

European Society of Cardiology Annual Report 2013



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Introduction

By Professor Panos Vardas, ESC President

Dear Colleagues,

It gives me great pleasure to introduce the 2013 Annual Report of the European Society of Cardiology, our renowned scientific organisation with a remarkable track record of achievement and progress.

As I noted in my address to the General Assembly last August, the ESC leadership is often called upon to tackle core strategic and scientific issues – and sometimes political issues too – in parallel with having to manage large traditional projects. It is clear that the greatest strategic challenge we currently face is maintaining strong unity among the disparate cardiovascular communities that come together under the ESC umbrella. With 55 National Cardiac Societies, 36 Affiliated Cardiac Societies and our complex structure of Associations, Working Groups and Councils, the ESC is one of the largest scientific societies globally. During my first year as President, I have made considerable efforts to reinforce this unity and broaden cooperation amongst the constituent bodies. It is with satisfaction therefore, that I note the constructive and efficient collaboration on all levels and branches of our Society.

Maintaining the success of established projects such as the ESC Congress is of paramount importance. We must also continue to strive continually for excellence and rigour in the ESC publications, Clinical Practice Guidelines activities and on the numerous Registries and Surveys. There are, however, many external factors that threaten to disrupt progress in all these areas. For instance, we are seeing evidence that the significant economic and regulatory challenges faced by the pharmaceutical and medical technology industries are already having an adverse impact on cardiovascular innovation. The ability to adapt to the changing world and emerging needs is fundamental to success and we are working on developing strategies to combat the threats to the ESC's mission. Indeed, the Board is focused on diversifying our business model in ways which will retain scientific and political leadership while ensuring economic sustainability.

I would now like to briefly summarise progress on some of our larger projects – these are, of course, reported in more detail elsewhere in this document:

ESC Congress: Our 2012 Congress in Munich attracted over 27 000 participants from more than 155 countries, firm proof of the global recognition enjoyed by the ESC. This year in Amsterdam all the metrics indicate that our Congress may be significantly larger. In the last twelve months, our sub-specialty congresses have also set new standards in terms of participants, abstracts submitted, sessions held and other important parameters. Despite the economic crisis, their high quality and scientific value is non-negotiable. Indeed, all these important gatherings are further evidence of the international reputation and influence of the ESC.

Publications: The ESC Journal Family has developed remarkably well since 2009 when semi-automated manuscript transfer was first adopted. It now encompasses nine journals covering



the entire field of cardiovascular medicine, from basic science to acute cardiac care, intervention and heart failure. Overall, the Family has seen significant advances in their Impact Factors. The flagship European Heart Journal title has reached an impact factor of over 14 ranking second in the cardiovascular field, just behind Circulation. Indeed, it now receives approximately 3600 papers per year with an acceptance rate of 11%. It is worth highlighting that almost 700 of these are subsequently transferred to other Journal Family members because of greater suitability. The number of citations associated with these papers is higher than those directly submitted to the sub-specialty Journals which, in turn, enhances their Impact Factors with the European Journal of Heart Failure profiting the most. Thus, the ESC Journal Family provides science and education at the highest level for both general cardiologists and specialists in different areas of our field.

Education: The ESC has long prioritised Continuing Medical Education (CME) among cardiovascular specialists, and during the last year we have undertaken initiatives to widen its adoption within the ESC member countries. The Education Committee has made great progress with launching the new ESC eLearning platform for general cardiology and its sub-specialties, while distance learning activities have focused on general cardiology webinars orientated towards recent Clinical Practice Guidelines and case-based presentations. The ESC has also run a number of external educational courses in European countries. Finally, one of the major new initiatives was the creation of a strategic group formed out of the Practice Guidelines, Education, and Congress Committees that has been charged with reviewing how best to consolidate all ESC educational activities.

EORP: The ESC EurObservational Research Programme is moving ahead rapidly. During 2012, nine registries have commenced or continued thanks to a significant contribution by a number of ESC Associations and Working Groups. These particularly included the EHRA, the HFA, the EAPCR, and the Working Group on Myocardial and Pericardial Disease. Work has begun on defining the characteristics of the heart failure, atrial fibrillation, cardiomyopathies, and cardiovascular prevention registries, while more than 40 countries are already participating in a registry on Pregnancy and CVD. An ongoing registry on new treatment of valve disease by transcatheter approach has enrolled more than 4000 patients in just a few months, and a complex registry on chronic ischemic cardiovascular disease has started. All ESC National Cardiac Societies have been invited to participate in this vital project along with our Affiliated Cardiac Societies. Additional registries have been planned in the 2013 programme.

Global Scientific Activities: The ESC has made increased efforts to be scientifically active in the last year, not only in its member countries but also by working with its Affiliated Cardiac Societies. The GSA project has successfully involved a number of countries such as Argentina, Brazil, China, Mexico, and Saudi Arabia, with ESC scientific ambassadors participating in jointly organised sessions at congresses and meetings. The response of the local scientific communities has been impressive, and the ESC is progressively recognised as a global leader in cardiovascular medicine.

Clinical Practice Guidelines: During the last year, the Committee for Practice Guidelines has worked hard on finalising the topics covered by new Guidelines for 2013: Arterial Hypertension, Cardiac Pacing and Resynchronisation Therapy, Stable Coronary Angina, and Diabetes. It has

also introduced new methods to widen the distribution and take-up of ESC Clinical Practice Guidelines. In addition to the traditional full text format, it has developed more convenient and concise versions known as Pocket Guidelines and Essential Messages, and also summarised the content in slide-sets for educational purposes and to help practitioners achieve care objectives. Additionally, they have also developed summary cards, aimed at general practitioners, nurses and other non-specialists, which contain essential information on each of the Guideline topics. The Committee is currently working on the development of five new Guidelines to be presented in 2014: Non-Cardiac Surgery, Acute Pulmonary Embolism, Myocardial Revascularisation, Aortic Disease, and Hypertrophic Cardiomyopathies.

The ESC Brussels office: We opened our office at 29 Square de Meeûs in Brussels in February 2013. Close to the European Parliament complex, this new facility – the European Heart Agency – is of vital importance to the ESC's future as we establish our base in the political capital of Europe. From here, we will try to influence relevant aspects of policy and shape new projects that take us towards our mission of reducing the burden of cardiovascular disease. Apart from efficient secretarial support to all members, the Brussels office can accommodate Board meetings, scientific events, webinars, and also meet a significant number of other needs.

The European Heart Agency has three dimensions:

- European Affairs which will expand and reinforce the traditional activities of the European Affairs Committee while also providing specialist support for regulatory affairs related to cardiovascular medicine.
- European Heart Health Institute which covers new ESC activities such as clinical trials, personalised medicine, novel technologies, quality assessment, and health care management.
- European Heart Academy which is focused on cardiovascular education beyond the traditional activities of our Education Committee.

The detailed activities of the European Heart Agency are still being planned, however it is clear that they will only be delivered with the excellent and diligent work of everyone involved. Establishing the Brussels office is a very strong demonstration of the ESC's determination to ensure that its voice is heard at the highest levels and that we are not afraid to make difficult decisions in pursuit of our objectives.

In closing, I would like to note that the ESC is steadily progressing to become one of the largest scientific organisations in the world, and has more than doubled in size over the last 10 years. Leading this organisation is complex and challenging, not only due to evolving activities but also to the fast-changing global conditions. I am, however, optimistic that our leadership will be effective as long as we remain united with a shared vision and stay loyal to our principles, and we continue to show commitment to progress on behalf of the people that matter most – our patients.

Professor Panos Vardas

President
European Society of Cardiology



A handwritten signature in dark ink, appearing to read 'P. Vardas', written over a light blue circular graphic element.

Congresses and Meetings

ESC CONGRESS 2012

The 2012 Congress of the European Society of Cardiology (ESC) took place from 25 to 29 August in Munich. The event attracted over 27 000 participants drawn from 141 countries. The Congress spotlight, 'From bench to practice', was chosen to address a translational approach to apply innovations and introduce them into clinical practice. An impressive scientific programme featured over 400 individual sessions and 4203 abstracts. For the second year in a row, most sessions were arranged by topics in themed 'villages' for delegates' convenience.

Congress key statistics:

- 27 279 participants attended, including 21 440 physicians
 - 33% of delegates from non-ESC countries, compared with 30% in 2011, and 27% in 2010
 - 429 sessions in 34 lecture rooms including:
 - 234 pre-arranged sessions during regular conference hours
 - 42 pre-arranged sessions outside regular conference hours covering Meet the Experts, Read with the Experts, Meet the Editors, 'How to' tutorials, Best of EHJ, Meet the Trialists, Cardiac Anatomy, Cardiologists of Tomorrow, Nurse sessions, and General Cardiologist sessions
 - 62 special sessions including 30 joint sessions with Affiliated Cardiac Societies and Sister Societies
 - 9614 abstracts were submitted, of which 4203 were accepted:
 - Growing participation from Asia, with Japan again the top submitter with 1243 abstracts
 - 206 companies occupied 11 750m² of exhibition area
 - 73 Satellite symposia including 8 EBAC-accredited programmes and 4 Hands-On Tutorials organised by industry partners
 - Independent market research showed that 93% of the delegates were happy with the quality of the scientific content, and 94% said that the congress was well organised
- PURE, ALTITUDE, PARAMOUNT, AldoDHF, IABP-SHOCK II, GARY and WOEST
- Individual registrations higher than group registrations for the first time
 - ESC Plaza located in the entrance hall and containing booths for the ESC itself, National and Affiliated Cardiac Societies
 - ESC Studio generated 51 videos covering interviews on general topics as well as 7 Cardiostars interviews of top experts by Cardiologists of Tomorrow (CoT)
 - 12 ESC Live Sessions provided real-time online presentations during the Congress
 - CPR Workshop collaboration with the European Resuscitation Council and the German Cardiac Society
 - Mobile app downloaded 11 700 times which represented 90% of iOS/Android users on-site
 - Launch of 'ESC Congress 365', an online portal offering consolidated content
 - 'Best of ESC Congress 2012', an online interactive talk show programme presenting the highlights of the congress through short video reports that were discussed by a panel of experts:
 - Broadcast live via the Internet on 6 September and attracting 8400 views to date

SUB-SPECIALTY CONGRESSES

EuroHeartCare 2013: Formerly known as the Annual Spring Meeting on Cardiovascular Nursing, this event took place 22 to 23 March in Glasgow, United Kingdom. The theme of the congress was chosen as 'At the Heart of Cardiovascular Care' and included talks by

Congress highlights:

- Summaries presented of results or progress updates on important clinical trials including



Scotland's Minister of Health and Chief Medical Officer. The Council on Cardiovascular Nursing and Allied Professions (CCNAP) is a very active community and there was a high level of participation in the lecture rooms and poster area, as well as enthusiastic networking and scientific exchange.

Key statistics:

- 401 participants including 368 active delegates: — 93% from ESC countries
- Over 90 participants formally joined CCNAP during the congress
- 18 sessions organised in 2 lecture rooms including 10 pre-arranged sessions
- 189 abstracts submitted, of which 162 were accepted (86%)
- 8 exhibiting companies

EuroPrevent 2012: The seventh annual meeting of the European Association for Cardiovascular Prevention and Rehabilitation (EACPR) took place from 3 to 5 May in Dublin, Ireland. The event attracted over 1750 participants from 63 countries, breaking the attendance record. The main theme was 'From research to implementation'. For the first time ever, new Clinical Practice Guidelines were presented at a sub-specialty congress and stimulated much debate amongst expert delegates. EACPR also launched an update to its Health Professional toolkit at the congress. Associate Professor Stephan Gielen took office as EACPR President, with Professor Antonio Pelliccia becoming President-Elect.

Key statistics:

- 1757 participants including 1584 active delegates — 92% from ESC countries, 23% EACPR members
- Total of 80 sessions, courses, and symposia were presented in 4 lecture rooms
- 858 abstracts were submitted, of which 511 were accepted (61%)
- 21 companies occupied 285m² of exhibition area

- 5 satellite symposia organised by industry partners

Frontiers in CardioVascular Biology

2012: The second meeting of the Council on Basic Cardiovascular Science (CBCS) took place over three days from 30 March to 1 April in London, United Kingdom. The event attracted over 900 participants from 48 countries and was supported by eight ESC Working Groups and six sister societies. Keynote speeches were delivered by world-class experts ensuring that the meeting offered insight into the best and newest science in the cardiovascular arena. Within a wide-ranging programme, themes of Bio-imaging, Degeneration and Regeneration, and Inflammation were highlighted. Invited speaker presentations and shorter talks selected from submitted abstracts ensured that topical subjects were well covered with strong involvement of younger speakers. Poster sessions were central in both position and timing.

Key statistics:

- 911 participants including 866 active delegates: — 93% from ESC countries — 68% scientists — 27% increase from last year
- 70 sessions and symposia presented in 3 lecture rooms: — 38 Pre-arranged, Poster, and Special sessions — 5 Keynote lectures — 27 Symposia
- 625 Abstracts submitted, of which 565 were accepted (92%)
- 16 companies occupied 134m² of exhibition area

Heart Failure 2012: The annual meeting of the Heart Failure Association of the ESC (HFA) took place from 19 to 22 May in Belgrade, Serbia – a new venue for an ESC congress. The event attracted nearly 3700 participants from 76 countries of whom 61% were cardiologists and a local attendance of



almost 30% of delegates. Notable topics from a full agenda included the presentation of new ESC Clinical Practice Guidelines on devices, drugs and diagnosis in heart failure, implanted devices, pharmacological treatment of heart failure and surgery, mechanical circulatory support, and transplantation.

Key statistics:

- 3673 participants of which 43% are individual registrations
 - 91% from ESC countries
 - 45% are HFA members
- 103 sessions were held in 7 lecture rooms
- 1143 Abstracts were submitted of which 1078 were accepted (94%)
- 27 companies occupied 750m² of exhibition area
- 13 satellite symposia organised by Industry Partners

Acute Cardiac Care 2012: The annual meeting of the Acute Cardiovascular Care Association (ACCA) took place from 20 to 22 October in Istanbul, Turkey. The event attracted over 1400 participants from 74 countries, breaking the attendance record. It was the first time that an ESC congress had been held in Turkey and was a great success. There was a special focus on 'Acute Coronary Syndromes: STEMI & cardiogenic shock', while the keynote lecture during the opening ceremony was delivered by 2010 ESC Gold Medallist Professor Lars Wallentin. New for 2012 was the presentation of practical cases using an interactive session format. Real life cases were demonstrated by experts, discussed with the audience, and concluded with recommendations and take-home messages which delegates can implement in daily practice.

Key statistics:

- 1430 participants of which 63% were individual registrations:
 - 90% from ESC countries
 - 33% ACCA members
 - 66% first-time attendees

- 78 sessions and symposia were presented in 4 lecture rooms
- 608 abstracts submitted, of which 378 were accepted (62%)
- 8 companies occupied 143m² of exhibition area
- 1 satellite symposium organised by Industry Partners (Novartis)

EuroEcho and Other Imaging Modalities

2012: The 16th annual meeting of the European Association of Echocardiography (EAE) took place from 5 to 8 December 2012 in Athens, Greece. The event attracted nearly 2900 participants from 85 countries. At the opening ceremony, it was announced that a new Association, the European Association of Cardiovascular Imaging (EACVI) would be formed during 2013 by a merger between the EAE and two ESC Working Groups. Heart valve disease was the topic of most interest to delegates, while the eLibrary was introduced for the first time and a series of novel 'How-to' sessions were run during breaks in the main programme. Two Young Investigator awards were given, and the Echo@Jeopardy session was held after the end of scientific content sessions. For the first time, events at the congress could be followed on Twitter.

Key statistics:

- 2876 participants, of which 78% were individual registrations:
 - 89% from ESC countries
 - 21% were EAE members
- Over 200 sessions, seminars, and courses were presented in 7 Lecture rooms
- 1189 Abstracts submitted, of which 696 were accepted (60,4%)
- 304 Faculty members
- 22 companies occupied 625m² of exhibition area
- 8 satellite symposia organised by industry partners
- 16 Imaging Campus workshops organised
- 318 press releases issued

EDUCATION IN CARDIOLOGY

Education is a key element in the ESC armoury to meet its mission of reducing the burden of cardiovascular disease in Europe and beyond. The past year has seen work begun on many new concepts as well as the consolidation and improvement of existing initiatives. There is a particular focus on delivering guideline-based education, and it is also felt that the products made available by the Education Committee need to be more user-friendly. Finally, marketing and visibility is being addressed through the assessment of needs and better cross-linking with products from the rest of the ESC constituent bodies.

The Education Committee held three formal meetings; one during ESC Congress 2012 in Munich, the second in December, and the last in April. One of the major new initiatives, proposed by the ESC President and immediately endorsed by the chairmen of the committees, is the creation of a strategic group bringing together representatives of the Practice Guidelines, Education, and Congress committees to reflect on the consolidation of all ESC educational activities. A new project has been piloted ahead of ESC Congress 2013 in Amsterdam. 'Guidelines into Practice Tracks' helps delegates plan their journey through the ESC Congress around particular Clinical Practice Guidelines and select the specific sessions and complementary material relevant to those Guidelines. Four tracks have been produced; one covering valvular heart disease, the second by HFA, the third by EACPR, and the fourth by EHRA. Another, by ACCA, is in progress. All will be finalised shortly to be available for the ESC Congress 365 tool as well as the Guidelines and Education websites, and those of the Associations and Working Groups involved.

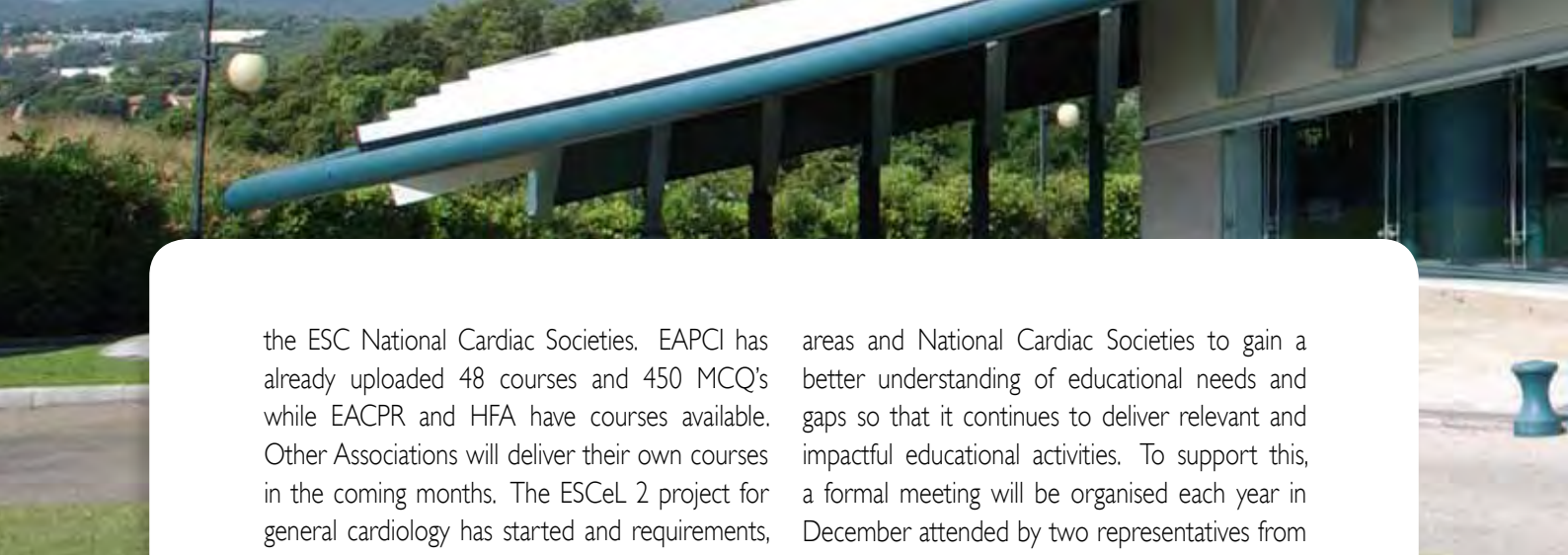
External Courses: A successful course was run in Davos and another one will be held in Dubrovnik. Unfortunately the course in Rotterdam could not be held this year due to a lack of funding.

Distance learning activities: The ESC webinars on general cardiology have been continued with the overall quality of the programme rated as good to excellent by attendees. Attendance, however, is poor which has led the Committee to re-purpose this effort and adopt a live streaming format from September 2013. The 2013-2014 programme has been finalised with all webinars focused on recent Clinical Practice Guidelines and using case-based presentations. All will be live-streamed from a professional studio. The pre-programme will be presented to industry, aiming for sponsorship in the form of unrestricted educational grant, and training will be organised for speakers and hosts. In the near future, the possibility of running

webinars in national languages will be offered to the National Cardiac Societies. Programmes for healthcare institutions will also be released.

Another initiative to augment case-based educational activities is to promote the use of Guidelines-based cases. To enhance the interactive nature of this approach, the Committee has changed the format so that the presentation will be delivered step-by-step, allowing the opportunity for questions to be raised about the specifics of each case. Associations and Working Groups will be invited to provide cases and an ESC clinical case portal is under development to improve synergy between all those involved.

ESCeL: The first phase of the ESC e-Learning platform – ESCeL I – covering various sub-specialties was launched in August 2012 at the ESC Congress in Munich. Since then, the Education Committee has concentrated on populating the platform with content supplied by the Associations and promoting its features to



the ESC National Cardiac Societies. EAPCI has already uploaded 48 courses and 450 MCQ's while EACPR and HFA have courses available. Other Associations will deliver their own courses in the coming months. The ESCeL 2 project for general cardiology has started and requirements, specifications, and development are underway. The content of ESCeL 2 has been fixed and will include the ESC Text Book and Clinical Practice Guidelines, as well as content from ESC Congress 365 and the Guidelines into Practice tracks. The Committee has started working with an IT company to implement the project. The plan is to have a preliminary announcement during the ESC Congress in Amsterdam with the launch of ESCeL 2 in March 2014.

Examinations and MCQs: As a service to National Cardiac Societies, the ESC's Professional Standards and MCQs Group facilitate the delivery of knowledge-based assessment (KBA) in general cardiology. The outcome of this can then be leveraged by each National Cardiac Society for their respective national purposes. The Group worked on MCQ production and has also held two review meetings. A KBA examination on general cardiology is planned for this year involving five countries and approximately 250 candidates. The MCQs, along with the Guidelines into Practice tracks, will become part of the content of ESCeL 2.

Core Curriculum: The third edition of the ESC Core Curriculum for the general cardiologist was updated and will be published in the EHJ in August 2013. This will be the basis for further developments and cooperation in the realm of education and beyond.

Next steps: Priorities for the coming year include, of course, the further development of the ESCeL educational platform for general cardiology as well as cooperation with Guidelines and Congress Committees. The Education Committee will also engage with sub-specialty

areas and National Cardiac Societies to gain a better understanding of educational needs and gaps so that it continues to deliver relevant and impactful educational activities. To support this, a formal meeting will be organised each year in December attended by two representatives from each National Cardiac Society; one responsible for training, and one responsible for the ESCeL platform.

EUROBIOBSERVATIONAL RESEARCH PROGRAMME

Excellent progress has been made in the multi-year EURObservational Research Programme. Ten registries are ongoing today and highlights include the following:

- Six new clinical registries were launched in 2012: Atrial Fibrillation Ablation long-term, Atrial Fibrillation General pilot, Pregnancy and Cardiac Disease (second phase), Peripartum Cardiomyopathy, Cardiomyopathy, European Lead Extraction ConTrolled (ELECTRa) and one registry in the prevention area: European Survey of Cardiovascular Disease Prevention and Diabetes (EUROASPIRE IV)
- The long-term general survey on Heart Failure is continuing. 348 centres across 33 countries are participating and more than 18 900 patients have been enrolled over the last 2 years. The paper on baseline characteristics and on the one-year follow-up results of the pilot phase was published in 2012
- The Peripartum Cardiomyopathy registry was launched in May 2012. This is an ancillary project of the Heart Failure Long-Term Registry with 71 centres across 31 countries participating
- The one-year follow-up data of the Atrial Fibrillation Ablation sentinel pilot study was presented at the ESC Congress in Munich in 2012. A long-term survey on Ablation in Atrial Fibrillation was launched in March 2012. 138 centres across 29 countries are participating and more than 1000 patients have been enrolled over the last year

- The pilot phase of the general registry in Atrial Fibrillation General was launched in March 2012. 10 countries were selected for this pilot, with the involvement of 70 centres. More than 3000 patients have been enrolled over the last year. The results will be presented at the ESC Congress in Amsterdam, in September 2013
- The sentinel pilot registry, TransCatheter Valve Treatment (TCVT), is continuing, and is conducted in conjunction with EAPCI and EACVI. 72 centres are participating in this pilot phase from 8 countries, of which 5 countries are providing EORP with their national data
- A sentinel registry, sponsored by EHRA, was launched in November 2012: European Lead Extraction ConTrolled (ELECTRa). 88 centres across 24 countries are participating and more than 800 patients have been enrolled
- A second phase of the special registry Pregnancy and Cardiac Disease was launched in March 2012. 117 centres across 45 countries are participating so far and more than 900 patients have been enrolled over the last year
- In the prevention area, the European Survey of Cardiovascular Disease Prevention and Diabetes (EUROASPIRE IV) registry commenced in April 2012. 81 centres across 24 countries are participating and more than 13 000 patients have been enrolled over the last year. Data will be presented at the ESC Congress in Amsterdam in September 2013
- The sentinel Cardiomyopathy Pilot Registry was launched at the beginning of 2013. The pilot phase will run for one year and the final results will be presented at the ESC Congress in 2014. Preliminary results will be presented in Amsterdam
- The general Chronic Ischemic Cardiovascular Disease Pilot Registry is starting in 2013. Invitations to the ESC National Cardiac Societies are currently ongoing
- Planned registries are Acute Coronary Syndromes and Treatment of Pulmonary Hypertension in Adults with Congenital Heart

Disease, and both will be launched end 2013 or early 2014

- The pilot phase for the local monitoring activities in 9 countries has now been terminated. Site visits took place during 2012 in randomly selected centres in order to assess the consecutiveness of enrolment and the quality of data. It was decided to extend this activity to 4 registries in approximately 30 countries and this will be implemented in the second half of 2013

CLINICAL PRACTICE GUIDELINES

Excellent progress has been maintained during 2012 in this strategically important area. Highlights include:

- Published new Clinical Practice Guidelines covering Heart Failure, Valvular Heart Disease with EACTS, and Acute Myocardial Infarction
- Also published a focused update of Guidelines for Atrial Fibrillation, joint societies' CVD Prevention, and joint Expert Consensus Document on the Universal Definition of Myocardial Infarction
- Issued all new Clinical Practice Guidelines in a variety of formats including traditional printed, abridged Pocket, smartphone and tablet versions, Essential Messages, and Slide-sets, downloadable free of charge from the ESC website
- Developed Summary Card: a new free educational product that brings abridged versions of Guidelines to General Practitioners, Nurses and other medical professionals
- Announced intention to launch new Guidelines at ESC Congress 2013, covering Diabetes, Arterial Hypertension, Stable Coronary Artery Disease, and Cardiac Pacing
- Set in motion Task Forces in a number of areas including Non-Cardiac Surgery, Pulmonary Embolism, Myocardial Revascularisation, Aortic Diseases, and Hypertrophic Cardiomyopathies
- Worked closely with National Guidelines Coordinators to implement ESC Clinical



Practice Guidelines – more than 50 joint ESC Guidelines' Sessions were organised at National Cardiac Society congresses

- Developed new features on the ESC website to promote Guidelines-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 access to all congress webcasts and presentations on Guidelines topics in a few easy clicks
- Developed a process to oversee possible discrepancies between the ESC Clinical Practice Guidelines and other ESC documents written by Associations, Working Groups, and Councils

JOURNALS

- The European Heart Journal (EHJ) continued to break records:
 - Significant growth in the number and quality of submissions have allowed an increase to 48 issues/year
 - Its Impact Factor has reached a new high of 10.478
- Cooperation between editorial teams has allowed a flexible and rapid process under which high quality papers that cannot be accepted by the EHJ can be transferred to the appropriate sub-specialty journal

- H. Michael Piper's role as editor-in-chief of Cardiovascular Research (CVR) came to an end after 10 years, during which time CVR became recognised as one of the 2 best basic science journals in the entire CV field
- All ESC Journal Family members registered an increase in their Impact Factors
- A high level ESC task force is examining ideas for the ESC's long term publishing strategy and includes external consultants, journal editors, book editors, ESC Board members, and key European Heart House staff

BOOKS

- Work began on the second ESC Textbook of Intensive & Acute Cardiac Care and the second ESC Cardiovascular Imaging Textbook
- Authoring work is almost completed on the first of three Preventive Cardiology textbooks plus its accompanying 'How to' handbook – publication is scheduled for Spring 2014
- Successful publisher negotiations led to permission for all ESC Textbooks to be included within the ESC's online learning platform, ESCeL
- After a Polish version of The European Cook Book (published in 2010 to aid the European Heart for Children charity) a German translation is now in preparation

Membership

NATIONAL AND AFFILIATED CARDIAC SOCIETIES

The ESC has continued to encourage participation by both National and Affiliated Cardiac Societies in our core scientific and educational activities. Projects of common scientific interest have increasingly become a feature of this vital cooperation. The ESC eLearning platform, for instance, was launched at the ESC Congress in Munich to harmonise training across Europe and has been discussed widely at leadership meetings of several National Cardiac Societies. To enhance collaboration, Joint Scientific Sessions were organised during the annual congresses of 26 National and 10 Affiliated Cardiac Societies. This important initiative aimed to increase scientific exchange and promote the wider implementation of ESC Guidelines. The ESC was present with a stand at the congresses of 14 National Cardiac Societies, while representatives of the leadership made visits to a further 27 National Cardiac Societies. The ESC Spring Summit 2013 was the opportunity to present a forward look at the Health & Diseases landscape to 2025 and discuss the ESC's strategic role as a scientific cardiovascular medicine institute. Furthermore, the 20th anniversary celebrations of the European Heart House were kicked off during this event.

- Kazakhstan officially joined the ESC member countries at the General Assembly in Munich bringing the total of National Cardiac Societies to 55.
- Macau and Panama signed their affiliation agreements with the ESC at the ESC Congress in Munich bringing the total of Affiliated Cardiac Societies to 36.
- The network of national young cardiologists groups has been extended to 28, while younger members involved in ESC Cardiologists of Tomorrow initiative have increased their participation in ESC activities
- The one-day scientific sessions organised by the ESC Cardiologists of Tomorrow at Congress was a great success.
- The visibility of the young cardiologist community was enhanced through the Cardiostars interviews, the Congress News article, and a meeting gathering all young cardiologists of the ESC.
- 533 young cardiologists from National Cardiac Societies and Affiliated Cardiac Societies benefited from free registration at the ESC Congress.
- The ESC search engine was launched, a tool which gives access to the content of the various journals of the National Cardiac Societies through the ESC website thus improving visibility and raising Impact Factors.
- The 4th edition of the 'Meet the Editors' session was a great success at the ESC Congress.

FELLOWS

The prestigious community of Fellows was celebrated at the ESC Congress 2012 opening ceremony. The ESC is proud to have extended membership of this prestigious community to individuals from around the world and formally recognised and welcomed 130 Fellows and 2 Nurse Fellows on this occasion.

COUNCILS

The ESC has established five councils as part of its operating structure. Four of those councils bring together cardiologists, nurses and other allied professionals with common interests in particular fields of cardiovascular medicine from the perspective of science, diagnosis, treatment, and prevention. They work closely with the specialties to give leadership, best practice, advice, and guidance on key areas of the cardiovascular disease lifecycle. The fifth council addresses the provision of specialist nursing care and technician services.

COUNCIL ON CARDIOVASCULAR PRIMARY CARE (CCPC)

Chair: Professor Arno Hoes, FESC

Aim: To focus on prevention and patients

2012 HIGHLIGHTS:

- Participated in writing 6 ESC guidelines
- Participated in reviewing 4 ESC guidelines
- Co-organised the one-day programme on general cardiology for physicians, nurses, and technicians at the ESC Congress

COUNCIL ON BASIC CARDIOVASCULAR SCIENCE (CBCS)

Chair:

Professor Barbara Casadei, FESC, 2012-2014

Professor Axel Radlach Pries, FESC, 2010-2012

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

2012 HIGHLIGHTS:

- Introduced a new grant to allow one researcher to spend a year in a European research laboratory:
 - Open to candidates of all nationalities
 - This Basic Research Fellowship grant amounts to €25 000
- Granted 60 travel awards to young basic scientists to attend the ESC Congress 2012
- Distributed 25 'First Contact Initiative' grants:
 - These allow young scientists to establish contact with hosting institutions with the aim of obtaining a fellowship or research affiliate position
- Presented 2 Outstanding Achievement Awards to honour basic scientists in the early

stage of their careers

- Proposed 28 sessions for the ESC Congress 2013:
 - Result of a new pre-scope process to gather proposals directly from the community
 - Rearranged them for submission to the Congress Programme evaluation

COUNCIL ON CARDIOVASCULAR NURSING AND ALLIED PROFESSIONS (CCNAP)

Chair:

Doctor Donna Fitzsimons, NFESC, 2012-2014

Doctor Kaat Siebens, FESC, 2010-2012

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

2012 HIGHLIGHTS:

- Increased membership to over 1300 from 67 countries
- Renamed the CCNAP annual congress 'EuroHeartCare' in order to:
 - Reflect the multi-disciplinary profile of the CCNAP and to widen its international appeal
 - Encourage new membership from allied health professionals and other medical colleagues
- Held first EuroHeartCare Congress 22 to 23 March 2013 in Glasgow, United Kingdom:
 - Programme composed of 10 pre-arranged sessions and 8 abstract-based sessions
 - 189 Abstracts submitted
 - 401 participants from 35 countries
 - 8 exhibitors

— Awards given to three best oral abstract presentations, three best moderated posters and one overall best abstract

- Introduced first pre-congress Masterclass covering how to successfully present research for publication
- Distributed 10 travel grants for the CCNAP annual congress and 10 for the ESC Congress
- Amended the CCNAP Post-Doctoral Mentoring Programme to enhance long-term impact and improve outcomes:
 - Awarded 2 Post-Doctoral mentorships
- Began preparation of 3 scientific papers for publication in mid-2013
- Improved the Impact Factor of the European Journal of Cardiovascular Nursing to 1.7, and increased the number of issues to 6/year
- Participated in the writing of 5 ESC Guidelines and review of 4 ESC Guidelines
- Continued to prepare nursing sessions for the ESC Congress and (in collaboration with 2 other Councils) the one-day programme on general cardiology for physicians, nurses and technicians
- Continued collaboration with other nursing communities in Europe and the USA

COUNCIL FOR CARDIOVASCULAR IMAGING (CCVI)

Aim: To promote excellence in cardiovascular imaging through collaboration of individual modalities, supporting clinical practice, and facilitating patients' pathways from diagnosis to treatment

No Activities to report for this period

COUNCIL FOR CARDIOLOGY PRACTICE (CCP)

Chair:

Associate Professor Gonzalo Baron Esquivias, FESC, 2012-2014

Doctor Per Anton Simes, FESC, 2010-2012

Aim: To bring together practising 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.

2012 HIGHLIGHTS:

- Attended the ESC Congress 2012 in Munich:
 - Participated in symposia on cardiopulmonary exercise testing and the Take Home Message Session
 - Co-organised the one-day programme on general cardiology for physicians, nurses and technicians
- Increased E-journal subscribers to over 52 000
- Increased subscriptions to the CCP newsletter to over 2200
- Worked jointly in symposia together with the Collegio Federativo di Cardiologia (twice), the Czech Cardiac Society, and the Hellenic Association of Practicing Cardiologists
- Participated in the 2012 Tuniso-European Cardiology Meeting
- Conducted a survey to provide a snapshot of various aspects of private practice in Europe
- Introduced a hosting programme to stimulate exchange and to allow private practice cardiologists to observe daily routine in other countries
- Participated in the writing of 11 ESC Guidelines and review of six ESC Guidelines

ASSOCIATIONS

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, R&D, diagnosis, treatment, management, and prevention. The six ESC Associations are registered branches within the society's legal structure. Each has a leadership team which defines strategy and goals, supported by dedicated ESC support staff in charge of implementation and day-to-day operations. Associations are responsible for communications and education programmes within their domain of expertise, and they each organise a sub-specialty congress and publish a journal.



ACUTE CARDIOVASCULAR CARE ASSOCIATION (ACCA)

President: Professor Peter Clemmensen, FESC, 2012-2014

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

2012 HIGHLIGHTS

- Completed the transition from Working Group to Association that was approved by vote at the ESC General Assembly in Munich (August 2012)
- Increased membership to 3070
- Launched the EHJ- ACVC Journal (4 issues per year)
- Organised the first annual Acute Cardiac Care Congress in Istanbul, October 2012:
 - 608 Abstract submissions, 378 accepted
 - 1430 participants from 70 countries
- Prepared a scientific paper for publication: 'How to use high-sensitivity cardiac troponins in acute cardiac care'



EUROPEAN ASSOCIATION OF PERCUTANEOUS CARDIOVASCULAR INTERVENTIONS (EAPCI)

President: Doctor Jean Fajadet, FESC, 2011-2014

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

2012 HIGHLIGHTS

- Increased membership by 20% to 4470 representing 118 countries
 - 770 new members in 2012
- Maintained a strong focus on educational initiatives:
 - Provided 2 research and training grants
 - Organised a European Interventional Fellows course in Krakow, Poland
 - Expanded and updated websites with new educational content
 - Launched the ESC eLearning platform in interventional cardiology leading to a certificate of excellence in training in interventional cardiology (February 2013)
- Participated in the organisation of a successful EuroPCR course (EAPCI annual congress) with 11 387 participants:
 - 910 abstracts submissions of which 589 were selected
 - 700 clinical cases submissions of which 528 were selected
 - 65 hours of live cases transmissions from 14 live centres
- Adopted PCR London valve course as the official EAPCI valve course
- Organised jointly with the ESH and PCR, the first Resistant Hypertension Course (RHC) in Berlin:
 - From 2014, RHC will become an official course of EAPCI
- Made significant contribution to ESC Clinical Practice Guidelines
- Contributed to Transcatheter Valve Intervention pilot sentinel registry under the EURObservational Research Programme
- Participated in the publication of EuroIntervention Journal monthly and the PCR-EAPCI Percutaneous Interventional Cardiovascular Medicine Textbook
- Supported the 'Stent for Life' initiative:
 - Launched the ACT NOW. SAVE A LIFE public campaign
 - Expanded geographic coverage and data collection on reperfusion therapy for ST elevation acute myocardial infarction
- Held the first EAPCI Summit dedicated to the ESC eLearning platform, involving representatives from 31 interventional Working Groups



EUROPEAN ASSOCIATION FOR CARDIOVASCULAR PREVENTION AND REHABILITATION (EACPR)

President: Associate Professor Stephan Gielen, FESC, 2012 - 2014
Doctor Pantaleo Giannuzzi, FESC, 2010 - 2012

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

2012 HIGHLIGHTS

- Increased membership by 23% to 3421 – representing over 70 countries
- Prepared and published a number of new scientific papers, including:
 - Clinical recommendations for cardiopulmonary exercise testing data assessment in specific patient populations (EACPR/AHA Joint Scientific Statement)
 - Secondary prevention in the clinical management of patients with cardiovascular diseases. Core components, standards and outcome measures for referral and delivery (EACPR Cardiac Rehabilitation Section)
 - Population-level changes to promote cardiovascular health (EACPR Prevention, Epidemiology and Public Health section)
 - Importance of characteristics and modalities of physical activity and exercise
- Organised EuroPrevent 2012 in Dublin, Ireland
 - Over 1700 participants and 55 scientific sessions, including joint sessions with the Japanese Association for Cardiac Rehabilitation (JACR)
 - Change to the EACPR Executive Board with Associate Professor Stephan Gielen as EACPR President, and Professor Antonio Pelliccia announced as EACPR President-Elect
- Organised the European Forum on CVD Prevention in Clinical Practice at the ESC Congress 2012 Munich, with over 80 participants
- Organised the EACPR Winter Meeting in Paris, bringing together the 70 volunteers working on the Association's scientific and educational initiatives
- Delivered significant educational initiatives:
 - Training courses on cardiac rehabilitation, research methods and cardiopulmonary exercise testing in cardiology
 - Master class on preventive cardiology covering hypertension
 - Launch of the EACPR knowledge module on the ESC e-Learning platform, ESCeL
- Contributed to the 2012 European Guidelines on CVD Prevention in Clinical Practice:
 - Launch of a revised Health Professional toolkit
 - Development of an interactive Guidelines Learning Tool
 - Training of National CVD Prevention Coordinators
- Achieved an impact factor of 3.903 for the European Journal of Preventive Cardiology



HEART FAILURE ASSOCIATION (HFA)

President: Professor Stefan Anker, FESC, 2012-2014

Professor Piotr Ponikowski, FESC, 2010-2012

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.

2012 HIGHLIGHTS

- Increased membership by 18% to 7200
- Organised a series of Meetings and Congresses, including:
 - Heart Failure Congress, Belgrade, Serbia, 19 to 22 May 2012 – 3700 participants
 - Winter Research Meeting, Les Diablerets, Switzerland, 23 to 26 January 2013 – 110 participants
 - HFA Summit, Belgrade, Serbia, October 2012 with Presidents of National Heart Failure Societies/Working Groups
- Prepared the Heart Failure Congress, Lisbon, Portugal 25 to 28 May 2013 – record number of abstract submissions received (over 1400)
- Achieved an Impact Factor of 5.247 for the European Journal of Heart Failure
- Developed the Online Heart Failure education programme on ESCeL – 6 modules produced
- Prepared and published scientific papers on a range of topics in the field of heart failure further to International Workshops
- Finalised the Advanced Heart Failure Curriculum
- Collaborated with ESC EurObservational Research Programme on Heart Failure Long Term Registry and Peripartum Cardiomyopathy Registry
- Provided research fellowships to young scientists and nurses
- Increased the number of visits to the patient website, www.heartfailurematters.org, by 75% compared to 2011 – now receiving 70 000 visitors/month
- Organised Heart Failure Awareness Day, 10 - 12 May 2012 with 35 countries participating
- Designed a Global Heart Failure Awareness Programme including the writing of a white paper on heart failure



EUROPEAN ASSOCIATION OF CARDIOVASCULAR IMAGING (EACVI) (FORMERLY EUROPEAN ASSOCIATION OF ECHOCARDIOGRAPHY (EAE))

President: Professor Patrizio Lancellotti, FESC, 2012-2014

Doctor Luigi Badano, FESC, 2010-2012

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

Background to the new European Association of Cardiovascular Imaging (EACVI)

The European Association of Echocardiography (EAE) has broadened its scope to enable it to better adapt to the challenges faced in cardiovascular imaging and to provide a better response to patient needs. At the EuroEcho Congress in December 2012, the following changes were announced to take effect in 2013:

- The Association's name will become the European Association of Cardiovascular Imaging (EACVI)
- A new Board will be elected for a 2-year term
- The EACVI's Congress will be known as 'EuroEcho-Imaging'
- The new journal title will be EHJ-Cardiovascular Imaging

The formation of the EACVI is a major step on the journey to improved diagnosis and treatment pathways.

2012 HIGHLIGHTS

- Increased membership by 10%, now almost 3000 representing over 100 countries
- Organised EuroEcho 2012, the annual Meeting in Athens, Greece with 2876 participants from 70+ countries and over 120 sessions
- Achieved an Impact Factor of 2.317 for the European Journal of Cardiovascular Imaging
- Continued to develop innovative educational tools:
 - Launched the Pocket Size Echo Course at EUROECHO 2012
 - Launched the WikiEcho initiative at EUROECHO 2012
 - Completed the first part of the Virtual Echo book
 - Refreshed the Echo Box on 3D
 - Delivered 10 live Online Courses (Webinars)
 - Posted slides and webcast content from congresses and courses
- Organised 4 teaching courses in collaboration with the National Working Groups on Echocardiography from Poland, Bulgaria, Romania, and Italy
- Commenced work on 8 recommendation papers and published 1 paper jointly with the American Society of Echocardiography (ASE)
- Developed a wide range of educational products including a Compendium of all 19 full text recommendations published since 2009, 3 abridged recommendations, and 3 scientific posters in collaboration with the ASE
- Continued initiatives to focus on its Club 35 younger cardiologists – which now represent almost 25% of the EACVI membership – including new web track and dedicated sessions at EUROECHO
- Encouraged greater collaboration:
 - Continued a joint initiative with the ASE to involve manufacturers and software developers in a programme aimed at standardising quantification of myocardial deformation (strain) among vendors
 - Strengthened the links with the 54 National Societies and Working Groups of Echocardiography to best meet the educational and professional needs of members
 - Enlarged its international network and established better relationships with 10 international Sister Societies from North and South America, Asia and the Middle East



EUROPEAN HEART RHYTHM ASSOCIATION (EHRA)

President: Professor Angelo Auricchio, FESC, 2011-2013

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

2012 HIGHLIGHTS

- Increased membership to 1600
- Organised successful EHRA sessions during Cardiostim 2012 with 31 EBAC accredited EHRA scientific sessions
- Increased commitment to educational initiatives:
 - 470 members attended professional training courses, including Invasive Cardiac EP and Cardiac Pacing, ICD and Cardiac Resynchronisation and, for the first time, an EHRA Basic EP course in Egypt
 - 250 members and allied professionals took the EHRA examination
 - 25 training fellowship programmes awarded including 4 fellows from sister societies
 - Launched the EHRA section of the ESCeL platform
 - Held 8 webinars and measured a dramatic increase in traffic to the EHRA website
- Published scientific papers in EP EUROPACE and reports on relevant topics, including:
 - ISHNE / EHRA Expert consensus on remote monitoring of cardiovascular implantable electronic devices (CIEDs)
 - HRS / EHRA / ECAS Expert Consensus Statement on Catheter and Surgical Ablation of Atrial Fibrillation, also available in Russian
 - Pathways for training and accreditation for transvenous lead extraction
 - EHRA / HRS Expert consensus statement on cardiac resynchronisation therapy in heart failure
 - EP EUROPACE supplement dedicated to the White Book
 - EU study on how telemonitoring can make cardiac implant therapy more efficient and cost-effective
- Launched the EHRA Key Messages project to develop A6 booklets that provide a concise summary of relevant scientific documents in a convenient format
- Published 2 EHRA Key Messages booklets:
 - Comprehensive risk reduction in patients with atrial fibrillation
 - Pathways for training and accreditation for transvenous lead extraction
- 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 and the implications of those variations on device management (this project is funded by the EU through its FP7 Framework Programme)
- Held EHRA ICD for Life Summit in Belgrade, Serbia to focus on Sudden Cardiac Death (SCD) in Eastern Europe



WORKING GROUPS

The ESC has 18 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 community of cardiology, and develop educational tools. The contribution of the Working Groups to the ESC's overall mission continues to rise. Total membership of the 18 Working Groups is now 5700, compared with 5800 members in 2011 for 19 Working Groups. This represents an increase of 170 % since 2005.

Key highlights include:

- Members have become much more involved in the scientific programme of the ESC Congress, preparing and reviewing ESC Clinical Practice Guidelines, and submitting position papers for journals
- Thanks to the allocation of funds from the ESC Board, all 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
- Increased visibility of Working Groups through re-designed web content and additional promotional materials:
 - Allows direct access to specific sub-specialty projects as well as cross-promotion to the entire ESC community
- Launched dedicated newsletters focusing on Working Group activities and aimed at enhancing communication with the membership:
 - These are used 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

Collaboration between Working Groups and Associations

Activities to further improve collaboration between the ESC Working Groups and Associations have been continued during 2012, focusing on the extensive scientific expertise within the Working Groups and the added value this brings. A good example is the close collaboration between EACVI and the Working Groups on Nuclear Cardiology and Cardiac Computed Tomography, and Cardiovascular Magnetic Resonance, in the form of:

- Jointly designed sessions at sub-specialty congresses
- Participation in editorial boards of the EAE Journal
- An active role in sub-specialty congresses programme committees

The early development of cardiovascular imaging modalities has benefited from the formation of interest groups with the main purpose being to promote and develop single imaging modalities. Such strong and close collaboration is foreseen to evolve into a unified structure in future.



European Affairs

A key element of the ESC mission is to secure a policy environment favourable to cardiovascular health. The ESC is the leading scientific organisation in this field and engages in a constant dialogue with national governments, European institutions, and other influential bodies. The ESC's European Affairs Committee develops initiatives and builds relationships so that progress is made across a number of fronts:

- **REGULATORY AFFAIRS** – establishing an open dialogue and exchange with European authorities on regulatory aspects
- **REGISTRIES** – ensuring political support for the development of comparable CVD data in the European Union
- **PREVENTION** – stimulating the development of national strategies to combat heart disease, while providing practical tools to act both at population and individual level
- **RESEARCH** – improving the standards of cardiovascular research in Europe through the identification and promotion of research needs and priorities

In addition, the ESC is well established as an expert and enthusiastic member of a number of European alliances and bodies, it plays a lead role in strategically important EU-funded projects, and consults with industry through the Cardiovascular Round Table to debate future strategic topics that will impact cardiovascular health.

REGULATORY AFFAIRS

• **Regulation of medical devices in Europe** – The ESC Board appointed a Task Force on Medical Devices to respond to the European Commission's proposal for medical devices regulation, published in September 2012. The ESC was invited to share its views at several workshops organised by the European Parliament. Meetings were held with several key MEPs during the year to explain the ESC's views on device regulation in Europe that would best guarantee patient safety while also encouraging innovation. The Task Force on Medical Devices also participated in the Stakeholders Forum of the International Medical Devices Regulatory Forum (IMDRF) held at the European Heart House on 20 May 2013. The ESC called for a greater involvement of medical professionals in the regulation of medical devices worldwide, in particular in the definition of standards. In addition, ESC experts regularly participate in the European Commission Medical Devices Expert Group (MDEG) and Working Group on Clinical Investigation and Evaluation (CIE) meetings. The ESC is currently contributing to the revision of a

document on the clinical evaluation of coronary stents alongside colleagues from the European Association of Percutaneous Cardiovascular Interventions (EAPCI).

• **Dialogue with the European Medicines Agency (EMA)** – In 2013, the ESC was accepted as a member of the EMA Working Party with the Healthcare Professionals' Organisations (HCPWP), after having been a long-time member of the Healthcare Professionals Working Group. During the 2012-2013 financial year, the ESC was pleased to share its expertise covering two EMA consultations; one on the need for revision of the guideline of medical products used in weight control and one on the prevention of stroke and systemic embolic events in patients with non-valvular atrial fibrillation. EMA experts are also invited to participate in the ESC regulatory workshops organised by the ESC Cardiovascular Round Table.

• **Clinical Trials regulation** – The ESC recently published a position paper on the



European Commission's proposal for the revision of the Clinical Trials Regulation on Medicinal Products for Human Use, which is currently being debated in the European Parliament and the Council.

REGISTRIES

• **Comprehensive data collection across Europe** – In December 2012, the ESC convened all stakeholders involved in the collection and/or analysis of data related to cardiovascular diseases to a workshop on CV registries and data standards in Brussels. Proposed actions resulting from the workshop include:

- Create an ESC-dedicated task force on standardisation, which will pick up the important task of agreeing common definitions which was started by CARDS (Cardiology Audit and Registration Data Standards) in 2004

- Set-up a 'registry of registries' of CVD data, to avoid duplication, coordinate collection, and allow interoperability of data collected across Europe

- Cooperate with international organisations and European projects, to join forces on relevant initiatives

PREVENTION

• **Revision of the Tobacco Products Directive** – With tobacco causing 28% of CVD deaths in men aged 35 to 69 years old and 13% of women in the same age range, the ESC could only express its views on the long-awaited proposal from the European Commission to revise the Tobacco Products Directive. The experts from the European Association for Cardiovascular Prevention and Rehabilitation (EACPR) offered invaluable expertise resulting in a position paper shared with EU policy makers.

RESEARCH

• **Workshop on Personalised Medicine** – A workshop entitled 'Personalisation of Cardiovascular Medicine: Opportunities and

Challenges' was organised by the ESC European Affairs Committee with the participation of industry representatives in February 2013. The aim was to define the current status of personalised cardiovascular medicine and its potential, and to identify areas in which patients would benefit from better care. The workshop also mapped out a horizon for future developments of personalised medicine. A scientific strategy paper resulting from the workshop is being drafted which will be shared with the European Commission to influence EU research funding for 2013.

ALLIANCES

• **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 to:

- Facilitate and improve biomedical research in Europe and increase funding

- Develop a framework for better training and mobility of young researchers in Europe

- Improve public understanding of medical science 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 of Europe. The Alliance is currently promoting the creation at EU level of the European Council for Health Research (EuCHR), which should include a scientific-led strategic body that can steer research and innovation across the entire health spectrum. Professor Karin Sipido, professor in cardiology at the Leuven University Hospital and the editor-in-chief of the Cardiovascular Research journal, is president-elect of the Biomed Alliance.

- **European Chronic Diseases Alliance (ECDA)**

– The ESC is a founding member of the European Chronic Diseases Alliance, an unprecedented alliance of ten not-for-profit European organisations. These organisations address specialty areas including cardiovascular diseases and diseases of the kidney, liver and lungs, as well as hypertension, diabetes and cancers. During the past period, the ECDA responded to the European Commission consultation on the Reflection Process on chronic diseases. Alliance members were also very active in putting together an EC grant application under the European Union's Health Programme for a project titled "Economics of Chronic Diseases" (EConDA), led by the UK Health Forum. The application was successful and the project will receive a grant of approximately €800 000. EConDA's main objective is to help EU Member States develop, select and implement more cost-effective policies to improve chronic disease prevention and impact upon populations with the highest rates of premature deaths from chronic diseases and to reduce health inequalities.

- **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 EU and raise CVD as a priority on the EU political agenda. The Group, which meets three to four times a year, is currently one of the largest health discussion forums within the European Parliament, supported by 69 MEPs from 25 EU Member States. The ESC and the European Heart Network (EHN) manage the MEP Heart Group Secretariat. At its last meeting entitled 'The Battle Against Tobacco, Cancer and Heart Disease', the MEP Heart Group, along with MAC (MEPs against Cancer), discussed the European Commission's long-awaited proposal to revise the Tobacco Products Directive (February 2013). The Group also organised two awareness raising events – on World Heart Day (September 2012)

and Valentine's Day (February 2013) - aimed at policymakers and stakeholders in the EU arena.

EU FUNDED PROJECTS

- **EuroHeart II**

– The ESC, the European Commission, the European Heart Network (EHN), and 29 other health-related and academic organisations are working together in a project called EuroHeart II. This project focuses on cardiovascular disease (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 is a three-year project which has received co-funding from the European Union, in the framework of the Health Programme. The EuroHeart II project began in mid-2011 and will run until mid-2014. In September 2012, the European Heart Network and the European Society of Cardiology published the 2012 edition of European Cardiovascular Disease Statistics. Regional workshops were organised throughout 2012 to share knowledge on nutrition, physical activity, and the prevention of CVD in Europe. Seminars were also organised for the cardiovascular patient community.

- **CardioScape**

– CardioScape is an EU-funded project that will conduct a survey of the European CVD research landscape, from which expert opinion can guide investment into identified research gaps, highlight areas where coordination could be improved, and help prioritise future research. The project relies on National Cardiac Societies as a primary source of information on national research landscapes. The Steering Group and Scientific Committee are fully engaged in collecting data on CVD research throughout Europe, along with project partner, PNO Consultants. The CardioScape report and recommendations will be published mid-2014.



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 16 pharmaceutical and medical equipment manufacturers.

List of participating companies:

AstraZeneca

Abbott Vascular

Bayer Healthcare AG

Boehringer-Ingelheim

Bristol-Myers Squibb Company

GlaxoSmithKline

F. Hoffmann-La Roche

Medtronic

Merck Sharp and Dohme

Novartis Pharma

Pfizer Inc

Philips Healthcare

Sanofi

Servier International

Siemens Medical Solutions

St Jude Medical

Highlights of CRT activities during the year included:

- **Regulatory activities:** The CRT continued to progress the scientific dialogue established with regulatory authorities on the requirements for registration in specific therapeutic areas. In June 2012, a workshop was held on the topic 'The Large Simple Study', with the objective of addressing the increasing complexity, size, duration, and costs of conducting cardiovascular trials. The workshop also considered whether there were ways to conduct trials more efficiently and at less cost that could be agreed by all stakeholders.
- **R&D activities:** The CRT organised 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 October 2012, a workshop was held on the topic of 'Health-related quality of life as a key outcome parameter in cardiovascular medicine'. In February 2013, a workshop addressed the topic of 'Personalisation of Cardiovascular Medicine: Opportunities and Challenges'.

- **Innovation:** The CRT is concerned that the growing burden of CVD is not being addressed properly because of limited funding for R&D as well as increasing regulations, cost-containment and reimbursement issues. To raise awareness on the urgent need for all stakeholders (including European Union, National Health and Financial Authorities, Academia, Medical Societies, Industry, Not-for-Profit Organisations, and Patients Groups) to discuss these challenges, the CRT is preparing two white papers:
 - The first paper considers the decline in CVD-related R&D innovation in the pharmaceutical sector
 - The second paper will address similar issues in the technology sector
- **4 new work streams have been identified for 2013:**
 - Addressing issues and concerns in the field of 'Technology Innovation'
 - Addressing issues faced by 'Innovation in drug development'
 - Focus on 'Comparative effectiveness of research'
 - Focus on 'Improving access to clinically and economically proven therapies'

Treasurer's Report

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

- The **European Society of Cardiology**, which deals with the not-for-profit professional association and profit-making commercial activities
- **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 2013 — Euros

	31/3/2011	31/3/2012	31/3/2013
Turn over	44 414 534	54 260 426	46 460 460
Other operating income	7 119 252	6 037 505	6 283 665
Consumables	-10 972	-27 247	-12 194
Compensations and wages	-8 772 874	-9 350 201	-10 206 486
Other charges	-39 440 592	-48 494 723	-40 757 208
Fiscal Charges	-704 709	-703 030	-669 098
Depreciation and provisions	-539 275	-100 995	-774 433
OPERATING PROFIT	2 065 365	1 621 736	324 696
Financial Result	889 386	928 624	1 074 687
NET SURPLUS ON ORDINARY ACTIVITIES BEFORE TAXATION	2 954 750	2 550 360	1 399 383
Extraordinary items	106 258	-55 860	2 090
Corporate taxes	-940 211	-807 358	-420 718
GROUP SURPLUS FOR THE PERIOD	2 120 796	1 687 143	980 755
Notes :	<i>K Euros</i>	<i>K Euros</i>	<i>K Euros</i>
Operating income and expenses include sales and purchases of hotel rooms for	13 001	14 116	11 658

ESC GROUP - Consolidated Sheet

March 31st 2013 — Euros

ASSETS	31/03/2011	31/03/2012	31/03/2013
Intangible assets	192 322	122 209	217 264
Tangible assets	5 042 091	4 841 921	4 845 272
Financial Assets	2 136	3 186	49 765
TOTAL FIXED ASSETS AND INVESTMENTS	5 236 549	4 967 316	5 112 301
Deffered taxation	67 278	17 718	58 015
Inventories and WIP	1 099 898	991 473	1 027 675
Accounts receivable / Suppliers downpayments	14 064 005	14 319 372	12 282 579
Fiscal and social debtors	2 947 308	1 774 919	1 790 581
Other current assets	11 440 938	3 197 992	3 075 819
Investment securities and cash	34 134 822	43 682 144	41 474 623
TOTAL CURRENT ASSETS	63 754 249	63 983 618	59 709 292
NET ASSETS	68 990 798	68 950 935	64 821 594

LIABILITIES	31/03/2011	31/03/2012	31/03/2013
Non refundable funds	4 849 260	4 849 260	4 849 260
Investments reserves	25 597 782	27 718 578	29 405 722
Surplus for the year	2 120 796	1 687 143	980 755
TOTAL MEMBERS FUNDS	32 567 838	34 254 981	35 235 737
Deffered taxation	55 289	37 963	37 903
Provisions for liabilities and charges	753 772	435 430	642 251
Financial long term debt	1 298	0	0
Accounts payable	5 033 880	6 179 505	4 094 792
Fiscal and social creditors	2 781 410	2 942 355	3 392 693
Other Creditors	27 797 312	25 100 701	21 418 218
TOTAL CURRENT LIABILITIES	36 422 960	34 695 954	29 585 858
NET LIABILITIES	68 990 798	68 950 935	64 821 594

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 2012-2013 show a profit before tax of €1.4 million, which compares favourably to the budget of €0.3 million. Net profit after tax is €1 million. There has been a €1.2 million decline in the operating result as compared to last year mainly due to the increase in activities of the ESC internal constituent bodies (associations and working groups in particular) and slowing of the industry hospitality which has impacted the revenue generated by the registration fees of the Munich ESC congress.

Nevertheless the industry has maintained its overall support to the ESC activities but in a different way

Total ESC revenue (excluding hotel room sales) was €41 million. This is higher than the last comparable year without Europace (FY2010-2011) €38.5 million.

Operating profit:

As mentioned in the ESC business reporting a €0,5 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.

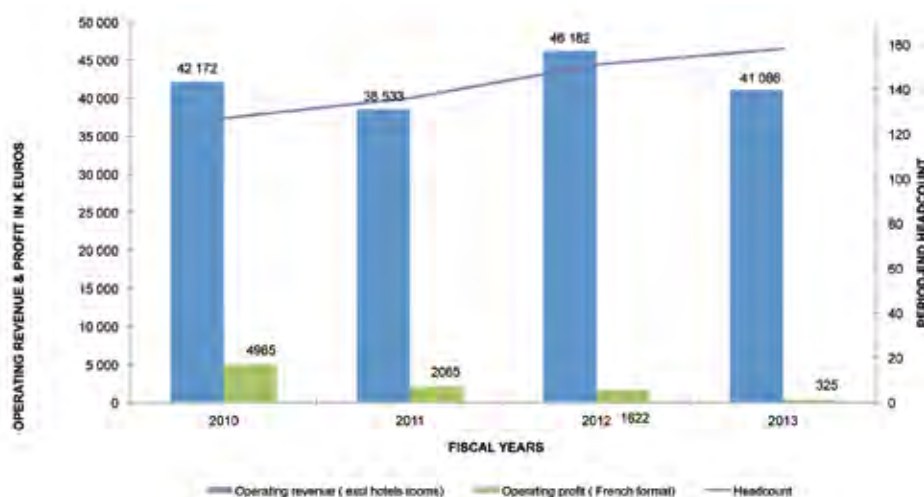
✧ During the year, €622k were spent on related activities and six new Guidelines were approved and released

✧ Education in Cardiology: the department is now focussed on providing services regarding distance learning, webinars, MCQs and courses. The ESC has continued its investment in the development of its online educational platform with a second version including, in addition to the sub specialities general cardiology, and produced new multiple choice questions (MCQs) and webinars. In addition, the ESC and the sub-specialities have started to invest in the development of educational materials. Six ETPs have been organised.

• EORP (Registries)

The multi-registries and multi-sponsors programme (EORP) started in October 2009 and has continued its implementation. Eleven registries are currently on-going. Income and expenses are recognised according to the completion method. Based on the signed sponsoring agreements and the ongoing discussions with potential sponsors, and also taking into account an extension of the

GROWTH IN GROUP ANNUAL REVENUE, PROFIT & HEADCOUNT



programme scope, the now six-year project is considered as being break-even. Quality control of data entries has been introduced as part of the programme. Revenue and costs have been assessed at €1,133k during the current fiscal year for the EORP main program and €849 k for the prevention.

• Journals and book publishing

Journals (including Associations) and book publishing have generated a total contribution of €3,899k. The EHJ remains the major royalty contributor with a €1,768k contribution (compared to €1,674k last year). A new journal EJ Acute Cardiac Care, has been launched by the ACCA newly created association. Regarding book publishing, sales of pocket Guidelines generated a revenue of €1,502k compared to €736k last year.

• Congresses

Seven congresses were organised in 2012; the ESC Congress, Heart Failure, Euroecho, ACC, Europrevent, FCVB and EuroHeartCare. The congresses generated a contribution of €9,007k. Two congresses generated a loss: Euro Heart Care (-€106k) and FCVB (-€64k). Financial contribution of the 2012 ESC Congress in Munich was €7,983k

• Advocacy and Representation

There are now 3 541 Fellows and Nurse Fellows within the ESC. 15 companies are part of the Cardiovascular Round Table.

The new representation office opened in Brussels in February 2013 will facilitate the development of the ESC role as a policy making organization.

• Board and committees

Board and committee expenses at -€1,736k show a -€925k decrease compared to last year which included cost of studies in connection with the review of the business model.

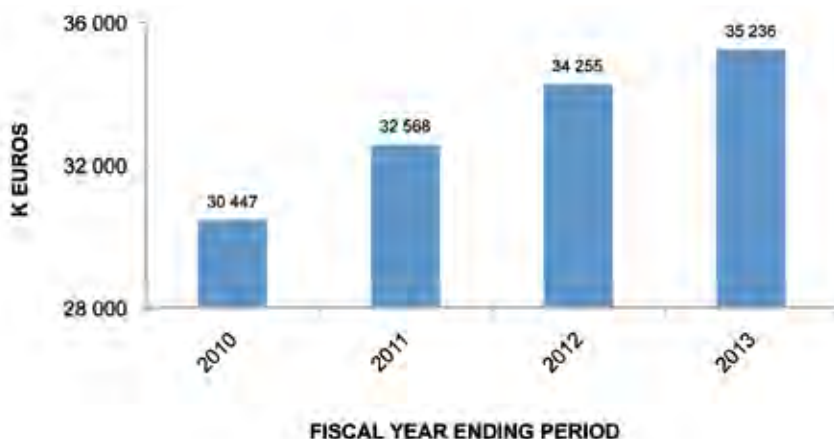
• Associations

The six Associations and the Working groups have generated a €492k contribution during 2012/13. Nevertheless, direct support to the Associations and Working groups has been funded by ESC Central for €793k. 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 MEMBERS FUNDS



ESC FINANCIAL RESULTS by divisions (ESC reporting)

FISCAL YEAR	FY 2012/2013	FY 2013/2014
Description	Actual	Budget
INCOME :		
CONGRESS & MEETINGS	27 331 204	32 562 810
EDUCATION IN CARDIOLOGY	486 828	685 875
EUROOBSERVATIONAL RESEARCH PROG	2 011 217	1 711 925
PRACTICE GUIDELINES	55 000	95 000
JOURNALS	7 506 642	6 103 207
COMMUNICATION & PRESS	6 154	7 000
ADVOCACY : CRT & EU AFFAIRS	705 914	1 304 121
ADVOCACY : NCS, ACS & FESC	1 321 851	1 633 161
EHH & MAINTENANCE	0	0
MGT / FINANCE / HR	5 962	0
TECHNOLOGY & BUSINESS SERVICES	0	0
BOARD & COMMITTEES	188 013	150 922
WG & COUNCILS MGT	0	0
ASSOCIATIONS MGT	0	0
<i>Total ESC CENTRAL</i>	<i>39 618 784</i>	<i>44 254 022</i>
HEART FAILURE ASSOCIATION	1 293 953	1 851 198
EUROPEAN ASSOCIATION OF ECHOCARDIO	619 595	1 424 648
EUROPEAN HEART RHYTHM ASSOCIATION	1 473 243	3 087 947
EUROPEAN ASS. OF PERCUTANEOUS CVR INTERVENT	609 487	702 500
EAPCR ASSOCIATION	526 415	768 128
ACCA ASSOCIATION	0	477 261
WORKING GROUPS	331 043	245 275
<i>Total ASSOCIATIONS</i>	<i>4 853 736</i>	<i>8 556 957</i>
INTERNAL BILLING ADJUSTMENTS	-3 568 746	-6 903 190
OPERATING INCOME	40 903 774	45 907 789
EXPENSE :		
CONGRESS & MEETINGS	-19 592 944	-24 287 905
EDUCATION IN CARDIOLOGY	-1 151 901	-1 230 238
EUROOBSERVATIONAL RESEARCH PROG	-1 792 116	-1 636 925
PRACTICE GUIDELINES	-676 740	-845 000
JOURNALS	-4 632 933	-4 605 958
COMMUNICATION & PRESS	-1 659 008	-1 762 548
ADVOCACY : CRT & EU AFFAIRS	-765 232	-1 541 940
ADVOCACY : NCS, ACS & FESC	-340 014	-514 450
EHH & MAINTENANCE	-1 173 200	-1 248 373
MGT / FINANCE / HR	-3 308 142	-3 180 224
TECHNOLOGY & BUSINESS SERVICES	-1 775 458	-1 957 966
BOARD & COMMITTEES	-1 924 091	-1 692 231
WG & COUNCILS MGT	-305 361	-223 668
ASSOCIATIONS MGT	-487 621	-532 818
<i>Total ESC CENTRAL</i>	<i>-39 584 759</i>	<i>-45 260 245</i>
HEART FAILURE ASSOCIATION	-1 116 548	-1 719 245
EUROPEAN ASSOCIATION OF ECHOCARDIO	-621 589	-1 130 632
EUROPEAN HEART RHYTHM ASSOCIATION	-1 456 037	-2 786 695
EUROPEAN ASS. OF PERCUTANEOUS CVR INTERVENT	-548 070	-687 780
EAPCR ASSOCIATION	-421 250	-743 943
ACCA ASSOCIATION	0	-323 180
WORKING GROUPS	-197 831	-239 620
<i>Total ASSOCIATIONS</i>	<i>-4 361 325</i>	<i>-7 631 094</i>
INTERNAL BILLING ADJUSTMENTS	3 568 746	6 903 190
OPERATING EXPENSE	-40 377 338	-45 988 150

ESC FINANCIAL RESULTS by divisions (ESC reporting)

FISCAL YEAR Description	FY 2012/2013 Actual	FY 2013/2014 Budget
RESULT :		
CONGRESS & MEETINGS	7 738 260	8 274 905
EDUCATION IN CARDIOLOGY	-665 073	-544 363
EUROOBSERVATIONAL RESEARCH PROG	219 101	75 000
PRACTICE GUIDELINES	-621 740	-750 000
JOURNALS	2 873 709	1 497 250
WEB, COMMUNICATION & PRESS	-1 652 854	-1 755 548
ADVOCACY : CRT & EU AFFAIRS	-59 318	-237 819
ADVOCACY : NCS, ACS & FESC	981 837	1 118 710
EHH & MAINTENANCE	-1 173 200	-1 248 373
MGT / FINANCE / HR	-3 302 180	-3 180 224
TECHNOLOGY & BUSINESS SERVICES	-1 775 458	-1 957 966
BOARD & COMMITTEES	-1 736 078	-1 541 309
WG & COUNCILS MGT	-305 361	-223 668
ASSOCIATIONS MGT	-487 621	-532 818
<i>Total ESC CENTRAL</i>	<i>34 025</i>	<i>-1 006 223</i>
HEART FAILURE ASSOCIATION	177 404	131 953
EUROPEAN ASSOCIATION OF ECHOCARDIOGRAPHY	-1 993	294 016
EUROPEAN HEART RHYTHM ASSOCIATION	17 206	301 252
EU. ASSOCIATION OF PERCUT. CVR INTERVENTIONS	61 417	14 720
PREVENTION ASSOCIATION	105 165	24 185
ACCA ASSOCIATION	0	154 081
WORKING GROUPS	133 212	5 655
<i>Total ASSOCIATIONS</i>	<i>492 411</i>	<i>925 862</i>
OPERATING RESULT	526 436	-80 361
FINANCIAL INCOME	1 027 714	700 000
FINANCIAL EXPENSES	-82 315	0
CONTINGENCY PROVISIONS	-42 369	-370 826
CONSOLIDATION ADJUSTMENT	32 863	
FINANCIAL RESULT	935 893	329 174
RESULT before Tax	1 462 329	248 813
PROFIT SHARING	0	0
CORPORATE TAX	-481 574	0
CARRY BACK	0	0
RESULT after Tax	980 755	248 813

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, 2013, 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, 2013 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 22, 2013

The statutory auditors
ERNST & YOUNG Audit
French original signed by
Anis Nassif

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, 2013

Statutory auditors' report
on the consolidated financial statements

ERNST & YOUNG Audit



European Society of Cardiology

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