

第105回日本精神神経学会総会

シンポジウム

Current Status of Psychiatry in Asian Countries

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Asia is very large area and have a great variety of geographical, cultural, historical backgrounds. These diversities have cultivated a various types of psychiatry there. On the other hand, there are some common problems like shortage of human and social resources.

In this symposium entitled “The current status of psychiatry in Asian countries” we have three young psychiatrist panelists, from Japan, India and Pakistan.

India and Pakistan are similar to each other in several aspects. Both of them are not so affluent and have large population. As a result, the shortage of the psychiatrists and other co-medical staffs, and the differences between rural and urban area became the common problem of both countries. Pathway study in this region shows that general practitioners do not work well and native or religious healers play an important role. However, in this three decades, many efforts have been made for changing the situation in both countries. Dr Kalmane Sridhara Pavitra, one of our panelists from India, has introduced her own experience

in developing the mental health care systems in rural area in India.

On the other hand, high quality of training in mental health is another common feature of India and Pakistan. There are attempts to focus on research and link with renowned Asian psychiatrists overseas to contribute to strengthening the training programs in both countries. I'm very sorry not to be able to introduce his presentation in this article, Dr Saqib Bajwa from Pakistan has introduced the academic developing course of his country which he himself is belonging to, in the symposium.

Japan is an affluent country and has different feature from India or Pakistan. There are a large number of psychiatrists, and the largest number of psychiatric beds in the world. Pathway studies showed that almost 90% of people living there choose medical facilities as their first care giver when they are mentally ill. But there also are many problems about current status of psychiatry in Japan, for example, the highest number of psychiatric beds and the longest average duration of stay in the hospital

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in the world, and developing the training program which has just started. The certification system of psychiatrist in Japan has just started 2 years ago and training program is under evaluation. About the child and adolescent psychiatrists, situation is more severe. The number of them is not enough and there are no official training programs in this field. Dr Mariko Setsuie who had been a pediatrician and has become a psychiatrist showed the current state of child and adolescent psychiatrist in Japan from her own experience and the result of her questionnaire survey.

Since 2006, we JYPO (Japan Young Psychiatrists Organization) have continuously taken a role in the international symposium in JSPN and have developed the partnership with the young psychiatrists in many Asian countries. From our experience, we believe that it is quite important to have more association with foreign psychiatrists and to know more about current status of psychiatry in different countries or different cultures for further development of our own psychiatry. This is the object of this symposium.
