

Formal Consultative Meeting of the States Parties to the Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on Their Destruction

Distr.: General
6 September 2022

Original: English
English and Russian only

2022 Meeting

Geneva, 26 August and 5-9 September 2022

Item 6 of the agenda

Respective outstanding questions by the Russian Federation to the United States and to Ukraine concerning the fulfilment of their respective obligations under the Convention in the context of the operation of biological laboratories in Ukraine

On the sanitary and epidemiological situation in Ukraine

Submitted by the Russian Federation

1. In order to determine the nature of activities conducted in Ukraine in the context of Article I, paragraph 1 of the Convention on the Prohibition of Biological and Toxin Weapons (BWC), it is important to be aware of the actual public health situation in Ukraine. Judging by the data of the World Health Organization and national health authorities, during the last 15 years, the situation in Ukraine in this area has been indicative of the unsatisfactory state of the system for the prevention and detection of infectious diseases and the system for the prevention of outbreaks of infectious diseases, low epidemic preparedness, and poorly managed immunization of the overall population and, in particular, children.
2. The most urgent public health problems in Ukraine include vaccine preventable diseases: measles, poliomyelitis, diphtheria, the spread of tuberculosis and HIV infection, outbreaks of dangerous infections, including cholera and acute enteric infections of unknown etiology.
3. For example, in 2019, the World Health Organization declared Ukraine at high risk of a polio outbreak due to unsatisfactory implementation of the Polio Eradication Programme and low herd immunity.
4. In 2015, there was a polio outbreak in Transcarpathia, while less than 14% of children were vaccinated.
5. On 21 October 2015, a polio vaccination campaign started in Ukraine in response to the outbreak, 2.3 million children were to be vaccinated. UNICEF used funds donated by Canada to purchase the vaccines and delivered 3.3 million doses to Ukraine. Only 64.6% of the children (1,462,122 children) ended up vaccinated during the first round. The second round was to begin on 30 November 2015, covering children under six during two weeks, the third round – a month after the second one, covering children under ten (4.75 million children). However, by 2017, the immunization rate was only 48%.
6. In 2021, the coverage of children under one with polio vaccines was extremely low – only 53% during 8 months in 2021. The lowest vaccination coverage is in the Kherson (40.7%), Ivano-Frankovsk (42.2%), Transcarpathia (43.1%), Zaporozhye (46.2%), Kharkov (46.5%), Odessa and Kiev (both 47.5%), Chernovtsy and Lvov (both 48.5%), and Rovno (48.9%) regions. In 2021, 20 cases of the disease, which had been eradicated in the WHO European region over 20 years ago, were registered in the Transcarpathia and Rovno regions.



7. The situation with measles in Ukraine is equally preoccupying. In 2017, there were 70 times more cases of measles among the Ukrainian population than in 2016. In 2018, Ukraine already had more cases of measles than any other country in the WHO European Region – 35 thousand cases and 14 deaths in 10 months of 2018 (five times more people were infected than in Serbia, that had the second largest number of cases). The WHO recorded 55% of all the cases of measles on the territory of Ukraine.

8. According to the WHO, Ukraine is experiencing a severe shortage of diphtheria and measles vaccines in Ukraine. In 2019, there were 20 cases of diphtheria in Ukraine. Five cases were confirmed by laboratory tests: in the Lugansk, Khmelnytskyi, Transcarpathia, Ternopol, and Kiev regions. In 2021, vaccination covered 37.9% of adult population.

9. Poor results of the fight against vaccine preventable diseases are due to extremely low immunization rates, especially of children, which, according to the Public Health Center of Ukraine's Ministry of Health, did not exceed 40%, while the WHO prescribes at least 95%. And these are just the official numbers. With no systematic epidemiological control, registration and recording of diseases due to the consistent destruction of the State sanitary and epidemiological service in 2012 – 2017, the situation is unknown, and thus unpredictable.

10. The viral hepatitis situation is highly dangerous. In 2017, the mission of the WHO Regional Office for Europe acknowledged the inadequacy of the measures implemented to prevent hepatitis B in Ukraine. Here is a quote from the mission report:

"...at the national level hepatitis response is currently fragmented. There is no clear and empowered focal point, nor well-defined and functioning lines of responsibility, for proper planning and decision-making with respect to hepatitis control. More gaps were identified in the areas of blood safety and infection prevention and control. Poor compliance with standard rules and precautions may be a consequence of an insufficient supply of disposable equipment, together with a lack of proper training for medical personnel. The most alarming situation was observed with respect to hepatitis B vaccination, where coverage was very low for various reasons. Coverage with hepatitis B birth-dose and third-dose vaccine was 37% and 26%, respectively, in 2016."

11. According to Ukraine's Ministry of Health, there was a high incidence of viral hepatitis A, including in organized groups of children, educational institutions, and public catering and trade facilities. In January 2018, there was an ongoing outbreak of viral hepatitis A in the Nikolayev region, with 47 people falling ill, of whom 38 were hospitalized, including 6 children, and severe infection in 2 cases.

12. The epidemiological situation with cholera is adverse. In 2011 Ukraine had an emergency situation in the field of sanitary and epidemiological well-being of the population - an outbreak of cholera in Donetsk region. In May-August 2011 in four districts of Mariupol 54 cases of cholera were recorded, mostly in a severe form. The toxigenic agent El Tor was detected in seawater, fresh water, fish and shrimp. The ever-increasing risks of the emergence and spread of cholera from Ukraine in the WHO European region forced to strengthen anti-epidemic measures and ensure increased preparedness in the territories bordering Ukraine. These risks were particularly high given the high migration of the population.

13. However, despite these sad statistics, the work of Ukrainian scientists on cultivation and passivation of cholera vibrio strains, as well as maintenance and preservation of an extensive collection of retrospective isolates raises reasonable questions about the direction of such activities, given that the genetic diversity of cholera-causing vibrios is limited to only two serogroups. If previously (30-40 years ago) the passivation of microorganisms on media was necessary to preserve the collection stock, then today it is known that cholera vibrios are resistant to freezing and storage in a frozen state at 70°C in the presence of cryoprotectors. They can be preserved for many years without additional relocations. This means that collections of particularly dangerous infections can be stored frozen without human involvement and do not require laboratory procedures to maintain collection collections.

14. The situation with rabies is dangerous. There is a steady increase in the number of animals in the country - stray dogs and cats infected with rabies (stray animals), the number of victims of animal bites is also growing. Outbreaks of rabies are registered in all regions

and natural-geographical zones of Ukraine, which leads to unsatisfactory work on the prevention of this zoonotic disease by specialized agencies.

15. In the last 10-15 years, unusual outbreaks of infections have also been registered in Ukraine. Thus, in June 2016, a major outbreak of acute intestinal infection was registered 200 km from Odessa, in Ismail, Broska and Matroska villages in June-July 2016. The number of ill people was 779, including 449 children. Enteropathogenic *E. coli* of various serovars and rotavirus A/G3P8, previously not registered in Ukraine, were isolated from patients. The presence of the virus was detected in samples obtained from open water bodies and water pipes.

16. The situation with HIV and tuberculosis co-infection is adverse. In 2019, tuberculosis caused about half of all AIDS-related deaths in Ukraine. The country also has a high burden of tuberculosis and ranks fourth in the world for multidrug-resistant tuberculosis.

17. Of the 238,000 people infected with HIV, only 31% reportedly receive antiretroviral therapy. The highest rates of HIV infection are registered in the Odessa (898.3 per 100,000 people), Dnepropetrovsk (792.6) and Nikolayev (743.5) regions, the city of Kiev (479.0), the Kiev (447.9), Kherson (420.1) and Chernigov (420.4) regions. Every hundredth Ukrainian aged 15 to 49 years old is infected with HIV, which is one of the highest rates among the European countries.

18. This tragic situation in the field of ensuring the sanitary and epidemiological well-being of the population was caused by the complete collapse of the state sanitary and epidemiological service, which was actually liquidated in 2014-2017.

19. In 2014, the functions of the State Sanitary and Epidemiological Service were divided between the Ministry of Agrarian Policy and Food and the Ministry of Health, under which a public health center was created. By Decree of the Cabinet of Ministers of Ukraine № 348 of March 29, 2017, the sanitary-epidemiological service was liquidated, and its functions were transferred to the State Service for Food Safety and Consumer Protection. This decision was made at a time when the healthcare system of Ukraine was actually under external control and the acting Minister of Health was U.S. citizen U. Suprun.

20. The new structures, subordinated to different ministries, could not properly coordinate their actions. Moreover, they were not given the right to conduct inspections of compliance with epidemiological safety requirements. The work of the new services is actually limited to monitoring the situation and writing reports, without any possibility to somehow prevent epidemics.

21. The negative dynamics of the sanitary and epidemiological situation observed in Ukraine clearly demonstrates that the biological activities implemented in the Ukrainian territory are not aimed at improving the situation in this area and solving peaceful, preventive and protective tasks.

22. As for such infections as anthrax, tularemia, brucellosis, West Nile fever, they are not a priority public health problem in Ukraine today. Anthrax: since 2003, sporadic cases have been registered in Kharkiv, Odessa, Chernivtsi and Cherkasy regions.

23. Natural foci of tularaemia are spread throughout Ukraine. At present, however, the incidence is sporadic. The same situation is with brucellosis, with 0-5 cases annually over the past 30 years.

24. Natural outbreaks of West Nile fever have been registered on the territory of the country, mainly in the following regions: Kherson, Zaporozhye, Zakarpattia, Poltava, Cherkassy and Odessa. In 2020 1 case was registered in Poltava region, in 2021 - 5 cases, in 2022 - 1 case.

25. This may be due to the collapse of the epidemiological surveillance system mentioned above, as well as the failure of veterinary services, or the data on the incidence of especially dangerous infections are simply concealed.

26. Nevertheless, a reasonable question arises, why in the conditions of severe state of sanitary and epidemiological well-being system, threatening spread of infections defeated in most countries of WHO European region, unsatisfactory level of population immunization,

in Ukraine the authorities paid such attention not to actual public health problems, but to anthrax, highly pathogenic flu and other highly dangerous pathogens?

27. The presentation of data on the current epidemiological situation in Ukraine convincingly shows a significant difference between the priority problems faced by the Ukrainian health care system and the tasks that the US-supported institutions and laboratories in Ukraine were designed to address.

28. This raises a number of questions. How should the accumulation of strains of especially dangerous infections and their transfer to other countries help to improve the situation with infectious diseases? Why was the main focus on the study of naturally focal and especially dangerous infections, which, according to the U.S. Centers for Disease Control and Prevention lists, are considered to be potential pathogens for biological weapons?

29. Thus, the above facts about the sanitary and epidemiological situation in Ukraine confirm the inconsistency of the list of pathogens under study with the current public health issues and the interests of public health in Ukraine. The nomenclature and accumulated volumes of bioagents cast doubt on their purpose for preventive, protective and other peaceful purposes, as well as their compliance with the BTWC obligations.
