

Your donations can make a difference! The Double Barred Cross Seal



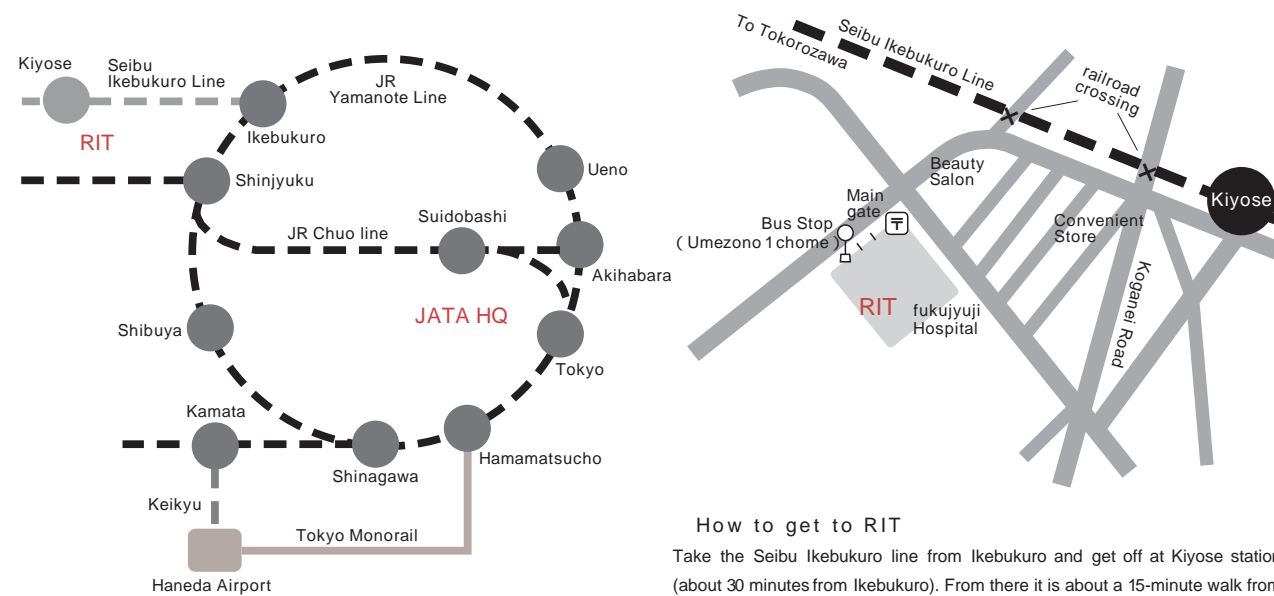
Tuberculosis is no longer " a disease of the past." The Double Barred Cross Seal that has helped raise money to eliminate tuberculosis and lung disease is given to those who make a donation to the Japan Anti-TB Association (JATA). JATA is a non-profit organization and has been given tax-exempt status. Those individuals who donate more than 500,000 yen and corporations that donate more than one million yen will be acknowledged by Princess Akishino, Patroness of JATA.



Contact us :
Fundraising Division,
Business Department,
Japan Anti-TB Association
Telephone: +81-3-3292-9287
<http://www.jatahq.org/seal/framepage1.htm>



Map of the Research Institute of Tuberculosis(RIT)



How to get to RIT
Take the Seibu Ikebukuro line from Ikebukuro and get off at Kiyose station (about 30 minutes from Ikebukuro). From there it is about a 15-minute walk from the South exit of the station. Or, take a Number 2 bus from the same South exit and get off at the 3rd stop "Umezono 1chome Fukujuji Byouin-mae".

the Research Institute of Tuberculosis



the Research Institute of Tuberculosis,
Japan Anti -Tuberculosis Association
WHO Collaborating Center
Address: 3-1-24 Matsuyama, Kiyose-shi, Tokyo 204-8533 Japan
Tel: +81-42-493-5711 Fax : +81-42-492-4600
URL <http://www.jata.or.jp>



Director's Message



We Aim at Low Incidence of TB in Japan and a Strengthened Global Base for Fighting TB

Director Dr. Nobukatsu Ishikawa

Since its foundation in 1939, when tuberculosis was extremely prevalent in Japan, RIT has been functioning as a semi-national institute with the mission of promoting an effective nationwide TB program through basic and applied research, training and education, program support, and international cooperation. The TB trend in Japan has been dramatically declining, but it will take another 15-20 years for Japan to reach the status of low incidence (10 cases per 100,000 population). And it might take an entire century to attain TB elimination (a rate of one case in one million). Even among the developed countries, no country has ever eliminated TB. Immigrants and socially vulnerable populations such as the homeless have a much higher risk for TB, and other risk factors for TB such as HIV and diabetes are increasing among the population. Though the number of TB cases may gradually become less, the importance of risk management for TB will increase, because it would still remain for a long time in the society and would sometimes cause unexpected outbreaks, and could create drug-resistant cases if the proper measures were not taken. We would like to work harder to attain our mission, accelerating our progress towards low incidence and elimination of TB in Japan, and strengthening the global base to fight against TB in the rest of the world. To this end, we hope for maximum support and collaboration with the partners both at home and abroad.

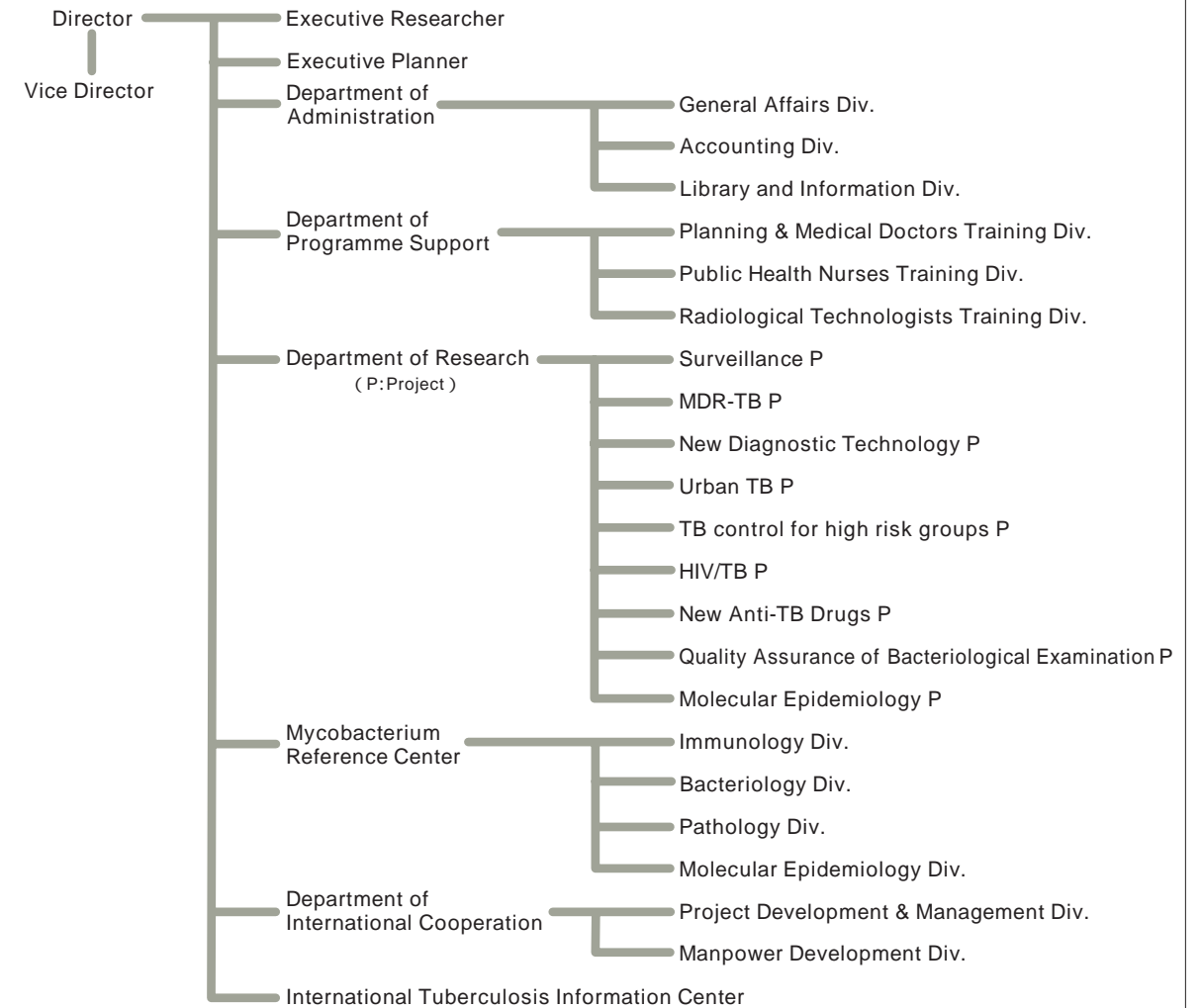
March 2007

Brief History of the Institute

- May 1939 Establishment of JATA by special Decree from Her Imperial Majesty the Empress, with Princess Chichibu as Patroness
- Nov. 1939 Establishment of the Research Institute of Tuberculosis (RIT) in Hoseien
- Nov. 1943 RIT moved to Kiyose
- Nov. 1947 Establishment of the RIT-Attached Sanatorium (currently called Fukujuji Hospital)
- Feb. 1948 First Training Course for TB specialists carried out
- 1953 First tuberculosis prevalence survey conducted
- Sep. 1954 First publication of " Statistics of TB "
- Apr. 1958 Separation of RIT-Attached Sanatorium (currently called Fukujuji Hospital)
- Jun. 1963 First International Training Course in Tuberculosis Control for doctors from developing countries carried out
- Sep. 1973 Hosting the 22nd World TB Congress in Tokyo
- Aug. 1982 Designation of RIT as WHO Collaborating Center for Tuberculosis Research and Training
- Apr. 1988 Establishment of Department of International Cooperation
- Apr. 1992 Establishment of International Tuberculosis Information Center
- Feb. 1995 First International Training Course on AIDS Prevention and Care in Asia carried out
- Mar. 1999 Establishment of Department of Program Support
- Apr. 2003 Establishment of Department of Research, and Establishment of Mycobacterium Reference Center

Front page photo a microscope used by Dr.Hideyo Noguchi ©K.Imamura,JICA

Organization

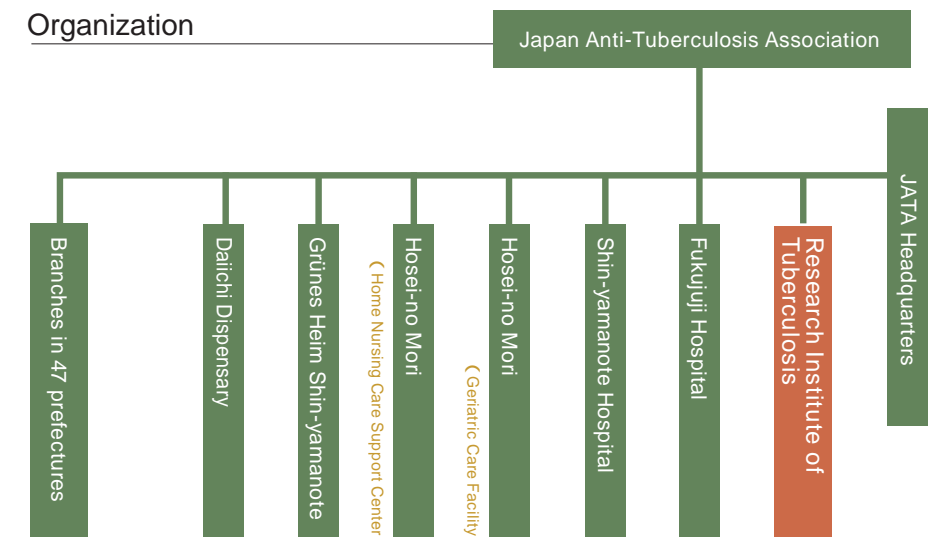


As of March 2007

Japan Anti-Tuberculosis Association

Japan Anti-Tuberculosis Association (JATA) is a public corporation which was established in May of 1939 by the Cabinet Council, after the then Prime Minister received an official message from Her Imperial Majesty the Empress (currently H.I.M Empress Dowager). JATA had its mission to make every effort to fight against tuberculosis. JATA has been honored with the patronage of H.I.H Princess Kiko Akishino since 1994. Under her honorable guidance and support, JATA has made great efforts to eliminate tuberculosis by conducting activities such as advocacy · communication, fund raising, clinical services, research, surveillance, training, and international cooperation. In recent years, JATA has been expanding its activities by conducting theoretical and clinical research on lung cancer and other respiratory diseases. RIT, as one of the facilities under JATA, conducts research, surveillance, training courses, and international cooperation in tuberculosis control.

Organization



Address of JATA Headquarters: 1-3-12 Misaki-cho, Chiyoda-ku, Tokyo 〒101-0061 TEL +81-3-3292-9211

The Department of Research promotes various types of essential research such as epidemiological research, clinical research, operational research, project-based research, and new anti-tuberculosis drug development. Project membership also includes staff from outside the Department of Research. Research agenda are reviewed based upon an analysis of research needs. Aside from project type research, several studies are conducted within the framework of a Ministry of Health Welfare Grants, International Joint Studies, and general studies.

Epidemiologic Studies

Data from the surveillance system are analyzed at RIT and published in the "Statistics of Tuberculosis" or on the RIT website. Researches using its data are actively conducted. The HIV-TB Project which looks at epidemiological impact of HIV on tuberculosis, is being carried out in the field in Cheng-Rai, Thailand. This epidemiological study is expected to bring about useful information for the forecast of HIV-TB prevalence.



Meeting with PLWHA (People living with HIV/AIDS) (HIV-TB Project in Cheng-Rai, Thailand)

Studies on diagnosis, treatment and control

The Urban Tuberculosis Project studies the reasons for high incidence as well as TB Control measures among the homeless and foreign born. As for MDR tuberculosis, we conducted studies on pharmacokinetics and other kinds of clinical studies as well as standardization of diagnosis and treatment to prevent the disease. Studies on the application of QFT are on the way. Quality Assurance of smear examination (as well as the development of artificial sputum to be used for Quality Assurance purposes) are also performed.



TB Treatment Note for foreigners written in English, Chinese, Korean and others (Urban TB Project)

Studies on development of new anti-tuberculosis drug

Development of new anti-tuberculosis drugs is a big challenge in the attainment of the MDGs in the DOTS strategy, and promising new compounds are being developed in Japan. RIT is the only facility in Japan that has the equipment and know-how for animal experiments with tuberculosis bacilli and the development of new compounds. Basic studies for the development of the anti-tuberculosis drugs is also in progress.

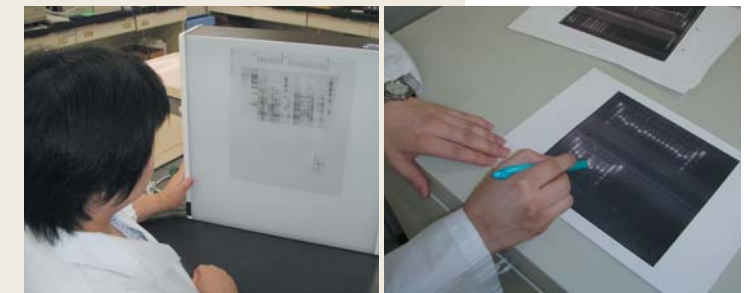


Equipment for experiment on TB infection

The Mycobacterium Reference Center (MRC) is comprised of the Immunology Division, the Bacteriology Division, the Pathology Division, and the Molecular Epidemiology Division.

Basic Research Activities in Collaboration with the Department of Research

Present research topics include the establishment of the QuantiFERON(QFT) assay instead of the tuberculin test, diagnosis of multi-drug resistant *M. tuberculosis* at DNA level, significance of RFLP and VNTR in *M. tuberculosis* outbreaks, and the relationship between *M. tuberculosis* clinical isolates and virulence. Some staff from other departments belong to research projects of the Research Department, and researchers and graduate students from outside institutions are also accepted for participation in collaborative research projects.



RFLP and VNTR are useful for the identification of *M. tuberculosis* mass infection.

Reference Center for Examination Services

We accept paid examinations of specimens from outside institutions and hospitals. These include QFT tests, genetic tests of multi-drug resistant *M. tuberculosis*, identification of mycobacteria, restriction fragment length polymorphism (RFLP), VNTR tests, identification of *M. tuberculosis* in the granulomatous tissues, and paid dispensing of mycobacteria.



QFT test which is more useful than tuberculin skin test because this test's results can identify TB infected persons from any BCG vaccinated population.

Identification Test for Virulence by Animal Model

Various researches are carried out by utilizing animal experiments with tuberculosis bacilli. For example, virulence of *M. tuberculosis* clinical isolates is evaluated by examination of the granulomatous tissues in animal models such as guinea pigs.



Granulomatous tissue due to TB infection in lung of guinea pig. TB bacilli with Ziehl-Neelsen staining

The Department of Program Support consists of three divisions: 1) Planning and Medical Doctors Training Division, 2) Public Health Nurses Training Division and 3) Radiological Technologists Training Division. The major role of this department is to provide technical support in the implementation of the TB control program to national and local government as well as medical facilities. Training for various types of health personnel such as medical doctors, public health nurses, radiologists, laboratory technicians and clerical staff has been conducted and technical support also has been provided. More than 90 thousand health personnel have been trained and are working for the TB control program.

The Only Manpower Development Facility for the NTP in Japan

More than 2000 health personnel are trained by RIT each year. After training, they work as key personnel for the NTP with the new knowledge and techniques obtained at RIT. New training courses for clinicians, nurses and TB control leaders have been established in recent years in order to include a broader range of staff working for the NTP. Graduates of these training courses form a network that drives TB control program in Japan.



TB training courses to develop personnel for the NTP

Technical support for the Japanese TB control program

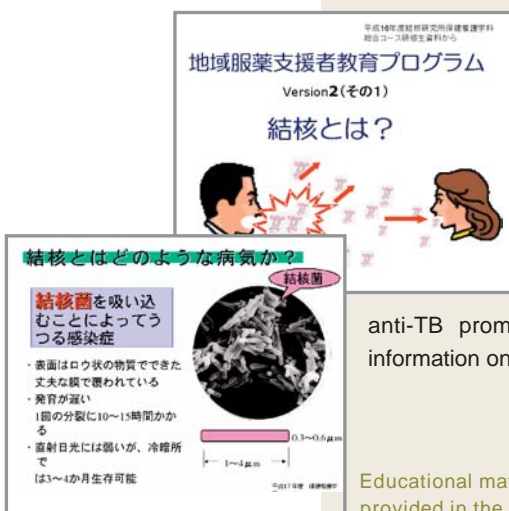
The international TB seminar, the national TB control promotion convention, regional TB training courses and independent meeting about TB outbreaks at the Annual Meeting of the Japanese Society of Public Health are held every year to provide new knowledge of NTP and encourage mutual exchange of valuable experiences. Technical support for TB control program activities and outbreaks are conducted nationwide through lectures, advices by telephone and E-mail.



Display of latest information at the meeting of the Japanese Society of Public Health

Anti-TB promotion activities

The information on up-to-date progress on researches and new strategies for TB control is displayed at the booth in the Annual Meeting of the Japanese Society of Public Health. Newsletters on the TB control program are released annually. The RIT homepage provides various educational materials to support the TB control program including DOTS. Collaboration with JATA in several anti-TB promotion events is also actively conducted by latest information on TB control.



Educational materials provided in the RIT homepage

The Department of International Cooperation, established at RIT in 1988, consists of the Project Development and Management Division and the Manpower Development Division, working closely with the International Department of JATA headquarters.

Technical assistance to promote Stop TB Projects

Several technical projects to support National TB Control Programs are conducted with expertise provided by staff, who are deeply involved in the planning, implementation, monitoring and evaluation of these projects.



A tuberculosis patient's drug intake being observed by a health center staff (Cambodia)

Research activities

The Department has been actively engaged in research activities focused on strengthening TB control programs in high burden countries.

40 years' expertise in human resource development

Over the past 40 years, RIT has contributed to the development of human resources for TB control worldwide. There are four international training courses annually: two on TB control management, one on laboratory and one on HIV/AIDS prevention and management.

Collaboration with international organizations

RIT collaborates with the World Health Organization (WHO) and contributes to the Stop TB Partnership through various activities. RIT has been a member of the International Union Against Tuberculosis and Lung Diseases (IUATLD), Stop TB Partnership, The International Tuberculosis Surveillance Research Unit (TSRU), and Tuberculosis Coalition for Technical Assistance (TBCTA). RIT was designated as a WHO collaborating center in 1982. Furthermore, RIT staff are actively participating in various Technical Advisory Groups and working groups at both the regional and global levels.



Participants learning TB microscopy at the TB Laboratory Training Course

