Overlapping Epidemics: HIV/TB/IDU.
Time for action!

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Population- 45 million 795 thousand 911 people

Highest estimated HIV prevalence rate in Eastern Europe and Central Asia - **440 000 people**

Number of officially registered HIV-positive cases (1987-2011yy) - **206 160 people**

HIV/AIDS epidemic in Ukraine started in 1995 and in 1996-1997 over 80% of new HIV cases were among IDU
HIV/AIDS transmission in Ukraine.

<table>
<thead>
<tr>
<th>Year</th>
<th>HIV infected people (total)</th>
<th>Sexual way</th>
<th>IDUs</th>
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</thead>
<tbody>
<tr>
<td>2005</td>
<td>13,770</td>
<td>6,270</td>
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<tr>
<td>2006</td>
<td>16,078</td>
<td>5,681</td>
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<td>2007</td>
<td>17,669</td>
<td>7,127</td>
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<tr>
<td>2008</td>
<td>18,963</td>
<td>7,945</td>
<td>1,009</td>
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<tr>
<td>2009</td>
<td>19,840</td>
<td>8,635</td>
<td>1,055</td>
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<tr>
<td>2010 (6 m.)</td>
<td>10,542</td>
<td>4,688</td>
<td>3,557</td>
</tr>
<tr>
<td>2011 (6 m.)</td>
<td>10,355</td>
<td>3,137</td>
<td>3,280</td>
</tr>
</tbody>
</table>

Sexual way of HIV/AIDS transmission prevails over IDUs since 2008.
Ukraine: key context information: HIV/AIDS data

Value of HIV/TB patients, who are requiring and receiving ART (01/01/2011)

- In need of ART
- Receiving ART
HIV incidence in Ukraine (per 100,000 populations, 2010)
TB incidence - 67.2 per 100,000 population; (2011)
TB mortality - 15.3 per 100,000 population;

TB patients with known HIV status - 95%;

TB patients that are HIV-positive - 13% (4,501);

HIV-positive TB patients on ART – 48% (2,136);

MDR-TB in 16% (14-18%) and 44% (40-49%) of newly detected and previously-treated TB cases - estimated by WHO;
MDR-TB incidence - 3,159 (1.01.12)

Ukrainian is further burdened with HIV, TB and Injecting Drug Use;

Tuberculosis is the key reason of death in people living with HIV/AIDS.
TB case notification in Ukraine (per 100,000 populations, 2010)
HIV-TB dynamics: 1999-2011
HIV, TB and HIV/TB prevalence in Ukraine, 2010
Data on the number of HIV positive patients on ART treatment and those who need ART (absolute figures and % of coverage by treatment)*.

*Data of Ukrainian AIDS Center
In 2010 ART was needed for: under UNAIDS, WHO estimations - 92000, 99000 – 160 000 (CD4 200 and 350 correspondingly)
IDU percentage among estimated number of HIV positive and those who receive ART

26% HIV positive IDUs 93 000;

74% HIV positive (other risk groups) 267 000;

11.4% 8% 2212

3.4% 931

88.6% 24399

Estimated number of HIV/AIDS patients as of 01.01.11

ST + ART
Active IDUs
Others

Number of ART patients
Alliance Ukraine portfolio:

- Principal Recipient (PR) for GFATM Round 1 HIV (2004-2008) and Co-PR for Round 6 HIV (2008-2012)
- Key Sub Recipient (SR) for GFATM Round 9 TB program 2011-2015
- Access to integrated care services for HIV + drug user funded by USAID
- Programs: HIV/TB prevention and service provision activities for MARPs – Harm reduction incl. TB clinics
- ART, OST, STI
- Monitoring and evaluation (HIV/AIDS and HIV/TB co-infection)
- Procurement of health products and equipments
- Advocacy – access to treatment (MDR, ART)
Civil society plays a key role in the national response to HIV / AIDS in Ukraine:

- Established an effective Alliance's cooperation with state and local Governments, medical institutions;

- Provided wide-ranging activities on HIV / AIDS prevention among vulnerable groups;

- Scaling up of ART (including prisons);

- Establishment and expansion of substitution therapy for injecting drug users;

- Long-term funding for PMTCT;

- Increase access for vulnerable groups to diagnosis and treatment of STI.

www.aidsalliance.org.ua
WHO recommendations. Policy for collaborative TB/HIV activities

A. Establish the mechanisms for collaboration
1. Ensure a coordinating body exists for effective TB/HIV collaboration at all levels
2. Conduct surveillance of HIV prevalence among TB patients and TB prevalence among HIV patients
3. Carry out joint HIV/TB planning
4. Conduct monitoring and evaluation

B. Decrease the burden of TB in people living with HIV
5. Establish intensified TB case-finding
6. Introduce Isoniazid prevention therapy
7. Ensure TB infection control in health care and congregate settings

C. Decrease the burden of HIV in TB patients
8. Provide HIV testing and counselling
9. Introduce HIV prevention methods
10. Introduce co-trimoxazole prevention therapy
11. Ensure HIV and TB care and support
12. Provide antiretroviral therapy
AU HIV/TB activities in Ukraine

- Establish the mechanisms for collaboration:

  - Coordination of TB/HIV reference group
  - Participation in the development of the MOH order of the mechanism of cooperation between HIV and TB services
  - New clinical protocols development and reviewing of the old ones
  - TB/HIV monitoring system assessment
  - Development of National TB/HIV M&E plan with a list of TB/HIV indicators
  - Coordination of the unified electronic data collection tool development and implementation in TB and HIV services
  - TB and AIDS Centers’ staff capacity building in TB/HIV M&E
  - Conducting a number of special surveys
AU HIV/TB activities in Ukraine

Strengthen the collaboration Mechanism at National, Regional and Local Levels:
- cross-sectoral HIV/TB working group (WG)
- trilateral memorandum among Ukrainian AIDS Center, All-Ukrainian TB Control Center and Alliance;
- biannual reporting meetings for TB and HIV program managers to share experience and plan joint activities.

➢ Decrease the burden of TB in PLWHA:
- Revision and development of the national protocols for providing medical support to HIV/TB patients.
- Support in creation of diagnostics boxes in AIDS centers and in penitentiary institutions aimed at meeting infection control requirements-

4 AIDS centers and 1 penitentiary institution
- Trainings for NGOs and TB dispensaries and AIDS centers staff on the main aspects of TB infection: the specific of HIV prevention services provision for people with TB, M&E and data collection, management and reporting on TB and HIV - 285 people were trained.
AU HIV/TB activities in Ukraine

- Decrease the burden of HIV in TB patients.
  - Technical support in creating proper terms and conditions for PITC (group and individual) in TB control institutions – (18 Grants)
  - Development of the guidelines:
    on conducting VCT among the patients of TB control facilities;
    on preventive cotrimoxazol treatment for HIV/TB patients;
    of the mechanisms for passing ART and SMT medications to the patients who are treated in inpatient units of TB control facilities.
  - Scaling up NGO activities aimed at HIV prevention to the area of TB treatment
  - Grants for NGOs on HIV/STI prevention among the patients who undergo treatment in TB control facilities (10 NGOs): 2557 patients were covered with prevention services.
- Access to high quality integrated care (HIV, TB, HCV, OST, STI-diagnostics and treatment)
Expansion of comprehensive care and treatment services for PLWH and ensure equal access to services for drug users and members of other vulnerable groups:

- Support of TB diagnostics and DOT for HIV-infected patients,
- Support of multi-disciplinary teams;
- Technical support for equipping of DOT cabinets;
- Support for rehabilitation centers for HIV/IDU clients.
Alliances support in ST expansion 2005-2011 y. y.
TB infected patients obtaining SMT in Ukraine as at December 31, 2011

- **6632 patients**
  - **1201 patients** or 18%
  - **138 patients** or 2%

SMT patients supported by GFATM Rd 6 Program, persons

TB infected SMT patients, persons and % out of all SMT patients

Patients receiving SMT in TB clinics, persons and % out of all SMT patients
Access to the maximum number of medical and psychosocial services.

**Medical Services:**

ST (substitution therapy):
- Doctors consultation and examination; treatment prescription, daily delivery of ST.

Diagnosis and treatment of HIV infection:
- screening test for HIV, CD4 cells test, viral load test, infection disease doctors consultation and examination, prescription of ART;

Diagnosis and treatment of TB:
- roentgenology, sputum test; TB doctors consultation and examination, prescription of preventive treatment and chemotherapy.

**Additional services:**
Screening tests for STI, HEP B, C, HEP B vaccination.

**Psychosocial services.**
Integration: integrated care models of OST providing.

AIDS centers
TB clinics
Narcological clinics
Psychiatric clinics
General hospitals

Substitution Treatment
HIV diagnostics and treatment
HBC, HBB, STI diagnostics

TB diagnostics and treatment
Psychosocial support
Other medical services
Implementation of integrated care models of OST can be based on all types of assessed healthcare institutions:
  ✓ AIDS centers
  ✓ TB dispensaries
  ✓ Narcological clinics and dispensaries
  ✓ Psychiatric clinics
  ✓ General hospitals

Depending on the type of healthcare institution different administrative and finance resources are required to implement integrated care models of OST.

Number of external objective factors interfere quality of provided medical services

Understanding of integrated care from the prospective of medical staff is uncertain.
Achievements

✓ 6651 patients covered with ST

✓ 135 ST providing clinics

✓ 2000 patients will receive ST-based at integrated care centers till July 2012 with the support of the Global Fund

✓ It was signed a trilateral Memorandum among Ukrainian AIDS Center, Ukrainian TB Control Center and Alliance Ukraine

✓ Creation and coordination of TB/HIV reference group

✓ Participation in the development of the MOH order of the mechanism of cooperation between HIV and TB services
Achievements

- TB/HIV protocols and orders review
- It was trained around 285 service providers and TB dispensaries and AIDS centers staff members
- more than 2500 TB patients were covered with HIV prevention services.
- 2640 clients planned to be covered with integrated care services during 1.11.11 – 31.07.12
Highly vertical healthcare system of Ukraine is a major obstacle for HIV/TB integration.

Frequent changes of management in the MoH.

Lack of cooperation between AIDS and TB services: information sharing, joint planning, M & E performance measures and indicators.

Access to quality-assured second-line drugs: there is legislation on drug registration.

Lack of financing.

Stigma and discrimination
THANK YOU!