

# Healthcare in COVID-19 Pandemic

Japan Medical Association

#### Respond to COVID-19 and Emerging infectious diseases

- The COVID-19 pandemic has not yet settled, even at its third year. Prime Minister Fumio Kishida has announced that the government will create a Japanese version CDC, which the JMA has long requested.
- In order to secure healthcare delivery system in the event of an infectious disease, it is important to have discussions from ordinary times according to the actual conditions of the region in preparation for an emergency during the spread.
- Emerging infectious diseases that are expected to occur in the future.
- Based on the COVID-19 experiences, the JMA will promote various preparations including thorough prevention, establishment of treatment methods, enhancement of testing system, establishment of initial response system, strengthening of hospitalization system, and securing of beds.

#### **Activities of Local Medical Associations - Infectious Disease Control**

#### JMA

- Provide information and requesting support
- Negotiate with the government (system reform, system building, financial support, etc.)

Getting involved with local communities

**Prevention and Initial** response

- •Reach out to residents and patients (how to get medical care, prevention methods, health guidance, etc.)
- •Early identification and sharing of infection trends
- Vaccinations
- •Building systems for flu season and holiday seasons such as the New Year holidays and long holidays
- •Outpatient testing and the support for hotel/home care

Disseminate the latest knowledge/information to clinical practice

 National and prefectural policies on infection spread prevention and healthcare delivery systems

**Function-based** role sharing and healthcare delivery system building

**Outpatient clinics for fever, tests** Severe/moderate/mild/asymptomatic **Logistical support Sequelae (post-illness symptoms)** 

Vaccines, tests, and treatment methods

• Financial support measures

Local Medical Associations

Collaborate with government agencies (Public Health Centers, prefectural coordination HQs, fire departments, etc.)

Medical support activities by JMA Disaster Medical Teams (JMAT) in disaster areas

(Do NOT bring in infectious diseases to a disaster area, and do NOT get infected at a dispatched area)

**Enhance activities** for which infection control is essential

**Coordinate** patient transfer/transport

# Measures to Improve the Situation Following the Rapid Spread of COVID-19

July 27, 2022

In collaboration with local resources to	
Build systems with a triage function in a community	<ul> <li>In collaboration with local governments:</li> <li>enhance the functions of telephone consultation centers and provide triage for those who require professional attention to ensure that they receive medical care</li> <li>build a system for patients under home care to provide points to note and help relieve their anxiety</li> </ul>
Work assignment at community outpatient/test centers	Members work at outpatient/test centers to contribute to increasing the testing capacity in a community
Follow-up for the home care patients	Clinical practice-clinics and hospitals alike- are under extreme pressure with limited capacity to space; however, they will attempt their best to respond to requests from home care patients.
Collaboration between elderly facilities and cooperating medical institutions	Initial response is important in order to prevent large clusters. Governments should prepare emergency support medical team dispatch systems. Cooperating medical institutions should collaborate and share information with the facilities in advance.

## Expanding and publicizing medical facilities for medical treatment and testing, and cooperating in accepting early patient discharge

#### 2022

From mid-January: Infection spreads rapidly due to the epidemic of "Omicron variant". The 6th wave of COVID-19 arrived. (new infections, maximum 104,000)

- February 1: Minister of Health, Labor and Welfare, Goto, requested cooperation from the JMA to expand outpatient clinics for fevers, promote vaccination, and accept early patient discharge.
- February 8: In response to the Minister's request, the JMA asked the prefectural medical associations, according to the local conditions, to "proactively announce medical institutions for medical treatment and testing", "expanding the acceptance of fever outpatient treatment", "cooperation with new medical institutions for medical treatment and testing", "promotion of vaccination", and "enhancement of the acceptance system for early patients discharge".
  - As of August 17, there were about 40,000 medical institutions for medical treatment and testing (publication rate of 89% as of April 22).
  - ➤ The number of regional outpatient and examination centers operated by regional medical associations reached 457 facilities.

Source: JMA "Request for cooperation in publicizing medical institutions for medical treatment and testing, expanding the fever outpatient treatment system, promoting vaccination, and accepting early patients' discharges"

Source: Ministry of Health, Labour and Welfare "Number of medical treatment/testing medical institutions and number of local outpatient/testing centers by prefecture" (as of R4.8.17) "Regarding the inspection and strengthening of the inspection, health and healthcare delivery system according to the characteristics of the Omicron strain based on the current infection situations" July 5, 2022

## Cooperation in providing medical support to facilities for the elderly

#### 2022

- February 17: Round-table conference with Prime Minister Kishida and medical personnel. The Prime Minister had set five goals: "Accelerate vaccination," "Strengthen response to outpatient and home care," "Dispatch medical personnel," "Promote hospital transfers and acceptance of ambulance transport," and "Strengthen the medical system at facilities for the elderly". He requested cooperation in implementing said goals.
- February 22: In response to a request from the Prime Minister, the JMA had requested prefectural medical associations to provide medical support to facilities for the elderly (matching and dispatching support physicians and nursing staff in the event of a cluster outbreak, admission to hospitals for mild cases not requiring hospitalization, etc.). (e.g., receiving medical treatment in the facility of the patient, acceptance of patients who meet the discharge criteria, etc.)

Meanwhile, the JMA stated that it would implement a subsidy project for the "Coordination Support Project for Securing Beds for New Coronavirus Infectious Disease Patients" by the "Council for Securing Beds for New Coronavirus Infectious Disease Patients" jointly established by the JMA and hospital organizations. The JMA was also to devote efforts to secure human resources, including support for related training.

# Request for cooperation in responding to the increase in new infections

#### 2022

Beginning of July: The number of new infections surged again. The sublineage BA.2 of the Omicron variant, which was the mainstream of the 6th wave, has been replaced by the sublineage BA.5, which is more infectious, causing the 7th wave to arise (up to 260,000 newly infected).

- July 7: In response to the rapid increase in the number of new infections nationwide, the JMA requested the cooperation of both prefectural and municipal medical associations on maintaining the current system as well as the following points:
- ① Close cooperation with prefectural/municipal governments, medical supervisors, etc.
- ② Securing of beds for infected patients and rapid conversion to hospital beds upon request
- ③ Establishment of logistics support system
- 4 Expansion of medical institutions for medical treatment/consultation centers, and medical institutions for health observation/treatment for home care patients (including public announcement)
- ⑤ Confirmation and improvement of the substantive role of cooperating medical institutions for facilities for the elderly, among others. Strengthening of the support system
- © Cooperating with the development of temporary medical establishments and waiting-list facilities
- 7 Medical care system for post-morbid symptoms (long-term effects)
- ® Development of a healthcare delivery system that shares ordinary medical care besides corona medical care

# Further cooperation against the rapid spread of new coronavirus infections

#### 2022

July 22: Prime Minister Kishida and the President of the JMA, Dr. Kichiro Matsumoto held a meeting. To avoid confusion in fever outpatient clinics due to the rapid increase in the number of infected people, the Prime Minister requested those who have symptoms - such as fever - to undergo the self-testing - he will provide - using antigen qualitative test kits instead of visiting said clinics so that they can receive necessary health observations.

In response to the request for cooperation, JMA will cooperate as much as possible, and asked the Prime Minister for his understanding in regard to the pressure some medical supply system areas were under.

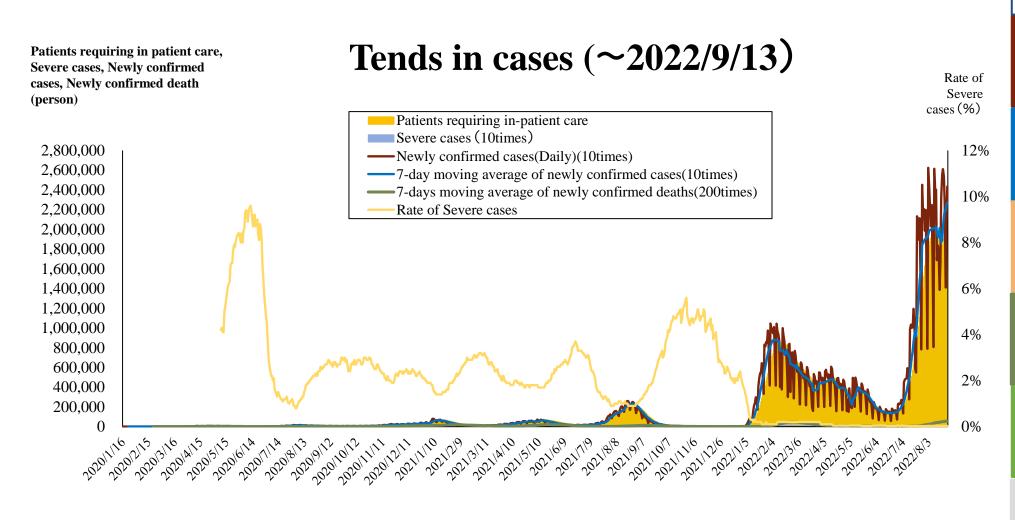
July 22: In response to the Prime Minister's request, the JMA asked the prefectural medical associations and municipal medical associations to "increase the number of medical institutions that can handle patients on weekends, including Saturdays and Sundays,". The JMA also requested cooperation regarding "Strengthening the system for those who have symptoms - such as fever - to undergo self-examination using an antigen qualitative test kit instead of visiting a fever outpatient clinic".

## Strengthening of fever outpatient treatment system

- July 22: In response to a request from Prime Minister Kishida, the JMA sent a request letter to both prefectural and municipal medical associations requesting further cooperation in response to the rapid spread of the new coronavirus infection.
- July 27: The JMA re-request to prefectural and municipal medical associations to further strengthen the fever outpatient treatment system.
  - The JMA requested medical institutions to work in shifts at regional/outpatient testing centers run by regional medical associations and fever outpatient clinics at core hospitals, in case these medical institutions cannot be designated as medical examination/testing institutions for structural reasons or because there are patients at risk of aggravation. They will respond to fever patients other than Kakaritsuke patients, among others, and conduct fever outpatient clinics on weekends, holidays, and during the Obon period.
- August 10: In response to a demand from Minister of Health, Labor and Welfare, Goto, JMA asked prefectural and municipal medical associations to "secure a system of medical institutions for medical treatment and examinations", "publishing facilities where medical examinations and tests are available" and "opening fever outpatient clinics" during the Obon period.

## COVID-19 Vaccination status in Japan

#### **COVID-19 situation in Japan**



Source: MHLW, 99th New Coronavirus Infectious Disease Control Advisory Board (September 14, 2022) "[Document 2-1] Latest infection status, etc."

Changes in the number of newly confirmed cases (daily)" (September 13, 2022 edition)

The number of severe cases in some prefectures is calculated using figures announced according to the prefecture's own standards, and does not include patients who require management in an intensive care unit (ICU), etc.

As of Sept..13

Newly Confirmed Cases 87,548 preceding week 112,175

7-day moving average of newly confirmed cases 93,753 preceding week 122,768

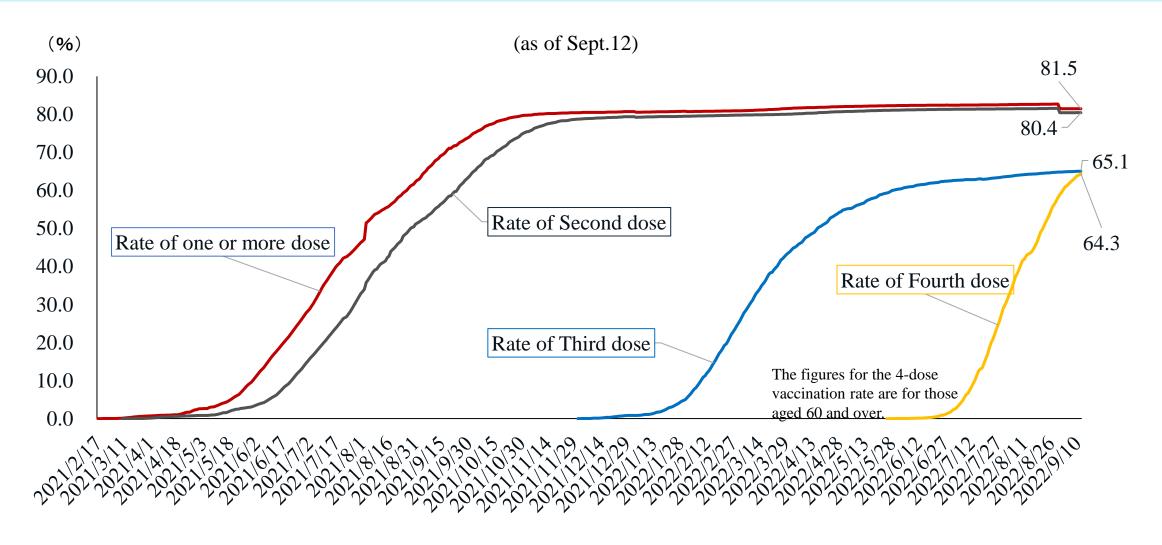
Patients requiring inpatient care 871,058 preceding week 1,385,889

7-day moving average of newly confirmed deaths 201 preceding week 287

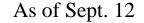
Rate of Severe Cases 0.04% Preceding week 0.03%

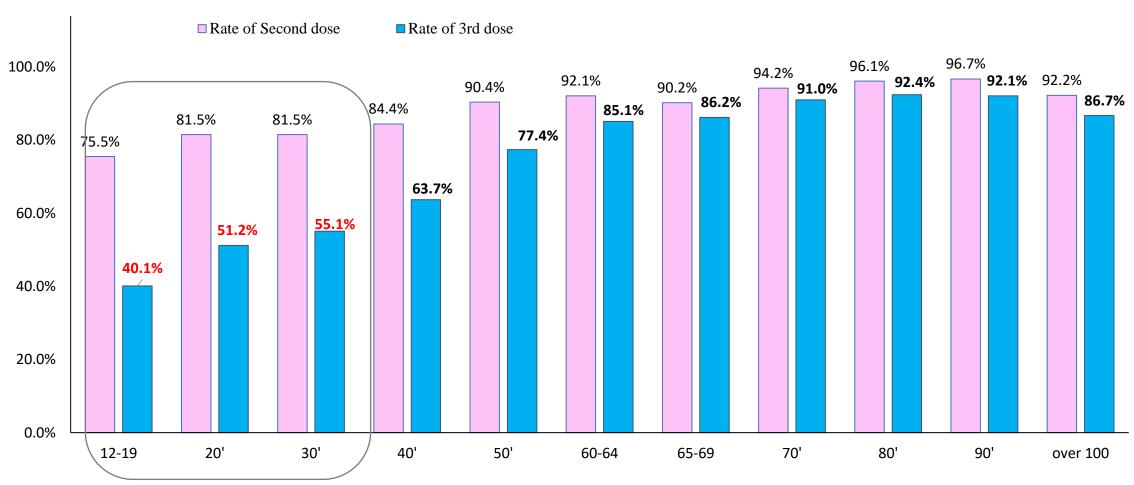
Severe Cases 376 preceding week 474

# Trends in the Rate of COVID-19 Vaccination -First dose, Booster dose



## Comparison of the rate of 2nd and 3rd dose by age group

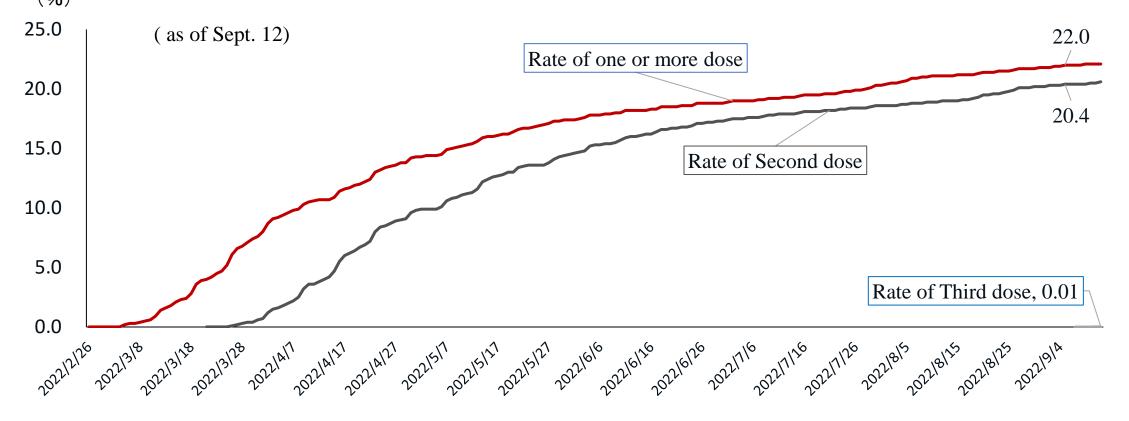




Prime Minister's Official Residence "Actual results by age group", "Actual results of the third dose rate by age group (by prefecture)". Announced on September 12, 2022

## Trends in COVID-19 Vaccination rates for 5–11-year-old

➤ About half a year has passed since the start of vaccination against the new coronavirus for 5–11-year-old, but the completion rate of the first dose remains at about 20%, and growth is sluggish. The third dose can be given from September 6th.



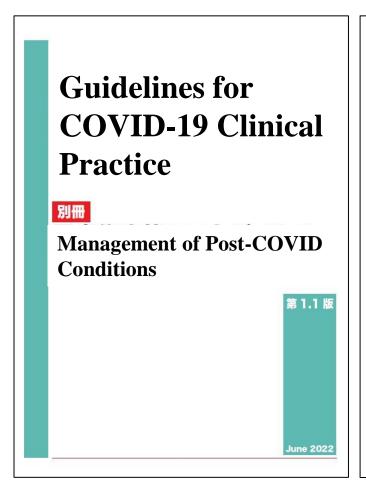
# **Current Status of Post-COVID Conditions in Japan**

#### Post-COVID Conditions in Japan Efforts for Elucidation

- The "post-COVID conditions" refers to the presence of so-called persistent or lingering symptoms and is also called a "long COVID." Procedures for treating and caring for patients with post-COVID conditions are not standardized.
- In Japan, Ministry of Health, Labour and Welfare (MHLW) has published Management of Post-COVID Conditions (June 2022, Edition 1.1) as a treatment guide for post-COVID conditions, in which current scientific findings by experts in various fields are summarized.
- In addition, 3 large-scale studies on post-COVID conditions are in progress under the Health and Labor Sciences Research program. The studies are about "Understanding the reality and pathophysiology of long-term complications of COVID-19," "Reality and predictive factors of prolonged subjective and objective symptoms (so-called sequelae) of moderate or severe COVID-19, especially relating to the respiratory system," and "mechanisms, epidemiology, and prognosis of olfactory and taste disorders due to COVID-19."

#### **Management of Post-COVID Conditions**

- Prepared for the purpose of assisting healthcare professionals by summarizing the approach and follow-up methods for post-COVID conditions.
- The target is all physicians and healthcare professionals (because *kakaritsuke* physicians and specialists will likely collaborate in many cases). It is intended to serve as a reference for various stakeholders because multidisciplinary collaboration will be important for long-term care.
- ➤ It will be revised to incorporate the latest scientific findings at that time. The tentative version was published in December 2021 and then revised in April and June 2022 thereafter.

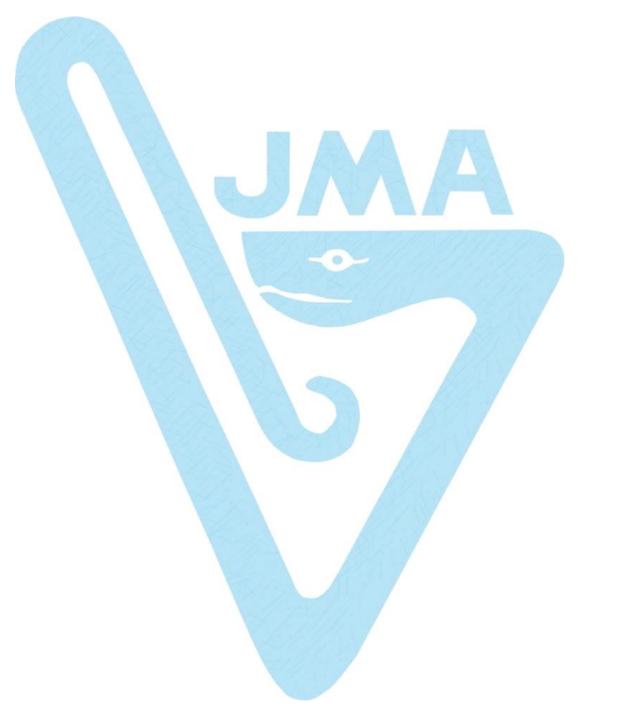


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## **Future Issues** for the Post-COVID Conditions

- Currently, most studies are observational targeting only the infected; <u>epidemiological studies with non-infected individuals as a control group are lacking</u>. In addition, most literatures are pre-peer-review papers, making it <u>difficult to conclude a relationship between each symptom and COVID-19</u>. Furthermore, <u>the non-infected</u>, who are the control group, <u>may be susceptible to various symptoms due to different circumstances</u> under a pandemic.
- ➤ It should also be noted that the study results may differ significantly depending on the presence or absence of a confirmed diagnosis, the age and severity of an infected individual, and the setting of the study population such as patients receiving outpatient care by specialists, patients at homes/hotels, or inpatients.
- ➤ The history of vaccination should also be examined.
- Most post-COVID conditions are expected to improve over time. However, further studies are needed to determine how some post-COVID conditions will change over a longer period of time and how different variants result in different effects.
- ➤ Only a limited number of medical institutions are currently capable of treating patients with post-COVID conditions. There is a need to increase the number of institutions capable of post-COVID care through the effective use of guidelines and training.



Thank you for your attention!