A Study on the Effectiveness of Recent Traffic Accident Prevention Measures Based on Trends in the Number of Traffic Accidents in Japan: Specific Measures for the Future Based on Recent Conditions

The Editor,

Sir,

There were fewer than 10,000 traffic fatalities within 24 hours of a traffic accident in Japan in 1996 and around 4,000 in 2009 and 2010 (1). Fatalities decreased because of measures dealing with various aspects of traffic accidents (2). An important aspect of the effectiveness of traffic accident prevention measures is the number of traffic accidents. Therefore, this study researched the number of traffic accidents in Japan from 1990–2011 according to the National Police Agency (1). Also discussed are specific measures to prevent traffic accidents in the future.

The number of traffic accidents dipped to 643,097 in 1990 and peaked at 952,191 in 2004. There were 933,828 traffic accidents in 2005 (a decrease from the previous year), 725,773 accidents in 2010 and 691,936 in 2011. Given the reduction in traffic fatalities in recent years and changes in the number of traffic accidents, recent traffic accident prevention measures have been effective. Additional traffic accident prevention measures must also be taken. Measures must be taken to encourage safe driving by the elderly (3), who, along with pedestrians, are particularly susceptible to traffic fatalities. Thus, traffic accident prevention measures involving these individuals are crucial (4). Children must also be protected, and traffic safety is included as part of school safety (5). According to Higuchi, alcohol has a negative effect on traffic accidents. “Alcohol increases the risk of an accident commensurate with blood alcohol content (BAC)” and “alcohol increases the risk of an accident and also increases the severity of injuries suffered by accident victims” (6). Relevant experts and organizations must act in concert to implement traffic accident prevention measures in light of numerous supporting data and from different perspectives (3–5, 7), and the results of various studies (2, 6) must be considered.

From: K Inoue1, T Fukunaga2, Y Okazaki3, M Nishimura4, Y Fujita5

1Department of Public Health, Fujita Health University School of Medicine, Aichi 470-1192, Japan, 2Tokyo Medical Examiner’s Office, Tokyo Metropolitan Government, Tokyo 112-0012, Japan, 3Tokyo Metropolitan Matsuzawa Hospital, Tokyo 156-0057, Japan, 4Kawasaki-shi Tama Public Health Center, Kanagawa 214-8570, Japan and 5Department of Internal Medicine, Division of Medical Oncology, Teikyo University School of Medicine, Tokyo 173-8605, Japan.

Correspondence: Dr K Inoue, Department of Public Health, Fujita Health University School of Medicine, 1-98, Dengakugakubo, Kutsukake-cho, Toyoake, Aichi 470-1192, Japan. E-mail: ke-inoue@fujita-hu.ac.jp

REFERENCES