Russia and several Eastern European countries currently have some of the world’s highest rates in the increase of HIV disease. The dissolution of the Former Soviet Union (FSU) brought about seismic cultural, economic and political changes that led to an increase in unemployment, criminal activity, and injecting drug use. With the dismantling of Soviet public health infrastructures, the FSU sailed swiftly into an AIDS crisis, concurrent with epidemics in sexually transmitted diseases and TB. In contrast, many Central Eastern European countries were quicker to initiate economic reforms and maintain public health stability. The story of HIV prevention in Poland exemplifies a pro-active approach in public health. The incidence of new HIV cases stabilized and eventually decreased.

What were the elements of success in Poland’s battle with AIDS? First, the government of Poland was at the forefront of Central/Eastern Europe countries to formally recognize and respond to the HIV/AIDS epidemic. Polish health officials publicly announced the country’s first case of HIV in 1986, followed in 1988 with the first report of a HIV positive intravenous drug user (IDU). By 1987, the Polish government established the National AIDS Committee.

A second reason for Poland’s success was the early introduction of highly active anti-retroviral therapy (HAART). Although HAART had proven to dramatically decrease AIDS death rates in the West, it has been slow in arriving in many FSU countries. However, in Poland more than 1,800 people currently receive HAART.

A third pillar of success was the introduction of methadone in the mid-90s. Two experimental methadone programs were launched in Warsaw, first at the Institute of Psychiatry and Neurology and the second in the Department of Psychiatry, Medical University. The total number of participants did not exceed 100. By 2003, there were 10 programs in Poland with 721 persons participating. Poland also has needle-exchange programs; in IDU mediated HIV epidemics, international research studies have shown that methadone and needle-exchange programs can significantly decrease HIV transmission.

With Dr. Andrzej Zielinski (former SUNY Downstate Fogarty trainee and current Head of the Department of Epidemiology, National Institute of Hygiene), SUNY Downstate helped organize a conference, “Methadone programs and the other rehabilitation programs for IDU’s in Prophylaxis of HIV/AIDS,” in Jadwisin, Poland in Sept. 1994. It was first conference of this scale that united infectious disease specialists with activists and public health professionals planning for the prevention and rehabilitation of substance dependence. Through its promotion of harm reduction, the conference played an important role in later development of methadone programs in Poland. In 1997, Fogarty cosponsored another international conference, “Harm Reduction in Central and Eastern Europe” in Warsaw. This conference, also organized in part by Dr. Zielinski, served as a lively forum to reiterate the rationale for harm reduction approach through an exchange of ideas between...
Q. When were you a Fogarty trainee?
A. I was Fogarty trainee for two years (1997-1998) as a student in the Master of Science Program in Epidemiology in the School of Public Health, SUNY at Albany. My practical training in the Beth Israel Center for Substance Abuse (in summer of 1998) was also sponsored by Fogarty.

Q. What is your home institution?
A. My home institution is the National Institute of Hygiene, where I work in the Department of Epidemiology. I am also the National Consultant of Epidemiology in Poland.

Q. What are your main areas of interest?
A. At the present time, my major topic of interest is epidemiology of infectious diseases with special reference to surveillance of vaccine preventable diseases (Hib meningitis, pertussis).

Q. Why/how did you become interested in TB/HIV/AIDS/STDs?
A. In 1991-1993, I was working in the Spellman Center for HIV Related Diseases (New York City). My work focused on my interest in the problem of HIV infections and its risk factors, especially intravenous drug use (IVDU). At that time, the Center had very serious problems with multi-drug resistant TB (MDRTB) and I was able to participate in its control. The social attitude of the staff in the Spellman Center brought me closer to the problems (and importance) of public health. In the Spellman Center, I met Dr DeHovitz, who introduced the Fogarty program to Poland.

Q. Describe the focus of your work:
A. At the present time I work as a Head of Department of Epidemiology in National Institute of Hygiene and as a National Consultant of Epidemiology. Our department is a place where final analysis of the data of surveillance of infectious diseases in Poland is done. We would like to introduce more methods of analytical epidemiology to our work and improve the quality of outbreak investigation in our country. We also work on early warning systems for especially dangerous infectious diseases, including bioterrorist attacks. We also prepared new curricula for the training in epidemiology in Poland.

Q. Future plans:
A. I would like to continue in my present line of work, including more field studies and uses of variables obtained with molecular methods. Apart from me, four Fogarty trainees are connected with our department at the present time. I would like to help them in developing research skills and independent thinking to leave the department in good hands after my retirement in 2010.

Dr Zielinski is Editor of the Epidemiological Review (Przegląd Epidemiologiczny), the Quarterly Journal of the National Institute of Hygiene and the Polish Association of Epidemiologists and Infectionists. Their website is: http://www.pzh.gov.pl/przeglad_epimed/indexa.html. You can also email Dr Zielinski at: azielinski@pzh.gov.pl
Recent Publications by Current/Former Trainees


The Global Health Research Initiative Program for New Foreign Investigators (GRIP)

All Fogarty students who completed at least two years of training in the US after September 1, 2000 on a D43 grant or one year of such D43 training experience coupled with one year of significant, well documented mentored research experience (e.g. through an NIH research award) are eligible for this award.

This program is intended to promote productive re-entry of NIH-trained foreign investigators into their home countries as part of a broader program to enhance the scientific research infrastructure in developing countries, to stimulate research on a wide variety of high priority health-related issues in these countries, and to advance NIH efforts to address health issues of global import. This award is a great opportunity for those trainees who have recently returned to their home country.

Please see the Program Announcement (http://grants1.nih.gov/grants/guide/pa-files/PAR-03-118.html) for detailed information about research objectives, eligibility, and funds available.

Deadline: August 25th, 2005

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New Grant Announcement from NIH:

NIAID INTERNATIONAL RESEARCH IN INFECTIOUS DISEASES (IRID) R03 PROGRAM

The National Institute of Allergy and Infectious Diseases (NIAID) encourages the submission of R03 applications from institutions in eligible foreign countries to conduct preliminary or pilot studies or to explore the feasibility of, and initiate the planning of, collaborative infectious diseases research among investigators and institutions at international sites where NIAID has significant investment in research and/or infrastructure. These grants will serve to build independent research capacity by providing direct funding to investigators who do not currently have NIAID funded grant awards for research projects.

Additional information can be found at:


Several Fogarty alumni recently applied for the Global Health Research Initiative Program for New Foreign Investigators (GRIP) award. This award intends to support re-entry productivity of new NIH-trained investigators after they return to their home country.

Pawel Stefanoff (Poland) Study of risk factors of tick-borne encephalitis in Poland
Leonid Levchenko (Russia) Accuracy of blood donor interview responses in Russia
Natia Dvali (Georgia) HIV Subtypes and Drug Resistant strains in Georgia

We extend our support to and wish all the applicants luck!

We wish you a wonderful holiday season and a Happy New Year!
American/Western European and Central/Eastern European health professionals and activists.

To combat the HIV epidemic requires multi-disciplinary interventions, employing government and non-governmental interagency collaborations. In 1995, Parliament established the National Programme of HIV Prevention and Care for People Living with HIV/AIDS, coordinated by the Ministry of Health. Further HIV-related collaboration was established with the Ministry of Education, the Ministry of Transportation, and Marine Economy. The United Nations Development Programme (UNDP) followed with assistance to the government’s HIV prevention programs and aid to those living with HIV/AIDS. The UNDP was able to play a major role in mobilizing many non-government organizations (NGOs) to work in collaboration with the Polish government; indeed, currently 80% of all prevention work is through contracts with NGOs.

Stigmatization was recognized early on as a barrier to reaching targeted populations (IDUs, men who have sex with men, sex workers), which in turn might hinder HIV testing and the provision of adequate medical care. As a result, the Polish government made inroads to people with HIV, inviting them to play an active role in HIV prevention. People living with HIV received training and were transformed into powerful educators who could reach marginalized communities most at risk for HIV. Other people with HIV were actively involved in the formation of needle exchange programs. This constituent also organizes peer support groups and coordinates many other activities that provide support to the HIV community.

One foundation for these exciting and successful interventions is the capacity for population-based research in the medical community. SUNY Downstate’s AIDS International Training and Research Program (AITRP) has a ten year history of training professionals such as Dr. Zielinski with the goal of enhancing HIV research potential in Central/Eastern countries. To date, 22 Polish physicians and laboratory professionals have received training from Downstate’s AITRP. Seven trainees have received MS degrees from the School of Public Health in Albany. In 1997, Dr. Andrzej Horban, formerly Director of the Center for AIDS Diagnosis and Therapy and a current director in the Hospital of Infectious Diseases in Warsaw, collaborated with Dr. DeHovitz and other New York investigators to design an innovative short course training in how to conduct clinical trials. The goal of this initiative was to create a core group of well-trained Polish HIV/AIDS specialists who in turn could train other colleagues. A total of eight trainees completed this course, most of whom are now conducting HIV clinical trials. This year our Polish graduates have published in the Polish journal *Przegl Epidemiology* on “HIV and AIDS In Poland” and in the international journal *AIDS* on HAART in treatment-naïve patients.

Eastern European health professionals can look to Poland as a model for success in HIV care and prevention; they can also expect the continued support, commitment, and collaboration of SUNY Downstate’s AITRP training program.

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**Welcome!**

We want to extend a warm welcome to our newest students.

**Ekaterina Klevtsova, M.D.** recently arrived from St Petersburg and is participating in the 1-year certificate program at the School of Public Health in Albany. Before she began the program, Dr Klevtsova was working in the Department of Infectious Diseases and Epidemiology, Pavlov State Medical University, St. Petersburg, Russia.

**Ain Aaviksoo, M.D.** hails from Talinn, Estonia, where he was Advisor in Public Health matters at the Ministry of Health in Estonia. Dr Aaviksoo is pursuing an MPH degree at Harvard’s School of Public Health, Boston.

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The New York State International Training and Research program is sponsored by the Fogarty International Center and the National Institutes of Health (NIH). The program is cooperatively administered by the Wadsworth Center and Division of Epidemiology, New York State Department of Health (NYSDOH) at Albany, the Downstate Medical Center in Brooklyn, and the School of Public Health at Albany, the State University of New York.

Please keep in touch!
Kathy Hamilton
SUNY Downstate
Medical Center
kelly.hamilton@downstate.edu