Report on Clinical Observership:

ESO Department to Department (D2D) Task Force for Ukraine 2026

Host Institution: Pauls Stradiņš Clinical University Hospital, Riga, Latvia

Visiting Fellow: Dr. Alina Trubetska, Neurologist, Starokostiantyniv Multidisciplinary Hospital, Ukraine

Dates of Visit: July 27 – August 2, 2026

1. Introduction

In the framework of the ESO Department to Department (D2D) Task Force for Ukraine 2026 programme, I had the privilege of completing a one-week clinical observership at the Stroke Unit of Pauls Stradiņš Clinical University Hospital. This visit was focused on gaining practical insights into stroke care organization, acute management, and patient pathways, with the ultimate goal of implementing these best practices at the Starokostiantyniv Multidisciplinary Hospital.

2. Clinical Observations and Key Learnings

I was profoundly impressed by the hospital's high-performance stroke care model. Key takeaways from my observation include:

- **Operational Efficiency:** The unit’s ability to achieve a "door-to-needle" time of 11 minutes is a benchmark in stroke care efficiency.
- **Treatment Strategy:** The transition from alteplase to tenecteplase is a crucial operational shift. Observing the seamless integration of these modern protocols reinforces our ambition to bring tenecteplase to our practice in Ukraine through the support of the Ukrainian Stroke Medicine Society.
- **Neurointervention:** Witnessing my first thrombectomy was a highlight. I am grateful to Dr. Helmuts Kidikas and Dr. Martins Barons for sharing their expertise. Their technical precision and individualized approach to patient management are exemplary.
- **Multidisciplinary Care:** Under the mentorship of Dr. Kristaps Jurjāns, I gained a comprehensive view of patient care—from early dysphagia assessment and nutritional support to the prevention of pressure ulcers and rehabilitation strategy. His focus on the ergonomic arrangement of equipment and systematic approach to patient safety provided invaluable lessons.

3. Reflection and Human Impact

Beyond the clinical metrics, I was deeply moved by the cultural environment of the hospital. The symbolic layout of the facility—the blend of the old Soviet-era building (B2), the historic wings (C1-C5), and the state-of-the-art modern B3 building—perfectly illustrates Latvia’s journey toward medical excellence.

I also wish to acknowledge the incredible dedication of the Ukrainian nursing staff I met at the hospital. Meeting Tetyana, a nurse from Kupyansk , was a profoundly touching experience. Her hometown is currently being destroyed by Russian invaders. The hospital's supportive environment for Ukrainian medical professionals who have lost everything is deeply appreciated and speaks volumes about their humanitarian commitment.

4. Conclusion and Future Implementation

This observership has provided me with a clearer roadmap for the development of the stroke service at Starokostiantyniv Multidisciplinary Hospital. I am now better equipped to optimize our stroke pathways, enhance multidisciplinary collaboration, and improve our long-term patient outcomes.

I extend my deepest gratitude to the European Stroke Organisation (ESO) for providing this life-changing opportunity, and to the Ukrainian Stroke Medicine Society for their continuous support.


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