

Annual Report on Health and Welfare

1994 -1995

*Medical Care – Quality, Information, Choice and
Assent*

Ministry of Health and Welfare of Japan

MARCH 1996

ANNUAL REPORT ON HEALTH AND WELFARE 1994 – 1995

Medical Care — 'Quality,' 'Information,' 'Choice' and 'Assent'



MINISTRY OF HEALTH AND WELFARE

MARCH 1996

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On the Publication of the Annual Report on Health and Welfare



Syoichi Ide
Minister for Health and Welfare

We are pleased to publish the 1994 Annual Report on Health and Welfare.

With the impending arrival of the full-fledged aged society of the 21st century, we have begun to recognize the important social problems accompanying the tendency of families to have fewer children. Health and welfare administration, including medical care, pension and welfare is directly related to the life of the people and must be adapt to the changes in our society.

The serious damage caused by the Great Hanshin-Awaji Earthquake in January of this year once again underscored the important role that health and welfare administration plays in supporting the life of the people at any time and under any circumstances.

This year, we have chosen “medical care” as the main theme for the Annual Report on Health and Welfare for the first time.

The year 1994 marked the 120th anniversary of the promulgation of the “Medical Service System,” which is thought to be the starting point of the modern medical service system in our country. Also, 1995 marks the 50th anniversary of the ending of World War II. Most of today’s medical security system was formed during the period of reconstruction after the war. Since then, the medical security system of our country has played an important role in maintaining and stabilizing the life of the people.

Under those circumstances, medical care has had an influence on the disease pattern, population structure and socioeconomic structure of our nation, and it continues to change and develop. Today, the state of affairs surrounding medical care is set to change drastically. Public interest in medical care has increasingly grown, as seen in the increasing number of publications relating to medical care.

We have endeavored to supply information from a variety of viewpoints to facilitate public consideration and discussion of the issues, and the development of a common understanding regarding our medical care system.

Medical care is a service that is closely related to everyone from cradle to grave. We hope that many people join in the discussion on medical care in its transitional state, so that this important service will truly be of service to patients and their families, and continue to protect the life, health and well-being of the people of Japan in the future.

In addition, this issue describes the main activities and future challenges in each field of health and welfare administration, such as pension reform, expanding international cooperation and comprehensive development of health care and welfare services.

We hope that this annual report will be read by people throughout the nation and will serve to heighten understanding and improve cooperation in health and welfare administration.

May, 1995

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Book 1

Part 1
Medical Care —
‘Quality,’ ‘Information,’ ‘Choice’ and ‘Assent’

Foreword

Section 1. Introduction

1. Medical Care Is Called Upon to Find Ways to Keep up With the Changes of the Times

It has been said, “each civilization and each society has its own disease pattern and ecology.”

Through the long history of battle between humankind and disease, many diseases have been conquered by medical care. Now, it is quite possible to cure bacterial diseases by using drugs such as antibiotics, thanks to the development of pathogenic microbiology since the mid-19th century. The number of patients with infectious diseases has decreased and their deaths have dropped dramatically. However, wherever there are people, there will be disease. Human beings will suffer from illness as long as they are alive, and the way in which they suffer changes according to the civilization in which they live and the medical system that it employs. With highly developed modern medical care even today, many people in the developed countries, including Japan, suffer from adulthood-related diseases or so-called “adult diseases” which are chronic diseases, while a considerable number of infants and toddlers in the developing countries die from infectious diseases. Furthermore, AIDS for which we are not yet able to develop a complete cure has continued to spread in many countries.

It can be said that our medical security system, a social system against diseases, is a unique product of each society and civilization. In ancient times, it is said that people first prayed when illness befell them. These rituals ceremonies became community festivals and continue to this day. As such festivals differ depending on communities, security systems for medical services differ depending on countries and the times.

The decrease in the death rates of infants/toddlers and juveniles, the extension of the average life expectancy, and other factors are often noted as achievements of the medical security system in our country until now. The improvement in the living environment and national nutrition accompanying our country’s economic development has had a great influence, and medical care has also contributed to the economic development and the improvement of living environment among other things. It is said that medical care, our society and our economy have worked together in a “positive cycle” to decrease diseases such as infectious diseases and address chronic diseases to make the average life span of the Japanese people the longest in the world. But, will this cycle continue to work in the future?

The increase of the average life expectancy is slowing down, and the number of deaths has been increasing every year recently because of the increase of the number of latter-stage elderly people. The condition of patients with adulthood-related diseases such as cancer, heart diseases and cerebrovascular diseases has been changing alone with changes in life style and aging of society.

A new cycle is needed to meet the changes in the disease pattern, medical technology and its delivery systems, and the socioeconomic structure. The issue confronting us is how to deal with these changes.

Medical services have a variety of characteristics, and there are various viewpoints regarding these services, such as technical and economic perspectives. It is certain, however, that medical services deal directly with the physical and mental well-being of people, and are involved in the day-to-day life of patients and their families; that they are productive activities in which numerous people and a significant volume of resources are involved, such as specialists, materials including drugs and various facilities; and that the delivery of the medical services is supported by the entire nation through the medical insurance system.

Medical care is closely related to each person of the nation both directly and indirectly. It is necessary that people share as much as possible a common understanding about the status quo and the problems of medical care so that the medical system can continue to function in a positive cycle for the benefit of our society and our economy.

2. The Objective and Structure of Part I “Medical Care”, etc.

(1) Objective

With the aforementioned recognition in mind, the objective of this part is to provide information on the changes in the circumstances surrounding medical care and the present status of medical services as extensively as possible. This information must describe the activities of the people involved in the delivery of medical services, the movement of goods and services, and the variety of money flows, based on as much actual data as possible. Since medical care relates to the life of the people on the whole and relates to socioeconomic activities and development of science and technology extensively, we have tried to report the present status and problems in the manner shown below.

(2) Structure, etc.

① Opinion Poll of the People on the Country's Medical Services, etc.

Recognizing the importance of reporting the opinions of the people on the subject of medical care, we started the description based on the results of the “General Public Questionnaire on Health” which was conducted in January of 1995 with the participation of 2,000 men and women from the general public.

② The Changes in the Circumstances Surrounding the Country's Medical Services and the Present Status of Medical Services, etc.

Bearing in mind that the disease pattern, the population structure, the delivery system for medical services and the medical insurance system and other systems which have an influence on medical care are changing significantly, we decided to describe the present status and the problems of the country's medical services from the perspectives listed below.

First, it is becoming increasingly important that people maintain their daily life routine as much as possible even if they have diseases or disabilities. We need to focus not only on “treatment,” but also on long-term care as part of “daily living”. From these points of view, we report, among other subjects, on the present status of life under long-term care at medical institutions, the new development of in-home care, and opinions of patients and their families about palliative care in terminal care and disclosure of information regarding illnesses and other relevant matters. We realize that it is necessary to pursue continued improvement of the quality of medical care improved living standards of the Japanese people. Therefore, we discuss that the choices made by patients and their families need to be regarded as important for treatment and management of the security system for medical services.

Secondly, we report on the importance of the technological progress and the changes in technology from the viewpoint of medical care, which is to correctly diagnose diseases and injuries and to return the patients to their daily life as soon as possible. In addition, as for technology that has been developing and spreading recently, it is becoming increasingly important that we learn how to use it most efficiently. So we discuss the necessity of advancing the knowledge of users of technology in addition to the technology itself, as well as providing technology assessment and ensuring safety.

Thirdly, medical care has been playing an important role in maintaining and improving daily life through the prevention of diseases, including health promotion. So we report on prevention and health promotion efforts which have been changing according to the changes in the disease pattern and health perspectives of the people. We discuss that the boundary of health and disease is becoming larger and that it is becoming ever more important to deal well with illness in the daily living and to enjoy activities for prevention and health promotion, which match our individual life styles. Additionally, we also discuss the increasing importance of early detection and treatment for adulthood-related diseases.

③ How Medical Services Should Be Delivered

A. Medical Information

Recognizing that, for the improved satisfaction of patients, it is important that we deliver medical services according to the needs of patients, we discuss the significance of sharing medical information with patients/families and providers of medical services, and also discuss the participation of doctors and nurses, and the progress of information processing technology.

B. Systematization of the Functions of Medical Facilities

We also report on the systematization of functions of medical facilities and the present status of information exchange among medical facilities and discuss the importance of family doctors in the systematization of medical facilities' functions, and how medical services should be delivered in connection with welfare services in the community.

C. Emergency Medical Service and Disaster Medical Care

Furthermore, report the present status of emergency medical service and discuss our country's experience with the Great Hanshin/Awaji Earthquake and how disaster medical care should be delivered.

D. Providers of Medical Services

Keeping in mind that the quality of medical service depends greatly on the quality of health care providers such as physicians, we report on the trend in the supply and demand for physicians, dentists, pharmacists, nursing personnel, physical therapists, occupational therapists among other personnel. The importance of training these professionals to keep up with the changes of patients' needs is also discussed. Holistic care, which addresses the mental condition and living conditions, as well as the physical condition, of patients, is especially called upon. So we discuss how to train professionals who can address these issues.

④ The National Economy and Medical Care

Medical services are produced through the work of many people and the investment of various materials and facilities. In the case of our country, the volume, content, price and flow of medical services are determined through the medical insurance system and medical fee system under it. We understand that these systems supporting the delivery of medical services should continue to function as one of the socioeconomic systems according to the needs of the times, and develop under the solidarity of the people. Therefore, with this recognition in mind, we report on the flow of various activities and expenses for those activities under the medical insurance system.

Firstly, we describe at the situation of the delivery of medical services in terms of national health expenditures. We report on how national health expenditures are increasing and the main factors for it, how medical services are delivered by each category of medical institutions, and how services are delivered by each category of diseases and medical procedure. We also introduce the status of cost sharing of medical expenses by scheme and type of cost bearers. In addition, diverse factors of production are invested to produce medical services, and thus we discuss how the cost structures of these factors of production differ among medical institutions.

Secondly, we report that the medical services industry is considered to be one of the fastest growing and holds an important position among the service industries. Also, medical services are produced in connection with many other industries. So we discuss that these services have a secondary effect as an investment, that is, they serve to increase the output of our national economy by influencing other industries, and allowing patients to be socially rehabilitated, to engage in productive activity and to improve their quality of life. Furthermore, we discuss the fact that medical services contribute to the stability of our economy by, for example, creating over three million jobs directly or indirectly.

Thirdly, we report on the pharmaceutical industry, health-related service industry, private insurance, and others, as industries closely related to the delivery of medical services.

Fourthly, we discuss the significance of the reform of the medical insurance system in fiscal 1994, and the challenges we will face in the future.