

NEUROPSYCHIATRIC SERVICE
361ST STATION HOSPITAL

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APO 1055
11 May 1946

SUBJECT: Examination of OKAWA, Shumei.

TO : The President, International Military Tribunal for the Far East,
War Ministry, Tokyo, Japan.

1. The following report is submitted regarding the physical and mental status of Shumei OKAWA, admitted to this hospital 4 May 1946:

PRESENT ILLNESS

The patient was referred for examination because of bizarre behavior during his appearance in court for arraignment as a major Japanese war criminal. It had been noted that for several weeks in prison he behaved in an unreasonable manner. During the court proceedings he created a sensation by slapping another prisoner, TOJO, on the head. He showed an inappropriate attitude and emotional reaction, and expressed ideas about extracting nourishment from the air.

PREVIOUS PERSONAL HISTORY

Past history as elicited from the patient reveals that he was born in 1886, in a small village in northern Honshu. His early health was good, and he was precocious in learning to read and write. He was quite aggressive, enjoyed competing with his schoolmates, strove always to show his superiority. He had the usual elementary schooling, and developed a pronounced interest in the classics. He was profoundly influenced by a French Jesuit priest, was converted to Catholicism at the age of 17. Later he came under the influence of a Buddhist monk who taught him the principles of Yogi. He underwent numerous ordeals of self discipline, attaining a state of mysticism peculiar to that cult. He went on to study literature, philosophy, sociology, religion, medicine and languages, including Chinese, English, French, German and Sanskrit. At the Tokyo University he majored in Indian philosophy graduated at the age of 27, and then continued independent studies for several years receiving doctorate degrees in law and literature. His studies led him to an increasing interest in Japanese history and culture, and he was aroused to a nationalistic spirit which was reflected in numerous writings. He became quite influential in the movement for Japanese expansion, and was involved in planning the invasion of Manchuria as well as the assassination of several Japanese statesmen who opposed the movement. As a result of the latter activity, he was sentenced to five years imprisonment. During this time it was discovered that he had tuberculosis, and he was hospitalized for a year, about ten years ago. The medical history reveals that he contracted gonorrhea at the age of 33, when he had his first sexual contact. Genital lesion or other evidence of syphilis is denied. He was married at the age of 41, has no children. He states that he is sexually potent but has no sexual desire. Abnormal sex activity is denied. Habits include smoking of cigarettes most of life, sporadic consumption of alcohol, and occasional experimental use of opium.

FAMILY HISTORY

Father died in 1914, at the age of 56, of typhus fever. He had been a heavy drinker. Mother is living and well at the age of 81. There are two brothers, both in good health. No significant familial disease elicited.

MENTAL STATUS

General appearance, speech, emotional reaction: Patient is alert, cooperative, and accessible. He is careless in personal appearance, somewhat untidy. He is talkative, under some pressure of speech, rather tense and overactive. There is definite euphoria, patient says he is "in a state of happy intoxication, like a God". He is in good touch with his surroundings. Stream of talk is coherent, and answers to questions are relevant. There is some circumstantiality, but no notable distractibility or flight of ideas with loss of goal. Remarks are frequently facetious. Emotionally he is quite labile, affect is appropriate to his output but inappropriate to the situation. He is generally in good humor, but when questions are put to him which are obviously meant to test his intelligence, he becomes angry and resentful.

Content of thought: The patient believes that he has extraordinary powers which others might consider supernatural, but have been attained only because of his profound knowledge of nature, he states. He insists he can cause a man to die by kissing him, and explains the process by saying he extracts poison from the elements of the air, exhaling it in a lethal form. He claims to have killed two Chinese in this manner, but says he would have to do it to several hundred in order to get sufficient concentration of poison to be able to test and explain the exact mechanism. He has an even greater power, which he will confide only to General MacArthur. His secret will enable him to cause a million men to lay down arms. If MacArthur will not listen to him, it is God's will, and he will not try to persuade him. But by application of his secret power, the earth would become a paradise, all men brothers, all religions would be unified, and OKAWA would be the embodiment of Christ, Mohammed, Buddha and Jehovah. If MacArthur agrees to his plan, the foundations will be laid this month, and by July 4 America and Japan can join in ruling the world. First, it is necessary for OKAWA to be appointed Emperor. He wishes to become commander of the prison, and says that he will accept American citizenship for this purpose, but he will have to receive the rank of Major General. He states that the secret of his power is a commonplace thing, but no one else could dream or conceive of it. He claims that he derived his powers through Yogi training, and says he can sit in a squatting position for 200 days without moving, extracting nourishment from the air. He denies hallucinations by name, but says he receives "revelations" which he writes down without being aware of their contents. When he reads these writings later they impress him as being remarkable. While in jail, he laughed for two days after reading one of his documents. He is certain he will become the world's foremost humorist. When questioned specifically about auditory or visual impressions, he describes visions which he sees when he closes his eyes, says they seem like a dream in which he has no active role, but is merely a bystander. He is

vague regarding their content. When asked why he slapped TOJO in court, he says he wanted to kill him, because he loved him and wished to protect his family from the humiliation of the trial. He says that he did kill TOJO, but realizes that the latter is still alive, says he just killed him "subjectively and symbolically". On one occasion during observation in the hospital, patient stated that Mrs. MacArthur had come to visit him on the ward, and that she had brought 10,000 women to help take care of him. He is very deeply moved by this, and tells of his appreciation with tears in his eyes.

Sensorium is clear, and patient is oriented for time, place and person. Remote memory shows no gross impairment, but there are some gaps for recent events. Retention and recall are fair, with an occasional error in repeating digits. Calculations are done rapidly, but with some errors. Comprehension appears adequate, but abstract thinking in test definitions and differentiations shows some impairment. Judgement is poor, and insight is lacking.

PHYSICAL EXAMINATION

Patient is tall, asthenic, emaciated. Blood pressure is 150/50. Pupils are constricted, slightly irregular, and very sluggish in reaction to light and accommodation. There is tremulous iris bilaterally. Ophthalmoscopic examination reveals normal optic discs, mild arteriosclerotic changes in the vessels. Heart is regular, rate normal, no enlargement. There is a high pitched diastolic murmur, loudest at the sternal border in the 4th left intercostal space, characteristic of aortic insufficiency. The lung fields are clear. No enlarged abdominal viscera are palpable. Reflexes are sluggish in the upper extremities. The right knee jerk is absent, the left sluggish. The ankle jerks are absent bilaterally. The remainder of the neurologic examination is unrevealing.

LABORATORY EXAMINATIONS

Blood Count - normal
Urinalysis - faint trace of albumen; few white blood cells; otherwise negative.
Blood Kahn - 3 plus
Spinal fluid - 12 cells, all lymphocytes; protein 69.4 mg/100cc. Pandy 3 plus; colloidal gold curve 555555310. Wasserman 3 plus.
X-ray chest - extensive fibroid infiltration in upper lung fields, characteristic of long standing bilateral pulmonary tuberculosis. This aorta is dilated, and there are extensive calcium deposits in the wall of the descending portion to indicate arteriosclerotic changes compatible with the patients' age.
EKG - left axis deviation, R123 slurred, picture compatible with lesion of aortic valve, non-rheumatic.

DIAGNOSIS

The primary diagnosis in this case is as follows:

Syphilis, tertiary -

a.) Psychosis with syphilitic meningo-encephalitis (general paresis): manifested by overactivity, emotional lability euphoria, grandiose delusions, visual hallucinations, defective judgment, and impairment of retention, recent memory, abstract thinking, and insight; with irregular sluggish pupils, absent deep reflexes in the lower extremities, positive blood and spinal fluid Wasserman, and increase in spinal fluid cells and protein with parietic type gold curve.

b.) Aortitis, chronic, syphilitic, with aortic valve insufficiency.

Additional diagnoses are as follows:

Tuberculosis, pulmonary, bilateral, chronic, activity undetermined.
Arteriosclerosis, generalized, mild.

2. In view of the primary diagnosis in this case, it is considered that the patient is unable to distinguish right from wrong, and he is incapable of testifying in his own defense.

3. It is to be noted that the arrest of brain damage in general paresis depends on the prompt utilization of certain types of fever therapy, and it is recommended that disposition in this case include provisions for early institution of definitive treatment.

/s/ BENNETH L. SNIDER
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