

(i) Specific impacts of health problems on daily life

- Health problems have an impact on the daily life of the respondents but looking at the specific impacts on the respondents overall, activities of daily living ranked first with 41 respondents (50%), followed by work with 39 respondents (47.6%), housework with 29 respondents (35.4%), and exercise with 26 respondents (31.7%).
- Looking at the results by type of disability, a higher percentage of respondents with an upper limb disability than respondents with a hearing disability said that there was an impact on activities of daily living, going out, and housework. There was no major difference between the percentages of respondents with an upper limb disability and respondents with a hearing disability saying there is an impact on work, exercise, etc.

Figure 7: Specific impacts on daily life (multiple-answer question); overall

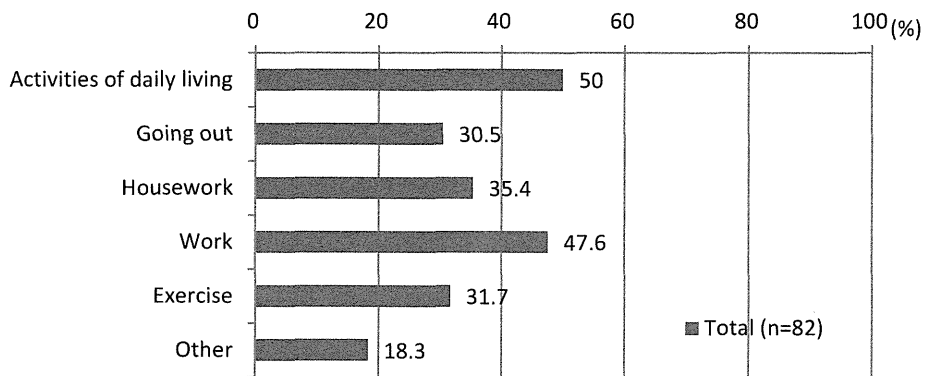
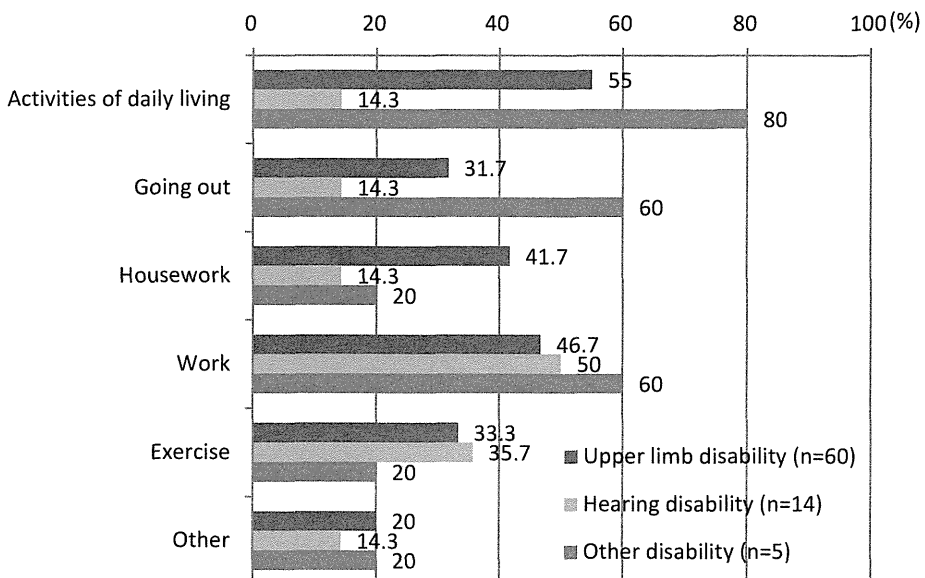


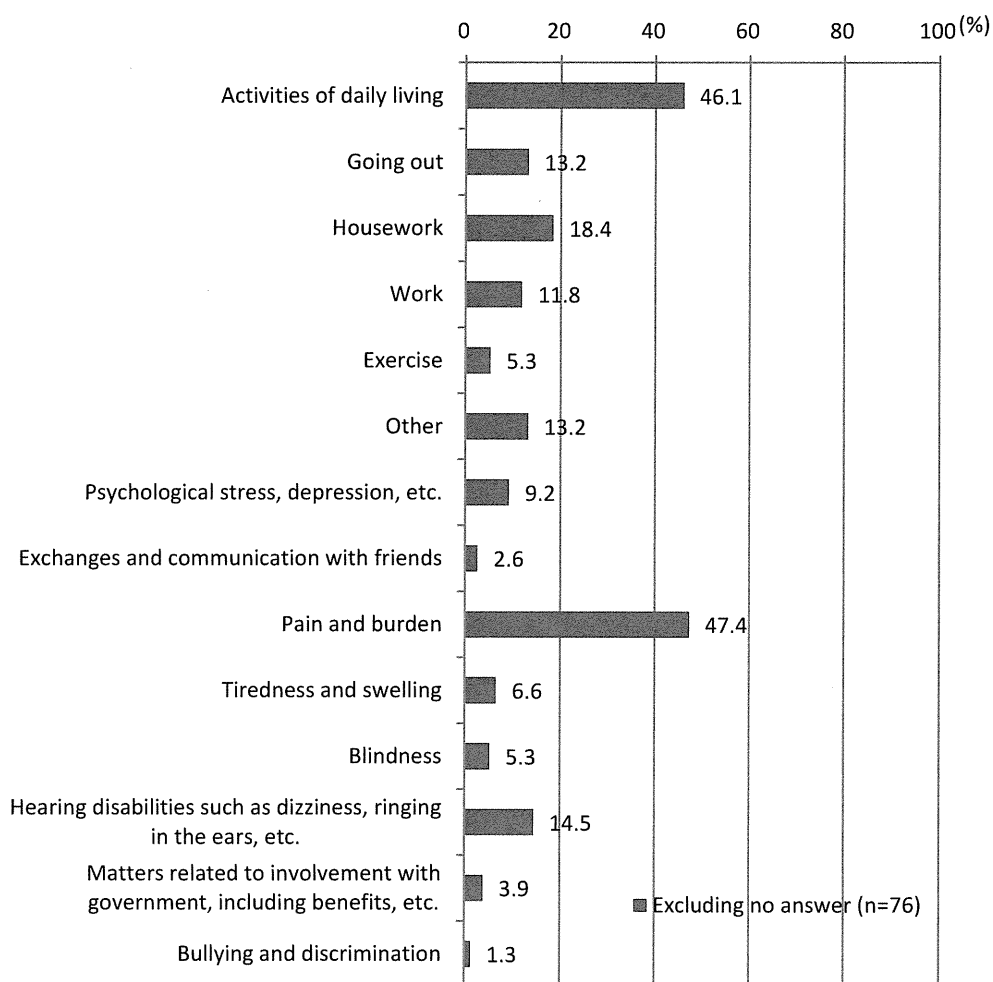
Figure 8: Specific impacts on daily life (multiple-answer question); by type of disability



(ii) Inconveniences and difficulties in daily life

- Looking at the free answers regarding inconveniences and difficulties in daily life, statements related to “pain and burden” ranked first with 36 respondents (47.4%). Looking at the breakdown, the respondents made the following statements.
  - “My whole body sometimes becomes numb and painful”
  - “This year I am entering my 50s and I am feeling a slight physical decline. In particular I have terrible migraine headaches and lower back pain so I take painkillers all the time.”
  - “Sometimes my hip joint hurts and sometimes walking is uncomfortable.”
- These answers were followed by “hearing disabilities such as dizziness, ringing in the ears, etc.” with 11 respondents (14.5%) and “psychological stress, depression, etc.” with 7 respondents (9.2%). Looking at the breakdown of statements about “psychological stress and depression”, the respondents made the following statements.
  - “The thalidomide-impaired person is committed to an institution. The thalidomide-impaired person is not capable of any verbal expression so he/she is not capable of expressing his/her intentions, but based on their atmosphere I think they have a significant amount of stress and dissatisfaction.” (Filled out by caregiver, etc.)
  - “One day I became afraid of driving, and I felt various kinds of fear when driving, for example I worried that I would hit someone with my vehicle. For this reason, I ended up going to the psychiatric department, was diagnosed with “obsessive-compulsive disorder,” and forced to resign from my company, so now I am receiving disease and injury allowances.”
- In addition, some respondents said they wanted housework support services in their daily life. Specifically, the respondents made the following statements.
  - “My hands hurt so it is gradually becoming harder for me to live my daily life alone. Because my hands hurt it is difficult for me to complete my housework. Please create a system under which thalidomide victims can receive support immediately when they need a helper for cleaning or housework in the future.”
  - “Before I entered hospital I received a Certification of Needed Long-Term Care, and managed to live alone with assistance from the regional support center and helpers but still when I am sick I feel my own powerlessness. I am also worried because my father is getting old.”

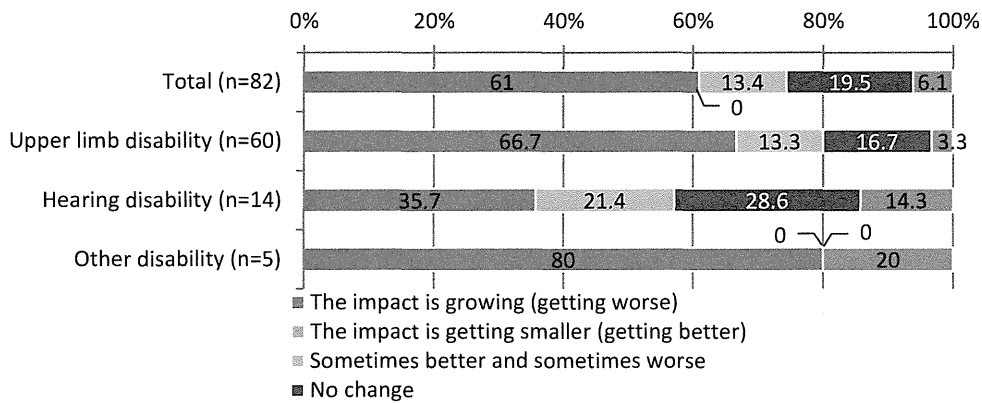
Figure 9: Percentage of free comments about inconveniences and difficulties in daily life; by content



(iii) Change in the degree of impact on daily life over the last 5 years

- Looking at the change in the degree of impact on daily life over the last 5 years with regard to the respondents overall, “the impact is growing (getting worse)” ranked first with 50 respondents (61%), followed by “no change” with 16 respondents (19.5%). None of the respondents replied that “the impact is getting smaller (getting better).”
- Looking at the results by type of disability, a higher percentage of respondents with an upper limb disability than respondents with a hearing disability answered that “the impact is growing (getting worse).” On the other hand, a higher percentage of respondents with a hearing disability than respondents with an upper limb disability replied “sometimes better and sometimes worse” or “no change.”

Figure 10: Change in the degree of impact on daily life over the last 5 years; by type of disability



(iv) Causes of the impacts on daily life

- Looking at the causes of the impacts on daily life with regard to the respondents overall, “impacts due to thalidomide harm” ranked first with 54 respondents (65.9%), followed by “impacts arising from the aging process” with 37 respondents (45.1%), and “other” with 13 respondents (15.9%).
- Looking at the results by type of disability, a higher percentage of respondents with a hearing disability than respondents with an upper limb disability answered “impacts due to thalidomide harm.” A higher percentage of respondents with an upper limb disability than respondents with a hearing disability answered “impacts arising from the aging process.”

Figure 11: Causes of the impacts on daily life (multiple-answer question); overall

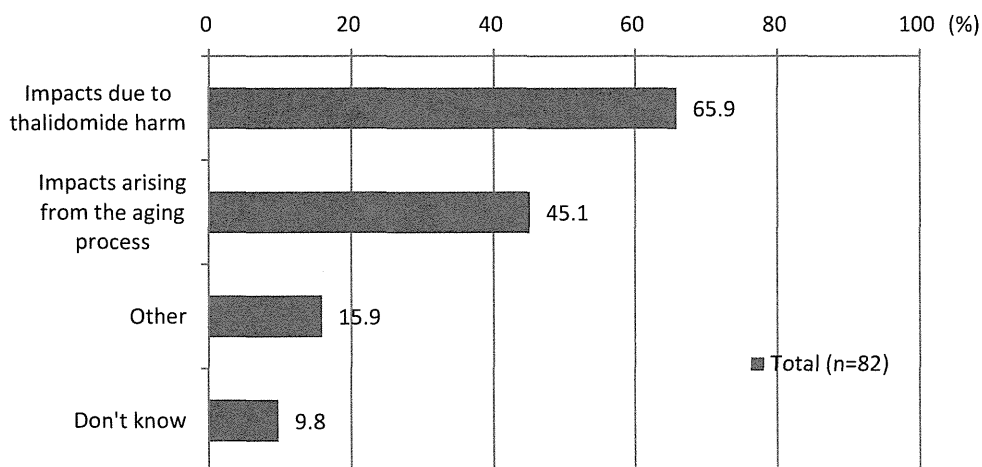
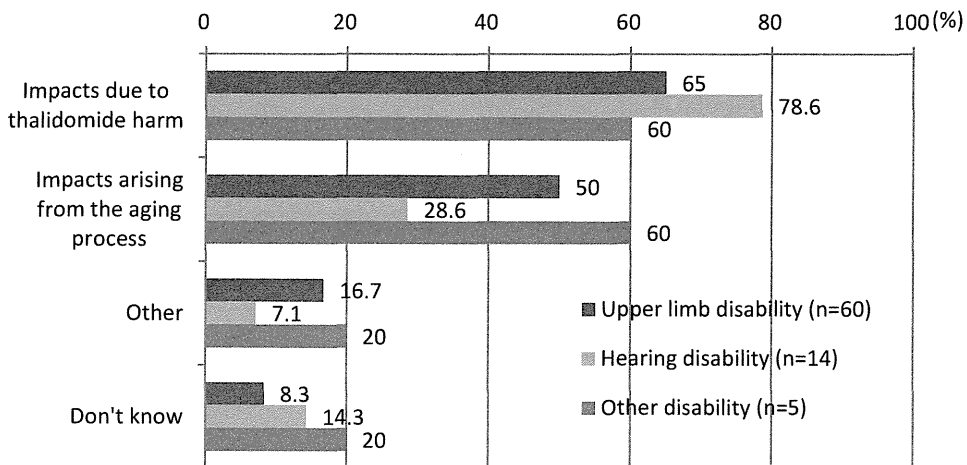


Figure 12: Causes of the impacts on daily life (multiple-answer question); by type of disability



(v) Impact of health problems on ordinary activities in the past 1 month

- Looking at whether or not the respondents have become bedridden or unable to perform their ordinary activities due to health problems in the past 1 month with regard to the respondents overall, 48 respondents (23.9%) replied that “there were days on which I could not perform my ordinary activities.”
- Looking at the results by type of disability, a slightly higher percentage of respondents with a hearing disability than respondents with an upper limb disability answered “there were days on which I could not perform my ordinary activities.”
- Looking at the specific number of days on which the respondents became bedridden or unable to perform their ordinary activities due to health problems in the past 1 month with regard to the respondents overall, “1 to 3 days” ranked first with 22 respondents (45.8%), followed by “7 to 14 days” and “15 days or more” with 8 respondents (16.7%) each.
- Looking at the results by type of disability, a higher percentage of respondents with an upper limb disability than respondents with a hearing disability answered 7 days or more.

Figure 13: Whether or not health problems had an impact on ordinary activities in the past 1 month; by type of disability

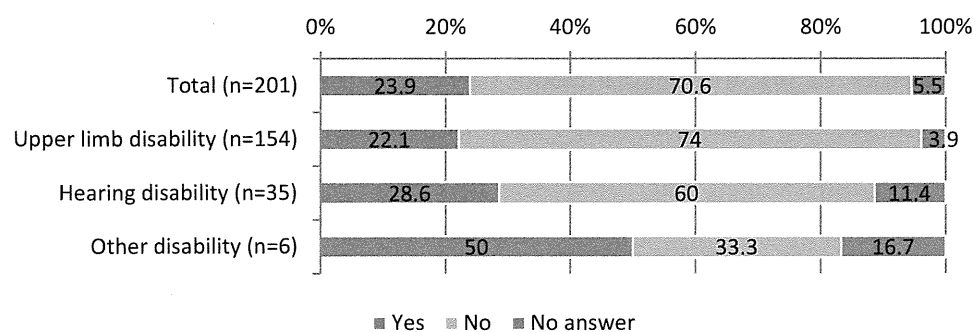
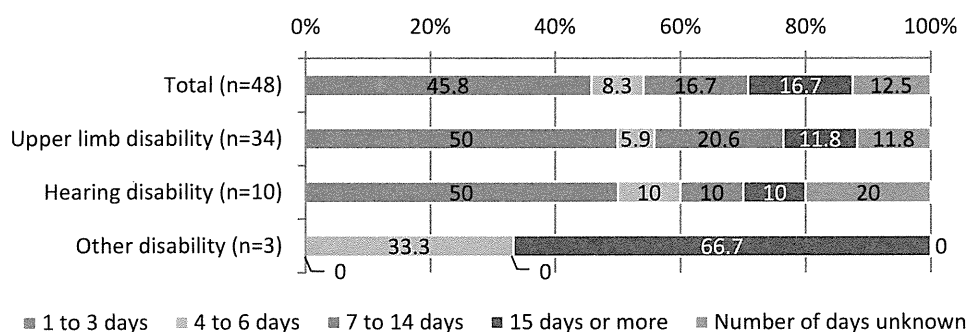


Figure 14: Number of days on which there was an impact on ordinary activities; by type of disability

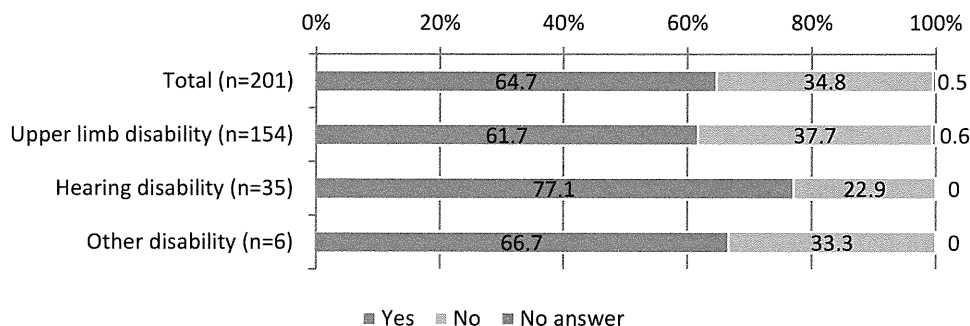


### 3. Use of medical and health care services

#### (1) Physical problems due to diseases or injuries, etc. (subjective symptoms)

- Looking at whether or not the respondents have had physical problems due to diseases or injuries, etc. (subjective symptoms) in the last few days with regard to the respondents overall, 130 respondents (64.7%) replied that they had subjective symptoms.
- Looking at the results by type of disability, a higher percentage of respondents with a hearing disability than respondents with an upper limb disability answered that they “had subjective symptoms.”

Figure 15: Whether or not the respondents had physical problems due to diseases or injuries, etc. (subjective symptoms) in the last few days; by type of disability



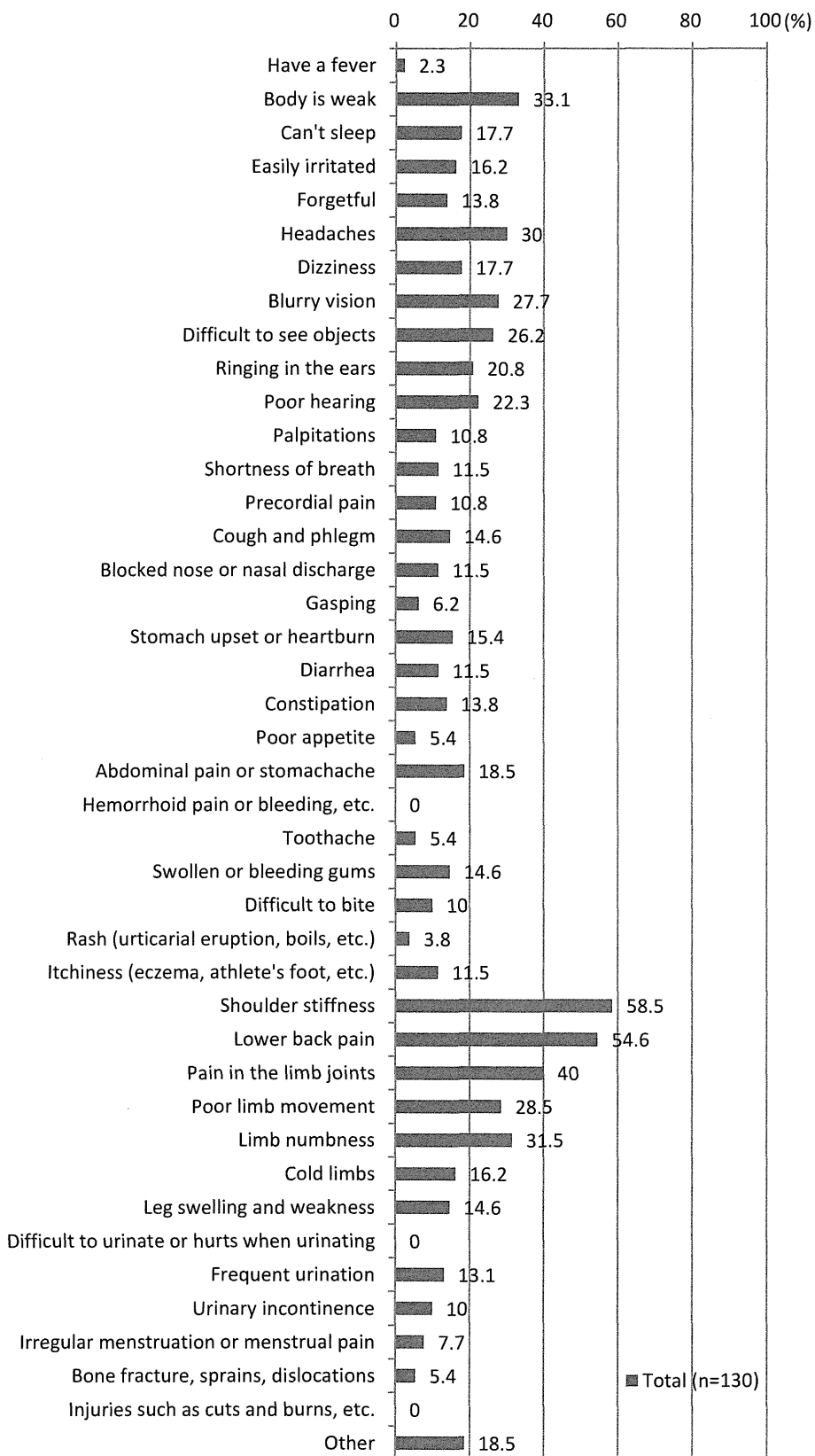
#### (i) Specific content of the subjective symptoms

- Looking at the specific content of the subjective symptoms with regard to the respondents overall, “shoulder stiffness” ranked first with 76 respondents (58.5%). This was followed by “lower back pain” with 71 respondents (54.6%), “pain in the limb joints” with 52 respondents (40%), “limb numbness” with 41 respondents (31.5%), and “poor limb movement” with 37 respondents (28.5%), so there was a high percentage of symptoms in the musculoskeletal system involving the limbs. Furthermore, 43 respondents (33.1%) answered that their “body is weak” and 39 respondents (30%) said they have “headaches.”
- Regarding the specific content of “other,” the respondents made the following statements.
  - “I have sciatic nerve pain.”
  - “Sometimes I have a slight fever that continues for some time.”
  - “My blood pressure is high.”
  - “I am gradually losing my gripping strength.”

- “I have sore back muscles.”
- “I have swallowing difficulties caused by Wallenberg syndrome”
- “The insides of my ears smell terrible. They smell even worse after I clean my ears.”



Figure 16: Specific content of the subjective symptoms (multiple-answer question); overall

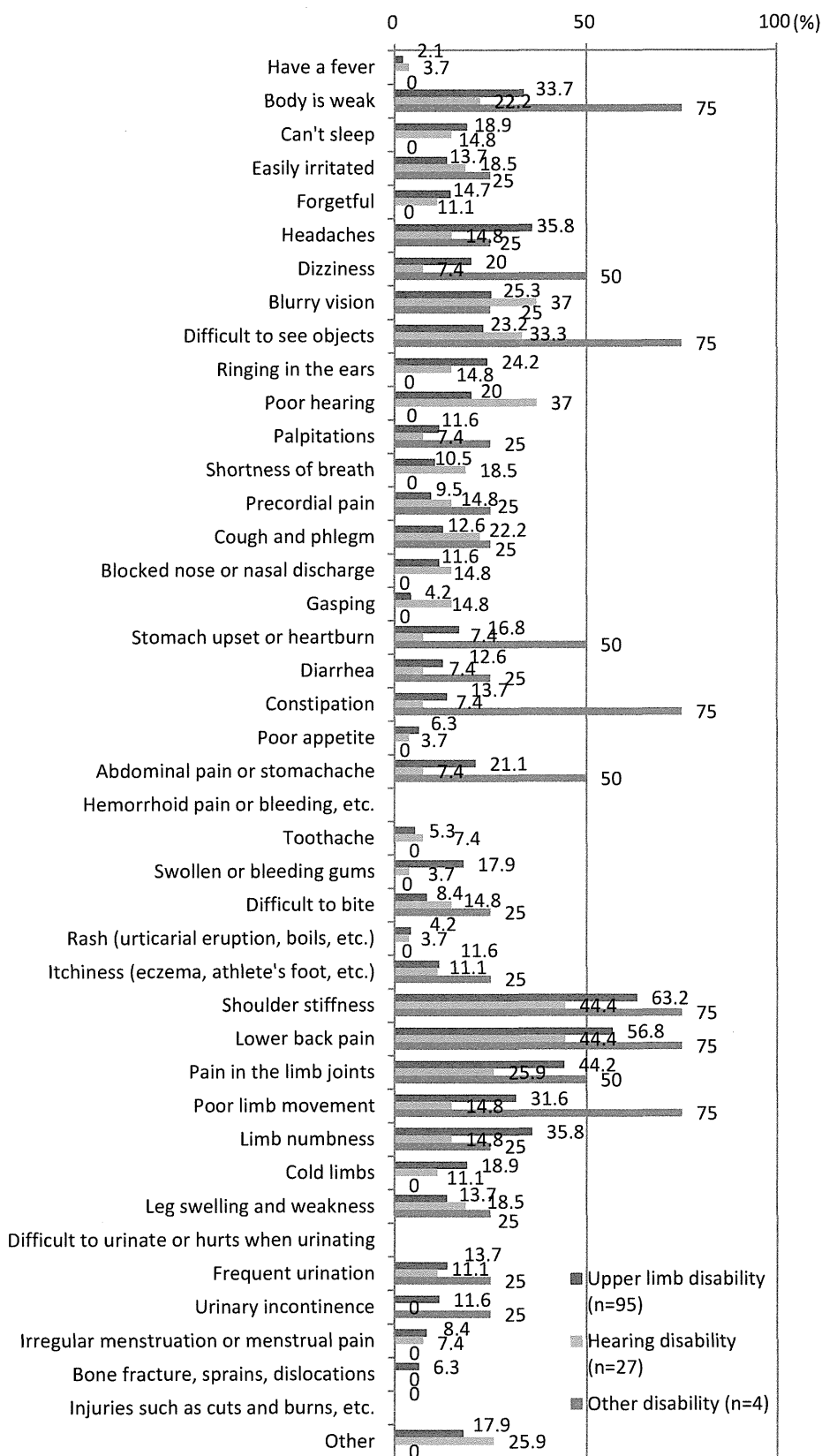


- Looking at the high-percentage symptoms by type of disability, among respondents with an upper limb disability, "shoulder stiffness" ranked first with 60

respondents (63.2%), followed by “lower back pain” with 54 respondents (56.8%), and “pain in the limb joints” with 42 respondents (44.2%). On the other hand, among respondents with a hearing disability “shoulder stiffness” and “lower back pain” ranked first with 12 respondents (44.4%) each, followed by “poor hearing” and “blurry vision” with 10 respondents (37%) each.

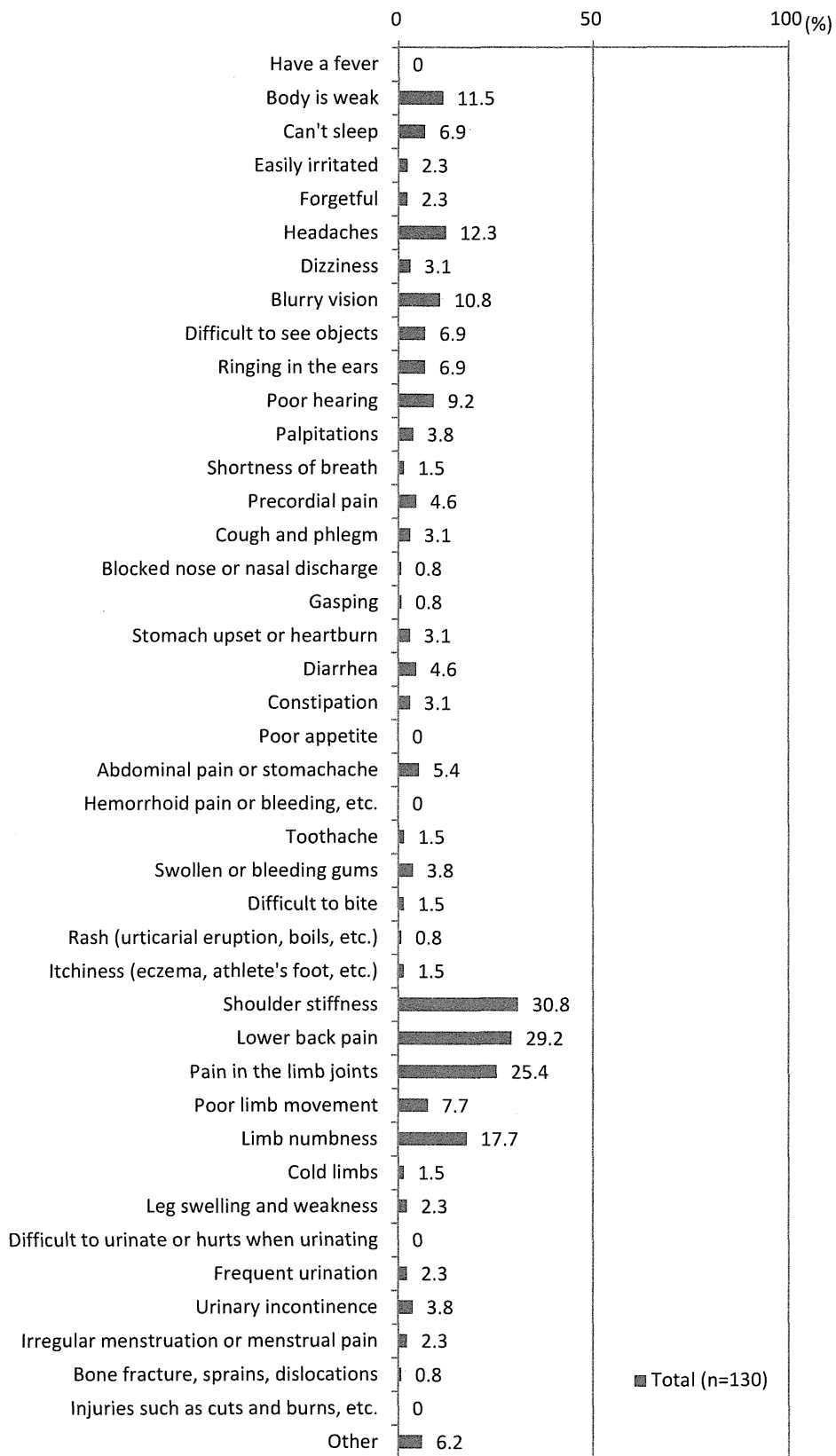
- Performing a comparison by type of disability, symptoms at least 10 percentage points higher for respondents with an upper limb disability than respondents with a hearing disability included “body is weak,” “headaches,” “dizziness,” “abdominal pain or stomachache,” “swollen or bleeding gums,” “shoulder stiffness,” “lower back pain,” “pain in the limb joints,” “poor limb movement,” “limb numbness” and “urinary incontinence.” On the other hand, symptoms at least 10 percentage points higher for respondents with a hearing disability than respondents with an upper limb disability included “blurry vision,” “difficult to see objects,” “poor hearing” and “gasping.”

Figure 17: Specific content of the subjective symptoms (multiple-answer question); by type of disability



- (ii) Subjective symptoms the thalidomide-impaired person is most concerned about
  - Looking at the subjective symptoms the thalidomide-impaired person is most concerned about with regard to the respondents overall, “shoulder stiffness” ranked first with 40 respondents (30.8%), followed by “lower back pain” with 38 respondents (29.2%), “pain in the limb joints” with 33 respondents (25.4%), and “limb numbness” with 23 respondents (17.7%).

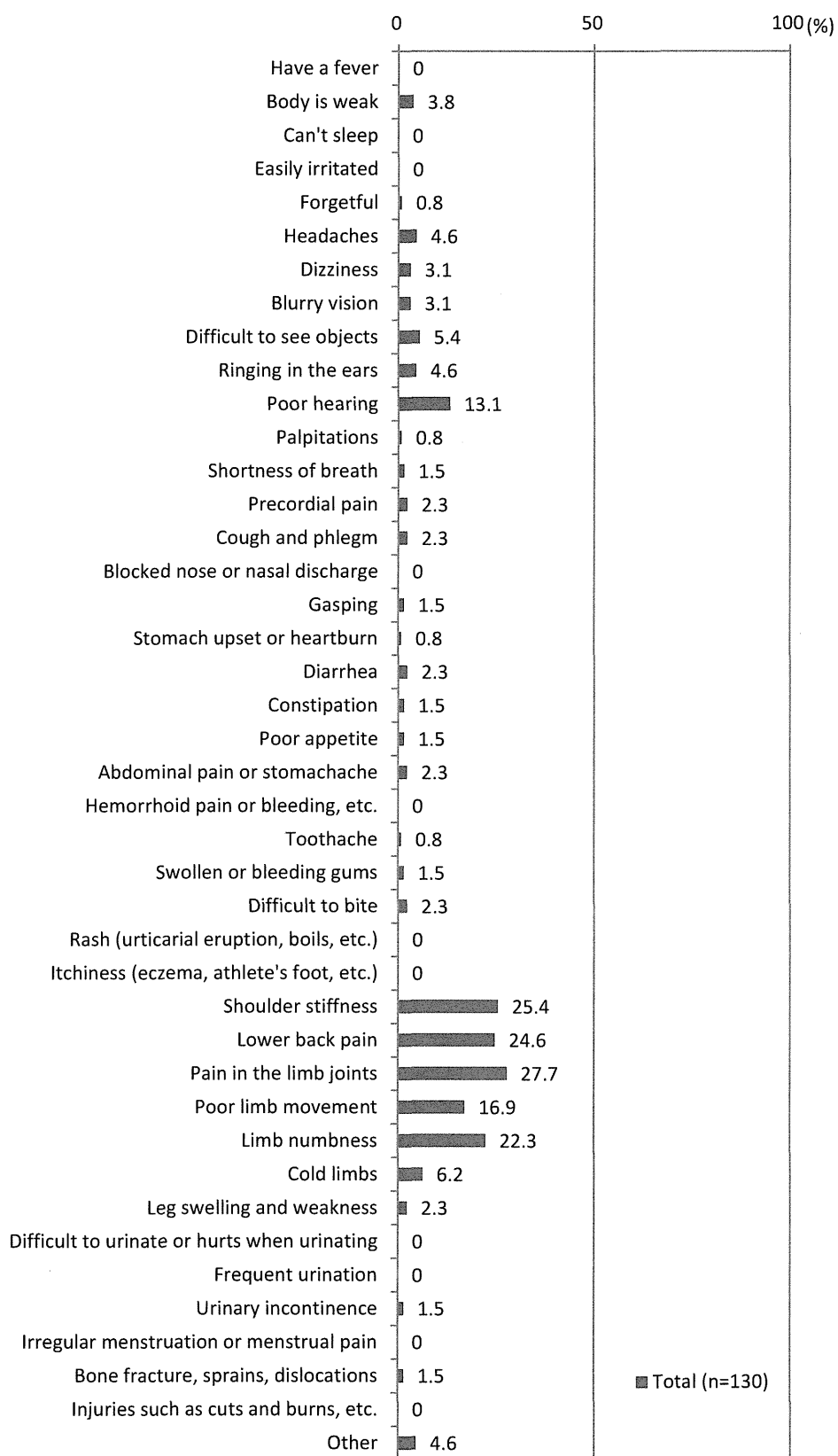
Figure 18: Subjective symptoms the thalidomide-impaired person is most concerned about (multiple-answer question); overall



(iii) Subjective symptoms the thalidomide-impaired people are worried are related to thalidomide harm

- Looking at the subjective symptoms that the thalidomide-impaired people are worried are related to thalidomide harm with regard to the respondents overall, 36 respondents (27.7%) answered “pain in the limb joints,” 33 respondents (25.4%) answered “shoulder stiffness,” 32 respondents (24.6%) answered “lower back pain,” and 29 respondents (22.3%) answered “limb numbness,” so there was a high percentage of symptoms in the musculoskeletal system involving the limbs. On the other hand, 17 respondents (13.1%) answered “poor hearing.”
- The pattern is similar for the percentages of subjective symptoms the thalidomide-impaired people are most concerned about and the percentages of subjective symptoms the thalidomide-impaired people are worried are related to thalidomide harm.

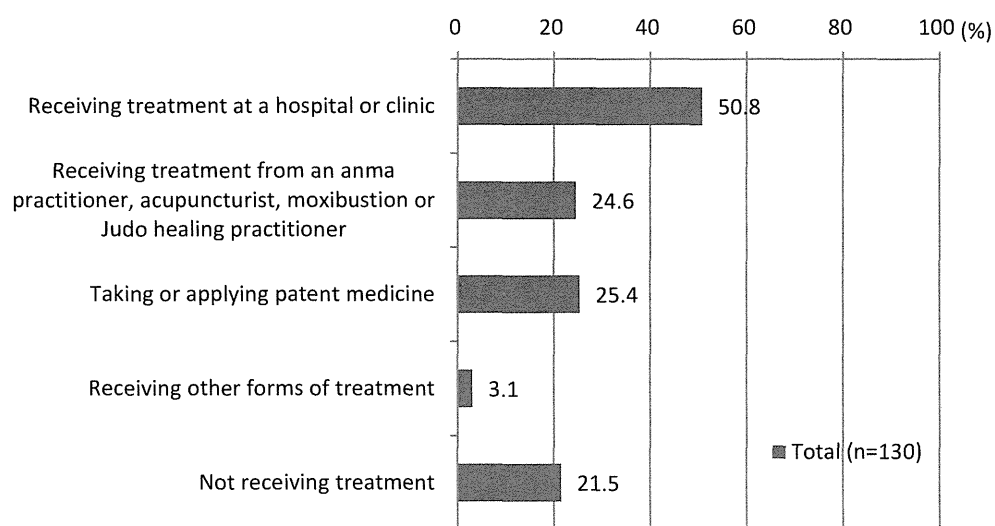
Figure 19: Subjective symptoms the thalidomide-impaired people are worried are related to thalidomide harm (multiple-answer question); overall



(iv) Treatment status of the symptoms the thalidomide-impaired person is most concerned about

- Looking at the treatment status of the symptoms the thalidomide-impaired person is most concerned about with regard to the respondents overall, 66 respondents (50.8%) answered “receiving treatment at a hospital or clinic,” followed by “taking or applying patent medicine” with 33 respondents (25.4%), and “receiving treatment from an anma practitioner, acupuncturist, ,moxibustion or Judo healing practitioner” with 32 respondents (24.6%). On the other hand, 28 respondents (21.5%) said they were “not receiving treatment.”

Figure 20: Treatment status of the symptoms the thalidomide-impaired person is most concerned about (multiple-answer question); overall

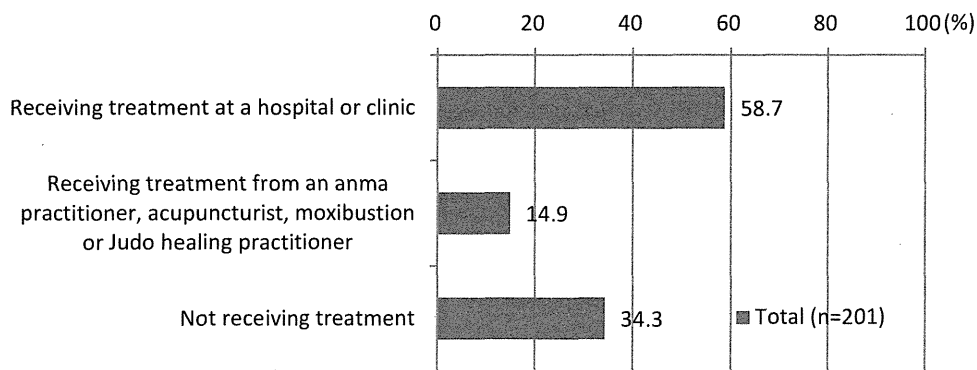


(2) Hospital treatment due to disease or injury

- Looking at current hospital treatment due to diseases or injuries with regard to the respondents overall, “receiving treatment at a hospital or clinic” ranked first with 118 respondents (58.7%), followed by “receiving treatment from an anma practitioner, acupuncturist, moxibustion or Judo healing practitioner” with 30 respondents (14.9%). On the other hand, 69 respondents (34.3%) said they were “not receiving treatment.”

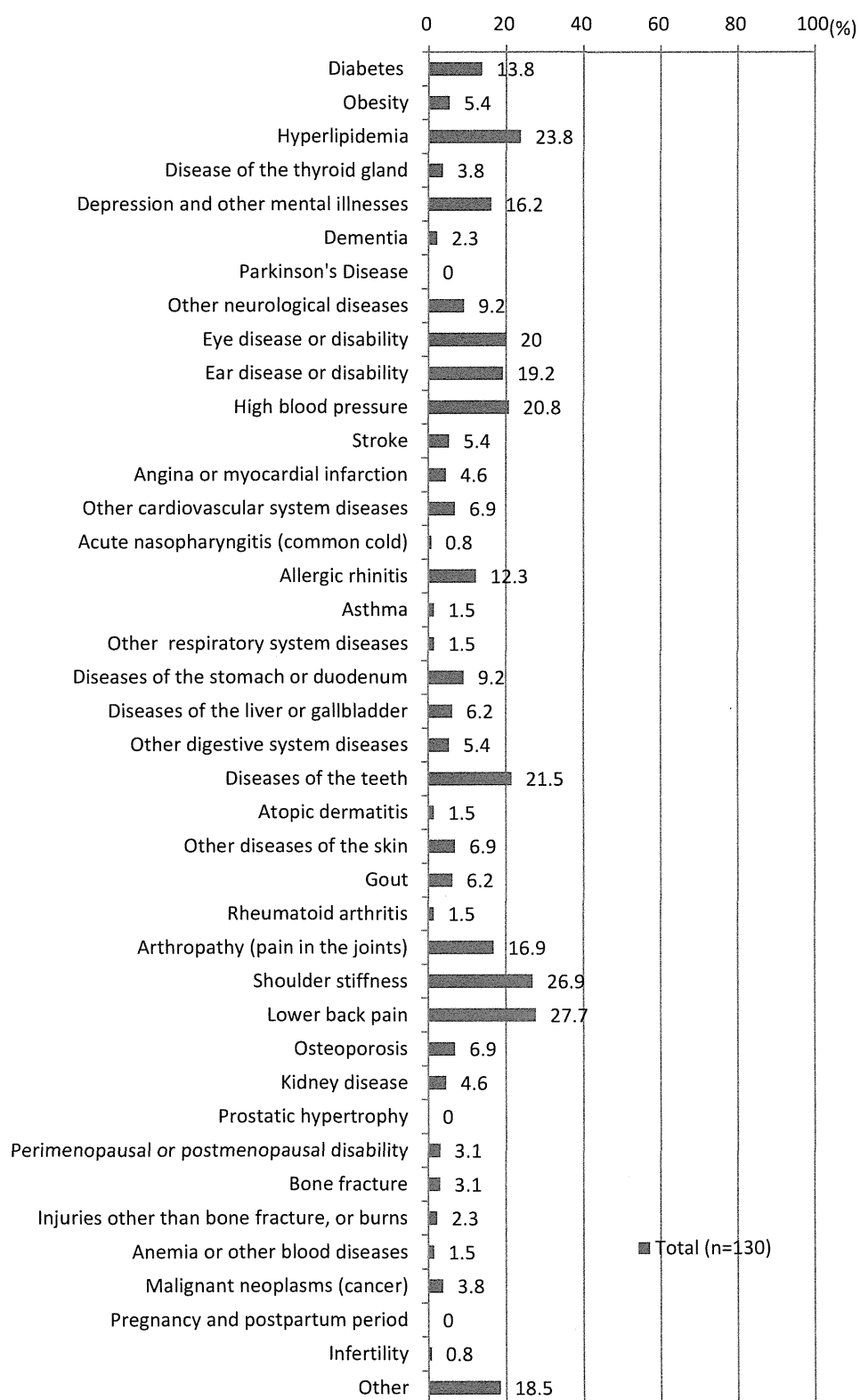


Figure 21: Hospital treatment due to disease or injury (multiple-answer question); overall



- (i) Diseases or injuries for which the thalidomide-impaired people are receiving treatment at the hospital
  - Looking at the specific diseases or injuries for which the thalidomide-impaired people are receiving treatment at the hospital with regard to the respondents overall, “lower back pain” ranked first with 36 respondents (27.7%), followed by “shoulder stiffness” with 35 respondents (26.9%), “hyperlipidemia” with 31 respondents (23.8%), “high blood pressure” with 27 respondents (20.8%), and “eye disease or disability” with 26 respondents (20%).
  - Regarding the specific content of “other,” the respondents made the following statements.
    - “I have sprains or lymph problems”
    - “I have carpal-tunnel syndrome”
    - “I have an allergy”
    - “I have dysplasia of the hip”
    - “I have swollen ovaries”
    - “My stomach is weak. I have helicobacter pylori bacteria in my stomach.”
    - “I have osteonecrosis of Femoral Head”
    - “I have an inguinal hernia”
    - “(I receive treatment at the Department of gynecology) I have uterine fibroids”
    - “I have anemia”
    - “I have depression”
    - “I have connective tissue disease”

Figure 22: Specific diseases or injuries for which the thalidomide-impaired people are receiving treatment at the hospital (multiple-answer question); overall



- Looking at the high-percentage diseases and injuries by type of disability, among respondents with an upper limb disability, “lower back pain” ranked first with 31 respondents (32.6%), followed by “shoulder stiffness” with 30 respondents (31.6%), and “hyperlipidemia” with 20 respondents (21.1%). On the other hand,

among respondents with a hearing disability “eye disease or disability” ranked first with 13 respondents (52%), followed by “ear disease or disability” with 11 respondents (44%), “hyperlipidemia” with 10 respondents (40%), “tooth disease” with 9 respondents (36%), and “high blood pressure” with 7 respondents (28%).

- Performing a comparison by type of disability, symptoms at least 10 percentage points higher for respondents with an upper limb disability than respondents with a hearing disability included “shoulder stiffness” and “lower back pain.” On the other hand, symptoms at least 10 percentage points higher for respondents with a hearing disability than respondents with an upper limb disability included “eye disease or disability,” “ear disease or disability,” “hyperlipidemia” and “tooth disease.”

Figure 23: Specific diseases or injuries for which the thalidomide-impaired people are receiving treatment at the hospital (multiple-answer question); by type of disability

