Medical examination of patients with SMON in Tokushima of 2022

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Abstract

A medical examination of the SMON in Tokushima of 2022 was reported. There were 22 testees this year. twenty-two of them had a medical checkup in a telephone, and zero had a medical checkup in Tokushima National Hospital. This was a similar group of medical examination testees to an average year. There were four elderly people aged over 90. A medical examination testee decreases gradually with aging of SMON patients. 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 47 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 2022 are reported. Subjects and methods. The subjects were patients with SMON who are resident in Tokushima and enrolled in an SMON investigation individual vote. In order to prevent the spread of the new coronavirus infection, we did not perform mass checkups and carried out telephone checkups. Furthermore, we checked on the patients hospitalized and in Tokushima National Hospital outpatients of the hospital. The physical situation and the present social conditions were described by the SMON patients. Also, a neurological medical examination was conducted.

Results

Twenty-two people received a medical examination in 2022. They comprised 7 men and 15 women. The average age was 80 years old. The average age at which the disease was contracted was 29 years. The telephone checkup covered 22 people. There were of

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Table 1. Patients with SMON that received a medical examination

	Patients			Mean age	Barthel Index
	Men	Women	Total		
Mass checkup	0	0	0	-	-
Checkup at home	0	0	0	-	-
Outpatient department	0	0	0	-	-
Hospitalization	2	4	6	82.6	45.8
Telephone checkup	5	11	16	82.6	51.5

among them the hospitalized patients six people. Zero people had a medical examination during an at-home visit. The testees in the Tokushima National Hospital outpatient department numbered zero people.

Time of contraction of disease. The Barthel Index (0pints) of the patients who had a medical checkup at the hospitalized patients 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 were one patients 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-seven years have passed since the sale of the chinoform agent was halted in (1970) in 1970 [1]. As a result, it is over 42 years since SMON patients began to contract the disease. The average disease contraction time of SMON patients in Tokushima prefecture is 45 years. The average age of the testees was 82. The number of patients in 1972 when a meeting (patients association) of the Tokushima SMON 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. Fore patients were over 90 years old. Thirteen people used nursing care insurance. Furthermore, they received close support from family members. There were one women with young onset (18 years old). The Barthel Index scores for her was 85 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 2020, The novel coronavirus disease (COVID-19), originating from China, has rapidly spread all over the world; so far, a total of 642.92 million infected cases and 6620,000 deaths have been reported due to COVID-19 (World Health Organization, 2022). Countermeasures against this pandemic included quarantine and personal preventive behaviors such as the practice of social distancing, avoiding crowded places, using personal protective equipment, etc.. The outbreak poses unprecedented challenges for patients, clinicians, and the healthcare system. This infection has also dramatically changed the lifestyle of the Japanese people. In many aspects of

medicine, clinicians are responding to the global epidemic by modifying their practices to minimize exposure risks and ensure availability of resources. This infection has also dramatically changed the lifestyle of the Japanese people. It is well known that the elderly are at a higher risk of disease progression. We did not think it wise to conduct SMON screening in the form of mass screening, because all the subjects were elderly. For these reasons, the SMON screening in 2022 was conducted by a neurologist who interviewed patients individually by phone.

The annual group medical checkup was an important opportunity for each patient to gain hope for life by deepening friendship and confiding in each other about their daily problems. For this reason, the patients regretted that the mass checkup could not be held. They hoped that COVID-19 would be resolved and that mass checkups could be conducted in the next year. This year, we renewed our awareness of the importance of SMON mass screening.

Reference

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