**Problems with ICD Implantation for Foreign Technical Intern Trainees in Japan: A Case of Vietnamese Brugda Syndrome Experienced at our Hospital**

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**Introduction**: Japan has a labor shortage problem due to the declining birthrate and aging population. Therefore, in recent years, we have been recruiting labor from Asian countries. The Japanese government has established the Technical Intern Training (TIT) Program. And foreign workers who work on time-limited visas are called TITs. In Japan in 2018, there was a report that some male TITs from Vietnam were suddenly dying and were discussed in the National Assembly. Those deaths were considered overworked deaths.

**Methods**: We were consulted a Vietnamese patient who needs ICD implantation. We report the institutional issues in the present situation.

**Result**: Case: One day in 2017, a 26-year-old Vietnamese TIT man lost consciousness and injured his face. He was transported to a nearby medical institution and electrocardiogram was taken. Type 1 Brugada electrocardiogram was recorded and he was transferred to our hospital. He had been fainting before. He had no family history of sudden death. Echocardiography showed no abnormal findings. And signal averaged electrocardiography showed positive findings of late potential. As a result of scrutiny, he was diagnosed with Brugada syndrome to be implanted with ICD. Because the patient was eligible for residence and had health insurance, the costs for ICD implantation were to be reduced. However, the treatment was limited during his stay in Japan, and no extension of work visa was permitted. Treatment in Vietnam was uninsured and generator replacement was not possible for economic reasons. The patient gave up and returned home early. Discussion: It is estimated that a certain number of TITs from Asia suddenly die from Brugada syndrome. However, it has not been diagnosed correctly, and is considered unknown death. They should receive a full medical checkup, including an electrocardiogram, at work. In this case, it is assumed that the patient was not convinced. We should provide a company-independent medical interpreter.

**Conclusion**: Japan has a universal insurance system and TITs are exempt from medical expenses at the time of ICD implantation. However, the Japanese government does not recognize their permanent residence, and they cannot receive treatment after their visa expires. We are required to consider the medical environment after returning home.