channels. Persons offering penicillin for sale in the blackmarket are a menace to the health of the nation, he added, and should be reported to the police.

...the cancer affects the sex hormones that also play some part in cancers of mice and men. Mouse sex hormones parallel loosely hormones in certain human cancer. In man, cancer of the prostate gland sometimes is controlled by sex hormones, either by getting rid of the man's own male hormones, or by giving him female hormones. Either treatment gives at least temporary improvement but neither helps all men.

Minnesota scientists also are studying porphyrins—chemical compounds present in human and other tissues, and researchers believe it porphyrins have a role in causing cancer, it probably is through their relation to hormones.

Dr. M. B. Visscher, head of the University's Department of Physiology, and his associate Dr. Joseph T. King, have studied the effect that diet upon cancer and report that reducing calories by one-third prevents breast cancer in mice—but also prevents mice from breeding, probably because of hunger weakening the hormone stimulation.

Applied to human beings, they say, this finding, if it worked, would mean breast cancer could be stopped—and also that the race could be wiped out.

Dr. Arthur Kirschbaum of the Anatomy Department is working on leukemia, the blood disease caused by an excess of white blood corpuscles and considered a form of cancer. Production of a cancer serum, that acts as a preventive in mice, is one result of the Minnesota work, which followed preparation of a similar serum at the National Cancer Institute, Bethesda, Maryland. But the serum is effective only against mouse breast cancer.

USSR's New Penicillin-Like Drug

WASHINGTON, (USIS)—A new penicillin-like drug extracted from the red blood cells of rabbits and other animals and discovered by Dr. L. A. Silber of Moscow is now under clinical trial in Soviet Russia as a weapon against Diphtheria. Erythrin is the name of the new antibiotic. It comes from the protozoa a low form of animal life. The antibiotic gets its name from the medical name for red blood cells, erythrocytes.

**Combat Against TB
Is Decided by SCAP**
22 Nov. 1945
**Prevention Measures Urgent
As 200,000 Deaths Likely
This Year**

Dr. Albert P. Knight, Pediatric Consultant, Preventive Medicine Division of SCAP's Public Health and Welfare Section, at the press conference, Friday, indicated SCAP officials will take three immediate steps forming a series of definite policies to combat the increase in tuberculosis which is invading the health of the nation.

Approximately 200,000 deaths from tuberculosis this year will occur, he said, and SCAP recognizes the present need for prevention of tuberculosis in Japan.

The first step is to make, an immediate a survey of the nutritional conditions of TB patients in hospitals to seek out possible sources of food, and to arrange payments for the medical care of these hospitalized patients.

It will be the responsibility of the Health and Welfare Ministry to provide both food and payments, Knight declared, and this policy is an absolute necessity for firstly it should induce patients to return to the hospital; it will remove them as a source of infection in their homes, and secondly, it will assist them through adequate food and medical care to arrest the tuberculosis stage and recover their health. He added that many patients were forced to leave the hospitals because they were unable to obtain food and to finance their medical care.

Knight stated that as a second step SCAP officials will work in conjunction with the Health and Welfare Ministry to produce standard procedures of diagnosis and treatment.

A third measure, he continued, consisting of concentration upon case finding and individual control of tuberculosis will be resumed. This program will be associated with the establishing of the school lunch program which has just been approved. He asserted that this supplemental feeding of the school child is also a part of a program which is under

**Medical Equipment
Are Placed on Sale**
27 Nov. 1945
**SCAP Approves Selling Former
Nippon Army and Navy
Supplies to Physicians**

Sale of confiscated Japanese Army and Navy medical supplies and equipment to private physicians throughout Japan has been directed, with SCAP sanction, by the Government officials of SCAP's Public Health and Welfare Section announced Tuesday.

The confiscated medical equipment went on sale originally in Tokyo where at a tryout sale held October 15-19, Tokyo physicians bought ¥1,060,000 worth of former Army-Navy medical supplies. The success of the Tokyo sale in getting needed medical equipment into the hands of private physicians has prompted the Health and Welfare Ministry to issue the recent order to prefectural governors to conduct similar sales in all parts of Japan. Ultimately, it is planned that all of the old military medical supplies will be sold and put to use for the treatment of the Japanese civilian population.

Only doctors, dentists, veterinarians, and representatives of accredited hospitals may purchase the equipment. Prices will be well below present market value, which should be of particular benefit to Japan's many bombed-out or otherwise impoverished medical practitioners, Public Health officials say.

**New Drug to Cure
TB Patients Found**
**Experiments Successfully
Made by Kanazawa Medi-
cal College Professors**
30 Nov. 1945

Tuberculosis patients need no longer be pessimistic over affliction from an "incurable" disease for an interim report made at the regular

**Japanese May
Use Yokosuka
Hospital Soon**

Inspection of Tauro Hospital in Yokosuka by Captain J. Q. Owsley of the Navy has led to the announcement yesterday that it will be ready for Japanese civilian use in mid-December.

The hospital, once condemned by Naval authorities as a health menace, has been thoroughly overhauled by a former medical professor, Dr. Yoshiomi Kurosawa, with the aid of Navy-recruited labor. Its capacity will be 130 patients.

Tauro Hospital is the second to be revised under Navy supervision. The first to be repaired was Yokosuka's St. Joseph's Hospital, now directed by Bishop Albert Breton, former Bishop in Kyushu. Condemned last July by the Navy when it was found that the hospital had no operable kitchen or sewage system and inadequate medical equipment, the hospital now provides up-to-date facilities for more than 130 patients and clinical facilities for more than 180 persons a day. Japanese nurses at the hospital are given two weeks "brush-up" training at the U. S. Navy Hospital, under Capt. Owsley's direction.

"There are over 36 hospitals in Yokosuka, ranging from two bed hospitals to 1,500 bed hospitals," Captain Owsley said. "Some of them are in very good condition and some of them are health menaces. My hope is to see that Yokosuka continues to develop clean, up-to-date hospitals."

**Scientists Pushing
Penicillin Output**
5 Dec
**16 Plants Now Making Pro-
duct; Two Billion Units
Required at Present**

Production in quantity of penicillin, the panacea of ills, will be a reality soon in Japan too, says Dr. Jackson W. Foster, advisor to

SCAP officials will work in conjunction with the Health and Welfare Ministry to produce standard procedures of diagnosis and treatment.

A third measure he continued, consisting of concentration upon case finding and individual control of tuberculosis will be resumed. This program will be associated with the establishing of the school lunch program which has just been approved. He asserted that this supplemental feeding of the school child is also a part of a program which is under discussion at the present time to establish a Child Welfare Bureau.

BIG ANTI-TYPHUS DRIVE PUSHED BY AUTHORITIES

11/11/45
DDT Dusting, Inoculation to Be
Carried Out in Crowded Areas

The Welfare Ministry, with the collaboration of Allied medical authorities, is continuing the large-scale campaign to forestall the outbreak of another "shirami" (lice) typhus epidemic, which last year claimed 32,000 victims in an unprecedented epidemic, said Kyodo.

DDT dusting and anti-eruptive typhus inoculations will be systematically carried out in congested areas so as to curtail the spread of the contagion which is prevalent during the cold winter months.

Over 100 cases of eruptive typhus already were reported to have broken out during November in Tokyo, Hyogo, Kanagawa and Hokkaido.

New Drug to Cure TB Patients Found

Experiments Successfully
Made by Kanazawa Medical
College Professors

30 Nov 1945
Tuberculosis patients need no longer be pessimistic over affliction from an "incurable" disease for an interim report made at the regular meeting of the Kanazawa Medical Society November 25 said that tuberculosis can be cured by use of a new drug, said Kyodo.

Known as "303," the chemical drug was discovered by Professor Kei Okamoto and Assistant Professor Shigeichi Suzuki, both of Kanazawa Medical College.

The new drug is a combination of a colloid substance and orthoaminophenol extracted from carbolic acid. Dr. Suzuki administered this drug successfully to TB patients at the clinic attached to the college during three years of experimentation.

Eleven patients in the first stage were completely cured in two months; 16 in the second stage turned for the better in three to six months with full hope of complete recovery; and 15 out of 21 in the third stage improved through injections over eight consecutive months.

Scientists Pushing Penicillin Output

5/11/45
16 Plants Now Making Product; Two Billion Units
Required at Present

Production in quantity of penicillin, the panacea of ills, will be a reality soon in Japan too, says Dr. Jackson W. Foster, advisor to the Public Health and Welfare Section, SCAP, who is here for a scheduled four-month supervision of its manufacture, reports Kyodo.

Dr. Jackson arrived in the country in the early part of November at the request from the Welfare Ministry to General Headquarters for an authority to aid the Ministry in establishing measures for quantity production of penicillin.

During the war research and experimental production of this modern health was carried out by the Penicillin Committee jointly made up of military, governmental and civilian personnel. The trial product which was finished at last by the time of the end of war was far below the standard of American products and accordingly the Welfare Ministry decided in July upon increased penicillin production plans under the supervision of the Allied Headquarters.

First of all a Penicillin Manufacturers' Association of those desiring to manufacture this product was formed. Applications poured in, not only from drug manufacturers but also from manufacturers of textiles, food products and aircraft and those seeking to convert their enterprise into this industry. In one leap there were over 5,000 members. Out of this number the Welfare Ministry designated five factories in October and 11 more in November, making 16 factories in all authorized to manufacture penicillin.

The main penicillin manufacturing factories already in operation are the Banyu Drug Manufacturers, Morinaga Medical Supplies Company, Yashima Chemical Factory, Wakamoto Drug Company, New Japan Industries (the former Taiwan Sugar Manufacturing Company), Meiji Industrial Company (Meiji Confectionery Company) and the Mikawa Fats and Oils Company (Toyo Rayon).

one leap there were over 5,000 members. Out of this number the Welfare Ministry designated five factories in October and 11 more in November, making 16 factories in all authorized to manufacture penicillin.

The main penicillin manufacturing factories already in operation are the Banyu Drug Manufacturers, Morinaga Medical Supplies Company, Yashima Chemical Factory, Wakamoto Drug Company, New Japan Industries (the former Taiwan Sugar Manufacturing Company), Meiji Industrial Company (Meiji Confectionery Company) and the Mikawa Fats and Oils Company (Toyo Rayon).

Meanwhile the Penicillin Research Council, the nucleus of which is the Penicillin Committee has been created to propel the research on penicillin to the utmost. As director of the Council, former Chief Katsumata of the Health and Hygiene Section of the Welfare Ministry has been appointed while Dr. Tamiya of the Infectious Diseases Research Institute has been made specialist chairman of the committee with other authorities included in the committee. A regular monthly research meeting is being held which acts as a motive strength for the manufacture and promotion for improved penicillin.

Further more the Welfare Ministry is planning to set up a Central Penicillin Research Institute within the Council. Through this they aim for comprehensive research which will directly bring theory and practice together. This plan is being supported by the Education Ministry as well.

The Welfare Ministry is expected to ask for a yearly budget of more than ¥4,000,000 next year to further study on penicillin. The Central Penicillin Research Institute not only will cultivate and produce penicillin but will also build model factories.

At present penicillin output capacity in Japan amounts to 200 million units a month but actually only 30 million units are being produced. Since the ideal goal of production for present urgent needs is set at two billion units, this means that not only factories must be increased but also that the mechanization of factories and construction of larger factories are needed.

TURNER EMPHASIZES BETTER SANITATION

Need of Proper Sewage Systems, Hygienic Toilet Facilities Pointed Out

Improved sanitation by specific means as proper city sewage system, hygienic toilet facilities and construction of "digestion tanks" that will make human waste harmless as fertilizers were some of the topics discussed by E. A. Turner, Sanitary Engineering Consultant with the Public Health and Welfare Section at Wednesday morning's press conference.

Under the title "Architectural Hygiene in Japan's Reconstruction" Mr. Turner, who recently completed two years as a sanitary engineer with the Allied Commission in Italy and was formerly a staff member of the Georgia State Health Department, said that to start with, cities must do an over-all planning to prevent outcropping of congested areas destroyed by raids or fires, widen streets to prevent fire hazards and improve transportation, plan sewer systems and improve the operation of water systems.

He touched on the basic difference of sewage disposal in the States and Japan. In this country where the use of human waste as fertilizer was part of the system of balancing agrarian economy, he said it was not practical to stop use of night soil immediately. Therefore he pointed out the necessity, as a protection of the health of the people, to control use of this matter so that it will be harmless. For this, construction of "digestion tanks" in which the waste matter is allowed to remain for a period of not less than 30 days during which time most of the disease organisms are killed before being used as fertilizer, was necessary, he said. He added that the Welfare Ministry is at present planning on such digestion tanks for individual use.

In the construction of houses, Mr. Turner stated that "individuals should follow good, sound principles of construction no matter how small his house may be." Construction should be planned for good ventilation and lighting and should incorporate rat-proofing by such means as double walls, foundations deep enough to prevent them from getting in or high enough to clear them out.

He also recommended better cooking and food storage facilities against rats and flies and screens for doors and windows when such material is available. He pointed out that provisions for sanitary toilet facilities connected to sewer systems with water supplied from city mains should be made. Where this is not possible, the individual should study his own sewer system as sanitariously as possible, as for instance with the construction of septic tanks connected to the toilet, he said.

With rough diagrams Mr. Turner illustrated constructions of sanitary wells and septic tanks. Proper sanitation, he said, will control such diseases as dysentery which soars in the rainy season in Japan due to faulty drainage of polluted water into wells and of other diseases as typhus, cholera, plague and typhoid fever. The individual, he concluded, must have a feeling of responsibility to his neighbors in sanitary construction and ways of living.

VD CONTROL TALKS GIVEN

Japanese Hear Dr. Elkins Review Preventive Measures

More than 70 Japanese prefectural venereal disease control officers heard Dr. Oscar M. Elkins, consultant for venereal disease control, Public Health and Welfare Section, SCAP, lecture during a three-day school held here recently under the auspices of the venereal disease control officer, Japanese Health and Welfare Ministry.

Dr. Elkins discussed public health background for venereal disease control, reviewed some of the clinical and epidemiologic aspects of these diseases and conducted a demonstration in clinical procedure.

Other speakers at the school were Professor Tokuji Ichikawa, Urology Department, Tokyo Imperial University; Kikuo Hamano, Bureau of Preventive Medicine; Dr. Ukichi Ishibashi, Chief Acute Communicable Disease Section; and Dr. Masayoshi Yamaguchi, venereal Disease Control Officer, all of the Health and Welfare Ministry.

Powerful Insecticide Invention Reported

A Japanese chemist has invented an insecticide ten times more powerful than the world famous DDT, Kyodo reports.

The chemist, Kyoshi Watanabe of the Japan Soda Company, is the holder of over 80 patents on rayon pulp manufacturing. His new invention, which has obtained a "superior" rating from the Government Agricultural Experimental Station, is made from charcoal lignite or wood scraps, both of which are plentiful in Japan.

VD CONTROL EMPHASIZED

Public Treatment Services Vital, Declares Dr. Elkins

Dr. O. M. Elkins, venereal disease consultant for SCAP's Public Health and Welfare Section, Wednesday said: "Providing adequate public treatment services is the basic principle of venereal disease control."

Dr. Elkins, in cooperation with the Japanese Welfare Ministry, is working toward the establishment of a VD control program to serve the general public. Limiting the service to prostitutes has been a shortcoming of former methods and must not be repeated if the high venereal disease rate among the Japanese people is to be reduced, the SCAP official warned.

Dr. Elkins further revealed that there is no medical method by which practicing prostitutes can be kept free of disease. As far as public health is concerned, all prostitutes should be considered infectious.

TB CASES RANK HIGH IN 3 PREFECTURES

More School Boys Than Girls
Suffer From Disease,
Dr. Kanai Reveals

Hokkaido, Ishikawa and Fukuoka prefectures where the winter is long and the families live close together in the room have the highest rate of tuberculosis in the country, said Dr. Susumu Kanai, chief of the Prevention Section, Welfare Ministry.

He said health examinations conducted recently in some of Tokyo's primary school children among 129,109 boys and 119,501 girls showed that 1,353 or 1.05 per cent of the boys and 941 or 0.79 per cent of the girls were diagnosed as suffering from tuberculosis.

Dr. Kanai told the Nippon Times that although it is impossible to get the exact number of tuberculosis cases in Japan in the years before the war, it is estimated that 104,892 died from this disease in 1937.

The death toll, he stated, which included the highest percentage of persons between the ages of 16 and 27, rose to 171,943, an increase of 63.5 per cent since 1937.

In 1946, he declared the death rate fell to 231 from 282 per every 100,000 inhabitants in 1945. (The figures for 1946 are based as of the death rate for the first half of the year, the figures for the second half not being available at present).

This decrease is obviously attributed to the corresponding decrease in malnutrition offset by the imported foods, Dr. Kanai said. However, he asserted that the rate may increase this year due to the large number of repatriates as victims. Congested living conditions and inadequate nourishment—long period of years resulting in loss of their body weight and thus making them easy prey, are the causes which will raise the tuberculosis rate.

He said that over half of the available 59,331 beds in the nation's 283 sanatoria and hospitals for care and treatment of tubercular patients are lying unoccupied in spite of the mounting cases. Tokyo's 57 hospitals can accommodate only 7,621 patients, he said.

Dr. Kanai declared that as a therapeutic agent for treatment of the disease, he recommends gelatin as an important diet because it contains a high percentage of protein and fat, is rich in vitamins and low in carbohydrates.

He said he is working on a plan to better the diet for the patient. If approved by the Government the diet have a caloric value of 2,400 units. A patient each day in a hospital will receive 230 grams of rice, 35 grams of meat, 140 grams of fish, 20 grams of butter, 250 grams of vegetables and fruits, 15 grams of seaweeds, 40 grams of soy bean paste-soup and 30 grams of soy sauce.

Dr. Kanai revealed the method of ambulatory pneumothorax induction is being successfully tried to overcome the poor dietary condition in hospitals.

Bath Houses Of Tokyo Profit From Cold Spell

By ANDREW HEADLAND, Staff Writer

The 1200 bath houses still functioning in Tokyo are doing an unprecedented winter business, according to Tokijiro Kiraoka, local bath house proprietor.

The increase in customers was attributed not to any newly acquired Japanese whim, but because for many people bathing is the only way of getting warm during cold winter days.

Fuel, or lack of it, said Kiraoka, is one of the chief causes for increased bathers. Anything combustible is more expensive and difficult to obtain than ever before in Tokyo. As a result, citizens without means of keeping their home fires burning—or bath water hot—come in droves to public baths and soak in steaming tubs. Kiraoka's place, located just a stone's throw from Radio Tokyo, packs in 500 or 600 persons daily. A few are repeat customers who take four or five baths daily.

"Nothing else in the world but a bath," declared Kiraoka, who has been a bath manager for 23 years, "can give a person so much pleasure for so little cost."

The standard admission price is one yen per adult and 60 sen for children under six years, a fee low enough to exclude almost no one. The bath house is divided by a tiled wall into two sections for men and women. Customers must either bring their own soap or take soapless baths, as soap is an even scarcer commodity than fuel.

Unlike Western bathers, Japanese "soap up" and rinse off before getting into the tub. This is essential, as everyone uses the same water. Clothing is piled in individual wicker baskets in anterooms.

Kiraoka said bath house operators everywhere are greatly concerned with obtaining enough fuel to keep their customers in hot water. Japanese like to bathe in water at temperatures capable of turning the body lobster red, thereby storing within their systems a reserve of heat as insulation against cold.

The trouble is that heating a continual flow of water requires considerable fuel. Kiraoka's coal supply ran out long ago, and he is managing to maintain operation only by burning sawdust and other residue scraped up from neighborhood building projects.

It would be, he said, a serious setback to the community's health and welfare if any bath houses close for lack of fuel. Further, he asserted, baths are essential in a nation bent on democracy, a place where everyone enjoys identical privileges for the same price. "Can you imagine anyone being undemocratic while taking a bath?" he asked.

This would be especially difficult in Kiraoka's tubs. Each one holds 20 customers.

OPERATIONS TO CONTROL TYPHUS ISSUED BY SCAP

State Ordered to Disinfect All Public
Conveyances, Theaters

Due to continued threats of epidemic (louse-borne) and murine (flea-borne) typhus fever in Japan, SCAP's Public Health and Welfare Section has directed the Government to carry out several measures for the prevention and control of this disease.

Adequate typhus control measures include: (1) vigorous extermination of rodents in areas where cases of typhus fever occur; (2) disinfection with insecticide powder of all civilians crossing the straits of Tsugaru from Hokkaido to Honshu and from Honshu to Hokkaido; (3) disinfection and immunization of all foreign repatriates embarking from Japanese ports to their homeland and of all repatriate Japanese debarking at Japanese ports; and (4) disinfection of railway coaches, and stations, public conveyances, and theaters.

In addition, DDT residual spray will be used every 30 days to disinfect all railway cars, public conveyances, and ferries assigned for use of all United Nations nationals, military and civilian, including dependents.

TB CASES RANK HIGH IN 3 PREFECTURES

More School Boys Than Girls
Suffer From Disease,
Dr. Kanai Reveals

Hokkaido, Ishikawa and Fukui prefectures where the winter is long and the families live close together in the room have the highest rate of tuberculosis in the country, said Dr. Susumu Kanai, chief of the Prevention Section, Welfare Ministry.

He said health examinations conducted recently in some of Tokyo's primary school children among 129,109 boys and 119,501 girls showed that 1,353 or 1.05 per cent of the boys and 941 or 0.79 per cent of the girls were diagnosed as suffering from tuberculosis.

Dr. Kanai told the Nippon Times that although it is impossible to get the exact number of tuberculosis cases in Japan in the years before the war, it is estimated that 104,892 died from this disease in 1937.

The death toll, he stated, which included the highest percentage of persons between the ages of 16 and 27, rose to 171,943, an increase of 63.5 per cent since 1937.

In 1946, he declared the death rate fell to 231 from 282 per every 100,000 inhabitants in 1945. (The figures for 1946 are based as of the death rate for the first half of the year, the figures for the second half not being available at present).

This decrease is obviously attributed to the corresponding decrease in malnutrition offset by the imported foods, Dr. Kanai said. However, he asserted that the rate may increase this year due to the large number of repatriates as victims. Congested living conditions and inadequate nourishment—long period or years resulting in loss of their body weight and thus making them easy prey, are the causes which will raise the tuberculosis rate.

He said that over half of the available 59,331 beds in the nation's 283 sanatoria and hospitals for care and treatment of tubercular patients are lying unoccupied in spite of the mounting cases. Tokyo's 57 hospitals can accommodate only 7,621 patients, he said.

Dr. Kanai declared that as a therapeutic agent for treatment of the disease, he recommends gelatin as an important diet because it contains a high percentage of protein and fat, is rich in vitamins and low in carbohydrates.

He said he is working on a plan to better the diet for the patient. If approved by the Government the diet have a caloric value of 2,400 units. A patient each day in a hospital will receive 230 grams of rice, 35 grams of meat, 140 grams of fish, 20 grams of butter, 250 grams of vegetables and fruits, 15 grams of seaweeds, 40 grams of soy bean paste-soup and 30 grams of soy sauce.

Dr. Kanai revealed the method of ambulatory pneumothorax induction is being successfully tried to overcome the poor dietary condition in hospitals.

Bath Houses Of Tokyo Profit From Cold Spell

By ANDREW HEADLAND, Staff Writer

The 1200 bath houses still functioning in Tokyo are doing an unprecedented winter business, according to Tokijiro Kiraoka, local bath house proprietor.

The increase in customers was attributed not to any newly acquired Japanese whim, but because for many people bathing is the only way of getting warm during cold winter days.

Fuel, or lack of it, said Kiraoka, is one of the chief causes for increased bathers. Anything combustible is more expensive and difficult to obtain than ever before in Tokyo. As a result, citizens without means of keeping their home fires burning—or bath water hot—come in droves to public baths and soak in steaming tubs. Kiraoka's place, located just a stone's throw from Radio Tokyo, packs in 500 or 600 persons daily. A few are repeat customers who take four or five baths daily.

"Nothing else in the world but a bath," declared Kiraoka, who has been a bath manager for 23 years, "can give a person so much pleasure for so little cost."

The standard admission price is one yen per adult and 50 sen for children under six years, a fee low enough to exclude almost no one. The bath house is divided by a tiled wall into two sections for men and women. Customers must either bring their own soap or take soapless baths, as soap is an even scarcer commodity than fuel.

Unlike Western bathers, Japanese "soap up" and rinse off before getting into the tub. This is essential, as everyone uses the same water. Clothing is piled in individual wicker baskets in anterooms.

Kiraoka said bath house operators everywhere are greatly concerned with obtaining enough fuel to keep their customers in hot water. Japanese like to bathe in water at temperatures capable of turning the body lobster red, thereby storing within their systems a reserve of heat as insulation against cold.

The trouble is that heating a continual flow of water requires considerable fuel. Kiraoka's coal supply ran out long ago, and he is managing to maintain operation only by burning sawdust and other residue scraped up from neighborhood building projects.

It would be, he said, a serious setback to the community's health and welfare if any bath houses close for lack of fuel. Further, he asserted, baths are essential in a nation bent on democracy, a place where everyone enjoys identical privileges for the same price. "Can you imagine anyone being undemocratic while taking a bath?" he asked.

This would be especially difficult in Kiraoka's tubs. Each one holds 20 customers.

OPERATIONS TO CONTROL TYPHUS ISSUED BY SCAP

State Ordered to Disinfect All Public
Conveyances, Theaters

Due to continued threats of epidemic (louse-borne) and murine (flea-borne) typhus fever in Japan, SCAP's Public Health and Welfare Section has directed the Government to carry out several measures for the prevention and control of this disease.

Adequate typhus control measures include: (1) vigorous extermination of rodents in areas where cases of typhus fever occur; (2) disinfestation with insecticide powder of all civilians crossing the straits of Tsugaru from Hokkaido to Honshu and from Honshu to Hokkaido; (3) disinfestation and immunization of all foreign repatriates embarking from Japanese ports to their homeland and of all repatriate Japanese debarking at Japanese ports; and (4) disinfestation of railway coaches, and stations, public conveyances, and theaters.

In addition, DDT residual spray will be used every 30 days to disinfect all railway cars, public conveyances, and ferries assigned for use of all United Nations nationals, military and civilian, including dependents.

It Colodi

SOCIAL SERIES: 1359 (Continued)

ITEM 6 (Continued)

The clothes worn by the women on the streets reveals a complicated phase in the lives of women who live in the big cities. Generally speaking, the number of women wearing KOMPEI (TN: Japanese wartime style of clothing) has decreased greatly, while those dressed in Western style dresses have increased. A Japanese woman wearing a Chinese dress might be a repatriate. The reasons for the various styles of dress can be viewed from two points - material and mental. It is difficult for women to replace the clothes through air raids, and every woman likes to wear clothes which suit her own taste. Despite this, it is said that there is little tendency to veer towards cosmopolitanism among them in their daily lives.

In the future, now that the Japanese women have been given the rights of freedom and equality they must strive for efficiency and, in this way, improve the conditions surrounding them. The future duty of all conscientious Japanese women is to create a better life through exercising their new-found rights in their daily life.

ITEM 7 Preventive Injection Cause High Fever - Mainichi Shimbun - 24 Jan 47.
Translator: H. Nishihara.

Full Translation:

Doctor OKA, of SETAGAYA-Ku, UENO-Machi, gave preventive injections against diphtheria to some 200 children, ranging from nine months to ten years of age, residing at SETAGAYA-Ku, TAMAGAWA-NAKA-Machi, 1-Chome and 2-Chome at the request of the TOKYO Metropolitan Office. The injections produced ill effects and the majority of the children are now suffering from convulsive fits and fevers.

ARAI, Masashi, age four, eldest son of ARAI, Nagahisa, of TAMAGAWA-NAKA-Machi, 2-Chome, 431, was unconscious for an hour. On the following day, some of the patients had swollen arms and even fingers. They were unable to move their arms. The injected parts of some of the other children turned violet and formed pus. It will take them more than ten days to recover. At present 13 children are receiving treatments at Doctor OKA's hospital, and several others were attended by other doctors, while the rest are cared for at their own homes. The patients totaled more than 50.

The inhabitants of this area reported this case to the TAMAGAWA Police Station on 23 December. On an information from the Police Station, the Disease Prevention Sub-section (BOEKI KAKARI) of the TAMAGAWA Branch of the SETAGAYA Ward Office examined the patients. The Disease Prevention Sub-section is now trying to find the causes and are studying the case by both bacteriological and clinical processes. However, they have not yet reached a conclusion. The officials suggested three possible causes. They are 1) distributed injections which were manufactured by the Metropolitan Bacteriological Examination Institute (TO SAIKIN KENSASHO) were bad, 2) the culture pots, in which the injections were kept, had been infected with Bacilli because of inadequate disinfection measures, and 3) inadequate sterilization of the arm prior to injection.

The Sanitation and Disease Prevention Section (EISEI BOEKIKA) of the TOKYO Metropolitan Office which also sent officials on 23 January to investigate the cases, announced that neither the injections nor the sterilization were at fault and confirmed that those whose arms turned red and swelled, were immune from diphtheria. With this explanation they instructed all branch offices to reduce the dose of the injection in cases where the subject suffered ill-effects. Moreover, those who suffered from the injections were confined to those who were under five years. Since they have retained their appetites, it is believed that no deaths will result.

Mr TACHIBANA, chief of the Disease Prevention Sub-section (BOEKI KAKARI) said, "The people need not be afraid of the ill effects. Those who were immune from the disease alone received such secondary effects."

SOCIAL SERIES: 1359 (Continued)ITEM 7 (Continued)

The dose of an injection will be reduced next time. They may set their mind at ease. When a man feels a chill or his arm is swollen, he will have only to cool the part with stupes."

Doctor OKA said, "I think that I am not to blame for the case. The injections were allocated and I believe they were good. I presume that the weak skins of the children were poisoned with the tincture of iodine. That is the cause."

ARAI, Nagahisa said, "My eldest son, Masahisa was suddenly attacked by a chill at 2200 hours of the day he was injected. His condition soon took a sudden turn for the worse and he fell unconscious. This condition lasted about an hour."

The Sanitary Sub-section (EISEI KAKARI) of the Public Order Section (HOANKA) of the Metropolitan Police Board sent Messrs ONO and TAKAHASHI, both specialists, on 23 January to try to find the cause. They confiscated the remaining vaccine and tincture of iodine as evidence and sent them to the Hygienic Examination Institute (EISEI KENSASHO) of the Metropolitan Police Board to be examined.

ITEM 8 Japanese Must Be Enlightened on True Situation of Soviet Russia - Sekai Nippo - 24 Jan 47. Translator: M. Hagino.

Full Translation:

Mrs NOSAKA, Ryuko, 50 years old, who returned here on 22 January from a 17 year exile in MOSCOW is living with her husband NOSAKA, Sanzo and Misago, 25 years old daughter of the late IWATA, Yoshimichi. She is at present resting from fatigue of her long journey. She was engaged in translation and other intellectual work in MOSCOW and spoke on the recent SOVIET situation.

She said, "In the SOVIETS, there is no one demanding equality of the sexes because it has already been attained. The women play an active role in all fields, according to their individual talents and outdo the men in the cultural fields. A woman, is not less capable than a man according to my belief. In fact, there is a woman sculptor, Miss MUHINA, who twice won the STALIN award and moreover, gained a world-wide reputation at the International Museum in NEW YORK. However, only prejudiced information on RUSSIA has been given to the Japanese. Therefore, I should like to launch a movement informing the real situation of the SOVIETS, particularly for the understanding of the women. Supported by Miss Misago, this movement will be carried out in full.

"Rumor has it that the Russians are leading a culturally low life but this is groundless. The fact is, their life is culturally higher than that of the Japanese and there is no one out of work. On the question of postwar rehabilitation, work has been so rapid that the DONIEPL Hydroelectric Power Station, which was considered impossible to reconstruct, is reported to be generally completed. Of course, it cannot be said that SOVIET RUSSIA is irreproachable from every point of view, but it is necessary for the Japanese, I believe, to learn more of the real SOVIET situation."

ITEM 9 Questionable Religions Springing Up - Mainichi Shimbun - 24 Jan 47. Translator: Y. Asada.

Summary:

Since the freedom of religion has been recognized after the war, some religious sects are seeking the freedom of activities, while some persons are trying to establish new religions. The religious field since the termination of the war has become quite brisk, even producing such a questionable religion as JIUKYO which has become the talk of the town.

As it is the age of "religious freedom", people should be capable of judging whether a religion is a questionable one or not by using

X-RAY TRANSFORMS QUARTZ INTO RUBY

Amethyst or Opal Also Made
By New Method, Says

Teidai Scientist

28 Jan
Ruby, amethyst or opal can now be produced from colorless crystals through X-ray radiation, it was disclosed yesterday by Professor Shigetaka Shimura, Engineering Department, Tokyo Imperial University, said Kyodo.

Professor Shimura said that quartz turned into amethyst or an opal crystal after 100 successive hours under the X-ray.

He also discovered that after 200 hours of X-ray radiation, alumina turned into a pink-colored stone indistinguishable from the genuine ruby.

In addition, the inventor, claims he and his associates are now working on a method whereby natural pearl can be transformed into golden and pink pearl. The scientists said that theoretically pearls can be colored by 200 hours under the X-ray.

Professor Shimura recently electrified the public by claiming that he could produce mellowed whiskey through use of X-ray.

VD Clinic Open

Owing to the wide-spread increase in venereal diseases, the Metropolitan government has established a clinic specializing in venereal diseases in the Central Sanitation Office Building Akashi-cho, Nihonbashi. The clinic is open for consultation twice a week, Tuesday and Friday, during the hours from 1 p.m. to 3 p.m. The establishment is in charge of Dr. Yu Akasaka, professor of Tokyo Imperial University.

REFORM IN ADMINISTRATION OF PUBLIC HEALTH NEEDED

Medical Education Must Be Reorientated Stressing
Prevention Rather Than Cure

4 Feb
By Dr. YOSHIO KOYA

(Director of Institute of Public Health)

The recent creation of the Public Health Bureau, the Medical Affairs Bureau and the Disease Prevention Bureau in the Ministry of Welfare and health sections in the governments of important prefectures is a welcome step in the direction of reforming health administration.

Any reform in the central administrative machinery, to be effective, must be accompanied by renovations in every local branch of administration. In the same sense, the recent reform measure in the central health administration must be implemented by renovating its every branch and every institution connected with health administration.

The Japanese are as ignorant of the rules of health as an uncivilized people, a fact which is attested by the high mortality rate in our country. They hardly know how to defend themselves against disease and epidemics. The first and foremost task in health administration is, therefore, to arouse health-mindedness among them and to educate them in the health rules.

This task calls for utmost cooperation on the part of doctors at large and the government-operated local public health stations. Unfortunately, however, neither doctors at large

calling for the serious attention of the Ministry of Welfare, especially of the Public Health Institute. As a matter of fact, steps are already being taken in this connection.

Apropos of health administration officials and experts, local public health stations should be improved, particularly in the matter of working conditions for the personnel. Health stations must be the nerve-center of local health administration. Up to now, they have been looked down upon as the least important branch of health administration, with the personnel placed in the most subordinate position and worked hard at low pay, deriving no pleasure at all from their work. Small wonder they are half-hearted and think their stations a temporary resort.

Such a condition of affairs must be remedied and arrangements made so that the health station personnel, though subordinate in status as government officials, may maintain prestige becoming scholars and enjoy their work.

Suggests Two Ideas

I have two ideas to suggest for this purpose. The first idea is to equip each public health station

the rules of health as an uncivilized people, a fact which is attested by the high mortality rate in our country. They hardly know how to defend themselves against disease and epidemics. The first and foremost task in health administration is, therefore, to arouse health-mindedness among them and to educate them in the health rules.

This task calls for utmost cooperation on the part of doctors at large and the government-operated local public health stations. Unfortunately, however, neither doctors at large nor the experts working at public health stations are qualified for the task, because their training in their student days is confined to cure, rather than prevention, to the treatment of patients personally, rather than public health.

Necessity is apparent, therefore, that (1) the education in the medical universities and colleges should be reorientated with emphasis placed on public health and prevention and (2) that the public health station officials and experts should be re-educated along similar lines.

In regard to the first requisite, it is utterly impossible to add courses in public health and prevention to the present curriculum. For one thing, it would be a tremendous burden on the students, who are already overworked. For another, faculty strength, finances, schedules and other considerations prevent. The shortest cut to the desired re-orientation of education would be for the faculty to change the main theme of their lectures from cure to prevention, from the treatment of individual patients to administration of public health. For example, a professor of gynecology, instead of confining his lectures on diagnosis and cure, might as well educate his students on the problem of protection to mothers as viewed from broad social viewpoints. Similarly, a professor of pediatry, in addition to discoursing on clinical subjects, would do well to go further afield and enlighten the students on the causes of children's diseases with the aid of statistics. It would be a good idea for a professor of internal medicine to discourse on the social causes of internal diseases, in addition to lecturing on clinical subjects. In other words, professors should not limit their lectures to clinical matters, but open the eyes of the students to the causes of disease and educate them on preventive mea-

Small wonder they are half-hearted and think their stations a temporary resort.

Such a condition of affairs must be remedied and arrangements made so that the health station personnel, though subordinate in status as government officials, may maintain prestige becoming scholars and enjoy their work.

Suggests Two Ideas

I have two ideas to suggest for this purpose. The first idea is to equip each public health station with a research room. It is far from my intention that the health station personnel should indulge in research work as a hobby to the neglect of their duties. The purpose in my mind is just the opposite. No health station can do good work unless fully conversant with the health situation in the territory under its jurisdiction. From this consideration alone, the need of research work is obvious enough. Moreover, research work would give pleasure and a sense of pride to the health station personnel as scholars, and this, in turn, would be an incentive to devotion to their duties. Copies of data gathered by research work should, by all means, be submitted periodically to the central government. This would add to information for the central government and be a guide in policy-making.

The other suggestion is the establishment of an academy of public health. There are quite a few academies of health in our country, but they are, to all intents and purposes, societies of university professors and thesis writers. In a word, they are too academic in nature. Academic snobbery which the Occupation Forces authorities attribute to Japanese scholars of medicine is no less manifest in these institutions. This will not do. The academy I have in mind is one which would be made up of the health station personnel all over the country and men of medicine cooperating with them. The proposed institution would have to hold a general meeting in Tokyo at least once a year simultaneously with the annual conference of the health administration officials so that a free exchange of views might be held between the members of the academy and the officials. Such an exchange should be mutually bene-

prevention, from the treatment of individual patients to administration of public health. For example, a professor of gynecology, instead of confining his lectures on diagnosis and cure, might as well educate his students on the problem of protection to mothers as viewed from broad social viewpoints. Similarly, a professor of pediatry, in addition to discoursing on clinical subjects, would do well to go further afield and enlighten the students on the causes of children's diseases with the aid of statistics. It would be a good idea for a professor of internal medicine to discourse on the social causes of internal diseases, in addition to lecturing on clinical subjects. In other words, professors should not limit their lectures to clinical matters, but open the eyes of the students to the causes of disease and educate them on preventive measures.

In this way, much of the proposed reorientation of the education in the medical universities and colleges could be effected with use still being made of the existing curriculum. Of course, something more will have to be done, such as the opening of supplementary courses. In the meantime, the present courses in hygenics call for improvement in many ways. Itinerant lectures and opportunities for practice must be given much more frequently than at present.

Course in Statistics Urged

It is particularly necessary that every medical university should have a course in statistics. Few universities do, but only in the preparatory classes and it is little more than a course in mathematics. This will not do. It is essential that a full-fledged course in statistics based on data should be given in the advanced classes.

With renovations such as I have suggested introduced, medical universities would, in future, be able to turn out men having broad views and the zeal to work for the good of the people and fit them to work not merely as therapists but as collaborators with health administration officials.

For the purpose of re-educating health administration officials and experts, it is necessary that a post-graduate training organization should be set up. This is a matter

but they are, to all intents and purposes, societies of university professors and thesis writers. In a word, they are too academic in nature. Academic snobbery which the Occupation Forces authorities attribute to Japanese scholars of medicine is no less manifest in these institutions. This will not do. The academy I have in mind is one which would be made up of the health station personnel all over the country and men of medicine cooperating with them. The proposed institution would have to hold a general meeting in Tokyo at least once a year simultaneously with the annual conference of the health administration officials so that a free exchange of views might be held between the members of the academy and the officials. Such an exchange should be mutually beneficial and productive of new ideas.

I have given an outline of the ideas I have in mind for the improvement of public health administration. I feel that the reform measure recently introduced in the central health administration will hardly succeed unless implemented by measures such as I have suggested.

—Translated from the magazine "Shinro".

HOW SOCIALIZED MEDICINE HELPS RUSSIA'S MILLIONS

Medical Service Is Free and There are Plenty Public Clinics

16 Jan
By EDDY GILMORE

MOSCOW, (AP)—Medicine is very definitely socialized in Soviet Russia. All hospitals, clinics, rest homes, dental offices, come under the state as well as the professors, doctors, many specialists and attendants.

Medical service is free to the people, but there is a small charge for medicine if purchased in drug stores. If the patient receives the medicine directly in a hospital or clinic there is no charge.

Professors, doctors, dentists, and nurses all are paid by the state and receive pensions when they are too old to work. Incidentally, a professor is a definite rank above a doctor.

Public clinics abound in every city and village. Hospitals also appear to be everywhere, but Soviet authorities constantly are building more.

Factories Have Hospitals

Many factories have their own hospitals as well as clinics, with staffs of professors, doctors, dentists, nurses and helpers.

Officials constantly are clamoring for more people in the medical profession. The war, of course, disrupted the public health service in the U.S.S.R., with thousands of doctors and nurses mustered into the army. Now the service is on its way back.

Regular doctors put in during normal times six hours of work daily. After this their time is their own, and there is such a thing as making private calls and having private patients. However, it is not necessary to have a doctor call at anyone's home on a private basis. Russian public health calls for schedules of visits to homes.

Drug stores maintain a 24-hour daily service. A blue light burning above their doors is always the beacon for anyone wanting to buy medicine for an emergency case before the dawn hours. Ambulance service is free to and from a hospital or clinic.

Doctors salaries range from about \$73 to \$375 (U.S. equivalent) month-

TB DEATH RATE REACHES THE HIGHEST PEAK IN '45

Disease Claims 203,000 Persons Throughout the Country

17 Jan
The death rate from tuberculosis in 1945 reached 28.2 per 10,000 population, or the highest ever recorded in the country, according to an estimate made for the entire country from statistics obtained from 28 prefectures. The rate was 22.5 per 10,000 population in 1943 and increased to 24.2 in 1944.

In all, 203,000 persons died of tuberculosis during 1945. At present total hospital beds for tuberculosis patients are only about 45,000. Beds operated by the Medical Corporation and sanatoriums total about 21,000 and 4,000, respectively. State hospitals have 28,700 beds but due to insufficient budget only about 20,000 beds are actually available.

In view of such conditions for caring of tuberculosis patients, the Welfare Ministry has decided to place 79 tuberculosis sanatoriums operated by the Medical Corporation under the management of State hospitals, beginning April.

NO EPIDEMIC EXISTING HERE

Col. Wheeler Describes Symptom Of Murine Typhus

17 Jan
Lt. Col. C. M. Wheeler, Typhus Consultant, Public Health and Welfare Section, SCAP, told Japanese newsmen Wednesday that "although cases are being reported from several prefectures, there is no epidemic of either flea-borne (murine) or louse-borne (shirami) typhus in Japan."

Murine typhus is an acute infectious disease characterized by gradual or sudden onset of headache, chills, and fever; and a body rash may appear about the fifth day, Colonel Wheeler explained. The clinical course of murine typhus is similar to that of shirami typhus, but is comparatively mild and has a low mortality rate. Careful laboratory studies of the blood are necessary to accurately distinguish between the two diseases, he added.

Two Die of Smallpox

19 Jan
The number of confirmed or suspected cases of smallpox in Chiba Prefecture which first broke out in Makuhari town on January 9, was reported Friday to have grown to seven said Kyodo.

So far, two persons already have died from smallpox at Makuhari, in addition to three confirmed and one suspected cases. A case of suspected smallpox is said to have broken out Fumabashi City on Wednesday.

VD CLINICS SET UP TO HELP JAPANESE

Will Offer Free Treatment To Afflicted Persons, Declares Dr. Elkins

17 Jan
Venereal disease clinics, now being set up in Japan under the control of prefectural venereal disease control officers, will enable health departments throughout the nation to provide prompt, regular treatment for those afflicted, Dr. O. M. Elkins, venereal disease consultant for SCAP's Public Health and Welfare Section, said yesterday.

Until recently, Dr. Elkins explained, no specific agency offered routine diagnosis and treatment for VD patients. Under the new program, however, the VD control officer in each prefecture will establish and operate a sufficient number of clinics to serve adequately the needs of the people in that area.

The program is designed not only to benefit those persons who have the disease by providing free treatment, but also to protect the general public by tracing previously unknown sources of infection, the consultant said.

"Wherever prostitution exists openly and legally, venereal disease is always highly prevalent," Dr. Elkins added. "This is true in any country, and because prostitution has existed legally in Japan for generations, VD has spread throughout the population.

"Not only do the prostitutes spread it to their patrons, but the patrons

Regular doctors put in during normal times six hours of work daily. After this their time is their own, and there is such a thing as making private calls and having private patients. However, it is not necessary to have a doctor call at anyone's home on a private basis. Russian public health calls for schedules of visits to homes.

Drug stores maintain a 24-hour daily service. A blue light burning above their doors is always the beacon for anyone wanting to buy medicine for an emergency case before the dawn hours. Ambulance service is free to and from a hospital or clinic.

Doctors salaries range from about \$73 to \$375 (U.S. equivalent) monthly. Professors and specialists get much more, as well as special benefits such as summer homes, and often have private automobiles and the right to trade in special food and clothing stores. A doctor calling on private patients may charge what he wants to.

The Soviet Union has made tremendous progress in public health. Epidemics of typhus and cholera which once swept Russia annually have been wiped out, and tuberculosis, trachoma and venereal diseases have been greatly reduced. One of the most successful campaigns by Russian doctors has been reducing infant mortality.

Needs Medical Equipment

In a country as large as Russia, medicine still has a long way to go. The Soviet Union needs medical equipment badly. Its professors, doctors, and dentists generally are excellent.

I have seen Soviet public health operating at first hand. My wife became seriously ill. Her family called the hospital for aid. A distinguished professor came and recommended she go immediately to a hospital. He said she must have penicillin. I volunteered to try to get some from the American Embassy clinic.

"Mr. Gilmore," he said in a kindly tone, "that is not necessary at all. Your wife is a Russian citizen. We have penicillin."

My wife was put in a large, clean, newly-painted room with three other women. The hospital staff is large, well-trained and most attentive. When I tried to pay the professor for his services he thanked me politely, but said:

"I am just a Soviet citizen."

Public Health and Welfare Section, SCAP, told Japanese newsmen Wednesday that "although cases are being reported from several prefectures, there is no epidemic of either flea-borne (murine) or louse-borne (shirami) typhus in Japan."

Murine typhus is an acute infectious disease characterized by gradual or sudden onset of headache, chills, and fever; and a body rash may appear about the fifth day, Colonel Wheeler explained. The clinical course of murine typhus is similar to that of shirami typhus, but is comparatively mild and has a low mortality rate. Careful laboratory studies of the blood are necessary to accurately distinguish between the two diseases, he added.

"Murine typhus is most commonly found among dock hands, and those working in grain elevators and warehouses, with the incidence highest among men because of their association with this type of employment," he added.

New Way to Make Penicillin

A highly effective penicillin from urea—extracted from urine—has been successfully manufactured by Professor Mitsuo Muto, Medical Department, of Tohoku Imperial University, said Kyodo. Three weeks of treatment with the penicillin developed from urine completely cured a patient who had been suffering from a severe burn wound for three years.

however, the VD control officer in each prefecture will establish and operate a sufficient number of clinics to serve adequately the needs of the people in that area.

The program is designed not only to benefit those persons who have the disease by providing free treatment, but also to protect the general public by tracing previously unknown sources of infection, the consultant said.

"Wherever prostitution exists openly and legally, venereal disease is always highly prevalent," Dr. Elkins added. "This is true in any country, and because prostitution has existed legally in Japan for generations, VD has spread throughout the population.

"Not only do the prostitutes spread it to their patrons, but the patrons pass it on to other members of the general public. Often the victims are wives of men who patronized prostitutes, and in some cases wives thus infected become pregnant and unsuspectingly transmit the disease to their offspring."

losis, trachoma and venereal diseases have been greatly reduced. One of the most successful campaigns by Russian doctors has been reducing infant mortality.

Needs Medical Equipment

In a country as large as Russia, medicine still has a long way to go. The Soviet Union needs medical equipment badly. Its professors, doctors, and dentists generally are excellent.

I have seen Soviet public health operating at first hand. My wife became seriously ill. Her family called the hospital for aid. A distinguished professor came and recommended she go immediately to a hospital. He said she must have penicillin. I volunteered to try to get some from the American Embassy clinic.

"Mr. Gilmore," he said in a kindly tone, "that is not necessary at all. Your wife is a Russian citizen. We have penicillin."

My wife was put in a large, clean, newly-painted room with three other women. The hospital staff is large, well-trained and most attentive. When I tried to pay the professor for his services he thanked me politely, but said:

"I am just a Soviet public servant. My salary covers the work I am doing. I am very glad if your wife and you are satisfied."

One of the most impressive facts about this hospital is the devotion to duty by the professor and his head nurse. By law, they can have one non-working day each week, but I never saw them take one, and when I asked about it, the nurse replied:

"This is our life here at the hospital." She said she had been with the same professor about 25 years. His non-working days have been so few, she can count them.

successfully manufactured by Professor Mitsuo Muto, Medical Department, of Tohoku Imperial University, said Kyodo. Three weeks of treatment with the penicillin developed from urine completely cured a patient who had been suffering from a severe burn wound for three years.

New Eating Habits

13 Jan. —
If there should be anyone who still doubts the value of the school lunch program instituted last month, such a person should be made to ponder over the facts pointed out by Colonel Crawford F. Sams, chief of SCAP's Public Health and Welfare Section, in his press conference last Wednesday.

Some of the facts are these: The Japanese people are suffering widely from diseases induced by malnutrition. Although wartime privation has naturally aggravated the situation, the situation intrinsically is one which has always existed even in the most prosperous days. Japan has by far the highest rate of tuberculosis of any civilized country in the world, and whereas the rate is constantly being reduced in other countries, there has been no improvement in Japan.

These conditions are largely due to improper diet. It is not that the Japanese do not get enough to eat. With respect to quantity, except for a short period recently, the Japanese have generally been getting enough or more than enough. They simply have not been choosing the proper kinds of food. Particularly has their diet been lacking in fats and proteins—in milk and meat, especially. Although cost has undoubtedly been a factor, the chief reason has been simply a matter of stubborn habit.

The value of the new school lunch program, in which every school child in the nation eventually will receive daily a well-balanced lunch to make up the deficiency in his home meals, will lie in its educational effect. The immediate effect of counteracting the malnutrition caused by the wartime and postwar shortages will be important, of course; but far more significant will be the permanent effect of instilling into the coming generation the habit of eating and liking the kinds of food hitherto neglected which will correct the unbalanced character of the traditional Japanese diet. It should help to bring about eventually a veritable revolution in the health of the nation.

That such a beneficial program as this school lunch program deserves to be expanded and continued permanently should be obvious. Whatever the cost of such a program, it would be in the long run nothing but the cheapest kind of investment which will bring incalculable returns in national well-being. Particularly when the present program is being made possible through aid brought in by the Allied authorities, the Japanese public on its side can do no less than to respond with the utmost appreciation and support.

pretty much of an innovation. Never before have the Japanese people had the experience of voting directly for their prefectural governors and municipal mayors.

Back in the Tokugawa period, despite the feudal superstructure of society, down at the level of the villages the people enjoyed considerable self-government. They had their own law courts in which the villagers administered justice among themselves. Taxation was also left in their hands to some extent. In commerce the villages conducted dealings with each other. The village officials concerned with all these activities were elected by popular ballot with creditable results.

But for almost eighty years now, such local self-government has been suppressed in favor of a bureaucratic government imposed by the national authority. In the meantime the interest in self-government in the local communities has atrophied. The only elections were those held under a national system imposed from above, and never any worked out by the people themselves on their own initiative.

To correct this situation will take more than a mere reform of the election system. It will require a revolution in the people's psychology toward elections. A commendable start has already been made in the democratization of national politics, as evidenced in the last general election. There is need to extend this new spirit into the smallest and farthest local units.

For this purpose, a most vigorous and thorough educational and publicity campaign should be conducted throughout the country between now and the time of the coming local elections. Much is already being done, but it is necessary to ask if there is not more which can be done. In view of their importance, nothing must be allowed to divert attention from the making of adequate preparations for these coming local elections.

HOSPITALS HARD HIT BY COAL SHORTAGE

14 Jan. — Many Major Institutions Are Forced to Restrict Surgical Operations

While the current coal shortage has severely curtailed the nation's railways and the output of steel, gas, electricity and fertilizer, one of the most essential civilian enterprises sorely affected by the coal scarcity today are medical institutions, according to the Mainichi.

A checkup made of leading hospitals in Tokyo, the journal said, shows that all of them are experiencing grave difficulties owing to the lack of coal for heating, sterilization and other essential medical activities, with resultant danger to public health.

Many of the major hospitals are being compelled to restrict surgical operations to once a week and to offer warm baths to new-born babes only about once every three or four days.

Without proper heating, many patients who have successfully undergone operations are being exposed to the danger of contracting acute pneumonia.

The Mainichi declared that the Tokyo Imperial University Hospital, which requires a minimum supply of 600 tons of coal a month, in December was granted a ration allotment of 60 tons.

In the case of the First National Hospital at Ushigome, the institution in December was only able to receive 60 tons of coal against its minimum need of 360 tons, while the Communications Hospital secured only five tons of its required 420 tons. The Police Hospital also received only 20 tons of its needed 60 tons.

The Mainichi said that as many of the medical institutions are unable to purchase coal in the blackmarket, they are being compelled to obtain wood and other combustibles by dismantling air-raid shelters and other useless structures.

The journal also said that the cement industry today is working under great handicap owing to the lack of coal. Whereas three tons of vitally-needed cement for rehabilitation work can be obtained from the use of one ton of coal, the cement industry is unable to produce any large quantity of cement owing to the coal stringency.

Artists, too are feeling the pinch of the coal scarcity, the journal said, pointing out that the Uyeno Art School has temporarily been compelled to give up classes for nude art lest models contract illness from exposure to cold.

The Problem of Health Facilities

24-11-11 Myppin

With the advent of winter, the Japanese people are becoming more conscious than ever of the need for improving the health facilities of the nation. Everyone is aware enough that the inadequate diet from which the Japanese people have long suffered, the unsanitary aspects of the war-ravaged country, and the congested housing situation constitute health hazards which call for the greatest care if widespread disease is to be prevented. Such seasonal manifestations as the increasing amount of sniffing and coughing to be seen on the streets, on public transport facilities, and in the offices serve as reminders of the personal care which each individual must exercise.

But there are other facts concerning health conditions about which the general public should know more and about which public opinion should demand speedier remedy. For instance, hospital and dispensary facilities have been so neglected that in some localities it is often virtually impossible to obtain proper medical attention. Added to this situation is the growing scarcity of medical supplies, while such as are available are often being hoarded by black market operators for future speculation.

There has been an extensive health insurance system throughout the nation with some 45,000,000 members and some 30,000 doctors supposedly looking after the needs of the members. However, in practice, this system has largely fallen into a state of uselessness. Since the price of medicine has increased thirty-fold on the average, while some common items like aspirin cost seventy times their former price, doctors have become prone to neglect their health insurance clients in favor of the more lucrative side business with cash customers. Very often only when special pres-

channels. Priority should be given in the allocation of building materials for the repair and construction of hospital facilities.

The reorganized Japan Medical Association is presumably stimulating the doctors into vastly improved efficiency in meeting the obligations of the medical profession to society. But widespread reform in the work of improving the health facilities of the nation will not come about until the lay public also becomes fully conscious of the problems involved and brings the pressure of public opinion to bear on the task of solving these problems. Mere consciousness of the importance of improving public health is not enough. The public must arm itself with more specific information concerning the work which has to be done.

S, MONDAY, DECEMBER 23, 1946

Patient's Home Is Harder to Find Than Diagnosing Sick, Says Doctor

By PETER KALISCHER
UP Staff Correspondent

Perhaps the only United States army doctor whose patients are almost exclusively women and children practices in Tokyo and pays his calls in an army sedan.

This 26-year-old medico is Lieutenant Francis T. Linder, of Mount Vernon, New York, and his patients are among the 550 dependent families of occupation personnel living in Tokyo. He also treats War Department women civilian employees who are too ill to betake themselves to the dispensary.

Lt. Linder, whose internship was spent at New York's Lennox Hill Hospital is attached to the 385th Medical Central Dispensary, which is responsible for the health of approximately 14,000 occupation personnel in the Tokyo area. Because of his assignment, however, he is rapidly becoming a specialist in children's ailments—there are about 350 occupation personnel in Tokyo

his patients live than what's wrong with them.

This he attributes to mystifying street signs and the lack of directional markers indicating the whereabouts of occupation houses.

"Someone calls up and says she has a stomachache," he says, describing a typical case. "She gives the GHQ house number and the Japanese street address and away I go. I even have a Military Police escort in emergency cases. But I sometimes spend as much as an hour poking in and out of alleys in the immediate neighborhood of the house because nobody thought to put up a sign at a main intersection showing where the house is. Suppose it really was an emergency?"

Lt. Linder makes anywhere from two to 10 calls with his little black bag every day.

He does not intend to bring his own wife and eight-month-old baby

health insurance system throughout the nation with some 45,000,000 members and some 30,000 doctors supposedly looking after the needs of the members. However, in practice, this system has largely fallen into a state of uselessness. Since the price of medicine has increased thirty-fold on the average, while some common items like aspirin cost seventy times their former price, doctors have become prone to neglect their health insurance clients in favor of the more lucrative side business with cash customers. Very often only when special presents like rice and other foodstuffs are offered will some doctors consent to take adequate care of their patients.

Another matter for concern is the slowness with which reconstruction work on war-damaged hospitals is proceeding. Before the air raids, there were 3,950 hospitals and 32,055 medical offices in Japan. However, 1,008 hospitals and 8,617 doctors' offices were either razed by fire or severely damaged during the war. A recent survey reveals that only 300 of the damaged hospitals or dispensaries have been repaired. Due to the shortage of medical equipment and building materials, high cost of construction, and restricted funds, there seems to be little prospect that the future will offer any rapid improvement in the situation.

The shortage of medical supplies also shows little prospect of immediate improvement. Many of the pharmaceutical manufacturers' plants were destroyed in the war. Stocks of imported medical supplies, procured originally chiefly from the United States and Germany, have now been practically exhausted.

The occupation authorities have, of course, been conspicuously active in helping to relieve this condition. They have authorized the release of former army and navy stocks of medical supplies to civilian hospitals and general practitioners. They have been instrumental in facilitating the import of relief supplies of medical goods and of new drugs heretofore unknown in this country. They are furnishing technical advice to enable the Japanese to bring domestic production of drugs and medical supplies up to the standard of the more advanced countries.

Vernon, New York, and his patients are among the 550 dependent families of occupation personnel living in Tokyo. He also treats War Department women civilian employees who are too ill to betake themselves to the dispensary.

Lt. Linder, whose internship was spent at New York's Lennox Hill Hospital is attached to the 385th Medical Central Dispensary, which is responsible for the health of approximately 14,000 occupation personnel in the Tokyo area. Because of his assignment, however, he is rapidly becoming a specialist in children's ailments—there are about 350 occupation youngsters in Tokyo ranging from nine months to 16 years of age.

His chief complaint, however, is that it is harder to find out where

a stomachache," he says, describing a typical case. "She gives the GHQ house number and the Japanese street address and away I go. I even have a Military Police escort in emergency cases. But I sometimes spend as much as an hour poking in and out of alleys in the immediate neighborhood of the house because nobody thought to put up a sign at a main intersection showing where the house is. Suppose it really was an emergency?"

Lt. Linder makes anywhere from two to 10 calls with his little black bag every day.

He does not intend to bring his own wife and eight month-old baby to Japan, although he expects to spend another 18 months here.

"I studied the priority system on houses," he said. "I figure I'll be home before I'm eligible."

health insurance system throughout the nation with some 45,000,000 members and some 30,000 doctors supposedly looking after the needs of the members. However, in practice, this system has largely fallen into a state of uselessness. Since the price of medicine has increased thirty-fold on the average, while some common items like aspirin cost seventy times their former price, doctors have become prone to neglect their health insurance clients in favor of the more lucrative side business with cash customers. Very often only when special presents like rice and other foodstuffs are offered will some doctors consent to take adequate care of their patients.

Another matter for concern is the slowness with which reconstruction work on war-damaged hospitals is proceeding. Before the air raids, there were 3,950 hospitals and 32,055 medical offices in Japan. However, 1,008 hospitals and 8,617 doctors' offices were either razed by fire or severely damaged during the war. A recent survey reveals that only 300 of the damaged hospitals or dispensaries have been repaired. Due to the shortage of medical equipment and building materials, high cost of construction, and restricted funds, there seems to be little prospect that the future will offer any rapid improvement in the situation.

The shortage of medical supplies also shows little prospect of immediate improvement. Many of the pharmaceutical manufacturers' plants were destroyed in the war. Stocks of imported medical supplies, procured originally chiefly from the United States and Germany, have now been practically exhausted.

The occupation authorities have, of course, been conspicuously active in helping to relieve this condition. They have authorized the release of former army and navy stocks of medical supplies to civilian hospitals and general practitioners. They have been instrumental in facilitating the import of relief supplies of medical goods and of new drugs heretofore unknown in this country. They are

Vernon, New York, and his patients are among the 550 dependent families of occupation personnel living in Tokyo. He also treats War Department women civilian employees who are too ill to betake themselves to the dispensary.

Lt. Linder, whose internship was spent at New York's Lennox Hill Hospital is attached to the 385th Medical Central Dispensary, which is responsible for the health of approximately 14,000 occupation personnel in the Tokyo area. Because of his assignment, however, he is rapidly becoming a specialist in children's ailments—there are about 350 occupation youngsters in Tokyo ranging from nine months to 16 years of age.

His chief complaint, however, is that it is harder to find out where

a stomachache," he says, describing a typical case. "She gives the GHQ house number and the Japanese street address and away I go. I even have a Military Police escort in emergency cases. But I sometimes spend as much as an hour poking in and out of alleys in the immediate neighborhood of the house because nobody thought to put up a sign at a main intersection showing where the house is. Suppose it really was an emergency?"

Lt. Linder makes anywhere from two to 10 calls with his little black bag every day.

He does not intend to bring his own wife and eight month-old-baby to Japan, although he expects to spend another 18 months here.

"I studied the priority system on houses," he said. "I figure I'll be home before I'm eligible."

equipment and building materials, high cost of construction, and restricted funds, there seems to be little prospect that the future will offer any rapid improvement in the situation.

The shortage of medical supplies also shows little prospect of immediate improvement. Many of the pharmaceutical manufacturers' plants were destroyed in the war. Stocks of imported medical supplies, procured originally chiefly from the United States and Germany, have now been practically exhausted.

The occupation authorities have, of course, been conspicuously active in helping to relieve this condition. They have authorized the release of former army and navy stocks of medical supplies to civilian hospitals and general practitioners. They have been instrumental in facilitating the import of relief supplies of medical goods and of new drugs heretofore unknown in this country. They are furnishing technical advice to enable the Japanese to bring domestic production of drugs and medical supplies up to the standard of the more advanced countries.

But it should be more keenly realized that Japan should not lean on the help of others. Relief shipments can only be no more than a temporary expediency. Even with the help of the occupation authorities it will take many

775013

years of hard work to bring the situation to a really satisfactory state. The Japanese must exercise their own efforts to speed up their task of medical rehabilitation, and they must in the meantime leave nothing undone to alleviate the present stringency.

Specifically the black market trade in medical supplies should be more effectively curtailed. Investment of capital should be directed more toward the production of vital medicines and medical equipment than toward the production of less essential goods. The distribution of the 201 specified drugs which are now being rationed through local medical associations should be checked more carefully to prevent the diversion of the drugs into unauthorized channels. Priority should be given in the allocation of building materials for the repair and construction of hospital facilities.

The reorganized Japan Medical Association is presumably stimulating the doctors into vastly improved efficiency in meeting the obligations of the medical profession to society. But widespread reform in the work of improving the health facilities of the nation will not come about until the lay public also becomes fully conscious of the problems involved and brings the pressure of public opinion to bear on the task of solving these problems. Mere consciousness of the importance of improving public health is not enough. The public must arm itself with more specific information concerning the work which has to be done.

The Problem of Health Facilities

24 Dec 1946

With the advent of winter, the Japanese people are becoming more conscious than ever of the need for improving the health facilities of the nation. Everyone is aware enough that the inadequate diet from which the Japanese people have long suffered, the unsanitary aspects of the war-ravaged country, and the congested housing situation constitute health hazards which call for the greatest care if widespread disease is to be prevented. Such seasonal manifestations as the increasing amount of sniffing and coughing to be seen on the streets, on public transport facilities, and in the offices serve as reminders of the personal care which each individual must exercise.

But there are other facts concerning health conditions about which the general public should know more and about which public opinion should demand speedier remedy. For instance, hospital and dispensary facilities have been

S, MONDAY, DECEMBER 23, 1946

Patient's Home Is Harder to Find Than Diagnosing Sick, Says Doctor

...people have long suffered, the unsanitary aspects of the war-ravaged country, and the congested housing situation constitute health hazards which call for the greatest care if widespread disease is to be prevented. Such seasonal manifestations as the increasing amount of sniffing and coughing to be seen on the streets, on public transport facilities, and in the offices serve as reminders of the personal care which each individual must exercise.

But there are other facts concerning health conditions about which the general public should know more and about which public opinion should demand speedier remedy. For instance, hospital and dispensary facilities have been so neglected that in some localities it is often virtually impossible to obtain proper medical attention. Added to this situation is the growing scarcity of medical supplies, while such as are available are often being hoarded by black market operators for future speculation.

There has been an extensive health insurance system throughout the nation with some 45,000,000 members and some 30,000 doctors supposedly looking after the needs of the members. However, in practice, this system has largely fallen into a state of uselessness. Since the price of medicine has increased thirty-fold on the average, while some common items like aspirin cost seventy times their former price, doctors have become prone to neglect their health insurance clients in favor of the more lucrative side business with cash customers. Very often only when special presents like rice and other foodstuffs are offered will some doctors consent to take adequate care of their patients.

Another matter for concern is the slowness with which reconstruction work on war-damaged hospitals is proceeding. Before the air raids, there were 3,950 hospitals and 32,055 medical offices in Japan. However, 1,008 hospitals and 8,617 doctors' offices were either razed by fire or severely damaged during the war. A recent survey reveals that only 300

...the health facilities of the nation will not come about until the lay public also becomes fully conscious of the problems involved and brings the pressure of public opinion to bear on the task of solving these problems. Mere consciousness of the importance of improving public health is not enough. The public must arm itself with more specific information concerning the work which has to be done.

S, MONDAY, DECEMBER 23, 1946

Patient's Home Is Harder to Find Than Diagnosing Sick, Says Doctor

By PETER KALISCHER
UP Staff Correspondent

Perhaps the only United States army doctor whose patients are almost exclusively women and children practices in Tokyo and pays his calls in an army sedan.

This 26-year-old medico is Lieutenant Francis T. Linder, of Mount Vernon, New York, and his patients are among the 550 dependent families of occupation personnel living in Tokyo. He also treats War Department women civilian employees who are too ill to betake themselves to the dispensary.

Lt. Linder, whose internship was spent at New York's Lennox Hill Hospital is attached to the 385th Medical Central Dispensary, which is responsible for the health of approximately 14,000 occupation personnel in the Tokyo area. Because of his assignment, however, he is rapidly becoming a specialist in children's ailments—there are about 350 occupation youngsters in Tokyo ranging from nine months to 16 years of age.

His chief complaint, however, is that it is harder to find out where

his patients live than what's wrong with them.

This he attributes to mystifying street signs and the lack of directional markers indicating the whereabouts of occupation houses.

"Someone calls up and says she has a stomachache," he says, describing a typical case. "She gives the GHQ house number and the Japanese street address and away I go. I even have a Military Police escort in emergency cases. But I sometimes spend as much as an hour poking in and out of alleys in the immediate neighborhood of the house because nobody thought to put up a sign at a main intersection showing where the house is. Suppose it really was an emergency?"

Lt. Linder makes anywhere from two to 10 calls with his little black bag every day.

He does not intend to bring his own wife and eight month-old-baby to Japan, although he expects to spend another 18 months here.

"I studied the priority system on houses," he said. "I figure I'll be home before I'm eligible."

RAT EXTERMINATION PROVES SUCCESSFUL

5 Jan 1946
Sanitary Teams Controlling
Plague, Murine Typhus,
Declares Turner

Rodent control measures being taken by public health sanitary teams are proving most successful, E. A. Turner, Sanitary Engineer Consultant, Public Health and Welfare Section, SCAP, told the Japanese press Friday.

Mr. Turner gave credit to the teams, which systematically use poison bait to trap and eliminate the rat harborages.

"Rodent extermination is imperative in the control of plague and murine typhus, besides being an economic step, since rats consume great amounts of food," he said.

"The sanitary teams are organized and trained to carry on insect and rodent control and environmental sanitation on a systematic, national basis," Mr. Turner stated. "A team is composed of six or eight men and ward officials direct the activities within the ward. They in turn, are directed from the Metropolitan office which receives instructions from the prefecture level."

The specific work done by the teams depends upon the immediate problem confronting the area under consideration, Mr. Turner said. One of the big jobs is disinfection as a control against typhus and includes dusting individuals with DDT and spraying railroad cars and other public places with liquid DDT and pyrethrum. Mr. Turner added that insecticide should also be applied to the walls of an area each time spraying was accomplished so that, after the mist had cleared away, the residue would remain to continue the killing process.

Sanitary teams are projecting environmental sanitation into their communities through vigorous campaigns to clean up streets and vacant lots and through efforts toward proper disposal of refuse, garbage, and other waste material constituting a public health menace, Mr. Turner told the newsmen, since dwindling equipment and manpower during the war years almost eliminated public garbage disposal, and large areas are virtually without collection services. Until regular collection and disposal can be brought back into operation, sanitary teams are working tirelessly to spray, bury, or carry away all large accumulations of garbage and waste material, he added.

One of the important summertime projects to be tackled by the sanitary teams will be the curbing of malaria, encephalitis, and dengue through insect control, Mr. Turner stated. Prefectural health officers have already attended training schools to learn how to spray fly and mosquito breeding places, spread oil, DDT, and pyrethrum on stagnant ponds, and in rice paddies and fluxuate the water levels in lakes and ponds so as to kill insects at the larvaecidal stage.

"Japanese health officials and individuals within the communities form the backbone of sanitary teams throughout the islands, and I strongly feel that through their efforts unemployment can be reduced, disease epidemics can be controlled, and Japan will once again become the beautiful garden spot it used to be," Mr. Turner concluded.

STATE RESPONSIBLE FOR MEDICAL CARE

8 Jan 1946
Relief Ordinance Affects All
Japanese Working for
Occupation Forces

Attempting to inform all Japanese on duty with the Occupation Forces of the medical benefits to which they are entitled, the Japanese Government has been directed to disseminate full information regarding the Employee's Relief Ordinance Public Health and Welfare Section, SCAP, announced Monday.

The Employee's Relief Ordinance was set up in 1918, absorbed its last amendment in 1936, and was interpreted in May 1946 to include Japanese on duty with the Occupation Forces. Under the provisions, full responsibility rests with the Japanese Government to provide medical care, hospitalization, and disability and death benefits for accidents or illnesses incurred by Japanese in connection with their duties with the Occupation Forces. Interpretation of this ordinance includes Japanese who are employed as servants in Occupation Forces dependents' homes.

Allowances provided by the Employee's Relief Ordinance are divided into six parts:

(1) The doctor's fee is paid monthly to an employe who has been injured or has become ill and needs attention in cases where he does not receive the required operation or treatment at the Government's expense.

(2) The allowance for resting from work is paid monthly to an employe who is recuperating from an accident or an illness and therefore is not receiving his regular wages.

(3) Disability allowance is paid an employe who still retains some bodily impediments upon recovery from an injury or a disease.

(4) Disability allowance in a lump sum is paid to an employe who, three years after an operation or treatment, is still not recovered from an injury or disease.

(5) Bereavement allowance is paid immediately either to the family of the dead or to any person who, at the time of his death, was living by his income.

(6) Funeral expenses are paid immediately to the family of the dead employe or to any person who, at the time of the employe's death, was living by his income and is to hold burial service. In case there is neither family nor close associate to hold the burial service, the expenses are paid to any acquaintance of the deceased who will offer to conduct the burial.

In compliance with this responsibility for medical care, the Government has also been directed to provide suitable facilities immediately. Six municipal hospitals in Tokyo have already been named as medical centers to care for Employee's Relief Ordinance patients and small dispensaries, under prefectural direction will open soon.

Arkin
1572

MAINICHI SHIMBUN (English)

20 March 1948
Circulation: 72,000
Tokyo: 4,000

Tuberculosis Conf.

Closer Liaison Aimed Between All Sanatoria

TOKYO, Mar. 17.—Tokyo Military Government Team officials announced that the attendance at their Tuberculosis Conference held March 16 was very gratifying.

This conference was held in the Welfare Ministry here in an effort to effect closer liaison between national and private tuberculosis sanatoria and the health centers throughout Japan.

The conference was widely attended by representatives of the medical profession, including directors and nurses of tuberculosis sanatoria.

Representatives of municipal institutions and medical associations also attended.

The procedure of tuberculosis control in the United States was outlined by Dr. A.R. Manitoff, public health officer of Tokyo Military Government Team.

Dr. Koyama, chief of the Tokyo Health Bureau, formed a committee to establish a close liaison between private physicians, national tuberculosis sanatoria and health centers in the Tokyo area.

He stated that the main objective of this committee is to adopt uniform case reporting procedures throughout the best possible treatment and case supervision.

Many lives will thus be saved and spread of this dread disease will be prevented.

Total attendance at the conference numbered 600 interested persons, including high ranking public health officials from SCAP, Headquarters Eighth Army, and members of the Welfare Ministry.

Tokyo Military Government officials expressed their pleasure at such a large attendance at this first Tuberculosis Conference in Japan, and further stated that this was a very important step in the right direction for the treatment of tuberculosis.

Asahi Newspaper 15. 3. 1948

Publicity
file

Bread Poisoning Again !

In a dormitory of a religious organization " SEI CHO NOIYE" owned by Mr. Gashun Taniguchi, (address: 5, Hinokimachi, Akasaka, Minato Ku, Mr. Iida, the accountant of the dormitory - 27 years old- and other 12 got poisoning symptoms, such as swellings on their faces, vomituration and diarrhea when they ate to dinner of the 9th. to breakfast and to lunch of the 10th. breads and rolls allocated at noon of the 9 th. by the Naruse Bakery (12 Ryudo cho- Azabu, Minato Ku)

Moreover, 21 members of this dormitory got the same symptoms when they ate thrice up to the lunch of the 13th. breads allocated on the 12th. from the same bakery.

On the 14th. Engineer Ono of the Metropolitan Police Office stays on that place of occurrence and makes investigations ~~on the 14th.~~

file - health

Unknown Malady Claims Victims in 3 Prefectures

Strange Sickness Which Claimed 57 Lives in Niigata Spreads to Other Districts

The strange unknown ma-
lady which took 57 lives in
Niigata since January is
spreading to three other
neighboring prefectures, the
Asahi reported.

Yamagata Prefecture reveal-
ed 2,200 persons were stricken
recently, while Nagano and
Gumma reported 400 and 30
patients, respectively.

At no place has the disease
been identified.

Whereas in Niigata, only
adults over 20 years old fell
victim to the unknown sick-
ness, stricken patients in
Nagano and Yamagata prefec-
tures were elementary and
high school students.

In the village of Shirataka
in Yamagata Prefecture, more
than 200 children fell sick
simultaneously. The village
elementary and high schools
were closed for five days from
April 27 and May 1.

Ninety-eight high school
students and 288 grammar
school children fell ill on April
27 in the village of Shiojiri
in Nagano Prefecture. Schools
were closed for one week.

While the medical authori-
ties are trying to discover
what the strange disease is,
the Ueda Sanitation Station
believes that it was a cold
brought by fatigue, since the
symptoms were first seen
among high school students
following an outing.

Several cases reported from
Yokohama bear a resemblance
to the strange malady. Isami
Ohori, 63-year-old resident of
Yokohama, died on the morn-
ing of April 27, after showing
such symptoms as diarrhoea,
vomiting and muscular stric-
tures.

His wife also fell sick of
the same disease.

U
A
I

5

n

tr

ri

to

su

Ja

ec

g

r

t

r

J

in

m

te

ni

cc

re

Anti-Typhus Campaign

12 Mar
With only sporadic cases of eruptive typhus being reported since the beginning of the year, indications are that effective control is being maintained over this disease. Public health authorities have been carrying out a noteworthy campaign of education and of DDT dusting, and its success is evidenced by the paucity of reported typhus cases.

However, it is important for the public and the authorities to remember that annually from January until the peak month of May, several thousand cases of typhus occur. Last year, for example, 1,904 persons were reported as typhus cases, and 928 of these died.

Existing conditions, such as malnutrition, inadequate housing, congested transportation, shortage of medicine and lack of proper sanitation, provide a fertile ground for disease epidemics in Japan. To combat eruptive typhus this year, the Epidemic Prevention Section of the Metropolitan Government has been dusting public conveyances periodically with DDT, and this month it has planned compulsory inoculation of rail commuters as well as large-scale DDT dusting of traffic centers, factories, hospitals and private homes.

One danger in regards to eruptive typhus is the common error of diagnosing typhus as influenza or bronchial catarrh, and it is not until the disease had reached an advanced stage that the true cause is learned. In line with the program of educating the public, it is pertinent to issue simple explanations of the symptoms and treatment of this disease.

Since it is generally among the less educated and poorer class of people that the loathsome typhus-bearing lice are found, a special program must be directed to explain the preventative means.

Improvement of general economic conditions is the fundamental step towards preventing disease. But until adequate housing, rationing of soap and disinfectant, less congested transport facilities and more laundries become available, the brunt of the campaign to check disease is on the public health agencies. A broad educational program, practical anti-epidemic measures and constant vigilance are essential to the success of the campaign against disease. The role of the press and radio as the chief media of information cannot be overlooked. Schools play an important part in educating the children and thus in reaching the home. The public must cooperate with DDT spraying teams, and inoculation units. Public health can be protected only through joint action on the part of the people and the authorities, the private citizens and the physicians.

Complete elimination of eruptive disease must be the goal of the current campaign.

DISCUSS TUBERCULOSIS PREVENTION



A ceremony marking the inauguration of the Tokyo Women's Committee for Prevention of Tuberculosis was held last week at the Nippon Ishikai Hall at Kanda. With Dr. Yayoi Yoshioka, chairman of the committee, in the chair, some 100 women discussed plans for a nationwide campaign against the white plague. *25 March*

EIGHT ARE HIT BY SMALLPOX

19 Mar
**One Patient of Construction Firm
In Tokyo Suburbs Succumbs**

Four confirmed and four suspected cases of smallpox broke out recently among workers at Fukusei town, Nishi Tama County, western suburbs of Tokyo. One confirmed patient died last Saturday after having been hospitalized. The origin of the disease has not yet been traced, reported Kyodo.

All of the confirmed and suspected patients were living in a dormitory of the Hazama-gumi, construction firm, at Fukusei.

U.S. PHYSICISTS NOT IN FAVOR OF GERMAN SCIENTISTS IN U.S.

March
Atomic Scientists Feel
Former-Nazi Workers
May Endanger Security

WASHINGTON, March 2 (INS)—The Federation of Atomic Scientists has carried to President Truman its protest against the army's program for bringing German scientists to the United States.

It was disclosed that a letter from the federation strongly criticizing the program is before President Truman.

Objections to the presence in this country of German technicians was raised by the group of atomic scientists on the grounds of national security.

The federation, headed by Cornell University Physics Department's Dr. Robert P. Wilson, wants foreign personnel returned to their homeland as speedily as possible; the number of them in America held to an absolute minimum; denial of any requests for citizenship; and prohibition of their employment in private industry, research laboratories and colleges.

Federation officials previously disclosed the organization's fear that national security might be endangered by German scientists working in this country on top military research and development of projects.

One official maintained that the majority of skilled Germans held important positions in the Third Reich during the war.

This position was taken despite emphasis placed by the War Department on detailed security precautions said to be taken by the army.

The department said no scientist began work on any project until he was carefully screened as to political background.

Students of Post-War Japan Turning to Medical Careers

March
Post-war Japan's youths are bent on taking up medical careers, entrance applications to the Tokyo Imperial University indicate. Proportionately more students are seeking admission to the medical than any other course, a survey conducted by Kyodo indicates.

On the other hand, there are less applicants for admission to the engineering department of the university, reversing the position that existed during the war.

By February 27, the day before the deadline for applications for entrance into the university, 3,450 persons filed applications for a total of 2,641 seats available in the various departments of the university. There were 20 women among the applicants most of whom were students who expect to be graduated from higher schools this spring. There were discharged soldiers who constituted 10 per cent of all who applied by February 27.

The departments of the university in the order of popularity among the applicants are the medical, agriculture, law, literature, economic, engineering and science.

Prince Mikasa is to study Western history under Professor Kenji Nakayama as a research student. So he will not take the entrance examination which is to be held in the middle of March. Every person wishing to take the examination must pay ¥100.

Detailed figures for applicants who filed papers by February 27 are:

Medical Department: medical

section, 200 applications for 80 seats; and pharmaceutical section, 150 applications for 30 seats. There are no women or discharged soldiers among the applicants.

Agricultural Department: 580 applications for 275 seats. There are two women applicants. The more popular sections are the agricultural chemistry and fisheries.

Law Department: 1,000 applications for 650 seats. There are three women and 300 discharged soldiers among the applicants.

Literature Department: 400 applications for 350 seats. There are 10 women among the applicants. Many graduating students of higher schools in and around Tokyo are expected to file applications by the end of February. The total number of applicants will reach 1,000, and half of them will be discharged soldiers.

Economic Department: 270 applications for 400 seats. There is no woman applicant. The indication is that the total number of applicants will not exceed the number of seats.

Engineering Department: 700 applications for 705 seats in the first and second sections into which the department is divided. The number of applications is expected to increase by 300. Most applicants wish to be admitted to the civil engineering section instead of to the machinery and electricity sections as was the case during the war.

Science Department: 150 applications for 151 seats. There are five women applicants.

BIRTH, DEATH RATES SHOW BIG INCREASE

7. Mar
Tuberculosis Tops List Of
Mortality in January; More
Marriages Seen

Vital statistics for December 1946 and January 1947 as announced by the Cabinet Statistics Bureau on Monday reveal that in January there was approximately 50 per cent more births registered all over Japan than in December.

In January there were 275,221 births and 117,489 deaths while in December there were 183,029 births in contrast to 99,882 deaths. In respect to age the highest mortality rate was those over 60 years with 36,107 deaths. Among infants the toll was greatest with 17,168 deaths of babies up to one year of age.

Although the number of deaths is not as high as the number of births, there has been a 15 per cent increase with tuberculosis the biggest cause of deaths both in December and January.

In regard to marriage statistics 6,649 marriages were registered in December. There was a 12.9 per cent increase in January.

PENICILLIN PLANT OPENS

12 Mar
SCAP Officials Attend Ceremony at
Toyo Rayon Firm in Otsu

Japan's first plant for the mass production of penicillin was formally opened yesterday at Otsu by the Toyo Rayon Company.

The first of several pilot plants in Japan utilizing the tank process of penicillin production, the new plant is designed to provide the Japanese pharmaceutical industry with vitally needed experience and background for large-scale production of the miracle-working drug.

Speaking at the opening Dr. Jackson W. Foster penicillin consultant, of SCAP's Public Health and Welfare Section said, "The Toyo Rayon Company, its president, Mr. Shige Tashiro, and particularly the engineering and technical staff, are to be congratulated on being the first to produce penicillin in Japan by the tank process and on having completed the design and construction of this plant in three months."

Also present at the ceremonies were Col. Crawford F. Sams, Chief of the Public Health and Welfare Section, Lt. Col. B.N. Riordan, Chief of the Supply Division of PH&W, and several officials of the Japanese Welfare Ministry.

CONFIDENTIAL

PRESS RELEASE

This news item was released by Tokyo Military Government Team 17 March 1948.

TUBERCULOSIS CONFERENCE AT WELFARE MINISTRY WELL RECEIVED

Tokyo Military Government Team officials announced today that the attendance at their Tuberculosis Conference held 16 March 1948 was very gratifying. This conference was held in the Welfare Ministry Tokyo in an effort to effect closer liaison between national and private Tuberculosis Sanitoria and the Health Centers throughout Japan. The conference was widely attended by representatives of the medical profession, including directors and nurses of Tuberculosis Sanitoria. Representatives of municipal institutions and medical associations also attended.

The procedure of Tuberculosis control in the United States was outlined by Dr. A.R. Manóttoff, Public Health officer of Tokyo Military Government Team. Dr. Koyama, Chief of the Tokyo Health Bureau formed a committee to establish a close liaison between private physicians, National Tuberculosis Sanitoria and Health Centers in the Tokyo area. He stated that the main objective of this committee is to adopt uniform case reporting procedures throughout the prefecture. This will afford Tuberculosis sufferers and their families the best possible treatment and case supervision. Many lives will be saved and spread of this dread disease will be prevented.

The committee established will start a group of conferences this week so that no time will be lost in the important program. The committee selected is composed of the following noteworthy personages:

Dr. H. Haruki	-----	Supt. Natl. Tuberculosis Sanitorium	-- Nakano-ku
Dr. M. Sunahara	----	Supt. Natl. Tuberculosis Sanitorium	-- Kioje
Dr. J. Kurosawa	----	President, Tokyo Medical Association	
Dr. K. Hashimoto	---	Supt. St. Lukes Hospital	
Dr. Koyama	-----	Director, Tokyo-to Health Bureau	
Dr. Terada	-----	Hospital Chief, Tokyo-to Health Bureau	
Dr. M. Katsumata	----	President Japan Tuberculosis Association	
Dr. Kato	-----	Chief of Sanitorium affairs of the Ministry of Health	

Total attendance at the conference numbered 600 interested persons, including high ranking Public Health officials from SCAP, Headquarters Eighth Army, and members of the Welfare Ministry.

Tokyo Military Government officials expressed their pleasure at such a large attendance at this first Tuberculosis Conference in Japan, and further stated that this was a very important step in the right direction for the treatment of Tuberculosis.

Significant Tuberculosis Conference
Held in Welfare Ministry

A Tuberculosis Conference was held 16 March at Welfare Ministry with an objective of establishing a close liaison between the directors of Private and National Tuberculosis Hospitals and Health Centers throughout Japan in order to prevent the spread of the dread disease of tuberculosis. In the conference, the procedures of tuberculosis control in the United States were outlined by Dr. Manitoff, Public Health officer of Tokyo Military Government Team.

TOKYO TIMES

19 March 1948
Circulation: 180,000
Tokyo: 100,000

