

The Infectious Disease Needs of Ukrainian Refugees in a Tertiary Centre in the West of Ireland

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Introduction

Since the outbreak of war in Ukraine, more than 8.1 million individuals have fled to neighboring European countries with an additional 6 million internally displaced. (UNHCR) Ireland has granted international protection to 74'458 Ukrainian refugees. The West of Ireland has become home to a significant proportion with 14'772 (19.8%) living within the catchment area of our clinic.



With the prevalence of tuberculosis (TB), multidrug resistant tuberculosis (MDR-TB), human immunodeficiency virus (HIV) and viral hepatitis being so high in Ukraine, the increased demands on infectious disease (ID) services in countries receiving Ukrainian war refugees is significant. TB incidence in Ukraine is estimated at 71 - 73 cases/100'000 with 32.6% of cases being caused by MDR isolates. War has caused significant disruption TB care, with limited access to testing and to medications. This will result in incomplete treatment courses, increased onwards transmission and amplification of drug resistance.

Ukraine has one of the highest HIV infection rates in Europe with 1% prevalence across the general population, 21% prevalence in injection-drug users and 7.5% in men who have sex with men. Viral hepatitis remains a significant public health issue. Hepatitis B vaccination rates are below recommended and what would be required for elimination.

Results

Total Number	57 (47.36% Female, 52.6% Male)
Need for Interpreter	48 (84.2%) Not documented: 6
Single Infection	33 (57.89%)
Co-Infected	21 (36.8%) [with 7, 12.2% having > 2 infections]
Feasible Public Transport (2 hour journey)	28 (49%) [Average Distance 86.6 km]
OPD Appointments Required	Mean: 4.05. Median: 4
Hospital Admission	8 (14%) - 2 MDR- TB related - 2 HIV related - 1 Hepatitis C related - 1 Chronic osteomyelitis - 2 non-infection related
Existing HIV Infection	43 (75.4%)
New diagnosis HIV	1 (1.75%)
Viraemia	13 (29.5%) - > 200 copy/mL: 10 (77%) - < 200 copy/mL: 3 (23%)
Established on ART already	42 (97.6%). 27 (62.8%) required regimen change
Tx disrupted during migration process	7 (16.2%) → specifically documented for

Chronic Hepatitis B Infection	4 (7%) [3 existing, 1 new] [2 (50%) Mono-infected, 2 (50%) Co-Infected]
Existing Hepatitis C Infection	18 (31.6%) [5 (27.7%) Mono-infected, 13 (72.2%) Co-infected]
New diagnosis Hepatitis C Infection	6 (10.5%) [2 (33.3%) Mono-infected, 4 (66.6%) HIV/HCV co-infected]
Hepatitis C Viraemia	16 (69.5%)
Commenced on treatment	5 (21.7%) (4 Maviret + 1 Eplusa)
Newly diagnosed TB Infection	3 (5.2%) [1 case possible]
MDR Isolate	2 (66.67%) (both new cases of pulmonary infection)
Latent TB Infection	6 (10.5%)

Discussion

The migration crisis which has ensued as a result of the Russo-Ukrainian war has significant implications for infectious diseases in Ukraine, Europe and Worldwide. Ukraine has a complex history with multiple overlapping epidemics of infectious diseases, these will be exacerbated by war. As part of our service development we have commenced a fortnightly clinic specifically for Ukrainian refugees attending our clinic.