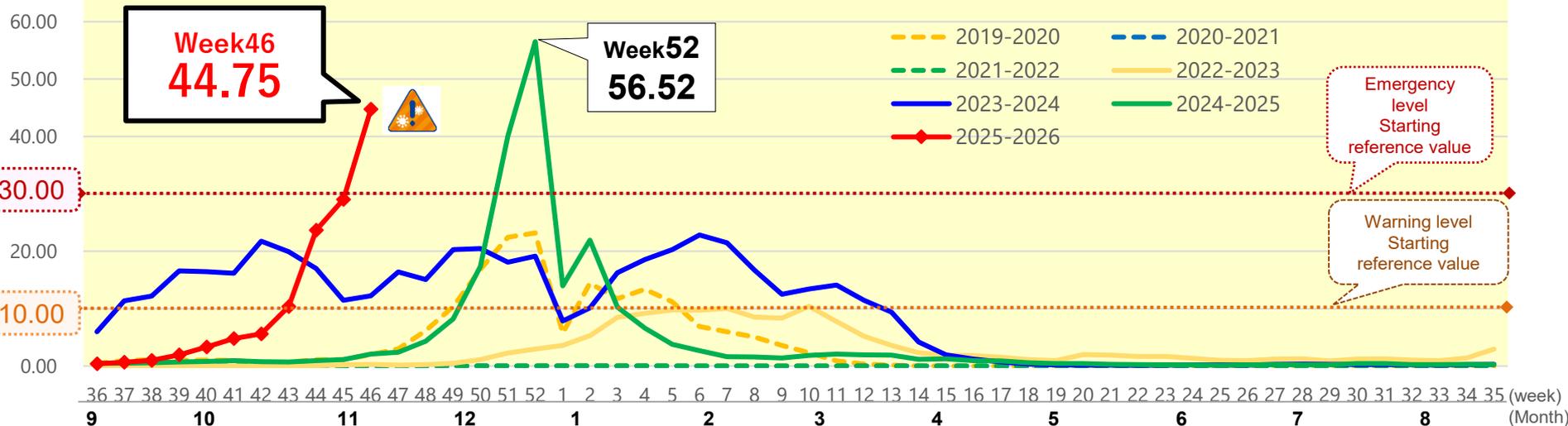


## Number of patients reported per fixed point medical institution



The data for 2025 are up to Week 46 (November 10 ~ 16)

(people / fixed point)

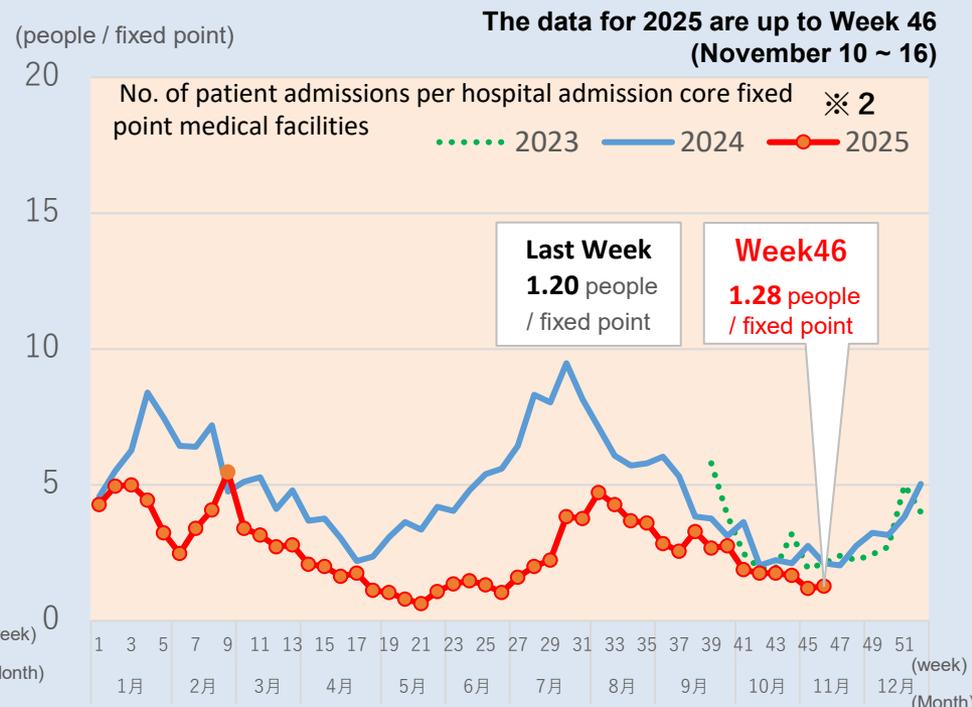
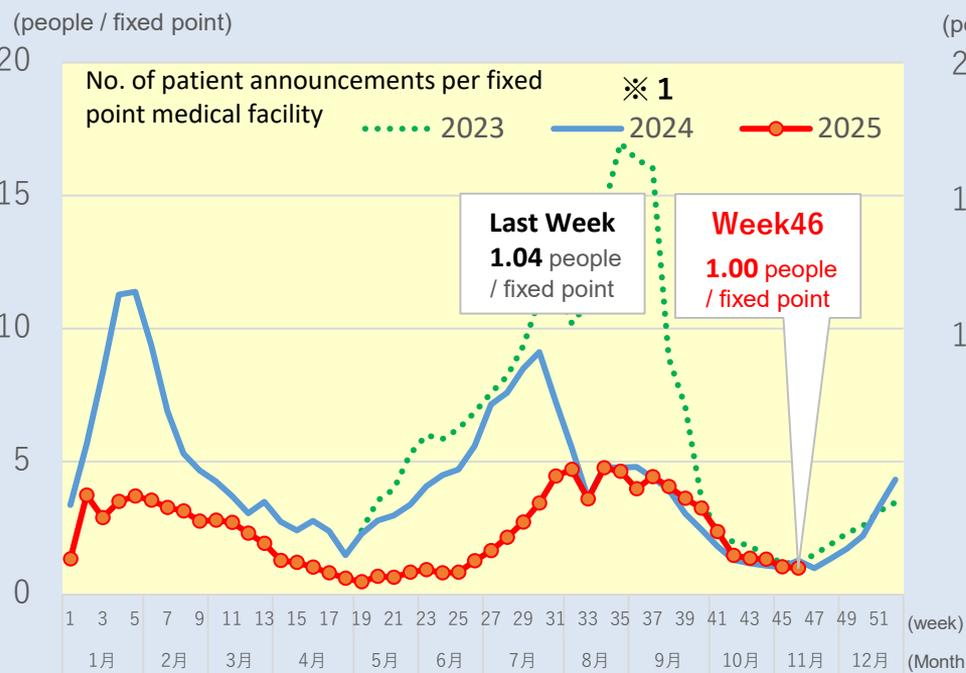


## Current Status

- The number of public health centers with warning levels was 12 out of 31 in week 45, and the population under the jurisdiction of the public health centers reached 46.18% of the total in Tokyo, **exceeding the warning standard (30%) six weeks earlier than last year**
- The number of reports as of Week 46 was **44.75 per fixed point**, exceeding the warning standard for two consecutive weeks
- **AH3 subtype** is currently dominant

## Symptoms, etc.

- Relatively rapid onset of symptoms such as **fever** of 38 ° C or higher, **headache, sore throat, cough, joint pain, and muscle pain**
- **Acute encephalopathy** is rarely seen in children, and **pneumonia** is seen in the elderly and immunocompromised patients and sometimes becomes severe



※ 1 Values based on reports from fixed point medical facilities (No. of patients reported for relevant week / No. of reporting medical facilities) (Note) Aggregation started from 19th week in 2023

※ 2 Values based on reports from hospital admission core fixed point medical facilities (No. of patients hospitalized for relevant week / No. of reporting medical facilities) (Note) Aggregation started from 39th week in 2023

## Current Status

- Increased reporting of patients during summer and winter months in most years. Last winter, it peaked from December to January.
- Although no upward trend is observed in the number of patients reported per fixed point medical institution and the number of patients hospitalized per core fixed point medical institution, attention should be paid to future trends.



# Acute respiratory infection (ARI)

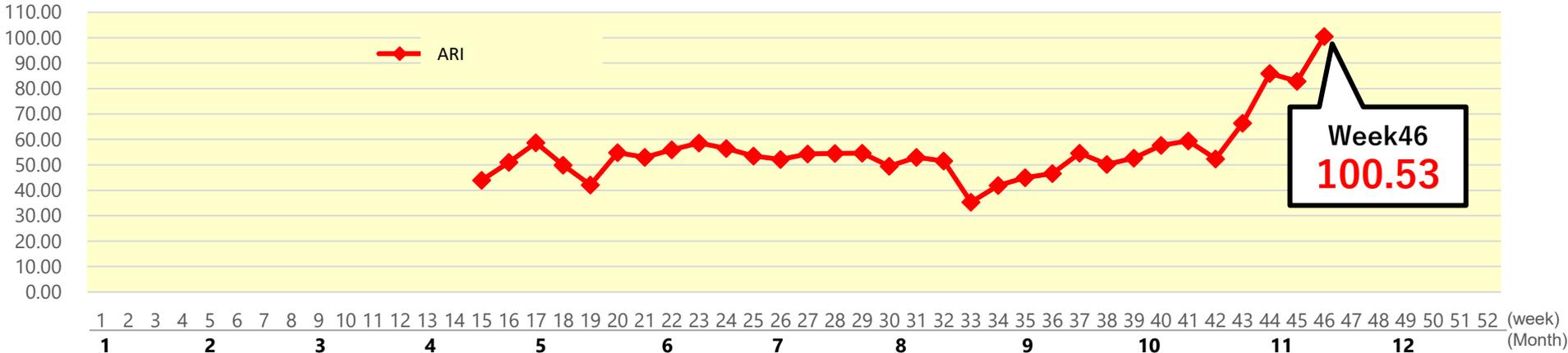
- Class 5 infectious disease -

-Infectious Diseases  
That Require Attention Moving Forward

## Number of patients reported per fixed point medical institution

The data for 2025 are up to Week 46  
(November 10 ~ 16)

(people / fixed point)



## Current Status

- **Acute Respiratory Infection Surveillance started in April 2025**
- As of Week 46, **100.53 cases/sentinel**, and from Week 44 **remained at a high level**
- Latest test results show that the detected pathogens were viral diseases such as rhinovirus: 28.4%, influenza virus: 21.6%, RS virus: 12.2%, SARS-CoV-2: 8.1% etc.

## What is Acute Respiratory Infection (ARI)?

- **A generic term for a syndrome** that indicates acute upper respiratory tract inflammation (rhinitis, otitis media, pharyngitis, etc.) or lower respiratory tract inflammation (bronchitis, pneumonia), not a single disease.
- Case definition: **Outpatients presenting with at least one of the following symptoms: cough, sore throat, dyspnea, nasal discharge, or nasal congestion**, with **acute symptoms within 10 days of onset**, and for whom the physician suspects an infectious disease

### Acute Respiratory Infection (ARI) Surveillance

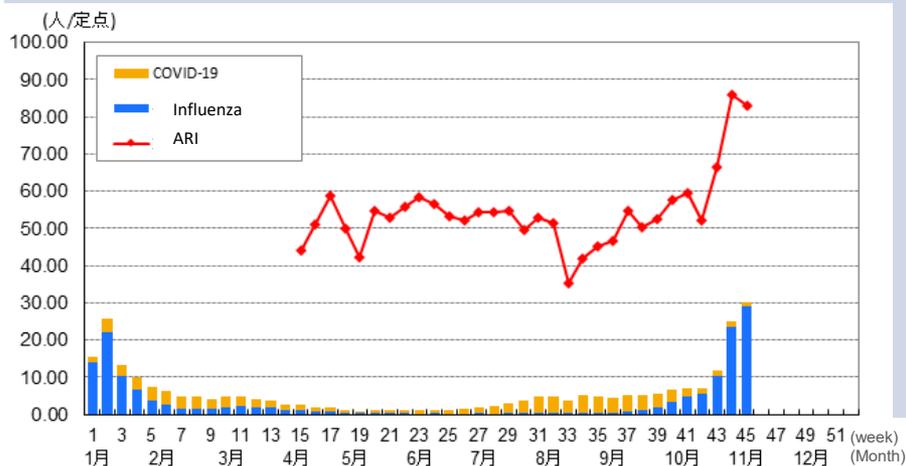
- Acute Respiratory Infection (ARI), due to the revision of the Enforcement Regulations of the Infectious Diseases Control Law, designated as a **Category 5 infectious disease** (sentinel surveillance disease) **under the Infectious Diseases Control Law from April 7, 2025**
- Objectives of Acute Respiratory Infection (ARI) surveillance
  - **Understanding respiratory infections during outbreaks** based on trends and levels of Acute Respiratory Infections in Japan
  - **To rapidly detect the occurrence of emerging and re-emerging infectious diseases**

<Publication on the Tokyo Metropolitan Infectious Disease Surveillance Center Website>

<https://idsc.tmiph.metro.tokyo.lg.jp/diseases/ari/ari/> -

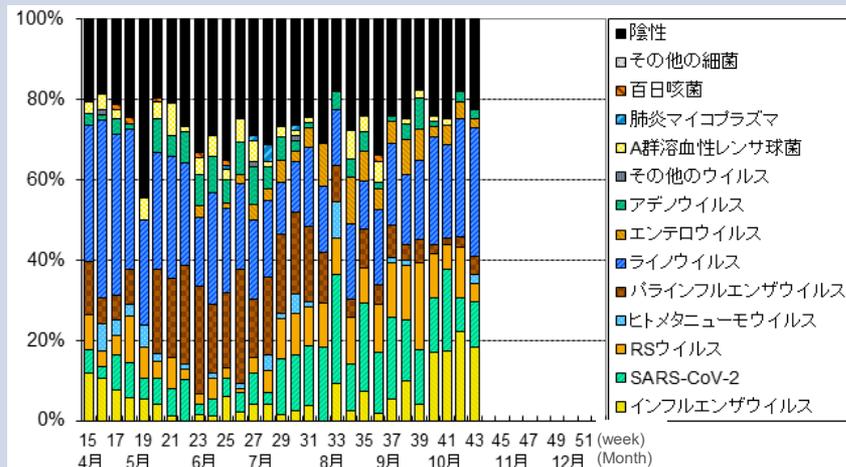
#### Number of Patients Reported (Weekly)

- Number of patients reported from **419** medical institutions in **Tokyo**



#### Analysis of the pathogen

- Collect Samples from **41** medical institutions in **Tokyo** and analyze





# Calling to Tokyo Citizens

-Infectious Diseases  
That Require Attention Moving Forward

## Acute Respiratory Infections such as COVID-19 and Influenza

- Infection prevention measures such as **frequent handwashing, cough etiquette, and ventilation**
- Adequate **rest, nutrition, and hydration**
- **Consideration of vaccination** (consult with your family doctor)
- **Avoid going out to crowded places** (especially the elderly and those with underlying medical conditions, pregnant women, etc.)



[Place of Posting] <https://www.hokeniryo.metro.tokyo.lg.jp/kaensen/info/influ/shingatainflu/keihatsu>

## Infectious Gastroenteritis

- **Frequent handwashing and disinfection**
  - Wash hands thoroughly with soap and water before cooking and eating and after using the toilet.
  - Wear disposable gloves, masks, etc., when handling feces or vomit, dispose of them and disinfect the areas with sodium hypochlorite
- **Heating and cooking food**
  - Heat food thoroughly, especially bivalves such as clams, ensuring they are heated all the way through to the center
  - Wash fresh produce such as vegetables thoroughly with tap water



[Place of Posting] <https://www.hokeniryo.metro.tokyo.lg.jp/shokuhin/pamphlet2/pamphlet.html>