

On expansion of areas covered by the state of emergency and pre-emergency measures
For preventing the worst-case scenario in the midst of the greatest challenge

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On August 2, the government expanded the state of emergency, which had covered Tokyo and Okinawa, to Saitama, Chiba, Kanagawa, and Osaka and imposed pre-emergency measures on Hokkaido, Ishikawa, Kyoto, Hyogo, and Fukuoka (all until August 31). As repeated emergency declarations and pre-emergency measures have had little effect, the above-mentioned prefectures face the worst situation with the highest number of new COVID-19 cases reported. In Tokyo, signs of the collapse of the medical system are appearing as the metropolitan government has requested medical institutions to have more beds for COVID-19 patients by reducing their regular services.

The number of new infection cases has surged due to the replacement with the highly contagious delta variant. The number of severe cases has notably increased among younger generations, especially those in their 40s and 50s, the prime working age population whose vaccination rates are still low. A sharp increase in the number of moderately ill patients requiring oxygen, who are nearing “critical” conditions, is causing a shortage of hospital beds.

At the same time, infections are spreading throughout Japan due to the movement of people during summer vacations, longer weekends, the “Bon” holidays, and the Olympics. Considering the recent development, we must say that even areas with currently less infection cases will soon have to face a crisis in medical care in an unprecedented level.

Vaccinations, while disturbed by the government’s missteps, are making gradual progress thanks to hard work of those involved. However, as a little less than 28% of the total population has received two vaccine shots as of the end of July, we are still far from being able to claim mass immunization.

In the Tokyo Olympic Games, which has been going on for 10 days since its start, 278 athletes and others involved in the event have tested positive, showing how sloppy its infection-control measures are. As evidenced by crowds and cheering along roadsides, there is no doubt that the forcible holding of the Olympics has become a seriously negative message to citizens, relaxing their attention to infection-control efforts.

As a government subcommittee has pointed out, we should recognize that Japan is now facing the most difficult challenge since it started its response to the Covid-19 infections.

Despite this, Prime Minister Suga has failed to provide any convincing proposals to resolve the situation or messages to encourage citizens to share the sense of crisis. As he emphasizes that the number of new cases among the elderly has decreased with their vaccination rate increasing, it seems that the prime minister tries to give the impression that there will not be as many serious cases because many of the infected are in younger generations. Such mismanagement is expected to be repeated in the future. We are in danger of facing the worst-case scenario: the collapse of medical systems in Japan and the global spread of infections due to the Olympics.

As medical professionals, we strongly urge the government to clearly present its determination and policy to protect all lives in this challenge we are facing.

Urgent requests to the government:

1. In order to encourage citizens to share the sense of crisis, the government should change its present attitude and clarify its stance of putting life first. The prime minister should sincerely convey the message to the public.

2. The Olympics should be cancelled immediately so that medical professionals and public health workers who are working for the event can return to engage in infection control efforts. The PCR testing capacity, which is overwhelmingly insufficient, should be promptly expanded.

3. The government should provide adequate financial compensations to support lives and livelihoods of everyone living in this country. It should provide urgent support for small- and medium-sized stores that have been forced to close or reduce their operations for a long time as well as take more effective measures to limit people's movement.

4. Discussing with local authorities and medical institutions, the government should be responsible for maintaining local medical services in order to encourage people not to refrain from receiving medical care and prevent loss of lives that could have been saved in normal times. It should provide financial support to enable medical and nursing care facilities and pharmacies to take all necessary responses.

5. The government should establish appropriate medical standards and systems to provide necessary treatments to infected patients who have to stay at home or accommodation facilities. It should take measures to avoid disparities between inpatients and outpatients in treatments they can receive, including the use of medicines expected to prevent serious conditions.

6. The government should thoroughly improve supply of vaccines, including strengthening of support for their domestic development.