



Annual Report 2006



European Heart Network

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Director's Message

The European Heart Network (EHN) is a membership organisation. EHN's members are its *raison d'être*. They give the EHN its strength, its breadth and its depth. The joint vision of preventing and reducing premature death and disability from cardiovascular diseases (CVD) unites the members of the EHN from north to south, from east to west. Cardiovascular diseases remain the number one killer in the European Union – and indeed in Europe as a whole.

However, the mortality from CVD is higher in central and eastern Europe. Therefore, EHN has a strategic aim to strengthen heart foundations in this part of Europe. In 2006, EHN held a capacity building workshop for EHN members as well as dedicated individuals from countries where there are no heart foundations. The workshop was held in Slovenia and was co-organised with the Slovenian Heart Foundation.

EHN will continue its efforts to support and build strong heart foundations in Europe. Strong foundations are essential in ensuring that governments throughout Europe put in place effective policies and measures to promote cardiovascular health and prevent cardiovascular disease while also rectifying the significant inequalities in Europe.

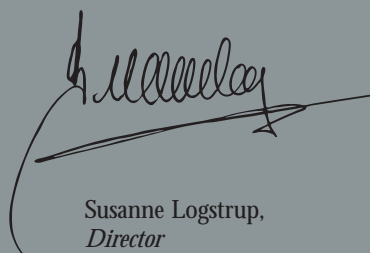
Over the last few decades, mortality rates from cardiovascular diseases have been brought down. However, the steep increase in overweight and obesity, extremely worrying trends in themselves, threaten to reverse the decreasing rates of CVD mortality. To tackle overweight and obesity, especially among children and young people, EHN together with a majority of its members started a 32-month long project "Children, Obesity and Associated Avoidable Chronic Diseases" in 2004. The project was completed in October 2006. During the project, heart foundations across Europe disseminated the information they had gathered to a wide range of allied partners as well as to politicians. They campaigned for protection of children against rampant marketing of unhealthy foods and beverages and they held meetings and carried out consultations with like-minded organisations to achieve consensus on policy options that are deemed to be effective priority actions in counteracting obesity and its related conditions, such as hypertension and clogged arteries. EHN is grateful to the European Commission for its co-funding of the project.

Since its inception, EHN has had a strong focus on nutrition as an important factor in promoting cardiovascular health. EHN calls for a coherent and comprehensive nutrition policy for the EU, which must include prioritised and quantified population dietary goals for foods, with the aim of promoting public health. EHN looks forward to the outcome of the European Commission's wide consultation on its green paper Promoting healthy diets and physical activity: A European dimension for the prevention of overweight, obesity and chronic diseases. We hope that the Commission will propose the adoption of such a policy, which is long overdue. EHN pursues specific objectives to promote healthy nutrition through labelling. In particular, EHN is hopeful that following the adoption of the regulation on nutrition and health claims the European Union will, in due course, adopt legislation on nutrition labelling making both back-of-pack and front-of-pack labelling mandatory and in a format which is easily understandable for consumers. EHN will contribute to this through funding research.

Tobacco control is key to preventing cardiovascular diseases. Considering the devastating effects of exposure to passive smoking, notably on CVD mortality, EHN campaigned for a smoke free Europe throughout 2006. The adoption of legislation banning smoking in public places and workplaces in several European countries is a great triumph for health. The best of this legislation should be emulated in all European countries. In pursuit of this aim, EHN is privileged to work closely together with renowned experts and Europe-wide organisations.

A particular highlight for the EHN in 2006 was the welcoming of two new member organisations, the Lithuanian Heart Association and the Norwegian Association of Heart and Lung Patients.

Both organisations have important roles to play in the EHN in strengthening heart foundations and in guaranteeing a powerful focus on heart and stroke patients in Europe.



Susanne Logstrup,
Director



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Aim

The European Heart Network plays a leading role in the prevention and reduction of cardiovascular disease through advocacy, networking and education so that it is no longer a major cause of premature death and disability throughout Europe.

To achieve its aim, EHN dedicates itself to:

- influencing European policy makers in favour of a heart-healthy lifestyle;
- creating and nurturing ties between organisations concerned with CVD prevention;
- gathering and disseminating information relevant to cardiovascular disease prevention;
- monitoring European Union policy;
- encouraging support for comprehensive cardiovascular disease research.

EHN works through Expert Groups on specific concerns, including:

- nutrition for a healthy heart;
- tobacco policy and discouraging smoking;
- occupational health and psycho-social factors;
- physical activity as a natural part of daily life.

Through its membership of the World Heart Federation (WHF), EHN is also active in international work to advance the cause of cardiovascular health promotion worldwide.

The European Heart Network is a Brussels-based alliance of heart foundations and other concerned non-governmental organisations throughout Europe.

Annual Workshop

Heart Foundations – Their Role in Cardiovascular Health Promotion and Cardiovascular Disease Prevention

The 2006 Annual Workshop of the EHN took place from 17-19 May in Geneva, Switzerland. It was attended by 45 delegates from 21 countries, representing 23 EHN member organisations. Several representatives from the World Heart Federation (WHF) also attended the Workshop, which was hosted by the Swiss Heart Foundation. Dr Gaudenz Silberschmidt, Vice Director of the Swiss Federal Office of Health, delivered the keynote speech. He presented the challenges for prevention of heart disease in Switzerland where, within cardiovascular diseases, myocardial infarction is the main cause of death. He also showed that cardiovascular diseases constitute the main reason for hospitalisation. Dr Silberschmidt explained that Switzerland has no legal basis for prevention. The tasks of prevention fall on many actors such as national, cantonal and communal authorities, semi-public organisations and NGOs. Prevention represents only 2.1% of Swiss health expenditures (2003). Dr Silberschmidt also spoke about the concern that the Swiss population's life style characteristics represent: 36% of men and 25% of women are smokers; 53% of men and 58% of women are not engaging in physical activity; and 46% of men and 30% of women are overweight. He also pointed out that 17% of men and 13% of women have high cholesterol levels; 19% of the Swiss population has arterial hypertension and 4.2% of men and 3.7% of women over 15 years of age are affected by diabetes.

Professor Sir Michael Marmot spoke about the inequality challenge. He presented the results of the Whitehall study showing a difference in age-adjusted mortality from coronary heart disease between high-level administrators on the one hand, and employees characterised as 'other', who are nearly twice as likely to die from coronary heart disease. Professor Marmot covered a wide range of studies on the relationship between coronary heart disease and various work and non-work stress factors. He informed the delegates about the Commission on Social Determinants and Health which was set up by the World Health Organization (WHO) in 2005 and which he chairs.

In a session on secondary prevention, introduced by Dr Mogens Lytken Larsen, Medical Director of the Danish Heart Foundation, presentations were made by Professor David Wood on the European guidelines on prevention of cardiovascular disease in clinical practice and their implementation, and by the Finnish, the German and the Swiss Heart Foundations as well as by the Norwegian Association of Heart and Lung Patients on their work to ensure good conditions for patients.

Representatives from the Belgian Heart League, the Finnish Heart Association, and the Hellenic, Netherlands and Slovenian Heart Foundations presented key mass media campaigns run by their organisations during the previous 12 months. Following a presentation on pan-European development of guidelines to tackle child obesity, in the context of the EHN-led European project on "Children, Obesity and Associated Avoidable Chronic Diseases", given by Dr Tim Lobstein from the International Association of Consumer Food Organizations, representatives from the British, Danish and Irish Heart Foundations spoke about their organisations' activities to counter child obesity through lobbying, information campaigns and programmes in schools and kindergartens. Representatives from the British and the Irish Heart Foundations also presented their programmes to improve workplace health.

A session on creating supportive environments heard the Director of the EHN and the Director of the World Heart Federation (WHF) speak about awareness and advocacy efforts at European and international level aiming at addressing cardiovascular health promotion and cardiovascular disease prevention. Corinne Vaughan from the Nutrition Strategy Branch of the Food Standards Agency (FSA) in the UK spoke about the FSA's strategic plan. The plan includes reducing salt intake for adults to no more than 6g per day in 2010, reducing saturated fat intake from 13.4% to 11% of food energy by 2010, and developing targets to achieve a balance between calorie intake and energy output. More specifically, Ms Vaughan presented the FSA's campaign on salt, which included an information campaign to increase the population's knowledge in general, cooperation with NGOs at community level to access the hard-to-reach population groups, and work on nutrition labelling through claims and signposting. FSA's work on salt also included a dialogue with the food industry with a view to having it re-formulate its products to reduce the salt content.

The 2006 General Assembly officially accepted two new member organisations, the Lithuanian Heart Association and the Norwegian Association of Heart and Lung Patients.



Publications

EHN regularly publishes papers that are evidence-based and contribute to understanding the burden of cardiovascular diseases, the underlying risk factors and the measures needed to prevent them.

In 2006, EHN published three main papers.

- Lifting the smokescreen – 10 reasons for a smoke free Europe (February 2006)
- Stress and cardiovascular disease (August 2006)
- Review of 'front of pack' nutrition schemes (September 2006)

Lifting the Smokescreen – 10 Reasons for a Smoke Free Europe

This research document, published jointly with the European Respiratory Society, Cancer Research UK and the Institut National du Cancer, France, found that over 79 000 people die from passive smoking every year in the European Union. Of these, almost 61 000 deaths are from coronary heart disease and stroke. The paper shows the cost-effectiveness of smoke free policies and refutes the idea that introducing smoke free laws leads to less business for bars and restaurants. Demonstrating that there is strong public support for smoke free policies, it also analyses the successful introduction of smoke free laws in several European countries.



Stress and Cardiovascular Disease

Scientific research on the relationships between stress, psychosocial factors and cardiovascular disease has been ongoing for several decades. Physicians, psychologists, psychiatrists and heart patients themselves all agree that stress plays a significant role in the incidence and course of heart disease. Determining the precise nature of that role, however, is complex, as it depends on the interaction of numerous factors, both personal and societal. The EHN paper summarises the latest research on several factors that contribute to stress in both working and private life and recommends ways to counter these stress factors.

Review of 'Front of Pack' Nutrition Schemes

The review was one of EHN's commitments in the framework of the European Platform for action on diet, physical activity and health.

The purpose of the review was to gain insights into the extent to which 'front of pack' schemes are used, the way in which such schemes might operate; presentation issues (i.e. the format, for example traffic lights, descriptive words, symbols); the nutritional criteria used; and whether there has been any developmental research or evaluation.

All EHN publications are available for consultation or downloading on the EHN website www.ehnheart.org



Conferences and Meetings

During 2006 EHN organised as well as participated in a number of conferences and meetings on different issues relevant to promoting cardiovascular health and preventing cardiovascular disease.

Healthy Europe – 26 January 2006, Brussels, Belgium

A one-day conference organised by the European Voice. The Director of the EHN was a panellist in a session on “Confronting Europe’s Major Health Scourges”.

International Association for the Study of Obesity/World Health Organization Consultation with Non-Governmental Organisations and Professional Networks for the WHO European Ministerial Conference on Obesity – 21-22 February 2006, Brussels, Belgium

The meeting brought together some 16 European NGOs and professional networks active in counteracting obesity at various levels. The organisations agreed on a number of key messages to be reflected in the WHO European Charter on Counteracting Obesity and to be conveyed to the WHO Ministerial Conference on Obesity. The Director of the EHN participated in this two-day meeting.

Women’s Health at Heart, Promoting Cardiovascular Health and Preventing Cardiovascular Disease – 7 March 2006, Brussels, Belgium

A conference organised by the EHN and the European Society of Cardiology (ESC) with a view to examining specific issues around women and cardiovascular disease, to galvanise more EU support for combating cardiovascular diseases and to call upon the Council of Ministers to adopt an EU Recommendation on a European cardiovascular strategy. The conference, which was held under the auspices of the Austrian EU Presidency, brought together Member State Ministry of Health officials, EU institution officials, politicians, and patient and professional group representatives (see also page 9). The conference was supported by an unrestricted grant from Pfizer, GlaxoSmithKline and Novartis.

Tobacco Control Policies – 27 April 2006, Brussels, Belgium

A one-day EHN members’ seminar reviewing three specific issues: tobacco excise duties, smoke free laws and harm reduction.

World Health Organization Technical Meeting on Marketing Food and Non-alcoholic Beverages to Children – 2-5 May 2006, Oslo, Norway

As part of the implementation of the WHO Diet and Physical Activity Strategy, WHO Headquarters and the WHO European Regional Office have started to work on the important issue of marketing food and non-alcoholic beverages to children. The May 2006 technical meeting, co-hosted by the Directorate for Health and Social Affairs of Norway, was the first activity. The Director of the EHN participated in this meeting.

Capacity-building Workshop for Heart Foundations – 12-13 June 2006, Ljubljana, Slovenia

On the 12th and 13th of June 2006, EHN organised a special workshop for heart foundations and concerned individuals from the central and eastern European countries in Ljubljana, Slovenia. The aim of the workshop was to improve strategic planning skills to enable the participants to establish or consolidate heart foundations, with a view to attracting more and more stable funding. Participants came from Slovenia, Georgia, Lithuania, Russia and Poland. The President of the EHN attended the workshop and spoke about elements for a successful heart foundation.

World Congress of Cardiology – 2-6 September, Barcelona, Spain

The World Congress of Cardiology was jointly organised by the World Heart Federation (WHF) and the European Society of Cardiology (ESC). At the conference, EHN and ESC organised a joint session on “Developments in the European Union on Diet and Physical Activity”. Robert Madelin, Director-General of the Directorate General for Health and Consumer Protection, Dr Francesco Branca, World Health Organization European Region, and Karen



Lock, London School of Hygiene and Tropical Medicine, spoke at this session. The Director of the EHN co-chaired the session together with Professor Ferrari, President-Elect of the ESC.

Fifty-sixth session of the World Health Organization Regional Committee for Europe – 11-14 September 2006, Copenhagen, Denmark,

A submission in support of the WHO European Strategy for the Prevention and Control of Noncommunicable Diseases was made on behalf of the EHN and the World Heart Federation (WHF). Susanne Volqvartz, Board member of the EHN, attended this meeting and gave a speech on behalf of EHN and the WHF.

Health in all Policies – 20-21 September 2006, Kuopio, Finland

A high-level expert conference held under the Finnish EU Presidency. Peter Hollins, President of the EHN, was invited to speak in a parallel thematic workshop on “Nutrition and Physical Activity: Policies for Counteracting the Epidemic of Chronic Diseases”.

Towards a Smoke-Free Europe: What Next on Tobacco Control? – 27 September 2006, European Parliament, Strasbourg, France

Jules Maaten, Member of the European Parliament liberal group (ALDE), hosted a lunch for colleagues in the European Parliament debating the rationale for and how to ensure the best possible smoke free policies throughout the European Union. The Director of the EHN was invited to speak, together with Fiona Godfrey from the European Respiratory Society.

World Congress of Public Health Nutrition – 28-30 September 2006, Barcelona, Spain

At this first World Congress of Public Health Nutrition, EHN was invited to be a panellist in a “Roundtable of Food and Beverage Advertising”. The Roundtable was co-chaired by representatives from the Public Health Executive Agency (PHEA) and the WHO European Region. The three speakers came from the European Commission, the Confederation of the Food and Drink Industries of the European Union (CIAA) and the EHN. The roundtable was sponsored by the CIAA. EHN was represented by Maureen Mulvihill from the Irish Heart Foundation.

Heart and Stroke Patients in Europe – 26 October 2006, Brussels, Belgium

A one-day EHN members’ seminar for heart and stroke patients’ organisations on EU developments with an impact on patients and on how to work together more closely.

World Health Organization Ministerial Meeting on Counteracting Obesity – 15-17 November 2006, Istanbul, Turkey

EHN participated in this meeting, also as a member of the European Platform for Diet, Physical Activity and Health (the Platform). The Director of the EHN was invited to present the EHN-led project on “Children, Obesity and Associated Avoidable Chronic Diseases” at a lunch session organised by the European Commission. She was also invited to speak at a forum on Public Private Partnerships organised by the European Commission in the framework of the Platform.

Combating Obesity: a Healthy Eating Strategy for Europe – 5-6 December 2006, Brussels, Belgium

A two-day conference organised by EU Food Law. The conference was a forum for representatives of stakeholders to engage in a debate on strategies for improving nutritional standards across the European Union. Speakers were officials from the European Commission, the European Food Safety Authority (EFSA) and Ofcom (Office of Communications, UK); Members of the European Parliament; representatives of the International Association for the Study of Obesity, the European Consumers Organisation (BEUC), and the European Advertising Standards Alliance (EASA) as well as representatives from Marks and Spencer, Coca Cola, Unilever, Kraft, Nestlé, AC Nielsen and PepsiCo. The Director of the EHN chaired the first day of the conference.

EHN took part in a number of conferences and meetings

Cardiovascular Health in the EU



The cooperation between the European Commission, the World Health Organization Regional Office for Europe, EHN and the European Society of Cardiology continued on a strong basis in 2006 with the development of a European Heart Health Charter that will unite a number of Europe-wide organisations behind stronger action on the promotion of cardiovascular health and the prevention of cardiovascular disease.

The Charter seeks to implement the Council Conclusion on Promoting Heart Health adopted under the Irish Presidency in June 2004 and the Luxembourg Declaration adopted at an expert meeting held under the auspices of the Luxembourg Presidency in June 2005. Moreover, the Charter is in line with the principles adopted in the WHO European strategy on noncommunicable diseases.

In the beginning of 2006, following on from the conference on “Women’s Health at Heart”, EHN and the European Society of Cardiology agreed on a large-scale project, EuroHeart, in which the two organisations commit to implementing specific parts of the 2004 Council Conclusions on Promoting Heart Health and of the Luxembourg Declaration. The two organisations will work together to ensure wide support for the Charter provisions by launching it throughout Europe and translating it into 16 European languages. They will also

- map strategies and policies aiming at tackling cardiovascular diseases, in a large number of European countries;
- draw up a review of women and cardiovascular diseases, including information on research, clinical trials and awareness-raising campaigns;
- ensure wider implementation of the European guidelines on prevention of cardiovascular diseases in clinical practice by assisting with translation and adaptation in countries where this has not yet been done;
- ensure wider availability of HeartScore, a risk prediction programme for health professionals.

In May 2006, EHN and the European Society of Cardiology submitted a request to the European Commission for co-funding of the EuroHeart project. The request was accepted by the Commission and the Public Health Executive Agency (PHEA).

Several Members of the European Parliament, especially those Members who are active in the special health group, continue to support the institutionalisation of a concrete EU strategy to tackle this major health burden. The co-chair of the special health group, Georgs Andrejevs, was actively involved in developing the programme for the “Women’s health at heart” conference, where he also spoke. Dr Andrejevs was in good company. The conference was opened by Ms Maria Rauch-Kallat, Federal Minister for Health and Women in Austria and President of the Health Council in March 2006, and the Keynote address was delivered by Mr Philippe Brunet, Deputy Chef de Cabinet, representing Commissioner Markos Kyprianou. In addition to medical and public health experts, speakers at the conference included politicians from the EU Member States, for example the Minister of Health of Lithuania, a senior Member of the Slovenian Parliament and the Director of the Finnish Ministry of Social Welfare and Health. With strong representations from the ‘new’ EU Member States, the conference emphasised the inequality issues present in tackling cardiovascular diseases.

The proceedings from the conference are available on <http://www.ehnheart.org/files/CVHreportweb-111131A.pdf>



Children and Obesity and Associated Avoidable Chronic Diseases

With co-funding from the European Commission, EHN and partners from 19 European countries worked on the project on “Children and Obesity and Associated Avoidable Chronic Diseases” (CHOB) from March 2004 to October 2006. The aim of the project was to help tackle the obesity epidemic among children and young people in the European Union.

Marketing of Unhealthy Food to Children

The first phase of the project was completed in 2005. It concentrated on the marketing of unhealthy food to children: not because this is the only reason why children are getting fatter, but because it is clearly part of the problem and of growing interest in European policy circles. During this first phase of the project, the national coordinators of national heart foundations collected information on the marketing of food to children in their countries – 20 different European countries – in a standardised way. The information collected covered the type and amount of food marketing to children, the regulation of food marketing, attitudes towards food marketing to children, and counterbalancing measures used to combat any negative effects of current food marketing practices in their countries.

The report of the findings was published in April 2005. It found that:

- The vast majority of food marketing aimed at children is for unhealthy foods, i.e. foods that are high in fat, particularly saturated fat, sugar or salt and low in essential minerals, vitamins and other components important for a healthy diet;
- The amounts spent on such marketing each year are vast;
- Most of this marketing is via television advertising, though there is some evidence that the way food is marketed to children is changing, with a move away from TV to other means such as marketing via the Internet or through schools;
- Most countries have an incoherent patchwork of legal and voluntary controls on the marketing of foods to children. These controls do next to nothing to prevent children from being exposed to the sheer barrage of marketing of unhealthy foods. Even in Norway and Sweden, where there is a ban on TV advertising aimed at children from national TV stations, children are exposed to TV advertising from other countries in Europe.

The report concluded that:

- Stricter controls need to be imposed on food marketing to children at European level. As a first step, the EU’s Television without Frontiers Directive should be amended to prohibit TV advertising of ‘unhealthy’ food to children. Moreover, additional measures will be needed to protect children from all forms of unhealthy food marketing, including that through schools and the Internet;
- There needs to be a common EU definition of an ‘unhealthy’ food. Without clear and agreed definitions on this point, effective regulation of food marketing to protect children’s health will not be possible;
- There needs to be a pan-European monitoring system to monitor the nature and extent of food marketing to children and its regulation. The general picture is clear but more and comparable detail is needed.

Policy Options to Prevent Child Obesity

During the last phase of the CHOB project, running from December 2005 to October 2006, a Europe-wide stakeholder consultation took place with the intention of obtaining consensus on policy options on how to prevent child obesity. These policy options will allow the participating European countries and the organisations involved at European level to set priorities on the prevention and reduction of child obesity.

The framework for the consultation meetings was set by

- the first phase of the CHOB project, which involved member organisations in the collection of information on the current activities relating to counteracting childhood obesity, and
- a parallel EC-funded programme analysing the opinions of stakeholders on obesity prevention across nine Member States (the PorGrow project, coordinated by the University of Sussex).

The report “Policy Options to Prevent Child Obesity”, published in July 2006 by EHN in the context of the CHOB project, establishes the facts that the awareness of the problems connected with child obesity is high and that various national and international measures are being proposed. It discusses the options available, some tools for selecting policy options, international and national approaches as well as the results of the

EHN and partners
from 19 European
countries worked
on the project on:

Europe-wide stakeholder consultations' assessment of policy options carried out in the framework of the CHOB project.

The CHOB report also identifies a large number of environmental (macro and micro) influences on diet, food and physical activity and a significant number of policies for preventing childhood obesity. The PorGrow project selected 20 policy options, and it was decided to focus on the same 20 policy options for the CHOB consultation meetings.

Each of the countries selected five or six top priorities for their work in the next few years. Notwithstanding the differing natures of the participating organisations and the different contexts in which the CHOB stakeholder consultations took place, there was considerable agreement on the top priorities across countries. Overall, participants recognised the need for both upstream and downstream interventions. They also recognised the need for a combination of policies covering a range of different types of options: educational (for children, parents and professionals), informational (labelling, marketing), and modification of the physical environment and the food supply chain (including food services in schools).

The ten policy options that scored highest in the consultations were:

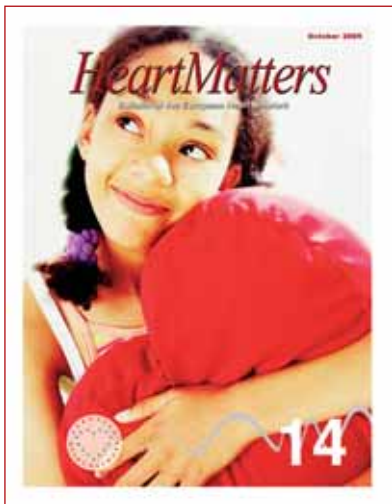
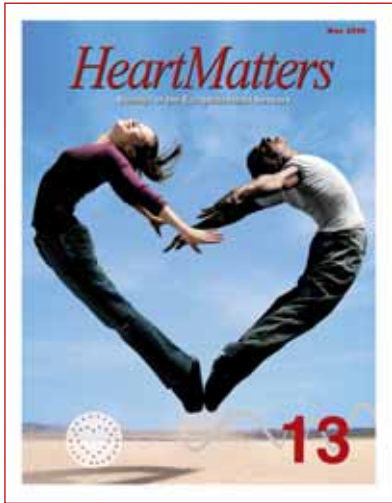
- Food and health education: Include food and health in the school curriculum
- Controlling sales of foods in public institutions: Controls on the provision and sale of fatty snacks, confectionery and sweet drinks in public institutions such as schools and hospitals
- Controls on food and drink advertising: Controls on the advertising and promotion of food and drink products
- Subsidies on healthy foods: Public subsidies on healthy foods to improve patterns of food consumption
- Change planning and transport policies: Encourage more physical activity by changing planning and transport policies
- Improve communal sports facilities: Improve provision of sports and recreational facilities in schools and communities

- Improve training for health professionals: Improve training for health professionals in obesity prevention and diagnosing and counselling those at risk of obesity
- Improved health education: Improved health education to enable citizens to make informed choices
- Common Agricultural Policy reform: Reform of the EU's Common Agricultural Policy to help achieve nutritional targets
- Mandatory nutritional information labelling: Mandatory nutritional information labelling for all processed food, for example using energy density traffic light system.

These options are echoed in measures proposed by international organisations and by national task forces on obesity and national Government policies. In particular, food policies for schools, communal sports facilities/access to parks or green areas and restriction of TV advertising and marketing of unhealthy foods to children are concerns at all levels. Exploring ways of providing healthy foods to a larger segment of the population also features in several proposals, as do education of and information to children and parents about healthy living, including promoting breast feeding and explaining its benefits.

Both reports are available on the EHN website www.ehnheart.org.

“Children and obesity
and associated
avoidable chronic
diseases”



Heart Matters

EHN's bulletin Heart Matters is distributed to approximately 2 000 recipients, including EHN members, national coordinators, European and national alliance members, European Commissioners and Commission officials, Members of the European Parliament, EU Member States' Permanent Health Representatives, European health NGOs, other health organisations world-wide, health professionals, public health experts and concerned individuals.

In addition to Heart Matters being available in hard copy, each issue can be found on the EHN website.

Two editions of Heart Matters were published in 2006:

Heart Matters 13 focused on activities to improve food and nutrition patterns and to increase levels of physical activity. National coordinators highlighted priorities, interventions and policy developments in their countries in pursuit of better nutrition and more physical activity and in counteracting obesity. It featured the "Children's Environmental Health Action Plan" (CEHAP), demonstrating how this is also an important tool for promoting physical activity and reducing obesity. Further to the adoption of the CEHAP in 2004, governments drafted national child action plans and consulted with stakeholders in 2006. The national plans should be ready for the mid-term review of the action plan in 2007.

Heart Matters 14 described the results of the consultations that had been carried out across Europe to arrive at a consensus on the essential elements of a strategy for preventing child obesity. National coordinators reported on specific policy options implemented in their countries, whether by their own organisations, through cooperative efforts or by the governments. Heart Matters 14 also featured a review of social marketing in the UK. The review concludes that underpinning all recommendations is the need to adopt a long-term social marketing approach that encompasses influencing policy and shaping the whole strategic implementation mix.

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HELP – EU-wide Anti Tobacco Campaign

HELP is an EU-funded European media campaign carried out in all the EU Member States.

The objective is to provide information on the health and social consequences of smoking, as well as the personal and collective economic impact, and to let people know about the strategies, interests and practices of the tobacco industry.

In the first phase of the campaign, which started in 2005, the focus was on preventing people, particularly young people, from smoking, helping people stop smoking, providing contact details of quit lines, and raising the awareness of the devastating health risks caused by exposure to passive smoking.

EHN is in the Advisory Board of the HELP campaign where it is represented by its Director.

The focus was on preventing people from smoking, helping people stop smoking and raising the awareness of the health risks caused by passive smoking.

EU Policies

Proposal for a Decision of the European Parliament and the Council Establishing a Programme of Community Action in the Field of Health (2007-2013)

On 6 April 2005, the European Commission adopted a proposal for a decision of the European Parliament and the Council establishing a Programme of Community action in the field of Health and Consumer protection 2007-2013. On 16 March 2006, the European Parliament adopted its first reading opinion. This opinion, following the opinion of the Committee on Environment, Public Health and Food Safety that split the programme into two separate programmes – one on health and one on consumers – concerned only health. It demanded a budget of 1 500 million euros for the duration of the programme. In its recitals section it specified which diseases and conditions make up the major health burden in the EU, and it called upon the Commission to submit proposals for Council Recommendations on the prevention, diagnosis and control of major diseases during the course of the Framework Programme.

In view of the inter-institutional agreement on the Community Financial Framework 2007-2013, which cut the budget for action on health to 365.6 million euros (about 37% of the budget originally foreseen for health activities by the Commission – and significantly less than the budget demanded by the European Parliament), the European Commission adopted an amended proposal for Community action in the field of health. In light of the budgetary constraint, the Commission's amended proposal did not include an action strand on tackling individual diseases. It did, however, include the amendments adopted

by the Parliament regarding the major disease burdens. On 1 December 2006, the Council unanimously reached a political agreement on the health action programme, adopting the same line as the Commission with the emphasis on improving the health condition and promoting a healthy lifestyle and a culture of prevention among children and young people; mainstreaming of health objectives in all Community policies and activities; increasing healthy life years; identifying the causes of health inequalities; and addressing gender- and age-related health issues. The agreement also stresses the necessity of promoting synergies with other related Community programmes and actions.

The three main objectives of the political agreement are set out in Article 2.2:

- Improve citizens' health security;
- Promote health;
- Generate and disseminate health information and knowledge.

Article 2.2 also states that actions to achieve these three objectives shall, where appropriate, support the prevention of major diseases and contribute to reducing their incidence as well as the morbidity and mortality caused by them.

Towards the end of 2006, the European Commission also launched a discussion document for an overarching health strategy. Member States and stakeholders were invited to contribute to the development of key objectives for EU health policy and to assist in defining effective and appropriate implementation and monitoring mechanisms for the health strategy.

EHN regrets the severe cut in the budget for health action in the EU; it is difficult to relate the cut to the otherwise increasing attention at EU level to the importance of the health status of the populations in the EU. It is essential that all EU Member States recognise that the EU has a growing role in addressing noncommunicable diseases and see to it that it addresses the diseases that make up the major health burden, such as cardiovascular diseases.

EHN recommends that the new EU Health Strategy be focused on the promotion of health, ensuring a strong emphasis on the creation of supportive environments as the broader environment is vitally important in addressing whole populations and inequalities.

EHN believes that the emphasis on health in all policies is critically important and must lead to the development of effective tools to enable a correct assessment of the impact that other Community policies have on health and on healthy life years.

Health and Nutrition Claims

On 13 October 2006, the Council of Ministers adopted an EU regulation on nutrition and health claims made on food.

Since the European Commission adopted its proposal for a regulation of the European Parliament and of the Council on nutrition and health claims in July 2003, the proposal has been the object of intense scrutiny and debate. Particularly the provisions on substantiation, nutrient profiling and prohibition of certain claims have been sources of contention.

The European Parliament adopted its first reading legislative resolution in May 2005. In this resolution, the Parliament rejected the notion that only products that meet a certain nutrient profile could bear a nutrition or health claim. In the second reading, the Parliament modified its position, accepting the concept of nutrient profiles as a condition

for a product to bear a claim. However, the Parliament adopted an amendment which allows the use of claims where one ingredient exceeds the nutrient profile if this is indicated in proximity to and with the same prominence as the claim. The Parliament also introduced a special procedure for the use of health claims which are based on newly developed scientific evidence.

The Council was in agreement with the outcome of the Parliament's report in the second reading and adopted it by qualified majority in October 2006. The Danish and Swedish delegations voted against it and the Irish and Dutch delegations abstained.

EHN actively lobbied the European Parliament on the proposal for a regulation on nutrition and health claims during 2006. EHN's lobby focused on keeping nutrient profiles and strict authorisation procedures as conditions for nutrition and health claims and on allowing health charities to continue to use healthy eating logos on products.

EHN welcomes the result of the second reading which acknowledges the concept of nutrient profiles and that these are needed to determine the 'healthiness' of a food product.

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Television without Frontiers

In 2003, the European Commission began a review of the Directive on Television without Frontiers which included a series of public hearings that took place in April 2003. Following the 2003 consultation, the European Commission's Directorate General on Information Society and Media (DG INFSO) established a number of focus groups to review specific issues, including protection of minors, commercial communication and cultural diversity, in more detail.

EHN participated in Focus Group 2 on the "Level of Detail in the Regulation of Television Advertising". In September 2005, EHN submitted its observations to the DG INFSO final consultation process, in which EHN called for a ban on advertising of unhealthy food to children across the EU borders as well as a prohibition on product placement in programmes likely to be viewed by children. EHN based its position on its own research and on the systematic review that had been carried out on by the Food Standards Agency in the UK in 2003, the so-called Hastings review. This review establishes that advertising has an impact on children's food and drink preferences, purchasing behaviour and consumption at both brand level (e.g. which chocolate

bar) and category level (e.g. confectionery versus fruit) that is independent of other factors.

In December 2005, the European Commission adopted its proposal amending the Television without Frontiers Directive. In its proposal, now entitled the Audiovisual Media Services Directive, the Commission prohibited product placement in audiovisual media services for children. Notwithstanding the overwhelming evidence on the impact of advertising of unhealthy foods and beverages on children's diets, the Commission did not include a provision on prohibiting or restricting such advertising to children.

On 13 December 2006, the European Parliament adopted its report in the first reading. The European Parliament went a little further than the Commission, adopting a compromise amendment, merging 12 originally tabled amendments, calling upon the Member States and the Commission to encourage audiovisual service providers to develop a code of conduct regarding children's programming containing or being interrupted by advertising, sponsorship or marketing of unhealthy and inappropriate foods and drinks such as those high in fat, sugar and salt, and of alcoholic beverages.

EHN regrets that the European Commission failed to seize the opportunity for restricting the considerable amount of marketing to children of unhealthy food and drinks by prohibiting or strictly limiting advertising of such food and drinks in audiovisual media, including television.

EHN takes note of the European Parliament's call for the development of a code of conduct regarding commercial communication to children concerning unhealthy foods, defined as foods that are high in fat, sugar and salt. Whereas EHN welcomes the Parliament's well-meaning intention in its report, EHN believes that the Parliament's proposed provision does not go far enough.

EHN calls upon all EU Member States and the European Parliament to adopt EU legislation which, in order to ensure comprehensive protection of all children in the EU, prohibits the broadcasting between 06:00 am and 09:00 pm of audiovisual commercial communications for foods and drinks that do not respect specific nutrient profiles.

Green Paper on "Promoting healthy diets and Physical Activity: A European Dimension for the Prevention of Overweight, Obesity and Chronic Diseases"

In December 2005, the European Commission adopted a Green Paper on promoting healthy diets and physical activity. In its Green Paper, the Commission asked stakeholders a wide range of questions. EHN participated in the consultation, responding to the majority of the questions posed by the Commission.

In its response, EHN drew upon the research it has published in areas such as consumer understanding of nutrition labelling, marketing of unhealthy food to children, the effect of the EU fruit and vegetable policy on the burden of cardiovascular disease, physical activity and prevention of cardiovascular diseases, and children and young people and the importance of physical activity.

EHN pointed out that the Green Paper, although in its title stated that it was on the prevention of overweight, obesity and chronic diseases, did not emphasise sufficiently the considerable impact that a poor diet and physical activity have on major EU health burdens over and above overweight and obesity.

EHN's response is available on <http://www.ehnheart.org/files/EHN%20response-095004A.pdf>

Towards a Reform of the Common Market Organisation for the Fresh and Processed Fruit and Vegetable Sectors

In May 2006, the European Commission launched a consultation asking for contributions to the Commission's hypotheses for the reform of the fruit and vegetable sector.

EHN submitted its contribution and was invited to a briefing meeting to take place in several EU countries on 24-25 January 2007. In its response, EHN recommended:

- influencing supplies to public bodies (schools, hospitals, airports etc.) by giving a suitable slant to calls for tender or to conditions for support;
- making sufficient funds available for interventions to increase fruit and vegetable consumption. The effectiveness of marketing campaigns could be increased by applying the evidence on effective interventions to increase fruit and vegetable intake in adults and children. This should involve targeted programmes;
- coordinating efforts between the health and agricultural sectors to promote fruit and vegetables for maximum effect;
- using the fruit and vegetable regime should promote the reduction and eventual phasing out of withdrawal compensation. This could lead to falling prices which could stimulate the purchase and consumption of fruit and vegetables;
- extending the single farm payment scheme to include fruit and vegetables.

Tobacco Excise Duties

Every four years, the European Commission presents a report on tobacco taxation to the European Parliament and the Council of Ministers. The last report was published in 2001 and a new report was planned before the end of 2006.

Together with the Association of European Cancer Leagues (ECL), the European Network for Smoking Prevention (ENSP), the European Respiratory Society (ERS), Action on Smoking and Health (ASH), Cancer Research UK (CRUK) and the Institut National du Cancer (INCA), France, EHN endorsed a position paper seeking to influence the review in favour of health. The position paper gives clear recommendations in six areas:

Minimum tax rates for cigarettes are too low and the tax rules too complex

Recommendations:

- remove the concept of the most popular price category and apply the tax rules to all price categories;
- remove the 55% maximum threshold for the weight of the specific tax component of the total tax;
- the required tax incidence (VAT and excise duties) on the retail selling price of cigarettes should be at 71% and the overall minimum tax (VAT and excise duties) should not be less than 120€ per 1000 cigarettes from 1 January 2008. The required tax incidence (VAT and excise duties) on the retail selling price of cigarettes should be at 72% and the overall minimum tax should not be less than 130€ per 1000 cigarettes from 1 January 2010;
- where existing tax levels are significantly below these levels, Member States should be allowed to transition to these new minimum excise duty levels. A suggested mechanism would involve using a cost of living index such as Eurostat's Comparative Price Levels of Final Consumption.

Hand rolling tobacco as a substitute for cigarettes

Recommendation:

- gradually increase the minimum tax for fine cut tobacco to the same level as cigarettes by imposing the overall tax (excise duties and VAT) levied on fine-cut smoking tobacco intended for the rolling of cigarettes, which should be equal to at least 60% of the retail selling price inclusive of all taxes, and the overall minimum tax should not be less than 60€ per 1kg from 1 January 2008, to 65% of the retail selling price inclusive of all taxes, and the overall minimum tax should not be less than 70€ per 1kg from 1 January 2010, and up to 70% of the retail selling price inclusive of all taxes, and the overall minimum tax should not be less than 80€ per 1kg from 1 January 2012.

The increase of cross-border shopping in cheaper neighbouring countries

Recommendations:

- reduce the indicative level for cigarettes for personal use when travelling between EU countries to 200 cigarettes;
- establish a maximum of 40 cigarettes for import from outside the Community for personal use.

The launch of discount and low priced cigarette brands

Recommendations:

- favour specific taxation instead of proportional taxation (remove the upper limit for specific taxes) and introduce overall minimum taxation levels (for instance 120€ per 1000 cigarettes);
- commission research on the impact of tobacco companies on tax policy in Europe and the consequences of the break-up of Altria and the spin-off of PMI on tax and price policy in EU countries.

Inventive pricing by tobacco companies

Recommendation:

- ban all cigarette packs which contain fewer than 19 cigarettes.

An increase of counterfeit cigarettes and the risk of smuggling

Recommendation:

- Article 15 of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) contains obligations for the signatory countries to reduce the illegal tobacco trade, but is not detailed and specific enough to be fully effective. What is needed is a protocol that controls the illegal trade in tobacco products. This protocol should be based on similar conventions such as the Protocol against the Illicit Manufacturing of and Trafficking in Firearms, Their Parts and Components and Ammunition, supplementing the United Nations Convention against Transnational Organized Crime. The EU should support the development of such a WHO FCTC protocol to effectively control the worldwide trade in both 'normal smuggled cigarettes' and counterfeit cigarettes.

The paper is available on <http://www.ehnheart.org/files/Tax%20position%20paper-094002A.pdf>

EU Health Forum

The European Commission established the EU Health Forum in 2001 as an information and consultation mechanism. In addition to bi-annual meetings of a group of invited stakeholders (members of the EU Health Policy Forum), this Health Forum holds conferences and exhibition events on a regular basis.

In 2006, the EU Health Policy Forum held meetings on 5 April and 22 November. Two parallel workshops on patient safety and transparency took place the morning of 5 April. In the afternoon, the Commission gave updates on developments in the EU on social policy, labelling, the new health and consumer action programme and nutrition policy. On 22 November, the morning session had two working groups on health services and challenges for a European health strategy. In the afternoon, reports were given about the outcome of the two working groups under the chairmanship of Robert Madelin, Director General of the Directorate-General for Health and Consumer Protection (DG SANCO), and the Commission services updated the members of the Forum on key policy areas, the work of the High Level Group Working Group on Patient Safety; the Commission Communication on Alcohol, the Pharmaceutical Forum and the EU Health Portal. Professor Zatonski, Director of the Cancer Epidemiology and Prevention Division at the Maria Sklodowska-Curie Memorial Cancer Center and Institute of Oncology in Warsaw, Poland, gave a lecture on health gaps in Europe.

EHN was represented at these meetings by its Director. EHN is a core member of the European Health Policy Forum.

Nutrition and Physical Activity Network

Set up in 2003, the Nutrition and Physical Activity Network, which is an EU Member States network, met twice in 2006, in September and in December.

At the September meeting of the Network, Commission services gave information about the European Platform for Action on Diet, Physical Activity and Health, regulatory developments in food labelling and health and nutrition claims and on the outcome of the consultation on the green paper on diet and physical activity. The delegates debated input for work on nutrition and physical activity to the 2007 Work Plan for the Public Health Action Programme (2003-2008). A presentation was made by a representative from the Public Health Executive Agency (PHEA) on the current Commission co-funded projects on nutrition and physical activity. The delegates gave updates on developments in the Member States and the German Ministry of Health informed participants about a two-day conference on prevention of diseases through nutrition and physical activities that would be part of the German Presidency in February 2007. Copies of the Nordic Plan of Action "Healthy Food and Physical Activity" were made available.

More information about the Nutrition and Physical Activity Network can be found in the Minutes of the meeting, available at http://ec.europa.eu/health/ph_determinants/life_style/nutrition/documents/ev_20060925_mi_en.pdf

EHN holds observer status in the Nutrition and Physical Activity Network. The Director of the EHN participated in the September meeting.

EHN is involved in:
The European Health
Policy Forum; The
Nutrition and Physical
Activity Network;

Diet, Physical Activity and Health – a European Platform for Action

The Platform was launched on 15 March 2005 by the EU Commissioner for Health, the Luxembourg Presidency and the Chair of the European Parliament's Committee on the Environment, Public Health and Food Safety. It was created to provide a common forum for all interested actors at European level where they can explain their plans to contribute concretely to the pursuit of healthy nutrition and physical activity, and where their plans can be discussed. Outcomes and experiences from actors' performances can be reported and reviewed so that over time better evidence of what works is assembled and 'Best Practice' is more clearly defined. The Platform operates under the leadership of the European Commission. Its members come from a number of stakeholder groups, including the food and advertising industry, consumer and health organisations and health professionals.

Throughout 2006, the Platform members met on a bi-monthly basis. In addition to the regular plenary meetings, special meetings were organised jointly with the WHO Regional Office for Europe and the US Department of Health and Human Services. A life-skills workshop took place in February to review activities, interventions and research in the area of nutrition and physical activity.

The particular focus of the Platform is on its members' commitments to do more in the area of nutrition and physical activity to enhance health and prevent obesity and diet-related diseases, such as cardiovascular diseases, in the EU. Platform members have made 114 commitments. Details of these commitments are available on the Commission's website (see below). An important feature of the Platform is its monitoring framework, which was adopted by the Platform members at the November Plenary meeting. According to the framework, all members have to report on the implementation process of their commitments.

EHN is a founder member of the Platform.

http://forum.europa.eu.int/Members/irc/sanco/dietphact/info/data/en/plat_index.html?cookie=1

Stakeholder Involvement Peer Review Group

In autumn 2005, the Directorate-General for Health and Consumer Protection (DG SANCO) launched a project looking at ways to further develop the stakeholder involvement process and improve stakeholder engagement. As a result of the project, DG SANCO Stakeholder Consultation Guidelines are meant to be developed.

The Stakeholder Consultation Guidelines should help by: improving the quality of 'Better Regulation' and the governance process; empowering stakeholders and improving the dialogue with stakeholders; and addressing the issue of asymmetry of information and access to information.

To guide the process, DG SANCO established a Peer Review Group involving key stakeholders and experts. EHN was invited to be part of this Group; it was represented by Jane Landon from the National Heart Forum, UK. The Group met four times in 2006.

A draft synthesis report was discussed by the Group at its last meeting in 2006. The findings and the recommendations of the Peer Review Group will be shared and validated at a conference in spring 2007, involving all DG SANCO stakeholders, other DGs and EU institutions, and experts on public participation.

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The Platform and
The Stakeholder
Involvement Peer
Review Group

International

World Health Organization – Regional Office for Europe

Gaining Health – the European Strategy for the Prevention and Control of Noncommunicable Diseases

On 11 September 2006, during its fifty-sixth session, the WHO Regional Committee for Europe adopted a resolution, EUR/RC56/R2, endorsing a comprehensive, action-oriented strategy to address noncommunicable diseases (NCDs).

The strategy was adopted in the acknowledgement of the fact that the burden of diseases and deaths from NCDs in the WHO European Region. NCDs represent 77% of the entire disease burden and 86% of deaths in this region. Cardiovascular diseases represent over 55% of the NCD disease burden and almost 65% of deaths from NCDs.

The goals of the strategy are to avoid premature death and significantly reduce the disease burden from NCDs, improving quality of life and making healthy life expectancy more equitable within and between member states in Europe. The strategy was developed through an extensive consultation with countries, experts, nongovernmental organisations and other stakeholders. It sets out the rationale for action and puts forward a strategic approach for action with a clear vision, goal and objectives, and six key messages for guidance. It proposes a strategic framework to assist WHO member states in strengthening their response to NCDs.

To tackle NCDs, the strategy envisages action which simultaneously:

- promotes population-level health promoting and disease prevention programmes;
- actively targets groups and individuals at high risk; and
- maximises population coverage of effective treatment and care, while systematically integrating policy and action to reduce inequalities in health.

The strategy's six key messages are:

- Prevention throughout life is effective and must be regarded as an investment in health and development.
- Society should create health-supporting environments, thereby also making healthy choices easier choices.
- Health and medical services should be fit for purpose, responding to the present disease burden and increasing opportunities for health promotion.
- People should be empowered to promote their own health, interact effectively with health services and be active partners in managing disease.
- Universal access to health promotion, disease prevention and health services is central to achieving equity in health.
- Governments at all levels have the responsibility to build healthy public policies and ensure action across all concerned sectors.

European Charter on Counteracting Obesity

To address the growing challenge to health, economies and development posed by the epidemic of obesity, the Ministers and delegates from 48 countries attending the WHO European Ministerial Conference on Counteracting Obesity, which took place in Istanbul, Turkey, from 15-17 November 2006, in the presence of the European Commissioner for Health and Consumer Protection, adopted a Charter on Counteracting Obesity.

The process of developing the Charter involved different government sectors, international organisations, experts, civil society and the private sector through dialogue and consultations.

The Charter acknowledges that a balance must be struck between the responsibility of individuals and that of government and society, and that holding individuals alone accountable for their obesity should not be acceptable. It also sets out policy tools calling on Governments to ensure consistency and sustainability through regulatory action, including legislation. It calls for specific regulatory measures to include adoption of regulations to reduce substantially the extent and impact of commercial promotion of energy-dense foods and beverages, particularly to children, with the development of international approaches, such as a code on marketing to children in this area; and adoption of regulations for safer roads to promote cycling and walking.

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World Heart Day

Together with its members, the World Heart Federation organises World Heart Day to make people all over the world aware of the importance of a heart healthy lifestyle. World Heart Day takes place every year on the last Sunday in September.

In 2006, World Heart Day was celebrated on Sunday, 24 September. The theme was "How young is your heart?" EHN decided to focus its World Heart Day message on passive smoking, revealing that passive smoking causes over 79 000 deaths every year in the European Union, over 61 000 of which are caused by heart disease and stroke.

The European Commissioner responsible for health, Markos Kyprianou, also published a statement in support of the objectives of the World Heart Day urging policy makers to recognise the links between heart disease and passive smoking.

The World Heart Federation organises World Heart Day to make people all over the world aware of the importance of a heart healthy lifestyle.

Links with Other Health Organisations

Europe

Cardiovascular Health

European Society of Cardiology

EHN maintains close cooperation with the European Society of Cardiology (ESC). Together, EHN and ESC organise conferences and special sessions and coordinate inputs to EU Presidency initiatives and events. The Presidents and Directors of the two organisations meet twice a year to review joint projects and exchange information on the organisations' strategic priorities (see also page 9 on the women's heart health conference and on the EuroHeart project).

Joint European Societies CVD Prevention Committee

EHN is member of the Joint European Societies Cardiovascular Disease Prevention Committee, which is coordinated by the European Society of Cardiology. The Committee, formed in 1994, oversees the development and implementation of prevention strategies in Europe.

The main objectives of the Committee are to:

- raise the standards of preventive cardiology in daily clinical practice across Europe through an effective implementation strategy;
- encourage national, multi-disciplinary implementation groups;
- develop interactive educational materials based on the new Joint European Guidelines on CVD Prevention;
- develop the potential of the European Society of Cardiology's new European interactive tool for predicting and managing the risk of heart attack and stroke (HeartScore), calibrated for use in individual European countries.

The Committee members are the European Atherosclerosis Society, the European Society of Hypertension, the International Society of Behavioural Medicine, the European Society of General Practice/Family Medicine, the European Association for the Study of Diabetes, the International Diabetes Federation Europe, the Council for Cardiovascular Nursing and Allied Professions, the European Association for Cardiovascular Prevention and Rehabilitation, the European Society of Cardiology and EHN.

EUROACTION

EHN is also a member of the steering group of a demonstration project in preventive cardiology called EUROACTION, which is led by the European Society of Cardiology. The aim of the EUROACTION study, which came to an end in 2006, was to raise standards of preventive cardiology in Europe by demonstrating that the recommended European and national lifestyle, risk factor and therapeutic goals in the prevention of coronary heart disease are achievable and sustainable in everyday clinical practice.

Final results from EUROACTION show that a multi-disciplinary team approach, coupled with the support and involvement of a patient's partner and family, can yield significant lifestyle improvements and risk factor reductions in coronary patients and patients at risk of developing cardiovascular disease.

The results were presented on 3 September 2006 at the World Congress of Cardiology. The detailed description of the project and the results can be found at the link below.

<http://www.escardio.org/EUROACTION>

Public Health in General

EHN continues to be an active member of the European Public Health Alliance, which unites a variety of organisations throughout Europe that cover a broad spectrum of health issues.

EHN also works with EuroHealthNet and the European Health Management Association on a regular basis.

On tobacco issues, EHN acts in close liaison with the Association of European Cancer Leagues, the European Respiratory Society, the European Network for Smoking Prevention, in which EHN maintains observer status, as well as with a number of national tobacco control organisations and experts.

International

World Heart Federation

Through its membership of the World Heart Federation (WHF), EHN participates in international work to advance the cause of cardiovascular health promotion worldwide. In 2006, EHN was represented on the Executive Board of the WHF by Peter Hollins, Director General of the British Heart Foundation.

World Hypertension League

EHN has a reciprocal membership arrangement with the World Hypertension League.

Organisation

Membership

In 2006, EHN had 31 member organisations from 26 countries throughout Europe.

General Assembly

The General Assembly is comprised of all the members of the EHN.

The principal role of the General Assembly is to set broad policy guidelines. Its other responsibilities include:

- electing the Board and its President;
- approving the admission of new member organisations;
- approving budgets and annual accounts.

Board

EHN is governed by a Board that can comprise no fewer than three and no more than seven members. In 2006, EHN's Board consisted of seven members. They were Peter Hollins, British Heart Foundation; Staffan Josephson, Swedish Heart Lung Foundation; Serge Lafaye, French Federation of Cardiology (until May 2006); Michael O' Shea, Irish Heart Foundation (from May 2006); Danica Rotar Pavlič, Slovenian Heart Foundation; Hans Stam, Netherlands Heart Foundation; Freddy Van de Casseye, Belgian Heart League; and Susanne Volqvartz, Danish Heart Foundation.

Susanne Volqvartz was the President of the Board until May 2006, when she was succeeded by Peter Hollins.

The Board met four times in 2006. Its role is to provide policy, political and procedural direction on behalf of the members of the EHN. Travel and accommodation costs involved in the Board meetings are covered by the Board members themselves, with the exception of those who come from Central and Eastern European countries.

Staff

EHN has maintained an office in Brussels since 1992. The Network has functioned as a legally registered, non-profit-making association in Belgium since 1993.

The EHN Brussels office has a team of four people who coordinate EHN's work. The Brussels office acts as the central point for communication between the member organisations, facilitates its advocacy and cooperation work with the institutions of the European Union, steers the research and publications work, and organises the Annual Workshop, other membership seminars and meetings and special European conferences.

Board Members

Peter Hollins (President)
British Heart Foundation

Staffan Josephson
Swedish Heart Lung Foundation

Serge Lafaye (until May 2006)
French Federation of Cardiology

Michael O' Shea (from May 2006)
Irish Heart Foundation

Danica Rotar Pavlič
Slovenian Heart Foundation

Hans Stam
Netherlands Heart Foundation

Freddy Van de Casseye
Belgian Heart League

Susanne Volqvartz
Danish Heart Foundation

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EHN Member Organisations

Austria

Austrian Heart Foundation

Belgium

Belgian Heart League

Bosnia and Herzegovina

Foundation of Health and Heart

Cyprus

Cyprus Heart Foundation

Denmark

*Danish Heart Foundation**

Estonia

Estonian Heart Association

Finland

*Finnish Heart Association**

France

French Federation of Cardiology

Georgia

Georgian Heart Foundation

Germany

*German Heart Foundation**

Greece

Hellenic Heart Foundation

Hungary

Hungarian Heart Foundation

Iceland

*Icelandic Association of Heart Patients**,

Icelandic Heart Association

Ireland

Irish Heart Foundation

Italy

Italian Association against Thrombosis (ALT),

Italian Heart Foundation

Lithuania,

Lithuanian Heart Association

Netherlands

Netherlands Heart Foundation

Norway

Norwegian Association of Heart and Lung Patients (LHL),*

Norwegian National Health Association –

Council on Cardiovascular Diseases

Portugal

Portuguese Heart Foundation

Slovakia

Heart to Heart League

Slovenia

Slovenian Heart Foundation

Spain

Spanish Heart Foundation

Sweden

Swedish Heart Lung Foundation

Switzerland

*Swiss Heart Foundation**

Turkey

Turkish Heart Foundation

United Kingdom

British Heart Foundation,

National Heart Forum,

*Northern Ireland Chest, Heart and Stroke**

* these members are also heart patients' organisations

The
EHN
Member
Organisations

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ÖSTERREICHISCHER HERZFONDS

The Austrian Heart Foundation

The Austrian Heart Foundation (AHF) is a not-for-profit organisation that was established in 1971. Although the specific work of the AHF is restricted to Austria, the AHF is a member of the European Heart Network (EHN) and the World Heart Foundation (WHF).

AHF is active in the prevention and reduction of cardiovascular disease. It supports research projects in clinical cardiology, systematically collects epidemiologic data, organises training courses in basic life support and sponsors defibrillators. AHF also funds a children's foundation which supports families of children with congenital heart disease.

Among the highlights of the AHF's work in 2006 was its strong focus on women. The organisation carried out a successful prevention programme for women, called "proWomen", in a small city in Austria.

AHF also participated in the EHN project "Children, Obesity and Associated Avoidable Chronic Diseases". It carried out a national project concerning children in three Viennese schools.

AHF participated in the EUROCISS project, organised by the Istituto Superiore di Sanità (ISS). The aim of the project was summed up in the question "What are the Objectives against which a Project's Success or Failure can be Assessed?".

AHF participated in the World Congress of Cardiology in Barcelona, where it presented its programmes.

2006



The Belgian Heart League

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The Belgian Heart League (BHL) was established in 1968 as a platform for the exchange of information on cardiovascular conditions, in order to benefit patients and with the cooperation of professionals from the healthcare services and politics.

Thus the Belgian Heart League has been working actively to prevent cardiovascular diseases for almost forty years, both at the level of primary prevention and at the level of secondary prevention. In addition to the essential task of prevention, BHL widely disseminates information about prevention problems and cardiovascular diseases in general and about detecting and screening for these conditions. The BHL works with 70 patient associations all over the country and helps patients with heart disease to readjust to their illness at a social, family and professional level in their day-to-day lives.

The main action in 2006 was the preparation and implementation of a programme called “Coeur Ados” (teenagers’ hearts) in order to increase the awareness and knowledge of young people regarding their unhealthy eating habits and lack of physical activity. This programme was specifically developed for adolescents in secondary schools. The objective was to stimulate action plans and activities in schools during 2006 and 2007.

BHL also recruited “Young Heart Ambassadors” to become advocates and stimulate peer to peer communication. These ambassadors participated in the “Global Youth Meeting” in New Delhi from 13-19 November 2006. During the meeting they had the opportunity to learn about and discuss different topics concerning health with 200 students from all over the world.

Several BHL activities during 2006 relating to healthy food and the prevention of obesity were organised with the BHL stakeholders. At a medical level the League promoted and organised nutrition workshops for primary care physicians continuing medical education for cardiologists). BHL also developed a nutrition charter with the national hotel, restaurant and catering federation.

A mass campaign on the “CardioTest” was organised to inform the public of the importance of the different cardiovascular risk factors including waist measurement. The size of the waist is one of the cardiovascular risk indicators.



Bosnia and Herzegovina: The Foundation Health and Heart

The Foundation Health and Heart (FHH) is taking action in Bosnia and Herzegovina (B&H) and southern Europe in order to support the promotion of public health by conducting programmes organised by the World Health Organization (WHO), the World Heart Federation (WHF), the European Society of Cardiology (ESC) and the European Heart Network (EHN). The FHH has been a member of the EHN since 2000, and of the WHF since 2003, which laid the foundation for integrating the programme of B&H with recognised international and European partners.

FHH acts in cooperation with health and science institutions in B&H, cities, local communities, families, schools and specialised health institutions. Founded in August 1999, FHH has a leading role in implementing programmes for the prevention of cardiovascular disease in B&H, through cooperation with doctors, population/patients, authorised health institutions as well as with various partners, and in cooperation with WHO, WHF, ESC, EHN and specialised organisations of the UN. FHH's mission is to organise, professionally and in a timely way, the implementation of the Programme for the prevention of cardiovascular disease approved by the WHO, WHF, ESC and in cooperation with EHN and its members from Member States of the European Union.

On 15 September 2006 the FHH organised a scientific meeting "New Views in Prevention and Treatment of Atherosclerosis" in cooperation with the Academy of art and science of Republic of Srpska (RS), Ministry of Health and Social Welfare of RS, Ministry of Science and Technology of RS, Chamber of medical doctors and Society of cardiology of RS. The FHH promoted an electronic version of HeartScore for Bosnia and Herzegovina, for cardiovascular risk assessment, in cooperation with the Society of Cardiology of RS and the ESC. B&H thus became the first country in Eastern Europe and the fourth in Europe to implement the European recommendations for CVD prevention and HeartScore. In cooperation with faculties, schools, preschools and local communities, the FHH organised lectures of general interest through the "The Health" tribune.

The FHH established the project "Control of CVD Risk factors in Women with Poor Socio-economic Life Conditions", in cooperation with the city of Banjaluka (Healthy Town).

As a special activity, FHH sent an Initiative to the WHF during the World and European Congress of Cardiology for founding the "Global Health Fund". The Fund would finance the revitalisation of communities/regions and the revitalisation of population health as well.



The British Heart Foundation

2009

The British Heart Foundation (BHF) is the largest independent funder of heart research in the UK. BHF plays an important role in funding public education programmes, life-saving cardiac equipment, and supporting rehabilitation and patient care.

The aim of the British Heart Foundation is to play a leading role in the fight against disease of the heart and circulation so that it is no longer a major cause of disability and premature death.

2006 was a great year for the BHF. In February the UK Parliament voted in favour of legislation to ban smoking in enclosed public spaces in England, legislation we have long campaigned for alongside other health charities. Scotland's smoking ban took effect soon after, and Wales and Northern Ireland will soon follow: summer 2007 will see a smokefree UK.

The BHF's other campaigns found success in 2006: our "Doubt Kills" campaign inspired people to call the emergency services immediately when experiencing chest pain. Delaying the call, perhaps because of 'a British stiff upper lip', puts people's lives and rehabilitation prospects at risk. Several grateful people have contacted us, crediting the campaign with saving their lives.

"Food4Thought", the campaign which encourages them to take responsibility for their own health, had another very successful year. A hard-hitting image drove home the fact that British children 'drink' five litres of cooking oil a year on average through crisps alone. We are very pleased with the results: 79% of children polled said the campaign made them want to do more to keep healthy.

To raise public awareness of the contents of processed food we are calling on major brands and retailers to adopt the 'traffic light' nutrition labelling system. Independent research has shown that this is the easiest to understand and use, and several companies have already adopted it. The BHF is working hard to persuade those using Guideline Daily Amounts (GDAs), which we believe can be misleading, to change to traffic lights for the sake of their customers' health.

The Cyprus Heart Foundation

The Cyprus Heart Foundation (CHF), a non-profit organisation, was established in 1991 on the initiative of the Cyprus Society of Cardiology and the Heart Patients Associations. The state is also represented on the Foundation's Board.

The establishment of the Foundation became a must, bearing in mind that over 50% of the deaths in Cyprus are due to cardiovascular diseases. The main objectives of the Foundation are research on and the prevention and treatment of heart diseases, and also the well-being of the heart patients. For the promotion of these objectives, the Foundation may undertake any initiative, including the establishment and running of heart centres.

As one of the high points of 2006, the CHF published the magazine "Cardiologica Nea" in 35,000 copies and distributed these copies to the public free of charge.

The CHF series of leaflets referring to CVD factors, the treatment of heart diseases, nutrition, exercise and generally to lifestyle was updated during the year.

The "Heart Week" took place from 20-25 November, under the auspices of the Health Ministry. Lectures, seminars, TV and radio discussions took place, with the purpose of educating the public.

The Cyprus Heart Foundation finalised its epidemiological research on atherosclerosis, which is considered of the utmost importance for Cyprus.

The Danish Heart Foundation

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The Danish Heart Foundation is a private organisation established in 1962. Today it has 100 000 members. Crown Princess Mary is its patron.

In 2006 the Danish Heart Foundation sent out a hard-hitting message in its traditional spring television campaign: despite improvements in treatment, heart disease still kills every third Dane. The good news is that the Foundation is increasingly capable of effective action in relation to heart health issues, not least due to the steady climb in membership.

Together with the Danish Kidney Association, the Danish Heart Foundation succeeded in obtaining approval for the establishment of a centre for organ transplantation in the autumn of 2006.

By providing scientific facts and good arguments the Danish Heart Foundation was instrumental in bringing about the decision to offer thrombolysis to all patients with ischemic stroke in the national health service.

The Danish Heart Foundation increased its efforts to come closer to patients and their families at community level. Five mobile heart units allowed the Foundation to visit a large number of institutions. The mobile heart units were off to a flying start when HRH Crown Princess Mary officially launched the first three units at the opening of the annual Heart Week. The contribution of the mobile heart units to heart health is particularly felt at large workplaces, where an interest in healthier canteen food also supports the prevention of heart disease and the provision of better information.

The premier of the children's theatre performance "Tumbletots in Search of Adventure" signalled an addition to the Foundation's activities on nutrition. The play subsequently went on a highly-publicised tour of Danish pre-school institutions.

The Danish Heart Foundation funds targeted research in selected areas, including heart valve disease, stem cell research and congenital heart disease in children. In 2006, the Foundation initiated a long-term programme of research into cardiovascular disease among women kick-started by a scientific conference in the autumn.

The Danish Heart Foundation holds the presidency of the Patients' Forum, an organisation comprising 71 patient and disease prevention organisations with a total membership of 800 000 people.

The Estonian Heart Association

The Estonian Heart Association (EHA) is the Tallinn-based non-governmental organisation that provides the Estonian people with basic knowledge about heart health. Formally established in 1992, EHA belongs to EHN and the World Heart Federation (WHF).

EHA educates people about heart health to decrease the high levels of cardiovascular diseases in Estonia and works toward better prospects for coming generations.

In particular through its programme “Well-being of the Heart with Physical Activity!” EHA has been actively promoting healthy physical activity. It has also published a series of educational materials about outdoor activities entitled “Physical Activity throughout the Year – Health and Fitness from the Outdoors! 2006 Calendar”. A pan-Estonian four season programme, “Well-being of the Heart with Physical Activity” encourages people to be physically active outdoors all year.

There were many educational seminars across Estonia. The Estonian Heart Association held an international educational seminar for Estonian teachers, local sports organisations, local municipalities and others to introduce modern principles of healthy activity. On 25 May 2006 Finnish UKK institute manager Mikael Fogelholm spoke for the “Activities for health – How? When? Why?” seminar.

To celebrate World Heart Day, EHA created the international cooperation committee and held a public event in the Hirvepark (Tallinn) attended by several thousand people, to promote the principles of energy balance from healthy exercise and eating. The members of the Estonian parliament were present, which aroused great media interest. EHA published the WHD materials “How Young Is Your Heart?” and it was also covered in several media channels.

Together with the Finnish Heart Association and the Finnish UKK Institute, on 29 November 2006 EHA held an educational seminar for kindergarten and school teachers to introduce the principles of healthy exercise and heart health that are promoted in Finnish schools. The sport department leaders of the Health and Culture Ministries of Estonia took part.

In 2006 EHA celebrated its tenth anniversary with a public seminar “How to Make People Active through the Third Sector.” In the Estonian National Library there was an exhibition of EHA’s previous works.

EHA participated in EHN’s “Children, Obesity and Associated Avoidable Chronic Diseases” project that attracted interest in media. In April 2006 a debate began in a national newspaper over the issue of the questionable moral standards of Estonians’ largest candy manufacturer Kalev, which distributed its products in a sport event that it sponsored.

The Finnish Heart Association

A public health and patient organisation, the Finnish Heart Association (FHA) comprises over 85 000 individual members, 19 regions, 240 local societies and the nation-wide organisations for young heart patients, heart or lung transplanted patients and cardiomyopathy patients.

FHA's aim is to promote heart health. The Association provides information on health, encourages a healthy lifestyle and supports rehabilitation.

In the beginning of 2006, FHA launched the "Finnish Heart Plan" to influence the social, economic, environmental and cultural determinants of cardiovascular health. The goal is to reduce significantly the prevalence of cardiovascular disease among working-age adults in the 2020s. People should enjoy healthier and more active years in their lives, and those already suffering ill health should remain active as long as possible. The plan includes preventing cardiovascular diseases at population level and in risk groups, promoting early diagnosis and proper treatment.

In the framework of the "Finnish Heart Plan" the following continued in 2006: "The Woman's Heart Programme, From Overweight to Balance Project", Physical activity recommendations for various heart patient groups, the health-enhancing physical activity project and the "Heart Symbol System" (nutrition labelling of food stuffs), activities funded by Finland's Slot Machine Association.

FHA launched a family counselling programme aimed at health professionals working with families with small children, and increased its efforts to improve the quality of meals offered by institutional kitchens (Workday luncheon – a matter of heart and health). Working in cooperation with Suomen Latu and UKK institute it strengthened the Walking Club.

Additional resources for secondary prevention and rehabilitation made it possible to implement an outpatient rehabilitation programme (Tulppa) in seven heart districts.

Also significant for the "Finnish Heart Plan" was networking with Sitra's Food and Nutrition Programme ERA (Sitra is the Finnish Innovation Fund, an independent public foundation supervised by the Finnish Parliament). The FHA carries out the communications and media activities of The Smart Snacks project and educates kitchen personnel in the school meal interventions implemented by the National Public Health Institute.

The positive development in the lifestyle of Finns has stalled after three decades, and health inequalities have increased. Therefore, FHA and the Finnish Diabetes Association opened a public debate aiming at including health promotion and prevention of major chronic diseases in the programme of the new government.

Heart health promotion work in Finland was recognised through the election of the FHA's president, Professor Pekka Puska, as president of the World Heart Federation.

The French Federation of Cardiology

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The Federation Française de Cardiologie (FFC) is a voluntary cardiologists association founded in 1964. It brings together 27 associations and over 190 Coeur et Santé Clubs (Heart and Health Clubs) across France.

The FFC's major aim is to reduce cardiovascular diseases and mortality in France. Its four main missions are:

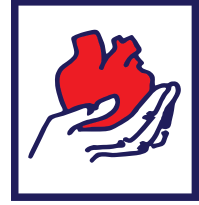
- cardiovascular prevention through the organisation of heart health campaigns, the distribution of free brochures, a Website and a magazine;
- support to cardiovascular research (over 30 projects funded each year);
- cardiovascular rehabilitation;
- CPR (resuscitation) promotion among youth and adults.

The FFC headquarters moved to a new building called "La Maison du Coeur" (The Heart House), which it shares with the professional organisation the Société Française de Cardiologie (SFC (French Cardiology Society)). The aim of this combination is to tighten the relationships among cardiologists and, in the near future, to increase awareness of the causes of heart disease among political leaders and the general public.

As a consequence, a joint (FFC – SFC) committee has been created in order to deliberate on research projects. Besides that, common meetings are organised for cardiologists (such as "The Springtime of Cardiology" in Toulouse). An event on prevention topics especially dedicated to the public is also organised at the end of this type of congress.

The annual campaign organised in 2006 was entitled "Halte à l'Infarctus" (Stop Heart Attacks). Several events were organised throughout the year such as conferences, information sessions at hospitals, with a major event during the heart week (held in September). The local associations and clubs played a significant role in the organisation of the events.

In early April, the "Parcours du Coeur" (Heart Walk) was organised in more than 800 towns in France gathering together over 100,000 people. Stéphane Diagana, a former athletic champion, was the godfather of the event. A promotion clip was produced and broadcast free of charge on television.



The Georgian Heart Foundation

The Georgian Heart Foundation (GHF) is a non-governmental, non-profit organisation whose activities are directed toward the inculcation of modern methods of diagnosis and treatment of cardiovascular diseases (CVD). GHF was founded on 17 May, 1997; its current President is Prof. Merab Mamatsashvili F.E.S.C MD, who has several years experience working in the USA, England, Europe and Japan.

The creation of the GHF was determined by the high mortality rate from CVD in Georgia, which exceeds mortality rates from other types of diseases. Mortality among males above 45 is extremely high, which makes the problem demographic. At the same time the mortality rate in Georgia due to cardiovascular diseases exceeds the average mortality rates for the rest of Europe.

The main goals of the Foundation are:

- carrying out the epidemiological programmes of cardiovascular diseases in Georgia;
- identification of risk factors for CVD, implementation of preventive health care programmes, training of the healthcare professionals and education of the population in this field;
- implementation and development of modern diagnostic methods including aortography and coronary artery angiographies in the large cardiovascular centres of Georgia;
- creation of high skilled national staff in the fields of Cardiology and Cardiosurgery.

In the framework of the Twin Centres' programme under the guidance of the World Heart Federation, a young cardiologist called Rusudan Agladze trained in AKH Hospital in Linz, Austria from March 2006. In May and June 2006 a two-week joint programme on medical consultations and treatment of the population free of charge, together with supplying patients with medicine, was carried out by the pharmacological company PSP and the GHF.

World Heart Day was held on 24 September in Tbilisi and Kutaisi under the guidance of the Georgian Heart Foundation, and the event was a great success.

On 1-2 October 2006 the "Second Georgian Congress of Cardiology" (The Georgian Society of Cardiology and the Georgian Heart Foundation – joint event) took place, with around 400 cardiologists in attendance. In the second part of October 2006, a Department of Teenagers was founded named G.A.D.A.T., which means Georgia Against Drugs and Tobacco.

In November, four members of G.A.D.A.T. took part in the Global Youth Meeting (GYM-2006) in New Delhi, India.

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The German Heart Foundation

The German Heart Foundation (GHF) is a member and patient organisation with 56 000 members. The foundation is an independent non-governmental organisation financed fully by member fees and donations. It was formally established in 1979 by leading cardiologists.

The GHF's aim is to educate the public about the possibilities for preventing and treating cardiovascular diseases and healthy lifestyles and to support scientific research also jointly with the German Foundation of Heart Research.

The heart month, November, on the topic of "Cardiac Arrhythmias Today", was the GFH's major campaign in 2006. In this context, the GHF sent 3 700 info packs to more than 2 000 doctors, who organised about 1 000 seminars, lectures, telephone conferences etc. The most important publication was the brochure Cardiac Arrhythmias Today (96 pages, total circulation 70 000) which included the joint guidelines of the American Heart Association, the American College of Cardiology and the European Society of Cardiology. The GHF's campaign benefited from excellent media coverage.

The GFH increased its efforts to publicise its aims and activities to health policy makers and the government, in particular by lobbying to protect non-smokers.

The German Heart Foundation published articles on early prevention, early treatment and different therapies for cardiovascular diseases. The circulation of the Foundation's main publication (Herz Heute, a quarterly member magazine) increased by 110 000 copies, and GHF organised 150 seminars and lectures nationwide.

On 5 May (Day of children with heart diseases), the GHF put an Internet platform for children, youths and adults with congenital heart disease online on its website. The "Children's Heart Forum" is very well accepted. The GHF continues to support the "Be Smart – Don't Start" international project. The European project "Children, Obesity and Associated Avoidable Chronic Disease" was successfully finished in October 2006. Many pupils participated in the GHF's contest for children on healthy breakfasts.

The GHF joined the international European Commission co-funded research project on the role of lycopine in tomatoes and its preventive effect on cardiovascular diseases. The Foundation continued to instruct hospitals and clinics on providing healthy food (Mediterranean diet) for heart patients and organised an expert meeting on "Bypass versus PCI".

In 2006, the GHF and German Foundation of Heart Research received thirteen applications for research and seven annual grants were approved, totalling 1.2 million euros. The GHF awarded the Wilhelm P. Winterstein Award/10 000 euros and the August Wilhelm und Lieselotte Becht Award/15 000 euros to fund scientific research.



The Hellenic Heart Foundation

37 The Hellenic Heart Foundation (HHF) was established in 1991. It is a non-governmental organisation mainly supported by donations provided by its members and friends. The HHF is an active member of the European Heart Network (EHN) and hosted its Annual Workshop in 1998.

The main objectives of the Hellenic Heart Foundation are to:

- enforce prevention of cardiovascular diseases at population level through appropriately designed education campaigns;
- organise lectures and meetings aiming to improve prevention and management of cardiovascular diseases;
- provide scholarships to young scientists whose scientific work has the potential to improve cardiovascular care;
- create alliances and partnerships with organisations which have common aims and principles;
- establish a cardiovascular research centre focused on the prevention of cardiovascular diseases.

The Annual Meeting of the friends of the HHF, which took place in February 2006 in Athens, was attended by more than 1 000 distinguished members of the Foundation from all sectors of society.

Two prestigious scientific meetings were organised during 2006, the 21st International Congress on Clinical Cardiology attended by 1 000 physicians and the 10th International Symposium on Atherosclerosis and related risk factors. Five more meetings were co-organised with the Hellenic Pharmacists' Association in various cities of the country.

The "Cholesterol Month" was a large-scale prevention programme conducted in four cities. It enrolled a total of 30 000 participants. The cardiovascular risk profile of the participants, 15 to 94 years old, was surprisingly unfavourable and HHF's results were presented in a series of meetings with the press that attracted the interest of both the public and the physicians.

In 2006, HHF again organised lectures in schools and various other places in its continuing effort to educate the public about cardiovascular disease prevention.

HHF publishes two journals which it supplies free of charge. Rhythms of the Heart is distributed to more than 14 000 families and Heart and Vessels is received by 7 500 doctors nationwide.

The Director of the Foundation, Professor P.K. Toutouzas, published a few more books on the prevention of cardiovascular diseases, and in cooperation with other cardiologists members of the Foundation actively participated in numerous scientific events, meetings with the press and TV interviews, effectively disseminating the findings of the Hellenic Heart Foundation to the public.



The Hungarian National Heart Foundation

The Hungarian National Heart Foundation (HNHF) was founded by the Hungarian Society of Cardiologists in 1993. Its aim is to promote cardiovascular disease prevention, and to support and facilitate care of heart disease patients.

The mission of the Hungarian National Heart Foundation is to reduce cardiovascular disease so that it is no longer the primary cause of death and a major factor of early disability in Hungary.

World Heart Day was celebrated in Hungary on 24 September under the auspices of the Hungarian National Heart Foundation and the Hungarian Society of Cardiologists. The main event in Budapest attracted thousands of visitors. Other, smaller events were organised throughout the country.

HNHF participated in the pan-European project “Children, Obesity and Associated Avoidable Chronic Diseases” coordinated by the European Heart Network (EHN). HNHF held a press conference and together with a coalition of seven civil society organisations issued a joint declaration to limit commercial communications of unhealthy foods which target children.

HNHF is a leader among civil society organisations fighting against sudden cardiac death in Hungary. It continues its long-running “Every Minute Counts Programme”, which provides life-saving devices for public and other congested areas, and organises training in resuscitation (CPR).

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HJARTAVERND

The Icelandic Heart Association

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The Icelandic Heart Association (IHA) is a non-profit, non-governmental organisation founded in 1964.

Its aim is to inform and educate the public about heart diseases, the appropriate response to their occurrence, their aftermath and their prevention. Furthermore, IHA intends to carry out studies and research on heart disease and its risk factors and preventive measures in Iceland,

The activity of IHA is twofold: basic research and translation of findings for use by the general public and professionals.

In basic research, IHA finished the first part of the AGES Reykjavik study, a detailed examination of 5,700 survivors from the Reykjavik study, which included the use of imaging. This study is funded by the US NIH (the National Institutes of Health of the United States), IHA and the Icelandic Parliament. IHA also started a new population-based cardiovascular risk factor study called the "REFINE Reykjavik study", with specific emphasis on the arterial tree, using various examination methods including imaging.

The IHA has created a "Cardiovascular Risk Calculator", which is available on the IHA web site (www.hjarta.is). It is based on results from the Reykjavik Study, ongoing since 1967, and assesses the likelihood of an individual having a coronary event in the next ten years. The "Risk Calculator" was officially accepted and introduced by the authorities in 2006 as a tool to assist in the determination of reimbursement by the health system for statin treatment.

Based on results from the Reykjavik study IHA has published six booklets regarding cardiovascular risk factors for public use free of charge: "Smoking, a Serious Matter", "Cholesterol, Do You Know your Cholesterol?", "Obesity, Do Take it Seriously", "Stroke, Hypertension... What to Do", "Myocardial Infarct... First Reaction Does Really Matter", "Physical Activity... For your Heart". These booklets are all in high demand and are reprinted on a regular basis.

The Icelandic Association of Heart Patients, Hjartaheill

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Established in 1983, the Icelandic Association of Heart Patients, Hjartaheill, now has 3 440 members in eleven departments.

In the first year, the Association started raising funds for various equipment for the Heart Department of the National Hospital. Since 1985 the Association has sold flags every two years, using the profits, among other things, to support the Department of Heart Surgery at the National Hospital, the Rehabilitation Centre for Heart Patients at Reykjalundur, the HL (Heart and Lungs) Training Centre in Reykjavik and also to buy a flat for patients from the countryside who seek medical treatment in Reykjavik. Hjartaheill has donated around \$4.4 million. The Association has also published and sold Christmas cards as well as selling advertising space in the Hjartaheill journal, *Velfer*, issued two to three times a year, both with considerable profits. The Association has published booklets and also taken part in the production of a video on heart surgery, the main theme being the well-being of the patient.

The Association's main goals are:

- to unite all members in their endeavour to protect and advance the general interests of all heart patients;
- to improve general health service and social conditions and facilities for heart patients;
- to raise funds for the general welfare of heart patients and to fulfil the main objectives of the Association;
- to support research and education in the field of heart diseases;
- to improve facilities and medical equipment in hospitals for research and treatment of heart diseases and to create the proper conditions for rehabilitation;
- to provide heart patients with information on their social rights, e.g. taxation, financial support, insurance, pension, medical treatment abroad etc.

At the beginning of 1987 the board of Hjartaheill decided to open a well-equipped training and rehabilitation centre in Reykjavik. This was done in cooperation with the Icelandic Heart Association and SÍBS (The Icelandic Association of Tuberculosis and Chest Patients). The HL Centre is an independent institution which provides facilities for rehabilitation after hospital treatment, facilities for general training, general counselling and instruction and information. The HL Centre provides training and rehabilitation facilities for four hundred heart patients. HL centres have been opened in 14 other places in the country.

Hjartaheill organises a general congress every other year where the main objectives and policies of the Association are discussed and resolutions are adopted.

The Irish Heart Foundation

The Irish Heart Foundation (IHF) is Ireland's only national charity for heart health. The Foundation is almost entirely funded through funds raised from the public. The IHF has five offices across Ireland and celebrated 40 years in 2006.

The Irish Heart Foundation supports health promotion in schools, the workplace and the community; has established a national network of walking routes under Sli Na Slainte banner; provides a full-time patient helpline; co-ordinates basic life support training in Ireland, funds medical research and advocates for a health promoting environment and quality patient services.

The aim of the Irish Heart Foundation is to reduce premature death and disability for heart disease and stroke.

The Irish Heart Foundation commissioned the first ever national audit of stroke services in Ireland. This €0.5m project was initiated by the Irish Heart Foundation and is being co-funded with the Department of Health and Children. The audit is progressing on schedule and is due to be completed in September 2007. It will provide full data on stroke services in Ireland and form the basis for a national plan for the development of stroke care.

The Irish Heart Foundation began a project to pilot providing stroke liaison nurses for stroke patients. Stroke has been a neglected area of service provision in Ireland – and the Heart Foundation plans to employ nurses to work in both hospital and community settings, providing support and continuity of care for patients in the hospital and in their rehabilitation in the community.

The IHF ran a very successful public education campaign on blood pressure under the slogan "Love Your Heart, Know your Blood Pressure". The campaign included the production of a special magazine with more than 100 000 copies distributed to workplaces, health services and the general public and extensive national and local media activity.

As part of the Children Obesity and Avoidable Chronic Disease Project, the National Heart Alliance, an alliance of 30 Irish organisations lead by the Irish Heart Foundation, published a position paper on the "Marketing of Unhealthy Food to Children" and as a result were invited by the Health Committee of the Irish Government to make a detailed presentation of the issue to the committee.





The Italian Association for the Fight against Thrombosis – ALT

ALT – the Italian Association for the Fight against Thrombosis – is a Milan-based non-governmental organisation dealing with thrombosis-related diseases. ALT has three local offices in the north and the south of Italy, in Bergamo, Cremona and Bari. ALT is a member of the European Heart Network (EHN) and of the Summit of Solidarity, an alliance of Italian non-governmental organisations. ALT was formally established in 1986.

ALT's mission is to prevent and to reduce the impact of thrombosis-related diseases through education and information campaigns and by financing scientific research.

Acting as Italian Coordinator, ALT finalised the 32-month pan-European project “Children, Obesity and Associated Avoidable Diseases” (CHOB) in October 2006. ALT started a consultation among the members of national alliances (CHOB Platform created in the framework of the CHOB project and the Forum for Cardiovascular Health) in order to come to an agreement on policy options that could be put forward in Italy to combat childhood obesity and to develop national guidelines for addressing childhood obesity.

In September 2006, ALT organised a press conference on “Obesity and Cardiovascular Health of Children” in order to stimulate the debate on childhood obesity and food marketing. In October 2006, ALT organised an event in order to explain to children and their parents the importance of physical activity to combat childhood obesity. The event gave children an opportunity to play outdoors.

ALT published two issues of its quarterly SALTO: “Women and Thrombosis”, concerning the problems related to thrombosis disease in women; and “Stroke? No Thanks”, discussing the causes of stroke and giving advice on how to prevent it.

Jointly with Corriere della Sera Magazine, a major national newspaper, ALT distributed its own “Healthy Appointment Book 2007” at national level: more than 22 000 copies all over Italy. For 20 years ALT has been creating its Healthy Appointment Book which, year by year, covers a different theme related to thrombosis diseases. The 2007 edition was devoted to women and contained daily scientific information and recommendations on how to prevent cardiovascular diseases.

ALT participated in several national forums and initiatives on cardiovascular disease. Jointly with EHN, ALT lobbied Italian Members of the European Parliament on the health action programme.



Fondazione italiana per il cuore

The Italian Heart Foundation

The Italian Heart Foundation (Fondazione Italiana per il Cuore / FIpC; www.fondazionecuore.it) was established in 1990 and registered as a foundation in 2004. The major aims of FIpC are:

- to disseminate scientific information;
- to develop relationships between specialists, general practitioners, and the general population;
- to interact with government bodies to promote the prevention of cardiovascular diseases;
- to carry out studies and research projects.

Following its long-standing experience in running educational campaigns, since 2001 FIpC is promoting and organising the yearly Italian edition of the World Heart Day (WHD). The 2006 WHD was devoted to "How Young is your Heart?". The support and collaboration with important institutions (e.g.: Italian Ministries of Health, University and Research, Agriculture; Italian Red Cross; National Association of Carabinieri; National Sport Federations; UEFA, CONACUORE, a national patients' association, and 20 scientific societies) contributed to the success of the event.

On occasion of the 2006 WHD, FIpC coordinated and/or carried out a number of activities, including: a press conference; the "World Heart Champion 2006" Gold Medals (a new prize awarded to famous Italians in recognition of their correct life-style); radio advertising (broadcast through 43 radio channels); and advertising (appeared on the three major national television channels). In addition, all major football matches were dedicated to the WHD with banners displayed in the fields. Approximately 1 800 calls were received in two days at the WHD cardiology call centre. More than 50 events were held, including walks and runs; concerts; scientific meetings open to the public; booths in the main squares, department stores, and hospitals where cholesterol, triglycerides, glycaemia, and blood pressure measurements were offered to the public. Around 150 000 booklets were distributed, and the media coverage reached 105 177 276 contacts.

FIpC produced the website www.cardiometabolica.org and the quarterly journal, "Cardiometabolica" focused on cardiometabolic risks. FIpC contributed to other electronic newsletters with a review of the articles from the most important scientific journals to update general practitioners and specialists.

Educational materials provided by FIpC in 2006 include:

- 2 500 000 flyers on lifestyle (eating behaviour and exercise) distributed to the patients through 100 000 physicians to maintain a focus on the CV risks linked with high level cholesterol;
- 40 000 leaflets on the use of phytosterols to control lipid levels – targeted at physicians;
- 150 000 leaflets on the use of phytosterols to control lipid levels – targeted at the general public.

FIpC gave its scientific sponsorship to the XIVth International Symposium on Atherosclerosis, held in Rome on 18-22 June 2006, with more than 6 000 participants.

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The National Heart Forum (UK)

The National Heart Forum (NHF) – established in 1984 – is an alliance of 50 national organisations working to reduce the risk of coronary heart disease and related conditions in the United Kingdom.

The NHF's mission is to work with and through its members to contribute to the prevention of avoidable coronary heart disease and related conditions in the UK.

NHF worked with the Royal College of Physicians on a new “Health Creating Economy” programme, developing a policy agenda that addresses the impact of economic actors on determinants of ill-health, including the tobacco, alcohol and food industries. The programme identifies ways to shape markets to create and promote health. Joint expert seminars looked at social marketing for health, the role of taxes and subsidies, socially responsible investment and pension policy.

In the Spring, the UK broadcast regulator, Ofcom, published a consultation on rules to restrict TV food and drink advertising to children. NHF led a successful campaign to open up the consultation to include full and fair consultation of a 9pm watershed for unhealthy food advertising – an option which Ofcom had ruled out of consideration. Following a legal challenge from NHF, supported by many of its members, Ofcom invited comments on a 9pm option.

NHF has requested UK ministers and MEPs to propose a 9pm restriction within the Audiovisual Media Services Directive. NHF completed the EHN project on “Children, Obesity and Associated Avoidable Chronic Diseases”.

NHF supports the adoption of the UK Food Standards Agency's traffic light signposting system for front-of-pack food labelling and published a report analysing competing labelling schemes.

A seminar for our “Building Health” project, brought together urban designers, architects, engineers and public health experts to explore ways in which the built environment could encourage more physical activity in people's daily lives.

The Health Act passed this year finally banned smoking in enclosed public places in England (from July 2007). NHF and key health organisations worked hard as part of the “Smokefree Action Coalition” with MPs to persuade ministers to remove proposed exemptions to the ban.

NHF has undertaken a project to map future obesity trends and likely impacts over the next 50 years, using novel epidemiological software to model future scenarios. The project is part of a national “Foresight Enquiry” into obesity by the government's Office of Science and Technology.

The Netherlands Heart Foundation

The Netherlands Heart Foundation (NHF) was established more than 40 years ago. Together with its stakeholders, the NHF plays a crucial role in fighting heart disease and stroke.

NHF aims to fight heart disease and stroke by investing in the development of knowledge (research), by educating the public in innovative ways to promote healthy lifestyles (prevention), and by initiating improvements in health care. NHF intends to improve the quality of life of patients suffering from heart disease or stroke by leading and participating in the complex interactions between the many stakeholders in the battle against heart disease and stroke and their consequences.

In the long run, the battle against heart disease and stroke and the improvement in the quality of life of patients and of those who run an increased risk can be successful only if NHF promotes research to further unravel the underlying pathophysiological mechanisms that play a role in heart disease and stroke, and subsequently stimulates new clinical applications derived from that research. In the short run, NHF will accomplish its mission by focusing more sharply on prevention and education, stimulating risk-lowering programmes for high-risk groups, and fighting the mortality and morbidity rate after acute cardiac arrest, stroke and myocardial infarction. It is NHF's goal to increase the overall financial investments in research programmes by 25% in the next five years.

In 2006, thirty-five new scientific programmes were started. A newly formed platform was established which will play an essential role in integrated care for patients who suffer from atherosclerosis. The general public was successfully trained to recognise the main symptoms of a stroke. Around 75 000 people were given personal advice on a healthy life style following cholesterol tests that took place in 600 supermarkets.

Thematic new NHF actions will focus on educating the general public to recognise the first signs of cardiac arrest. To improve the survival rate, NHF will increase its efforts to tighten cooperation with local resuscitation partners, first responders and the relevant professional organisations. NHF will join forces with patient organisations, improve prevention in high risk groups in one consistent prevention program, create innovative health education programmes for young people, improve the quality of life with models for psychosocial care and finally initiate a broad national lobby to increase national awareness of the tremendous impact of heart disease.

The Northern Ireland Chest Heart & Stroke

NI Chest Heart & Stroke (NICHHS) was established in 1946 to combat TB, through programmes of research, education, diversional therapy and welfare. Since 1972 it has functioned as the NICHHS and funded programmes of research, rehabilitation and care, health promotion as well as lobbying and advocacy.

The aim of NI Chest Heart & Stroke is to promote the prevention of and to alleviate the suffering resulting from chest, heart and stroke illnesses in Northern Ireland.

After a burglary and fire in May 2003 the reconstructed premises of NICHHS opened on Monday 5 June 2006. An official opening was held on Thursday 29 June when His Royal Highness the Duke of Wessex (Prince Edward) opened the building. HRH met stroke, respiratory and cardiac clients as well as carers and volunteers.

The Minister for Health had announced towards the end of 2005 that Northern Ireland would become smoke-free in public places with effect from 30 April 2007. All those involved in health promotion are working to support smoke-free environments and to encourage smokers in the community to consider quitting the habit.

At our annual Scientific meeting in March 2006 Professor Alastair Buchan of the Nuffield Department of Medicine at the University of Oxford gave the keynote lecture outlining the successful implementation of thrombolytic treatment to combat stroke. A service using clot-busting drugs to combat stroke has not yet been established in Northern Ireland, despite having been available in the US and many parts of Europe for a number of years.

NICHHS set up a working group under the chairmanship of Dr Mahendra Varma to examine how to combat sudden cardiac death in young people. The group decided to adopt the Lausanne Protocol which recommends for certain young athletes that a family history is taken before continuation with heavy participation in sport.

In addition to funding research in local hospitals and universities, NICHHS provides a very broad range of services to respiratory, stroke and cardiac clients and carers.

Legacies are by far our largest source of income, but we also rely greatly on generosity of the people of Northern Ireland and enjoy other support, notably a three-year grant package from the Big Lottery Fund.



The Norwegian Heart and Lung Patient Organisation

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The Norwegian Heart and Lung Patient Organisation (LHL) was founded in 1943. Today it is the largest patient organisation in Norway, with more than 50 000 members. LHL offers different services through its 300 local branches and eight clinics and rehabilitation centres.

LHL's vision is "The Joy of Living, a Worthwhile Life and Solidarity". Its aims are to achieve full participation and equal rights for everyone, to further the development of services for people with heart and lung diseases and their families, and to strengthen solidarity between all those challenged by these diseases.

In 2006 LHL completed a major campaign called "Every Step Counts". For this project, more than 200 000 people in Norway walked at least 10 000 steps every day for two weeks. Many famous Norwegians participated, and there was a great deal of media attention given to LHL and the event. This campaign will be followed up in 2007.

LHL launched a project to renew the whole organisation called "LHL towards 2011". A major goal of this initiative is to establish new meeting-places in the local LHL branches. Five new local LHL centres were established, and a new rehabilitation centre was opened on the west coast of Norway.

Another highlight in 2006 was the organisation of several conferences. Among the conferences arranged by LHL was "Open Hearts 2006 for Youth", held in cooperation with Grown Up Congenital Heart Patients association (GUCH).

More than twenty development projects were completed. LHL has five busses travelling all over the country giving information to the people and offering simple medical tests.

The Slovenian Heart Foundation

The Slovenian Heart Foundation (SHF), established in 1991, works for cardiovascular disease prevention. With its headquarters in Ljubljana, this non-governmental humanitarian organisation has eleven branch offices and two associated societies. Thus it represents over 7,000 members. The Slovenian Heart Foundation aims to decrease morbidity and mortality due to cardiovascular diseases in Slovenia.

Highlights in 2006 included extensive publishing activities. We published seven issues of the journal "For the Heart", each printed in 8 000 issues. Further two leaflets, five brochures, each in 10 000 copies, a World Heart Day leaflet and a poster. A book "Identify and Prevent Stroke" came out, and materials were gathered for a book on Medications for the heart and blood vessels. Free brochures, leaflets, lectures for laypeople and radio and television inform people about a healthy lifestyle, cardiovascular diseases and their development, prevention and treatment, and alleviating problems caused by these diseases.

"For the Heart" consulting offices across Slovenia measure total cholesterol, HDL cholesterol, LDL cholesterol, blood sugar and triglycerides, blood pressure and pulse rate, and consult on preventive measures and nutrition. In 2006, we counted more than 27 000 measurements. A free doctor's office, available by phone, registered more than 1 200 calls, while the web doctor's office on the website <http://zasrce.si> answered more than 600 questions.

Over 50 courses on basic resuscitation procedures and how to handle a defibrillator have been held across Slovenia. Cardiomobile provides a special car that visits remote areas, equipped for measurements (blood pressure, cholesterol and glucose) and ready to offer professional advice. The project "Protects Health" grants a stylised heart symbol to suitable food products sold in Slovenia and to menus in public canteen facilities. Sports-recreational events included 86 marches and excursions across Slovenia, and the traditional cycling and trekking event in Ljubljana.

Work with children and young people was further expanded in 2006. SHF organised workshops (about functioning, risk factors for the development of cardiovascular diseases and a healthy lifestyle preventing their outbreak) for schools, together with medical students.

For World Heart Day, SHF organised numerous events, marches, excursions, lectures, radio and TV programmes, publications in newspapers, etc. in Slovenia.

SHF participated in all European Heart Network (EHN) Board meetings, expanded the network to East European countries and EU Member States through a special workshop in Ljubljana, and contributed to the EHN journal Heart Matters. SHF also took part in the research for the "Children, Obesity and Associated Avoidable Chronic Diseases" project from 2004-2006.



Fundación Española del Corazón

The Spanish Heart Foundation

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The Spanish Heart Foundation (SHF) is a private non-profit organisation established by the Spanish Society of Cardiology in 1967. With more than 4 000 members (cardiologists, nurses, patient's associations, etc.) it participates in the Management Committees of the Spanish Society of Foundations and the Spanish Forum of Patients.

SHF aims to prevent cardiovascular disease (CVD) by educating the population on healthy lifestyles. It promotes and supports cardiovascular scientific research in Spain by awarding research grants. Among the most noteworthy campaigns and activities developed by the SHF during 2006 is its Heart Week. Named of "Public Health Interest" by the Ministry of Health and Consumers Affairs, this annual event informs the population about the need for healthy lifestyles to prevent CVD.

Activities were developed in different contexts in several cities: cardio-healthy area (informative stands and check-up and measures of CVD risk factors: blood pressure, cholesterol, waist perimeter), round tables, workshops, open air physical activities for all ages, proposals for the very young, a Heart's Phone answered by cardiologists...

In order to raise politicians' awareness of the importance of controlling risk factors, the SHF measured the cardiovascular risk of the members of the parliaments. Starting in the Spanish Parliament and the Senate, the campaign was then carried to the regional Parliaments. This very well received campaign aroused media interest.

SHF adapted World Heart Day to the Spanish population. Activities included physical activities, measurements of CVD risk factors, informative stands, spreading information about CVD prevention, cooking lessons, CPR classes, and games for children, such as a huge heart puzzle. The Day concluded in a football stadium during a major football match.

SHF collaborates with the Nutrition, Physical Activity and Prevention of Obesity Strategy (NAOS), a governmental initiative launched in 2005 to combat children's obesity with a multi-disciplinary focus and the participation of different stakeholders, such as the food industry.

SHF finalised its contribution to the 32 month long pan-European project "Children, Obesity and Associated Avoidable Chronic Diseases" in October 2006.

"Preventing Obesity is a Healthy Idea", a national campaign to promote healthy lifestyles from childhood, was developed throughout 2006 in 15 cities. Activities included publications, school competitions, obesity research grants and a travelling exhibition promoting healthy lifestyles (nutrition and physical activity) to prevent obesity. The campaign was implemented jointly with partners including the Spanish Society of Nutritionists, the Five a Day Association, the Diabetes Foundation and the Spanish Society of Cardiology.

The Swedish Heart and Lung Foundation

The Swedish Heart and Lung Foundation (HLF) is a not-for-profit organisation based in Stockholm, Sweden. Originally its mission was combating tuberculosis, but since that struggle was successful its main focus shifted to supporting medical research in order to fight heart disease. Due to its heritage it also continues to support medical research in the area of lung and pulmonary diseases.

The vision of the HLF is to defeat heart, circulatory and lung diseases. Its main tools for doing this are the extensive financial support that it supplies to medical research and the information it provides to the general public and the healthcare sector about these diseases

The year 2006 was the best in the history of the Foundation. During this year HLF succeeded in raising 125 million Swedish crowns. This made it possible to sponsor research for more than 100 million Swedish crowns.

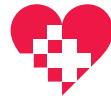
In March, HLF arranged the “Go Red for Women” campaign together with the Swedish Cardiology Society and the 1.6 million club (a club for women over the age of 45), with events in seven different cities in Sweden.

Together with its scientific board HLF has set up milestones for the research that the Foundation sponsors, establishing goals for scientists to achieve in the coming ten-year period. 12 goals were established for the diseases targeted by HLF. Due to the successful raising of funds, HLF was able to create two very important and large research grants, to two distinguished researchers, called the Werkö prize. The Foundation also announced a three-year position for a researcher within the field of cardiology for children.

Together with Gambro (one of the largest companies within the field of dialysis), HLF started a foundation for kidney research, as most kidney patients die of heart diseases. Both Gambro and HLF feel that this is a neglected research field.

Apart from its regular journal Science for Health, in 2006 the Foundation published three major papers on Tuberculosis, Stroke and Chronic Heart Failure.

During 2006 HLF, together with the Cardiology Society, conducted a phase IV clinical study sponsored by AstraZeneca (with over 2000 patients) on chronic heart failure. The results will be published during 2007.



Schweizerische Herzstiftung
Fondation Suisse de Cardiologie
Fondazione Svizzera di Cardiologia

Aktiv gegen Herzkrankheiten und Hirnschlag

The Swiss Heart Foundation

The Swiss Heart Foundation (Schweizerische Herzstiftung, Fondation Suisse de Cardiologie, Fondazione Svizzera di Cardiologia), formally established in 1967, is the only foundation active in the cardiovascular field in Switzerland.

The Swiss Heart Foundation is committed to:

- fewer people suffering from cardiovascular diseases or remaining disabled by them;
- people not dying prematurely of cardiovascular diseases;
- those affected still having a life worth living.

The main objectives of the Swiss Heart Foundation are promoting scientific research, informing patients and the general public about cardiovascular diseases, diagnosis, treatment and prevention.

With “Rendez-vous Heart” the Swiss Heart Foundation launched the greatest prevention campaign of its kind against cardiovascular diseases in Switzerland. In 32 cities across the country more than 14 000 people had their heart risk tested and learnt about a heart-healthy lifestyle. The tests included measuring waist circumference and body weight, blood pressure, blood cholesterol and blood sugar level. On Valentine’s Day, 14 February 2006, the Swiss Heart Foundation submitted the report concerning this campaign to Federal Councillor and Minister of Health Pascal Couchepin, who appealed to the Swiss population to take care of their heart.

On 17 March, the Swiss Heart Foundation successfully organised its first “Swissheart-Gala” charity event, “Madama Butterfly”, in the Berne city theatre. From 17-19 May, the Swiss Heart Foundation had the pleasure of hosting the Annual Workshop of the European Heart Network (EHN) in Geneva. Forty-five delegates from 21 countries representing 23 EHN member organisations attended the Workshop. In May, the Swiss Heart Foundation celebrated the foundation of the hundredth heart patient group in Switzerland.

In June, in cooperation with the Federal Office of Public Health and the Lung League, the Swiss Heart Foundation launched a media campaign called “Heatwave” with recommendations for elderly people, cardiovascular patients and healthcare professionals on coping with the summer heat. On 8 June, the Swiss Heart Foundation awarded its cardiovascular Research Prize to Prof. Etienne Delacrétaz, Berne, for his studies of cardiac arrhythmia. The Swiss Heart Foundation approved 27 cardiovascular and stroke research projects totalling 2 million CHF (nearly 1.23 million euros).

On the occasion of the World Heart Day, the Swiss Heart Foundation raised awareness of abdominal adiposity as a serious cardiovascular risk factor. In seven railway stations heart group members and other volunteers distributed more than 21 000 pears as symbols of the heart healthier body shape, leaflets and measuring tapes to check waist circumference.

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TÜRK KALP VAKFI

The Turkish Heart Foundation

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The Turkish Heart Foundation is a non-governmental organisation that provides public health services at its Health Centre in Istanbul with its cardiologists and professors as well as its medical specialists and teams, educating Turkish society about cardiovascular health issues. The Foundation, established in 1975, is funded through paid services and voluntary donations.

The major aim of the Turkish Heart Foundation is to provide preventive diagnosis and therapy services regarding cardiovascular diseases and to address health-related and social problems in relation to cardiovascular diseases through increasing awareness and motivation using evidence-based methods.

The Turkish Heart Foundation began in 2006 with the “Be Good-Hearted” campaign, which aimed to draw attention to the continuing increase in deaths from cardiovascular diseases in Turkey parallel to the tendency in the whole world. The campaign performed studies to underline the fact that stress is one of the most significant triggering factors for these diseases, and that it may be overcome by becoming good-hearted.

The Turkish Heart Foundation conducted free cholesterol-blood glucose measurements for 3 000 people as well as heart exams for 1 480 patients at different institutions and 1 500 students. A group of 156 people suspected of suffering from heart disease were directed to the Turkish Heart Foundation's Health Centre for therapeutic activities, where operations were also undertaken.

The Turkish Heart Foundation organised its 18th Annual Heart Week in April. Certified cardiology and cardiovascular surgery courses were given to medical students for the first time and panels were arranged on healthy nutrition. Moreover, cholesterol and blood glucose measurement services have been given to the public.

The Turkish Heart Foundation celebrated World Heart Day with a series of activities including a health walk with a large number of participants and sporting activities bringing young people together with famous basketball players. It rounded off the World Heart Day with a bowling tournament.

One thousand flu vaccines donated by Sanofi Pasteur were given to athletes and cardiac patients over 65 as well as to the public at large and little children who are in need.

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Finances

European Heart Network Income and Expenditure account for the year ended December 31, 2006

Income (€)

1. Member Subscriptions

	2006	2005
Austrian Heart Foundation	1,412.00	1,284.00
Belgian League of Cardiology	2,825.00	2,568.00
Bosnia Herzegovina	706.00	642.00
British Heart Foundation	84,761.00	77,055.00
Cyprus Heart Foundation	706.00	2,568.00
Danish Heart Foundation	19,809.00	16,878.00
Estonian Heart Foundation	706.00	642.00
Finnish Heart Foundation	7,926.00	6,972.00
French Federation of Cardiology	17,212.00	12,920.00
German Heart Foundation	10,598.00	10,902.00
Georgian Heart Foundation	706.00	642.00
Hellenic Heart Foundation	2,825.00	2,568.00
Hungarian Heart Foundation	2,825.00	1,284.00
Icelandic Heart Association	2,825.00	1,284.00
Icelandic Association of Heart Patients	2,825.00	1,284.00
Irish Heart Foundation	7,219.00	6,803.00
Italian Association against Thrombosis (ALT)	1,412.00	1,284.00
Italian Heart Foundation	2,825.00	2,568.00
National Heart Forum (UK)	2,825.00	2,568.00
Netherlands Heart Foundation	65,440.00	61,715.00
Northern Ireland Chest, Heart & Stroke Association	5,131.00	4,667.00
Norwegian National Health Association	6,167.00	5,157.00
Portugese Heart Foundation	2,825.00	2,568.00
Slovak Heart Foundation	706.00	642.00
Slovenian Heart Foundation	2,825.00	1,284.00
Spanish Heart Foundation	2,825.00	2,568.00
Swedish Heart Lung Foundation	17,680.00	19,269.00
Swiss Heart Foundation	5,272.00	4,968.00
Turkish Heart Foundation	706.00	642.00
SUB TOTAL (€)	282,525.00	256,196.00

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2. Special Contributions

	2006	2005
British Heart Foundation Grant	47,554.00	91,462.00
Netherlands Heart Foundation	31,592.99	49,079.23
Danish Heart Foundation	5,014.00	9,115.00
Swedish Heart Foundation	5,014.00	9,115.00
French Federation of Cardiology	2,662.00	4,840.00
World Heart Federation	16,021.30	16,213.20
Other Income	1,680.00	4,374.97
Commission Pre-financing Children and Obesity Project	342,797.02	342,797.02
Distribution Children and Obesity Project – Partners	-169,462.00	-246,919.95
Distribution Children and Obesity Project – EHN	-127,717.71	-171,046.25
Remaining Pre-financing Children and Obesity Project	-45,617.31	75,169.18
SUB TOTAL (€)	109,538.29	184,199.40

3. Bank Interest

	2006	2005
Bank Interest	17,732.38	4,586.37
TOTAL INCOME (€)	409,795.67	454,981.77

Expenditures (€)

	2006	2005
Salaries, etc.	152,409.03	137,457.52
Office Expenses	20,491.42	20,415.05
Property Expenses/Insurance	17,691.85	15,721.00
Travel, Subsistence and Conferences	14,334.94	17,934.33
Office Equipment and Computer Hardware	7,475.86	7,108.61
Communication	16,154.23	3,266.99
Professional Fees	4,075.30	3,173.23
Audit Fees	3,643.49	1,300.00
Membership Fees	1,407.52	1,422.05
Bank Charges	578.38	548.85
Support Annual Workshop	13,053.41	13,327.53
Grant Support Membership	706.00	1,284.00
	252,021.43	222,959.16
Project Expenses	36,079.57	42,992.36
Reserve	5,000.00	130,000.00
Children and Obesity Project	59,997.39	114,035.67
CEEC Support	11,714.91	3,659.74
CDV Statistics		15,018.15
TOTAL EXPENDITURES (€)	364,813.30	528,665.08
TOTAL INCOME (€)	409,795.67	454,981.77
SURPLUS (€)	44,982.37	-73,683.31
BALANCE BEGIN PERIOD (€)	185,336.84	259,020.15
TOTAL ACCUMULATED SURPLUS (€)	230,319.21	185,336.84

Balance Sheet (€)

	2006	2005
Fixed Assets	5,797.18	688.67
Current Assets		
Debtors and Prepayments	19,393.78	31,479.17
Cash at Bank	1,048,379.89	804,786.71
	1,073,570.85	836,954.55
Creditors		
Reserve	234,200.00	229,200.00
Accrued Costs and Expenses	342,815.64	276,512.71
Prepaid Income	266,236.00	145,905.00
	843,251.64	651,617.71
NET CURRENT ASSETS (LIABILITIES) (€)	230,319.21	185,336.84

1. Principal Accounting Policies.

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the organisation's accounts:

Accounting Basis

The accounts have been prepared under the historical cost convention.

2. Staff Costs

	2006	2005
Salaries	193,773.80	190,261.85
Group Insurance	10,963.20	8,408.44
Social Security Employers	47,447.70	46,221.93
Accrued Vacation Pay	590.28	1,310.97
Insurance Personnel	2,585.17	2,778.14
Meal Vouchers	4,483.76	4,414.18
Other Personnel Charges	240.21	280.06
Social Office	2,799.16	2,563.51
Personnel Costs to Recover	-110,474.25	-118,781.56
	152,409.03	137,457.52



Auditor's Report

To the Board of the European Heart Network for the Year ended December 31, 2006

We have agreed the financial statements on pages 54 to 57, which have been prepared on the basis of the accounting policies set out on page 57, to the records maintained by the European Heart Network.


Respective Responsibilities of the Board and Auditors

The Board is responsible for the preparation of the financial statements. It is our responsibility to consider whether the European Heart Network's balance sheet and income and expenditure account are in accordance with the detailed accounting records and, to consider whether we have received all of the information and explanations which we consider necessary

Opinion

We certify that we have obtained all the information and explanations required by us as auditors and that the attached income and expenditure account for the year ended December 31, 2006 and the balance sheet at that date are in agreement with the records maintained by the European Heart Network.

Mechelen, March 24th 2007



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