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Item 5 of the agenda

**Enhancing capabilities for responding to a natural or deliberate epidemic
of infectious diseases in Japan**

Submitted by Japan

I. Promoting enactment of domestic legislation

**A. Amendments to the Law Concerning Infectious Diseases (enacted on
November 15, 2003)**

1. The Law concerning Prevention of Infectious Diseases and Medical Care for Patients with Infections (hereinafter referred to as the Law concerning Infectious Diseases) has been amended by some legislative measures such as the addition of smallpox and tularemia to the diseases covered by the law.
2. As a result of these amendments, the doctors must promptly notify the result of their diagnosis for those affected by biological agents that may be used in bioterrorism, and in accordance with the notification, the so-called spread-prevention measures such as recommendation to hospitalize the victims and their disinfections shall be taken.
3. In addition, the Immunization Law Enforcement Ordinance was also amended to designate smallpox as a category 1 infection (October, 2003). This allows the implementation of smallpox vaccination in case of a bioterrorism in which smallpox is used, and in case of unexpected health hazards resulting from vaccination in accordance with the Immunization Law.

*Annex 1: A revision of diseases covered by the Law Concerning Infectious Diseases
through its amendment (bioterrorism related)*

Annex 2: Measures classified by Category of disease

Annex 3: Summary of infectious diseases feared to be used for terrorist attacks

B. Amendment of the Fire Service Organization Law (enforced on April 1, 2004)

4. As a result of the amendment of this law, a provision was introduced, stipulating the mobilization of Emergency Fire Response Teams in cases where there is: 1) a large scale disaster affecting more than two prefectures; or 2) an “extraordinary disaster” resulting from the spread of toxic substances, etc., that is beyond the ability of local authorities to take necessary measures against and requires intervention on a national scale.

5. In addition to disasters resulting from the “spread of toxic substances” such as sarin gas, “extraordinary disasters” also refer to disasters resulting from the release of large amounts of radioactive substances, radiation or biological agents. Emergency Fire Response Teams are mobilized at the request of prefectural governors or at the instructions of the Director General of Fire Defense Agency.

C. The Law Concerning Measures to Protect the People in a Situation of Armed Attack (provisional translation), (adopted on June 18, 2004 (to go into force within 3 months of its proclamation))

6. The purpose of this law, among other things, is to protect the lives and properties of citizens in case of an armed attack against Japan.

7. The law stipulates that in situations in which a large number of people are killed as a result of the use of a biological agent, etc., or when there is a clear and immediate danger of such a situation occurring, and the government has decided upon the need for urgent action in order to protect the lives and properties of citizens, measures be taken for the protection of citizens in accordance with the provisions of this law concerning the evacuation of people, assistance to evacuated people and other aspects of responses to disasters, etc.

II. Strengthening of Medical and Public Health Structure Related to Initial Response

A. Establishment of a structure for the implementation of initial measures

8. In order to be able to quickly grasp the situation in case of an incident, the government has established the Cabinet Intelligence and Research Office Situation Center, which collect and analyze information around the clock, while also establishing the post of Deputy Chief Cabinet for Crises Management, with the aim of consolidating the various departments in charge. These steps assure a structure that allows the various ministries and agencies concerned to cooperate and respond to a crisis situation, such as terrorism, under the overall coordination of the cabinet, in a flexible and efficient manner.

B. Implementation of Infectious Disease Surveillance (enabling prompt investigation into the causes)

(a) Infectious diseases affecting humans

9. In response to the anthrax incident in the US, the Ministry of Health, Labor and Welfare instructed the prefectural governments to put into place an Infectious Disease Surveillance system that will enable them to quickly grasp the situation when there is an unusual occurrence, such as an outbreak of anthrax, etc., and will facilitate prompt reporting and investigation of the cause (October 2003). Through the amendment of the Law Concerning Infectious Diseases (October 2003), legislative measures, such as the addition of smallpox and tularemia to the list of diseases covered by the law, were put into place. These changes will ensure that doctors who diagnose patients affected by biological agents that could potentially be used in bioterrorism promptly report the incident to the authorities.

Annex 1: A revision of diseases covered by the Law Concerning Infectious Diseases through its amendment (bioterrorism related)

(b) Animal and Zoonotic Infections

10. The Ministry of Agriculture, Forestry and Fisheries, in cooperation with the Livestock Hygiene Service Center in each of the prefectures, has put into place the Surveillance on Notifiable Animal Infectious Disease in order to perform surveillance on 9 domestic animal infectious diseases and 11 notifiable animal infectious diseases covered by the Domestic Animal Infectious Disease Control Law. From among these diseases, information relating to zoonosis is submitted directly to the Ministry of Health. In June 2004, the Domestic Animal Infectious Disease Control Law was amended to enhance the system for prompt notification through measures such as the imposition of harsher penalties for noncompliance, etc.

C. Enhanced Emergency Medical Preparedness

(a) Infectious diseases affecting humans

(i) National stockpiling of pharmaceutical products such as smallpox vaccine

11. Since there is no established treatment for smallpox, the use of smallpox vaccine is important. For this reason, the government started the stockpiling of the vaccine from 2001 (fiscal year), and the stockpiling, maintenance and management of a necessary amount of vaccine has been continuing ever since.

(ii) Dissemination of information regarding treatment methods and responses

Smallpox

12. The Web site of the National Institute of Infectious Diseases, NIID (<http://www.nij.go.jp/niid/index-e-html>), provides information regarding the diagnosis and clinical management of smallpox, which may potentially be used in a bioterrorist attack.

- (a) A CD-ROM containing information about smallpox-related diagnosis and vaccination was created and distributed among healthcare personnel (April, 2002).
- (b) A meeting of persons in charge of related matters in each of the prefectures was held to promulgate the guideline on preparedness for and responses to an outbreak of smallpox (December, 2002; April, 2003).
- (c) Prefectural governments were asked to put into place a system, in advance, that is capable of responding to smallpox related emergencies, through measures such as the designation of personnel for an initial response team, etc. (April, 2003).
- (d) Prefectural governments were asked to draw up an action plan containing concrete measures for responding to a possible bioterrorism attack using smallpox (April, 2003).
- (e) A video tape about smallpox vaccination to be used in explanatory sessions aimed at citizens who will receive vaccination was distributed to prefectural agencies in charge, as well as to other interested parties (September, 2003).

Anthrax

- (a) Pamphlets providing information on what to do when receiving an envelope, etc., suspected of containing anthrax have been distributed widely among the citizens, and the same information has also been posted on the Web site of the Ministry of Health, Labor and Welfare (<http://www.mhlw.go.jp/english/index.html>). In addition, health centers and other related agencies have been provided with information on how to deal with requests for the inspection of suspected letter, etc. A related document "Notice to Citizens: How to deal with suspicious letters, suspicious powder, etc." is posted on the Web site of the National Infection Research Center (<http://www.nihs.go.jp/mhlw/hsd/index.html>).
- (b) To enable them to respond promptly and appropriately, prefectural and municipal governments are provided with information on how to deal with possible anthrax contamination, as well as with information on medical institutions capable of dealing with such emergencies. (November 2001)

Others

- (a) In cooperation with the Japan Medical Association, medical personnel were provided with information regarding the diagnosis and methods of treatment of infectious diseases such as anthrax and others. (Guidelines concerning the diagnosis and treatment of anthrax, plague, botulism and tularemia were drawn up and distributed and also posted on the Web site.)

(iii) Inspection and improvement of the emergency medical system

- (a) Prefectural and municipal governments were requested to put into place an action plan for dealing with bioterrorism using smallpox, which sets out concrete measures to be taken including information on the medical system. (April 2003)
- (b) Designated Medical Institutions for Infectious Disease ((specific) 2 institutions, 6 beds, (class 1) 17 institutions, 32 beds, (class 2) 303 institutions, 1,710 beds. (June 2004)) have been promoted.

(iv) Implementation of training courses targeted at medical institutions

- (a) Training courses targeted at hospitals in charge of treating infectious diseases. (November 2001)
- (b) A meeting of persons in charge of related matters in each of the prefectures was held in order to inform them about the guideline for preparedness for and responses to an outbreak of smallpox (December, 2002; April, 2003).

(b) Animal and Zoonotic Infections

13. As part of its crisis management system, which is continuously enhanced and improved, the Ministry of Agriculture, Forestry and Fisheries, in preparation for possible emergency vaccinations, is maintaining stockpiles of vaccines for zoonosis such as the Highly Pathogenic Avian influenza, and the West Nile Virus Disease, as well as for infectious diseases which may cause serious damage to the livestock industry such as the Foot-and-Mouth disease and the Classical Swine Fever (Hog Cholera).

D. Provision of information to citizens**(a) Infectious diseases affecting humans**

- (i) The “Domestic Emergency Countermeasure against terrorism” related home page on the Health Ministry’s Web site (<http://www.mhlw.go.jp/kinkyu/j-terr.html>) provides citizens with terrorism related information.
- (ii) The smallpox countermeasure guideline contains a section titled “Public Relations and Provision of Information”, which sets out the responsibilities of the government and each of the municipalities and provides information on countermeasures classified according to different possible conditions.

(b) Animal and Zoonotic Infections

14. When there is an outbreak of a domestic animal infectious disease, the Ministry of Agriculture, Forestry and Fisheries issue press releases as needed and also compiles regular reports about the status of various domestic animal infectious diseases in order to keep the public informed. From among diseases under surveillance, information relating to the outbreak of a zoonosis is also submitted to the Ministry of Health, Labor and Welfare.

III. Enhancements of Response Capabilities and Strengthening of Collaboration Between Concerned Organizations

A. Implementation of countermeasures in accordance with the “Basic Government Policy on Countermeasures against Chemical and Biological Terrorism” (the decision of relevant ministers, November 8, 2001)

15. The government shall be in readiness, based on the following 5 basic policies for responding to the outbreak of a chemical or biological terrorist attack inside the country that will enable it to respond in a prompt and effective manner:

- (i) Strengthening of the medical and public health system through the implementation of infectious disease countermeasures and vaccine stockpiling.
- (ii) Strengthening of cooperation between concerned organizations and of their response readiness.
- (iii) Strengthening of control of biological and chemical agents, and of vigilance and security for prevention of terrorist attack
- (iv) Strengthening of the response capacities of the police, the self-defense forces, the fire department, the coast guard and other concerned organizations
- (v) Provision of accurate and timely information to the public

B. Establishment of the Counter-NBC terrorism squad

(a) Efforts by the National Police Agency

16. Since the 1995 sarin gas attack on the Tokyo subway by the Aum Shinrikyo group, the National Police Agency has been intent on improving its counter-NBC terrorism capabilities through the strengthening of the organization; the upgrading of equipment, material and machinery; and other such measures. Counter-NBC terrorism squads, equipped with advanced-type equipment and machinery, such as the Counter-NBC terrorism squad vehicle and biological agent detectors, were established in the Tokyo and Osaka police departments. However, in the light of the terrorist attacks of 9/11 in the United States, it was decided to further strengthen the counter-NBC terrorism capacities of the National Police Agency through measures such as the setting up of additional counter-NBC terrorism squads in the 6 prefectures of Hokkaido, Miyagi, Kanagawa, Aichi, Hiroshima and Fukuoka.

17. Although, until now, the counter-NBC terrorism squad has been able to respond promptly to a number of incidents suspected of being terrorism related, and has proven itself to be fully capable of protecting the safety of citizens, given the continuing threat of terrorism inside and outside the country, it has been decided to further enhance the capabilities of the counter-NBC terrorism squads stationed in the Tokyo Police Department and Osaka Police Department.

(b) Efforts by the Japan Coast Guard

18. The Japan Coast Guard has further strengthened the Counter-NBC terrorism capacities at sea, through measures such as increasing the staff which enable it to respond to the NBC terrorism in a prompt and appropriate manner.

C. Upgrading of equipment and material, such as protection clothing and poisonous gas detectors

(a) Efforts by the Defense Agency

19. The Defense Agency, in accordance with government policy and under The Mid-term Program based on the Basic Policy for National Defense (2001 to 2005), is currently in the process of enhancing the agency's capabilities against biological weapons. Concrete measures include the mobilization of biological reconnaissance vehicles and biological agent alarm systems, conducting research in areas related to the detection and identification of biological agents, the introduction of chemical protection vehicles, personal protective equipment, collective protection systems, etc., the upgrading of smallpox vaccine stockpiles, putting into operation decontamination vehicles, etc. These measures have enabled the Defense Agency to provide greater protection for all the members of the first responder regiments (Infantry regiment and others), improve preventive capabilities by renewing and continuously upgrading smallpox vaccine stockpiles, upgrade decontamination capabilities by providing decontamination vehicles to most of the chemical protection units of the agency's tactical forces (divisions and brigades), and improve diagnosis and treatment capabilities through continuous training, thus enhancing the overall capabilities of the Agency for dealing with emergency situations.

(b) Efforts by the National Police Agency

20. After the 1995 sarin gas attack on the Tokyo subway by the Aum Shinrikyo group, the National Police Agency, in order to improve its capacity for responding to these kind of attacks, has provided each of the counter-NBC terrorism squads stationed around the country with chemical and biological protection clothing, poisonous gas detectors, decontamination equipment, etc.

21. In the light of the 9/11 terrorist attacks in the United States, the agency has decided to further strengthen the counter-NBC terrorism capabilities and has distributed additional chemical and biological protection clothing, gas detectors, etc.

22. In an effort to boost the counter-NBC terrorism capabilities, the National Police Agency plans to continue upgrading and improving the necessary equipment and materials supplied to the Counter-NBC terrorism squads and to the NBC terrorism related teams of the riot police.

(c) Efforts by the Japan Coast Guard

23. The Japan Coast Guard has upgraded the necessary equipment and materials such as chemical protection clothing and biological agent detector to strengthen the capabilities of Counter-NBC terrorism. The Japan Coast Guard has decided to further to improve and strengthen the equipment and materials.

(d) Efforts by the Fire Defense Agency

24. The Fire Defense Agency has equipped major branches of the agency throughout the country with chemical protection clothing, gas detectors, etc.

D. Implementation of Instruction Courses and Practical Training in Counter-Bioterrorism

(a) Efforts by the Defense Agency

25. The Defense Agency has been routinely implementing training programs relating to the decontamination activities of the chemical protection unit and public health activities of the medical unit of the Ground Self-Defense Force. The following are some recent undertakings by the Agency in this area. In May 2002, the Agency compiled a summary of the available knowledge by experts and others in the field concerning the diagnosis and treatment of major biological agents, which was then sent to the departments within the agency in charge of healthcare. In June the "Seminar on Biological Weapon Countermeasures", targeted at medical officers and other related sections within the Defense Agency was held, and offered courses on smallpox prevention, diagnosis, and smallpox vaccination techniques. In March 2004 a seminar titled "Medical Information network for Special Incidents" was convened and attended by the general staff and top officials from the various departments and sections within the agency, as well as interested parties from related ministries and agencies. In addition, map exercises dealing with bioterrorism were also conducted by the Agency in 2003.

(b) Efforts by the National Police Agency

26. The National Police Agency implements a large number of courses and training programs on a regular basis. Policemen in charge of dealing with NBC terrorism incidents attached to prefectural police agencies receive education in basic knowledge about the dangers involved, as well as in the basics of dealing with such incidents, and are also required to attend lectures offered by specialized institutions on the subject.

27. On a national level, the Agency conducts joint training exercises involving the Fire Defense Agency, Self-Defense Forces, healthcare agencies, local governments and other organizations concerned. It also implements lectures and training programs under the agency's own auspices. Thoroughgoing unit level activities and training programs for members of the Counter-NBC terrorism squads and NBC terrorism related teams of the riot police are also conducted on a regular basis.

(c) Efforts by the Japan Coast Guard

28. The Japan Coast Guard makes the Counter-terrorism units to participate in the training course offered by specialized institution and combined exercise with relevant authorities. Thoroughgoing unit level activities and training programs for members of the Counter-terrorism units are also conducted on a regular basis.

(d) Efforts by the Fire Defense Agency

29. In the past, NBC disaster related topics were taught as part of other classes such as the rescue course or the first-aid course. However, in 2004 the NBC Disaster Course and the Extraordinary Disaster Course were each established in the Fire and Disaster Management College and the Fire Academy, respectively.

E. Implementation of a system for effective on-site response and cooperation between organizations concerned

30. In accordance with a request by the Fire Defense Agency, the prefectural governments put into place a system that will enable the establishment of a terrorism countermeasures headquarters in case of NBC terrorism. This will facilitate cooperation and communication between the various municipalities, fire departments, police departments, self-defense forces, and the medical services thus making it possible to better assess the situation and get accurate information about the availability of medical supplies and other necessary material and equipment.

31. Based on a simulated scene of a chemical terror attack and on-site rescue operations, the “Local cooperation model of related organizations in response to NBC terrorism” was drawn up to serve as a response manual for the provision of rescue services, emergency medical care, the identification of chemical agents involved, decontamination, etc.

IV. Countermeasures by point-of-entry inspections

A. Crisis management at international airports and sea ports

32. In order to prevent and combat international terrorist activities and other international organized crimes, it is extremely important to manage properly international airports and sea ports that are “national borders” through which people and goods go out and enter via airlines and ships. In view of this, the government established an “Interagency Team on Border Security and Crisis Management ” in the Cabinet Secretariat on January 16, 2004 and enforced measures to strengthen cooperation among concerned government organizations, by confirming the reinforcement of communications, surveillance and inspections at local levels by police, the Japan Coast Guard, Immigration Bureau, Customs, and Airport and Port Authorities.

B. Immigration inspections

33. When an unexpected infectious disease breaks out in the world, it must be important to establish the best possible preventive measures at the points of entry, as well as the system to prevent secondary infection inside Japan, such as the countermeasures taken against the outbreak of severe acute respiratory syndrome (SARS) last year. Along this line, it is possible to take the following countermeasures by the Immigration Control.

34. The Immigration Control and Refugee Recognition Act stipulates that a patient of Category 1 Infection, Category 2 Infection, or Designated Infection (in the last category, only diseases for which hospitalization is required by the government ordinances), as provided for by the Infectious Diseases Control Law, or any person with symptoms of New Infection constitutes the ground for refusal of landing (Article 5, Paragraph 1, Clause 1) .Whether this provision

applies or not shall be decided by the Immigration Inspector after a physician's diagnosis is made. (Article 9, Paragraph 2)

35. Therefore, in case an unexpected infectious disease breaks out, which is categorized as one of the above infections, of which patient or any person with symptoms must be subjected to the ground for refusal of landing. The Immigration Bureau of Ministry of Justice must try to share information with the Ministry of Health, Labor and Welfare and other relevant agencies and organizations and deal with such case appropriately.

C. Customs inspections

36. In view of bioterrorist risks, Customs takes particularly cautious measures when they inspect pieces of mail and imported cargos suspicious of containing anthrax and other agents. Also, when inspecting baggage and other personal belongings of travelers and crew members from countries and regions where cases of infectious diseases, such as SARS, have been reported, Customs officials are taking precautionary measures so that those working at customs inspections will not become secondary infection sources, in closer cooperation with quarantine stations and other CIQ-related organizations such as Immigration Control and airport authorities.

D. Quarantine

(a) Infectious diseases affecting humans

37. Following the amendment to the Infectious Diseases Control Law and the Quarantine Law, smallpox has been added to the category of quarantine infectious diseases, and reporting to authorities of the patient's health conditions over a certain period after his/her hospitalization has been made mandatory to strengthen point-of-entry measures to check the spread of infection. (October 2003)

(b) Infectious diseases affecting animals

38. Infectious diseases of overseas domestic animals, if they are once allowed to enter into this country, could cause a disastrous damage to the livestock industry in Japan and have a serious economic impact. In order to prevent these infectious diseases' entry, Japan conducts quarantine inspections on imported animals and livestock products under the Domestic Animal Infectious Diseases Control Law. Specifically, at major air and sea ports, animal quarantine officers inspect such imports, and when they find them suspected to be infected by pathogens, they take measures to disinfect and dispose of them.

(c) Anti Pests and Diseases of Plants

39. Pest and diseases of plants could cause heavy damage to the crops and have serious economic impacts, if they are once allowed to enter virgin areas of land. Therefore, in order to prevent the entry and spread of plant pests and diseases, Japan conducts quarantine inspections on imported plants, plant products and their containers and packages under the Plant Quarantine Law. In specific ways, at seaports and airports throughout the country, plant quarantine officers inspect these plants and plant products, and if any of plant pests and diseases targeted for quarantine inspections is found with them, they are disinfected, disposed of, or returned to the senders, and thereby prevent the entry into Japan of plant pests and diseases.

V. Cooperation with international organizations and other countries

A. International organizations

(a) Infectious diseases affecting humans

40. Countermeasures against infectious diseases are one of the priority issues for cooperation through the World Health Organization (WHO), and Japan is conducting cooperation in various areas. Japan has been providing financial support to the Global Outbreak Alert and Response Network (GOARN), the global network on infectious diseases promoted by WHO, and also sent Japanese experts at GOARN's requests at the time of outbreaks of serious infectious diseases. Japan is also supporting the workshops to reinforce various countries' ability to respond to infectious diseases, such as the improvement of influenza diagnosis ability, through the Western Pacific Regional Office, to which Japan belongs.

(b) Infectious diseases affecting animals

41. In 1930, Japan joined the World Organization for Animal Health (OIE), established with the purpose of working out sanitation standards for domestic animal infectious diseases and gathering and providing information on outbreak situations, and has since contributed to various activities of the OIE, through participation in experts' meetings and dispatching experts to the OIE headquarters, as well as support for the OIE's measures for foot-and-mouth disease and BSE (bovine spongiform encephalopathy) in the Asia-Pacific region.

(c) Anti Pests and Diseases of Plants

42. Japan has joined International Plant Protection Convention (IPPC), concluded with the purpose of promoting and coordinating intergovernmental and international activities concerning the control of plant pests and diseases and prevention of their spread, especially prevention of their transborder entry, and has been contributing to various activities under the convention, through dispatching Japanese experts as subagency members concerning the settlement of disputes.

B. Bilateral cooperation, others

(a) Global Health Security Action Group (GHSAG)

43. Following the terrorist attacks in the U.S. on September 11, 2002, a Cabinet-level meeting of health ministers from Canada, the United States, Mexico, United Kingdom, France, Germany, Italy and Japan was inaugurated, at the proposal of the Canadian government, to discuss exchanges of technical information on public health concerning health damages inflicted by biological and chemical terrorism and promotion of cooperation. (The European Union and WHO participate as observers.) Four meetings have been held so far since its launch.

The 1st Cabinet-level meeting:	November 7, 2001, at Ottawa
The 2nd Cabinet-level meeting:	March 14, 2002, at London
The 3rd Cabinet-level meeting:	December 6, 2002, at Mexico City
The 4th Cabinet-level meeting:	November 7, 2003, at Berlin
The 5th Cabinet-level meeting:	Scheduled for December 2004, at Paris

44. Japan also took part in a simulation drill, held on September 9 and 10, 2003, concerning the communication among the member countries in order to cope promptly with a case of a smallpox terror attack.

(b) Infectious diseases affecting animals

45. Japan has been contributing to activities toward the improvement of domestic animal infectious disease prevention technologies and decontamination of pathogens of trans-boundary animal infectious diseases through implementing technical cooperation, such as sending experts to and accepting trainees from countries that need technologies and knowledge on domestic animal sanitation in Japan.

(c) Anti Pests and Diseases of Plants

46. While countries of the world, including Japan, are taking measures they need to prevent entry and spread of plant pests and diseases in accordance with the IPPC, Japan is extending technical assistance as part of its bilateral cooperation, such as sending experts to and accepting trainees from countries that need technologies and expertise for plant quarantine developed and applied to practical use by Japan. Through these activities, Japan is working for the improvement of plant quarantine technologies in developing countries and harmonization to international standards, thereby contributing to the prevention of transborder entry and spread of plant pests and diseases.

(d) Examples of Japan's assistance for New Infection in Asia

SARS Countermeasures: In May 2003, Japan provided China with 1.5 billion yen in emergency grant aid (for provision of equipment) and medical equipment (worth about 205 million yen, approximately 2 million dollars) and dispatched a Disaster Relief Expert Team to China. Japan also extended about 10 million yen to Beijing City and about 17 million yen to Shanghai City, respectively, in "Grassroots Human Security Grant Aid" (for purchase of equipment). In March 2003, Japan dispatched a Disaster Relief Expert Team to Vietnam for SARS countermeasures.

Avian Influenza Countermeasures: In February 2004, Japan provided medicine (worth 20 million yen, approximately 0.2 million dollars) to Vietnam. In March the same year, the Japan International Cooperation Agency (JICA) dispatched experts to Thailand and its neighboring countries (Cambodia, Laos and Myanmar), while it provided to Laos diagnosis equipment worth about US\$50,000 in the framework of the region wide project-type technical cooperation being developed in Thailand. Japan also implemented Grassroots Human Security Grant Aid of about 10 million yen for Indonesia and about 6 million yen for Cambodia for their quarantine activities. In addition, it extended emergency grant aid of a total of about US\$1.61 million to Laos, Cambodia, Indonesia and Vietnam through the Food and Agriculture Organization of the United Nations (FAO) to support their quarantine activities.

Related English Website Addresses

Ministry of Health, Labor and Welfare: <http://www.mhlw.go.jp/english/index.html>

National Institute of Infectious Diseases(NIID): <http://www.nih.go.jp/niid/index-e.html>

Ministry of Agriculture, Forestry and Fisheries: <http://www.maff.go.jp/eindex.html>

National Institute of Animal Health (NIAH): <http://niah.naro.affrc.go.jp/index.html>

The Animal Quarantine Service: <http://www.maff-aqs.go.jp/english/index.htm>

Plant Protection Station: <http://www.pps.go.jp/english/index.html>

Ministry of Foreign Affairs (Official Development Assistance): <http://www.mofa.go.jp/policy/oda/index.html>

Annex 1**Revision of disease covered by the Law Concerning Infectious Diseases
through its amendment (Bioterrorism-Related)**

	Before Amendment	After Amendment
Small pox	Not included	Category 1 Infection
Viral hemorrhagic fever	Category 1 Infection	Category 1 Infection
Plague	Category 1 Infection	Category 1 Infection
Anthrax	Category 4 Infection	New Category 4 Infection
Tularemia	Not included	New Category 4 Infection
Botulism	Category 4 Infection (infant botulism)	New Category 4 Infection

Annex 2

Measures classified by category of infectious disease

*No change to Category 1, Category 2, Category 3 infectious diseases.

*Of the diseases under the Old Category 4, those that require steps to disinfect and ban import are put under the New Category 4, and the others that require the same response as under the Old Category 4 are grouped under the New Category 5.

	Category 1 Infection	Category 2 Infection	Category 3 Infection	New Category 4 Infection	New Category 5 Infection
Regulation Method of the Names of Diseases	Law	Law	Law	Ordinances	Ministerial ordinances
Application to Suspected Patients	○	○	×	×	×
Application to Asymptomatic Pathogen Carriers	○	×	×	×	×
Positive Implementation of Epidemiological Survey	○	○	○	○	○
Reporting to Doctors	○ Immediately	○ Immediately	○ Immediately	○ Immediately	○ Within 7 Days
Reporting to Veterinarians	○	○	○	○	×
Advice for Taking, and Implementation of Medical Checkup	○	○	○	×	×
Restricting Work		○	○	×	×
Advice and Steps for Hospitalization, Transfer	○	○	×	×	×
Disinfecting Contaminated Places	○	○	○	○	×
Eradication of Rats, Insects	○	○	○	○	×
Disposal of Contaminated Items	○	○	○	○	×
Restriction of Moving Corpses	○	○	○	×	×
Restricting Use of Tap Water	○	○	○	×	×
Restricting Entry into and Closure of Buildings	○	×	×	×	×
Restricting Traffic	○	×	×	×	×
Ban on Animal Importation, Import Quarantine	○	○	○	○	×

Annex 3

Summary of infectious diseases feared to be used by terrorist attacks

Diseases	Smallpox	Anthrax (Lung Anthrax)	Plague (Lung Plague)	Botulism	Tularemia
Status under the Infectious Diseases Control Law	Category 1 Infection	Category 4 Infection	Category 1 Infection	Category 4 Infection	Category 4 Infection
Transmission from Human to Human (In ordinary Situation)	Yes (Airborne transmission)	No	Yes (Droplet transmission)	No (Oral transmission)	No (Ticks, mosquito, wild rabbits)
Fatality rate	20~50% (In case of variola major)	About 80% (In case antibiotics are not applied at an early stage)	100% (In case treatment is delayed until one day after symptoms appear)	4~25%	About 10% (In case no treatment is given), about 1% (In case antibiotics are given)
Vaccines	Live vaccine	Available in UK, China, Russia, USA	Cannot be recommended to deal with outbreaks because it will take one month before its immunity takes effect although dead vaccine is available.	Not available	Live vaccine
Treatment	Symptomatic treatment	Antibiotics (At initial stage)	Antibiotic	Respiratory control, Antitoxic serum	Antibiotics
Outbreaks in Japan	None since 1956 (However, one domestic case in 1955, another case imported from India in 1973 and 1974)	None since a cutaneous anthrax reported in 1994.	None since 1926	Yes (food poisoning cases)	No details available

Diseases	Ebola hemorrhagic fever	Crimean-Congo hemorrhagic fever	Marburg disease	Lassa fever
Status under the Infectious Diseases Control Law	Category 1	Category 1	Category 1	Category 1
Transmission from Human to Human (In ordinary Situation)	Yes (Droplet transmission, contact transmission)	Yes (Contact transmission)	Yes (Contact transmission)	Yes (Droplet, contact transmission)
Fatality rate	50~90%	15~30%	About 25%	15~20% for hospitalized patients, 1~2% for carriers
Vaccine	Not available	Not available	Not available	Not available
Treatment	Symptomatic treatment	Symptomatic treatment, antiviral drugs	Symptomatic treatment	Symptomatic treatment, antiviral drugs
Outbreaks in Japan	None	None	None	One case in 1987 (imported)
