TOKYO "Present State and Measures Regarding Infectious Diseases in Tokyo"

- Legal structure of measures against infectious diseases in Japan
 - 1887 Legislation of the Infectious Disease Prevention Law
 - 1999 Legislation of the Infectious Disease Law to address issues of the outbreak of emergent and re-emergent infectious diseases, the spread of infectious diseases, and the need for a law giving consideration to human rights of patients
 - 2003 Revision of the Infectious Disease Law due to the need to address outbreaks of SARS and measures against zoonosis

Classification of Diseases and Legal Measures under Infectious Disease Law <Category 1 diseases> Hospitalization recommendation or implementation at class 1 designated hospitals, work restriction, and disinfection or disposal of contaminated materials.All subjected to reporting.

<Category 2 diseases> Hospitalization recommendation or implementation depending on intensity of symptoms (at class 2 designated hospitals), work restriction, and disinfection or disposal of contaminated materials. All subjected to reporting.

<Category 3 diseases> Work restriction, and disinfection or disposal of contaminated materials.

All subjected to reporting.

<Category 4 diseases> Infectious diseases originating from animals. Disinfection or disposal of contaminated materials. All subjected to reporting.

<Category 5 diseases> Diseases prompting people to take prevention measures against infection diseases by implementing surveillance and publicly disclosing the results. There are two types of diseases: Those where all cases are reported regardless of the medical institution, and those only subject to reports by designated institutions (fixed-point surveillance).

書式変更



<National governments> Hospitalization recommendation and implementation system, patient reporting system, and quarantine based on the Infectious Disease Law

<Tokyo metropolitan governments> Comprehensive prevention measures based on the Infectious Disease Law: Precautions, outbreak response, and medical care system improvement

Health crisis management system (original policy): alert system, and syndromic

surveillance system

•

Measures against infectious diseases in Tokyo

<Basic information on Tokyo>

Population: approx. 12,000,000 (There are three areas: Special wards, Tama region, and islands.)

<u>Special wards</u>: Population: 8,289,000 Number of public health centers: 23 Number of designated medical institutions: 4

<u>Tama region and islands</u>: Population: 4,000,000 Number of public health centers: 8, Number of designated medical institutions: 6

< Infectious disease outbreaks>

Category 1:No cases were reported in the past three years.

Category 2:10-20 cases of cholera, paratyphoid, and typhoid fever respectively, mainly overseas infections. More than 100 cases of Bacillary dysentery per year. Also an epidemic outbreak.

Category 3:273 cases in the past year, mostly domestic infections.

<Measures against infectious diseases>

Tokyo Infectious Disease Prevention Plan

Comprehensive Prevention Measures

• Health Crisis Management System

Measures against emergent and reemerging infectious diseases, measures against SARS, measures against highly pathogenic avian influenza (HAPI), and measures against NBC terrorism

 \bigcirc Alert system

Three diseases: West Nile fever, SARS, highly pathogenic avian influenza <<Example: highly pathogenic avian influenza (HAPI)>>

1st stage: Infection between birds

· Prompt gathering and provision of outbreak information

• Epidemic prevention measures focusing on birds

2nd stage: Infection between birds and humans

Early detection of patients and prevention of infection to humans

* Change measures against new influenza at the point of infection between humans.

Case definition of HPAI cases:

- (1) People who have any influenza symptoms such as a fever and meet one of the following two conditions: a)Those who have been in contact with infected birds, b) Those who have visited regions affected by the epidemic and been in contact with local birds
- (2) People who have influenza-like symptoms and severe pneumonia that cannot be explained by diseases other than HPAI

* Doctors report cases to health centers. In addition, samples are obtained by health centers, and prompt diagnoses are implemented by the Tokyo Metropolitan Institute of Public Health.

 \bigcirc Syndromic surveillance system