Japanese Doctors in Hawai‘i

THE FOLLOWING IS A BRIEF HISTORY of Japanese doctors in Hawai‘i, their trials and tribulations, as well as some of their accomplishments since their arrival in Hawai‘i over a century ago.

THE ISSEI (FIRST GENERATION) DOCTORS

On June 19, 1868, the first shipload of Japanese plantation laborers arrived in Hawai‘i aboard the sailing vessel, Scioto. There were 153 immigrants in this group and they became known as the Gannen mono, or people of the first year of the Meiji era.¹ It should be remembered that it was only in 1853 that Commodore Matthew Perry had sailed into Tokyo Bay, and that the Meiji government, which was inclined to speed up the westernization of Japan, only came to power in 1868. Unfortunately, the experience of the Gannen mono was so adverse, in large part because most of them did not have a farming background, that no further immigration of Japanese occurred until seventeen years later.

On February 8, 1885, the first Japanese government contract laborers (Kanyaku Imin) for the sugar plantations arrived aboard the City of Tokio. A short while later, a Bureau of Inspection and Interpretation Michael Okihiro was born and raised in Kāne‘ohe, earned a B.S. from the University of Hawai‘i, and an M.D. from the University of Michigan Medical School. He was a neurologist at the Straub Clinic for 19 years and subsequently had an office at the Kuakini Plaza for 12 years before his retirement in 1992. In 1999, he published a book on AJA Baseball in Hawaii, and in 2001 a book on Mid-Pacific Country Club—At the Turn: Seventy-Five Years of Progress, 1926–2001. The latter was co-authored with Lois Suzuki and Claire Simpson.

was created in a conference between Walter Gibson, the Hawaiian Minister of Foreign Affairs, and Katsunosuke Inouye, special commissioner to Hawai‘i from Japan. The bureau was created to facilitate communication between the Japanese laborers and plantation owners. Inouye at that time suggested the appointment of Japanese physicians as government employees because many of the Japanese objected to being treated by Caucasian doctors, and Gibson granted this request. He stated that “the Hawaiian Board of Health would be pleased to obtain the services of Japanese doctors” to resolve problems arising from language and cultural barriers.  

Almost immediately eight Japanese doctors were recruited as medical officers to provide free medical care to the Japanese immigrant workers. Over the next ten years more than 20 doctors were invited by the Hawaiian government.  

Dr. Kosai Yoshida was the first Japanese physician in Hawai‘i. He was trained at the Tokyo Medical School but arrived on the *City of Tokio* with the *Kanyaku Imin* as a contract laborer. He was soon “discovered” and put to work as a physician. However, another source states that he was a ship’s doctor and was invited to work for the Immigration Bureau.  

The position of the Japanese doctors was difficult because they were actually officials hired by the Hawaiian government. Although their primary function was to protect the health and provide medical care for the Japanese immigrants, they were also expected to prevent malingering and encourage work production. They also examined new arrivals at the quarantine stations to prevent the ill from immigration. As immigration officers, they were sometimes asked to mediate difficulties between workers and management, and, more often than not, the workers felt that the doctors were on the side of management.  

As the sugar industry continued to grow, the Japanese population continued to increase, especially in the two-year period between annexation of Hawai‘i by the United States in 1898 and the passage of the Organic Act in 1900. Whereas there were only 116 Japanese in Hawai‘i in 1884, by 1900 there were 61,111. Consequently, the demand for Japanese doctors was increasing rapidly.  

Like the immigrant plantation workers, many of the Japanese doctors came to Hawai‘i with the intent of making money and returning
to Japan as wealthy men, and many did go back. However, there were a number who stayed and who were later allowed to open private practices in addition to their official jobs.

Initially the Hawaiian government granted medical licenses without requiring any examination as long as the applicants had graduated from a medical school or were licensed in Japan. Japan had been under the strong influence of Chinese or kampo medicine for many years and some of the doctors who came to Hawaii as contract physicians had probably been trained in traditional Oriental ways. However, in the Meiji era the Japanese adopted the German school of Western medicine, known as rampo. It was only after World War II that the American system of Western medicine was introduced and adopted on a broad scale in Japan.

In 1895 the Board of Health instituted a medical license examination. The examination was given in either English or Hawaiian. Consequently very few Japanese doctors were granted licenses for a number of years. Much later, and at the urging of the press and the Japanese Consul, interpreters were allowed during the examination.

Dr. Kikujiro Soga, who had spent some time in the U.S. mainland, was one of the few who passed the English examination in 1899. Dr. Shosei Yamanoha is said to have taken the licensing examination in Japanese in 1914 "which was the last year this was allowed," but this does not seem in accord with the 1895 Board of Health edict and he may have had an interpreter.

THE AMERICAN-TRAINED ISSEI

Several immigrants went to medical schools in California, either to obtain medical degrees or to become specialists after receiving medical degrees in Japan, and subsequently practiced in Hawai‘i.

Dr. Katsugoro Haida was born in 1862 in Hiroshima, Japan, and came to Hawai‘i in January 1885 as one of the first-ship immigrants. He initially worked as a contract laborer on the Pā‘ia plantation on Maui. He was a bright, determined man who somehow managed to get to California and in 1893 finally was able to enter Cooper Medical College (which later became Stanford Medical School). He graduated four years later with a M.D. degree. He worked for a while in California, but in 1900 he decided to return to Hiroshima and, on his way
home, stopped over in the Islands to look up some old friends. When he arrived in February 1900, he found the city of Honolulu in turmoil as a result of the bubonic plague and the "Great Chinatown Fire." He was persuaded by the consul-general to stay and help out in this crisis. He later became the second medical director of the Japanese Charity Hospital.

Dr. Iga Mori was born in 1864 in Ishikawa, Japan, and educated at the Naval Medical College in Japan, graduating in 1887. He worked as a naval medical officer for two years. He then entered Cooper Medical College to specialize in internal medicine, graduating in 1891. He subsequently became one of the most prominent physicians in Hawai‘i. He was the first medical director of the Japanese Charity Hospital which is now the Kuakini Medical Center. He was president of the Japanese Benevolent Society, chairman of the Board of the United Japanese Society, director of the Institute of Pacific Relations and a member of its Division of Science. In 1914, he became a member of the Hawaii Medical Association, and, in 1914, was given an honorary membership in the Honolulu County Medical Society, the first Japanese to be so honored. His son Motokazu Mori and grandson Victor Mori also were prominent physicians in Hawai‘i.

Dr. Sansaburo Kobayashi was born in 1863 in Harima, Japan. He undertook the study of medicine under an army medical director, Dr. Jun Matsumoto. He finished the medical course in five years, passed the competitive examinations with honors, and was permitted to practice. He then entered Cooper Medical College to major in surgery, and graduated in 1891 with Dr. Mori. He became an excellent surgeon and opened his own private twelve-bed hospital in 1896 on Beretania Street. Three years later he opened a larger and better equipped hospital on Liliha Street and the Kobayashi Hospital was often called Nihonjin Byoin, or the Japanese Hospital.

Dr. Ichitaro Katsuki was born in Kanazawa, Japan, in 1865. He entered the University of California Medical School in 1893 and graduated with honors in 1896, one of the first Japanese to receive a degree from that institution. In 1900, the San Francisco Board of Health sent him to Honolulu as a special representative to investigate the bubonic plague then raging in Hawai‘i. He subsequently chose to remain in Honolulu as a general practitioner, got married, and had three sons, David, Sanford and Robert, all of whom became physicians.
Dr. Harvey Saburo Hayashi was born in northern Honshu in 1866 and graduated from the Aomori Prefectural Medical School in 1884. To further his education, he worked his way through the Hahnemann Medical College in San Francisco (San Francisco Medical College), graduating with honors in 1891. He was invited to the Big Island of Hawai‘i in 1892 by Reverend Jiro Okabe and eventually settled in Kona where he devoted his life to the medical care of the Japanese immigrants. He also became the editor of the newspaper The Kona Echo which continued publication until 1941 and was the main force in founding the Japanese School in Hōlualoa. As a community leader, he was a champion of justice and a fighter for the rights of the defenseless and poor.

The Hospital Situation in Hawai‘i

The Queen’s Hospital, established in 1859, was the only general hospital on O‘ahu in the late 1800s. It was founded by Queen Emma and King Kamehameha IV and opened with only eighteen beds in a temporary building. A larger hospital with 124 beds was built in 1860. The first physician chosen to run the hospital was Dr. William Hillebrand. Queen’s was a hospital primarily for Hawaiians run by Caucasian doctors. Japanese doctors were not allowed to use its facilities for many years. It was said that Queen’s could probably refuse Japanese doctors who received their medical training in Japan by enforcing its medical training requirements and demanding the ability to speak English.

It was not until 1931 that Dr. Tokue Takahashi became the first Japanese physician to be admitted to the medical staff at Queen’s, and that only because he was the first one trained to use radium for cancer treatment. Dr. Takahashi came to Hawai‘i in 1918 after practicing in Japan and Mexico. He left for Europe in 1921 and did research in cancer surgery at Oxford, England, where he learned the use of radium therapy before returning to Hawai‘i.

There were a few special hospitals such as the Kapiolani Maternity Home, the Kalihi Hospital for Lepers, and the Oahu Asylum for the Insane. The sugar plantations had their own small hospitals such as Ewa Plantation Hospital, Waialua Agricultural Company Hospital, Oahu Sugar Company Hospital, and Aiea Community Hospital and
these were open to the Japanese doctors to treat the contract immigrants and their family members.

Dr. Shobun Goto was a leprosy specialist in Tokyo who received a special invitation from the Hawaiian government in 1886 to treat the growing number of leprosy patients in Hawai‘i. After a short stay at the Kakaako Hospital for Lepers, he went to the Kalaupapa Settlement on Molokai where he initiated the use of Chaulmoogra oil that was the main therapy for leprosy for many years. He served as a government leprosy specialist until 1895.22

As noted earlier, Dr. Sansaburo Kobayashi built his own private hospital with the help of Drs. Iga Mori and Matsuji Misawa in 1896.23 Although it was a private hospital, it was often called Nihonjin Byōin or the Japanese Hospital, thus confusing it with the Japanese Charity Hospital which was built a few years later. Several other Japanese physicians built their own private hospitals in country towns such as Waipahu, and especially on the Big Island.24

The *Nihonjin Jizenkai* (Japanese Benevolent Society) which was established in 1892, at the urging of Reverend Takie Okumura, had plans to build a charity hospital. Reverend Okumura, a Christian minister, was known for a number of things including his crusade against prostitution, his Americanization conferences, and building the first Japanese language school in Honolulu, but is perhaps best known for building the Makiki Christian Church. When the “Great Chinatown Fire” of January 1900 burned out of control, more than 3,500 Japanese became homeless in the disaster. The Japanese community became acutely aware of the immediate need for a hospital and the *Jizenkai* acted quickly to complete their plans. An acre of land in Palama was obtained and, in late 1900, the Japanese Charity Hospital was built.25 It was moved to Liliha Street two years later and moved again to Kuakini Street in 1917. Today it is known as the Kuakini Medical Center.

**The Nisei (Second Generation) Doctors**

When the U.S. Immigration Act of 1907 or “Gentleman’s Agreement” was passed, Japan agreed to stop issuing passports to laborers bound for the United States, including Hawai‘i. Only former residents and
immediate family members were allowed to enter the country. Furthermore, Japanese laborers were prohibited from leaving Hawai'i to work on the mainland.

The Immigration Act of 1924 (also known as the “Oriental Exclusion Act”) halted Japanese immigration completely. By that time, however, arrivals from Japan to Hawai'i had totaled 159,288 men, 49,612 women, and 4,852 children.²⁶

From the beginning of the 20th century the Nisei or second generation Japanese began to play an increasing role in medicine. Included in this group are a few Issei who came to Hawai'i in early childhood. They were all reared in Hawai'i and educated in both Japanese and English. Education has always been a priority in the Japanese culture and those families who could afford to, encouraged their children to seek higher education.

The University of Hawaii (U.H.), although small, provided adequate premedical training. The students frequently were able to get into mainland medical schools after three years of undergraduate work and received a bachelor’s degree from the U.H. after completing the first year of medical school on the mainland.

The Nisei went to medical schools all over the United States. Generally, however, they tended to avoid the West Coast except for a few Nisei who went to the College of Medical Evangelists, a church-sponsored medical school in Loma Linda, California.

The early 1900s was the era when the term “yellow peril” became prevalent among anti-oriental agitators on the West Coast of the U.S.²⁷ In 1913, California legislators passed an alien land bill which prevented Issei from owning land. They could only lease land up to three years.²⁸ In 1920 a more stringent law forbid Issei from leasing agricultural land for more than a year and prohibited corporations from owning land. A 1923 amendment prohibited Issei from share-cropping: that is, agreeing to work on farmlands in return for a fixed percentage of the profits.

There was also discrimination in medicine. Upon graduation from medical schools, the Nisei doctors found that many hospitals discriminated against Orientals, as they did against African Americans and Jews, and wouldn’t allow them to do internships and residency training in their hospitals.²⁹ Thus, the new doctors often had to scramble
for post-graduate training at lesser known and less desirable hospitals. In those years, some medical schools did not confer the M.D. degree until the internship year had been completed.\(^\text{30}\)

The 1920s and 30s saw the initial return of American trained \textit{Nisei} physicians to Hawai‘i. Eventually most of them returned to the friendly confines of Hawai‘i and its Japanese Hospital. In that era most of them returned as general practitioners and specialists were very few.

Dr. Mitsuharu Hoshino, who graduated from the University of Texas in 1920, is said to be the first American of Japanese Ancestry (AJA) doctor to practice in Hawai‘i. Dr. James Toshiyuki Kuninobu, who graduated from the College of Medical Evangelists in 1927, became the first AJA to pass the National Medical Board Examination.

Dr. Kyuro Okazaki, who graduated from the University of Nebraska in 1930, initially worked as a generalist but later received training as an internist at the University of Pennsylvania, and became the first Japanese physician to be admitted to the prestigious College of Physicians.\(^\text{31}\)

Dr. Shoyei Yamauchi, who graduated from the University of Michigan in 1931, was the first fully trained general surgeon. After WWII he took an active role in the Okinawa post-graduate medical program.\(^\text{32}\)

Dr. Richard Sakimoto, who graduated from Washington University in 1933, built the Medical Arts Building and became the first AJA specialist to be certified by the American Board of Obstetrics and Gynecology in 1939.\(^\text{33}\)

\textbf{The Effects of World War II}

On December 7, 1941, as soon as World War II started, Japanese leaders and those thought to be sympathetic to Japan were arrested and interrogated. From Hawai‘i, 1,444 Japanese were interned, some of whose stories are told by Patsy Saiki in her book \textit{Ganbare: An Example of Japanese Spirit}.\(^\text{34}\) Many prominent physicians were in this group including Dr. Iga Mori, who was released after a few months because of his health and age, his son Dr. Motokazu Mori, and the latter’s wife, Dr. Misao Harada. Others who were interned for the duration of the war were Drs. Kazuo Miyamoto, Masamichi Narita, Yukihide Kohatsu,
Tokue Takahashi, Seiichi Ohata, Koshiro Tofukuji, Kinji Uchida, Yoki-
chi Uyehara, and Jiro Yoshizawa.

Dr. Kazuo Miyamoto, who graduated from Washington University
in 1928, was a prominent generalist who authored a number of books
including *A Nisei Discovers Japan*, which probably played a large
role in his being “interned” in several internment camps from the start of
World War II. This despite the fact that he was an American citizen
and had served in World War I. His book, *Hawaii, End of the Rain-
bow*, although written in the third person, is his most interesting
and illuminating autobiography.

Ironically, despite the loss of many physicians to the internment
camps, Hawai‘i did not suffer too great a shortage of Japanese physi-
cians because *Nisei* physicians were not drafted, and those who vol-
unteered for service in the Armed Forces were told they were not
needed or wanted. All of them were born before 1924 and had so-
called “dual citizenship” in Japan and the United States, and this
may also have been used as an excuse to deny them entry into the ser-
vices.

The Japanese Hospital was renamed the Kuakini Hospital shortly
after the war began. Dr. Tsuneichi Shinkawa noted that, “Because of
the war, anything Japanese was bad”. “Kuakini” was chosen because
the hospital fronted Kuakini Street named after a member of the
Hawaiian royalty, and because it was felt that “Kuakini” was easy for
the *Issei* to pronounce, “almost like a Japanese word.”

The role of the *Nisei* who fought in the 100th Infantry Battalion,
442nd Regimental Combat Team, and Military Intelligence Service
has been well documented. They did much to mitigate the preju-
dice against the Japanese in Hawai‘i and the rest of the country.

Dr. Isaac A. Kawasaki who graduated from the University of Cin-
cinnati in 1933, was the first medical officer of the 100th Battalion,
an all-*Nisei* unit. Dr. Richard Kainuma and Dr. Katsumi Kometani
joined him, although the latter was a dentist.

After WWII, the G.I. Bill of Rights was the valuable ticket for count-
less young men to seek higher education and the number of Japanese
in all the professions in Hawai‘i increased dramatically. Medicine
was no exception and the doctors now began to return to Hawai‘i as
highly trained specialists as well as generalists and internists.
Dr. Roy T. Tanoue who graduated from the University of Chicago in 1940, became the first AJA board certified general surgeon in Hawaii.  

Dr. Shigeru Richard Horio, who graduated from the Utah School of Medicine in 1944, was the first board certified internist in 1952.

Dr. Richard Mamiya, who graduated from St. Louis University Medical School in 1954, gained national prominence as a cardiac surgeon.

Over the next few years the face of medicine gradually changed in a number of ways. Up to this time most Japanese physicians practiced alone, but now there were attempts to band together, either in specialty groups or in small multi-specialty clinics, such as the Central Medical Clinic and the Kalihi Medical Clinic. There were two large Caucasian clinics in Honolulu and after many years, in the 1950s and 1960s, they invited Japanese physicians into their folds.

Dr. Unoji Goto, who graduated from the University of Cincinnati Medical School in 1948, was the first Japanese physician to join the Honolulu Medical Group, in 1956. He introduced cardiac catheterization to Hawaii. He was a member of a cardiac team that performed the first open-heart surgery in Hawaii in November 1959.

Dr. Michael Okihiro, who graduated from the University of Michigan Medical School in 1955, was the first Oriental to join the Straub Clinic in 1961. He trained at the Mayo Clinic and was the first neurologist from Hawaii.

In the 1950s, Japanese physicians became more active in the medical politics of the respective county medical societies and Hawaii Medical Association.

Dr. William Ito, who graduated from the University of Oregon Medical School in 1939, was the first AJA to be elected president of the Honolulu County Medical Society in 1953. Dr. Toru Nishigaya was the first AJA to be elected president of the Hawaii Medical Association in 1959. Dr. Theodore Tomita was the second, in 1966.

In 1967, the John A. Burns School of Medicine of the University of Hawaii admitted its first class as a two-year school. Five years later the third and, subsequently, the fourth years were added, and in 1975 the University of Hawaii awarded its first M.D. degrees. The medical school has had a major impact on the improved quality and delivery of medical care to the state and the entire Pacific Basin. Presently
local students have the option of obtaining the medical degree in Hawai‘i rather than going to the mainland or to a foreign country.

SUMMARY

This brief review has been presented in gratitude and appreciation of the accomplishments of the Japanese medical pioneers of Hawai‘i. The process of Americanization and acculturation has been at times a difficult one, but appears to be well completed. Today physicians of Japanese ancestry are found in every medical specialty and are well represented in leadership positions in the medical school, all the major hospitals, medical societies, and in the community at large.

NOTES

5 Yamamoto 48–49.
8 Yamamoto 56–57.
13 Yamamoto 71–73.
14 Katsuki, Betty, (Women’s Auxiliary, In Memorium Committee): Capsule Biographies of Hawai‘i’s Physicians. (Transcripts stored at Hawaii Medical Library).
17 Kimura 38.
18 R. Cameron, G. Kanahele, and M. Hastert. Ke Kumu: “The Source.” (Honolulu: Queen’s Medical Center, Honolulu, 1989.)
20 Yamamoto 80.
22 Kimura 124.
23 Yamamoto 71–73.
26 Nordyke 60–70.
28 Tamura 78.
33 Richard Sakimoto, interview with Charles S. Judd, Jr., videotape at Hawaii Medical Library, Honolulu, 1981.
37 Tamura 84.
38 Tsuneichi Shinkawa, interview with Karen Motosue of the Hawaii Multi-Cultural Center for the History and Heritage Committee, Kuakini Medical Center, July, 1980.
41 Murphy 66.
42 Tamura 237.