

Next Morning Search and Recue

Many people died due to ????



Number of patients at Emergency department of Sendai Medical Center

	3/11	3/12	3/13	3/14	3/15	Total
Severe	19	7	4	8		38
Middle	38	39	31	49		157
Light	31	58	69	81		239
Total	88	104	104	138	152	586
Admission	26	47	28	42	41	184

Response within 24 hours at Health Centers

Higashi-Matsushima city 2011.3.11

- Confirmation of the response system under Head quarter for disaster response system
- Check situation of health and medical facilities
- Set up a temporary medical unit at the Health Center
- Referral the severe patients to
- Initial visit the shelters for disaster

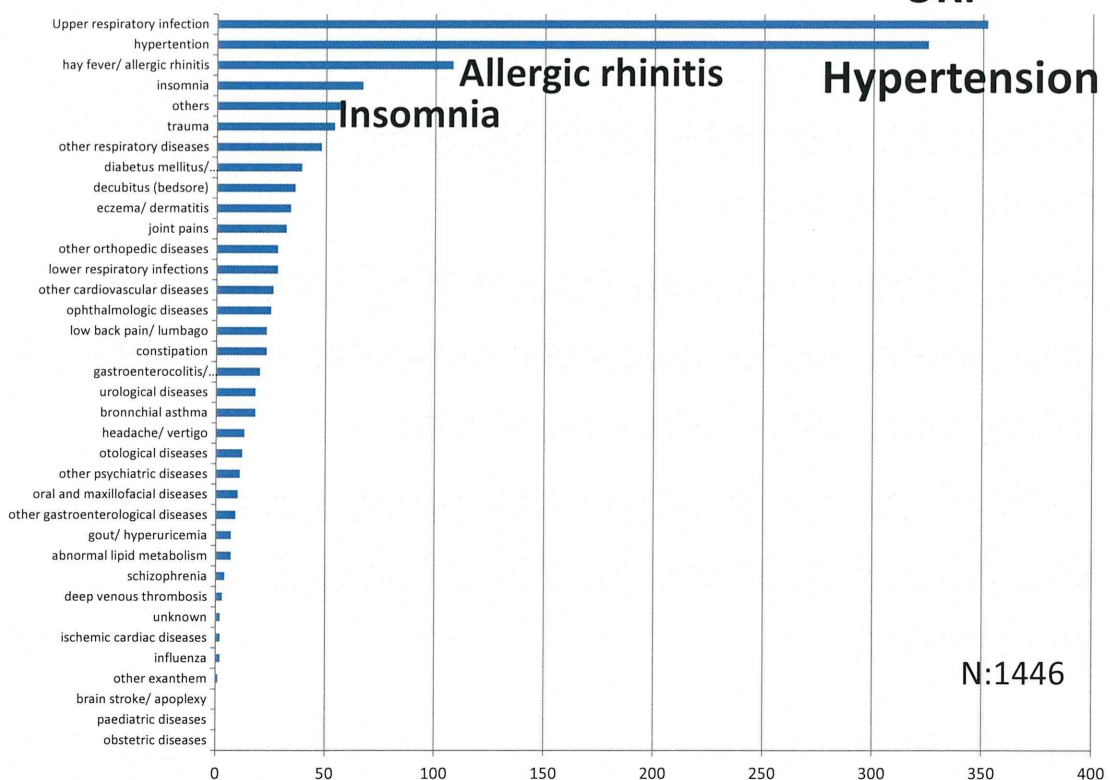
Situation on the 5th day

- A little new severe patient by earthquake-tsunami disaster
- Basic infrastructures (electricity, water supply etc) , medical facilities were destroyed and many personnel also were lost.
- Lack of information(no telephon, no portable and no internet are available) about everything

Question 4

Now 5 days passed. What kind of disease are seen at this moment ?

Number of patients by diseases from 3/22 to 5/10 in Higashimatsuishima city





Scene 4

One month passed and the situation are getting better and people in the shelters become calm.

The people who lived at second floor because of loss of first floor had been suffered from lack of foods, electricity etc.

Question 5

What kind of medical and public health needs are there at this moment ?

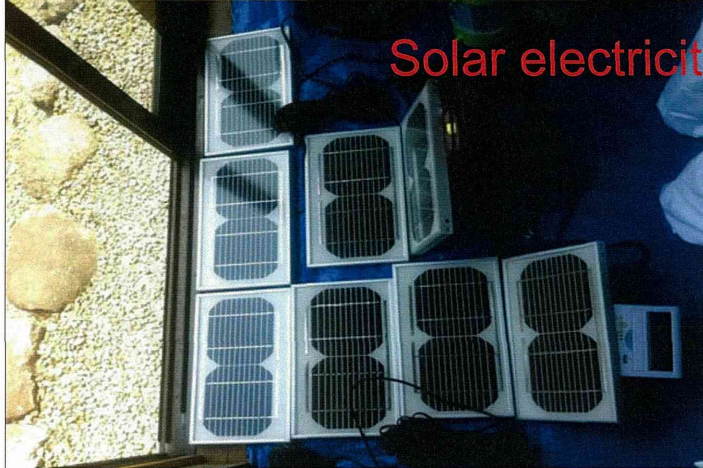
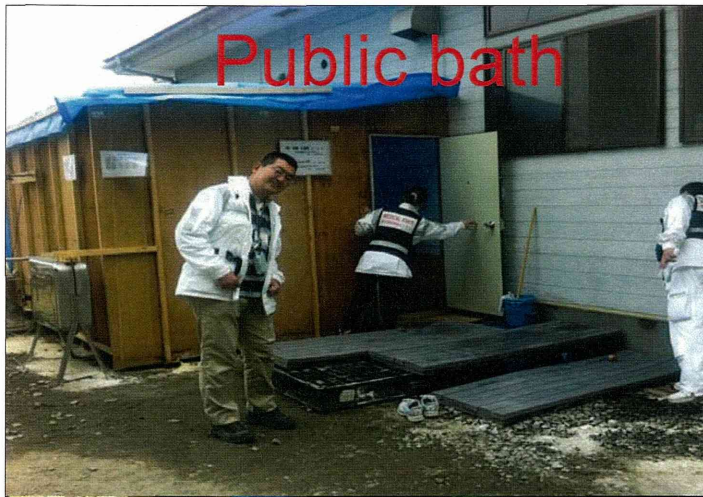
1. Outreach program of medical team

Needs

- 1) Chronic disease (Hypertension, Diabetes, Heart disease, Mental disorders)
- 2) Medical check up (Blood pressure etc)
- 3) Treatment of trauma (Old)
- 4) Provision of information on medical system (hospitals, clinic and pharmacy)

2. Situation and improvement of shelters

- Restoration of life line (Water, Electricity etc)
- Health condition of evacuees
- Logistics situation of relief supplies
- Hygiene level
(Hand washing, cooking situation, toilet, etc.)
- Evacuation route-method in the case of large tsunami warning and earthquake
- Check access to the hospitals



Assessment sheet for shelters Used in

Monitor of Infection

- Fever
- Cough
- Diarrhea

Vulnerable people

- Pregnant women
- Children
- Elderly
- Disabled

Lifeline

- Water
- Food
- Electricity
- Blanket
- Heater
- Hygiene
- Toilet

2. Needs for people who lived at own houses

→The people who lived at second floor because of loss of first floor had been suffered from lack of foods, electricity etc.

→Mental problems

3. Routine Public health service

→No MCH services (ANC, EPI and Growth monitoring) after disaster

Scene6

3 months passed and people who had lived in shelters became to move temporary houses provided by local government.



Household survey at affected areas in the city of Higashimatsushima

- Study period : 4/28-7/28
- Interviewer: Public health nurses
- Total Number : Total Households 4,672
15,503 residents (About 40% of total households)
- Male:48% Female:52%
- Main Purpose is
 - Identify the persons who needs medical and mental supports

Response at each phase

1. Acute phase and sub-acute phase
 - Management of shelters
 - Medical assistance and coordination
2. Sub-acute phase
 - Assessment and survey
 - Mental health
3. Recovery phase
 - Maternal and Child health (Immunization, Growth monitoring, Prenatal check)
 - Planning for reconstruction

Health problems in disaster situations

1. Deaths, diseases and other problems caused by disasters themselves
(Drowning, pneumonia, no electricity and water, etc)
2. Problems induced by low function of health facilities including hospitals
(Lack of health personnel, lack of supply of medicines and materials, etc)
3. Problems induced by low function of public health system and prolonged deteriorated condition
(Interruption of immunization and MCH services, mental problems, sanitation, etc)

Acute phase and DMAT



What happened ?

- Few severe emergencies cases
Most people (**more than 90%**) died from drowning and others survived without any health problems
- Lack of health personnel
- Destruction of hospitals and Interruption of supplies
- No instruction from central and middle level of local government
- No information (No services of portable telephones)
- High percentages of elderly people

