

Table 1 - belongs to Results

| Indicator                                | 2021 | 2022 | 2023 | 2024 | Q1-Q3 2025 |
|------------------------------------------|------|------|------|------|------------|
| IV thrombolysis rate, %                  | 4.6  | 6.1  | 9.1  | 11.5 | 16.9       |
| Mechanical thrombectomy rate, %          | 0.3  | 0.6  | 1.3  | 2.1  | 3.3        |
| In-patient rehabilitation utilization, % | 4.8  | 6.2  | 10.3 | 13.4 | 19.2       |
| In-hospital mortality (all strokes), %   | 17.5 | 17.3 | 16.5 | 16.9 | 17.3       |
| 30-day mortality (all strokes), %        | 25.3 | 24.5 | 24.0 | 24.0 | 24.7       |

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STRENGTHENING OF STROKE CARE IN UKRAINE DESPITE THE COVID-19 AND WARTIME CHALLENGES

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**Background and aims:** In Ukraine, a country with very high stroke burden, healthcare reforms continued in the face of the pandemic and ongoing war. We aimed to assess the trends in acute stroke treatments, poststroke rehabilitation, and early stroke mortality since 2021 when the Program of Medical Guarantees, a new state-funded system ensuring free access to essential healthcare services, was implemented.

**Methods:** Aggregated dataset on stroke care was obtained from eHealth, the national centralized database, and a set of metrics was calculated for 2021 through Q3 2025, including the rate of intravenous thrombolysis and mechanical thrombectomy in ischemic stroke, utilization of in-patient rehabilitation services within the first 3 months, in-hospital and 30-day stroke mortality.

**Results:** Over the last 5 years, rates of intravenous thrombolysis and mechanical thrombectomy in acute ischemic stroke along with access to in-patient post-stroke rehabilitation have been improving, while in-hospital and 30-day mortality have shown no trend to reduction over time (table).

**Conclusion:** In Ukraine, despite clear progress in reperfusion interventions and rehabilitation utilization, early stroke mortality remains high and largely unchanged highlighting the need to address the gap between service availability and better outcomes.

**Conflict of interest:** Flomin: nothing to disclose; Tsyhanii: nothing to disclose; Orlovska: nothing to disclose; Guliaieva: nothing to disclose; Skipalskyi: nothing to disclose.