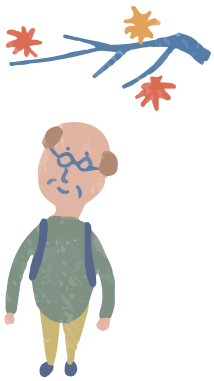


For People Undergoing Ningen Dock

Ningen Dock Guidebook

A manual for making the best use of Ningen Dock (Comprehensive health screening)

Kameda Medical Center

Kameda Health Appraisal Center

Japanese Preventative Medicine at its best:
The Comprehensive Health Checkup - Ningen Dock

The name Ningen Dock (Japanese for “human dock”) was inspired by ships at sea that dock in ports regularly for examinations and any necessary repairs. The program is designed to provide individuals with a thorough health assessment, including various medical tests and examinations.
The Ningen Dock program relies in the concept that early detection and treatment of health problems could improve overall health outcomes and increase life span.
The program started in 1954. The program quickly gained popularity, and it soon spread in the Japanese society. Many Japanese people nowadays regularly undergo Ningen Dock.
Today, the Ningen Dock program can be one of the cornerstone of Japanese healthcare, and it is often cited as an example of successful preventative medicine. The program has helped to detect many health problems early, which is believed to contribute to better health outcomes for individuals and reduce early death.
The development of this “comprehensive health checkup system” may be one reason for Japan’s long-life expectancy.
This comprehensive health checkup system is designed to provide individuals with a detailed assessment of their health status and identify potential health risks before they develop into more serious conditions. Here are some advantages of the Japanese Ningen Dock:

1. Comprehensive testing: The Ningen Dock is a comprehensive health checkup system that includes a battery of tests, including blood tests, chest X-rays, and ultrasound scan. These can be combined with other advanced diagnostic tests such as endoscopy, computed tomography (CT) scans, and magnetic resonance imaging (MRI). These tests can help detect potential health problems early before they become more serious or difficult to treat.

2. Personalized medical examination: An added value of this system is that optional tests and examinations can be selected. As an example, the general condition and risk of a 60-year-old smoker could be evaluated by adding Pulmonary screening (Lung Dock), Colonoscopy, Cerebral screening (Brain MRI/MRA) and tests for arteriosclerosis. The idea is to be able to perform a tailored examination that is better suited to the individual.

3. Convenience: The Ningen Dock is designed to be a one-stop-shop for all your health screening needs. Rather than having to visit multiple specialists and undergo various tests at different locations, the Ningen Dock provides everything in one place, making it convenient and efficient.

4. Peace of mind: By undergoing a comprehensive health screening, individuals can gain peace of mind knowing that they are taking proactive steps to protect their health. This can help reduce anxiety and stress related to potential health issues.

5. Cost-effective: The Ningen Dock is often more cost-effective than undergoing multiple tests and consultations with multiple specialists. Additionally, catching potential health issues early and can possibly help avoid more expensive medical treatments down the line.

6. Personalized health recommendations: Based on the results, the Ningen Dock provides personalized health recommendations to each individual. These may include lifestyle changes, such as diet and exercise, or specific medical interventions to address any issues that were identified.

7. Follow-up care: After the examination, individuals receive a report detailing their health status and any recommended follow-up care or treatment.

Overall, our program provides a comprehensive and personalized approach to preventive healthcare, which can help individuals identify potential health risks early and take proactive steps to protect their health.

Kameda Health Appraisal Center provides Ningen Dock services to detect and prevent diseases in order to help you maintain your health.

This manual has been prepared so that you can understand and get the most out of the Ningen Dock services we offer. The contents include: (1) Objectives of Ningen Dock; (2) Description of the basic course and optional tests and examinations; and (3) Screening plan.

The screening plan is a guide for planning which options should be chosen and at what intervals, and is a key to an effective Ningen Dock. This manual shows you how to choose effective options. Even if you have already made a reservation for a Ningen Dock, please refer to this guide as it is important to plan for future check-ups from a long-term perspective.

We have also included information on the effectiveness, limitations, and disadvantages of Ningen Dock as what you should know before the examination. In addition, the Q&A section answers various questions about Ningen Dock. We hope that you will find the correct information and have an effective check-up.

4 Tips for Effective Ningen Dock!

1. Think long term when making a comprehensive health checkup plan
2. Make sure you do not just get screened
   - Get a thorough examination and treatment
   - Pay attention to your daily lifestyle
3. Understand the characteristics of each test/ examination
4. Understand the limitations and disadvantages of screening

Table of Contents

1 Objectives of Ningen Dock

The purpose of having a Ningen Dock is to maintain good health. The three major roles of Ningen Dock are to detect cancer in its early stages, to detect lifestyle diseases, and to confirm that you are in good health. This section explains why these are important.

1. Detecting Cancer at an Early Stage

Many cancers are curable, and death can be avoided with early detection. Cancers detected early can be treated with simpler procedures. For example, regular endoscopic examinations for gastric and colorectal cancers can lead to early detection, and those detected are less likely to be fatal.

Advice for efficient detection of cancer

The cancers that are common, cause the most deaths, and for which screening is considered more useful for detection are determined by gender and age. In particular, screening is expected to be effective for lung, gastric, colorectal, breast, prostate, cervical, and uterine cancers. It is important to develop a long-range screening plan with the goal of early detection of these cancers. It is essential to decide which options to choose and at what intervals, so please refer to our planning guide and description of options.

The best plan takes into account your cancer risk (susceptibility to cancer), the characteristics of each examination (advantages, weaknesses, and disadvantages), and your preferences. When you undergo a Ningen Dock, have the results explained to you and discuss your future screening plan with the doctor.

2. Detecting Lifestyle Diseases

Lifestyle diseases include hypertension, diabetes, hyper LDL-cholesterolemia, low HDL-cholesterolemia, and hypertriglyceridemia. If left untreated, arteriosclerosis may progress, resulting in myocardial infarction, stroke (cerebral infarction, cerebral hemorrhage, subarachnoid hemorrhage), blindness, or the need for dialysis in the future. Myocardial infarction and stroke are serious illnesses that may cause premature death or render the patient bedridden. Dementia is also more likely to occur. Detecting lifestyle diseases through Ningen Dock and treating them will help prevent serious diseases in the future.

Advice on lifestyle diseases

Many lifestyle diseases are caused by poor habits such as overeating, lack of exercise, smoking, and excessive alcohol consumption. Simply detecting lifestyle diseases during Ningen Dock is not good enough to prevent diseases. It is most important to improve your lifestyle. Please use Ningen Dock as an opportunity to review your habits.

3. Confirming that You Are Healthy

By having a Ningen Dock, many people want to confirm that they are in good health, and to give them the vitality to live well. We believe that an important role of Ningen Dock is not only to detect illness, but also to provide peace of mind.

2 Details of the Basic Ningen Dock Course

Details of Ningen Dock

Ningen Dock includes tests/examinations performed as part of the basic course and additional options.

Basic Course

＊Overnight course only

- Physical measurements
- Blood pressure
- Doctor's consultation
- Blood test
- Urinalysis
- ECG
- Chest X-ray
- Respiratory function test
- Ophthalmological examination
- Hearing test
- Fecal occult blood test
- Abdominal ultrasound
- Upper gastrointestinal X-ray
- Explanation of results
- Glucose tolerance test＊
- Lifestyle support (support for prevention of lifestyle diseases)

Basic course fees (tax included)

One-day **52,800** yen　Overnight **94,600** yen

Options

- Upper gastrointestinal endoscopy
- *H. pylori* test (exhalation method)
- Colonoscopy
- CT colonography
- Sputum cytology
- Lung CT
- Male PSA (prostate cancer screening)

Breast cancer
- Mammography (Breast X-ray)
- Breast ultrasound

Gynecological exams
- Cervical (vaginal) cytology
- Gynecological ultrasound
- HPV test
- Endometrial cytology

- Brain imaging (MRI/MRA)
- Thyroid test
- Vascular age assessment (PWV/ABI)
- Bone density test
- HIV test
- PET-CT

• In addition to the basic course, we also offer a course without upper gastrointestinal X-ray (barium swallow) examination. Please call for details.

New Options

- CT coronary angiography
- Pancreatic Dock
- Muscle and walk test
- Breast tomosynthesis
- Tomography of the macula of the retina

Major Diseases Targeted for Detection in the Basic Ningen Dock Course

Obesity, Lifestyle diseases (hypertension, diabetes, dyslipidemia, hyperuricemia), anemia, kidney disease, chronic hepatitis, emphysema and lung disease, arrhythmia, heart disease, aortic aneurysm, gall bladder and pancreas disease, diseases causing blindness such as glaucoma, gastric cancer, colorectal cancer, kidney cancer, liver cancer, etc.

3 Description of Items of the Basic Ningen Dock Course

This section describes each of the core items of the basic course. For an effective Ningen Dock, please combine the options described below in an appropriate manner.

Physical measurements	BMI	• Used to evaluate proper weight. 22 is optimal. 25 and above is overweight, and less than 18.5 is underweight.
	Normal weight	• Indicates your ideal weight.
	Body fat percentage	• This is the percentage of fat in the body.
	Waist circumference	• It reflects the amount of fat in the internal organs. Visceral obesity is defined as a circumference of 85 cm or more for men and 90 cm or more for women.
Blood pressure		• This is to check for hypertension. Hypertension can cause stroke, myocardial infarction, dementia, etc.
Glucose metabolism	Fasting blood glucose	• This test is to check for diabetes. Diabetes can cause kidney damage, blindness, atherosclerotic diseases (myocardial infarction and cerebral infarction), etc.
	Hemoglobin A1c	• This test is to check for diabetes. If high, diabetes is suspected.
	Glucose tolerance test*	• It checks for diabetes or borderline diabetes by examining the degree of blood glucose elevation after taking sugar.
Lipid metabolism	Total cholesterol	• This is the cholesterol level in the blood. It is evaluated by dividing it into LDL (bad) cholesterol (below) and HDL (good) cholesterol, with LDL (bad) cholesterol being the most important.
	HDL cholesterol	• It is the good cholesterol. When lowered, it may contribute to atherosclerotic disease such as myocardial infarction.
	LDL cholesterol	• It is the bad cholesterol. If elevated, it can cause atherosclerotic disease such as myocardial infarction.
	Triglycerides	• Elevated levels can lead to atherosclerotic disease, including myocardial infarction. It can also be a cause of pancreatitis.
Uric acid		• Elevated levels can cause gout, urinary stones, kidney disease, and can lead to atherosclerotic disease.
Blood tests for liver, biliary system, etc.	AST/ALT	• These are mainly used to check for liver disease. Elevated levels may indicate hepatitis.
	γ-GT	• Elevated in alcohol consumption, biliary and liver diseases, etc.
	ALP	• It is mainly elevated in biliary and liver diseases, and may also increase in bone and thyroid disease.
	Total bilirubin	• Elevated in liver and biliary diseases, special anemia, etc. Some people are predisposed to high levels.
	Direct bilirubin	• Increases with liver and bile duct diseases.
	Total protein	• The amount of protein in the blood. Abnormal values may be seen in kidney, liver, and blood diseases.
	Albumin	• It may decrease due to kidney or liver disease.
	LD	• May be elevated in various disorders such as liver, blood, and heart diseases.
	Ch-E	• Abnormal values are observed in various diseases, but this test alone is rarely diagnostic and is used only as a reference. It is also elevated in cases of obesity and fatty liver.
	Amylase	• May be elevated in pancreatic and salivary gland diseases.
Kidney function	Estimated GFR	• Decreases with poor kidney function. This value is central to the evaluation of kidney function in blood tests.
	Creatinine	• Increases with poor kidney function.
	Urea nitrogen	• It reflects kidney function, etc.
Urinalysis	Protein	• If positive, kidney disease is suspected.
	Occult blood	• Positive results may indicate urinary tract or kidney disease. Note that a positive test is not a problem if no abnormalities are found in red blood cell sediment below.
	Glucose	• May be positive in diabetes etc.
	Urobilinogen	• Abnormal values may be observed in liver and biliary diseases and hematological disorders.
	pH/specific gravity	• Abnormal values are observed in kidney disease, etc., but fluctuations are large even if normal.
Sediments	Red blood cells	• This test examines whether there is blood in the urine. It provides a more accurate assessment of the presence of blood than the urine occult blood test. They increase with urinary tract and kidney diseases and urinary tract cancer. Slight increases are also common in the absence of abnormalities (especially in women).
	White blood cells	• They may be increased by infection of the urinary tract. Increases are common with no pathological significance (especially in women).
	Squamous/transitional/tubular epithelia	• These are the epithelial (wall) cells of the urinary tract and kidneys. They are used as a reference when evaluating the urinary sediment.
	Bacteria/fungi	• Positive with urinary tract infection, but can also be positive due to contamination in the absence of infection.

✻Overnight course only

Electrolytes	Na (sodium), K (potassium), Cl (chloride)	• Abnormal values may be observed in various diseases such as kidney disease, hormonal disorders, etc.
	Ca (calcium)	• Abnormal values may be observed in kidney disease, hormonal disorders, malignant tumors, etc.
	P (phosphorus)	• Abnormal values may be observed in kidney disease, hormonal disorders, etc.
Blood counts	White blood cells	• Increase with inflammation. Can also go up or down with blood diseases (e.g., leukemia).
	Red blood cells Hemoglobin Hematocrit	• These tests are primarily used to determine if anemia is present.
	MCV MCHC MCH	• These values are used as a reference to estimate the cause of anemia, if present.
	Platelet	• Decreases with liver cirrhosis and may go up or down with blood diseases, etc.
	Hemogram	• It examines the type of white blood cells. Changes are seen in leukemia and inflammatory diseases.
Serum	CRP	• Elevated when there is inflammation in the body.
Hepatitis virus	HBs antigen	• Positive results indicate that hepatitis B virus is present in the body.
	HCV antibody	• If positive, it is suspected that hepatitis C virus is present in the body.
Visual acuity		• In the health check-up, 0.6 or less is considered deficient. Note that since this is not a fully corrected visual acuity (with spectacle lenses optimally adjusted) and a simple instrumental method is used, it is difficult to determine whether low visual acuity is pathological or not. The values should be used as a reference only.
Intraocular pressure		• High values may indicate glaucoma or other diseases.
Fundoscopy		• This examination is mainly used to check for disorders that can cause blindness, such as glaucoma, diabetic retinopathy, retinitis pigmentosa, and age-related macular degeneration.
Hearing test		• Hearing is tested in the 1000 Hz and 4000 Hz ranges. 1000 Hz is the range used for actual conversations. The 4000 Hz range is used for early detection of mild hearing loss.
Chest X-ray		• Lung diseases etc. are evaluated with X-rays. Lung cancer can be difficult to detect. If you are concerned, please consider the optional lung CT.
Respiratory function test		• This test is used to check for lung diseases such as emphysema based on the forced vital capacity and forced expiratory volume in 1 second (volume of air exhaled in the first second).
ECG		• This is used to check for arrhythmia, heart disease, etc.
Upper gastrointestinal X-ray		• This is a barium swallow test of the stomach. The stomach, esophagus, and duodenum are imaged. The main purpose is to detect gastric cancer. For a more accurate screening test, upper gastrointestinal endoscopy is available as an option.
Fecal occult blood test		• The purpose is to detect colorectal cancer. Having a fecal occult blood test every year and undergoing a thorough examination in case of a positive result is the first and most effective way to prevent colorectal cancer deaths. For a more accurate screening test, colonoscopy and CT colonography are available as options.
Abdominal ultrasound		• Ultrasound is used to examine mainly the liver, gallbladder, pancreas, kidney, spleen, and aorta. The primary goal is to detect cancers of the kidneys, liver, etc. Observation may not be possible due to gastrointestinal gas, condition of the organs, or abdominal fat content. Diagnosis of the pancreas in particular can be difficult because it is located deep in the body. If you are concerned, please consider the optional pancreatic Dock.
Doctor's consultation		• Medical history is compiled from the questionnaire and consultation. The doctor will make sure that the health check-up can be performed safely.
Metabolic syndrome		• The presence or absence of metabolic syndrome, a condition that increases the risk of atherosclerotic disease (myocardial infarction, cerebral infarction, etc.) due to visceral obesity, is determined. People who meet the criteria have metabolic syndrome. Those who do not fall under these criteria are classified as normal, and there is another category of those with potential metabolic syndrome.
Specific health guidance level		• Specific health guidance is support for improving lifestyle provided by health insurers. People whose specific health guidance level is “Proactive Support” or “Motivational Support” may be eligible for this guidance. For details, please contact your health insurer (municipality, Japan Health Insurance Association, Health Insurance Society, etc.).
Explanation of results		• You will be given an explanation of the results of blood parameters, endoscopy, etc. for which results are available on the day of the examination. You will learn important information and precautions. Future health check-up plans and lifestyle precautions can also be discussed. This is important because receiving and understanding the explanation of the results can enhance the effectiveness of Ningen Dock.

Lifestyle support	• Nurses ask people with lifestyle diseases about their daily habits, particularly diet and exercise, and provide support to help them improve their lifestyles. Since improvement of lifestyle is the most important factor, we encourage you to make use of this support service.

4 Description of Optional Tests/Examinations

For a successful Ningen Dock, it is important to effectively incorporate options. This section describes the options. We have included recommendations based on the expected usefulness and disadvantages of each test/examination.

Please note that for most of the screenings, there is no scientific model answer as to the starting age or the interval at which they should be taken. However, in order to provide a guideline for effective screening, we have described as specifically as possible the age at which each examination should be started and the interval at which it should be performed.
*The intervals listed are for those with no abnormalities.

Upper gastrointestinal endoscopy

Recommendation ★★★

Peroral: Fee **5,500** yen (tax included)
Nasal: Fee **7,700** yen (tax included)
For use of analgesics or sedatives: Separate medical safety management fee of **3,300** yen (tax included)

In this examination, commonly known as a "stomach camera," not only the stomach but also the esophagus and part of the duodenum are observed. The main purpose is to detect gastric and esophageal cancer; detection at an earlier stage can be expected than by upper gastrointestinal X-ray (barium swallow).

Major target diseases
Gastric cancer, esophageal cancer

Recommended age and interval
Age 30 and older…Every year

H. pylori test (exhalation method)

Recommendation ★★★

Fee **5,500** yen (tax included)

This is a test for *H. pylori*, which causes diseases such as gastric ulcers and cancer. If positive, eradication therapy can reduce the risk of developing gastric cancer. The test does not need to be repeated, so it is highly recommended to have it done once.

*This cannot be combined with upper gastrointestinal X-ray (barium swallow).

Helicobacter pylori

Recommended age
All ages
(Testing for *H. pylori* is recommended for young people in their teens and 20s)

Trivia

The occurrence of gastric cancer is mostly determined by *H. pylori* and the condition of the gastric mucosa. If your endoscopy shows no evidence of atrophic or chronic gastritis and *H. pylori* test is negative, you are unlikely to develop gastric cancer. You are also less likely to develop esophageal cancer if you do not smoke or drink alcohol.

Colonoscopy

Recommendation ★★★

Fee **33,000** yen (tax included)
(Single course: **41,800** yen [tax included])
For use of analgesics or sedatives:
Separate medical safety management fee of 3,300 yen (tax included)

This test is known as a "camera for the large intestine." It is the most accurate and recommended colorectal cancer screening method. Its main purpose is to detect colorectal cancer, and the entire colon is examined. Since 1983, our center has been a pioneer in colorectal cancer screening using colonoscopy. Please consider this option.

*In the case of one-day Dock, the examination has to be performed on a different day.

Major target diseases
Colon cancer

Recommended age and interval
Age 40 and older…Every 3 years

In order to further improve the accuracy and achieve near perfection, it is recommended to have the first and second exams 2 years in a row, and then every 3 years thereafter.

CT colonography

Recommendation ★★★

Fee **33,000** yen (tax included)
(Single course: **38,500** yen [tax included])

This is recommended for people who do not wish to have a colonoscopy. CT colonography is a highly accurate screening method that uses CT and image processing to construct a virtual 3-dimensional endoscopic image to detect colorectal cancer. The disadvantages are that it is difficult to detect small or flat lesions, some areas around the anus are not easily seen, and inadequate colonic distension reduces the diagnostic ability. It should be considered the second most accurate test after colonoscopy.

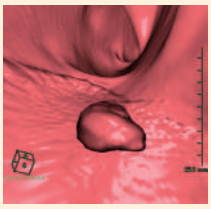
*The examination itself is less taxing than colonoscopy, but requires some preparation beforehand, such as drinking a colon-cleansing formula. Two types of colon-cleansing methods are available: the simple and the standard methods. Please see Q&A9 on page 21.

*If your results require a full examination, you will need to have a colonoscopy. In addition, those who take a fecal occult blood test may be recommended to change to a colonoscopy if the fecal test is positive prior to CT colonography.

*Please note that if you have a medical history (e.g., polyps) and have been instructed to follow up with a colonoscopy, it is best to have a colonoscopy instead of a CT colonography.

Major target diseases
Colon cancer

Recommended age and interval
Age 40 and older…Every 5 years



Sputum cytology

Recommendation ★★☆

Fee **5,500** yen (tax included)

The purpose is to detect lung cancer. There are cancers that are not detected by chest X-ray or CT lung scan, but are found only by sputum. This examination is recommended for people with a history of smoking and sputum production.

*Please note that cytological diagnosis may be difficult depending on the condition of the specimen (especially for those who do not produce sputum).

Eligible people
Smokers and those with a smoking history: Number of cigarettes smoked per day × number of years smoked exceeding 600 cigarettes.

Major target diseases
Lung cancer

Recommended age and interval
Age 50 and older…Every year

Lung CT

Recommendation ★★★

Fee **16,500** yen (tax included)

This is a detailed X-ray examination using CT. Since it is difficult to detect small lung cancers in the early stage by conventional chest X-ray alone, we aim for early detection by CT. If you are a smoker or have smoked in the past, please consider this option.

*It is highly accurate, but due to the nature of the examination, it may be difficult to detect tumors outside of the lung field.

Major target diseases

Lung cancer

Recommended age and interval

Those who are age 50 or older and whose "number of cigarettes smoked per day × number of years smoked" is 400 or more (including past smoking): Every year

Non-smokers, smokers who do not fall into the above category, and past smokers: Age 50 and older…Every 3 to 5 years; Age 40 to 49…Every 5 years

Trivia

According to reports from Europe and the US, smokers have a 10 to 20 times higher risk of developing lung cancer, and 80 to 85% of lung cancer patients were smokers. Please remember that the most important thing you can do to prevent lung cancer is to quit smoking.

Brain imaging (MRI/MRA)

Recommendation ★★☆

Fee **33,000** yen (tax included)

Brain imaging is used to detect cerebrovascular disorders, such as aneurysms which cause subarachnoid hemorrhage and cerebral infarctions, as well as brain tumors. Please consider it if you have hypertension, are obese, smoke, or have a family member who has had a stroke.

Major target diseases

Cerebral aneurysm, cerebral infarction

Recommended age and interval

Age 40 and older…Every 3 to 5 years

Vascular age assessment (PWV/ABI)

Recommendation ★★☆

Fee **5,500** yen (tax included)

It examines the stiffness of blood vessels and the clogging of vessels in the lower limbs. This is especially recommended for people with lifestyle diseases and risks (hypertension, diabetes, dyslipidemia, smoking), as they are more likely to develop arteriosclerosis. This is a simple test conducted by wrapping a measuring device around the upper and lower limbs.

Major target diseases

Arteriosclerosis

Recommended age and interval

Age 40 and older…Every 3 years

Bone density test

Recommendation ★★★

Fee **5,500** yen (tax included)

The femur is examined for the presence of osteoporosis using an X-ray technique called DXA. Osteoporosis increases the risk of fractures from falls. In particular, a fracture of the femoral neck can make the patient bedridden, which should be avoided. Detecting and treating osteoporosis can reduce the risk of fractures.

Major target diseases

Osteoporosis

Recommended age and interval

Female Once between the ages of 20 and 40
Age 40-60 ... Every 5 years
Age 60 and older ... Every 2 to 3 years

Male Once between the ages of 20 and 50
Age 50-70 ... Every 5 years
Age 70 and older ... Every 2 to 3 years

HIV test

Recommendation ★★☆

Fee **5,500** yen (tax included)

This is a blood test for HIV (human immunodeficiency virus), the cause of AIDS. HIV treatment has been advancing, and if detected and treated early, patients can survive for a long time.

*Notification of the result will be sent to the designated address apart from the result sheet.

Major target diseases

HIV infection

Recommended age and interval

None in particular

Thyroid test

Recommendation ★☆☆

Fee **16,500** yen (tax included)

Ultrasound is used to check for thyroid cancer, and blood tests examine thyroid hormones etc. (TSH, FT4, anti-thyroid peroxidase antibodies).

Eligible people

People concerned about thyroid cancer. Those concerned about hypothyroidism or hyperthyroidism.

Major target diseases

Thyroid cancer, thyroid function abnormalities

Recommended age and interval

*Thyroid tests are not highly recommended because of the likelihood of overdiagnosis.

PET-CT

Recommendation ★★☆

Option fee in Ningen Dock: **90,200** yen (tax included)
(Single course: **107,800** yen [tax included])

It aims to detect cancer in many organs at once by combining a special procedure called PET with CT.

*However, not all cancers can be found. Some cancers are microscopic or difficult to detect with PET-CT (e.g., gastric, cervical, prostate, and kidney cancers). Therefore, it is recommended to combine this with other options.
*PET-CT has to be performed on a different day from your Ningen Dock.

Major target diseases

Various types of cancer

Recommended age and interval

Age 50 and older…Every 2 to 5 years

Women's Cancer Screening

Breast examination | **Breast cancer**

Fees (tax included): (1 item) **6,600** yen; (2 items) **11,000** yen

Mammography (breast X-ray)

Recommendation ★★★

A breast X-ray is used to check for breast cancer. It is the most recommended breast cancer screening for middle-aged and older women.

Recommended age and interval
Women aged 40 and older…
Every year

Breast ultrasound

Recommendation ★★★

The purpose is to check for breast cancer that may not be visible on mammography. Breast cancer, especially in young women, is often invisible on mammography, so ultrasound is effective when used in combination with mammography.

Recommended age and interval
Women aged 30 and older…
Every year

It is recommended that women undergo breast cancer screening and perform monthly breast self-examination. If a lump appears, consult a breast doctor.

Fees (tax included): (1 item) **6,600** yen; (2 items) **11,000** yen; (3 items) **16,500** yen
(**4,400** yen for HPV test)

Gynecological exams | **Cervical cancer, uterine cancer, ovarian disease**

Cervical (vaginal) cytology

Recommendation ★★★

The purpose is to detect cervical cancer that forms on the neck of the uterus.

Recommended age and interval
Women aged 20 and older…
Every year

Gynecological ultrasound

Recommendation ★★★

The uterus and ovaries are observed with ultrasound. The purpose is to detect uterine cancer in the body of the uterus.

Recommended age and interval
Women aged 40 and older…
Every year

HPV test

Recommendation ★★☆

Tests for HPV, which causes cervical cancer, for detection. By adding this test to cervical cytology, cervical cancer is less likely to be missed.

Recommended age and interval
Women aged 30 and older…
Every 3 years

Endometrial cytology

Recommendation ★★☆

The purpose is to detect uterine cancer.

*Endometrial cytology can cause pain and bleeding. We recommend that only those who are particularly concerned about uterine cancer apply for this in addition to gynecological ultrasound.

Recommended age and interval
Women aged 30 and older…
Every 3 years

Even if the screening was normal, if you have irregular bleeding, there is a possibility of uterine cancer and you should see a gynecologist.

*Please also see Q&A 7 on page 21 for more information on which options to choose in gynecological screening.
*Please note that cytological diagnosis may be difficult depending on the condition of the specimen.

Trivia

If both the cervical cytology and HPV test are normal, your next cervical cancer screening (cervical cytology or HPV test) can be done in 3 years, since the risk of cervical cancer is low (if this was your first screening, we encourage you to have your next one in 1 year, just to be safe). Since this does not apply to uterine cancer, an annual gynecological ultrasound is advisable.

Men's Cancer Screening

Prostate cancer screening | **Prostate cancer**

Fee **3,850** yen (tax included)

PSA

Recommendation ★★★

Blood tests are performed to detect prostate cancer.

Recommended age and interval
Age 50 and older…Every 3 years

New Options

New optional tests/examinations added in 2019 are described below.

CT coronary angiography

Recommendation ★★☆

Fee **55,000** yen (tax included)

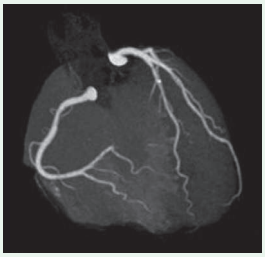
Using a newly introduced, state-of-the-art 320-row CT, the coronary arteries that supply oxygen and nutrients to the heart are examined. It is expected to help prevent myocardial infarction and angina pectoris by evaluating narrowing and blockage of coronary arteries, which was previously possible only through an invasive procedure called cardiac catheterization. Since myocardial infarction contributes to many of the causes of death in Japan, it is important to take preventive measures. CT coronary angiography is especially recommended for people with lifestyle diseases (high LDL cholesterol, diabetes), smokers, and those whose parents or siblings have had myocardial infarction or angina pectoris. If you have chest pain or other subjective symptoms that concern you, please visit an outpatient cardiology clinic instead of having a Ningen Dock. If you have heart disease, please ask your doctor if you can have this examination.
Because of the contrast agent used in CT, this is one of the more physically taxing examinations in Ningen Dock. To avoid adverse reactions, you cannot have this examination if you are: age 75 or older, have impaired kidney function, have asthma, are pregnant, are allergic to contrast media or iodine, or have a defibrillator in your body. Also, if your blood test at the time of your visit indicates low estimated renal function, this examination cannot be performed because it can put too much stress on your body. In rare cases, even if none of the above applies to you, the examination may not be performed (the doctor will make a decision during your Ningen Dock consultation).

Major target diseases

Evaluation of narrowing of the coronary arteries (vessels that supply oxygen and nutrients to the heart) to prevent myocardial infarction and angina pectoris

Recommended age and interval

Although there is no scientifically proven recommendation, due to the taxing nature of injecting contrast media, our center recommends the following.
Age 50 and older…Every 10 years.



Breast tomosynthesis

Recommendation ★★☆

Fee **4,400** yen (tax included)

This examination enables evaluation of the breast three-dimensionally using tomographic images obtained by synthesizing X-ray images taken tomographically from multiple directions. As in mammography, the breast is compressed. While mammography shows overlapping breast tissue on a single photograph, tomosynthesis allows lesions to be evaluated more easily because there is little overlap.

Our center prioritizes the combined use of mammography and breast ultrasound. For a more accurate screening test, please consider adding tomosynthesis.

Major target diseases

Breast cancer

Recommended age and interval

Although there is no scientifically proven recommendation, our center recommends the following.

Age 40 and older with dense breasts…Every year.

Tomography of the macula of the retina

Recommendation ★★☆

Fee **3,300** yen (tax included)

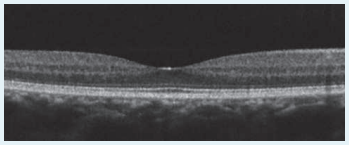
The macula of the eye is an important part of the visual system. This is an examination of the macula using optical coherence tomography (OCT). It aims to detect a disease called age-related macular degeneration, which is one of the leading causes of blindness. This condition is found in nearly 1% of people aged 50 and older, and is more common in older people. Since this procedure allows detailed observation of the layered structure of the retina, it is likely to detect macular disease at an earlier stage than conventional fundus examination, and is expected to contribute to the prevention of the progression of the disease and its treatment.
The following are considered risk factors for age-related macular degeneration. This examination is especially recommended for those who meet any of these conditions: Middle-aged or older, smoker, history of cataract surgery, family history of age-related macular degeneration, male, hypertension, obesity, history of myocardial infarction or angina pectoris, high exposure to ultraviolet light (sunlight) or blue light emitted from computer or cell phone screens.

Major target diseases

Age-related macular degeneration, macular foramina, macular hole.
Glaucoma is not included.

Recommended age and interval

Age 50 and older…Every 2 years



Optional tests/examinations added in FY 2022 are described below.

Pancreatic Dock

Ultrasound with the fluid-filled stomach/MR/contrast CT course Fee **88,000** yen (tax included)
Ultrasound with the fluid-filled stomach/MR course Fee **35,200** yen (tax included)
If ultrasound with the fluid-filled stomach only is performed without MR/contrast CT: **2,200** yen (tax included)

Recommendation ★★☆

The pancreatic Dock is an option to study the pancreas in detail by ultrasound with the fluid-filled stomach, MR, and contrast CT. The purpose is to detect signs that pancreatic cancer is likely to occur. Pancreatic cancer is very difficult to detect in its early stages through screening, and the survival rate is low. Even if a detailed examination is performed, it is not at all clear whether the benefits such as avoiding cancer deaths by early detection can be obtained. However, with the recent increase in deaths from pancreatic cancer, we have started this examination out of a desire to provide some countermeasures.

In ultrasound with the fluid-filled stomach, fluid is retained in the stomach and the pancreas is carefully observed. MR scans can help detect pancreatic duct dilatations, pancreatic cysts, and indirect abnormalities that may be signs of pancreatic cancer development. After detecting these signs, follow-up observation also plays a major role in the early detection of pancreatic cancer. Contrast CT uses contrast injections to delineate the pancreas as finely as possible, helping to identify lesions that may not be seen on ultrasound or MR. Imaging of the pancreas and biliary organs is double checked by a radiologist and a gastroenterologist who specializes in those organs. In this way, the pancreatic Dock provides a very detailed study of the pancreas.

However, early detection of pancreatic cancer is not easy, and not all pancreatic cancers can be detected even with these high-quality screening methods. It is possible that inoperable, advanced cancer may be detected at the next examination. We are well aware of these limitations. Nevertheless, we have started the pancreatic Dock, hoping to improve the survival of patients with pancreatic cancer as much as possible, rather than doing nothing. Please note that since contrast CT uses contrast injections, care must be taken to avoid adverse reactions. For this reason, this is not suitable for some people. Those aged 75 and older, with impaired kidney function, or with asthma are not eligible. In addition, if your blood test at the time of your visit indicates low estimated renal function, contrast CT cannot be performed. In rare cases other than those mentioned above, you may not be able to have the examination. The doctor will determine this during the consultation.

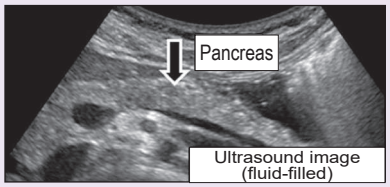
There are two types of courses: one that includes three examinations (ultrasound with the fluid-filled stomach, MR, and contrast CT), and the other that includes two examinations without contrast CT, although less accurate. Pancreatic Dock is performed on a different day from your regular Ningen Dock, so you will need to visit the center again.

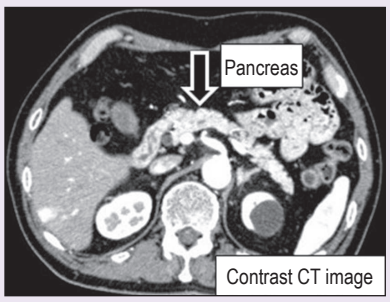
Major target diseases

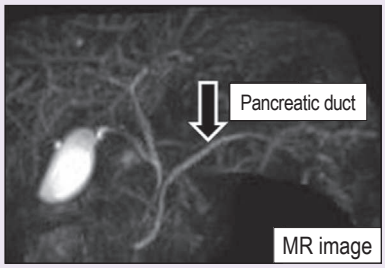
Pneumopancreatic cysts (risk factor for pancreatic cancer), pancreatic duct dilatation/stenosis (findings suspicious for pancreatic cancer)

Recommended age and interval

Age 50 and older:
Alternate between a course of three (ultrasound with the fluid-filled stomach, MR, and contrast CT) and a course of two without contrast CT every year (the reason for not having a contrast CT scan every year is due to the effects of contrast media and radiation exposure).







Muscle and walk test

Recommendation ★★★

Fee **5,500** yen (tax included)

This test assesses physical functions such as muscle strength, muscle mass, and walking ability. In today's aging society, maintaining these physical abilities has become one of the most important factors in avoiding the need for nursing care. Therefore, in order to achieve healthy longevity, we have introduced this muscle and walking ability test as a high-priority option in addition to the conventional Ningen Dock services for early detection of various cancers and preventive measures against stroke etc. by detecting lifestyle diseases. This is recommended for a wide range of people, including middle-aged and older adults, as well as those in their 30s, as their physical abilities may be declining.

In order to maintain physical functions such as muscle mass and walking ability, it is important to have healthy lifestyle habits in terms of daily exercise, physical activity, and diet. Proper lifestyle not only maintains physical function and avoids the need for nursing care, but also helps prevent serious diseases such as dementia, stroke, myocardial infarction, and cancer.

Please take this test to assess your physical function and to reflect on your lifestyle. The test items include muscle mass and body fat by body composition measurement, muscle strength of upper and lower limbs, and walking and balance ability. It can also determine the presence or absence of locomotive syndrome (locomo: loss of mobility caused by disorders of muscles, bones, joints, nerves, etc.) and sarcopenia (loss of muscle mass and strength due to aging), which have drawn attention as conditions that may lead to the need for nursing care in the future.

Major target diseases (conditions)

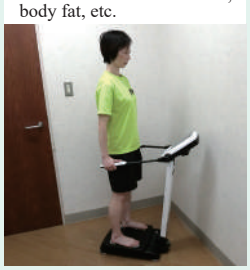
Loss of muscle mass, muscle strength, and walking ability, sarcopenia, locomotive syndrome

Recommended age and interval

All ages
Middle-aged and older…Every year; Younger people…Every 5 years

Body composition measurement (equipment used: InBody)

Assessment of muscle mass, body fat, etc.



Grip strength

Assessment of muscle strength

Stand-up test

Assessment of muscle strength

2-step test

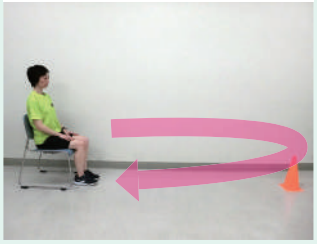
Measurement of stride length

10-meter walk

Assessment of walking speed

Stand and walk test

Assessment of gait instability



Arm stretches

Balance assessment

For a more thorough physical and motor function check-up: Sports Medical Dock

Sports Medical Dock is recommended for people who want to improve the performance of their physical functions and actively play sports, as well as for those who wish to prevent pain and injury from sports. It is also suitable for those who want to start exercising to lose weight or prevent lifestyle diseases and want to know how to have a pain-free body. The musculoskeletal system (bones, muscles, joints, ligaments, tendons, etc.) will be examined by a sports orthopedist, and under the guidance of an athletic trainer, posture, flexibility, general endurance, muscle strength, and movement will be checked. Body composition, including muscle mass and body fat, will also be measured. A customized exercise program will be created based on the results, and you can receive direct instruction from the athletic trainer.

*This course is not an option, but a special course offered in collaboration with the Center for Sports Medicine and Science. Please visit us on a different day from your regular Ningen Dock.

Course **without** health check-up…**27,500** yen (tax included); Course **with** health check-up…**44,000** yen (tax included)

5 How to Develop a Screening Plan (How to Choose Options)

We recommend that you have a Ningen Dock every year.
There are two types of Ningen Dock: the basic course and additional optional tests/examinations. For an effective Ningen Dock, it is important to plan which options to choose and at what intervals from a long-term perspective. The basis for planning is to have regular screenings for lung, gastric, and colorectal cancers (both men and women), prostate cancer (men), and breast, cervical, and uterine cancers (women), which are the most common causes of death. The best plan will vary from person to person. The following are examples of plans with optional tests and examinations as a guide.

Example of a 50-year-old man (non-smoker)

Upper endoscopy every year. Colonoscopy, brain imaging, prostate cancer screening, and lung CT every 3 years. *H. pylori* test in the first year.

Year 1	Upper endoscopy	Colonoscopy
	H. pylori test	Prostate cancer
Year 2	Upper endoscopy	Lung CT
Year 3	Upper endoscopy	Brain imaging
Year 4	Upper endoscopy	Colonoscopy
	Prostate cancer	
Year 5	Upper endoscopy	Lung CT
Year 6	Upper endoscopy	Brain imaging
Year 7	Upper endoscopy	Colonoscopy
	Prostate cancer	
Year 8	Upper endoscopy	Lung CT
Year 9	Upper endoscopy	Brain imaging
Year 10	Upper endoscopy	Colonoscopy
	Prostate cancer	

Example of a 50-year-old woman (non-smoker)

Upper endoscopy, breast cancer screening, and gynecological exams every year. Colonoscopy, brain imaging, and lung CT every 3 years. *H. pylori* test in the first year.

Year 1	Upper endoscopy	Colonoscopy	
	H. pylori test	Breast cancer	Gynecological exams
Year 2	Upper endoscopy	Lung CT	
	Breast cancer	Gynecological exams	
Year 3	Upper endoscopy	Brain imaging	
	Breast cancer	Gynecological exams	
Year 4	Upper endoscopy	Colonoscopy	
	Breast cancer	Gynecological exams	
Year 5	Upper endoscopy	Lung CT	
	Breast cancer	Gynecological exams	
Year 6	Upper endoscopy	Brain imaging	
	Breast cancer	Gynecological exams	
Year 7	Upper endoscopy	Colonoscopy	
	Breast cancer	Gynecological exams	
Year 8	Upper endoscopy	Lung CT	
	Breast cancer	Gynecological exams	
Year 9	Upper endoscopy	Brain imaging	
	Breast cancer	Gynecological exams	
Year 10	Upper endoscopy	Colonoscopy	
	Breast cancer	Gynecological exams	

*In addition to the above, we recommend that both men and women take a muscle and walk test annually.
*Smokers or former smokers aged 50 and older: If the number of cigarettes smoked per day × number of years smoked exceeds 400, it is advisable to have a lung CT scan annually. Additionally, if you produce sputum, it is recommended to add sputum cytology every year.

Example of a 40-year-old man

Upper endoscopy every year. Colonoscopy every 3 years. Lung CT and brain imaging every 5 years. *H. pylori* test in the first year.

Year 1	Upper endoscopy	Colonoscopy
	H. pylori test	
Year 2	Upper endoscopy	Lung CT
Year 3	Upper endoscopy	Brain imaging
Year 4	Upper endoscopy	Colonoscopy
Year 5	Upper endoscopy	
Year 6	Upper endoscopy	
Year 7	Upper endoscopy	Colonoscopy
	Lung CT	
Year 8	Upper endoscopy	Brain imaging
Year 9	Upper endoscopy	
Year 10	Upper endoscopy	Colonoscopy

Example of a 40-year-old woman

Upper endoscopy, breast cancer screening, and gynecological exams every year. Colonoscopy every 3 years. Lung CT and brain imaging every 5 years. *H. pylori* test in the first year.

Year 1	Upper endoscopy	Colonoscopy	
	H. pylori test	Breast cancer	Gynecological exams
Year 2	Upper endoscopy	Lung CT	
	Breast cancer	Gynecological exams	
Year 3	Upper endoscopy	Brain imaging	
	Breast cancer	Gynecological exams	
Year 4	Upper endoscopy	Colonoscopy	
	Breast cancer	Gynecological exams	
Year 5	Upper endoscopy		
	Breast cancer	Gynecological exams	
Year 6	Upper endoscopy		
	Breast cancer	Gynecological exams	
Year 7	Upper endoscopy	Colonoscopy	
	Lung CT	Breast cancer	Gynecological exams
Year 8	Upper endoscopy	Brain imaging	
	Breast cancer	Gynecological exams	
Year 9	Upper endoscopy		
	Breast cancer	Gynecological exams	
Year 10	Upper endoscopy	Colonoscopy	
	Breast cancer	Gynecological exams	

*In addition to the above, we recommend that both men and women take a muscle and walk test every 5 years.

6 Effectiveness and Limitations of Ningen Dock

Effectiveness of Ningen Dock

An effective screening method in Ningen Dock is one that has been scientifically proven in an appropriate manner to reduce death from the disease it is designed to detect.

Tests with proven efficacy and target diseases

Fecal occult blood test ····· **Colon cancer**

Mammography in women aged 40 and older ····· **Breast cancer**

Cervical (vaginal) cytology, HPV test ····· **Cervical cancer**

Colonoscopy ····· **Colon cancer**

*Detection rate of colorectal cancer: Colonoscopy > Fecal occult blood test

Lung CT scan (for smokers) ····· **Lung cancer**

Tests with some evidence of efficacy and target diseases

Upper endoscopy (stomach camera) ····· **Gastric cancer**

Upper gastrointestinal X-ray (barium swallow) ····· **Gastric cancer**

*Detection rate of gastric cancer: Stomach camera > Barium swallow

In addition to these, chest X-ray and sputum cytology have shown some effectiveness as lung cancer screening methods. In reality, however, detection of lung cancer is not always easy due to the nature of these tests.

The screening tests listed above have been proven to reduce deaths from the diseases (cancers) they are designed to detect. There are still very few reports of studies on screening to reduce total deaths, including those from non-cancer diseases. Thus, the number of tests that have been proven to be effective is currently limited. However, even if not yet proven, various screening methods are available that are believed to be useful in the early detection and prevention of serious illnesses. Furthermore, it is expected that the effectiveness of such tests will be proven and established in the future.

The effectiveness of comprehensive health check-ups, such as Ningen Dock, in which a number of tests are performed together, is also yet to be scientifically proven. However, we believe that we can contribute to the maintenance of your health by conducting accurate and precise tests/examinations.

Limitations of Ningen Dock

Although Ningen Dock is considered effective in detecting and preventing diseases, no test is foolproof and has its limitations. Let us consider three drawbacks of testing, using cancer as an example.

False negative	This is when cancer is present but undetected and missed. Despite medical advances, unfortunately, no test can detect cancer with 100% certainty. There is a certain rate of false negative results with any test.
False positive	Suppose a “lump” is found on examination. If the lump is actually benign, but cannot be determined to be noncancerous, it is diagnosed as “abnormal”. This is a false positive. False positives require further examination and follow-up to determine if it is cancer. It is the opposite of a false negative.
Overdiagnosis	There are cancers that are not related to life expectancy whether they are treated or not (e.g., cancers that grow very slowly), or in other words, cancers that are not harmful even if left untreated. The detection of such cancers is referred to as overdiagnosis. Even if these cancers are detected by screening and treated, the cost of treatment is lost.

There is a trade-off between false positives and false negatives. Stringent criteria to reduce false negatives will result in more false positives, while more relaxed criteria to lower the false positive rate will lead to more false negatives.

Complications of Testing

Complications of varying degrees can occur with any examination. They can range from serious, such as perforation during a colonoscopy, to minor, such as a bruise after a blood draw. We understand your concern, but there is no such thing as a 100% safe and easy procedure. We are constantly taking precautions to reduce complications as much as possible.

As described above, Ningen Dock has its limitations and disadvantages. While understanding these challenges, we will continue our efforts to help you maintain your health.
We hope you will feel reassured.

7 Q&A

Q 1. Is it absolutely best to get the optional screenings at the starting ages and intervals as specified in this manual? Can I have them done at an earlier age or more frequently?

A. The recommended starting ages and intervals for the various screenings in Ningen Dock are not very specific. This is because there is no scientific model answer. However, we have tried to be as specific as possible in this manual in order to provide a guideline for effective screening. There are exceptions to every rule, and there are rare cancers and diseases that develop very rapidly or at a very young age. Our recommendations take into account the age at which the disease is most likely to develop, the benefits and disadvantages of screening, etc. The recommended screening plan is not the absolute best, but it can cover many diseases. If you have a strong family history of cancer (especially colorectal and breast cancer), you may need a special screening plan. Please consult your doctor.

Q 2. Are there any cancers that cannot be detected by Ningen Dock?

A. Unfortunately, yes. No test can detect cancer with 100% certainty. Also, in the case of fast-growing cancers, they may develop during the time between screenings. No screening can be 100% guaranteed, no matter how often and how numerous the tests are. Nevertheless, with the right combination of tests, many potential cancers can be detected, so please develop the best screening plan for you. The best plan requires expertise, so you should discuss your future screening plan with the doctor when you undergo a Ningen Dock.

Q 3. I am an elderly person. Can I have a Ningen Dock?

A. Ningen Dock is a voluntary health screening program with no particular age limit. Unfortunately, however, it is less useful for the elderly than for younger people.
Elderly people are advised to understand the following precautions before undergoing Ningen Dock.

(1) Compared to younger people, the likelihood of complications is higher due to the greater stress on the body from the tests/examinations.

(2) The frequency of abnormal test results is higher, and false positives are more likely to occur.

(3) Overdiagnosis is likely to occur, such as the detection of cancers unrelated to life expectancy (i.e., those that are not harmful even if left untreated).

As a countermeasure for (1), we evaluate whether the test is safe for the examinee at the time of consultation. In particular, colonoscopy, upper gastrointestinal endoscopy (stomach camera), and upper gastrointestinal X-ray (barium swallow) are physically taxing. These procedures are performed with caution in those aged 75 or older, and may be cancelled depending on their condition. Also, analgesics and other drugs used in endoscopic examinations are more likely to cause adverse reactions in the elderly. Therefore, their use may be avoided or the dosage reduced for safety reasons.

Q 4. I have symptoms, but can I wait until my Ningen Dock?

A. If you have symptoms, please visit an outpatient clinic instead of having a Ningen Dock. Ningen Dock is intended to efficiently detect disease from asymptomatic people. If symptoms are present, the screening tests in Ningen Dock may be inadequate or irrelevant. By the time the results of Ningen Dock are available, it may be too late.

Q 5. I have hypertension but no symptoms. Are lifestyle diseases such as hypertension really harmful?

A. Lifestyle diseases, including diabetes, hypertension, and dyslipidemia*, usually have no symptoms. However, if these conditions continue, arteriosclerosis gradually narrows and weakens blood vessels. Symptoms are normally absent at this stage. If the blood vessels eventually get clogged or rupture, they can suddenly cause serious illnesses such as myocardial infarction or stroke. Tragedies such as the sudden death of a healthy person or becoming bedridden in a day can occur. Lifestyle diseases are also involved in the development of dementia, which everyone wants to avoid.

Therefore, prevention or treatment of lifestyle diseases is important. Since they are often associated with obesity, overeating, and lack of exercise, it is essential to improve lifestyle. Health check-ups are a good way to identify these lifestyle diseases. It is also an important opportunity to review your poor lifestyle habits, so please take advantage of them.

*Dyslipidemia is what was formerly known as hyperlipidemia. It includes high LDL (bad) cholesterolemia, low HDL (good) cholesterolemia, and hypertriglyceridemia.

Q 6. Are cigarettes really bad for health? I smoke, but my health check-ups show no abnormalities.

A. Smoking can cause myocardial infarction, stroke, dementia, and increases the risk of various cancers. It also leads to the development of many other diseases. It is similar to lifestyle diseases like hypertension in that it causes myocardial infarction, stroke, and dementia. But smoking is even worse because it also increases the risk of cancer. The adverse effects of smoking are not readily apparent in health check-up data and are often underestimated. However, the body is definitely being damaged. It is important to quit smoking even if no abnormalities are noted in the health check-up.

Q 7. How should I combine gynecological options?

A. The first recommendation is to have a cervical (vaginal) cytology and a gynecological ultrasound annually. These check for cervical and uterine cancer. The ultrasound also observes the ovaries, although its effectiveness in detecting ovarian cancer has not been scientifically proven. Therefore, these two examinations are recommended for general screening. To further increase the accuracy, HPV testing for cervical cancer and endometrial cytology for those who are particularly concerned about uterine cancer should be added. Please note that unlike cervical (vaginal) cytology, endometrial cytology examines a deeper part of the body and is more likely to cause pain and bleeding.

Q 8. Do I need to have thorough examinations for all the test results that are outside the normal range?

A. An abnormal result outside the normal range does not necessarily mean that a thorough examination is required. In the case of mildly abnormal values, thorough examinations often do not reveal any problematic diseases. Therefore, a thorough examination and treatment are determined based on the degree of abnormality and other factors. If the criteria are stringent and all results outside the normal range require thorough examination, the number of false positives will increase and many people will have to undergo unnecessary examinations. On the other hand, if the criteria are more relaxed, false negatives (i.e., the presence of a disease that is not detected) may increase. False positives and false negatives are unavoidable in testing. We always strive to make the best possible decision by considering the trade-offs between these outcomes.

Q 9. How do I get screened for colorectal cancer?

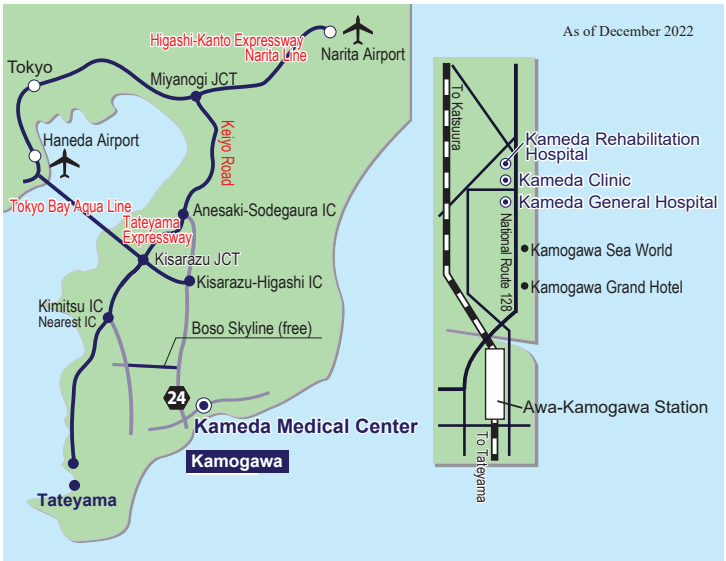
A. Colorectal cancer screening methods include, in order of accuracy, colonoscopy, CT colonography, and fecal occult blood test. The fecal occult blood test is included in the Basic Ningen Dock Course, and we encourage you to have it done every year. In addition to that, colonoscopy and CT colonography are useful for early detection and prevention of colorectal cancer. Colonoscopy is the most recommended examination. Although some people think that colonoscopy is painful, in fact, most examinees at our center undergo colonoscopy without much pain. You have to drink a colon-cleansing formula. Thus, in the case of one-day Dock, you will need to visit the center again for colonoscopy. If you do not want to have a colonoscopy, please consider CT colonography, the second most accurate test after colonoscopy. CT colonography can be performed using the standard method, in which examinees drink a colon-cleansing formula in our center, or the simple method, in which examinees drink a lower volume of the formula at home the day before. The standard method is preferable because it cleanses the bowel better and is more accurate. As in the case of colonoscopy, one-day Dock examinees must come back to the center the next day. The simple method (drinking the formula at home) may be less accurate, but can be included in one-day Dock and completed on the same day. Please consider these options.

If you have any other questions, please do not hesitate to contact us.

Appendix: 8 Cases in which tests/examinations cannot be performed or may be discontinued

Ningen Dock includes all kinds of tests and examinations. Depending on your physical condition, appropriate results may not be obtained, or stress on your body may be significant. Therefore, if you have any of the following conditions, you may not be able to have the test/examination based on our medical judgment. Please note that even if you do not have any of the conditions listed below, the test/examination may be cancelled at the discretion of your doctor. Since safety is more important in health check-ups, these regulations are different from those of general practice. If you have any questions, please contact Kameda Health Appraisal Center.

	Tests	Conditions or cases in which tests/examinations cannot be performed or may be discontinued
Basic items	Visual acuity/fundus/intraocular pressure	Immediately after ophthalmic surgery, infectious conjunctivitis
	Physical measurements (body fat)	Those with a pacemaker, defibrillator, or implantable cardiac monitor
	Respiratory function test	Suspected contagious infections, severe hypertension (≥ 180/110)
	Glucose tolerance test (overnight course only)	Diabetes, post-gastrectomy
	Chest X-ray	Pregnant (including possibility), wearing a blood glucose meter
	Upper gastrointestinal X-ray	Suspected intestinal obstruction, inflammation, or bleeding, pregnant (including possibility), muscle weakness in limbs, difficulty changing position (e.g., turning over), weight 120 kg or more, elderly, difficulty swallowing, severe hearing loss, having a pacemaker or defibrillator implanted, high blood pressure, post-gastrectomy, wearing a blood glucose meter
Options	Upper gastrointestinal endoscopy	Allergic to the drugs used, doctor's decision that the test is highly disadvantageous, unable to walk or move to bed by oneself, high blood pressure, aneurysm, immediately after abdominal surgery, elderly, pregnant (including possibility), breastfeeding
	Colonoscopy	Suspected intestinal obstruction, inflammatory bowel disease, slight difficulty walking by oneself, high blood pressure, aneurysm, immediately after abdominal surgery, elderly, doctor's decision that the test is highly disadvantageous, pregnant (including possibility), breastfeeding
	H. pylori test (exhalation method)	Taking antibiotics, certain antacids, or stomach medications, pregnant (including possibility), breastfeeding, consuming certain yogurts that inhibit the activity of *H. pylori*
	Lung CT	Pregnant (including possibility), having a defibrillator implanted, wearing a blood glucose meter
	Sputum cytology	Those who are unable to produce sputum
	Brain imaging (MRA/MRI)	Having metal in the body, claustrophobia, pregnant (including possibility), having a tattoo, semi-permanent makeup, or intrauterine contraceptive device, wearing a blood glucose meter
	Cervical (vaginal) cytology	Those who have never had sexual intercourse
	Endometrial cytology	Those who have never had sexual intercourse, intrauterine contraceptive device, taking antithrombotic medications, pregnant (including possibility)
	HPV test	Those who have never had sexual intercourse
	Gynecological ultrasound	Those who have never had sexual intercourse
	Mammography, breast tomosynthesis	Post breast augmentation, pregnant (including possibility), having a pacemaker, defibrillator, implantable cardiac monitor, ventriculoperitoneal shunt, or CV port in the body, breastfeeding, post breast reconstruction, wearing a blood glucose meter
	Breast ultrasound	Pregnant, breastfeeding, post breast augmentation
	Bone density test	Pregnant (including possibility), hip joint disease, wearing a blood glucose meter
	CT colonography	Suspected intestinal obstruction, allergic to the drugs used (e.g., iodine), slight difficulty walking by oneself, having metal in the hip or lumbar spine, elderly, doctor's decision that the test is highly disadvantageous, pregnant (including possibility), wearing a blood glucose meter
	Vascular age (PWV/ABI)	Those with a dialysis shunt, arrhythmia (e.g., atrial fibrillation), or deep vein thrombosis
	PET-CT	Having a defibrillator implanted, high blood glucose levels, pregnant (including possibility), breastfeeding, wearing a blood glucose meter, claustrophobia
	CT coronary angiography	Those aged 75 and older, pregnant (including possibility), breastfeeding, allergic to contrast media or iodine, impaired kidney function, hypotension, asthma, having a defibrillator implanted, wearing a blood glucose meter, thyroid disease, heart disease, liver damage, multiple myeloma, macroglobulinemia, tetany, pheochromocytoma, taking antipyretic analgesics or drugs for erectile dysfunction
	MR for pancreatic Dock	Having metal, a pacemaker, defibrillator, or implantable cardiac monitor in the body, claustrophobia, pregnant (including possibility), having a tattoo, semi-permanent makeup, intrauterine contraceptive device, or blood glucose meter, allergic to manganese
	Contrast CT for pancreatic Dock	Those aged 75 and older, asthma, pregnant (including possibility), breastfeeding, allergic to contrast media or iodine, wearing a blood glucose meter, having metal in the spine, taking antipyretic analgesics, thyroid disease, heart disease, liver damage, multiple myeloma, macroglobulinemia, tetany, pheochromocytoma
	Muscle and walk test	Having a pacemaker, defibrillator, implantable cardiac monitor in the body, difficulty maintaining a standing position, having a prosthetic leg or hand, pregnant
	Tomography of the macula of the retina	Immediately after ophthalmic surgery, infectious conjunctivitis



Access

From Tokyo Station

(1) By express bus (Aqusea)
Travel time: about 2 hours
Route: Tokyo Yaesu BT → Kameda Hospital

(2) By JR (Sotobo Line, Limited Express “Wakashio”)
Travel time: about 2 hours
Route: JR Tokyo Station (Keiyo Line platform) → Awa-Kamogawa Station. From there, take a taxi (about 5 minutes) or a local bus (about 7 minutes).

From Chiba Station

By express bus (Kapina)
Travel time: about 1.5 hours
Route: Chiba Station → Kameda Hospital

By Car from Haneda Area

Travel time: about 1 hour and 15 minutes
Route: Haneda area → Aqua Line → Kimitsu IC → Boso Skyline (free) via Prefectural Road 24 → Kameda General Hospital

Medical Corporation Tesshokai
Kameda Health Appraisal Center
04-7099-1115
(Monday - Friday: 10:00 - 16:00
Saturday: 10:00 - 12:00)

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