

● Results of the Primary Examination

Number of eligible subjects (people)	Number of examinees (people)		Diagnosis rate (%)	Number of those diagnosed (people)				
	Examination rate (%)	Examinees from outside of the prefecture		Breakdown by grade (%)			Those recommended to take the Confirmatory Examination	
				A		B		C
Total	367,637	300,472 (81.7)	9,511	300,472 (100.0)	154,605(51.5)	143,573 (47.8)	2,293(0.8)	1 (0.0)

Grade A : 99.2%

● Results of the Confirmatory Examination

Number of eligible subjects (people)	Number of examinees (people)	Examination rate (%)	Rate of definitive diagnosis (%)	Number of those who received a definitive diagnosis (people)			
				For next examination		For regular healthcare program, etc.	
				A 1	A 2	Those who received fine-needle aspiration cytology	
Total	2,293	2,130 (92.9)	2,091 (98.2)	132 (6.3)	579 (27.7)	1,380 (66.0)	547 (39.6)

● Results of the fine-needle aspiration cytology

Malignant or suspicious for malignancy: 116 people; 39 males and 77 females

Average age: 17.3 ± 2.7 years old (8 to 22 years old); At the time of the earthquake: 14.9 ± 2.6 years old (6 to 18 years old)Average tumor size: 13.9 ± 7.8 mm (5.1 to 45.0 mm)

- Out of 116 people whose tumors were diagnosed as malignant or suspicious for malignancy, 102 received surgery (benign nodule: 1; papillary cancer: 100; poorly differentiated cancer: 1).

Prepared based on the material for the 31st Prefectural Oversight Committee Meeting for Fukushima Health Management Survey

These are the results of the Preliminary Baseline Survey, which was the very first Thyroid Ultrasound Examination (FY2011 to FY2013).

Examinees diagnosed as Grade A in the Primary Examination accounted for 99.2% of the total, while those diagnosed as Grade B accounted for 0.8%. It became clear that most of those diagnosed as Grade A2 had cysts of 20 mm or smaller and that those diagnosed as Grade B had nodules of 5.1 mm or larger.

In the Confirmatory Examination, as a result of a more accurate ultrasound examination and other tests, 34%, or approximately one out of three who received the Confirmatory Examination, were diagnosed as being equivalent to Grade A and were recommended to receive the next periodic examination (Full-scale Survey) in the same manner as those diagnosed as Grade A in the Primary Examination. This is because those who were suspected to have any abnormalities were diagnosed as Grade B just to be safe in the Primary Examination, and such people include those eventually diagnosed as Grade A in the Confirmatory Examination as a result of comprehensive and objective judgments through a more detailed examination, etc.

Among the examinees whose results of the Confirmatory Examination were finalized, 66% were shifted to ordinary medical care covered by health insurance, and appropriate measures are determined by the responsible doctor, based on individual findings and circumstances.

Furthermore, 39.7% went through fine-needle aspiration cytology, and 116 examinees were diagnosed as malignant or suspicious for malignancy. Out of these examinees, it is known that 102 had surgery. However, not all the patients who are diagnosed as malignant or suspicious for malignancy are indicated for immediate surgery, and the decisions are made depending on the individuals' situations after the consultation among physicians, examinees, and their families.

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