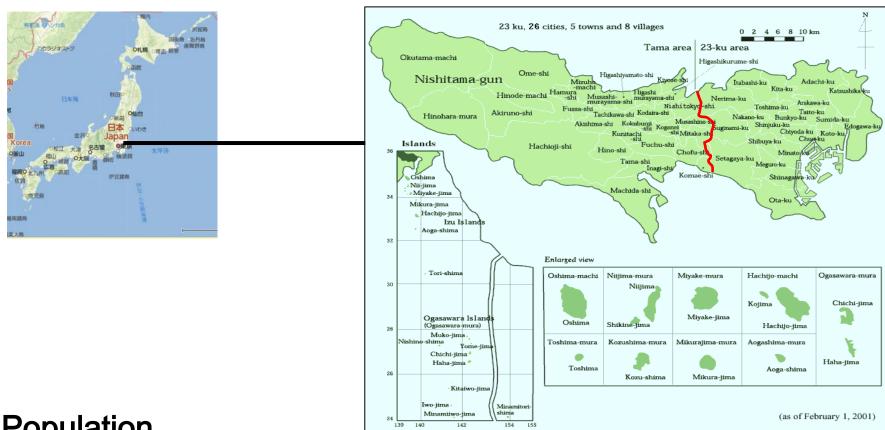
Emerging Challenges and Countermeasures for TB in Tokyo



Bureau of Social Welfare and Public Health Tokyo Metropolitan Government

Health and Safety Division Infectious Diseases Control Section

Tokyo Metropolis(as of August 1 2019)



Population

13,858,725 in 2019 (about 11% of total population of Japan)

Administrative Districts

23 special wards (self-governing municipalities)

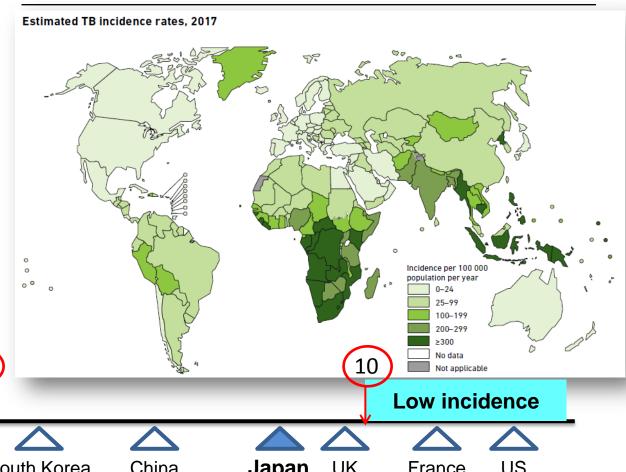
26 cities, 5 towns, and 8 villages

Global TB Situation (2017)

TB Cases and Deaths

2017	Global (estimates)	Japan
Number of Cases	10,000,000	16,789
Number of Deaths	1,300,000	2,303

Estimated Incidence Rate(**)



High incidence

South Africa 567 Philippines 544

India So

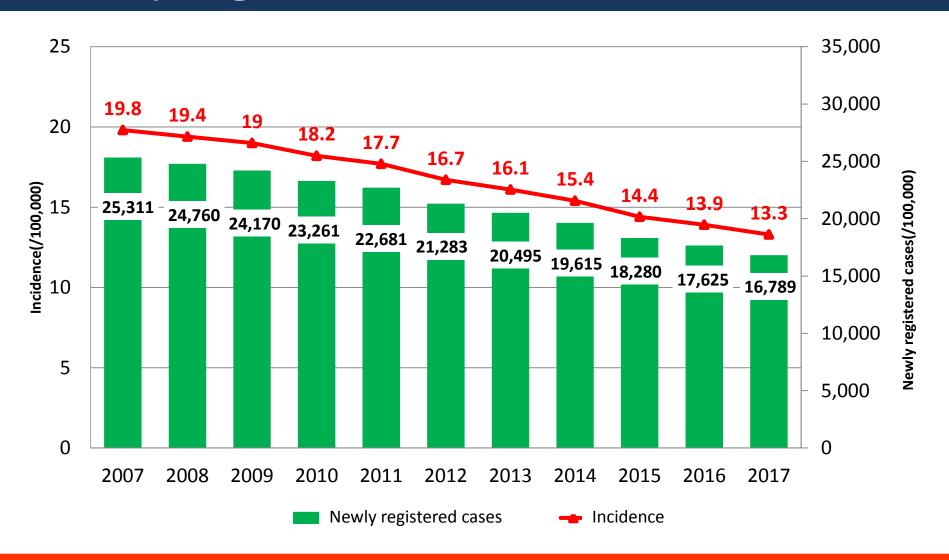
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South Korea 72 China 63 Japan 13 UK 8.8 France 7.2 US 2.7

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Reference: WHO Global Tuberculosis Report 2018

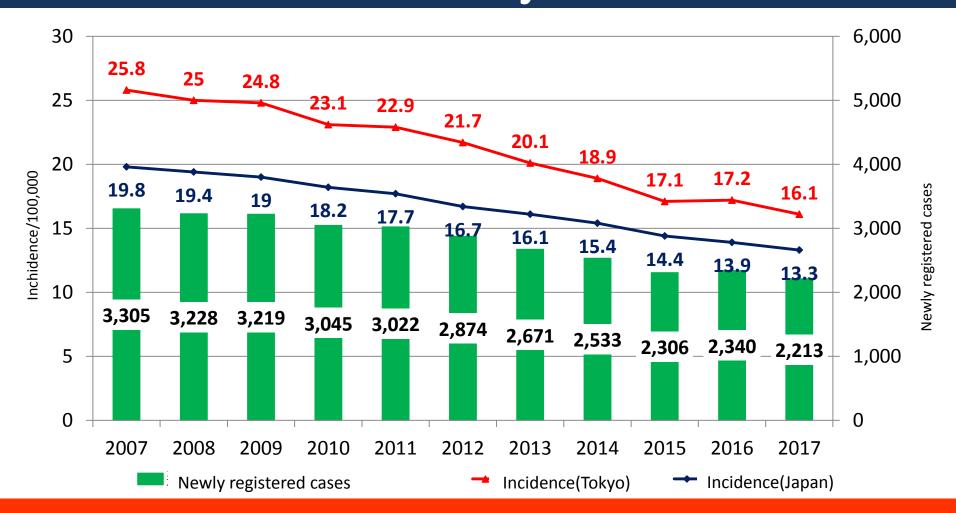
Newly registered TB cases and incidence



Newly registered cases and incidence have been continuously decreasing.

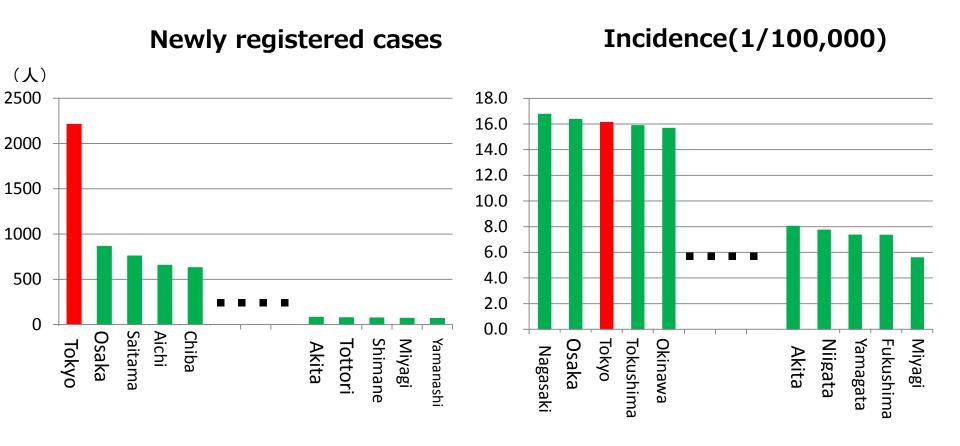
TB situation in Tokyo

Newly registered cases and incidence in Tokyo

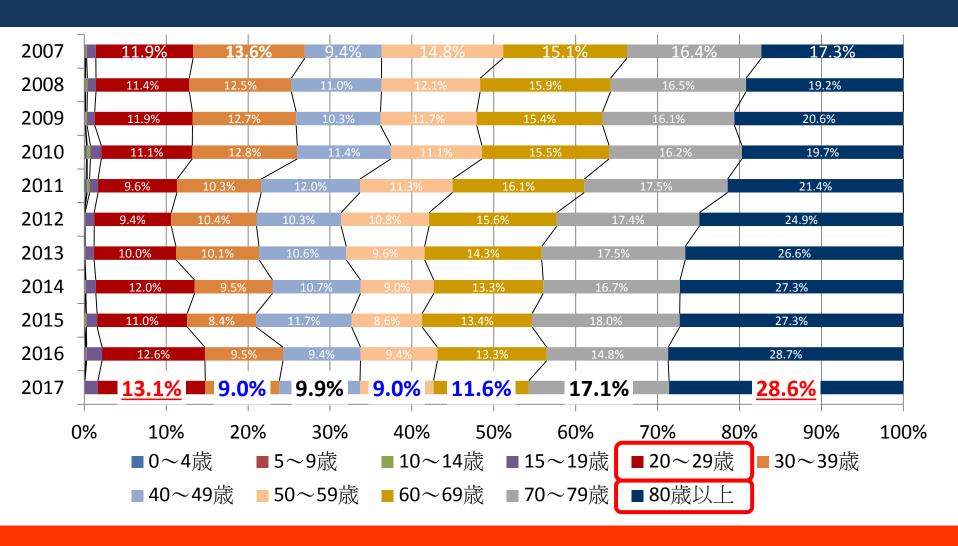


Newly registered TB cases and incidence are also declining in Tokyo.

Newly registered cases and incidence by prefecture

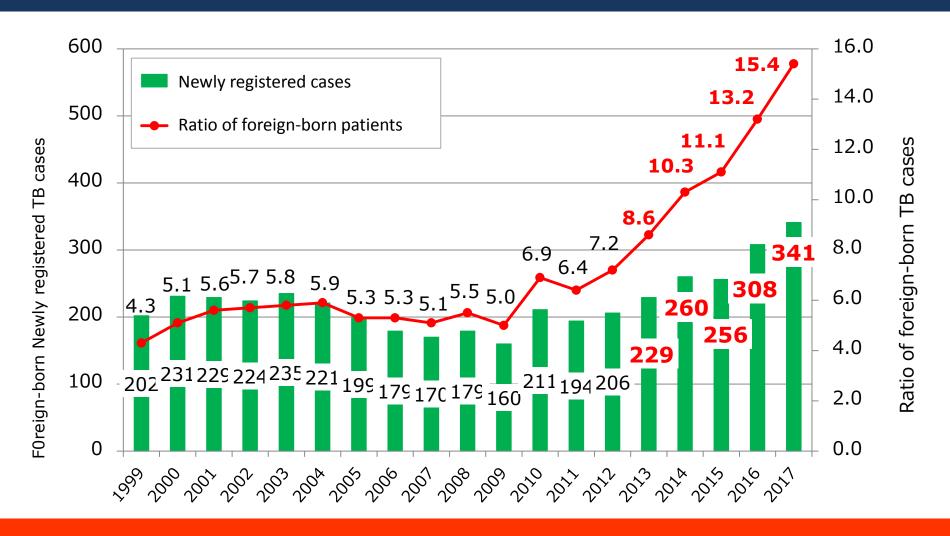


Newly registered TB cases by age (Tokyo)



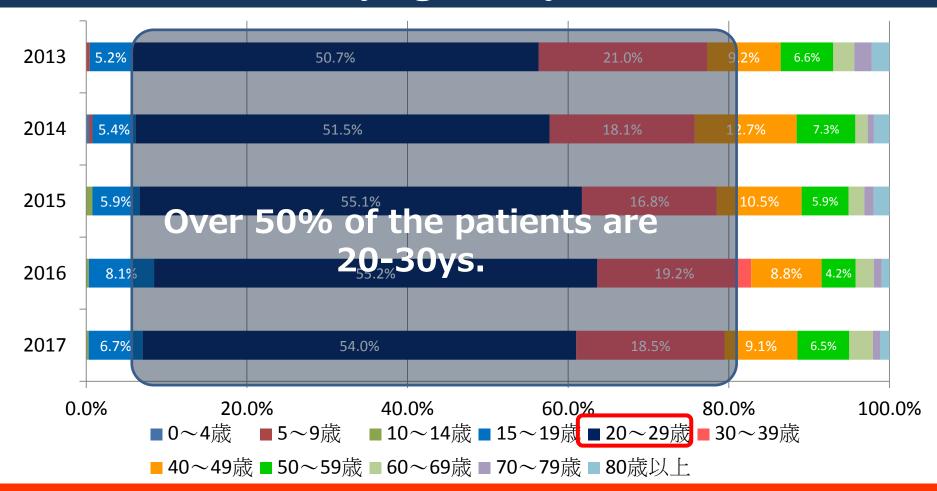
Newly registered TB cases are mainly from 20-29ys and over 80ys.

Trends of Foreign-born TB cases (Tokyo)



The ratio of foreign-born TB cases is dramatically increasing from 2013.

Newly registered foreign-born TB case by age (Tokyo)



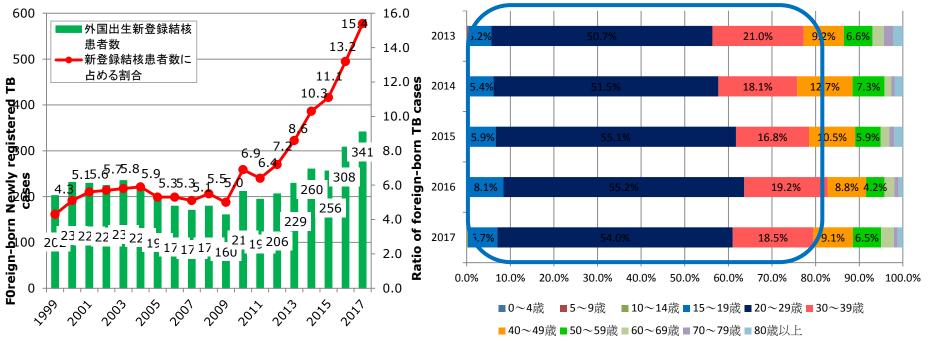
Over 50% of the patients are 20-30ys (mainly Japanese language school students from high burden countries).

Emerging challenges in Tokyo

Problem1 increasing number of TB patients

Newly registered foreign-born TB and its ratio to total cases(Tokyo)

Newly registered foreign-born TB cases by age (Tokyo)



Increasing number of younger foreign-born TB cases from high burden countries.



Pre-entry screening will be introduced by National Government by the end of this year.

Moving towards accepting foreign workers

[Back ground]

- As the population of Japan is constantly decreasing, it will be difficult to maintain economics and social welfare in japan.
- The national government decided to accept more foreign workers for sustainable social infrastructure.

Pre-entry TB screening (background)

[Legal background]
Immigrant Control and Refugee recognition Act

[To whom pre-entry screening will be needed]
Applicants from high burden countries(TB incidence>50)

[who will be tested]
Applicants who are going to stay in Japan over 90days

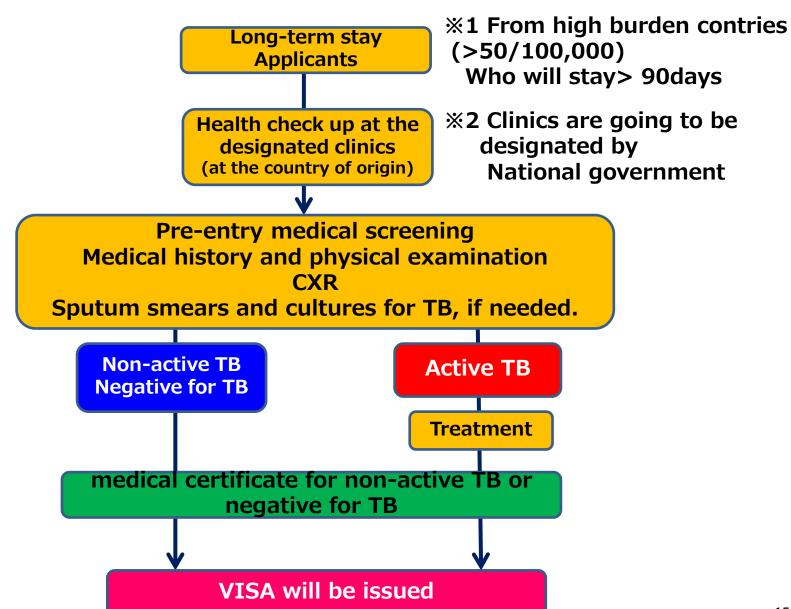
[what kind of tests will be performed]

Mandatory: medical history and physical examination chest x-ray(CXR)

If TB is suspected: sputum smear and culture

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Pre-entry TB screening at the country of origin



TB patients care in Japan (background)

[Cultural background]

- Geographically, Japan is surrounded by the sea.
- There is no restriction on food.
- Japanese language is mostly used.
- Hygiene sense is high.

[Relationship between corporations and health center]

 There has been only a few collaborations with corporations for TB measures and DOT.

[DOT]

- DOT at pharmacy ,DOT by E-mail ,medicine package confirmation , and DOT by telephone etc.
- These are not effective to patients in low medication compliance.

[Patient Support]

- consultation about hospitalization, outpatient visit ,medical expenses, living expenses, relationship to the neighbors
- working support
- introduction of welfare service

DOT for foreign-born workers

[Challenge]
Establish DOT approach for foreign-born workers



- It is difficult to perform DOT by the public health sector(it will be time consuming and difficult to dispatch outreach workers because of the strict budget.)
- DOT may be done at the workplace by the employer.

DOT for Foreign-Born patients

[TB Measures for Foreign-Born patients at present]

- Provide multi-lingual medication notes, and medical treatment guides.
- Provide multi-lingual movies (DVD).
- Medication support staff (interpreter) dispatch.
- Mobile chest X-ray examination at Japanese language school.

However, health center staffs do not have enough knowledge about religious and cultural background of foreign-born patients.



For effective DOT, health center staffs need to know religious and the cultural background of patients.

For further understanding of Cultural Backgrounds of patients

- Family involvement in treatment decision, and DOT
 Situation in Japan:In making decision on the treatment,
 family's opinions are also respected.

 Family members are supportive of DOT.
- Perception toward TB as a disease
 Situation in Japan:Recognized as a curable disease if treated.
- Patients support by opposite gender
 Situation in Japan:It's not major issue.

We would appreciate it if you could tell us the situation in your country.

Summary

- Foreign-born TB patients have increased, and most of them are 20-30 years old.
- Foreign-born workers acceptance could lead increase of foreignborn TB patients.
- It is necessary to establish DOT that is suitable for foreign-born patients.
- In addition to multi-lingual materials, health center staffs need to know religious and cultural backgrounds of each patient.

Thank You for your attention