

A personal reflection on the recent visit to Ukraine by PDA Chairman Mark Koziol

As Secretary General of EPhEU an umbrella organisation of pharmacists' unions across Europe, PDA Chairman Mark Koziol, was given the task of setting up a scheme to help Ukrainian hospitals with supplies of medicines, following requests for help from EPhEU members in Ukraine. **Three days after his return, he shares his first report of taking medicines funded by EPhEU's fundraising efforts into the conflict zone.**



Long queues on both sides of the border

Hurting along at nearly 45 miles per hour, our protected convoy of vehicles drove through pine forest roads past mile after mile of large lorries waiting for nearly two days to cross the border into war torn Ukraine. It felt embarrassing to see that the Ukrainian border guards and customs officials knew that we were due to cross that afternoon as we were waved through the normally lengthy process in just 8 minutes.

This project had taken three months to establish, pharmacists and the public across the continent were making donations and the trip had been planned for weeks. An initial test consignment of nearly £200,000 worth of medicines was being delivered to Ukrainian hospitals. Although it had been done with the collaboration of the Polish and Ukrainian authorities, with the temperature at 36 degrees and a security briefing fresh in the mind, the journey was

atmospheric and filled with foreboding. We were required to leave our mobile phones and laptops behind due to hostile monitoring of networks. This was the sharp end of the www.medicinestoukraine.com scheme.

Two days earlier, I had been in a neighbouring country at a specialist wholesaler for hospital medicines and equipment, where the order that had been placed by a group of Ukrainian hospitals was being prepared. Since it contained blood products, part of it would travel in a cold chain transportation system, FMD bar codes were being scanned and a forklift truck was preparing to load up. It was decided that not

all of the initial £350,000 order would be dispatched in this first delivery; the transportation systems would need to be tested first for safety, security and robustness.



Part of the first consignment

The road into this large Ukrainian city was filled with an eclectic mix of people going about their hurried lives and war time duties. Military vehicles, roadblocks, sand bagged doorways, steel anti-tank constructions and barbed wire were everywhere; as were large patriotic billboards carrying the rallying calls of President Zelenskyy to the population.

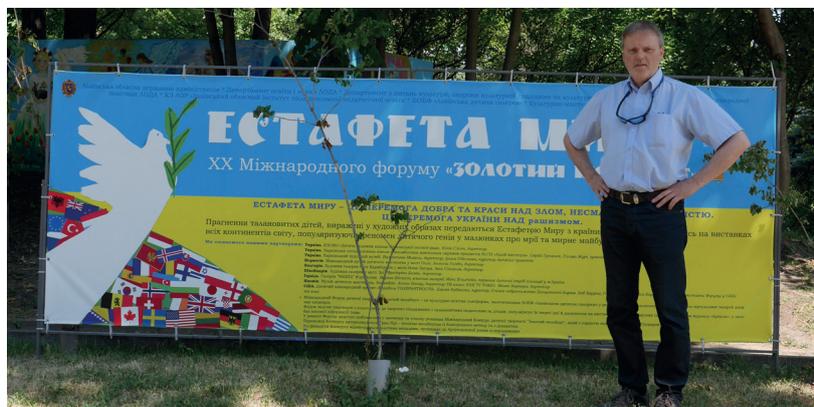


A call to arms

Soon after arriving at our destination, at 10.00pm the power went out, the curtains were drawn, and the hotel generator gave us flickering light. Our hosts included senior officials and others who were the 'fixers'. Their job was to ensure that our visit went smoothly and that we would give a good account of how our mission had fared upon our return. Our itinerary for the next few days was discussed; this was going to be a very full-on experience.

The toasts that followed dinner were extraordinarily emotional and you could not fail to be moved by the tear-filled expressions of gratitude from the Ukrainians for the help that they were receiving from the free world in their struggle.

Ours though was not a mission about lethal weapons, it was about the delivery of much needed specialist hospital medicines that were badly needed to treat the casualties of war. The regular medicines supply infrastructures in parts of Ukraine and also around 100 hospitals had already been destroyed. With military and civilian casualties getting more numerous each day, they needed all the help they could get. More importantly, our initiative was about establishing a long-term supply programme that would keep the medicines coming for many months to come.



A plea for peace



Items that will never be used

On the next day at the military hospital, we saw many soldiers. We learned that they considered their amputations to be nothing more than an inconvenience; all they wanted to do was to get back to the front lines so that they could repel the invader and allow their children to live in peace and freedom. With high morale and a powerful cause like this, it was clear to me that the aggressor was going to have a hard time.

I learned a lot about the triaging system that was used to rescue injured soldiers from the front line; the courage of these soldiers was astonishing.

Curiously, the hospital corridor was piled high with large boxes on both sides; this place seemed to have plentiful supplies. However, all was not what it seemed, the Americans had sent them a job load of ventilators.

"For soldiers with breathing difficulties?" I asked. **"No"**, I was told, this

was leftover equipment from the Covid crisis in America – sent to support the war effort in Ukraine – but they had no real need for these machines.

Later that day, we were invited to meet with the director and deputy director of the Healthcare and Military administration; by all accounts they had already heard about our medicines to Ukraine campaign. Croatia has been displaying the posters in pharmacies for over a month.

They promptly gave us a lecture about western organisations in the previous week sending two lorry loads of short-dated paracetamol tablets, which they did not need. Whilst very grateful for the help, they wanted us to understand their frustrations.

They did not want a 'push' system, which saw non-descript medicines and equipment that the world no longer needed sent to Ukraine. What they needed was a 'pull' system where they could place specific orders for items that were desperately required and delivered to where it was needed most. I remember explaining that that was exactly what our scheme was about. We were not a bunch of politicians looking to deliver a political gesture to win votes, we were healthcare professionals with an understanding and an expertise in medicines.



One of many meetings



Campaign poster displayed in Poland

Our members – those in pharmacist unions across the continent of Europe would put campaign posters appealing for financial support up in places where they would be seen by the public. Once we had raised the funds in this way and using our pharmacist skills, we would ensure that the medicines being ordered by Ukrainian hospitals could be sourced and procured in the right way. We would ensure that they were transported safely and delivered to a central place leaving the Ukrainian authorities to decide where the need was greatest.

The handshakes were powerful, the senior official personally requesting he be allowed to sign and take responsibility for the Memorandum of Understanding which we had brought with us.

A humanitarian crisis expert that accompanied me on the trip (a really savvy and experienced operator) told me that he had seen in similar crisis situations across the world, that often neither governments nor charity organisations knew how

to interpret the local needs for medicines nor knew how to procure and deliver them to war torn parts of the world. This truly was an opportunity for us pharmacists to show the world what we can do. The model that we have used in this instance is perhaps one that should be replicated elsewhere.

I will be forever haunted by what I experienced at the out of town childrens' hospital that we visited. The senior management were desperate for help. They not only needed medicines urgently, but they also needed strategic advice on the management of antibiotic resistance. They were running out of time with major surgery likely to be suspended because of it by September. They asked us if we could find them at least six surgeons who specialised in blast injuries to assist with training. They were utterly determined that a couple of us visited the surgical wards and with some



Antibiotic resistance concerns discussed

trepidation we did. There in little bundles of bandages, just about held together with surgical tape and plastic tubes after amputations and several operations, we found the remnants of little children whose bodies had been destroyed by artillery. As we stood in stunned silence unable to hold back the tears, the surgeon whispered, ***"If we can save these kids, then we have to break the news that they no longer have any parents."***

Experiencing the situation first-hand has left its mark on me and so very different than watching a television news report. I knew I had a route out of the country when this mission was over and a return to my normal life and the family that I love, but these people did not have such a luxury. My journey has reaffirmed the value provided by EPHeU's medicines to Ukraine initiative and the potential for how the expert knowledge possessed by pharmacists can help in crisis situations. We appeal for your support.



Clinicians struggle to save a child's life

To find out more or donate to this initiative please visit: www.medicinestoukraine.com

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