Tuberculosis country work summary

Ukraine

Total population (millions): 45
High TB priority country
High MDR-TB burden country

Epidemiological profile 2013**

<table>
<thead>
<tr>
<th>Estimates of TB burden</th>
<th>Number (thousands)</th>
<th>Rate (per 100 000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mortality (excludes HIV+TB)</td>
<td>6.6 (6.4–6.7)</td>
<td>14 (14–15)</td>
</tr>
<tr>
<td>Prevalence (includes HIV+TB)</td>
<td>54 (27–91)</td>
<td>120 (59–202)</td>
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<tr>
<td>Incidence (includes HIV+TB)</td>
<td>44 (39–50)</td>
<td>96 (87–110)</td>
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<tr>
<td>Case detection, all forms</td>
<td>84 (73–93)%</td>
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</tbody>
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<table>
<thead>
<tr>
<th>MDR-TB burden</th>
<th>Number (thousands)</th>
<th>%</th>
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<tbody>
<tr>
<td>Estimates among notified TB cases:</td>
<td></td>
<td></td>
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<tr>
<td>MDR-TB among new cases</td>
<td>4.1 (3.9-4.3)</td>
<td>14 (14-15)</td>
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<tr>
<td>MDR-TB among previously treated cases</td>
<td>5.3 (5.1-5.5)</td>
<td>32 (31-33)</td>
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<tr>
<td>Notified MDR-TB cases on treatment</td>
<td>9.0</td>
<td>87.2</td>
</tr>
</tbody>
</table>

Estimated prevalence of HIV among TB (number, percentage): 6 000 (5 000-7 100), 13 (13-13)%.

Major challenges

The TB epidemic in Ukraine is characterized by widespread multi-drug resistant (MDR) and extensively drug resistant (XDR) tuberculosis (TB), relatively high mortality from untreated or inappropriately treated TB, and increasing TB/HIV co-infection rates. Ukraine is among the 27 MDR-TB burden countries in the world. Despite the adoption of the Stop TB Strategy by the National TB Programme (NTP), its components have not been sufficiently implemented. Financing of TB control activities mainly depends on the commitment and capacity of the oblast health administrations. Laboratory capacity is limited and case detection efforts mainly focus on mass screenings of the general population. Priority is given to hospital-based treatment and appropriate treatment depends on the local capacity to purchase the drugs. Provision of directly observed therapy (DOT) is lacking and patient support is limited. The Government of Ukraine has not implemented serious health system reforms, although some have been proposed and even legislated over the years, because of political instability, and frequent leadership changes in the Ministry of Health. To address the TB challenge in Ukraine, the country’s health system will need to be re-oriented from an acute care input-based model to a comprehensive disease management model. TB care is financed through a rigid methodology based on historical three-year budget allocations and the number of occupied TB beds. There is a need to reduce hospitalization of TB patients, while improving service delivery at primary health care level, as well as infection control standards, and restructuring the financing system. MDR-TB control activities are inadequate, as are efforts to address TB/HIV co-infection. There is a lack of anti-TB drugs in the country because of inadequate drug supply management and problems with the procurement of quality-assured drugs.

A year of socio-economic hardship has been aggravated by political crisis and war in the East of Ukraine. More than one million Internally-displaced people (IDPs) are spread throughout Ukraine and need emergency assistance including TB and TB/HIV care.
Achievements in collaboration with WHO

- Technical Assistance for the implementation of The Global Fund to Fight AIDS, TB and Malaria (The Global Fund) New Funding MechanismModel grant was provided for joint TB and HIV application.
- Green Light Committee (GLC) mission was organized in October 2014 to assess implementation of the programme activities required for the proper detection and management of the patients and evaluate current achievements.
- Technical assistance was provided to review National TB Guidelines.
- WHO is developing new models of care together with UCDC, USAID and other partners. Focus on ambulatory treatment with phase-in transformation from bed-oriented to service-oriented TB programme financing.
- DRS launched in November 2013 and finished in June 2014. 1589 samples were collected and sent to Supranational Reference laboratory, Riga, Latvia.
- Additional assistance was provided to work with IDPs within the frame of MEPU (mobile emergency primary health units) project with focus on TB and HIV.

Planned WHO activities

- Technical assistance with the implementation of The Global Fund NFM grant activities
- To coordinate and lead NTP review activities, first (epi-review) and second (core review) stages
- Coordination in finalising DRS activities and discussion on results, editing and publishing
- Support to improve policy for the programmatic management of drug-resistant TB
- Support to improve the management of TB/HIV
- Support in Health System Strengthening with focus on Ambulatory Models of Care
- Emergency: Implementation of MEPU project in regards to TB and HIV activities among IDPs.
- Emergency: to facilitate TB and TB/HIV related activities in the areas not controlled by Ukrainian Government.

Main partners of WHO

- Ministry of Health
- Ukrainian Center for Control of Socially Dangerous Diseases of the Ministry of Health of Ukraine
- State Penitentiary Services
- National Yanovsky TB and Pulmonology Institute
- United States Agency for International Development (USAID)
- Strengthening Tuberculosis Control in Ukraine Project
- Program for Appropriate Technology in Health (PATH)
- Rinat Akhmetov Foundation “Development of Ukraine”
- The Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund)
- World Bank
- Management Sciences for Health (MSH)
- Médecins Sans Frontières (MSF)
- Global TB Drug Facility (GDF)
- Green Light Committee (GLC)
- All-Ukrainian Network of People Living with HIV
- International HIV/AIDS Alliance in Ukraine
- National Society of Red Cross
- Nongovernmental organizations working in HIV/AIDS, TB and other related areas.