

# ANNUAL REPORT

## 2014



FISCAL PERIOD | APRIL 2013 - 31 MARCH 2014



## ■ PRESIDENT'S INTRODUCTION

Dear colleagues,

I am delighted to present the 2014 Annual Report of the European Society of Cardiology. This renowned scientific organisation has a remarkable track record of which we can all be really proud. At the beginning of my two-year presidency, I highlighted the challenges we faced across a range of scientific, economic, regulatory and political issues. I also noted the importance of establishing a coherent strategy and prioritisation to help us avoid negative trends and stagnation. Accordingly, our strategy over the last two years has focused on three core aspects:

- Maintaining unity and fruitful cooperation among the ESC constituent bodies
- Further increasing the success of established projects such as the ESC Congress, Publications, Guidelines, and Registries and Surveys
- Envisaging and implementing sustainable project initiatives so that the ESC can rapidly adapt to evolving developments and needs

In the short paragraphs that follow, I have summarised progress on a number of projects, the majority of which are covered in much more detail within this report. I therefore encourage you to read it in full and then, I am sure, you will join me in acknowledging the incredible contribution made by our volunteers, ably supported by the permanent staff at the European Heart House and in our Brussels office. Needless to say, I am honoured to have led this exceptional community of ESC cardiovascular professionals over the last two years.

**ESC Congress:** Our 2013 ESC Congress in Amsterdam was innovative in its delivery and had a spotlight theme of 'The Heart Interacting with Systemic Organs'. We involved other specialties and affiliated cardiovascular societies from more than 150 countries around the world. The exciting programme attracted 30 000 participants and a record number of Hotline and Clinical Trial Update submissions. With 'Innovation and the Heart' as the spotlight theme of our Congress to be held in Barcelona in 2014, we are pleased to acknowledge the massive response of the international cardiovascular community with 11 500 submitted abstracts, a record number in the history of the ESC.

The above metrics underline that ESC Congress has become a truly global event with significant multinational involvement: 40 joint sessions with Affiliated Cardiac Societies, major cardiovascular and other specialty organisations from around the world. It is worth emphasising that Japan was, once again, the number one country in the submission of scientific works.

**Publications:** The ESC Journal Family now comprises nine journals covering the entire field of cardiovascular medicine, from basic science to acute cardiac care, intervention, and heart failure. The flagship European Heart Journal (EHJ) reached an all time record impact factor of 14.1 rating it second in its field and it now appears on a weekly basis.

**Education:** Education is at the core of the ESC's mission. Improving patient outcomes through medical education requires educational activities that are based on sound scientific content. During 2013, the Education Committee focused effort on applying robust educational methodology to its projects, with the main beneficiary being the excellent progress on the ESC eLearning platform. Working closely with the ESC Associations, the eLearning platform has been populated with a wide range of courses covering the sub-specialties. The ESC Webinar series in general cardiology is now broadcast from a professional TV studio, while ESC Clinical Cases have been reviewed and all follow a step-wise approach which ensures progression-based learning.

**EORP:** This important programme continued its expansion in 2013 and attracted support from many ESC Associations and Working Groups, and a number of National Cardiac Societies. In 2013, four new registries were implemented and the ESC worked hard to build stronger cooperation with organisations including Organisation for Economic Cooperation and Development (OECD) and European Medicines Agency (EMA). Other initiatives included the development of a European Registry of Registries and participation in the Cardiology Audit and Registration Data Standards programme, also known as CARDS.

**Global Scientific Activities:** The Global Scientific Activities Committee reports a great deal of positive progress for 2013. Meetings were organised in Brazil, China, Mexico, Argentina, Saudi Arabia and, for the first time, India. These meetings focus on the highlights of the ESC Congresses and on recent ESC Guidelines, and all were very well attended. Such meetings represent an excellent opportunity for in-depth scientific exchanges, and it is clear that our Clinical Practice Guidelines are respected, accepted and highly popular. An important agreement was signed with the Chinese Society of Cardiology in order to develop a Sino-ESC school, which will include several colleges, based on major topics of interest in cardiology.

**Clinical Practice Guidelines:** During the last year, the Committee for Practice Guidelines (CPG) has developed five new ESC Clinical Practice Guidelines covering Acute Pulmonary Embolism, Myocardial Revascularisation, Hypertrophic Cardiomyopathy, Aortic Diseases, and Non-Cardiac Surgery, due for release in 2014. I particularly thank the experts responsible for drafting and approving these important new documents. The ESC Pocket Guidelines mobile application project has also made good progress, with 14 titles available and offering new features such as charts, scores, and algorithms. The Summary Cards aimed at non-specialists such as general practitioners and nurses are growing in popularity as they contain essential information on each of the major Guidelines topics. Teams are currently working on five new Guidelines which will be presented in 2015: Ventricular Arrhythmias and Sudden Cardiac Death, Pulmonary Hypertension, Acute Coronary Syndromes NSTEMI, Pericardial Diseases, and Infective Endocarditis.

**European Affairs:** We have made much progress across a number of fronts. Beginning with prevention, the three-year EuroHeart II project focused on CVD prevention and its outcomes are likely to have far-reaching implications for the health of Europe's population and the future shape of national healthcare policies and systems. The project was co-funded by the European Union and ended in March 2014. This was an excellent example of cooperation between the ESC, the European Commission, the European Heart Network (EHN), and 29 other health-related and academic organisations.



In research matters, the ESC is increasingly engaged in advocating improvements in standards of cardiovascular research in Europe through the identification and promotion of research needs and priorities. Recent activities include the publication of a scientific strategy paper on personalised medicine in the EHJ that aims to shape future EU policy and funding in this important area. In addition, the ESC is conducting a survey of the cardiovascular research landscape in order to make recommendations for future transnational research strategy. The CardioScape project is funded by the European Union FP7 research programme and aims to establish the extent of duplication across national research programmes and the existence of gaps that reduce opportunities for innovation. The outcome of the project will help guide future CVD research in Europe.

The regulatory affairs area has been prominent amongst our activities in 2013. The availability and safety of drugs, devices or diagnostic tools has been enhanced by the contributions of our 80 000-strong patient-focused cardiology community. By providing evidence-based recommendations to policy makers, we have helped to guide their choices and inform their decisions in a number of areas including:

- **Drugs** – The ESC shares its expertise on a regular basis with the European Medicines Agency by responding to consultations and by exchanging with the Cardiovascular Working Party members.
- **Medical devices** – During 2013, the ESC has been very active in stating its position on the revision of the Medical Devices Directives proposed by the European Parliament. Meetings have been held with MEPs and other EU bodies, and a position paper published.

In addition, we are regularly invited to share expertise with European Commission committees, such as the Medical Devices Expert Group (MDEG), its Working Group on Clinical Investigation and Evaluation (CIE), and the Vigilance Working Group. A Task Force on Coronary Stents was set up with experts from the European Association of Percutaneous Coronary Interventions (EAPCI) to perform a systematic review of all CE-marked coronary stents to help the CIE revise their guidance documents.

To ensure effective service planning and quality of care for patients across the EU, the ESC is striving for a coordinated and comprehensive CVD data collection in Europe. This would provide an important and effective tool for patient-centred healthcare in the future. The ESC is also cooperating with the European Union PARENT Joint Action to set-up a 'registry of registries' of CVD data. And, finally for regulatory affairs, the ESC is building broader relationships with relevant international organisations including the Organisation for Economic Cooperation and Development (OECD).

**Alliances and Groups:** 2013 saw the creation of the Cardiopolicy pilot group comprised of seven volunteer National Cardiac Societies. This initiative is aimed at improving collaboration and coordination to optimise the impact of the cardiology community and influence strategies at both European and national levels.

The ESC is one of the founding members of the Alliance for Biomedical Research in Europe (Biomed Alliance) that was created in 2010 to promote the best interests and values of research across all medical disciplines in Europe, especially in those general areas in which common interest is identified. In particular, the Alliance has been successful in promoting the creation at EU level of a scientific-led strategic body that can steer research and innovation across the entire health spectrum.

The ESC is also a founding member of the European Chronic Diseases Alliance, an unprecedented collaboration between 11 not-for-profit European specialty organisations representing conditions including CVD and diseases of the kidney, liver, and lungs, as well as hypertension, diabetes, cancer, and allergies. Alliance members were very active in a project titled 'Economics of Chronic Diseases' and received a grant of approximately €800K as part of the EU Health Programme.

The Members of the European Parliament (MEP) Heart Group is a discussion forum aimed at promoting measures that will help reduce the burden of CVD in the European Union and raise CVD as a priority on the EU political agenda. The secretariat of the MEP Heart Group is run jointly by the ESC and the European Heart Network. It is currently one of the largest health discussion forums within the European Parliament and is supported by 66 MEPs from 23 EU Member States.

**The Brussels office and the European Heart Agency of the ESC:** One of the major strategic projects of my Presidency was the opening of the ESC office in Brussels at 29 Square de Meeûs in February 2013. This important base in the political capital of Europe has been already used to serve two main ESC needs.

Firstly, it accommodates regular ESC activities and projects, such as Board meetings, scientific events, webinars, and, together with the Heart House in Nice, it has become a meeting point for our volunteers who contribute to the Associations, Working Groups and to ESC activities in general.

Secondly, the Brussels office supports the fundamental ESC project of the European Heart Agency. This is aimed at the development of new ideas and activities in response to a constantly changing landscape and wide diversity in the conditions and needs of our chosen field. The European Heart Agency encompasses three axes: European Affairs, the European Heart Health Institute (with three distinct Units: Health Policies and Economics, Innovation and Implementation, and Clinical Trials), and the European Heart Academy. The Academy aims to, amongst other projects, promote our Society's collaboration with selected universities. Our combined efforts have borne fruit, resulting in close cooperation with the Universities of Zurich and Maastricht, as well as with the London School of Economics on a two-year course leading to a Masters degree.

As I reach the end of my two-year mandate as President of the European Society of Cardiology, I would like to especially thank all those who believed in me and entrusted me with the leadership of this large and admirable scientific society. I truly hope that we will continue to work together in a spirit of unity, common purpose, and collaboration, and that the ESC Constituent Bodies maintain their support for our strategy and goals. And, finally, I would like to encourage everyone involved with the ESC to be guided by clear principles, to maintain the ethos of our society, and be always driven by the needs of patients and humanity as a whole.

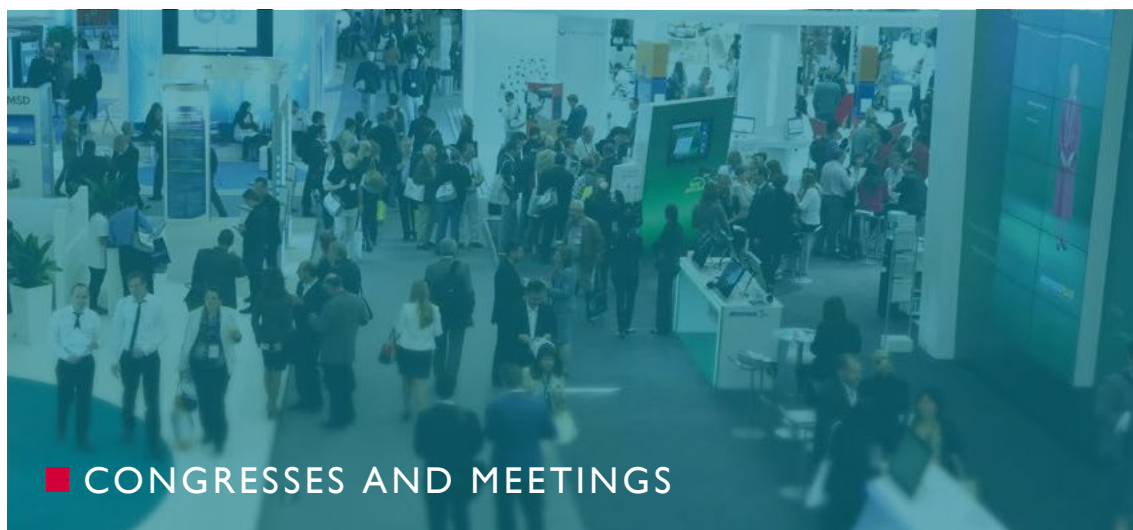
A handwritten signature in black ink, which appears to read 'P. Vardas'.

Professor Panos Vardas  
*President, European Society of Cardiology*



pg 8	CONGRESSES AND MEETINGS
pg 13	SCIENTIFIC AFFAIRS
pg 20	ADVOCACY AND REPRESENTATION
pg 27	COMMUNITIES
pg 39	TREASURER'S REPORT
pg 48	AUDITOR'S REPORT





## ESC Congress 2013

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The ESC Congress 2013 was held in Amsterdam, Netherlands, from 31 August to 4 September. The event attracted almost 30 000 participants drawn from 146 countries. The spotlight chosen for the congress was 'The heart interacting with systemic organs', and considered how interaction may be part of an original disease mechanism or may be responsible for disease amplification and clinical syndromes. 30 sessions were organised around this theme and, for the first time, it was possible to submit abstracts directly under the spotlight category. The programme featured 428 individual sessions and 4 215 abstracts. As in previous years, independent market research was conducted into satisfaction levels. This yielded similar results although delegates highlighted problems with onsite registration and congress bag distribution. Digital content in general had a great appeal for delegates, although it appears that any self-funding rules could be a deterrent to attendance in the future.

### Key statistics:

- 29 990 participants, including 24 561 delegates:
    - 35% of delegates from non-ESC countries, compared with 33% in 2012, and 30% in 2011
    - Increasing individual registrations versus group registrations
  - 428 ESC Scientific Programme sessions in 32 lecture rooms:
    - 1 255 Faculty members fulfilled 2 429 roles
    - 288 Pre-Arranged Sessions
    - 140 Abstract-based Sessions
    - 62 Special Sessions including Hot Lines, Meet the Trialists, Meet the Experts, Named Lectures, and a new category, Meet the Legends
  - 10 491 abstracts were submitted, with an acceptance rate of 40.18%:
    - Continued growth in participation from Asia, led by Japan with 1 459 abstracts
  - Extensive industry participation:
    - 206 companies occupied 10 198m<sup>2</sup> of exhibition area
    - 71 Satellite Symposia, including 11 EBAC-accredited programmes
    - 4 Hands-On Tutorials
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**Highlights:**

- Updates provided on a number of significant clinical trials including RE-ALIGN, TASTE, Hokusai VTE study, AMADEUS, and ACCOAST
- Key information initiatives:
  - Live from ESC Congress – a complete video programme was made available at [www.escardio.org](http://www.escardio.org) as a 24h video channel containing streams from live sessions, ESC TV, and Webcasts
  - ESC TV – ESC Studio and ESC TV were organised into ESC TV Science in Perspective and ESC TV Cardio Talk
  - The Hub – three multimedia stages surrounded by plasma screens, where clinical cases and rapid-fire oral abstract presentations were held
  - Highlights from Congress presented in a 60 minute online programme ‘Best of ESC Congress’ summarising the main news with clinical relevance and impact on daily practice, as well as latest updates using short video reports, snapshots, and panel discussion
- The Congress Mobile App was downloaded over 18 000 times, an increase of more than 50% from 2012:
  - 44% of downloads were completed prior to start
  - A new feature was made available by which the app was synchronised with the internal scientific programme software for up-to-date content
  - Analysis of registration data suggests that over 94% of delegates use a smart phone
- Free CPR Workshops were held in partnership with the European Resuscitation Council
- ESC Plaza, including a new 522m<sup>2</sup> ESC stand redesigned to simplify delegates’ experience, was conveniently located just after the Registration area

**EuroPrevent 2013**

The eighth annual meeting of the European Association for Cardiovascular Prevention and Rehabilitation (EACPR) took place from 18 April to 20 April in Rome, Italy. The congress theme was ‘The Universal Approach of Preventive Cardiology’. The programme included new initiatives such as:

- The National CVD Prevention Coordinators workshop, which attracted 24 participants representing 19 countries to discuss implementation strategies, best practices, and national programmes
- The Global Forum on CVD Prevention in Clinical Practice, which attracted over 100 participants, targeting professional societies with an interest in prevention and rehabilitation, and clinical practice, as well as national coordinators for CVD prevention, national cardiac societies, national heart foundations, and EuroPrevent delegates

**Highlights:**

- 1 790 participants including 1 545 delegates:
  - 12% registered with member fee
  - 38% participants EACPR members
  - 138 new members joined EACPR during the congress
  - 75% individual registrations
- Five lecture rooms hosted 54 Scientific Sessions with 198 Faculty Members involved
- 955 Abstracts submitted with 57.8% acceptance
- Abstract Programme featured two Young Investigator Award Sessions
- 27 exhibitors stands covering 327m<sup>2</sup>
- Two Satellite Symposia

## Heart Failure 2013

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The Heart Failure Association of the ESC's Congress was held in Lisbon, Portugal from 25 May to 28 May. The Heart Failure Congress is an international event open to anyone interested in any aspect of heart failure; from epidemiology, through basic and translational science, to prevention, diagnosis, monitoring, prognostication, medical, and nursing management. The theme 'The Heart Failure Specialist of Tomorrow – From Diagnosis to Intervention' reflected a transition to a new area of comprehensive heart failure care. This edition of the Congress resulted in a record number of abstracts submitted and a record attendance number with more than 4 000 active delegates.

### Highlights:

- 4 470 participants including a record 4 080 delegates:
  - Including over 1 000 free delegates from local and target countries as well as young scientists
  - 60% individual registrations
  - 274 Faculty Members
- 1 515 abstracts submitted with a record 95% acceptance rate
- 96 Scientific Sessions held in six lecture rooms with four Hands-On tutorial rooms:
  - Six Hands-On Tutorials series (36 sessions in total)
  - Two Young Investigators Award Sessions and one Nursing Investigator Award Session
  - 13 Industry Satellite Symposia
- 27 Exhibitors occupied 613 m<sup>2</sup> of exhibition space

## ICNC 11

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The 2013 International Conference of Nuclear Cardiology and Cardiac CT (ICNC) was held in Berlin, Germany from 5 May to 8 May. With support from the ESC Congresses and Meetings Division, the biennial event is jointly organised jointly by:

- The ESC Working Group on Nuclear Cardiology and Cardiac Computed Tomography
- The American Society of Nuclear Cardiology (ASNC)
- The European Association of Nuclear Medicine (EANM)

The purpose of ICNC is to promote the cause of Nuclear Cardiology and Cardiac CT through the organisation of an international scientific and educational meeting.

### Highlights:

- 686 participants
  - 296 abstracts submitted with an 83% acceptance rate
  - 53 Scientific Sessions held across four lecture rooms:
    - 104 Faculty Members
    - Programme includes a Young Investigator Award
    - Two Industry Satellite Symposia
  - Exhibition Area supported by 14 organisations and industry partners, occupying 189 m<sup>2</sup>
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## EHRA EUROPACE 2013

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EHRA EUROPACE is the biennial congress of the European Heart Rhythm Association. The 2013 congress was held from 23 June to 26 June in Athens, Greece. EHRA EUROPACE is established as the major peer meeting in arrhythmias and cardiac pacing in Europe, and has a special focus on research and education. The 2013 edition was characterised by the support of the ESC Working Group on e-Cardiology and the ESC Working Group on Cardiac Cellular Electrophysiology, both of which actively contributed to the scientific programme. This emphasises the multi-disciplinary and translational approach in the diagnosis and therapy of arrhythmias and conduction disturbance. The main theme was 'Discovering, Translating, Practicing, and Transforming' with particular emphasis on:

- Discovering new horizons in basic science and improving understanding of pathophysiology and arrhythmogenesis from gene to disease
- Translating basic science, imaging modalities and computer modelling to new technologies, and pharmacological therapies which offer better outcomes
- Practicing new skill sets, and the development of optimal care pathways and best practice
- Transforming experiences to enhance clinical effectiveness, and to marshal arguments for cost effectiveness, better care delivery, and better outcomes for patients

### Highlights:

- 5 099 participants including 3 491 delegates:
  - 2 047 individual registrations; 59% of total registrations
- 1 536 abstracts submitted with 66% acceptance rate
- 119 Scientific Sessions held across nine lecture rooms
- 312 Faculty Members
- 24 Industry Satellite Symposia
- 49 organisations represented in the Exhibition Area, occupying over 1 700m<sup>2</sup>

## Acute Cardiac Care 2013

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Acute Cardiac Care 2013, the congress of the Acute Cardiovascular Care Association (ACCA), was held from 12 October to 14 October in Madrid, Spain. This edition was the first since moving to an annual format, and was based on a theme of 'Acute Cardiac Care: A multi-disciplinary endeavour'. Acute cardiovascular care requires networking through a multi-disciplinary approach and the aim of the congress scientific programme was to present a comprehensive, multi-disciplinary review of all recent advances in acute and intensive cardiovascular care medicine. The focus of the congress was very much educational, and featured an entire track designed for educational sessions (including ACCA local school in Spanish) and a session dedicated to the brand new ACCA Tool Kit.

### Highlights:

- 1 056 participants including 975 delegates:
    - 685 individual registrations; 70% of total registrations
    - 394 ACCA members attended, representing 41% of active participants
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- 550 abstracts submitted with 59% acceptance rate
- 54 Scientific Sessions across five lecture rooms
- Two Industry Satellite Symposia and three Industry sponsored sessions
- 130 Faculty Members
- Nine organisations represented in the Exhibition Area, occupying over 160m<sup>2</sup>

## **EuroEcho-Imaging 2013**

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The annual congress of the European Association of Cardiovascular Imaging (EACVI) was held in Istanbul, Turkey from 11 December to 14 December. Formerly known as EuroEcho and other Imaging Modalities, the congress changed its name to EuroEcho-Imaging in 2013. The 2013 event saw over 3 300 delegates attend and a scientific programme with over 100 sessions. EACVI is currently evolving into a new structure to reflect its revised mission and part of this process may have an impact on the target audience and industry partners. The scientific programme is thus expected to evolve to also address specific interests of the pharmaceuticals industry such as clinical imaging sessions.

### **Highlights:**

- 3 311 participants including 2 873 delegates:
  - 2 330 individual registrations; 81% of total registrations
  - 21% registered as existing EACVI member
- 1 459 abstracts submitted at 59% acceptance rate
- 97 pre-arranged sessions (including 12 Imaging Campus)
- 331 Faculty Members
- Programme includes two Young Investigator Award sessions
- 25 Industry Sessions (5 Satellite Symposia and 20 Imaging Campus sessions)
- Exhibition Area occupied 535m<sup>2</sup>





## Education

Education is at the core of the ESC mission to reduce the burden of cardiovascular disease in Europe. The goal of improving patient outcomes through medical education can, however, only be delivered when those educational activities are based on sound scientific content. During 2013, the Education Committee focused on applying robust educational methodology to its programmes. The most notable achievement in the last year has been the development and consolidation of the ESC eLearning platform (ESCeL) in which all programmes are both guideline- and case-based.

The ESC will continue to concentrate its education strategy on providing needs-driven, evidence-based learning driven by a detailed assessment of the needs of members and other stakeholders. The Committee will also continue to work on achieving much closer synergy with products from across the ESC constituent bodies. The Education Committee held three formal meetings during 2013; one during the ESC Congress in Amsterdam, Netherlands, the second in December, and the last in March before the Spring Summit.

**ESC Education Conference** In December 2013, the first ESC Education Conference was organised. National Directors of Training from the ESC member countries' National Cardiac Societies were invited to attend. A survey was performed ahead of the event, showing that 75% of National Societies endorse and implement the ESC Core Curriculum, and that 30% of them operate an educational platform with only 13% exploiting electronic content. With over 40 National Societies represented, there were many opportunities for participants to share feedback and operational constraints with peers and with members of the ESC Education Committee. This event is a valuable source of insight into the current and future needs of member countries, and helps to deliver educational programmes that are needs-driven and relevant to members. The ESC Education Conference is now an annual event and preparation is underway for the 2014 edition.

**The Guidelines Education Congress (GEC) Group** Following a proposal by the ESC President, a strategic task force has been created that brings together senior representatives of

the Practice Guidelines, Education, and Congress Committees to ensure that all ESC educational activities are consolidated. The first major output of this project is 'Guidelines into Practice Tracks', an initiative to help delegates plan their journey through the ESC Congress sessions and tutorials based on particular Clinical Practice Guidelines. This allows delegates to select the specific sessions and complementary materials that are relevant to specific Guidelines. There are presently nine tracks available, as follows:

- Acute Myocardial Infarction and Acute Coronary Syndromes
- Atrial Fibrillation
- Cardiac Resynchronisation Therapy
- Coronary Artery Disease
- CVD Prevention
- Diabetes
- Heart Failure
- Hypertension
- Valvular Heart Disease

Each track has been developed in cooperation with the ESC Association or Working Group most relevant to the content.

**Courses** Five Educational Training Programmes were delivered from the facilities at European Heart House, whilst the Basic Science Summer School brought together approximately 80 young researchers for a four-day course. Cardiology Update courses were run in Dubrovnik, Croatia and Rome, Italy and an ESC Member Course, 'Mon ESC au Maghreb', was delivered for the third year in a row to cardiology professionals in Algeria, Morocco, and Tunisia. This successful initiative will be repeated in 2014 and the pilot will be extended to another region. The concept brings together ESC Key Opinion Leaders and local experts to present some regionally relevant ESC Guidelines. Presentations are case-based and, where possible, discussions take place in the local language.

**ESC Webinar Series in General Cardiology** 2013 saw the delivery of 11 interactive, one-hour, live sessions. The programme runs from September to June each year, and each session focuses on one of the recently published Guidelines. Two key opinion leaders come together to deliver a case-based presentation, emphasising the most clinically relevant aspects of the ESC Practice Guidelines. The remote audience can interact with the experts by posing their questions via 'live chat', and have the opportunity to assess their knowledge by taking part in interactive polling. Both the live and recorded sessions are available free of charge from the Education pages of the ESC Website. ESC Webinar speakers are trained each year in order to improve their performance and the impact of their presentations. Driven by free access and improved streaming, participation in the ESC Webinar Series in General Cardiology increased four-fold with an average 150 participants for the live sessions and several thousand visits in the recording gallery.

**ESC eLearning platform** The ESCeL platform currently hosts 134 courses and over 1 000 self-assessment questions and all ESC Associations now have programmes or course catalogues on the platform for lifelong learning and training. Areas of study now cover EP, imaging, prevention,

PCI, heart failure and acute cardiac care. 2014 will see the launch of a programme in general cardiology, the result of extensive cooperation between the ESC Education committee, the MCQ Group, and all of the ESC Associations. A partnership was established with the ASSERT Institute at University College Cork, Ireland; experts in technology enhanced learning and proficiency based progression.

The General Cardiology programme will be launched at the ESC Congress 2014, with six core curriculum topics fully populated, and over 50 individual courses. For a short period, the programme will be fully open for all to review and examine prior to its formal launch in early 2015 when there will be around 200 courses hosted on the platform.

**ESC Clinical Case Gallery** The Education Committee has brought together representatives from the ESC Working Groups and Associations, particularly the EACVI, with an interest in developing clinical cases. The outcome has been the harmonisation of clinical case templates, the introduction of the step-wise approach for progression-based learning, and the development of a new Clinical Case Gallery.

In December 2013 during the EuroEcho-Imaging congress, ESC members were given the opportunity to take part in usability testing, thus validating the functionality, and look and feel of this important new tool. The ESC Clinical Case Gallery will be launched during ESC Congress 2014 with cases in imaging and general cardiology. It is expected that, each month, the Gallery will display several new cases in the different topics available.

**Knowledge Assessment and MCQs** The ESC MCQ Group facilitates the delivery of knowledge-based assessment in General Cardiology as a service to National Cardiac Societies. The outcome of this can then be leveraged by each National Cardiac Society for their respective requirements. In June 2013, the European General Cardiology examination was delivered to 280 candidates in six countries (Greece, Ireland, Netherlands, Portugal, Spain, UK). This collaborative exercise involved MCQ writers, question selectors, and standard setters from the five countries enrolled in the programme. The ESC partners with service provider Pearson Vue and distributes the examinations through its network of testing centres.

Throughout 2013, the Group worked on MCQ production and has also held two review meetings. The role of the MCQ Group has been broadened by its involvement in the development of Learning Objectives and robust MCQs. These will be used to validate knowledge retention and monitor progress made in the General Cardiology programme that will be launched on the ESC eLearning platform at the ESC Congress 2014.

**Core Curriculum** The third edition of the ESC Core Curriculum for General Cardiologists has been updated and was published in the European Heart Journal in August 2013. This is the basis of a framework which, along with the ESC Guidelines, underpins the further development of educational initiatives.

**Next steps** Priorities for the coming year include the full launch and deployment of the General Cardiology programme on ESCeL, as well as providing support to ESC Associations for the development of further training programmes and course catalogues. The cooperation between Guidelines, Education, and Congress Committees will continue and the Guidelines into Practice Tracks will evolve through improved coordination with other educational products. 2014 will see the launch of the new ESC Clinical Case Gallery, with a user-friendly interface and enhanced workflows. A link with the ESC Open Access Cases Journal will aim to ensure both availability of high quality clinical cases, and the exchange of typical and rare cases. This will offer more opportunities for citations to case authors. Finally, the ESC will initiate an overall needs assessment, engaging all its stakeholders and covering the main clinical areas of cardiology represented by the ESC Associations.

## EORP

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The EurObservational Research Programme (EORP) continued to expand in 2013 with growing interest from the ESC Associations and Working Groups, and National Cardiac Societies. During the year, four new registries were implemented. Parallel with this, the ESC has strengthened its relationship with relevant EU bodies and global institutions. One example of this is a project undertaken with the Organisation for Economic Development (OECD) that links pharmaco-economics with epidemiological data collected in the Heart Failure registry. Another example is a project undertaken with the European Medicines Agency (EMA) which exploits CICC registry data for pharmaco-vigilance evaluations. Other initiatives include the development of a European 'Registry of Registries' and a programme known as Cardiology Audit and Registration Data Standards (CARDS) which champions data standardisation and collection in registries.

Overall, since 2009, 19 registries have been launched at pilot or long term phases covering a wide number of cardiology topics. Around 70 000 patients have been recruited so far, with 24 000 patients in 2013 alone. Registries are either in their recruitment phase or are subject to intense statistical analyses and sub-analyses in view of releasing publications to the medical and scientific communities.

- Seven registries are subject to statistical analyses and publications:
    - Registry of Pregnancy and Cardiac disease (ROPAC); Phase I; 1 754 patients across 46 countries worldwide
    - Atrial Fibrillation Ablation (AFA); Pilot phase; 1 420 patients across 10 ESC countries
    - Heart Failure (HF); Pilot phase; 5 118 patients across 12 ESC and 7 non-ESC countries
    - Atrial Fibrillation General (AFGen); Pilot phase; 3 170 patients across 9 ESC countries
    - Transcatheter Valve Treatment (TCVT); Pilot phase; 5 984 patients across 12 ESC countries
    - Cardiomyopathy (CMY); Pilot phase; 1 146 patients across 12 ESC countries
    - European Survey of Cardiovascular Disease Prevention and Diabetes (EuroAspire IV – Hospital arm)
  - Seven registries are in their recruitment and/or follow up data collection phase:
    - Registry of Pregnancy and Cardiac disease (ROPAC); Phase II
    - PeriPartum CardioMyopathy (PPCM)
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- AFA; Long-term phase; 2 497 patients across 26 ESC and 2 non-ESC countries
- HF LT; Long-term phase
- Atrial Fibrillation General (AFGen); Long-term phase
- European Lead Extraction ConTRolled (ELECTRa)
- Chronic Ischemic Cardio Vascular (CICD); Pilot phase
- EuroAspire IV; Primary care arm
- Five registries are currently in their set-up phase:
  - TCVT; Long-term phase
  - CMY; Long-term phase
  - STEMI Acute Coronary Syndrome (ACS)
  - Cardiac Oncology Toxicity (COT)
  - Thoracoscopic epicardial/hybride Atrial Fibrillation Ablation Registry (TehAFAR)

## ESC Clinical Practice Guidelines

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ESC Clinical Practice Guidelines summarise and evaluate the available evidence on particular cardiovascular issues. They are used by health professionals to help determine the optimum management strategy for individual patients with a given condition, and take account of the potential outcome balanced by the risk-to-benefit ratio of particular diagnostic or therapeutic treatments. While they represent the official ESC view on specific topics and clearly reflect current opinion at the time of writing, ESC Guidelines are regularly reviewed and updated in line with new knowledge and experience.

The ESC has been issuing Clinical Practice Guidelines since 1994 and has since gained an enviable reputation as a trusted provider around the world. The ESC's Global Scientific Activities programme is mainly centred around Clinical Practice Guidelines and has become highly popular in the Middle East, South America, and Asia Pacific regions. Coordination of Guideline development is undertaken by the Committee for Practice Guidelines (CPG) which meets three to four times a year and is responsible for ensuring quality and accuracy. In recent years, there has been an initiative to bring wider expertise into the Guidelines process by involving the ESC sub-specialties and other medical specialties, as well as National Cardiac Societies. The CPG has recently initiated a thorough review of the Guidelines development process, and has appointed a team drawn from the Committee itself and from the wider ESC to examine the current process and recommend a new strategy. 2013 has seen excellent progress with highlights that include:

- Published four new Clinical Practice Guidelines covering Diabetes, Pre-diabetes and Cardiovascular Diseases; Arterial Hypertension; Stable Coronary Arterial Disease; Indications on Cardiac Pacing, and Cardiac Resynchronisation Therapy
  - Launched the ESC Pocket Guidelines Application via the Apple and Google Play Stores:
    - 14 titles are available with over 50 interactive tools
    - This application is free of charge, and has seen 20 000 downloads within six months of its launch
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- Issued all new Clinical Practice Guidelines in a variety of formats including the traditional printed versions and abridged pocket versions as well as Essential Messages, slide-sets, and Summary Cards
- Announced Guidelines covering Non-Cardiac Surgery; Pulmonary Embolism; Myocardial Revascularisation; Aortic Diseases; and Hypertrophic Cardiomyopathy that will be launched at the 2014 Barcelona Congress:
  - Planning includes a main overview session, dedicated sessions on each topic, Meet the Task Force sessions, and, new for 2014, Guidelines in Daily Practice sessions
- Helped establish Task Forces in a number of areas including Ventricular Arrhythmias and Sudden Cardiac Death; Pulmonary Hypertension; Acute Coronary Syndromes NSTEMI; Pericardial Diseases; and Endocarditis to be published in 2015
- Established a new review process to give National Cardiac Societies the opportunity to nominate one reviewer per Guideline and to recognise this contribution by acknowledgement in the final document
- Continued to encourage National Cardiac Societies to translate and/or publish the ESC Guidelines in their national or regional journals
- Worked closely with National Guidelines Coordinators to implement ESC Clinical Practice Guidelines:
  - Over 50 joint ESC Guideline Sessions were organised at National Cardiac Society congresses
- Developed new features on the ESC website to promote Guideline-related educational tools, translated versions, and National Society Guidelines information and National Guidelines Coordinators' contact details
- Participated in the development of a 'Guidelines into Practice' fast-track to facilitate easy access to all congress webcasts and presentations on Guideline topics
- Continued to review the process to oversee possible discrepancies between the ESC Clinical Practice Guidelines and other ESC documents written by Associations, Working Groups, and Councils

## Publications

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The ESC Journal Family now comprises nine titles and covers the entire field of cardiovascular medicine, from basic science through to acute cardiovascular care, intervention, and heart failure. Their impact factors range from 2.394 to 14.1 with the European Heart Journal, Cardiovascular Research, and the European Journal of Heart Failure as the leading products. In addition, the European Journal of Cardio-Thoracic Surgery has recently joined the ESC Family, and a new journal is planned in the coming year: EHJ- Cardiovascular Pharmacotherapy. During 2013, around 700 manuscripts were transferred from the European Heart Journal (EHJ) to the sub-specialty journals because of greater suitability. It is important to note that these papers are more often cited than those directly submitted to the sub-specialty journals.

The European Heart Journal (EHJ) continues to break new ground:

- Significant increase in the number and quality of submissions
  - Increased institutional subscriptions via consortia
-

- Weekly issues introduced in 2013
- All time high impact factor (IF) of 14.1
- Extensive readership with 2.7 million downloads
- Successful educational videos with 75 000 views

The Publications Committee has coordinated a high level of cooperation between the editorial teams of all members of the ESC Journal family:

- Around 700 manuscripts were transferred from the EHJ to sub-specialty journals
- Sub-specialty journals achieved excellent IF ratings between 2.394 - 5.94
- The European Journal of Cardio-Thoracic Surgery has joined the ESC Journal family
- A new journal has been established and will appear in 2014: EHJ-Cardiovascular Pharmacology

**ESC Books and Textbooks** Thanks to a great deal of work by cardiovascular-related thought leaders globally, the following titles were approved by the ESC Board and ESC Publications Committee for publication and distribution in 2014:

- New titles
  - ESC Textbook of Preventive Cardiology
  - EACVI Pocket Guide for Echocardiography
  - EHRA Cases in Cardiac Pacing
- Updated titles
  - ESC Textbook of Cardiovascular Imaging (2nd edition)
  - ESC Textbook of Intensive & Acute Cardiovascular Care (2nd edition)



## ■ ADVOCACY AND REPRESENTATION

### European Affairs Activities

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**Prevention** EuroHeart II, a three-year project co-funded by the European Union, ended in March 2014. The ESC, the European Heart Network (EHN), and 29 other health-related and academic organisations worked closely together on the project. Its focus was CVD prevention, and its outcomes are likely to have far-reaching implications for the health of Europe's population and the shape of national healthcare policies and systems. EuroHeart II followed on from EuroHeart I which studied areas of policy for public health interventions aimed at reducing the number of avoidable deaths from CVD. The main outcomes of EuroHeart II include:

- Analysing statistical and scientific data to shape CVD prevention policies
- Assessing the current situation in all EU member countries
- Encouraging CVD non-governmental organisations (NGOs) to play a larger role in policies for health-related nutrition and physical activity
- Reinforcing the importance of CVD patient communities in decision-making
- Matching CVD prevention guidelines with health outcomes

**Research** The ESC is increasingly active in its advocacy for the improvement in standards of CV research in Europe through the identification, prioritisation, and promotion of research needs. Recent activities include:

- ESC publication on personalised medicine – Following the recent 'Personalisation of Cardiovascular Medicine: Opportunities and Challenges' workshop organised by the ESC and CRT, a strategy paper was published in the European Heart Journal. The paper was also shared with the European Commission to influence research funding and, as a result, a call on personalised medicine was included in Horizon 2020, the Framework Programme for research and innovation that will be running from 2014 to 2020
- CardioScape – A survey of the European cardiovascular research landscape, CardioScape is an 18-month project run by the ESC and funded by the European Union FP7 research programme. Its aim is to outline the current CVD research and innovation landscape across Europe to establish the extent of duplication across national research programmes and to identify the gaps



that reduce opportunities for innovation. The outcome of the project will be instrumental in guiding the future of CVD research in Europe, and in particular it will encourage synergies and cooperation. It will also reduce duplication of efforts and will identify gaps and priorities that need attention from the funding organisations.

**Regulatory Affairs** The ESC has a strong focus on open dialogue and a frank exchange of information with European authorities on regulatory aspects of cardiovascular medicine, whether related to the availability and safety of drugs, devices, or diagnostic tools. The European Affairs Committee is engaged in providing evidence-based recommendations to European policy makers to help guide their choices and inform their decisions.

- **Drugs** – The ESC shares its expertise on a regular basis with the European Medicines Agency by responding to consultations and by interacting with members of the Cardiovascular Working Party, notably at regulatory workshops whose topics are jointly chosen. In addition, the ESC is a member of the Healthcare Professionals Working Party.
- **Medical devices** – Cardiology is one of the medical professions most in contact with medical devices. In 2013, the ESC has been very active in promoting its position on the revision of the medical devices directives proposed by the European Parliament, through meetings with Members of the European Parliament and permanent representations in Brussels, as well as presentations at public hearings in the European Parliament. The ESC is regularly invited to share expertise with European Commission committees, such as the Medical Devices Expert Group (MDEG), its Working Group on Clinical Investigation and Evaluation (CIE), and the Vigilance Working Group. A Task Force on Coronary Stents was set up with experts from the European Association of Percutaneous Cardiovascular Interventions (EAPCI) to perform a systematic review of all CE-marked coronary stents to help the CIE revise their guidance documents.

**Cardiovascular Data in Europe** To ensure effective service planning and quality of care for patients across the EU, the ESC is striving for a coordinated and comprehensive CVD data collection in Europe. Such an initiative would provide an important and effective tool for patient-centred healthcare in the future. The ESC Task Force on Standardisation met in February 2014 to agree on methodology, funding, and timelines, with the objective of agreeing on common definitions that began with the CARDS (Cardiology Audit and Registration Data Standards) project. In addition, the ESC is cooperating with the European Union PARENT Joint Action to set-up a ‘registry of registries’ of CVD data. Finally, the ESC has joined forces with a number of international organisations to deliver various projects. For example, the EurObservational Research Programme (EORP) has now been linked to the Organisation for Economic Cooperation and Development (OECD) in a pilot project on the creation of a model likely to predict mortality and hospitalisation related to heart failure.

## Alliances and Groups

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**Cardiopolicy Group** Created in 2013, this pilot Group was formed to increase the influence of the cardiology community on both national and Europe-wide policies. Seven National Societies are supporting this initiative in its pilot phase; Denmark, Lithuania, Netherlands, Poland, Portugal, Spain, and UK. Cardiopolicy is designed to involve National Cardiac Societies more in the ESC advocacy agenda while, at the same time, allowing the ESC to provide support for national policy matters. Such cooperation is expected to address the gap between EU policies and national realities.

**Alliance for Biomedical Research in Europe (Biomed Alliance)** The ESC is one of the founding members of the Alliance for Biomedical Research in Europe. This body was created in 2010 to promote the best interests and values of research across all medical disciplines in Europe, especially in those general areas in which common interest is identified. It speaks as the voice of all its members in seeking to facilitate and improve biomedical research in Europe. Through its actions, the Alliance intends to promote excellence in European biomedical research and thereby to improve the health and wellbeing of all citizens. In particular, the Alliance was successful in promoting the creation at EU level of a scientific-led strategic body that can steer research and innovation across the entire health spectrum. Horizon 2020, the Framework Programme for research and innovation that will be running from 2014 to 2020, now includes provisions for the creation of a Scientific Panel for Health. Professor Karin Sipido, Professor in Cardiology at the Leuven University Hospital, Belgium, Member of the ESC European Affairs Committee and the editor-in-chief of the Cardiovascular Research Journal, is currently the President of the Biomed Alliance.

**European Chronic Diseases Alliance (ECDA)** The ESC is a founding member of ECDA, an unprecedented alliance of 11 not-for-profit European organisations representing specialty areas including CVD and diseases of the kidney, liver, and lungs, as well as hypertension, diabetes, cancer, and allergies. During 2013, ECDA has actively contributed to the EU Reflection Process on chronic diseases. Alliance members were also very active with the launch of the 'Economics of Chronic Diseases' project, led by the UK Health Forum, which received a grant of approximately €800K as part of the EU Health Programme. The project's main objective is to help EU Member States develop, select, and implement more cost-effective policies. This will drive improvements in chronic disease prevention and have a positive impact on those populations with the highest rates of premature deaths from chronic diseases and reduce health inequalities.

**European Patient Safety Foundation (EUPSF)** The ESC became an affiliate of the EUPSF in 2014, supporting the multi-disciplinary organisation's aim to improve patient safety in Europe and worldwide. Professor Frans Van de Werf, Chair of the ESC European Affairs Committee, will represent the ESC at EUPSF.

**MEP Heart Group** The Members of the European Parliament (MEP) Heart Group is a discussion forum aimed at promoting measures that will help reduce the burden of CVD in the European Union and raise CVD as a priority on the EU political agenda. The secretariat of the MEP Heart Group is run jointly by the ESC and the European Heart Network. The MEP Heart Group is currently one

of the largest health discussion forums within the European Parliament and is supported by 66 MEPs from 23 EU Member States. Over the 2013 fiscal year, the Group's highlight activities included:

- **The 'LOVE YOUR HEART'** Valentine's Day campaign, initiated by the MEP Heart Group, had the dual objective of promoting heart health amongst the EU population and of ensuring that CVD, as the leading cause of death in Europe, is given the appropriate attention on the EU policy agenda. The campaign was supported by a wide community encompassing Members of the European Parliament, advocacy groups, and individuals. It is estimated that over 420 000 people were reached by the campaign on Valentine's Day in 2014
- **The 'CARDIOVASCULAR HEALTH WEEK: MIND YOUR HEART'** campaign ran for four days in November 2013 as part of Cardiovascular Health Week, a week of awareness-raising activities around the theme 'Mind Your Heart - for a Heart Healthy Europe'. The initiative aimed to inform EU policy makers and other stakeholders of the scale of cardiovascular diseases. In anticipation of the European Parliament elections in 2014, MEPs were encouraged to include the fight against CVD as a priority in their political manifestos. The EU Commissioner for Health, Tonio Borg, provided valuable support for the campaign and has helped move the fight against CVD higher up the EU political agenda

**Cardiovascular Round Table** The Cardiovascular Round Table (CRT) is a strategic forum to facilitate high-level and transparent dialogue between the ESC leadership and the cardiovascular industry, represented by a group of 19 pharmaceutical and medical equipment manufacturers. Three companies joined the CRT in 2013; Biotronik, Daiichi-Sankyo, and Merck. Highlights of the year's activities include:

- **Regulatory activities** – The CRT continued to progress the scientific dialogue established with regulatory authorities on the requirements for registration in specific therapeutic areas. In October 2013, an 'Obesity and Cardiovascular Impact' workshop was held to inform the discussion points in the EMA concept paper on the need for revision of guidelines for medical products used in weight control
- **Research and Development activities** – The CRT organises regular R&D workshops to discuss alternative ways to conduct randomised clinical trials, to review the methodology adopted, and to identify how best to encourage innovation. In March 2014, a workshop was held to consider new ideas for the conduct of credible and realistic clinical trials that would improve management of chronic cardiovascular diseases
- **Innovation** – The CRT is concerned that the growing burden of CVD is not being properly addressed with technology innovation, especially in the area of devices. It cites limited funding for R&D, increasing regulations, cost-containment, and reimbursement issues. To raise awareness on the urgent need for all stakeholders to discuss these challenges, the CRT is preparing a white paper on barriers to innovation in the technology sector
- **Comparative Effectiveness Research (CER)** – In September 2013, a workshop titled 'Comparative effectiveness research in cardiovascular disease; challenges and opportunities for cardiac imaging' was held. The aims were to provide an overview of CER in cardiology, to review different study designs, to develop a framework for CER in cardiology, and to identify priority topics for CER in cardiology

- **Ongoing projects** – The CRT is progressing a series of further initiatives, including:
  - Addressing issues and concerns in the field of technology innovation
  - Addressing issues faced by innovation in drug development
  - Focus on improving access to clinically and economically proven therapies
- **List of CRT member companies:**

Abbott Vascular

Amgen

AstraZeneca

Bayer Healthcare

Biotronik

Boehringer-Ingelheim

Bristol-Myers Squibb

Daiichi-Sankyo

F. Hoffmann-La Roche

GE Healthcare

GlaxoSmithKline

Medtronic

MSD

Novartis Pharma

Pfizer

Sanofi

Servier

Siemens

St Jude Medical

## National Cardiac Societies

There has been a great deal of activity during 2013 to extend the close working relationships between the ESC and the National Cardiac Societies of its 56 member countries. The need to address common scientific and economic challenges was high on the agenda at formal meetings between the ESC and the leadership of 45 National Cardiac Societies during the year. National Cardiac Societies were encouraged to take full advantage of the various products, resources, and tools developed by the ESC that support cardiologists in their daily practice. This point was reinforced at joint scientific sessions organised during the annual congresses of 30 National Cardiac Societies, with emphasis on adopting and implementing ESC Guidelines. The ESC also welcomed members on its stand at the congresses of 16 National Cardiac Societies. To consider the impact of future changes in the world of cardiology, the ESC Spring Summit 2014 was an excellent opportunity for the ESC Board and the National Cardiac Societies to debate 'Innovation in Cardiovascular Medicine'. Education and the role of the ESC were specific topics, and the audience was also invited to reflect on what the ESC means to its constituent bodies. In addition:

- Kyrgyzstan officially joined the ESC member countries at the General Assembly in Amsterdam, Netherlands, bringing the total of National Cardiac Societies to 56
- The network of national young cardiologists groups was extended to 28, while younger members involved in the ESC Cardiologists of Tomorrow initiative increased their participation in ESC activities
- 488 young cardiologists from National Cardiac Societies benefited from free registration at ESC Congress 2013



## Fellows of the ESC

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The prestigious community of Fellows was celebrated at the Inaugural Session of ESC Congress 2013 in Amsterdam, Netherlands. The ESC is proud to have extended membership of this prestigious community to individuals from around the world and formally recognised and welcomed 303 new Fellows and 5 new Nurse Fellows.

## ESC International Affairs

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By creating a new International Affairs department in September 2013, the ESC Board has demonstrated its commitment to building long-term, valuable relationships with global partners, affiliated, and sister societies. The new department is responsible for all aspects of those relationships, in particular the dissemination of the latest scientific research and the promotion of ESC education tools and ESC Clinical Practice Guidelines.

- Collaboration continued with ESC Sister Societies in the form of joint sessions, leadership meetings, and complimentary exhibition space at a number of international congresses. In particular, the ESC enjoys excellent working relationships with the following societies:
  - American Heart Association
  - American College of Cardiology
  - World Heart Federation
  - Asian Pacific Society of Cardiology

The purpose of these partnerships is to promote continued knowledge-sharing and to foster advancement of our common interests in cardiology. A new two year agreement was signed with the Inter-American Society of Cardiology in 2013

- Collaboration with the 38 ESC Affiliated Cardiac Societies, in particular, is an essential part of the ESC strategy to share knowledge and to make real progress in the fight against CVD. During 2013, the Oman Heart Association and the Sudan Heart Society became the newest members of the ESC family of Affiliates. ESC Affiliated Societies and Sister Societies made a significant contribution to the 2013 ESC Congress:
    - Members of Affiliated Societies represented 28% of total participants
    - Members of Sister and Affiliated Societies submitted over 30% of the total number of abstracts
    - 16 International Joint sessions were held:
      - 6 sessions in collaboration with ESC Sister Societies
      - 10 sessions in collaboration with Affiliated Cardiac Societies
    - Dedicated Affiliated Cardiac Society corner at the ESC Congress
    - Numerous meetings between Joint ESC and Affiliated Cardiac Societies were organised to consolidate collaboration initiatives and discuss future projects
-

ESC Global Scientific Activities (GSA) is a programme of international ESC educational courses built around a global network of international partnerships. Education is essential for improving and harmonising standards of diagnosis and treatment of cardiovascular disease. The ESC's GSA mission is to meet non-European demand for ESC science and knowledge, to establish closer relationships with international organisations, and to extend the ESC mission beyond European borders.

To meet this challenge the ESC GSA Committee maintains partnerships with countries outside Europe who already organise significant national or regional congresses. International ESC educational courses are delivered by a senior ESC Faculty and supported by international opinion leaders. The GSA Committee organised events in Saudi Arabia, Thailand, Brazil, Argentina, China, Mexico, and India during 2013, and the course content typically included:

- Highlights from ESC Congresses and scientific meetings
- New ESC Clinical Practice Guidelines
- Regionally relevant clinical case studies



## Councils

There are four Councils within the ESC structure. Three of them consider aspects of cardiovascular medicine from the perspective of the science, practice, and primary care elements of the lifecycle, while the fourth is dedicated to the role played by the nursing and allied professionals across the complete lifecycle. Council activities are orientated around diagnosis, treatment, and prevention, and they each provide advice and guidance on their areas of expertise to other parts of the ESC and external bodies.

### Council on Cardiovascular Primary Care

**Chair:** Professor Arno Hoes, FESC

**Aim:** To focus on prevention and patients.



#### 2013 highlights:

- Participated in writing eight guidelines
- Participated in reviewing six guidelines
- Co-organised the one-day programme on general cardiology for physicians, nurses, and technicians at the ESC Congress 2013
- Co-organised joint symposia at ESC Congress 2013, Heart Failure 2013, and EuroPREvent 2013
- Participated in Heart Failure Association patient care summit in 2013
- Participated in the [www.heartfailurematters.org](http://www.heartfailurematters.org) website

### **Council on Basic Cardiovascular Science**

**Chair:** Professor Barbara Casadei, FESC, CBCS Chair 2012-2014

**Aim:** To enhance the importance of basic science to clinical cardiology.



#### **2013 highlights:**

- Awarded two Basic Research Fellowships
- Presented four Outstanding Achievement Awards to basic scientists in the early stage of their career
- Awarded 58 travel grants to young basic scientists for the ESC Congress 2012
- Distributed seven First Contact Initiative Grants to young scientists to establish contact with hosting institutions aimed at obtaining a fellowship or research affiliate position
- Held an annual Poster Reception at the ESC Congress
- Proposed 34 sessions for the ESC Congress 2014 as a result of its 'pre-scope' process
- Organised the successful Basic Science Summer School 2013 with an international faculty of 22 delegates from 20 countries
- Established 'The Scientists of Tomorrow'; a new group of young basic scientists and clinical researchers to work closely with the Council and contribute to future scientific, educational, and advocacy activities
- Initiated preparation work for the Frontiers in Cardiovascular Biology scientific meeting to be held in Barcelona, Spain during July 2014

### **Council on Cardiovascular Nursing and Allied Professions**

**Chair:** Doctor Donna Fitzsimons, NFESC, CCNAP Chair 2012-2014

**Aim:** To promote excellence in Cardiovascular Nursing and Allied Professions through practice, education, and research.



#### **2013 highlights:**

- Collaborated with EHRA and HFA to use CCNAP nursing core curriculum for specialty training
- Collaborated with EHRA to work on common certification programme
- Introduced new project to encourage nurses to use guidelines in daily practice including professional role-plays
- Produced two position papers and published its survey on cardiovascular nursing education in Europe
- Distributed 10 travel grants for the ESC Congress to nurses and allied professionals
- Awarded two post-doctoral mentorships

- Awarded one Nursing/Allied Professional Investigator Award
- Grew membership to over 1 450 members from 69 countries
- European Journal of Cardiovascular Nursing achieved an Impact Factor of 2.042 and rated sixth of 104 relevant journals
- Participated in the writing of three ESC Guidelines
- Participated in the review of four ESC Guidelines
- Continued to prepare nursing sessions for the ESC Congress and, in collaboration with two other Councils, organised the one-day programme on general cardiology for physicians, nurses, and technicians
- Continued collaboration with other nursing communities in Europe and the USA and in particular via the participation of CCNAP Chair in AHA Leadership Committee of the Cardiovascular and Stroke Nursing (CVSN) Council

### Council for Cardiology Practice

**Chair:** Associate Professor Gonzalo Baron Esquivias, FESC, CCP Chair 2012-2014

**Aim:** To bring together practicing cardiologists with common interest in the field of cardiovascular medicine, to promote education and training of cardiologists, and to develop standards for training, continuous education, and professional conduct.



### 2013 highlights:

- Grew number of E-journal subscribers to more than 53 000
- Increased subscriptions to the Council's e-newsletter to over 2 500
- Participated in Europrevent 2013 and at the annual meeting of the Italian Cardiac Society
- Performed a survey to analyse the knowledge and application of the ESC Clinical Practice Guidelines on Syncope and analyse the behaviour of cardiologists on this topic:
  - Results will be available during 2014 to provide a snapshot of private practice in Europe
- Participated in the writing of 11 Guidelines and in the review of 9 Guidelines
- Participated in the ESC Congress 2013:
  - Symposia on cardiopulmonary exercise testing
  - Take-home Messages session
  - Co-organised the one-day programme on general cardiology for physicians, nurses, and technicians



## Associations

Associations are registered branches within the ESC legal structure. Each has its own leadership team elected by members which defines the overall strategy, with implementation and day-to-day operations the responsibility of dedicated ESC support staff. The six ESC Associations focus on major areas of cardiology that are strategically and clinically important, and their activities cover all aspects of the sub-specialties including fundamental science, research and development, diagnosis, treatment, management, and prevention. Associations are responsible for communications and education within their domain of expertise, and they also hold their own congress and publish journals.

### **Acute Cardiovascular Care Association (ACCA)**

**Presidents:** Professor Peter Clemmensen, FESC, ACCA President 2012-2013  
Assoc Professor Hector Bueno, FESC, acting ACCA President 2013-2014

**Mission:** To improve the quality of care and outcomes of patients with acute cardiovascular diseases.



### **2013 highlights:**

- General:
  - Widened ACCA's scope to encompass the complete process of acute cardiovascular care, from cardiac event until patient stabilisation
  - Increased multi-disciplinary membership by 62% since September 2012 with 4 000 members, 24% of whom are under 35
  - Created the ACCA Young Group to help spread ACCA's mission to the younger generation, to ensure collaboration with existing young groups, and to promote excellence
- Education:
  - Developed an awareness campaign on unmet needs
  - Organised webinars on unmet needs, Acute Heart Failure, STEMI, and Cardiac Arrest
  - Launched the ACCA Clinical Decision Making Toolkit, a unique pocket manual for best bedside decision-making
    - 20 000 printed copies produced and distributed
    - 11 500 downloads of the online PDF version
    - 22 000 dedicated toolkit web page views
  - Developed a complete educational programme with a portfolio of 79 innovative courses and MCQs to populate the ESC eLearning platform (ACCA programme to be launched in October 2014)
  - Organised a certification exam at the Acute Cardiac Care Congress in Madrid, Spain with 55 participants
- Scientific projects:
  - Participated in the EORP ACS pilot in collaboration with EAPCI
  - Created two new study groups;
- Acute Heart Failure

- Pre-hospital Care
  - Contributed to ESC Clinical Practice Guidelines
  - Prepared position papers
- Publications:
  - Achieved indexing of EHJ-ACVC Journal in PUBMED; four issues published to date
  - Commenced revision process of the second edition of the IACC Textbook
- Congress and Events:
  - Organised annual Acute Cardiac Care congress in Madrid, Spain with over 1 000 attendees and 550 abstract submissions
  - Hosted the ACCA Summit on Unmet Needs in Acute Cardiovascular Care at the European Heart House with 70 participants representing 35 countries

### European Association for Cardiovascular Prevention and Rehabilitation (EACPR)

**President:** Associate Professor Stephan Gielen, FESC, EACPR President 2012-2014

**Mission:** To promote excellence in research, practice, education, and policy in cardiovascular prevention and rehabilitation in Europe.



### 2013 highlights:

- General:
  - Increased membership by 17% to 4 036 in 2013, representing over 100 countries
- Publications:
  - Journal
    - Achieved an impact factor of 3.903 for the European Journal of Preventive Cardiology in 2012
    - Increased journal frequency to 12 issues per year, since January 2014
  - Prepared and published two position papers:
    - Population-level changes to promote cardiovascular health
    - Physical activity in adolescents and adults with congenital heart defects; individualized exercise prescription (in collaboration with the ESC Working Group of Grown Up Congenital Heart Disease)
  - Prepared a series of publications in collaboration with the American Medical Society for Sports Medicine (AMSSM), the FIFA Medical Assessment and Research Centre (F-MARC), and the Paediatric & Congenital Electrophysiology Society (PACES):
    - Abnormal electrocardiographic findings in athletes: recognising changes suggestive of primary electrical disease
    - Abnormal electrocardiographic findings in athletes: recognising changes suggestive of cardiomyopathy
    - Electrocardiographic interpretation in athletes: the 'Seattle Criteria'
    - Normal electrocardiographic findings: recognising physiological adaptations in athletes

- Meetings and Congresses:
  - Organised EuroPREvent 2013 in Rome, Italy with over 1 700 participants and 54 scientific sessions, including joint sessions
  - Organised EACPR Winter Meeting in Paris, France and gathered Board, Section, and Committee members to work on the Association's scientific and educational initiatives
  - Launched the EACPR Strategic Task Force in September 2013 to assess the medium- and long-term perspectives for the Association, its business perspective, its naming, and its strategic position within ESC and the global landscape
- Education:
  - Ran training courses on cardiac rehabilitation, research methods, and cardiopulmonary exercise testing in cardiology
  - Ran training course on Exercise Training and Long Term Management in CHF in collaboration with HFA
  - Organised a Master Class on Diagnostics Imaging in Sports Cardiology
  - Produced eight courses for the EACPR knowledge module on the ESC e-learning platform
- European Affairs:
  - Contributed to ESC Position Paper on the Tobacco Products Directive
  - Participated in the European Parliament workshop on e-cigarettes
- International relations:
  - Organised Global Forums on CVD Prevention in Clinical Practice in Rome, Italy and Amsterdam, Netherlands attended by over 120 participants, representing more than 20 professional societies, including the World Health Organisation (WHO) and World Heart Federation (WHF)
  - Launched the 'Country of the Month' initiative in October 2013, presenting achievements of National CVD Prevention Coordinators; eight country reports published to date, with interest from ESC-affiliated countries including Brazil

**European Association of Cardiovascular Imaging (EACVI)**

**President:** Professor Patrizio Lancellotti, FESC, EACVI President 2012-2014

**Mission:** To promote excellence in clinical diagnosis, research, technical development, and education in cardiovascular imaging in Europe.



EACVI is a merger of the former European Association of Echocardiography, the ESC Working Group on Nuclear Cardiology & Cardiac Computed Tomography, and the ESC Working Group on Cardiovascular Magnetic Resonance. A new structure has been put in place by the Board to integrate these separate entities into a cohesive Association, and several committees have started developing joint projects in line with a new strategy. With a sharp focus on providing a more patient-centric approach and facilitating better information sharing and exchange, the key points of the new strategy include:

- To promote the vital role of cardiovascular imaging to the international community of experts
- To raise standards and manage excellence through educational events and certification
- To evolve towards a multi-imaging approach
- To maintain a high level of innovation in the educational offering
- To support and expand our cadre of future leaders through the Club 35 network
- To represent the cardiovascular imaging community on the international stage
- To prepare and publish strategic position papers
- To create a strong research database through top quality studies

### 2013 highlights:

- Education:
  - Developed two new Echo boxes on Valvular and Contrast
  - Prepared and launched pilot of the new Case Portal
  - Organised 10 live webinars including a studio live event welcoming six faculties
    - Webinars recordings now available in seven languages
  - Updated the EACVI Core syllabus including the new CMR syllabus for certification
  - Launched the first EACVI LinkedIn group for the young community
  - Created a network of Club 35 Ambassadors in more than 40 countries
  - Commenced work on the EACVI Highlight Book in collaboration with the National Societies
  - Provided slides and webcasts from congresses and courses
  - Organised teaching courses in Romania, Bulgaria, Croatia, Emirates, and Italy in collaboration with the European Working Groups on Echocardiography
- Clinical trials:
  - Launched the NORRE study collecting data on normal patients from accredited laboratories
- Congress and meetings:
  - EuroEcho-Imaging 2013 in Istanbul, Turkey recorded over 3 300 participants from 70+ countries and over 150 sessions, and celebrated the EACVI ten-year anniversary
  - Second World Echocardiography Summit co organised with the ASE in Delhi, India, welcoming over 800 delegates
  - EuroCMR 2013 welcomed over 420 participants in Florence, Italy
  - ICNC 2013 welcomed over 680 participants in Berlin, Germany
- Publications:
  - Achieved Impact Factor of 2.94 with European Heart Journal – Cardiovascular Imaging
  - Started work on eight recommendation papers
  - Published one paper jointly with the American Society of Echocardiography (ASE)
  - Published second issue of the compendium and created four new abridged recommendations

## **European Association of Percutaneous Cardiovascular Interventions (EAPCI)**

**President:** Doctor Jean Fajadet, FESC, EAPCI President 2011-2014

**Mission:** To reduce the burden of cardiovascular disease in Europe through percutaneous cardiovascular interventions.



### **2013 highlights:**

- General:
  - Increased membership by 26% to 5 640 representing 125 countries
    - Attracted 1 170 new members in 2013
  - Appointed two new EAPCI Committees; Women, and Nurses and Technicians
  - Made significant contribution to ESC Clinical Practice Guidelines
  - Expanded the ACT NOW-SAVE A LIFE public campaign
- Education:
  - Maintained a strong focus on educational initiatives
    - Organised a European Interventional Fellows course in Krakow, Poland
    - Expanded and updated websites with new educational content
    - Provided five research and training grants
    - Adopted PCR London Valve Course and Resistant Hypertension Course (RHC) as official EAPCI Courses
    - Supported the ESC eLearning platform in interventional cardiology leading to a certificate of excellence in training in interventional cardiology (February 2013)
    - Contributed to PCR Seminars along with EuroPCR
- Congress and meetings:
  - Participated in the organisation of a successful EuroPCR course (EAPCI annual congress) with 12 017 participants
    - 963 abstracts submissions
    - 560 sessions
    - 70 hours of live cases transmissions from 16 live centres
    - 44 National Societies and Working Groups
    - 1 440 experts on stage including Case and Abstracts presenters and faculty members
- Trials and registries:
  - Contributed to Transcatheter Valve Intervention pilot sentinel registry under the EURObservational Research Programme
  - Expanded geographic coverage and data collection on reperfusion therapy for ST elevation acute myocardial infarction within the scope of Stent for Life
- Publications:
  - Participated in the publication of EuroIntervention Journal monthly and the PCR-EAPCI Percutaneous Interventional Cardiovascular Medicine Textbook



**European Heart Rhythm Association (EHRA)****Presidents:** Professor Angelo Auricchio, FESC, EHRA President 2011-2013

Professor Karl-Heinz Kuck, FESC, EHRA President 2013-2015

**Mission:** To improve the quality of life of the European population by reducing the impact of cardiac arrhythmias and reduce sudden cardiac death.**2013 highlights:**

- General:
  - Increased membership to 1 704
  - Created three new committees:
    - Innovation: to help physicians move from an idea to a product
    - Women in EP: develop strategies to overcome barriers
    - Young EP: understand needs, potential, and expectations of young EP's
  - Launched EHRA patient website to provide information resource for atrial fibrillation
- Congress and meetings:
  - Organised 2013 EHRA EUROPACE Congress in Athens in collaboration with ESC Working Groups on e-Cardiology and Cardiac Cellular Electrophysiology:
    - Over 5 000 delegates attended from 103 countries
    - 119 scientific sessions held; 87 pre-arranged and 32 abstract-based
    - 1 624 abstracts from 68 countries submitted with 1 018 accepted
- Education:
  - 692 members attended professional training courses, including Invasive Cardiac EP and Cardiac Pacing, ICD, and Cardiac Resynchronisation
  - Organised for the first time an EHRA CP course in Russian
  - 257 members and allied professionals took EHRA examinations including, for the first time, the AP exam using iPad tablets in the Netherlands
  - 23 training fellowship programmes awarded including three Fellows from sister societies
  - Launched the EHRA section of the ESC eLearning platform with 16 CP modules and 29 EP modules
  - Held eight webinars and measured a dramatic increase in traffic to the EHRA website
- Publications:
  - Published a number of scientific papers in EP EUROPACE Journal, consensus statements, and reports on relevant topics including:
    - The use of imaging for electrophysiological and devices procedures: a report from the first EHRA policy conference
    - Pharmacological and non-pharmacological therapy for arrhythmias in the paediatric population (jointly with AEPC-Arrhythmia Working Group)
    - Personalised management of atrial fibrillation
    - Diagnosis and Management of Patients with Inherited Primary Arrhythmia Syndromes (joint HRS/EHRA/APHRS)
    - EHRA Practical Guide on the use of NOACs in patients with non-valvular atrial fibrillation
  - Launched EHRA Key Messages based on the practical guide on the use of new oral anticoagulants in patients with non-valvular atrial fibrillation in addition to the two existing key messages

- Achieved increased Impact Factor rating of the EUROPACE Journal in 2012 : 2.765
- Surveys and registries:
  - Contributed to a number of significant clinical trial surveys, including:
    - The EAST trial (Early comprehensive Atrial fibrillation Stroke prevention Trial); a European, investigator-initiated study jointly conducted by AFNET (as sponsor) and EHRA
    - The Atrial Fibrillation Ablation Registry; part of the EURObservational Research Programme with co-operation across 28 ESC member countries
    - European Lead Extraction controlled Registry; improving healthcare standards and education by generating data from a high number of representative centres across Europe
  - Selected as a member of MedTech Health Technology Assessment, an EU-funded multi-centre Health Economics project that will research regional variations in access to devices (FP7 Framework Programme)

#### **Heart Failure Association (HFA)**

**President:** Professor Stefan D. Anker, FESC, HFA President 2012-2014

**Mission:** To improve quality of life and longevity, through better prevention, diagnosis, and treatment of heart failure including the establishment of networks for its management, education, and research.



#### **2013 highlights:**

- General:
  - Increased membership by 8% to 7 800
  - Launched the Fellowship of the HFA
  - Organised Heart Failure Awareness Day, May 2013, with 35 countries participating
  - Re-designed the patient website [www.heartfailurematters.org](http://www.heartfailurematters.org):
    - 28% increase in visitor numbers, now 90 000 visitors/month
    - Launched new versions in Arabic and Greek languages
  - Ran an experiment for a European programme of improvement of quality of care of patients with heart failure
- Congress and meetings:
  - Organised a series of meetings, including:
    - Heart Failure Congress 2013 in Lisbon, Portugal with record attendance of 4 470 and record number of abstract submissions of 1 500
    - ETP on Exercise Training and Long Term Management of Heart Failure Patients
    - Guidelines Forum, Nice, France
    - HFA Summit, Valencia, Spain, with Presidents of National Heart Failure Societies/Working Groups
    - Winter Research Meeting, Les Diablerets, Switzerland, attracting 110 participants
  - Prepared the Heart Failure Congress 2014, Athens, Greece with second record number of abstract submissions (1 444)
  - Organised joint sessions with international congresses in China, Argentina, Japan, and Russia
- Education:
  - Developed the EBAC accredited Online Heart Failure education programme in the ESC eLearning platform; 12 modules available, 8 modules in preparation

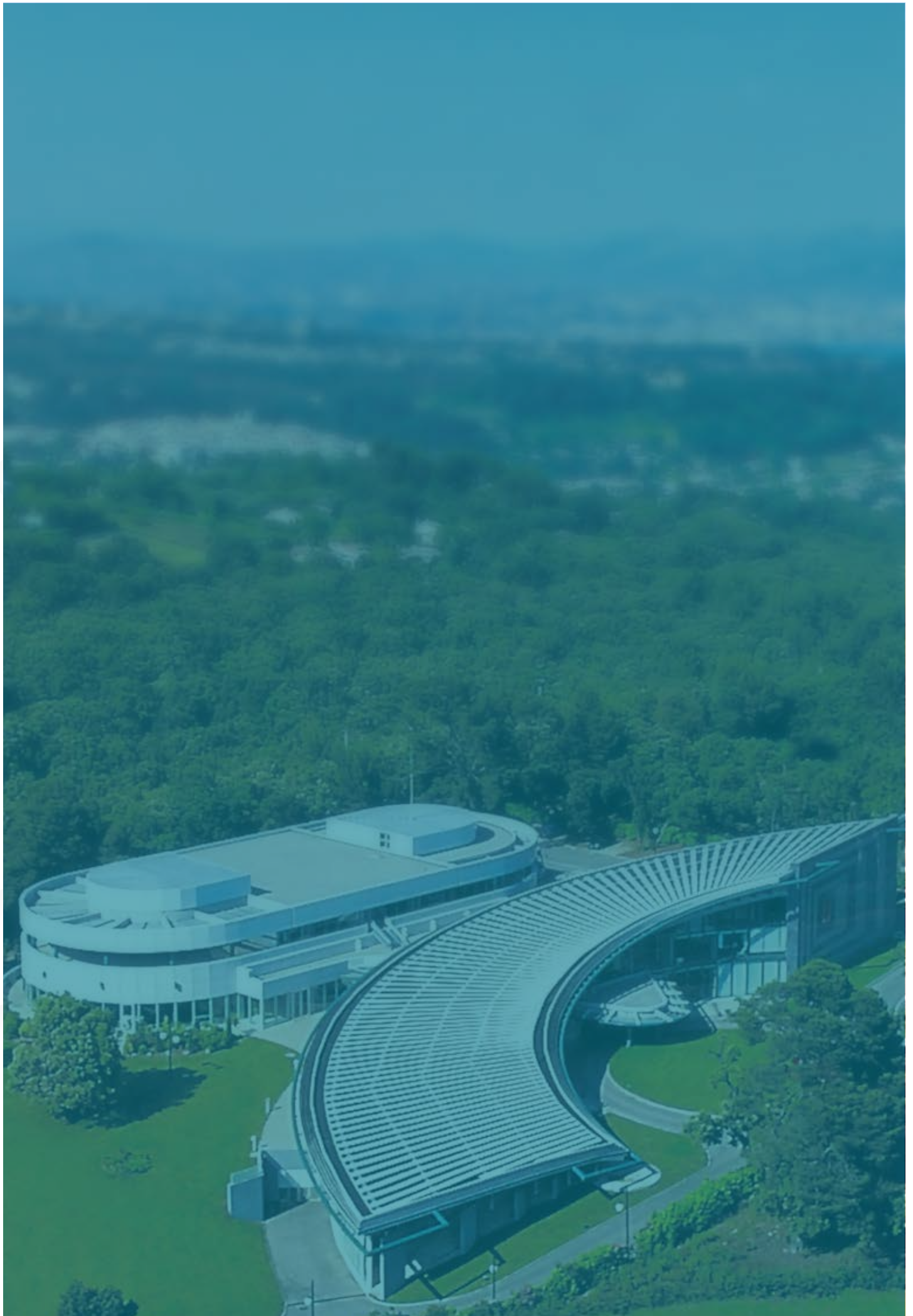
- Provided research fellowships to young scientists and nurses
- Launched the certified Post Graduate Course in Heart Failure providing a European Medical Certificate of the ESC and Certificate of Advanced Studies by the University of Zurich
- Publications:
  - Achieved an Impact Factor of 5.247 for the European Journal of Heart Failure
  - Published the Heart Failure Specialist Curriculum
  - Prepared and published scientific papers on a range of topics in the field of heart failure further to International Workshops
  - Prepared the White Paper on heart failure to be released and endorsed by Worldwide Heart Failure Societies/Working Groups in May 2014
- Trials and registries:
  - Collaborated with ESC EurObservational Research Programme on Heart Failure Long Term Registry and Peripartum Cardiomyopathy Registry

**ESC Working Groups** The ESC has 16 Working Groups focused on the remaining sub-specialty areas defined by the Cardiology Core Curriculum that are not addressed by the Associations. Working Groups promote research in their domain of expertise, disseminate scientific knowledge amongst members and the cardiology community, and develop educational tools. The contribution of the Working Groups to the ESC's overall mission continues to rise. Total membership of the 16 Working Groups is now 5 500, a like-for-like increase of 190% since 2005.



### 2013 highlights:

- Given the Working Groups' increasing initiatives, activities and projects, a new logo was developed to better reflect their importance within the ESC
- The former ESC Working Group on Nuclear Cardiology & Cardiac Computed Tomography and ESC Working Group on Cardiovascular Magnetic Resonance merged with the European Association of Echocardiography to form the new European Association of Cardiovascular Imaging (EACVI)
- A new journal has been created in the European Heart Journal family; the EHJ - Cardiovascular Pharmacotherapy is the official journal of the ESC Working Group on Cardiovascular Pharmacology and Drug Therapy
- Thanks to the allocation of funds from the ESC Board, all ESC Working Groups now run a full-day nucleus meeting and prioritise efforts to produce a range of scientific documents such as consensus documents, position papers, and statements
- Initiatives to encourage greater collaboration between ESC Working Groups and ESC Associations have continued in 2013, thus enhancing the scientific added value of the Working Groups
- Newsletters focusing on ESC Working Group activities and aimed at enhancing communication with the membership have been re-designed to promote official or endorsed meetings, educational courses, textbooks, position papers or scientific articles and other initiatives such as awards, travel grants, certification, studies or registries



## TREASURER'S REPORT

The activities of the European Society of Cardiology are shared between two entities :

- The **European Society of Cardiology**, which deals with the not-for-profit professional association and profit-making activities such as congresses
- **Maison Européenne du Coeur**, a property company which owns the European Heart House and surrounding land

The figures reported below are the consolidated financial statements including both entities, prepared in accordance with French GAAP (Generally Accepted Accounting Principles) and certified by the Statutory Auditors. The Treasurer report includes a three year period of the Group statement of income and expenditure together with the consolidated balance sheet, business reporting analysis and graphs on the evolution of the revenue, profit and headcount and members funds.

### ESC GROUP Statement of incomes and expenditures March 31st 2014 - Euros

	31/03/2012	31/03/2013	31/03/2014
Turn over	54,260,426	46,460,460	53,823,677
Other operating income	6,037,505	6,283,655	5,755,776
Consumables	-27,247	-12,194	-17,517
Compensations and wages	-9,350,201	-10,206,486	-10,570,846
Other charges	-48,494,723	-40,757,208	-44,337,131
Fiscal Charges	-703,030	-669,098	-704,850
Depreciation and provisions	-100,995	-774,433	-314,214
<b>OPERATING PROFIT</b>	<b>1,621,736</b>	<b>324,696</b>	<b>3,634,896</b>
Financial Result	928,624	1,074,687	807,381
<b>NET SURPLUS ON ORDINARY ACTIVITIES BEFORE TAXATION</b>	<b>2,550,360</b>	<b>1,399,383</b>	<b>4,442,277</b>
Extraordinary items	-55,860	2,090	-35,029
Corporate taxes	-807,358	-420,718	-1,474,874
<b>GROUP SURPLUS FOR THE PERIOD</b>	<b>1,687,143</b>	<b>980,755</b>	<b>2,932,374</b>
<b>Notes :</b>	<i>K Euros</i>	<i>K Euros</i>	<i>K Euros</i>
Operating income and expenses include sales and purchases of hotel rooms	14,116	11,658	12,497



**ESC GROUP Consolidated Sheet**  
**March 31st 2014 - Euros**

<b>ASSETS</b>	<b>31/03/12</b>	<b>31/03/13</b>	<b>31/03/14</b>
Intangible assets	122,209	217,264	284,753
Tangible assets	4,841,921	4,845,272	4,622,848
Financial Assets	3,186	49,765	51,116
<b>TOTAL FIXED ASSETS AND INVESTMENTS</b>	<b>4,967,316</b>	<b>5,112,301</b>	<b>4,958,716</b>
Deferred taxation	17,718	58,015	159,818
Inventories and WIP	991,473	1,027,675	955,344
Accounts receivable / Suppliers downpayments	14,319,372	12,282,579	19,288,067
Fiscal and social debtors	1,774,919	1,790,581	2,169,562
Other current assets	3,197,992	3,075,819	4,545,671
Investment securities and cash	43,682,144	41,474,623	43,708,484
<b>TOTAL CURRENT ASSETS</b>	<b>63,983,618</b>	<b>59,709,292</b>	<b>70,826,945</b>
<b>NET ASSETS</b>	<b>68,950,935</b>	<b>64,821,594</b>	<b>75,785,661</b>
<b>LIABILITIES</b>	<b>31/03/12</b>	<b>31/03/13</b>	<b>31/03/14</b>
Non refundable funds	4,849,260	4,849,260	4,849,260
Investments reserves	27,718,578	29,405,722	30,386,476
Surplus for the year	1,687,143	980,755	2,932,374
<b>TOTAL MEMBERS FUNDS</b>	<b>34,254,981</b>	<b>35,235,737</b>	<b>38,168,110</b>
Deferred taxation	37,963	37,903	47,559
Provisions for liabilities and charges	435,430	642,251	462,291
Financial long term debt	0	0	0
Accounts payable	6,179,505	4,094,792	4,657,748
Fiscal and social creditors	2,942,355	3,392,693	5,167,525
Other Creditors	25,100,701	21,418,218	27,282,429
<b>TOTAL CURRENT LIABILITIES</b>	<b>34,695,954</b>	<b>29,585,858</b>	<b>37,617,551</b>
<b>NET LIABILITIES</b>	<b>68,950,935</b>	<b>64,821,594</b>	<b>75,785,661</b>
<b>WORKING CAPITAL</b>	<b>29,287,664</b>	<b>30,123,435</b>	<b>33,209,394</b>
<b>WORKING CAPITAL REQUIREMENTS</b>	<b>14,394,480</b>	<b>11,351,188</b>	<b>10,499,090</b>
<b>TREASURY</b>	<b>43,682,144</b>	<b>41,474,624</b>	<b>43,708,484</b>

### Commentaries on ESC group consolidated accounts:

Despite a difficult economic and regulatory environment, the results reported by the European Society of Cardiology for the fiscal year 2013-2014 show a profit before tax of €4.4 million, which compares favourably to the budget of €0.2 million. Net profit after tax is €2.9 million.

There has been a €3 million increase in the operating result as compared to last year mainly due to the success of the Amsterdam ESC Congress with a significant increase of individual participants and despite the decrease of the industry support

Total ESC revenue (excluding hotel room sales) was €47 million. This is higher than the last comparable year with EUROPACE (FY2011-2012) €46 million.

### Operating profit:

As mentioned in the ESC business reporting a €3.7 million operating profit has been generated this year and can be explained by referring to the various activities of the ESC:

- Scientific documents and Educational activities - The ESC has continued its investments in the development of Clinical Guidelines.
  - During the year, €613k were spent on related activities and four new Guidelines were approved and released
  - Education in Cardiology: the department is now focused on providing services regarding distance learning , webinars, MCQs and courses

The ESC has continued its investment in the development of its online educational platform and produced new multiple choice questions (MCQs) and webinars. In addition, the ESC and the sub-specialties have continued to invest in the development of educational materials. Six ETPs have been organised.

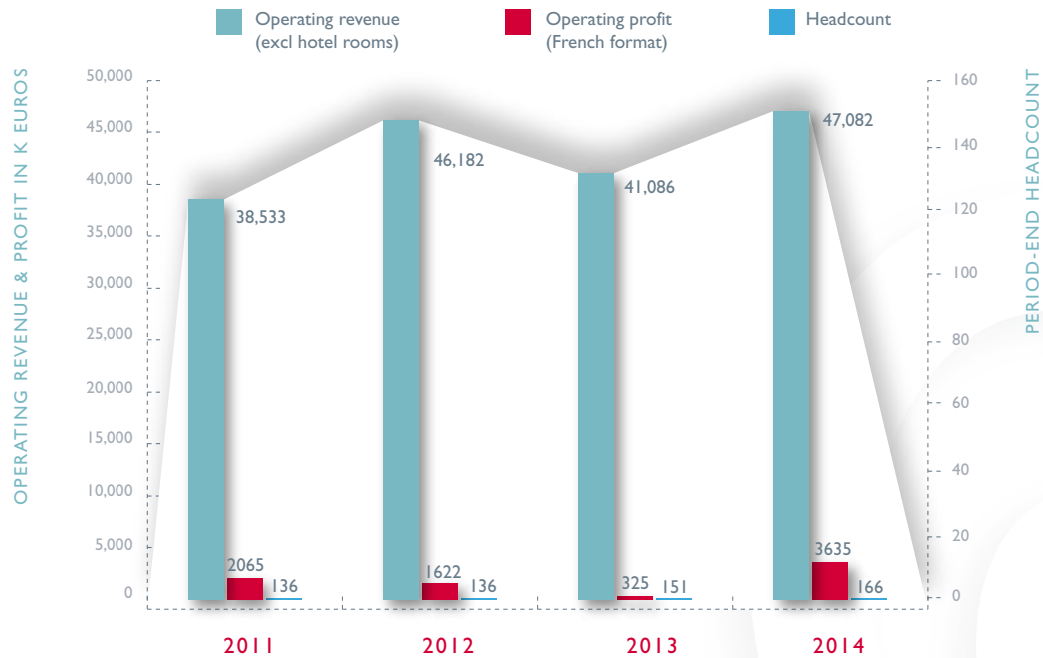
The ESC has started in cooperation with European Universities, the implementation of post-graduate courses with a first two-year course on Heart Failure.

- **EORP (Registries)** - The multi-registries and multi-sponsors programme (EORP) started in October 2009 and has continued its implementation. Eleven registries (including EUROASPIRE registry) are currently on-going and will provide to the scientific community a huge quantity of scientific information. Based on the signed sponsoring agreements and the ongoing discussions with potential sponsors, and also taking into account an extension of the programme scope, the project is considered as being break-even with a funding covering the programme for the next three years. Revenue and costs have been assessed at €1 071k during the current fiscal year for the EORP main programme and €621k for the prevention (Euroaspire). This programme is a financial and scientific success.
- **Journals and publishing activities** – Journals (including Associations) and publishing activities have generated a total contribution of €2 853k and have increased their international coverage. The EHJ remains the major contributor with a €1 194k contribution (compared to €1 768k last year). The decrease is mainly due to the migration from “print” to “online” journal which impacts the royalty but generates savings for the Congress. EHJ achieved a record impact factor moving from 10.478 to 14.097. Regarding book publishing, sales of pocket Guidelines generated revenue

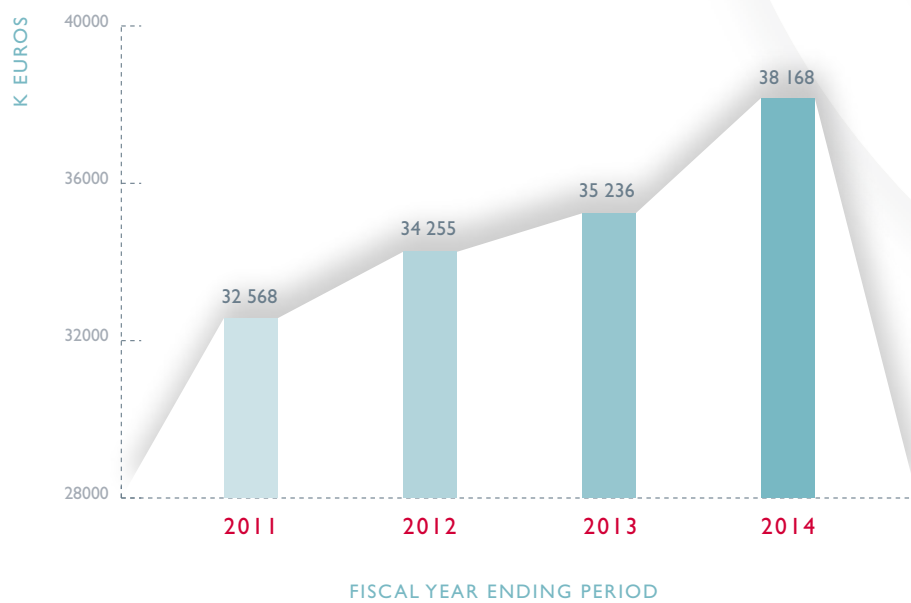
of €579k compared to €1 502k last year which was a record year. The decrease is partially linked to the migration from “paper” pocket guidelines to “mobile apps” supported by industries for €200k.

- **Congresses** - Seven congresses were organised in 2013; the ESC Congress, Heart Failure, Euroecho, ACC, ICNC, Europrevent and Europace. The Amsterdam congress was a huge scientific and financial success with 10 491 abstracts submitted (acceptance rate 40%), 29 990 participants and 146 countries represented. Despite its efforts to develop new revenue streams, the ESC remains highly dependent on its congresses
- **Advocacy and Representation** – There are now 3 653 Fellows and Nurse Fellows within the ESC. 19 companies are part of the Cardiovascular Round Table. The representation office opened in Brussels in February 2013 facilitates the development of the ESC role as a policy making organisation with three development axis:
  - EU affairs,
  - Innovation : Health Health policies, novel technologies, personalized medicine,
  - Post graduate education including master degrees and courses in cooperation with European universities and hospitalsAn International Affairs department has been created to support activities with non ESC countries.
- **Board and committees** – Board and committee expenses at €-1 641k  
A travel policy for volunteers’ travels has been implemented together with the cost containment principles in order to adapt the association with its more and more challenging environment.
- **Associations** - The six Associations and the Working groups have continued the huge development of their activities and projects, participating in the improvement of the overall ESC position. They have generated a €1 802k contribution during 2013/14. Direct support to the Associations and Working groups has been funded by ESC Central for €820k. This amount does not include any allocation of support functions (HR, Finance, IT,...).
- **Financial investments** – The Board has maintained the ESC financial investment policy that is characterised by a prudent, capital conservation profile. Cash reserves are mainly invested in corporate bonds, a €-denomination fund with protected contract, short term deposits, and saving accounts in major banks.

## GROWTH IN GROUP ANNUAL REVENUE, PROFIT & HEADCOUNT



## GROWTH IN MEMBERS FUNDS



**ESC FINANCIAL RESULTS**  
**By division ( ESC reporting)**

Description	FY 2013-2014 ACTUAL	FY 2014-2015 BUDGET
<b>INCOME :</b>		
CONGRESS & MEETINGS	34,301,518	28,664,760
EDUCATION IN CARDIOLOGY	454,140	1,739,130
EUROOBSERVATIONAL RESEARCH PROG	1,831,224	2,360,962
PRACTICE GUIDELINES	15,000	62,500
JOURNALS & PUBLICATIONS	6,483,669	6,262,334
ADVOCACY : CRT & EU AFFAIRS	882,935	926,647
ADVOCACY : INTERNATIONAL AFFAIRS	382,371	463,333
ADVOCACY : NCS & FESC	1,564,426	1,701,272
EUROPEAN HEART AGENCY GENERAL & COUNCIL	0	0
EUROPEAN HEART ACADEMY	3,106	38,938
EUROPEAN HEART HEALTH INSTITUTE	0	0
MARKETING & COMMUNICATION	8,873	7,000
BRUSSELS OFFICE	0	0
EHH & MAINTENANCE	0	0
INDUSTRY SALES	0	0
PRESS	0	0
MGT / FINANCE / HR	1,575	0
TECHNOLOGY & BUSINESS SERVICES	0	0
BOARD & COMMITTEES	98,936	53,390
WG & COUNCILS MGT	0	0
ASSOCIATIONS MGT	0	0
<i>Total ESC CENTRAL</i>	<i>46,027,773</i>	<i>42,280,266</i>
EACVI	1,010,049	1,295,609
EHRA	3,311,669	2,824,621
HFA	1,464,580	1,648,444
EACPR	230,611	704,490
ACCA	438,330	627,834
EAPCI	925,062	795,250
WORKING GROUPS	201,521	195,600
<i>Total ASSOCIATIONS</i>	<i>7,581,821</i>	<i>8,091,848</i>
INTERNAL BILLING ADJUSTMENTS	-6,647,502	-4,672,725
<b>OPERATING INCOME</b>	<b>46,962,092</b>	<b>45,699,389</b>



Description	FY 2013-2014	FY 2014-2015
	ACTUAL	BUDGET
<b>EXPENSE :</b>		
CONGRESS & MEETINGS	-23,240,574	-20,016,519
EDUCATION IN CARDIOLOGY	-1,269,822	-1,849,491
EUROOBSERVATIONAL RESEARCH PROG	-1,756,225	-2,335,962
PRACTICE GUIDELINES	-627,849	-767,031
JOURNALS & PUBLICATIONS	-4,693,215	-4,682,421
ADVOCACY : CRT & EU AFFAIRS	-722,717	-842,617
ADVOCACY : INTERNATIONAL AFFAIRS	-504,217	-752,730
ADVOCACY : NCS & FESC	-492,138	-482,038
EUROPEAN HEART AGENCY GENERAL & COUNCIL	-31,740	-91,371
EUROPEAN HEART ACADEMY	-3,500	-117,800
EUROPEAN HEART HEALTH INSTITUTE	-77,842	-275,571
MARKETING & COMMUNICATION	-1,658,060	-2,220,720
BRUSSELS OFFICE	-315,827	-356,578
EHH & MAINTENANCE	-906,804	-922,243
INDUSTRY SALES	-419,282	-464,259
PRESS	-383,758	-437,850
MGT / FINANCE / HR	-2,655,679	-2,983,711
TECHNOLOGY & BUSINESS SERVICES	-1,779,578	-2,044,137
BOARD & COMMITTEES	-1,740,716	-1,918,429
WG & COUNCILS MGT	-259,978	-275,420
ASSOCIATIONS MGT	-560,059	-483,581
<i>Total ESC CENTRAL</i>	<i>-44,099,580</i>	<i>-44,320,477</i>
EACVI	-1,009,378	-1,166,803
EHRA	-2,050,658	-2,648,933
HFA	-1,128,607	-1,758,698
EACPR	-301,254	-626,918
ACCA	-346,666	-547,430
EAPCI	-676,615	-781,290
WORKING GROUPS	-266,637	-67,050
<i>Total ASSOCIATIONS</i>	<i>-5,779,815</i>	<i>-7,597,122</i>
INTERNAL BILLING ADJUSTMENTS	6,647,502	4,672,725
<b>OPERATING EXPENSE</b>	<b>-43,231,893</b>	<b>-47,244,874</b>

Description	FY 2013-2014	FY 2014-2015
	ACTUAL	BUDGET
RESULT :		
CONGRESS & MEETINGS	11,060,944	8,648,241
EDUCATION IN CARDIOLOGY	-815,682	-110,361
EUROOBSERVATIONAL RESEARCH PROG	74,999	25,000
PRACTICE GUIDELINES	-612,849	-704,531
JOURNALS & PUBLICATIONS	1,790,454	1,579,913
ADVOCACY : CRT & EU AFFAIRS	160,218	84,030
ADVOCACY : INTERNATIONAL AFFAIRS	-121,846	-289,397
ADVOCACY : NCS & FESC	1,072,288	1,219,234
EUROPEAN HEART AGENCY GENERAL & COUNCIL	-31,740	-91,371
EUROPEAN HEART ACADEMY	-394	-78,862
EUROPEAN HEART HEALTH INSTITUTE	-77,842	-275,571
MARKETING & COMMUNICATION	-1,649,187	-2,213,720
BRUSSELS OFFICE	-315,827	-356,578
EHH & MAINTENANCE	-906,804	-922,243
INDUSTRY SALES	-419,282	-464,259
PRESS	-383,758	-437,850
MGT / FINANCE / HR	-2,654,104	-2,983,711
TECHNOLOGY & BUSINESS SERVICES	-1,779,578	-2,044,137
BOARD & COMMITTEES	-1,641,780	-1,865,039
WG & COUNCILS MGT	-259,978	-275,420
ASSOCIATIONS MGT	-560,059	-483,581
<i>Total ESC CENTRAL</i>	<i>1,928,193</i>	<i>-2,040,211</i>
EACVI	671	128,806
EHRA	1,261,011	175,688
HFA	335,973	-110,254
EACPR	-70,643	77,572
ACCA	91,664	80,404
EAPCI	248,447	13,960
WORKING GROUPS	-65,116	128,550
<i>Total ASSOCIATIONS</i>	<i>1,802,007</i>	<i>494,726</i>
OPERATING RESULT	3,730,200	-1,545,485

Description	FY 2013-2014 ACTUAL	FY 2014-2015 BUDGET
FINANCIAL INCOME	856,408	900,000
FINANCIAL EXPENSES	-30,771	0
CONTINGENCY PROVISIONS	133,332	-177,967
CONSOLIDATION ADJUSTMENT	121,256	
<b>FINANCIAL RESULT</b>	<b>1,080,225</b>	<b>722,033</b>
<b>RESULT before Tax</b>	<b>4,810,425</b>	<b>-823,452</b>
PROFIT SHARING	-311,029	0
CORPORATE TAX	-1,567,022	0
CARRY BACK	0	0
<b>RESULT after Tax</b>	<b>2,932,374</b>	<b>-823,452</b>

## ■ SOCIÉTÉ EUROPÉENNE DE CARDIOLOGIE

### **S.E.C.**

Year ended March 31, 2014

### **Statutory auditors' report on the consolidated financial statements**

To the Members,

In compliance with the assignment entrusted to us by your annual general meeting, we hereby report to you, for the year ended March 31, 2014, on:

- the audit of the accompanying consolidated financial statements of S.E.C.;
- the justification of our assessments;
- the specific verification required by law.

These consolidated financial statements have been approved by the board of directors. Our role is to express an opinion on these consolidated financial statements based on our audit.

#### **I. Opinion on the consolidated financial statements**

We conducted our audit in accordance with professional standards applicable in France; those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement. An audit involves performing procedures, using sampling techniques or other methods of selection, to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made, as well as the overall presentation of the consolidated financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

In our opinion, the consolidated financial statements give a true and fair view of the assets and liabilities and of the financial position of the group as at March 31, 2014 and of the results of its operations for the year then ended in accordance with French accounting principles.

#### **II. Justification of our assessments**

In accordance with the requirements of article L. 823-9 of the French commercial code (Code de commerce) relating to the justification of our assessments, we bring to your attention the following matters:

##### **Accounting principles**

Note to the financial statements "Notes on the operating account / Explanations on the accounting of certain revenues", paragraph VI.B.3, sets out the accounting standards and methods used with regard to long-term contracts. In the context of our assessment of the accounting standards and methods applied by your association, we have checked the appropriateness of the accounting methods described above and of the information given in this note to the financial statements and we made sure of their correct implementation.

**Accounting estimates**

Your association sets aside provisions to cover contingencies as described in note to the financial statements “Notes concerning liabilities / Provisions”, paragraph V. In the context of our assessment of these estimates, we have verified the reasonableness of the assumptions adopted and the resulting evaluations.

These assessments were made as part of our audit of the consolidated financial statements taken as a whole, and therefore contributed to the opinion we formed which is expressed in the first part of this report.

**III. Specific verification**

As required by law, we have also verified, in accordance with professional standards applicable in France, the information presented in the group’s management report.

We have no matters to report as to its fair presentation and its consistency with the consolidated financial statements.

Nice, July 10, 2014

The statutory auditors  
ERNST & YOUNG Audit  
French original signed by  
Camille de Guillebon

*This is a free translation into English of the statutory auditors’ report on the consolidated financial statements issued in French and it is provided solely for the convenience of English-speaking users.*

*The statutory auditors’ report includes information specifically required by French law in such reports, whether modified or not. This information is presented below the audit opinion on the consolidated financial statements and includes an explanatory paragraph discussing the auditors’ assessments of certain significant accounting and auditing matters. These assessments were considered for the purpose of issuing an audit opinion on the consolidated financial statements taken as a whole and not to provide separate assurance on individual account balances, transactions or disclosures.*

*This report also includes information relating to the specific verification of information given in the group’s management report.*

*This report should be read in conjunction with and construed in accordance with French law and professional auditing standards applicable in France.*

**Société Européenne de Cardiologie  
S.E.C.**

Year ended March 31, 2014

Statutory auditors’ report  
on the consolidated financial statements  
ERNST & YOUNG Audit









For all other information please contact:  
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