

Moxafrica's Tour of Japan – November 2016 ...with thoughts of tsunamis, some of which keep us awake at night

by Merlin Young

There was really no opportunity for reflection on our road trip that lasted nearly four weeks, took in seven cities, included 13 train journeys and one internal flight, 16 presentations and one extended press interview along the way, complete with a precious pilgrimage to Ibuki mountain (the home of moxa), while sleeping in 12 different beds and endlessly unpacking and repacking suitcases. This was always going to be an incredibly ambitious and busy trip which involved an extraordinary amount of organisation and co-ordination – all credit for this going to Junji (Mizutani) and Yuki (Itaya) both of whom also made wonderful travelling companions for my wife Jo and myself – as well as all four of us benefitting from each other's support and the constant assistance from the many people who were so incredibly helpful to us along the way. All in all this made it an almost completely smooth experience.

I say 'almost' because that was until Jo and I took off by ourselves for a couple of final days R&R at the end of the trip (hoping for some important reflection before flying back to the UK). And where better place to do so than at the beautiful bay of Matsushima in Miyagi Prefecture? After all, this was the bay which haiku master Basho Matsuo had set his heart on back in the 17th century while he'd been moxa-ing himself back in Edo/Tokyo in order to set himself up for his own (far tougher and much longer) road trip. It was also where (on his arrival) he'd found himself so lost for words that he composed what were not quite the finest seventeen syllables of his wonderful career (you can look the Matsushima haiku up and decide for yourself!).

Well, we found Matsushima bay to be pretty much what Basho had cracked it up to be – a truly beautiful bay dotted with over 200 pine-clad islands, the nearest of which we could even access on foot soon after we arrived by means of an elegant red footbridge that was only 30 yards from our waterfront hotel (neither of which would have been there in Basho's day of course). What a great place to have come to in order to take stock and reflect!

... until 6 the next morning when we were shocked out of sleep by a 6.9 magnitude earthquake that seemed to go on and on, shaking our hotel while at the same time instantly and utterly demolishing our sense of security.

Within seconds of the quake stopping the sirens started, and shortly after we began to hear tannoy announcements rolling across the town (though owing to our dire understanding of Japanese we could understand nothing of what they said). At least we knew that the hotel was still intact – but were they telling everyone on the waterfront to leave for higher ground? After all, Miyagi Prefecture along with its people still bears many scars from the dreadful earthquake and consequent tsunami of 2011.

We soon found out from the hotel manager's broken English that it was "okay" – though he also seemed to be saying that a tsunami of one metre was on its way. He then added that this was expected to be three metres high at Fukushima – as if this might reassure us, but was hardly any comfort to hear since the stricken power station along with all of its lethal nuclear fuel rods isn't that far down the coast from Matsushima. Sure enough an hour or so later we had the dubious experience of watching the tsunami roll in from our waterfront hotel balcony.

The first sign of it were trails in the water around the bridge uprights off to our left. No noise, no drag-back of water, no breaking wave – but what was clear as day was that the ocean was literally on the move. Then we began to see signs of the sea beginning to rise, fast but quietly – at least until it broke over the jetty and small waves started slapping out across the concrete. The manager of the hotel, meanwhile, was running up and down in front of the hotel with his smartphone in hand as if he knew something that he hadn't told us...

It wasn't long thankfully before the sea began to recede again. The show wasn't over though – there were five strong aftershocks which made for a couple of secondary smaller tsunamis each of which saw the sea swell a little again, but by afternoon things seemed to have settled. Our sense of security definitely hadn't followed suit though despite our best efforts to take advantage of the surreal good fortune of being able to walk on our own around beautiful temples in a town that is usually full of day-trippers. So no reflections on the trip and on what it may or may not add up to!

In fact it's taken at least another couple of weeks for things to get processed at all, but now at last we're far enough from the experience to be able to summarise some of our thoughts – though

the earthquake and small tsunami still won't yet completely let us be.

Junji, Yuki and I had four main aims for the trip. One was to promote the charity in Japan and raise some money along the way. Another was to share the findings (so far) from the Ugandan RCT with friends and colleagues in Japan. The third (and most important as far as I was concerned) was to excite the interest of research experts in Japan, ones who have existing experience in investigating the immunological effects of moxibustion, in getting actively involved in the wider moxa-tuberculosis research endeavour. Our final aim was to talk about the perilous state of the TB pandemic in other parts of our world, particularly about the rising tide of drug-resistance which threatens to undo all of the progress that's been made in the last 25 years – progress which has hardly been much to shout about anyway given that nearly two million are estimated to still be dying from the disease every year, almost all of whom could be cured. Without appreciating this growing threat of drug-resistance, however, it's impossible to really appreciate the true potential of okyu moxa today.

So did we achieve these aims? It's still too soon to tell, but we do know that after all the expenses have been deducted we raised over \$7,000, which is surely no mean feat – and again all credit for this must go to Junji and Yuki. The added human bonus was the experience of being greeted with such immense warmth and human kindness and generosity along the way and making so many new friends – as well as encountering genuine interest in our modest achievements so far.

The 'pitch' that we were trying to make to potential researchers was roughly as follows:

1. Okyu today is something of a neglected treasure among so many other treasures that make up Japan's rich cultural heritage. It's also an underestimated component in the armoury of Japan's traditional medicine.
2. Globally too little progress has been made in defeating TB, and now lethal drug-resistance is on the move within the ocean of disease, most particularly bearing down on the world's poor who have as yet almost no protection from it.
3. We know that moxa was used for treating TB in Japan in the 1930s before the first TB drugs were discovered, with consistent reports of it having been helpful in promoting recovery.
4. There is more recent Japanese research evidence of moxa promoting immune response – albeit not coherent because of varieties of approach – but there's been no recent Japanese moxa research for TB.

5. The data-so-far from the Ugandan moxa-TB RCT strongly supports those 1930s reports, and furthermore suggest that moxa promotes recovery from tuberculosis even in individuals co-infected with HIV/AIDS.
6. This in turn suggests that this simple cheap low-tech treatment really could save lives in the coming years, including lives which will otherwise be unsavable – but only at only at any sort of realistic scale if it can be coherently and comprehensively tested and proved to be able to do so.
7. Some of those best placed to help do this are those existing researchers in Japan who understand the challenges of moxa research.

We couldn't help but add something else to this though. In our opinion there is also a moral imperative at play here, and we desperately hope that we managed to communicate this as well.

So why has this all got so much to do with tsunamis and tidal waves? Of course, you're probably already well ahead of me here – especially if you're Japanese with first-hand experience of either earthquakes or tidal waves. But let me come at it a little obliquely in case you're not...

First of all, with the benefit of a couple of weeks' hindsight I realise that we were actually in no real personal danger during the unsettling experiences in Matsushima despite the magnitude of the quake. This is because we had the protection of engineering technology that makes most of Japan's building stock so robust. We were also blest with the extraordinary scientific know-how which could in only minutes pinpoint both the location of the quake's epicentre and its depth, and from this could calculate the anticipated height of the resultant tsunami over an hour before it arrived. And even if the wave had been much bigger, I have no doubt that we would have been appropriately advised and would have made it to the sanctuary of higher ground in time, sanctuary which we would have easily found because of the ubiquitous signs around the town telling us the nearest place to go.

In awful contrast, those most at risk from drug-resistant TB in our unequal world have no idea at all about what's bearing down on them – they have no robust infrastructures, nor any early warning system, nor the sorts of defences that are needed to protect them from the approaching deluge. (They don't even have a worried-looking hotel manager running up and down the waterfront to keep them posted of eventualities!). They simply don't have the sort of robust health infrastructure to prevent total collapse when the shaking begins.

A world-renowned economist has recently plotted what's on its way for them however, doing so as part of his analysis of the effects of anti-microbial resistance on the global economy. He did this by using available data in pretty much the same way that the seismologists must have predicted the arrival of our little tsunami that morning three weeks ago – and he's predicted both the size of the wave and where it will cause most damage. He calculates that as things stand **75 million lives** will have been lost to drug-resistant TB by 2050, and that most will be lost in Africa and Asia¹. That amounts to one god-awful tidal wave and it's already on its way, taking lives along the way.

For a moment, allow me to compare these 75 million anticipated casualties to those of the great 1923 Kanto earthquake and tsunami (almost 150,000 estimated to have died), or the terrible Boxing Day tsunami of 2004 in the Indian ocean (with around 250,000 estimated to have died), or the dreadful Great East Japan earthquake of March 11th 2011 (nearly 20,000 either dead or still missing). The death-toll that's predicted from MDR-TB is nearly two hundred times worse than these three catastrophic tsunamis combined, and it's already taking its first casualties.

Dare we even compare this number to the total estimated death toll of World War II (which varies between 50 and 80 million)?

Dear God, shouldn't something be done to reduce this immense death toll and devastation? Well, moxa can't possibly be the be-all-and-end-all response to this crisis, but might it help mitigate some of this disaster, particularly where resources are already so poor? With both our heads and our hearts we reckon that it could be.

One of the high spots of this "tour" was meeting and co-presenting with Dr Hara Hiroshi, the nephew of the late Dr Hara Shimetaro. It was the latter who conducted (as far as we know) the only previous scientific research on small cone direct moxa and TB back in 1929, and his writing on tuberculosis has been a source of constant inspiration since we first came upon it (again, thanks to Junji and *NAJOM*). From this we knew how aware he'd been of the devastation that TB brings with it and how deeply this had affected his own humanity, but we also got to learn a little more about Dr Hara-the-elder in the course of this trip. One of the new things we learnt was that (as a young man) he had helped treat victims of the great Kanto earthquake of 1923, the one which so devastated Yokohama and Tokyo. We also learnt that he had successfully combined his heartfelt Buddhist compassion with the Japanese nationalism which was very much part and parcel of the age

he was living in – and in doing so he had shown himself to be a very decent man. He was someone, for instance, who had always taken the trouble to talk to the young lad who delivered the moxa to his TB hospital on his bike (we were told this by the delivery boy himself who we met in Tokyo because he is now the CEO of Sennenkyu – the biggest moxa-goods company in Japan!).

We've frequently wondered what Dr Hara might think about our own endeavours were he alive today. His nephew has surely been wonderfully encouraging, but what would he think himself?

Of course the world has changed dramatically since those pre-war years when Japanese nationalism was literally aflame across East Asia. Since then it's become clear that seeing one's world so exclusively in terms of a nation state leads to untold suffering. In fact we now have no choice but to recognise that if we still choose to do so it's not just the great project of human progress that's in trouble – it's humanity itself.

Some months ago we came across a beautiful Japanese term that was unfamiliar to us. This was *otagai sama*. We learnt that it reflects the importance of helping each other out in times of need. We also learnt that the term had been used to encourage and facilitate earthquake aid back in 1923, especially from ex-pat Japanese who were resident in the USA. As such we'd like to think that it would have been familiar to Dr Hara when he was helping out at ground zero of the earthquake as a young man. What's more, we wonder whether it also might have been in the back of his mind as part of his subsequent determination to see the common men and women of Japan better protected from the devastation of tuberculosis in the 1930s.

You can recognise an implicit sense of community in the term, but we suspect that back then in 1923 such an idea would have been limited by being a nationalist one. Since we so strongly believe that nationalism is redundant today (certainly in the field of public health), we've taken the liberty of trying to revitalise the term by adding two extra words in order to imbue it with a wider sense of global community. As a result we're now saying *minna issho otagai sama* – that "we are all in this together" – and we made this something of a concluding slogan for our talks.

Would the late Dr Hara be in agreement with this if he were alive today? We don't know, but we hope so.

What we also hope is that our attempts at communicating the idea that we as an acumoxa community have no choice but to do our utmost to work this through together will still be echoing

around in the minds of some of those who came to one of our talks, particularly those who have the appropriate research experience and expertise to help take this endeavor forward further. In fact we secretly hope that they're sounding away in their hearts like those persistent sirens we heard in Matsushima.

A coherent strategy of moxa research is now urgently needed and we know that it's one which is way beyond our own abilities. In fact we think that this will need to be done not just with experts in moxa research but also with experts in TB research (in TB endemic countries). We *must* now see this happen if we hope to find out exactly how moxa might best be used to mitigate the death and devastation coming from this tidal wave of drug-resistant disease that we know is already on its way – because by doing so we just might help some of our most vulnerable fellow human beings reach the higher ground that they deserve.

Furthermore, if this endeavor is completed even half successfully, it means that moxa won't just be properly restored and recognised as being one of Japan's cultural treasures – it will also have proved itself to be a precious gift from Japan to the whole of humanity.

References

1. Antimicrobial Resistance: Tackling a Crisis for the Health and Wealth of Nations. *The Review on Antimicrobial Resistance* chaired by Jim O'Neill. December 2014. Wellcome Trust.

Merlin Young graduated from the College of Traditional Acupuncture (UK) in 1999 and since then has been intensively studying Japanese acupuncture and moxibustion. Following his exposure to the work of Dr. Paul Farmer in Haiti and Peru, he became particularly interested in the subject of drug resistance in tuberculosis and its connections to the politics of global medicine. In 2008, he co-founded the Moxafrica charity to systematically investigate whether Japanese-style direct moxa techniques might be able to combat TB, drug-resistant TB, and even TB in combination with HIV/AIDS in the developing world.

Help Moxafrica Japan Tour – November 2016 Acknowledgements

by Mizutani Junji

The Moxafrica campaign and Merlin Young's speaking tour in Japan started off October 29th, 2016 and ended November 24th as a great success. Mr. Young made 14 presentations between Tokyo (including at WFAS) and Fukuoka on the theme, "The Moxibustion Challenge: Fighting the Spread of Drug-resistant Tuberculosis."

At WFAS, Mizutani Junji and Itaya Yuki were also given the opportunity to hold both a special and general admission panel. I would like to thank Dr Goto Shuji, Dr Katai Shuichi, and Dr Wakayama Ikuro of WFAS for their generous support.

We were also invited to visit the Anti-Tuberculosis Association Research Institute of Tuberculosis Japan (RIT)¹ in Kiyose, Tokyo. With director Dr. Ishikawa Nobukatsu as our guide, we toured the Tuberculosis Prevention Hospital (RIT-Attached Sanatorium now known as the Fukujuji Hospital). Furthermore, Mr Young was able to present the results from Moxafrica's randomized controlled trial in Uganda to the director and three other doctors at our table conference. We are extremely thankful to Dr. Ishikawa Nobukatsu who provided us with the opportunity to see their most recent medical advancements.

On the same day, Mr Young and Matsuda Hirokimi Sensei conducted a four-hour interview for print media made possible by the Morinomiya University Medical Sciences publishing department. With Stephen Brown as the translator, the interview will be published in the spring issue of *Shinkyu Osaka*. We would like to thank the editor of *Shinkyu Osaka*, Miss Oda Hiroko.

Furthermore, the Yamasho moxa manufacturing company arranged for Merlin to visit Mount Ibuki, which he had been wishing to see. We visited Nagahama city, harvested mugwort from Mount Ibuki, viewed the manufacture of moxa and its preservation in *kura* (traditional Japanese store-houses) for Kobayashi Rouho. Thank you, Yamasho Company and Kobayashi Rouho.²

We express our deepest appreciation to the following for providing conference space: WFAS, the Tokyo Eisei Gakuen, the Morinomiya University of Medical Sciences, Urawa Senmon Gakko, Hamamatsu Iryo Gakuin, Tokyo Iryo Senmon Gakko, Nagoya Holy Spirit hospital and Asante-Nagoya,³ and the Aichi Acupuncture-and-Moxibustion Association, Sennenkyu showroom Ginza, Kyoto hub and Nakane Hajime, Kyushu University, the Koshiishi Shinkyu-In, and Kyuho Rinsho Kenkyukai. We'd also like to thank all the teachers and staff who generously donated their time and effort to our cause.

Our tour ended on November 20th with a lecture at Kyuho Rinsho Kenkyukai. On November 21st, Mr and Mrs Young headed northeast to see Miyagi Prefecture's "Moon Over Matsushima," however, they were greeted with an earthquake and tsunami and their tour was, regrettably, cut short.

Later in Tokyo, on November 24th, the Youngs experienced Japan's first snow of the year but made a safe departure for England, their hearts filled with many new experiences and happy memories.

Moxafrica received a total amount of ¥393,017JPY in donations from Seirin Co, Kamaya Moxa Co, Sankei Co, Towatech², Koshiishi Shinkyu-In, Dr Shuji Goto, Mr Shudo Demmei, Mr Kobayashi Shoji, and others. We greatly appreciate your contributions. In addition, our NAJOM members were able to raise \$1,544.25USD in donations. Patients at Junji Mizutani's clinic also raised \$2,695CAD in donations.

With all the donations and sales of Moxafrica goods, our total for Moxafrica Japan was US\$7,000.

We offer our sincere thanks to every individual and organization that directly and indirectly supported Moxafrica: volunteers, companies, NAJOM members, and the friends of this project. We hope you will continue to support Moxafrica in its ongoing efforts to benefit people everywhere.

Translated by Mizutani Chiyo

Notes

1. The Research Institute of Tuberculosis, Japan Anti-tuberculosis Association. <http://www.jata.or.jp/english/index.html>
2. Yamasho, Kobayashi Rouho, Seirin Co, Kamaya Moxa Co, Sankei, and Towatech. See article this issue, page 36: "Hot List of Acupuncture Tools."
3. Asante-Nagoya. <http://asante-nagoya.com/>

YouTube - Help Moxafrica Japan Tour – November 2016

<https://www.youtube.com/watch?v=ujxPsJqxjAo>

<https://youtu.be/N2-No3ivUbg>