Medical examination of patients with SMON in Tokushima of 2015

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Abstract

A medical examination conducted in Tokushima concerning SMON in 2014 is reported here. There were 28 testees this year. Twenty-two of them had a medical checkup in a group, seven had a medical checkup at home, and two had a medical checkup in Tokushima National Hospital. This was a similar group of medical examination testees to an average year. There were five elderly people aged over 90. The number of medical examination testees is decreasing gradually as SMON patients age. Measures to increase the number of medical examinations by arranging visits are necessary. A future problem may be that many patients are reluctant to be visited at home.

Keywords: SMON in Tokushima, medical checkup, Tokushima National Hospital

Introduction

The sale of chinoform was halted 45 years ago. Subsequently, no new SMON cases were reported. Also, the number of SMON patients decreases with the course. The weathering measures of the SMON are performed as activity such as "gathering workshops of the SMON". We have been checking on the SMON patients in Tokushima every year for many years. In this study, the results for 2015 are reported. Subjects and methods. The subjects were patients with SMON who were resident in Tokushima and enrolled in an SMON investigation individual vote. We conducted a mass checkup and at-home examinations. Furthermore, we checked on the patients hospitalized in Tokushima National Hospital and outpatients of the hospital. We went to the large meeting room of the Tokushima-shi handicapped persons interchange plaza. Three examination areas, each with a medical examination desk and an examination couch were prepared in the meeting room. An electronic height measuring instrument, a set of scales and a sphygmomanometer were prepared for the physical measurements. The SMON patients described their physical situation and their present social conditions. Also, a neurological medical examination was conducted.

Results

Thirty people received a medical examination in 2015. They comprised eight men and 18 women. The average age was 81 years old. The average age at which the disease was contracted was 33 years. The mass checkup covered 21 people. Seven people had a medical examination during an at-home visit. The testees in the Tokushima National Hospital outpatient department numbered two people. The hospitalized patients were alone.

Time of contraction of disease. As shown in Table 1, the age of the patients who had a medical checkup at home was the highest. The age of the patients who had a medical checkup in a group was the second highest. The patients who had outpatient consultations were the youngest. The Barthel Index (77.7 points) of the patients who had a medical checkup at home was the lowest. Most of the patients who received home care had family medicine. Frequent complications included cataract, hypertension, and arthropathy. Many patients were aware of forgetfulness but in four patients this was complicated by obvious dementia. There were five elderly people older than 90 years. There was one patient with early onset (onset at 18 years old). One had a part-time job; the other was uneasy about single life in the future.

Discussion

Forty-five years have passed since the sale of the chinoform agent was halted in (1970) in 1970 [1]. As a result, it is over 41 years since SMON patients began to contract the disease. The average disease contraction time of SMON patients in Tokushima prefecture is 44 years. The average age of the testees was 81. The number of patients in 1972 when a meeting (the patients' association) of Tokushima SMON patients was organized was 155. The medical examination results that we examined corresponded to the national tendency of the average year. Most patients had family medicine. Even if the patients were living alone, a nearby doctor could be contacted in an emergency. Four patients were over 90 years old. Three people used nursing care insurance. Furthermore, they received close support from family members. There were two women with young onset (18 years old). The Barthel Index scores for them were 90 and 100 points. The degree of their disorder was very mild. As well as support in terms of food, clothing and shelter, mental support seemed to be needed. The weathering measures of the SMON are performed as activity such as "gathering workshops of the SMON" positively in this study squad. The number of medical examination testees of the aging is shown in (Table 1). A mass checkup in the Tokushima public health center began in 1990. More than forty people participated constantly from 1999. In 2011, the number of people having an examination decreased. This may be associated with a decrease in the number of testees to have changed a place in a medical examination this year. However, a decrease in the number of testees due to aging is likely to be the main factor. The number of medical examinations conducted at home should be increased.

Reference

1. Konagaya M. SMON: Origin of side-effects of chemical medicine. Iryo. 2009;63:227-234.

Barthel Index

82.4

33.3

95

-

66

-

		Patients		
	Men	Women	Total	age
Mass checkup	8	13	21	81
Checkup at home	0	3	3	90

0

0

Outpatient department

Hospitalization

2

0

2

0

Table 1. Patients with SMON that received a medical examination