# Interview: Maxim Sokolov – Cardiological Specialist for the Ministry of Health, Ukraine



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*Dr. Maxim Sokolov, chief external specialist of the Ministry of Health of Ukraine in cardiology, principal scientist of the Department of Interventional Cardiology of the National Academy of Medical Sciences of Ukraine, and professor of the Department of Cardiology of Shupyk National Medical Academy of Postgraduate Education, provides insights into the evolution of Ukrainian cardiological care through the years of change in the Ukrainian health system and discusses in depth the life changing impact of the European initiative 'Stent: Save a Life', which he has been implementing in Ukraine.*

**Firstly, could you please introduce yourself to the international readers and summarize the current situation of cardiovascular medicine in Ukraine?**

Beside my academic responsibilities, I am the co-founder of the Ukrainian Association of Interventional Cardiology and a member of the Society of Interventional Cardiology, while I have been the Chief external specialist of the Ministry of Health of Ukraine in cardiology for the last 3 years. I was appointed before any of the recent changes were proposed in the healthcare system, and this has given me the opportunity to be in constant contact with the government to assess how cardiological medicine is improving.

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Ministry. A year ago, when she begun, it started this new era in cardiology and she allowed us to shape the Ukrainian cardiology healthcare system into the European model, a direction which we have been wanting for many years. We are very positive here that this will allow us to see vast improvements in Ukraine.

**As you mentioned you have had a front row seat to watch the system evolve over the years, what are these positive changes you have mentioned?**

Firstly, we need to breakdown the importance of the system changes in relation to patient health. In Ukraine, each year on average 25000 patients are affected by acute myocardial infarction (AMI). It is critical to have treatment within 12 hours of the first signs of AMI to drastically decrease the chance of mortality. The mobility of patients within this timeframe in the current Ukrainian cardiology system is at 14 percent, less than half of the European average of 35 percent.

Our vision for many years, and now currently underway, is to give Ukrainian patients access to European standards of care through a standardized system. This network has already begun with the implementation of the ‘Stent: Save a Life’ program, launched by the European Association of Percutaneous Cardiovascular Interventions (EAPCI), a branch of European Society of Cardiology (ESC), and the EuroPCR during the 2009 ESC annual congress in Barcelona.

The ‘Stent: Save a Life’ initiative gives all patients equal access to lifesaving cardiological treatment through fast delivery of patients to specialty institutions, 24/7/365, allowing medical professionals to perform primary percutaneous coronary surgery (p-PCI), communally known as angioplasty surgery (the opening of the coronary artery) within those crucial first 12 hours of acute coronary symptoms (ACS). The system encompasses four stages in chronological order: patient suffering ACS, ambulance services, reperfusion center, and cardiology ward (for rehabilitation).

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The problems in Ukraine have never been directly addressed with resources, with an abundant number of ambulances and over 50 cardiology departments distributed throughout the country. The missing link in the system has forever been the reperfusion centers, which we are only now seeing their construction thanks to government support and funding, with last year 15 of the 23 Ukrainian regions having a center. The Ministry of Health has finally acknowledged that it is a matter of quality rather than quantity. This quality is not only in medical devices, but the entire healthcare industry driving forward this effective process based on proven results from other European countries, like France and Germany. It is Ukraine’s time to build this network and make it work.

In the grand scheme of things, Stent: Save a Life' will result in improved patient outcomes and more highly trained medical staff as the training programs have been changed to an EU format. This allows our staff to communicate with other healthcare professionals throughout Europe, especially as we are pushing English in Ukrainian healthcare. In addition, this gives Ukrainians, even in less dense rural regions, the tools to perform high quality cardiological processes, from implanting stents to effective innovative rehabilitation techniques.

**The 'Stent: Save a life' program is something that seems to have created a lot of change. How long has it been active and are there any clear results?**

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Three years ago the program was looked at and reluctantly initiated by the former Minister of Health, but no serious action was taken to establish firmly in Ukraine this life changing cardiological reform. The cardiological community, as mentioned previously, has been extremely impressed in the last six months with the aggressive support of Mrs. Suprun, the new Minister for Health, with a contribution of UAH600 million, and with six reperfusion clinics erected this year alone.

Recently the 2017 EuroPCR conference was held in Paris looking at the widespread European success of the program. Statistically, here, it is has proven to be a minor miracle, with previously only 3percent of AMI patients having primary procedures performed on them while now this has risen to 30 percent, a tenfold increase. Plans are now underway to establish the program in Africa, Latin America, Asia and Australia. Although Ukraine does not have the 90 percent primary procedure rate of France and Germany, we are on the right track as we have the same European standards; that is the 'Stent: Save a Life' program.

**Being a doctor with a larger understanding of the Ukrainian healthcare system, what are the new reforms ideas that you have that you would like to implement in the future?**

Cardiovascular disease, and Ukrainian health in general, is a problem we must learn to fight from an early age, before patients find themselves having major heart surgery. Prevention is more important than a cure, and a new concept we must improve to lower the stress on the overall healthcare system. This is through early detection of problems such as CT scans or in general promoting healthier lifestyles among the Ukrainian population.

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