The Character of Vaccination in Saitama Prefecture at the End of the Edo Era and the Beginning of the Meiji Period

HOSONO Kentaro

The circumstances surrounding vaccinations at the end of Edo Era and the beginning of the Meiji Period in what is now Saitama Prefecture are virtually unknown. It is in light of this that this paper attempts to illuminate the character of vaccinations within the prefecture through the activities of the Komuro family, who were village physicians involved in vaccinations in Hiki-gun at the end of the Edo Era through the early part of the Meiji Period.

The cow-pox virus had been brought to Nagasaki in 1849 and when it was being introduced all around Japan the Komuro family obtained the vaccinia virus in Edo from a physician who was working for a feudal domain. Before that time, a smallpox vaccination similar to the method of cow-pox vaccination had been used. Musashi Province was no different from other provinces with respect to knowledge concerning vaccinations and the introduction of the vaccinia virus. However, a complex regional structure whereby there was Bakufu-owned land and privately-owned land was responsible for a form of vaccination in the province that was different from other provinces where the adoption of vaccinations at the end of the Edo Era was carried out under the leadership of feudal lords. During the Ansei Period (1854–1860), people were vaccinated by village physicians as the vaccinia virus was being distributed from one region to another through a network of physicians of Western medicine. However, there was no organized implementation of vaccinations under the leadership of feudal lords.

Although some time later vaccinations came to be adopted under the direction of prefectural authorities in the Iruma region and the Iwahana region, former prefectures of present-day Saitama Prefecture, it was only after the fall of the Bakufu and the start of the Meiji Period (1868) that organized activities came to be implemented over a wide area under the jurisdiction of the prefecture.

In conclusion, these facts indicate that the region of Saitama Prefecture was no different than other regions with regard to knowledge and the speed of introduction of the vaccinia virus. However, before the fall of the Bakufu vaccination policies covering a wide area were not implemented and instead there was a necessary reliance on the activities of individual village physicians.