

[Japan]

The Role of Physicians in Suicide Prevention in Japan

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In Japan the number of suicides increased from 24,391 in 1997 to 32,863 in 1998 and then decreased to 31,690 in 2010, with the annual number of suicides exceeding 30,000 for 13 years in a row. The suicide rate amongst men aged in their 40s to 60s have been particularly high in recent years, with people aged in their 50s comprising 18.8% of the total number of suicides in 2010, followed by people in their 60s (18.6%), and people in their 40s (16.3%). The suicide rate (number of suicides per 100,000 people) for women is 14.4 compared to 35.9 for men.

The Japanese Government regards the increase in the number of suicides extremely seriously. The Basic Act on Suicide Prevention in 2006 and the Outline of Policy of Suicide Prevention in 2007 was established due to the “urgent need for the establishment of comprehensive measures for preventing suicide based on the fact that suicide should not be viewed as a problem involving individuals only but as one that involves various underlying social factors.” Under these initiatives,

various efforts have been made to curb the suicide rate, but as yet none of these have provided a “magic bullet” for preventing suicide.

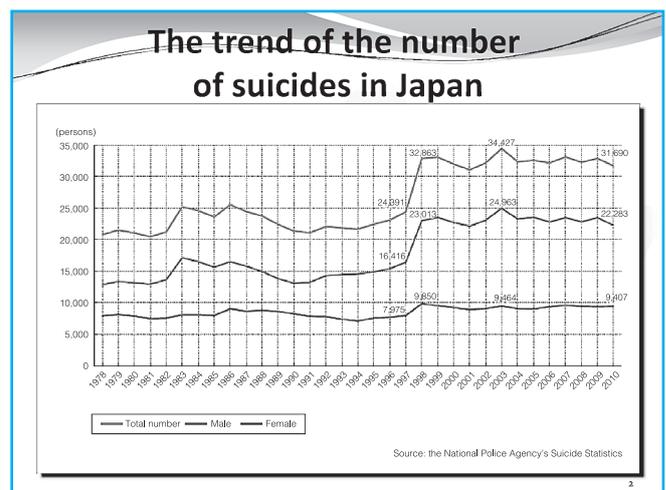
In Japan there is a tendency for patients to hesitate to seek treatment at psychiatric hospitals and clinics; when symptoms such as feelings of despondency and sleep disorders occur, many patients initially seek consultation at medical institutions other than psychiatric facilities, such as a clinic for internal diseases or general practitioner.

One of the roles that physicians can play in suicide prevention is for “primary care doctors” in various medical specialties to detect psychological symptoms such as depression in their patients as early as possible and refer them for treatment with a psychiatric specialist.

From this perspective I shall explain the specific efforts to prevent suicide that are being implemented throughout Japan as well as the activities of the JMA in this regard.

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Suicide involves various different factors and these are complexly intertwined.

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a strong tendency of patients with depression to initially seek treatment with their primary care physician



JMA Activities:

- “Workshop on Suicide Prevention in Community Health”(2007)
- “Workshop on Improving the Ability of Primary Care Physicians to Treat Depression”(2008)

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Local medical associations take mental health care measures proactively.

- Interview guidance by the physicians
- Establishment of health counseling offices
- Health guidance at business offices and factories
- Provision of industrial health related information

The “Fuji Model Project”

- Educational campaign
- Patient referral system

Cooperation between primary care physicians and psychiatric specialists is important.



Thank you.