

Measures 2

II. Place of Examination

Did you prepare for In-hospital CBRNE mass casualty incident ?

Can you shut ER suddenly ?

Can you change the place of medical examination

from in-hospital to out-hospital suddenly ?
 CBRNE mass casualties

Command to evacuate, rout,
 Call 911(119 in Japan)

Conclusion

- ❑ The contact of one poisoning patient case and mass casualty chemical incident
- ❑ Need for preparedness for in-hospital CBRNE incident (Hospital become the **Scene**)
- ❑ Need for preparedness of PPE, clinical manual etc, to estimate internal contamination

Overview of Food Contamination Incidents in Japan

27 May, 2009

Miyako Yamamoto,
National Institute of Health Sciences

Food contamination incidents in Japan

• Unintentional

Statistics of food poisonings, Japan
(Food poisoning reported to MHLW)

Cases:

- Bacteria and virus : > 90%
- Chemicals : < 1% (mainly, histamine poisoning)
- Natural toxin : < 2% (Deaths: >70%)
(mainly, puffer fish and mushrooms)

National Institute of Health Sciences (NIHS)

Number of food poisoning reported to MHLW (Japan, 2004-2006)

	Outbreaks		Cases		Deaths	
	No.	%	No.	%	No.	%
Bacteria(Total)	2,891	63.6	38,422	41.8	5	27.8
Virus	1,056	22.5	48,880	52.0	0	0.0
Norovirus	1,050	22.3	48,880	51.9	0	0.0
Others	6	0.1	81	0.1	0	0.0
Chemical (*1)	41	0.9	582	0.6	0	0.0
Natural toxin (Total)	395	8.4	1,228	1.3	13	72.2
plants	280	5.5	1,010	1.1	8	44.4
animals	135	2.9	218	0.2	5	27.8
Others	20	0.4	38	0.0	0	0.0
Unknown	188	4.2	3,887	4.2	0	0.0
Total	4,702	100.0	84,220	100.0	18	100.0

MHLW: Ministry of Health, Labour and Welfare

*1. Mainly histamine poisoning by mackerel and tuna.

- Fall 2004,
Outbreak of acute encephalopathy of unknown etiology among patients with chronic renal failure, after eating "Sughiratake" mushroom (*Pleurocybella porrigens*) in northwest part of Japan.
Illness: 51, Deaths:15 (JPIC, November 8,2004)
- 2008
Rice contaminated with aflatoxin B₁ or containing pesticides above MRL for industrial use were illegally sold for food. ("Osenmai" incident)

National Institute of Health Sciences (NIHS)

Intentional food contamination incidents

- 1984-1985 Blackmail cases against several major food companies, claiming tampering of sodium cyanide in their food products in the shop.
- 1984.10-1985.11 Paraquat poisonings by tampered canned drinks sold in vending machines or at shop (Illnesses: > 18, Deaths: >14)
- 1985 Imported wine, adulterated with diethyleneglycol

National Institute of Health Sciences (NIHS)

Intentional food contamination incidents (cont.)

- 1998.07.25 Acute arsenic poisonings by tampered curry served at a summer festival in Wakayama (Hospitalized: 67, Deaths:4)
- 1998.08.10 Sodium azide poisonings by tampered hot water for tea at a company in Niigata city (Illnesses: 9)
- 1998.08-1998.12 Many cases of food contamination (cyanide, sodium azide, hypochlorite, pesticides and others), some of them are hoax (1 died by cyanide adulterated in canned tea)

National Institute of Health Sciences (NIHS)

Intentional Chemical incidents caused by toxic chemicals in Japan in 1984-1998 (Research following Wakayama curry poisoning case in 1998)

- 111 cases, collected mainly from newspaper database
 - Chemicals
 - paraquat : 25, cyanide : 16,
 - pesticides(pyrethroids, unknown) : 12,
 - hypochlorite : 6, sodium azide : 5,
 - lacrimator : 4, chlorpicrin : 3, cresols : 3,
 - arsenic compounds : 2, chloroform : 2,
 - nerve agents(sarin:2, VX:3)
 - others (phosgene, parathion, strychnine nitrate, thallium acetate, aconitine, cadmium compounds)
- @ Underlined: regulated by "Poisonous and Deleterious Substances Control Law"
@ Sodium azide was designated as "poisonous substance" in 1999.

National Institute of Health Sciences (NIHS)

Intentional Chemical incidents caused by toxic chemicals in Japan in 1984-1998

- Place/situation
 - canned drink purchased from vending machines : 25,
 - canned or bottled drink purchased from shop : 18,
 - university/laboratory/hospital : 10
 - school : 11,
 - public space (station, subway, park etc) : 10,
 - internet : 2, others
- Food contamination incidents : About 80 cases (including murder and threats against food companies)

National Institute of Health Sciences (NIHS)

Intentional Chemical incidents caused by toxic chemicals in Japan in 1984-1998

Copycat poisoning

- 1984-1985 paraquat poisoning (Illnesses: > 18, Deaths: >14)
- 1998.08-12 (just after Wakayama curry poisoning and Niigata sodium azide poisoning cases)
Many intentional food contamination incidents with cyanide, sodium azide, hypochlorite, pesticides and others (Illnesses: > 30, Death: 1)
(Some of them are hoax)
- 1998.08-11 Sodium azide poisoning cases : 5
- Fall 2001, "White powder" incidents after anthrax attacks in US. (Most of them are hoax.)

National Institute of Health Sciences (NIHS)

Intentional Chemical incidents caused by toxic chemicals in Japan in 1984-1998

Ease of Access

- Place : institute/university/hospital : 10 cases
Easily accessible to chemicals (Sodium azide, cyanides, chloroform, cadmium compound, thallium acetate)
- Sodium azide poisoning case
1998.08.10 First case at a company in Niigata
1998.10-1998.11 : 4 cases (laboratory/institute/university)
(1999 and 2008 : 2 cases at institute and university)
- Vending machines : 25 cases
(1984.10-1985.11 : 15 cases, 1998.9-1998.11 : 9 cases)

National Institute of Health Sciences (NIHS)

Intentional food contamination incidents (1999-)

- 2002 Serious liver injury caused by imported dietary supplement for weight loss, containing N-Nitroso fenfluramine (Illnesses: >400, Deaths: 3)
(Dietary supplements containing fenfluramine were recalled and banned for sale in 1996.)



Fenfluramine



N-Nitroso fenfluramine

- (2007-)2008 Methamidophos poisonings by imported frozen dumplings
- 2008 Melamine contamination in Chinese milk and milk products

Case report of chemical events by food contamination

Lesson to learned from Japanese Incident by Imported Frozen Dumplings (Methamidophos poisoning)



Japan poison Information Center
Yumiko Kuroki, Ph.D., Kaoru Iida,
Toshiharu Yoshioka, M.D. Ph.D.,
Noriyoshi Ohashi, M.D.,
Yayoi Halano, Fujiko Iizuka, Yoko Endo,
Hiroyuki Araki, Hironori Takano

Methamidophos food contamination poisoning

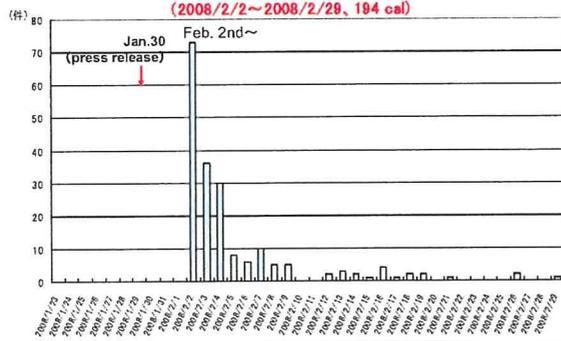
An outbreak of food poisoning that affected at least ten people in various regions of Japan was traced to exposure to Chinese-made frozen dumplings contaminated with the organophosphate insecticide "Methamidophos" in January 2008.



On January 28 2008, the Tokyo metropolitan government reported to the Ministry of Health, Labor and Welfare (MHLW) that there had been suspected cases of organophosphate poisoning in Hyogo and Chiba prefectures. And that just before the onset of illness all of the patients had eaten frozen dumplings made by the same manufacturer and imported around the same time (November in the previous year) from China by the same company in Japan. The police investigation revealed that methamidophos was detected in the patients' vomit.

Inquiries concerning health hazard cases caused by Chinese-made frozen dumplings in the Ministry of Health, Labor and Welfare (MHLW)

(2008/2/2~2008/2/28, 194 cal)



Number of reports and inquiries of prefectural and city governments after the announcement of health hazard caused by the Chinese-made frozen dumplings (January 30)

(from the material published by the MHLW as of 15:00, March 31, 2008)

Prefecture	Number of patients confirmed to have organophosphate poisoning	Number of cases suspected of having organophosphate poisoning and currently under investigation		Number of cases whose suspicion of organophosphate poisoning was cleared		
		Hospitalized	Not hospitalized	Visited a medical institution	Did not visit a medical institution	Other
Chiba	7	0	0	63	148	41
Hyogo	3	0	0	45	95	47
Other	0	0	0	936	1,957	2,583
Subtotal	10	0	0	1,044	2,200	2,671
				Total 5,915		

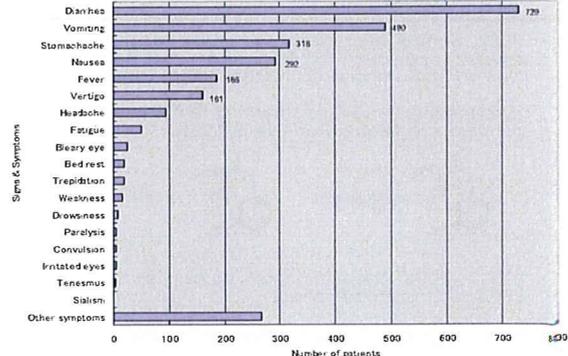
Note 1: Cases to which all of the following apply:
1) The patient has manifestations of organophosphate poisoning, such as neurological symptoms
2) Decreased cholinesterase activity in the blood is observed
3) Methamidophos is detected in the patients' vomit or from food
* Although no test for 2) above was performed in two of the cases reported from Chiba, the people were treated as confirmed cases because the causal relationship between 1) and 3) seemed evident.
Note 2: Cases in which symptoms suggestive of organophosphate poisoning, such as neurological symptoms, were observed.
Note 3: Cases in which the patient complained of symptoms, but the suspicion was cleared by clinical diagnosis and/or test results.
Note 4: Inquiry related to Chinese-made frozen ayza and others

Patients confirmed to organophosphate poisoning

Prefecture	Number of patients confirmed to have organophosphate poisoning	
Chiba 1 (2007 Dec. 24)	2	*The patient has mild manifestations of organophosphate poisoning, such as vomiting, diarrhea, diaphoresis etc. *Methamidophos is detected from the food (19,290ppm) (39-year-old woman, 3-year-old girl)
Hyogo (2008 Jan. 4)	3	*The patient has manifestations of organophosphate poisoning, such as neurological symptoms. *Decreased cholinesterase activity in the blood is observed *Methamidophos is detected in the patients' vomit or from food (13,200ppm) (18 year-old boy, 47 year-old woman, 51 year-old man)
Chiba 2 (2008 Jan. 22)	5	*The patient has manifestations of organophosphate poisoning, such as neurological symptoms. *Decreased cholinesterase activity in the blood is observed *Methamidophos is detected in the patients' vomit or from food (31,130ppm) (6 year-old girl, 7 year-old boy, 10 year-old boy, 18 year-old girl, 47 year-old woman)
Total	10	

Signs & Symptoms of patients who visited a medical institution

(1,044 cases, 1,086 patients)



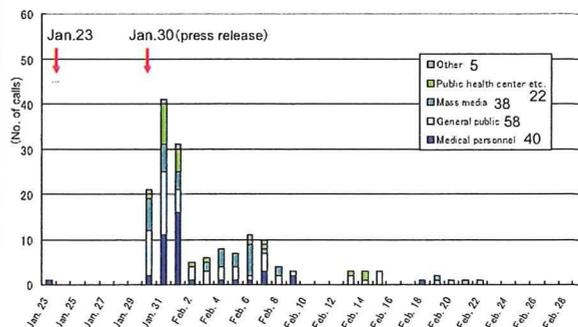
These cases in which the patient complained of symptoms, but the suspicion was cleared by clinical diagnosis and/or test results.

Methamidophos food contamination poisoning

- JPIC received a inquiry of organophosphate poisoning at 23rd Jan. from a medical doctor before her patients arrived at the hospital.
- That case was turned out the most serious case (5 year-old-girl) caused by food contamination of methamidophos after a week at the time of press release.

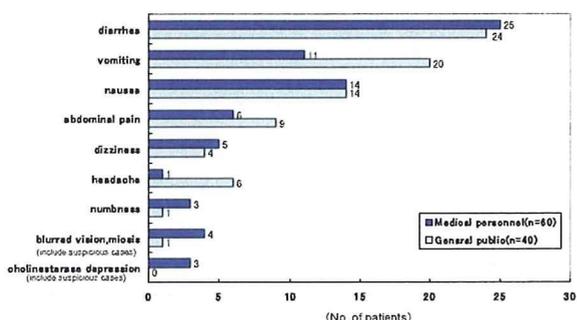
Inquiries concerning health hazard cases caused by Chinese-made frozen dumplings in JPIC

(2008/Jan./23~2008/Feb./29. 163 calls)



Number of patients with the presence of symptoms * [71 in 100 patients] (causal association has unknown)

* the presence of symptoms observed during the period from exposure to at the call

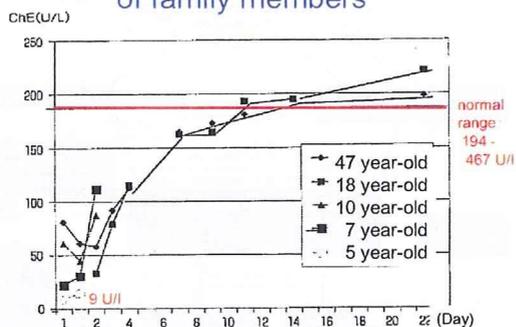


Chinese dumpling scare hits Japan - a case of methamidophos food poisoning

- The incident occurred in January 2008 in a family with one adult and four children after eating Chinese dumplings for dinner. Thirty minutes after dinner, all developed nausea, vomiting, and diarrhea.
- Dr.Sumi et al. experienced the most serious case, a five year-old girl, who suffered coma. She presented with features of cholinergic overactivity (miosis, bronchorrhea, hypersalivation) and her serum cholinesterase activity was 9 U/l (normal range, 194-467 U/l).
- They started intravenous treatment with pralidoxime iodide, atropine sulfate, and midazolam. Her symptoms improved gradually and she was discharged on day 25 without any complications.

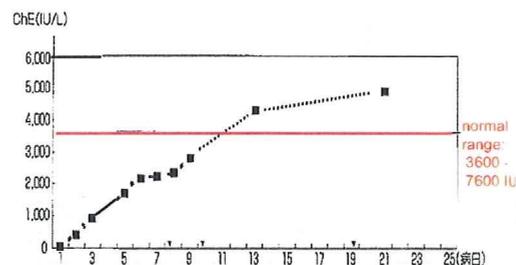
JPIC received this case
Y Sumi, Y Oode and H Tanaka: J. Toxicol. Sci., 33, 485-486, 2008.

Serum cholinesterase activity of family members



Y Oode, T Yoshihara, Y Sumi, et. Al.: Jpn. J. Clin. Toxicol., 22, 48-50, 2009

Serum cholinesterase activity 5 year-old-girl



Y Oode, T Yoshihara, Y Sumi, et. Al.: Jpn. J. Clin. Toxicol., 22, 48-50, 2009

Chinese dumping scare hits Japan - a case of methamidophos food poisoning

- Though poisoning attributed to organophosphate insecticides has become less common in recent years, it is even more important to diagnose the problem rapidly based on the characteristic symptoms and to start specific treatment at the earliest possible stage after poisoning.

JPIC received this case

Y Sumi, Y Oode and H Tanaka: J. Toxicol. Sci., 33, 485-486, 2008.

Diagnostic System based on Clinical Signs & Symptoms

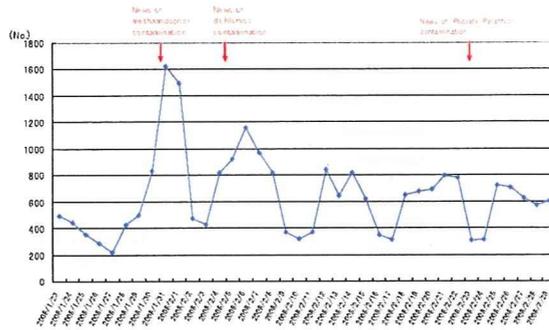
Covered substances: **Poisonous & celerenous substances controlled by the Law**
(75 groups, 488substances) **Effective antiotics available**
Used in the past events and incidences

The screenshot displays the JPIC diagnostic system interface. It includes an 'Item Navigator' on the left with a list of chemical groups and their counts. The main area shows a 'Retrieval Screen' with search criteria and a 'Confirmation Screen' with a grid of checkboxes for various symptoms and signs.

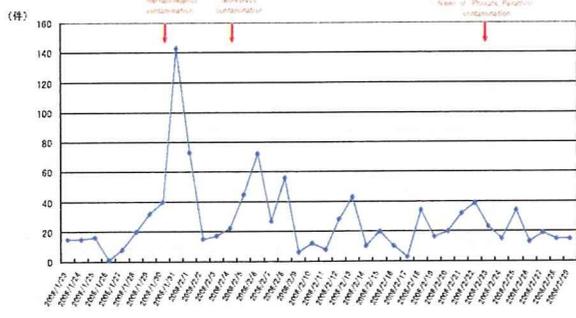
The top page of JPIC website for medical profession

The screenshot shows the JPIC website homepage for medical professionals. It features a 'News & Topics' section with several news items and a prominent article titled 'Frozen dumplings'.

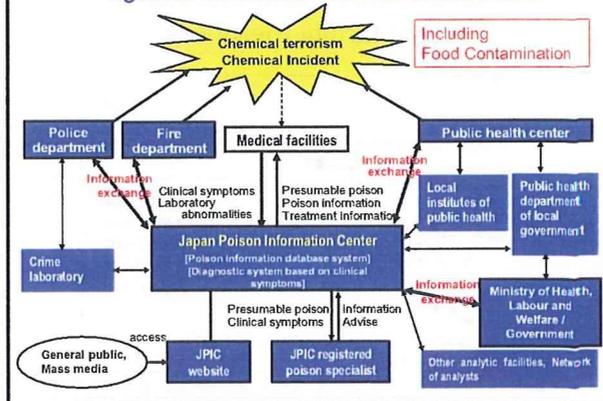
Number of accesses of Japan Poison Information Center Website (Jan. 23rd~2008 Feb. 29th in 2008)



Number of accesses of Japan Poison Information Center Website for medical profession (Jan. 23rd~2008 Feb. 29th in 2008)



JPIC Framework against Chemical Terrorism & Incident



Action of the MHLW

Response by governments

Improvement measures implemented

- Prefectural and city governments were asked to establish a system to assess the public health risks promptly by securing **24-hour, 365-day operation of public health departments** in response to the emergency and to ensure compliance with the responsibility to report food poisoning cases stated in Article 58 of the Food Sanitation Law.
- Revised Article 73 and Table 17 of Enforcement Regulations of the Food Sanitation Law to include new conditions **"in case patients with serious symptoms are reported"** and **"in case the poisoning is caused by a chemical substance,"** in addition to the current conditions requiring prompt reporting, such as "the poisoning has arisen from the consumption of imported food.

Action of the MHLW

Response by food-related business operators

Improvement measures implemented

- Revised the *Guidelines on Management and Operation Standards to be Observed by Food-Related Business Operators* to add a **condition providing that food business operators should report to the public health department immediately** when they receive claims of damage to health from consumers or food hazard information about food in breach of the Food Sanitation Law.
- Prepared and published *"the Guidelines on Hygiene Control of Import Processed Foods"* to address problems related to imported processed foods.

Action of the MHLW

Response by the medical institutions and Initial action to be taken in case of food poisoning

Response by the medical institutions

Improvement measures implemented

- Requested of medical institutions through the Japan Medical Association and prefectural and city governments to **ensure compliance with the responsibility to report food poisoning** stated in Article 58 of the Food Sanitation Law.

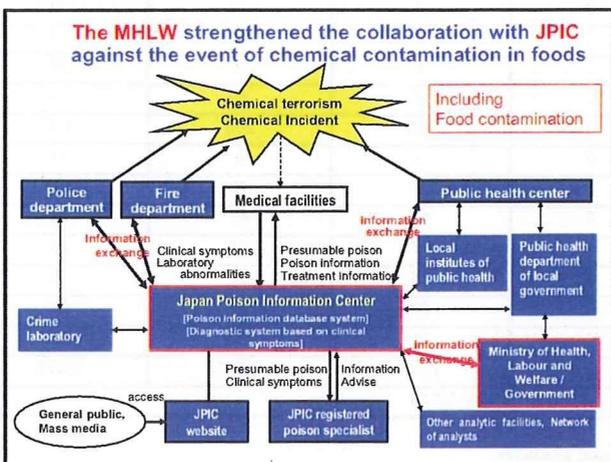
Initial action to be taken in case of food poisoning

Improvement measures implemented

- **Developed a testing method for organophosphorus pesticide residue in processed foods.**
- Revised Article 73 and Table 17 of Enforcement Regulations of the Food Sanitation Law to add a new condition, **"in case the poisoning is caused by a chemical substance"** to the current provisions for prompt reporting.

Action of the MHLW

New e-mail reporting system of health hazard/poisoning by foods



Thank you very much
for your attention !!

Table 1 Number of reports and inquiries of prefectural and city governments after the announcement of damage to health caused by the Chinese-made frozen dumplings (January 30)

(from the material published by the MHLW, as of 15:00, March 31, 2008)

Prefecture	Number of patients confirmed to have organophosphate poisoning ¹	Number of cases suspected of having organophosphate poisoning and currently under investigation ²		Number of cases whose suspicion of organophosphate poisoning was cleared		
		Hospitalized	Not hospitalized	Visited a medical institution ³	Did not visit a medical institution ³	Other ⁴
Hokkaido	0	0	0	52	147	52
Aomori	0	0	0	36	137	14
Iwate	0	0	0	1	6	5
Miyagi	0	0	0	5	18	37
Akita	0	0	0	7	15	15
Yamagata	0	0	0	5	5	12
Fukushima	0	0	0	16	54	45
Ibaraki	0	0	0	36	114	71
Tochigi	0	0	0	19	37	8
Gunma	0	0	0	16	13	46
Saitama	0	0	0	112	149	64
Chiba	7	0	0	63	148	41
Tokyo	0	0	0	79	103	376
Kanagawa	0	0	0	15	38	117
Niigata	0	0	0	6	16	33
Toyama	0	0	0	0	0	2
Ishikawa	0	0	0	7	11	6
Fukui	0	0	0	0	1	4
Yamanashi	0	0	0	7	12	11
Nagano	0	0	0	10	4	1
Gifu	0	0	0	6	6	93
Shizuoka	0	0	0	15	39	16
Aichi	0	0	0	41	88	19
Mie	0	0	0	3	17	33
Shiga	0	0	0	21	25	102
Kyoto	0	0	0	16	37	232
Osaka	0	0	0	68	121	373
Hyogo	3	0	0	45	95	47
Nara	0	0	0	11	19	70
Wakayama	0	0	0	1	8	12
Tottori	0	0	0	1	7	0
Shimane	0	0	0	0	0	2
Okayama	0	0	0	12	12	2
Hiroshima	0	0	0	20	39	48
Yamaguchi	0	0	0	4	2	12
Tokushima	0	0	0	8	14	19
Kagawa	0	0	0	8	12	14
Ehime	0	0	0	5	8	20
Kochi	0	0	0	4	10	11
Fukuoka	0	0	0	129	206	106
Saga	0	0	0	0	0	41
Nagasaki	0	0	0	19	73	188
Kumamoto	0	0	0	17	41	48
Oita	0	0	0	27	64	29
Miyazaki	0	0	0	15	51	58
Kagoshima	0	0	0	25	61	61
Okinawa	0	0	0	31	117	55
Subtotal	10	0	0	1,044	2,200	2,671
				Total 5,915		

Note 1: Cases to which all of the following apply:

- 1) The patient has manifestations of organophosphate poisoning, such as neurological symptoms
- 2) Decreased cholinesterase activity in the blood is observed
- 3) Methamidophos is detected in the patients' vomit or from food

* Although no test for 2) above was performed in two of the cases reported from Chiba, the people were treated as confirmed cases because the causal relationship between 1) and 3) seemed evident.

Note 2: Cases in which symptoms suggestive of organophosphate poisoning, such as neurological symptoms, were observed.

Note 3: Cases in which the patient complained of symptoms, but the suspicion was cleared by clinical diagnosis and/or test results.

Note 4: Inquiry related to Chinese-made frozen gyoza and others

Table 2 Signs & Symptoms of patients who visited a medical institution
(1,044 cases, 1,086 patients)

(from the material published by the MHLW)

Symptoms observed (multiple answers allowed)	Number of patients with symptoms	Percentage
Diarrhea	729	67.10%
Vomiting	490	45.10%
Stomachache	318	29.30%
Nausea	292	26.90%
Fever	186	17.10%
Vertigo	161	14.80%
Headache	94	8.70%
Fatigue	51	4.70%
Bleary eye	26	2.40%
Trepidation	19	1.70%
Bed rest	19	1.70%
Weakness	16	1.50%
Drowsiness	7	0.60%
Convulsion	5	0.50%
Paralysis	5	0.50%
Tenesmus	3	0.30%
Irritated eyes	4	0.40%
Sialism	0	0.00%
Other symptoms	267	24.60%
Total	1,086	100.00%

Signs & Symptoms of patients who visited a medical institution
(1,044 cases, 1,086 patients)

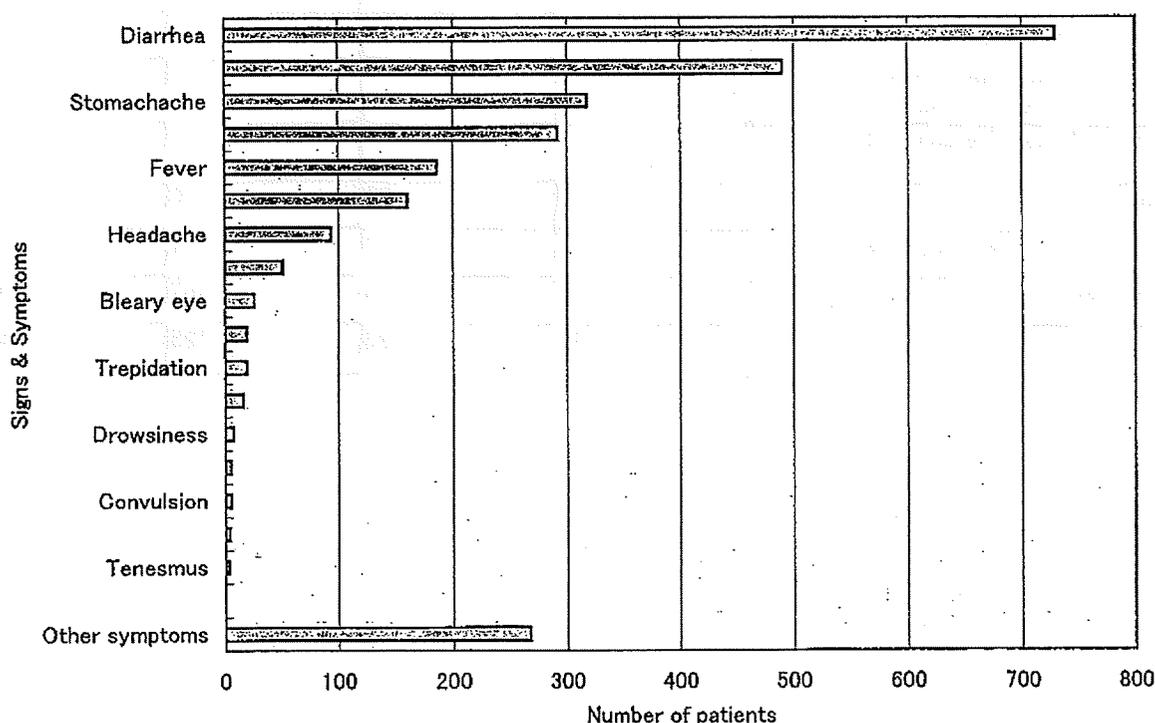


Table 3 Hospitalization of the patients who visited a medical institution
and their diagnoses (1,086 patients)

(from the material published by the MHLW)

Diagnosis	Hospitalized	Not hospitalized	Unknown	Total
Gastroenteritis	8	28	56	92
Common cold	1	24	54	79
Infectious gastroenteritis	2	7	19	28
Nothing abnormal detected		7	8	15
Vomiting and diarrhea		2	7	9
Norovirus infection	1	1	6	8
Influenza		3	3	6
Sickness caused by food			5	5
Organophosphate poisoning denied	2	1	2	5
Association with eating gyoza denied	1	1	2	4
Food poisoning denied		1	2	3
Urticaria		3		3
Reflux esophagitis		1	2	3
Infection		1	1	2
Diarrhea		2		2
Suspected food poisoning			2	2
Vertigo		2		2
Other diagnoses	5	12	23	40
Acute organophosphate poisoning			1	1
Common cold, possibly organophosphate poisoning			1	1
Suspected pesticide poisoning		2		2
Suspected poisoning			1	1
Suspected irritable bowel syndrome but drug poisoning cannot be denied			1	1
Involvement of pesticide cannot be denied			1	1
Unknown	1	22	30	53
Other (entry other than diagnosis)		7	11	18
Not mentioned	17	196	487	700
Total	38	323	725	1,086

Case-based study:
“The Deadly Christmas Sweets Incident”
 (International food contamination)

Background:

- “Christmas” is A Christian feast commemorating the birth of Jesus.
- “Christmas” can be a target of religious fundamentalists.
- “Christmas sweets” are produced all over the world and go into circulation internationally.↑

Onset

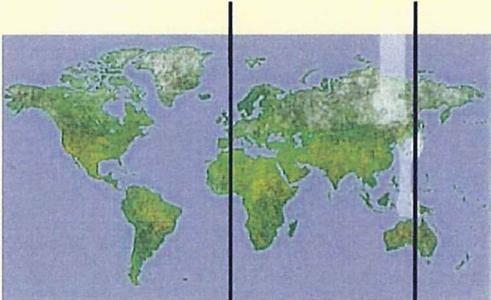
- In the night of Dec 24, 200X, all over the country A, many people were complained of frequent nausea, vomit, fasciculation. At least 600 victims were affected.
- At the early stage cause of sickness was unknown. Epidemiological intervention showed all victims took “Christmas Assorted Sweets.” The country A’s Government told WHO that “Christmas assorted sweets.” was the one of the suspicious cause.



World-wide influence

- Before alarming from the country A, “The Christmas Assorted Sweets” was started to be taken all over the world according to the time .

Time Limits
European countries has only 9 hours!



Nine Hours

The criminal group claimed responsibility for the attacks on the Internet.

We sent Special Christmas Gifts for YOU, Ho, Ho, Ho!

The Fact

- Some religious fundamentalists invaded into a sweets factory, and put organophosphorus agrichemicals into chocolate brandy ball in the country B in Asia.

Discussion Points

- #1 How to prevent spreading of ruins due to food contamination
- #2 International collaboration against chemical contamination
- #3 Food safety across the borders.

特 別 緊 急 報 告

中国製冷凍餃子中毒事件——第30回日本中毒学会——

日本中毒情報センターにおける受信状況と対応

黒木由美子¹⁾ 飯田 薫¹⁾ 吉岡敏治¹⁾²⁾¹⁾財団法人日本中毒情報センター ²⁾大阪府立急性期・総合医療センター

2008年1月23日、千葉県の医療機関から日本中毒情報センターへ「有機リン中毒らしい患者がこれから転院してくる。5歳児と家族の複数名、小児の有機リン中毒について、事前に情報を入手しておきたい」と連絡があった。これが日本中毒情報センターで受信したメタミドホス混入中国産冷凍餃子による中毒事例の第一報であったことが、後に判明した。その後は報道発表まで、事前に行政等関連機関から本件に関する情報提供はなく、1月30日、マスコミからの問い合わせにより事件を知る結果と

なった。食中毒や他殺・心中等事件の可能性が否定できない本件のような食品への化学物質混入中毒事件では、関連諸機関への連携はいまだ不十分であり、事件発生初期の対応が遅れた。

しかし、1月23日～2月末までに、日本中毒情報センターが受信した関連の問い合わせは163件にのぼった(Fig. 1)。これは2月2日から開始された厚生労働省の輸入食品にかかわる冷凍餃子に関する相談件数194件に匹敵し、また、農林水産省の輸入食品にかかわる相談件数102件、食品安全委員会の中

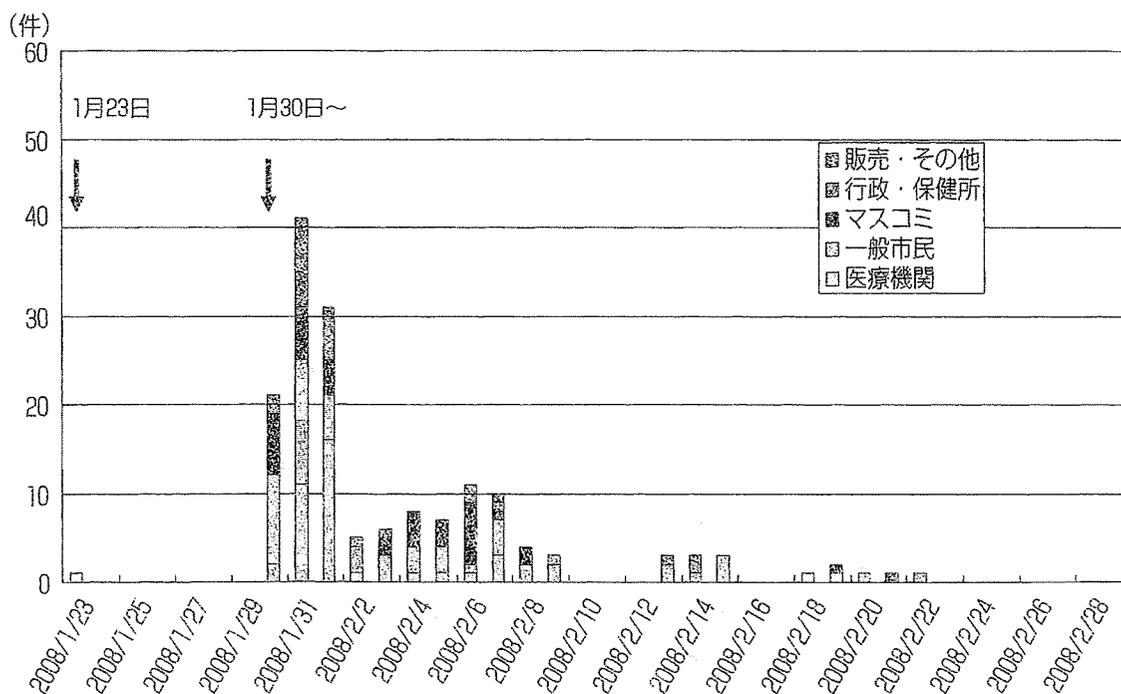


Fig. 1 中国産冷凍餃子等による健康被害事例に関する問い合わせ件数(2008年1月23日～2008年2月29日, 計163件)

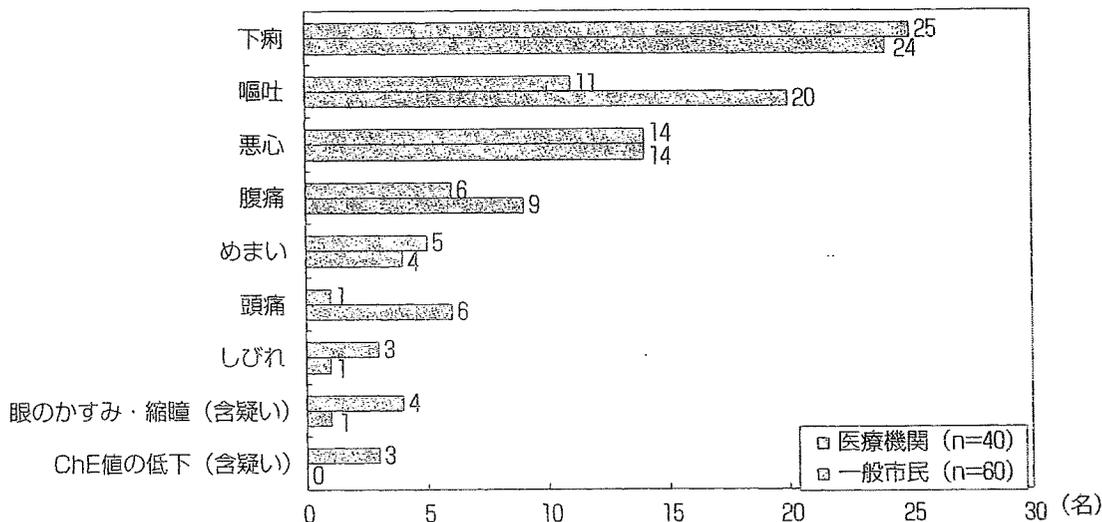


Fig. 2 受信時までの発現症状(因果関係不明)と患者数(71件:100名)

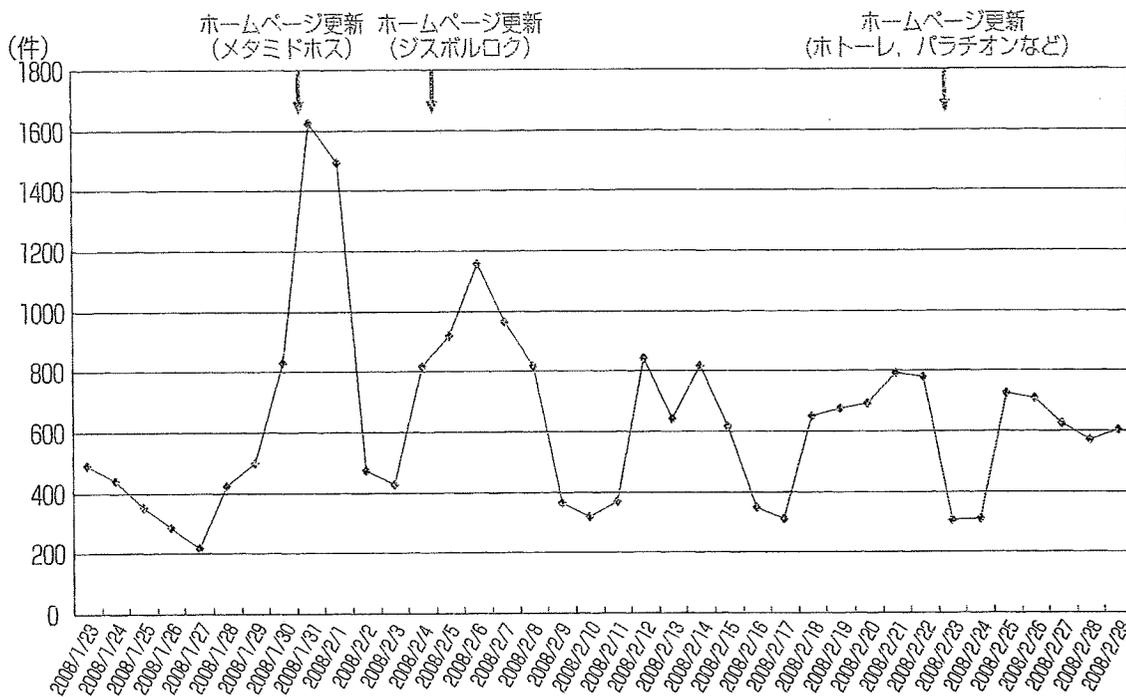


Fig. 3 日本中毒情報センター 一般市民向けホームページアクセス件数(2008年1月23日~2008年2月29日)

国産食品に関する相談件数 64 件, 国民生活センターの中国産餃子問題にかかわる健康被害相談件数 11 件を上回る件数であった。24 時間 365 日, 化学物質の急性中毒に関する情報提供を実施している日本中毒情報センターの役割と重要性が再認識された。

163 件の連絡者別内訳は, 医療機関 40 件, 一般市民 58 件, マスコミ 38 件, 行政・保健所 22 件, 販売・その他 5 件であった。実際に関連する食品等を食べた患者がいるという問い合わせは 91 件であり, そのうち症状の訴えがあったのは 71 件(100 名)

であった。因果関係は不明であるが, 訴えがあった症状は下痢 49 名, 嘔吐 31 名, 悪心 28 名, 腹痛 15 名, めまい 9 名, 頭痛 7 名, しびれ 4 名, 眼のかすみ・縮瞳(含疑い)5 名, ChE 値の低下(含疑い)3 件であった(Fig. 2)。

報道発表後, 日本中毒情報センターは 1 月 31 日にホームページのニュース欄へ関連情報を掲載した(Fig. 3)。さらに, 厚生労働省医薬食品局食品安全部, 同省大臣官房厚生科学課および食品安全委員会情報・緊急時対応課などと連絡を密にし, 情報交換

およびホームページ掲載用資料の確認などの協力を行った。

また、厚生労働省に設置された「中国産冷凍食品による薬物中毒事案の実態把握に関する検討会」の委員として協力し、メタミドホスによる急性中毒が確定した10症例について、診療を行った4医療機関の担当医師へ状況を確認するなどの訪問調査を実施した。

化学物質・自然毒による大規模食中毒事件の発生

時には、24時間365日電話対応を実施している日本中毒情報センターでは、早期から対応が可能であるため、食品の安全にかかわる機関は、日本中毒情報センターが保有するデータをよく活用し、かつ、化学物質等が原因と考えられる食中毒発生時にはよく情報交換を行いながら対応することが望まれる。

今後さらに平時から食品関連機関、関係部署との連携強化を図る必要があると考える。

分担研究報告

「天然痘対応ガイドラインサーベイランス部門の検討」
に関する研究

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平成 21 年度厚生労働科学研究費補助金(健康安全・危機管理対策総合研究事業)
分担研究報告書

「天然痘対応ガイドラインサーベイランス部門の検討」に関する研究

研究分担者 大日 康史 国立感染症研究所感染症情報センター

要約

【目的】天然痘対応ガイドラインサーベイランス部門を見直す。

【方法】改訂された新型インフルエンザガイドラインを参照に、またサーベイランスシステムの開発状況を考慮して策定する。

【結果】現時点で直ちに実施できるサーベイランスの枠組みを整理し、実施可能なシステムを構築できた。これをもとに天然痘サーベイランスガイドラインを確定した。

【結論】新型インフルエンザガイドラインを参考に天然痘サーベイランスガイドラインを策定した。

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倫理的配慮

データを使用しないために倫理的問題は生じない。

C. 結果

別紙参照

A. 研究目的

サーベイランスシステムの開発状況を受けて新型インフルエンザガイドラインの改定に伴い天然痘対応ガイドラインサーベイランス部門を見直す。

B. 材料と方法

改訂された新型インフルエンザガイドライン¹⁾を参照に、またサーベイランスシステムの開発状況を考慮して策定する。

D. 考察

現時点で直ちに実施できるサーベイランスの枠組みを整理し、実施可能なシステムを構築できた。ただ、クラスターサーベイランスについては新型インフルエンザ対策も含めて未整備であるのでその旨明記した。

E. 結論

新型インフルエンザガイドラインを参考に天

然痘サーベイランスガイドラインを策定した。

F.健康危険情報

特になし

G. 論文発表

特になし

H. 知的財産権の出願・登録状況

(予定を含む)

特になし

参考文献

1) 新型インフルエンザ専門家会議インフルエンザ対策におけるサーベイランス等ガイドライン,平成20年11月20日.

【 別紙 】

IV-2 天然痘（痘瘡）におけるサーベイランスに関するガイドライン（案）

1. 目的

- サーベイランスとは、疾病の発生状況やその推移などを継続的に監視することにより、疾病対策の企画、実施、評価に必要なデータを系統的に収集、分析、解釈し、その結果を関係者に迅速かつ定期的に還元することにより、効果的な対策に結びつけるものである。
- 国内での感染症の発生をサーベイランスによって可能な限り早期に探知し、感染拡大防止を図ることはそれによる被害を最小限に抑えるために極めて重要である。
- また、感染が拡大してしまった際には、サーベイランスによって拡大の状況や当該感染症の特徴を把握し、行政の感染拡大防止戦略策定、臨床現場における治療方針の策定、地域住民への情報提供に役立てることが必要不可欠である。
- 本ガイドラインは、サーベイランスの強化により天然痘発生の早期検知、拡大予防に資することを目的とする

2. 各種サーベイランスの概要

1) 疑い症例調査支援システム

症状の発現や疫学的リンクから、患者を発見するために、疑われる症例を診断に結びつけていくサーベイランス。天然痘対策としては、要観察例（曝露が疑われる発熱患者）から対象とし、疑似症例（曝露が疑われる発熱および発疹患者）、確定症例（検査室診断による患者）の行動履歴、接触者、検査依頼及び結果が一元的に管理、情報共有される。

2) 症候群サーベイランス

医師の確定診断を待たず、特定の症状をもつ患者数を把握することにより、当該症状患者の急増を発見し、感染症の流行を早期に探知するサーベイランス。天然痘対策としては、2種類がある。一つは、外来受診時に38度以上の発熱及び発疹あるいは水疱を呈した症例を感染症法に基づいて報告する。もう一つは、発熱患者の動向を自動的に把握するシステムである。

3. 基本的な戦略

- 現在行われている「感染症サーベイランスシステム（NESID）疑い