

Japan's medical system collapsing as COVID-19 cases surge

By Ben McGrath
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As result of government indifference and inaction, Japan's emergency medical system has collapsed as the number of COVID-19 cases continues to surge in the country.

The number of confirmed cases is now 12,368, while 321 have died. With widespread denial of testing to suspected patients, the real numbers are undoubtedly far higher.

The Health Ministry has warned that as many as 400,000 people could die if no preventative measures are taken. Japan lacks a sufficient quantity of Intensive Care Unit (ICU) beds, with an average of 5 per 100,000 people compared to 12 in Italy and 35 in the United States. This is a clear warning that deaths may skyrocket as seen in Italy.

Furthermore, as the number of cases grows, the majority are of unknown origin, meaning that health authorities are failing to track infection routes. This indicates widespread circulation of the virus in the community.

Takeshi Shimazu, a doctor at Osaka University, recently stated that because of COVID-19, "We can no longer carry out normal emergency medicine."

It is not just coronavirus patients who are being affected. Hospitals are refusing to treat people, including those suffering from other serious ailments such as strokes and heart disease. Women are also struggling to find places to give birth. Hospitals unequipped to deal with the virus fear it will be transmitted to new patients, but the denial of treatment is also because of a lack of hospital beds.

The rate of available beds in cities like Tokyo and Osaka, as well as six other prefectures, was less than 20 percent as of April 17. When taking into account those sick at home who have not yet been hospitalized, the numbers surpass available beds. In Saitama, Kochi, and

Kyoto prefectures, the rate was below 30 percent.

As in other countries, medical workers lack personal protective equipment, including gowns, masks and face shields. Doctors and nurses are forced to re-use masks or create make-shift gowns out of raincoats.

Exposure to COVID-19 is forcing many medical workers to quarantine themselves at home, exacerbating already existing staff shortages. In addition, to make ends meet, medical workers may have shifts at two or three hospitals, meaning that if they are forced to stay home or get sick, it has a wider impact on healthcare. Some workers are being told to quit their jobs at other hospitals.

That the Shinzo Abe government sat back and essentially did nothing for two months while the pandemic raged in other countries means that his government is guilty of nothing less than social murder. Testing was greatly restricted to give the impression that the number of COVID-19 cases in Japan was low and that additional lifesaving measures were not necessary.

The real reason for this is the same as in other countries: the government is refusing to spend the money necessary to help the sick, deeming it as an unacceptable impost on big business' bottom line.

The administration has previously targeted healthcare for senior citizens as being too costly with Deputy Prime Minister and Finance Minister Taro Aso saying in 2013 that the elderly needed to "hurry up and die." He made similar remarks in 2016: "I recently saw someone as old as 90 on television, saying how the person was worried about the future. I wondered, 'How much longer do you intend to keep living?'"

The primary concern of the government is the impact on the economy. It is now focused on providing bailouts to big business as the International Monetary

Fund predicts the economy will contract by 5.2 percent this year.

As of Monday, the government has approved a total of 117 trillion yen (\$US1.1 trillion) in stimulus packages, with individuals receiving only paltry cash payments of 100,000 yen (\$US929) each.

Companies like Toyama Chemical of Fujifilm Holding Corporation are set to profit as 13.9 billion yen (\$US129 million) is earmarked to stockpile the flu drug Avigan, which the company produces. It is currently being tested as a possible treatment for people with COVID-19.

These are resources that could have been directed towards lifesaving measures well before the pandemic struck. Medical authorities around the world have warned for decades that a global pandemic could strike, yet even after the first cases began to emerge in China, Tokyo refused to set up the necessary testing and medical infrastructure.

For more than two months, the government strictly limited who could receive a COVID-19 test. In March, Japan conducted approximately 52,000 polymerase chain reaction (PCR) tests or around 16 percent of the number in South Korea. Little has changed since Abe declared a national emergency, which was extended to the whole country on April 16.

Harrowing stories of sick people, many struggling to breathe, are starting to emerge. In March, there were 931 cases of more than five hospitals rejecting ambulances with patients, forcing them to drive around looking for a hospital that would take them. In the first eleven days of April, there were 830 cases, according to the *Japan Times*. In one particular case, a man was rejected by 80 hospitals in Tokyo.

People are expressing outrage at the situation on Facebook and Twitter, using the hashtag #???? (*kensa nanmin*) or “testing refugee,” to describe their experiences. One user, @monochromic, described the hashtag as “basically all the people in Japan struggling to get the attention they need to even just get a diagnosis.”

A user on Facebook named Jordain described a horrifying experience over six days of trying to get her friend, for whom she was serving as a translator, into a hospital for a COVID-19 test and treatment.

Jordain wrote that when she was finally able to set up a test at a clinic after four days she learned that: “It’s a

secret location. It’s a medical facility that’s currently closed, but is being used as a corona testing site on the down-low. To enter the building, she’ll have to walk through the parking lot and use the staff entrance.

“The woman on the phone makes me promise not to tell ANYONE other than my friend the name of the place where she is being tested. Because if people knew they were doing testing there it would ‘cause a commotion.’

“I really wish I was making that last part up. It's absolutely horrific how much they are trying to cover this up and keep the official numbers low.”

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