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

gBB3

WHOOPING COUGH MASS CASES STOPPED

An outbreak of 24 whooping cough cases at Takanokura Mine Office, Hiso, Iizo-mura, Soma-gun, Fukushima Prefecture, reported to your Office on 21 June, 1950, showed no signe of further developement.

All those 24 patients were recovered from the disease. Diagnosis was gived them on 10 July, 1950.

Cheif of Health Dept.,
Fukushima Prefecture

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

二五号

昭和二十五年七月十八日

福島縣衛生部長

東北民事地区司令部

公衆衛生課長殿

百日咳集団発生終熄について

標記のことについて六月二十一日書面報告いたしましたが左記の通り終熄

報告いたします

記

一、病名 百日咳

二、患者発生地 相馬郡飯豊村大字比曽字風草（高の倉 鈴木業郎 宅）

三、現在数 ナシ（累計一二四名）

四、転帰者数累計 二四名（死亡ナシ 治癒二四）

五、転帰年月日 昭和二十五年七月十日（最終患者）

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

(Trans'd by MYG) JBB

Subject: Report of Mass Cases of Dysentery in Fukushima Pref.

From : Ch. of Health Dept., F'shima Pref.

Dated : 21 July, 1950.

The following are the report of dysentery mass cases in Fukushima Prefecture as of 18 July, 1950:

A)

No. of Patients: 11

Occured at: Kozeki-mura, Nishi-shirakawa-gun

Date of Onset: 23 June, 1950

Date of Diagnosis was Made: 26 June, 1950

Doctor who made Diagnosis: Tadashi SASAKI, Shirakawa Health Center

Source of Infection: Under investigation

B)

No. of Patients: 29

Occured at: Yamazato-mura, Yama-gun

No. of Present Cases: 22 (7 Recovered - No dead)

Isolated at Young Men's Hall and Dispensary at Yamzato-mura

Control Measure Taken:

Physical Examanation	73	
Case Finding	2,614	
Carrier Examination	594	(No possitive)
House Disinfected	293	
Well "	437	
Lavatory "	116	
Sanitary Trainings	10	

C)

No. of Patients: 8

Occured at

No. of Patients: 11

Occured at: Kozeki-mura, Nishi-shirakawa-gun

Date of Onset: 23 June, 1950

Date of Diagnosis was Made: 26 June, 1950

Doctor who made Diagnosis: Tadashi SASAKI, Shirakawa Health Center

Source of Infection: Under investigation

B)

No. of Patients: 29

Occured at: Yamazato-mura, Yama-gun

No. of Present Cases: 22 (7 Recovered - No dead)

Isolated at Young Men's Hall and Dispensary at Yamzato-mura

Control Measure Taken:

Physical Examanation	73	
Case Finding	2,614	
Carrier Examination	594	(No possitive)
House Disinfected	293	
Well "	437	
Lavatory "	116	
Sanitary Trainings	10	

C)

No. of Patients: 8

Occurred at: Yatsurugi-machi, Fukushima City

No. of Present Cases: 3 (1 Daed, 4 Changed Cases)

No. of Carriers: 21 (11 Cured, 10 Present Carriers)

Isolated at: Fukushima Prefetural Women's Med. Col. Hospital

Control Measure Taken:

Physical Examination	70	
Case Finding	1,800	
Carrier Examination	675	(Possitives 21)
House Disinfected	1,795	
Well "	30	

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

JAPANESE HOSPITAL STRENGTH REPORT FOR FEBRUARY 1950

1/

TUBERCULOSIS SANATORIA

Area	2/ Number of Hospitals	2/ Bed Capacity	3/ Total Patients	4/ In-Patients	5/ Out-Patient treatment Visits
All Japan	298	57,552	54,226	50,433	3,793
Hokkaido	15	2,853	2,753	2,591	162
Aomori	3	730	703	658	45
Iwate	3	645	705	615	90
Miyagi	4	1,350	1,471	1,290	181
Akita	4	748	636	580	56
Yamagata	3	291	307	278	29
Fukushima	3	876	641	592	49
Ibaraki	8	1,719	1,341	1,296	45
Tochigi	4	734	758	698	60
Gumma	7	595	636	556	80
Saitama	5	1,055	1,191	953	238
Chiba	14	3,080	2,984	2,823	161
Tokyo	30	6,215	6,743	6,396	347
Kanagawa	13	3,022	2,741	2,568	173
Niigata	10	1,419	1,394	1,334	60
Toyama	2	1,070	818	776	42
Ishikawa	6	908	785	753	32
Fukui	2	620	515	488	27
Yamanashi	1	140	140	138	2
Nagano	9	1,702	1,462	1,408	54
Gifu	6	930	896	849	47
Shizuoka	4	1,107	952	903	49
Aichi	10	2,887	2,287	2,093	194
Mie	4	796	720	673	47
Shiga	5	429	450	436	14
Kyoto	7	1,684	1,424	1,324	100
Osaka	12	4,282	3,325	3,091	234
Hyogo	21	2,429	2,617	2,151	466
Nara	2	180	150	143	7
Wakayama	2	138	153	149	4
Tottori	1	63	47	46	1
Shimane	1	490	507	489	18
Okayama	4	994	838	816	22
Hiroshima	9	1,992	1,627	1,492	135
Yamaguchi	6	739	784	717	67
Tokushima	2	780	814	770	44
Kagawa	2	190	197	194	3
Ehime	3	826	812	792	20
Kochi	2	151	171	152	19
Fukuoka	23	2,886	2,814	2,691	123
Saga	3	740	770	706	[illegible]

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

Fukushima	5	876	641	592	49
Ibaraki	8	1,719	1,341	1,296	45
Tochigi	4	734	758	698	60
Gumma	7	595	636	556	80
Saitama	5	1,055	1,191	953	238
Chiba	14	3,080	2,984	2,823	161
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Toyama	2	1,070	818	776	42
Ishikawa	6	908	785	753	32
Fukui	2	620	515	488	27
Yamanashi	1	140	140	138	2
Nagano	9	1,702	1,462	1,408	54
Gifu	6	930	896	849	47
Shizuoka	4	1,107	952	903	49
Aichi	10	2,887	2,287	2,093	194
Mie	4	796	720	673	47
Shiga	5	429	450	436	14
Kyoto	7	1,684	1,424	1,324	100
Osaka	12	4,282	3,325	3,091	234
Hyogo	21	2,429	2,617	2,151	466
Nara	2	180	150	143	7
Wakayama	2	138	153	149	4
Tottori	1	63	47	46	1
Shimane	1	490	507	489	18
Okayama	4	994	838	816	22
Hiroshima	9	1,992	1,627	1,492	135
Yamaguchi	6	739	784	717	67
Tokushima	2	780	814	770	44
Kagawa	2	190	197	194	3
Ehime	3	826	812	792	20
Kochi	2	151	171	152	19
Fukuoka	23	2,886	2,814	2,691	123
Saga	3	740	770	706	64
Nagasaki	5	306	230	184	46
Kumamoto	4	1,162	1,187	1,113	74
Oita	5	462	423	414	9
Miyazaki	1	56	64	57	7
Kagoshima	8	1,081	1,243	1,197	46

1/ Tuberculosis sanatoria of 20 beds or more.
2/ Average of count made on the first and last day of each month.
3/ Sum of average number of in-patients and out-patient treatment visits.
4/ Average of daily count.
5/ Average of daily number of treatment visits to the hospitals, including treatment visits to homes by hospital physicians.

Source: Ministry of Welfare.

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

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

Transd
M.G.

A

二五予

昭和二十五年七月二十一日

東北民事地区司令部
公衆衛生課長殿

福島県赤痢防疫対策本部長
福島県衛生部長

赤痢集団発生について（第一報）

標記のことについて初発患者発生後七月十一日までの状況を左記のとおり報告（速報）致します。

記

一、病名　眞性赤痢

一、発生患者数　二名

一、死亡者数　、

一、類似患者数　、

一、患者発生地　西白河郡古関村大字横倉

一、初発患者の決定　六月二六日午　時　分

一、初発患者の発病　六月二三日午　時　分

一、決定医師　白河保健所　須々木一正

一、患者収容場所　臨時隔離病舎に収容

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

致します。

記

一 病名　真性赤痢
一 発生患者数　二名
一 死亡者数　、
一 類似患者数　、
一 患者発生地　西白河郡古関村大字[illegible]
一 初発患者の決定　六月二六日午　時　分
一 初発患者の発病　六月二三日午　時　分
一 決定医師　白河保健所　佐々木　正
一 患者収容場所　臨時隔離病舎ニ収容
一 伝染系統大要　目下調査中
一 防疫措置の概要
健康診断人員　名
検病調査人員　名
保菌調査人員　名（陽性　名）
消毒戸数　戸
井戸消毒件数　件
駆蝿件数　件
その他
清掃戸数　戸
薬剤使用量
クレゾール　瓩
粉末DDT　瓩
液体DDT　ガロン
晒粉　瓩
石灰　瓩
一 その他の参考事項

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

二五予

昭和二十五年七月二十日

福島県赤痢防疫対策本部長

東北民事地区司令部

公衆衛生課長殿

赤痢集団発生について（第二報）

標記のことについて六月三十日第一報いたしましたが、その後の患者発生分七月十四日現在の状況を左記のとおり報告（~~通報~~）致します。

記

一　病名　赤痢

一　患者発生地　耶麻郡市　山都町村大字　字

一　新に決定せる患者数　　名

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

一 転帰者数累計　七名（内死亡一名　治癒七名）

一 現在患者数　二名（累計二九名）

一 患者の收容場所　山御村第一青年會館
第二診療所

一 防疫措置

1. 健康診断人員累計　七三名
2. 検病調査人員累計　二六一四名
3. 保菌調査人員累計　五九四名（陽性　名）
4. 消毒戸数　累計　二九三戸
5. 清掃戸数　累計　一二〇戸
6. 駆蠅件数　累計　[illegible]件
7. 井戸消毒件数累計　四三七件
8. その他

便所消毒実施　一一六件
糞尿処理件数　一九〃
塵芥処理　九〃
衛生教育実施　一〇〃

一 その他の参考事項

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

二五予

昭和二十五年七月二一日

東北民事地区司令部

公衆衛生課長殿

福島県赤痢防疫対策本部長

赤痢集団発生について（第二報）

標記のことについて初発患者発生から七月十一日までの状況を左記のとおり報告（~~再~~報）致します。

記

一 病名 赤痢

一 患者発生地 福島 郡市 矢吹 町村 大字 字

一 新に決定せる患者数 一名

保菌者数 二一名（治癒二一）現在一〇名

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

一 転帰者数累計　五名（内死亡 一名　治癒 一名）

一 現在患者数　三名（累計 八名）

一 患者の收容場所　福島縣立女子医專病院

一 防疫措置

1 健康診断人員累計　七〇名

2 検病調査人員累計　一八〇〇名

3 保菌調査人員累計　二七五名（陽性　名）

4 消毒戸数　累計　一七九五戸

5 清掃戸数　累計　一七九五戸

6 駆蝿件数　累計　件

7 井戸消毒件数累計　三〇件

8 その他

一 その他の参考事項

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

7BB

REPORT OF NEW CASE OF POLIOMYELITIS
IN FUKUSHIMA PREFECTURE

Address : Obara, Sakashitamachi, Kanuma-gun, F'shima Pref.

Name of Patient: Hatsuko IKUTA, age 4, Female

Date of Onset: 20 June, 1950

Date of First seen by Doctor: 23 June, 1950

Date Diagnosis was Made: 12 July, 1950

Doctor who amde Diagnosis: Shuichi TAKEDA, Takeda Hospital, Wakamatsu City

Infection Tracing: Under investigation

Control Measure Taken: Examined family members. Disinfected patient's House.

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

Transl

二五予

昭和二十五年七月十八日　福島縣衛生部長

東北民事地区司令部
公衆衛生課長殿

伝染病患者發生報告について

管下に左記伝染病患者が發生しましたからその状況を報告いたします

記

一　病名　急性灰白髄炎
二　發生地　河沼郡坂下町小原
三　患者氏名　生田ハツ子（女四才）
四　發病月日　六月二十日
五　初診月日　六月二十三日
六　診定月日　七月十二日
七　診斷医師
　住所　若松市竹田病院
　氏名　竹田勇一
八　伝染系統

福島縣

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

公衆衛生課長殿

伝染病患者発生報告について

管下に左記伝染病患者が発生しましたからその状況を
報告いたします

記

一 病名 急性灰白髄炎
二 発生地 河沼郡坂下町小原
三 患者氏名 生田八ツ子（女四才）
四 発病月日 六月二十日
五 初診月日 六月二十三日
六 診定月日 七月十二日
七 診断医師
住所 若松市 竹田病院
氏名 竹田秀一
八 伝染系統
九 参考事項
患家の健康診断
患家の薬剤噴霧消毒実施済み

福島縣

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

FUKUSHIMA

New Cases of Bacillary Dysentery

No. of cases: 7
Suspect: 1
Death: 1
Completely cured: 1
No. of Carriers: 19
Place Occurred: No. 40 and No. 50 Yahacho, Fukushima City
Date of Onset: 22 June
Date Diagnosis was made: 29 June
Doctor who made diagnosis: Prefectural Women's Medical College Hospital
Hospital patients accommodated: Prefectural Women's Medical College Hospital
Infection Source: Under investigation
Control measures taken: Physical examination given to 70 persons
Disease findings made: 1,500 persons
Carrier Examination given: 669
House disinfected: 1,150
Wells disinfected: 30
Houses cleaned: 640
Medicine Used: Cresol, 12.5 kilograms
Liquid DDT, 110 gallons
Chloride of lime, 71 kilograms
Lime, 75 kilograms
Remarks: Latrines disinfected: 650
Garbage disposed: 300

New Cases of Bacillary Dysentery

No. of Cases: 7
Deaths: 2
Completely cured: 2
No. of present patient: 3
Place occurred: Sakashita Town, Kawabe County
Date of Onset: 8 June
Date of Diagnosis: 9 June
Doctor who made diagnosis: Hiroshi Odagiri and 5 others
Hospital patients accommodated: Takata Kosei Hospital
Wakamatsu National Hospital
Infection Source: Unknown, but all patients had the same symptoms

New Case of Acute Poliomyelitis

Name of Patient: Kinji Komatsu, 5 yrs old, male
Address: No. 26 Aramachi, Tsuneha Town, Tamura County
Date of Onset: 1 July
Date first seen by doctor: 5 July
Diagnosed: 6 July
Doctor: Dr. Masuya, Ota Hospital, Koriyama City

(over)

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Infection course: under investigation

Control measures taken: 1. Disease findings were made to 132 persons of adjacent houses to the patient's house.

2. Adjacent houses were disinfected with cresol spraying. Insects extermination with liquid DDT was conducted to the adjacent houses to the patient's house.

3. Physical examination was made.

4. Sanitation guidance was emphasized.

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

1B13

REPORT OF NEW CASE OF POLIOMYELITIS (Fukushima Pref.)

Name of Patient: Shin-ichi HASHIMOTO, Male, Age 2

Address: 24 Tsutsumishita, Koriyama-shi, Fukushima Pref.

Date of Onset: 28 June, 1950

Date of First seen by Doctor: 4 July, 1950

Date Diagnosis was Made: 4 July, 1950

Doctor who made Diagnosis: Dr. MASUTANI, Ota Hospital, Koriyama-shi

Source of Infection: Under investigation

Control Measure Taken: Rodent control by using DDT and cresol
Physical test to members of patient's family and those engage in traffic business

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

二五号

昭和二十五年七月五日

福島縣衛生部長

東北民事地区司令部
公衆衛生課長殿

伝染病患者発生報告について

管下に左記伝染病患者が発生したからその状況を報告いたします

一、病名　急性灰白髄炎

二、発生地　郡山市堤下三四

三、患者氏名　橋本信一　男　昭和二十三年三月九日生

四、発病月日　六月二十八日

五、初診月日　七月四日

六、診定月日　七月四日午后二時三十分

福島縣

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

伝染病患者発生報告について

管下に左記伝染病患者が発生したからその状況を
報告いたします

記

一、病名　急性灰白髄炎
二、発生地　郡山市堤下二〇
三、患者氏名　橋本信一　男　昭和二十三年二月二十九日生
四、発病月日　六月二十八日
五、初診月日　七月四日
六、診定月日　七月四日午后二時二十分
七、診断医師　住所　郡山市太田病院　増谷医師
八、伝染系統　調査中
九、防疫措置
　DDTによる昆虫駆除　クレゾール液噴霧消毒
　患家及び交通稀接触者に対する健康診断

福島縣

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

7BB

PREFECTURAL SANITARY DEPARTMENT
HEADQUARTER OF PREVENTIVE DYSENTERY
FUKUSHIMA

Chief, Public Health
Tohoku civil Affairs

28, June 1950

Dear Sir :

Subject : With regard to outbreak of dysentery

We inform you it in the term from outbreak to 24, June.

1. Name of illness : Bacillary dysentery .

1. Number of patient : 6

1. Number of suspected patient : None

1. Number of germ-carrier : 6

1. Location of outbreak of dysentery : Yama-gun, Komagata-village.

1. Diagnosis of first patient : 9, June

1. Onset of first patient : 8, June

1. Doctor in charge : Shunichi Tsunoda

1. The home patients taken in : Temporary Isolation Ward.

1. Summary infectious system : 1. Travelling, eating and drinking.
2. Use of river water.

1. Outlook of preventive arrangement.

Number of health examinee : 494
Number of inspected person : 500
Number of inspected person in regard to germ-carrier : 779
Number of disinfected home : 98
Number of disinfected well : 84
Number of cleaned up home : 204
Amount of used medicine : Cresol : 20 kg.
Powder D.D.T. :
Liquid D,D.T. : 37 gallon.
Bleaching powder : 1 kg.
Calcium oxide : 36 kg.
Calcium acid : 1.5 kg.
e,t.c.

1. Number of treatment of night-soil : 32 cases
1. Other References
The use of flow water is forbidden in this location.
Improvement of toilet and sanitary lecture.

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

二五予

昭和二十五年六月二十八日

福島県赤痢防疫対策本部長
福島県衛生部長

東北民事地区司令部
公衆衛生課長殿

赤痢集団発生について（第一報）

標記のことについて（初発患者発生から六月二十四日迄の状況を）左記のとおり報告（速報）致します。

記

一 病名 細菌性赤痢
一 発生患者数 六名
一 死亡者数 なし
一 類似患者数 〃
一 保菌者数 六名
一 患者発生地 耶麻郡駒形村
一 初発患者の決定 六月九日午 時 分
一 初発患者の発病 六月八日午 時 分
一 決定医師 角田俊一
一 患者収容場所 臨時隔離舎
一 伝染系統大要 一、交通飲食 一、流水使用
一 防疫措置の概要

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

Physical Examinee

Carrier

記

病名　細菌性赤痢

発生患者数　六名

死亡者数　なし

類似患者数

保菌者数　六名

患者発生地　耶麻郡勅形村

初発患者の決定　六月九日午　時　分

初発患者の発病　六月八日午　時　分

決定医師　岡田俊一

患者收容場所　臨時隔離舎

伝染系統大要　一、交通飲食　二、流水使用

防疫措置の概要

健康診断人員　四九四名

検病調査人員　五〇〇名

保菌調査人員　七七九名（陽性　名）

消毒戸数　九八戸

井戸消毒件数　八四件

駆蝿件数　件

その他　件

その他の参考事項

清掃戸数　二〇〇戸

薬剤使用量

クレゾール　二〇瓩

粉末DDT　瓩

液体DDT　三ヒガロン

晒粉　一瓩

生石灰　三六瓩

石炭酸　一五キロ

その他レゾルシン、ベクトール等

堆肥処理件数　三二件

附近一帯の流水使用禁止、傷病の防疫、衛生講話

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

9/813

Report of New Case of Acute Poliomyelitis

Name of Patient: Hachiro Endo

Age: 2 years old

Sex: Male

Date of Onset: 6 June 1950

Date diagnosis was made: 1000 hours 11 June

Address of Doctor: Hikoya Tsutsui

Address of Doctor: Inawashiro Hospital, Yama County

Brief History of Case: Under investigation

Control Measures taken: Disinfected the patient's house by spraying cresol

Health examination on the patient's family.

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

JBB

Report of New Case of

Acute Cerebrospinal Meningitis

in Fukushima Pref.

Name of Patient: Miyako WATANABE, Age 8, Sex Female

Address: Numasawa, Nakatsuma-mura, Tamura-gun, F'shima Pref.

Date of Onset: 20 April, 1950

Date of 1st seen by Doctor: 10 June

Date Diagnosis was Made: 12 June

Doctor who made Diagnosis: Hiroshi MEGAWA, Jusendo Hosp., Koriyama

Control Measures Taken: Miharu Health Center is taking measures and is investigating source of infection.

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

FUKUSHIMA PREFECTURE

20 June 1950

Report of mass cases of whooping cough.

Names of patients (Not reported)

Number of patients: 23 Male 6
Female 17

Age 1 yr old, female, 5
2 yrs old, male, 1 - female 4
3 yrs old, male, 1 - female 2
4 yrs old, male, 1 - female 1
6 yrs old, female 2
7 yrs old, male 1
8 yrs old, male 1 - female 3
9 yrs old, male 1

Place Occurred: Takakura Iron Foundry
Official residences
Kazekane Aza Iiso, Iiso Village, Soma County

Date of Onset: 25 May 1950

Date of First seen by doctor: Jun Sato, Haranomachi, Soma County

Brief History of Cases: There are 16 official residences of the iron foundry. From four to six families live in one house. It seems that this condition gave the children of the houses much opportunities to be susceptible to the disease.

Control measures taken:

1. Isolation at homes.

2. If the doctor considers it is necessary to close the school, the school will be temporarily closed for two weeks.

3. The Health Administrator of the foundry and public health nurses visited homes so that early discovery of patients, doctors' examination and treatment in the early process and prevention against the prevalence of disease will be made.

4. Prohibited patients walking outside and suspended the communication between the villagers.

5. Medicine disinfection was conducted at the school and the contaminated places.

As soon as the whooping cough prevention vaccine is sent, vaccination program will be carried out. (It is expected to arrive the prefectural office on 24 June.)

Tele Report - Fukushima - dysentery
Place occurred - Kamisato Oaza Yamasato Village, Yama County - genuine 27 - suspect 5

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

FUKUSHIMA

22 June 1950

FROM: Chief of Fukushima Prefectural Health Bureau

TO: Chief of Public Health Section of Tohoku C A R

Report of new cases of acute poliomyelitis.

1. Names of Patients:

Atsuji Tsutomukawa, age 2 years old, sex male,

Address, Sekimoto, Oaza Yamane Village, Tamura County

Date of Onset: 10 June

Date first seen by doctor: 14 June

Date diagnosis was made: 14 June

Doctor who made diagnosis: Sakae Matsuya

Isolated to the Ota Hospital, Koriyama City

Tomoko Kobayashi, age 1 year old, sex female,

Address, No 49 Domae Koriyama City

Date of Onset: 14 June

Date first seen by Doctor: 16 June

Date diagnosis was made: 21 June

Doctor who made diagnosis: Mune Masuda

Isolated at his patient's house

2. Infectious Course: Unknown

3. Control measures taken: Disinfection by cresol spraying.
Examination on patients' family members.

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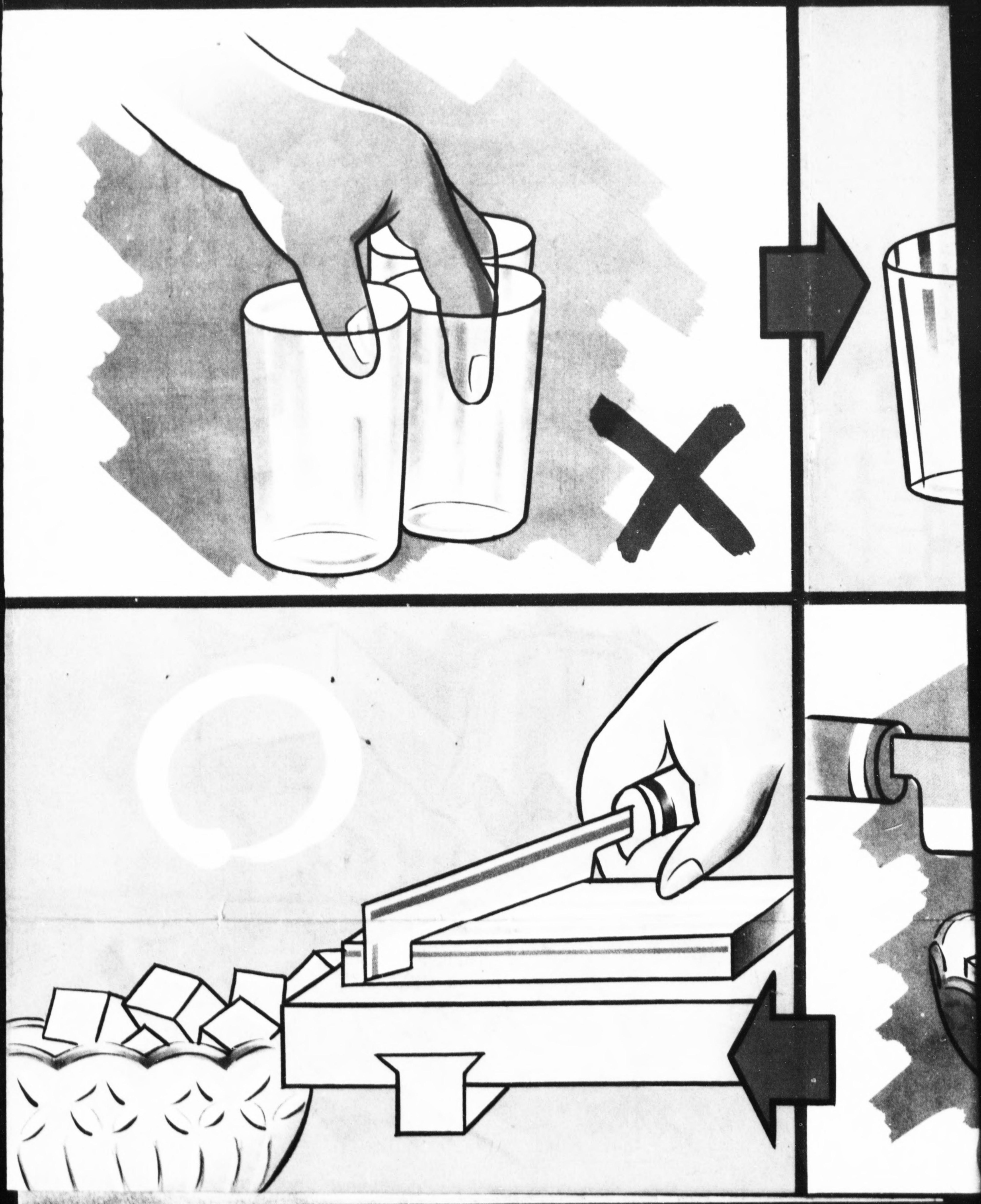
病気の予防はあな



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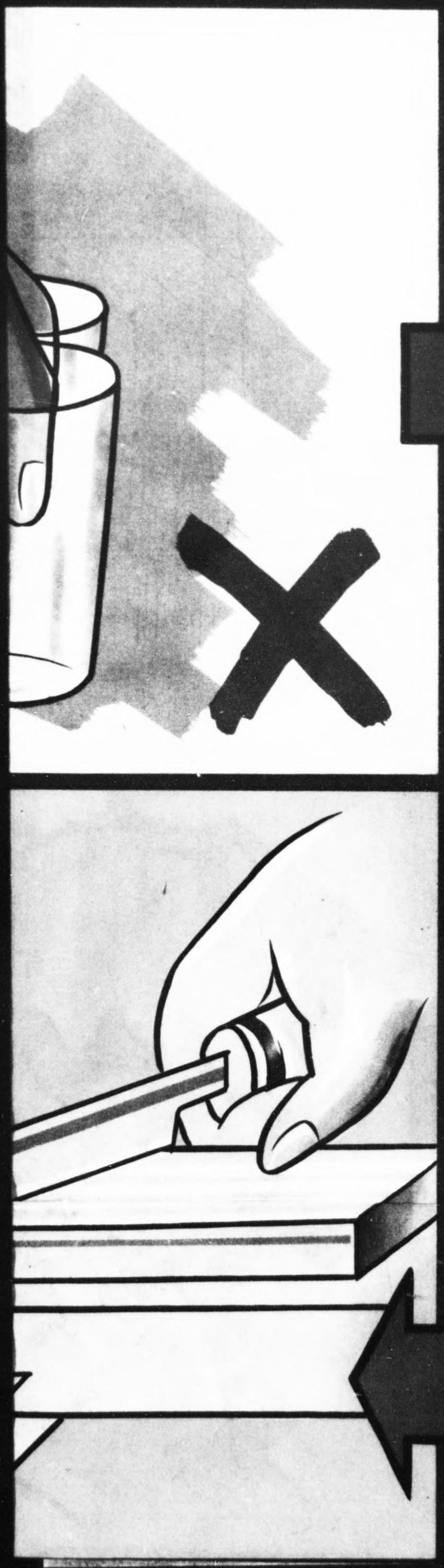
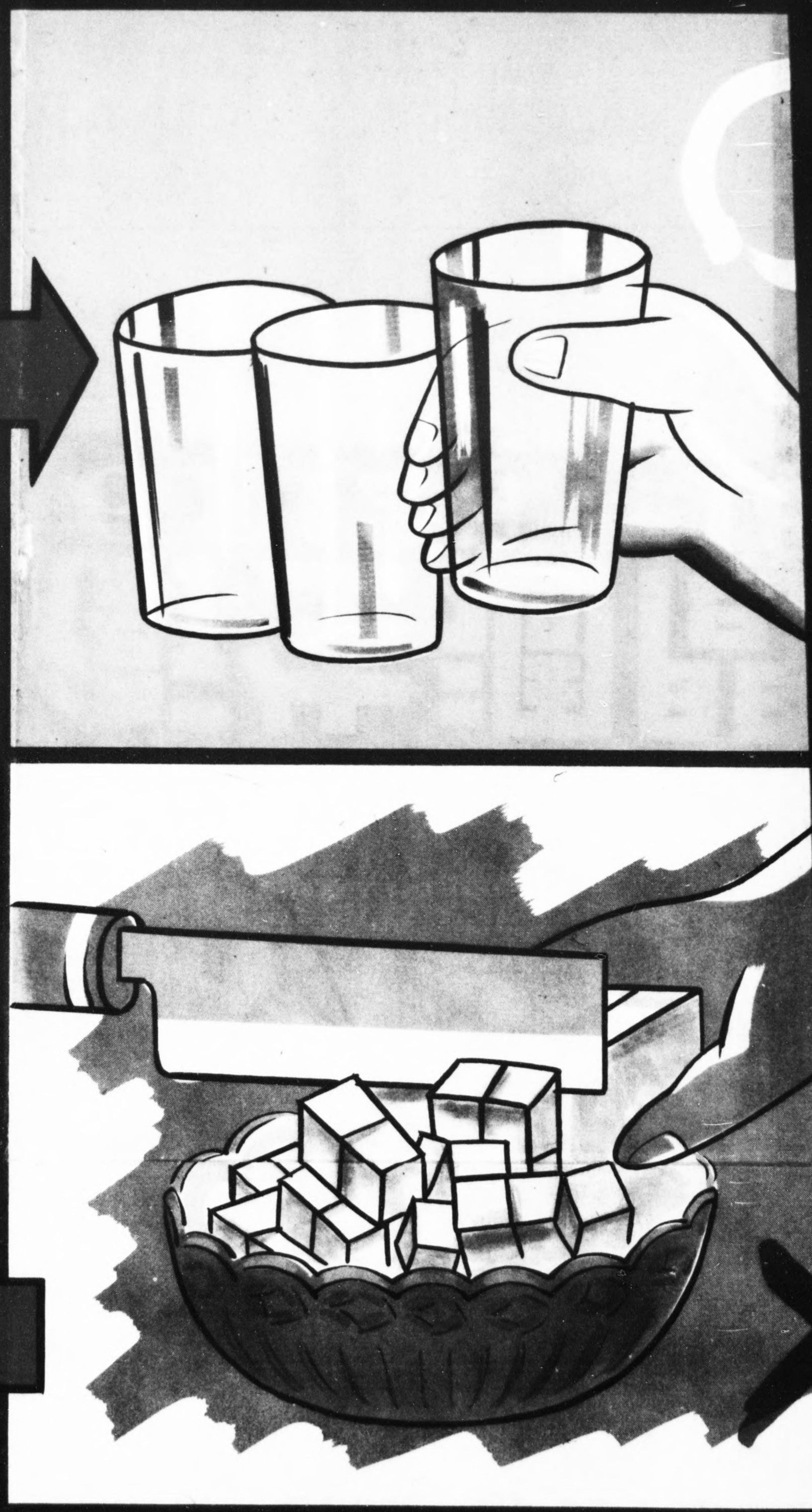
予防はあなたの手ヵ





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水はあなたの手から

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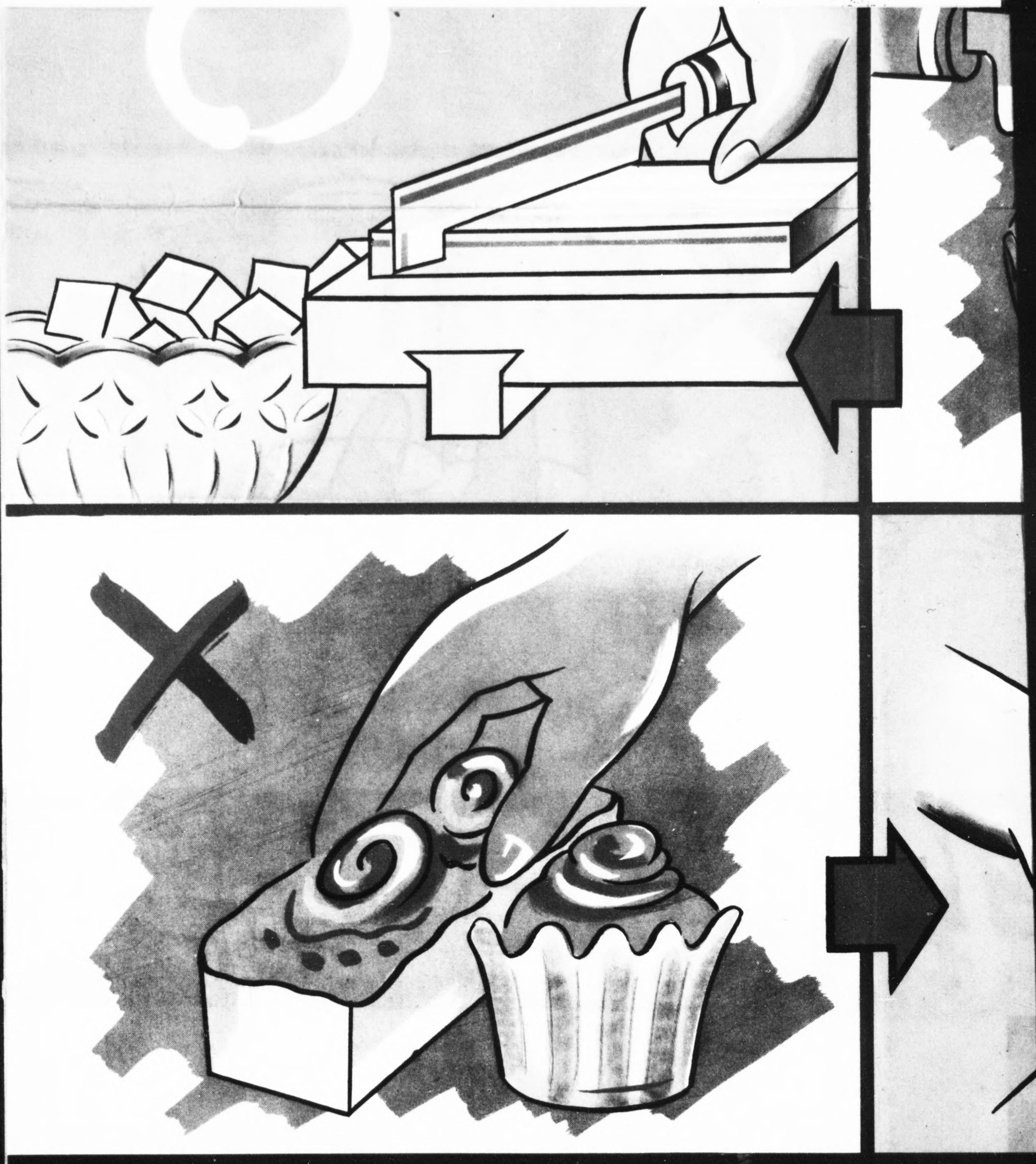
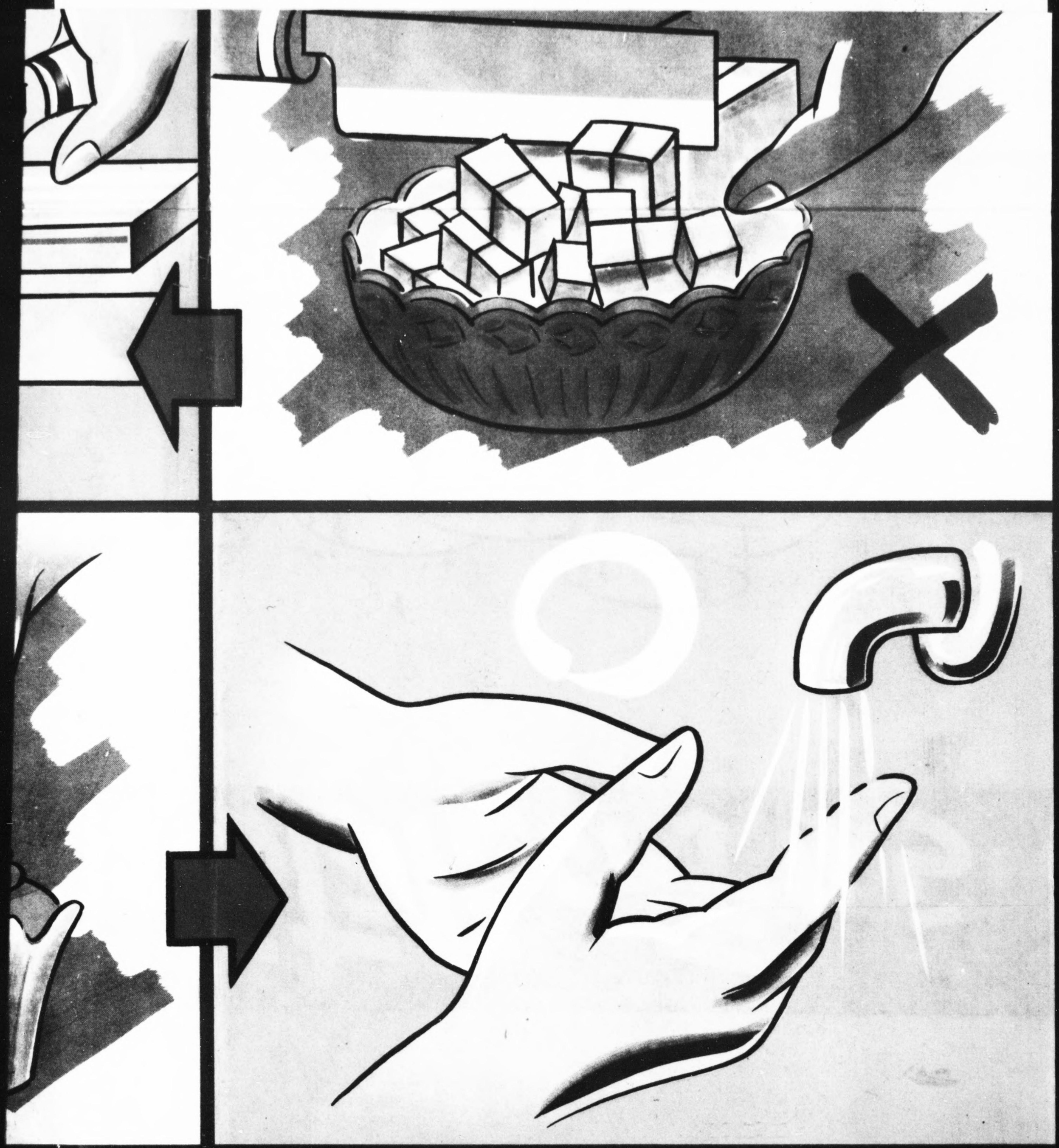


たべもの衛

福島県衛生部

6月

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



の衛生週間

6月12日 — 18日

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

Prevent disease through your hands

Food Sanitation Week

FUKUSHIMA Prefectural Health Bureau

From 12 June To 18

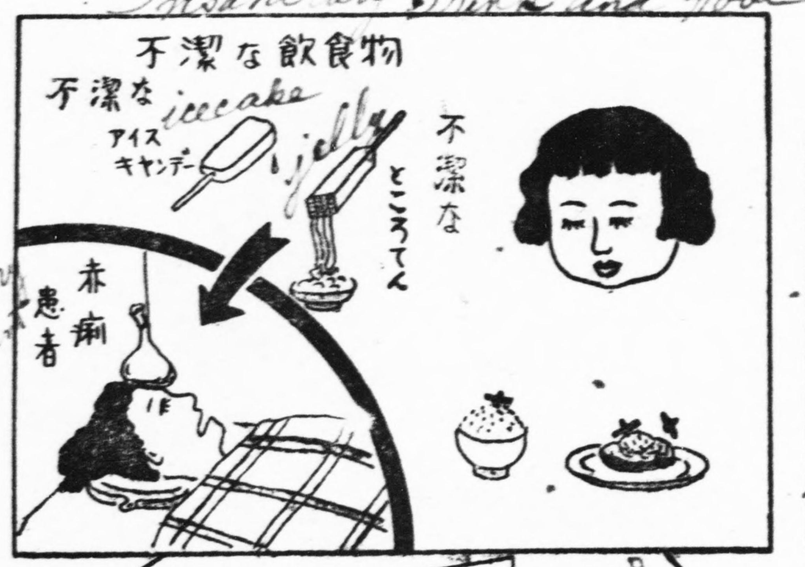
DECLASSIFIED E. O. 12065 SECTION 3-402 / NNDG NO. 775013

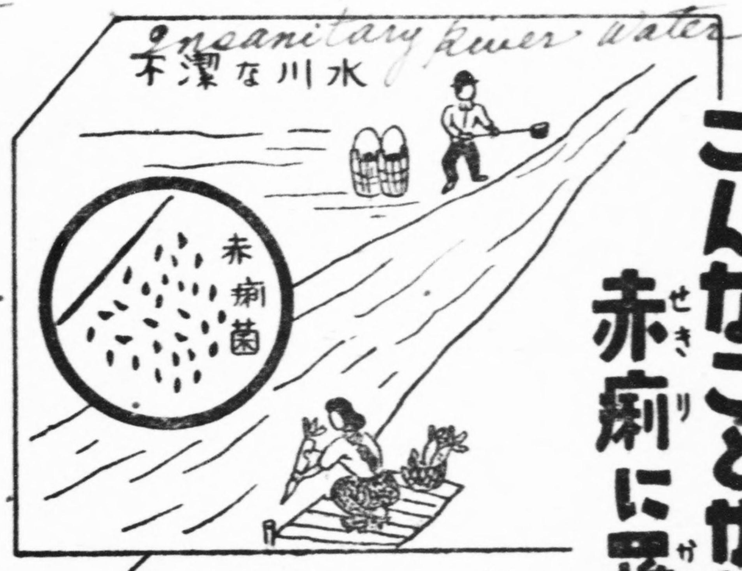
DECLASSIFIED E. O. 12065 SECTION 3-402 / NNDG NO. 775013

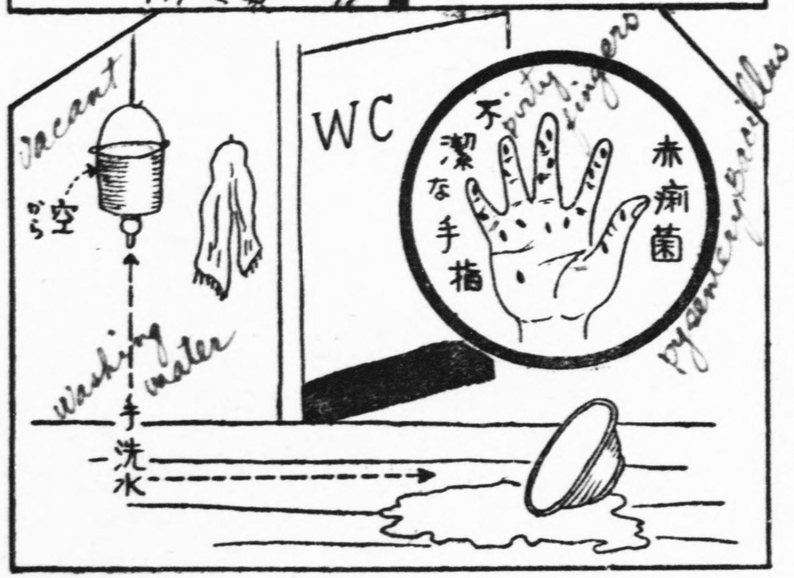
This section is concerned with the prevention of dysentery bacillus as follows

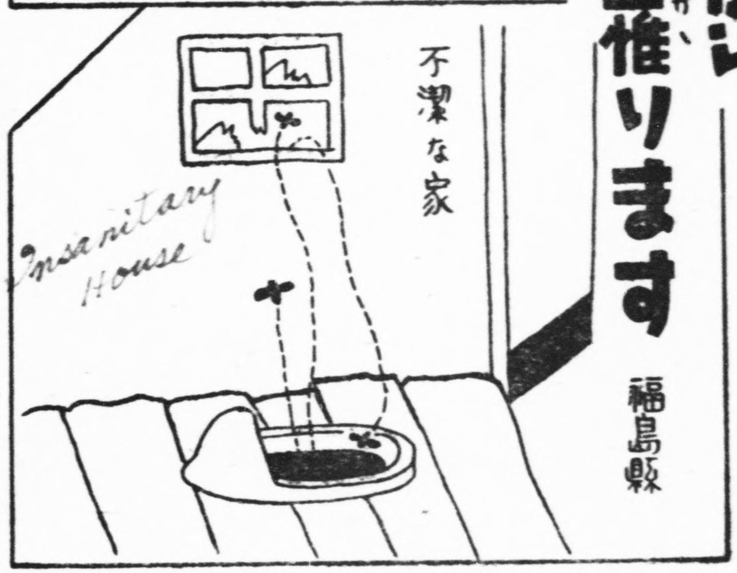
こんなことから赤痢に罹(カヽ)ります

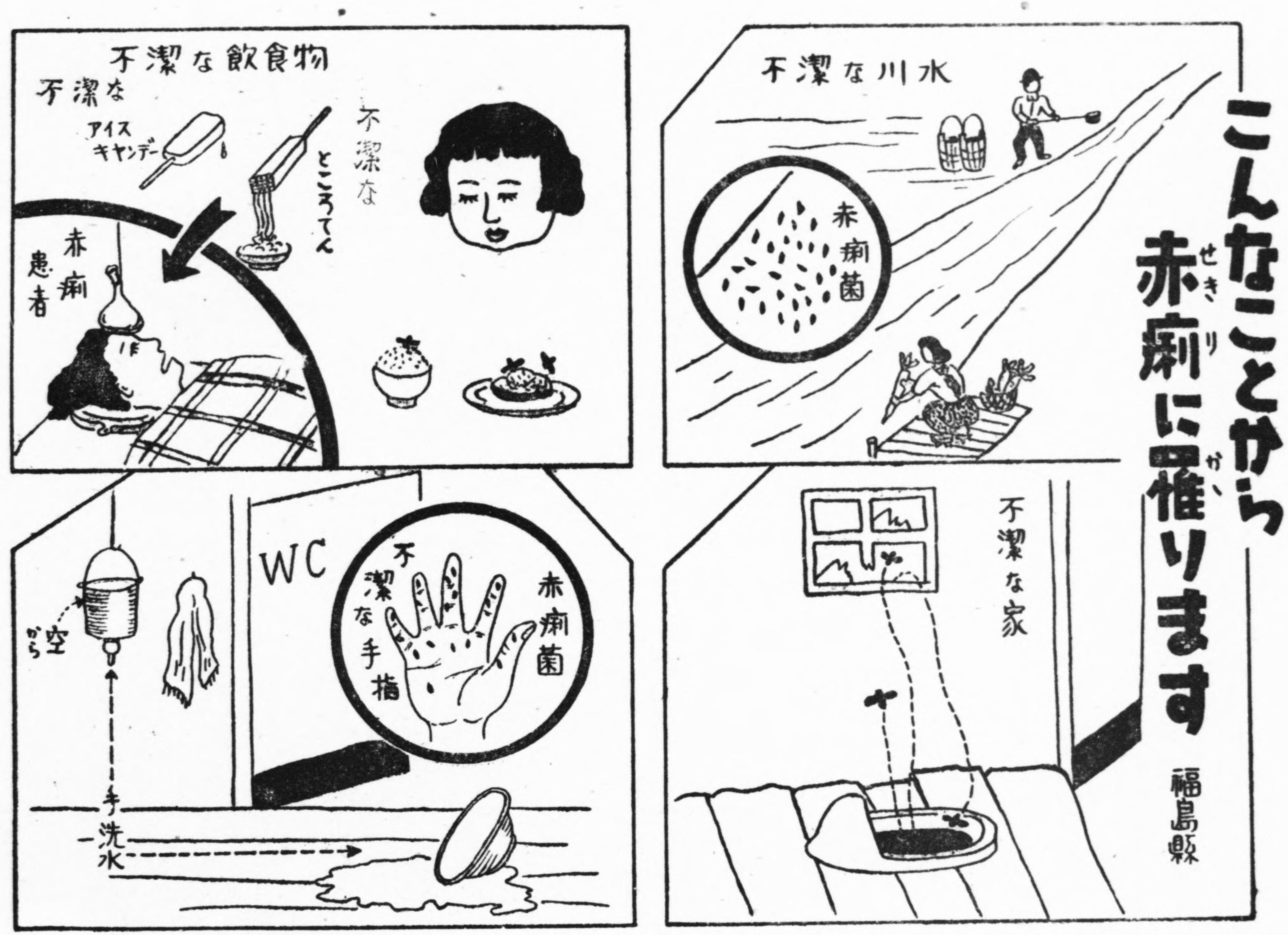
福島縣











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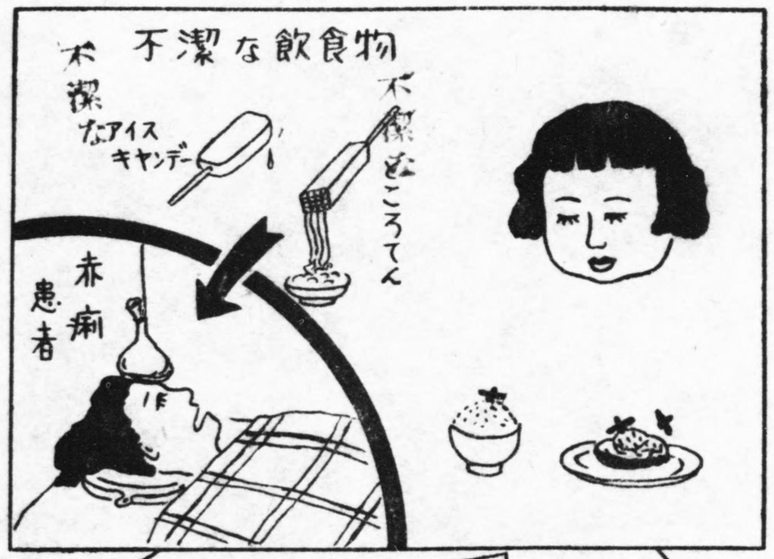
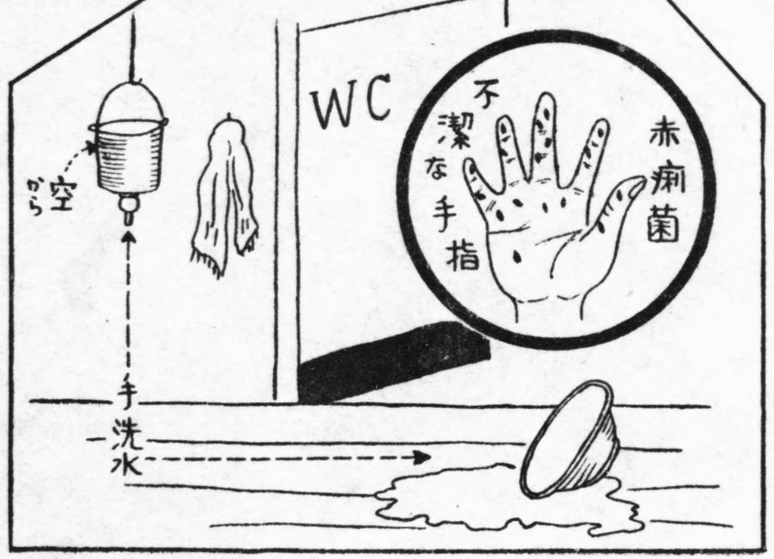
DECLASSIFIED E. O. 12065 SECTION 3-402 / NNDG NO. 775013

こんなことから赤痢(せきり)に罹(か)ります

福島縣





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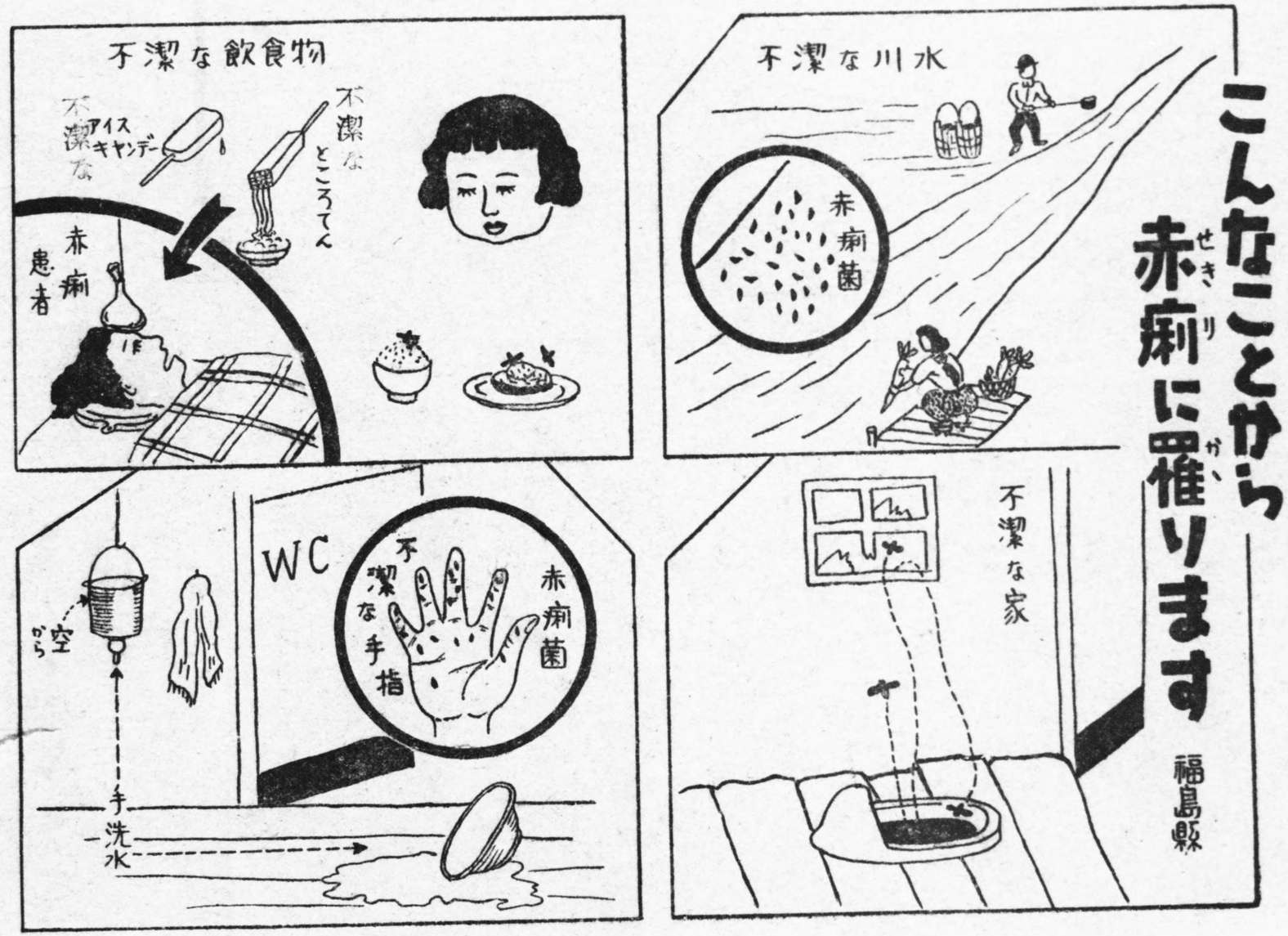
こんなことから赤痢に罹ります

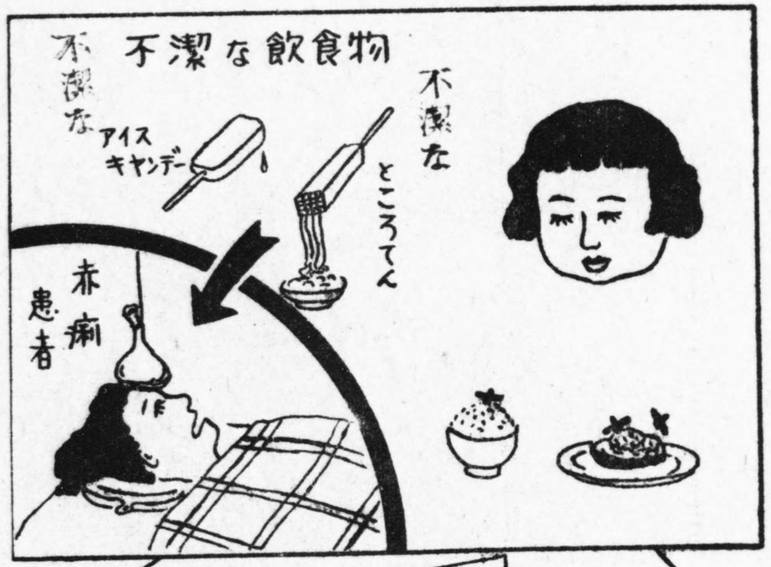
福島縣

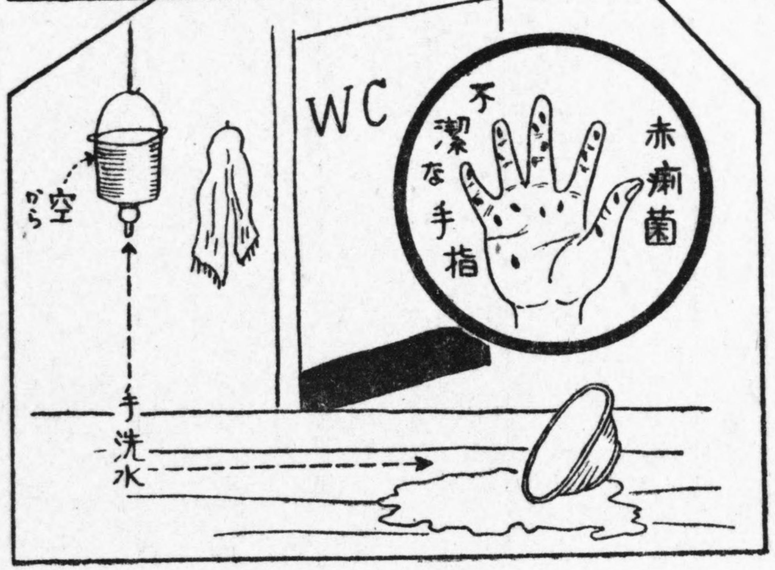


DECLASSIFIED E. O. 12065 SECTION 3-402 / NND NO. 775013

こんなことから赤痢(せきり)に罹(かか)ります

福島縣





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こんなことから赤痢に罹ります

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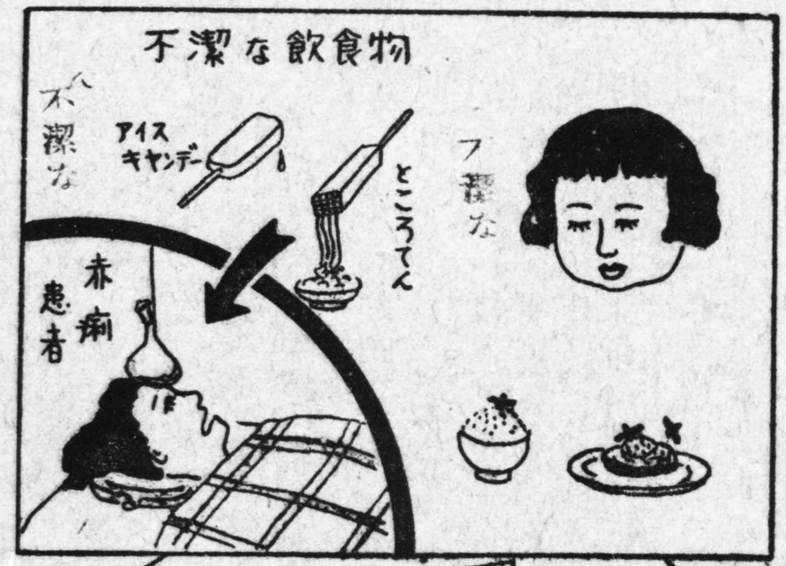
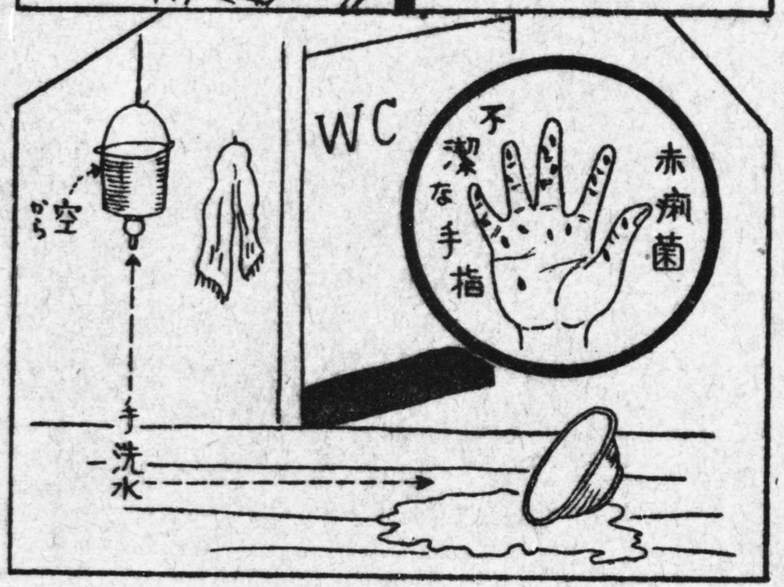
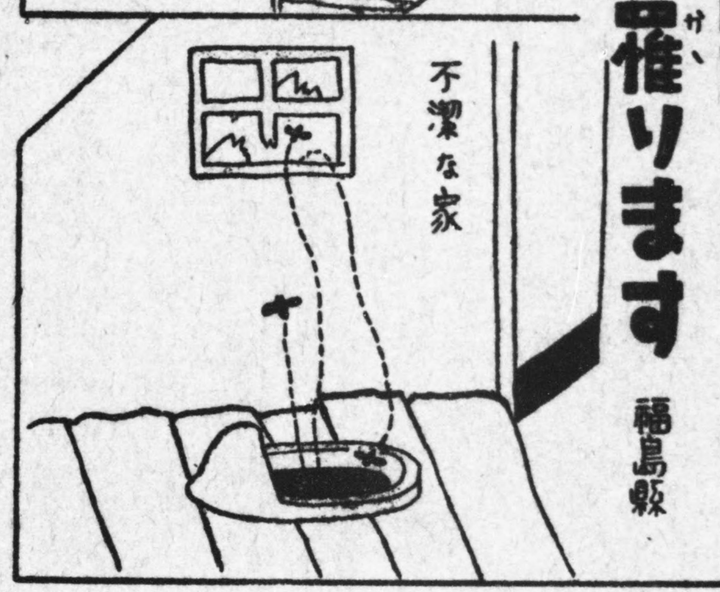


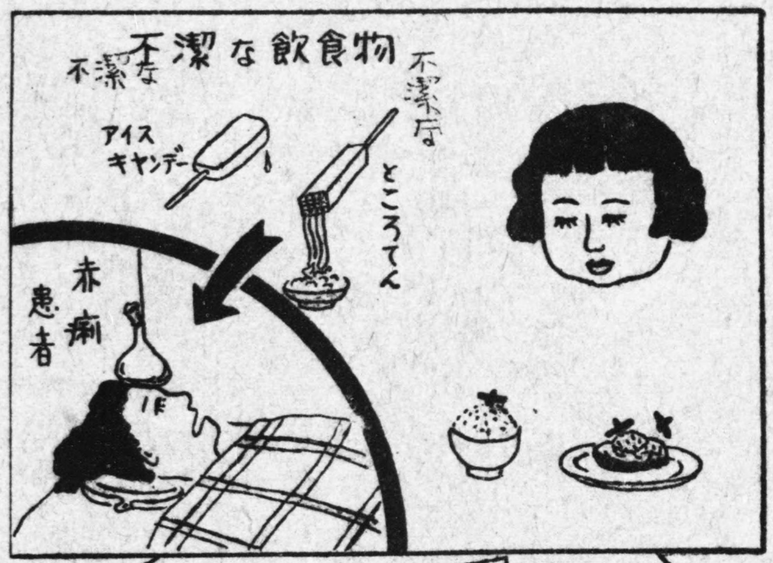


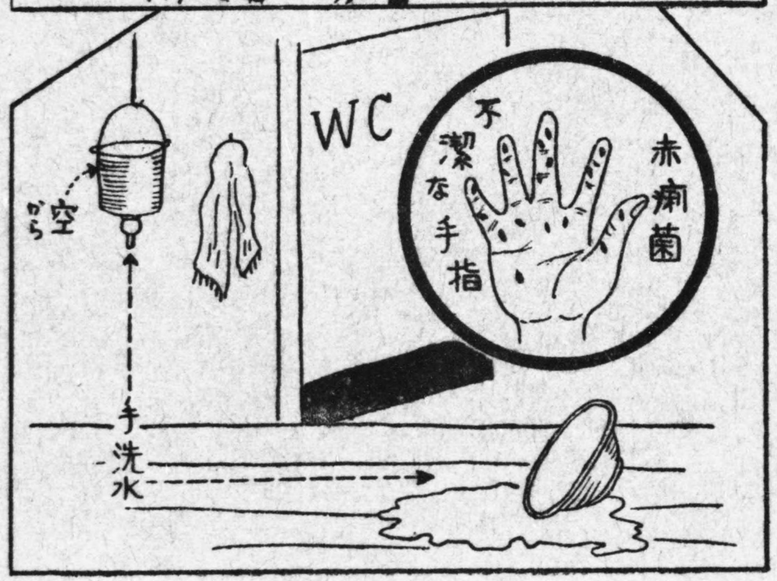


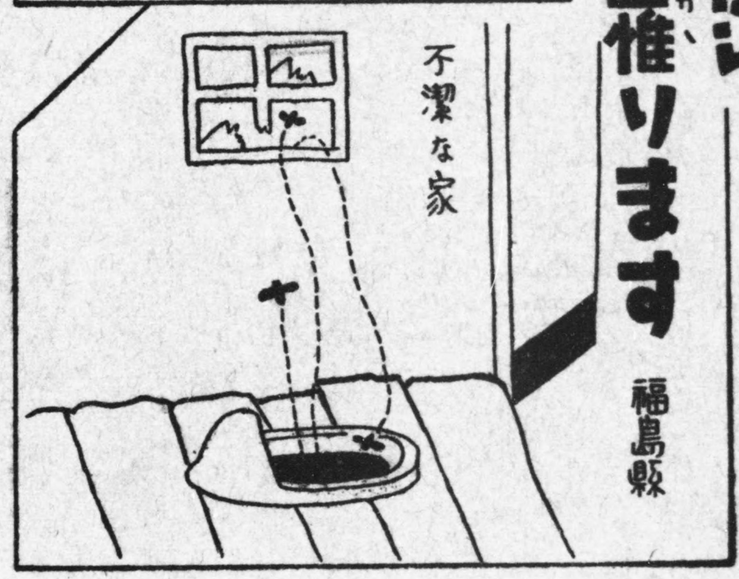
DECLASSIFIED E. O. 12065 SECTION 3-402 / NNDG NO. 775013

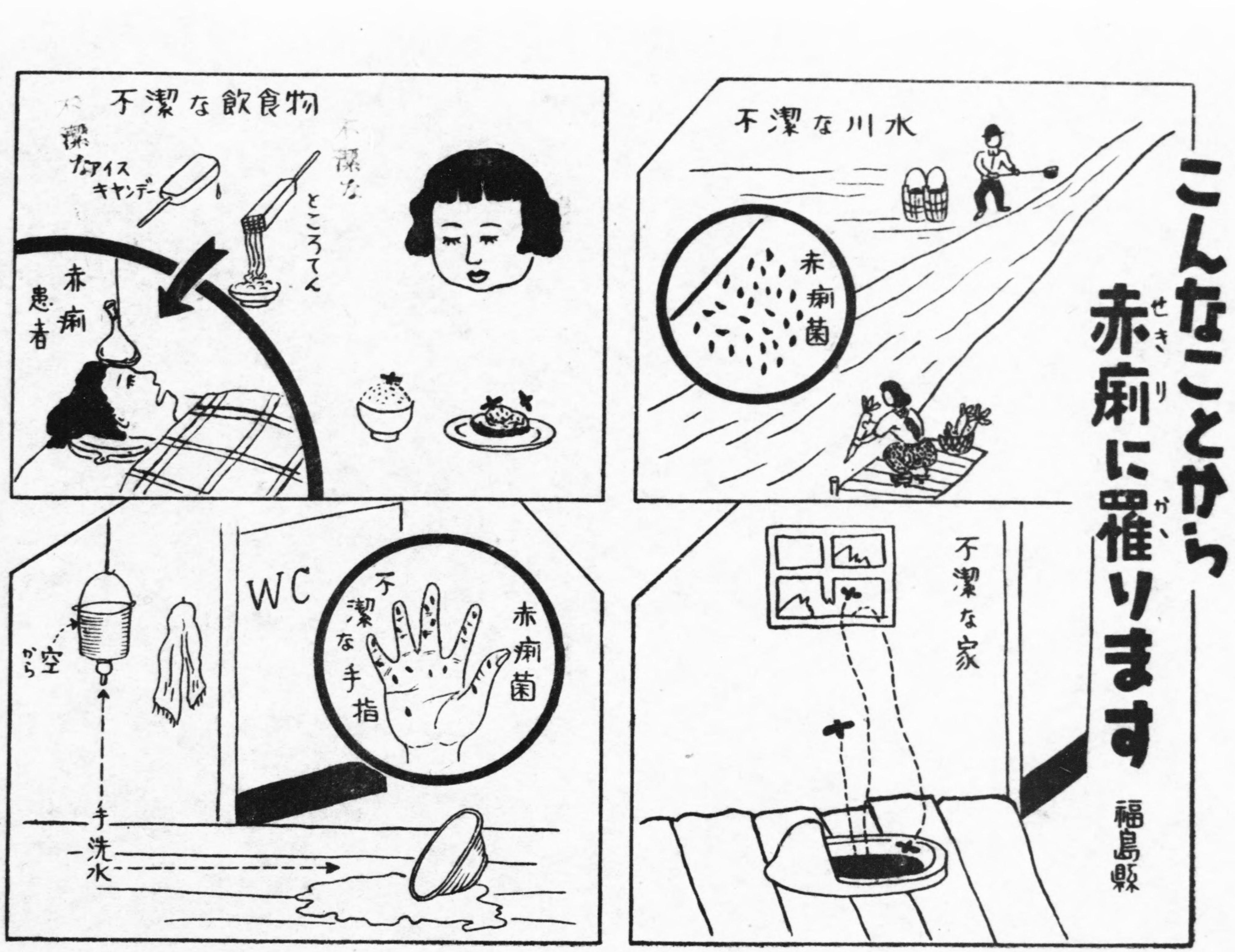
こんなことから赤痢に罹ります

福島縣









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

JBB

(Trans'd by MYG)

Subject: Report on Ending of Mass Dysentery Cases in Fukushima Pref.

To : Ch. of PH, TCAR

From : Health Dept., F'shima Pref.

Dated : 13 June, 1950

A)

At Takatani, Matsubahata, Reizan-mura, Date-gun:

No. of Patients: 10 (1 Ekiri, 7 Ameba-dysentery, 2 Suspect)
Date of 1st Onset: 9 May, 1950
Date of Last Patient's recovery: 6 June, 1950
No. Patients Recovered: 9 (1 Dead)
Present Patient: None
Control Activities: (As of 24 May)
People Examined: 324 Houses Disinfected: 46
Wells Disinfected: 24

Drugs Used:
Cresol - 20 kg DDT Powder - 90 kg
DDT Liquid - 2.5 gal. Lime - 80 kg

B)

At Kita-machi, Kitakata-cho, Yama-gun

No. of Patients: 7 (all Ameba-dysentery - No Dead)
Present Patient: None
Control Activities:
People Examined: 182 Houses Disinfected: 57
Wells Disinfected: 100

Drugs Used:
Cresol - 60 kg DDT Powder - 21 kg
DDT Liquid - 18 gal. Lime - 30 kg
Pyrethrum Emulsion - 60 gal.

C)

At Nukata, Oda-mura, Date-gun

No. of Patients: 9 (1 Ekiri, 4 Ameba-dysentery, 4 Suspects)
Date of 1st Onset: 2 May, 1950
Date of Last Patient Recovery: 8 June, 1950

Date of 1st Onset: 9 May, 1950

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

Date of Last Patient Recovery: 8 June, 1950

Date of 1st Onset: 9 May, 1950
Date of Last Patient's recovery: 6 June, 1950
No. Patients Recovered: 9 (1 Dead)
Present Patient: None
Control Activities: (As of 24 May)
People Examined: 324 Houses Disinfected: 46
Wells Disinfected: 24

Drugs Used:
Cresol - 20 kg DDT Powder - 90 kg
DDT Liquid - 2.5 gal. Lime - 80 kg

B)
At Kita-machi, Kitakata-cho, Yama-gun

No. of Patients: 7 (all Ameba-dysentery - No Dead)
Present Patient: None
Control Activities:
People Examined: 182 Houses Disinfected: 57
Wells Disinfected: 100

Drugs Used:
Cresol - 60 kg DDT Powder - 21 kg
DDT Liquid - 18 gal. Lime - 30 kg
Pyrethrum Emulsion - 60 gal.

C)
At Nukata, Oda-mura, Date-gun

No. of Patients: 9 (1 Ekiri, 4 Ameba-dysentery, 4 Suspects)
Date of 1st Onset: 2 May, 1950
Date of Last Patient Recovery: 8 June, 1950
No. of Patients Recovered: 8 (1 dead)
Present Patient: None
Control Activities:
People Examined: 2,735 Houses Disinfected: 430
Wells Disinfected: ~~430~~ 266

Drugs Used:
Cresol - few DDT Powder - 50 kg
DDT Liquid - 80 gal. Lime 55 kg

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

Weekly Report - 15 April 1950
Continued

PREFECTURE	SCHISTOSOMIASIS Current Cases	SCHISTOSOMIASIS Cumulative Cases	FILARIASIS Current Cases	FILARIASIS Cumulative Cases
HOKKAIDO	-	-	-	-
AOMORI	-	-	-	-
IWATE	-	-	-	-
MIYAGI	-	-	-	-
AKITA	-	-	-	1
YAMAGATA	-	-	-	-
FUKUSHIMA	-	-	-	-
IBARAKI	-	-	-	-
TOCHIGI	-	-	-	-
GUMMA	-	-	-	-
SAITAMA	-	-	-	1
CHIBA	-	-	-	1
TOKYO	-	1	-	-
KANAGAWA	-	-	-	-
NIIGATA	-	-	-	-
TOYAMA	-	-	-	-
ISHIKAWA	-	-	-	-
FUKUI	-	-	-	-
YAMANASHI	9	63	-	1
NAGANO	-	-	-	-
GIFU	-	-	-	-
SHIZUOKA	-	-	-	1
AICHI	-	-	-	-
MIE	-	-	-	-
SHIGA	-	-	-	-
KYOTO	-	-	-	-
OSAKA	-	-	-	2
HYOGO	-	-	-	1
NARA	-	-	-	-
WAKAYAMA	-	-	-	2
TOTTORI	-	-	-	-
SHIMANE	-	-	-	-
OKAYAMA	-	-	-	1
HIROSHIMA	-	8	-	-
YAMAGUCHI	-	-	-	-
TOKUSHIMA	-	-	-	-
KAGAWA	-	-	-	-
EHIME	-	-	-	3
KOCHI	-	-	-	-
FUKUOKA	2	28	-	1
SAGA	-	-	-	-
NAGASAKI	-	-	-	1
KUMAMOTO				

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MIYAGI	-	-	-	-
AKITA	-	-	-	1
YAMAGATA	-	-	-	-
FUKUSHIMA	-	-	-	-
IBARAKI	-	-	-	-
TOCHIGI	-	-	-	-
GUMMA	-	-	-	-
SAITAMA	-	-	-	1
CHIBA	-	-	-	1
TOKYO	-	1	-	-
KANAGAWA	-	-	-	-
NIIGATA	-	-	-	-
TOYAMA	-	-	-	-
ISHIKAWA	-	-	-	-
FUKUI	-	-	-	-
YAMANASHI	9	63	-	1
NAGANO	-	-	-	-
GIFU	-	-	-	-
SHIZUOKA	-	-	-	1
AICHI	-	-	-	-
MIE	-	-	-	-
SHIGA	-	-	-	-
KYOTO	-	-	-	-
OSAKA	-	-	-	2
HYOGO	-	-	-	1
NARA	-	-	-	-
WAKAYAMA	-	-	-	2
TOTTORI	-	-	-	-
SHIMANE	-	-	-	-
OKAYAMA	-	-	-	1
HIROSHIMA	-	8	-	-
YAMAGUCHI	-	-	-	-
TOKUSHIMA	-	-	-	-
KAGAWA	-	-	-	-
EHIME	-	-	-	3
KOCHI	-	-	-	-
FUKUOKA	2	28	-	1
SAGA	-	-	-	-
NAGASAKI	-	-	-	1
KUMAMOTO	-	-	1	5
OITA	-	-	-	1
MIYAZAKI	-	-	1	3
KAGOSHIMA	-	-	-	4
TOTAL	11	100	2	29
RATE				
Current	0.7	0.4	0.1	0.1
Previous	0.5		-	

See footnotes at end of table.

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

File T.S.

FUKUSHIMA PREFECTURE

Summary of the prevention measures for digestive organs diseases specially dysentery at the prevalent period this year.

1. Schedule

a. Fly extermination program is scheduled as the most effective counter-measure for prevention of dysentery. Environment sanitation and sanitation guidance is to be given.

b. A Dysentery Prevention movement will be opened throughout the prefecture in an effort to prevent the occurrence of the disease.

c. By honest reporting and searching bacillus, hidden infection sources will be cleared away.

2. Summary

a. Environment sanitation counter-measures

(1) Environment sanitation and food sanitation inspectors will especially engage in inspecting and guiding people on an environment and food sanitation outside health centers.

(2) Prevention of Fly Birth

(a) Guidance and training for sanitation squads will be given and their activities will be emphasized. In bad environment districts, operation will be practiced at least twice in one month. Fly extermination operation will be specially stressed. Environment sanitation inspectors and assistant inspectors will give people a practical guidance how to do fly extermination thoroughly and properly.

(b) Give guidance how to carry out the following items

Clearing away the places where flies are born.

Closing tightly loopholes for dipping up nightsoil and circle of urine holes.

Screening the windows of toilet rooms and putting lids on urine holes.

Spraying DDT liquid to toilet rooms, stables and kitchens.

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3. Cleaning

a. From May to October, monthly cleaning will be carried out especially in such dirty places as mass housing quarters, repatriates' residence and poor peoples' residence. Specially such places as toilet rooms, drainages, kitchens, wells, garbage boxes where flies are born will be cleaned. If necessary, temporary cleaning squads will be organized to give cooperation.

b. Proper collection of garbage will be practised. Guide every house to have its individual garbage box. If situation needs, public garbage boxes will be set.

c. Dipping up nightsoil and urine will be done at least thrice in a month. If necessary, improvement of urine holes or increase of latrine building will be guided. If possible, water closets will be recommended to set up.

d. In carrying dipped night soil and urine, prevention for making around dirty and the final disposition will be properly done.

4. Drinking water

a. Thorough sterilization by chlorine will be operated to all public waterworks including simple waterworks.

b. Examination on water quality of the public wells and individual well, improvement of the environment and disinfection by chloride of lime will be practised. Among the public wells in the jurisdiction, open and insanitary ones will have to be disinfected by chlorine every day during the prevailing period from May to October conducted by every city, town and village authorities.

c. All the warnings on the suspension of the water supply will be thoroughly understood.

d. The towns and villages where there are few wells and use river water will immediately put the following items into practice.

(1) To dig out sanitary and safe wells.

(2) To explain how dangerously the prevalence of dysentery is caused by using river water.

(3) If possible, to prohibit to drink river water and wash food
a and food utensils with river water. For this purpose to make people understand by posters and sign board indications.

5. Food Sanitation

a. Food sanitation inspection system will be organized and the inspectors

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

will be trained in prevention of dysentery.

b. Food sanitation inspectors will strictly control on food store keepers. Inspectors will inspect many times hotels, eating houses, restaurants, cook shops, ice cake stores and fish stores. Inferior qualified stores will be suspended operation. The following items will be put into practice:

(1) To inspect whether there are latrine and toilet room or not and the actual condition of toilet rooms. If these are not satisfactorily furnished within the definite period, make them to be satisfactorily furnished.

(2) Ice cake manufactures, particularly dealers and gelidium jelly dealers will be carefully inspected and guided. (At times, bacillus examination will be conducted.)

(3) The above mentioned dealers will be given a preliminary directions for the disposition for the occurrence of diarrhea cases.

(4) The above mentioned dealers will receive a bacillus carrier examination once at a health center free of charge.

c. Sanitation for Mass Lunch Supply (business centers, schools, hospitals and national hospitals, waterworks centers etc.

(1) Cleaning of kitchen will be practiced every day.

(2) Bacillus carrier examinations on workers will be conducted more than once a month. Workers' list will be made by health centers and examination will be free of charge.

(3) Hand washing basins will be examined. If there is no basin or the basins are imperfect, running water equipment will be satisfactorily prepared.

(4) After using latrine, workers will be disinfected with 20% cresol water before cooking.

(5) Health condition of workers and their dependents will be carefully watched. If there is any diarrhea case, a sufferer will have a holiday, be diagnosed and receive a bacillus carrier examination. At the same time, the disposition will be operated according to the guidance.

(6) Summary for Diarrhea Cases. Food utensils will be sterilized by every time and clothes will not be used.

(7) DDT or other medicines will be sprayed to fly birth places and grown up flies will be exterminated.

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

(8) Dipping holes of latrines will be equipped with wire netting.

(9) Rodents will be exterminated.

(10) Well water will be examined. If it is proved to be of bad quality, it will be disinfected with cresol every day.

(11) Workers will be preliminarily guided according to the guidance summary for diarrhea patients dependents.

The above dispositions will be practised appointing teachers of schools and health administrators as responsible persons.

1. Sanitary Training

a. The importance of dysentery prevention this year will be recognized and the prevention knowledge will be broadly understood

b. Especially, fly extermination will be developed.

c. Diagnosis in the early period will be recommended and concealing the patients will be thoroughly prevented.

d. Short courses for dysentery prevention will be opened for food dealers so that food sanitation may be promoted.

e. Directors of schools and dormitories will be guided in dysentery prevention knowledge.

f. School children and pupils will be taught by teachers about sanitation by pamphlets and through the children and pupils, their homes will be guided. Round table conferences will be sponsored for women's associations. Insanitary ice-cakes, cakes and gelidium jelly will be warned. Hand washing after using latrine will be strictly practiced.

g. In this case, diarrhea patients' house guide summary will be adopted.

h. Exhibitions and movies on dysentery prevention will be opened.

i. Travelling sanitary exhibition advocated by the Public Health Department of the Welfare Ministry and the Government Insurance Office will be well adapted.

j. Propaganda materials will be prepared for the occurrence of dysentery cases by collecting slogans from the public.

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2. Emphasis on prevention activities

a. Emphasizing Prevention system. In view of the fall of prevention system and the decline of the prevention staff's decline of recognition of dysentery, the number of the persons engaging in prevention business will be secured. Especially public health nurses' activities will be urged.

b. Bacillus examination facilities will be well furnished so that bacillus examination may be broadly conducted. Especially health centers will be immediately furnished.

c. Patients will be diagnosed in the early period and be honestly reported. The Doctors Association will be requested to practise diagnosis in the early period and honest reporting. Report of colitis cases and bacillus examination will be emphatically requested.

d. Diagnosis of dysentery suspects indicated in death notes will be carefully looked. If necessary, investigations will be conducted. Field workers will make efforts in collecting information.

e. Parties will be prohibited at the occasions of deaths from colitis and other diarrhea cases. The officials of city, town and village authorities in charge of sanitation will always get contact with census registration offices and when they deliver burial certificates, they will ask about died persons' disease. In cases of colitis or diarrhea, parties will be prohibited.

3. Prefectural Dysentery Prevention Movement. Dysentery Prevention Council will be established by mainly by health centers cooperated by persons concerned about the food matters, women's associations and informats so that conferences will be held to exchange informations, propagate prevention knowledge and discuss about environment sanitation and food sanitation.

4. Prevention Counter measures at the occurrence of patients.

a. Report of patients and decision of diagnosis.

(1) When a doctor diagnoses a patient frequently suffering from stool mixed with mucous and blood will immediately notify as a suspect dysentery without hesitation. When a doctor determines a suspect case as a genuine case or a slight one, he will notify it without delay.

(2) The final diagnosis of dysentery will be as a rule determined as the result of bacteriological test. In order to find bacillus type accurately, strain of bacillus will be kept and sent to the Prefectural Health Laboratory. If possible, SS - agar - agar medium will be used for culture. (Another notification will be issued concerning the use of SS - agar - agar medium.)

5. Prevention Disposition of Patients and Attendants.

a. Disinfection: Disinfection methods of stool and urine, latrines and stained materials will be materially instructed and the result of disinfectious

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

medicine will be carefully examined.

b. Isolation of patients and isolation release: It is needless to say that a patient must be accommodated to an isolation hospital, but when a patient is permitted to be isolated at home, whether it comes under Art V of the Communicable Disease Prevention Law or not will be examined and if permitted, the items of Art VI will be strictly followed. Isolation release will be prudently given confirming the suspension of bacillus activities in accordance with a bacteriological test.

6. Epidemiological Investigation

a. Infection source and course will be promptly and accurately searched and according the result an adequate prevention dispositions will be done.

b. Disease examination will not be only limitted to a patients house and its adjacent houses, but be conducted broadly taking consideration of slight cases.

c. Epidemiological investigation cards and communicable disease investigation cards. (Another notification will be issued. Will be well adopted.)

d. A bacteriological examination will be promptly given to attendants. During necessary period, prevention disposition will be well made and a good watch will be kept on.

e. Fly extermination and prevention. Dispositions on latrines, drainage and drinking waters will be adequately conducted. If possible, improvement of environment sanitation will be conducted.

7. Medical treatment for patients and carriers.

a. By taking sufficient quantity of sulfa drug, dysentry will be cured in its early stage. However, it will be avoided that lay man adopt sulfa drug taking.

b. In case that sulfa drug sufficient quantity taking does not bring an effective result, it is scheduled to use chloromycetin. The detail will be notified in the near future.

c. The plan for preventing an occurrence of dysentery has been proved to be of failure by the occurrence in Yamafuneoi Village, Date County and Kitakata Town, Yama County.

It is very dangerous to depend on only this one method without finding other dispositions.

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

File
TB.

7 June 1950

FROM: Chief of Health Bureau, Fukushima Prefecture

TO: Chief of Public Health Section, Tohoku C A R

The following typhus suspects already reported on 10 May 1950 were determined as genuine cases.

Place occurred	Name, Patient	Suspect File No.	Determined as suspect	Genuine File No.	Determined as genuine	
Sukagawa Town Iwase County	Hisa Ando	2	2 May	2	1 June	as a result of complementary fixation, determined as genuine
Same	Ryoichi Ando	3	5 May	3	1 June	
Same	Masahiro Ando	4	5 May	4	1 June	
Same	Hideo Ando	5	5 May	-	-	Examination was not given

Kesa Kitakawa, typhus suspect diagnosed on 8 May, of Sukagawa Town is now treated as suspect typhus.

On 11 May, the occurrence was reported by telephone.

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

FROM: Chief of Fukushima Prefectural Health Bureau

TO: Chief of Public Health Section of Tohoku Civil Affairs Region

Regarding leaflets for teaching materials for Dysentery Prevention.

For the purpose of Dysentery Prevention and control, 100,000 leaflets were made and distributed to all school children in the jurisdiction through the School Board so that their family members may be thoroughly taught.

No.
Fukushima Prefecture

Date
Health Center

Food Sanitatiob Inspector

stamp

Sanitation Guidance Warning Ticket

As a result of inspecting a sanitation condition of your working place today I found the following points inadequate. Therefore, I give you notice.

Working Place
Working Condition
Trade No. Name

Guidance Items

I confirm the above

Date

Manager Address Name stamp

Keep this sheet. Submit when you are required by the official in charge.

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

Key to Good Luck

These are key to prosperity

1. Wash your hands
2. Receive physical examination and when you are sick, take rest.
3. Don't touch fingers on food.
4. Keep food in sanitary places.
5. Keep food easy to rot in refrigerator.
6. Don't use insanitary food utensils.
7. Don't make flies and rodents touch food.

Food dealers must strictly follow the above.

May 1950

Fukushima Prefectural Bureau

(Paste this sheet to the places easy to be looked at.)

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

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May 1950

Fukushima Prefectural Bureau

(Paste this sheet to the places easy to be looked at.)

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

二五予
昭和二十五年六月七日

福島県衛生部長

東北民事地区司令部公衆衛生課長殿

赤痢予防教材用伝單について

赤痢防遏のため別紙赤痢予防伝單十万部作成し教育委員会に依頼して管下小学校児童に教材用として配付、一般家庭への普及徹底を期したから報告致します。

福島縣

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

第　　號　　昭和　年　月　日

福島縣　　保健所

食品衛生監視員　　㊞

衛生指導注意票

貴營業所の衛生狀態を本日監視した結果左記事項の通り不適な點があるので注意する。今后違反あつた場合には處分せられることがある。

營業所
業態
商號氏名

指導事項

上記の事實を確認します。

昭和　年　月　日

營業者　住所

氏名　　㊞

係員の求めに應じ何時でも提出するよう大切に保存せられたい。

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

第　　號　　昭和　年　月　日

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業　態

商號氏名

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上記の事實を確認します。

昭和　年　月　日

營業者　住　所

氏　名　　㊞

係員の求めに應じ何時でも提出するよう大切に保存せられたい。

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

幸運の鍵

これは商賣繁昌の秘決です。

1 手を洗え。
2 健康診斷をうけ病氣の時は靜養よう。
3 「たべもの」には手指をふれぬこと。
4 「たべもの」は清潔な處へたくわえよ。
5 「くされ」易いものは必ず冷藏庫へ。
6 きたない調理器具を使わぬこと。
7 「たべもの」に蠅や鼠がふれぬよう。

食品業者は必ず守つて下さい。

昭和二十五年五月

福島縣衛生部

（この紙は見やすい處にはつておくこと）

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

生菓子を賣る人々へ!!

一、生菓子製造の許可のない店から仕入たり、製造元がハツキリしない行商人から仕入れた品は、なげさせることがあるから御注意。

二、ハエがたからぬように。

三、手でつかまぬように。

四、手はよく洗い清潔に。

昭和二十五年五月

福島縣衛生部

（この紙はのりで店にはつておくこと）

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

アイスキャンデーの製造と販賣に注意!!

◎〔おなか〕の惡い從業者は休みましょう。

◎製造業者の方々へ

一、取扱いは清潔に。
二、手はよく洗い「清潔」に。
三、一匹の蠅に心ゆるすな。
四、行商人には衛生注意。
責任は「あなた」にある。

◎行商人の方々へ

一、「でんせん病」の發生している土地には入るな。
二、「ボックス」は規定のもので、いつも「きれい」に。
三、「手」の消毒器はかならずもつように。
四、「キャンデー」の食べる部分に「手」をふれるな。

食べものによる病氣をなくしましょう!

昭和二十五年五月

福島縣衛生部

（この紙はのりで店にはつておくこと）

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

7303

Subject: Acute Cerebrospinal Menigitis in F'shima Pref.

Patient: Toshio WATANABE, Male, 1 yr-old

Add. : Tayashiki, Nogami, Ono-mura, Futaba-gun, F'shima Pref.

Onset : 24 May, 1950

1st Exam: 30 May, 1950

Diagnosed: " " "

Rp. Doctor: Namie Health Center

Source of Infection: Unknown

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

(Telephone report)

To: Chief of public Health Section of TCAR

file: TB

From: Prevention Section of FUKUSHIMA Prefectural Health Bureau

Regarding previously reported typhus cases, three typhus suspects and the need attention patient occurred in SUKAGAWA Town IWASE County FUKUSHIMA Prefecture

At 1100 hours on 1 June 1950, as the result of the serological test,

HISA ANDO,
MASAHIRO ANDO
KOICHI ANDO

were determined to be genuine typhus cases

The need attention patient is still unknown.

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

Operational Directive No. Hq Eighth Army, Cont'd

DISTRIBUTION:

"B" and "X" Information only

3 copies to each Civil Affairs Team

20 copies to Civil Affairs Sec., Hq 8th Army

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

file B

FROM: Chief of Fukushima Prefectural Health Bureau

TO: Chief of Public Health Section, Tohoku C A R

Regarding the occurrence of mass dysentery cases.

Name: Bacillary Dysentery

Place of Outbreak: Kitamachi, Kitakata Town, Yama County

Total of patients: 7 (Please correct the previous report)

Carrier: 1

No. of patients recovered: 5 (No death)

Present Patients: 2

Carrier: 1

Hospital: Isolation Hospital

Counter measures for prevention:

1. Total of Persons physicall examined: 182
2. Toal Persons Inspected: 215
3. Total Carriers Inspected: 447
4. Total Houses Disinfected: 53
5. Total Houses Cleaned: 47
6. Total of Fly Extermination Houses: 50
   Fly extermination method was carried out in the public institutes.
7. Total Wells disinfected: 100
8. Use of water flowed from the source was prohibited and drains were drained up.

Use of Medicine:	Cresol	30 kilogram
	Powder DDT	21 kilogram
	Fluid DDT	18 gallon
	Chloride of lime	60 kilogram
	Lime	6 gallon
	Pyrethrum emulsion	6 gallon

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

25 may [illegible]

REPORT ON TYPHUS EPIDEMIC (No. 1)

To : Chief of Public Health Section, Tohoku Civil Affairs Region

Date : 22 May 1950

Sir;

The subject matter is reported as follows:

)1) Disease... Bacillary dysentery, Ekiri and dysentery suspect

(2) No of patients...10 of bacillary dysentery, 2 of Ekiri and 7 of dysentery suspects.

(3) No of death...2 of bacillary dysentery and 2 of Ekiri

(4) Germ carriers...8

(5) Place...Koteuchishikano and Kanoshinden of Yamafunau Village, Date Gun, Fukushima Prefecture

(6) When diagnosis of the 1st patient was made...24 April

(7) Onset of the 1st patient...22 April

(8) Name of the 1st patient...Mineko Yuzawa, F. 15 years old

(9) Doctor who gave the above diagnosis...Nobuo Ogasawara

(10)Where patients are putin...Isolation Ward of Yamafunau Village and ~~ixx~~ the dispensary of the village

(11)Course of transmission(outlined)
Probably it came from Tokyo area by a travellor who had contacts through traffic, touch, meeting, or party.

(12)Outline of measures taken:
413 people were physically examined; 7719 were inspected; 511 were stool-examined; 18 germ carriers were found as a result; 126 houses were disinfected; 1893 wells were disinfected; de-flying cases number 332, disinfection of streams was done with bleaching powder, 1328 houses were cleaned; and 50.5Kg of cresole, 132 Kg of DDT dust, 26.5 gal. of DDT spray, 4150 Kg of bleaching powder, 5265 Kg of lime and 16 liters of petroleum were used.

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

Subject: Telephone Report on Suspect Cases of Typhus in F'shima

From : Fukushima Disease Prev. Sect.

Date : 1315 hours, Thurs., 18 May, 1950

SUKAGAWA, F'shima Pref. :

During period of from 2 to 9 May, 1950, the following results indicated in re suspect cases of typhus in SUKAGAWA:

1)	New Patients	4
2)	Contacts	7
3)	DDT'd people total	4,909
4)	" Houses	576
5)	Examined Persons	3,334
6)	Vaccinated Persons	1,301
7)	No. of Rats Caught	103
8)	DDT(Powder) Used	249kg
9)	" (Liquid) "	112 gal.
10)	Cresole	2kl.

SUKAGAWA TYPHUS CASES

A Patient of Typhus, Positive Case:

Patient : Kesa KITAYAMA*, Female, 46, Pedlar

Add. : 26 Higashi-itchome, Sukagawa-cho, F'shima Pref.

Onset : 9 May, 1950

1st Exam. : " " "

Diagnosis : 6:00 P.M., 10 May, 1950

Rpt. Doctor: Dr. KIKUCHI, Chuo Hospital, Sukagawa-cho

* She lived at the next house to the ANDOS, the previous suspect cases of typhus in Sukagawa, and was not kept in the Isolation Hospital. She got a 1st shot of immunization against typhus on 3 May, 1950. Immediately after of doctor's diagnosis, she was taken in the Isolation Hospital. Dr. NAKASONE, Ch. of Prev. Med. Sect., went to the spot early this morning(11 May)

---

1) Both of Drs. HASHI & NAKASONE have visited Sukagawa

2) Uncertain so far (A neighborer of the ANDOS, after visiting Tokyo in April, suffered from pneumonia, but recovered now. Investigation is made now in tracing this line)

3) Congested with small houses and sanitary condition around there is extremely bad.

4) No up-to-date record. On 3 May, 31 houses were DDTed and 200 people were vaccinated.

The Pref. authorities belive that they are doing every efforts for control.

The detailed report of the ANDO cases will be sent by tomorrow.

When they got from Tokyo about the result of completment fixation, they will forward it right away to us.

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

Diagnosis : 6:00 P.M., 10 May, 1950

Rpt. Doctor: Dr. KIKUCHI, Chuo Hospital, Sukagawa-cho

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(The above informations were got through telephone from F'shima Prev. Med. Sect. 0910, 11May)

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

Form PH 3

HEADQUARTERS EIGHTH ARMY
Office of the Surgeon
Military Government Section
APO 343

Hospital and Medical Facility Survey

To be filled out by Japanese hospital officials for each hospital in area.

1. Name of institution: ______________________

2. Location and address: ______________________
____

3. Type of institution (check):

General . . .( ) Contagiou . . .( ) Leprosarium . . .( )
Mental . . .( ) Tuberculosis. .( ) Prostitutes . . .( )

Other: (state which) ______________________

4. Physical condition of institution:
A. General condition (including heat, light, and plumbing):
____
____
B. State of repair: ______________________
C. War damage, if any: ______________________
D. Potentialities for expansion: ______________________

5. Number of personnel employed:

Physicians_____ Nurses_____ Dentists_____ Laboratory tec_____
X-Ray tec_____ Other skilled (state which): ________ ____
Unskilled _____
________ ____
________ ____

6. Facilities and service (check):

Out-patient department . . .( ) Laboratory service . . . . .( )
X-Ray, diagnostic . . . . . .( ) X-Ray therapy . . . .( )
Dental service . . . .( ) Food service . . . .( )
Major surgery . . . .( ) Other (state which). . . . .( )
________ . . . . . .( )

7. Capacity:

Total number of beds available . . . ______
Beds available for isolation cases . ______
Beds in restraint wards . . . . ______
Beds available for maternity cases . ______
Others (state which) . . . . ______ ________

8. Ownership (private, government, etc.):

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

General . . .( ) Contagiou . . .( ) Leprosarium . . .( )
Mental . . .( ) Tuberculosis. .( ) Prostitutes . . .( )

Other: (state which) _____

4. Physical condition of institution:
   A. General condition (including heat, light, and plumbing):
   _____
   _____
   B. State of repair: _____
   C. War damage, if any: _____
   D. Potentialities for expansion: _____

5. Number of personnel employed:

   Physicians____ Nurses____Dentists____ Laboratory tec____
   X-Ray tec____ Other skilled (state which): _____ ____
   Unskilled ____ _____ ____
   _____ ____

6. Facilities and service (check):

   Out-patient department . . .( ) Laboratory service . . . . .( )
   X-Ray, diagnostic . . . . . ( ) X-Ray therapy . . . . . .( )
   Dental service . . . . . .( ) Food service . . . . . .( )
   Major surgery . . . . . .( ) Other (state which). . . . .( )
   _____ . . . . .( )

7. Capacity:

   Total number of beds available . . . _____
   Beds available for isolation cases . _____
   Beds in restraint wards . . . . . _____
   Beds available for maternity cases . _____
   Others (state which) . . . . . _____ _____

8. Ownership (private, goverment, ect.): _____

9. State previous sources of funds used to operate: _____

10. Enumerate shortages of supplies and equipment: _____
   _____
   _____
   _____

Signature of Superintendent____
Name, printed_____

Date _____

Incl 2

DECLASSIFIED E. O. 12065 SECTION 3-402 / NND 96 175013

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

7B13

13 May 1950

FROM: Fukushima Prefectural Health Bureau

TO: Chief of Public Health Section of Tohoku C A R

Report of Typhus Suspects' serum and result of complementary fixation reaction by

The National Prevention Sanitation Laboratory

Name of Patient	Place	Date of Occurrence	Date of Blood letting	Result of Complementary Fixation Reaction	
				Typhus	Typhus Fever
Hisa Ando	Sukagawa Town Iwase County	about 24 April	2 May	Negative	Negative
Masahiro Ando	"	29 April	3 May	Negative	Negative
Ryoichi Ando	"	2 May	5 May	Negative	Negative

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

二五予
昭和二十五年五月十三日

東北民事地区司令部公衆衛生課長殿

福島県衛生部長

発しんチフス疑似患者血清補体結合反応成績について

標記のことについて本日國立予防衛生研究所よりの報告に基き左記のとおり報告致します。

記

二字訂正

患者氏名	発生地	発病月日	採血月日	補体結合反応成績	発しん熱チフス
安藤ヒサ	岩瀬郡須賀川町	四、二四頃	五、二、	陰性	陰性
〃正博	〃	四、二九、	五、三、	〃	〃
〃亮一	〃	五、二、	五、五、	〃	〃

file

FUKUSHIMA Prefecture

Typhus Suspects

List of Patients

Address	Name	Sex	Age	Onset	First examinatio
No.26 HIGASHI ICHOME SUKAGAWA	HISA ANDO	female	31	24 April	29April
"	Ryoichi"	male	9	2May	2 May
"	MAHIRO "	male	3	29 April	2 May
"	HIDEO "	male	0	1 May	2May

HISA was determined on 2 May

Others " 5 may

Course of Infection

SHUJI KATO(45) of No. 4 SETA SUKAGAWA had been in TOKYO several times until February, and had a contact with the YOSHIDA family adjacent to the patients' family. On 8 February, hewas taken ill and received a clinical diagnosis a t ABE Hospital and diagnosed as pneumonia. However, he recoverd after two weeks treatment.

KAMEYO(62) of the YOSHDA fell ill on 11 March. On 21 hewas diacnosed as pneumonia at YABE Hospital. However, he recovered after one month and half. MOTOKO OF THE SAME FAMILY FELL ILL on 3 A pril. However, after 10 days , she recovered. It seems that the YOSHIDA and the ANDO are in contact. TOSHIO ,second son of the patients' family fell ill after the entranceremony of the primary school held on 1 A pril. Folloing the doctor' instruction, he was absent from school. Afterwards, as shown in

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Judging from the circumstances the infection couse will be transportation with TOKYO District and infected by the family members.

Disposition for Prevention

1 isolation

2 louse disinfestation

3 medical exaamination

4 rodent extermination

5 preventive injection

6 sanitation guidance

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Blood Test

NAme	date	Widal' Test T. x	Pa x	Pb x	weil eelix's test x 1y	x
KAMEYO YOSHIDA	4 May	50	25	100		50
MOTO YOSHIDA	3 May	50	50	25		50
YOSHIKO KITAKAWA	""	50	50	50		100
KIKUHEI SUZUKI	""	25	50	25		(1)

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至急

二五予

昭和二十五年五月十日

東北民事地区司令部公衆衛生課長
厚生省公衆衛生局防疫課長
東北地区駐在防疫官
東北五県衛生部長
新潟群馬栃木茨城各県衛生部長
東京都衛生局長
県下各保健所長
県医師会長
各医師会長

殿

福島県衛生部長

発しんチフス疑似患者発生報告（通報）

標記のことについて管下に左記の通り発しんチフス疑似患者が発生したから報告（通報）致します。

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記

一、患者名簿

発生地	氏名	性別	年令	職業	発病日	初診日	決定日	医師	収容場所	系統	決定理由
岩瀬郡須賀川町東一丁目二六番地	安藤ヒサ	女	三一	なし	四、二四頃	四、二九	五、二	菊地源造	岩瀬病院隔離病棟	隣家経過者より	臨床症状
〃	〃 亮一	男	九	学童	五、二、	五、二、	五、五	〃	〃	家族感染	〃
〃	〃 正博	〃	三	なし	四、二九	五、二、	〃	〃	〃	〃	〃
〃	〃 秀夫	〃	〇	〃	五、一、	五、二、	〃	〃	〃	〃	〃

二、発生地の概況

東北本線須賀川駅西方約三粁の地点にあり、国道に沿う商店街の裏側(南約二十米)に位して、全町中環境衛生は最も悪く、附近の人家は互いに接触し、多くは定取を持たない。なお発生地東一丁目の戸数約四二〇、人口は約二、〇〇〇である。

三、患者発見に至る経過

安藤ヒサは去る四月二十四日頃より発熱、頭痛、腰痛、食慾不振を訴え、町内公立岩瀬

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病院に二十九日入院、その后眼球結膜の充血、胸部乾性ら音、胸部、腹部、背部、四肢の発疹等発しんチフスの臨床症状を示したので、五月二日午前九時、岩瀬病院長より須賀川保健所長宛要注意患者として届出た。直ちに同保健所長対診の結果、ワイルフェリックス反応検査結果判明を待たず臨床症状により同日午前十時疑似症と決定、県予防課宛電話報告があった。なお、同日患者をのぞく患家々族及び同居人六名をも患者同様岩瀬病院に隔離した。

患家々族構成は次のとおりである。

氏名	続柄	満年令	生年月日	性別	職業
安藤カ衛	戸主	三五	大正三、二、四	男	なし
〃 ヒサ	戸主の妻	三一	大正七、六、一五	女	〃
〃 亮一	長男	九	昭和一六、三、五	男	学童
〃 敏夫	次男	七	昭和一八、九、一七	〃	〃
〃 正博	三男	三	昭和三、二、六	〃	なし
〃 秀夫	四男	〇	昭和二四、六、二九	〃	〃
国井タネ	戸主の妹	二八	?	女	〃

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三男正博は四月二十九日より不氣嫌となり、全身倦怠のため臥床、発熱も多少あったこと、想像されるが、五月二日健康隔離のため入院后、体温三十八度前后、胸部、腹部、四肢に帽針頭大より米粒大程度の発疹を見、意識はや、混濁、体温三十九度前后、脈膊一六〇且つ軟弱であった。

四男秀夫は五月一日より発熱、不氣嫌を訴え、五月二日健康隔離のため入院后、眼球には充血を見なかったが、胸部に帽針頭大より米粒大の出血疹が認められ、体温三十八度二分前后を稽留し、不安状態を示した。

長男亮一は五月二日より発熱三十八度五分、健康隔離のため同日入院后も発疹を認めなかったが頭痛を訴えていた。

五月五日、県予防課長対診の結果、要注意患者として取扱っていた右の三名を臨床症状により午前十時半疑似症と決定した。

なお、須賀川保健所で実施した患者のワイルフェリックス反応検査成績は次のとおりである。

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氏名	発病月日	採血月日	判定 T×	PA×	PB×	X19×	備考
安藤ヒサ	四、二四頃	五、五、	五○	五○	五○	五○	
〃 正博	四、二九	〃	五○	(−)	(−)	五○	年少のため検査不能
〃 秀夫	五、一	〃					
〃 亮一	五、二	〃	五○	二五	二五	八○○	

なお、患者はすべて過去に於いて発しん チフス予防接種を受けていない。

四、伝染系統

須賀川町瀬田四番地に住む加藤周治（四十五才）は去る二月頃までは私用のため東京方面に再三旅行し、患家隣吉田家に出入していたが、二月八日発病、同十日町矢部医院で受診、二十五日肺炎と診定され、同医院で治療を受けたが約二週間で全治した。

吉田家のカメヨ（六二才）は三月十一日発病、十三日初診、二十一日同矢部医院より肺炎の診断を受け、約一ヶ月半で全治したが、同家モトヨは四月三日同様罹患、約十日間で全治した。

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吉田家と患家安藤家とは互いに隣接するため常時出入があったと思われるが、患家次男敏夫は去る四月一日小学校入学式終了后風邪様の症状を示し、医師の指示により休校、約十日間で復校した。その后前記のとおり安藤ヒサが発病、正博、秀夫、亮一が相継いで発病した。右の事情から判断して、伝染系路は東京方面との交通関係及び家族感染によるものと思われる。

五 防疫措置

1. 隔離

五月二日、患者及び患家々族同居人全員、その他近隣居住者の一部を公立岩瀬病院隔離病棟に隔離した。

2 駆虱消毒

直ちに患家及び患家を中心とする半径百米の範囲、その他患家学童の通学する小学校生徒に、三%クレゾール加液体DDT或いは粉末DDTによる駆虱消毒

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を実施し（フォッグマシン使用）、五月三日患家附近の第二回駆虱を行い、患家交通関係者等にもDDTを撒布（三一戸、二〇〇名以上）、且つ附近一帯に臨時大掃除を行わせた。

五月五日、須賀川保健所における関係者の防疫会議開催后、更に防疫会議開催后、更に防疫地区を半径五〇〇米に拡大、全町を警戒地区とし、特に病毒接触者の把握につとめ、既存の防疫班を再編成強化して検診班、DDT撒布班、予防注射班、教育指導班として防疫に万全を期している。

3. 検病調査

五月三日までに患家附近及び交通関係者等三一戸一五三名に対する検病調査の結果異常者を認めなかった。引続き範囲を拡大実施中である。

4 鼠駆除

全町に対し鼠駆除を計画、実施、現在成績を調査中である。

5. 予防注射

患家々族、附近居住者、交通関係者及び防疫従事者等一二六名に対し五月五日迄

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でに第一回予防接種を完了し引続き範囲を拡大実施中である。（ワクチン保管量約七〇〇cc）

六 衛生教育

患者発生后速かに患家附近か主婦四五名に対し必要な衛生教育を行い、一般町民特に患者利用の公衆浴場利用者（同浴場は患家より一〇〇米）に対しては文書等によって注意を与え、学童を持つ家庭にも予防に関して指導し、更に啓蒙宣伝の徹底を期している。

七 其の他

患家附近の居住者中四名に対しワイルフェリックス反応検査を行い次の結果を得た。（現在健康に異常なし）

氏名	採血月日	判定 T x	PA x	PB x	X円 x
吉田カナヨ	五月四日	五〇	二五	一〇〇	五〇
吉田モト子	五月三日	五〇	五〇	二五	五〇
北川代志子	〃	五〇	五〇	五〇	一〇〇
鈴木喜久平	〃	二五	五〇	二五	(−)

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なお、三月中吉田家にカメヨの発病后出入した弟山寺秀明（東京都中野区新山通り三、一二）に対する今后の処置を五月六日東京都庁予防課に依頼したが、現在本人及び同家族の健康に異常なく、今后も観察する旨五月九日都庁予防課より電話通報を受けた。

八 今后続発の有無

今后続発はないものと思料されるが、目下厳戒中である。

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Suspect Cases of Typhus in Sukagawa Town, F'shima Pref.

Case #1)	ANDO Hisa*	Female	33 yr.	Mother
Case #2)	ANDO Ryoichi**	Male	9 yr.	Eldest son
Case #3)	ANDO Masahiro**	Male	4 yr.	Third son
Case #4)	ANDO Hideo**	Male	10 mon.	Fourth son

* Expected to be informed the result of complement fixation from Tokyo on 10 or 11 May.

** The same family members to the 1st case. Diagnosed while isolated in the contagious hospital on 5 May.

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Telephone from FUKUSHIMA Prevention Section 15,00 (p.m.) 12. May

Report of Dysentery Cases

Place YAMAFUNEN Village Date County FUKUSHIMA Prefecture

Jurisdiction of HOBARA Health Center

NO. of cases 6

No, of Carriers 7

Details will be reported later.

0830 a.m.

1700

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Transd mf

電報

發信通番號

八〇

至急官報

イリ 九五 フクシマ 五〇四五 コ一・三五

センダイシ L

トオホクミンジブ L

コオシウイイセイカテウ

21022

ウナ

五ツキ五ヒイワセダンスカガワマチニハッシンチフスキジ

カンジヤ三メイオトコカサイオセ四三サイオトコ一〇ケツキ六ツ

セイスルイケイギジ 四メイケイトウチヨウサチウフクシマケン

チジ

仙台 25.5.6

MAY 21

遞信省

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(Trans'd by MYG)

The following telegram was received 0800 hrs, 8 May, 1950, which was sent by Fukushima Pref. Health Dept., 1335 hrs., 6 May:

SUSPECT CASES OF TYPHUS:

Date of Outbreak: 5 May, 1950

Place: Sukagawa-cho, Iwase-gun, F'shima Pref.

Patients: Total 3 (9 and ~~10~~ 4 yrs-old boys, ~~13 yrs-old (woman)~~ 10 month old boy

Grand Total of Suspect Typhus: 4(four)

Source of Inf.: Under investigation

Details will be reported later

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May 3
Telephone Report

Typhus Suspect Report from Fukushima Prefecture

Place : Higashi 1-chome, Sukagawa Town, Iwase Gun,
Fukushima Pref.

Patient : Hisa Ando, F. 33
No job

Onset : 24 April
First examination : 29 April
Suspected : 2 May

Doctor who was in charge : Dr. Kikuchi, director of Iwase
Hospital (Public Hosp)

Patient is being isolated in the hospital. He is not immunized.

Contact tracing is being conducted.

Control measures taken : DDT delousing in 100 meter area around the patient's home. Door-to-door case finding work was done on 31 homes or 153 people but nothing was found. 6 persons in the same family are being quaranteened in the hospital.

Ryo, 10 yrs. M., ran fever of 37 c since yesterday morning and Hideo, 1 yr. M. had the same fever since day before yesterday, but both recovered today. (They are in the patient's family)

Emergency immunization : To be conducted today over 200 neighbourers and other traffic contacts.

Symptoms of the patient : Over his body and extremities, pin-head size or little smaller eruptions are scattered. Conjested conjunctiva. Weak consciousness. Mild bronchitis-like symptom in the chest.

Laboratory work : Weilfelix was done on the blood taken 9 days after the onset. Negative result was obtained. The blood wil be sent to NIH for complimentary fixation.

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(Trans'd MIYAGI)

JBB

NOTICES SENT BY FUKUSHIMA PREF. HEALTH DEPT. TO PHC RELATIVE TO TYPHUS CONTROL

Resumé(Itemized Activities)

A) ON TYPHUS CONTROL PLAN IN 1950 (7 Nov., 1949)

The following is a plan of typhus control in this Prefecture (Fukushima) in 1950(From Jan. to Dec.), to which all Public Health Centers are asked to devote their attentions:

1) Strengthening of Preventive Teams
   a) Disinfection Teams
   b) Training of doctors, health nurses and dusting officials
   c) Improvement of bacteriological examination facilities
2) Education of the general people
3) Immunization
4) Insect and rodent control
5) Prevention of infection from rampant areas etc.
6) Case findings
   a) Report on patients under observation
   b) Making maps of places paid particular attention
   c) Immediate report(Within 2 hrs.)after of diagnosis
   d) Weil-Felix reaction
7) Preventive activities in case of outbreak
   a) Isolation
   b) Disinfestation disinfection and immunization /and Sprayers)
8) Prevention material supplies(DDT,Vaccines, Cresol, Dusters
9) Investigation, reports, collection of informations and records
10) Complement fixation
11) Forms of reporting

B) INSTRUCTIONS GIVEN AT PHC CHIEFS CONFERENCE (14 Jan., 1950)

1) On prevention of typhus*
2) " " " Influenza
3) " reports of communicable diseases

C) ON STRENGTHENING OF TYPHUS CONTROL (18 Jan., 1950)

1) Preventive activities
   a) Disinfection teams
   b) Bacteriological examinations
   c) DDT dusting and spraying before of outbreak
   d) Immunization drive before of outbreak
   e) Prevention of infection from other Prefectures
   f) Rodent control
   g) Early case findings
2) Activities in case of outbreak
   a) Reporting
   b) Disinfestation, disinfection and isolation

~~D) RE PREVENTION OF TYPHUS (31 Jan., 1950)~~

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4. Lift up the collar of the gown using the second finger--sliding finger along thoedges of the neck band from the midline (middle) towards the back openin..
5. Tie strings of neck band in back.
6. Grasp edges of gown in back, bring left side towards right, right side over left, Hold temporarily with right hand.
7. Grasp strings on left side with left hand, hold gown in place: Grasp string on right side with right hand: quickly switch, or transfer string left to right, bring toward in front, and tie securely.
8. Pull up sleeves so cuffs will not slip down.

NOTE: Keep gown free from contamination six inches below shoulders and upward-- six inches along either side in the back.

B. To remove the gown.
1. Untie strings at waist. (You may bring foward and loop in front let fall to sides)
2. Pull sleeves up about an inch. WWash hands for 2 minutes.
3. Untie strings at the neck bland, letting them hang down center of back.
4. Place forefinger of right hand under cuff of left sleeve and pull down over hand.
5. Through sleeve of left hand. grasp the outer part of right cuff and work it off over right hand.
6. Continue removing gown, working hands up to neck and bringing two edges of neck band together.
7. Grasp back of gown, including the strings in one hand, and the neck band in front in the other hand.
   Unfold neck down to shoulder seams with back of hems of gown together and facing outwards:
8. Upon leaving room, scrub for 2 minutes.

Note: If the gown is hung <u>inside</u> the contaminated room or unit, the gown is to be hung contaminated side out, clean in.

If the gown is hung <u>outside</u> the contaminated unit, it is to be placed contaminated side in, clean out.

Note: If a mask is required, be sure and put mask on BEFORE putting on gown di scarding of the mask should conform to rules and regulations of the communicable disease unit.

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D) RE PREVENTION OF TYPHUS (31 Jan., 1950)

1) Immunization of doctors, nurses, sanitary workers and communicational organization employees

2)Strengthening of dusting on inmates in prisons, orphanages, asylums for the aged, insane hospitals, vagrant protection houses, dormitories of schools and factories etc.

E) ON SETTING UP DUSTING BOOTHS (18 Feb., 1950)

(In or near the railway stations of cities and towns,where PHC located, a dusting booth is to be set up for the time being - one month by PHC)

F) ON PRECAUSION AGAINST TYPHUS SPREADING AREAS (22 Feb., 1950)

L) Immunization and dusting on a traveler before leaving to the area of typhus prevalent

2) Dusting again after his trip

a) Immediate report in case of felling abnormality of the body within 2 weeks of period after the trip

*(B-1)

You are asked to take more thoroughful steps on prevention and disinfection of typhus due to the facts of many cases in Tokyo area and receiving of a letter from PH,TCAR, reagrading typhus control. The report of finding cases, including suspected, should be sent to TCAR within 2 hours of after finding. So that you should do your best to meet with this respect.

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H-E-A-D-Q-U-A-R-T-E-R-S
Miyagi Military Government Team
APO 547

File No.

NOTE: Use this slip for notes in connection with this paper. All notes will be numbered consecutively top to bottom. Papers should have attached all records necessary for intelligent action. A line will be drawn the full width of the slip below each note.

SUBJECT:

No.	Date	From	To	Remarks
	2 9 18			3.75) 70.00 [crossed-out calculation] Potatoes ¥18.50 x 22 Per Kg. Egg @ 10.- 10.50 10.5-

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REPORT OF POLIOMYELITIS from Fukushima Prefecture.

Case No. 5
Patient : Yoneo KODAIRA, M. 3 years old
Patient's adress : Omorita Village, Ishikawa Gun, Fukushima Prefecture.
Date of onset : 7 February 1950
Date of first examination : 9 February 1950
Date of diagnosis : 9February 1950

Case No.6
Patient : Yo Endo, M. 7 years old.
Patient's adress : Iino Village, Nishishiro Gun, Fukushima Prefecture
Date of onset : 26 January 1950
Date of first examination : 7 Februrary 1950
Date of diagnosis : 2 March 1950

Case No. 7
Patient's name : Eiko Endo, F. 2 years old.
Patient's adress : Same as that of Case No.6
Date of onset : 31 January 1950
Date of first examination : 7 February 1950
Date of diagnosis : 2 March 1950

Remarks : Contact tracing work was not fertile.

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

9013

No. 25

28 March 1950

TO: Chief, Tohoku C A R

FROM: Mr. Otake, Governor of Fukushima Prefecture

SUBJECT: Breakout of Communicable Disease Report

1. Name of Disease
   Acute Poliomyelitis (No. 8 patient)

2. Address
   Yui mura, Adachi gun, Fukushima Prefecture

3. Name, Age & Occupation of Patient
   Kazutoshi Watanabe, Male, 17, None

4. Onset
   About 15-16 years ago

5. First Diagnosis: 23 March 1950

6. Diagnosis: Same as above

7. Doctor's Name
   Official Doctor in Yui mura

8. Management
   Sterilized patient's house with cresol.
   Physical examination given to family

9. No symptoms to break out any more.

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

二五号

昭和二十五年三月二十八日

福島縣知事大竹作摩

東北民事地区司令官殿

伝染病患者發生報告

管下に左記伝染病患者が發生したからその状況を御報告いたします

記

一、病名 急性灰白脊髄炎（第八号患者）

二、發生場所 福島縣安達郡油井村

三、患者氏名性別、年令職業 渡辺和俊 男 十七才 無職

四、發病年月日 十五、六年前と推定される

五、診定年月日 昭和二十五年三月二十一日

六、転帰年月日 〃 〃

七、診断醫師 油井村医

八、防疫措置の概況 患家のクレゾール薬液噴霧消毒
家族の健康診断

福島縣

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

昭和二十五年三月二十八日 福島縣知事大竹作摩

東北民事地区司令官殿

伝染病患者発生報告

管下に左記伝染病患者が発生したからその状況を御報告いたします

記

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三、患者氏名性別年令職業 渡辺和俊 男 十七才 無職

四、発病年月日 十五、六年前と推定される

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六、転帰年月日 〃 〃

七、診断医師 油井村医

八、防疫措置の概況 患家のクレゾール石鹸液噴霧消毒 家族の健康診断

九、今後発生の見込み 続発の徴を認めず

福島縣

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

No. 25

28 March '50

To: Head of T.C.A.R

From: Mr. Otake, Governer of Fukushima Pref.

Subject: Breakout of communicable disease Report

1. Name of Disease
   Acute Poliomyelitis (No. 8 patient)
2. Address
   Yui-mura Adachi-gun Fukushima Pref.
3. Name, Age & occupation of patient
   Kazutoshi Watanabe, Male, 17, none
4. Onset
   about 15 ~ 16 years ago
5. ~~Da~~ First diagnosis 23 March 1950
6. Diagnosis Same as above
7. Doctors' Name
   Official doctor in Yui-mura
8. Management
   Sterilized patients' house useing cresol
   Given physical examination of family
9. No symptom to breakout any more.