International Cooperation for Elderly Care between Kumamoto, Japan and Khon Kaen, Thailand

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Introduction

The rate of Japanese aging has already exceeded 25% and we are in a super aging society that nobody has ever experienced. The super aging society could result from economic growth but result in a dramatic increase of diseases including cancer and a high mortality rate. This is the reason why the public long-term care insurance (LTCI) program was implemented in Japan. It will be essential to cooperate with foreigners during a rise in the percentage of the aged population in recent years, because of this unsustainable national medical emergency situation as well as problems of other industries in Japan. In November 2009, we made a contract for our sister hospitals between National Hospital Organization Kumamoto Medical Center and Khon Kaen Regional Hospital, Khon Kaen, Thailand. And we began to share our knowledge and experience with staff in kinds of medical fields each other to promote the mutually beneficial international cooperation initiatives. We tried to compare the medical issues between our aging countries and pave the way for elderly care in Thailand in the future to reveal. Because Thailand will face a critical situation in which the rate of aging is increasing rapidly. It’s necessary for Thailand to prepare for the super-aging population in the near future. From our experiences evaluation of health and social services for Thai elderly is not ready to face the situation of aging population. The health care system for elderly people should be required to reform soon.

Economy and Life Expectancy

In spite of the history of aging in Japan, the first control measures against infectious diseases worked well and followed by the developing education and law [1]. Japanese life expectancy increased by about 13.7 years during the first decade after the first decade after World War II [2]. The rapid increase in life expectancy preceded the dramatic growth of per capita Gross Domestic Product by 10 years [2]. Thailand is a new industrial country and economic growth is expected to go up 7.5% in recent years, because of this unsustainable national medical emergency situation as well as problems of other industries in Japan. However, since the end of the Second World War, these diseases have rapidly decreased and have been replaced by so-called life style related diseases such as malignant neoplasms (cancer), heart diseases and cerebrovascular diseases. Cancer ranks first in the causes of deaths since 1981. The number of cancer deaths in 2004 was 320,315, and the death rate per 100,000 was 253.9, accounting for 31.1% of the total number of deaths [4]. We tried to compare the medical issues between our aging countries and pave the way for elderly care in Thailand in the future to reveal. At NHO Kumamoto Medical Center, many patients older and equal 60 years accounted for 70% of inpatients with cancer [5]. Patients with malignant tumors in NHO Kumamoto Medical Center were in the 6th decade (26.1% in 2011), a difference of 20 years. In addition, the number of patients with cancer was increasing at Khon Kaen Regional Hospital (1570, 2400, 2574, 3321 and 2417 between 2007 and 2011), while those in Khon Kaen Regional Hospital were in the 6th decade (26.1% in 2011), a difference of 20 years. The results clearly point to the fact that future elderly will be increasingly better educated than those currently in older ages in Thailand [3]. This improvement in education among older persons will undoubtedly contribute to their well-being [3]. The rise in elderly people percentage advanced in Japan and Thailand has been changing after Japan for 25 years. In November 2009, we made a contract for our sister hospitals between National Hospital Organization (NHO) Kumamoto Medical Center and Khon Kaen Regional Hospital, Khon Kaen, Thailand. And we began to share our knowledge and experience with staff in kinds of medical fields each other to promote the mutually beneficial international cooperation initiatives.

Cancer in Elderly

Until the middle of this century, death caused by infectious disease such as pneumonia, tuberculosis and gastroenteritis prevailed in Japan. However, since the end of the Second World War, these diseases have rapidly decreased and have been replaced by so-called life style related diseases such as malignant neoplasms (cancer), heart diseases and cerebrovascular diseases. Cancer ranks first in the causes of deaths since 1981. The number of cancer deaths in 2004 was 320,315, and the death rate per 100,000 was 253.9, accounting for 31.1% of the total number of deaths [4]. We tried to compare the medical issues between our aging countries and pave the way for elderly care in Thailand in the future to reveal. At NHO Kumamoto Medical Center, many patients older and equal 60 years accounted for 70% of inpatients with cancer [5]. Patients with malignant tumors in NHO Kumamoto Medical Center were in the 6th decade (26.1% in 2011), a difference of 20 years. In addition, the number of patients with cancer was increasing at Khon Kaen Regional Hospital (1570, 2400, 2574, 3321 and 2417 between 2007 and 2011), while those in Khon Kaen Regional Hospital were in the 6th decade (26.1% in 2011), a difference of 20 years. The results clearly point to the fact that future elderly will be increasingly better educated than those currently in older ages in Thailand [3]. This improvement in education among older persons will undoubtedly contribute to their well-being [3]. The rise in elderly people percentage advanced in Japan and Thailand has been changing after Japan for 25 years. In November 2009, we made a contract for our sister hospitals between National Hospital Organization (NHO) Kumamoto Medical Center and Khon Kaen Regional Hospital, Khon Kaen, Thailand. And we began to share our knowledge and experience with staff in kinds of medical fields each other to promote the mutually beneficial international cooperation initiatives.

Japan’s Public Long-term Care Insurance Program

Japan’s life expectancy was the highest in the world in 2006 (79 years for male and 86 years for females) [6]. Therefore, public LTCI programs were created as a whole can provide long-term care to the...
elderly. In 2010, the total population of Japan was 127.51 million people and percentage of the population over 65 (Population aging rate) was 22.7%. As the total population decreases, the aging of society will continue to accelerate [4]. The number of people needing care went up by 150,000 in the five years between 2003 and 2008. In 2008, the percentage of people over 65 who needed care was 2.28%, which is almost 2 times as much as the total percentage of 1.2% [4]. The social security expenditure in Japan in fiscal year 2007 amounted to about 91.4305 trillion yen and about 69.5% of the social security (about 63.5654 trillion yen) was spent on benefits for the elderly [4].

Medical Care System for the Elderly Aged 75 and Over

For the elderly, there is a system aimed at those aged 75 years and over. The cost to the individual when paying for medical services is 10% (30% for those belonging to a household with an income earner). In June 2006, several laws concerning reform of the medical system were enacted, and from April 2008, a reformed Health Insurance System for the Elderly started to be implemented as one pillar of that reform [7].

Integrated Community Care System

Integrated community care system has been proposed to provide healthcare, long-term care, prevention, housing, and livelihood support services so that senior citizens can live independently in their communities. The goal of this system is to allow a person who needs long-term care to stay at home as long as possible, and to provide an environment that allows such individuals to preserve their own lifestyle for as long as possible [8].

Discussion

Because Thailand will face a critical situation in which the rate of aging is increasing rapidly. It’s necessary for Thailand to prepare for the super-aging population in the near future. Now under the limits of medical resources, we are to provide the best healthcare in the extent permitted by the country's economic situation. From our experiences, evaluation of health and social services for Thai elderly is not ready to face the situation of aging population. The health care system for elderly people should be required to reform soon.

In 2013, the total population of Japan was 126.98 million people and percentage of the population over 65 (Population aging rate) was almost 30%. As the total population decreases, the aging of society remains to accelerate. It'll be not able to keep Japanese health forever. Preventive health care for the elderly make elderly a labor resource as longer as they can, in addition to the reduction in health care costs. In contrast to Thailand, there are 50 different maternal medical institutions in Japan. It would be required to share the precise patient’s medical information between them for the future development of health care.

We hope that improvements of health care in ASEAN community lead to health across Asia and peace in the world. Accordingly, it may be really important that we can receive the same level of high-quality medical care even if we live anywhere in Asia in advance of globalization. We suggest avenues for future study examining the consequence of long life insurance system in Japan.

References