

Department of Internal Medicine

Division of General Medicine

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General Summary

1. Management of a database of our medical examinations and treatments
2. Planning a post-graduate training program to acquire skills for the general practice required in the community

Research Activities

Division of General Medicine, The Jikei University Hospital

We have been constructing a database of our outpatients clinic including information concerning reason for visiting, symptoms, initial diagnosis and initial treatments. The frequent consultation reason was abdominal pain, cough and pyrexia. Then, frequent initial diagnosis was upper respiratory tract infection, infectious gastroenteritis and headache. These data are expected to be useful for analyzing trends in primary care at large general hospitals.

Recently, the field of medical education has expanded to first-line health care including community health care, in addition to hospital-based specialized medicine. Thus, we are planning the post-graduate and continuing professional development of physicians to acquire skills for the general practice required in the community.

Division of General Medicine, The Jikei University Katsushika Medical Center

We experienced three valuable cases; a case of eosinophilic meningitis induced by parasite infection, a case of acquired immunodeficiency syndrome with pancytopenia, and a case of Cushing syndrome that showed improvement in diabetes, hypertension and cardiac function after adrenalectomy.

We also started a basic research of gas biomarkers from skin and expiration from lung. We are going to examine about the inflammatory changes in the patients with collagen disease, frailty and sarcopenia.

Division of General Medicine, The Jikei University Daisan Hospital

We found that polymyalgia rheumatic (PMR) and giant cell arteritis (GCA) is occurred in same age and gender. But inflammatory data and value of MMP-3 is different. We discussed about Do not attempt resuscitation (DNAR) and Physician Order for Life Sustaining Treatment (POLST) in university hospital and community hospital. Almost all doctors and nurses know DNAR, but about 60% were confused in actual cases in both groups.

Only 2% know POLST in both groups. We made comparison between Community acquired pneumonia (CAP) and Nurse and healthcare-associated pneumonia (NHCAP). We found that NHCAP is older and more severe than CAP. There is no difference in inflammatory data, use of antibiotics, and prognosis. Pathogenic bacteria can be detected fewer in NHCAP.

Division of General Medicine, The Jikei University Kashiwa Hospital

Our research consists of 3 parts. The first part is to develop inter-professional work in Kashiwa area. We conducted the open seminar related to general medicine and clinical ethics 3-4 times in a year. The second part is to develop educational tasks for teaching medical students and junior physicians. We developed the education system using WEB (called e-portfolio) and now running. The third part is concerning the management of Hospital Ethics Committee and Clinical Ethics Consultation in our hospital. There were about 10 consultations every year.

We are running a research concerning POLST Japanese version in Japanese hospital setting and “Advance care planning in rural setting.”

Publications

Noro I, Roter DL¹, Kurosawa S², Miura Y, Ishizaki M³ (1Johns Hopkins Univ, 2Tohoku Univ, 3Univ Tokyo). The impact of gender on

medical visit communication and patient satisfaction within the Japanese primary care context. *Pat Educ Couns.* 2018; **101**: 227-32.