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Author(s)	Shiokawa, Yuichi
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## AIDS in Japan: Review and Clinical Aspects

Yuichi SHIOKAWA

*AIDS Research Committee, Japan  
Juntendo University, Tokyo 113, Japan*

Although Japan had been believed to be " a clean country " as regards AIDS until March, 1985, 11 patients were reported since then. In Japan, the AIDS Research Committee was organized by the Ministry of Health and Welfare, Japan, chaired by Dr. Shiokawa in April, 1984. In September, 1984, the Japanese Government established a surveillance system for the purpose to obtain nation-wide informations on the disease, and to contribute to the effective measures for prevention. The network consists of approximately 600 general hospitals with more than 300 beds all over Japan. The diagnosis of AIDS is based on the diagnostic criteria prepared by the committee, similar to the definition of AIDS made by CDC U.S.A. The reports come up to the committee through prefectural offices, and are studied for reports. On March 22, 1985, the committee reported the initial Japanese case of AIDS, who was a male homosexual, an artist aged 36, living in U.S.A. He returned to Japan after 16 years' stay , and visited a hospital in Tokyo.

Among 11 patients with AIDS already reported in Japan, 6 are male homosexuals, and 5 are hemophiliacs. All patients were proved to be positive for serum HTLV-III /LAV antibody, and had a decreased OKT 4/ OKT 8 ratio. As regards opportunistic infections, 5 had *Candida albicans* infections, and 4 had *Pneumocystis carinii* pneumonia. Six of 11 patients are known to have died. Difference from AIDS patients with AIDS in U.S.A. and western Europe might be a high proportion of cases with hemophilia, in particular hemophilia B ( 2 of 5 hemophiliacs ) , and with *Candida albicans* infections.

It was reported that 30 percent of patients with hemophilia and 5 percent of healthy homosexuals in Japan showed a positive antibody for HTLV-III/LAV. The number of patients with AIDS will continue to increase, as in other countries of the world.