



This is Kodama speaking. Thank you for this. I'd like to start with an overview of HICARE.



The Japanese name for HICARE is extremely long, and the English name is the Hiroshima International Council for Health Care of the Radiation-Exposed, from which the acronym HICARE comes.

HICARE was established in 1991 as a coalition of eight organizations and two governments involved in the medical treatment of atomic bomb victims in Hiroshima.

As you can see, the eight organizations are the Hiroshima University School of Medicine, the Hiroshima University

Hospital, the Research Institute for Radiation Biology and Medicine at Hiroshima University, the Hiroshima Prefectural Medical Association, the Hiroshima City Medical Association, the Radiation Effects Research Foundation, the Hiroshima Atomic Bomb Casualty Council, and the Hiroshima Red Cross Hospital & Atomic Bomb Survivors Hospital.

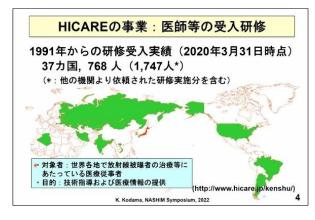
The two governments are Hiroshima Prefecture and Hiroshima City.

## 放射線被曝者医療国際協力推進協議会 (HICARE) - 設立の目的 -

人類で最初に原子爆弾による惨禍を被った広島が有する 原爆被爆者治療の実績及び放射線障害に関する調査研究 の成果について、国内外の被曝者の医療に有効に生かし ていくための体制をつくり、もって広島の世界への貢献 と国際協力の推進に資する。

> (http://www.hicare.jp/about/) K. Kodama, NASHIM Symposium, 2022

As it says here, the reason HICARE was established was to take the results of research on radiation damage and experience in treating atomic bomb victims in Hiroshima, the first city in the history of mankind to suffer the ravages of the atomic bomb, and create a system to effectively use this experience in the medical care of victims of atomic bombings and radiation exposure in Japan and abroad as part of Hiroshima's contributions to the world and international cooperation.



institutions.

Let me explain HICARE's projects. First is a training program for doctors. Medical personnel around the world involved in treating people exposed to radiation are eligible for this program. Its purpose is to provide technical guidance and medical information.

HICARE was established in 1991, and as of the end of March 2020, it has accepted 768 trainees from 37 countries.

The number in parentheses is 1,747 people.

This figure includes training results requested by other



We also have an initiative where we dispatch experts.

These classes are for medical workers involved in the treatment of people exposed to radiation around the world, the same as the trainees mentioned above.

The purpose is also the same, to provide technical guidance and medical information.

This picture was taken in December 2009, when we hosted a training session in Torrance, California, USA.



Raising public awareness is part of the effort, and first and foremost, we host lecture events.

These are aimed at citizens of Hiroshima Prefecture and raise awareness on the significance and necessity of promoting international cooperation on medical care for victims of radiation.

This photograph was taken in February 2016, the year of the 70th anniversary of the atomic bombing, when I gave a lecture at the HICARE International Symposium on the 70th

Anniversary of the Atomic Bombing entitled, "Succession and International Contribution of Medical Care Systems for Atomic Bomb Victims in the 70th Anniversary of the Atomic Bombing".



We also have publishing projects to raise public awareness. In 1992, we published a handbook of medical treatment for atomic bomb victims.

The Effects of A-Bomb Radiation on the Human Body was published in 1992.

This was created for medical workers and is sometimes called the white paper on medical care for atomic bomb victims.

The English version was published in 1995.

The first edition was published initially in 1992, and the second

edition, which incorporated subsequent research and new findings, was published in 2012.

An abridged Japanese version was created in 2013, then in 2017, the abridged English version was created.



In publishing The Effects of A-Bomb Radiation on the Human Body, professors at NASHIM wrote about the international contributions of HICARE and NASHIM.



Human resource development is also of the utmost importance in the sense of training successors.

As part of this effort, we started out-service courses.

These are aimed at local high school students and aim to develop human resources who can contribute globally.

We give lectures on international contributions to the medical treatment of atomic bomb victims, a project started in 2018.

This photo was taken in 2019 during a lecture at Hiroshima Municipal Hiroshima Secondary School.



Now then, one feature of HICARE is its collaboration with the International Atomic Energy Agency (IAEA).

In May 2014, HICARE was designated an IAEA Collaborating Centre for its project on developing human resources for treating the effects of radiation on human health.

## IAEAとHCARE:人材育成(インターンの派遣)

## IAEA インターンプログラムへの医学生派遣 (2013年~)

- ・目的:グローバルな視点から被曝者医療の意義と必要性を理解し、 広島の有する原爆被爆者治療の実績と研究の成果を承継する 人材を育成するため
- · 対象者: 広島大学医学部医学科4年生
- ・派遣先: IAEA原子力科学応用局ヒューマンヘルス部
- ・第1回:2013年10月1日~12月31日
- ・第2回:2015年10月5日~2016年1月4日
- 第3回:2016年10月1日~12月31日
- 第4回:2017年10月1日~12月31日
- 第5回:2018年10月1日~12月31日
- ・第6回:2019年4月1日~6月1日



(http://www.hicare.jp/jaea/)

K. Kodama, NASHIM Symi ım, 2022

We have several projects as a Collaborating Centre, and one that we place particularly high importance on is internships for human resource development.

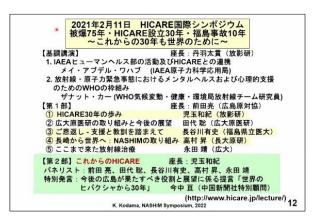
This started in 2013 as a way to send medical students to the IAEA intern program.

The purpose is to foster human resources who understand the significance and necessity of medical care for atomic bomb victims from a global perspective and who will carry on Hiroshima's experience and research in treating such victims.

As mentioned earlier, students in their fourth year at Hiroshima University School of Medicine are eligible for this program, and these students are dispatched to the Human Health Campus in Nuclear Medicine at IAEA.

The first batch of students was sent in 2013, and we sent students six times after that, but had to suspend this in 2020 and 2021 due to the COVID-19 pandemic.

This is the first group sent to the internship program.



Then, in February of last year, we hosted the HICARE International Symposium.

The main theme of this symposium was to reflect on the 75th anniversary of the atomic bombing, the 30th anniversary of the foundation of HICARE, the 10th anniversary of the Fukushima nuclear accident, and then what to do for the world over the next 30 years.

Part one and two of the symposium were held after keynote speeches.

In the first part, I explained the 30-year history of HICARE, then Professor Hasegawa from Fukushima Medical University gave a lecture on lessons learned from the accident and on how to repay the support received, and Professor Takamura from Nagasaki gave a lecture on NASHIM's efforts from Nagasaki to the world.

In the second part, a roundtable discussion on the future of HICARE was held in which I served as the chair and Professor Hasegawa from Fukushima and Professor Takamura from Nagasaki participated in the discussions.

Then, Imanaka, a special advisor to the Chugoku Shimbun, made a special comment regarding proposals on the future role and prospects of Hiroshima.



The day after the symposium, local newspapers reported that an online commemorative symposium for the 30th anniversary of HICARE was held, reporting that the major points of discussion at this symposium were that training the next generation of people who would carry on the medical care of atomic bomb victims was an urgent issue, and that HICARE should collaborate with Nagasaki and Fukushima rather than work alone.



This concludes my presentation. Thank you for listening.