

「Record of Discussions」集 (I)

医療協力プロジェクト

〔実施終了分〕

国際協力事業団
医療協力部

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医療協力プロジェクト

[実施終了分]

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国際協力事業団
医療協力部

国際協力事業団

受入 月日 '84. 5. 24	000
登録No. 07481	90
	MC

はじめに

本資料は昭和41年度医療協力事業着手以来（昭和41年度に海外事業部医療協力室設置）昭和50年度までに協力を終了したプロジェクトに関し、相手国政府と取交わした合意議事録を総集した内容のものであり、先に発刊した昭和51年度において協力実施中プロジェクトの合意議事録集NO（Ⅱ）と一体をなすものであります。本資料が医療協力事業の過去の協力効果の測定、分析調査及び資料作成等に当り、医療協力業務関係者に、直接的、間接的に役立つ又、参考となれば幸甚に存じます。

昭和51年7月

国際協力事業団
医療協力部
部長 山本二郎

I. 医療協カプロジェクト事業

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1. コロンボ計画

医療協力事業国別プロジェクト別協力実施状況経緯表（R/D締結分のみ）

計画名	区分		着手年度	終了年度	協力終了年度	昭和40年度	昭和41年度	昭和42年度	昭和43年度	昭和44年度	昭和45年度	昭和46年度	昭和47年度	昭和48年度	昭和49年度	昭和50年度	備考	
	国名	プロジェクト名																
コ ロ 国	(1)	① カソリック医科大学 産業医学センター	46	48	50							(第一回R/D) △ 実施		(第二回R/D) △ (計画打合せ)				昭和46年8月の実施調査団の派遣に基づきプロジェクト事業として協力を開始する。
		② 寄生虫（撲滅） 対策	43	48	50				(第一回R/D) △ 実施				(第二回R/D) △ (計画打合せ)					昭和43年6月の実施調査団の派遣に基づきプロジェクト事業として協力を開始する。
		③ 癌対策	43	48	50				(第一回R/D) △ 実施				(第二回R/D) △ (計画打合せ)					
フ イ リ ビ ン	(2)	① コレラ（撲滅） 対策	42	48	50			(第一回R/D) △ 実施		(第二回R/D) △ 計画打合せ			(第三回R/D) △ 計画打合せ					昭和42年度の日・比両国の厚生大臣会議により協力のアウト・ラインを決定し、同年10月の実施調査団によってオペレーション・プランを取決め協力を行った。
		② ポリオ対策	42	48	49			(第一回R/D) △ 実施		(第二回R/D) △ 計画打合せ			(第三回R/D) △ 計画打合せ					日・比WHO共同研究の為単発の専門家派遣を実施し、昭和42年度の実施調査団の派遣に基づき、コロポ計画による医療協力プロジェクト事業として開始する。
	(3)南 ウ イ エ ト ナ ム	① サイゴン病院	41	49	50									(第一回R/D) △ 実施				昭和41年度に単発の専門家派遣事業に着手したことにより、プロジェクト事業として協力を実施する。

計画名	区分		着手年度	終了年度	協力終了年度	昭和40年度	昭和41年度	昭和42年度	昭和43年度	昭和44年度	昭和45年度	昭和46年度	昭和47年度	昭和48年度	昭和49年度	昭和50年度	備考	
	国名	プロジェクト名																
コロナ	(3)	南ヴェトナム ② チョーライ病院	41	48	49		計画打合せ	交換公文	交換公文 計画打合せ					業務調査			コロナ計画に基づき単発の専門家派遣事業を実施し、昭和42年度に締結した交換公文に基づき本格的にプロジェクト方式による医療協力事業を開始する。	
	(4)	ラオス タゴン医療センター (旧タゴン診療所)	43	49	50							(第一回R/D) 実施			計画打合せ (エビエーション)		昭和43年度単発の専門家派遣事業を実施したことにより以後プロジェクト事業化して協力を実施	
		① ウイルスセンター	36	47	50				(第一回R/D) 東京	(第二回R/D) 計画打合せ		欠除 (第三回R/D) 計画打合せ	(第四回R/D) 計画打合せ					昭和36年度の日・タイ両国政府の技術協力協定に基づき協力を着手、以後プロジェクト事業として協力を実施
		⑤ ラマチボディ医科大学 眼科部門	43	47	50				(事前的調査)		(第一回R/D) 実施							昭和46年2月の実施調査団の派遣に基づきプロジェクト事業として協力を開始する。
		⑥ ラマチボディ医科大学 実験病理部門	44	47	49				(第一回R/D)		(第二回R/D) 実施							昭和44年1月の専門家派遣に基づきプロジェクト事業として開始する。
		③ 薬品研究所	43	47	49				(第一回R/D) 東京	(第二回R/D) 計画打合せ		(第三回R/D) 計画打合せ	(第四回R/D) 計画打合せ					昭和43年6月東京において署名されたR/Dに基づきプロジェクト事業として開始する。
	④ 国立病院 (診療団)	41	44	-			(第一回R/D) 実施										昭和41年8月の実施調査団の派遣に基づき、診療チームを中心に協力を実施する。	

計 画 名	区 分		着 手 年 度	終 了 年 度	フ コ ロ ー ア ン 年 度	昭 和 4 0 年 度	昭 和 4 1 年 度	昭 和 4 2 年 度	昭 和 4 3 年 度	昭 和 4 4 年 度	昭 和 4 5 年 度	昭 和 4 6 年 度	昭 和 4 7 年 度	昭 和 4 8 年 度	昭 和 4 9 年 度	昭 和 5 0 年 度	備 考	
	国 名	プ ロ ジ ェ ク ト 名																
コ ロ ン ボ ン	(6) ク メ ー ル (旧 カ ン ボ ヂ ア)	医 療 セ ン タ ー	34	45	-		⊙ 交換公文			⊙ 交換公文	× 協力中途打ち切り						カンボジア国内乱に基づいて 協力を打切る。	
	(7) ビ ル マ	ウ イ ル ス セ ン タ ー (ウ イ ル ス 研 究 所)	42	46	48			(第 一 回 R/D) △ 実 施										昭和42年7月の実施調査団 の派遣に基づきプロジェクト 事業として協力を開始する。
	(8) マ レ ー シ ア	① 診 療 団	41	42	-		(第 一 回 R/D) △ 実 施											昭和42年1月の大洪水によ り42年2月診療団を派遣し て医療協力事業の協力を実施 する。
	(9) イ ン ド ネ シ ア	① イ ン ド ネ シ ア 大 学 附 属 パ ー サ ハ バ ダ ン 病 院 胸 部 外 科 部 門	44	46	48							(第 一 回 R/D) △						研修員受入事業により医療協 力プロジェクト事業として協 力を実施するに至る。
		② 同 上 心 臓 外 科 部 門	43	45	47													昭和42年から単発専門家派 遣事業より着手、プロジェク ト事業化して協力を実施する に至る。
		③ 西 部 ジャ ワ 中 央 総 合 病 院	43	45	47			△ 実 施		(第 一 回 R/D) △ 計 画 打 合 せ		(第 二 回 R/D) △						昭和42年度に派遣した実施 調査団により次年度よりプロ ジェクト事業として協力を実 施する。
		④ バ ジャ ジャ ラン 大 学 歯 学 部	41	46	48								(第 一 回 R/D) △					昭和42年度から単発専門家 派遣事業より着手、プロジェ クト事業化して協力を実施す るに至る。
	⑤ ア ン ボ ン 結 核 マ ラ リ ア 対 策	43	48	49				(第 一 回 R/D) △ 実 施			欠 除 (第 二 回 R/D) △ 計 画 打 合 せ						昭和43年度に派遣した実施 調査団によりプロジェクト事 業として協力を実施する。	

計画名	区分		着手年度	終了年度	協力終了年度 フォローアップ	昭和40年度	昭和41年度	昭和42年度	昭和43年度	昭和44年度	昭和45年度	昭和46年度	昭和47年度	昭和48年度	昭和49年度	昭和50年度	備考		
	国名	プロジェクト名																	
コ ロ ン ボ	イ(9) インドネシア	㊦ インドネシア大学附属 ジャカルタ中央病院 臨床検査部門	47	49	50							(第一回R/D) △ 基礎 △ 実施						昭和46年8月に派遣した実施調査団によりプロジェクト事業として協力を実施する。	
	ネ(10) ネパール	結核・天然痘対策	44	46	-				第一回R/D △ 実施									昭和44年2月の実施調査団によってプロジェクト事業としての協力を取決める。	
	⑪	セイロン総合病院	43	46	-				(第一回R/D) △ 実施										昭和43年8月に派遣した実施調査団によりプロジェクト事業として協力を実施する。
		マラリア対策	43	44	-				(第一回R/D) △ 実施										同上
		セイロン大学医学部	46	-	-						(第一回R/D) △ 実施								昭和45年12月に派遣した実施調査団により電顕部門にプロジェクト事業として協力を実施する。
	⑫ イ ラ ン	ポリオ対策	42	43	-				(第一回R/D) △ 実施	(第二回R/D) △ 実施	(第三回R/D) △ 実施								昭和42年7月に派遣された実施調査団によりプロジェクト事業として協力を実施する。
		テヘラン大学 公衆衛生学部	42	44	45				(第一回R/D) △ 実施										昭和42年7月に派遣した実施調査団により同学部に対してプロジェクト事業として協力を実施する。

(1) 韓 国

- ① カソリック医科大学
産業医学センター (Catholic Industrial Medical
Center, Catholic College)
- ② 寄生虫 (撲滅) 対策
(The control of Parastic Disease)
- ③ 癌対策
(Cancer Control)

第一回 R/D

団 長 齊藤 一 財団法人労働科学研究所所長

調査期間 46. 8. 1～8. 15 (15日間)

RECORD OF DISCUSSIONS BETWEEN THE MEDICAL SURVEY
TEAM OF THE JAPANESE GOVERNMENT AND THE KOREAN
AUTHORITIES CONCERNED REGARDING TECHNICAL COOPE-
RATION FOR RESEARCH, EDUCATION AND TREATMENT IN
THE FIELD OF OCCUPATIONAL HEALTH.

Both parties, the Japanese Medical Survey Team and the authorities concerned of the Government of the Republic of Korea, desiring to effect technical cooperation for research, education and treatment in the field of occupational health in Korea, have reached the following understandings through their discussions:

1. The Government of Japan shall, in accordance with applicable laws and regulations in force in Japan and within its annual budgetary appropriations, extend the following technical cooperation under the Colombo Plan Scheme to help Catholic Industrial Medical Center, Catholic Medical College, Seoul, Korea, (hereinafter referred to as Catholic Industrial Medical Center) to carry out effectively its activities related to research, education and treatment in the field of occupational health, upon request of the Government of the Republic of Korea:
 - a. Dispatch of Japanese experts to Korea.
 - b. Receiving of Korean personnel engaged in the field concerned for training in Japan.
 - c. Providing of equipments needed by Catholic Industrial Medical Center, for research, education and treatment in the field of occupational health.
2. The Government of the Republic of Korea shall grant the Japanese experts dispatched to Korea privileges, exemptions and benefits no less favorable than those granted to the experts of third countries under the Colombo Plan.

3. The equipments supplied by the Government of Japan shall become the property of the Government of the Republic of Korea upon being delivered c.i.f. at the port of entry to the Korean authorities concerned. The equipments shall be utilized exclusively for the purpose of the technical cooperation mentioned in this record of discussions.
4. The technical cooperation undertakings referred to in the foregoing shall be carried out in three years starting from 1971.
5. The Japanese Medical Survey Team takes note of the request of the Government of the Republic of Korea about the supply of equipments for the amount of US\$600,000.
6. With respect to the detailed schedules of the cooperation for each year, discussions will be held in Seoul between the Japanese experts and the Korean authorities concerned in principle in the first quarter months of the Japanese fiscal year.

The matters recorded herein shall not be binding legally either on the Government of the Republic of Korea or on the Government of Japan, as the final decision is to be made by the two Governments after studying this record of discussions.

Seoul, the 13th Day of August, 1971

(Signed)
Dr. Hajime Saito
Head of the Japanese Medical
Survey Team

(Signed)
Sang Kyu Rhi
Director of Bureau of
Science Education
Ministry of Education
Republic of Korea

(韓国カソリック医科大学 産業医学センター)

第二回 R/D

団 長 齊藤 一 財団法人労働科学研究所所長

調査期間 48. 10. 1~10. 15 (15日間)

RECORD OF DISCUSSIONS BETWEEN THE JAPANESE MEDICAL SURVEY TEAM AND THE KOREAN AUTHORITIES CONCERNED REGARDING TECHNICAL COOPERATION FOR RESEARCH, EDUCATION AND TREATMENT IN THE FIELD OF OCCUPATIONAL HEALTH.

The Japanese Medical Survey Team and the Korean Authorities concerned, desiring further to effect technical cooperation between the two countries in the field of occupational health in Korea, have reached the following understandings through their discussions.

1. The Government of the Republic of Korea recognizes that a satisfactory achievement has been made through the technical cooperation for the years 1971-1973 (Japanese fiscal year) between the two countries in the field of occupational health under the Colombo Plan.
2. The Government of the Republic of Korea requested further cooperation for the years 1974-1976 (Japanese fiscal year), which would help Catholic Industrial Medical Center, Catholic Medical College, Seoul, Korea to carry out effectively its activities related to research, education and treatment in the field of occupational health.
3. Dr. Saito, Head of the Japanese Medical Survey Team, stated that the request of the Government of the Republic of Korea to undertake a further cooperation for occupational health project for a period of three Japanese fiscal years (1974-1976) would be favorably considered by the Government of Japan in accordance with applicable laws and regulations in force in Japan and within its annual budgetary appropriations.
4. With respect to the field of occupational health referred to in the foregoing, the cooperation undertaking will be carried out in the following forms:

- (1) Dispatch of Japanese medical experts in 1974-1976 (Japanese fiscal year);
- (2) Training of Korean personnel in Japan in 1974-1976 (Japanese fiscal year);
- (3) Providing of equipment for research, education and treatment in the field of occupational health by Japan in 1974 (Japanese fiscal year).

5. The Japanese Medical Survey Team takes note of the request of the Government of the Republic of Korea about the providing of equipment to the amount of ¥60,000,000.

The matters recorded herein shall not be binding legally either on the Government of Japan or on the Government of the Republic of Korea, as the final decision is to be made by the two Governments after studying this record of discussions.

Seoul, the 12th Day of October, 1973

(Signed)

Hajime SAITO, M.D.
Head of the Japanese
Medical Survey Team

(Signed)

Hai Kyung LEE
Director of Bureau of
School Facilities
Ministry of Education
The Republic of Korea

第一回 R / D

団 長 大鶴 正満（新科大学医学部教授）

調査期間 43. 6. 23～7. 6（17日間）

RECORD OF DISCUSSIONS BETWEEN THE MEDICAL SURVEY
TEAM OF THE JAPANESE GOVERNMENT AND THE KOREAN
AUTHORITIES CONCERNED REGARDING THE TECHNICAL
COOPERATION FOR THE CONTROL OF PARASITIC DISEASES

The Japanese Medical Survey Team for Parasitic Diseases and the Korean authorities concerned, desiring to effect technical cooperation between the two countries in the field of control of parasitic diseases in Korea, have reached the following understandings through discussions;

1. The Government of Japan shall cooperate with the control actions against parasitic diseases in Korea executed by the Korean Association for Parasitic Eradication (KAPE), established in April 1966 by a Korean law to be entrusted by the Government of the Republic of Korea to carry out various duties for parasitic disease control.
2. With a view to implementing the above cooperation, the Government of Japan shall, in accordance with applicable laws and regulations in force in Japan and within its budgetary limit, take necessary measures to dispatch Japanese experts as consultants and advisers to provide materials and equipments to the KAPE, upon request of the Government of the Republic of Korea,
3. The Government of Japan shall bear the necessary expenditure of the experts, such as their salaries and transportation costs between the two countries, while the Korean authorities shall bear the expenses necessary for their travel within Korea on official duty.
4. The Japanese experts shall be granted in the Republic of Korea privileges, exemptions and benefits no less favorable than those granted to the experts of third countries dispatched under the Colombo Plan.

5. The articles referred to in Paragraph 2 above shall become the property of the Government of the Republic of Korea upon being delivered c.i.f. at the port of Pusan or Inchon to the authorities concerned. These articles shall be utilized exclusively for the purpose of the technical cooperation mentioned in this record of discussions.

6. The Government of Japan shall, in accordance with applicable laws and regulations in force in Japan, accept Korean personal engaged in the field concerned for training in Japan for two to four months at the expenses of the Government of Japan, upon request of the Government of the Republic of Korea.

7. Dispatch of the experts, acceptance of the trainees as well as providing of materials and equipments by the Government of Japan referred to above, shall be done under the scheme of the Colombo Plan.

8. The above projects shall be started as soon as possible by the Government of Japan and the Government of the Republic of Korea.

The matters recorded herein shall not be binding legally either on the Government of the Republic of Korea or on the Government of Japan, as the final decision is to be made by the two Governments after studying this Record of Discussions.

Seoul, the 5th day of July, 1968

(Signed)

Dr. Masamitsu Otsuru
Head of the Japanese Medical
Survey
Team for Parasitic Diseases

(Signed)

Taek Il Kim, M.D.
Director of the Public of
Health, the Ministry of
Health and Social Affairs,
the Republic of Korea

㊦ 韩国 寄生虫(撲滅)对策

第二回 R/D

团长 齐藤 一 財団法人労働科学研究所所長

調査期間 46. 8. 1 ~ 8. 15 (15日間)

RECORD OF DISCUSSIONS BETWEEN THE MEDICAL SURVEY
TEAM OF THE JAPANESE GOVERNMENT AND THE KOREAN
AUTHORITIES CONCERNED REGARDING THE TECHNICAL
COOPERATION FOR THE CONTROL OF PARASITIC DISEASES

The Japanese Medical Survey Team and the Korean authorities concerned, desiring further to effect technical cooperation between the two countries in the field of parasitic disease control in Korea, have reached the following understandings through their discussions:

1. The Government of the Republic of Korea recognizes that the satisfactory achievement has been made through the technical cooperation for the years 1968-1970 between the two countries in the field of parasitic disease control under the Colombo Plan.
2. The Government of the Republic of Korea has requested further cooperation for the years 1971-1973, which would help the Korean Association for Parasite Eradication to expedite its long-range self-supporting plan.
3. The Japanese Medical Survey Team has taken note of the desire of the Government of the Republic of Korea for the technical cooperation of the Government of Japan in constructing buildings of laboratory center to attain more effective results in the parasitic disease control.

The matters recorded herein shall not be binding legally either on the Government of the Republic of Korea or on the Government of Japan, as the final decision is to be made by the two Governments after studying this record of discussions.

Seoul, the 13th Day of August, 1971

(Signed)

Dr. Hajime Saito
Head of the Japanese Medical
Survey Team

(Signed)

Myung Hwa Lee, M.D.
Director of Public Health
Bureau
Ministry of Health & Social
Affairs
The Republic of Korea

㊦ 韓国：癌 対 策

第一回 R/D

団 長 吉田 富三 (海外技術協力事業団海外事業部長)

調査期間 43. 6. 23 ~ 7. 6 (17日間)

RECORD OF DISCUSSIONS BETWEEN THE MEDICAL SURVEY
TEAM OF THE JAPANESE GOVERNMENT AND THE KOREAN
AUTHORITIES CONCERNED REGARDING THE TECHNICAL
COOPERATION IN THE FIELD OF CANCER CONTROL

The Japanese Medical Survey Team for Cancer Control and the Korean authorities concerned, desiring to effect technical cooperation between the two countries in the field of cancer control in Korea, have reached the following understandings through their discussions;

1. The Government of Japan shall, in accordance with applicable laws and regulations in force in Japan and within its budgetary limit, take necessary measures to extend its technical cooperation to the Government of the Republic of Korea by dispatching Japanese experts to Korea, by receiving Korean specialists for training in Japan, as well as by providing materials and equipment, upon request of the Government of the Republic of Korea. The said technical cooperation shall be rendered under the Colombo Plan scheme.
2. The Japanese experts mentioned in Paragraph I above shall be granted in the Republic of Korea privileges, exemptions and benefits no less favourable than those granted to the experts of third countries under the Colombo Plan.
3. The providing of materials and equipment mentioned in Paragraph I above shall be done in such a way as to contribute to expanding the facilities for cancer control at the Severance Hospital of the College of Medicine of the Yonsei University in Seoul.
4. The articles referred to in Paragraph 3 above shall become the property of the Government of the Republic of Korea upon being delivered c.i.f. at the port of Pusan and/or Incheon to the authorities concerned. These articles shall be utilized exclusively for the purpose of the technical cooperation mentioned in this record of discussions.

5. The technical cooperation undertakings referred to in the foregoing shall be started as soon as possible between the Government of Japan and the Government of the Republic of Korea.

The matters recorded herein shall not be binding legally either on the Government of the Republic of Korea or on the Government of Japan, as the final decision is to be made by the two Governments after studying this record of discussions.

Seoul, the 5th day of July, 1968

(Signed)

Dr. Tomizo Yoshida
Head of the Japanese
Medical Survey Team for
Cancer Control

(Signed)

Mr. Rhi, Sang Kyu
Director, Bureau of Higher
Education,
Ministry of Education,
Republic of Korea

第二回R/D

団 長 齊藤 一 財団法人労働科学研究所所長

調査期間 46. 8. 1～8. 15 (15日間)

RECORD OF DISCUSSIONS BETWEEN THE MEDICAL SURVEY
TEAM OF THE JAPANESE GOVERNMENT AND THE KOREAN
AUTHORITIES CONCERNED REGARDING THE TECHNICAL
COOPERATION IN THE FIELD OF CANCER CONTROL.

The Japanese Medical Survey Team and the Korean authorities concerned, desiring further to effect technical cooperation in the field of cancer control undertaken between the two countries, have reached the following understandings through their discussions based upon the Record of Discussions signed on 5th July, 1968:

1. The Government of the Republic of Korea has requested the Team to expedite the installation of the Linear Accelerator at the Yonsei Cancer Center.
2. The Government of the Republic of Korea has requested the Team to convey to the Government of Japan that the former Government deemed an additional supply of medical equipments indispensable for effective operation of the Yonsei Cancer Center, although the formal action will be taken as soon as possible. The Japanese Medical Survey Team has taken due note of the request.

The matters recorded herein shall not be binding legally either on the Government of the Republic of Korea or on the Government of Japan, as the final decision is to be made by the two Governments after studying this record of discussions.

3. The equipments supplied by the Government of Japan shall become the property of the Government of the Republic of Korea upon being delivered c.i.f. at the port of entry to the Korean authorities concerned. The equipments shall be utilized exclusively for the purpose of the technical cooperation mentioned in this record of discussions.

4. The technical cooperation undertakings referred to in the foregoing shall be carried out in three years starting from 1971.

5. The Japanese Medical Survey Team takes note of the request of the Government of the Republic of Korea about the supply of equipments for the amount of US\$600,000.

6. With respect to the detailed schedules of the cooperation for each year, discussions will be held in Seoul between the Japanese experts and the Korean authorities concerned in principle in the first quarter months of the Japanese fiscal year.

The matters recorded herein shall not be binding legally either on the Government of the Republic of Korea or on the Government of Japan, as the final decision is to be made by the two Governments after studying this record of discussions.

Seoul, the 13th Day of August, 1971

(Signed)

Dr. Hajime Saito
Head of the Japanese Medical
Survey Team

(Signed)

Sang Kyu Rhi
Director of Bureau of
Science Education
Ministry of Education
Republic of Korea

(2) フィリピン

① コレラ (撲滅) 対策

(Cholera Eradication Project)

② ポリオ対策

(Poliomyelitis Eradication
Project)

① フィリピン：コレラ（撲滅）対策

〔参考〕

日比兩國政府に於けるコレラに関する技術的援助に関する共同コミュニケ
昭和39年2月

JOINT COMMUNIQUE ON THE OUTCOME OF THE TECHNICAL
MEETING ON CHOLERA BETWEEN THE GOVERNMENTS OF
THE REPUBLIC OF THE PHILIPPINES AND JAPAN TOKYO,
25-27 FEBRUARY 1964

The Governments of the Republic of the Philippines and
Japan held the technical meeting on Cholera problems in
Tokyo from the 25th to the 27th of February, 1964.

The meeting was participated in by the following dele-
gates:

DELEGATION OF THE REPUBLIC OF THE PHILIPPINES

H.E. Dr. Floro Dabu	Secretary, Department of Health
Dr. Jesus Azurin	Director, Bureau of Quarantine
Dr. Jacinto Dizin	Chief, Disease Intelligence Center
Dr. Trinidad Pesigan	Director, Bureau of Research and Laboratories

DELEGATION OF JAPAN

H.E. Mr. T. Kobayashi	Minister of Health and Welfare
Dr. E. Wakamatsu	Director of Public Health Bureau
Dr. N. Tatebayashi	Director of Environmental Sanitation Bureau
Mr. M. Kumazaki	Director of Pharmaceutical and Supply Bureau
Mr. Y. Saito	Counsellor for International Affairs

Besides the delegates of both governments, WHO was
represented by Dr. B. Cvjetanovic, Chief Medical Officer,
Bacterial Diseases, Division of Communicable Diseases.
Several Japanese experts were present at the meeting which
discussed the program of collaborative studies on cholera.

The proceedings of the meeting is summarized as follows:

1. Exchange of Information of the Quarantine and the Control Measures.

The delegates of both countries exchanged information of the present status and problems concerning quarantine and control measures against cholera.

Both parties reaffirmed the importance of quarantine measures in preventing the invasion by cholera and agreed that stool examination is necessary to detect cholera carriers. It was agreed further that an efficient and rapid method of detection of carriers be investigated to ensure smooth operation of the international traffic. This exchange of information and views has been highly beneficial for future programmes of control and eradication of cholera.

2. Collaborative studies on the Efficacy of Cholera-Vaccines.

Both governments and WHO have agreed to collaborate in a field-study in the Philippines in an effort to obtain new light on the efficacy of cholera vaccines. It was agreed that experts elaborate further detailed program of field and laboratory studies of cholera vaccines as soon as possible.

It is proposed that Ogonuki oil-adjuvant vaccine developed in Japan, El Tor vaccine and classical cholera vaccine produced in the Philippines be used in these controlled trials on about 500,000 of the population. It was also proposed that Japanese experts take part in the studies in the Philippines in order to cooperate in the study.

3. Collaborative Studies on the Carriers.

Along with the field trial of cholera vaccines in the Philippines it was agreed to carry out collaborative studies on the role of carriers in the transmission of the disease and jointly investigate adequate methods of examination and treatment of carriers.

4. Collaborative Studies on the Viability of El Tor Cholera Vibrio.

It was agreed upon that both governments will continue studies on the viability of El Tor cholera vibrio and prepare jointly scientific documents and thereby evolve eventually practical methods of the prevention of the transmission of cholera El Tor through contaminated foods.

As a result of the present technical meeting, both governments and WHO reaffirmed the importance of wide

international collaboration in view of the prevalence of cholera El Tor in Asia and in order to safeguard the peoples from the threat of this disease.

The two governments and WHO express the common resolve to continue their cooperating endeavor in a cordial and amiable spirit to promote scientific knowledge, international understanding and initiative.

① フィリピン：コレラ（撲滅）対策

[参 考]

日比両国政府に於けるコレラ及びポリオに関する技術的援助に関する合意議事録
昭和42年5月22日

MEMORANDUM OF THE OUTCOME OF THE MINISTERIAL
CONFERENCE BETWEEN THE SECRETARY OF HEALTH OF
THE REPUBLIC OF THE PHILIPPINES AND THE MINISTER
OF HEALTH AND WELFARE OF JAPAN 1967, TOKYO

His Excellency Mr. Hideo Boh, Minister of Health and Welfare of Japan, extended an official invitation to the Hon. Dr. Paulino J. Garcia, Secretary of Health of the Philippines, to discuss mutual problems with great hopes that Japan may be able to contribute to the solution of these problems.

The conference was held at the Ministry of Health and Welfare in Tokyo from 12 to 16 May 1967 with the following delegates from the two countries participating.

DELEGATION OF THE REPUBLIC OF THE PHILIPPINES

His Excellency Dr. Paulino J. Garcia	Secretary of Health
Dr. Jose Caedo	Special Assistant to the President
Dr. Jesus C. Azurin	Director, Bureau of Quarantine

DELEGATION OF JAPAN

His Excellency Mr. Hideo Boh	Minister of Health and Welfare
Mr. Yoshito Ushimaru	Vice-Minister of Health and Welfare
Dr. Ryunosuke Nakahara	Director of Public Health

At the close of the conference several points were discussed, a summary of which are as follows:

1. Cholera El Tor Research Project

This is a productive project cooperatively started in

May 1964. This project is invaluable and has highly gratifying results. It has benefited not only the two participating countries but other nations of the world as well. It is the consensus of opinion that the research project should not only be continued but intensified.

2. Cholera Eradication Program

The application of knowledge gained from these and other researches may now be applied effectively to an eradication program. A cholera eradication program such as the Philippine Government is initiating, shall be given support by the Government of Japan. Should this program succeed the Ministry of Health and Welfare of Japan and health administrations all over the world shall have one worry less-the menace of cholera infection.

3. Poliomyelitis Eradication Program

Poliomyelitis is a continuing, nation-wide problem in the Philippines. Since the institution of a vaccination program at this time can result in the eradication of this disease, it was agreed that Japan should give support to this undertaking.

Since the eradication program will necessarily take a few years, cooperative efforts between the two countries shall continue for several years.

In addition, the need for a research center in various fields of communicable and non-communicable diseases was discussed.

Both governments agree that the objective in the promotion of mutual cooperative efforts is to foster harmonious understanding between the two countries. It was further resolved that the friendly and cordial relations between the peoples of the Philippines and Japan should continue.

Done at Tokyo on this 22nd day of May, 1967

For the Ministry of Health
and Welfare of Japan

For the Department of Health
of the Republic of the
Philippines

Signed

(SGD.) HIDEO BOH
Mr. Hideo Boh
Minister for Health and
Welfare

Signed

(SGD.) PAULINO J. GARCIA, M.D.
Dr. Paulino j. Garcia
Secretary of Health

① フィリピン：コレラ（撲滅）対策

第一回 R/D

団 長 福見 秀雄（国立予防衛生研究所細菌第一部長）

調査期間 42. 10. 25～11. 8（15日間）

PROTOCOL ON THE CHOLERA ERADICATION PROGRAM IN
THE PHILIPPINES

I. Introduction

From an endemic focus in the Celebes group of islands, Cholera spread to the Indonesian main land and finally to Sarawak on 1 July 1961. A month later, Hong Kong and Macal were reported infected. In spite of the strict application of quarantine measures, the first cases were reported in Manila on 22 September 1961. Taiwan, Vietnam, Laos, Cambodia, Burma, Singapore, South Korea, and New Guinea then became infected within a comparatively short time. The infection continued to spread to Southeast Asia, Japan, the Middle East and Southern Russia during a four-year period. The rapidity of the spread of this infection is unparalleled in medical history.

In the Philippines, Cholera El Tor infected Manila and practically all areas of the country. Because the disease is now endemic in the country, it has become a grave public health problem and poses a constant danger to the entire population.

There is a considerable gap in knowledge about the disease. That is why efforts for its prevention and control have not met with success. Research could offer a solution. Realizing this, an agreement was signed on 27 February 1964 in Tokyo by the Minister of Health of Japan, a representative of the World Health Organization and the Secretary of Health of the Philippines to the effect that cooperative efforts in research shall be undertaken. Two months after the agreement, a controlled field study of cholera vaccines was performed in the province of Occidental Negros. An evaluation of the effectiveness of cholera vaccines was made successfully for the first time in medical history. From the data that has now become available, cholera vaccines can and will be improved.

The Joint Research Project has been successful in many other fields and the gap in knowledge on cholera infection has been somewhat bridged. The Joint Research Project is now embarking on a program of cholera eradication in the Philippines. This is a challenge. A program of this sort has never been attempted in an endemic area before. Eminent public health men feel that such a venture is too audacious to meet with any measure of success. However, the Cholera Research Project believes that this is possible. The Philippine Government has shown its support by making cholera eradication the priority in its national health program. The Minister of Health of Japan saw the challenging possibilities of the cholera eradication program and reacted accordingly by involvement. The Government of Japan will support the project as a technical cooperation program under the Colombo Plan. On 12 May 1967, the memoranda of agreement for cooperative efforts between the Philippines and Japan in this program was signed by Secretary of Health Paulino J. Garcia of the Philippines and Minister of Health and Welfare Mr. Hideo Boh of Japan. To implement this agreement the Japanese Government dispatched a survey team on 25 October 1967 to the Philippines to discuss the cooperative program and the plans for the next several years on a continuing basis. The Japanese Panel was headed by Dr. H. Fukumi, Director, National Institute of Health and Dr. H. Ogonuki, Director, Chiba Serum Institute; Dr. Goro Goto, Chief, Communicable Diseases Control Section, Ministry of Health and Welfare and Mr. T. Miura, Overseas Technical Cooperation Agency as members. The Philippine Panel was headed by Dr. J.C. Azurin, Director of the Bureau of Quarantine and Dr. A. Cruz, Director of the Bureau of Health Services, Dr. J. Sumpaico, Acting Director of the Bureau of Research and Laboratories, Dr. J.J. Dizon, Chief, Disease Intelligence Center as members.

II. General Principles

- 1) The Government of Japan shall cooperate by providing equipment and supplies and by detailing experts and technicians to the program in the Philippines.
- 2) The Government of the Philippines shall provide the personnel and funds necessary for the implementation of the program. In addition to this, the Government of the Philippines shall accept the experts and technicians on detail from Japan.

3) Personnel working in the project may undertake further training in Japan shall accept such personnel as may be sent for training from time to time.

4) The Government of the Philippines shall continue to support this program in accordance with this plan. The Government of Japan, on the other hand, shall support this program from year to year as stated in Item No. 1.

III. Plan of Operation

1) Area

1st year - Negros Occidental Province (Bacolod City
(Silay City
(San Carlos City

Panay (Iloilo City
(Iloilo Province
(Capiz Province
(Roxas City

2nd year - Areas covered during the 1st year
(1968-69)

Rizal (Rizal Province
Bulacan (Bulacan Province
Metropolitan areas (Manila
(Pasay
(Quezon City
(Caloocan City

Cebu City (Cebu City

3rd year - Areas covered during the 1st and 2nd years
(1969-70)

Pangasinan (Pangasinan
(Dagupan

Cebu (Cebu Province
Cagayan (Cagayan Province

4th year - Areas covered during the 1st, 2nd and 3rd
(1970-71) years

Zamboanga (Zamboanga del
Norte Province

- Lanao del Sur (Lanao del Sur Prov.
(Iligan City
(Marawi City
(Oxamis City
 - Cotabato (Cotabato Province
(Cotabato City
 - Davao (Davao City
(Davao Province
- 5th year - Areas covered during the 1st, 2nd, 3rd, and
(1971-72) 4th years
- Samar (Samar Province
(Calbayog City
 - Masbate (Masbate Province

The provisions of the item methodology shall apply to areas where sporadic cases of cholera El Tor may occur during this five year period.

2) Methodology

- a. Organization
- b. Prompt recognition and Treatment of Cases
- c. Environmental Sanitation Control
- d. Immunization
- e. Carrier Control
- f. Laboratory Diagnosis
- g. Health Intelligence and Reporting
- h. Health Education
- i. Quarantine Procedures

IV. Plan of Cooperation by the Japanese Government

1) First year

- a. Assistance in the form of equipments and supplies for Laboratories Research Laboratory
 - (1) Joint Cooperation Cholera Laboratory and the Bureau of Research Laboratory
 - (2) San Lazaro Hospital Laboratory
 - (3) Bacolod Cholera Laboratory
 - (4) Iloilo Cholera Laboratory
 - (5) Capiz Cholera Laboratory
- b. Assistance in the form of vaccination equipments - 500 Vaccinating Kit
- c. Assistance in the form of Chlorine compound for the disinfection of water supplies

- d. Equipments for Health Education
- e. Some drugs for treatment of cases and carriers
- f. Technical assistance in the form of sending a detail of experts and technicians to the laboratories in the Philippines.
- g. Further training in Japan of Philippine personnel connected with this program.

2) Succeeding years

The Government of the Philippines will prepare subsequent programs on a year to year basis which will be submitted to the Government of Japan for concurrence.

V. Validity

This agreement, signed by Dr. H. Fukumi, Chief of the Japanese Medical Survey Team and Dr. J.C. Azurin, National Coordinator of the Cholera Eradication Program of the Philippines, covers the technical cooperation by the two governments on the Cholera Eradication Program in the Philippines and shall take effect upon approval by the Minister of Foreign Affairs of Japan, and the Honorable, the Secretary of Health of the Philippines.

Manila, Philippines, November 8, 1967

(Signed)
 (SGD.) HIDEO FUKUMI, M.D.
 Chief, Japanese Medical
 Survey Team on Cholera
 Eradication Program in
 the Philippines

(Signed)
 (SGE.) J.C. AZURIN, M.D.
 M.P.H.
 National Coordinator
 Cholera Eradication Program

① フィリピン：コレラ（撲滅）対策

第二回 R/D

フィリピン コレラ（撲滅）対策

団 長 柳沢 謙（国立予防衛生研究所副所長）

調査期間 44. 9. 10～9. 24（15日間）

RECORD OF DISCUSSIONS ON THE CHOLERA AND POLIO-MYELITIS ERADICATION PROGRAM IN THE PHILIPPINES BETWEEN THE JAPANESE SURVEY TEAM FOR THE MEDICAL COOPERATION ON PROGRAM IN THE PHILIPPINES AND THE PHILIPPINE HEALTH ADMINISTRATION, 1969, MANILA

The conference was held at the Conference Hall of the Bureau of Quarantine in Manila from 10 to 24 September 1969 with the following delegates from the participating countries:

DELEGATES OF JAPAN:

1. Dr. Ken Yanagisawa - Vice-Director, National Institute of Health
2. Dr. Shun-ichi Yamamoto - Professor, University of Tokyo
3. Dr. Soroku Yamagata - Director, Chiba Serum Institute

DELEGATES OF THE PHILIPPINES:

1. Dr. J.C. Azurin - Director, Bureau of Quarantine
2. Dr. Joaquin Sumpaico - Director, Bureau of Research & Laboratories
3. Dr. Lupo C. Carlota - Director, Bureau of Health Services
4. Dr. Cesar Uylangco - Director, San Lazaro Hospital
5. Dr. Felix C. Alegre - Senior Development Project Coordinator National Economic Council

Hon. Amadeo H. Cruz, Secretary of Health of the Philippines, opened the meeting and welcomed the delegation from Japan. Secretary Cruz stressed that the Medical Cooperation

These experts gave recommendations and suggestions regarding the projects. They assisted in the organizational set up of the projects and the training of laboratory technicians in the Philippines.

B. Donation of equipment and supplies.

a. 1st year (1967-68)

- (a) Equipment and supplies for use of the Joint laboratory, the laboratory of the San Lazaro Hospital and provincial laboratories in Bacolod and Cebu.
- (b) 300 vaccination kits for the field use of the local health units.
- (c) Visual instruction sets for the use of health education in the province of Negros Occidental and the Manila Metropolitan Area.
- (d) Disinfectant for drinking water.

b. 2nd year (1968-69)

- (a) Equipment and supplies for clinical and laboratory use of the San Lazaro Hospital including its new cholera ward, the Joint Laboratory, laboratory in the Bureau of Research and Laboratories, and provincial laboratories in Cagayan and Tacloban.
- (b) 100 vaccination kits for field use of the local health units.

(2) The contributions in terms of actual funds and salaries of personnel of the Philippine Government is hereby appended for ready reference.

2. Evaluation of the program.-

Invaluable knowledge gained from these researches have been applied effectively to the Cholera Eradication Program since its start. These highly gratifying results have benefited not only Philippine citizens but populations of other nations of the world as well.

3. Future Plan.-

(1) Plan in the third year (1969-70)

- A. Dispatch of the following experts:

one liaison officer - one year
 (Aug. 1969-
 Aug. 1970)

one epidemiologist - - do -
 one bacteriologist - - do -
 one medical technician - one year
 (July 1969-
 July 1970)

one clinical
 bacteriologist - six months
 (Aug. 1969-
 Feb. 1970)

one clinician - - do -
 one bacteriologist - (requested)

- B. Donation of equipment and supplies.-
- a. Equipment and supplies for use of the Joint Laboratory, laboratory in the Bureau of Research and Laboratories, and 2 provincial laboratories.
 - b. Vaccination kits
 - c. Visual instruction set
 - d. Disinfectant for drinking water
 - e. Vehicle for surveillance

- C. Training of the Philippine staffs in Japan.-

The following personnel shall be considered:

one epidemiologist
 two bacteriologist
 five medical technicians

The period of training shall not be less than three months.

- D. The Cholera Eradication Program shall be expanded to cover the entire Province of Cebu. If this will be implemented, it can serve as a pilot project where new preventive measures may be tried.

- (2) Plan for 4th year and fifth year (1970-71 & 1971-72)

- A. Appropriate adjustments in the Budget of the Philippine Department of Health is expected so as to cover the following:

- a. Maintenance of established laboratories,
 - b. Continuation of the cholera eradication program, and
 - c. The maintenance of surveillance work.
- B. Assistance by the Japanese Government within the limit of budgetary appropriations will be maintained until 1971.
 - C. A meeting in Tokyo shall be held on or about March 1970 to decide the future plans for this program.

II. The Polio Myelitis Eradication Program.-

1. Review of the cooperative efforts-

(1) In accordance with the agreements memorandum signed by the Japanese and Philippine delegates in May, 1967 in Tokyo, the Government of Japan rendered the following assistance under the Colombo Plan:

- A. Dispatch of experts:
 - 1st year (1967-68) : one virologist
two administrators
 - 2nd year (1968-69) : two virologists
one administrator
- B. Donation of the poliomyelitis oral vaccine
 - 1st year (1967-68)
Five hundred thousand (500,000) doses of poliomyelitis oral vaccine with diluent and pipettes.
 - 2nd year (1968-69)
Seven hundred thousand (700,000) doses of poliomyelitis oral vaccine with diluent and pipettes.
- C. Operation of the program
 - 1st year (1967-68)
 - (a) Area of operation:
Metropolitan Area, Batangas Province, Ilocos Norte Province and three (3) other cities.

- (b) Target population:
Children of the age group from 4 months to below 3 years of age.

2nd year (1968-69)

- (a) Areas of operation:
 - a) Continuation of running program in the Manila Metropolitan Area comprising 4 cities and 7 municipalities.
 - b) New program for Rizal Province, Davao City and 14 other cities.
- (b) Target population:
Children of the age group from 6 months to below 3 years of age.

D. Training of the Philippine staffs in Japan.-

The following physicians were trained in Japan:

- Dr. A. Ocampo (Bureau of Research and Laboratories)
one month in 1968
- Dr. C. Justiniano (Bureau of Health Services)
one month in 1968

(2) The expenditures incurred by the Philippine Government in undertaking this project is herewith appended.

2. Evaluation of the project:

This program has been well accepted by the Filipino population. The implementation of the program in the local health services has been efficient. The assistance which the Japanese people is extending to the Filipino people has received wide dissemination because of this program. The objective of promoting mutual cooperative effort and harmonious understanding between our two countries has been advanced because of this program.

3. Plan for the third year (1969-1970)

- (1) Dispatch of the following experts:
 - two virologists - for 6 months
 - one administrator to assist in the creation of surveillance units - for one month

- (2) Donation of the vaccine, equipment and supplies:
 - A. Seven hundred thousand (700,000) doses of Sabin bivalent live vaccine with diluent and pipettes. Vaccine shall be transported by air from Japan to Manila and the diluent by sea by the end of 1969.
 - B. Various equipment and supplies.
- (3) Training of the following Philippine staffs in Japan:
 - two virologists - for one year
- (4) Areas of operation of the program:
 - A. Metropolitan Area
 - B. Two other provinces
 - C. The designated surveillance areas - Caloocan, Toledo and Samal Island.

4. The Philippine Government request the Government of Japan the extension of the Poliomyelitis Eradication Program for a period of two years. This extension is only intended to immunize 200,000 newborns each year, in areas where the program has been started.

5. The Japanese Medical Cooperation Survey Team expects that the Philippine authorities shall try to continue the Poliomyelitis Eradication Program after March, 1970. However, the following-up on a long-term basis in the form of the dispatch of the experts for short-term assignment in the Philippines and the acceptance of the trainees in Japan will be considered after, March, 1970.

III. The Philippine Government requests the Government of Japan to consider a proposal to undertake a joint program to determine effective preventive measures against hemorrhagic dengue fever.

IV. The Government of the Philippines reiterated its request that the Government of Japan consider the proposal to establish an Asian Institute of Tropical Diseases as a joint project to enable nationals of different Asian countries to undertake studies on this field.

This is the record of discussions to be approved by the respective governments.

Manila, September 24, 1969

(Signed)

Dr. KEN YANAGISAWA
Leader of the Japanese Survey
Team for Medical Cooperation

(Signed)

DR. J.C. AZURIN
Chief Delegate
Philippines

① フィリピン：コレラ（撲滅）対策

第三回 R/D

団 長 福見 秀雄（国立予防衛生研究所細菌第一部長）

調査期間 47. 9. 10～9. 24（15日間）

RECORD OF DISCUSSION BETWEEN THE MEDICAL COOPERATION MISSION OF THE GOVERNMENT OF JAPAN AND THE HEALTH AUTHORITY CONCERNED OF THE PHILIPPINE GOVERNMENT

The Japanese Mission conferred with the Philippine Health Authorities in Manila from 11 September to 15 September 1972 regarding the Poliomyelitis and Cholera Eradication Projects which have recently completed its 5th year of implementation.

Dr. F. Alegre, the Chief Medical Officer of the National Economic Council of the Philippines, opened the meeting with an address of welcome.

Dr. H. Fukumi made the response in behalf of the Japanese Mission.

Dr. J.C. Azurin nominated Dr. Fukumi as chairman of the conference which Dr. J. Sumpaico seconded. Dr. Fukumi was unanimously elected.

I. In an opening statement, Dr. Fukumi stated that the request of the Philippine Government to undertake a follow-up program for Cholera and Poliomyelitis Eradication Projects for a period of two Fiscal Years (1972-1973) has been favorably considered by the Government of Japan, within its annual budgetary appropriation.

II. During the meeting, a review of the accomplishments of the Poliomyelitis and Cholera Eradication Projects including the Joint Philippines-Japan-WHO Cholera Research Project was discussed. It was agreed that these programs have been beneficial to the Philippine health situation. There has been a significant decrease of morbidity and mortality rates of these two diseases in the Philippines. The Joint Philippines-Japan-WHO Cholera Research Project had a far-reaching effect not only to the two participating countries but also to the world in general. The results of these researches,

which have been of major importance, have been disseminated to all countries and is important in adding to cholera knowledge at present. The accomplishment reports are herewith attached.

III. It was agreed that the Government of Japan will consider at the present time the dispatch of experts to the Philippines and the training of pertinent Philippine health personnel in Japan. The Philippine Panel proposed that additional equipments be favorably considered by the Government of Japan during the two (2) years follow-up program. (See enclosed Appendix)

IV. The Government of the Philippines wishes to take this opportunity to thank the Government of Japan for the invaluable help which she extended for both these projects during the past five (5) years. The accomplishments of these projects have been extensive and beneficial. The impact of these projects on the Philippines population has been far-reaching. Cholera has decreased throughout the Philippines during the past five (5) years because of this program. A very significant decrease in the number of cases of poliomyelitis have been recorded during this period. However, to forego these projects at this time would render negative the progress made during the past five (5) years. It is therefore necessary that an extension of two years more would consolidate and solidify these accomplishments and thus make it more lasting. It is also hoped that at the end of this two-year period, the Philippines should be able to continue these projects by itself. Over and above these considerations, the Philippines-Japan Medical Cooperation Project has fostered and helped promote harmonious relations and friendship between our two countries.

V. The proceedings of this meeting are subject to the approval of both the Government of Japan and the Philippines.

Manila, September 15, 1972

(Signed)

Dr. Hideo Fukumi
Chief, Japanese Mission
Philippines-Japan Medical
Cooperation Project

(Signed)

Dr. J.C. Azurin
National Coordinator
Philippines-Japan Medical
Cooperation Project

第一回 R / D

団 長 本 田 正 (厚生省薬務局細菌製剤課課長補佐)

調査期間 4 2.5.15 ~ 6.4 (21日間)

A PROTOCOL OF THE POLIOMYELITIS ERADICATION PROGRAM
IN THE PHILIPPINES

I. INTRODUCTION

Poliomyelitis, a crippling disease, has shown a rising trend of incidence in recent years. This fact, coupled with the psychological impact which the appearance of a paralytic polio case brings to a community, has resulted in an insistent public demand for the health service to do something about this disease for which there are available effective immunizing agents.

Cognizant of this, the Honorable Secretary of Health, Paulino J. Garcia requested assistance from the Government of Japan in the form of oral poliovaccines and the necessary cooperation under the Colombo Plan. Discussions were held in Tokyo from May 12 to 13, 1967 and the following general agreements were made between the Secretary and his party on one hand, and the staff of the Japanese Government, on the other:

1. The Government of Japan will send an advance Survey Team to Manila to discuss the project for the first year (1967) and to lend advice on future plans;
2. The mass vaccination will be carried out in Batangas province and the Manila area at the beginning of August, 1967;
3. A maximum of 500,000 doses will be donated for the first year's campaign; and
4. The target population in Batangas and in Greater Manila will be children from 4 months to 3 years.

Conformably with the above general agreements, the Japanese Survey Team headed by Dr. Tadashi Honda and staffs from the Philippine Department of Health headed by Dr. Amadeo H. Cruz, Director of Health Services, formulated the details of this protocol for the Polio Eradication Program during meetings held from May 16 to 26, 1967, in Manila.

II. COOPERATING AGENCIES AND PREMISES OF PARTICIPATION

The following agencies shall be involved:

1. The Government of Japan - will supply the polio oral vaccines needed, various materials as mentioned herein, and also provide experts for technical assistance to be program;
2. Various offices of the Department of Health as follows:
 - (a) Bureau of Health Services - will provide the administrative direction and the services of Medical Specialists, as may be necessary;
 - (b) Bureau of Research and Laboratories - will perform all laboratory support, virological examinations, etc., as may be agreed upon by the cooperating agencies;
 - (c) Disease Intelligence Center - will provide epidemiological and statistical assistance as required;
 - (d) Regional Health Office No.3 and its field operating units will provide all necessary personnel, facilities, and logistical support as may be necessary in the tactical implementation of this program; and
 - (e) Bureau of Quarantine - will provide such technical and material assistance as may be required from time to time.
3. Each of the participating offices of the Department of Health will provide for the expenses to be incurred by their respective personnel who will be involved in this program.

III. OBJECTIVES

The ultimate objective of this program will be to eradicate poliomyelitis in the Philippines through an on-going mass immunization of susceptible groups with oral poliovaccine (attenuated live vaccine).

The immediate objectives of this Program are:

1. To immunize at least 80% of the targetage groups in the community within the shortest time;

2. To determine the prevalence of enteroviruses in the community before the start of the campaign; and
3. To conduct a pre- and post-immunization serological survey of polio antibodies in a random sample of vaccines.

IV. MECHANICS

1. Place - The campaign will initially be conducted in a demonstration pilot area - specifically, Batangas Province, including Lipa City. As vaccine supply will allow, the greater Manila area will be involved next, followed by the rest of the country.
2. Vaccine - the vaccine to be used is the oral live vaccine (Sabin, trivalent) which is manufactured by Japan Live Polio Vaccine Lab., Ltd. and approved by the National Institute of Health of Japan.
3. Target Population - will be children from 4 months to 2 years of age in Batangas which is estimated at 60,000 and 4 months to 3 years in the Manila areas, which is estimated at 190,000.
4. Timing - For Batangas, vaccination will be conducted from the beginning of August through the end of September 1967. For Greater Manila area, it will be from the beginning of October through the end of November 1967.
5. Personnel Involved - this Immunization Program will be integrated into the routine activities of the Rural Health Units. Training and orientation lectures will be given to the vaccinating teams before the start of the campaign.

V. METHODOLOGY

1. Five hundred thousand (500,000) doses of the vaccine will be transported from Japan to Manila until the middle of July 1967. The concentrated vaccine will be shipped by air and the diluent by sea. Upon arrival in Manila, the vaccine stocks will be immediately stored at the Bureau of Research and Laboratories where facilities for refrigeration at -20°C are available.
2. From time to time, adequate supply of the vaccine sufficient for a week, will be transported to the Provincial Health Office in Batangas for distribution to the different municipalities to be covered. In the latter, the concentrated vaccines will be stored in the freezer compartment of re-

refrigerators of Rural Health Units, or in private facilities where there are none in the Rural Health Units.

3. A master schedule of immunization by barrios in municipalities or by districts in cities will be drawn up by the Municipal Health Officers or City Health Officers concerned, subject to the approval of the Regional Health Director. An information campaign shall be conducted initially involving municipal and barrio leaders, civic organizations, schools and other prominent citizens to obtain as wide a publicity as possible and to attract vaccinees at the vaccination site on the scheduled dates.
4. Once a sufficient number of vaccinees necessary to consume the contents of a vial or container is available, the vaccine will be reconstituted and administered in accordance with instructions thereon.
5. To reconstitute the vaccine, the concentrated and frozen vaccine is first allowed to thaw or melt at room temperature. The melted vaccine is added to the vial of diluent using a sterile syringe; this is then mixed by vigorous shaking.
The diluted vaccine can be kept for about 1 month in the refrigerator at 0° to 4°C or for 1 week at 5°C to 10°C. It is recommended, however, that the diluted vaccine be used as soon as possible after its preparation. The vaccine should be reconstituted just before vaccination in accordance with the schedule of date and place of mass vaccination.
6. Before vaccination, the physician should examine each child to detect the presence of any of the following contraindications:
 - (a) Children with fever or diarrhea;
 - (b) Those with active tuberculosis, heart disease or malnutrition;
 - (c) Those convalescing from serious diseases;
 - (d) Those vaccinated against smallpox within four weeks before vaccination; and
 - (e) Those advised by a physician not to receive the vaccination.

7. Recording of vaccinations shall be made in a simple line listing on a form drawn up for that purpose. These forms shall be made by Regional Health Office No.3. Records shall be accomplished in duplicate, the original copies are to be sent to the Bureau of Health Services while the duplicate shall remain as file with the respective Municipal Health Officers and City Health Officers concerned.
8. A follow-up of vaccinees shall be made by the Rural Health Units in their respective jurisdiction to determine any untoward side-reactions among them. Any such reaction shall be noted in the report form under the heading "Clinical Observations." Immediate side-reactions may be expected within 48 hours after vaccination while other delayed reactions may occur within one month.

VI. LABORATORY SERVICES

These shall be provided by the Bureau of Research and Laboratories.

1. Assay of the vaccine - In order to assay the vaccine, five vials of the concentrated vaccine and five vials of the diluent solution will be sent to the Philippines from Japan by the beginning of July 1967. These shall be picked at random from the same lot of the vaccines to be used. The following examinations will be done:
 - (a) Sterility tests;
 - (b) Safety tests; and
 - (c) Potency tests
2. Virological and serological study for evaluation of the mass vaccination:
 - (a) Study area - will be selected for the purpose
 - (b) Number of children to be studied - 300 distributed by age group as follows:

4 months - 11 months	100
1 year	100
2 years	100
 - (c) Isolation of enteroviruses will be done from fecal specimens collected 2 weeks before immunization

- (d) Serological Survey - Paired sera will be collected by the use of filter paper discs, the first sample 3 weeks before immunization and the second 4 to 6 weeks after the second dose of the vaccine.
- (e) The following supplies and materials needed for the above-mentioned virological and serological examinations shall be furnished by the Government of Japan:
 - (1) Filter paper discs for blood sampling;
 - (2) Stool specimen containers;
 - (3) Polio antigen; and
 - (4) Polio antisera

VII. POLIOMYELITIS SURVEILLIANCE UNIT

The Philippine Department of Health shall set up a Poliomyelitis Surveillance Unit to take charge of compilation of data, study of side-reaction, investigations of polio cases that occur among vaccinees, and periodic evaluation of the immunization program. The participation of the Japanese Government in this unit shall be discussed in the future.

VIII. FUTURE PLANS

The Government of the Philippines shall prepare subsequent programmes which shall be submitted to the Government of Japan for concurrence.

IX. VALIDITY

This protocol, signed by Dr. Tadashi Honda, Chief of the Japanese Medical Survey Team and Dr. Amadeo H. Cruz, Director of the Bureau of Health Services of the Philippines, covers the campaign during the first year of the programme and shall take effect upon approval by the Minister of Foreign Affairs of Japan, and the Honorable, the Secretary of Health of the Philippines.

Manila, Philippines, May 30, 1967

Signed
TADASHI HONDA, M.D.
Chief, Japanese Medical Survey
Team on Polio Eradication
Program in the Philippines

Signed
AMADEO H. CRUZ, M.D., C.P.H.
Director of Health Services
of the Philippines

㊤ フィリピン：ポリオ対策

第二回 R/D

団 長 柳 沢 謙（国立予防衛生研究所副所長）

調査期間 44.9.10～924（15日間）

（注）コレラ対策第二回 R/D が本件 R/D を兼ねているので参照のこと（P35）

⑨ フィリピン：ポリオ対策

第三回 R/D

団 長 福 見 秀 雄（国立予防衛生研究所細菌第一部長）

調査期間 47.9.10～9.24（15日間）

（註）コレラ対策第三回 R/D が本件 R/D を兼ねているので参照のこと（P 43）

(3) 南 ヴ ィ エ ト ナ ム

① サイゴン病院

(Saigon Hospital)

② チョーライ病院

(Chow Rai Hospital)

① 南ベトナム：サイゴン病院

第一回 R/D

団 長 森安 信雄(日本大学医学部教授)

調査期間 48. 3. 25～3. 31(7日間)

THE MINUTES OF DISCUSSIONS BETWEEN THE AUTHORITIES
CONCERNED OF SAIGON HOSPITAL OF THE REPUBLIC OF
VIET-NAM AND THE JAPANESE MEDICAL COOPERATION
SURVEY TEAM

The Japanese Medical Cooperation Survey Team headed by Prof. Nozomu KOSAKAI, Director of Juntendo University Hospital, visited the Republic of Viet-Nam from 25th March, 1973 to 31st March, 1973 and discussed with the Authorities Concerned of Saigon Hospital of Health Ministry headed by Prof. Nguyen Phuoc DAI, Director of Saigon Hospital, on the future medical cooperation plan related to the abovementioned hospital.

The list of the participants for the meeting is attached as per Annex.

The parties concerned also reviewed the past medical cooperation implemented so far and it is noted with satisfaction that, as a result of constant touch and close cooperation between the Vietnamese and the Japanese sides, a remarkable progress has been made in general surgery field of Saigon Hospital.

Desiring a successful completion of the abovementioned project, the Authorities Concerned of Saigon Hospital and the Japanese Survey Team have reached the following understanding through their discussions.

The Survey Team undertook to make a recommendation to the Government of Japan:

(1) that the present cooperation on general surgery for the hospital should be continued for another three (3) years from the Japanese fiscal year 1973 to 1975 inclusive, and expressed the hope that a self-supporting management system by the Vietnamese side would be established with regard to the general surgery field as soon as possible in order that the full management may be taken over by the

Vietnamese side after the termination of the Japanese cooperation.

(2) that in order to supplement and promote the present cooperation more effectively, the Government of Japan, during the cooperation period, should extend the technical cooperation on laboratory tests concerning the following items:

- 1) - To set up toxicological examinations
- 2) - To set up pulmonary functions tests
- 3) - To enrich clinical chemistry laboratory techniques including liver functions tests
- 4) - To enrich circulatory functions tests
- 5) - To enrich blood bank techniques

(3) that the Government of Japan should dispatch an expert on laboratory tests for a period of twelve (12) months each year.

(4) that the Government of Japan should accept two (2) Vietnamese participants for training in Japan for a period of six (6) months each year.

(5) that the Government of Japan would provide the hospital with equipment and reagents to be considered necessary for laboratory tests.

The Japanese Survey Team requested the Vietnamese side to ensure that Vietnamese participants who will be trained in Japan, should resume their previous work on returning to the hospital and the Vietnamese side promised that it will take every possible measure.

The programme of cooperation covered by this Minute will be carried out, subject to the approval by the respective governments and implemented within the budgetary appropriations, in accordance with the laws and regulations in force in the respective country.

The both parties are pleased to note that the discussions were conducted in constructive and friendly manner and achieved the objectives for which it is made.

Saigon, 10th June, 1973

(Signed)
Prof. Nozomu KOSAKAI
Head, Japanese Medical
Cooperation Survey Team

(Signed)
Prof. Nguyen Phuoc DAI
Director of Saigon Hospital,
Ministry of Health,
The Republic of Viet-Nam

(Signed)
Dr. Truong-Minh-CAC
Director General of Health
Ministry of Health

ANNEX

List of Participants of the meeting

Vietnamese side:

Dr. Nguyen Phuoc Dai
Director of Saigon Hospital, Ministry of Health

Dr. Nguyen Ngoc Quang
Chief of the Laboratory, Saigon Hospital, Ministry
of Health

Japanese side:

Prof. Nozomu Kosakai
Head, Japanese Medical Cooperation Survey team

Mr. Mitsuo Ishizaki
Coordinator of the mission, OTCA staff

Dr. Sakae Watanabe
Colombo Plan expert on Surgery

Dr. Minoru Kubota
Colombo Plan expert on Narcosis

Mr. Yasuharu Inoue
Colombo Plan expert on Radiology

Mr. Akihiko Hashimoto
Coordinator for Japanese Medical Cooperation

㊟ 南ベトナム：チョーライ病院

(日本側書簡)

(仮訳)

書簡をもって啓上いたします。

本使は、1967年6月10日にサイゴンにおいて日本国特命全権大使中山賀博とヴェトナム共和国外務大臣ラン・ヴァイ・ドオとの間に交換された日本国政府とヴェトナム共和国政府との間の医療協力に関する交換公文に関し、本国政府の訓令により、次の1を閣下に通報するとともに、前記の交換公文の4の規定に基づき次の2及び3について閣下と協議する光榮を有します。

1. 日本国政府は、チョウライ病院の敷地内に建設された神経外科病棟及び日本人専門家のための宿舍の所有権をヴェトナム政府に移転することを禁止している現行の法令に有利な改正が行なわれない限り、その移転を行なうことができない。

もっとも、ヴェトナム共和国厚生省は、今後次のことを条件として不特定期間前記の建物を使用することができる。

(a) 神経外科病棟及び日本人専門家のための宿舍は、チョウライ病院の一部をなすものとみなされる。

(b) 関係者間の合意がない限り、ヴェトナム政府は、前記の建物を1967年6月10日付の合意に規定されている目的以外の目的のために使用してはならない。

2. 日本国政府は、神経外科病棟及び日本人専門家のための宿舍がチョウライ病院の一部をなすものとみなされることにかんがみ、その病棟及び宿舍の監督及び維持をヴェトナム共和国政府が前記の合意の2(1)の規定に従いチョウライ病院の維持、監督及び管理の一環として自己の費用により引き受けるものと了解する。

3. 日本国政府は、前記の医療協力の目的にかんがみ、1にいう建物には現行のヴェトナムの租税その他の公課が課されないものと了解する。

本使は、閣下が、1967年6月10日付けの合意の適用の細目である前記の点を考慮されて、異議がないときは、閣下の返簡をもってその旨を確認されることを要請する光榮を有します。

本使は、以上を申し進めるに際し、ここに重ねて閣下に向かって敬意を表します。

1968年12月21日

日本国特命全権大使

北原 秀雄

ヴェトナム共和国厚生大臣

ラン・ル・イ 閣下

(ヴィエトナム側書簡)

(仮訳)

書簡をもって啓上いたします。

本大臣は、1968年12月21日付けの閣下の書簡を受領したことを確認するとともに、ヴィエトナム共和国は同書簡に述べられている日本国政府の見解を実現する措置を執ることに異議がない旨を通報する光栄を有します。

本大臣は、以上を申し進めるに際し、ここに重ねて閣下に向かって敬意を表します。

1968年12月21日

ヴィエトナム共和国

厚生大臣

トラン・ル・イ

日本国特命全権大使

北原 秀雄 閣下

(日 本 側 書 簡)

(仮 訳)

書簡をもって啓上いたします。

本職は、日本国政府とヴィエトナム共和国政府との間の医療協力に関して本日日本国特命全権大使北原秀雄とヴィエトナム共和国厚生大臣トラン・ル・イとの間で交換された書簡に関し、日本国海外技術協力事業団代表の資格において、チョウライ病院の敷地内に建設された神経外科病棟及び日本人専門家のための宿舎について貴国政府が監督の責任を負うという貴国政府の決定に対し心から謝意を表明する光栄を有します。

本職は、ヴィエトナム共和国政府の権限のある当局が前記の建物の効果的な監督を確保するため最善を尽くされるものと信じます。

本職はこの機会に、ヴィエトナム共和国の権限のある当局に対し、特に次の措置を執られるよう要請いたします。

- I 当該建物の監督の責任者を日本国海外技術協力事業団理事長に通報する。また、その責任者に変更があった場合にも、そのつど同様に通報する。
- II 当該建物の管理及び維持について責任を有する前記の者は、当該建物が常に良好な状態にあるようにする。
- III Iにいう責任者は、次の事項について厚生大臣に報告を行ない、厚生大臣は、それを日本国海外技術協力事業団理事長に伝達する。

(1) 損害に関する報告

天災その他の事故により当該建物に滅失又は損害が生じた場合には、次の点について直ちに報告を行なう。

- (a) 滅失又は損害の原因及び年月日
- (b) 被害の詳細（被害の程度）
- (c) 被害の見積り及び復旧の可能性
- (d) 当該建物の維持又は補修のために執られた緊急措置
- (e) その他の有用な情報

(2) 年次報告

毎年、4月1日から翌年3月31日までの期間における建物の状態に関する年次報告をできる限りすみやかに提出する。

- IV Iにいう責任者は、当該建物の維持及び保全の見地から必要と判断する補修の措置を執る。
- V Iにいう責任者は、日本国海外技術協力事業団が当該建物の維持及び運用状況を調査するために派遣する調査員に対し必要な便宜を供与する。

日本国政府とヴェトナム共和国政府との間の医療協力に関して1967年6月10日にサイゴンにおいて交換された書簡の精神に沿うものであるから、われわれは、この医療協力の目的を考慮して、当該建物のヴェトナム共和国政府への移転をできる限りすみやかに実現することが望ましいと考えます。

われわれは、ヴェトナム共和国政府の権限のある当局が、上述の過渡^渡期間中、建物をチロウライ病院に属する他の建物に対すると同様に維持され、かつ、監督されれば幸いです。

1968年12月21日

日本国海外技術協力事業団

監事 野田 章

ヴェトナム共和国厚生大臣

特別顧問

グエン・ヴァン・ティエウ博士 殿

(ヴィエトナム側書簡)

(仮訳)

書簡をもって啓上いたします。

本職は、1968年12月21日付けの貴職の書簡を受領したことを確認するとともに、ヴィエトナム共和国厚生省が同書簡に細目が述べられている日本国海外技術協力事業団の要望に副うために必要な措置を執ることを貴職に通報する光栄を有します。

他方、本職は、厚生大臣がチョウライ病院院長を貴職の書簡に述べられた建物の責任者として指名したことを貴職に通報いたします。

本職は、以上を申し進めるに際し、ここに重ねて貴職に向かって敬意を表します。

1968年12月21日

ヴィエトナム共和国厚生大臣

特別顧問

グエン・ヴァン・ティユウ

日本国海外技術協力事業団

監事 野田 章 殿

〔参 考〕

㊟ 南ベトナム：チョーライ病院

日本国政府とヴェトナム共和国政府との
間の医療協力に関する交換公文

(日本側書簡)

(訳文)

- 日本側書簡 書簡をもって啓上いたします。本使は、日本国とヴェトナム共和国との間の医療協力に関する最近の両国の権限のある当局間の会談に言及し、日本国政府及びヴェトナム共和国政府が次の取極について合意することを提案する光榮を有します。
- 日本国政府の措置 1. 日本国政府は、日本国において施行されている法令に従い、次のために必要な措置を執る。
- (1) 医療専門家その他の専門家をコロムボ計画に従いヴェトナム共和国へ派遣すること。
 - (2) ヴェトナム人医療職員をコロムボ計画に従い日本国に受け入れること。
 - (3) 診察、治療及び医学研究に必要な機械、資材及び医薬品をヴェトナム共和国政府に供与すること。
 - (4) 神経外科の一病棟及び医療協力のわく内で派遣される日本人専門家の宿舎をヴェトナム共和国政府の利益のためにチョウライ病院敷地内に建設すること。
- ヴェトナム共和国政府の措置 2. ヴェトナム共和国政府は、次のために必要な措置を執る。
- (1) 1.(4)にいう神経外科病棟の維持及び運用に必要な経費を負担すること。
 - (2) この取極により日本国政府が供与する機械、資材及び医薬品の輸入に対する免税を許与すること並びに 1.(3)にいう機械、資材及び医薬品の陸上げの費用及び陸上げ地より目的地までの運送費用を負担すること。
 - (3) サイゴン港における機械及び資材のすみやかな陸上げに必要な便宜を供与すること並びに 1.(4)にいう建物の建設のすみやかな完成のためにできる限りの援助を与えること。
 - (4) 日本人専門家に対するこの取極に定める職務の善意の遂行に起因するすべての請求について責任を負うこと。
- ピアストルの交換率 3. 1.(4)にいう建物の建設のための現地における費用を支払うための外国通貨(最大限250,000米ドル)は、1米ドルにつき118ピアストルの現行交換率、すなわち80ピアストルの公定為替率にヴェトナム共和国政府からの附加金38ピアストルを加えたもので、ヴェトナム・ピアストルに交換される。ただし、この118ピアストルの交換率は、現行の為替率が変更されたときは、両国政府の合意により修正す

ることができる。

- 協 議 4. 両国の権限のある当局は、この取極に定める協力を達成するため随時協議する。
- 有効期間 5. この取極は、4年間効力を有する。もっとも、両国政府は、いずれか一方の要請に基づいて、この取極の期間を延長するために協議を行なうことができる。

本使は、本国政府に代わって、この書簡及び前記の提案の貴国政府による受諾を確認する閣下の返簡を、閣下の返簡の日付の日に効力を生ずる両国政府間の合意を構成するものとみなすことを提案する光栄を有します。

本使は、以上を申し進めるに際し、ここに重ねて閣下に向かって敬意を表します。

1967年6月10日にサイゴンで

日本国特命全権大使 中山 賀 博

ヴィエトナム共和国
外務大臣 トラン・ヴァン・ド 閣下

(ヴィエトナム側書簡)

(訳文)

ヴィエトナム側書簡 書簡をもって啓上いたします。本大臣は、本日付けの閣下の次の書簡を受領したことを確認する光栄を有します。

本大臣は、本国政府に代わって、閣下の書簡に述べられた提案に同意し、閣下の書簡及びこの返簡を、この日付の日に効力を生ずる両国政府間の合意を構成するものとみなすことに同意する光栄を有します。

本大臣は、以上を申し進めるに際し、ここに重ねて閣下に向かって敬意を表します。

1967年6月10日にサイゴンで

ヴィエトナム共和国
外務大臣 トラン・ヴァン・ド

日本国特命全権大使 中山 賀 博 閣下

(参考)

この取極は、ヴィエトナムとの医療協力として、わが国がヴィエトナム国立病院の神経外科病棟の建設、医療機材の供与、医療専門家の派遣、研修生の受け入れ等を行ない、ヴィエトナムが病棟の維持費の負担、日本からの機材の輸入に対する免税等の措置を執ること等について定めるものである。

(4) ラ オ ス

タゴン医療センター

(Tha-Ngon Dispensary Project)

第一回 R/D

ラオス タゴン医療センター

団 長 加納 保之 (国立霞ヶ浦病院病院長)

調査期間 47. 2. 29 ~ 3. 16 (17 日間)

RECORD OF DISCUSSIONS BETWEEN THE JAPANESE MEDICAL
COOPERATION MISSION AND THE AUTHORITIES CONCERNED
OF THE GOVERNMENT OF THE KINGDOM OF LAOS

The Japanese Medical Cooperation Survey Mission headed by Dr. Yasuyuki KANOH visited the Kingdom of Laos from the 1st to 15th of March, 1972 and had discussions with the Authorities concerned of the Government of Laos on the future plan of the Tha-Ngon Dispensary project.

The following is the Record of Discussions:

1. Medical cooperation between the Japanese government and the Laotian government will be executed placing major emphasis on the cooperation in public health services and medical treatment based on the Tha-Ngon Dispensary.

The above-mentioned cooperation shall be implemented for the period of three (3) years hereafter, and at the end of the cooperation period this plan will be transferred to Laotian experts.

2. In accordance with the laws and regulations in force in Japan and within annual budgetary appropriations, Japanese cooperation will be extended within the framework of Colombo Plan technical cooperation in the form of dispatch of experts, provision of training facilities in Japan and supply of equipment upon receipt of Application Forms A.1, A.2, A.3 and A.4 from the Government of Laos.

3. The Japanese government will consider:

(1) Consolidation of the staff of Japanese experts in the Tha-Ngon Dispensary in the future as follows;

Expert	Number
Physician	2-3
X-ray Technician	1
Health Nurse	1
Nurse	2

- (2) Provision of training and observation facilities in Japan for the Laotian personnel.
 - (3) Supply of the necessary equipment.
4. The Laotian government will undertake to provide at their own expense their additional counterparts with the Dispensary.
5. The above cooperation will be carried out on the following conditions.
- (1) The Government of Laos issues necessary permits to the Japanese experts so that they can be engaged in medical and other related activities under the present cooperation project within the framework of existing regulations in Laos.
 - (2) The Japanese staff and their families shall be granted in Laos privileges, exemptions and benefits no less favourable than those granted to experts under the similar circumstances.
 - (3) The Government of Laos undertakes to bear claims, if any arises, against the Japanese experts resulting from, occurring in the course of, or otherwise connected with the bona fide discharge of their functions in Laos covered by this Record of Discussions.
 - (4) The equipment and materials to be supplied by the Government of Japan become the property of the Government of the Kingdom of Laos upon being delivered C.I.F. at the airport of Vientiane to the Laotian authorities concerned.
 - (5) The Government of Laos will undertake to meet:
 - (a) custom duties, internal taxes and other similar charges, if any, imposed in Laos in respect of the equipment supplied by the Japanese government for this medical cooperation plan.
 - (b) expense necessary for the transportation of the equipment supplied by the Japanese government for this cooperation plan within Laos as well as for the installation, operation and maintenance thereof.
 - (c) any other running expenses necessary for the operation of the Dispensary.

This is the record of discussions to be approved by the respective governments.

Vientiane, 14th March 1972

(Signed)

Dr. Yasuyuki KANOH
Head of the Japanese
Medical Cooperation Mission

(Signed)

Dr. Phouy PHOUTTHASAK
Directour Général
Ministere de la Sante Publique
Royaume du Laos

(5) タ イ

- ① ウイルスセンター（第3回RDは欠除）
（ Virus Research Institute ）
- ② ラマチボデイ医科大学 眼科部門
（ The Department of Ophthalmology Faculty of
Medicine , Ramathibodi Hospital ）
- ③ ラマチボデイ医科大学 実験病理部門
（ The Department of Pathology , Faculty of
medicine , Ramathibodi Hospital ）
- ④ 薬品研究所（ D , Q , C , L ）
（ Medical Plant research Institute ）
- ⑤ 国立病院（診療団）
（ Japanese Medical Mobile Teams ）

〔参 考〕

① タイ：ウイルスセンター
(旧ウイルス研究所)

協定書

〔参 考〕

ウイルス研究所の設置に関する日本国政府とタイ王国政府との間の協定

日本国特命全権大使 大江 晃

調印36年11月25日

AGREEMENT BETWEEN THE GOVERNMENT OF JAPAN AND THE
GOVERNMENT OF THE KINGDOM OF THAILAND CONCERNING
THE ESTABLISHMENT OF VIRUS RESEARCH INSTITUTE

Signed at Bangkok, November 25, 1961
Entered into force, November 25, 1961

The Government of Japan and the Government of the Kingdom of Thailand, earnestly desiring to advance the economic and technical cooperation between the two countries and thereby to strengthen further the friendly relations which traditionally exist between the two countries, have agreed as follows:

ARTICLE I

There shall be established a Virus Research Institute (hereinafter called "the Institute") at Department of Medical Science, Ministry of Public Health, Bangkok, which shall execute the following functions:

- (a) survey on viral diseases in Thailand;
- (b) laboratory-diagnosis of viral diseases;
- (c) test production of vaccine against known viral diseases;
- (d) practical and theoretical training of Thai medical and technical staff in virus works;
- (e) other necessary research.

ARTICLE II

(1) In accordance with laws and regulations in force in Japan, the Government of Japan shall take necessary measures

to provide at their own expense the services of requisite Japanese teaching and technical staff (hereinafter called "the Japanese staff") as listed in Annexure I. The provision of the services of Japanese staff shall be made through the normal procedures under the Colombo Plan Technical Cooperation Scheme.

(2) The Japanese staff shall be granted privileges, exemptions and benefits, including those mentioned in Annexure II, which shall be no less favourable than those granted to the experts of the third countries under similar circumstances.

(3) The Government of the Kingdom of Thailand shall, if necessary, grant residence permits to the Japanese staff and their families and labour permits to the Japanese staff.

ARTICLE III

(1) In accordance with laws and regulations in force in Japan, the government of Japan shall take necessary measures to provide at their own expense machinery, equipment, instruments and spare parts required for the establishment of the Institute as outlined in Annexure III.

(2) The articles referred to above shall become the property of the Government of the Kingdom of Thailand upon being delivered c.i.f. at the port of Bangkok to the Thai authorities concerned.

(3) The Government of the Kingdom of Thailand shall utilize these articles exclusively for the purposes of the Institute.

ARTICLE IV

In accordance with laws and regulations in force in Japan, the Government of Japan shall take necessary measures to grant training awards for training in Japan to Thai nationals who either are members of the staff of the institute, or who will be employed later as such members. The grant of the training awards shall be made through the normal procedures under the Colombo Plan Technical Cooperation Scheme and the number of the Thai nationals who are to receive such training awards shall be separately agreed upon by the two Governments.

ARTICLE V

The Government of the Kingdom of Thailand undertake to bear claims, if any arise, against the Japanese staff resulting from, occurring in the course of, or otherwise connected with the bona fide discharge of their functions in Thailand covered by this Agreement.

ARTICLE VI

- (1) The Government of the Kingdom of Thailand shall take necessary measures to provide at their own expense;
 - (a) requisite Thai medical, technical, administrative and other staff (hereinafter called "the Thai staff"), as listed in Annexure IV;
 - (b) requisite buildings as listed in Annexure V as well as incidental facilities, furnishings and land required therefore;
 - (c) replacement of machinery, equipment and instruments, and any other materials necessary for the operation of the Institute;
 - (d) suitable furnished accommodation and transportation for the Japanese staff.

- (2) The Government of the Kingdom of Thailand shall take necessary measures to meet;
 - (a) customs duties, internal taxes and other similar charges, if any, imposed in Thailand in respect of the articles referred to in Article III;
 - (b) expenses necessary for the transportation of the articles referred to in Article III within Thailand as well as for the installation, operation and maintenance thereof;
 - (c) any other running expenses necessary for the operation of the Institute.

ARTICLE VII

- (1) The two Governments shall appoint by mutual agreement one director and one deputy director from among the Japanese and Thai staffs of the Institute, one to be appointed from

the Japanese staff and the other to be appointed from the Thai staff.

(2) The director shall be responsible for the operation of the Institute and shall be assisted by the deputy director.

(3) The director and the deputy director shall hold office for three years from the date of appointment and shall be eligible for reappointment, provided that either of them may be relieved of his duty by mutual agreement by the two Governments during the term of his office.

ARTICLE VIII

There shall be mutual consultation between the two Governments for the purpose of advancing the objectives of the Institute and of successfully promoting Japanese-Thai cooperation in operating the Institute.

ARTICLE IX

(1) This Agreement shall enter into force on the date of its signature.

(2) This Agreement shall remain in force for a period of three years from its entry into force and shall continue in force thereafter provided that it shall be terminated on the date of expiry of the above-mentioned three years period or thereafter if either Government have previously given to the other Government at least six month's written notice of their intention to terminate the Agreement.

Done in duplicate at Bangkok in English on this twenty fifth day of November, 1961.

For the Government of Japan:
(AKIRA OHYE)
The Ambassador Extraordinary
and Plenipotentiary of Japan.

For the Government of the
Kingdom of Thailand:
(PHRA BUMRAS NARADURA)
The Minister of Public Health.

ANNEXURE I

LIST OF JAPANESE STAFF AT THE INSTITUTE

Serology specialist
Tissue culture specialist
Breeding specialist

ANNEXURE II

PRIVILEGES, EXEMPTIONS AND BENEFITS

The Government of the Kingdom of Thailand shall accord to the Japanese staff the following privileges, exemptions and benefits:

- (1) Exemption from, or reimbursement of, Thai income-tax as long as the Japanese staff draw their salaries from Japan.
- (2) Exemption from Thai customs duties in respect of reasonably necessary personal and household effects, including one motor vehicle per family, which they may introduce into Thailand at the beginning of their assignment unless such goods are subsequently sold within the country to individuals subject to payment of such duties.
- (3) Free medical care as admissible to experts assigned to Thailand under the Colombo Plan.

The Japanese staff will not be accorded any of the diplomatic privileges unless otherwise provided in this Agreement, including this Annexure.

ANNEXURE III

MACHINERY, EQUIPMENT AND INSTRUMENTS
BE PROVIDED FOR THE INSTITUTE

- (1) Electron microscope
- (2) Equipment for serology
- (3) Equipment for tissue culture
- (4) Equipment for animal experiment
- (5) Measuring instruments
- (6) Vehicle
- (7) Other minor articles

ANNEXURE IV

LIST OF THAI STAFF AT THE INSTITUTE

- (1) Person to be appointed as director or deputy director under Article VII of this Agreement
- (2) Medical staff
 - Investigations in the following fields:
 - Serodiagnosis
 - Tissue culture experiment
 - Electron-microscopic studies
 - Viral studies employing animals
- (3) Technical staff
 - Technicians who will work with the medical staff
- (4) Administrative staff
 - Permanent employees including typists, clerks, telephonists, watchmen and drivers
- (5) Workers

ANNEXURE V

PARTICULARS OF BUILDINGS TO BE PROVIDED FOR THE INSTITUTE

Buildings for the following rooms and facilities:

- (1) Office-rooms
- (2) Administration rooms
- (3) Room for serology
- (4) Room for animal experiment
- (5) Central washing room
- (6) Machine room
- (7) Walk-in cold room
- (8) Storage room
- (9) Dressing room
- (10) House for animals
 - Experimental animal
 - Isolated animal room
 - Mouse colony
 - Preparation room
 - Incineration room

- Storage room
Office
- (11) Locker room, bath room and lavatories
 - (12) Staff quarters
 - (13) Garages
 - (14) Guard house

AGREED OFFICIAL MINUTES RELATING
TO THE AGREEMENT BETWEEN THE
GOVERNMENT OF JAPAN AND THE GOVERNMENT
OF THE KINGDOM OF THAILAND
CONCERNING THE ESTABLISHMENT OF
VIRUS RESEARCH INSTITUTE

1. Re Article II, paragraph (1):

"To provide at their own expense the services of" the Japanese staff shall be interpreted that in making available to the Government of the Kingdom of Thailand the services of the Japanese staff, the Government of Japan will pay the necessary expenditures including their salaries and transportation costs between the two countries, except as otherwise provided for in the Agreement.

Regarding the procedures for the provision of the services of the Japanese staff, it is understood that the services of Japanese staff as listed in Annexure I shall be provided through the normal procedures under the Colombo Plan Technical Co-operation Scheme, whereas the procedures to be applied to the technical experts for the purpose of installation of machinery and equipment shall be agreed upon by the representatives of the two Governments.

2. Re Article II, paragraph (3):

It is understood that the residence permits and the labour permits shall be granted only in so far as necessary for the work of the Institute.

3. Re Article V:

The term "bona fide discharge" refers to the act of commission or omission done in good faith.

It was understood that the omission of the Government of Japan from the provisions of Article V was not to be so construed as to make the Government of Japan bear claims which might arise against the Government of Japan in Thailand. It was considered that there was no possibility of any claim arising from the Thai side against the Government of Japan

since the obligation of the Government of Japan under the Agreement was specifically limited to:

- (i) the provision of the requisite machinery, equipment, instruments and spare parts at the port of Bangkok,
- (ii) the provision of the requisite Japanese staff, and
- (iii) the grant of training awards to Thai Medical and Technical staff in Japan.

4. Re Article VI, paragraph (1), subparagraph (c):

The Government of the Kingdom of Thailand will provide as a rule all materials necessary for the operation of the Institute that are not provided by the Government of Japan at the time of the establishment of the Institute in so far as not exceeding the amount of the appropriation in the budget of the Government of the Kingdom of Thailand for this purpose,

5. Re Article VI, paragraph (1), subparagraph (d);

The Japanese staff will be free to choose the houses or rooms for their accommodation during their service at the Institute. Rent and accommodation charges in respect to such houses and rooms, as well as the cost of water and electricity consumption therein, will be borne by the Government of the Kingdom of Thailand within the amounts to be separately agreed upon by the two Governments. A telephone will be provided at the residence of one of the Japanese staff at the expense of the Government of the Kingdom of Thailand. Pending the provision of such houses or rooms, the Japanese staff will be accommodated at first class hotels free of accommodation charge within the amounts referred to above.

6. Re Article VI, paragraph (2), subparagraph (c):

"Any other running expenses necessary for the operation of the Institute" include inter alia:

- (a) expenses for official correspondence by the Japanese staff including that from Thailand to Japan;
- (b) expenses for such official travels of the Japanese staff within Thailand as agreed upon by the director;

- (c) expenses of fueling, maintenance and repairing of motor vehicle, which are referred to in Annexure III of this Agreement, as well as the expense of the provision of driver required for the abovementioned vehicle.

7. Re Annexure II, paragraph (2):

(1) It is understood that the Government of the Kingdom of Thailand shall not impose Thai import and export duties and any other charges upon the personal possessions which the Japanese staff, after introducing into Thailand once at the beginning of the assignment, took out for temporary stay outside Thailand and, then, re-introduced.

(2) It is also understood that the Japanese staff are entitled to introduce one motor vehicle per family free of Thai import and export duties and any other customs charges during their terms of office in Thailand.

BANGKOK: November 25th, 1961.

For The Government of Japan: For The Government of the
Kingdom of Thailand:

(Signed)

(AKIRA OHYE)
The Ambassador Extraordinary

(Signed)

(PHRA BUMRAS NARADURA)
The Minister of Public Health

第一回 R/D

タイ ウイルスセンター

議長 油谷 精夫(海外技術協力事業団専務理事) 東京に於いて開催

討議期間 43年6月28日

1968年6月28日東京において日本側海外技術協力事業団油谷精夫専務理事とタイ側公衆衛生省Dr. Komol Pengsritong 次官補との間で署名、交換されたタイ・ウイルス研究所および薬品研究所両プロジェクトに対する Record of Discussions は次のとおりである。

RECORD OF DISCUSSIONS BETWEEN THE THAI MISSION
HEADED BY DR. KOMOL PENGSRITONG AND THE JAPANESE
AUTHORITIES CONCERNED ON THE THAI VIRUS RESEARCH
INSTITUTE PROJECT AND THE THAI MEDICINAL PLANT
RESEARCH PROJECT

I. The Thai Virus Research Institute Project

1. In order to ensure smooth and effective cooperation on a long-term basis, the Medical Cooperation Committee for the Thai Virus Research Institute Project will be formed on the Japanese side with members representing the Ministries and Institutions concerned.
2. In accordance with the laws and regulations in force in Japan and within yearly budgetary appropriations, Japanese cooperation will be continued in the form of dispatch of experts, provision of training facilities and supply of equipment upon receipt of Colombo Plan Application Forms A1-4 from the Thai Government.
3. Regular consultation between authorities concerned of two Governments are expected to be held yearly in Tokyo and Bangkok alternately where matters concerning priority subjects, experts, participants and equipment be considered and the activities of the Institute in the past year be reviewed.
4. The priority subjects should be selected from the viewpoint of public health of the Thai people. For

1968, the following are selected as the priority subjects:

- a) Pathogenesis of haemorrhagic fever
- b) Activities as the WHO National Influenza Center
- c) Epidemiological studies and control of Rubella
- d) Control of Poliomyelitis
- e) Epidemiological studies on Rabies, Measles and the other viral diseases.

5. In order that the Thai staff may obtain maximum benefit from the Japanese experts, the number of the Japanese experts to be stationed in the Institute should not be more than 3 at one time and the terms of their assignments are expected not to be shorter than six months in principle.

6. In this connection, each Japanese expert should have his counterpart and under-studies, and the Thai personnel trained in Japan for the Project should not be released for other purposes for a certain reasonable period of time.

7. The first Scientific Report of the Institute will be published in English incorporating its past and present activities, and the subsequent Reports will be published annually covering the period from January to December each year.

8. The Poliomyelitis Immunization Project, which will be started from December 1968 in the municipality of Bangkok and Thonburi, is based on the results of the epidemiological surveys of the Enteroviruses Section of the Thai Virus Research Institute. The Section will also play a vital part in the post-vaccination surveys.

9. The record of discussions shall be reviewed at the yearly regular consultation under paragraph 3 which shall be revised when necessary.

II. The Thai Medicinal Plant Research Project

1. In accordance with the laws and regulations in force in Japan and within yearly budgetary appropriations, Japanese cooperation will be continued in the

forms of dispatch of experts, provision of training facilities and supply of equipment, within yearly budgetary appropriations, upon receipt of Colombo Plan Application Forms A1-4 from the Thai Government.

2. It is expected that more emphasis be placed on the training of the Thai staff in Japan.

3. The Thai side expects that one Japanese expert shall be sent to Thailand yearly and one or more Thai participants per year shall be sent to Japan for the Project.

4. In 1968, the Thai side expects that a pharmacognosist will be sent to Thailand to continue the Project. In addition the Japanese side will attempt to send a taxonomist for three months and pharmacologist for one year to Thailand.

Tokyo, June 28th, 1968

(Signed)

Dr. Komol Pengsritong
Deputy Under-secretary
of State for Ministry of
Public Health

(Signed)

Seifu Aburatani
Executive Director
Overseas Technical
Cooperation Agency

第二回 R/D

タイ ウイルスセンター

団 長 北岡 正規(国立予防衛生研究所) ウイルスリケッチャ部長
調査期間 44. 8. 5～ 8.23(19日間)

日タイ両国間の年次協議了解事項

専門家チームとタイ側 Ministry of Public Health の首脳間で数回にわたって協議を行ない、次のような了解点に達した。

(注) 本調査団は調査費による派遣でなく専門家派遣費により実施されたものであるが、内容は医療協力実施調査団である。

団 長 北岡 正規(省略)

団 員 深井孝之助(大阪大学医学部教授)

団 員 名取 信策(国立衛生試験所生薬部長)

調査員 吉本 静夫(海外技術協力事業団海外事業部 医療協力室長代理)

RECORD OF CONSULTATION BETWEEN THE JAPANESE MISSION AND THE THAI AUTHORITIES ON THE THAI VIRUS RESEARCH INSTITUTE PROJECT AND THE THAI MEDICINAL PLANT RESEARCH PROJECT IN 1969

In June 1968 an official discussion between the Thai Mission and the Japanese authorities on these projects was held in Tokyo, and it was agreed that the Regular Consultations are expected to be held yearly.

According to this agreement, the consultation between the Japanese Mission and the Thai authorities on these projects has been held in Bangkok from 5 to 20 August 1969.

The record of this consultation is as follows:

I. The Thai Virus Research Institute Project:

1. Review of the cooperation in 1968:

The activities of the Institute in 1968 are under review. Indication of remarkable progress as compared with that of the previous years has been noted.

Report on the work of the Institute for the year

1963-1967 and the Annual Report for 1968 which have been published are distributed for consideration. They will be distributed to other medical institutions and agencies in Thailand and abroad accordingly.

2. Future plan:

In order to promote medical cooperation for the Thai Virus Research Institute Project effectively and to achieve the purpose of this cooperation properly, both, the Japanese Mission and the Thai authorities, agree that the Japanese authorities will consider the following-up on a long-term basis even after the establishment of self-support of the Thai Virus Research Institute in its activities and functions.

3. Technical cooperation:

3.1 Equipment:

3.1.1 The Japanese authorities will attempt to supply spare parts necessary for repairing the equipment already provided, and to replace the unusable or damaged equipment with the new sets.

3.1.2 As to special equipment which will become necessary in accordance with the development of the research work, the Japanese authorities will render their efforts within the budgetary appropriation in 1969.

3.1.3 The Japanese Mission expects that the equipment provided will be used effectively under the appropriate control policy.

3.1.4 The Japanese Mission expects that the Thai authorities will undertake proper steps in securing the budget for the necessary equipment.

3.2 Training of Thai staff in Japan:

3.2.1 Two fellowships for the training of Thai staff in Japan for a period of one year each will be considered for the year 1969-1970.

3.2.2 Three to six month training in Japan for Thai personnel in the techniques of repair and maintenance of equipment will be considered additionally by the Japanese authorities.

3.3 Experts:

The Thai Virus Research Institute will request through its official channel an additional expert in arbovirus (Japanese encephalitis virus) to be stationed in the Institute for 6 months.

Furthermore, an extension of the assignment of Mr. Mitsuo Takagi for another 3 months would be also considered.

4. Priority subjects:

For 1969 and 1970, the following are selected as the priority subjects:-

- a) Arbovirus encephalitis especially Japanese encephalitis
(An outbreak of encephalitis has occurred in Chiang Mai in June-August 1969).
- b) Haemorrhagic fever.
- c) Control and surveillance of poliomyelitis.
- d) Studies on respiratory viruses.
- e) Studies on rabies, measles and other viral diseases.

5. Mutual exchange of information on the budget:

The Japanese Mission expects that the allocation of the Thai budget in need of this project will be informed by the Thai authorities at the commencement of the fiscal year. The Japanese authorities will also give the corresponding information to the Thai authorities.

6. Role of the Virus Research Institute in Thailand

In order to promote the virus study in Thailand the important role of the Virus Research Institute should be emphasized in the education of graduate and post-graduate students under the cooperation between the Institute, medical colleges, and other institutes.

7. The Publication:

The Collected Papers of the Virus Research Institute, Vol. 1 (1967-1968) will be published and necessary financial support for this will be considered by the Japanese authorities.

8. The Regular Consultation in 1970:

The next regular consultation will be held in Tokyo for two weeks in May or June, 1970.

II. The Thai Medicinal Plant Research Project

1. Review on the cooperation of 1964-1968:

1.1 Introduction: The Thai Medicinal Plant Research Project commenced in 1964, when Dr. T. Kariyone, National Institute of Hygienic Sciences, Japan, visited Thailand and gave the suggestion on the development of Thai medicinal plant resources. The Thai authorities started to send the trainees to Japan in 1965 according to Dr. Kariyone's suggestion. The Japanese authorities started the dispatch of the specialists and the equipment to Thailand in 1967. A research unit composed of four sections, namely, botany, pharmacognosy, plant chemistry and pharmacology, has been established in the Department of Medical Sciences, Yod-Se, Bangkok.

1.2 The Training of Thai Staff in Japan: The trainees so far accepted and will be accepted in a near future are as follows:

year	name	subject	Period
1965	Miss Chanporn Chandhanasut	administration for the research	9 months
	Miss Panida Kanchanapee	phytochemistry	1 year 3 months
1966	Mr. Daroon Pecharaply	pharmacognosy and medicinal botany	1 year
1968	Mrs. Wantana Ngarmwatana	pharmacology	6 months
	Miss Thaweephol Dechatiwongse	phytochemistry	1 year
1969	Dr. Verapong Podimuang	chemistry of natural products	6 months
	Mr. Prayudh Satravaha	pharmacology	1 year
1970	Mrs. Passara Ngearndee	pharmacognosy	6 months

1.3 Dispatch of experts to Thailand: In 1967 Dr. T. Shimomura, National Institute of Hygienic Sciences, Japan, stayed in Bangkok for 6 months. He made the suggestion and organization of the project and carried out the training in pharmacognosy in general. In 1968 Dr. K. Nishimoto, National Institute of Hygienic Sciences, succeeded the work. During his term of assignment in Bangkok for 14 months, the supply of the instruments from Japan was realized and the actual movement of the project commenced. He gave the training in the survey of herbal drug preparations, identification of medicinal plants, and the isolation and the characterization of the constituents. In 1969 Dr. T. Kimura succeeded the work and further development of the project is now in progress.

1.4 Equipment: Within yearly budgetary appropriation, the Japanese cooperation in the form of equipment chiefly for the works in pharmacognosy and phytochemistry was carried out both in 1968 and 1969 by the budgets of 1967 and 1968.

1.5 Progress of the cooperation: The conditions of the laboratories have been improved. The cooperation between Thai staff and Japanese experts is going on smoothly and friendly.

2. Future plan

2.1 The general policy: In order to promote the cooperation effectively, the Thai authorities and the Japanese Mission agree that Japanese cooperation in the forms of the provision of the equipment and the dispatch of the experts will be continued until 1970 within yearly budgetary appropriation.

The Japanese Mission expects the establishment of self-support by the Thai authorities in the research project after March 1971. However, the following-up on a long-term basis in the form of the dispatch of the experts for short-term assignment in Thailand and the acceptance of the trainees in Japan will be considered after March 1971.

2.2 The training of Thai staff in Japan: The Thai authorities expect that one or more Thai participants will be sent yearly to Japan and the cooperation in this form will continue after March 1971.

2.3 The dispatch of experts to Thailand in 1969-1970: Dr. T. Kimura will continue his work until April 1970. After the provision of the equipment at the beginning of 1970 by the budget of 1969, a pharmacologist will come to Thailand to help promote the work in pharmacological evaluation of the Thai medicinal plants. Further cooperation in the form of the dispatch of the experts will be considered according to the Record of Discussion of 1968 at Tokyo.

2.4 Equipment: Within the budgetary appropriation, the Japanese authorities will consider the provision of the equipment in 1969 and 1970. In 1969 more emphasis will be placed on the provision of the equipment necessary for the pharmacological evaluation of the Thai medicinal herbs.

2.5 The publication of the progress report will be discussed in the regular consultation in 1970. The Japanese Mission expects that the detailed future plan for self-support after 1970 and the selection of priority subjects will be discussed at the next consultation.

3. Regular Consultation in 1970:

The next consultation will be held in Tokyo in conjunction that of the Virus Research Institute Project.

Bangkok, August 19, 1969

(Signed)

Dr. Masami Kitaoka
Head of the Japanese
Mission.

(Signed)

Dr. Komol Pengsritong
Deputy Under-secretary of
State for Public Health,
Thailand.

第四回 R/D

タイ ウイルスセンター

団 長 深井 孝之助 (大阪大学医学部教授)
調査期間 47. 12. 5～12. 19 (15日間)

RECORD OF CONSULTATION BETWEEN THE THAI AUTHORITIES
CONCERNED AND THE JAPANESE MEDICAL MISSION

The Annual Meeting for the consultation on the implementation of technical cooperation in medical fields between Thailand and Japan was held in Bangkok from 6 December to 18 December 1972.

The list of participants in the meeting is attached in Annex.

The participants in the meeting reviewed the cooperation as it has been implemented and the progress that has been achieved since the beginning of the Virus Disease Control Project and the Medicinal Plant Research Project.

Both parties agreed that the Japanese cooperation for these two Projects in the form of dispatch of experts on long-term assignment and supply of equipment will be terminated in 1973 and enter the stage of Follow-up. Accordingly this will be the final Annual Meeting for these two Projects.

The parties concerned are pleased to note that the consultation was successful and achieved the objectives for which it is made.

The Meeting also noted that Dr. Susumu EBIHARA, Chief of the planning Office, National Cancer Center, Japan, while attending the above-mentioned meeting, inspected the general activities of the National Cancer Institute in Bangkok and gave technical advices to the staff of the Institute.

The Record of Consultation is attached hereunder. The programme of cooperation covered by this record will be carried out on approval by the two Governments and implemented in accordance with laws and regulations in force in the respective country.

Bangkok, December 18, 1972

(Signed)

Dr. Konosuke Fukai
Professor of Research
Institute for Microbial
Diseases
Osaka University
Head of the Japanese Mission.

(Signed)

Dr. Komol Pengsritong
Under-Secretary of State
for Public Health, Thailand.

I. The Record of Consultation on Virus Disease Control Project

1. It is noted with satisfaction by the parties concerned that the Virus Disease Control Project has made a steady progress since the beginning of the Project as a result of close contact and cooperation between the Thai and the Japanese authorities concerned for its implementation.

The Meeting observed the actual results achieved by the Project in the past years. The activities of the Virus Research Institute during the period of 1971 to 1972 were reviewed and the Annual Report of the Virus Research Institute for 1971 was distributed for consideration.

The field trials of Japanese Encephalitis Vaccine (purified, inactivated and lyophilized) in Chiang Mai and some live vaccines (measles, rubella, etc.) in Bangkok, supplied from the Research Institute for Microbial Diseases, Osaka University, had been undertaken successfully in 1971-1972 and further sero-epidemiological follow-up of vaccinated population is being continued.

The establishment and the activities of the two (2) surveillance stations in Khon Kaen and Songkhla were reported by the Thai side. While the Japanese side expressed their regret for the difficulties in functioning the stations owing to the delayed shipment of the equipment, the Thai side requested the Japanese side to consider the supply of necessary equipment for

the establishment of two more surveillance stations in Lam Pang (Northern Thailand) and Chantaburi (Eastern Thailand), as discussed in the Annual Meeting in 1971.

The participants concerned also agreed to publish "Collected Papers of the Virus Research Institute, Volume 2" and to distribute them to the related research organizations.

2. The Japanese cooperation for the Project will be terminated by December in 1973. Till then the Japanese side will continue cooperation for the Project as follows.

1) Dispatch of Experts

Dr. Toshihiko FUKUNAGA will continue his work at the Virus Research Institute until 19 October 1973 and Dr. Tadayoshi SHIBATA will complete his assignment on 24 February 1973.

The Japanese side will consider the dispatch of one expert in the field of Arbovirus for about six (6) months around March, 1973 and another expert for about three (3) months around June, 1973 upon request of the Thai side.

In addition, one more expert will be dispatched around October, 1973 for about one or two (2) months for the purpose of the completion of the research work.

2) Training of Thai Personnel

In accordance with Record of Consultation in 1971, one Thai participant, Mrs. Suranga SRIMARUT, has been accepted in Japan and one more fellowship for a period of one year will be additionally granted within the Japanese Fiscal Year 1972.

In Japanese Fiscal Year 1973 the Japanese side will consider within the budgetary appropriations to offer two (2) fellowships for the training of Thai personnel for a period of about one year each.

Both the Thai and Japanese side agreed that, even after the termination of the present project, Japanese cooperation in the training of Thai personnel in Japan will be continued along with the dispatch of experts as a Follow-up plan. (cf. 3. Follow-up Plan)

3) Supply of Equipment

The equipment and materials valued at about ¥4,500,000 including the shipment charges will be

provided to the Institute in Japanese Fiscal Year 1972. However, shipment of the equipment is expected to be made in 1973.

3. Follow-up Plan

It is recommended that after the termination of Japanese cooperation for the Virus Disease Control Project in 1973, a Follow-up plan for the term of two (2) years will be considered within the budgetary appropriations as follows:

1) Dispatch of Experts

The dispatch of one or two (2) experts for a period of not more than three (3) months will be considered upon request of the Thai side each year.

2) Acceptance of Thai Personnel for Training

One fellowship for the training of the Thai personnel in Japan on the specialized subject for a period of one year will be considered by the Japanese side each year. The Thai side requested the further support of short-term training programme of the Thai personnel so that they can learn the recent advanced techniques on appropriate subjects as adopted in Japan. Under this programme one fellowship of approximately three (3) months duration should be granted each year.

The Japanese side will consider the provision of spare parts necessary for the maintenance and repair of the provided equipment and the supply of newly-developed attachments which are expected to keep the function of such an equipment up-to-date will be considered as well.

II. The record of Consultation on Medicinal Plant Research Project

1. The Meeting noted with satisfaction that the Medicinal Plant Research Project had made a steady progress in the past six (6) years and the research unit is now working actively on botanical, pharmacognostical, chemical and pharmacological studies on the Thai medicinal plants, contributing directly or indirectly to the development of medicinal resources and to the legal control of herbal drugs in Thailand.

2. The Japanese cooperation in the form of long-term assignment of experts and supply of equipment is due to terminate in Japanese Fiscal Year 1972, as was agreed at the Annual Meeting in 1971 at Bangkok.

Till then the Japanese side will continue cooperation for the Project as follows:-

1) Dispatch of Experts

Dr. Kazumitsu NISHIMOTO, expert in pharmacognosy and plant chemistry, now in Bangkok, will continue his work until 26 May 1973.

Mr. Motokichi SATAKE, expert on taxonomy, will be dispatched in February, 1973 for a period of about two (2) months.

2) Acceptance of Thai Personnel for Training

The Japanese side will consider the acceptance of one Thai personnel in Japanese Fiscal Year 1973, which will be regarded as a part of the Follow-up Plan shown below.

3) Supply of Equipment

The Japanese side regrets the delay of the supply of equipment valued about ¥4,078,000 including the shipping charges which is due to be provided before March, 1973.

3. Follow-up Plan

It is recommended that after the termination of the Japanese cooperation in Japanese Fiscal Year 1972, a follow-up Plan for a term of two (2) years, including dispatch of short-term experts, acceptance of Thai personnel for training, and maintenance and repairing of the provided equipment will be considered within the budget appropriations on the same conditions as shown in the Virus Disease Control Project.

4. The second issue of the Progress Report of the Project covering the period of 1971-1973 will be prepared by the end of 1973.

Bangkok, December 18, 1972

(Signed)
Dr. Konosuke Fukai
Professor of Research
Institute for Microbial
Diseases
Osaka University
Head of the Japanese Mission

(Signed)
Dr. Prakorb Tuchinda
Director-General
Department of Medical Sciences
Ministry of Public Health

(Signed)
Dr. Kazumitsu Nishimoto
Chief, Division of Pharmacognosy
Department of Vegetable Drugs
National Institute of Hygienic Sciences
Japanese Mission

ANNEX

LIST OF PARTICIPANTS

Japanese side

Dr. Konosuke Fukai
Professor of Research Institute for Microbial
Diseases
Osaka University
Head of the Japanese Mission

Dr. Susumu Ebihara
Chief of the Planning Office
National Cancer Center
Member of the Japanese Mission

Dr. Kazumitsu Nishimoto
Chief, Division of Pharmacognosy
Department of Vegetable Drugs
National Institute of Hygienic Sciences
Member of the Japanese Mission

Mr. Mitsu Ishizaki
Medical cooperation Department
Overseas Technical Cooperation Agency
Member of the Japanese Mission

Mr. Moriya Miyamoto
Chief of OTCA Bangkok Office

Mr. Kenji Kumagishi
OTCA Bangkok Office

Mr. Masaru Morimoto
OTCA Bangkok Office

Dr. Toshihiko Fukunaga
Japanese Expert in Arboviruses
Thai Virus Research Institute

Dr. Tadayoshi Shibata
Japanese Expert in Arboviruses
Thai Virus Research Institute

Mr. Kiyoshi Oda
Coordinator for the National
Cancer Institute Project

Thai side

Dr. Komol Pengsritong
Under-Secretary of State for Public Health
Ministry of Public Health

Dr. Prakorb Tuchinda
Director-General
Department of Medical Sciences
Ministry of Public Health

Dr. Nadhirat Sangkawibha
Chief of Enteroviruses Section
Virus Research Institute
Department of Medical Sciences
Ministry of Public Health

Miss Thanomwang Amatayakul
Special Grade Scientist
Division of Medical Research
Department of Medical Sciences
Ministry of Public Health

〔参考〕

討議議事録

団 長 福士 克 (仙台市立病院眼科医長)

調査期間 43. 5. 23～5. 30 (8日間)

A DISCUSSION BETWEEN THE REPRESENTATIVES OF RAMATHIBODI MEDICAL FACULTY OF THAILAND AND THE MEDICAL SPECIALISTS OF JAPAN AT THE DEPARTMENT OF OPHTHALMOLOGY, RAMATHIBODI MEDICAL FACULTY, BANGKOK, THAILAND.

The discussion was held with members described as follows from 2.00 p.m. to 4.30 p.m. May 29, 1968 at the conference room of the Ramathibodi Medical Faculty.

A large number of discussion was held under an explored viewpoint by Dr. Suguru Fukushi, who stayed with a purpose of the exploration on the new establishing Ramathibodi Medical Faculty with a particular attention to the Department of Ophthalmology and their basic research facilities for a period of 8 days from 23rd of May to 30th of May, 1968.

All arrangements of Dr. Fukushi's exploration are provided by Dr. Uthai Rutnin, Acting Chairman of Department of Ophthalmology. Ramathibodi Medical Faculty.

Dr. Suguru Fukushi is expected to be a visiting professor in biochemical research and teaching project of Department of Ophthalmology, which will begin functioning in the next academic year.

Members precipitated on the discussion

Dr. Aree Valyasevi
Dean of Ramathibodi Medical Faculty
Thailand

Dr. Uthai Rutnin
Acting Chairman of Department of Ophthalmology,
Ramathibodi Medical Faculty
Thailand

Dr. Suguru Fukushi
Medical Specialist in Ophthalmology
Department of Ophthalmology,
Tohoku University Medical School,
Japan

Dr. Kazuichi Konyama
Medical Specialist of the OTCA,
Japan

Mr. Michio Takeda
Representatives of the OTCA in Bangkok,
Japan

Mr. Hideo Ono
A staff member of the OTCA in Tokyo,
Japan

The Content of Discussion

REQUEST FROM THE JAPAN TO THE THAI RESEARCH FACILITIES

The Completion of the Ramathibodi Medical Faculty had been expected on December, 1968, however, it is suspected to delay until approximately April 1969, because of the postponing construction.

While the research laboratory of the Department of Ophthalmology had been provided in the Operating room of eye surgery, the Japan strongly requested to change the laboratory to the "academic area", where is designed to be a central research laboratory with a good basic equipment.

An air conditioner for the research laboratory may be provided by the Thai.

One technical assistant may be provided by the Thai for Dr. Fukushi from the starting year and an additional assistant may be arranged from the next year of the starting year.

The research laboratory provided to Dr. Fukushi will be equipped with a fume hood.

Running expenses off approximately 4000.- baths/month, may be provided to Dr. Fukushi, beginning from the new financial year 1969 in Thailand.

REQUEST FROM THE THAI TO THE JAPAN

Dr. Suguru Fukushi is suggested to share his own official hours to teach biochemistry of the eye and lead biochemical techniques for the 3rd residents of Department of Ophthalmology.

Equipments to a research and teaching for Dr. Fukushi must be supplied within a suitable budget from the OTCA.

Arrival of Dr. Fukushi for his mission has been expected at early in March, 1969 to begin his mission.

The Thai strongly requests to have a well qualified person of the same capacity as Dr. Fukushi who can continue his work, after Dr. Fukushi left from his mission. Mr. Takeda advised that a new application to the O.T.C.A. should be made 6 months prior to his leaving.

A PLAN PROVIDED BY THE THAI FOR EDUCATION OF RESIDENT TRAINING OPHTHALMOLOGY DURING THE PERIOD OF COOPERATION WITH THE OTCA UNDER COLOMBO PLAN

1st year	Basic training of Ophthalmology in Japan
2nd year	Clinical work in Department of Ophthalmology, Ramathibodi Medical Faculty.
3rd year	Same as the second year and the training of basic and clinical research in Ophthalmology.

Recorded by Dr. Suguru Fukushi
May 30, 1968

第一回 R/D

団 長 外山 敏夫(慶応大学医学部教授)

調査期間 46. 2. 3～2. 13(11日間)

GIST OF DISCUSSION BETWEEN THE REPRESENTATIVE OF
DEPARTMENT OF OPHTHALMOLOGY AND OTOLARYNGOLOGY
AND THE DEPARTMENT OF PATHOLOGY, FACULTY OF
MEDICINE, RAMATHIBODI HOSPITAL AND JAPANESE
SURVEY MISSION FOR THAILAND

Introduction

The OTCA has begun cooperation with the Department of Ophthalmology and Otolaryngology of the Faculty of Medicine, Ramathibodi Hospital since 1968 and with the Department of Pathology of the same faculty since late 1969 in the development of their activities.

From 3rd to 13th February, 1971 the Mission, Representatives of the two departments and the dean discussed various aspects of the projects to evaluate the past, three years among five year plan for Department of Ophthalmology and Otolaryngology, one year among three year plan for Department of Pathology, and to set the plan for the remaining years to come. The mission received the progress reports of the projects from the chairmen of the two departments.

The Japanese mission understood, after the explanation given by the representatives and visits to rural hospitals, that there is in Thailand a shortage of medical personnel, especially in Pathology and in Ophthalmology and Otolaryngology. The aim of Ramathibodi Hospital is to create the personnel who will take part in the medical education which will ultimately supply enough manpower to run the adequate medical service throughout the country.

The discussions held between them are summarized in the following:

1. Project for Department of Ophthalmology and Otolaryngology
 - 1.1 Evaluation of the past activities of cooperation.

The items discussed are as follows:

- 1) Residency training program in basic ophthalmology: The Department sent four residents in 1968, another four residents in 1969 to Japan for training in basic ophthalmology for the period of 9 to 11 months. The result is favourable.
- 2) Refraction clinic: This was set up at the early phase by Dr. Konyama and is gradually being taken over by Thai counterparts at present. The result seemed to the mission satisfactory.
- 3) Contact lens units.
- 4) Orthoptic clinics and the training of orthoptists.
- 5) Fundus fluorescein angiography and fundus photography unit.

These three units are in the process of building up their activity smoothly, and they are hoped by the mission to get to their full activity very soon.

As for 6) Biochemistry unit, it did not give expected result as originally planned. The mission, however, noted that the major equipments donated by OTCA under this item is currently serving for the research activity of the Hospital, being on loan to the Central Research Laboratory of the same hospital. The mission expressed their hope that they will continue to be useful in the activity of the Hospital, and in the near future they will serve for the research activities of the Department again.

The mission understood with deep satisfaction the appreciation of Dr. Uthai, the Chairman of the Department, for the activities of Dr. K. Konyama, the expert sent by OTCA to his department, on various aspects of the department and on his participation in rural health project in Bang-pa-in, which may give one of the basic aspects in planning the ophthalmic service for the country.

1.2 The projects requested in 1970 by Ramathibodi and under consideration by OTCA.

These items are the followings:

- 1) The fellowship to send Dr. Vijitr and Dr. Thongchai to Further their study in pathology and

glaucoma for three and two months respectively and two fellowships to send nurses to Japan for three months to study the operating room's management and new technique in ophthalmic nursing.

2) Equipment for electrophysiology unit, dark adaptometer and small amount of equipment for setting up the ophthalmic pathology unit and for teaching.

3) Short term visiting professor in ocular electrophysiology and neuro-ophthalmology. Prof. S. Ishikawa is already requested in 1970 to visit the Department.

The mission expressed their hope that these being all important for the activity of the department, these requests will be met at an earliest possible date.

1.3 Future plan and requests from Ramathibodi.

The items requested by Ramathibodi in accordance with the future planning of the development of the department are as follows.

- 1) One long term expert to work at the department.
- 2) Fellowship for four first year residents to receive basic ophthalmology training in Japan.
- 3) Fellowship for teaching staff to study the retina and ophthalmic microsurgery in Japan for three months.
- 4) Two fellowship for nurses or orthoptists to study nursing in ophthalmic clinics, or to study pediatric ophthalmology, orthoptics and methods of ophthalmic examination.
- 5) Photocoagulator for retinal diseases.
- 6) Ophthalmic microsurgery unit.

The summary of discussion on these items will be given later.

2. Project for Department of Pathology

The mission understood from the explanation of Dr. Natth that the Department of Pathology is related in the activities, is not only other departments in Ramathibodi but also to other hospital throughout the country. They also understood

the difficulty and shortage of manpower in pathology in this country, that is caused by the pathology operating behind the scene of clinical medicine.

2.1 Evaluation of the past activities of cooperation.

The items discussed are as follows:

- 1) Animal facilities for experimental pathology.
- 2) Electron microscopy laboratory.
- 3) Experimental pathology research development.

Dr. Natth divided the activity of his department into three: human pathology, clinical pathology and experimental pathology. The former two are for the medical service throughout the country. The last one, experimental pathology, especially, is aimed for the upgrading of the pathology researches in this country, and for the training of pathologists and technicians in pathology. The activities in experimental pathology will serve not only for the training of the personnel in advanced stage, but also will be an important basis to keep the quality of the techniques in clinical pathology and human pathology. The mission is satisfied with the progress in setting up the animal facilities and breeding pure strain animals, which will be the basis of further activity in experimental pathology. As for electron microscopy laboratory, the mission hopes that the electron microscope which has just arrived will be installed and begin the service quickly, and the activity of the laboratory will be built up as planned. The mission also noted that Dr. Natth already has two senior staff and one technologist who have good experience in electron microscopy. The mission noted with pleasure that Dr. Miyamoto, the expert sent by OTCA, is working on animal facility, performing experiments on cancer, and is engaged in other activities of the department.

2.2 The project requested by Ramathibodi in 1970 and under consideration, including funds for super freezer, refrigerators, centrifuge and a few small equipment. The mission expressed their hope that these being all important for the activity of the department, these requests will be met at an earliest possible date.

2.3 Future plan and requests from Ramathibodi

The items requested by Ramathibodi in accordance with the future plan of the department are as follows:

- 1) One long term expert to work at the department continuing in 1972.
- 2) Two short term visiting professors for 1971 and another two in 1972.

For 1971, assistant Prof. S. Onishi in electron microscopy, and Prof. Miyaji, in liver cancer, are requested in 1971 to be at the department for the period of 3 months. For 1972, the experts in immunopathology and autoradiography are being considered for visiting professors to the department.

- 3) To send three Thai staffs of the department to Japan in 1971, four Thai staffs in 1972.
- 4) Possibility is being explored to have cooperation in clinical pathology in 1972.

Past cooperation in Pathology has conformed with the initial report and recommendation made by Dr. H. Miyaji in 1969.

Final conclusion

There were several other problems discussed about the future plan of the cooperation for The Department of Ophthalmology and Otolaryngology and the Department of Pathology. These problems will continue to be investigated until they will be taken up in more definite shape.

The mission understands that the future planning and requests by the two departments are adequate and necessary for the activity of the department in the future, and hoped that they would receive a favourable decision by OTCA. In this connection, the mission thinks it necessary to evaluate the projects again at least one year prior to the end of these projects and discuss the possible extension of the projects or the planning of the new projects which may evolve after the present ones.

As the result of discussion on these projects of cooperation, summarized above, the mission had the impression that these projects are going smoothly in general, thanks to the effort of the people in charge to overcome various kinds of obstacles which may occur in these kinds of international cooperation. Both expressed their hope that further

effort should be made to complete these projects in success,
under the approval of the governments.

February 12, 1971

(Signed)

Dr. Toshio Toyama

(Signed)

Dr. Uthai Rutnin

(Signed)

Dr. Akira Nakajima

(Signed)

Dr. Natth Bhamarapravati)

参 考

討議議事録

専門家名 宮 地 秀 樹 (和歌山県立医大教授)

派遣期間 44.1.30～44.2.12

R E P O R T

JAPANESE - THAI JOINT PROGRAM

IN

EXPERIMENTAL PATHOLOGY

The following report on the establishment of a Japanese-Thai joint program in Experimental Pathology represents the conclusion reached by Dr. Hideki Miyaji of the Department of Pathology, Wakayama Medical College and Dr. Natth Bhamarapravati, Head of the Department of Pathology, Faculty of medicine, Ramathibodi Hospital.

The discussion took place in several sessions during Dr. Miyaji's visit to Thailand (January 30 - February 12, 1969). In this period Dr. Miyaji had the opportunity to visit the Department of Pathology at the Faculty of Science, and at the Faculty of Medicine, Ramathibodi Hospital. He later visited the headquarter of the University of Medical Sciences, and also visited Siriraj Medical School, Chulalongkorn Medical School, the National Cancer Institute, and the Virus Research Institute of the Ministry of Health.

In the course of his visit, Dr. Miyaji met several responsible university officials including Dr. Jajaval Osathanondhs, Rector of the University; Dr. Swasdi Skulthai, Dean of Faculty of Graduate Studies; and Dr. Aree Valyasevi, Acting Dean of faculty of Medicine, Ramathibodi Hospital.

The conclusions reached by Dr. Miyaji and Dr. Natth are as follows: -

1. General Objectives It appears to be highly desirable and worthwhile to develop and strengthen the research and training of future university teachers in experimental pathology in Thailand with the cooperation and support of the Japanese Government. Experts in experimental and human pathology will be sent from Japan to work with Thai pathologists in developing this program. The aim of the program should include the training in experimental and human pathology at the graduate level as well as to conduct specific research projects.
2. Site of the Program The site where this program is to be implemented, will be at the Department of Pathology in the Faculty of Science and in the Faculty of Medicine, Remathibodi Hospital. This location is very close to the National Cancer Institute and other research and medical institutions in Pyathai district in Bangkok. The Faculty of Science is also the national center of the graduate training program in Basic Medical Sciences (Anatomy, Physiology Biochemistry etc.) at the M. S. or Ph. D. level in Thailand. Since the educational program will be conducted at the graduate level, the overall administration of this program from the Thai side will be under the Faculty of Graduate Studies.
3. The main theme of this program will be "Liver and Nutrition". Liver diseases and nutritional disorders are important current medical problems of Thailand and South East Asia.
4. Support from the University of Medical Sciences. The Rector of the University of Medical Sciences (soon to be called "Mahidol University") and the Deans of the Faculties which are to be involved in this program had voiced their concern on the shortage of the pathologists in Thailand, and had expressed their full support and cooperation for this program, which would lead to a significant increase in the number of pathologists in this

country in the near future.

5. Schedule of the Program. The program will be conducted in two periods.

Period I (One year beginning 1969) In this period the following activities are expected.

1. The setting up of facilities for experimental work.
2. Development of teaching program in experimental pathology for medical and graduate students.
3. To conduct specific research projects in transplantable hepatic tumors including rapid-and slow-growing hepatomas.
4. Exploration and preparation for research in human pathology which may be started in period II of the program.

During this period I, a fellowship of 6 month duration would be proposed to the Japanese Government to send a Thai biologist to Japan to study the techniques of animal breeding, and the proper care and maintenance of experimental animal colony.

Period II (Two years). The effort in this period would be to strengthen research capabilities of Thai pathologists further in Electron Microscopy and Molecular Biology. It is expected that 2 - 3 research fellowships for Thai pathologists to study in Japan and the furnishing of one electron microscope of medium size (e. g. Hitachi HS 8 or similar) to the Department of Pathology, Ramathibodi Hospital will be proposed to the Japanese Government.

The details of this part of the program will be further discussed and finalized in Japan by the parties concerned.

6. Graduate training program in Experimental Pathology.

It is hoped that this program would play a significant role in the training of young Thai experimental and human pathologists, who will play an important role in the successful development of new medical schools and research institutions in Thailand. Three types of graduate students are expected to be

involved in this program.

1. Residents in Pathology. These are physicians with M. D. degree who are taking a residency training in Pathology at Ramathibodi Hospital.
2. Graduate Students in the Faculty of Graduate Studies. These are Biological Scientists or Doctors of Veterinary Medicine who are candidates for Master of Science degree in Experimental Pathology. This degree requires two years of course work and research work. After they receive the Master degree, some top students may be selected to continue in a Ph. D. program which requires another 3 years of study and research.
3. Research fellows. Some physicians with M. D. degree or Biological Scientists may participate in this program by joining in some specific research projects.

	Period I	Period II
Residents in Pathology	4	8 ~ 10
Graduate Students (for M.S degree)	3	6
Research Fellow	1	7

This joint report will be forwarded through the Japanese Embassy and also through the University of Medical Sciences to appropriate responsible authorities.

Signed
Hideki Miyaji, M.D.
Department of Pathology
Wakayama Medical College

Signed
Natth Bhamarapavati, M.D.
Department of Pathology
Faculty of Medicine,
Ramathibodi Hospital

Bangkok, Thailand
February 10, 1969

⊙ タイ：ラマチボディ医科大学 実験病理部門

第一回 R/D

団 長 外 山 敏 夫 (慶応義塾大学医学部教授)

調査期間 4 6. 2. 3 ~ 2. 1 3 (1 1 日間)

(注) タイ ラマチボディ医科大学眼科部門第一回 R/D が本件 R/D を兼ねているので参照
のこと (P103)

⊖ タイ：薬品研究所

第一回 R/D

議長 油谷 精夫（海外技術協力事業団専務理事）

討議期間 43年6月28日 東京において開催

(注) タイ ウイルスセンター第一回 R/D が本件 R/D を兼ねているので参照のこと

(P 81)

⊖ タイ：薬品研究所

第二回 R / D

団 長 北 岡 正 規 (国立予防衛生研究所)

調査期間 4 4. 8. 5 ~ 8. 2 3 (1 9 日 間)

団長 4 4. 8. 5 ~ 8. 2 3 (8 日 間)

(注) タイ ウイルスセンター第二回 R / D が本件 R / D を兼ねているので参照のこと (P 8 5)

⊖ タイ：薬品研究所

(参考)

第三回 R/D (本プロジェクト関係抜萃)

団 長 深 井 考之助(大阪大学医学部教授)

調査期間 4 6. 9. 1 ~ 9. 1 2 (1 5 日間)

(注) 本件プロジェクトの R/D はウイルスセンタープロジェクトと一本化されて R/D を結んだのであるが、関係部分しか資料として発見されなかったため参考として掲載される。

RECORDS OF ANNUAL CONSULTATION BETWEEN THAI AND JAPANESE
AUTHORITIES

In 1971 (Bangkok, September 10, 1971)

1. The Meeting noted with satisfaction that the research unit, is composed of four laboratories (botany, pharmacognosy, plant chemistry, and pharmacology), had been established and the work had progressed smoothly and steadily. The facilities of the pharmacological laboratory had been continually improved during the past two years.

Although the research results had not yet contributed directly to the pharmaceutical production in Thailand, but the quality control of indigenous drugs being performed by these laboratories had already yielded some valuable scientific information essential for the legal control of crude drugs in Thailand.

2. The Meeting expected that the cooperation between Thailand and Japan will be continued even after the establishment of the research unit in the form of the follow-up evaluation of the Project.

3. The Japanese side will consider, within the budgetary appropriation, supplementary provision of equipment in 1971. After 1972 the supply will be confined to the spare parts necessary for the maintenance and the repair of the provided equipment and to the replacement of the damaged ones. The Japanese side expects that the Thai side will consider the necessary budget for the promotion of the project after 1972.

4. The Thai side expects that the training of Thai personnel in Japan will be continued in the future years within the Japanese budgetary appropriations. As soon as the Thai scientific personnel in the research unit have been adequately trained in their specialized fields, suitable trainees from other institutions who work closely with the research unit may be nominated.

5. The Meeting confirmed the dispatch of a Japanese expert in pharmacology and phytochemistry and the short-term assignment of one or more taxonomists for carrying out field survey of Thai medicinal plants in 1972. The Thai side expects that the dispatch of a pharmacologist will be considered for 1972 by the Japanese side.

6. The Thai side expects the short-term assignment of two Japanese experts in pharmacognosy and pharmacology for the consultation and the follow-up of the Project after 1972 as considered necessary. The cooperation in the field of structural study on natural product isolated in the plant chemistry laboratory is also expected to be continued.

7. The first issue of the progress report of the Project for 1967-1970 has been published. The publication of the second issue will be considered in 1973 to cover the progress report in 1971-1972.

8. It is expected that the next consultation in conjunction with the Project will be held in Japan in 1972.

⊖ タイ：薬品研究所

第四回 R / D

団 長 深 井 考之助（大阪大学医学部教授）

調査期間 4 7. 1 2. 5 ～ 1 2. 1 9（ 1 5 日間）

（注） ウイルスセンター第四回 R / D が本件 R / D を兼ねているので参照のこと（ P 9 1 ）

⊕ タイ国立病院（診療団）

第一回 R / D

団 長 西 占 貢（京都大学医学部教授）

調査期間 4 1. 8. 8 ~ 8. 2 4（17日間）

Record of Discussion of the meeting held between the Government of the Kingdom of Thailand and Japanese Medical Survey Team on the despatch of the Japanese Medical Mobile Teams to Thailand.

1. The Government of Japan will despatch two Medical Teams to Thailand in order to extend medical services and related activities under the Colombo Plan.

2. The places where Japanese Teams carry out their medical activities will be as follows:

- (1) Kalasin or Srisaket Province for the Team No. 1
- (2) Buriram Province for the Team No. 2

3. The Japanese Teams will consist of the following members.

Team No. 1 (Kalasin or Srisaket Team)

- (1) Medical doctor 1
- (2) General surgeon 1
- (3) Ophthalmologist (Pending)
- (4) Laboratory technician 1
- (5) Nurse 1
- (6) Coordinator 1

Team No. 2 (Buriram Team)

- (1) Tuberculosis specialist or Chest surgeon 1

- (2) Medical doctor 1
- (3) Laboratory technician 1
- (4) X-ray technician 1
- (5) Nurse 1
- (6) Coordinator 1

4. Government of Thailand suggested to the Japanese Medical Survey Team to send the third Team to other Provinces in Thailand.

To this suggestion Japanese Medical Survey Team answered to convey this idea to the Government of Japan.

5. The Japanese Medical Teams will be sent in January 1967 and will stay for a period of two years.

Replacement of some of the members will be considered according to the circumstances.

6. The Members of the Japanese Medical Teams will be sent to Thailand through the normal procedure of the Colombo Plan and shall be granted privileges, exemptions and benefits including

- (1) living accommodation,
- (2) free medical care, and
- (3) additional travelling expenses, if any.

7. The Japanese Medical Teams shall be exempted from any liability in respect to any accident that may arise in connection with the bonafide discharge of medical treatment activities carried out by the Teams.

8. Although the vehicles necessary for the mobile activities including the X-ray van, medical appliances, sanitary materials and medical drug to be used by the Japanese Medical Teams will be supplied by the Government of Japan under the Colombo Plan, all the facilities and medical appliances including common drugs available in the hospitals can also be used by the Japanese medical teams.

9. All the vehicles will be handed over to the Government of Thailand upon their arrival in Thailand and prior to the commencement of the project.

Registration and other formalities for the use of the vehicles will be completed by the Government of Thailand as soon as possible after the arrival of the vehicles.

10. The Government of Thailand will be responsible for the storage of the vehicles, the medical appliances, sanitary materials and medical drugs supplied by the Government of Japan.

11. After completion of the project, the medical appliances used by the Teams and the remainder of the sanitary materials and medical drugs will be donated to the Government of Thailand.

12. Customs duties and other similar charges on the articles mentioned in 8. above shall be exempted.

13. The Government of Thailand will take the necessary procedures to approve the Japanese medical licence for this particular medical service.

14. To assist the activities of the Japanese Medical Team, the Government of Thailand will take necessary preparatory measures as well as provide the following.

	<u>Personnel</u>		Buriram	
	Kalasin or Srisket hospital	health center	hospital	health center
1) medical doctor	one	one	one	one
2) X-ray technician	-	-	one	one
3) laboratory technician	one	one	one	one
4) nurse	one	one	one	one
5) secretary		one		one
6) driver	one driver for each vehicle		one driver for each vehicle	

According to the circumstances, other necessary personnel, will be supplied by Government of Thailand.

Equipment and supplies

- (1) necessary motor vehicles with fuel for team operative
- (2) Narcotics, serum and blood
- (3) Supplementary drugs, medical appliances and sanitary materials available in Thailand.

15. Any running expenses including fuels necessary for the services of the Japanese Medical Teams will be borne by the Government of Thailand.

This is the record of the meeting to be approved by the departments and ministries concerned.

Signed

Mitsugu Nishiura
Chief of the Japanese
Medical Survey Team

Aug. 22, 1966
Mali Thaineua
Department of Health

(6) ク メ ー ル
 (旧カンボジア)

カンボジア医療センター

(L' Amitie' Khmero - Japonaise et le
Centre d' Elevage de la Fraternite'
Khmero - Japonaise)

与が行われるため、カンボディア王国政府に代って、日本国民又はその支配する日本国の法人と直接に契約を締結するものとする。

2 1の契約（その変更を含む。）は、

(a) この協定の規定

(b) この協定の実施のための両政府間の取極の規定及び

(c) 実施計画

に合致するものでなければならない。その契約は、認証を得るため、日本国政府に提出されなければならない。この項の規定に基づいて認証された契約は、以下「契約」という。

3 1の規定にかかわらず、第1条1に定める生産物及び役務の供与は、契約を締結することなく行うことができる。ただし、各場合について両政府間の合意によらなければならない。

第4条

1 日本国政府は、第3条1のカンボディアの当局が契約により負う債務に充てるため、並びに第3条3に定める場合には同項の規定に基づいて行われる生産物及び役務の供与の費用に充てるため必要な支払を、両政府が合意により定める手続によって、行うものとする。その支払は、日本円で行うものとする。

2 1の支払に係る生産物及び役務は、その支払により、かつ、その支払が行われた時に、日本国がカンボディアに供与したものとみなされる。

第5条

両政府は、この協定の円滑なかつ効果的な実施のため必要な措置を執るものとする。

第6条

両政府に対しこの協定の実施に関する勧告を行う責任を有する両政府の代表者で構成される合同委員会を設置する。

第7条

この協定の実施細目は、両政府が合意により定めるものとする。

第8条

この協定は、両締約国によりそれぞれの憲法上の手続に従って批准されなければならない。この協定は、批准書の交換の日に効力を生ずる。批准書は、できる限りすみやかに東京で交換されるものとする。

以上の証拠として、各全権委員は、この協定に署名調印した。

1959年3月2日にブノンペンで、本書2通を作成した。

日本国政府のために

吉岡範武

カンボディア王国政府のために

ソン・サン

附属書

- 1 農業技術センター（農機具部及び巡回診療班を含む。）
- 2 種畜場
- 3 両政府間で合意されるその他の生産物及び役務の供与

昭和34年7月6日
外務省告示第76号

昭和34年3月2日にブノンペンで署名調印された日本国とカンボディアとの間の経済及び技術協力協定の批准書の交換は、昭和34年7月6日に東京で行われた。よつて、同協定はその第8条の規定に従い、同日に効力を生じた。

昭和34年7月6日
外務省告示第77号

昭和34年3月2日にブノンペンで署名された日本国とカンボディアとの間の経済及び技術協力協定の実施細目に関し、昭和34年5月16日にブノンペンにおいて日本国特命全権大使とカンボディア王国外務大臣との間で次の書簡の交換が行われた。

（往簡訳文）

書簡をもって啓上いたします。本使は、1959年3月2日に署名された日本国とカンボディアとの間の経済及び技術協力協定に言及する光榮を有します。日本国政府は、同政府が同協定第7条の規定に基づいて次のとおり合意することを提案いたします。

I 援助

- 1 同協定の規定に基く援助は、日本国とカンボディアとの間の通常の貿易が阻害されないように、かつ、外国為替上の追加の負担が日本国及びカンボディアに課されないように、実施しなければならない。
- 2 カンボディア王国政府は、日本国が同協定第1条の生産物及び役務を供与することができるようにするため、利用することができる現地の労務、資材及び設備をできる限り提供するものとする。
- 3 日本国民であつて、同協定第1条1の計画の実施のためカンボディアに在ることを両政府が必要と認める者は、カンボディアにおける所要の滞在期間中、その作業の遂行のため必要なすべての便宜を与えられるものとする。
- 4 前項にいう日本国民は、カンボディアにおいて、同協定に基く役務の供与から生ずる所得に対する課税を免除される。
- 5 日本国の国民又は法人がその作業の遂行のため資材及び機械を一時的に輸入して使用する必要がある場合には、それらの輸入及び再輸出のため、すべての便宜がカンボディア王国政府により与えられるものとする。
- 6 カンボディア王国政府は、同協定の規定に基いて供与された日本国の生産物が、カンボディアの領域から再輸出されないように配慮する。

II 契約

- 7 同協定第3条2の規定に従つて日本国政府に提出された契約は、それがブノンペンに提出された日から6週間内に日本国政府により認証されなければならない。契約が同協定第3条2の規定に合致しない府と日本国政府が認めるときは、認証の拒否の通告は、前記の期間内に日本国政府によりカンボディア王国政府に対して行われるものとする。
- 8 契約は、日本円で通常の商業上の手続によつて締結され、かつ、実施されるものとする。
- 9 契約は、その契約の実施から生ずることがある紛争が、両政府が定める手続に従つて解決される旨の規定を含まなければならない。

III 支払

- 10 同協定第3条1に定めるカンボディアの当局（以下「カンボディアの当局」

という。)は、日本国の外国為替公認銀行と取極を行い、自己の名による特別勘定を開設してその銀行に日本国政府からの支払の受領等を授権し、及びその取極の内容を日本国政府に通告するものとする。特別勘定は、利息を付さないものと了解される。

- 11 カンボディアの当局は、契約の規定に基いて支払の義務が生ずる少くとも15日前に、支払金額及びカンボディアの当局が関係契約者に支払を行うべき日を記載した支払請求書を日本国政府に送付しなければならない。
- 12 日本国政府は、支払請求書を受領したときは、請求金額を前記のカンボディアの当局による支払の日の前日までに10に定める銀行に支払わなければならない。
- 13 日本国政府は、同協定第3条3の規定による生産物及び役務の供与の費用に充てるための支払を、前項に定めると同一の方法で、行わなければならない。
- 14 12及び前項の規定に基いて支払われる金額は、特別勘定に貸記するものとし、他のいかなる資金も、同勘定に貸記されないものとする。同勘定は、11及び前項の目的のためにのみ借記を行うものとする。
- 15 カンボディアの当局が特別勘定に払い込まれた資金の全部又は一部を契約の解除又はその他の原因で引き出さなかった場合には、未払金額は、日本国政府との間で適当な取極が行われた後に11及び13の目的のための支払に充てられるものとする。
- 16 特別勘定の借記により支払われた金額の全部又は一部がカンボディアの当局に返還された場合には、その返還された金額は、14の規定にかかわらず、特別勘定に貸記するものとする。前項の規定は、これらの金額について準用する。
- 17 同協定第4条2の規定の適用上、「その支払が行われたとき」とは、10に定める銀行が日本国政府が行った支払をカンボディアの当局に代って受領した時をいう。

IV 合同委員会

- 18 両政府は、それぞれ、同協定第6条にいう合同委員会のために代表1人及

び代表代理 2 人を任命するものとする。

19 合同委員会は、一方の政府の代表の要請によって会合するものとする。

20 合同委員会は、次のことを行うこととする。

(1) 両政府に次の事項を勧告すること。

- (a) 契約の作成のため従うべき手続
- (b) 当該契約の日本国政府による認証のための方式
- (c) 同協定第 4 条にいう支払の方式
- (d) 作成すべき実施計画の主要点

(2) 実施計画に定める事業の進行状態について両政府に報告すること。

(3) 同協定の実施に際して生ずることがある問題を両政府の要請に基いて審議すること。

本使は、閣下が両国間の経済及び技術協力協定と同時に効力を生ずるこの書簡の規定に対するカンボディア王国政府の同意を確認されれば幸であります。

本使は、以上を申し進めるに際し、ここに重ねて閣下に向って敬意を表します。

1959 年 5 月 16 日 プノンペンで

日本国特命全権大使 吉岡 範武

カンボディア外務大臣 ソン・サン閣下

(来簡訳文)

書簡をもって啓上いたします。本大臣は、本日付の閣下の次の書簡を受領したことを確認する光栄を有します。

(往簡のとおり。ただし、末文を除く。)

本大臣は、両国間の経済及び技術協力協定と同時に効力を生ずる閣下の書簡に述べられた規定に対するカンボディア王国政府の同意を確認する光栄を有します。

本大臣は、以上を申し進めるに際し、ここに重ねて閣下に向って敬意を表します。

1959 年 5 月 16 日に プノンペンで

副 総 理 ソン・サン
外 務 大 臣

カンボディア駐在日本国特命全権大使 吉岡 範武閣下

〔参考〕

昭和41年外務省告示第201号（日本国とカンボディアとの間の経済及び技術協力協定に基づいてカンボディアに設置されたセンターの運営に関する書簡）

昭和41年10月7日
外務省告示第201号

1959年3月2日にプノンペンで署名された日本国とカンボディアとの間の経済及び技術協力協定に基づいてカンボディアに設置されたセンターの運営に関し、昭和41年9月30日プノンペンにおいて、日本国政府とカンボディア王国政府の代表の間で、それぞれ、次の書簡の交換が行なわれた。

（日本側書簡）

（訳文）

書簡をもって啓上いたします。本使は、1959年3月2日に署名された日本国とカンボディアとの間の経済及び技術協力協定に基づいて1964年3月にカンボディアに設置された日本・カンボディア友好農業技術センター（バタンバン州）及び日本・カンボディア友愛畜産センター（コンボンチャム州）の運営に関する最近の両国政府の権限のある当局間の会談に言及し、同協定に基づく援助期間が1966年7月5日に終了したこと及びこれらのセンターの運営に対する日本国の協力がカンボディアの農業及び畜産業の開発に必要であることを考慮して、日本国政府及びカンボディア王国政府が、次の取極について合意することを提案する光榮を有します。

1 これらのセンターの目的は、次のとおりとする。

- (1) 農業及び畜産業の生産技術の向上のための試験、研究及び調査
- (2) カンボディア人の農業及び畜産技術者に対する技術訓練並びに技術の普

及

(3) 農業及び畜産業の生産の増加並びに農業及び畜産業の生産の増加のための実験展示

2 日本国政府は、日本国において施行されている法令に従い、これらのセンターについて次の措置を執る。

- (1) コロンボ・プランによる日本人の専門家の派遣及び他の専門家の派遣
- (2) コロンボ・プランによるこれらのセンターのカンボディア人の技術者の日本国への受入れ
- (3) 1に掲げる目的のために必要と認められる機械及び資材の供与

3 カンボディア王国政府は、次の措置を執る。

- (1) カンボディア人の所長並びに必要なカンボディア人の技術及び事務の職員を引き続き任命すること。
- (2) これらのセンターの運営に必要な経費の支出
- (3) 日本国政府がこの取極に基づいて供与する機械及び資材の輸入に対する免税の許与並びに機械及び資材の輸送及び据付けその他の便宜の供与

4 両国政府は、これらのセンターの運営に関して随時協議する。

5 この取極は、1966年10月1日に効力を生じ、3年間効力を有する。ただし、両国政府は、いずれか一方の要請に基づいて、この取極の期間を延長するために協議を行なうことができる。

本使は、本国政府に代わって、この書簡及び前記の提案の貴国政府による受諾を確認する殿下の返簡を、両国政府間の合意を構成するものとみなすことを提案する光栄を有します。

本使は、以上を申し進めるに際し、ここに重ねて殿下に向かって敬意を表します。

1966年9月30日にブノンペンで

日本国特命全権大使 田村 幸久

カンボディア外務大臣 ノロドム・カントル殿下

(カンボディア側書簡)

(訳文)

書簡をもって啓上いたします。本大臣は、本日付けの閣下の次の書簡を受領したことを確認する光榮を有します。

(日本側書簡)

本大臣は、本国政府に代わって閣下の書簡に述べられた提案に同意し、さらに、閣下の書簡及びこの返簡を、両国政府間の合意を構成するものとみなすことに同意する光榮を有します。

本大臣は、以上を申し進めるに際し、ここに重ねて閣下に向かって敬意を表します。

1966年9月30日にプノンペンで

外務大臣 ノロドム・カントル

カンボディア駐在日本国特命全権大使 田村 幸久閣下

(日本側書簡)

(訳文)

書簡をもって啓上いたします。本使は、1959年3月2日に署名された日本国とカンボディアとの間の経済及び技術協力協定に基づいて1964年7月にカンボディアに設置された日本・カンボディア友好医療センター(バットアンバン州)の運営に関する最近の両国政府の権限ある当局間の会談に言及し、同協定に基づく援助期間が1966年7月5日に終了したこと及びこのセンターの運営に対する日本国の協力がカンボディア人の保健衛生上望ましいことを考慮して、日本国政府及びカンボディア王国政府が次の取極について合意することを提案する光榮を有します。

1 このセンターの目的は、次のとおりとする。

- (1) 予防医学及び治療医学を通じての保健衛生の向上
- (2) このセンターの職員に対する技術訓練

2 日本国政府は、日本国において施行されている法令に従い、このセンターについて次の措置を執る。

- (1) コロンボ・プランによる日本人の専門家の派遣
 - (2) 診察及び治療に必要な機械、資材及び医療品の供与並びに使用可能な病室数を増加するためのセンターの増築に必要な資材の供与
- 3 カンボディア王国政府は、次の措置を執る。
- (1) このセンターの増築に必要な労働力、資材及び設備の供与
 - (2) 必要なカンボディア人の技術及び事務の職員を引き続き任命すること
 - (3) このセンターの運営に必要な経費の支出
 - (4) 日本国政府がこの取極に基づいて供与する機械、資材及び医療品の輸入に対する免税の許与並びに機械及び資材の輸送及び据付けその他の便宜の供与
- 4 両国政府は、このセンターの運営に関して随時協議する。
- 5 この取極は、1966年10月1日に効力を生じ、3年間効力を有する。ただし、両国政府は、いずれか一方の要請に基づいて、この取極の期間を延長するために協議を行なうことができる。

本使は、本国政府に代わって、この書簡及び前記の提案の貴国政府による受諾を確認する殿下の返簡を、両国政府間の合意を構成するものとみなすことを提案する光栄を有します。

本使は、以上を申し進めるに際し、ここに重ねて殿下に向かって敬意を表します。

1966年9月30日にブノンペンで

日本国特命全権大使 田村 幸久

カンボディア外務大臣 ノロドム・カントル殿下

(カンボディア側書簡)

(訳文)

書簡をもって啓上いたします。本大臣は、本日付けの閣下の次の書簡を受領したことを確認する光栄を有します。

(日本側書簡)

本大臣は、本国政府に代わって閣下の書簡に述べられた提案に同意し、さら

に、閣下の書簡及びこの返簡を、両国政府間の合意を構成するものとみなすことに同意する光栄を有します。

本大臣は、以上を申し進めるに際し、ここに重ねて閣下に向かって敬意を表します。

1966年9月30日にプノンペンで

外務大臣 ノロドム・カントル

カンボディア駐在日本国特命全権大使 田村 幸久閣下

〔参考〕

昭和44年外務省告示第226号（医療センターの運営に関する日本国政府とカンボディア王国政府との間の取極の改正及び有効期間の延長に関する書簡の交換）

昭和44年10月7日
外務省告示第226号

昭和44年9月30日にプノンペンで、医療センターの運営に関する日本国政府とカンボディア王国政府との間の取極の改正及び有効期間の延長に関する次の書簡がカンボディア政府との間に交換された。

（カンボディア側書簡）

（訳文）

書簡をもって啓上いたします。本大臣は、カンボディア・日本友好医療センターの運営に関するカンボディア王国政府と日本国政府との間の1966年9月30日付けの交換公文に言及し、同交換公文による取極を次の修正を行なった上で1969年10月1日から1971年9月30日までの期間延長する旨の両政府の代表者の間で最近到達した了解をカンボディア王国政府に代わって確認する光栄を有します。

- 1 2(2)中「並びに使用可能な病室数を増加するためセンターの増築に必要な資材の供与」を削る。
- 2 3(1)を削る。（したがって、(2)、(3)及び(4)は、それぞれ(1)、(2)及び(3)とな

る。)

本大臣は、さらに、貴官が前記の了解を日本国政府に代わって確認されることを要請する光栄を有します。

本大臣は、以上を申し進めるに際し、ここに貴官に向かって敬意を表します。

1969年9月30日にプノンペンで

カンボディア政府外務大臣 ノロドム・プリサラ

カンボディア駐在日本国臨時代理大使 中村 輝彦殿

(日本側書簡)

(訳文)

書簡をもって啓上いたします。本官は、本日付けの殿下の次の書簡を受領したことを確認する光栄を有します。

(カンボディア側書簡)

本官は、日本国政府に代わって殿下の書簡に述べられた了解を確認する光栄を有します。

本官は、以上を申し進めるに際し、ここに殿下に向かって敬意を表します。

1969年9月30日

日本国臨時代理大使 中村 輝彦

カンボディア政府外務大臣 ノロドム・プリサラ殿下

第一回 R / D

団 長 東 昇 (京都大学ウイルス研究所教授)

調査期間 4 2.7.20 ~ 4 2.8.3 (15 日間)

THE RECORD OF PANEL DISCUSSION AGREED UPON BETWEEN
SECRETARY, MINISTRY OF HEALTH, REVOLUTIONARY GOVERNMENT OF THE
UNION OF BURMA, AND THE HEAD OF JAPANESE MEDICAL TEAM ON THE
MEDICAL COOPERATION BETWEEN THE UNION OF BURMA AND JAPAN, ON
THE 28TH OF JULY, 1967

1. The Japanese medical co-operation will be extended to the Burma Medical Research Institute, under the Colombo Plan in such a way as stated below.
2. The principal aim of the above-mentioned medical co-operation is to execute the following functions.
 - (1) Survey and Research on viral diseases in the Union of Burma
 - (2) Laboratory diagnosis of viral diseases
 - (3) Practical and theoretical training of Burmese medical and technical staff in virus works.
3. The co-operation on the part of Japan will be conducted in the following field of activities.
 - (1) To dispatch experts in the field of virology (including at least one doctor) after January 1968.
 - (2) To provide some of the equipments and chemicals which are necessary for viral diseases survey, research, diagnosis, training etc.
 - (3) The Revolutionary Government of the Union of Burma will send researchers and technicians as trainees to Japan and they will be provided with such facilities as are deemed to be necessary for the researchers and technicians to pursue their studies in the field of virology.
4. The Burma Medical Research Institute will take full responsibility for the management and the operation of research of Virology Laboratory to be set up with the Japanese co-operation.

5. The Japanese experts will give instructions on the use of instruments provided to the Burma Medical Research Institute and act as advisers to the Virology Laboratory.
6. Being sent as the experts under the Colombo Plan, the Japanese experts will be entitled to every respect to the privileges and exemptions accorded to any such experts. The Burma Medical Research Institute will be responsible for providing necessary accommodation and transportation facilities for the Japanese experts.
7. The Revolutionary Government of the Union of Burma will bear all the expenses arising in connection with customs clearances, local transportation and installation of those equipments and chemicals to be supplied to the Burma Medical Research Institute.
8. This is the record of panel discussion on the medical cooperation, between the Ministry of Health, Revolutionary Government of the Union of Burma, and the Japanese Medical Team.
9. The contents in this record will be implemented after they are approved by the appropriate authorities of the Revolutionary Government of the Union of Burma and of the Government of Japan.

Signed

(Lieutenant-Colonel Thein Aung)
Secretary, Ministry of Health,
Revolutionary Government of the
Union of Burma.

Signed

(Dr. Noboru Higashi)
Head of the Japanese Medical
Team (Professor, Institute
for Virus Research, Kyoto
University)

(8) マ レ - シ ア

診 療 団 派 遣

(The Japanese Medical Team)

マレーシア：診療団派遣

第一回 R/D

団 長 米 村 長 敏 (富山赤十字病院長)

調査期間 4 2.2.12 ~ 2.26 (15日間)

Record of discussion of the meeting held between the Government of the Federation of Malaysia and the Japanese Preliminary Medical Survey Team on the dispatch of the Japanese Medical Team to West Malaysia

1. The Government of Japan will dispatch a Japanese Medical Team to West Malaysia in order to extend medical services at related activities under the Colombo Plan.
2. The place where the Medical Team carries out its medical facilities is as follows:-

District Hospital,
Kuala Krai,
Kelantan

3. The Japanese Medical Team will consist of the following members:-

(a) Medical Doctor	2
(b) Laboratory Technician	1
(c) X-Ray Technician	1
(d) Nurse	2
(e) Coordinator	1

TOTAL 7

4. Functions of the Medical Team

The Japanese Medical Team will be under the overall supervision of the Medical Officer i/c., Kuala Krai District Hospital (in matters of administration and discipline) and the local staff will work closely together with the team. A coordinated programmes for the hospital and the health centres will be worked out together between them.

5. The Japanese Medical Team will be sent in June, 1967 and will stay for a period of 3 months.
6. The members of the Japanese Medical Team will be sent to West Malaysia through the normal procedure of the Colombo Plan.
7. The Japanese Medical Team shall be exempted from any liability in respect of any accident that may arise with the bona fide discharge of medical treatment activities carried out by the team. The 2 doctors and the 2 nurses will have to be registered first.

8. Although the medical appliances, sanitary material and medical drugs to be used by the Japanese Medical Team will be supplied by the Government of Japan under the Colombo Plan, all the facilities and medical appliances including all drugs available in the hospital can also be used by the Japanese Medical Team.
9. The Government of Malaysia will be responsible for the storage of the medical appliances, sanitary material and medical drugs supplied by the Government of Japan.
10. After completion of the project, the medical appliances used by the team and the remainder of the sanitary material and medical drugs will be donated to the Government of Malaysia.
11. Custom duty and other similar charges on the articles mentioned above at 8 shall be exempted.

This is the record of the meeting to be approved by the Ministeries concerned.

Signed

(Dr. Nagatoshi Yonemura)
 Head of the Japanese Preliminary
 Medical Survey Team

Signed

(Tan Sri Dr. Mohd. Din bin
 Ahmad)
 Permanent Secretary,
 Director of Medical Services,
 Ministry of Health,
 Malaysia

Date: 24th February, 1967

① インドネシア大学附属パーサハバタン病院
胸部外科部門

第一回 R / D

団 長 友 松 達 弥 (神戸大学医学部教授)

調査期間 4 6. 7. 2 1 ~ 8. 1 2 (2 3 日間)

(注) インドネシア大学附属ジャカルタ中央病院

臨床検査部門第一回 R / D が本件 R / D を兼ねているので参照のこと (P 1 5 9)

⑨ インドネシア西部ジャワ中央総合病院

(参 考)

団 長 友 松 達 弥 (神 戸 大 学 医 学 部 教 授)

調 査 期 間 4 2 . 6 . 2 2 ~ 7 . 1 2 (2 1 日 間)

CONCLUSION OF THE DISCUSSIONS BETWEEN THE MINISTRY OF HEALTH OF
THE GOVERNMENT OF INDONESIA AND THE JAPANESE MEDICAL SURVEY
TEAM ON MEDICAL COOPERATION BETWEEN INDONESIA AND JAPAN

The Government of Indonesia and the Government of Japan
will establish medical cooperation through the channels of the
Colombo Plan as stated below:

1. The medical cooperation will be carried out at the Central
General Hospital Bandung, West Java under supervision of
the Ministry of Health of the Republic of Indonesia and in
association with the Medical Faculty of Padjadjaran
University.
2. The aim of the medical cooperation is to modernize and
improve clinical training of Indonesian medical graduates.

3. The Government of Japan will conduct the following activities:
- (a) To dispatch 3 to 5 experts (including at least 1 doctor) after January 1968.
 - (b) To provide instruments which are necessary for clinical tests (pathological, microbiological, chemical, physiological and hematological tests, etc.)
 - (c) In addition to the instruments referred to in (b), the Government of Japan will provide several smaller instruments for surgical operation.
 - (d) To make efforts to accept trainees from Indonesia in specific fields (such as brain surgery, chest surgery, premature infant care and other fields of paediatrics, foodstuff analysis etc.)
4. The Government of Indonesia will provide:
- (a) a building to be used for clinical laboratory consisting of more than 3 rooms (total space about 240 m²) with incidental facilities.
 - (b) adequate local staff.
 - (c) in principle, necessary running expenses for the operation of the laboratory.
 - (d) expenses necessary for custom clearance, local transportation and installation.

5. The Government of Japan will consider providing the necessary generator.
6. In respect with accomodation and transportation the Japanese staff will enjoy the same treatment as enjoyed by experts of third countries.
7. Under the terms of the medical cooperation:
 - (a) It is not necessary for the Japanese doctors to keep medical license of Indonesia for their activities in the Central Hospital of Bandung and they are not permitted to engage in private medical activities.
 - (b) The Director of the Central General Hospital will be the responsible counterpart of the Japanese staff.
 - (c) The Japanese experts will be exempted from any liabilities in respect of any accident that may arise with the bonafide discharge of medical activities carried out by the team, as they are under supervision and responsibility of the Director of Central Hospital.
 - (d) The Japanese experts and their families will be granted in the Republic of Indonesia privileges, exemptions and benefits no less favourable than these granted to the experts of third countries under similar circumstances.

8. This medical cooperation will be enforced as of the first of
January 1968 for the period of
.....

Djakarta, 11 July 1967

この草案には現われていないが、次のようなインドネシア側の発言は附記するに値する。

- a. 中央病院長アジダルモ氏より、経常費として年間3,000ドル見当の支出は容易であること。又器具等の送り先を中央病院とするならば、その内陸輸送に対して全面的に協力する用意があること。
- b. 中央病院内科部長スワルディ氏より、心臓病学、血液学及び生化学の分野の専門家を派遣されたいとの要請があったこと。
- c. 保健省幹部より、日本よりの専門家の住宅は差当り提供し得ないこと。
- d. 保健大臣スワベシ氏より、今回作られる施設を利用して、食品分析、生薬分析等の面にも協力を願いたいこと。

尙本草案は、保健省渉外局長マルサイド氏の言によれば、その後インドネシア国最高幹部会の検討を経た後、実行に移される題である。

第一回 R / D

団 長 辻 昇 三 (神戸大学教授)

調査期間 4 5. 1. 1 3 ~ 2. 2 (2 1 日間)

RECORD OF DISCUSSIONS
BETWEEN THE JAPANESE MEDICAL COOPERATION TEAM TO THE
CENTRAL GENERAL HOSPITAL IN BANDUNG AND AUTHORITIES
CONCERNED OF THE GOVERNMENT OF THE REPUBLIC OF
INDONESIA

The Japanese Medical Cooperation Team of the Government of Japan (hereinafter called "the Japanese Team") visited the Republic of Indonesia January 1970 and had an exchange of views with the authorities concerned of the Government of the Republic of Indonesia (hereinafter called "Indonesian authorities concerned") evaluating the past medical cooperation project to the Central General Hospital in Bandung and examining the future plan.

The summary of the exchange of views between the Japanese team and Indonesian authorities concerned is as follows:

1. Review of Cooperation

(1) In accordance with the Record of Discussions signed in Djakarta on July 11, 1967 Japanese Government rendered the following assistance under the Colombo Plan.

a. Dispatch of the experts

1st year (1968-1969) two internists

two clinical laboratory
technicians

one coordinator
2nd year (1969-1970) one internist
two clinical laboratory
technicians

These experts assisted to set up the Central Clinical Laboratory, conducted the biochemical, hematological, microbiological, physiological examination and trained the Indonesian staff.

b. Training of the Indonesian staff in Japan
The fellowships provided for training at Kobe University:

one observation tour
one clinical biochemist
one pathologist
one cardiologist

c. Donation of equipment and supplies
The Japanese Government provided the medical equipment and supplies to the said hospital valued at U.S. \$.120.000. and equipment and reagents valued at U.S. \$.80.000. are scheduled to arrive here soon.

(2) The Indonesian Government provided:

- a. The building for the Central Clinical Laboratory with incidental facilities
- b. Counterparts
- c. Running expenses for the operation of the laboratory

2. Future Plan

Recognizing that medical cooperation to the Central General Hospital in Bandung has been achieving a remarkable

success and the initial program will terminate in June 1970, the Indonesian Government will continue to make efforts for attainment of technical independence as to clinical laboratory work and for securing laboratory supplies. The Japanese Government will extend to cooperate within the limit of budgetary allocation, in dispatching Japanese experts for periods of two or three months, in providing certain reagents which are necessary for laboratory work with Japanese experts until 1971, and in acceptance of Indonesian staffs for training in Japan until 1973.

Japanese cooperation is to be extended within the framework of the Colombo plan upon receipt of Application Forms A1, A2, A3 and A4 from the Government of the Republic of Indonesia.

Consultation of the further program would be held as the necessity arises.

This is the record of discussions to be approved by the respective Governments.

Bandung, January 21, 1970

Signed

Dr. Shozo Tsuji
Leader of the Japanese
Medical Cooperation Team
to the Central General
Hospital in Bandung.

Signed

Dr. R. Adjidarmo
Director Central General
Hospital "Dr.Hasan Sadikin"
Bandung.

⑩ インドネシア：西部ジャワ中央総合病院

第二回 R / D

団 長 友 松 達 弥（神戸大学医学部教授）

調査期間 4 6. 7. 2 1 ～ 8. 1 2 （ 2 3 日 間 ）

(注) インドネシア大学附属ジャカルタ中央病院臨床検査第一回 R / D が本件 R / D を兼ねているので参照のこと（P ）。

④ インドネシアバジャジャラン大学歯学部

第一回 R / D

団 長 友 松 達 弥 (神戸大学医学部教授)

調査期間 4 6. 7. 2 1 ~ 8. 1 2 (2 3 日 間)

(注) インドネシア大学附属ジャカルタ中央病院臨床検査部門第一回 R / D が本件 R / D を兼ね
ているので参照のこと (P 1 5. 9)

第一回 R/D

団 長 大和田 国 夫(大阪市立大学教授)

調査期間 44.1.30~2.21(23日間)

Record of Discussion between the
Authorities Concerned of the Government
of the Republic of Indonesia and
the Japanese Medical Cooperation Survey
Team on Medical Cooperation for the
Province of Maluku

1. The Government of the Republic of Indonesia and the Government of Japan will further promote medical cooperation between the two countries. The Government of Japan will extend medical cooperation for medical facilities in the Province of Maluku, Indonesia.
2. In accordance with the laws and regulations in force in Japan and within annual budgetary appropriations, Japanese cooperation will be extended at the expenses of the Government of Japan, under the Colombo Plan.
3. The above medical cooperation will be mainly carried out in the fields of malaria eradication and T.B. control, and also in upgrading the facilities of hospitals and laboratories.
4. The cooperation will be carried out in the following forms;
 - (1) Supply of medical equipment and materials.
 - (2) Training in Japan of Indonesian medical Staffs.
 - (3) Dispatch of Japanese medical experts.
5. The terms and conditions of the Japanese medical cooperation will be as follows;
 - (a) The Government of the Republic of Indonesia will provide necessary permit to the Japanese experts for carrying out medical activities under this particular medical cooperation.

- (b) The Japanese experts will be exempted from any liabilities in respect of any accident that may arise from the bonafide discharge of medical activities carried out by them under the supervisions and upon the responsibility of the Department of Health and/or Provincial Health Service.
- (c) The Japanese experts will be granted in the Republic of Indonesia the privileges, exemptions and benefits (including accomodation and transportation facilities) no less favourable than those granted to the experts of the third countries under similar circumstances.
- (b) The equipment and materials to be supplied by the Government of Japan will become the property of the Government of the Republic of Indonesia upon delivery c.i.f. at a port or an airport of entry into the Republic of Indonesia. Therefore, (1) customs duties, internal taxes and other similar charges, if any, imposed on the equipment and materials and (2) local expenses necessary for the transportation, installation, operation and maintenance of the equipment and materials will be met by the Government of the Republic of Indonesia.

The above is to be approved by the respective Governments.

Djakarta, February 20, 1969

Signed

Dr. K. A. STAA
Director General of
Medical Care
Department of Health

Signed

Dr. KUNIO OWADA
Head of the Japanese
Medical Cooperation
Survey Team

④ インドネシア大学附属 ジャカルタ中央病院
臨床検査部門

第一回 R / D

団 長 友 松 達 弥 (神戸大学医学部教授)

調査期間 4 6. 7. 2 1 ~ 8. 1 2 (2 3 日間)

RECORD OF DISCUSSIONS

Between the Medical Cooperation Survey Team of the Government of Japan and the authorities concerned of the Government of the Republic of Indonesia on Medical Cooperation.

The Medical Cooperation Survey Team of the Government of Japan visited the Republic of Indonesia July 1971 and had an exchange of views with the authorities concerned of the Government of the Republic of Indonesia for the purpose of evaluating the past medical cooperation projects and discussing the future plan.

The Government of Japan and the Government of the Republic of Indonesia came to the agreement to promote further medical cooperation between the two countries.

The summary of the exchange of views between the Japanese Survey Team and the Indonesian authorities concerned is as follows:

1. The Central Clinical Laboratory of the Dr. Tjipto Mangunkusumo Hospital.
 1. The Government of Japan will extend medical cooperation for the Central Clinical Laboratory of the Dr. Tjipto Mangunkusumo Hospital.
 2. In accordance with the laws and regulations in force in Japan and within annual budgetary appropriations, Japanese cooperation will be extended within the framework of Colombo Plan technical cooperation in the form of dispatch of experts, provision of training facilities in Japan and supply of equipments upon receipt of Application Forms A.1, A.2, A.3 and A.4 from the Government of the Republic of Indonesia.

3. The Government of Japan will cooperate with the Government of the Republic of Indonesia in providing the medical equipments for clinical examinations especially biochemical examinations in the fiscal year 1972, in dispatching Japanese experts and in acceptance of Indonesian staff for training in Japan until 1973.

4. The Government of the Republic of Indonesia will provide:

- a. Counterparts.
- b. Articles of consumption as reagents and glass wares.
- c. On arrival of the equipments in Tandjung Priok Port, immediate action for custom clearance and domestic transportation from the Port of Tandjung Priok to the Central Laboratory of the Dr. Tjipto Mangunkusumo Hospital.
- d. Running expenses for the operation of the laboratory.
- e. Privileges, exemptions and benefits no less favorable than those granted to the experts of third countries dispatched under the Colombo Plan.

II. The Lung-surgery Cooperation with the Persahabatan Hospital. It was decided to donate medical equipments including X-ray units, instruments for microbiologic examinations and pathological examinations, etc., in the fiscal year 1971 from the Government of Japan to the Persahabatan Hospital.

III. The Project in the Dr. Hassan Sadikin Hospital in Bandung. The medical cooperation project to the Central Laboratory of the Dr. Hassan Sadikin Hospital in Bandung will terminate by the end of December, 1971, except the acceptance of Indonesian staff for training in Japan until 1973.

IV. The Project to the Padjadjaran University in Oral Surgery. The project will terminate by November, 1971.

V. Accommodation for Japanese Experts.

The Japanese Survey Team conveyed to the Indonesian authorities the strong desire of the Government of Japan that the Government of the Republic of Indonesia provide Japanese experts for on-going and future projects with necessary accommodation.

The Indonesian authorities took note of the desire and will see to it that favorable considerations be given to this question by the Government of the Republic of Indonesia.

VI. Future Plan.

The future plan of medical cooperation was discussed between the Japanese Survey Team and the authorities concerned of the Republic of Indonesia.

This is the record of discussions to be approved by respective Governments.

Djakarta, August 9, 1971

(Signed)

Dr. Tatsuya Tomomatsu
Leader of the Japanese
Medical Cooperation
Survey Team

(Signed)

Prof. Dradjat D. Prawiranegara
Director General of Medical
Care Department of Health
Republic of Indonesia

(10) ネ パ ー ル

結核・天然痘対策

(Tuberculosis control and Smallpox
eradication)

第一回 R / D

団 長 奥 川 渉 (厚生省検疫課長)

調査期間 4 4.2.14～3.6 (21日間)

RECORD OF DISCUSSIONS BETWEEN THE JAPANESE
MEDICAL COOPERATION SURVEY TEAM AND THE
AUTHORITIES CONCERNED OF HIS MAJESTY'S GOVERN-
MENT OF NEPAL ON MEDICAL COOPERATION IN NEPAL

1. Medical cooperation between the Government of Japan and His Majesty's Government of Nepal will be further promoted by the following cooperation with the main emphasis on the cooperation for tuberculosis control and smallpox eradication in collaboration with the activities of the World Health Organization in Nepal.
2. In accordance with the laws and regulations in force in Japan and within annual budgetary appropriations, Japanese cooperation will be extended within the framework of Colombo Plan technical cooperation scheme in the forms of dispatch of Japanese experts, provision of training facilities in Japan and supply of equipment and materials upon receipt of Application Forms A.1, A.2, A.3 and A.4 from His Majesty's Government of Nepal.
3. With respect to tuberculosis control, taking into consideration the importance and urgency of the expansion of general hospitals and laboratories, the cooperation will be carried out in the following forms:
 - (1) Dispatch of Japanese medical team (one physician and one X-ray technician) for the period of three months in 1969.
 - (2) Dispatch of one engineer as soon as possible to repair the X-ray van which was donated by the Government of Japan to the Central Chest Clinic in 1965 and give the training of X-ray maintenance and repair to Nepalese technicians for the period of one month.

- (3) Supply of the following equipment and materials in 1969.
 - (i) One diagnostic X-ray unit for Bir Hospital, Kathmandu
 - (ii) One diagnostic X-ray unit with accessories and one generator for Janakpur Hospital; Janakpur
 - (iii) Microscopes and AFB staining sets for training facilities
 - (iv) Medicine for tuberculosis treatment
 - (4) Training in Japan of Nepalese personnel (three X-ray technicians).
4. With respect to smallpox eradication the cooperation will be carried out in the following forms :
- (1) Dispatch of Japanese medical expert (epidemiologist or virologist) for the period of three months in 1969.
 - (2) Supply of approximately five hundred thousand doses of freeze-dried smallpox vaccine with necessary equipment in 1969.
 - (3) Training in Japan of Nepalese personnel.
5. Provision of training and observation facilities in Japan for the Nepalese personnel in the following fields will also be considered by the Government of Japan.
- (1) Administration of national and local health services
 - (2) Surgery (at Kurume University Medical School)
6. Possibilities of further medical cooperation on 3. and 4. above and on other projects will also be studied as the necessity arises.
7. The terms and conditions of the Japanese medical cooperation will be as follows :
- (1) It is not necessary for the Japanese doctors to obtain medical licenses of Nepal for their activities related

With this particular medical cooperation.

- (2) The Japanese experts will be exempted from any liabilities in respect of any accident that may arise from the bona fide discharge of medical activities carried out by them.
- (3) The Japanese experts will be granted in Nepal privileges, exemptions and benefits (including provision of housing accommodations and transportation facilities) no less favourable than those granted to the Colombo Plan experts of third countries under similar circumstances.
- (4) The equipment and materials to be supplied by the Government of Japan will become the property of His Majesty's Government of Nepal upon being delivered in Nepal.

Therefore, (i) customs duties, internal taxes and other similar charges, if any, imposed on the equipment and materials and (ii) local expenses necessary for the transportation, installation, operation and maintenance of the equipment and materials will be met by His Majesty's Government of Nepal.

The above is to be approved by the respective Governments.

Kathmandu, 2nd March 1969.

Signed

Dr. Wataru Jitsukawa
Leader of the Japanese
Medical Cooperation
Survey Team

Signed

Dr. Gaurishankar Lall Das
Director of Health Services,
Ministry of Health

(11) スリランカ
(旧 セイロン)

- ① セイロン総合病院
(General Hospital)
- ② マラリア対策
(The Eradication of Malaria)
- ③ セイロン大学 医学部
(The Electron Microscopic Reserch)

① スリランカ：セイロン総合病院

第一回 R / D

団 長 高 井 俊 夫 (大阪市立大学小児科教授)

調査期間 4 3. 8. 1 0 ~ 8. 3 1 (2 2 日 間)

Record of Discussions
between the Medical Cooperation Survey Team
of the Government of Japan and the authorities
concerned of the Government of Ceylon on
Medical Cooperation

1. Medical cooperation between the Government of Japan and the Government of Ceylon will be further promoted with the main emphasis on the following projects:

- (1) Cooperation for the establishment of a Drug Quality Control Laboratory
- (2) Cooperation for the eradication of malaria
- (3) Cooperation for the General Hospital, Colombo (including Lady Ridgeway Hospital and the Government Cancer Institute, Maharagama).

2. In accordance with the laws and regulations in force in Japan and within annual budgetary appropriations, Japanese cooperation will be extended within the framework of Colombo Plan technical cooperation in the form of dispatch of experts, provision of training facilities in Japan and supply of equipment, upon receipt of Application Forms A.1, A.2, A.3 and A.4 from the Government of Ceylon.

3. With respect to the Drug Quality Control Laboratory, the following will be considered:

- (1) Provision of training facilities in Japan for the Ceylonese personnel while the construction of the Laboratory building is in progress and, if necessary, after the completion thereof.
- (2) Dispatch of Japanese experts and supply of the necessary equipment from time to time as the construction of the laboratory building progresses.

4. With respect to Malaria Eradication the following will be considered:

Dispatch of an entomologist and/or a parasitologist with the necessary equipment to cooperate with the Anti-Malaria Campaign for several months in 1969.

5. With respect to the General Hospital, Colombo, and other institutions, the following will be considered:

- (1) Dispatch of an expert with the equipment necessary for endoscopic diagnosis in digestive tract at the General Hospital, Colombo, from February, 1969, for three months.
- (2) Dispatch of an expert with the necessary equipment in chemotherapy for malignancies in rhino-oro-pharyngeal cavities for the Government Cancer Institute, Maharagama, from January 1969 for one year.
- (3) Dispatch of an expert with the equipment necessary for investigation and treatment of malnutrition at the Lady Ridgeway Hospital, from February, 1969, for six months.
- (4) Provision of training facilities in Japan for Ceylonese doctors and technicians in specialized fields mentioned in (1) and (3) above when considered necessary.

6. Possibilities of further medical cooperation on 4. and 5. above and also on other allied subjects will be studied as the necessity arises.

This is the record of discussions to be approved by the respective governments.

Colombo, August 28, 1968

Signed
Dr. Toshio Takai
Leader of the Japanese
Medical Cooperation
Survey Team

Signed
Mr. C. Balasingham
Permanent Secretary
of the Ministry of
Health

㊤ スリランカ：マラリア対策

第一回 R / D

団 長 高 井 俊 夫 (大阪市立大学小児科教授)

調査期間 43.8.10～8.31 (22日間)

(注) 総合病院第一回 R / D が本件 R / D を兼ねているので参照のこと (P167)

スリランカ：セイロン大学医学部

第一回 R / D

団 長 田 中 英 雄 (大阪市立大学医学部医動物学教授)

調査期間 4 5.1 2. 2 2 ~ 4 6.1. 7 (1 7 日 間)

RECORD OF DISCUSSIONS

Between the Japanese Medical Mission and the Authorities concerned of the Government of Ceylon on the Medical Cooperation of the Electron Microscopic Research Project.

In response to the application form (A-4) of the electron microscope which the government of Ceylon sent to the government of Japan in November 1970, the Japanese Medical Mission headed by Dr. Hideo Tanaka visited Ceylon from December 24th, 1970 to January 6th, 1971 and had discussions with the authorities concerned of the government of Ceylon on the Electron Microscopic Research Project.

The following is the Record of Discussions.

The both side recognized the urgent requirement of an electron microscope in Ceylon in which has been important role in the fields of medical research.

For the setting up of the electron microscope, the Japanese side advised the Ceylon side in the technical viewpoints in detail.

The Ceylon side explained that the electron microscope will be used for biomedical research, diagnostic medical procedures and teaching at Faculty of Medicine, University of Ceylon, Peradeniya.

And the instrument is to be under the responsibility of the Department of Anatomy, University of Ceylon, Peradeniya in collaboration with the Department of Health Service.

The house for the electron microscope has been already constructed and the air-conditioning unit will be installed for adjustment of suitable room temperature and humidity by the Ceylon side.

The Japanese side requested that it will be taken an immediate procedure for custom clearances and domestic transportation from the port of Colombo to the University of Ceylon, Peradeniya, in order to keep the electron microscope and other instruments in good condition.

The Medical Cooperation of the Electron Microscopic Research

Project by the Japanese side will be carried out as follows within budgetary appropriations under the Colombo Plan Technical Cooperation Scheme.

(1) Provision of the Instruments

The Japanese side will provide an electron microscope and the other necessary instruments. The specialists of the both side in electron microscope discussed about the list for working of electron microscope at the first stage. (see Appendix)

(2) Provision of Training Facilities

So that the electron microscope will be well used and maintained smoothly, it is hoped that a Ceylonese participant mentioned below will master the techniques of electron microscope for several months before the installation.

Mr. S.P. Rajeswaran, Senior Laboratory Technician,
University of Ceylon,
Peradeniya.

(3) Dispatch of Expert

At the time of installation, a Japanese Expert in electron microscope will be dispatched for a few months with a technician.

In order to study the medical research effectively, the both side agreed that the available information about the Electron Microscopic Research Project will be mutually exchanged in the due channel.

Colombo, January 2, 1971.

Signed

Dr. Hideo Tanaka,
Head of the Japanese
Medical Mission.

Signed

Dr. C.E.S. Weeratunge,
Permanent Secretary of
the Ministry of Health.

APPENDIX

THE LIST OF ELECTRON MICROSCOPE

1	HITACHI MODEL HU-12 Electron Microscope for operation on 230V, 50 Hz. Specification are as per Hitachi brochure, Details as per attached sheet. Page 3	One set	US\$36,400.00
2	Recommended spare parts for 2 years operation of the Model HU-12. Details as per attached sheet. Page 4-5	One set	US\$ 2,488.39
3	Hitachi Model HUS-4 Vacuum Evaporator for operation on 230V, 50 Hz. Specifications are as per Hitachi brochure.	One set	US\$ 2,200.00
4	Porter-Blum Model MT-1 Ultra Microtome	One set	US\$ 2,780.00
5	Cooling water circulating apparatus Details as per attached sheet. Page 6	One set	US\$ 3,258.33
6	Equipments and miscellaneous for dark room Details as per attached sheet. Page 7-9	One set	US\$ 2,403.34
7	Chemical reagents for Specimen preparation Details as per attached sheet. Page 10	One set	US\$ 499.66
8	Tools for Specimen preparation. Details as per attached sheet. Page 11-12	One set	US\$ 4,965.00
9	Repairing tools Details as per attached sheet. Page 13	One set	US\$ 138.02

TOTAL: US\$55,132.74

A	Hitachi Model HU-12 Electron Microscope (Component parts)		US\$36,400.00
1	Electron Microscope	1	
2	Power Supply Cabinet	1	
3	Reference Resistor Unit	1	
4	Fore Pumps	2	
5	Cassette	48	
6	Magazines	2	
7	Plate Receivers	2	
8	Specimen Grid Holders	6	
9	Power Cable	1 set	
10	Consumable Kit (including case) includes: Aperture plate, etc.	1	
11	Vacuum Accessories includes: Blind lid, etc.	1 set	
12	Tools (including case) includes: Wrenches, screw drivers, etc.	1 set	
13	Spare Parts includes: Fuses, pilot lamps, etc.	1 set	
14	Test Report Chart	1	
15	Instruction Manual	1	
			<u>SUB-TOTAL: US\$36,400.00</u>

Recommended Spare Parts for Model
HU-12 Electron Microscope

1	Filament (Pre-centered) 10pcs/Box	100	US\$44.17	US\$441.70
2	Cassette for cut film	48	9.16	440.00
3	Cassette Receiver	1		58.90
4	Cassette Magazine	2	58.90	117.80
5	Fluorecent Screen (120 ϕ)	3	14.50	43.50
6	Fluorecent Screen (200 ϕ) 2 pcs/1 set	1		26.80
7	Fluorecent Aligment Screen 75 x 100 mm	1		20.90
8	(1st. Con.) Fixed Aperture	2	23.07	46.14
9	(Intermediate) Ditto	2	23.70	47.40
10	(1st. Proj.) Ditto	2	23.70	47.40
11	(2nd. Proj.) Ditto	2	23.70	47.40
12	(2nd. Con.) Aperture Plate	2	44.75	89.50
13	(Obj.) Ditto	2	48.10	96.20
14	(Field Limitting) Ditto	2	44.75	89.50
15	(2nd. Con.) Aperture Supporter	1		9.80
16	(Obj.) Ditto	1		9.80
17	(Field Limitting) Ditto	1		9.80
18	Specimen Grid Holder	1		59.20
19	Specimen Grid Holder Cap	5	2.77	13.85
20	Bronze plate	1		10.30
21	Bronze plate spring	2	2.50	5.00
22	Cover	1		8.40

23	Steel Ball (3/16')	2	US\$ 0.15	US\$ 0.30
24	Photo Cell 4 pcs/1 set	1		2.80
25	Heater for DPF-4NH	1		41.70
26	Heater for DPF-2	1		18.65
27	D. P. Oil (150 cc)	1		216.70
28	V-Belt for F.P.	4	1.70	6.80
29	Wison Seal 6 ϕ	2	0.05	0.10
30	Ditto 8 ϕ	2	0.05	0.10
31	Packing (P.R.)	1		15.55
32	Ditto(C.C.)	1		18.65
33	Ditto(C.C.)	1		9.20
34	Ditto(C.C.)	1		11.70
35	Pilot Lamp (A)	1		20.00
36	Ditto (B)	1		20.00
37	Ditto (C)	1		20.00
38	Fuse 0.2A	20	1.05	21.10
39	Ditto 0.3A	20	1.05	21.10
40	Ditto 0.5A	20	1.05	21.10
41	Ditto 1 A	20	1.05	21.10
42	Ditto 3 A	20	1.05	21.10
43	Ditto 4 A	20	1.05	21.10
44	Ditto 5 A	20	1.05	21.10
45	Ditto 6 A	20	1.05	21.10
46	Ditto 10A	20	1.05	21.10

47	Ditto 15A	20	1.05	21.10
48	Ditto 20A	20	1.05	21.10
49	Ditto 8A	20	1.05	21.10
50	Ditto L-1	20	0.19	3.90
51	Ditto F104, 4A	20	0.19	3.90
52	Ditto P413	30	1.14	34.20
53	Electron tube 6CA7	5	5.14	25.70
54	Ditto 12AU7-C	5	2.09	10.45
55	Ditto 12AX7-C	5	3.10	15.50

SUB-TOTAL: US\$2,488.39

Cooling Water Circulating Apparatus

1	Cooling Water circulator for Electron Microscope, Vacuum Evaporator and D.P.E.	One set	US\$2,800.00
2	Water Filter apparatus Model RAC-25 for Electron Microscope	One set	333.33
3	Water Filter Model C-7	One set	125.00

SUB-TOTAL: US\$3,258.33

Equipment and Miscellaneous for Dark Room

1	Fuji enlarger Model 45-S with 4 x 5 carrier, Fujinar 50, 75, 90, and 105 mm	1	US\$ 416.40
2	Master superlooks Model III	1	130.55
3	F C Autograzing machine Model D	1	500.00
4	F C Autoprint washer	1	175.00

5	F C Film Dryer	Model PW-27-40	1		US\$183.33
6	Hansa Auto washer	Model K-500	1		119.50
7	Hansa metal cutter	11" x 12"	1		18.10
8	Ditto	8.1/2" x 9"	1		11.20
9	Hansa easel mask	10" x 12"	1		5.30
10	Ditto	14" x 17"	1		7.80
11	Hansa fixed mask		1		2.30
12	Hansa safelight lamp-Rouse		1		6.90
		3 windows			
13	Hansa safelight filter	No. 4	1		0.83
14	Ditto	No. 2	1		0.83
15	Ditto	No. 5	1		0.83
16	Felocon No. 1, No. 2 each	1	2		2.00
17	Hansa hizex tray	6" x 7"	1		0.41
18	Ditto	8" x 10"	1		0.70
19	Ditto	10" x 12"	1		1.20
20	Hansa hizex deep tray	14"x11"x4 3/4"	1		3.05
21	Hansa roll-film developing tank		1		2.80
		Model D			
22	Hard rubber tank for	4" x 5" film	2	US\$ 5.60	11.20
23	Stainless hunger No. 6		24	32.50	65.00
		12 Sheets/1 Box			
24	Bambooo tongo with rubber		2	0.16	0.32
25	Chemical bottle 1,000 cc, Color		2	0.55	1.10
		in white			
26	Ditto	2,000 cc	2	0.88	1.76

27	Ditto	20,000 cc	2	US\$ 5.55	US\$ 11.10
28	Ditto	10,000 cc	2	2.77	5.54
29	Plate holder for 12 sheets		3	0.83	2.49
30	Roll film clip		10 sets	0.30	3.00
31	Photographic enlarging lamp 100V-150W		3	0.50	1.50
32	Photographic lamp for projection paper		3	0.65	1.95
33	Dupon sponge Model 6A-F		3	0.95	2.85
34	Grass negative carrier for film less than 6 x 9 cm		2	0.45	0.90
35	Metal negative carrier for 35 m/m film		2	0.85	1.70
36	Silicone treatment cloth 56x56 cm		3	1.30	3.90
37	Ditto	28x28 cm	3	0.30	0.90
38	Wiper for feretyp plate		2	0.85	1.70
39	Dark room timer		1		7.25
40	Photographic projection paper GEKKO Cabine V2 (250 sheets)		10	6.65	66.50
41	Ditto	V3 (Ditto)	10	6.65	66.50
42	Ditto	V4 (Ditto)	10	6.65	66.50
43	GEKKO 8" x 10"	V2 (100 sheets)	10	7.10	71.00
44	Ditto	V3 (Ditto)	10	7.10	71.00
45	Ditto	V4 (Ditto)	10	7.10	71.00
46	Elescoap film FG 8.2 x 16.3 cm	(24 sheets)	100	2.15	215.00
47	Fuji fix	2,000 cc	20	0.55	11.80

48	Copinal	1,000 cc	20	US\$ 0.40	US\$ 8.00
49	Korectol	1,000 cc	40	0.15	6.00
50	Driwell	2,000 cc	2	4.90	9.80
51	Neopan F film 35 m/m	100 ft	2	8.50	17.00
52	Fuji Color bond	20 pcs/pckg	1		2.80
53	Fuji Color light box	100 V	1		8.05

SUB-TOTAL: US\$2,403.34

Chemical reagents for specimen preparation

1	Waseline white	500 gr	2	US\$ 0.85	US\$ 1.70
2	Cupsule No. 00	1,000 cps	3	18.15	54.45
3	Ditto No. 0	1,000 cps	2	15.30	30.60
4	Epon 815	500 gr	2	3.90	7.80
5	Ditto 812	500 gr	2	5.60	11.20
6	D.D.S.A. (Hardener)	500 gr	2	3.90	7.80
7	M.N.A.	200 gr	2	3.10	6.20
8	D.M.P. 30	25 gr	2	0.42	0.84
9	Osmic acid	1 gr	4	38.90	155.60
10	Uranyl acetate (special grade)	2.5gr	2	8.40	16.80
11	Lead nitrate (Ditto)	2.5gr	2	0.50	1.00
12	Lead acetate (Ditto)	500 gr	2	1.50	3.00
13	Sodium potassium tartate (Ditto)	500 gr	2	2.00	4.00
14	Potassium permanganate (Ditto)	500 gr	2	2.00	4.00

15	Potassium dichromate(special grade)	500 gr	2	US\$ 1.66	US\$ 2.32
16	Isoamyl dichromate (Ditto)	500 gr	2	2.38	4.76
17	Paraffin (64-66°C)	500 gr	2	1.20	2.40
18	Copper sulfate (crystal)	500 gr	2	2.00	4.00
19	Glutaraldehyde 25%	2.5gr	2	0.60	1.20
20	Corozion 2%	100 gr	2	0.97	1.95
21	Propylene Oxide	500 gr	2	8.35	16.70
22	Acetone (special grade)	500 gr	10	6.40	64.00
23	Silicagel	500 gr	4	1.00	4.00
24	Toluigine blue	25 gr			3.61
25	Ethanol	500 gr	10	2.22	22.22
26	Ether	500 gr	5	2.22	11.11
27	Sodium phosphate Monobasic	500 gr	1		1.25
28	Sodium phosphate Dibasic	500 gr	1		0.83
29	2, 4, 6 Trimethyl pyridine	25 gr	10	3.61	36.11
30	Sodium Cacodirate	25 gr	1		6.94
31	HCl, In	500 gr	1		1.00
32	Saccharose	500 gr	1		3.33

SUB-TOTAL: US\$499.66

Tools for Specimen preparation

1	Micro plastic grids kit (6 pcs)		1 set		5.00
2	Carbon rode for vacuum evaporation (20 pcs)		1		16.70
3	Cromium metal 99.99%	25 gr	1		4.50

4	Mesh storage box (Mesh case)	3	US\$ 4.17	US\$ 12.51
5	Grids, 150 meshes	30	1.39	41.70
6	Ditto, 3 slits	5	2.78	13.90
7	Ditto, 5 slits	5	2.78	13.90
8	Ditto, VECO 200 meshes	10	6.95	69.50
9	Ditto, VECO 400 meshes	10	6.95	69.50
10	Tangusten wire for Busket 0.5mm ϕ	10m	0.84	8.40
11	Glass cutter No. 1	2	3.62	7.24
12	Glass (100 x 100 x 5 cm)	500		133.33
13	Sharpened twizzers (G-type)	5	2.10	10.50
14	Ditto ("Giko")	5	1.87	9.35
15	Ditto (Tokei)	5	1.10	5.50
16	Flat twizzers for holding slide glass	10	2.80	28.00
17	Filter paper No. 7	1		4.20
18	Injection 1 cc	10	0.56	5.60
19	Schale 20 cm ϕ	1		13.00
20	Ditto 9 cm ϕ	10	0.69	6.90
21	Triangle Flasc	10	0.19	1.90
22	Mess Flask 200 cc	2	2.22	4.44
23	Ditto 100 cc	2	1.94	3.88
24	Alcohol lamp	2	1.11	2.22
25	Mess Sylinder 100 cc	3	2.25	6.75
26	Ditto 20 cc	3	1.25	3.75
27	Mess. Bottle 5 cc	20	1.20	24.00

28	Blazer	10	US\$ 0.28	US\$ 2.80
29	Brass plate 30 x 60 x 0.1 mmt	1	US\$	8.35
30	Iron mesh 30 x 60 cm	1		4.10
31	Plyer I.S. No. 16812	1		25.00
32	Shock absorber (rubber) for Electron Microscope	10	9.72	97.25
33	Glass knife maker Model C	1		250.00
34	Pipette 10 cc	5	0.69	3.45
35	Ditto 5 cc	5	0.69	3.45
36	Ditto 1 cc	5	0.55	2.75
37	Desk lamp Hitachi Model "moon light 231"	1		7.80
38	Heater 600 W Hitachi Model HS-641	2	3.90	7.80
39	Optical microscope "Olympus" Model ECE-Bi-1	1 set		334.50
40	Slide glass 50 pcs/1 set	500	1.66	16.66
41	Cover glass 100 pcs/1 set	500	1.11	5.55
42	Air constant oven for Electron Microscope-use Slide preparation Model EM-200T	3 sets		1,750.00
43	Refrigerator Hitachi Model R-2126	1		152.80
44	Freezer Hitachi Model RS-2509	1		500.00
45	Cleaner Hitachi Model C-V270	1		80.50
46	Pure water maker Model B-10	1		97.22
47	Stain Resin	5	30.55	152.75
48	PH meter Model M-5			269.44

49	HITACHI Room Air conditioner Model RA-183C window type	2	US\$333.33	US\$666.66
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SUB-TOTAL: US\$4,965.00

Repairing tools

1	Circuit tester ("SANWA") Model 501 ETR	1		US\$ 26.10
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2	Tools sets, Model S-5	1 set		14.70
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3	Electrical Tools Model DL-10D	1 set		97.22
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SUB-TOTAL: US\$138.02

(12) イ ラ ン

① ポリオ対策

(Polio vaccination)

② テヘラン大学 公衆衛生学部

(The Department of Occupational Health at the
Institute of Public Health Research and the
School of Public Health , Teheran University)

① イラン：ポリオ対策

第一回 R / D

団 長 石 口 修 三 (岐阜大学医学部教授)

調査期間 4 2. 7. 1 0 ~ 7. 3 0 (2 1 日 間)

Record of Discussions

between the Medical Survey Team of the Government of Japan
and the Ministry of Health of Imperial Government of Iran

on Medical Cooperation

1. Medical cooperation between the Imperial Government of Iran and the Government of Japan will be promoted with main emphases on the following two projects:
 - (1) Polio vaccination programme.
 - (2) Cooperation for establishment of the Department of Occupational Health at the Institute of Public Health Research and the School of Public Health, Teheran University for the training and education.
- 2 Polio vaccination programme:
 - (1) The Government of Japan will donate to the Imperial Government of Iran five hundred thousand doses of oral live poliovirus vaccine for two hundred and fifty thousand children.
 - (2) Two top level experts will be dispatched by the Government of Japan to Iran as soon as possible for the purpose of giving advice on the Polio vaccination programme which will be carried out by the Imperial Government of Iran. They will stay for one month for the first instance, and come again for another month after the interval of six months. The Imperial Government of Iran requests dispatch of the said experts by the middle of September, 1967.
 - (3) The concentrated vaccine will be sent as soon as possible by air, and the Diluent solution by sea.
 - (4) The concentrated vaccine, Diluent solution, Antigen and other necessary materials and equipment will be sent by air for the pilot study of Polio vaccination which will be carried out in the four designated areas for the three hundred children each.
 - (5) The Imperial Government of Iran will be furnished with the information on the cost of oral live Poliovirus vaccine as soon as possible.

3. Cooperation for the establishment of the Department of Occupational Health at the Institute of Public Health Research and the School of Public Health, Teheran University in line with the WHO Recommendations of 1966:
 - (1) The Government of Japan will donate to the Institute of Public Health Research and the School of Public Health, Teheran University the basic industrial hygiene equipment necessary for the establishment of the Department of Occupational Health.
 - (2) As consultants, two occupational physicians with the duration of six months each and an industrial hygienist with the duration of one year will be dispatched to the Institute by the Government of Japan.
 - (3) One physician and a chemist of the Institute will be accepted at the expenses of the Government of Japan for training in Japan for two or three weeks.
 - (4) Joint research will be carried out in the specified fields of Occupational Health.
4. Training facilities will also be provided in Japan to the Iranian researchers in such fields as follows:
 - (1) Tissue culture (for School of Medicine, Teheran University).
 - (2) Gastrophotography (for Firouzgar Medical Center).
 - (3) Nurse training (for Pirouzgar Medical Center.)
5. Services of the experts, articles and training facilities referred to above will be provided at the expense of the Government of Japan through the normal channels under the Colombo Plan.
6. Technical advice of experts from Japan in the following fields is requested by the Imperial Government of Iran as the items of future medical cooperation:
 - (1) Production of dried BCG vaccine.
 - (2) Drug control laboratory.
 - (3) Production of Virus vaccine and especially training of staff
7. Study of probability of establishing eventual scientific affiliation between the Firouzgar Medical Center and Gifu University is requested by the Imperial Government of Iran.

- 8 The Imperial Government of Iran proposes to send experts and advisers in Health Corps to Japan at the expenses of the Imperial Government of Iran on short term basis, if requested by the Government of Japan.
9. The Japanese experts shall enjoy the privileges and exemptions as described in the note No.37 of the Annual Budget of 1344 and the Regulations of Privileges and Exemptions of the Foreign Experts ratified by the Finance Committees of the two Houses.
- 10 The Japanese experts dispatched under the present programme will work as adviser to the Ministry of Health, Imperial Government of Iran.
11. The articles referred to above shall become the property of the Imperial Government of Iran upon being delivered C.I.F. at Teheran Airport, or Khorramshahr or Bandar Shahpur Port to the Iranian authorities concerned.
12. The Imperial Government of Iran undertakes to meet;
 - (a) Custom duties, internal taxes and other similar charges, if any, imposed in Iran in respect of the articles referred to above,
 - (b) Expenses necessary for the transportation, installation, operation and maintenance thereof.

This is the record of discussions to be approved by the respective governments.

Signed

Shuzo ISHIGUCHI
 Head of Japanese Medical
 Survey Team

Signed

Mohammad Assar
 Under - Secretary
 for Planning & Programmes,
 Ministry of Health.

④ イラン：ポリオ対策

第二回 R / D

派遣専門家 多ヶ谷 勇 (国立予防衛生研究所腸内ウイルス部長)

派遣期間 4 3.2.11 ~ 2.27 (17日間)

Record of Discussions

between Dr. I. Tagaya, Chief, Department of Enteroviruses, National Institute of Health, Ministry of Health of Japan and Dr. M. Shahriari, Director General, Department of C.D.C. Imperial Iranian Ministry of Health

In connection with item 2 of the Record of Discussions between the Medical Survey Team of the Government of Japan and the Ministry of Health of Imperial Government of Iran on Medical Co-operation concerning Polio Vaccination programme, the following understanding has been reached.

Five hundred thousand doses of trivalent live oral polio vaccine donated from the Government of Japan to the Government of Iran under the Colombo Plan will be given to infants under 7 year's old in Khuzistan and Khorasan Districts of Iran. Each infant will receive 3 doses of the vaccine at an interval of 6 - 8 weeks under the consideration of local climates and environmental hygienic conditions. To evaluate the effect of the vaccination as well as the factors affecting the effect of the vaccine, it was agreed that the following studies are to be carried out in the Reference Laboratory of the Ministry of Health of Iran.

- 1) Study on the prevalence of enteroviruses before vaccination
- 2) Study on the excretion of poliovirus after vaccination
- 3) Study on the antibody level of target infants before vaccination
- 4) Study on the conversion of polio-antibody after vaccination
- 5) Study on the antibody level against poliomyelitis virus in age groups above 7 years
- 6) Study on the prevalence of poliovirus among infants at a certain period (not less than 2 months) after the last dose of the vaccine
- 7) Organization of a special Surveillance Committee for the study of suspected poliomyelitis cases after vaccination.

To carry out the above-stated studies it was agreed that the Government of Iran will take every effort to improve the facilities in the Virus Section of the Reference Laboratory and make enough personnel available, and that the Government of Japan will send one specialized virologist to collaborate in the study in the Reference Laboratory.

As regards necessary materials and equipment mentioned in (4) of 2 of the above record of Discussions, they will be given due consideration by the Government of Japan.

Detailed indications on the collection of specimens and methods of laboratory works will be given later by Dr. I. Tagaya to Dr. A. Manteghi, the Deputy of General Director of CDC.

February 25th, 1968

Signed

Dr. I. Tagaya,
Chief, Department of
Enteroviruses
The National Institute of Health
JAPAN.

Signed

Dr. N. Shahriari,
Director General,
Department of C.D.C.
Imperial Iranian Ministry
of Health

Mass vaccination units program from March 21, 1968 to March 21, 1969 in Iran							
Ser. No.	Type of vaccination	Start of	End of program	Operational area	Pop. exposed to danger		Population protected
					Age-group	Number	
1	* Cholera El Tor	May 5	June 5	Borderline of Pakistan and Afganistan with the Baluchestan & Sistan Province to a depth of 150 km.	All age groups	375,000	300,000 80%
2	* Cholera El Tor	May 22	June 20	Borderline of Afghanistan with the Khorasan province to a depth of 150 km.	"	750,000	600,000
3	Measles	April 21	Aug. 21	All rural localities	9 months 7 years	4,355,000	23% 1,000,000 rural children
4	B.C.G.	Aug. 23	Dec. 21	All rural localities & urban communities.	All age groups	1,155,000,000	1,000,000 8.5%
5	** Small-pox	Aug. 23	Dec. 21	"	"	27,000,000	2,000,000
6	Polio	Dec. 22	March 20	All provincial capitals and cities of high health standards with increasing incidence of the disease.	0-14 years	3,800,000	1,000,000 children of towns and cities.

* This program is changeable according to the current exigencies and recommendations of the Technical Committee.

** Inasmuch as the vaccination coverage against smallpox in rural communities in the last three years has reached 90% more consideration will be given to the urban communities.

Note: B.C.G. and smallpox vaccination will be performed in combined form.

① イラン：ポリオ対策

第三回 R / D

団 長 渡 辺 良 一 (鎌倉保健所長)

派遣期間 4 3. 4. 2 3 ~ 4 3. 7. 2 2 (3 ヶ月)

Thank you for your kind attendance at the round table discussion on the polio-vaccination programme held on July 14th 1968.

We, experts from Japan, are understanding the discussion as follows.

Tsunehiro Kitahara, M.D.

Dept. of Enteroviruses
National Institute of Health
Tokyo, Japan

Record of discussion on
Japanese - Iranian Polio Vaccination Program

Date 14th July 1968 8.30 A.M.

Place Ministry of Health, Plan Organization Department

Present Engineer Assar
 Drs Shahriari
 Zafari
 Zarifi
 Watanabe
 Kitahara
 Karasawa
 Tachi
 Balassanian
 Kooros

A meet was held with the above mentioned to discuss the Isfahan polio vaccination program. At this time the first phase of the vaccination had been completed. Of an at risk population of 80,000, 72 % had received vaccine.

The following points were discussed:

- 1) The 2nd vaccination would take place after 15th of August to avoid excessive heat and enteritis.
- 2) To aid the research program, funds would be made available for the purchase of suitable toys to acts as an incentive for those children from whom blood and stool specimens could be collected.
- 3) Adequate personel and facilities would be provided to shorten the time of vaccination. It was proposed by Dr. Shahriari that use be made of the anti-malaria organization.
- 4) There would be unincreased emphasis on health education prior to the 2nd vaccination. Experts would be sent from the Ministry of Health.
- 5) Khusistan Province would be selected for the 2nd area of vaccination. A research program would be carried out.

- 6) Recommendations were made for the improvement of laboratory facilities.
- 7) Attention was drawn to the importance of the formation of surveillance committees on the national and provincial level for the administration of a polio vaccination program.

At the meeting, experts from Japan expressed their opinions along the following line:

According to the records of discussion on the medical cooperation concerning polio-vaccination programme, the vaccination has been undergoing since the end of April, 1968. At first, Khuzistan and Khorasan districts were selected as the locations for the vaccination programme. But Khuzistan district seemed to be unsuitable for the programme because of the high temperature in the district, and Khorasan district seemed to be unsuitable for the vaccination because of cholera vaccination campaign, which had been carried out at that time. Finally Esfahan district was selected as the location of the polio-vaccination.

1. The polio-vaccination in Esfahan district is now going on. First vaccination was done from 1st of June to 9th of July. Second and third vaccinations are scheduled to be carried out within this year.
When the polio-vaccination is done, it is desirable to give the vaccine to all children in a district at same time in a short period. To carry out second and third vaccination without delay, efforts to make enough personnel and transportation available should be taken. In Esfahan, there are difficulties to collect specimens from vaccinated children.
Although it is not easy to collect serial blood and stool specimens from fixed children, effort to over-come the difficulty should be taken.
Before the start of next vaccination it is necessary to titrate of the potency of the vaccine.
2. Esfahan district may need half of the oral live polio vaccine donated from the government of Japan. Using another half, it is possible to have another vaccination programme in a city which has the approximately same size as that of Esfahan or in smaller cities. When another vaccination is carried out, it is desirable to have virological and serological survey, even in a small scale, to evaluate the effect of the vaccination as well as the factors affecting the effect of vaccine.

Just before the start of vaccination it is necessary to check the viral titer of the vaccine to be used.

The official expiration date of the vaccine donated from the government of Japan is Aug. 9th 1969.

3. According to the records of discussion, the following studies are going to be carried out in the virus section of the Reference laboratories.
 - (1) Study on the prevalence of enteroviruses before vaccination
 - (2) Study on the excretion of poliovirus after vaccination
 - (3) Study on the antibody level of target infants before vaccination
 - (4) Study on the conversion of polio-antibody after vaccination
 - (5) Study on the antibody level against poliomyelitis virus in age groups above 7 years.
 - (6) Study on the prevalence of poliovirus among infants at a certain period (not less than 2 months) after the last dose of the vaccine

To carry out the above-stated studies, although much improvements have been done rapidly, more efforts to improve the facilities and to make enough qualified personnel available in the virus section of the Reference laboratory.

The followings seem to be urgent,

- (1) Facility for distilled water of high quality
- (2) Facility for proper washing and sterilization of glass-ware and other materials to be used in tissue culture and training of the personnel in charge of washing and sterilization
- (3) Preparation of primary tissue cultures
Monkey kidney cells and human cells
- (4) Stability of the temperature of incubator

4. To evaluate the effect of polio-vaccination and to make future plan on polio-vaccination, central and local polio surveillance committees should be established.

(1) Surveillance of polio-suspected cases after vaccination:

Surveillance of clinical poliocases should be carried out intensively for the evaluation of the effect of vaccination. It should cover not only polio cases but polio-like illness, some of them are induced with various enteroviruses.

(2) Periodical serological survey for poliomyelitis:

Antibody surveys should be carried out systematically to evaluate the immune status of the population.

(3) Planning of the future schedule for polio-vaccination in the country or in a district

We thank all of you for your courtesty and kindness extended to us during our stay, even it was short, in Iran, and we hope you will have great success in the prevention of poliomyelitis in this rapidly developing country.

July 14th 1968

Tsunehiro Kitahara, M.D.

Dept. of Enteroviruses
National Institute of Health
Tokyo, Japan

㊤ イラン：テヘラン大学公衆衛生学部

第一回 R / D

団 長 石 口 修 三 (岐阜大学医学部教授)

調査期間 4 2.7.1 0 ~ 7.3 0 (2 1 日間)

(注) ポリオ対策第一回 R / D が本件 R / D を兼ねているので参照のこと (P 187)

2. 中近東・アフリカ計画

計画名	区分		着手年度	終了年度	フォローアップ 終了年度	昭和41年度	昭和42年度	昭和43年度	昭和44年度	昭和45年度	昭和46年度	昭和47年度	昭和48年度	昭和49年度	昭和50年度	備考
	国名	プロジェクト名														
中近東 アフリカ	(1) ケニア	(イ) エンブ病院	42	48	-			(第一回R/D) △ 実施	(第二回R/D) ▲ 計画打合せ			(第三回R/D) ▲ 計画打合せ				昭和42年度に単発専門家派遣事業を実施したことによりプロジェクト事業として協力実施するに至る。
		(ロ) ナクール病院	41	49	50			(第一回R/D) △ 実施	(第二回R/D) ▲ 計画打合せ			(第三回R/D) ▲ 計画打合せ	エンリエンション 計画打合せ		昭和41年3月に単発専門家派遣事業を実施したことによりプロジェクト事業を協力するに至る。	
	(2) タンザニア	ダルエスサラーム 大学 医学部	45	47	50					第一回R/D ▲ 実施						昭和46年2月の実施調査団の派遣により以後プロジェクト方式による協力を実施
	(3) エチオピア	(イ) 帝国中央衛生研究所	42	46	49			(第一回R/D) △ 実施					(第二回R/D) ▲ 計画打合せ			単発専門家派遣事業を実施したことによりプロジェクト事業として協力するに至る。
(ロ) 天然痘(撲滅)対策		46	48	50						(第一回R/D) △ 実施		(第二回R/D) ▲ 計画打合せ			昭和46年12月の実施調査団の派遣に基づき専門家派遣事業を主体に協力を実施	

(1) ケ ニ ア

① エンブ病院

(District Hospital Embu)

② ナクール病院

(Rift Valley Provincial General Hospital
Nakuru)

① ケニア エンブ病院

第一回 R/D

ケニア エンブ病院

団 長 福見 秀雄(国立予防衛生研究所 細菌第一部長)

調査期間 43. 6. 26～7. 11(16日間)

GIST OF DISCUSSIONS BETWEEN
THE MEDICAL COOPERATION SURVEY TEAM
OF THE GOVERNMENT OF JAPAN
AND
THE MINISTRY OF HEALTH OF THE GOVERNMENT OF KENYA
ON MEDICAL COOPERATION

1. Medical Cooperation between the Government of Kenya and the Government of Japan will be further promoted with the main emphasis presently on the activities of the teams of Japanese specialists at the following hospitals:
 - (i) Rift Valley Provincial General Hospital Nakuru
 - (ii) District Hospital Embu
2. In accordance with the laws and regulations in force in Japan and within yearly budgetary appropriations, Japanese cooperation will be extended in the forms of dispatch of experts, provision of training facilities and supply of equipment, upon receipt of Application Forms A1-4 from the Kenyan Government.
3. As the clinical laboratory and mortuary facilities are indispensable to the effective activities of the teams of Japanese specialists, it is expected that their buildings will be made available as soon as possible. When the buildings are completed, the Government of Japan will provide the necessary experts and equipment. Training facilities will also be provided in Japan for Kenyan doctors and technicians in the fields concerned.
4. With respect to the Rift Valley Provincial General Hospital, Nakuru, the following will be considered:
 - (1) Additional Dispatch of a specialist surgeon
 - (2) Dispatch of an X-Ray doctor or a technician
 - (3) Supply of an X-Ray apparatus

5. With respect to the District Hospital, Embu, dispatch of the following will be considered:

- (1) Supply of an X-Ray apparatus
- (2) Supply of a mobile medical vehicle
- (3) Additional dispatch of specialists needed

6. Facilities will be provided for Kenyan senior officers, doctors and technicians to observe the medical conditions in Japan as well as to undergo advanced training in specialised fields.

7. Necessary measures are expected to be taken to further expedite the customs clearance and local transportation of the equipment to be supplied by the Japanese Government.

8. In view of the limited availability of suitable Japanese experts, It is expected from the long range point of view that the services of Japanese experts will be utilised more for the teaching, training, training and research purposes. In this sense, possibilities of Japanese cooperation to central institutions such as Kenyatta National Hospital, Medical Training Centre, Medical School etc., will be studied further as subjects for future cooperation.

This is the gist of discussions to be approved by the respective Governments.

Nairobi July 10th, 1968

(Signed)

Dr. J.C. Likimani
Permanent Secretary
Ministry of Health
Kenya

(Signed)

Dr. Hideo Fukumi
Leader of the Japanese
Medical Cooperation
Survey Team

第二回 R/D

団 長 恩地 裕 (大阪大学医学部教授)

調査期間 45. 1. 10~1. 25 (15日間)

RECORD OF DISCUSSIONS
BETWEEN THE JAPANESE MEDICAL COOPERATION SURVEY TEAM
AND THE AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE REPUBLIC OF KENYA

The Japanese Medical Cooperation Survey Team visited the Republic of Kenya from 5 to 17 January, 1970 and had discussions with the authorities concerned of the Government of the Republic of Kenya concerning the medical cooperation between the two countries.

The team and the authorities concerned record the following points reached between the two parties:

1. Medical cooperation between the Japanese Government and the Kenyan Government will be promoted with main emphasis on the cooperation for the establishment of the Intensive Care Unit at Kenyatta National Hospital.

2. In accordance with the laws and regulations in force in Japan, Japanese cooperation will be extended in the form of dispatch of experts, receiving of trainees and supply of equipment, upon receipt of Application Forms A.1, A.2, A.3 and A.4 from the Kenyan Government.

3. Following experts will be dispatched to the ICU by the Japanese Government:

(1) A team for consulting with the Kenyan authorities on the actual plan of cooperation for the ICU for the period of fifteen days three to six months before the opening of the ICU, namely,

two medical doctors,
one engineer and
one officer of OTCA.

(Administration of the ICU, especially the participation of Japanese medical staff in the administrative affairs of the ICU should be decided through the discussion between the Japanese team and Kenyan authorities. However, it is strongly suggested that the leader of Japanese Staff should be a member of the Hospital Medical Advisory Committee).

(2) One engineer for installing equipment to be donated by the Japanese Government for the period of two or three weeks after arrival of the equipment to the ICU.

(3) A team of technical experts,

specialities	period
two surgeons	one or one year a half
one anaesthetic doctor	one year
one orthopaedic surgeon	one year
one physician	one year
one medical engineer	one year
one coordinator	three months

(4) Two surgeons, an orthopaedic surgeon and a physician who will serve in the ICU will also serve in Embu taking turns respectively in such a manner that two of them are in Embu District Hospital and the other two in the ICU to help the anaesthetic doctor.

This service in Embu District Hospital will terminate at the end of the second year after the opening of the ICU.

4. Following Kenyan staffs will be accepted at the expenses of the Japanese Government for the purpose of technical training in Japan:

(1) two doctors with more than three years of training in general surgery for two years,

(2) one anaesthetic doctor with more than one year of training in anaesthesia for one year and

(3) one medical electronic technician for six months.

The training will start in 1970.

5. The main necessary equipment for the establishment of the ICU on the attached list will be donated by the Japanese Government.

6. The above-mentioned cooperation will be carried out subject

to the following conditions:

- (1) The Kenyan Government issue necessary permits to the Japanese experts to engage in medical and other related activities under the present cooperation project within the framework of existing regulations in Kenya;
- (2) The Japanese experts be granted in the Republic of Kenya privileges, exemptions and benefits (including accommodation and transportation facilities) no less favourable than those granted to the experts of any of the third countries under similar circumstances;
- (3) The Japanese experts be exempted from any liabilities in respect of any accident that may arise with the bona-fide discharge of their duties, as they are under supervision and responsibility of the Kenyan authorities;
- (4) The equipment to be supplied by the Japanese Government become the property of the Kenyan Government upon delivery C.I.F. at a port or an airport of entry into Kenya. Therefore, (i) customs duties, internal taxes and other similar charges, if any, to be imposed on the equipment and (ii) local expenses necessary for the transportation, installation, operation and maintenance of the equipment be met by the Kenyan Government.

7. The contents in this record will be implemented after they are duly approved by the respective Governments.

NAIROBI, January, 17, 1970

(Signed)

Dr. Yutaka Onji
Head of the Japanese
Medical Cooperation
Survey Team

(Signed)

Dr. J.C. Likimani
Director of Medical Services
Ministry of Health

LIST OF EQUIPMENT

1	X-ray Set, mobile	1
2	Microscope, binocular	1
3	Hyperbaric Chamber	1
4	Electrocardiograph (1 ch.)	5
5	Biophysigraph (2 ch.)	2
6	Cardiac Monitor	5
7	Cardiac Monitor with recorder	2
8	Dilution Computer	1
9	ICU Patient Monitoring System (for 9 patients)	2
10	ICU Patient Monitoring System (for 4 patients)	1
11	Cardiac Monitor Defibrillator Pace-maker Set	2
12	Electroencephalograph	1
13	Hemodialyser, automatic controller	1
14	Flame Photometer	1
15	Bed with Weight Measuring Device	1
16	Respirator	8
17	Echoencephalograph	1
18	Ophthalmoscope	2
19	Ultrasonic Nebulizer	5
20	Suction Unit with pump	1
21	Suction Bottle, mobile	2
22	Suction Bottle with wall attachment	22
23	Cast Cutter	2
24	Cast Kit	1
25	Magic Cast	1
26	Ultrasonic Cleaner	1
27	Centrifugator	1
28	Protein Refractometer	1
29	Anesthetic Machine	1
30	Infant Circle for Anesthetic Machine	1
31	Hyper and Hypothermic Equipment	2
32	Vessel Saturating Apparatus	1
33	Bed	25
34	Tool for Cardiac Massage	3
35	Operating Table	1
36	Incubator	4
37	Micro Cell Counter	1
38	X-ray Film Viewer	4
39	Thermometer	6
40	Emergency Cart	1
41	Blood Gas Analyser	2
42	Laryngoscope	9
43	Bronchoscope	2

44	Surgical Lamp	1	
45	Surgical Lamp, mobile	2	
46	Polygraph (4 ch.)	2	
47	Van Slyke Gas Analyser	1	
48	Carlens Tube	5	
49	Hematorite Tube	1000	
50	Hemoglobinometer	2	
51	Refrigerator	2	
52	Peritoneal Dializer Coil	30	
53	Low Pressure Suction	10	
54	Central Venous Pressure Set	50	- 100
55	Way Stop Cock (plastic)	100	
56	Magil Forcep	5	
57	Stethoscope	20	
58	Sphygmanometer	25	
59	Spectrophotometer	1	
60	Chloride Meter	1	
61	Cut down Set	12	
62	Tracheostomy Set	6	
63	Thoracotomy Set	3	
64	Vacuum Cleaner	2	
65	Ice-making Machine	1	
66	Floor Washer	2	

④ ケニア エンブ病院

第三回 R/D

ケニア エンブ病院

団 長 重松 逸造(国立公衆衛生院疫学部長)

調査期間 47. 11. 12.~11. 27 (15日間)

RECORD OF DISCUSSIONS
BETWEEN THE JAPANESE MEDICAL COOPERATION SURVEY TEAM
AND THE AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE REPUBLIC OF KENYA

The Japanese Medical Cooperation Survey Team visited the Republic of Kenya from the 12th day to the 26th day of November 1972 to evaluate the medical cooperation projects between the two countries now in progress in the latter country and had discussions with the authorities concerned of the Government of the Republic of Kenya regarding the future prospect of these projects.

The team and the authorities concerned desiring further to effect the medical cooperation between the two countries have reached the following understandings:

1. Both parties recognize that satisfactory achievement has been made through the medical cooperation projects between the two countries which were launched in 1966 at the Rift Valley Provincial General Hospital Nakuru, in 1967 at the District Hospital Embu and in 1971 at the Kenyatta National Hospital I.C.U. (Intensive Care Unit) Nairobi with up to the present dispatching medical experts totaling 53 persons donating medical equipments equivalent 135,000,000 Japanese Yen (approximately 27,000,000 Kenyan Shilling) from Japan and accepting two Kenyan trainees in Japan.
2. The medical cooperation project at the Rift Valley Provincial General Hospital Nakuru has been successfully implemented in accordance with "Gist of Discussions" signed by Dr. Hideo Fukumi and Dr. J.C. Likimani on the 10th day of July 1968 and "Gist of Discussions" signed by Prof. Shiro Osajima and Dr. J.M. Gekonyo in December 1970. The present form of cooperation project at this hospital will be completed within a few years. It is desired, however, that an Institute for tropical medicine in Nakuru which was requested in the latter "Gist of Discussions"

be built as soon as possible without any interruption regarding the dispatch of experts from Japan between the completion of the present cooperation project and the commencement of activities of this Institute.

3. The medical cooperation project at the District Hospital Embu has been effectively achieved in accordance with "Gist of Discussions" signed by Dr. Hideo Fukumi and Dr. J.C. Likimani on the 10th day of July 1968 and "Record of Discussions" signed by Dr. Yutaka Onji and Dr. J.C. Likimani on the 17th day of January 1970.

This cooperation project shall be continued in the form of a follow-up project by supplying spare parts necessary for maintenance and repairing of the existing equipments after this project will be completed within one year.

4. The medical cooperation project at the Kenyatta National Hospital I.C.U. has been steadily developed in accordance with "Record of Discussions" signed by Dr. Yutaka Onji and Dr. J.C. Likimani on the 17th day of January 1970.

This cooperation project regarding the I.C.U. shall be continued in the form of a follow-up project by dispatching experts on a short term assignment and supplying spare parts necessary for maintenance and repairing of the existing equipments after the activities of the Japanese experts participating in the present cooperation project are phased out and be succeeded by the Kenyan counterparts after three years.

The matters recorded herein shall not be binding legally either on the Government of Japan or on the Government of the Republic of Kenya as the final decision is to be made by the two Governments after studying this Record of Discussions.

Nairobi, the 24th day of November 1972

(Signed)
Dr. Itsuzo Shigematsu
Head of the Japanese Medical
Cooperation Survey Team

(Signed)
Dr. J.M. Gekonyo
Senior Deputy Director of
Medical Services
Ministry of Health
Nairobi, Kenya

㊟ ケニア：ナクール病院

第一回 R / D

団 長 福 見 秀 雄 (国立予防衛生研究所細菌第一部長)

調査期間 4 3 . 6 . 2 6 ~ 7 . 1 1 (1 6 日 間)

(注) エンブ病院第一回 R / D が本件 R / D を兼ねているので参照のこと (P 2 0 5)

団 長 成島 四郎 (長崎大学医学部教授)

調査期間 45. 11. 25 ~ 12. 13 (19日間)

GIST OF DISCUSSIONS
BETWEEN THE MEDICAL COOPERATION SURVEY TEAM
OF THE GOVERNMENT OF JAPAN
AND
THE MINISTRY OF HEALTH
OF THE GOVERNMENT OF KENYA
ON MEDICAL COOPERATION

1. Medical Co-operation between the Government of Kenya and the Government of Japan has successfully finished its five years activities in the Rift Valley General Hospital, Nakuru, and has entered into a new era, where more considerations will be paid to the teaching, training and research purposes.
2. In this sense, and in accordance with the agreements signed on July 10th 1968 between Dr. J.C. Likimani and Dr. H. Fukumi, a specialist surgeon, an X-ray doctor and a pathologist, will additionally be immediately dispatched. Equipment for pathology, bacteriology and bio-chemistry, in the sum of three hundred thousand Kenyan shillings (15,000,000 Japanese Yen) will be donated in the initial first year (from April 1971 to March 1972) the part of which is attached hereto. Duty-free entry of this equipment will be arranged and the cost for transportation from Mombasa to Nakuru Hospital, fitting them into a specified place, including electric and water supply facilities, shall be borne by the Government of Kenya. Just before the arrival of the equipment in Kenya, two specialist technicians one for bacteriology and one for bio-chemistry will be dispatched.
3. The clinical laboratory in the War Memorial Hospital in Nakuru shall be made available for this purpose.
4. The accommodation for additional doctors and technicians will also be provided by the Government of Kenya.
5. Facilities will be provided for Kenyan doctors and technicians, whereby they observe the medical conditions in

Japan as well as undergo advanced training in specialised fields.

6. It was agreed that Kenyan doctors and technicians sent for further training in Japan, in connection with this project, would benefit by being attached to the Institute in Nakuru for about a year on their return to Kenya.

7. In view of the central position of the Nakuru Hospital in the vast endemic diseases-infected Province and in view also of the fact that Nagasaki University is the only University with the "Institute for Tropical Medicine" in Japan, it is requested by the Government of Kenya as well as the Provincial Rift Valley General Hospital, Nakuru that an Institute for tropical medicine with an annexed special ward be built in the near future by the Government of Japan in the campus of the Hospital, so that scientific basis for an effective control of infectious, nutritional and other diseases may be laid. It was agreed, however, by both the Government of Kenya and the Government of Japan that the research works to be done in this Institute should be guided by the spirit, "research from routine works"; that is to say, "Research works only, cut off from routine works" are not advisable under the present medical and sanitary conditions of this country.

8. Furthermore, since our intention is nothing but co-operation in promoting the welfare of Kenyan people in general, possibilities of Japanese co-operation with central medical institutions in Nairobi will also be studied for future co-operation, while maintaining a closer relationship between District District Hospitals, Health Centres and dispensaries.

9. The contents in this record will be implemented after they are duly approved by the respective governments.

NAIROBI, Kenya December, 1970

(Signed)

Professor Shiro Osajima,
Head of the Japanese
Medical Co-operation
SURVEY TEAM

(Signed)

Dr. J.M. Gekonyo,
Deputy Director of
Medical Services,
Ministry of Health,
Government of Kenya

㊤ ケニア：ナクール病院

第三回 R/D

団 長 重 松 逸 造 (国立公衆衛生院疫学部長)

調査期間 47.11.12～11.27 (15日間)

(注) エンブ病院第二回 R/D が本件 R/D を兼ねているので参照のこと (P 207)

(2) タ ン ザ ニ ア

ダルエスサラーム大学 医学部

(University of Dar es Salaam .

Educational and Research Utilizing an

Electron microscope)

第一回 R/D

タンザニア ダルエスサラーム大学医学部

団 長 山元 寅男(九州大学医学部教授)

調査期間 46. 1. 31~2. 18 (19日間)

RECORD OF DISCUSSIONS
BETWEEN THE JAPANESE MEDICAL COOPERATION SURVEY MISSION
AND THE AUTHORITIES CONCERNED OF THE GOVERNMENT
OF THE REPUBLIC OF TANZANIA

The Japanese Medical Cooperation Survey Mission headed by Dr. Masaatsu Koike visited the Republic of Tanzania from 2nd to 17th February 1971 and had discussions with the authorities concerned of the Government of the Republic of Tanzania concerning the medical cooperation between the two countries.

The following is the Record of Discussions.

1. Medical cooperation between the Japanese Government and the Tanzanian Government will be promoted with main emphasis on the cooperation concerning the plan for educational and research work utilizing an electron microscope at the University of Dar es Salaam.
2. In accordance with the laws and regulations in force in Japan, Japanese cooperation will be extended in the form of dispatch of experts, receiving of trainees and supply of equipment upon receipt of Application Forms A.1, A.2, A.3 and A.4 from the Tanzanian Government.
3. Following experts will be dispatched to the University of Dar es Salaam by the Japanese Government.
 - (1) One engineer for installing equipment to be donated by the Japanese Government and one expert in electron microscopy for a few months after arrival of the equipment to the University of Dar es Salaam.
 - (2) Such other academic experts, (Anatomist, Microbiologist, etc.), as may be requested by the University of Dar es Salaam over a protracted period, initially for two years subject to extension by mutual agreement.

4. For the setting of the electron microscope and the other necessary instruments, the Japanese experts will give instructions to Tanzanian technicians selected by the University of Dar es Salaam on the use of instruments provided to the University.
5. The Tanzanian researchers and technicians will be accepted at the expenses of the Japanese Government for the purpose of technical training in Japan and they will be provided with such facilities as are deemed to be necessary for the researchers and technicians to pursue their studies in the field of electron microscopic research scheme.
6. So that the electron microscope will be well used and maintained smoothly, it is hoped that the Japanese experts will ensure that a Tanzanian participant will master the techniques of electron microscope in the shortest possible time.
7. The main necessary equipment for educational and research work utilizing an electron microscope on the attached list will be donated by the Japanese Government at the first stage.
8. Faculty of Medicine, The University of Dar es Salaam will take full responsibility for the management and the operation of the instruments.
9. The Tanzania side explained that the electron microscope will be used for the plan of educational and research work of the University of Dar es Salaam especially, for anatomic research, biomedical research and teaching at the Faculty of Medicine.
10. The house for the electron microscope has been already constructed and the air conditioning unit will be installed for adjustment of suitable room temperature and humidity by the Tanzania side.
11. The Japanese side requested that on arrival of the Electron Microscope in Dar es Salaam, immediate action should be taken for custom clearances and domestic transportation from the port of Dar es Salaam to the University, in order to keep the electron microscope and other instruments in good condition.
12. The above-mentioned cooperation will be carried out subject to the following conditions:

(1) The Tanzanian Government issue necessary permits to the Japanese experts to engage in medical and other related activities under the present cooperation project within the frame work of existing regulations in Tanzania.

(2) The Japanese experts be granted in the Republic of Tanzania privileges, exemptions and benefits (including accommodation and transportation facilities) no less favourable than those granted to the experts of any of the third countries under similar circumstances.

(3) The Japanese experts be exempted from any liabilities in respect of any accident that may arise with the bona-fide discharge of their duties, as they are under the supervision and responsibility of the Tanzanian authorities.

13. In order to carry out the medical research effectively, both sides agreed to the exchange of available information and collaboration in the electron microscopic research project.

14. The supply of spare parts and after-service shall be guaranteed by the Japanese Government for the first 2 years. Spare parts when needed, necessary steps to supply them shall be taken promptly by Japan, and a Japanese Engineer will be made available to install the spare parts or repair the machine. After that the University will be fully responsible.

15. The contents in this record will be implemented after they are duly approved by the respective Governments.

Dar es Salaam February 15, 1971

(Signed)

Dr. Masaatsu Koike
Head of the Japanese Medical
Cooperation Survey Mission

(Signed)

Pius Msekwa
Vice-Chancellor
University of Dar es Salaam

LIST OF EQUIPMENT

<u>Description of Goods</u>	<u>Quantity</u>	
I. Equipment and Miscellaneous for Electron Microscope Room		
1. Electron Microscope (Component Parts)	1	1 set
(1) Electron Microscope	1	
(2) Power Supply (Cabinet)	1	
(3) Reference Resister Unit	1	
(4) High Voltage Transformer Unit	1	
(5) Fore Pump	2	
2. Vacuum Evaporator		1
3. Ultramicrotome		1 set
(1) Microtome	1	
(2) Light source	1	
(3) Binocular Light Microscope	1	
4. Filter for Water Supply		1
5. Automatic Voltage Stabilizer		1
6. Direct Reading Balance		1
7. Others		
8. Spare Parts for Electron Microscope		1 set
(1) Filament		
(2) Cassette		
(3) Magazine		
(4) Diffusion Pump Oil		
(5) Apperture Plates for Electron Lens		
(6) Others		

(3) エ テ ィ オ ピ ア

① 帝国中央衛生研究所

(The Imperial Central Laboratory
and Research Institute)

② 天然痘(撲滅)対策

(Smallpox Eradication Programme)

第一回 R / D

団 長 鈴木了司(国立予防衛生研究所寄生虫部第二室長)

調査期間 43.7.4~7.24(21日間)

RECORD OF DISCUSSIONS

between the Medical Cooperation Survey Team
of the Government of Japan
and the Ministry of Public Health
of the Imperial Government of Ethiopia on
Medical Cooperation

1. Medical cooperation between the Imperial Government of Ethiopia and the Government of Japan will be further promoted with the main emphasis on the cooperation for the Imperial Central Laboratory and Research Institute.
2. In accordance with the laws and regulations in force in Japan and within yearly budgetary appropriations, Japanese cooperation will be extended in the forms of dispatch of experts, provision of training facilities in Japan and supply of equipments, at the expenses of the Japanese Government, upon receipt of Application Forms A1, 2, 3 and 4 from the Ethiopian Government. The Application Forms in triplicate are expected to be forwarded through the Japanese Embassy well in advance.
3. In order to ensure the smooth and effective cooperation on a long term basis, the National Institute of Health will be the Japanese cooperating counterpart institution.

4. To help to establish the new Departments of Parasitology and Medical Zoology at the I.C.L.R.I., the following experts, in addition to Dr. Ohse, will be dispatched from November 1968 who will be replaced by their successors after their terms of assignments:
 - (1) Two parasitologists
 - (2) Two medical zoologists
5. To help the reinforcement of the existing Departments of Pathology and Bacteriology, the appointment of a pathologist and bacteriologists will be considered in the future.
6. Observation as well as training facilities will be provided in Japan for the Ethiopian staff in the following fields:
 - (1) Administration of the national health laboratory services
 - (2) Administration of national and provincial public health services
 - (3) Parasitology
 - (4) Medical Zoology
 - (5) Other specialized fields that may be considered necessary.
7. As the first shipment of the laboratory equipment for the Parasitology and Medical Zoology Departments of the I.C.L.R.I. has arrived to be followed by further shipments, it is expected that the rooms be made available as soon as possible with necessary alterations for its proper installation.
8. Necessary measures are expected to be taken to further expedite the customs clearance and local transportation of the equipment to be supplied by the Japanese Government.

9. The Japanese Government expects the Japanese experts to be granted privileges, exemptions and benefits no less favourable than those granted to the experts of the third countries under similar circumstances.

This is the record of discussions to be approved by the respective Governments.

Addis Ababa, July 18, 1968

Signed

Mr. Makonnen Habtemariam
Director - General of
Medical Services

Signed

Dr. Noriji Suzuki
Leader of the Japanese
Medical Cooperation
Survey Team

① エチオピア：帝国中央衛生研究所

第二回 R / D

団 長 勝 沼 晴 雄(東京大学医学部公衆衛生学教室教授)

調査期間 4 8.1 0.2 0～1 1.5 (17日間)

RECORD OF DISCUSSIONS BETWEEN MEDICAL COOPERATION
SURVEY MISSION OF THE OVERSEAS TECHNICAL
COOPERATION AGENCY OF JAPAN AND THE MINISTRY OF
PUBLIC HEALTH OF THE IMPERIAL ETHIOPIAN GOVERNMENT
CONCERNING COOPERATION IN THE FIELD OF PUBLIC HEALTH

A Medical Cooperation Survey Mission sent from Japan investigated the present status of medical and public health programmes in Ethiopia being carried out in cooperation with OTCA, namely, the Imperial Central Laboratory and Research Institute and the WHO assisted Smallpox Eradication Programme. The Mission also visited health institutions and programmes in the province of Harrar.

A series of discussions were held regarding the above-mentioned matters between the Mission and the Ministry of Public Health of the Imperial Ethiopian Government. It is understood that any part of the contents of the present Record of Discussions will be implemented subject to the laws and regulations in force in Japan and within yearly budgetary appropriations.

1. The Mission feels strongly the necessity of the realization of an "Agreement on Technical Cooperation between the Imperial Ethiopian Government and the Government of Japan" so as to encourage the OTCA activities in the interest of fostering good relationship between the two countries.

2. Japanese Cooperation will be extended to the on-going Smallpox Eradication Programme (SEP) through dispatching an epidemiologist and volunteers for smallpox surveillance activities and supplying equipment upon receipt of the formal application from the Ethiopian Government.

3. The research activities of the Departments of Parasitology and Medical Zoology, which were initiated and established in the ICLRI with the technical cooperation of the Japanese Government since 1968, were appreciated by the Ethiopian Government. The continuation of the support to improve the activities of the Institute in the form of equipment, manpower including acceptance of fellows was considered necessary.

4. Further cooperation in the strengthening of the existing departments and initiation of new departments within the said Institute with the aim of developing a stronger National Health Laboratory was also discussed and agreed upon. The dispatch of experts, supply of equipment as well as acceptance of fellows concerned etc. will be considered along with the future plan of the Institute within yearly budgetary appropriations. It is understood that Japanese assistance in this respect will be coordinated with the international assistance provided by UNDP/WHO etc.

5. Technical Cooperation in the development of provincial public health services including laboratory services was discussed and its necessity in the future was agreed. This technical cooperation will initially be undertaken in two or more provinces.

6. Technical Cooperation in the establishment and development of an Institute of Public Health was discussed and taken note of.

7. The Volunteers required for the above-mentioned medical cooperation as well as for other fields of public health will be provided as much as possible, upon request of the Imperial Ethiopian Government, in accordance with the agreement on the dispatch of members of the Japan Oversease Cooperation Volunteers which was concluded between the two countries on the 9th of November, 1971.

Officials of the Ministry of
Public Health

Woizero Sophia Abraham
Assistant Minister, Ministry of
Public Health

Dr. Getachew Bolodia
Director of Central Laboratory
& Research Institute

Members of The Japanese Mission

Dr. Haruo KATSUNUMA
Head of The Mission,
Professor, Head of the Department
of Public Health, Faculty of
Medicine University of Tokyo

Dr. Noboru TANAKA
Director, Chiba Cancer Center
Research Institute, Chairman,
Department of Pathology

Dr. Nobuo ONODERA
Deputy Head, Division of General
Affairs Medical Affairs Bureau,
Ministry of Health & Welfare

Mr. Akihiro MITARAI
Staff Member, Department-of Medical
Cooperation, Overseas Technical
Cooperation Agency

Observers from Japanese Embassy

Mr. Eiji Tanaka
First Secretary
Embassy of Japan in Ethiopia

Mr. Kazumi Dekiba
Third Secretary
Embassy of Japan in Ethiopia

8. The need for the following medical equipment was discussed:-
- a) Esophago-Gastric-Duodenscope with camera
 - b) Coloscope with camera
 - c) Peritoneoscope with Liver needle biopsy and camera

Ways and means of cooperation in securing three sets of each category of the above specified equipment were basically agreed upon.

Addis Ababa, 31st October, 1973.

Signed

Sophia Abraham
Assistant Minister
Ministry of Public Health

Signed

Dr. Haruo Katsunuma, Head of Mission
Professor, Head of the Department of
Public Health, Faculty of Medicine,
University of Tokyo

RECORD OF DISCUSSIONS BETWEEN THE ETHIO - JAPANESE
FRIENDSHIP ASSOCIATION AND THE MINISTRY OF PUBLIC
HEALTH OF THE IMPERIAL ETHIOPIAN GOVERNMENT IN THE
PROMOTION OF PUBLIC HEALTH IN ETHIOPIA

A series of discussions were held between representatives of the Ethio - Japanese Friendship Association and the Ministry of Public Health concerning cooperation between the Association and the Ministry in the field of public health, and the representatives have agreed as follows:

1) The establishment of an Institute of Public Health in Ethiopia would further the cause of public health in the country and that Ethio - Japanese cooperation in this endeavour would enhance the friendship between the two countries.

2) The Ethio - Japanese Friendship Association would provide the funds necessary to finance the construction of buildings for the said Institute in Addis Ababa.

3) The Ethio - Japanese Friendship Association and the Ministry of Public Health would jointly undertake the planning, designing and construction of the building for the Institute, and to this effect a preparatory committee could be set up.

Addis Ababa 31 October 1973

For the Ministry of Public Health

For the Ethio-Japanese
Friendship Association

Signed

Signed

Sophia Abraham
Assistant Minister
Ministry of Public Health

Dr. Haruo Katsumuma
Professor, Head of the Department
of Public Health Faculty of
Medicine, University of Tokyo

㊤ エチオピア 天然痘撲滅対策

第一回 R/D

団 長 多ヶ谷 勇 (国立予防衛生研究所腸内ウイルス部長)

調査期間 46. 12. 2 ~ 12. 21 (20日間)

RECORD OF DISCUSSIONS BETWEEN MEDICAL COOPERATION SURVEY
MISSION OF THE GOVERNMENT OF JAPAN AND THE MINISTRY OF
PUBLIC HEALTH OF THE IMPERIAL ETHIOPIAN GOVERNMENT
CONCERNING COOPERATION IN THE FIELD OF PUBLIC HEALTH.

The Third Medical Cooperation Survey Mission of the Government of Japan investigated the present situation of the smallpox eradication campaign in Ethiopia, being carried out by the Imperial Ethiopian Government in collaboration with the World Health Organization (WHO). The Mission also observed the present conditions of the Medical Cooperation between the two Governments in the Imperial Central Laboratory and Research Institute (ICLRI) in Addis Ababa. And thereafter a series of discussions in these fields were made between the Mission and the Ministry of Public Health of the Imperial Ethiopian Government (See Annex I). It is understood that any part of the contents of the present Record of Discussions will be implemented subject to the provisions of the laws and regulations in force in Japan and within yearly budgetary appropriations.

1. Japanese Cooperation will be extended to reinforce the on-going Smallpox Eradication Programme (SEP) in the form of despatching an epidemiologist and volunteers for smallpox surveillance activities and supplying vehicles and radiocommunication equipments at the expense of the Japanese Government, upon receipt of the formal application from the Ethiopian Government (See Annex II).

2. The research activities of the Departments of Parasitology and Medical Zoology, which were initiated and established in the ICLRI with the technical cooperation of the Japanese Government since 1968, were greatly appreciated by the Ethiopian officials and the continuation of the support to improve the activities of these Departments in the form of despatch of experts as well as training of the staff including acceptance of fellows was considered necessary.

3. Further cooperation in the strengthening of the existing departments and initiation of new departments within the said Institute with the aim of developing a strong National Health Laboratory was also discussed. The despatch of experts, supply of equipments as well as acceptance of fellows concerned will be considered according to the future plan of the Institute (See Annex III) at the expense of the Japanese Government within yearly budgetary appropriations. It is understood that in this respect Japanese assistance will be coordinated with the international assistance provided by UNDP/WHO.

4. Technical Cooperation in the development of provincial public health services including laboratory services was discussed and its necessity in the future was taken note of.

5. The Volunteers required for the above-mentioned medical cooperation as well as for other fields of public health will be provided as much as possible, upon request of the Imperial Ethiopian Government, in accordance with the agreement on the despatch of members of the Japan Overseas Cooperation Volunteers which was concluded between both the Governments on the 9th of November, 1971.

Addis Ababa, 17th December, 1971.

(Signed)

H.E. Ato Yohannes Wolde Gerima
Vice-Minister
Ministry of Public Health

(Signed)

Dr. Isamu Tagaya,
Head of Mission
Director, Department
of Enteroviruses
National Institute of
Health, Japan

ANNEX I

Officials of the Ministry of Public Health

H.E. Ato Yohannes W. Gerima,
Vice Minister, Ministry of
Public Health

Woisero Sophia Abraham
Assistant Minister,
Ministry of Public Health

Dr. Widad Kidane Mariam,
Ministry of Public Health

Dr. Assefa Tekle,
Director of Central
Laboratory

Members of the Japanese Mission

Dr. Isamu Tagaya, Head of
Mission Director, Department
of Entero-Viruses, National
Institute of Health, Japan

Dr. Goro Goto, Head,
Department of Medical
Cooperation, OTCA

Dr. Natsumi Tsuchiya, Deputy
Director, Research Institute
of Kyoto City

Mr. Osamu Muro, Chief, Office
of Planning and Coordination,
JOCV

Observers

Mr. Tatsuo Aikawa, Counsellor,
Embassy of Japan in Ethiopia

Mr. Shigeru Ise, Third
Secretary, Embassy of Japan
in Ethiopia

Dr. Takateru Chse, Expert of
OTCA

Mr. Takashi Nagakura, Member
staff, Domestic Activities
Division, JOCV

ANNEX III

REQUEST BY THE ETHIOPIAN GOVERNMENT FOR THE ICL & RI

1/ <u>EXPERTS</u>	<u>Department</u>	<u>Type of Expert</u>	<u>No.</u>
Chemistry	a. Toxicologist		1
	b. Hydrology Expert (Water pollution oriented)		1
	c. Food and Beverage control (fraud and falsification)		1
Drug Quality Control	Biological Control of drugs		1
Medical Zoology			
a. Parasitology	Senior Helminthologist		1
	Helminthologist		1
b. Entomology	Senior Entomologist		1
	Entomologist		1
	Limnologist		1
Bacteriology	Bacteriologist (Anaerobic bacteriologist oriented)		1
Veterinary Public Health	Sera production expert		1
Provincial Health Laboratory	All round Public Health Laboratory expert		1
Pathology	Histo-pathologist		1

2/ FELLOWSHIP

1. Medical Zoology
2. Clinical Chemistry
3. Food sanitation
4. Hydrology technique
5. Serum production
6. Vaccine Production
7. Food and water Microbiology
8. Quality control of Drugs

The list of equipment to be provided will be submitted later by the ICL & RI.

ANNEX II

Request by the Ethiopian Government for the Smallpox Eradication Programme.

1. Personnel

One epidemiologist	
Eight surveillance officers	(volunteers)
Four motor mechanics	(")
Two radio technicians	(")

2. Equipments

Five Toyota Land Cruisers, with spareparts and tyres
Two vehicle-repair vans
Forteen sets of radio-communication equipments, with spareparts for the Provincial Health Departments.

◎ エチオピア：天然痘（撲滅）対策

第二回 R / D

団 長 勝 沼 助 雄（東京大学医学部公衆衛生学教室教授）

調査期間 4 8. 1 0. 2 0 ~ 1 1. 5（17日間）

（注）帝国中央衛生研究所第二回 R / D が本件 R / D を兼ねているので参照のこと（P ）

3. 中南米計画

計 画 名	区 分		着 手 年 度	終 了 年 度	フ ォ ロ ー ア ッ プ 協 力 年 度	昭 和 4 1 年 度	昭 和 4 2 年 度	昭 和 4 3 年 度	昭 和 4 4 年 度	昭 和 4 5 年 度	昭 和 4 6 年 度	昭 和 4 7 年 度	昭 和 4 8 年 度	昭 和 4 9 年 度	備 考 (協力着手背景の内容等)
	国 名	プロジェクト名													
中 南 米	ブラジル	ベルナンプロ大学 熱帯医学研究所	42	46	48		(第一回R/D)								昭和42年10月の実施調査団の派遣 に基づき協力を開始する。
							実施					計画打合せ			
小 計	◎ 中南米計画分		協力実施済国			1ヶ国									
			協力実施済プロジェクト事業数			1件									

ブラジル

ペルナンブコ大学 熱帯医学研究所
(The Institute of Tropical medicine ,
National University of Pernambuco medical
School)

ブラジル：ペルナンブコ大学熱帯医学研究所

第一回 R / D

団 長 白 浜 仁 吉 (衆議院議員)

調査期間 4 2.1 0.9 ~ 1 0.2 9 (2 1 日間)

THE RECORD OF DISCUSSION AGREED UPON
BETWEEN THE PRESIDENT OF THE NATIONAL UNIVERSITY OF PERNAMBUCO
AND THE HEAD OF JAPANESE MEDICAL SURVEY TEAM
ON THE MEDICAL COOPERATION
BETWEEN THE GOVERNMENTS OF BRAZIL AND JAPAN
ON THE 13th OF OCTOBER, 1967.

1. The Japanese medical cooperation will be extended to the Institute of Tropical Medicine, National University of Pernambuco Medical School, under the Cooperation Plan for Latin American countries in such a way as stated below.
2. The principal aim of the above-mentioned medical cooperation is to execute the following functions.
 - (1) Survey and research on parasitic diseases in Brazil.
 - (2) Laboratory-diagnosis of parasitic diseases.
 - (3) Practical and theoretical training of Brazilian medical and technical staff members in parasitological researches.
3. The cooperation on the part of Japan will be conducted in the following field of activities:
 - (1) To dispatch experts in the field of parasitology after March 1968.
 - (2) To provide some of the equipments and chemicals which are necessary for survey, research, diagnosis, training etc., on parasitic diseases within the budgetary limit of the Government of Japan.

- (3) The National University of Pernambuco, when approved by the Government of Brazil, will send researchers and technicians as trainees to Japan and they will be provided with such facilities as are deemed to be necessary for the researchers and technicians to pursue their studies in the field of parasitology.
4. The Institute of Tropical Medicine will take full responsibility for the management and the operation of research of the laboratory of parasitology.
 5. The Japanese experts will give instructions on the use of instruments provided to the Institute of Tropical Medicine and act as advisers to the laboratory of parasitology.
 6. The Institute of Tropical Medicine (the National University of Pernambuco) will be responsible for providing necessary accommodations and transportation facilities for the Japanese experts, and for bearing the expenses arising in connection with custom clearances, domestic transportation and installation of the equipments and chemicals to be supplied to the Institute of Tropical Medicine.

The National University of Pernambuco will take necessary measures to accord to the Japanese experts free medical care, including hospitalization, in case of illness or accidents resulting from the normal exercise of their functions and/or from conditions of local life.

7. The National University of Pernambuco will make strong recommendations to the Government of Brazil to take all necessary measures to exempt the Japanese experts from payment of Brazilian income-tax and to accord to the Japanese experts and their family members, privileges, exemptions, and benefits including duty-free import of their personal effects, and a personal automobile per family.

8. This agreement must be held in accordance with the Council of the National University of Pernambuco.
9. The contents in this record will be implemented after they are approved by the appropriate authorities of the Government of Brazil and of the Government of Japan.
10. This is the record of discussion on the medical cooperation between the National University of Pernambuco and the Japanese Medical Cooperation Survey Team.

Signed

Dr. Nikichi Shirahama
Head of the Japanese Medical
Cooperation Survey Team

Signed

Prof. Murilo Humberto de Barros
Guimarães
President of the National
University of Pernambuco

Date: 13th October, 1967
Recife, Pernambuco
Brazil.

4. その他のアジア地域

計画名	区分		着手年度	終了年度	終了 フォロ アップ 年度	昭和 41 年度	昭和 42 年度	昭和 43 年度	昭和 44 年度	昭和 45 年度	昭和 46 年度	昭和 47 年度	昭和 48 年度	昭和 49 年度	備考 (協力着手背景の内容等)
	国名	プロジェクト名													
その他のアジア地域	台湾 (旧中華民国)	(イ) 寄生虫(撲滅)対策	44	46	47			×	(第一回R/D) △ 実施						昭和47年度に於いて日台国交の断絶に伴い、政府ベースによる医療協力事業を打ち切り、それ以後民間ベースの医療協力事業にて協力を実施している。
		(ロ) 台湾省立病院	44	46	47			×	(第一回R/D) △ 実施						
		(ハ) 台湾大学	44	46	47			×	(第一回R/D) △ 実施						
		(ニ) 台北市立病院	44	46	47			×	(第一回R/D) △ 実施						
小計	その他のアジア地域分		協力実施済国			1ヶ国									
			協力実施済プロジェクト事業数			4件									

(注) 昭和47年度に於いて日本・台湾両国の国交断絶に伴い、(旧)海外技術協力事業団が実施していた政府ベースの医療協力事業を打ち切り、政治的判断に基づき、以後民間ベースの医療協力事業に移し、継続して協力を実施している。

日台国交断絶に伴い民間ベースの医療協力事業実施窓口機関

財団法人 日台文化交流協会

台 湾
(旧 中 華 民 国)

- ① 寄生虫 (撲 滅) 对 策
(The Control of Parasitic Diseases)
- ⊕ 台湾省立病院
(Taiwan Provincial Hospital)
- ⊖ 台湾大学 医学部
(The Clinical Research Laboratory of
National Taiwan University)
- ⊖ 台北市立病院
(Hospital of Taipei City Health Department)

① 台湾：寄生虫（撲滅）対策

第一回 R / D

団 長 横 川 宗 雄（千葉大学医学部教授）

調査期間 4 5. 3. 2 4 ~ 4. 2（10日間）

Record of Discussions

Between the Medical Experts of the Japanese Government and the Authorities Concerned of the Government of the Republic of China regarding the Technical Cooperation for the Control of Parasitic Diseases

In response to the request by the Government of the Republic of China, the Medical Cooperation Experts of the Government of Japan visited the Republic of China from 24, March to 2, April 1970 and had discussions with the Authorities concerned of the Government of Republic of China for the purpose of working out the details for the implementation of Japan's medical cooperation for the control of parasitic diseases to the Republic of China.

As a consequence of the above discussions, the Japanese Medical Experts and the Authorities concerned of the Government of the Republic of China have reached the understanding as recorded hereunder.

In accordance with the laws and regulations in force in Japan, the Japanese medical cooperation will be extended in the forms of dispatch of experts, receiving trainees and supply of equipment, upon receipt of Application Forms A1, A2, A3 and A4 from the Government of the Republic of China.

Cooperation to the Taiwan Provincial Health

- (1) Dispatch of a few experts
- (2) Receiving for training in Japan of some medical doctors or technicians after September, 1970.

- (3) Supply of equipment such as;
- a) Microscopes and binocular
 - b) No frost refrigerators
 - c) Video-tape recorder
 - d) Anthelmintic
 - e) Motor-Car

The above cooperations will be carried out subject to the same condition of the Record of Discussions contacted on Nov. 26, 1969, in Taipei.

Taipei, Mar. 31, 1970

Signed

(Professor Muneo Yokogawa)
Head of the Japanese Medical
Experts

Signed

(Dr. C. K. Chang)
Director
Department of Health
Ministry of Interior

台湾：⊕台湾省立病院 ⊙台湾大学 ⊖台北市立病院

第一回 R / D

団 長 今 永 一 (愛知県ガンセンター病院長)

調査期間 4 4.11.15 ~ 11.29 (15日間)

Record of Discussions

Between the Medical Cooperation Mission of the Government of Japan and the Authorities Concerned of the Government of the Republic of China

In response to the request by the Government of the Republic of China, the Medical Cooperation Mission of the Government of Japan visited the Republic of China from 15 to 29 November, 1969 and had discussions with the authorities concerned of the Government of the Republic of China for the purpose of working out the details for the implementation of Japan's medical cooperation to the Republic of China.

As a consequence of the above discussions, the Japanese Medical Cooperation Mission and the authorities concerned of the Government of the Republic of China have reached the understanding as recorded hereunder.

1. The Japanese medical cooperation will be extended with main emphasis on the advancement of medical science and the improvement of public health activities of the Republic of China.
2. In accordance with the laws and regulations in force in Japan, the Japanese medical cooperation will be extended in the forms of dispatch of experts, receiving trainees and supply of equipment, upon receipt of Application Forms A1, A2, A3 and A4 from the Government of the Republic of China.
3. The above cooperation will be extended for the first year at the following sites.

(1) A Hospital of Taipei City Health Department

- (2) A Taiwan Provincial Hospital
 - (3) The Clinical Research Laboratory of National Taiwan University
4. Cooperation to the Hospital of Taipei City Health Department
- (1) Dispatch of one doctor and one medical technician after April, 1970
 - (2) Receiving for training in Japan of doctors and medical technicians
 - (3) Supply of equipment such as:
 - a) Chest X-Ray Mobile Unit
 - b) Other necessary equipment
5. Cooperation to the Taiwan Provincial Hospital
- (1) Dispatch of one doctor and one medical technician after April, 1970
 - (2) Receiving for training in Japan of doctors and medical technicians
 - (3) Supply of equipment such as:
 - a) Cobalt 60 Therapy Unit
 - b) X-Ray Units
6. Cooperation to the Clinical Research Laboratory of National Taiwan University.
- (1) Dispatch of four doctors and four medical technicians after April, 1970
 - (2) Receiving for training in Japan of doctors and medical technicians
 - (3) Supply of equipment such as:
 - a) Double-Beam Spectrophotometer
 - b) High Speed Refrigerated Centrifuge
 - c) Other necessary equipment
7. The above cooperation will be carried out subject to the following conditions.
- (1) The Government of the Republic of China issues necessary permits to the Japanese experts so that they can engage in medical and other related activities under the present

cooperation projects within the framework of the existing regulations in the Republic of China.

- (2) The Japanese experts and their families are granted in the Republic of China privileges, exemptions and benefits no less favourable than those granted to the experts of any third country stationed in the Republic of China under similar circumstances.
 - (3) The Government of the Republic of China will undertake to bear claims, if any arise, against the experts resulting from occurring in the course of, or otherwise connected with the bona fide discharge of their functions in the Republic of China covered by this Agreement.
 - (4) The equipment to be supplied by the Government of Japan will become the property of the Government of the Republic of China upon being delivered C.I.F. at a port or an airport of entry into the Republic of China.
Therefore, (i) custom duties, internal taxes and other similar charges, if any, to be imposed on the equipment and (ii) local expences necessary for transportation, installation, operation and maintenance of the equipment are met by the Government of the Republic of China.
8. The contents of the present record will be implemented after they are approved by the respective Governments.

Signed

(Professor Hajime Imanaga)
Head of the Japanese Medical
Cooperation Mission

Signed

(C. K. Chang)
Director,
Department of Health Adm.
Ministry of Interior,
Republic of China

