UKRAINE

OVERVIEW
Fiscal year 2015 is the fifth year of the U.S. Centers for Disease Control and Prevention’s (CDC) sustainability cooperative agreement with L.V. Gromashevsky Institute of Epidemiology and Infectious Diseases National Academy of Medical Science of Ukraine. This cooperative agreement is the continuation of the previous five-year agreement between CDC and PATH to strengthen influenza and pandemic preparedness in Ukraine.

SURVEILLANCE
During the 2014–2015 influenza season, 271 influenza viruses were isolated with 50 isolates submitted to CDC and 50 to the WHO Collaborating Center (CC) in London. The percentage of influenza positive samples obtained from the ILI and SARI surveillance sites in the four sentinel centers varied from 7% to 58%.

SURVEILLANCE ACTIVITIES
- Developed a new logistics plan for transporting samples between sentinel sites and the National Influenza Center (NIC) on dry ice.
- Performed supervisory visits to influenza sentinel sites in Odessa and Khmelnitsliy.
- Organized training for all participants of sentinel surveillance.
- Carried out quality SARI surveillance and established that there was a high correlation between the number of SARI cases and the percent of influenza-positive samples.
- Prepared an additional draft order aimed at improving surveillance. This order is under consideration in the Ministry of Health.

LABORATORY
Funding from CDC continued to support the NIC in Kyiv and four regional virology laboratories in the sentinel sites with equipment, reagents, consumables and other items to maintain optimal functionality of the laboratories. These laboratories can perform RT-PCR and virus isolation on cell culture. Samples from Ukraine are routinely submitted to the WHO CC Atlanta and the WHO CC London.

LABORATORY ACTIVITIES
- Trained sentinel site virologists in influenza virus isolation and identification, and RT-PCR assay.
- Tested 1,225 samples from ILI and SARI patients by PCR, with 25.5% positive for an influenza virus.
- Supported the NIC in Kyiv and four regional virology laboratories with consumables.
- Continued participation in WHO GISRS, including submitting 110 positive samples from the 2013–2014 and 2014–2015 seasons to the WHO CC in Atlanta.
- Conducted three supervisory site visits to three sentinel sites.
- Improved the material and technical equipment of virology laboratories (equipment and test-systems) and trained personnel to strengthen pandemic preparedness.

PREPAREDNESS
- Developed new recommendations for the national healthcare system in the event of accidental importation of avian influenza A (H5N1) and (H7N9) viruses from endemic regions.
- Made several improvements to the National Guidelines for Health Services of Ukraine which include planning and organizing measures to combat pandemic influenza.
TRAINING
The NIC continued to provide technical assistance and training to ensure continued operation and improvements of the sentinel surveillance system, quality of the surveillance data, timely data analysis, and integration of preparedness and response activities.

From 2013–2015 the following trainings were organized in Ukraine:

- **Sentinel Surveillance**—Trained 50 health care workers from clinics involved in surveillance.
- **Virus Isolation/Cell Culture**—Trained virologists from Odessa, Kharkiv, Dnipropetrovsk, Khmelnytsky, Ternopil, and Zhitomyr.

A researcher from the Gromashevsky Institute attended the Advanced Influenza Real Time RT-PCR Workshop in March 2015 at CDC Atlanta.

INFLUENZA VACCINE ACTIVITIES
Every year the Institute develops an influenza forecast and recommendations for the next influenza epidemic season. Recommendations include a brief description of registered influenza vaccines available in Ukraine and high risk groups that should be vaccinated first. The forecast and recommendations are sent from the MOH to all regions of the country.