Monitoring analysis (released February 1, 2024)

	Monitored catego $*$ (1) is the 7-day total, (2) are 7-day moving ave of top 3 variants		This Week (released February 1, 2024)	Last Week (released Jan 25, 2024)	Expert analysis
Infection trends	① No. of patients reported per sentinel [No.ofpatientsreportedbyfixedpointmedicalfacilities ÷ no.offixedpointmedicalfacilities]		11.27 people /fixed point (Week 4(1/22-1/28))	8.33 people /fixed point (Week 3 (1/15-1/21))	 The number of patients reported at sentinel is rising with notable increases in those under 20 and in their 40s. The switch to the highly-transmissible JN.1 variant continues, with attention to increased transmission going forward required. Numbers of reports of fever were largely unchanged and applications of the Tokyo Rule fell, albeit from a high level. The number of hospitalizations was unchanged, but the increased demand for medical care from patients with non-Covid conditions is putting pressure on the healthcare system. People still need to be reminded to take
	(2) Cases of fever reported to #7119(*1) [7-day moving average]		98.3 cases (1/31)	106.9 cases (1/24)	
Burden on health system	(3) Cases in which emergency medicine Tokyo Rule applied(*2) [7-day moving average]		150.9 cases (1/31)	192.7 cases (1/24)	
	(4) No. of patients admitted to hospital [Total number of patients admitted]		1,599 people (1/29)	1,510 people (1/22)	
Variant monitoring	5 Pathogen surveillance (genome analysis) [Findings of latest genome analysis from Tokyo samples]	JN.1 (BA.2.86 subvariant)	58.3% (1/8-1/14)	55.6% (1/1-1/7)	 basic infection prevention measures such as wearing masks according to the situation, handwashing and ventilation and to refrain from going out if they are feeling unwell. Vaccination is especially recommended for seniors and those with pre-existing conditions, who are particularly at risk of severe symptoms. Everyone over the age
		EG.5 (XBB.1.9.2 subvariant)	29.2% (1/8-1/14)	26.7% (1/1-1/7)	
		BA.2.86	9.7% (1/8-1/14)	10.0% (1/1-1/7)	
Note: Vaccination rates of residents according to VRS data Vaccination started spring 2023 (May 8, 2023); elderly (aged 65+)				52.3% (1/28) of 6 month the end of	

*1. Tokyo Fire Department Emergency Telephone Consultation Center, the contact point to assist sick or injured residents who are not sure if they should call an ambulance or which hospital to attend.

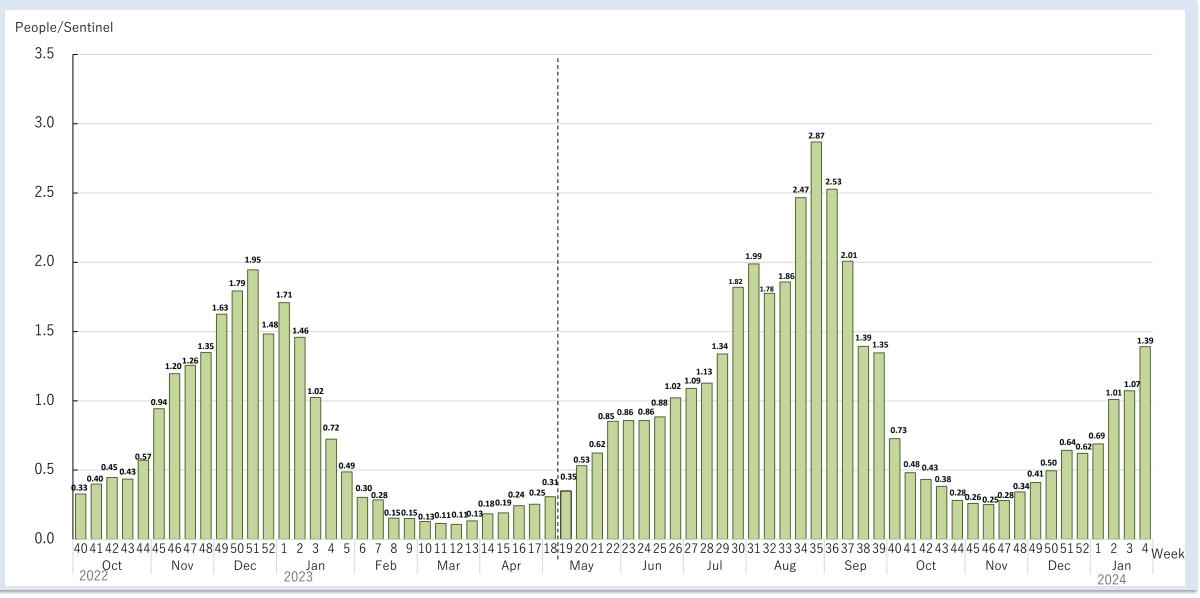
*2. The number of emergency hospital transportations rejected by more than 5 hospitals or requiring more than 20 min before finding an appropriate medical facility

1-1 No. of patients reported per sentinel



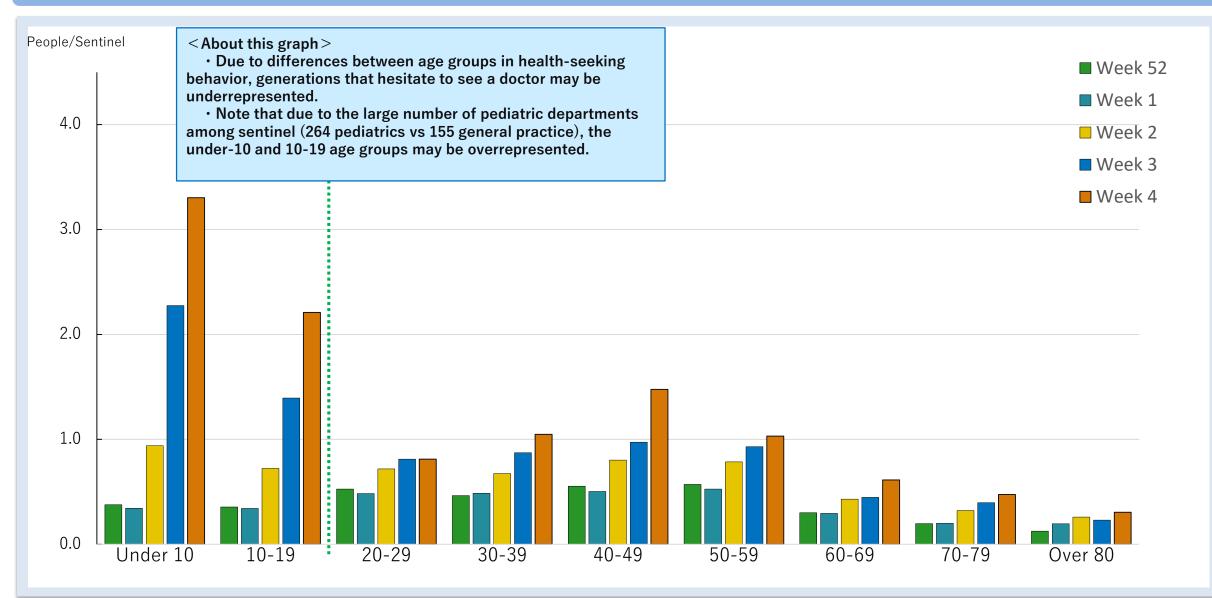
Note: Revisions may be made retroactively based on reports from medical facilities.

1-2 Number of patients reported sentinel aged 60 years and older



Note: Revisions may be made retroactively based on reports from medical facilities.

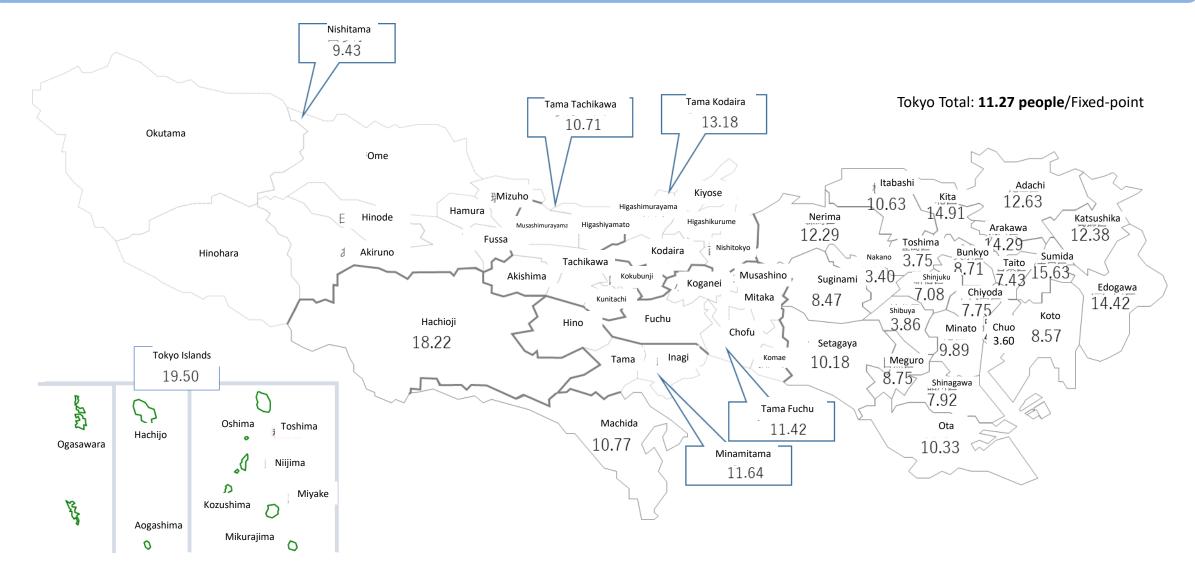
1-3 No. of reported patients in Tokyo per sentinel by age group



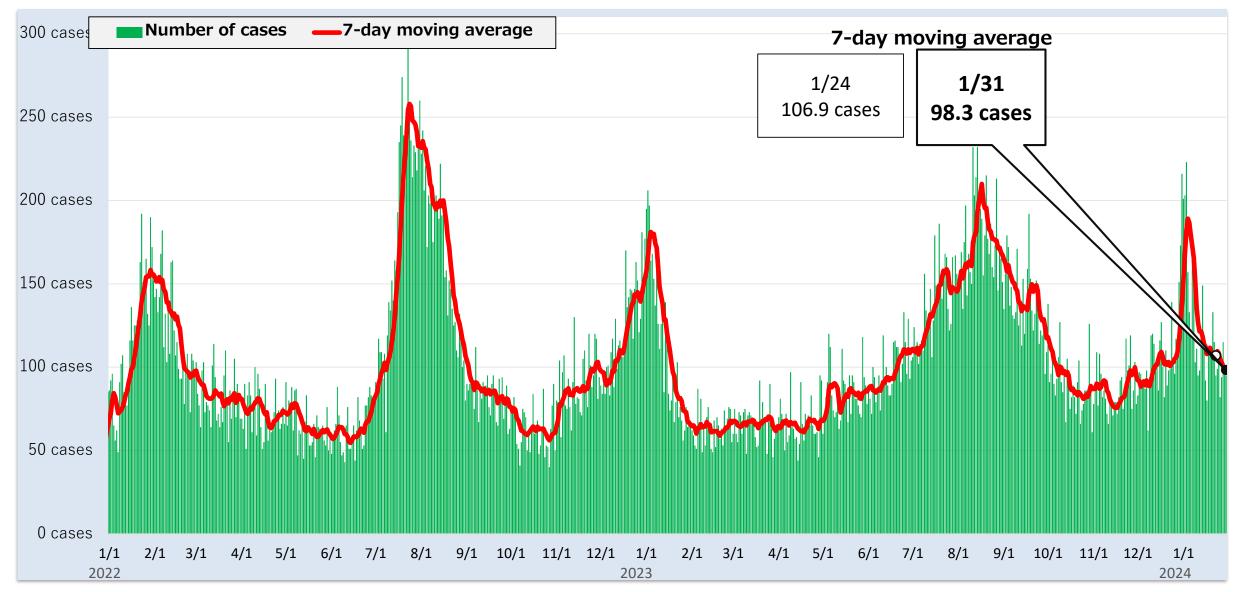
Note 1. Revisions may be made retroactively based on reports from medical facilities.

Note 2. Figures reported per sentinel by age group do not necessarily add up to the overall total as the third place after the decimal point is rounded up or down

1-4 No. of patients reported per sentinel (by public health center district Week 4 (4(1/22 - 1/28))

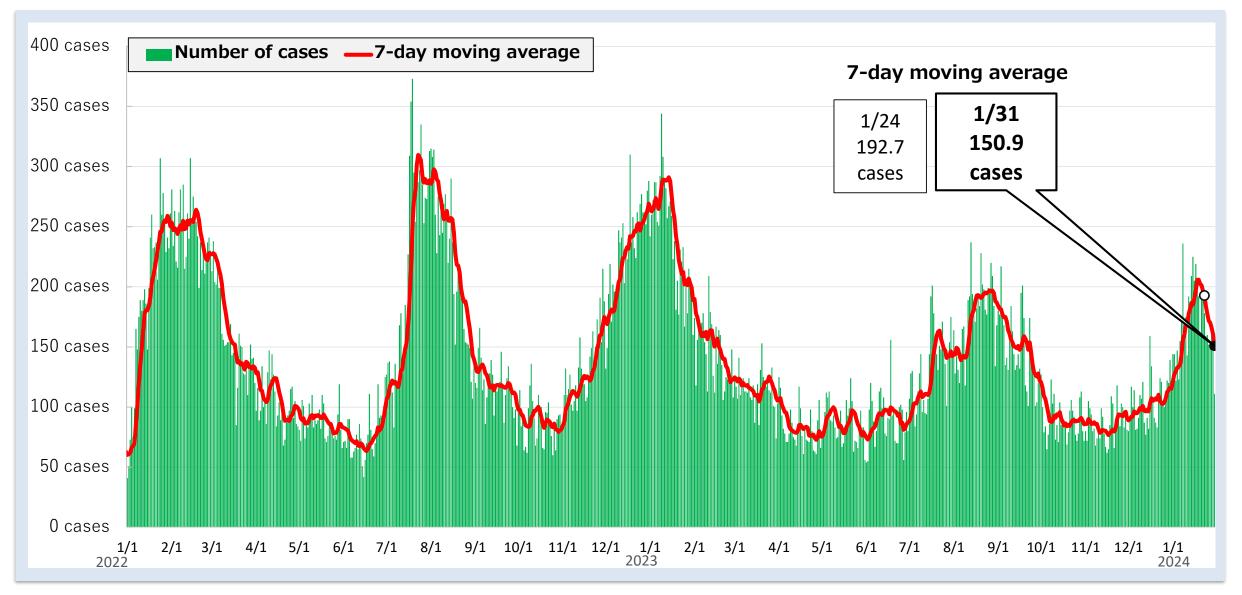


② Number of calls to #7119 related to fever, etc.



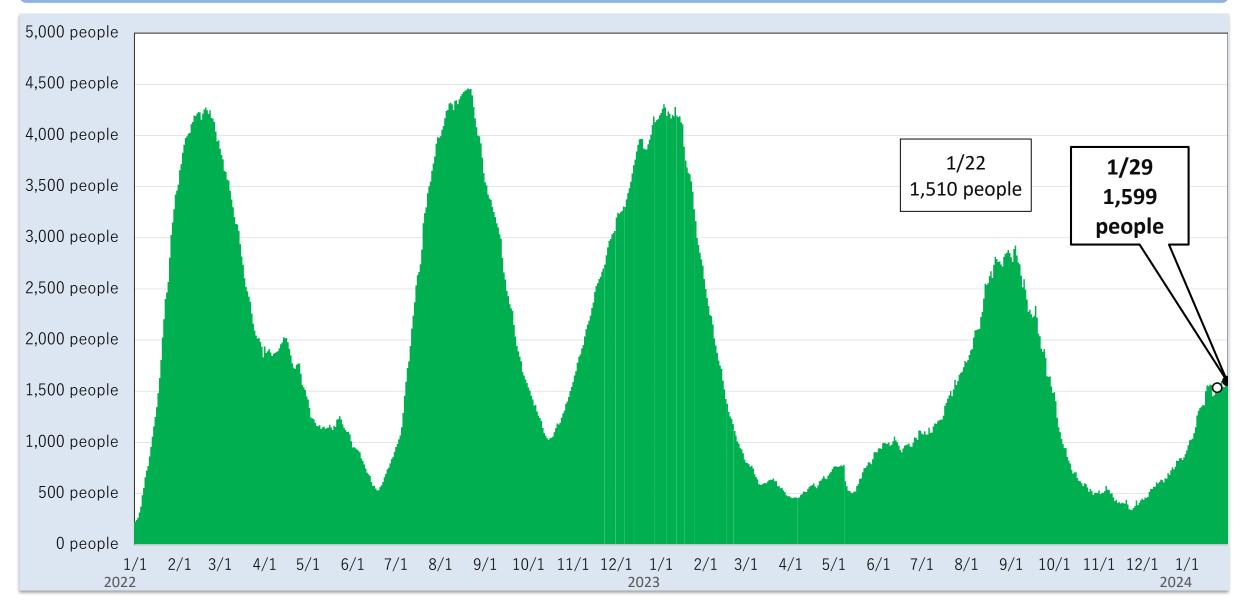
Note: Daily results fluctuate due to variations in the number of cases depending on the day of the week and other factors. In order to smooth out these variations and see overall trends, the number of calls to #7119 was calculated as the 7 day moving average.

3 Number of cases under the "Tokyo Rule for Emergency Medical Care"



Note: Daily results fluctuate due to variations in the number of cases depending on the day of the week and other factors. In order to smooth out these variations and see overall trends, the number of cases was calculated as the 7-day moving average.

④ Hospitalized patients



Note: Revisions may be made retroactively based on reports from medical facilities.

5 Pathogen surveillance (genome analysis)

(As of 12:00 February 1, 2024)

*Change of 1.0% pt or more

Change of 0.5% pt or more

(Actual

42

21

numbers)

1/1-1/7 1/8-1/14

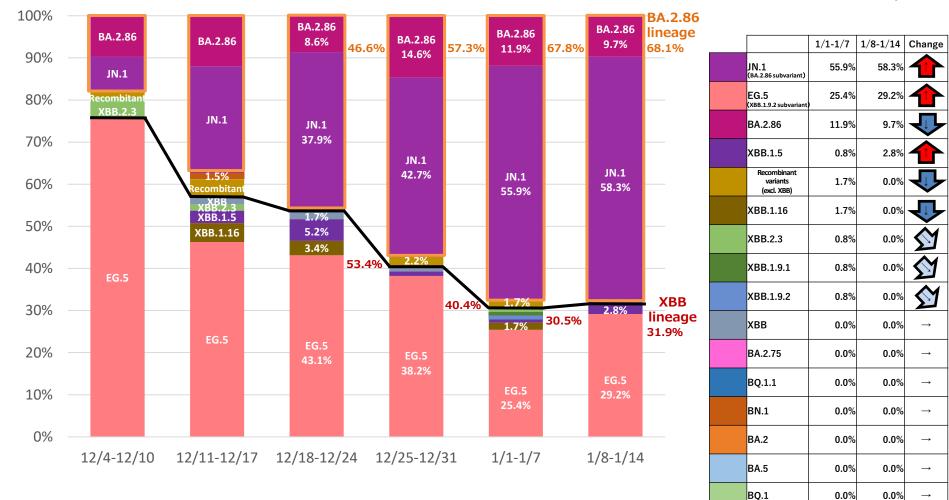
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14

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*Results of genome analysis of specimens from Tokyo, reported in the past 6 weeks (preliminary). *Subject to updates based on additional reports

*BA.2, BA.2.12.1, BA.2.75, and BN.1 are recorded separately. BA.4 and BA.4.6 are recorded separately. BA.5, BF.7, BQ.1, and BQ.1.1 are recorded separately. XBB.1.5, XBB.1.9.1, XBB.1.9.2, XBB.1.16 and XBB2.3 are recorded separately (the figures for XBB include XBB lineage other than those listed). (Per the Pango lineage nomenclature at the time of reporting)

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