Cardiology in Europe – the ESC: Mission, Vision, Threats, Opportunities

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President
What is the ESC?

• A volunteer led, not-for-profit medical society

• Our members are health care professionals

• ESC volunteers are world renowned experts

• A source of high quality, evidence-based science

• Ensures objectivity, transparency and integrity
Who is the ESC?

- A global society that identifies CV trends
- addresses inequalities and shares best practice
- to improve standards of care for patients
WHAT COMES NEXT?
Changing from EU to global?
Increasing input of Affiliates
How the ESC works

- The ESC is governed by an elected Board
- The ESC’s activities are overseen by 26 committees
- Over 2,000 cardiology experts volunteer their time and energy
- 5,000 cardiology experts contribute to ESC activities
- >7,000 volunteers
- The ESC employs 180 staff, managed by a Chief Executive Officer
Sustainability?

Volunteers (doctors) limited by:

- fewer doctors
- increasing bureaucracy
- increasing workload
- resulting in more burnouts
Full spectrum of cardiology

The ESC covers the full spectrum of cardiology through its 27 cardiovascular subspecialty communities.
Why the ESC exists

Cardiovascular disease remains the world’s, biggest killer

- 17.5 million deaths globally (31% of all deaths)
- 3.9 million deaths per year in Europe (45% of all deaths)
- CVD costs the EU economy an estimated \textbf{210 billion Euros} per year

80% of premature heart disease and stroke is preventable
Age pyramid for Europe in 2004

Projected potential healthcare expenditure growth by 2040
Health expenditure as share of GDP, percent

Key
- 2040 High
- 2040 Baseline
- 2007
FINANCIAL AFFORDABILITY?
WHO WILL PAY?
MAIN ISSUES OF HEALTH CARE

• Patients access to new pharma & medical devices

• Health care systems affordability

• Health care systems sustainability
Mission Statement

To reduce the burden of cardiovascular disease
Cardiology in and outside of Europe: one common goal

Core Strategic Objectives:

• Advocate for quality of care
• Application standards and guidelines
• Disseminate high quality scientific knowledge
• Build community of cardiovascular specialists
• Serve interests of our patients

Working together to make a difference
Core activities of the ESC

- **Constituent bodies:**
  National Cardiac Societies
  Associations, Working groups and Councils

- **International Affairs:** Affiliated Cardiac Societies (outside ESC)

- **Education:** Congress, ESCel, Guidelines, Journals

- **External relations:** Advocacy and policy making
National Cardiac Societies

- Backbone of the society
- Leadership meetings – rotating schedule every 2 years
- Joint sessions at NCS meetings
- Booth at NCS meetings
- NCS have input at every level of ESC (congress, education, guidelines etc)
Our roots are European
Our reach is global
EU REGIONAL DISPARITIES; INEQUALITIES?
FINANCIAL AFFORDABILITY?
The NW vs SE axis
Also: global disparities
EU / USA versus
South Africa, South America, (partial) Asia
ESC Associations

Strong partners, fulfill the need of subspecialisations, with specialised congresses and Journals

ACCA
Acute Cardiovascular Care Association

EACVI
European Association of Cardiovascular Imaging

EAPC
European Association of Preventive Cardiology

EAPCI
European Association of Percutaneous Cardiovascular Interventions

EHRA
European Heart Rhythm Association

HFA
Heart Failure Association
**ESC Working Groups and Councils**

**Councils:** cardiologists meeting non-cardiologists e.g. basic scientists, GPs

**Working Groups:** small, specific structures, high level of expertise
FRAGMENTATION?

But also: Changes in industry support - sustainability?
ESC, Industry & CME – reasons for concern

**MedTech Europe Code -- Implementation of Code 1 January 2018**

- Bans direct support of healthcare professionals for third party educational events

- Why?
  - 1. reduces spending
  - 2. organize promotional courses
  - 3. avoid conflict of interest
ESC response:

Position Paper in EHJ

“The Future of Continuing Medical Education: the Roles of Medical Professional Societies and the Healthcare Industry”

The ESC Board; EHJ 2018 – thanks – Peter Kearney
Driving Reaction & Action Together

Comprehensive Communication Plan with Biomed Alliance
(= the medical community)

Call for action:

Industry partners to work with European medical societies
for a collaborative, independent approach to CME
(stop solo « industry education »)
We need you:

- Share the EHJ publication with your members
- Share with local regulators
- Share your contributions with us
- Together we are stronger
Focus for now and the future

- Membership
- Education
- Advocacy, representation of the community
Membership

- Intensify the collaboration with National Cardiac Societies
- Connect with the Associations, WGs, Councils
- Develop the concept of “personalised” membership: tailor the needs of individual members to the ESC products
EU INEQUALITIES?
AFFORDABILITY?
Industry support?
Personalised membership

- Expand investment in affiliate societies
- Invest in the young generation
You are a young cardiologist? Discover your ESC Young community

Cardiovascular Imaging

Interventional Cardiology

General Cardiology

Basic & Translational Science

Electrophysiology

Acute Cardiovascular Care

Heart Failure Specialists of Tomorrow

Thrombosis Researchers

ESC Working Group Thrombosis

EHRA Young EP

ESC CARDIOLOGISTS OF TOMORROW

HoT

EACVI Heart Images of Tomorrow

-young

科学家的

TOMORROW

ESC Young Community

Scientists Of Tomorrow

YOUNG ACCA

European Society of Cardiology
GENERATION GAP?
FEMINISATION of MEDICINE
Needs-Driven Education

Robust, unbiased, education built on a strong, evidence-based foundation
Education: ESC Congress

World leading cardiology congress

FAST FACTS

- Size: 33,000
- Largest cardiology conference
- Involvement NCS, Assoc and WGs
- International – global character
- 150 countries
EU and GLOBAL INEQUALITIES?

Industry support model?
How to continue? Develop distance learning

- General cardiology and subspecialties
- Interactive, MCQs
GENERATION GAP?
EU INEQUALITIES?
How to continue?

- Fundament for 1 EU education
- Opportunity for close collaboration with NCS
- Tailor the education towards local needs
- Development of EU accreditation / certification
- Potential for expanding to affiliates (non-ESC countries)
Education: Guidelines

✓ EU (and beyond) recognised authority and standard for cardiology practice
✓ 40 + countries endorsing ESC guidelines
✓ Broad clinical topics
✓ Well accepted by National Cardiac Societies and beyond
Very high and accelerating downloads levels

- 1.2 2014
- 2 2015
- 3.5 2016
RCT vs REAL WORLD?

Future of the RCT with new regulations
EURObservational Research Programme
- Represent real world data
Advocacy, policy making, lobbying

Celebrating the FIVE year anniversary of the European Heart Agency this year!
Mission for 2016-2018

✓ To stabilize
✓ To protect
✓ To further develop

– continuity in line of action
Mission for 2016-2018: subtle adjustments
Challenges of ESC

- Maintain healthy financial situation
- Maintain worldwide recognition
- Avoid fragmentation
- Avoid loss of focus
ESC Strategic plan
2016-2020
The 3 threats for medical doctors

Increasing bureaucracy

No more interaction with industry
   Education?
   Innovation?

Interference of E-health
   Google
Projected Future of Imaging

THOUSANDS, TEN THOUSANDS, HUNDREDS OF THOUSANDS OF DATA SETS

CLINICAL OUTCOME

Supercomputer

ARTIFICIAL INTELLIGENCE
MACHINE LEARNING
DEEP LEARNING
“BIG DATA”

PREDICTION RULES
DIAGNOSES
TREATMENT RECOMMENDATIONS

1. Relationships and no causality
2. Will improve diagnostic accuracy
3. Will improve prognosis
4. Will replace much of the work currently done by radiologists and pathologists

Algorithms rather than medical knowledge

Predicting the Future — Big Data, Machine Learning, and Clinical Medicine

Obermeier & Emanuel, NEJM 2016
This lecture has shown you the potential challenges we all face. Together we can turn these threats into opportunities. And together we will shape the future of cardiology.