Japan

Risk Ratings

LOW MEDICAL RISK for Japan

Risk Summary

Japan is one of the world’s safest destinations for foreign travellers. Petty crime is the main risk to visitors, especially in major cities, but levels remain low. Japan supported the US-led interventions in Iraq and Afghanistan. While a terrorist attack in Japan remains feasible, it is not a target for Islamist extremists, not least because of the operational difficulties such groups would face in such a homogeneous society.

Japan experiences frequent tremors and occasional more severe earthquakes; thousands of people were killed in March 2011 mainly due to a tsunami caused by a magnitude 9.0 earthquake off Miyagi prefecture on the country’s north-eastern coast. However, as a result of long experience dealing with such risks, the national infrastructure is highly resilient and Japanese civil authorities have a very high level of capability.

This information is intended as a summary of the travel security environment; however, the risks can change at short notice during a crisis or evolving situation. Please check our travel security alerts to ensure that you are informed of the most recent developments.

STANDING TRAVEL ADVICE

Alerts

Increase in cases of rubella

View All Alerts

Vaccinations For Japan

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Routine Vaccinations

- All routine vaccinations should be current: these include Measles-Mumps-Rubella, Polio, Tetanus-Diphtheria-Pertussis, and Varicella.
- Annual influenza vaccination.

Other Medical Precautions

- Before you go - See your doctor and dentist and ensure you are in the best health before you leave. Other preparations:
  - Malaria
  - Zika Virus
  - Health Threats

Before You Go

See your doctor and dentist and ensure you are in the best health before you leave. Other preparations:

- Check your routine vaccinations
  - Check your routine vaccinations are up to date (polio; varicella; measles, mumps and rubella; tetanus, diphtheria and pertussis, seasonal influenza). See a travel health practitioner 6 to 8 weeks before departure for destination-specific health preparations. You may need additional vaccinations, some of which require several doses, or be recommended malaria medication which may need to be started a week or more before arriving in the malarial country.
- Documentation: Arrange a copy of your personal health record to carry with you when you travel. Include a letter from your doctor explaining your need for all medications you are carrying, including any over-the-counter medications, in English and the language of your destination(s). Make sure you have copies of your prescriptions.
- Medication: Check the regulations of your destination country regarding importation of your medication, as some drugs may be strictly prohibited (especially narcotics and psychotropics) and may result in severe penalties. Take any medicines you require in their original packaging, including any information leaflets, with them clearly labelled with your name (matching your passport name), and your doctor’s name. Have enough to cover the trip, and extra in case of delays, however note that many destinations limit quantities of certain drugs to a 30-day supply. Carry medication in your hand luggage, with copies of your prescriptions.

Vaccinations for Japan

https://www.internalsos.com/MemberPortal/PrintDisplay.aspx
Recommendations may vary for short-term visitors. Always consult your travel health advisor or contact International SOS to discuss your specific needs.

| Hepatitis A | Recommended for all travellers and expatriates, especially:
| --- | --- |
|  | For long-term or frequent visitors.  
|  | For adventurous travellers who travel to more remote locations or stay in areas with poor sanitation.  
|  | For men who have sex with men, people who use illicit drugs or those with liver disease. |

| Hepatitis B | Recommended for most travellers and expatriates, especially:
| --- | --- |
|  | For long-term or frequent visitors, and health-care workers.  
|  | For adventurous travellers who travel to more remote locations.  
|  | If possibility of new sexual partner, needle sharing, acupuncture, dental work, body piercing or tattooing during visit.  
|  | Many travel health professionals recommend hepatitis B vaccination for all travelers, regardless of destination. |

| Japanese encephalitis | Vaccine is recommended for people who will participate in ‘higher risk’ activities while in an area where Japanese encephalitis risk exists.  
| --- | --- |
|  | You are engaging in a ‘higher risk’ activity if you:  
|  | Travel during the peak Japanese encephalitis season (consult the “Health Threats” section of the International SOS country guides to see specific season details for this country).  
|  | Spend a significant amount of time outdoors, particularly in the evening and night-time, in areas outside of cities, (ex. camping, trekking, biking, fishing, hunting, farming).  
|  | Stay in accommodation that will likely have mosquitoes indoors, ex. lacking air conditioning, window screens, and bed nets.  
|  | Spend a month or more in a risk area during transmission season.  
|  | Japanese encephalitis vaccine is not available in many of the risk countries. Have the complete vaccine series before departure. |

**Malaria**

There is no malaria in Japan.

**Zika Virus**

There is no Zika Virus in Japan.

**Standard of Care**

**Emergency Response**

Always try to call International SOS whenever medical care or advice is required, especially in emergencies.

Japan has an excellent public ambulance service. The ambulances are well equipped, reliable and staffed with trained paramedics and nurses. Patients will be transported to the nearest hospital. Some doctors in an emergency department may not speak English.

Private ambulances are not normally used for emergencies. They are used to transport patients in a stable condition to another medical facility or the patient's home.

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**Standard of Health Care**

Let International SOS assist you.

International SOS will assist you to find suitable inpatient or outpatient care, will provide language assistance and may be able to pay your medical expenses.

**Inpatient care**

In large cities, hospitals practice medicine of an international standard, have excellent, modern equipment and often have English-speaking physicians. Outside major cities, English-speaking physicians may not always be available and the language barrier may be significant.

Etiquette is very important in Japanese society and the necessity for politeness and respect for doctors can frustrate foreigners. Doctors are generally very knowledgeable however the emphasis on protocol can sometimes cause physicians to fail in taking rapid action, even when it is medically warranted. It can also mean that less information on the patient's condition is released than may occur in other countries. In large teaching hospitals, you will often be cared for by a "team" of doctors. They will confer to discuss care and the treatment plan.

Japanese doctors will be happy to accommodate questions from the patient, immediate family or concerned company staff medical liaison. However, this can only occur after the patient or relatives have directly approached the treating doctor concerned and requested the release of information.

https://www.internationalsos.com/MasterPortal/PrintDisplay.aspx 2/6
OutPatient Care
Private and public medical facilities are recommended for outpatient care. Patients typically visit their own general practitioner first for a consultation. If a further investigation is required the patient will be referred to a specialist clinic or hospital.

Some university and private hospitals have outpatient departments. However, most do not accept appointments for a first consultation. Patients must register first, usually in the morning, and are expected to wait for the appointment.

There are several private clinics in Tokyo that are very accustomed to treating foreigners. These clinics have expatriate doctors and medical specialists that usually visit at specified times each week.

Paying for Health Care
Medical services can generally be paid for in cash, credit card or via electronic payment. When a patient is admitted for inpatient care a deposit may be required, as well as a guarantee letter for payment and indemnity.

Do not defer medical treatment because of financial concerns. Contact International SOS, and if our terms allow, we will make financial arrangements on your behalf.

Dental Care
High quality specialist and sub-specialist dental services are available. Some dentists speak English, but clinic staff may not.

Blood Supplies
Blood is considered safe and is screened according to international standards.

Even in areas where the blood supply is considered safe, it's best to avoid blood transfusions if possible. Screening cannot detect every blood-borne disease, and immune reactions can vary from minor to life-threatening. If a blood transfusion is recommended and circumstances permit, seek a second opinion from International SOS or your health advisor.

Medication Availability
Most medications are available in Japan. There are over-the-counter medications available at pharmacies however, a doctor's prescription is required for prescription medications, including for antibiotics. Most hospitals and clinics have an appointed pharmacy near or on their premises.

The Japanese Ministry of Health, Labour and Welfare imposes strict regulations on the medications a traveller is permitted to carry in to the country. Under certain conditions, you may have to apply for an import certificate called "Yakkan Shoumei" before you depart from your home country. For full details please read the notice and Q&A on the official website. No psychotropics or narcotics can be shipped to Japan.

Since brand names vary, know the generic (chemical) names of your medications. It is always advisable to bring an adequate supply of prescription and other medications from your home country. Check the expiration date on all medications.

Clinics & Hospitals

Medical Providers
No matter where you are, contact International SOS first if you are sick, injured or need medical advice.

Our medical staff will advise you, help you select the correct doctor, hospital or clinic, and make any necessary appointments on your behalf. If our terms allow, we will also make financial arrangements for you.

It is recommended that you contact International SOS before accessing medical care in Japan.

Hospitals / Clinics
If you are unable to contact International SOS, the following list of hospitals and clinics is provided in case of medical emergencies.

Tokyo-to
St. Luke's International Hospital
Category: Hospital
Address: 9-1 Akashicho
         Tokyo-to, Tokyo-to 104-8560
Telephone: 81 (0)3 5550 7166

Food & Water

Food and Water Precautions
Travellers have a small risk of developing diarrhoea in any country. It may be advisable to drink bottled water only, especially on short trips. Always wash your hands with soap before eating, or use an alcohol-based hand sanitizer. See the following country-specific recommendations:

Water and Beverages
Tap water is safe to drink.

Use caution in Okinawa during water shortages or typhoons. Use only bottled or boiled water during these times.

Food Risk
Food is safe in Japan. The practice of eating sashimi (raw fish) or sushi is popular, and, in general, the quality of the fish is extremely good. However, it is recommended that visitors eat at popular and recommended places to avoid the small risk of food poisoning.

**Nuclear Incident, Earthquake and Tsunami damage**

On March 11, 2011, a magnitude 9.0 earthquake and subsequent tsunami struck the northeast coast of the main Japanese island of Honshu. The Fukushima Daiichi Nuclear Power Plant was severely damaged and a state of nuclear emergency was declared. The government evacuated all residents within 20 km of the Daiichi plant ("restricted zone"), as well as several areas beyond 20 km to more than 30 km zone from the nuclear plant ("Deliberate Evacuation Area"). Authorities continue to monitor radiation levels in the environment, and food and drinking water. They have also restricted the harvest, distribution and sale of any foods that may be contaminated at a level potentially harmful to health. Some seafood has been contaminated at levels above the regulatory limits. Control measures are in place to prevent its distribution.

For further information:

- See the Prime Minister of Japan and His Cabinet Great East Japan Earthquake Health and Safety website (in English)
- See the World Health Organization FAQ: Japan Nuclear Concerns

**Health Threats**

**Health threats present include:**

- **Rabies | Threat from: Animals**
  Rabies is a viral disease contracted when bitten or scratched by an infected (rabid) animal, often a dog. Once it enters the body, the virus travels along nerves and causes paralysis. As it reaches important organs like the spinal cord and the brain, it causes coma and death.

  In countries where rabies is present in animals or bats, ALL animal / bat bites, scratches and licks to broken skin must be treated seriously. Rabies vaccination is very effective in preventing rabies, even after a bite/scratch by a rabid animal.

- **Rabies vaccination**
  Pre-exposure vaccination is often recommended for expatriates and long-term visitors to destinations where rabies is present. It's especially recommended if quality medical care may not be available after being bitten or scratched by an animal. Pre-exposure treatment can be especially useful for children, since they may not tell their parents that they have been bitten/scratched.

  Pre-exposure vaccination makes it easier to treat a bite or scratch. That’s important because some types of rabies treatment can be in short supply in many countries, even in cities.

- **If bitten, scratched or licked (on broken skin) by an animal:**
  - Immediately cleanse the wound with soap and water and a povidone-iodine solution if available.
  - Seek medical advice from a qualified source or your assistance company.
  - Notify local health authorities immediately. You may need post-exposure vaccination, even if you have had pre-exposure vaccination. (THIS CAN BE LIFE SAVING.)

**Japan**

Rabies-like virus may be present in bats. Cases of animal and human rabies have not been notified since 1957. Risk of exposure for average travellers is low.

**Hepatitis A | Threat from: Food and/or water**

Hepatitis A is a viral disease that causes liver inflammation. The virus is present in the faeces of an infected person. It spreads through contaminated food and water, and is common in areas with poor sanitation. Person-to-person spread also occurs, when the virus is inadvertently transferred into the mouth, including during sexual activity. People at higher risk of infection include men who have sex with men, illicit drug users and people with liver disease.

Symptoms begin on average 28 days after exposure (range 2 to 8 weeks), and include fever, chills, fatigue, abdominal pain, nausea, vomiting, dark urine and jaundice (yellow colour of the skin and eyes). Many infected people suffer only a mild illness. Most cases recover fully after four or more weeks. However for some, the disease can be severe, and occasionally is fatal. There is no specific treatment and cases are managed through supportive therapy.

Prevention is through vaccination, attention to hygiene, and access to safe food and water.

**Japanese encephalitis | Threat from: Bites and Slings**

Japanese encephalitis is serious viral illness, spread by mosquitoes. It occurs in most of Asia as well as some parts of the Western Pacific, mostly in rural agricultural areas. Although many people won’t have any symptoms, it can cause encephalitis (inflammation of the brain) with permanent brain damage, or be fatal. Prevention is through preventing mosquito bites. In addition, vaccination is recommended for travellers at higher risk.

**Japan**

Cases occur rarely, however there is a local vaccination programme in place, with a high uptake rate. People who live and work in rural areas, such as rice fields, are at higher risk. Peak transmission season runs from May to October on most islands. On Ryuku Islands (Okinawa) transmission occurs from April through December. No cases have been reported in northern Japan namely, in Tohoku and Hokkaido.

Vaccination is generally not recommended for travel confined to Tokyo and other major cities.
HIV, Hepatitis B and C, & STIs | Threat from: Sex/blood/needles

HIV/AIDS, hepatitis B, and hepatitis C are spread by contact with bodily fluids (especially blood and semen).

- unprotected sex,
- needle sharing during IV drug use, or
- unsafe blood or medical/dental instruments.

Genital herpes (HSV), genital warts (HPV), gonorrhoea, chlamydia, syphilis and most other sexually transmitted diseases are spread by genital contact.

Prevention:

- In many countries, hepatitis B is now a routine childhood immunisation and need not be repeated. All non-immune travellers should consider vaccination.
- Always use new condoms (preferably brought from your home country).
- IV drug users should not share needles.
- Avoid having tattoos or piercings done.
- In healthcare settings, make sure that needles and syringes sterile and not shared between patients.
- Call International SOS or your corporate medical department if you are hospitalised.
- Be aware of your risk when assisting anyone with an injury. Protect yourself from contact with bodily fluids.
- Seek medical attention within 24 hours if you accidentally come into contact with someone else’s bodily fluids.

Tickborne encephalitis | Threat from: Bites and Stings

The virus is mainly transmitted to humans by the bite of an infected tick. Ticks are usually found at the edge of forests and in clearings, long grass and hedges and are more common in the summer months. Often, the bite goes unnoticed. Infection can also be acquired by consuming unpasteurized dairy products from infected cows, goats or sheep.

About 14 days after the tick bite, the patient suffers fever, headache, muscle aches, nausea and fatigue. The symptoms usually resolve in a week or so, but up to one third of patients develop a second, more severe illness. Symptoms may include severe headaches, decreased mental state, convulsions, weakness and/or coma. These symptoms indicate that the virus is affecting the brain. About one percent of cases are fatal. Fortunately, only one out of 250 people who get infected with the virus actually becomes ill.

To prevent infection, it is important to prevent tick bites, especially as most travelers have not been vaccinated.

- Wear long pants with tight cuffs, and tuck pant legs into socks.
- Use insect repellent containing DEET.
- Consider soaking or spraying your clothes with the insecticide permethrin. (Do not apply permethrin directly to the skin.)
- After visiting a forest or pasture, search for ticks on your body and clothing. If a tick is found, remove it gently using tweezers.

A safe, effective vaccine is available in Canada, Europe and the UK. It is not available in the U.S. The vaccine is given routinely to populations living in infected areas of Europe and Russia. However, the CDC does not generally recommend its use for travelers. Travelers at high-risk of exposure should consult their travel health practitioners for an individual recommendation on vaccination.

Scrub typhus | Threat from: Bites and Stings

The bacterial disease scrub typhus is also known as tropical typhus or “chigger fever”. Humans become infected when bitten by disease-carrying mites. A lump develops at the bite site. It ulcerates and forms an eschar (like a cigarette burn). Glands near the bite swell. Sudden onset symptoms progress, including high fever, headaches and sore muscles. About a third of those infected develop a rash.

Complications, such as pneumonia and nervous system impairment, can occur. Treatment with timely appropriate antibiotics will cure the disease. Untreated, mortality can be as high as 30 percent. No vaccine is available. Prevent infection by avoiding mite habitats (such as rodent infested areas, recently cleared forests clearings and rice paddies) and by preventing mite bites.

Altitude | Threat from: Environment

Altitude illness is a potentially fatal condition that can affect people who normally live at a low altitude and travel to a higher altitudes. It can occur from elevations of 1,500 meters onwards, but is more common at elevations above 2,500 meters (8000 feet).

People most at risk are those who have experienced altitude illness before, people who have heart or lung problems and people under the age of 50. There are three different types of altitude illness: Acute Mountain Sickness (AMS), High Altitude Cerebral Edema (HACE) and High Altitude Pulmonary Edema (HAPE). AMS is the most common and mild form of altitude illness. HACE and HAPE are more severe. HACE is a medical emergency and if not treated and managed quickly, can result in coma and death. Management of altitude illnesses involves immediate descent and oxygen treatment. Most people who are affected, even those who develop HACE or HAPE, recover completely if moved to a lower elevation. There are medicines that can be administered by trained medical professionals.

Anyone travelling to high altitude, especially higher than 2,500 meters, should be aware of and recognize the symptoms of altitude illness. See your travel health professional before departure, for individual advice on preventive measures, especially if you have ever suffered altitude sickness in the past, or if you have an underlying medical condition.
Cutaneous Larva Migrans | Threat from: Environment

Cutaneous Larva Migrans (CLM) is a skin infection caused most commonly from hookworms. Animals such as dogs and cats host these parasites and shed the parasite eggs in their faeces. The eggs then hatch into larvae. Transmission occurs through direct skin contact with contaminated sand or soil. The larva penetrates the outermost layers of the skin. A pricking or itching sensation may be experienced when the larva penetrates the skin. Within a few hours a rash can develop at the entry point. As the larva moves, creeping tracks or snake-like reddish tracks will develop. Severe itching and mild swelling may also occur. CLM usually resolves itself without any treatment. Some anti-parasitic medications may be used to shorten the duration of infection.

There is no medication or cure to prevent the infection. Avoid walking barefoot at the beach and avoid direct skin contact with infected sand or soil. Use a clean towel or mat to sit or lie on the sand.

Earthquake | Threat from: Environment

Earthquakes can occur globally, but are particularly prone to happen around the Pacific Ring of Fire. They can strike without warning and be violent enough to destroy buildings.

Be prepared by having a plan, contact list and emergency supplies, such as food, water, medicines and first aid kit, clothing, cash and documents. Know the escape routes and identify hazards (i.e. tall bookshelves, loose items) and safe places (i.e. under a table or next to a sturdy inner wall). During an earthquake: drop, cover and hold on. Protect your eyes with your arms. If you are indoors take cover, stay away from windows and exit the building once the shaking has stopped. If you are outside, move away from buildings or structures which may fall down.

Following an earthquake, aftershocks are possible, which can be strong enough to further damage already weakened structures. There may also be risk of tsunamis, avalanches, fires and floods. Know the risks of injury from damaged infrastructure, choose safe food and water, prevent illness and protect against potential disease outbreaks.

See the [CDC Earthquakes page](https://www.cdc.gov/earthquake/).

Radiation | Threat from: Environment

Radiation exposure may lead to various effects on health. These effects will depend on the type, intensity and duration of exposure.

Shorten the time of your exposure to radiation and stay as far away from the radioactive source as reasonably possible. Where exposure to potentially harmful doses cannot be avoided, provide additional barriers between you and the source. Follow the instructions of the local governments on when and how to cover or evacuate. [Click here](https://www.cdc.gov/radiation/) to know more about radiation exposure including preventive measures.

Japan

There is a potential risk of radiation exposure in Fukushima Daiichi Nuclear Power plants and neighbouring exclusion zones. To know more on exclusion zones, [see here](https://www.cdc.gov/radiation/).

Volcano | Threat from: Environment

There are several types of volcanic eruptions and some pose a major threat to health. One such eruption is volcanic ash fall. Ash is made of fine particles of rock and minerals and is gritty and abrasive. It can carry for many kilometers through air. Approaching ash clouds resemble ordinary weather clouds, and are sometimes accompanied by lightning or thunder. They bring a sulfur smell into the air.

When the ash finally falls, it settles in a dust-like covering. The "dust", however, is hard and abrasive. It does not dissolve in water, and it conducts electricity. It becomes more conductive when wet. Heavy ash falls can cause roofs to collapse and can lead to high levels of respirable ash in the air people breathe.

Most commonly, people get a runny nose and sore throat, sometimes with dry cough. Because the ash is gritty, it can cause skin and eye irritation. People should minimize exposure to ash, those with chronic bronchitis, emphysema, asthma and other respiratory conditions should be especially vigilant since their symptoms can worsen.

Japan

About 75% of the eruptions recorded in Japan are small. The Japan Meteorological Agency (JMA) is the primary volcano monitoring institute in Japan.

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