

Der Ostasiatische Lloyd (Shanghai)

Nr. 20 vom 20. Mai 1910

Geisteskrankheiten in Japan.

Nach einer Darstellung des Direktors des Aoyama-Krankenhauses in Tokyo Dr. Saito haben in Japan wie in allen Kulturstaaten die Geisteskrankheiten in den letzten Jahrzehnten eine schnelle Zunahme erfahren. Während man früher in der Geisteskrankheit eine Strafe der Götter erblickte und die Kranken wie Verbrecher behandelte, die man einsperrte, band oder in Eisen legte, und während man in Halluzinationen Göttererscheinungen vor sich haben glaubte, hat man vor etwa vierzig Jahren in Japan angefangen, den Wahnsinn als eine Krankheit anzusehen und den Kranken vernünftig zu behandeln. Trotzdem ist die Zahl der Kranken stetig gewachsen. Im Jahre 1860 gab es etwa achtundzwanzig Kranke unter hunderttausend Menschen, 1884 schon sechsundvierzig, nach dem Kriege mit China bereits siebzig, heute nicht weniger als neunzig. Während es 1900 in Tokyo vier, in Kyoto drei, in Osaka zwei und sonst noch einige kleinere Irrenanstalten gab, haben jetzt Tokyo neun, Kyoto, Osaka und andere Plätze zusammen mehr als zehn Krankenhäuser für Geisteskranke. Auf Anregung von Dr. Saito, der seine Studien von 1899 bis 1904 in Deutschland, England und Frankreich gemacht hat, sind auf den Universitäten psychische, metaphysische und medizinische Therapie und in den Irrenanstalten und verwandten Krankenhäusern moderne und zweckentsprechende Behandlungsarten eingeführt worden. Was die verschiedenen Geisteskrankheiten anlangt, so kommt Dementia praecox in Japan etwa ebenso häufig vor, wie in den Vereinigten Staaten. Dementia paranoia, Alkohol- und seniler Wahnsinn sind in Japan seltener, mania insanity, dementia paresis und Neurasthenie häufiger, als in den Vereinigten Staaten.

Der Ostasiatische Lloyd (Shanghai)

Nr. *17* vom *1 Mai* 191*4*

Lungenpest und Flecktyphus in Japan.

Die ~~Lungenpest und der Flecktyphus~~ machen in Tokyo und Umgegend reissende Fortschritte, und es stellt sich heraus, dass die Behörden und die Presse nicht richtig gehandelt haben. Denn während in den Militärschulen seit Wochen Plakate angeschlagen gewesen sind, auf denen die Zöglinge gewarnt wurden, eine Anzahl infizierter Bezirke zu betreten, hat die Presse die Gefahr verschwiegen. Der mit Lungenpest infizierte Bezirk der Präfektur Chiba grenzt unmittelbar an Tokyo, wie Schöneberg an Berlin oder Altona an Hamburg. Jetzt wird bekannt, dass hier in der unmittelbaren Nähe Tokyos bereits siebenzig Fälle von Lungenpest vorgekommen sind, während bisher nur ein Fall zugegeben war. Als dieselbe Pest vor einigen Jahren in der Mandschurei wütete, verhöhnte die Tokyoer Presse „die schmutzigen Chinesen“, bei denen so etwas vorkommen könne. Das japanische Volk ist aber in sanitärer Beziehung noch gänzlich ignorant und auch die Behörden haben noch nicht das nötige Verantwortungsgefühl und den Mut, rechtzeitig zu bekennen, was um so nötiger gewesen wäre, weil die Tokyoer Industrie-Ausstellung zahlreiche Besucher aus allen Landesteilen anlockt. Die kaiserlichen und prinzlichen Paläste sind abgesperrt; es wird Niemand ohne ärztliche Untersuchung eingelassen. Die Ausstellung wird von nun an selbstverständlich nur sehr schwach besucht werden.

584/20

Hamburgisches
Welt - Wirtschafts - Archiv.

Signatur B 117 c 1

Datum 16. Sep. 1923₁₉₂

Hamburger Nachrichten

Nr. 432.

Ruhr-, Typhus- und Scharlach-Epidemie in Tokio.

London, den 15. September.

Nach Depeschen aus Japan greift in Tokio die Ruhr- und Scharlach-Epidemie um sich und werden auch Fälle von Typhusfieber verzeichnet. Der städtische Gesundheitsdienst der japanischen Hauptstadt teilt mit, daß sich am vergangenen Mittwoch 130 Fälle Ruhr, 45 Typhusfieberfälle, sowie zwei Erkrankungen an Scharlach ereigneten. Seitdem wird eine tägliche Zunahme von je 30 Fällen Ruhr und Scharlach und 10 Typhusfieberfällen verzeichnet.

The Manchester Guardian

24430
Nr.....

A STRANGE DISEASE.

BAFFLING EPIDEMICS IN
JAPAN.

A severe epidemic of a hitherto unknown disease, at first mistakenly diagnosed as acute meningitis and later as "sleepy sickness," has been prevalent in Japan during the last few months. Many deaths have been reported to the Health Organisation of the League of Nations by the Japanese Health Service in Tokyo.

The most remarkable facts about this new disease are its very high fatality rate (60 per cent), the suddenness of the attack, and the rapidity with which it develops, death taking place within five to ten days. Most of the persons affected were over fifty years of age. A bacteriological examination of suitable cultures failed to reveal suspicious micro-organisms, but injections in rabbits produced fever after an incubation period of two or three days, paralysis of the hind legs after three to five days, soon followed by death, morbidity being very high.

It may be added that the summer had been unusually dry and that the epidemic has declined since the coming of the rains.

The Japan Advertiser (Tokio)

No 11129

The Public's Health

OSAKA ASAHI.

Diseases afflict the greatest imaginable losses to humanity. Their effect is more terrific than the devastation of natural visitations. According to a recent investigation by the Osaka Sanitary Laboratory, 34 citizens per 100 are constantly suffering from ailments of some sort or other. On the average, one citizen is ill for three weeks in the center of the city, while in the suburbs he is ill for five weeks. The total number of days are put at 19,752,369, which are 54,116 years. The report of the British Board of Health for last year states that the number of days on which the British people suffer from ill health reaches 25,000,000 weeks, which are 48,770 years. This means that nearly 500,000 people are prevented from working for a year, wasting their money for medicine.

Mortality is said to be very high in Japan, especially in the cities. It is necessary to provide means for medical advice for every citizen so that it may be within easy reach. A Deputy Mayor of Osaka who lately returned from an inspection tour through Europe and America says that even so small a city as Copenhagen, the population of which does not exceed 700,000, has public hospitals with more than 40,000 beds, while the City of Osaka has barely 3,000 beds, although it has more than 2,000,000 inhabitants, and also that these beds are not widely used because of the great expense. Perhaps this is answerable for the long period of illness as well as for the high mortality. It is difficult to determine the necessary number of beds, but statistics regarding mortality afford useful information. Let M represent the mortality per 1,000 inhabitants and let N stand for the number of patients for one year. While P is the percentage of patients under medical treatment in hospital and then the necessary number of beds will be $M \times N \times S \div 365 \times P$. S is the day of illness. A comparison of the actual number of beds with the result of this arithmetical calculations shows that the hospital provisions in every Japanese city are defective.

In addition to these sanitary measures, there are two things calling for attention. One is the question referring to medical practitioners, while the other is connected with citizens. These two questions must go together with public medical provisions for the

maintenance of good health. Aside from the question relating to medical practitioners, citizens are requested to have sound knowledge in regard to sanitary and hygienic measures, because these are very important for their physical welfare. The before-mentioned report of the British Board of Health attributes ill health to the carelessness of citizens regarding sanitary and hygienic provisions, saying that the health authorities can not be responsible for their carelessness. The citizens of Osaka are mostly suffering from slight indispositions on account of colds as well as from diseases of the digestive organs. It appears that a slight indisposition caused by cold is a simple question, yet truly it covers a wide field of medical research, from which it may be clearly seen how complicated are serious cases. The medical question which refers to the home life of individuals is fundamental.

With regard to ill health connected with the digestive organs, the authorities concerned have power only to control the cooking of food, its sale, storing, the production of foodstuffs and their transportation, but it does not and can not extend to its consumption by individuals, which is a matter to be taken care of by themselves. The City of New York has established inspection stations everywhere to exercise control over the sale and cooking of food. This is no doubt effective, but such a system is still defective in Japan. It is desired that the competent authorities be unsparing in their efforts for the control of food in all fields of production, cooking and so on. We advise citizens to acquire useful knowledge concerning the chemical examination of their food.

The report above referred to points out that one of the causes of ill health is probably smoke. This is also the case with Osaka. In some cities of other countries manufacturers are not permitted to have factories and their inhabitants are not allowed to use any coal other than anthracite. London and New York pride themselves on being cities of good health, but the cities of Japan have numerous things to accomplish before they reach such a state of health. We must exert our best endeavours for the promotion of health by ourselves.

The Japan Advertiser (Tokio)

12 159

**INSANITY PATIENTS
INCREASING RAPIDLY**

**Poverty Forces Many Cases To
Accept Charity—Extension
of Asylums Necessitated**

Insane persons under public care in Japan have been showing a rapid increase during the last few years. Asylums, sanatoriums and hospitals for the insane are now filled to capacity and the city authorities of Tokyo are hurrying the construction of an addition to the Matsuzawa Hospital to accommodate 150 more patients. Another addition to accommodate 500 will be constructed next year.

Prevailing business depression and unemployment are believed to be the reasons for the rapid increase. Formerly demented persons were usually cared for by the members of their families, but the growing hardness of the times has led to hundreds of poor families being forced to turn such charges over to public institutions. The applications for free care and treatment for insane persons have been increasing at the rate of more than 100 annually.

The Negishi Hospital, the Aoyama Insane Hospital, the Hoyo-in and the Mameido Insane Hospital, all institutions for the care of the mentally diseased, are already overcrowded. The Matsuzawa Hospital, a prefectural institution, can now accommodate 250 paying patients and 450 non-paying ones, but it is also crowded. It has, however, sufficient ground for large additions and has thus been selected to meet the emergency.

855

909

Hamburgisches
Welt-Wirtschafts-Archiv

Signatur

Bin

e

Datum

16. Okt. 1929₉

The Japan Advertiser (Tokio)

No. 12298

**EPIDEMICS HERE IN YEAR
HAVE HIT 5,652 PEOPLE**

**Three Persons in Thousand
Affected—Twenty Three Per
Cent of Patients Died**

Epidemic cases in Tokyo so far this year have been officially set at 5,652, or three in every 1,000 persons, according to the latest figures published by the city health authorities. The deaths among these cases numbered 1,786, or 23 persons out of every 100 patients. Typhoid fever heads the list with 1,959 patients, or about 25 per cent of the total number. In order come dysentery with 1,800 patients, scarlet fever with 1,345, diphtheria with 1,053, paratyphus with 168 and sleeping sickness with 41. Meningitis caused the highest death rate eight out of every ten patients dying, and scarlet fever the lowest, with only three deaths for every hundred patients.

Hamburger Fremdenblatt

Nr. 239 - A -

Japans Volks- gesundheit bedroht

Von unserem Vertreter

R. S. Tokio, Ende Juli

Seit dem Militäraufstand des 26. Februar werden in Japan die Schattenseiten der sozialen Entwicklung des Landes offener als je diskutiert. Vor allem sind Heer und Marine beunruhigt und sprechen öffentlich von Dingen, die man noch bis vor kurzem nicht gern zugegeben hätte.

Die unbefriedigende Entwicklung der Volksgesundheit spielt dabei eine große Rolle. Das Heer, das bisher nur stolz darauf hinzuweisen pflegte, daß die Körpergröße der Japaner von Jahrzehnt zu Jahrzehnt zugenommen habe, sah sich veranlaßt, die Ergebnisse der Untersuchung der Militärdienstpflichtigen bekanntzugeben. Diese Zahlen sprechen eine ernste Sprache. Während im Jahresdurchschnitt 1922-1926 die Zahl der dienstuntauglichen 25 Prozent aller Stellungspflichtigen betragen hatte — schon beim Vergleich mit westlichen Ländern eine außerordentlich hohe Zahl —, stieg sie im Durchschnitt der Jahre 1927-1932 auf 36 Prozent und 1935 erreichte der Prozentsatz der dienstuntauglichen 40 Prozent! Die ungünstigsten Ergebnisse betrafen nicht nur überfüllte Großstädte wie Osaka und Tokio, sondern auch die sämtlichen Nordost-Provinzen, in denen sich die chronische Notlage der Bauernschaft besonders zugespielt hat. Dort waren sogar 46 Prozent aller Stellungspflichtigen dienstuntauglich!

Am meisten ist die Tuberkulose verantwortlich. Während 1899 nur 2 Prozent der untersuchten Dienstpflichtigen tuberkulös waren, sind es heute volle 20 Prozent. Viele zeigen die Symptome erst nach einiger Zeit des militärischen Dienstes. So kommt es, daß eine große Zahl junger japanischer Soldaten von den Truppen in Mandschurien als krank in die Heimat entlassen wird, wovon neun Zehntel tuberkulös sind. In ganz Japan soll die Zahl der in Behandlung befindlichen bzw. der als solche nachgewiesenen Tuberkulösen 1,2 Millionen Menschen betragen, d. h. ein Fünftel der Gesamtbevölkerung. Aber die Zahl derjenigen, bei denen die Krankheit, wie im Falle der Militärpflichtigen, nur durch Zufall festgestellt wird, ist um ein Vielfaches höher. Tuberkulose soll stark dafür verantwortlich sein, daß nach der lauten Klage des Marineministers der Gesundheitszustand der jungen Mütter sich so stark verschlechtert und daß die Sterblichkeit von Müttern und Säuglingen neuerdings wieder sehr zugenommen hat. Auffallend ist auch der starke Prozentsatz Lungentranker Frauen, die nach vier- oder fünfjähriger Arbeit in den Textilbetrieben wieder auf das Land zurückkehren. Der hohe Grad der Lungentransmission gerade unter diesen ist mit dafür verantwortlich, daß diese früheren Arbeiterinnen aus dem Lande weniger gern geheiratet werden.

Auch bei Schulkindern zeigt sich fortwährende Verschlechterung der Gesundheit. Neben dem vergrößerten Wachstum, das hauptsächlich durch vermehrten Sport und durch weitgehende Einführung der europäischen Sitzweise verursacht ist, zeigen alle anderen Wachstumsfaktoren deutliche Verschlechterung. Das durchschnittliche Körpergewicht und der Brustumfang der Kinder haben abgenommen; der Zustand der Zähne und die

Kurzsichtigkeit, in der Japan schon lange einen Weltrekord hat, verschlechtern sich immer mehr. Je länger die Schulzeit der Kinder dauert, desto mehr nimmt der Prozentsatz der Schwachen und Kranken zu, und am höchsten ist er bei den Studenten.

Die Schule selbst ist, wie der Erziehungsminister im Kampf um seine Reformpläne selbst zugegeben hat, stark mitverantwortlich für die unbefriedigende Volksgesundheit. Nirgend in der Welt werden Kinder und Jugendlichen so überanstrengt wie in

Japan. Nirgend ist die Zahl der Unterrichtsstunden so hoch wie hier, wo bis in die höchsten Klassen hinauf etwa die Hälfte der Zeit auf das Erlernen des Lesens und Schreibens von Tausenden komplizierter Schriftzeichen chinesischen Ursprungs verwandt werden muß.

Der frühzeitige Beginn der Arbeitszeit in unhygienischen Fabriken und in den Reisfeldern der Landwirtschaft ist ein zweiter Faktor. Meistens werden die Kinder schon mit zwölf Jahren aus der Schule entlassen, aber oft müssen sie schon in der Schulzeit, also mit noch jüngeren Jahren, hart mitarbeiten. Lange Arbeitszeit ist in der japanischen Wirtschaft die Regel. Freie Sonntage sind in den meisten Fällen unbekannt, und die Hygiene läßt sowohl im Wohnen wie in der Kleidung bei den Massen des Volkes noch immer zu wünschen übrig. Bei alledem hat die Beanspruchung der Japaner mit Arbeit, mit Lernen, und bei den Männern mit militärischem und halb-militärischem Drill in den letzten Jahren des Kampfes um den nationalen Aufruf stark zugenommen.

Vor allem aber ist die Volksernährung im großen und ganzen heute noch so unzureichend wie je. Die Quantität zum Sattessen mag in den meisten Fällen vorhanden sein, aber da sie vorwiegend aus Reis, und zwar aus poliertem, vitaminlosem Reis besteht, ist sie qualitativ bei der überwiegenden Mehrheit des Volkes nach modernen wissenschaftlichen Urteilen unzureichend.

Kritisch eingestellte Japaner fragen sich mit Recht, ob die so heftig diskutierte Frage der Schaffung eines Gesundheitsministeriums und die Aushebung überflüssiger städtischer Ärzte auf das Land, die weitere Verbreitung des Sports und die geplante Verlängerung der Schulzeit um zwei Jahre eine Lösung des immer brennender werdenden Gesundheitsproblems bringen können. Sicher ist, daß diese Vorschläge nur die Oberfläche der Aufgabe streifen. Solange in Japan keine grundlegende Agrarreform die Verbesserung der Lebenshaltung der Bauernschaft, die immer noch die Hälfte der japanischen Bevölkerung ausmacht, herbeiführt, und solange für die städtische Bevölkerung keine breit angelegte soziale Reform im Sinne der westlichen Staaten eingeführt wird, ist mit grundlegender Besserung der Volksgesundheit kaum zu rechnen. Es fragt sich sehr, ob für beide Reformen im kommenden Budget genügende Mittel bereitgestellt werden können. Fürs erste soll das Wehrbudget den Vorrang vor allen anderen Aufgaben behalten.

Datum 27. Aug. 1936

Great Britain and the East (London)

Nr. 1319

PUBLIC HEALTH IN JAPAN.

Some astonishing figures are issued in a survey by the Army and Home Office of the health of the Japanese people. We presume the results of this survey are correct, but feel that they must be taken with reserve. The most surprising statement is that the average length of life in Japan is forty-four years for males and forty-six for females. This denotes a high rate of infant mortality which is estimated to be double that of Western countries and is possibly exclusive of the deaths of unregistered infants. The ratio of deaths from tuberculosis is stated to be 19.3 per thousand. The typhus fever death rate is also very high, namely, eighteen times that of Great Britain. Eighty per cent. of Japanese farmers are said to be affected by intestinal

parasites (worms). The surprising statement is made, in this survey, that health conditions in Japan are growing steadily worse; and this at a time when health conditions are improving in nearly all other countries.

We arrive at the conclusion that this state of affairs is resultant on over-crowding in the cities and over-population throughout the country, allied to a low standard of nutrition amongst the agricultural classes. In view of the foregoing the dietetic conclusions of Professor Saiki are interesting. The Professor is a director of the Imperial Government Institute for Nutrition at Tokyo; he has been engaged for some long time in assessing the number of calories used up in various forms of work and in different trades and professions.

The scarcity of food supplies in Japan has led to this series of experiments and no herb or vegetation has been

left uninvestigated. The snowdrop provides a useful food in its bulb, and grasshoppers are shown to be more nourishing than fish. Dr. Saiki comes to the conclusion that a Japanese workman can be adequately fed on three meals a day, for the equivalent of twopence; and that he obtains, for that sum, more varied and nutritious food than the American or British workman.

25. März 1937

The Trans-Pacific (Tokyo)

Nr. 12

Health Problem Grave

CHUGAI

The physical status of the new generation in this country is degrading disproportionately to the increasing popularity of sports. Japanese enthusiasm for every branch of athletic pastime was never more eloquently endorsed than during the Olympic Games. The fact that the physical condition of the nation's young men is weakening has been shown with disquieting conviction by the statistics recently prepared by the War Office medical bureau.

One of the startling revelations was that of the wide prevalence of tuberculosis among primary school teachers, not to mention the general state of health of their pupils. Statistics prepared by the Education Ministry also show that annually between 450 and 500 Japanese primary school teachers fall prey to tuberculosis. If the doctors' saying holds truth that there are 10 living consumptives to every new death by that disease, the figures would indicate that more than 2 per cent of the country's 240,000 primary school instructors are afflicted by the White Plague. Furthermore, as the figures are based on official reports to the Government, in which naturally every effort is made to present the most presentable complexion, it would be logical to assume that the actual degree of incidence is far greater.

Whenever a primary school teacher is diagnosed as suffering from pulmonary consumption, Government regulations call for his immediate resignation, in return for which a small amount of compensation is paid. It is needless to say that teachers are reluctant to resign under such circumstances.

The Education Ministry reportedly is planning to build health centers for consumptive teachers. It has been unofficially revealed that a five-year plan for this purpose has been drafted.

Because of the acute nature of the social problem, the step deserves rather vigorous prodding than words of commendation.

The Trans-Pacific (Tokyo)

Nr. **2**

MUCH OF DYSENTERY LAID TO FISH, CAKES

Type of Food Eaten Blamed for Prevalence of Disease in This Country

The widespread eating of raw fish and bean-paste cakes is thought to be the principal cause of the enormous dysentery rate in Japan, some 50 times the rate of the United States, 30 times that of England and 700 times that of France, according to Professor Takeo Tamiya, of Tokyo Imperial University and an authority on infectious diseases. One person out of 140 here had dysentery in 1935. This is all the more noticeable in view of Japan's excellent showing in most other infectious diseases, he said.

Laboratory tests at the institute for Infectious Diseases, Shiba Ward, have shown that dysentery bacilli thrive on raw fish, the number increasing with extreme rapidity at summer temperatures. Their presence in cakes is much discussed. Tests have not yet been carried out. Some maintain cakes are a high source of germs; some that they are not. Some claim that the germs thrive on the surface, of the cakes and others hold with equal fervor the belief that the germs multiply on the interior. Experiments will be carried out at the institute in the near future.

Whenever cakes and candies have been examined, they have been found to be very rich in microbe life.

Recent examinations of restaurant and waiting-house cooks, serving girls and others who handle cakes and raw fish served to guests and customers have shown that some 3,000 of the the 300,000 such persons investigated in Tokyo annually are carriers of dysentery.

Vaccine Too Strong

Although there is a highly effective vaccine for dysentery, the reaction on the patient is so severe that it is not suitable for practical use, said Professor Tamiya. While weaker effective vaccines are being sought, small pill-like tablets are given out by the city authorities to be taken orally. This method, recognized as temporary has produced no remarkable declines in the number of cases. Though a comparison of a group of immunized persons injected with anti-typhoid serum with an unimmunized group shows but a 10th the number of cases, a like comparison in the case of oral dysentery immunization shows only a drop of two-thirds. As the persons who give their children oral vaccination are probably more careful about eating habits than other parents, the whole difference may be due to that. Therefore there is no indication that oral vaccination can be considered effective.

The dysentery curve in Tokyo is almost a temperature curve, continued Professor Tamiya. If a few hot days come in June, the dysentery curve shows a corresponding hump; if a few days in the normally hot high-dysentery months of July and August are cool, the dysentery curve shows a corresponding dip. When days are warm, it is explained people begin to eat raw fish and cakes and drink cold water. Though the germs have been found to live on raw fish at temperatures below 59 degrees Fahrenheit, they do not begin to multiply greatly until the temperature reaches 68 degrees. At just below 86 degrees, or in the neighborhood of Japan's summer temperature, they increase with extreme rapidity.

Japan Not Infected

Some believe, continued Dr. Tamiya, that Japan is an infected country, but that belief is disproved in his opinion by of the great increase of dysentery in other countries during wars and at times of natural catastrophes. The dysentery rate in Germany increased

approximately 10 times during the World War, he pointed out.

Japan compares favorably with other countries in the rate of other common infectious diseases. The 2.38 cases per 10,000 of population for scarlet fever is far superior to England's 25.8, the United States' 19.82, Germany's 16.91, Denmark's 21.12 and France's 4.55. Diphtheria has increased in Japan 10 times in 12 years, however, while it increased by one and a half times in England and the United States. The amount of scarlet fever has increased enormously in all major countries during the same period, he pointed out, because no effective method of vaccination has yet been found.

Vaccination in Tokyo is being attempted on a large scale, but although carried out for nearly two years there has been no remarkable decrease in the number of cases.

Japan compares favorably also in the case of diphtheria, its rate of 4.07 per 10,000 being a third that of England, a fifth that of Germany, one and a third that of the United States and approximately the same as that of France. Again, from 1923 to 1935 the number of cases increased two and a half times. Cases in the United States dropped to a third in the period, but in England they increased one and a half times and in Germany by four times.

wenden

City Diseases

Diphtheria and scarlet fever are the most serious of the four so-called civilization diseases, said Dr. Tamiya, and their great increase here may be attributed to the growth of large cities. Figures show that almost half of the cases of these two diseases in Japan are found in the six large cities.

Vaccination is the only practical method for large scale control of diphtheria emphasized Professor Tamiya. In Tokyo, where the diphtheria rate rose from 4.82 to 10.28 between 1927 and 1933, it dropped to 6.7 in 1936 and approximately 4.8 in 1937, once vaccination was begun. As the danger point of diphtheria is between three and seven years of age, and as a vaccination is good for at least two years, one vaccination covers most of the danger period, he said. The effectiveness of the vaccination is shown more thoroughly by the fact that whereas before 1927 60 per cent of the diphtheria cases were children below seven years of age, at the present time only 30 per cent of the patients are children of that age level.

The effectiveness of the inoculations against typhoid fever is shown by the fact that in Tokyo in 1936, of the 1,929,832 people inoculated, there were but 69 cases, whereas in the city as a whole there were 2,197 cases. Annually a third of the people of Tokyo are inoculated, he continued, adding that the practice is to reinoculate each person once a year, although it is recognized that effectiveness lasts for three years.

Japan's typhoid rate is not so favorable, its 55.4 cases per 10,000 population being 25 times that of England, three times that of the United States, 12 times that of Germany and two-thirds that of Italy.

The Trans-Pacific (Tokyo)

Nr. **4**

OFFICIALS TO URGE STERILIZATION LAW

Health Ministry Bureau to Seek Rule Applying to Congenitally Insane

Compulsory sterilization of the insane and compulsory medical examination of those about to be married will be sought next year by the eugenics bureau of the newly formed Health Ministry. Pending passage of the necessary laws, the bureau will begin a nationwide campaign for voluntary pre-marriage tests and set up laboratories for the testing ultimately of more than 550,000 couples a year.

Establishment of a ¥500,000 laboratory for research in mental diseases, at which the causes of insanity will be studied, is being planned for next year. Though final approval of the laboratory plan has yet to be obtained, it is expected to be started next year for completion by 1941. The laboratory program will require an annual expenditure of ¥1,000,000.

A thorough mental examination of every Japanese is also sought for next year, an official of the bureau told a representative of The Trans-Pacific. It would be followed by an annual examination of those aged six and 15. The first age is that at which hereditary insanity first becomes apparent. The second is that at which insanity usually actually develops.

The fourth point of the program is a hospital-building plan which will enable hospitalization of all of Japan's more than 90,000 insane in a 10-year period.

Compulsory sterilization of the congenitally insane would involve some 1,000 persons in the first year, the official estimated. Lesser numbers would be involved in each succeeding year. Sterilization would be carried out at all ages, but not before 15, the age at which the type of insanity can be established. Those whose insanity is found curable would not be sterilized. Under present plans, sterilization would be compulsory, requiring neither the consent of the patient, nor of his parents.

The projected laboratory, which will be located in Tokyo, will include departments for research of cancer of the brain, divisions of psychology and psychiatry, a dispensary and child guidance, pre-natal and pre-marriage clinics where advice will be given and examinations conducted. Primary school teachers will be given courses at the clinic to enable them to distinguish insanity in young children.

Almost all of the insanity in Japan not due to hereditary causes is the result of syphilis, said the official. One-fourth of the insanity in this country results from syphilis and about two-thirds from hereditary causes.

It is felt that parents with tuberculosis or syphilis procure children with a susceptibility to insanity. Because of the high rate of tuberculosis in this country and the high rate of syphilitic insanity, pre-marriage tests for tuberculosis and syphilis are considered especially important. The fact that 1,500,000 Japanese are classed as feeble-minded indicates the necessity of mental tests for those about to marry, the official emphasized. He said that the pre-marriage tests will include physical, medical, insanity and feeble-mindedness examinations.

The Trans-Pacific (Tokyo)

Nr. 15

GOVERNMENT SEEKS STERILIZATION DATA

Prospects of Diet Bill Seen in Information Campaign Being Conducted

Government officials are making a careful scientific check of data having to do with the hereditary aspects of insanity with a view to possible presentation of a sterilization bill to the Diet in its next session, according to the Chugai Shogyo.

Before the last Diet session there were recurrent reports that some such bill would be presented, not on behalf of the Government, but by Diet members. Meanwhile the Welfare Ministry's eugenics section kept its ear to the ground for what little public sentiment was stirred up by prospects of the bill. Apparently there was no widespread reaction to the idea of sterilizing the congenitally insane. One physician of the Metropolitan Police Board is said to oppose the idea on the ground that mental diseases are not hereditary and are responsive to treatment.

Welfare Ministry officials have asked all psychopathic hospitals in the country to co-operate in preparing case histories of patients. Likewise, Professor Sukeyuki Uchimura, of Tokyo Imperial University and director of the Matsuzawa insane asylum, has been asked to give aid.

Similar appeals addressed to the Japan Medical Congress brought quick action. At a meeting of the congress in Kyoto last week, the medical scientists voted to give all assistance to the Government.

The Japan Psychopathic and Neurological Society, reported to be an affiliate of the congress, will take the lead in preparing data for the Government. The society will take no stand on the measure but will collect all possible information to aid in forming opinions.

A central organization of 10 psychiatrists and neurologists has been formed to carry out the task. Members of this organization include Professor Shichikuro Uematsu, of Keio University and Professor Naomi Araki, of Chiba Medical University.

19. Mai 1938

The Trans-Pacific (Tokyo)

Nr. 20

OPPONENTS HOLD UP
STERILIZATION TALKRacial Hygiene Council Forced
to Postpone Next Meeting
Indefinitely

The Racial Hygiene Council, set up by the Welfare Ministry, has been unable to continue its discussion of compulsory sterilization of the mentally and physically unfit, which it began April 22, because of increasing opposition to sterilization on the part of a number of experts, some of whom are members of the council.

Among the opponents, says the Yomiuri, are Dr. Junji Kaneko, of the medical affairs section of the Metropolitan Police Board; Dr. Jinichi Kikuchi, psychiatrist of the Tokyo District Criminal Court; Dr. Katsuro Narita, of the Juvenile Court, and Dr. Shigeyuki Komine, Dr. Joshiro Goto, Dr. Takanori Ikeda and Dr. Hideya Narabayashi, private practitioners.

Their various reasons for opposing compulsory sterilization have been compiled for Dr. Kaneko to lay before the council at its next meeting. It is because of the intensity of the opposition that the Welfare Ministry has postponed indefinitely the council's discussions. It hopes meanwhile to do something to moderate it.

Kaneko Outspoken

Dr. Kaneko is the most outspoken of the opponents, who have been agitating since Dr. Hisomu Nagai, now dean of the medical school of Taihoku Imperial University, launched the sterilization movement a few years ago. Because of this, the Welfare Ministry did not name him a member of the Racial Hygiene Council, though he is so prominent in the field of eugenics that it had to permit him to attend meetings as an observer.

His main objection, according to the Yomiuri, is that knowledge about heredity still is so dubious that it would be criminal to compel men and women to submit to sterilization on the basis of it. But he is prepared to indirect the sterilization plan on 24 counts, including:

1. It is not clear beyond all doubt that mental diseases are transmitted by heredity.
2. It is difficult to ascertain whether a given mental disease will be transmitted to posterity.
3. The mentally deranged have been known to improve through environmental conditioning and to show increased social adaptability.
4. Legislation of sterilization would tend to increase marriages among the potentially deranged.
5. Statistics show that the potentially deranged are decreasing.

To convince the council, he means to cite cases within his own experience during the past dozen years or so.

The Trans-Pacific (Tokyo)

Nr. 25

NAITO SEEKS BASIS OF FRESHER FOODS

Action of Enzyme in Causing Staleness Studied by Local Research Worker

Weary husbands who complain of stale salads and cold-storage vegetables have a friend in Mr. Hiroshi Naito, of the Institute of Physical and Chemical Research, who reported at this week's semi-annual science parley at the Hon-go institution on research work to determine why vegetables and fruits lose freshness.

The first aim of his study is knowledge of how vegetables lose vitamin C, highly important anti-scurvy component. It has long been known that tomatoes ward off staleness for some time (staleness being distinct from decay) and maintain their vitamin C under difficult conditions. Canned tomatoes are almost as nutritious as fresh ones, while most other canned fruits and vegetables lack most of their original vitamin value.

Mr. Naito wondered about this. The recently discovered oxidizing agent, ascorbic acid oxidase, which promotes oxidization of vitamin C, thus destroying its value, gave him a clew. He knew that most vegetables and fruits left in the air, where there is an abundance of oxygen, soon lose their freshness. He knew that heating promotes oxidation. Why not investigate tomatoes and find out if they have little of this oxidizing agent, and cucumbers and egg plant, which become stale rapidly, to see if they contain much? His experiments showed his suspicions to be true.

He found that tomatoes contain so little of the oxidizing enzyme that this element caused the oxidization of but a slight amount of the vitamin C ingredient in an hour and estimated that it would take three or four days to destroy the effectiveness of the vitamin C of the tomato. The vitamin C effectiveness in cucumber and egg plant became lost in approximately 10 minutes, his laboratory tests showed.

Studies by other men showed that cantaloupe, green peas, onions, spinach and watermelons, all of which keep their vitamin C nutritive value long after exposure to air, are likewise lacking in this oxidizing enzyme.

Two problems now face Mr. Naito. He must either find a way of preventing air from reaching the vegetable or he must nullify the action of the oxidizing enzyme. As oxygen pervades even the interior of foods, protecting the exterior is not sufficient, he told a representative of The Trans-Pacific. Dipping the vegetable in acid—almost any acid—is an excellent way, but unfortunately it ruins the taste of the food, he said sadly.

Little is known of this oxidizing enzyme, and in order to find a way to deaden its action and prevent deterioration of the nutritiousness of fruits and vegetables when exposed to air, scientists want to discover how it is formed, what it is composed of, how it acts and what sort of things influence its action.

Hamburger Tageblatt

Nr. 253

Japan bekämpft Kurzsichtigkeit

Folge des HJ-Besuches

Tokio, 16. September.

Als die 31 Hitler-Jugend-Führer nach Tokio kamen und den verschiedenen Ministerien Besuche abstatteten, wunderten sich die Japaner darüber, daß keiner der jungen Leute Augengläser trug. Das machte besonders auf die Beamten des Erziehungs- und des Wohlfahrtsministeriums tiefen Eindruck. Sie entschlossen sich sofort, den Kampf gegen das Uebel der Kurzsichtigkeit in Japan verstärkt aufzunehmen. Wenn man 31 japanische Jugendführer antreten läßt, dann sind unter ihnen mindestens 20 Brillenträger. Es hat sich herausgestellt, daß die japanische Jugend in ihrer sonstigen körperlichen Leistungsfähigkeit den Deutschen wohl nicht nachsteht, ihre Augen aber sind bedeutend schlechter.

Man führt das zurück auf ein falsches Unterrichtssystem und auf die Verwendung zu kleiner Typen im Zeitungs- und Buchdruck. Hier will man den Hebel zunächst ansehen. Noch in diesem Monat wird in Japan ein „Kampftag gegen die Kurzsichtigkeit“ durchgeführt werden. Das Erziehungsministerium wird die Beleuchtung der Schulräume verbessern und den Schülern Seh- und Leseunterricht erteilen lassen unter ausdrücklichem Hinweis auf die Erfahrungen, die in Deutschland auf diesem Gebiet bereits vorliegen.

The Trans-Pacific (Tokyo)

Nr. 52

MINISTRY SURVEYS HEALTH OF YOUTHS

Intelligence Also Tested in Examination of Young People In 8 Prefectures

Youths in northeastern Japan possess the most powerful legs and the strongest will power, while those in Osaka have the highest powers of logic, according to a health and intelligence survey recently conducted in eight prefectures, the results of which were announced on Dec. 19 during a meeting at the Welfare Ministry of the committee formed recently to prepare a program for national physical education.

The prefectures included Tokyo, Osaka, Saitama, Shizuoka, Akita, Ishikawa, Ehime and Fukuoka and the survey covered an examination of 20,747 persons in the age groups of one, two, four, eight, 12, 16 and 19, Domei reports.

In Tokyo and Osaka cities, the percentage of tubercular disease among those 16-year old is low, but the percentage among those in the 19-year-old category rises sharply. It is explained by the fact that many youths in perfect health are attracted to metropolitan areas from country regions at the age of 16 and evidently become victims of the disease because of less healthy conditions. In the eight prefectures, the percentage of tuberculosis among those two years old is 3.8, while that for 19-year-olds is 50.9. In Tokyo and Osaka Prefectures, the chest girth of more than 30 per cent is below normal. In Akita, fewer than 6 per cent are below normal.

In Akita, 16-year-old youths hopped on one foot an average distance of

1,100 feet, while in Tokyo the average was less than 500 feet. An outstanding record of 6,000 feet was set by one exceptionally sturdy resident.

Fukuoka and Saitama revealed young people with only average intelligence, but in the industrial and business sections of Tokyo and Osaka cities, mountain areas of Akita and fishing villages of Ehime Prefecture were youths with superior mental abilities. Osaka had the most logical brains, while Akita excelled in spiritual perseverance.

Trachoma was most prevalent in Fukuoka, with 36.8 per cent of those in the 19-year-old category victims. Akita, Ishikawa, Ehime, Tokyo and Osaka followed according to order. The lowest percentage was in Shizuoka and Saitama, is less than 3 per cent for all ages investigated. Responsibility for the high degree in Fukuoka is laid to the coal mines in the prefecture. In Akita, 9.5 per cent of one-year-old infants are afflicted.

The heaviest four-year-old child that was found weighed about 49.3 pounds, which is almost as much as the thinnest 19-year-old, who was 51.3 pounds.

Welfare Minister Koichi Kido told the conferees, according to Domei:

"As you know, a nation's physical strength is the foundation of its activities in every field, which is the reason all countries attach particular attention to this problem. In order to attain our purpose of establishing peace in the Far East, Japan must increase its population and improve its physical standard.

"Improvement in the nation's health cannot be achieved in a short time. This is the reason why we feel the necessity for adopting a fundamental program. Control of the nation's physical training is intended as a means of raising the physical standard. I hope all you members of the committee will give full consideration to an adequate system to be adopted."

The Trans-Pacific (Tokyo)

Nr. **2**

New Education Vice-Minister's First Order Is for Schools to Improve Health Standard

Making his first official pronouncement as Education Vice-Minister in the Hiranuma Cabinet, Mr. Hidehiko Ishiguro on Jan. 10 instructed all universities and higher schools to be "strictly health-conscious" this year, according to Domei.

Citing the annual student death rate of 5.5 per 1,000, as revealed by the Ministry's latest survey, Vice-Minister Ishiguro announced six new regulations to be followed by the higher educational institutions hereafter to elevate the general health standard.

They follow:

1. Physical examinations of matriculating students in the future must be carried out much more carefully and thoroughly than in the past and must include X-ray examinations.

2. In addition to regular annual health examinations, midyear and intermediate physical checkups should be made.

3. Each school should establish im-

mediately a health consultation office, available to students at all times.

4. Sanitary facilities at dormitories should be improved and expanded, and deans should give proper hygiene instructions to dormitory occupants.

5. Frequent health lectures should be given during assembly periods.

6. The establishment of student health committees should be encouraged.

In addition to the high student death rate, Mr. Ishiguro revealed that 5.9 students out of every 1,000 are forced to abandon school work yearly because of poor health and that 31.2 are obliged to take leaves of absence ranging from two months to a year for the same reason. Consumption and other respiratory diseases account for most of these cases, he declared. The X-ray examinations in the original checkup will be an important innovation, therefore, he said, as X-ray plates detect consumption in many cases before the victim is aware of it.

The Trans-Pacific (Tokyo)

Nr. 31

BABIES' DEATH RATE HIGH

Hirose Alarmed When Told 1 out of
7 Born in Honjo Ward Die

Welfare Minister Hisatada Hirose was greatly alarmed over the death rate of babies in Tokyo, the Nichi Nichi says, at a physical examination of babies held in a Honjo Ward school on July 25.

The physicians there told the Minister that in Honjo Ward one out of every seven births results in death during infancy. Last year 1,097 died out of the 7,640 born, a rate of 14.35 per cent.

According to the investigations conducted so far, Edogawa Ward had the highest percentage, 36.9, of sickly babies, followed by Azabu and Kojikawa Wards, both with 29 per cent in poor health.

7. Sep. 1939

The Trans-Pacific (Tokyo)

Nr. 36

PRESIDENT NAMED BY HEALTH SOCIETY

Princess Chichibu Chosen for
Honorary Post by Anti-Tuber-
culosis Association

The Tuberculosis Prevention Association, which was organized recently, decided at its meeting of directors on Aug. 29 at the Japan Industrial Club to appoint Princess Chichibu as its honorary president according to Domei. The appointment will be made some time between September 15 and 20.

The meeting was attended by Welfare Minister Hisatada Hirose, president of the association, Mr. Seihin Ikeda, former Commerce and Industry Minister, and Dr. Torasaburo Araki, Privy Councillor, both vice-presidents, and Mr. Fumihide Okada, director-general.

The directors also decided to launch immediately a large-scale campaign against tuberculosis. Among the enterprises to be undertaken by the organization are the investigation and study of prevention of tuberculosis, for which ¥65,000 will be spent; the establishment of a tuberculosis study institute and sanatoria at cost of ¥390,000; guidance of preventive measures, for which ¥75,000 will be expended; establishment of model districts for prevention of tuberculosis at an annual expenditure of ¥300,000 and training of prevention officials at a cost of ¥50,000.

The association is expected to receive an annual State subsidy of ¥500,000 and is expected to secure ¥500,000 from interest on ¥15,000,000 to be raised by public contribution.

Of the ¥15,000,000 to be raised by contribution, ¥8,000,000 is expected to come from Tokyo, ¥3,500,000 from Osaka, ¥1,250,000 from Kobe, ¥1,250,000 from Nagoya, ¥250,000 from Kyoto and ¥750,000 from other districts.

The Welfare Ministry is planning to have visiting nurses to encourage sanitation in homes, reports the Miyako. The Ministry will also conduct a drive for the installation of flush toilets in an effort to combat the rise of dysentery cases.

It has been found out by the Ministry according to a recent survey that the number of dysentery cases in this country has almost doubled since 1934. In that year, a total of 42,952 cases were recorded. The total rose to 48,968 cases the next year, climbed to 52,075 the following year and then leaped to 78,289 cases in 1937. Last year's figure was 80,221.

Shanghai is to be declared another center of the dissemination of cholera germs, reports Domei. This will mean that starting immediately goods and persons from that city, not excluding

Woodsung, will be carefully examined, on order of the Welfare Ministry. All goods shipped from that city will be disinfected, while passengers and members of ships' crews will be urged to take vaccinations against the disease. The medical authorities will also encourage the submission of excreta for examination in order that not a single germ carrier may land in this country.

Shanghai will not be the first place to be so designated, as Canton and Hainan Island have already been put on the list of places considered dangerous. On May 21, the day after the two places were officially marked out for strict surveillance, Hongkong was also thus designated.

In Shanghai, the first case of cholera was reported on June 7. Since then more and more patients have been reported almost daily. Toward the end of last month, more than 10 persons a day have been reported with cholera-like symptoms. More than 200 patients now are under close observation.

The capital has had 231 cases of sleeping sickness in the past month, reports the Nichi Nichi. Although the disease was slow in getting started, it seems to be spreading quite rapidly, for on Aug. 30 74 new cases were reported to the authorities. Some 89 persons, mostly children, have succumbed to the epidemic.

Ostasiatische Rundschau (Hamburg)

Nr. 8 - - -

*
Das japanische Wohlfahrtsministerium hat eine Untersuchung über den Gesundheitszustand und die körperliche Beschaffenheit von 2,7 Mill. Jugendlichen im Alter von 14 bis 24 Jahren durchgeführt, von denen 700 000 oder rund 27 % das Prädikat normal erhielten. Der Prozentsatz war am höchsten bei den gewöhnlichen Schulen, wo er etwa 65 % betrug. An zweiter Stelle folgten die Universitäten mit 40 %, dann die Mittelschulen mit 27 % und die Fabriken, Bürobetriebe usw. mit 25 %.