

CDC in GEORGIA



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The Centers for Disease Control and Prevention (CDC) first engaged with the country of Georgia in 1995 to assist with the investigation of a large-scale diphtheria outbreak. In partnership with Georgia's National Center for Disease Control and Public Health (NCDC) and government ministries, CDC strengthens capacity to prevent, detect, and respond to disease threats. This is achieved through CDC's ongoing work to enhance laboratory, surveillance, and workforce capabilities for COVID-19 response, hepatitis C virus (HCV) and hepatitis B virus (HBV) elimination, measles, and rabies.



Since 2020, CDC has supported the Public Health Emergency Management (PHEM) system in Georgia and trained over 50 responders for PHEM Rapid Response Teams across 5 regions



Since 2020, more than 20 central and district-level Emergency Operations Center (EOC) personnel were trained in public health EOC and emergency management fundamentals



In 2021, CDC partnered with the NCDC/Lugar Center to support the establishment of the National External Quality Assurance (EQA) program for COVID-19 PCR (polymerase chain reaction) diagnostic testing in more than 50 laboratories across Georgia



As of March 4, 2022, Georgia shared more than 1,500 SARS-CoV-2 sequences with the Global Initiative on Sharing All Influenza Data (GISAID)



CDC worked with partners to train nearly 500 public health professionals in infection prevention and control (IPC), laboratory diagnostics, rapid response, emergency operations, disease surveillance, contact tracing, and water, sanitation, and hygiene (WASH)



The Field Epidemiology and Laboratory Training Program (FELTP) Alumni Association was founded in 2019 and is a crucial asset for the public health system



In 2021, CDC helped launch a regional FETP-Intermediate that includes 21 residents from Armenia, Azerbaijan, Georgia, Moldova, and Ukraine



As of February 2022, over 2.3 million adults have been screened for hepatitis C virus (HCV), more than 96,000 people with chronic HCV infections have been identified, and more than 77,000 people have been treated



Nationwide serosurveys show that the proportion of the population with chronic HCV infections decreased from 5.4% in 2015 to 1.8% in 2021. Georgia also eliminated mother-to-child transmission of HBV and achieved the European regional HBV control goal



In partnership with the American Society of Microbiology, CDC delivered 10 webinar trainings and developed 7 protocols and standard operating procedures for the Lugar Center and 23 national antimicrobial resistance (AMR) laboratories in 2021



In 2020 and 2021, CDC partnered with the NCDC to establish and conduct trainings on a modified testing algorithm for identification and referral of *Campylobacter* (a bacteria that causes gastrointestinal illness)



CDC helped establish the Pulse-field Gel Electrophoresis (PFGE) testing method for enteric pathogens (intestinal bacteria) in 2019



A Field Epidemiology and Laboratory Training Program (FELTP) team conducted a COVID-19 survey at a marketplace in Georgia in 2020.

Global Health Security

Georgia's focus on health security began in 2014 when the country volunteered to pilot an early version of the Global Health Security Agenda (GHS) review that later became the Joint External Evaluation (JEE) tool. In 2021, CDC joined Georgia as co-lead of the GHS Real-Time Surveillance Action Package. CDC and NCDC support GHS research and projects including:

- Strengthening the national laboratory system
- Enhancing real-time disease surveillance
- Supporting genomic research of the hepatitis C virus
- Assisting in outbreak investigations of zoonotic, foodborne, and respiratory diseases
- Strengthening molecular detection of drug resistance mechanisms
- Strengthening capacity of the Emergency Operations Center (EOC)

COVID-19

The first case of COVID-19 in Georgia was reported on February 26, 2020. Existing collaborations between CDC and Georgia partners were critical to leveraging previous public health investments for the COVID-19 response. The existing molecular diagnostic infrastructure for hepatitis C, expert workforce, and quality assurance programs were pivoted for SARS-CoV-2 testing. In March 2021, CDC supported the extension of SARS-CoV-2 (the virus that causes COVID-19) sequencing capacity to enhance national and global surveillance of SARS-CoV-2 variants. CDC collaborates on key COVID-19 preparedness and response activities including:

- Establishment of Georgia's EOC
- Establishment of a national External Quality Assurance (EQA) program for SARS-CoV-2 nucleic acid amplification tests (NAAT)
- Assessment of an antigen-detecting rapid diagnostic testing (Ag-RDT) program for COVID-19
- Integration of COVID-19 into existing disease surveillance platforms
- Population-based SARS-CoV-2 seroprevalence survey
- Supporting the national government to implement the national COVID-19 vaccine deployment plan
- Participating in the COVID-19 national intersectoral immunization council

Field Epidemiology Training Program (FETP)

CDC supported the NCDC to launch and implement the Advanced Field Epidemiology and Laboratory Training Program (FELTP) in Georgia, Armenia, and Azerbaijan in 2009 and in Ukraine in 2015. This program trains scientists in epidemiology, veterinary epidemiology, and laboratory quality management systems. More than 120 FELTP graduates investigate disease outbreaks and help their countries adopt disease control measures. From 2018-2020, FELTP-Advanced graduates mentored FETP-Frontline trainees in Georgia. In November 2021, CDC supported the launch of a 10-month, regional FETP-Intermediate with 21 residents selected from Ministries of Health and Agriculture in Armenia, Azerbaijan, Georgia, Moldova, and Ukraine.

Laboratory Systems Strengthening

CDC partners with Georgia's NCDC to increase laboratory and workforce capacities in quality management systems, project management, and disease surveillance. In 2017, CDC helped establish the Lugar Center's EQA program. CDC collaborates with the Lugar Center on proficiency testing and educational webinars on basic microbiology, laboratory testing, and bacteria isolation methods. CDC also supported Georgia to develop and implement a national Laboratory Information Management System (LIMS). The LIMS connects human and animal health with food safety and environmental health to rapidly identify and contain disease outbreaks across the country. Georgia's laboratories and LIMS are critical assets to the country's GHS goals, One Health approach, and outbreak response.

Hepatitis C

In 2015, with CDC support, Georgia launched the world's first national viral hepatitis elimination program. The program offers free testing and treatment to all citizens and is a global model for hepatitis elimination. Georgia's hepatitis C virus (HCV) elimination program received CDC's Honor Award for Excellence in Partnering in 2021. Georgia was also selected to pilot the World Health Organization's Interim Guidance for Country Validation of Hepatitis Elimination. With CDC support, Georgia developed the 2016-2021 strategic plan for hepatitis elimination that resulted in a 67% reduction in chronic hepatitis C prevalence by 2021. CDC supported development of the updated 2021-2025 strategic plan.

Vaccine-Preventable Diseases

CDC's partnership with NCDC in vaccine-preventable diseases (VPD) began when CDC supported Georgia's response to a diphtheria outbreak in the 1990s. CDC helped Georgia strengthen VPD surveillance and immunization systems, achieve and maintain polio-free status since 2002, achieve rubella elimination in 2020, and work toward measles elimination. In 2021, CDC provided input on a nationwide serosurvey that included hepatitis B virus (HBV). The survey demonstrated elimination of mother-to-child transmission and achievement of the European regional goal for HBV control in Georgia.

Antimicrobial Resistance (AMR)

AMR and healthcare associated infections (HAIs) impact the quality of healthcare worldwide, increase morbidity and mortality, and lengthen hospital stays. A recent assessment of the global burden of AMR estimates that 1.27 million deaths were attributable to bacterial AMR in 2019. In the broader Central Europe, Eastern Europe, and Central Asia region, more than 73,700 deaths were attributable to bacterial AMR in 2019. Since 2015, CDC has supported partners in Georgia to:

- Increase laboratory capacity for the molecular detection of AMR pathogens
- Establish EQA and laboratory standardization, including international accreditation
- Develop national IPC guidelines, establish and assess programs for IPC at healthcare facilities
- Implement and evaluate sentinel surveillance for healthcare-associated infections
- Monitor AMR patterns of enteric and other pathogens

One Health

CDC works with partners in Georgia to approach disease from a One Health perspective, recognizing that the health of people is connected to the health of animals and the environment. CDC collaborates with Georgia's Ministry of Environmental Protection and Agriculture (MEPA) and NCDC to increase capacity for laboratory diagnostics, disease surveillance, and outbreak response for control of zoonotic, foodborne, waterborne, and enteric diseases. CDC implements the One Health approach by working with partners to:

- Develop disease control guidelines
- Strengthen avian influenza surveillance
- Enhance sequencing capacity in MEPA



A South Caucasus FETP resident collects samples during a 2009 outbreak investigation of Hemolytic Uremic Syndrome (a condition that is most often triggered by an E. coli infection and can lead to kidney failure, permanent health problems, and death).



CDC STAFF

5 Locally Employed



AT A GLANCE

Population: > 3.7 million
Per capita income: \$14,160
Life expectancy: F 78 / M 70 years
Infant mortality rate: 8/1,000 live births

Sources:
World Bank 2020, Georgia
Population Reference Bureau 2021, Georgia



TOP 10 CAUSES OF DEATH

1. Ischemic heart disease
2. Stroke
3. Hypertensive heart disease
4. Lung cancer
5. Alzheimer's disease
6. Cirrhosis
7. Diabetes
8. Chronic obstructive pulmonary disease (COPD)
9. Breast cancer
10. Stomach cancer

Source:
GBD Compare 2019, Georgia



For more country information
www.cdc.gov/globalhealth/countries/georgia