

APPENDIX NO. 2

JAPANESE MATERIAL

ORGANIZATION FOR STUDY OF ATOMIC BOMB CASUALTIES

MONTHLY PROGRESS REPORTS

The Investigation of the Effects of the Atomic Bomb
by the National Research Council in Japan

I. The description of its works

The National Research Council is a Government Organization for the scientific researches in Japan. The Special Committee for the Investigation of the Effects of the Atomic Bomb was established in the last September. Dr. Haruo Hayashi, the President of the Council, is also in charge of this Special Committee. The Committee consists of 9 sections:

1. Physical, Chemical, and Geographical Section
Chairman, Dr. Masaharu Nishikwa, Prof. of Tokyo Imp. Univ.
2. Biological Section
Chairman, Dr. Kaname Okada, Prof. of Tokyo Imp. Univ.
3. Engineering and Metallic Section
Chairman, Dr. Masaichi Majima, Prof. of Tokyo Imp. Univ.
4. Electric Communication Section
Chairman, Dr. Shoji Seto, Prof. of Tokyo Imp. Univ.
5. Civil Engineering and Architectural Section
Chairman, Dr. Yutaka Tanaka, Prof. of Tokyo Imp. Univ.
6. Medical Section
Chairman, Dr. Masao Tsuzuki, Prof. of Tokyo Imp. Univ.
7. Agricultural and Fishery Section
Chairman, Dr. Ikusaku Amemiya, Prof. of Tokyo Imp. Univ.
8. Forestry Section
Chairman, Dr. Ihachiro Miura, Prof. of Tokyo Imp. Univ.
9. Veterinary and Zootechnical Section
Chairman, Dr. Kiyoshi Masui, Prof. of Tokyo Imp. Univ.

Many scientists of our country had been working since the time of bombing at Hiroshima and Nagasaki. Most of them jointed into the respective sections, when the Special Committee was established. All sections worked in their own circles, independently or cooperatively with other sections. The first general conference was held on November 30th, 1945, at the Tokyo Imp. Univ. The chairmen of all sections presented the reports, as preliminary ones. Comm. Tailor, Nav. Tech Jap of SCAP attended at that conference.

On February 28, 1946, the committee is going to have the second general conference, also at Tokyo Imp. Univ.; many reports will be presented by the representatives of all sections. All these reports will be checked up and the editing of an official report of the atomic bomb investigation is now planned, to keep the scientific data in perfect condition.

February 25, 1946

The Works of the Medical Section of the Special Committee for the
Investigation of the Effects of the Atomic Bomb, by the
National Research Council in Japan

Dr. Masao Tsuzuki, Professor of Surgery, Tokyo Imperial University

The Medical Section is the largest in the Special Committee, composed of about 30 committee fellows, 150 investigators and 1000 assistants, of almost all the big medical schools, institutes, and hospitals of Japan. Since the end of September 1945, the Medical Section has had always a close connection with the American Commission, in helping and discussing of their works. By the end of last December, about 80 reports were finished, most of them were translated and transferred to the American side.

In the Medical School, Tokyo Imperial University, the conferences on the atomic bomb studies were held and many papers were read by the members of our committee as follows:

The 1st Conference, December 19, 1945

1. Survey of the damage of the human bodies in some strong buildings at Hiroshima. Dr. Murati & Dr. Murai (Radiolog. Clinic).
2. Pathological Anatomy of the atomic bomb cases. Dr. Mayake (Path. Clinic).
3. Haematological studies on the atomic bomb patients, Dr. Makao (Medical Clinic).
4. Increasing and disappearance of eosinophile cells in the peripheral blood of the atomic bomb patients at Nagasaki in the 3rd and 4th months after the explosion. Dr. Ueda Nikaido.
5. Stomach of the atomic bomb patients at Nagasaki. Dr. Kishimoto (Medical Clinic).
6. Cachectic condition of the atomic bomb patients. Dr. Urabe and Dr. Menjo (Surg. Clinic).
7. Experience on the treatments of the atomic bomb patients, Dr. Kuwabara (Surg. Clinic).
8. Clinical and pathological studies on cicatrical tissues of the burn wounds by the atomic bomb, Dr. Kajitani and Dr. Ishibashi (Surg. Clinic).
9. Sperma of the atomic bomb patients at Hiroshima. Dr. Ogoshi (Urolog. Clinic), Dr. Kaseki (Gyn. Clinic), and Dr. Asakura (Surg. Clinic).
10. Influence of the atomic bomb upon the female sexual functions, Dr. Mitsui, Dr. Ito, and Dr. Nozu (Gyn. Clinic).
11. Clinical cases of eye damages by the atomic bomb. Dr. Fukuoka and Dr. Nitta (Ophth. Clinic).
12. Rupture of ear drum by the atomic bomb. Dr. Kashiwado (Oto-r-laryn. Clinic).

The 2nd Conference, January 23rd, 1946

1. Topographic distribution of the atomic bomb patients at Nagasaki. (Dr. Ohashi (Pharm. Inst.), Dr. Urabe (Surg. Clinic), Dr. Ueda (Medical Clinic), Dr. Hakamada (Brain Inst.), and Dr. Nikaido (Physical Therapy)).
2. Fever of the atomic bomb patients at Hiroshima, Dr. Kubo and Dr. Kitamoto (Med. Clinic).
3. Survey of the nutritional conditions of the atomic bomb patients at Hiroshima. Dr. Kubo (Med. Clinic).
4. Atomic bomb damages and pulmonary tuberculosis. Dr. Kitamoto and Dr. Ayukawa (Med. Clinic).
5. Capillary resistance of the atomic bomb patients at Hiroshima. Dr. Ayukawa (Med. Clinic).
6. Disturbances of the liver function and capillary function of the atomic bomb patients. Dr. Kobayashi (Med. Clinic).
7. Studies on the brains of atomic bomb cases. Dr. Okada and Dr. Shimazone (Psychiatr. Clinic).
8. Studies of the oral cavity and the Zanbrini-Watanabe's salivary reaction of the atomic bomb patients at Hiroshima. Dr. Akiyama (Dental Clinic).
9. Review of the courses of the investigation on the medical effects of the atomic bomb. Dr. Tsuzuki (Surg. Clinic).

The 3rd Conference, February 16th, 1946

1. Stochastic studies of mortality by the atomic bomb. Dr. Nasuyama (Physical Therapy Clinic).
2. Atomic bomb diseases, observed on the standpoint of radiation biology. Dr. Nakaizumi (Radiolog. Clinic).
3. Burn injuries by the atomic bomb. Dr. Tsuzuki (Surg. Clinic)

The 4th Conference will be held on March 2nd, 1946, and the following papers will be read:

1. Shelters and damages. Drs. Murati & Murai (Radiolog. Clinic).
2. Damages of the persons who were in a building, situated 200 meters from the centre of the explosion. Dr. Kitamoto (Med. Clinic) and Dr. Ishikawa (Surg. Clinic).
3. Statistical studies on the burned patients by the atomic bomb. Drs. Yasuda (Derm. Clinic), Kajitani, Hatano (Surg. Clinic), Ishikawa (Surg. Clinic), and Goto (Orth. Clinic).
4. Timely distribution of symptoms of the atomic bomb patients and the blood pictures after the second month. Dr. Ueda (Med. Clinic) and Dr. Nikaide (Physical Therapy).
5. Statistical studies on the blood pictures of the atomic bomb patients in the 3rd and 4th months. Drs. Nakao, Kakehi (Med. Clinic), Ogoshi (Urol. Clinic), Tsukada, Kato (Med. Clinic), and Kawamura (Ped. Clinic).
6. Plans for protection and rescue against the atomic bomb damages. Dr. Tsuzuki (Surg. Clinic).

The Special Committee for the Investigation of the
Effects of the Atomic Bomb, Medical Section

(Chairman: Dr. Masao Tsuzuki)

Themes and Aims for the investigation of the Medical
Section in 1946 year (April 1946 - March 1947)

1. Statistic Studies

All collected data of the casualties will be arranged statistically and stochastically and the actual fact of the damages of the peoples will be grasped surely.

2. Clinical Studies

The patients (about 6,000 cases at Hiroshima, about 6,000 cases at Nagasaki), who were investigated previously, will be followed-up repeatedly. Various disturbances, their recovering and remained symptoms will be checked. The following conditions are going to be studied at first more carefully.

- a. burn
- b. radiation sickness, especially blood pictures
- c. disturbance of male sexual functions
- d. disturbance of female sexual functions

3. Path-anatomical Studies

About 120 autopsy cases will be thoroughly studied and summarizing results will be fixed.

4. Studies of the remained radioactivity

The influence of the remained radioactivity upon the inhabitants of Nishiyama Districts, Nagasaki, will be followed-up repeatedly.

5. Hereditary Studies

The possible influence upon the coming foetus, children, and descendants will be studied, in cooperation with members of the zoological and botanical section.

MONTHLY REPORT - April 1st, 1946

The Works of the Medical Section of the Special Committee
for the Investigation of the Effects of the Atomic Bomb,
The National Research Council in Japan

(Dr. Masao Tsuzuki, Professor of Surgery, Tokyo Imperial University)

I. The Field Works

1. Dr. Asakura, Assistant of the Surgical Clinic, Tokyo Imp. Univ., has been in Hiroshima from Feb. 15th to 28th, 1946, to do the further investigation for the disturbance of the sexual function of male.

2. Dr. Neguchi, Assistant Prof. of Chemistry, Tokyo Imp. Univ., has been in Hiroshima and Nagasaki from Feb. 15th to 25th, 1946, to pick up some specimens for the further study of the remained radioactivity of the earth.

3. Dr. Mitani, Assistant Prof. of Obstetrics and Gynecology and other investigators in the Obst. & Gynec. Clinic, Tokyo Imp. Univ., are endeavoring to follow-up the females, who complained of some disturbance about their menstruation on the previous examination at Hiroshima in November 1945, in sending them personal questionnaires. Many replies are collected and arranged now for survey.

II. The Laboratory Works

1. Statistical and stochastical studies on the casualties at Hiroshima and Nagasaki are now going to be worked by many investigators in institutes and clinics. Faculty of Medicine, Tokyo Imp. Univ. Total casualties. Burn. Mechanical injuries. Radiation sickness, etc.

2. Summarized survey on the clinical features of so-called radiation sickness by a special team which is consisted of many investigators of medical clinics of various universities. The special conference will be held on April 2nd as a section of annual general meeting of the Japanese Society of Internal Medicine.

3. Summarized survey on the pathological anatomy of the atomic bomb cases by a special team which is consisted of many pathologists of various institutes. They are discussing once a week since the beginning of March.

4. Hematological survey on the people, who show remarkable increasing of their leukocytes in Nishiyama District, Nagasaki, by Dr. Ishikawa, Assistant Prof. of Radiology, Kyushu Imp. Univ., Fukuoka.

MONTHLY REPORT - May 1st, 1946

The Works of the Medical Section of the Special Committee
for the Investigation of the Effects of the Atomic Bomb,
The National Research Council in Japan

(Dr. Masao Tsuzuki, Professor of Surgery, Tokyo Imperial Univ.)

I. The Field Works

1. Dr. Tsuzuki, Professor of Surgery, Tokyo Imperial Univ., Chairman of the Medical Section, accompanied by Dr. Hatano, has been in Hiroshima from April 20th to 27th, to get a general idea about the present condition of the City of Hiroshima. The social life of the citizen has recovered already partly from the devastated situation. Dr. Tsuzuki inspected there various municipal and medical organizations and decided to send a special investigation party over there in the middle of May in order to perform further studies from the medical standpoint.

2. Accordingly, a special investigation party will be sent to Hiroshima in the middle of May. The party consists of about 10 medical men who are belonging to the various clinics of Tokyo Imp. University and most of whom have worked as members of Joint Commission. They will stay at Hiroshima about two weeks and they will follow-up the cases who were examined previously. Some of them will go to Nagasaki after finishing their work at Hiroshima.

3. The principal articles for the surveys of the special investigation party are as follows:

- a. General health conditions around the city.
- b. Sequelae of the mechanical injuries by the atomic bombing.
- c. Late effects of the radiation sickness.
- d. Sexual life of the citizen, conception, pregnancy, birth, puerperium and baby, etc.

II. The Laboratory Works

1. An official report of the Medical Section is almost ready, now being translated.

2. Special reports concerning patho-anatomical, clinical, and radiological affairs are now going to be edited.

III. The Reports which are finished and presented through Surgeon's Office to the Joint Atomic Bomb Commission.

1. Hematological studies on the atomic bomb disease:
by Dr. Nakao, Medical Clinic, Tokyo Imperial University.

2. On the late radiation sickness, caused by the atomic bomb:
by Dr. Yamasaki, Oto-r-laryng. Clinic, Osaka Med. School.

MONTHLY REPORT - June 1st, 1946

The Works of the Medical Section of the Special Committee
for the Investigation of the Effects of the Atomic Bomb,
The National Research Council in Japan

(Dr. Masao Tsuzuki, Professor of Surgery, Tokyo Imperial Univ.)

Report on the Medical Investigation of the Late Effects of the Atomic Bomb
at Hiroshima.

1. A special investigation party was sent to Hiroshima from May 10th to 27th. The party consisted of 12 medical men who are belonging to the various clinics of Tokyo Imperial University and most of them had been working as members of the Joint Commission since last year. Dr. Tsuzuki, Chairman of the Medical Section, has been also there with the party.

2. The party stayed at the Ujina Hospital, Hiroshima, in two weeks and worked out dividedly in four groups at the Ujina Hospital, the Red Cross Hospital, the Post Office Hospital, and the Kusatsu Hospital. Over 1000 patients were examined thoroughly, most of them were given adequate advices and treatments if necessary.

3. The principal items and their results of the surveys of this party are as follows:

a. Public Health Condition of the City: The situation of the public health of the City of Hiroshima is now becoming better. The appearance of the devastated area is partly cleaned already, many barracks are built, many shops are opened for meals, daily goods, and even souvenirs. The city authority is now endeavoring to establish a new plan for reconstruction with the aid of the advisers, who are appointed by the Supreme Command of Allied Forces.

b. Sequelae of the Mechanical Injuries and Burns by the Atomic Bombing: The mechanical and burned wounds are cured already on the whole. As sequelae after these kinds of wounds, now there are pretty many patients who are complaining of some disturbances concerning contracture, keloid of the scars, and so on.

c. Late Effects of the Radiation Sickness: The patients who were suffering from the so-called radiation sickness are now mostly recovered clinically as well as hematologically. Few patients are still complaining of some symptoms, i.e., general fatigue, weakness of concentrating spiritual power, disturbances of digestive organs and diarrhea. They are mostly over 50 years of age. Very few patients show still anemic condition, hemoglobin contents are sometimes under 50%. Most of those patients located within the circle of 1 km from the center at the time of bombing. Epilation of the scalp hairs, caused by the radiation effect, had been recovered perfectly. New growing hairs seem to be somewhat thicker than the falling ones.

d. Sexual Life of the Patients: Abnormalities of menstruation, mostly temporal amenorrhea during 2-3 months after bombed, recovered already. Many wives have been pregnant. No abnormality of the courses of birth and puerperium has yet been proved. Newborn babies are all normal and healthy. As regard to the sexual function of male, few patients are showing still oligo-rest aspermia. Perhaps there will remain a few cases which are acceptable as a permanent aspermia.

MONTHLY REPORT - June 1st, 1946

The Works of the Medical Section of the Special Committee
for the Investigation of the Effects of the Atomic Bomb,
The National Research Council in Japan

(Dr. Masao Tsuzuki, Professor of Surgery, Tokyo Imperial Univ.)

Report on the Medical Investigation of the Late Effects of the Atomic Bomb
at Hiroshima.

1. A special investigation party was sent to Hiroshima from May 10th to 27th. The party consisted of 12 medical men who are belonging to the various clinics of Tokyo Imperial University and most of them had been working as members of the Joint Commission since last year. Dr. Tsuzuki, Chairman of the Medical Section, has been also there with the party.

2. The party stayed at the Ujina Hospital, Hiroshima, in two weeks and worked out dividedly in four groups at the Ujina Hospital, the Red Cross Hospital, the Post Office Hospital, and the Kusatsu Hospital. Over 1000 patients were examined thoroughly, most of them were given adequate advices and treatments if necessary.

3. The principal items and their results of the surveys of this party are as follows:

a. Public Health Condition of the City: The situation of the public health of the City of Hiroshima is now becoming better. The appearance of the devastated area is partly cleaned already, many barracks are built, many shops are opened for meals, daily goods, and even souvenirs. The city authority is now endeavoring to establish a new plan for reconstruction with the aid of the advisers, who are appointed by the Supreme Command of Allied Forces.

b. Sequelae of the Mechanical Injuries and Burns by the Atomic Bombing: The mechanical and burned wounds are cured already on the whole. As sequelae after these kinds of wounds, now there are pretty many patients who are complaining of some disturbances concerning contracture, keloid of the scars, and so on.

c. Late Effects of the Radiation Sickness: The patients who were suffering from the so-called radiation sickness are now mostly recovered clinically as well as hematologically. Few patients are still complaining of some symptoms, i.e., general fatigue, weakness of concentrating spiritual power, disturbances of digestive organs and diarrhea. They are mostly over 50 years of age. Very few patients show still anemic condition, hemoglobin contents are sometimes under 50%. Most of those patients located within the circle of 1 km from the center at the time of bombing. Epilation of the scalp hairs, caused by the radiation effect, had been recovered perfectly. New growing hairs seem to be somewhat thicker than the falling ones.

d. Sexual Life of the Patients: Abnormalities of menstruation, mostly temporal amenorrhea during 2-3 months after bombed, recovered already. Many wives have been pregnant. No abnormality of the courses of birth and puerperium has yet been proved. Newborn babies are all normal and healthy. As regard to the sexual function of male, few patients are showing still oligo-rest aspermia. Perhaps there will remain a few cases which are acceptable as a permanent aspermia.

25 June 1946

To the Joint Commission for the Investigation of the Effects of the Atomic Bomb in Japan.

Dr. Masao Tsuzuki, the Japanese Government Group, would like to have immediately the directions on the following articles.

1. The printing of the official reports of the National Research Council in Japan: The official reports of the each sections of the Special Committee are now almost ready in their original texts and going to be translated. The National Research Council wants to print them provisionally in order to present to the Joint Commission and deliver among the investigators of each section to promote the further study.

2. The publication of the scientific reports of the Japanese investigators: Many reports are finished and waiting for publication. The authors are very much anxious to publish them on some Japanese scientific journals. They would like to have a permission from the Joint Commission to do so as soon as possible.

3. The further management of the Japanese Government Group: Dr. Tsuzuki will resign soon from his post of the Professor at the Tokyo Imperial University by the purge directive, because he was active as a naval surgeon in six years after the graduation of the medical school. Can Dr. Tsuzuki continue his management in the Japanese Government Group after his resignation from his official post? Or, anyone else must replace his position to take care of?

July 15, 1946

The Influence of the Atomic Bomb upon the Functions of the Female Genital Organs.

S. Mitani, M. Ito, S. Nozu, Y. Tumuji, T. Kaseki
T. Iwai, M. Iwatate, M. Watanabe (from the Gynecological Clinic of the Tokyo Imperial University).

At Hiroshima we investigated the influence of the atomic bomb upon the general healthy conditions, especially upon the functions of the genital organs of the females, since September 10, 1945. We examined 343 women, from 18 to 45 years of age, who previously had shown the regular menstrual conditions. Among the women who were not in concrete buildings at the time of the bombing, there was a large number of those who have shown some disorders of menstruation. Table I shows the relationship between the distance from the bombed center and their menstrual conditions. Cases who showed no disorder were only 113 (32.4%).

N.B. Classification of the menstrual types as follows:

- Type I: No change
- Type II: Complete amenorrhea directly after bombing
- Type III: Amenorrhea after one regular menstruation
- Type IV: Amenorrhea after two or more regular menstruations
- Type V: Other pathologic cases, namely, ante or postponed menses, atypical bleeding, etc.

We classified the kinds of injuries into 4 groups, i.e.,

- R - Radiation sickness, regardless of the existence of burn or mechanical wound
- B - Burn, or burn with mechanical wound
- I - Mechanical wound only
- H - Entirely sound (no injury)

Table II shows the relation between the menstrual types and the kinds of injuries. A group of persons with the manifest symptoms of a radiation sickness, shows the less percentage of normal menstruation among them than groups of other kinds of injuries.

If we could presume that two or more menstruations at regular intervals after amenorrhea would be a proof of recovering, so 93 cases out of 113 examined cases might be said to have recovered before March 1946. Besides those cases we had 59 of Type I (no change) cases, there are in total 152 (86.2%) including recovery and (no change) cases among 172 examined cases. Moreover, as some pregnant women may be included in those apparently unrecovered cases, so the recovery of the sufferers seems to be comparatively quick and to be in favorite course. Actually 6 cases are pregnant. In short, many of survived sufferers seem to be castrated temporarily, but not to be given serious ovarian damage.

The relation between kinds of injuries and the type of menstrual abnormalities surveyed in March 1946 is shown in Table III.

The same investigations were tried on 20 cases which were in concrete buildings.

Even if they were at a distance between 0.5 and 2.0 km from the center, the rate of the damage is lower.

Eight of eleven abnormal cases have recovered (72.7%). Table IV shows the time of recovery, or the second month of appearing menstruation that repeats over two times at regular intervals.

As shown in Table V, originally irregular cases were 36 in total, 28 of these cases still remained irregular and 8 became regular. This fact should be due rather to the development of their daily life, comparing with that of the hard war-time than to the bombing effect. And it is remarkable that the recovery of full adults' group is more eminent than that of younger or older groups.

Before March 1946, seven among thirty cases of lactational amenorrhea had recovered, but we can induce nothing from these results. For about pregnancy, at the time of the bombing most of the pregnant women had already removed to the safe country-sides, and in the city they were so few that we could get but 72 cases. Table VI indicates the lunar months at that time, and Table VII the relation to the distance. The threatened abortion happened about 2 cases of them, but were safe in their progress. The cases of spontaneous abortions were 4, and artificial abortions 2. All other cases were normal and 18 of them have delivered without any particular hindrance throughout both the labor and puerperium, and for about the new borns, we have nothing to be noticed except the following three cases: a child died of asphyxia caused by breech presentation; two cases of 9th month's deliveries on the next day and in 2 weeks after bombing caused by diarrhea.

With the only one female autopsy case, we got nothing can be discussed about the pathologic changes of ovary. Nevertheless, by Dr. Miyake, ovary is observed atrophic in general, poor in primordial ovals, and the fall of membrana granulosa of Graafian follicle is reported.

And by some cases in a recovery course, primordial ovals were said to be normal, but Graafian follicle to be yet atrophic.

Twenty-six relatively serious cases were examined gynecologically and found 2 slightly smaller uteri, 2 slightly bigger uteri, and 4 retroflexed uteri, these abnormal cases were 8 in total, and about the other 18 cases nothing pathologic was found. But those changes of the uterus are not important and mean nothing. Test Abrasio mucosae was tried toward above mentioned 26 cases. One of them showed a tuberculous endometritis and its phase of menstrual cycle could not be defined. Sixteen of them showed post menstrual phases, 10 of these were in beginning stadium, 3 in middle stadium and 3 in end stadium of their phase. Four of 26 cases showed intermenstrual phase, 3 of these were in beginning stadium and one was in end stadium of their phase. Specimens of other 5 cases were so small that we could not define their phases.

As to the endometrium of 11 continuous amenorrhea cases, the estimated phase at the bombed time did not correspond to the actual phase shown by the specimens. Over half of them showed the beginning or middle stadium of post menstrual phase.

Endometrium itself was generally thin and atrophic.

On the recovery cases, the estimated phase and the phase diagnosed by specimens were well correspondent.

TABLE I

Relation between the menstrual types and the distance from the bombing center.

Distance	Type	Normal			Abnormal		Total of Abnormal Cases (%)	Total Cases
	I	(%)	II	III	IV	V		
0.5	0		1	2	0	1	4(100.0)	4
0.6 -1.0	5(20.8)		11	4	2	2	19(79.2)	24
1.1 -1.5	21(24.7)		34	22	4	4	64(75.3)	65
1.6 -2.0	27(25.5)		39	26	5	9	79(74.5)	106
2.1 -2.5	32(40.5)		23	12	3	9	47(59.5)	79
2.6 -3.0	18(56.2)		8	1	2	3	14(43.8)	32
3.1 -3.5	4(57.1)		1	1	1	0	3(42.9)	7
3.6 -4.0	1		1	0	0	0	1	2
4.1 -4.5	1		0	1	0	0	1	2
4.6 -5.0	2		0	0	0	0	0	2
Totals	111(32.4)		118	69	17	28	232(67.6)	343

TABLE II

Relation between the Menstrual Type and the Kinds of Injuries

Type Kinds of Injuries	Normal (%)		Abnormal			Totals of abnormal cases (%)	Total Cases
	I	II	III	IV	V		
R	17(23.6)	25	17	6	7	55(76.4)	72
B	33(33.3)	27	23	4	12	66(66.7)	99
I	37(34.6)	42	18	4	6	70(65.4)	107
H	24(36.9)	24	11	3	3	41(63.1)	65
Totals	111(32.4)	118	69	17	28	232(67.6)	343

TABLE III

Relation between the Menstrual Type and the Kinds of Injuries

Type Kinds of Injuries	Normal (%)		Abnormal			Totals of Abnormal Cases (%)	Total Cases
	I	II	III	IV	V		
R	6 (p)1	18(12) (p) 2	5(3)	3(3)	7(6)	33 24(72.7)	39 (p)3
B	20 (p)1	17(15) (p)1	15(13) (p)1	2(2)	9(8)	43 38(88.3)	63 (p)3
I	22	18(15)	4(2)		4(3)	26 20(77.0)	48
H	11	9(7)	4(2)		2(2)	15 11(73.3)	26
Totals	59	62(49)	28(20)	5(5)	22(19)	117 93	176(p)6

Regular numerals indicate the recovery cases by March 1946.

Numbers with a letter (p) indicate the pregnant cases.

TABLE IV

Times of Recoveries Concerning the Abnormal Cases

Distance	Sept.	Oct.	Nov.	Dec.	January	Feb.	March	Total Cases
0.5 k.m.	:	:	:	:	:	:	:	:
0.6 - 1.0	1	2 1*	1	1 1*	1	1*	:	6 3*
1.1 - 1.5	:	7 1* 2*	4 9	4 1*	4	4	:	23 36 1 5*
1.6 - 2.0	2	*p. 2	*p 1	7	6	3	:	*p 3
2.1 - 2.5	4	6	7	1	3	1	:	22
2.6 - 3.0	1	1	2	2	3	:	:	6
3.1 - 3.5	:	:	:	:	:	:	:	:
3.6 - 4.0	:	:	:	:	:	:	:	:
4.1 - 4.5	:	:	:	:	:	:	:	:
4.5 - 5.0	:	:	:	:	:	:	:	:
Totals	8	25 3*	23 1*	15	14 2*	3*	8	93 8*

* Figures in second column indicate the cases in concrete buildings.

TABLE V
Influence upon originally irregular cases

	Cases still remaining irregular	Cases becoming regular & recovering from amenorrhea	Total Cases
Adult (18-45th yr.)	16	7	23
Under 18th yr.	6	1	7
Advanced in age above 46th yr.	6	0	6
Totals	28	8	36

TABLE VI
Lunar months at time of bombing

Lunar mos.	Cases
1st	4 2 spontaneous abortions, one in 3rd month, other in 4th month.
2nd	16 one artificial abortion in 6th month; 2 spontaneous abortions, one in 4th month, other in 5th.
3rd	16 one threatened abortion, but further pregnant safe.
4th	9 one artificial abortion in 8th month. Child showed no abnormality.
5th	4 one threatened abortion, but further pregnant safe.
6th	8
7th	3
8th	2
9th	5
10th	5
Totals	72

TABLE VII

Pregnant Cases Classified by Distance

Distance	Cases
0.5 km.	1 Threatened abortion, but was safe in further pregnancy.
0.6 - 1.0	2
1.1 - 1.5	10
1.6 - 2.0	16 One threatened abortion, but was safe in further pregnancy.
2.1 - 2.5	20 Two artificial abortions in 8th and 6th month. Two spontaneous abortions.
2.6 - 3.0	11
3.1 - 3.5	1
3.6 - 4.0	4 One spontaneous abortion.
4.1 - 5.0	3
unknown	4
S. Totals	72

MONTHLY REPORT - September 1, 1946

The Works of the Medical Section of the Special Committee for the Investigation of the Effects of the Atomic Bomb, the National Research Council in Japan

(Dr. Masao Tsuzuki, ex-professor of the Tokyo Imperial University)

N. B. The Medical Section sent a note to the Joint Commission on June 25, 1946, concerning the following affairs:

1. The printing of the official report of the National Research Council in Japan.
2. The publication of the scientific reports of the Japanese investigators.
3. The further management of the Japanese Government Group.

Since no reply has yet been received, the monthly reports dated on July 1 and August 1 therefore were not presented.

I. The Field Works

1. An American party came and studied the after effects. Col. James Cooney, Capt. Douglas Wake, Lt. Melvin A. Block, USA, MC, and Lt. Edgar Snow, USNR, arrived Tokyo on August 10 from Bikini. Dr. Tsuzuki was asked to take care of them, to arrange for their study on the after effects of the atomic bomb at Hiroshima and Nagasaki. A special meeting was held on August 14 at Tokyo Imperial University, many Japanese doctors were present and had a round table talking on the atomic bomb effects.

The party made a one week trip to Hiroshima and Nagasaki. Dr. Tsuzuki accompanied and explained the general condition of both cities. They visited hospitals and studied patients who were treated on some sequelae, most of them were after effects of burns - contractures, keloids, etc. Capt. Wake and Lt. Block stayed in several days at both cities and studied; they made a special survey on the inhabitants of the Nishiyama district, Nagasaki, and confirmed there were still some cases of leucocytosis probably caused by the continuous radioactivity of the fallen fission fragments.

2. The medical party of the Kyoto Imperial University was sent to Hiroshima and made a survey on the after effects of the atomic bomb from August 19 to 31, 1946.

II. The Laboratory Works

1. The provisional official report of the Medical Section consists of 4 parts:

(1) Medical studies of the effects of the atomic bomb (a general view), by Dr. Masao Tsuzuki, Tokyo Imperial University.

(2) Clinics of the atomic bomb radiation sickness, by Dr. Kanshi Sassa, Tokyo Imperial University.

(3) Radioactivity of atomic bomb, from the medical point of view, by Dr. Masaneri Nakaizumi, Tokyo Imperial University.

(4) Patho-anatomical studies on the atomic bomb cases, by Dr. Ryojun Kinoshita, Osaka Imperial University, and Dr. Masachi Miyake, Tokyo Imperial University.

2. The provisional official report is now finished and going to deliver among the principal members of the Medical Section. In October the staff meeting will be held and discuss the report thoroughly again. The final official report will be prepared then.

III. The Reports which are finished and presented to the Joint Commission through Capt. D. Wake, who will leave Tokyo for Washington on September 10.

1. Case reports of patients caused by the atomic bomb: by Dr. K. Nakagawa. Dermato-Urological Clinic, Kyoto Medical College.

2. Report of the Patho-anatomical studies on the subacute atomic bomb cases at Nagasaki, by Dr. T. Yamori, Yamaguchi Medical School.

3. Additional report on the pathologic anatomic changes in the atomic bomb disease, by Dr. K. Ono and Dr. T. Imai, Kyushu Imp. Univ.

4. The influence of the atomic bomb upon the functions of the female genital organs, by Dr. S. Mitani and others, Tokyo Imp. Univ.

5. Report on the medical studies of the effects of the atomic bomb (one part of the provisional official report of the Medical Section), by Dr. M. Tsuzuki, Tokyo Imp. Univ.