

# Activities of the Japanese Association of Transportation Medicine

JMAJ 53(5): 321–322, 2010

Akira FURUSE\*1

## Overview of JATM

The Japanese Association of Transportation Medicine (JATM)\*2 became a member of the Japanese Association of Medical Sciences (JAMS) in 1950, and has been active since that time as the 38th specialty medical society of the association.\*3 JATM was first established as the Japanese Association of Railway Physicians in 1913. The primary purpose of setting up the association was to study disaster medicine, in response to the fact that the number of persons injured on the Japanese Government Railways reached 19,000 in 1912. The secondary purpose was to conduct research on railway hygiene, and particularly studies aimed at controlling tuberculosis, a disease prevalent at that time. With this history, the current JATM is also working to nurture research on disasters and preventive medicine and medical hygiene related to traffic and traffic projects, and to facilitate the progress and expansion of learning in this field.

The current members of the association include clinicians, industrial physicians, health-care practitioners, public health nurses, clinical nurses, pharmacists, radiology technicians, clinical laboratory technicians, dieticians, and clinical engineers mainly in railway hospitals nationwide, forming a multi-occupational society. The activities of the association include the periodic publication of the journal “*Kotsu Igaku*” (*The Journal of Transportation Medicine*), holding a general assembly once every year, and organizing regional conferences in various districts as well as section meetings on health management, circulatory organs, and respiratory organs.

## Expanding Research Areas

Representative themes of the past meetings of the JATM can be listed as follows, based on the proceedings of the most recent academic congresses:

- 2003: Smoking prohibition and separate smoking areas; emergency medicine and disaster medicine
- 2004: Sleep apnea syndrome; diseases that interfere with work attendance and measures against them; risk management in medical practice
- 2005: Safety and health management in the workplace; the age of team medicine and critical pathways
- 2006: Public transportation safety and driver's competence; travel and food culture; involvement of the vestibular system in the onset of motion sickness
- 2007: The development of a corporate culture that gives overriding priority to safety; the influence of antihistamines on the performance of motorized vehicle operators; metabolic syndrome and health management
- 2008: Working schedules and sleep disorders; the global spread of emerging infectious diseases and measures to control them
- 2009: Companies and new-type influenza (H1N1); the science of fatigue; clinical research based on collaboration of hospitals and clinics
- 2010: Actual conditions and problems in a health screening/health guidance program; progressing global warming and measures against it; potentials of medical services on station premises; current status and future

\*1 President, Japanese Association of Transportation Medicine, Tokyo, Japan (furuse@jreast.co.jp, jatm@iva.jp).

\*2 <http://jatm.umin.jp/>

\*3 The number of JAMS subcommittees is 108 as of August 2010.

prospects of the use of clinical pathways

Reviewing the above themes, it is apparent that the subjects of research have been expanding over time from the conventional ones related to railway workers and visitors to railway hospitals, to those related to passengers and local residents in general. The means of transportation have also become more diverse, ranging from railways to airplanes, ships, and automobiles. Transportation facilities cover overseas travel as well as domestic travel, and future space travel is coming into view.

Along with this progression, transportation medicine has come to extend its territory gradually. However, it continues to be true that securing safety is the most important concern of the public transportation system, and it remains unchanged that research on health management of persons working in the transportation system is the first priority. The attention to the topics of smoking cessation, sleep apnea syndrome, and metabolic syndrome discussed at the annual general congress of our association can be regarded as responses to these issues.

### **Future Priority Issues**

---

On the other hand, related to the wider topic

of health management of the users of transportation facilities, issues related to infections, including H1N1 influenza, within transportation facilities have received closer attention, in addition to the conventional issue of smoking prohibition. In the case of overseas travel, further investigations are warranted for responses to emerging infectious diseases.

Considering these issues, there is no doubt that the purpose of our association—studies of disaster and preventive medicine and medical hygiene related to transportation systems and projects—is important currently and will continue to be so in the future as well. Various academic associations are shifting their attention to cultivating specialists in clinical practice as specialization in the medical field is advancing. Under these circumstances, our association seems to have a valuable role in continually addressing social medical issues beyond specialties.

The issues addressed by our association are internationally common problems, and we are looking forward to collaboration with similar associations around the world. As no such cooperative relationships have been established so far, the author welcomes comments and messages from those in other countries who are interested in this theme.