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Mass outbreak of Respiratory Disease in Fukushima Pref

2 March 1951

1. Location: Primary school in Matsukawa Town, Shimabu-Gun. Total enrollment is 749.
2. The disease has the characteristic of a common cold and 2 samples of blood have been sent to National Institute of Health for check on possible influenza. Patients are usually sick for 3-4 to 7 days.
3. Incidence has been as follows:

16	February	7-8 cases
20	February	20 "
27	"	102 "
28	"	127
2	March	123

4. Control measures
   a. Patient sent home at earliest symptoms
   b. Masks required
   c. Vigorous playing limited

8

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Manufacturer	Lot No.	
Nippon-saikin	2	final
"	3	"
"	4	"
"	5	"
Kitasato	27	reassay
"	30	"
"	31	"
"	38	"
"	57	"
"	69	"
"	71	"
"	89	"
"	90	"
"	103	"
"	112	"
"	124	"
"	125	"
"	127	"
"	135	"
"	142	"
"	147	"
"	149	"
"	150	"
"	151	"
"	152	"
"	166	final
"	173	"
"	177	"
"	179	"
"	181	"
"	182	"
"	183	"
"	184	"
"	186	"
"	192	"
"	194	"
"	196	"
"	200	"
"	202	"
"	203	"
"	205	"
"	207	"
"	208	"
"	214	"
"	215	"
"	218	"
"	219	"
"	220	"
"	221	"
"	222	"
"	230	"
"	231	"

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After. Dr. Bryson

FUKUSHIMA PREFECTURAL GOVERNMENT
Yo # 25

27 Feb. 1950.

TO : Mr. Thrap, Sanitary Engineer, Public Health, TCAR.

From : Chief of the Prefectural Health Department, Fukushima

Subject: Report of the Controle Measures against Louse-Borne Typus

The controle measures against the Louse Borne Typhuse has been carried out all right. The following is its report for your information.

We will take up your suggestions seriously together with the circular from the Welfare Ministry"Ei-hatsu No. 111, The Method of the enforcement of the Controle Measures against Louse-Borne Typhus". We will reinforce the controle measures against the louse borne typhys.

- - - - - -separate sheet -

Yo #25

27 Feb. 1950.

To : Senior Officer, TCAR

From : Governer of the Fukushima Prefecture, Mr. Otake

I hereby notify you the result of the Louse-Borne Typhus case which has been broken out in out territory(Kitayama Village, Yama County, Fukushima Prefecture).

Note
The Result of the Louse Borne Typhus Case

Case Number 1

Location:KitaYama Village, Yama County,

Patient : OTAKE,Yotsu (F.59), Farmer(peasant)

Date of Onset 30 Dec. 1949.

Date of 1st Exam. 7 Jan. 1950.

Date of Diagnosis : 18 Jan. 1950.

Result : Ausgeheilt on Feb. 7, 1950.

Dr. Chicko

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GBB File

REPORT ON THE MASS CASES OF MEASLES IN FUKUSHIMA PREF. (Transd. MIYAGI)

To: Cmdg. Officer, TCAR

From: OTAKE Sakuma, Gov. Of Fukushima Pref.

Darte: 8 Feb., 1950.

A mass cases of measles was broken out in Odate-mura, Soma-gun, Fukushima-ken. The following is its report up to date:

1) Name of Disease: Measles
2) Place of Origin: Odate-mura, Soma-gun, Fukushima-ken.
3) Names of Patients: (Omitted)
4) Date of Primary Onset: End of Dec., 1949.
5) Total of Patients: 420 (As of 6 Feb., 1950)
   320 - Grammer school pupil
   100 - Under school aged children
6) Name of Diagnosed Doctor: KUMAKAWA Tadashi, Odate-mura
7) Deaths and cured:
   2 - Deaths
   30 - cured school pupil
   30 - Cured under school aged (Total 60)
8) Total of present Patients: 360
   290 - School pupil
   70 - Under school aged children
9) Developement of the Cases:

In 1943, the said village, Odate-mura, had a record of outbreak of a mass measles. And no case has been reported since then. However, we found that some 30 infants of under school aged suffered from measles in June,1949, in the northern part or the village. (We can not say yet there is any connection with this time's measles to that of last year) In the latter part of Dec., 1949, some children were suffered from measles, and it was supposed that they recovered of the disease without any consultation of a doctor. Recognized that these children,including those who were not recovered completely, went to school after the winter vacation was over,then they scattered the disease among their fellow scholl mates, causing nearly 100 children were being suffered from measles in middle of Jan., 1950. Naturally supposed, under school aged children got contagion by these new patients at their homes.

The following is the cause of the mass cases:

1) Environment of the villagers is not good, lacking in the sanitary ideas.
2) Not considered measles so seriously.
3) Due to the continuation of daily cold weather. The people's daily food is poor.
4) Un-recovered patients had gone to school
5) Majority or the patients were primary.

10) Control Steps:

1) All patients isolated in a separated room of [their own houses]
2) The shool was closed for 10 days from 2 to 11 Feb.
3) A doctor and a nurse from the Fukushima Chapter of the Red-cross, and 2 officials from the Haranomachi Health Center were dispatched to the spot in order to find the cases and

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12. Make patient comfortable and leave unit in order.
13. Remove equipment, clean, return all articles to CSR.
14. Offer to give the patient a mouth wash, or gargle.

V. Chart
1. Hour and by whom tube was inserted.
2. Amount and type of nourisnment, fluid, or medication introduced.

GASTRIC LAVAGE (Stomach Tube)

I. Aim:
1. To cleanse the stomach of undigested food, fermenting material, toxic and poisonous material.
2. To prepare patients for gastric surgery
3. To relieve gastric distention

II. Necessary Articles
1. Tray
a. funnel (large)
b. stomach tube
c. bowl (for ice)
d. long tubine
e. graduate pitcher
f. two small petri dishes
5% cocaine
lubricant
g. applicator and swab
h. tongue depressor
i. asperator
2. solution
3. small rubber apron or sheet
4. towel
5. pail
6. pail
7. tissues

Technique
1. Assemble necessary articles and prepare solution as orderd.
2. Screen patient and explain procedure.
3. Pin towes and rub er proctector around patient s neck.
4. Reassure patient and instruct him to breathe through his mouth as the tube is being introduced.
5. Hand doctor applicator and tongue depressor for anesthetising the patient.
6. Stand on side of bed opposite doctor. lubricate tube and hand it to him.
7. The doctor inserts the tube to the graduated mark and then to asceriatin if the tube is in the stomac, pinches the tube and notes if the patient becomes cyanotic.
8. The solution is then poured into the funnel which is he about six inches above the patient s head. About one pint is poured in at once, before funnel becomes empty it is lowered and contents siphoned. If necessary the funnel is detached and aspirated by means of bulb or syringe.
9. The irrigation is continued until solution returns clear

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1. Gastric lavage, gavage, or apiration may be accomplished by use of a stomach tube or nasal tube.
2. Explain the procedure to the patient as cooperation is very essential for the successful performance of the procedure.
3. Do not use force when inserting the tube. If water is permitted, give the patient a drink as theis will facilitate the passage of the tube as he swallows the water.
4. Discontinue the tratment at once if any blood appears during the siphonage.
5. Never permit the funnel to become empty.
6. Be sure the tube is in the esophagus and not the traches.

GASTRIC GAVAGE (Stomach tube)

I. Aim

1. To introduce food or fluids or medications into the Stomach through a tube passed into the stomach through the mouth.

II. Necessary articles

1. Tray
   a. Funnel (Small)
   b. Stomach tube--small bowl or ice
   c. black tubing--long tubing
   d. connecting tube (glass)
   e. two small petri dishes
      1. for cocaine 5%
      2. for glycerine

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to consult and treat them without delay.

4) Banned any gathering of the people, easpecially that or the children.

5) Visiting on the villagers' houses to promote ideas for prevention, meantime, to try to find the patients in earliest opportunity.

6) Disinfection of the school and public organization building etc.

7) Other steps regulated in the communicable disease preventive laws.

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二五予

昭和二十五年二月七日

福島縣知事大竹作摩

東北民事地区司令官殿

麻しん患者の集団發生状況報告

管下相馬郡大舘村に左記の通り麻しん患者が發生したからその状況に
つゝて御報告致します

記

一、病名　麻しん（届出伝染病）

二、發生地　相馬郡大舘村

三、患者名　（省略）

四、初發年月日　昭和二十四年十二月下旬

五、診断醫師　大舘村　熊川忠

六、初發以来の發生患者累計（三月六日現在）

小学校四年生以下の学童に發生し約三二〇名（うち二〇〇
名は注意患者）

学年前の幼児約一〇〇名（注意患者六五名は含む）

計四二〇名

七、初發以来の転皈累計（右同）

死亡二名（学童一名幼児一名）

福島縣

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管下相馬郡大館村ニ於ケル左記ノ通リ麻しん患者ガ發生シタカラソノ狀況ヲ御報告致シマス

記

一、病名　麻しん（届出伝染病）
二、發生地　相馬郡大館村
三、患者名簿　（省略）
四、初發年月日　昭和二十四年十二月下旬
五、診斷醫師　大館村　熊川忠
六、初發以來ノ發生患者累計（三月六日現在）
小學校四年生以下ノ、學童ニ發生シ約三二〇名（ウチ二〇名ハ注意患者ニシテ學年前ノ幼児約一〇〇名（注意患者六五名ヲ含ム）
計四二〇名
七、初發以來ノ轉校累計（右同）
死亡二名（學童一名　幼児一名）
全治　學童三〇名　幼児三〇名　計六〇名
八、現在患者　學童　二九〇名
幼児　七〇名
計　三六〇名
九、發生狀況
本村ハ昭和十八年春麻しんノ流行アリ現在小學校五年

福島縣

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生以上に大部分罹患したことありその後はほとんど發生を見なかつたのであつたが昨年六月には同村の北部大倉部落内に幼児約三ヶ名が罹患し治癒したことが調査の結果判明した、今回の發生は前記期日の通りであつてこの大倉部落の發生と関聯があるかどうかは判明してゐない、今回の初發は偶發的に發生し初發患者は醫師の診断を受けることなく治癒した、更に数名の發生があり一月中旬冬季休校より登校を開始したがたまたま未治癒のまゝ患者が各文字年毎あつたため接触の機会が多くこれにより一月下旬には一ヶ名余にのぼる發生を認め更に注意疾患約一九ヶ名に達した同時に文字童より各家庭の幼児に罹患するに至つた

今時發生の原因を探究するに次の点などが挙げられる

1. 生活環境が一般に良好ならず加うるに衛生観念に乏しい
2. 麻しんを軽く見たこと又治療の方法が徹底してゐないこと
3. 寒冷が激しいのに加うるに食生活に欠点があつた
4. 未治癒患者が登校した
5. 大多数が初回感染であつたこと

一口防疫措置

1. 患者は自宅隔離を行つた
2. 自二月二日より十日間の臨時休校をした
3. 患者の早期發見、早期診断ならび早期治療を

福島縣

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登校を開始したがたまたま未治癒のまん患者が各学年毎あつたため接触の機会が多くこれにより一月下旬には一〇〇名余にのぼる發生を認め更に注意疾患約一九〇名に達した同時に学童より各家庭の幼児に罹患するに至つた

今時發生の原因を探究するに次の点などが挙げられる

1. 生活環境が一般に良好ならず加うるに衛生觀念に乏しい
2. 麻しんを軽く見たこと又治療の方法が徹底してゐないこと
3. 寒冷が激しいのに加うるに食生活に欠点があつた
4. 未治癒患者が登校した
5. 大多数が初回感染であつたこと

福島縣

一〇

防疫措置

1. 患者は自宅隔離を行つた
2. 自二月二日より十日間の臨時休校をした
3. 患者の早期發見、早期診断ならび早期治療をはかる、これがため福島日赤支部より醫師一、看護婦一を原、町保健所より所員二名を應援救護のため發生地に派遣した（約二週間）
4. 一般集合の禁止、特に児童の集会、遊ぎを厳に禁止した
5. 家庭訪問を強化して各戸毎に啓蒙に努め患

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昔の早期發見治療、蔓延防止の万全を期する
る学校、並集団汚染ヶ所に対する薬物消毒
及その他学校伝染病予防法に規定されてある
事項の遵守など

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To mr. Sakai — from Pub. Health. Noted. Jan

Official Telegram

TO : Senior Officer of TCAR

Jan. received 19, 1950.

Subject : Case Report of Typhus

Tokushima

Patient _____ F. Age 59
Address Kitayama Village, Hiyama County
Date of Onset Dec. 30, 1949
Date of Diagnosis as Genuine Typhus Jan. 18, 1950
Case tracing is going on.

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電報

送信通過番號

リム 七三 フクシマ 五〇三八 コ六・一〇

センダ イL

センダ イシL

トウホクミンジ ブ シレイカン

0875

官報

一ツキ一八ヒャマグ ンキタヤマムラニ一八オ一メイ五カオンナハ

ツビ ヨウ一ニツキ三〇ヒハツセイカンジ ヤルイケイ一ケイトウ

チヨウサチユウフクシマケン

信時分

信者

校者

信

25 1 18

信第四號 遞信省 二十五・九トキワ印刷

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Louse Born Typhus

Information through Police Telephone

20 Jan. 1950.

Name of the Patient: OTAKE Yoku (F.59)
Kitagata Village, Yama County, Fukushima Pref.

Name of the Disease: Louse Born Typhus

Test given: More than twice
* At Kitagata Health Center (Jan. 9)
Blood test. The result was negative
* At National C.D. Reserch Institute (Jan. 13)
Serium Test. The result was possitive.

Other informationS: At a Prefectural hospital it was revealed she had symptoms of Louse Born Typhus From that time on preventive measures have been taken under the presumption of real Louse Borne Typhus, although the result of the microscopic test had not been revealed.

She has been isolated since the 1st exam.

At a (the?) health center 100 people have already been immunized.

DDT was sprayed.

Chieko Kanzawa

DECLASSIFIED E. O. 12065 SECTION 3-402 / NNDG NO. 775013

TO : Commnading Officer, Tohoku Civil Affairs Team

FROM : Fukushima Prefecture

DATE : 20 January 1950

SUBJECT : Contagious Disease Case Report

This is to report a case of contagious disease as detailed below :

(1) Name of the disease : Typhus Fever (First genuine case)

(2) Place of occurrence : Sekiya, Kitayama Village, Yama Gun, Fukushima Prefecture

(3) Patient : Yotsu OOTAKE, F., age 59, farmer

(4) Date of onset : 30 December 1949

(5) Date of first examination by a doctor : 7 Jan. 1950

(6) Date of diagnosis : 18 January 1950

(7) Doctor who gave diagnosis : Dr. Koichi MONOE, director of Sahara Kitagata Health Center, Kitagata Town, Yama Gun, Fukushima Prefecture

(8) Location of the patient : Isolation Ward of Kitagata Town. (She was taken in 9 January)

(9) Infection Tracing : She was on a trip in a group to Kanto and Kansai areas for the pilgrimage to Ise Shrine from 19 December 1949 to 23 of the same month. It is possible that she contacted the disease during the trip. Tracing is being conducted.
There was no case last year in the town.

(10) Patient's vaccination history :
No typhus vaccination

(11) Outline of symptoms and findings :
Chill and headache began abruptly on December 30, since when the patient complained headache and muscle-ache at several joints. On January 7 , light rosy eruption came out on her chest and abdomen. Some of them had bleeding.
The temperature as high as 39°c to 40°c persisted till January 15. General symptoms are in moderate degree.

(12) Outline of

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(12) Outline of control measures taken :
Isolation of the patient and her home was conducted on January 9. To 144 people who were in the pilgrimage and to 200 people consisting of hamlet inhabitants and contacts were done DDT dusting, delousing activities, first injection of Typhus immunization, physical inspection and examination. Rodent control measures was taken upon 253 houses and caution toward typhus was thoroughly requested to the people. Besides, we reported to the prefectures where the pilgrimage stayed on their trip on the occurrence and the situation of the disease and asked them for the immediate control activities.

(13) Situation of control agents :
We received from the Welfare Ministry 4000 cc of vaccine of which 1180cc was turned over to Kitagata, Bange and Wakamatsu Health Centers.
We distributed to the above health centers 700 kilogram of DDT dust and 550 gal or oil.

(14) Reference
Weil-Felix reaction conducted at Kitagata Health Center on January 15 showed 160 positive and the complimentary Fixation Test was done at the National Preventive Medicine Institute which was resulted in strong positive. (Jan.18)
The above results combined with the clinical findings caused us to decide on this case.
No suspects was found so far.
We consider that there is no sign of spread.

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Case Report of Measles
through Telephone

6 Feb. 1950

Name of the Disease Measles

No. of Patients
125 School children 187 Preschools

Location Odate-Mura Village, Soma County Fukushima Pref.

The above mentioned no. of children in one village are suffering from measles. The area is a very remote part: that is a village in a valley. ?This is a virgin soil of this kind of disease. No immunization program there has been
From 3 Feb. '50 till 13 Feb. all the grade schools of this village will be closed. One
One of the patients died (M 6) died because of heart attack due to measles.
1 Doctor and 1 nurse of the Prefectural government went down to the villageto check up the cases.

Chiba

V

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Dr. Bryson,
If you want any further information, I think I can call up Fukushima.
Chieco

Case Report
through telephone
Fukushima Prefectural Government
Disease Prevention
Section

1 Feb. '50.

Name of the Disease : Polio
No. of Patients : 5
(Adachi County 1)
(Futaba County 4)

Name of the Disease : Influenza
In Schirakawa City, 103 out of 6290 school children have been absent because of "Influenza". Generally speaking the case is slight.
For 1 to 4 days or slight fever (hectic?).
no death
There is no sign or spread.

Chieko Kanazawa