Updates on COVID-19 in Japan



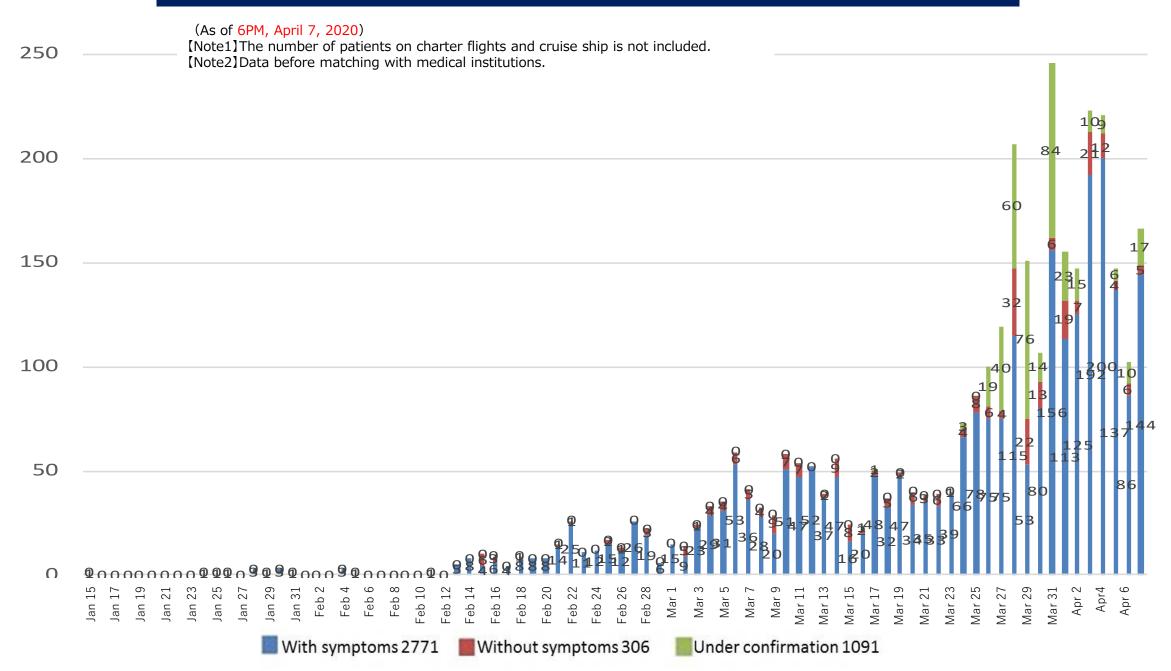
April 8th, 2020 Ministry of Health, Labour and Welfare

Hospitalization and Discharge

	As	s of 18:00, Apr	
Currently in hospital	Already discharged from hospital	Death	
3, 204 (+215)	622 (+30)	80(+7)	
From severe to moderate/	mild symptoms 3 8	80(+7)	
Cases at the Cruise hightested positive			
Currently in hospital	Already discharged from hospital	Death	
4 1 (-1)	620 (+1)	1 1	
From severe to moderate/mild symptoms 2 9			
[Total]			
Currently in hospital	Already discharged from hospital	Death	
3, 245 (+214)	1, 242 (+31)	91 (+7)	
From severe to moderate/mild symptoms 6 9		91 (+7)	
	3, 2 0 4 (+215) From severe to moderate/ Currently in hospital 4 1 (-1) From severe to moderate/ Currently in hospital 3, 2 4 5 (+214)	Currently in hospitalAlready discharged from hospital3, 204 (+215)622 (+30)From severe to moderate/mild symptoms 38Currently in hospitalAlready discharged from hospital41 (-1)620 (+1)From severe to moderate/mild symptoms 29Currently in hospitalAlready discharged from hospital3, 245 (+214)1, 242 (+31)	

The number in parentheses indicates the change from the previous day.

Confirmed Cases in each Day

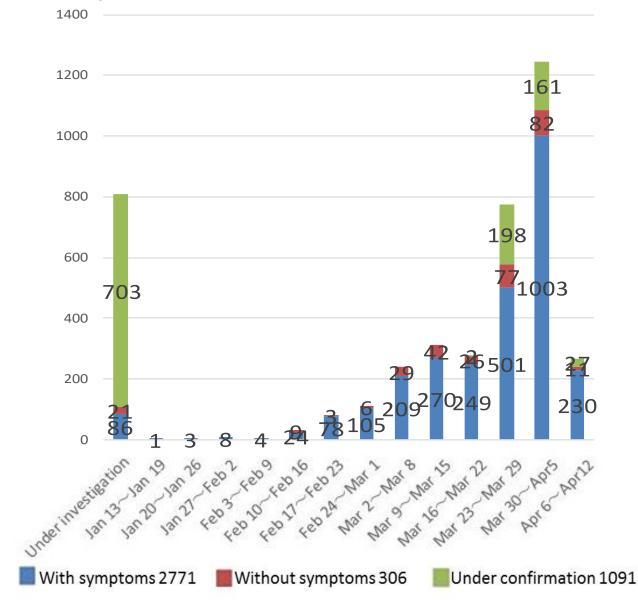


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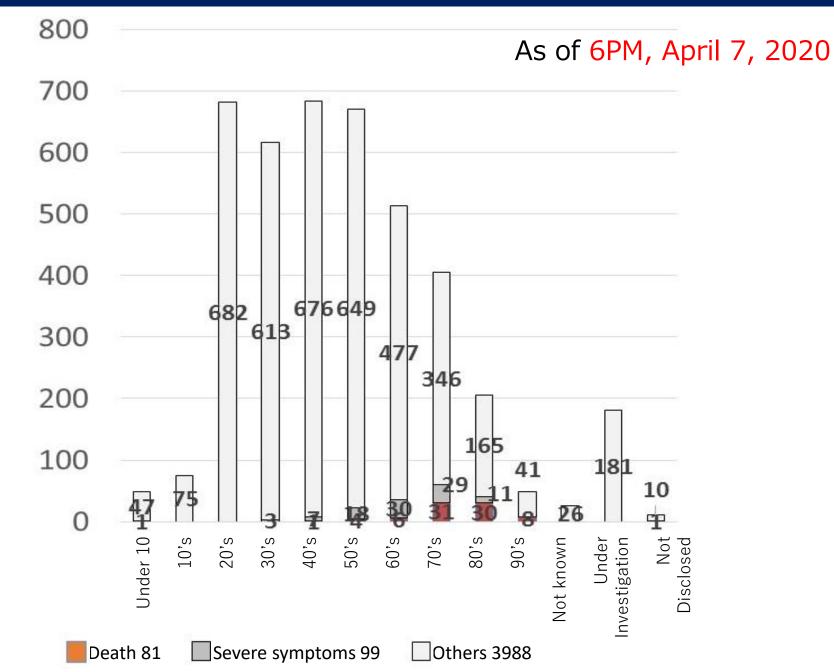
Confirmed Cases in each week

(As of 6PM, April 7, 2020)

[Note1] The number of patients on charter flights and cruise ship is not included. [Note2] Data before matching with medical institutions.

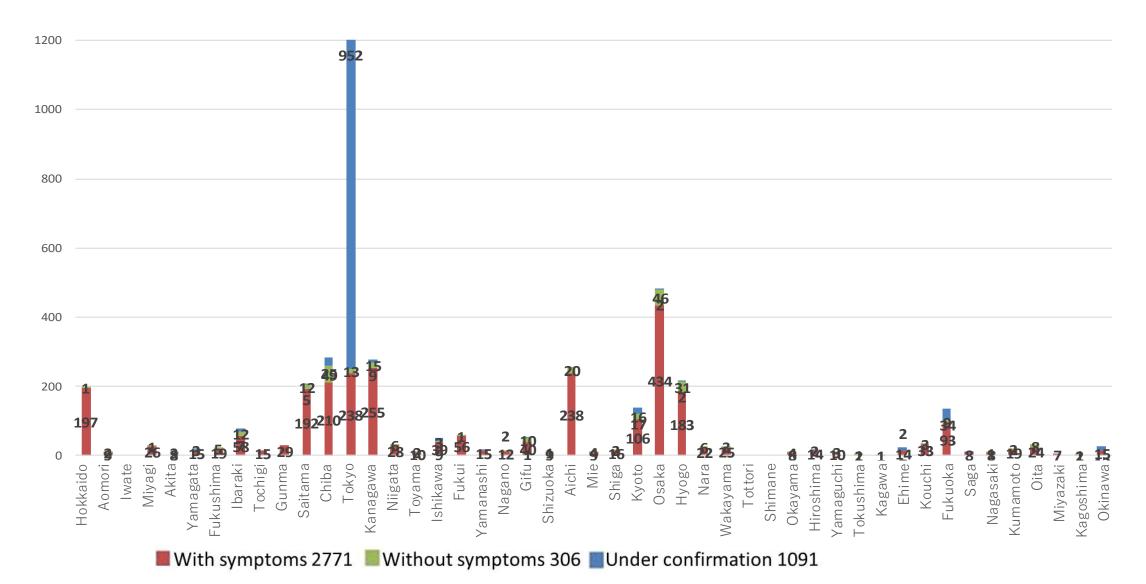


Cases by age



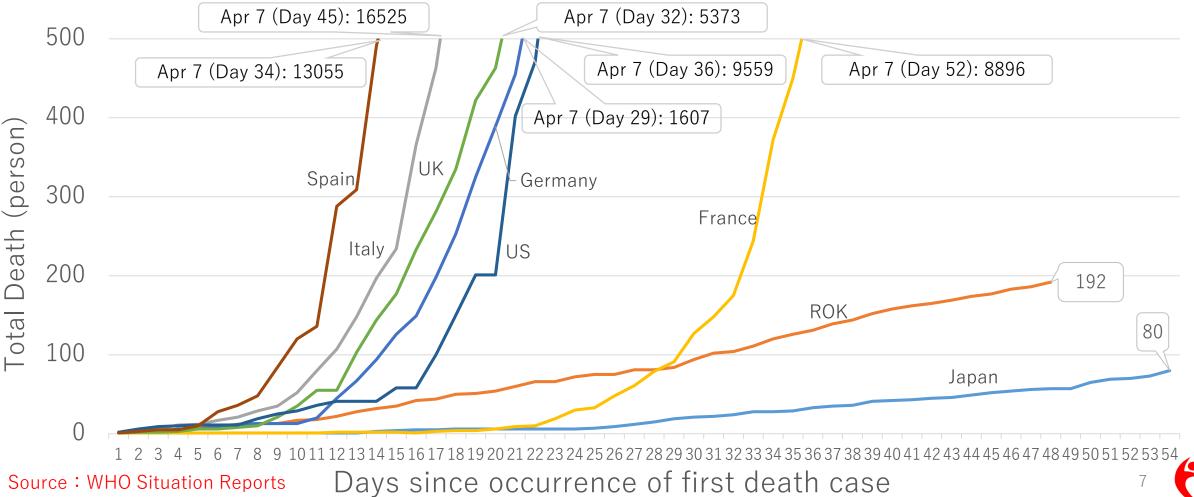
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The trend of death cases in several countries, as of 7th April

- Slow increase of death cases
- Burden on local health system is not overwhelming so far



Three Pillars of Basic Strategy to combat COVID-19 in Japan

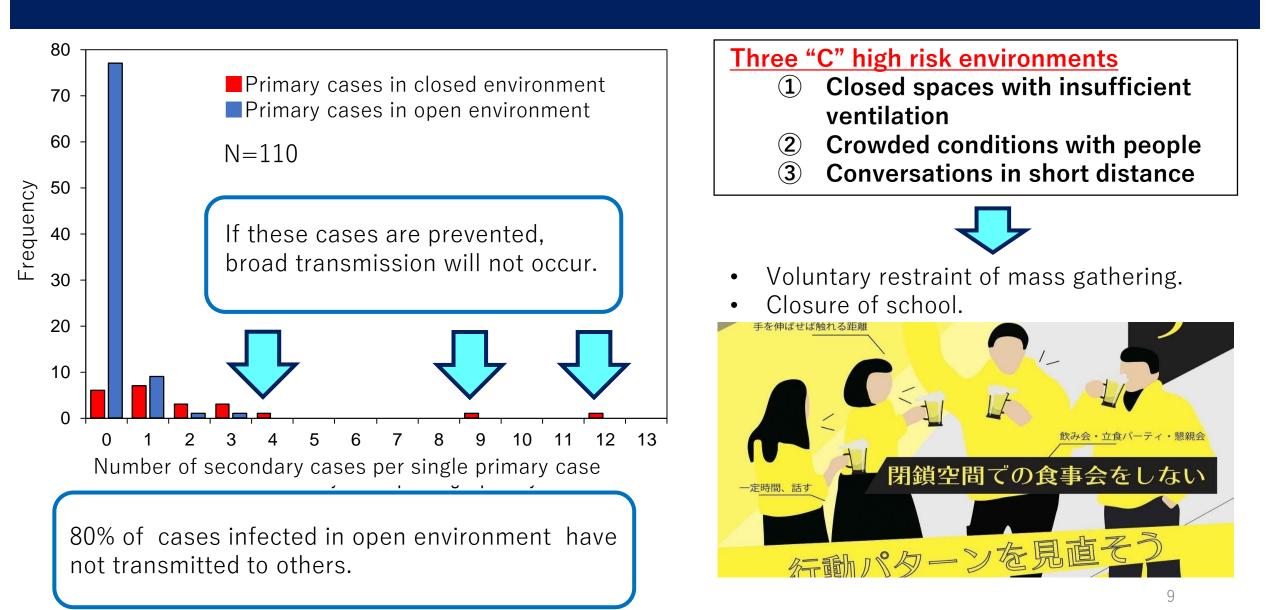
<Overall Goal>

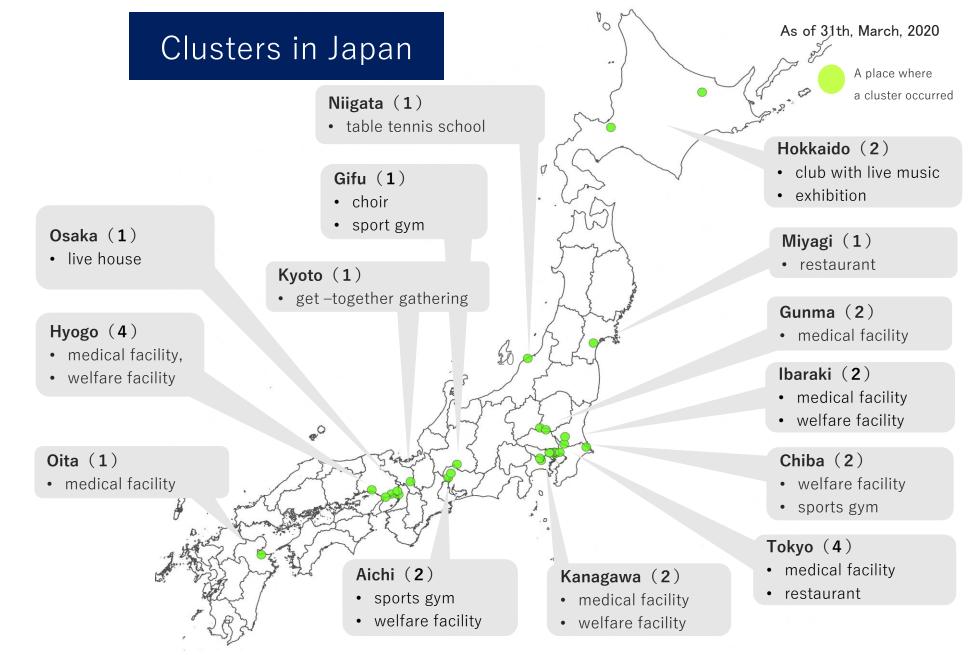
Maximization of suppression of transmission and Minimization of socio-economic damage

- 1. Early detection of and early response to clusters
- 2. Enhancement of intensive care and securing of medical service system for the severely ill patients, including medical equipments (Ventilator, ECMO, etc)

3. Behavior modification of citizens

Avoidance of high risk environment





Note 1:Number indicates the number of clusters.

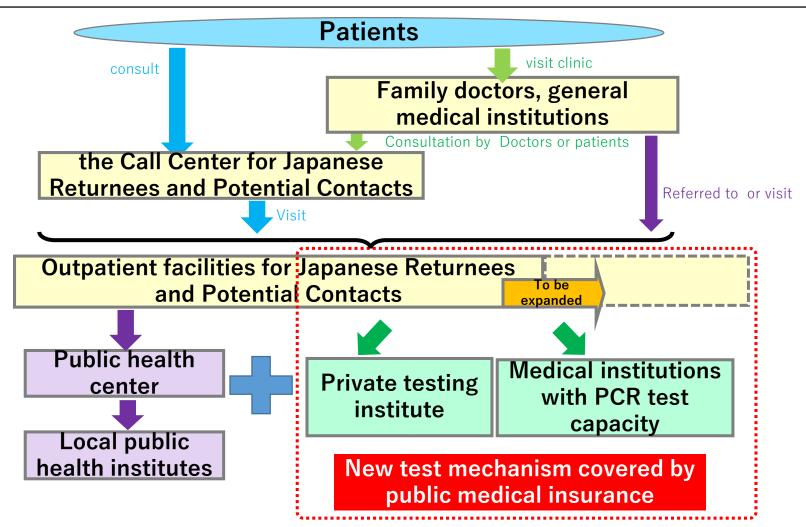
Note 2: Clusters were classified by Prof. Oshitani, Tohoku Univ. and Prof. Nishiura, Hokkaido Univ., et al ,based on information from local governments. Note 3: As a guide, clusters are defined as a place where more than 5 histories of contact by infected patients were found. Secondary infections (e.g. infection to the families) and infection between family members are not reflected in this map. This map may not reflect the latest situation of the infection, or number of cases in each prefecture.

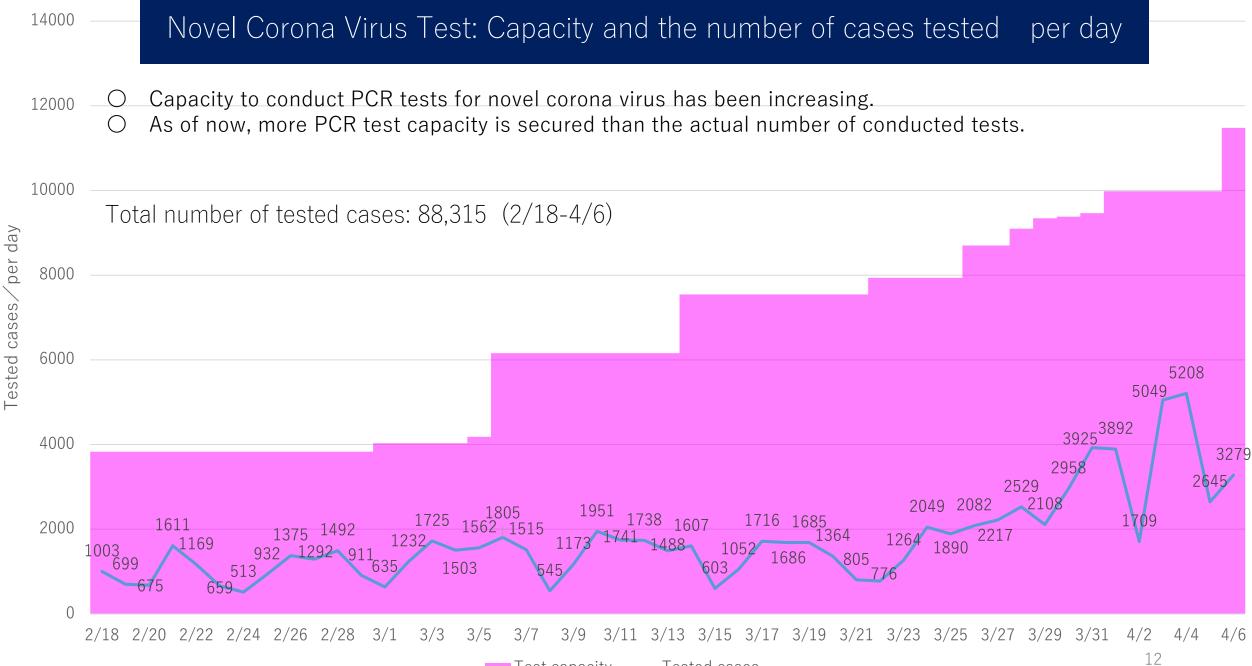
PCR Testing system for novel corona virus covered by medical insurance

Olf a public health center decides that a patient is out of the scope of administrative testing, doctors can request the test directly to testing institutes with their own decision.

OFor the purpose of preventing in-hospital infection and ensuring the accuracy of the testing, the test is required to be conducted at outpatient facilities for Japanese Returnees and Potential Contacts.

OMoreover, efforts will be made to expand the number of tests to be conducted with insurance coverage, taking into account future improvement in the preparedness of the private sectors.





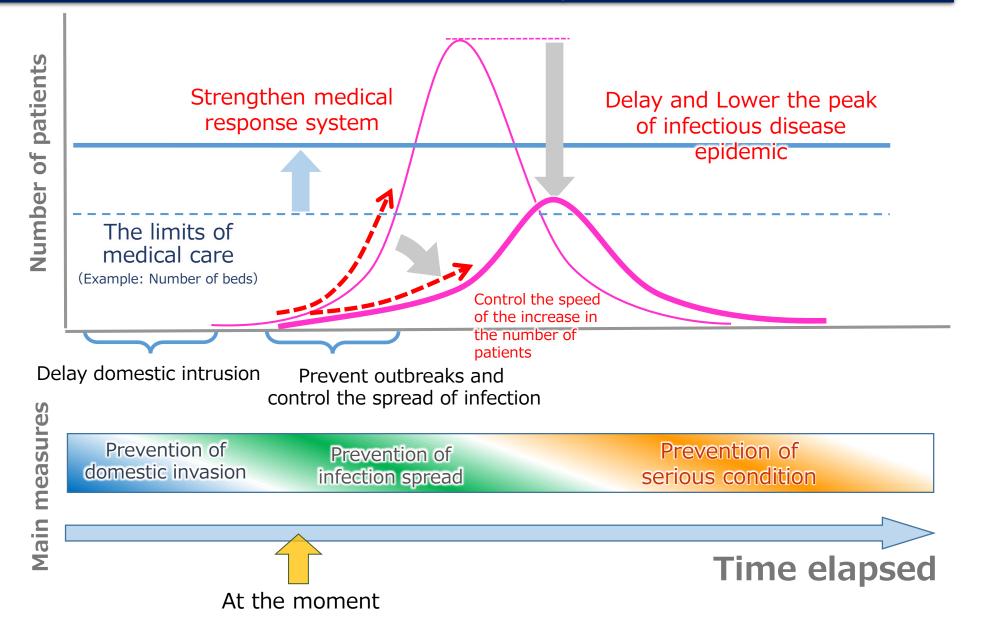
Test capacity — Tested cases

Way Forward

- We have great concerns about following situation;
 - (1) increased new cases in urban areas,
 - (2) increased cases with unidentified source.
 - (3) Rapidly increased confirmed cases and death worldwide.
 - (4) Many imported cases to Japan.
- Needs to control infection while minimizing socio-economic damage.
- Needs to prevent overwhelming hospitals
- Strengthen the capacity of local government to control the outbreak, considering local situations based on data.

Delay and lower the peak of infection.

Purpose of new coronavirus measures (basic concept)



Revision of Basic Policies for Novel Coronavirus Disease Control (Summary)

- On April 7, 2020, a state of emergency was declared in view of the risk that nationwide and rapid spread of the Novel Coronavirus could have an enormous impact on people's lives and the national economy.
- Scope: 7 prefectures (Saitama, Chiba, Tokyo, Kanagawa, Osaka, Hyogo and Fukuoka), for a period of one month (from 7 April to 6 May)
- It is expected to be possible to contain the infection by thoroughly reducing contact between people including self-restraint of non-essential going out.
- Even under the state of emergency, the impact on social and economic functions should be minimized, and measures such as "lockdown" (city blockade) will not be taken.

1 Facts on current situation of the novel coronavirus infectious disease

- Cases with unknown routes of transmission and cases entering from overseas have increased, which causes the risk of infection in daily life. Domestic medical system is strained.
- In addition to "3Cs", crowded places and close-distance conversations can be risk factors. Major sources of infection could include clusters in live houses, fitness gyms, medical institutions, eateries with hospitality services in downtown areas, etc.

2 Overall Policies for Novel Coronavirus Disease Control

- Work to contain clusters and reduce contact between people in each area in order to slow the spread of infection.
- Take every possible measure to minimize severe cases and death through surveillance and Information gathering, and provision of appropriate medical care.
- Minimize the impact on social and economic functions

3 Key points in implementing measures against novel coronavirus disease

- (1) Provision and sharing of Information: ensuring thorough communication based on the local situation including through SNS.
- (2) <u>Surveillance</u> and Information gathering: grasping the total number of infected cases, strengthening inspection system, etc.
- (3) Pandemic Prevention: reducing contact including through legally-based request on self-restraint of going out
- (4) Medical Care: securing a flexible medical provision system in each region, etc.
- (5) Economy and employment: responding flexibly to changes of situation, preventing thoroughly infection at medical institutions
- (6) Others: consideration for human rights, provision of goods and materials, cooperation among relevant agencies,
- maintenance of social functions, monitoring the situation after the emergency declaration

Basic Policies for Novel Coronavirus Disease Control (Revised on April 7, 2020)

*with the declaration of a state of emergency on April 7, the Basic Policies decided on March 28 have been revised. Key points of the newly added elements are as follows:

On April 7, 2020, the Head of the Novel Coronavirus Response Headquarters declared a state of emergency under Article 32, paragraph 1 of the Act on Special Measures for Pandemic Influenza and New Infectious Diseases Preparedness and Response. The period during which emergency measures should be taken under the declaration is 29 days from April 7 to May 6, 2020. Areas where emergency measures should be taken are Saitama, Chiba, Tokyo, Kanagawa, Osaka, Hyogo and Fukuoka Prefectures. If the emergency measures are deemed no longer necessary, the state of emergency will be released immediately even within the period.

Even under the state of emergency, the Government of Japan will work to minimize the impact on social and economic functions, and will not take compulsory measures such as "lockdown" (city blockade) that is being implemented in other countries.

1. Facts on current situation of the Novel Coronavirus infectious disease

In Japan, a total of 3,817 infected cases and 80 deaths in 44 prefectures have been confirmed by April 6, since January 15, 2020 when the first case was confirmed. In particular, recently 40.6% of infected people are those with unknown routes of transmission (situation up to April 1, known as of April 4). This means that in addition to the infection in specific places where clusters were identified, the risk of infection in daily life, which was previously limited, has started to increase. Medical provision system is strained in some areas and strengthening of the system is an urgent issue.

In particular, from March 16 to April 1, the number of reported cases jumped from 817 to 2,299, with a doubling time (the time required for the number of infections to double) of 4.0 days.

From mid to late March of this year, there was an increase in the number of individuals who appear to have been infected overseas and then entered Japan. The counties where they appeared to have infected have also become widespread.

Concerning the domestic medical provision system, Tokyo and Osaka prefectures, where the number of infected people is rapidly increasing, have announced that patients with mild symptoms who do not need hospitalization will be switched to treatment at accommodation facilities as there is a possibility that the provision of inpatient medical care for severely ill patients may be affected.

In addition, Kanagawa Prefecture, which is adjacent to Tokyo and has more than 200 infected people, is also planning to switch inpatient medical care. A strained medical provision system is starting to appear as a reality, especially in metropolitan areas.

As of April 6, the cumulative number of infected people was 1,123 in Tokyo and 429 in Osaka, and the doubling time in the past week was 5.0 days in Tokyo and 6.6 days in Osaka. Moreover, there is a risk of a further surge in the number of infected people. In addition, the cumulative number of infected people in neighboring prefectures, namely Saitama, Chiba, Kanagawa, Hyogo, and Kyoto, exceeds 100 respectively, with almost half of those infected have unknown routes of transmission in all prefectures except Kyoto. Furthermore, the spread of infection is rapid in Fukuoka prefecture, where the cumulative number of cases reported is over 100 with the doubling time of about 3 days, and the proportion of cases with unknown routes of infection accounts for 70%. Therefore, it is necessary to place particular emphasis on Tokyo, Osaka, Saitama, Chiba, Kanagawa, Hyogo, and Fukuoka prefectures in taking measures to prevent the spread of infection.

2. Overall Policies for Novel Coronavirus Disease Control (The policies decided on March 28 stand)

3. Key points in implementing measures against novel coronavirus disease(1) Provision and sharing of Information

Inform the public that the government will not take measures such as "lockdown" (city blockade), and call for a calm response from the people (selfrestraint of travel across prefectures, such as nonessential visits to hometowns and travel, avoiding flooding of shops and panic buying).

(2) Surveillance and Information gathering

(The policies decided on March 28 stand.)

(3) Pandemic Prevention

The declaration of a state of emergency on April 7 is intended to further accelerate existing measures.

On the other hand, restrictions on people's freedoms and rights must be minimal. Designated prefectures (prefectures covered by the emergency declaration) will, at first, request residents to cooperate voluntarily in selfrestraint of leaving home as measures to prevent pandemic. Requests and instructions on restrictions on the use of facilities should be made after assessing the effects of such requests for voluntary cooperation in refraining from leaving home.

- Designated prefectures will take effective emergency measures taking into account the characteristics of each area and provide careful explanation to the residents. The Government Response Headquarters will coordinate with designated prefectures as necessary, listening to the opinions of experts.
- Designated prefectures will work with the government in informing the residents that the emergency measures are different from "lockdown" (city blockade). Designated prefectures will also ask people to refrain from travel across prefectures, and call for a calm response in order to prevent confusion including panic buying of food, medicine and daily necessities.
- Designated prefectures will at first request a self-restraint of going out while indicating the period and area as necessary. Examples of outing that are not covered by such request would include activities necessary for maintaining daily life such as visiting hospitals, purchasing food, medicine and daily necessities, going to work as necessary, exercising outdoors or taking a walk. Appropriate period for requesting self-restraint is about 30 days, taking into account the average period from the date of infection to the date of onset (average incubation period). However, decisions will be made flexibly to shorten or extend the period as appropriate.
- While going to work is excluded from the requests for self-restraint, designated prefectures should strongly promote teleworking. Even in case

of going to work, efforts to reduce contact with people, such as staggered work hours and bicycle commuting will be promoted even more strongly than ever. In the workplace, taking thorough measures to prevent infection will be encouraged. People will be encouraged to refrain from visiting eateries with hospitality services in downtown areas, regardless of age, etc. Going out of one's living area is also covered by the request for selfrestraint.

- Businesses that perform operations essential for ensuring the stability of people's lives and the national economy (exemplified in the attachment), are required to continue their operation, depending on the characteristics of the business, while fully taking measures to prevent the spread of infection. The Government and designated prefectures will work to establish a help desk for business operators, secure logistics systems, and ensure a robust lifeline system, etc., in order to support smooth activities of these businesses.
- Designated prefectures will make request to restrict the holding of events that may lead to the spread of infection. When a request is not met with no justifiable reason, instructions will be issued and these requests and instructions will be made public. - The Government and local governments will encourage restaurants to take necessary infection control measures to prevent places where the "3Cs" (closed spaces, crowded places, and closecontact settings) overlap. They will also ensure that request for selfrestraint in going out to entertainment facilities such as cabarets and nightclubs is widely known, based on the current circumstance where clusters emerge in such place.

Prefectures in metropolitan areas will take sufficient measures described above to prevent the spread so that they will not trigger nationwide and rapid spread, in view of the high population density and their being important transportation hubs.

Ministry of Education, Culture, Sports, Science and Technology will disseminate the guiding principle on temporary closure of schools. Prefectural governments will provide guidance to school operators on infectious disease countermeasures such as health management. The Ministry of Health, Labor and Welfare will provide guiding principles of nursery schools and afterschool children's clubs, etc. regarding the down-sizing of childcare and temporary closure of facilities. In this regard, the Ministry will also present guidance on securing childcare during such temporary closure for children of medical staff, those who need to continue working to maintain social functions, and those who have difficulty taking off work including single-parents.

(4) Medical care, etc.

The Ministry of Health, Labour and Welfare will notify and ensure the following measures, from the viewpoint of thoroughly preventing nosocomial infection in medical institutions and facilities for the elderly, under cooperation with local governments.

- Take every possible precaution to prevent workers from being a source of infection by thoroughly avoiding the place where "3Cs" overlap at the same time, by making sure for workers to wear masks, wash and disinfect hands, disinfect regularly shared facilities, maintain a certain distance each other when eating and drinking, keep their daily health tracks and stay home if their physical condition is not perfect.
- Temporarily cease reception of visits except for emergency in order to prevent infection from visiting persons.
- Consider measures such as suspending or restricting temporary use of facilities such as day-care, limiting outings and overnight stays of inpatients and users, in areas where infection is prevalent.
- Isolate a suspected case immediately and implement infection countermeasures under the guidance of public health centers, in case of suspecting a new case of COVID-19 infection from hospitalized patients or users,

The Government and prefectures will prioritize securing personal protective equipment such as masks for medical institutions that conduct PCR tests and admit patients for hospitalizations, and will take the initiative to ensure PCR tests conducted for medical personnel, workers and inpatients.

(5) Economic and employment measures (The policies decided on March 28 stand)

(6) Other important considerations

Consideration for human rights including prevention of reputational damage of medical personnel, etc.

Request, based on the Act, of emergency transportation and procurement of goods and materials necessary to secure the operation of the medical system, etc., .

Maintaining social functions;

- Measures to prevent infection of personnel of government organizations and other public institutions and to ensure continuance of their duties
- Continued operation of businesses essential to ensuring the stability of people's lives and the national economy

Attachment

Business operators who are required to continue their business during the period of the state of emergency

1. Maintaining Medical System

• We request the continuation of all business by medical personnel not only for treatment of COVID-19 infections, but also for their duties to deal with other severe diseases.

• The abovementioned businesses by medical personnel include hospitals, pharmacies, and other manufacturing and service industries related to all the supplies and services necessary for treatment of patients including importing, manufacturing and sales of pharmaceuticals and medical equipment, blood collection for blood donations, and providing meals to inpatients.

2. Continuing to protect those in need

• We request the continuation of all life support businesses for people who need assistance, especially the elderly and the people with disabilities, including housing and support for them.

• The abovementioned life support businesses include all manufacturing and service industries related to the goods and services necessary for the lives of the elderly and the people with disability, such as management of facilities for nursing care and for people with disability, as well as providing meals to residents of the facilities.

3. Securing stable lives of the people

• We request the continuation of all concerned businesses which provide essential services for those who stay at home to lead minimum necessary lives. (1) Infrastructure operation (electricity, gas, oil, petrochemical, LP gas, water and sewage, telecommunications and data centers, etc.)

(2) Food and beverage supply (agriculture, forestry, fishery, importing, manufacturing, processing, distribution, and online shopping of food and beverage, etc.)

(3) Supply of daily necessities (importing, manufacturing, processing, distribution and online shopping of household goods, etc.)

(4) Canteens, restaurants, coffee shops, home delivery and take-out, retailers of daily necessities (department stores, supermarkets, convenience stores, drugstores, hardware stores etc.)

(5) Maintenance of household goods (plumber, electrician, etc.)

(6) Services related to daily necessities (hotel and accommodation, public bath, barber shop and hairdressers' salons, laundry, veterinary, etc.)

(7) Waste disposal services (collection, transportation, and disposal of waste, etc.)

(8) Ceremonial affairs (operators engaged in cremation and post-mortem treatment of bodies)

(9) Media (TV, radio, newspapers, internet related business, etc.)

(10) Services for individuals (webcast, remote education, facilities and services related to maintenance of the internet environment, maintenance services of private vehicles, etc.)

4. Maintaining the stability of the society

• With a view to maintaining the stability of the society, we request the continuation of the businesses, at their minimum level, who provide essential services to maintain corporate activities during the period of a state of emergency.

(1) Financial services (banks, credit banks and credit unions, securities, insurance, credit cards, and other settlement services etc.)

(2) Logistics and transportation services (railways, buses, taxis, trucks, maritime transportation and port management, aviation and airport management, postal services, etc.)

(3) Maintenance of manufacturing and service industries necessary for national defense (aircraft, submarines, etc.)

(4) Services necessary to maintain corporate activities and security (maintenance and security of building, etc.)

(5) Social infrastructure necessary for safety and security (management of public goods such as of rivers and roads, public works, waste disposal, hazardous goods management based on respective law, etc.)

(6) Administrative services (police, fire fighting, other administrative services)

(7) Childcare services (daycare centers, etc.)

5. Others

• Among medical and manufacturing industries, we request the continuation of the following business operators in consideration of infection prevention: operators who are difficult to stop production line due to the characteristics of the equipment (such as blast furnaces and semiconductor factories); and operators who produce essentials (including important items in supply chains) for protection of the people who need medical care and support, as well as for maintenance of social infrastructure. We also request the continuation of the business operators who sustain medical care, the lives of the people, and maintenance of the national economy.

Basic Policies for Novel Coronavirus Disease Control by the Government of Japan (summary)

March 28, 2020

The Minister of Health, Labor and Welfare reported to the Prime Minister that there is a high risk of coronavirus spreading widely, and therefore the Government established the Task Force based on the Act on Special Measures against Pandemic Influenza.

In order to protect the lives of the people, it is important to reduce the number of infected people, particularly the elderly, and to maintain medical systems and social functions.

Although there are currently no areas where large scale spread of the virus has been identified, containment of patients with unknown routes of transmission or clusters is important to prevent an explosion of cases and minimize the number of infected patients, severe cases, and death as much as possible.

This Basic Policies present measures to be taken so that the government, local governments, and the people will work together to have an accurate grasp of the situation and further advance countermeasures against the novel coronavirus infectious disease.

1. Facts on current situation of the novel coronavirus infectious disease

In Japan, increase in the number of patients with no apparent routes of transmission are reported sporadically in several regions. While the domestic situation is continuing to hold, it could move toward a pandemic with an explosive spread of infections.

Looking at overseas, the novel coronavirus infection has been identified in all the continent, except for the Antarctica, with some areas with an explosive spread of infections. There are some patients who are presumed to come back to Japan after infected overseas.

2. Overall Policies

- Slow down the speed of infection by containing clusters and reducing chances of contact.

- Minimize incidence of severe cases and death through surveillance and appropriate medical care especially for the elderly.

- Minimize the impact on society and economy through pandemic prevention and economic and employment measures.

3. Key Points

(1)Provision and sharing of Information

a) Provide accurate information and clear message for the public, promote awareness-raising to help change people's behavior, and encourage calm response.

- Provide accurate and clear information

- Ensure implementation of basic countermeasures against infection

- Ensure that people do not go to workplace, attend school or leave home if they are sick

- Dissemination of guidelines for visits to medical institutions (call for prior telephone consultation)

- Prevent discrimination against infected persons, close contacts and medical personnel

b) Provide appropriate information to Japanese nationals who live in countries where infection is spreading, and those who have returned to Japan, as well as to foreign nationals living or staying in Japan.

(2) Surveillance and Information gathering

-Identify suspected disease carrier based on the notification from the doctor, and conduct tests that the doctor considers necessary

-Strengthen the testing system by utilizing local and private institutes. Grasp and coordinate the PCR testing system.

-Continue to develop simple test kits for rapid diagnosis.

(3) Pandemic Prevention

- Present appropriate measures to prevent clusters and reduce contacts, based on the local situations.

- Request that necessary measures be taken, such as closing off facilities and refraining from holding events, if there is a possibility that a cluster may be occurring,

- Call for cooperation in self-restraint in avoiding gatherings in closed spaces,

crowded places, or close-contact settings. Pay particular attention to metropolitan areas.

-Secure and foster experts in measures against cluster and strengthen the health center system.

- Ensure thorough infection control measures in places including the followings

--Medical institutions

--Elderly facilities

--School

--Public transport

-- Workplace (actively promote tele-work and staggered commuting)

- Continue to implement entry restrictions, travel warnings, strengthened quarantine, and visa restrictions, from the viewpoint of preventing the flow of infected people into Japan

(4) Medicare

- Secure a flexible medical provision system in each region, depending on the spread of infection.

- Perform tests at the discretion of the doctor and, if a patient is found, provide recommendations and necessary measures for admission to hospitals to provide appropriate medical care.

- Establish a system for those with mild symptoms to be cared at home, in areas where there is a risk that an increase in patients of the Coronavirus may interfere with the provision of hospitalized medical care for other severely ill patients.

- To prepare for possible significant increase of patients in Japan, secure medical provision structure including through considering division of roles among medical institutions in each region. Secure necessary beds, personnel, and necessary medical equipment such as respirators.

- Strengthen the system for providing medical interpreters and accelerate clinical research and treatment to verify the effects of therapeutic agents

(5) Economic and employment measures

Expeditiously implement necessary and sufficient economic and fiscal policies without pause, taking bold measures to return the Japanese economy to a solid growth trajectory

(6) Other important notes

- Consideration of human rights

- Supply of goods and materials (increase production and ensure smooth supply of masks, disinfectants, foodstuffs, etc.; distribute such items by the government to medical institutions and nursing care facilities for the elderly; prohibit resale of masks, etc.)

- The government will work closely with the international community to collect information on the response by WHO and other countries and regions. In addition, we will actively share the knowledge obtained in Japan with related organizations such as WHO and other countries and regions, and contribute to the measures of the international community as a whole in relation to countries and regions including emerging and developing countries.

- Maintaining social functions

- Decisions on the declaration of emergency will be made based on a comprehensive assessment, taking into account the opinions of the Advisory Committee.

Emergency Economic Measures for Response to COVID-19

to protect the lives and lifestyles of the public and move toward economic recovery

108 trillion yen (app. 1 trillion USD) (20% of Japan's GDP)

<u>1. Measures to prevent the spread of infections and to build medical treatment structures</u>

- Counter-cluster measures: doubling the PCR capacity to 20K/day, reinforcing public health centers
- Medical care for patients with severe symptoms: increase beds from 28K to 50K, securing 15K ventilators
- Facilities for patients with mild symptoms to stay: securing hotels and other public facilities
- Research and development of therapeutic medication and vaccines
- Avigan (medicine expected to be effective): increasing its production, preparing the stockpile up to 2M doses.

2. Measures in support of business

- Real interest-free unsecured loans.
- Improved loan conditions: allowing recurring debts to be refinanced as interest free loans.
- Deferment of the payments of national taxes and social security premiums without collateral and penalties (amounting to ¥26 trillion)

3. Cash payments (over ¥6 trillion)

- Cash payment of ¥300,000 each to households in need
- Cash payments of ¥2 million each to micro-, small-, and medium-sized business and ¥1 million each to individual business owners

4. Demand stimulation measures, looking ahead to the phase after the containment of outbreaks

- Support in the form of discounts and vouchers: tourism, transport, food services, and event businesses