

# DEATHs during the Judo Classes and Activities Conducted under the Supervision of Schools in Japan; From 1983 to 2009 All Cases Listed and Analyzed

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## I. Cases

The below given cases are of “fatal” accidents that occurred during judo classes and activities conducted under the supervision of schools. Please note the following points as you read the list.

1. “Fiscal year (FY) of the accident” means the fiscal year when a special payment by the National Agency for the Advancement of Sports and Health (NAASH) was made as a compensation for the accident. Therefore, if the payment was made in the year after the accident (i.e., accident occurred in December, but the victim died in May of the following year), the “fiscal year of the accident” is not the year when the accident actually occurred.
2. “Grade” is the grade the victim was in at the time of the accident.
3. For “accident description,” reports by NAASH are directly quoted; therefore, the arguments that were later brought up in the court or facts that were clarified after the reports were made may not necessarily match. Please refer to the additional information listed at the bottom of this material for further details of the accidents.
4. Some of the cases are regarded as “criminal” rather than “accidental;” however, in this list, the word “accident” is used for all cases.

Case ID	“Death/Injury cases” every fiscal year (FY xxx edition)	FY of the accident	Grade	Sex	C: In a gym class, A: during judo club activities	Cause of death	Accident description	Death caused by an action specific to judo		Cause commonly observed during sports activities (sudden death, heat attack, etc.)	Others (including causes of death that are difficult to determine)
								Head trauma/brain damage resulting from a shock caused by nagewaza/ukemi	Other causes (suffocation, damage to the organs)		
j001	1985	1983	11th	M	A	Acute heart failure (AHF)	The victim was thrown and he fell.			○	
j002			11th	M	A	Mesenteric thrombus	During randori (sparring/free practice) in judo.			○	
j003			10th	M	A	Acute epidural hematoma (AEDH)	“Hitting the head while practicing ushiro-ukemi (backfall)” In the beginning of the team practice session, the members warmed-up, performed additional exercises, and continued with the ukemi (break-fall) practice. After yoko-ukemi (side breakfall), the victim was attempting ushiro-ukemi in a squat position, when he hit the back of his head on the tatami mat. He later became sick and took a break outside the training hall. He was found vomiting by a 12th grader and was immediately taken to a hospital in an ambulance. He was operated, but he died after 2 days.	○			

j004			8th	M	A	Cardiorespiratory/respiratory arrest and cerebral contusion	<p>"Hitting the head during ukemi practice"</p> <p>On the day of the accident, the team members practiced in the school yard next to the gymnasium by placing a tatami mat on the ground. When the victim was thrown with osoto-gari (large outer reap), he fell on his back and hit the back of his head. Right after the accident, he tried to get up on his own; however, because he was unsteady, other members laid him on the scarpement beside the gymnasium. They put a wet towel on his forehead and nursed him until the vice principal of the school, who happened to be visiting the team on the same day, told them to take him to the school doctor. The victim was later sent to a hospital, where he underwent surgery; however, he died the next morning.</p>	○			
j005			7th	M	A	Acute epidural hematoma (AEDH)	<p>"Collapsing during practice"</p> <p>After a judo tournament hosted by the Nippon Junior High School Physical Culture Association, students from all involved schools participated in a joint practice session. In the session, 8th and 9th graders first practiced uchikomi (simulation practice) and randori for about 40 mins and then performed controlled practice with 7th graders, in which the 7th graders practicing ukemi were thrown. The victim, a 7th grader, first practiced with 3 members (10 throws with each student). However, when he was about to practice with his 4th partner, a 9th grader, he found his own legs unsteady. Hence, he asked his partner to wait and went outside to take a breath. He later participated in a cool-down session and resumed his practice with his team mates at 15:10. The team coach told him to practice ukemi against kouchi-gari (small inner reap), but later told him to step aside because he was not good at it. He then responded to the coach, walked about 3 m, and suddenly collapsed on the floor. The coach told the other members to stop practicing, and on checking the victim's condition, decided to call an ambulance. The victim was hospitalized and he underwent surgery; however, he died.</p>	○			
j006	1986	1984	8th	M	C	Interstitial myocarditis	After randori.			○	
j007			8th	M	A	Suffocation (suspected)	During newaza (ground techniques) practice.		○		
j008			10th	M	C	Subdural hemorrhage	During ukemi practice.	○			
j009			10th	M	C	Acute heart failure (AHF)	After ukemi practice.			○	
j010			11th	M	A	Basilar fracture	The accident occurred during the cool-down session after practice. An autopsy determined the cause of death as "acute basilar fracture;" however, the case was treated as one of "sudden death."	○			
j011			10th	M	C	Acute subdural hematoma (ASDH)	<p>"Hitting the back of the head during ukemi practice"</p> <p>The accident occurred during the 6th hour of a total of 16 h of judo classes. After warm-up and additional exercises, students practiced controlled body drop in pairs, in which 1 student threw his partner first and then got thrown by the partner after a short break. They practiced about 50 throws in total. During practice, the victim fell on his back and hit his head on the mat. He appeared a little hurt but continued to practice. After practice, all students took a break and lay on their back on the tatami mat. As they regained their strength, they got up one by one; however, the victim could not get up. His eyes suddenly became unfocused and his hands began to shake. The teacher in charge requested for an ambulance, but the victim soon started vomiting and fell unconscious. He was taken to a hospital where he received treatment, but he remained unconscious and died after 5 days due to brain death/cardiopulmonary arrest.</p>	○			

j012			8th	M	A	Acute subdural hematoma (ASDH) and Brain contusion	<p>“Hitting the head during ukemi practice”</p> <p>On the day of the accident, the judo team started practicing at 16:50. After warm-up and ukemi/uchikomi practice, the members practiced randori. During the session, the victim hit his head when thrown by his partner with seoi-nage (shoulder throw). After resting for about 10 min, he practiced with a 9th grade B, and this time he was thrown with taiotoshi (body drop). As the victim lost his balance when he was thrown, he fell headfirst and hit his head hard on the tatami mat. He complained of pain after the fall but was fine and continued with a cool-down/evaluation session. The day’s practice ended at 18:20. After changing his outfit, the victim was allegedly observed vomiting something at the water fountain, but he told his friends not to wait for him but to go home, and so, they left without him. Later, he went into an empty classroom, and at approximately 18:50, was found suffering from nausea and a headache by another student. He was taken to a hospital and examined; while being transferred to another hospital, he fell unconscious. Although he underwent craniotomy at the second hospital, he did not regain consciousness and died 3 days later.</p>	○			
j013			10th	M	A	Acute subdural hematoma (ASDH)	<p>“Hitting the head during ukemi practice”</p> <p>On the second day of a judo team camp from August 8th, after early-morning training, the members practiced newaza until 10:00 and tachiwaza (stand-up grappling) from 13:00 to 16:30. While practicing tachiwaza, the victim was thrown with hidari-osotogari (left side outer leg reap) during his second 3-min practice match, and he hit the left side of his head hard on the mat. He was immediately examined, and because he was already unconscious, taken to a hospital on an ambulance. The victim was then transferred to another hospital where he underwent an operation. However, he experienced several complications, including gastrointestinal hemorrhage, pneumonia, and liver/kidney function failure, and died.</p>	○			
j014			7th	M	A	Acute renal failure (ARF) due to sunstroke	<p>“Sunstroke”</p> <p>On the day of the accident, the team members ran 5 laps around the gymnasium, jumped 5 to 7 times with balls, and performed a 10-m sprint 5 times from 13:00 to 14:00. At 14:00, they moved to the athletic field where in the presence of their instructor, they ran five 200-m laps, a 100-m relay, and then walked around the track to catch their breath. The victim was walking among the lead group when he suddenly collapsed and became dyspneic. He was immediately moved to an airy location and cooled with water. After the school doctor provided him first-aid treatment, he was admitted to a national hospital and treated. However, he died the next morning.</p>			○ (heat attack)	
j015	1987	1985	7th	M	A	Brain contusion	<p>“Hitting the head after thrown with osoto-gari”</p> <p>On the day of the accident, after running and warming-up, the team members participated in kakari-geiko (charging practice), in which 9th graders (there were 5 of them) practiced with 3 to 4 junior students. During practice, the victim, a 7th grader, was attacked with osoto-gari and he fell. Because the partner let go of his (the victim’s) collar, he could not break-fall properly and hit the left side of his head. The victim was in pain and cried, and he continued to be a part of kakari-geiko. However, after a while, he said “enough” and took a break. While taking a break, he suddenly fell as if he was trying to hug a member waiting in line. He was immediately taken to a hospital in an ambulance but was already brain dead on arrival. After 3 weeks of resuscitation with an artificial respirator, the victim died.</p>	○			

j016			10th	M	A	Acute subdural hematoma (ASDH)	<p>“Thrown with haraigoshi (sweeping hip throw)”</p> <p>On the day of the accident, after warm-up, additional exercise, and newaza practice for about 50 min, the team performed uchikomi and controlled practices for 20 min (the victim just started judo after entering high school but was successfully improving his basic skills and was doing well during daily practice). They started randori at approximately 16:40 in which the duration of each match fought between randomly chosen partners was 3 min. The victim first practiced with 2 members and then with a 11th grader who had a first dan. In the match between the victim and 11th grader, they both tried to trap each other, but after 1 or 2 min of wrestling, the victim was thrown with haraigoshi. They fell on top of each other. This is probably when the victim hit his head hard on the mat. Although he got up and tried to practice with another student, he collapsed on the spot. He was immediately taken to a hospital in an ambulance, where he was operated for hematoma evacuation. However, even after the operation, he remained in a coma. Later, with a sudden change in his condition, the victim died.</p>	○			
j017	1988	1986	10th	M	A	Hypoxic encephalopathy	On the day of accident, the victim spent the first 2 h practicing 200 uchikomi, 60 controlled practice matches, 10 randori matches (4 min each), 10 motodachi (receiver) matches (1 min each), and 3 practice matches (4 min each). He then took a break leaning back on a wall, but suddenly fainted after a few minutes. He was immediately taken to a hospital, but he died after 7 days.			○	
j018			11th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, right after 10 controlled practice matches, the victim fell with his hands on his head and became unconscious. He was taken to a hospital where he was treated; however, he died. The fall during the controlled practice in which he hit his head was the suspected cause of death.	○			
j019			10th	M	A	Cerebral swelling	On the day of the accident, the victim was thrown with ouchi-gari (large inner reap) during randori, and he hit the back of his head on the tatami mat in the dojo. He was taken to a hospital and treated, but he died after 12 days.	○			
j020			7th	M	A	Acute cerebral swelling	On the day of the accident, new team members, including the victim, did throw/receive practice in pairs. While on the receiving side, the victim failed to break-fall properly and hit his head several times. He was taken to a hospital and treated, but he died the next day.	○			
j021	1989	1987	10th	M	A	Sunstroke	On the second day of a judo team camp, the members warmed-up and practice newaza after breakfast. They then continued with a 100 uchikomi (of seoi/shoulder throws) session. At approximately the 40th to 50th round of uchikomi, the victim started to count numbers wrongly and his voice became low, but he continued until 100. Later, he slumped and started to talk and act strangely. The team sensed something wrong and called an ambulance. Although he received emergency medical treatment, his condition aggravated the next morning and he eventually died.			○ (heat attack)	
j022			8th	M	A	Right-sided subdural hematoma	On the day of the accident, after randori, the team members practiced seoi-nage in pairs and threw each other in turns. During practice, after the victim was thrown and he break-fell, he tried to get up but could not move. He cooled his head using a cold wet towel. He was later taken to a hospital and treated, but he died.	○			
j023			9th	M	Others	Brain contusion, acute left-sided subdural hematoma	While participating in a judo tournament at a sports festival, the victim was thrown with osoto-gari because of which he fell outside the mat with his opponent on top of him. He fell on his shoulder and hit his head against the wooden frame between the tatami mat and floor. Although the victim was not injured, the members allowed him to rest because he could not continue. He then suddenly had a seizure and was immediately taken to a hospital; however, he remained in a coma until death.	○			

j024			11th	M	A	Intracranial bleeding, brain contusion	On the day of the accident, while practicing controlled nagekomi (repetitive throwing), the victim was thrown by his partner and he fell on the right side of his head. He continued to practice after the accident, but after a short while, he slowly squatted with his hands on his head as if he was falling forward and became unconscious. He was immediately taken to a hospital in an ambulance and treated, but he died.	○			
j025	1990	1988	7th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, while participating in a controlled practice, the victim was thrown with osoto-gari and he fell on his back. As he tried to get up to greet his partner, he squatted and became unconscious. He was having a seizure and snoring. He was first taken to a nearby hospital for emergency medical treatment and later transferred to another hospital and operated; however, he died the next day.	○			
j026			8th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, when the victim was thrown with seoi-nage because he was pulling himself away from his partner and also because the partner's strength and victim's ukemi move were both insufficient, he ended up hitting his head hard on the tatami mat. He was taken to a hospital and operated, but he died 1 week later.	○			
j027			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the victim was thrown with ouchi-gari and he fell on his back hitting his head on the tatami mat. It was an average throw, and he did not break-fall properly. He stood up and took a few steps before falling forward. He was immediately taken to a hospital where he remained nearly brain dead for 7 days until he died.	○			
j028			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, while participating in the match-style practice, the victim was attacked with osoto-gari, and he fell on his bottom first and then on his back. Although he hit his head in the accident, he continued to wrestle with his partner on the outside of the mat. As he returned to the start line to resume the match, he suddenly groaned and fell on all fours after which he started snoring and became unconscious. He was immediately taken to a hospital in an ambulance, but he died the next day.	○			
j029			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, after warm-up, uchikomi, and randori, the team members performed controlled practice. The victim tried to break-fall but could not do it properly and hit the back of his head. He then took a few steps from the center of the dojo and got off the mat. Later, he suddenly squatted. The other members laid him quietly on the floor. However, since he remained unconscious, he was taken to a hospital in an ambulance. He died approximately 11 h later.	○			
j030	1991	1989	10th	M	C	Brain contusion	In a supplementary judo class, the class performed "kuzushi (unbalancing techniques)" in a match-style practice. The instructor practiced with the victim and told him to take a basic defensive posture. Then, the instructor tried to twist him around while bringing his own body up; however, as he failed to fully twist the victim, the victim's body hit the coach at an almost straight angle. Because the victim's head was under the coach's right arm, the coach could not maintain balance and fell on his back, while the victim who was still holding the coach's body also could not maintain balance and hit his head on the mat. The victim was immediately taken to a hospital in an ambulance, but he died 3 days later.	○			
j031			11th	M	A	Cardiopulmonary/ respiratory arrest due to brain contusion	On the day of the accident, during randori, when the victim tried to attack his partner with uchimata (inner thigh throw), the partner dodged his attack and threw him with kaeshi-waza (counter techniques). At that time, the victim probably hit his head on the tatami mat. The same thing happened thrice in the match. During the meeting after practice, the victim complained of being unwell, and so, the other members let him rest. While resting, he vomitted and became unconscious. He was examined by a surgeon in an ambulance and operated at a hospital, but he never regained consciousness and died a week later.	○			

j032			11th	M	A	Intracranial bleeding	On the day of the accident, the victim was participating in a team competition hosted by a branch of the All Japan High School Athletic Federation as the primary member of his team. During a match, he was attacked with osoto-gari and hit his head hard on the tatami mat. After the accident, he returned to his seat and watched other people's matches in a squat position. However, he suddenly fell forward and became unconscious. He was immediately taken to a hospital in an ambulance where he received emergency medical treatment. He was later transferred to another hospital and treated, but he died 3 days later.	○			
j033			11th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, while performing controlled practice of seoi-nage, the victim's partner lost balance and the victim, who was on the receiving side, was thrown on the tatami mat from a low position. He fell headfirst and hit his head hard on the mat. He tried to get up and continue to practice, but the teacher in charge made him stop and take a break. After a while, as the victim began to lose consciousness, he was taken to a nearby specialist physician for an examination. He was later transferred to a hospital in an ambulance, but he died 3 days later.	○			
j034			10th	M	A	Acute heart failure (AHF) due to heat attack	On the day of the accident, after warm-up, the team members did 5 laps around a 400-m track at their own pace. They then participated in a sprint practice session, which included 15 m x 8, 50 m x 6, 200 m x 2, and 400 m x 1. Later, while performing pursuit running, the victim became unsteady as he finished his first lap, squatted on the ground, and fainted. Other members splashed water on his face trying to revive him. When he regained consciousness, they moved him to a cool spot in the training hall. They also tried to keep him conscious by applying ice on his forehead, but he was taken to a hospital approximately 8 h after the accident because his condition worsened; he died later.			○ (heat attack)	
j035			10th	M	C	Acute heart failure (AHF)	On the day of the accident, after practicing judo in a gym class, the victim changed his outfit and returned to his classroom on the 4th floor. Then, while sitting in his chair, he slid on the floor and was immediately given mouth-to-mouth resuscitation and taken to a hospital. However, he died. The victim's pre-existing disease: Apical hypertrophic cardiomyopathy (he was examined and diagnosed with cardiac ultrasonography 4 months prior to his death, when his electrocardiogram was found to be abnormal)			○	
j036			10th	M	A	Suspected acute pneumonia	During a judo team camp, the victim developed a fever of 40°C. He was examined at a hospital and requested to be hospitalized, but the members thought it was unnecessary and made him stay at the camp room for the night. The following morning, he was still not feeling well, and his condition suddenly worsened at around 11:00. He was again taken to the hospital, and this time he was hospitalized. He seemed to be recovering at one point; however, even then he was still showed the same symptoms, including cyanosis of the 4 limbs and breathing difficulty as at the time of administration. His condition gradually deteriorated later, and after 2 days, he developed pneumonia along with the fever in the morning. Around noon of the same day, his condition suddenly changed and he died.			○	
j037	1992	1990	7th	M	A	Acute right-side subdural hematoma	On the day of the accident, during randori, 6 members of the team including seniors felt that the victim who was planning to leave the team was not sufficiently enthusiastic about the practice. Therefore, they decided to give him a harder time than usual in kakari-geiko. Two of them together attacked him with osoto-gari, and the victim fell hitting his head hard on the mat. As he became unconscious, the members reported the accident to the teacher in charge who was in the faculty's office at the time. The victim was taken to a hospital and operated, but he died.	○			

j038			8th	M	A	Brain contusion	On the day of the accident, during randori, the victim was thrown by his partner with taiotoshi. While falling, because the partner lost balance and fell down with him, the victim could not make a proper move and hit the left side of his head on the tatami mat. The teacher in charge immediately made him rest. When the teacher examined the victim, the victim said he was feeling sick and complained of a headache. He was then taken to a hospital and operated, but he died 8 days later.	○			
j039			10th	M	A	Acute subdural hematoma (ASDH), hemorrhagic shock	On the day of the accident, during randori, the victim was thrown with yokogake (side-drop) and hit hard on the right side of his head. He sat down for a while (1 to 2 min) applying a wet towel on his forehead. He asked the teacher in charge to allow him to lie down. As the others tried to move him to a corner of the dojo so that he would be safe and away from other students, he collapsed. He was taken to a hospital. He gradually regained consciousness but died 8 days later..	○			
j040			10th	M	A	Acute subdural hematoma (ASDH),	On the day of the accident, during randori, the victim was thrown with taiotoshi. He hit the back of his head on the tatami mat. He took a 5-min break. On his way to the bathroom to have some water, he fell at the bathroom entrance. Other team members cooled his head while waiting for an ambulance, and he was taken to a hospital; however, he died 10 days later.	○			
j041			10th	M	A	Brain contusion	On the day of the accident, during a randori match, the victim's partner failed to do uchimata properly and fell with the victim, with the victim's head under his arm. After they got up and finished the match, which was their first one of the day, the victim said he was sick and had nausea and went to the bathroom accompanied by a team member. He vomitted in the bathroom, and while the accompanying student was rubbing his back and cooling him with water, he fell unconscious. He was taken to a hospital and treated, but he died after 2 days.	○			
j042			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the victim was thrown with osoto-gari by a member of the same grade. He fell headfirst, hitting his head hard on the tatami mat. He quickly got up and got off the mat. Later, while sitting with an ice bag on his forehead, he suddenly collapsed on the floor. He was provided emergency medical treatment and taken to a hospital in an ambulance, but he died.	○			
j043			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the victim practiced weight lifting under the instruction of the teacher in charge; he also practiced osoto-gari 6 times. Right after the session, he complained of being sick with a headache and nausea. He fell unconscious soon after. He was taken to a hospital in an ambulance, but died after 2 days.	○			
j044	1993	1991	8th	M	A	Brain contusion	On the day of the accident, the victim was at a different school for practice matches. While practicing moves, he said he was not feeling well, and therefore, others made him rest in a waiting area. The teacher in charge examined him several times, but each time the victim said he was still feeling sick and has a headache. After a while, he fell asleep, and so, the teacher left him alone. After approximately 30 min, as the teacher re-examined the victim, he realized that the victim did not react to any stimulations. Therefore, he was taken to a hospital in an ambulance; however, he died the next day.	○			
j045			10th	M	A	Acute subdural hematoma (ASDH), subarachnoid hematoma	On the day of the accident, after running 3 km and warming-up with the team, the victim practiced hikitsuke (pulling techniques) 50 times and uchikomi 200 times. At approximately the 190th round of uchikomi, he squatted with his hands on his head. When other members asked if he was ok, he said "I'm fine."When the teacher in charge called him, he started to walk toward the teacher, although he was unsteady. He then suddenly squatted, slowly fell on his back on the floor, and became unconscious. He was immediately taken to a hospital in an ambulance, but he died 11 days later.	○			

j046			10th	M	A	Brain contusion	On the day of the accident, the victim participated in a joint judo practice session. He first warmed-up and practiced basic moves, then he moved on to randori (sparring) of tachiwaza. During randori, he was thrown by a shorter partner with seoi-nage and he hit his head on the mat. After the accident, he said he was fine and took a little rest at the corner of the dojo. While resting, he fell unconscious. He was immediately taken to a hospital in an ambulance and operated; however, he died the next morning.	○			
j047			10th	M	A	Acute subdural hematoma (ASDH)	On the 4th day of a judo team camp, the team members did an aggressive tachiwaza practice. Being rather small in the team, the victim ended up being thrown most of the time. Right after the practice session, he complained of a headache and chill; however, he spent the rest of the day without any problems. On the next day, he joined the early-morning practice session and had breakfast. After breakfast, he joined the morning practice session, but he gradually became less vibrant during the session. Around noon, he complained of a headache, took some medicine, and rested. In the afternoon, he participated in another practice session, but he mainly watched as he was not feeling well. At approximately 16:00, he fell with a nosebleed and became unconscious. He was taken to a hospital in an ambulance and underwent craniotomy; however, his condition later deteriorated and he died on the 8th day.	○			
j048	1994	1992	11th	M	A	Acute circulatory failure	On the day of the accident, after a morning practice session with the team, the victim had some water at a water fountain and washed his face. On his way back to the training hall, he suddenly became unsteady, started getting leg cramps, and crouched. They laid him down quietly on the floor, but he began to have a seizure and lose consciousness. He was taken to a hospital in an ambulance, but he died.			○	
j049			7th	M	A	Subdural hematoma	On the day of the accident, while practicing maemawari-ukemi (forward rolling break-fall) after basic practice, the victim told his friend that he had pain in the left side of his head; however, he did not report it to the teacher in charge. He also complained of neck pain before kesagatame (scarf hold), but did not report it to the teacher. After the day's practice, he told the teacher that he had a headache. He was then questioned, but the cause remained uncertain. He was taken to an office near the dojo. His condition suddenly changed. As a result, his father arrived and drove him to a hospital. He was later transferred to another hospital for surgery, but he died after 9 days.	○			
j050			7th	M	A	Subdural hematoma	On the day of the accident, after warming-up and practicing uchikomi, nagekomi, and randori, the team members practiced ashiwaza (leg or foot techniques), newaza, etc. At the end of the practice session, when they were about to cool-down, the victim collapsed on the floor. He was first taken to a municipal hospital in an ambulance and then transferred to a prefectural hospital for surgery, but he died after 10 days.	○			
j051			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, while performing randori with the team in a training hall, when the victim was attacked by his partner with ippon-zeoi (one armed shoulder throw), he tried to break-fall but could not do it properly and hit the side of his head. Later, he got up, walked to a pile of tatami mats, crouched, and fell unconscious. He was immediately taken to a hospital in an ambulance, but he died after 2 days.	○			
j052			10th	M	A	respiratory failure	On the day of the accident, during a randori match in the dojo, the victim was thrown with osoto-gari and he fell on his back hitting the back of his head. Others immediately stopped him from practicing. While resting, he lay down on the floor complaining of nausea and later fell unconscious. He was taken to a hospital in an ambulance, but he died after 54 days.	○			



j053			11th	M	A	Acute subdural hematoma (ASDH)	One day during the summer vacation, after stretching out by warming-up, the victim performed 120 uchikomi for approximately 30 min and participated in 5 randori matches. Later, he said he was not feeling well and vomitted in a toilet. He then resumed his practice, but while sitting on the floor during break time, he fell forward and became unconscious. He was taken to a nearby university hospital on a stretcher, where he underwent surgery. He died 11 days later.	○			
j054	1995	1993	12th	M	A	Acute brain edema (initial diagnosis: exsiccation, heat attack, shock)	On the day of the accident, the victim was participating in a joint judo practice session hosted by several schools. Right after 16:00, just when he finished all his scheduled practice, he said he was not feeling well and fainted. He was immediately moved to an airy location, given water, and observed. After a while, as he started to have a seizure, he was taken to a hospital in an ambulance and treated; however, he died after 7 h.			○ (heat attack)	
j055			10th	M	A	Brain death – the cause: intracranial injury – the cause: external force to the head	On the day of the accident, the victim was thrown with kosoto-gari (small outside reap) during randori and hitting hard on the back of his head. The partner who threw him did not fall, and therefore, no weight was forced on the victim. Although he said he was fine immediately after the accident, he then started losing consciousness. He received emergency medical treatment, was taken to a hospital in an ambulance, and treated, but he died after 11 days. (Autopsy report) 1. Left-sided subdural hematoma, traumatic subarachnoid hemorrhage, significant cerebral swelling, herniation, and brain dead. 2. Bilateral bronchopneumonia and enlarged tonsil. 3. Old epidermolysis on the back of the head.	○			
j056			11th	M	A	Acute subdural hematoma (ASDH) – the cause: head banging	On the day of the accident, the victim was practicing with the teacher in charge and was attacked with kouchi-gari. After the teacher swept his right leg, the victim fell backward and hit his head and shoulders on the tatami mat and lost consciousness. He was provided first-aid treatment and taken to a hospital to receive professional treatment, but he died after 1 month. (Autopsy report) Brain was swollen and mushy. Part of the cranial bone was missing because of craniotomy. Radiographic bronchopneumonia.	○			
j057			11th	M	A	disseminated intravascular coagulation (DIC) – the cause: Retroperitoneal Hematoma – the cause: chylothorax	On the day of the accident, while practicing in the gymnasium, the victim was attacked with taiotoshi from hidari-kumite (left-side sparring) during randori. He tried to dodge the attack but fell on his left shoulder while almost holding the partner by the waist and fractured his left collarbone. After emergency medical treatment, he was taken to a hospital and was later informed that the bone was healed. However, because he was still not feeling well, he visited a physician and was diagnosed with idiopathic chylothorax. He was later transferred to the trauma department where he was diagnosed with traumatic chylothorax. He was hospitalized, operated, and treated, but he died 10 months from the accident.			○	
j058	1996	1994	7th	M	A	Acute subdural hematoma (ASDH) caused by brainstem paralysis	On the day of the accident, while doing uchikomi in a training hall after ukemi practice, the victim was attacked by a 9th grader with seoi-nage. He fell on his right shoulder and lay still for several seconds; however, he managed to get up and semi-crouch. He later complained of not feeling well and he fell on his back. As he started snoring with his eyes half open, he was taken to a hospital in an ambulance and treated, but he died after 4 days.	○			
j059			7th	M	A	lung failure (Aortic dissection)	On the day of the accident while practicing tachiwaza, the victim was thrown with osoto-gari. Later, during ukemi practice, he complained of pain in his stomach. He was immediately taken to a hospital and treated, but he died after 3 days.			○	

j060			7th	M	A	Brain contusion	On the day of the accident, 13 members of the judo team practiced in a dojo. Because the teacher in charge was absent on the day, the team captain instructed the members about what to practice. After warm-up and basic practice, they did controlled practice on gymnastic mats placed on tatami, combining uchikomi and nagekomi. During this practice, the victim failed to break-fall properly and fell on his back on the mat. Later, he stopped practicing twice because he could not breathe. He practiced ukemi by himself for a while and then resumed practice with other members. However, he stopped once again complaining of nausea and of not feeling well. He fainted on his way to the balcony. He was taken to a hospital in an unconscious state and treated, but he died the next day.	○			
j061			11th	M	A	Head trauma caused by cerebral edema, acute subdural hematoma (ASDH)	During a joint judo summer camp held at a different school, the victim was thrown by his partner with taiotoshi during practice. When he fell, he hit the right front of his head hard on the tatami mat. He then rolled onto his back, got up, reported the accident to the teacher in charge, immediately collapsed, and fell on his back. He was snoring and manifesting convulsions, and therefore, he was taken to a hospital and treated. However, he died after 4 days.	○			
j062			12th	M	C	Unknown	In a gym class while performing newaza sparring in the dojo, the victim was pinned down by his partner on the floor. He struggled to fight back moving his arms and legs for approximately 10 s, but after approximately 15 s, he started snoring. The partner thought he was joking and continued to hold him down for another 15 s. After 30 s, the victim was still on the floor, losing consciousness. He was then taken to a hospital with the teacher trying to resuscitate him on the way.				○
j063			10th	M	A	Hyperkalemia	In a joint camp of 3 different schools during the summer vacation, students practiced in the morning and afternoon at a prefectural training hall. After 15:30, when they started practicing tachiwaza, the victim informed the teacher in charge about being unwell and took a break. While the teacher was nursing him, he started losing consciousness; therefore, he was immediately taken to the emergency center at a university hospital in an ambulance and treated. However, he died after 3 h.			○	
j064			11th	M	A	Rhabdomyolysis, acute renal failure (ARF)	On the 3rd day of a judo team camp (from August 8th to 12th), the victim developed leg pain while walking on the street during an early morning marathon. While he was resting on the street, the teacher in charge found him and drove him back to the lodging facility. Because the victim complained of numbness in his limbs, he was taken to a hospital and treated, but he died the next day.			○	
j065	1997	1995	7th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident while practicing randori under the instruction of the teacher in charge, the victim was attacked with haraigoshi and he fell with the partner on top of him. Later, he managed to stand up but collapsed on the tatami mat. The teacher noticed this and called an ambulance. The victim was taken to a hospital, and he underwent a successful 4-h surgery. However, on the 3rd day, his condition suddenly changed and he became brain dead and died after 5 days from the accident.	○			
j066			10th	M	A	Acute cerebral swelling, subdural hematoma	On the day of the accident, the victim practiced randori with the teacher in charge. When he was thrown by the teacher with uchimata, the teacher somehow got trapped and fell on top of him. The victim immediately tried to stand up, but he could not stand and collapsed. He was taken to a hospital but he died after 13 days.	○			

j067	1998	1996	7th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the team did controlled practice in which 1 member threw 6 other members. The thrower, a 9th grader, attacked the victim with ouhi-gari, and when the victim stepped back, he pulled him back toward him to confirm that he (the victim) had lost balance and then attacked him with seoi-nage. Although the victim tried to regain balance, he failed to do so and fell headfirst onto a catching mat. Later, he stood up and started to walk toward the end of the waiting line, but collapsed down on the floor. The accident was reported to the school nurse, who then came straight to the scene. As the nurse saw the victim having a convulsion and losing consciousness, he/she immediately called an ambulance. He was taken to a hospital and treated, but he did not recover and died in the evening on the following day.	○			
j068			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, after warm-up and uchikomi, the victim practiced with a 11th grader. He was attacked with uchimata twice and with ouchi-gari once, but he managed to dodge all of them. At approximately 1 min after the match started, he suddenly squatted with his hands on his head. The teacher in charge told him to sit in the corner of the dojo. He sat in the corner but then suddenly fell forward and started losing consciousness. He was immediately taken to a hospital and operated, but he remained in a coma and died after 6 days.	○			
j069			12th	M	C	Pulmonary thrombosis	In the gym class, the victim was attacked with taitoshi during randori. Although he tried to stand firm, not to be thrown, he fell twisting his right ankle with the partner on top of him. Because the partner's weight was forced on him, he ended up fracturing his right ankle. He was hospitalized and operated, and his ankle got better. However, after 11 days from the accident, he developed chest pain and was treated at a hospital. Three days later, he again experienced chest pain. An ambulance was called but the victim died before its arrival.				○
j070			11th	M	C	Acute heart failure (AHF)	In the gym class after warm-up and ukemi practice, the class started performing group randori. At his turn, the victim wrestled with his partner toward the outside of the mat. As the referee told them to stop, they stopped and were walking back to the center when the victim suddenly fell backward. He was immediately taken to a hospital in an ambulance, but he died after about 40 min from the accident.			○	
j071			12th	M	A	Unknown	On the day of the accident during a randori session, the victim seemed exhausted and was frequently observed to be just standing. The victim did not say anything, but it was obvious that he was not feeling well. After 2.5 h of practice, although he usually went home by bus, he asked his father to pick him up by car, probably because he was exhausted. On their way home, because he looked ill, his father took him to a hospital so that he could be examined. After an examination, the doctor informed that there was nothing particularly wrong with him, and they went home. On the following day, since he was still not feeling well, he returned to the same hospital, but the doctor again told him that he need not be hospitalized. He was resting at home when his condition suddenly changed, and he died around noon on the same day.				○
j072			8th	M	A	Multiorgan failure due to heat attack	On the last day of a 3-day joint judo camp with students from other schools, after warm-up, participants did outdoor running and sprint training. During this session, the victim ran for lesser time and distance than other students. After rest, everyone had breakfast and took a break; however, the victim had only tea and was resting. After a while, his condition suddenly changed, and he began to behave strangely. As the teacher in charge laid him down on the tatami, he began to have a seizure and slipped into a coma. He was immediately rushed to a hospital in an ambulance and treated; however, he did not recover but died the next day.			○ (heat attack)	

j073	1999	1997	10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the victim was at an out-of-school dojo to participate in lightweight matches for a prefectural preliminary round. During the match, he was thrown by his opponent with seoi-nage. The right front of his head hit hard on the tatami mat and he fell forward on his back. He tried to get up, but the chief referee told him to stay lying down. Although he was conscious and looked normal for some minutes, he gradually went into a daze thereafter. His symptoms at this point included the following: Slight yawns, stiffening of the limbs, and incontinence. He was taken to a hospital in an ambulance and operated for hematoma evacuation; however, he experienced cardiac arrest after 30 min and died.	○			
j074			10th	M	A	Hernia cerebri	On the day of the accident, the victim participated in controlled practice. When his 3rd partner for the day swept his right leg, he break-fell on the tatami. Later, he tried to stand up, but because he was unsteady, bumped into a board wall and crouched. Other members laid him in the corner of the dojo, but he was moving his upper body as if he wanted to resume his practice. As they tried to make him still, they realized he was actually having a seizure with his eyes wide open. They immediately called the school nurse. As the victim was unconscious, he was taken to a hospital in an ambulance and treated, but he remained brain dead and died 18 days later.	○			
j075			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the members were doing randori in a training hall. After his 2nd match, the victim said he was not feeling well and complained of a headache. While he was watching other members practice, he suddenly fell unconscious. The school nurse rushed to the scene and confirmed his pulse and breathing, but he was immediately taken to a hospital in an ambulance because he was foaming at the mouth. He was diagnosed with acute subdural hematoma at the hospital; he later became brain-dead and died 3 h later.	○			
j076			10th	M	A	Brain contusion	On the day of the accident, the victim was planning to take a promotion test. Because he had extra time before going to the test site, he warmed-up by running up and down the emergency stairs as usual. The handrail was wet that day because of rain the previous day; he is suspected to have slipped and fallen at some point. Other team members later found him unconscious at the bottom of the stairs. He was taken to a hospital in an ambulance; however, he died after 1 h.				○
j077			10th	F	A	Acute subdural hematoma (ASDH)	On the day of the accident, while practicing nagekomi in the dojo, the victim was thrown by his partner with osoto-gari. He tried to break-fall, but he failed and hit his head hard on the tatami mat. He stood up but fell back on the mat and became unconscious. He was taken to a hospital and at one point seemed to be recovering; however, he remained in a coma and died 11 days later.	○			
j078			10th	M	C	Suffocation	During gym class, after warm-up and practicing ukemi, uchikomi, and basic moves, the victim participated in a 2-min practice match. After that, he may have left the class to go to the bathroom. He was later found lying down on the floor in front of the bathroom. Since he was pale and unconscious, he was immediately taken to a hospital. He died 3 h later.				○
j079			12th	M	C	Acute heart failure (AHF)	During a gym class, the students first warmed-up and then practiced ukemi and randori. As his collar was messed after randori, the gym teacher tried to fix it for him. He fell forward leaning on the teacher's arms. The teacher assumed that he was just anemic and so loosened his belt and laid him down. After announcing the end of the class, the teacher checked back on him and realized he was not breathing. The teacher attempted cardiopulmonary resuscitation and took him to a hospital in an ambulance. However, he died 2 h later.			○	

j080	2000	1998	11th	M	C	Ventricular fibrillation	On the day of the accident, students practiced judo in dojo during a gym class. They first warmed-up and then practiced ukemi. After that, the gym teacher gave them basic guidelines for match-style practice and asked the victim to demonstrate moves with another student. When the teacher interrupted them to explain the moves, the victim suddenly squatted down and fell backwards to the left. The teacher immediately gave him a cardiac massage for cardiopulmonary resuscitation, while securing an airway. The victim was taken to a hospital in an ambulance, but he died after 2 h.			○	
j081			8th	M	A	Multiorgan failure due to heat attack	On the day of the accident, the victim participated in a joint practice at another school. After warm-up and newaza/nagekomi practice, the group started a randori session. Because the victim seemed exhausted, the teacher in charge told him to take a break. After a while, the victim went into a daze and his right hand began to stiffen. He was immediately taken to a hospital and treated, but he died the next day.			○ (heat attack)	
j082			8th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the victim practiced uchikomi with a partner. First, he practiced seoi-nage throwing the partner, and then his partner practiced osoto-gari throwing him. When the victim was thrown for the second time during the session, he hit his head on the tatami mat. After the accident, he slowly got up but fell back on the mat. The school nurse rushed to the scene and secured an airway. He was then taken to a hospital in an ambulance and treated, but he died after 4 days.	○			
j083			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the judo team did uchikomi and randori after muscle training. Right after the members made a bow at the end of practice, the victim fainted. The teacher in charge held him up and confirmed his pulse and breathing. However, because he was unconscious, he was immediately taken to a hospital in an ambulance. He underwent an emergency operation and was treated at the hospital. However, he died after 1 month.	○			
j084			10th	F	A	Suffocation	On the day of the accident, while doing interval training of newaza in the dojo, the members practiced okuri-erijime (sliding collar strangle) with each other. The victim fainted during the session but was successfully resuscitated and recovered. Thereafter, the team coach showed her how to escape from newaza by holding her down with kuzure-kesagatame (modified scarf hold) and putting his/her left arm on her throat. During this, the victim became limp and slipped into a coma. The coach tried to resuscitate her and wake her up by slapping her on the cheek, but she remained unconscious. As a result, she was taken to a hospital in an ambulance and treated. She died after 2 h.		○		
j085	2001	1999 and 2000	7th	M	A	Cardiac sudden death	On the day of the accident, the team members warmed-up and practiced ukemi, uchikomi randori, and hikidashi (drawing out), and then rested. After finishing practice and cleaning the dojo, the victim and his friend joked around by attacking each other with judo techniques. When the victim turned around, the friend pushed him on the back and after he fell on his stomach, the friend lay on top of him with his face down. Another student noticed that the victim was turning blue, so he told the friend to get off his back. They then talked to the victim but he did not respond. They asked a teacher for help, and the teacher gave him mouth-to-mouth resuscitation and cardiac massage, but the victim later died at the hospital.			○	
j086			8th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, when the victim was attacked with a throw technique, he tried to break-fall. However, as he put too much power into the move, he took one and a half turns and fell. Although he stood right up after the accident, the teacher in charge noticed something was different and called an ambulance. The victim was taken to a hospital and treated, but he died.	○			

j087			12th	F	A	Postresuscitation encephalopathy	On the day of the accident, after a morning practice session and lunch break, the victim did newaza sparring with students from other schools and adults. While she was practicing with her 8th partner, she was attacked with kuzure-shihogatame (modified full mount) and lost the match after 15 s. At the end of the match, as she tried to sit on her legs for bowing, she fell unconscious. After mouth-to-mouth resuscitation and cardiac massage failed, she was taken to a hospital and treated professionally, but she died.		○		
j088	2002	2001	10th	M	A	Heat attack	After participating in a joint practice session held by 3 neighboring schools, the victim was riding a bike on his way home when he started to feel sick and collapsed on the street because of dehydration and died.			○ (heat attack)	
j089	2004	2002	7th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the judo team began practicing from 13:00. After warm-up, the members did 4 kumite (sparring) sessions. From 14:00, the members did piggyback walk (5 laps around the dojo), randori (2 min x 5), and nagekomi (2 sessions x 12). After a break, the victim resumed his practice and did randori from around 14:50, participating in the 1st and 3rd rounds. During the 3rd round match, right after his partner attacked him with ashiharai (foot sweep), he lost his balance and fell sideways. The team coach first assumed he was suffering from dehydration, but as he/she got closer to the victim, he/she realized he was unconscious with his teeth clamped together and his tongue rolling. The coach immediately secured an airway and the victim was taken to a hospital in an ambulance. He underwent CT and craniotomy for hematoma evacuations. However, he died about 22 h after the accident.		○		
j090			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, after 1 h of randori and a 5-min break, the team members participated in an attack practice session where 2 members stood in the front to be attacked by other members. After about 10 min since the session started, the victim who was waiting for his turn by the window, suddenly fell unconscious. Other members immediately moved him to an airy spot near the entrance and put a towel in his mouth to avoid glossoptosis. They also applied ice to his underarms while waiting for an ambulance. He was taken to a medical institution and based on the results of the test, he was diagnosed with acute subdural hematoma. Although he underwent an emergency operation, he remained unconscious and died 4 months after the accident.		○		
j091			8th	M	A	Hemorrhaging of the brain	On the day of the accident, the team members first warmed-up (20 min) and practiced newaza, katamewaza (2 min x 2), and newaza sparring (2 min x 4). After that, they did 4 league tournament matches with a 2-min break between each match. They then took a break and played an intrasquad game (red team vs. white team). The victim participated in the first match, but as he grappled with his opponent at the start signal, he was fouled out. He was watching other members' matches when he complained of numbness in the limbs. He tried to stand up but he couldn't. He then collapsed. He began to have convulsions and went into a daze. He was taken to a hospital in an ambulance and treated in the ICU; however, he died after 3 days.		○		
j092			10th	M	A	Cardiogenic shock	On the 3rd day of a judo team camp at school, the victim finished his practice at approximately 17:00 as usual, had dinner and a bath, and went to bed around 21:40. At around 00:50, a student who was sleeping next to him noticed he (the victim) was snoring asthmatically lying on his stomach. This student then reported it to the teacher in charge. Although the victim was immediately taken to a medical institution in an ambulance and received treatment, including cardiac massage, he died.			○	

j093			8th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the judo team had a joint practice session with teams from other middle schools from 9:00. At around 10:21, they started kakari-geiko (3 min x 6), and the victim practiced with a student from a different school. When he was thrown with osto-gari, because his partner fell with him, he hit his back, head, and stomach hard on the mat. Thereafter, they resumed the match, and at around 10:24, the partner threw the victim again with osto-gari. This time, he hit his back and head and became unconscious. The teacher in charge put a cold wet towel on the victim's forehead and watched him for a while. As he did not regain consciousness, the teacher called an ambulance and his parents. The victim was taken to a medical institution and treated with a mechanical ventilator at the ICU; however, he became brain-dead the following day and died 3 days after the accident.	○			
j094	2004	2003	7th	F	A	Acute subdural hematoma (ASDH)	On the day of the accident, the victim failed to break-fall properly, hit the back of her head on the tatami mat, and fell unconscious. Right after the accident, the teacher in charge reported the accident to the faculty's office, and the school nurse then rushed to the scene and requested the office to call an ambulance immediately. Accompanied by the school nurse, the victim was then taken to a hospital. After being examined, she underwent an emergency surgery at the hospital. She was hospitalized and treated but died 1 month after the accident.	○			
j095			10th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident after warm-up, stretching, and ukemi practice, the victim did 50 uchikomi with a partner. Thereafter, he did randori with another student and was thrown with migi-seoinage (right shoulder throw). Right after the fall, he stood up but then fell forward on his stomach. He was taken to a hospital and diagnosed with acute subdural hematoma. He later experienced symptoms such as profound coma, cessation of natural breathing, dilation of the pupil, and no brainstem response. He was declared brain-dead and he died after 8 days.	○			
j096			10th	M	A	Unknown	On the day of the accident, the team started practice at 9:00. After warm-up and additional exercise, the members did randori from 10:10. During randori, they practiced tachiwaza first and then both tachiwaza and newaza. After about 30 min since the practice started, the team coach joined randori and practiced with the victim. During their 6th match, the coach threw the victim and continued on to newaza; however, soon after, they realized that the victim was limp and unconscious. The coach thought he had fainted because of newaza and gave him a cardiac massage. However, when the victim did not regain consciousness, the coach asked the kendo-team's coach to help him up. After calling an ambulance, the coach sent 2 members to the faculty's office. Meanwhile, the ambulance arrived and although ambulance workers tried to resuscitate him with a ventilator and cardiac massage, he remained unconscious. He was then taken to a medical institution but he died after 1 h and 40 min.				○✕
j097			9th	M	A	Ventricular fibrillation	On the day of the accident, the victim did voluntary training, which included 10 min stretch exercise, 30 push-ups, 20 sit-ups, and 20 back extensions. Thereafter, he climbed a rope hanging from a 6-m-high ceiling all the way up, and while coming back down, jumped from about 1.5 m high to the floor. After the jump, he took 4 to 5 steps and then lay down on the tatami. At the beginning of team practice, other members talked to him, but since he did not respond, they took him to the school nurse. Seeing him unconscious, breathless, and pulseless, the nurse immediately called an ambulance and gave him mouth-to-mouth resuscitation and a cardiac massage. He was later taken to a hospital and treated, but he died the next day.			○	

j098	2005	2004	11th	F	C	Cardiac sudden death	During the first half of the gym class (about 30 min), after running around in the training hall (from 5 to 7 laps) and doing stretch exercises (15 s x 15 sets), rotating exercises, and defense exercises against newaza (30 s x 2), the victim participated in a match of group B (a group for students more than 60 kg). As he was attacked by his opponent with osoto-gari, he successfully counterattacked and then went on top of the opponent and won by ippon. After greeting the partner at the end of the match, he suddenly fell unconscious.			○	
j099			10th	M	A	Heat attack	On the day of the accident, the team members started practicing at 10:00, and after wam-up, newaza practice, a meeting, and randori, they did uchikomi in pairs from around 12:50. At around 12:55, the team coach showed the victim techniques. However, because he was acting peculiar and responded to the coach looking in the wrong direction, the coach made everyone stop and soon after gave the victim some water and allowed him to rest. The victim then started to have seizures and suffered cardiopulmonary arrest.			○ (heat attack)	
j100	2006	2005	7th	M	A	Cardiac sudden death	On the second day of the a judo team camp, while participating in the morning practice session, the victim mentioned several times that he was not feeling well. At around 17:00, he said he might have the flu. He took a shower after dinner and fainted after some time. He was taken to a hospital in an ambulance but he died the next day.			○	
j101			7th	M	A	Head trauma	During team practice, when thrown with osoto-gari in a practice match, the victim hit the back of his head on the tatami. After the match, he bowed to his opponent and received lectures from the team coach. However, as he returned to his seat, he suddenly collapsed on his back.	○			
j102			9th	M	A	Head trauma	On the day of the accident after circuit training and warm-up, the members did uchikomi, randori, and nagekomi for nearly 2 h. When they were taking a break at water fountains, the victim said he was feeling sick. While resting, he suddenly started to snore and fell unconscious.	○			
j103			11th	M	C	Cardiac sudden death	In the gym class, he was first attacked by his practice partner with ashiwaza and fell on his bottom, and when he was held down with yoko-shihogatame (side mount), he struggled to escape for the first few seconds and then stopped moving. He was immediately taken to a hospital in an ambulance, but he died after 1 h and 40 min.			○	
j104			10th	M	A	Head trauma	It was hot and humid on the day of the accident, and the team members practiced a little less than usual. As for the victim, he was looking normal. According to the teacher in charge and some of the members, he was practicing harder than usual and was not mentioning about his head injuries. There was nothing different about him on the day. After practice, he told the team captain, who was alone with him in the locker room after everyone else was gone, that he was going to take a nap for a while. Later, his parents called the school asking if he was there. His class teacher went searching for him and found him already dead in the locker room. The autopsy report says the cause of death was right-sided acute subdural hematoma caused by head trauma.	○			
j105	2007	2006	10th	M	A	Head trauma	On the day of the accident, while participating in a randori session, the victim hit his head on the tatami mat. During the break, he told the teacher in charge that he had a headache. After hearing about the accident, the teacher told him to drink some water and cool his head with an ice bag. He tried to drink water in a plastic bottle but did not have enough strength to do that and fell on the floor. He was immediately taken to a hospital and treated, but he died after 10 days.	○			
j106	2009	2008	11th	M	A	Heat attack	On the 2nd day of a 2-day intensive judo camp, after jogging in an early-morning exercise session, the victim was found unconscious near the stairs of the lodging facility. He was taken to a hospital, treated, and then transferred to another hospital for artificial dialysis, where he was treated in the ICU. However, he died later.			○ (heat attack)	



j107	Asahi Shimbun May 27, 2009  Asahi Shimbun May 28, 2009	7th	M	A	Head trauma	On the day of the accident, the team started practicing at 9:00 in the morning. After running, stretching, and ukemi practice, the members learned/practiced newaza and osaekomi (pinning techniques) from around 10:00. Then, at 11:00, they started randori. Around noon, right before the end of practice, a senior student attacked the victim with haraigoshi, and the victim fell on the floor and did not get up. When the coach and other members tried to check his condition, he was already unconscious. He was taken to a hospital in an ambulance at 00:25 that night and was examined by CT and treated. However, he did not regain consciousness. (Based on an article in the morning edition of the Asahi Shinbun of May 28, 2009. Edited to protect privacy)	○				
j108	Asahi Shimbun July 27, 2009	11th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the victim was practicing with 3 other members in the school's dojo from 10:00 in the morning. During practice, he went to the washroom and vomited. The teacher in charge, who was somewhere else in the school at the time, came over to check his condition. However, the victim was already unconscious when the teacher arrived. Although he was then taken to a hospital, he died in the early hours of the following morning. Right before the accident, the victim was practicing ukemi by himself while other members were practicing tachiwaza. (Based on an article in the morning edition of the Asahi Shinbun of July 27, 2009. Edited to protect privacy)	○				
j109	Asahi Shimbun July 31, 2009  Asahi Shimbun August 7, 2009  Yomiuri Shimbun August 25, 2009	7th	M	A	Acute subdural hematoma (ASDH)	On the day of the accident, the team members started to practice at 13:00. After practicing newaza, they did 2 min of randori matches in pairs, in which 7th graders practiced with senior students. The victim's practice partner was a male teacher. At around 16:20, after being thrown a couple of times by the teacher, the victim fell on his back and stopped moving. He was taken to a hospital. However, he remained unconscious and died after 27 days. (Based on an article in the Shiga edition of the Asahi Shinbun on August 7, 2009. Edited to protect privacy)	○				
j110	JANJANBlog 2010.06.30 (FY of the accident is 2009)	10th	M	A	Acute subdural hematoma (ASDH)	On the 2nd day of a 7-day judo team camp, the members did exercise from 8:30 in the morning and practiced judo from 9:45 to 12:45. They started an afternoon practice session at 15:00, and after warm-up, newaza practice, and ukemi, they did newaza sparring from 15:20. At 17:45, they took a hydration break, and at 17:55, started oikomi (chasing-techniques) practice (40 s per set. One attacked the other for the first 20 s and the roles were reversed for the next 20 s). At the beginning of the 5th set, as the victim fainted leaning back, they called an ambulance. He was then taken to a hospital, but he died of acute subdural hematoma at 17:35 the next day.	○				
							total	71 (64.5%)	5 (4.5%)	28 (25.5%)	6 (5.5%)
							total	76 (69.0%)			

Fiscal year: 2010

	Yomiuri Shimbun May 2, 2010  Yomiuri Shimbun May 3, 2010	12th	M	A	Acute subdural hematoma (ASDH)	During a joint judo camp with students from other schools, while participating in randori, the victim was attacked by his practice partner with osoto-gari and he hit the back of his head. He stood up but crouched on the floor and died 9 h later at the hospital. It was during a 3-day camp joined by 50 students from different schools in the prefecture. (Based on an article in the morning edition of the Yomiuri Shimbun of May 3, 2010. Edited to protect privacy)	○			
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	Asahi Shimbun July 7, 2010  Yomiuri Shimbun July 9, 2010  Asahi Shimbun July 10, 2010  Yomiuri Shimbun July 10, 2010	7th	M	A	Brain contusion	On the day of the accident, the members started practicing at 7:30 in the morning. From approximately 8:30, the 7th graders practiced ukemi with 1 member in charge of throwing. The victim, one of the 7th graders, was thrown several times. Thus, while waiting in line, he became unconscious. Approximately 50 days prior to the accident, the victim had been diagnosed with acute subdural hematoma for which he was hospitalized for 1 week. (Based on an article in the morning/shizuoka edition of the Asahi Shimbun of July 7, 2010. Edited to protect privacy).	○			
	Japan Judo Accident Victims Association August 27, 2010  JANJANBlog September 30, 2010	10th	M	A	Heat attack	The victim fainted during judo practice and was taken to a hospital in an ambulance, but he died after 2 days.	○			

*Notes										
j096	2004	2003	10th	M	A	Although the cause of death is listed as "unknown" here, according to the certificate submitted by the victim's family, "the cause of death should be strangulation rather than acute heart failure."				

r e f e r e n c e s
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National Agency for the Advancement of Sports and Health (NAASH), "Cases of death and impairment under the supervision of schools and notes for prevention (2009 edition)," 2010

**II. Analysis of All Death Cases (1983–2009) – Figures and Tables**

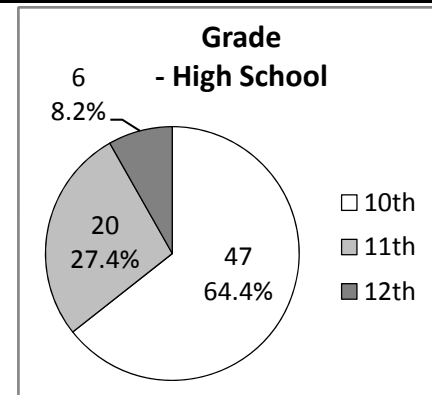
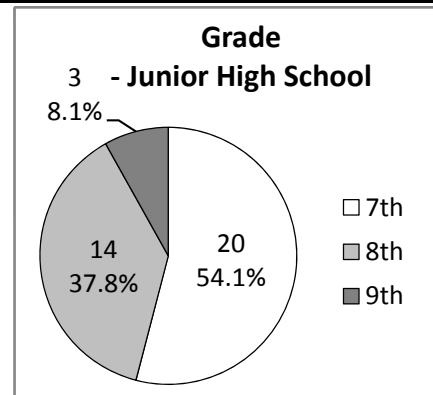
**1, School (junior high school / high school)**

	n	rate
junior high school	37	33.6%
high school	73	66.4%

**2, Grade**

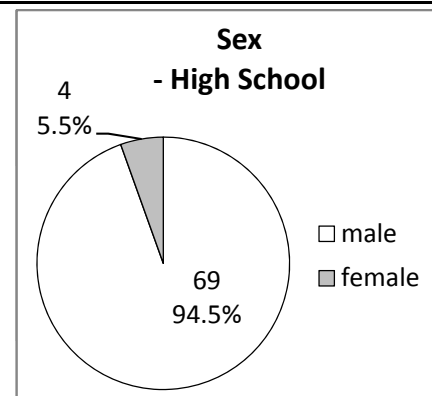
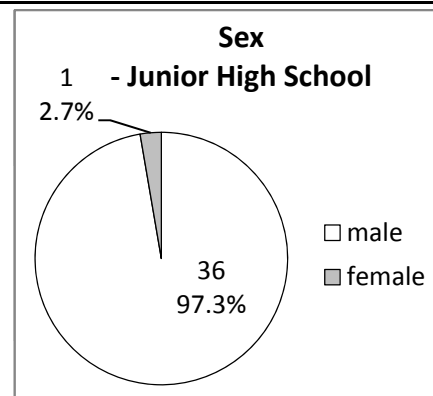
junior high school	7th	8th	9th	total
	20	14	3	37
	54.1%	37.8%	8.1%	100%

high school	10th	11th	12th	total
	47	20	6	73
	64.4%	27.4%	8.2%	100%



**3, Sex**

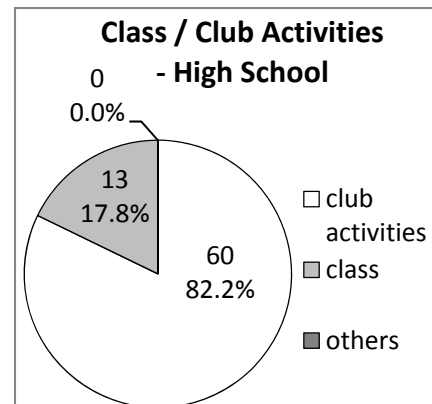
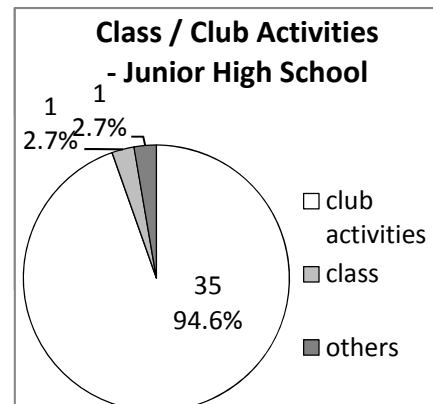
	male	female	total
junior high school	36	1	37
	97.3%	2.7%	100%
high school	69	4	73
	94.5%	5.5%	100%
total	105	5	110
	95.5%	4.5%	100%



**4, Situation**

(in a gym class / during judo club activities)

	club activities	class	others	total
junior high school	35	1	1	37
	94.6%	2.7%	2.7%	100%
high school	60	13	0	73
	82.2%	17.8%	0.0%	100%
total	95	14	1	110
	86.4%	12.7%	0.9%	100%



5, Cause of Death

	A: judo-specific		B: sports- common	C: others	total
	D: head trauma/ brain damage	E: others			
junior high school	28	2	7	0	37
	75.7%	5.4%	18.9%	0.0%	100%
high school	43	3	21	6	73
	58.9%	4.1%	28.8%	8.2%	100%
total	71	5	28	6	110
	64.5%	4.5%	25.5%	5.5%	100%

\*notes

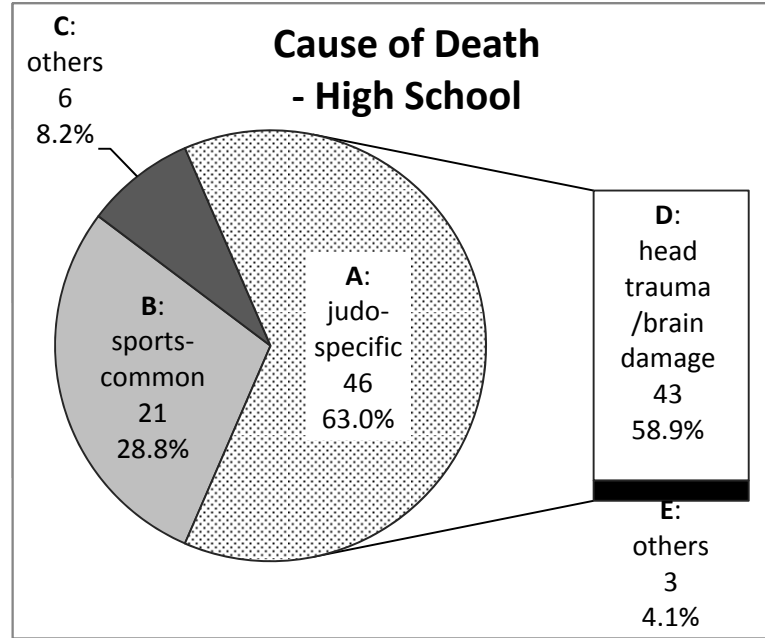
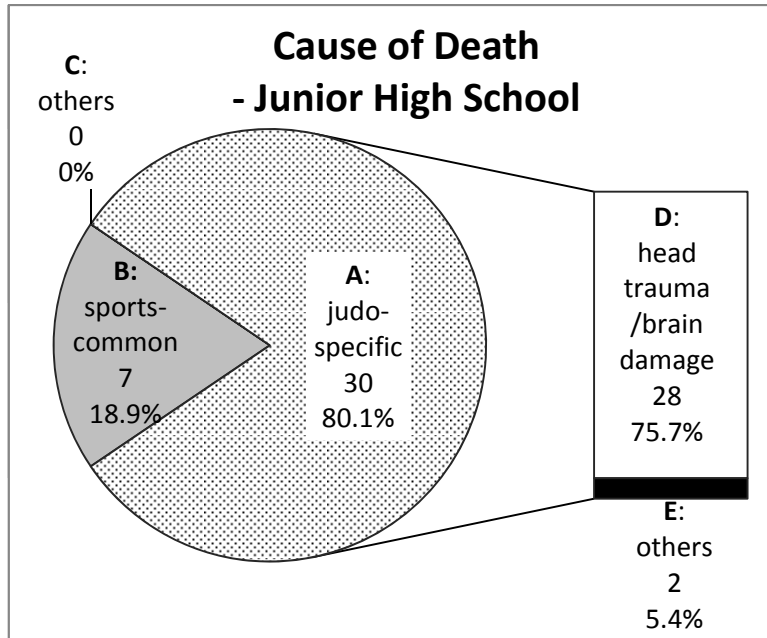
A: Death caused by an action specific to judo

B: Cause commonly observed during sports activities (sudden death, heat attack, etc.)

C: Others (including causes of death that are difficult to determine)

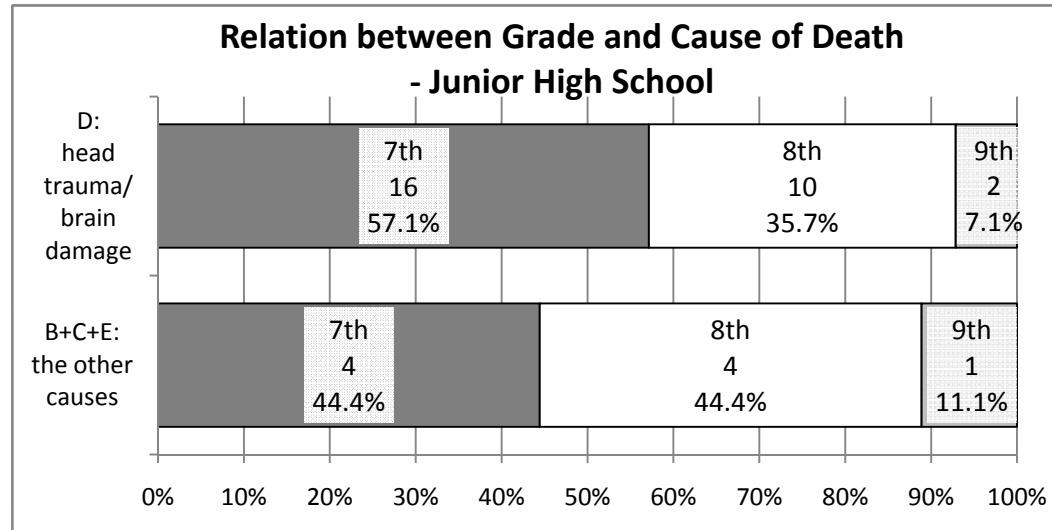
D: Head trauma/brain damage resulting from a shock caused by nagewaza/ukemi

E: Other causes (suffocation, damage to the organs)

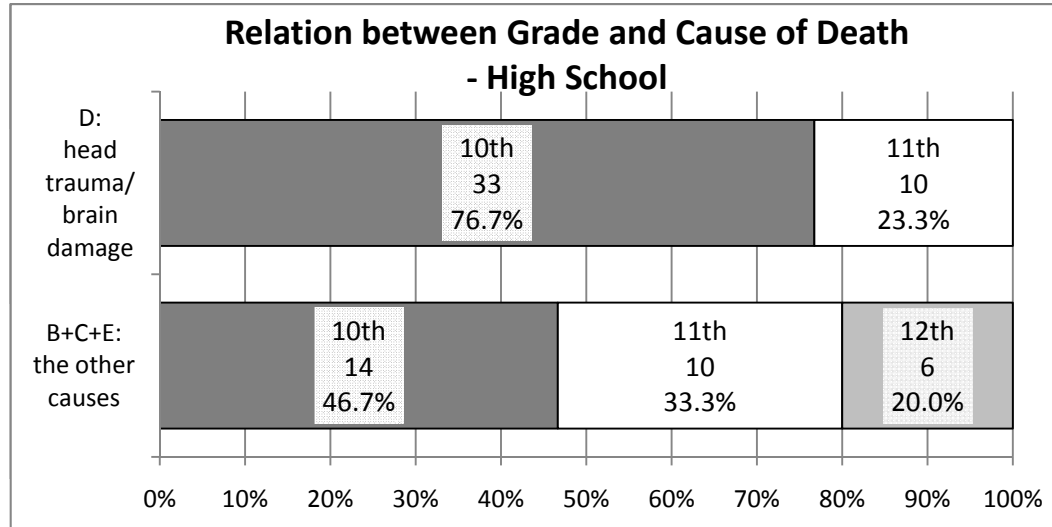


6, Relation between Grade and Head Trauma / Brain Damage

		7th	8th	9th	total
junior high school	D: head trauma/brain damage	16	10	2	28
		57.1%	35.7%	7.1%	100%
	B+C+E: the other causes	4	4	1	9
		44.4%	44.4%	11.1%	100%
	total	20	14	3	37
		54.1%	37.8%	8.1%	100%



		10th	11th	12th	total
high school	D: head trauma/brain damage	33	10	0	43
		76.7%	23.3%	0.0%	100%
	B+C+E: the other causes	14	10	6	30
		46.7%	33.3%	20.0%	100%
	total	47	20	6	73
		64.4%	27.4%	8.2%	100%

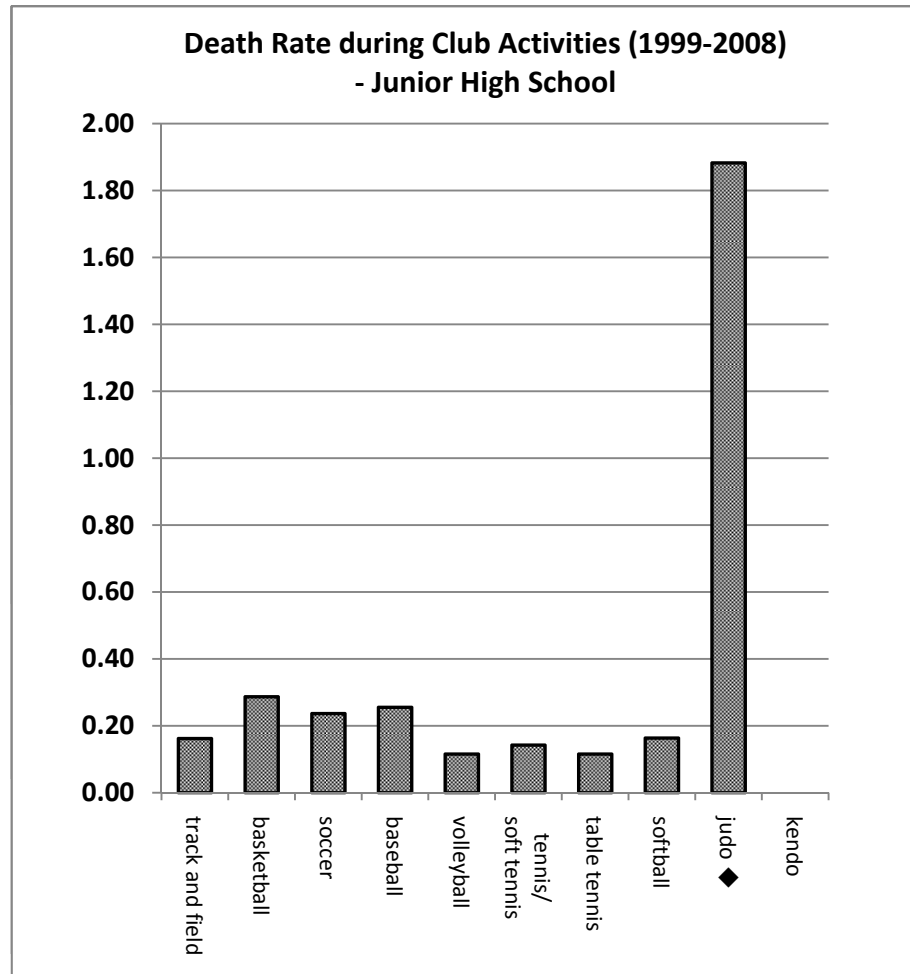


**III. Death Rate during Club Activities over the Past Decade (1999–2008) – Figures and Tables**

○ the Number of Deaths and Death Rate during Club Activities over the Past Decade (1999–2008)  
 – Junior High School

club activities	junior high school		
	a	b	c(=a/10b)
	the number of deaths (1999–2008)	the number of students (in 2003)	death rate (per 100,000 students)
track and field	3	185,369	0.162
basketball	10	348,753	0.287
soccer	5	211,391	0.237
baseball	8	313,520	0.255
volleyball	3	259,197	0.116
tennis/ soft tennis	6	422,037	0.142
table tennis	3	259,621	0.116
softball	1	61,235	0.163
judo ♦	10	53,117	1.883
kendo	0	122,526	0.000
rugby			

\*Popular clubs in Japan are listed here.  
 \*There are few rugby clubs in junior high school in Japan.



○ the Number of Deaths and Death Rate during Club Activities over the Past Decade (1999–2008)  
 - High School

club activities	high school		
	a	b	c(=a/10b)
	the number of deaths (1999–2008)	the number of students (in 2003)	death rate (per 100,000 students)
track and field	8	928,600	0.862
basketball	8	1,596,330	0.501
soccer	10	1,495,910	0.668
baseball	13	1,541,750	0.843
volleyball	6	1,185,030	0.506
tennis/ soft tennis	5	2,120,500	0.236
table tennis	1	670,620	0.149
softball	2	314,020	0.637
judo ◆	10	356,280	2.807
kendo	6	593,820	1.010
rugby	11	304,190	3.616

\*Popular clubs in Japan are listed here.

