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25 Kosei No. 1993

Date: 13 Oct 50

From: PHD Chief, Nagasaki Prefecture

To: PHS Chief KCAR

Attendant to 2nd Refresher Course for Chemical Examination in 1950

Name: Seisuke Terada

Date of Birth: 17 December 1911

Address: No. 886, Nagayo-mura, Nishisonogi-gun, Nagasaki Prefecture

Job Title: Nagasaki prefectural engineering employee

Place of service: Examination and Inspection Room PHS, PHD, Nagasaki Prefecture

Period: From 30 October to 23 December 1950

Translated by Kumabe
Date translated: 20 Oct 50

Sanitary Activities
Report On Nath Miyakonojo
Hospital Miyazaki Pref

概況報告書

昭和二十五年十月二十五日

国立都城病院

概況報告

(一)一般狀況

當病院は昭和二十年十二月初旬舊陸軍病院より移轉して現在に至つた
內科、外科、小兒科、産婦人科、眼科、耳鼻咽喉科及び齒科を有する綜合
病院であり敷地面積は約一萬四千坪建物延坪約三千五百坪である
建物は元川崎航空機株式会社の工員寮舍或は鍛練工場として使用して
居たものに若干の改造を加へたものであり元來病院として建築された
ものでないから決して良好とは申されないが位置は都城市の東北側に
所在し都城驛から約八百米を距て日豐線、志布志線及び吉都線の分岐
點にある事及び宮崎市の県立病院を除いては附近一帶に綜合病院がな
いので都城市内は勿論之等鐵道沿線からの利用患者が相當數に達して
みる現狀である

(二)從業員概況

別表の通りであるが入院外來患者共急增せる今日現在の當官定員では
過少であり目下本省に對して二名の增員内申中である

職種	現在員	備考
醫師	一六	内科五、外科五、産婦人科二、眼科一、耳咽科一、小兒科一、齒科一
藥劑師	三	
レントゲン	二	内一名補助者
看護婦	七二	
事務員	三五	庶務八、醫事四、調劑手三、病理一、營養四、会計一二、藥劑一、レントゲン一、学院一（病理学院は看護婦の定員）
磨工	一	
病理	三	
汽鋳士	二	
掃除婦	一六	病棟一〇、クラブ一、看宿一、作業四（九名は看護婦の定員内）
電話交換手	一	

Prophesies
Doctors
Pharmacist
X-rayer
Nurses
Clerks
Polisher
Photographer
Boilermen
women
Cleaners
Telephone girl

No. present

Remarks

職種	現在員	備考
歯科医師	一六	内科五、外科五、産婦人科二、眼科一、小児科一、歯科一
薬剤師	三	
レントゲン	二	内一名補助者
看護婦	七二	
事務員	三五	庶務八、医事四、調剤手三、病理一、営養四、会計一二、薬剤一、レントゲン一、学籍一（病理医付看護婦の定員）
病理	三	
技工	一	
汽缶士	二	
掃除婦	一六	病棟一〇、タラプ作業四（九名は看護婦の定員内）
電話交換手	一	

タイピスト	水道手	牧夫	巡視	作業手	自動車運転手	マッサージ手	營繕手	小使	被服縫	幽科技工	計
一	一	六	二	三	二	一	一	一	一	一	一七

タイピスト	水道手	炊夫	巡視	作業手	自動車運転手	マッサージ手	營繕手	小使	被服縫	臨科技工	計
一	一	六	二	三	二	一	一	一	一	一	一七

(三)患者概況

患者は入院外來共急增の傾向を辿り本年九月に於ける定員に對する一ヶ月平均實績を視るに次の通りである

外來定員　百八十名　實數　二六六、三名

入院定床　二百三十名　三七六、七名

其他詳細別表の通りである

No. In-patients & Out-patients during September

九月科別外來患者調查表

科別	入院			外來		
	新患延數	患者延數	一日平均患者數	新患延數	患者延數	一日平均患者數
	In-patients			Out-patients		
內科 Internal medicine	New cases 二二 22	Total No. case 四五六七 4567	Daily Average 一五二二 1,522	New cases 三〇三 303	Total No. case 一、四六五 1,465	Daily Average 五八六 586
小兒科 Pedietry	三 3	六二五 625	二〇八 208	一二三 123	六五四 654	二六二 262
外科 Surgery	二五 25	二、二三一 2,231	七四四 744	二三二 232	一、一五六 1,156	四六二 462
產婦人科 Gynaecology	二九 29	五〇八 508	一六九 169	一二一 121	四九六 496	一九八 198
眼科 Ophthalmology	一 1	二六六 266	八九 89	八六 86	一、五九二 1,592	六三七 637
耳鼻咽喉科 ENT	四 4	一〇三 103	三四 34	九四 94	五七七 577	二三一 231
齒科 Dentistry	〇 0	〇 0	〇 0	七六 76	七一八 718	二八七 287
計 Total	八四 84	八、三〇〇 8,300	二七六九 2,769	一、〇三五 1,035	八、六〇八 8,608	二、六六三 2,663

No. In-patients & Out-patients during September

九月科別外來入院患者調查表

科別	入院			外來		
	新患延數	患者延數	一日平均患者數	新患延數	患者延數	一日平均患者數
	In-patients			Out-patients		
內科 Internal medicine	二二 22	四五六七 4567	一五二二 152.2	三〇三 303	一四六五 1465	五八六 58.6
小兒科 Pediatry	三 3	六二五 62.5	二〇八 20.8	一二三 123	六五四 654	二六二 26.2
外科 Surgery	二五 25	二二三一 223.1	七四四 74.4	二三二 232	一一五六 1156	四六二 46.2
產婦人科 Gynaecology	二九 29	五〇八 50.8	一六九 16.9	一二一 121	四九六 496	一九八 19.8
眼科 Ophthalmology	一一	二六六 26.6	八九 8.9	八六 86	一五九二 159.2	六三七 63.7
耳鼻咽喉科 ENT	四 4	一〇三 10.3	三四 3.4	九四 94	五七七 577	二三一 23.1
齒科 Dentistry	〇 0	〇 0	〇 0	七六 76	一七一八 171.8	二八七 28.7
計 Total	九四 94	八三〇〇 830.0	二七六七 276.9	一〇三五 1035	六六五八 665.8	二六六三 266.3

No. cases from 15 October to 21

前週（自十月十五日至十月廿一日）に於ける患者調査表

科別	入院 In-patients 新患延數 New case	入院 患者延數 Total No. case	入院 一日平均患者數 Daily Ave.	外來 Out-patients 新患延數 New case	外來 患者延數 Total	外來 一日平均數 Daily Average
內科 Internal medicine	二〇 20	九九三 993	一四一九 1419	七七 77	三五一 351	五八五 585
小兒科 Pediatry	〇 0	一三八 183	一九七 197	二七 27	一六三 163	二七二 272
外科 Surgery	一六一 161	五二五 525	七五〇 750	八二 82	三二三 323	五三八 538
產婦人科 Gynecology	一五 15	一〇〇 100	一四三 143	二七 27	一〇四 104	一七三 173
眼科 Ophthology	〇 0	六三 63	九〇 90	一六 16	三九〇 390	六五〇 650
耳鼻咽喉科 ENT	一 1	二二 22	四六 46	二二 22	一四一 141	二三五 235
齒科 Dentistry	〇 0	〇 0	〇 0	二五 25	一七一 171	二八五 285
計 Total	五二 52	一八五一 1851	二六四五 2645	二〇六 206	一六四三 1643	二七三八 2738

九月費用区分別患者調

区分 / 費用区分	入院				外来			
	延数	%	入院の免除は学院生徒		延数	%		
健康保険	一、〇四二	一二、六			九七〇	一四、六		
国民健康保険	七七一	九、三			三一八	四、八		
共済組合	一、七九七	二一、七			一、二八四	一九、三		
生活保護法	二、九三三	三五、三			一、六七四	二五、一		
給與法	五六〇	六、七			七五	一、一		
労災保険	七五	〇、九			一〇九	一、六		
自費	一、〇九二	一三、二			一、八一七	二七、三		
免除	三〇	〇、三			四一一	六、二		
計	八、三〇〇	一〇〇			六、六五八	一〇〇		

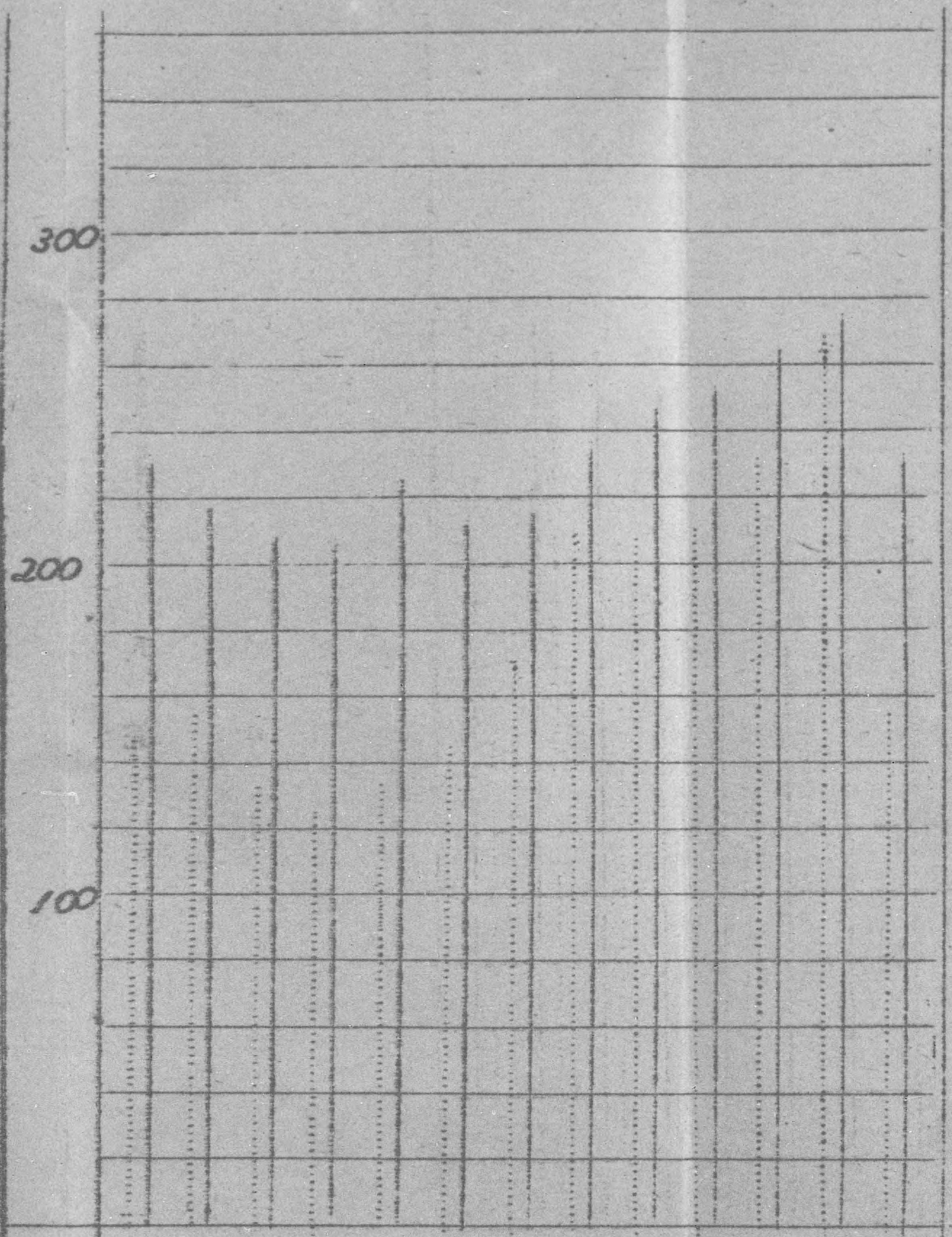
List of Comparison of T.B cases and general cases Hospitalized in September.

九月中に於ける入院患者中一般患者に對する結核患者比較表

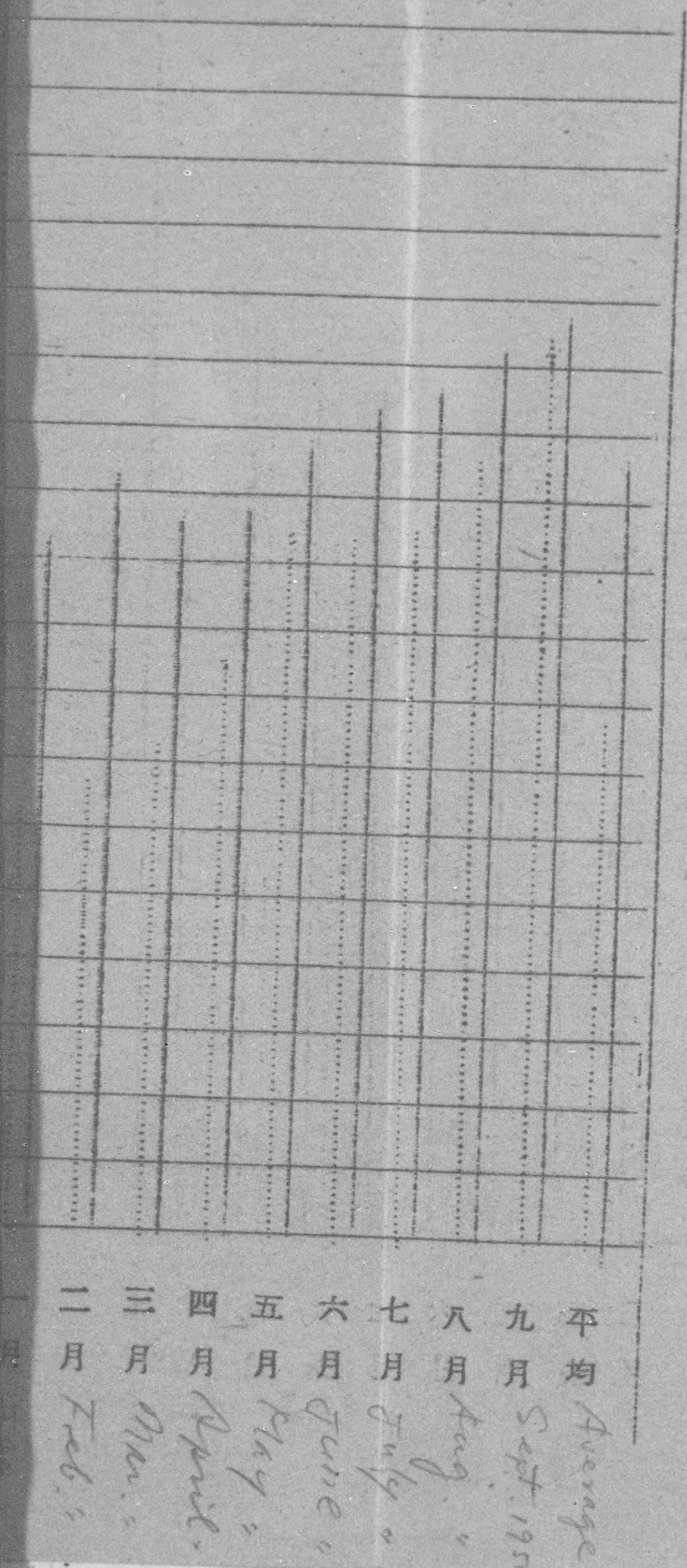
区分	延數 Total No.	%	
結核性疾患	五、八九五 5,895	71.0 七一、〇	肺尖加答兒 五三六七 その他の結核 五三八
その他一般	二、四〇五 2,405	29.0 二九、〇	
計	八、三〇〇 8,300		

T.B cases
general cases
Total

自昭和二十四年十月
至昭和二十五年九月 月別一日平均入院患者(外来)表



Daily Average Number of In-patients and Out-patients from October 1949 to September 1950.



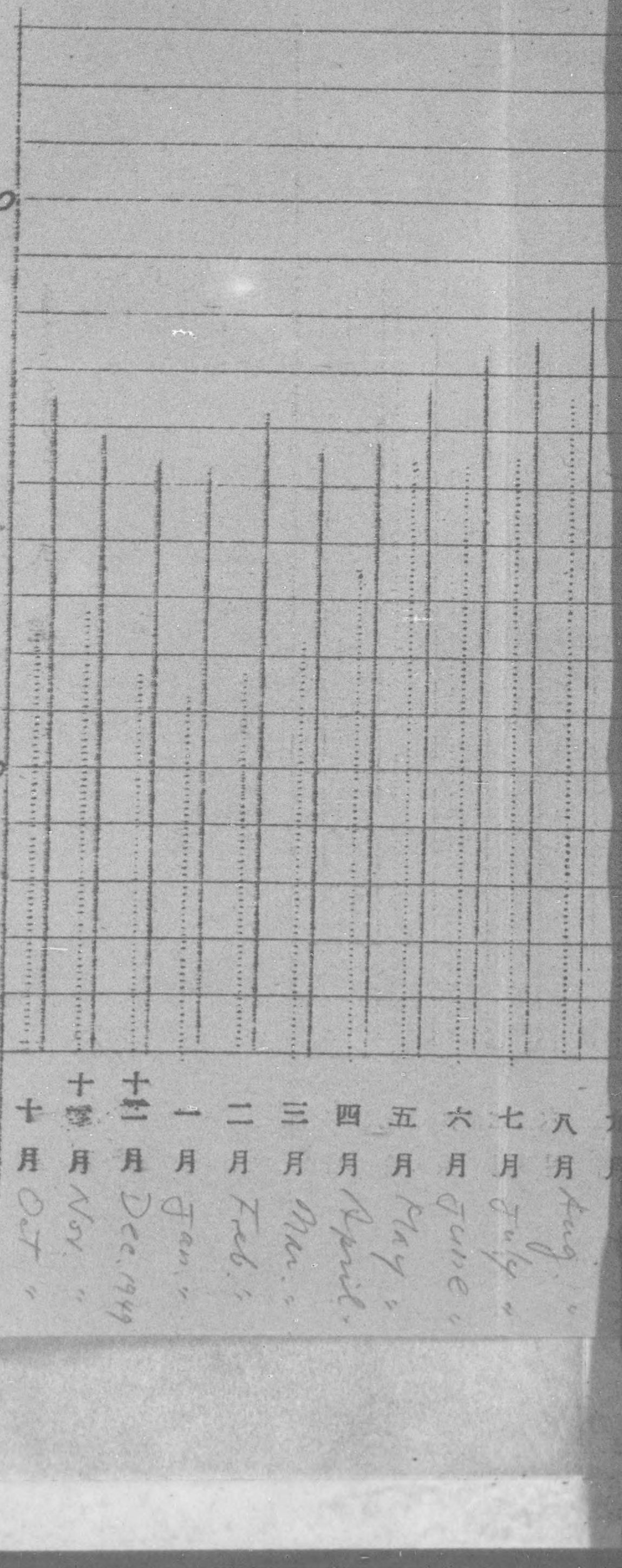
外来入院

Out-Patients

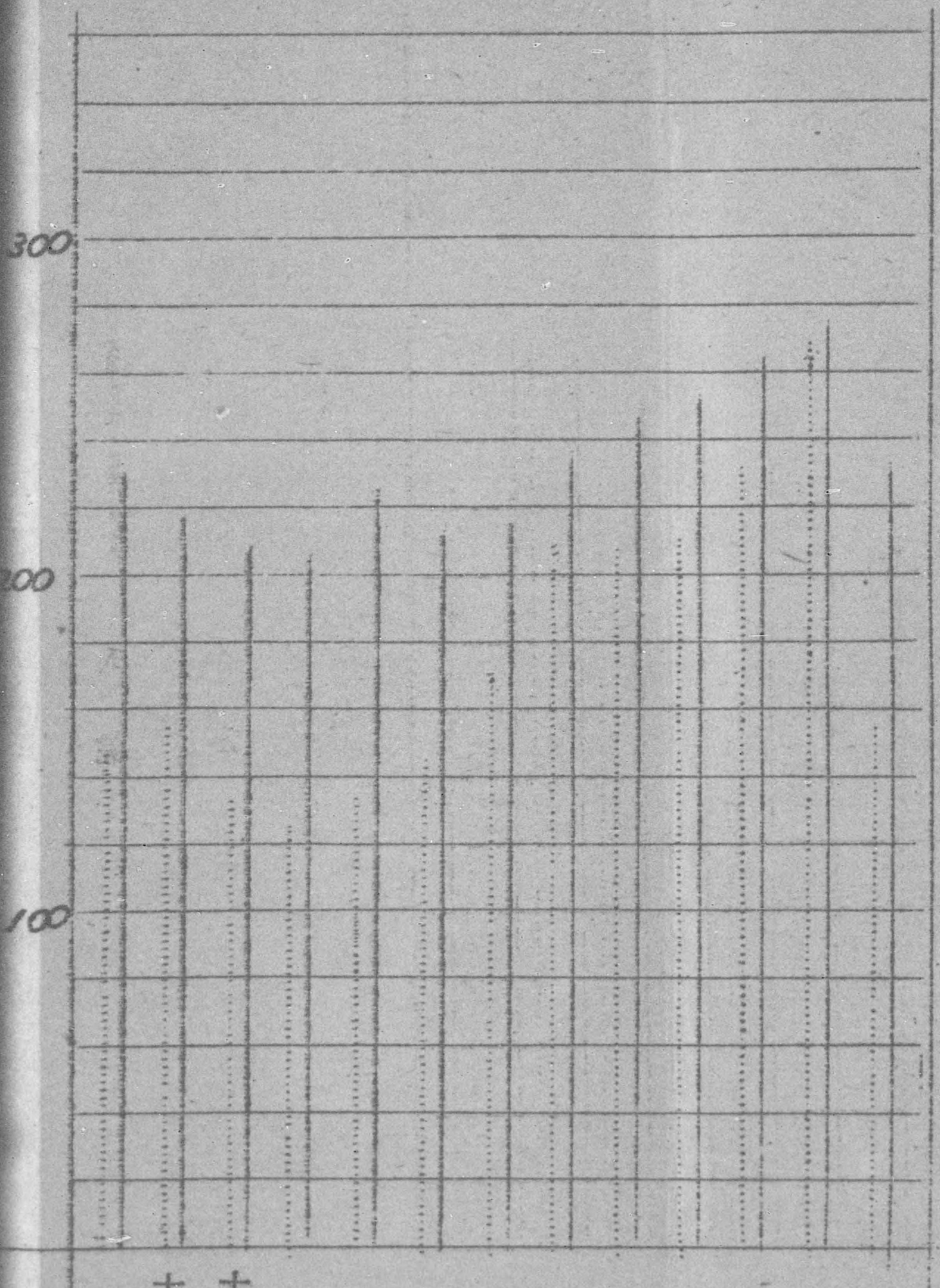
Out-patients

Average
Sept. 1954
Aug. "
July "
June "
May "
April "
Mar. "
Feb. "

自昭和二十四年十月
至昭和二十五年九月 月別一日平均入院(外来)患者表



Daily Average Number of In-patients and Out-patients Attended Orthopaedic Clinic from October 1948.


300
200
100
入院
外來
Out-Patient
Out-patient
月別
十二月 Dec. 1946
十一月 Nov. "
十月 Oct. "
一月 Jan. "
二月 Feb. "
三月 Mar. "
四月 April "
五月 May "
六月 June "
七月 July "
八月 Aug. "
九月 Sept. 1947
平均 Average

(四) 月別給食人員及榮養價一覧表

カロリー表

月別	一日平均給養人員 並食	軟食	流動食	熱量	蛋白質 g	脂肪 g	糖質 g	カルシウム mg	鐵 mg	燐 mg	ビタミン A iu	B1 mg	B2 mg	C mg
4月	203	9	1	2367	84.7	38.7	——	392.0	102.7	——	6965	1.54	1.17	16.2
5月	222	12	1	2316	85.0	40.7	——	407.0	101.0	——	7661	1.48	1.20	17.8
6月	224	13	1.2	2356	83.5	41.0	——	402.0	88.0	——	7800	1.37	1.40	16.7
7月	231	13	0.4	2305	76.0	41.4	416.0	301.3	44	1720	14180	0.96	0.48	38.0
8月	240	12	1	2548	86.2	40.7	448.2	347.1	55.3	1844	8327	1.2	1.61	18.3
9月	254	12.4	1.9	2600	85.6	33.1	454.4	386.3	60.16	1852	8216	0.95	0.51	41.02

25 So.No.210

Date : March 28,1950
From : Sanitation Dept.chief,Kagoshima-ken
To : Public Health Section chief,K.C.A.R.

Subject : Report on Medical Aid by the Living Protection Law.

We,hereby,transmit the separate reports presented by the Doctors Association and the Dentists Association in Kagoshima Prefecture concerning the above-mentioned subject.

.....

Ka Ken Shi Hatsu N.148

Date : March 23,1950
From : Mizuho Kora,President
Kagoshima Prefectural Dentists Association Inc.
To : Public Health Section chief,K.C.A.R.

Subject : Report on Acutual Conditions of the Medical Protection Law.

Concerning the above-mentioned subject of which you indicated,we, hereby,inform you that at present a very few utilize dentists. As for Kagoshima Prefecture,the procedure and other items are no hindrance as the present statas quo,but we earnestly hppe that the filling should be recognized in the whole nation because it is recognized partially not universally according to locality.

.....

Ka Ken I Hatsu No.76

Date : March 27,1950
From : Eizo Tahira,President
Kagoshima Prefectural Dovtors Association
No.5o6,Take-machi,Kagoshima-shi
To : Sanitation Dept.chief,Kagoshima-ken

Subject: Survey Report Concerning Medical Aid for Those Who Required Aid by the Living Protection Law.

We ask to be informed ##/### to K.C.A.R the following items of which we have been requested to investigate from Mr.Brown and Mr.Jouney who came Kagoshima on March 9.

Notes:

Report on Medical Aid for Those Who Required Aid by the Living Protection Law.

I. Pro & Con on Acutual System and Enforcement.

The acutual system is good,but the selection of those who required aid is insufficient and in order to expect the smooth management, every city,town or village should be appointed one physician representative as to an adviser of the Welfare Committee.

II. Points to be revised on the Acutual system.

a. Simplification of the procedure with which patients are able to ask examination simply.

b. Abolishment of stamping private seal at every medical examination from those who received treatment because it is ignored the personality of physicians.

c. The claim on the medical e amination charges should be revised as the same form with that on the Health Insurance and established an investigation organ.

III. Payment Conditions of the Medical Treatment Charges.

Generally speaking payment is satisfactory at municipal area, but it is delayed more 7 or 8 months at some county areas. Therefore we desire it should be paid surely and quickly at every month.

The End

二五總第二一〇號

昭和二十五年三月二十八日

鹿児島縣衛生部長

福岡民事部公衆衛生課長殿

生活保護法による醫療扶助に関する報告について

標記の件について本縣醫師會及び歯科醫師會より別残の通り報告書が提出されたから進達致します

鹿児島縣印刷所印刷

三五總第二一〇號

昭和二十五年三月二十八日

福岡民事部公衆衛生課長殿

鹿兒島縣衛生部長

生活保護法による醫療扶助に関する報告について

標記の件について本縣醫師會及び歯科醫師會より別紙の通り報告書が提出されたから進達致します

別紙

鹿兒島縣印刷所印刷

鹿縣歯發第一四八號

和廿五年參月廿參日

社團法人鹿兒島縣歯科醫師會

會長　高良瑞穂

福岡民生部公衆衛生課長殿

医療保護法現況報告

御指示になりました標記の件に関しましては現在歯科の利用は極めて少数でありますが本縣に於ては手続其の他現在の通う差支ありませんが補綴がしてある処とない処があります。

で之を全面的に認めらるゝよう希望致します。

右報告申上げます。

鹿縣醫發第七六號

昭和二十五年三月二十七日

鹿兒島市武町五〇六番地

鹿兒島縣醫師會

會長　田平　繁造

鹿兒島縣衛生部長　殿

生活保護法による要援護者の醫療扶助に關する調査報告について

曩に三月九日福岡民生部より來鹿せられたるブラウツ、デヤーニー兩氏に面接の際命ぜられました、標記調査事項左記の通りにつき、これが福岡民生部宛報告方宜しく御願い申上げます。

記

生活保護法による要援護者の醫療扶助に關する報告

一、現行制度の可否及實施

現行制度は可なるも要援護者の選定に不充分の點あり、又運營の

圓滑を計る爲め各市町村は民生委員會顧問に醫師代表一名宛を置くべきである。

二、現行制度の改正すべき點

1 患者は最も簡易な手續方法により受診出來るようにすること。

2 診療の都度受診者の認印をとるが如き醫師の人格を無視せる方法は止めること。

3 診療報酬請求書は、健康保險のものと同一樣式に改め審査機關を置くこと。

三、治療費支拂狀況

市部は良好なるも一部部部においては、七、八ケ月以上遲延しいるところあり、毎月確實迅速なる支拂を望む。

INTER OFFICE ROUTING SLIP

KYUSHU CIVIL AFFAIRS REGION

APO 24 UNIT 5

Ind No.	Date	From	To	Subject: Request to spray DDT from Cpl Dreer to Kokura Health Center
1	17 June 1950	Chief	P.H. Sect. attn Dr Brown	This is properly a matter for the Public Health Section to handle direct with Surgeon 24 Div as recommended. Sending paper to this office merely create a delay. As a future policy, all such problems should be solved by your office d/o reference to anyone else in this HQ unless difficulties be encountered where full support will be given. If a critical matter

(over)

effecting policy, mission, + requiring
a command decision, report & action
taken and result thereof must be made
to this office.

Get in touch with Dir Surgery
at once and if you can't get his
co-operation let me know

CO Burgheim

KYUSHU CIVIL AFFAIRS REGION
GHQ SCAP
Fukuoka, Kyushu, Japan

HFL/ji

APO 24 Unit 5
15 June 1950

PH 720

SUBJECT: Memo to Col. Burgheim - Request For DDT Spraying From Cpl. Jason S. Davis to Director of Kokura Health Center

TO : Chief, KCAR, GHQ SCAP, APO 24-5

1. On 13 June Dr. Harada from the Kokura Health Center reported to Dr. Luke that a letter signed by Cpl. Jason S. Davis, Insect and Rodent Control Section, 24th Division, Kokura, had been received requesting them to spray 10% DDT dust to an area 100 - 150 yards wide around the four main military installations in Kokura.

2. Health center officials estimate that approximately two tons would be required.

3. This amount would completely deplete the city's supply, and no stock would be available for routine operation or for emergency.

4. Authorization for such a request is questioned.

5. The foregoing report is for your information with a recommendation that the division surgeon be contacted and informed.

Richard F Brown

RICHARD F. BROWN, M.D.
Chief, Public Health Section

KYUSHU CIVIL AFFAIRS REGION
GHQ SCAP
Fukuoka, Kyushu, Japan

HFL/jl

APO 24 Unit 5
15 June 1950

PH 720

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3. This amount would completely deplete the city's supply, and no stock would be available for routine operation or for emergency.

4. Authorization for such a request is questioned.

5. The foregoing report is for your information with a recommendation that the division surgeon be contacted and informed.

RICHARD F. BROWN, M.D.
Chief, Public Health Section

O Dr. Brown wants this back

26 April 1950

SUBJECT: Chas. Kinne and Patented Fly Trap.

MEMO TO: Dr. R. F. Brown, Chief P.H. Section, KCAR

FROM: A. Alexander

1. Mr. Chas. Kinne is a Foreign National - Allied National who has resided in Japan or Japanese occupied countries for the past fifteen years. I believe he came from America originally. He now resides in Fukuoka City.

2. I am not aware of Mr. Kinne's business or position but I believe he is classified as a foreign trader. He seems to have several businesses and enterprises.

3. Mr. Kinne claims that he holds the patents to a fly trap which is a benjo cover made of wood that has a built in fly trap of convential and simple screen construction.

4. Mr. Kinne and his Japanese associates have made strong efforts to get the endorsement and recommendations of KCAR, P.H. Sec., and the Fukuoka Pref. Health Dept. for his fly trap. There were indications that these suggestions by the Health Dept. would have carried the implication of desired purchases by restaurants, hotels, and other such places.

5. In my four meetings with Mr. Kinne, I informed him that we could not endorse his product and that the Health Dept. could not do him the special favor of recommending his product, but that Health officials regularly advocated fly trapping along with other means of control and extermination. I also told him that his trap did not constitute fly proofing and that other means and traps were available for doing the same job or more than his trap does and that he was trying to create the impression that his trap was a solution to the entire problem of fly control. I also told Mr. Kinne to put his product on the market and sell it on its merits and not to endeavor to use any governmental agency as a sales promotes.

6. Mr. Kinne's Japanese partner in this project visited me about 8 months or more ago with a request for a testimonial. As faras I have been able to ascertain, the trap which is at least 8 months old, has never been put on the market and it is doubtful if any real effort has been made to produce and sell it. Mr. Kinne quoted the price as ¥250.

7. I have informed Dr. Oki and Dr. Oho that no recommendations were to be made to this fly trap either directly or by innuendo, but that the health department should continue to promote fly control, with emphases on fly proofing and sanitation, but including adult extermination.

Mr. Kinne has been visiting the Pref. Health Dept. regularly, of late. I told Dr. Oki that if he became obnoxious or demanding to report him to us.

Aleck Alexander

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~~Enclosed~~ Attached is a statement made to the public by Mr. Kinne. I believe that Mr. Luris is a Dutch subject, formerly residing in China, who was employed as an accountant and special Asst. at the Area Club.

Below is a translation of a prepared statement given to the Fukuoka Pref. Health Dept. by Mr. Charles B. Kinne, who requested that it be used as a basis for a radio broadcast.

From 1 April the occupation personnels have been permitted to go in and out from Japanese home freely and to have meals together, but in the Japanese homes there are many flies, as being announced in the American papers by the American Military authorities in the American to insect control which causes the transmission of communicable diseases, Consequently, Fukuoka Officer Club committee head Mr. Luris had indicated clearly formally that, I an American have taken over the rights of the patent of the fly trap for benjo which was invented by a Japanese, to exterminate the flies and expel the flies out of humanity which I intend to take this as my life's work and do the best I can, that I have started. Therefore, from the public health point of view, the hotel and restaurant business men understood, but to you in common homes also, I recommend that by extermination of flies we can prevent communicable disease and have pleasant peaceful Japan's reconstruction.

Accordingly, the Japanese government personnel should understand this point and I ask that you will futhermore cooperate in extermination of flies, the enemy of humanity.

During the Panama development, the enemy of humanity, the mosquitoes, by its extermination the canal at last came to success. As a life time work for me, I am planning to stay in Japan, so as to devote my life in extermination of insects which transmits communicable diseases.

I wish to ask for cooperation of the personnels concerned.

Charles B. Kinne

KYUSHU CIVIL AFFAIRS REGION
GHQ SCAP
Fukuoka, Kyushu, Japan

PH 403

APO 24 Unit 5
6 June 1950

SUBJECT: Nightsoil Disposal in Nobeoka City, Miyazaki Prefecture

TO : Memorandum for Record

Request for assistance to obtain a loan to capitalize a nightsoil collection and treatment system for Nobeoka City, Miyazaki Pref. as a private enterprise.

1. Mr. Izumi Morimoto of the "Hyuga Research for Agricultural Development in Miyazaki" (Company or Association) personally presented the enclosed "petition" and discussed the matter with me on 27 May 1950. He wanted a Civil Affairs representative to endorse a statement that he had prepared which he felt would improve his chance to obtain a loan. Mr. Morimoto claims that loans for a new business are virtually impossible to make, no matter how worthy the business. Mr. Morimoto claims that Nobeoka City has given him permission for this project.

It was suggested that Mr. Morimoto discuss his problem with the Miyazaki Pref. Health Dept. Sanitary Engineering Division and he was advised that they would thoroughly investigate the situation and endeavor to assist him if the project is sound.

2. Mr. Morimoto advised that Miyakonojo City has contracted a private collection system (including treatment and disposal) and that he has investigated the entire system and desires to adopt it at Nobeoka. The Miyakonojo contractor, the Kono Agricultural Development Research Assn., has been providing this service since the fall of 1946.

3. The following information regarding the collection, treatment and disposal of the nightsoil was furnished by Mr. Morimoto. More information is contained in a yet untranslated report of Mr. Morimoto's. There seem to be inconsistencies in the collection data, but time was too short to delve into the matter more thoroughly.

1 Enl 2 . See Original Ltr, par 7, same subj, dtd 5 June 50

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Incl 2 See Original Ltr, par 7, same subj, dtd 5 June 50

a. Mr. Morimoto has no special technical background. He has been a policeman, clerk, and most recently a factory hand in the Asahi Chem. Co. Rayon Plant at Nobeoka. He has been unemployed since April 1950.

b. b.-1. Farmers collect nightsoil from Nobeoka at a charge to the householder of 40¥ for 2 buckets or about 0.3 koku (1 koku equals 41 gals) or about 12.3 gals volume. This collected material is taken directly to the farms. Collections are made about twice monthly from each home.

b.-2. The Nobeoka City built about 180 concrete storage tanks each 100 koku or 4100 gallons in volume in 1946 to be used for storing nightsoil. These tanks are each about 2 kilometers from the center of the city. Total volume of tanks-18,000 koku.

c. Morimoto's proposed plan for collection and treatment.

c.-1. Tank of 6 koku or 246 gallons in volume to be mounted on a motor tricycle. Cost of tricycle is 160.000¥ per unit. 300,000¥ will suffice for one collection tank unit and other miscellaneous expenses necessary to start partial collection and treatment service. After the work is started and a company formed, the assoc. will be eligible for subsidies and loans to develop a complete service.

c.-2. Collection charge to the householder will be 15¥/0.3 koku (12.3 gals). The benjo pit will be "disinfected" with lime or sulfuric acid at a cost of 10¥ (no additional information available on disinfection method). House collection will be by conventional bucket and dipper.

4230 koku (174,000 gals) nightsoil to be collected per month from about 80,000 (?) persons at 7,000 homes (?) twice each month for each home.

c.-3. Nightsoil Treatment.
Lime is added to the nightsoil. The mixture is "drained", allowed to digest and dry and when in a solid state, waste ammonium sulfate liquor (0.6% amm. sul.) and ashes from the Asahi Chem Co. will be added. After the mix becomes nearly dry, destructively distilled sawdust waste is added. This dry product is bagged and sold. Total processing time for one batch is 35 days. This treatment is "like Miyakonojo's". No information about parasitic content of treated waste, but Miyakonojo's pronounced "satisfactory". The kan (3.75 kg. or 8.25 lbs.) of material put in one straw bag and will be sold for 400¥/bag.

200 bags (750 kg or 1,650 lbs.) to be produced per month from 1,500 koku of nightsoil.

c.-4. labor and operations costs.
Mr. Morimoto will be superintendent of all operations. 18 persons will be needed to man 5 collection tricycles and for all other operations including complete treatment and packaging of finished product.

Income will pay all costs (labor, raw materials, fuel, bags, and equipment estimated net surplus for repayment of loan) Total monthly operations costs estimated at 283,000¥.

d. Horse drawn or hand drawn wagons were said to be unfeasible. Total costs will be doubled and profit more difficult to make.

e. Mr. Morimoto claims that the city could not operate such a system efficiently. Of course, this is incorrect.

4. This office will bring this matter to the attention of the Miyazaki Health Dept. for a thorough investigation. The Health Dept. should encourage the establishment of such reliable collection systems with complete treatment of <u>all</u> nightsoil desirable. Provision of this service by the city is the method of choice, but licensing of a contractor such as Mr. Morimoto, should be encouraged and promoted if the city can not provide this desirable community service.

Conversion Factors

1 bushe = 0.195 koku

1 bushe = 8 gallons

1 koku = 41 gallons

1 kan = 3750 grams = 3.75 kilograms