

fighting heart disease and stroke european heart network



# Annual report **2021**

# **Table of contents**

Mission and vision	2
What was news in 2021: a reader's guide	
Message from the EHN President and CEO	4
Main achievements in 2021	6
Cardiovascular health in Europe, in times of the Covid-19 Pandemic	
Publications, position papers and statements, responses and media at a glance	9
Policies to advance cardiovascular health in Europe	
Cardiovascular patients	
Research	
European grants and projects	
Annual workshop	
Top 10 recommendations for remote delivery of healthcare to CVD patients	
Working with the EU Institutions	
Cooperation	
Conferences and meetings	
EHN governance	
Accounts	

# **Mission and vision**

## **European Heart Network**

The European Heart Network (EHN) is a Brussels-based alliance of foundations and associations dedicated to fighting heart disease and stroke, supporting patients, representing patient interests and funding research throughout Europe.

## **Our mission**

To play a leading role in the prevention and reduction of cardiovascular diseases, in particular heart disease and stroke, through advocacy, networking, capacity-building, representing patient interests and research so that they are no longer a major cause of premature death and disability in Europe.

## **Our vision**

Every European has a right to a life free from avoidable cardiovascular diseases.



fighting heart disease and stroke european heart network



# What was news in 2021: a reader's guide

2021 was year two of the Covid-19 pandemic, which put the value of health for society above any other consideration. The European Heart Network, being a cardiovascular health community, saw the impact of Covid-19 on cardiovascular disease exposed through a magnifying glass. EHN exchanged frequently with its members to keep them informed with up-to-the-minute news on the pandemic, in the context of health care, CVD research and patient communications.

If you would like to know more about the impact that Covid-19 has had on CVD, please investigate Chapter three, which takes a closer look at the link between Covid-19 and CVD.

Chapter two sets out what achievements were possible for EHN during the pandemic.

An overview of EHN papers and statements are listed in Chapter 4.

EHN policy work, but also EU policy developments can be found in Chapters 5-7.

To find out more about EHN's involvement in EU Research projects, check Chapter 8.

The central EHN event of the year, the Annual workshop, was transformed into three virtual sessions, with relevant topics for EHN members; please read more in **Chapter 9**.

You will find plenty of information on how EHN cooperates at EU level, in Brussels and worldwide, in **Chapters 10–12**.

Nothing moves without solid governance, so please refer to **Chapter 13** for information on EHN and its structure. EHN is committed to transparency. You will find information about EHN accounts in **Chapter 14**.

Enjoy reading!

		_	
	— )		
		$\subset$	
		$\subset$	$\supset$
			$\supset$
			$\supset$
$\square$			

# Message from the EHN President and CEO



Gradually, countries are opening, after two intensive years of Covid-19. We are still far from a normal situation, but it seems that most of our member countries found ways to deal with the disease and to start-up regular health care for patients, including those with cardiovascular diseases.

Our Brussels team, under the guidance of Birgit Beger, was able to bring cardiovascular diseases and the need for prevention to the attention of the European Commissioner for Health and Food Safety, continuously. Also, we amended our strategy, to stress the importance of prevention, as well as the need for more digitalisation in health care to be able to tackle the increasing challenges faced by millions of cardiovascular patients in Europe.

EHN is a member-based organisation and I am very happy to see that so many members got involved in implementing our strategy into action, in areas such as advocacy, research and patient care. The collaboration of our members among each other and with the staff in Brussels is the key to the reinforcement of our organisation.

2021 has been my last year as your president and I would like to thank everybody for the nice and fruitful cooperation and trust, as well as for the personal friendships with many of you. Charmaine Griffiths, CEO of the British Heart Foundation, has taken over the leadership since 1 January 2022 which is wonderful news!

I wish Charmaine, Birgit, the staff in Brussels, my fantastic former board colleagues and all our members lots of success in the coming year and of course, a lot of pleasure in reading all our 2021 highlights in this annual report.

Best wishes.



**Floris Italianer,** EHN President

Cardiovascular disease (CVD) is the leading cause of mortality in Europe and globally and creates a substantial economic burden for health systems. It is therefore imperative that action is taken to address and improve prevention, treatment and management of CVD. Yet, political strategy and leadership to build a sustainable environment for cardiovascular health in Europe is lagging. The Covid-19 pandemic has exposed weaknesses in health systems and highlighted the scale of the burden carried by CVD. With the current political momentum behind cardiovascular health, EHN has been calling for the creation of an EU action plan on CVD, underpinned by multi-stakeholder cooperation and dialogue with policymakers.

Already in 2020, the urgent need for a specific European plan to address cardiovascular health prompted the European Heart Network, together with the European Society of Cardiology, to publish a ground-breaking document entitled: "Fighting cardiovascular disease – a blueprint for EU action".

The Covid-19 pandemic took health care systems all over the world as hostage. However, in every crisis there is opportunity for rethinking the way we work and with whom we work. Given the growing urgency to address Cardiovascular Health, in 2021, three European organisations committed to the fight against CVD. The European Heart Network (EHN), the European Society for Cardiology (ESC), and MedTech Europe came together and founded a multi-stakeholder alliance to catalyse change in Europe for cardiovascular health. By bringing together partners from different sectors, they could capitalise on their unique expertise and propose comprehensive, multi-pronged, workable solutions to policymakers. On World Heart Day, 29 September 2021, the European Alliance for Cardiovascular Health (EACH) was officially launched with the aim of calling for a comprehensive EU policy response to improve the cardiovascular health of European citizens. You will read more about EACH in this annual report.

At the very end of the year, in December 2021, the European Commission reacted to the epidemiological and political urgency of CVD and finally published plans for a policy initiative on non-communicable diseases (NCDs) due to be launched in June 2022. The initiative covers five strands: cardiovascular, respiratory, mental, and neurological diseases, diabetes, as well as one on lifestyle-related risk factors that include alcohol, tobacco and nutrition. This effort has the potential to be a major step forward and could change the health landscape for CVD and patients across Europe, depending on the milestones to be achieved in the road map. This ground-breaking news announces a change of landscape as early as 2022 for cardiovascular health policy in Europe. The European Heart Network (EHN) very warmly welcomed the new EU Healthier Together Initiative on NCDs. With its strand on CVD, we see the EU Initiative on NCDs as a very timely and needed step towards creating a European CVD plan, which should be an inspiration for national cardiovascular health plans to be developed in Member States. EHN, together with its members, stands ready to provide the patients' perspective in the CVD strand, insofar as 'quality of life' remains a building block in the planning of the initiative (2022–2027), which needs to be structured, dedicated, and well financed to be a game changer by 2027. You will read more about the CVD strand of the EU Initiative in the report, which we hope you will enjoy reading. The EHN secretariat looks forward to receiving any questions and comments from you.

Cordially.



**Birgit Beger,** CEO, EHN

# Main achievements in 2021



## Foundation of the European Alliance for Cardiovascular Health, official Launch on 27 September 2021

On 27 September, the European Alliance for Cardiovascular Health was officially launched during a high-level policy debate attended by representatives of European Commission, Member States and European Parliament. The event discussed policy actions to improve cardiovascular care for citizens across the EU.

Promoting better cardiovascular health for Europeans is the aim of the European Alliance for Cardiovascular Health (EACH), in which 17 European and international health organisations have joined forces to call on the EU to elaborate an ambitious plan to address the burden of CVD and really make a difference to improve the lives of millions of people.

The Alliance partners represent all aspects of cardiovascular care: from the patients, who suffer from the disease to the clinicians and health professionals who take care of them, from health insurers to research organisations, and industries that develop the medical and technological innovations that improve the management and care of the disease.

EACH has published a <u>Joint Statement</u> which is a founding document for the Alliance.

In October 2021, EACH submitted to the Commission <u>a proposal for a Joint Action</u> <u>on Secondary Prevention</u> of cardiovascular disease to serve as inspiration in developing the EU4Health 2022 work programme.

European Alliance for Cardiovascular Health
Compared from the second secon
MedTech Europe from diagnosite to care
COPE Martin Landon Control Co



## Success in Advocacy: The European Commission launches its Initiative on non-communicable diseases (NCDs), with a dedicated CVD strand

EHN and its members advocated for many years to put CVD higher on the policy agenda, notably through the <u>Blueprint for EU action</u>, a joint publication with the European Society of Cardiology aiming to address the heavy societal and economic burden of CVD.

At the end of 2021, the European Commission took the initiative. On 15 December 2021, a webinar was held for the non-communicable disease stakeholder community, chaired by John Ryan, the European Commission Director for Public Health (DG SANTE). The new European Commission initiative, called 'Healthier together' aims to support Member States in their efforts to reduce the burden of Non-Communicable Diseases (NCDs). The 'Healthier together' initiative focuses on 4 disease areas (cardiovascular diseases, diabetes, chronic respiratory diseases and mental health & neurological disorders) and one horizontal area, health determinants. Further development of specific activities under this initiative will take place in 2022.

# EHN is accredited as non-state actor with official links to WHO-Europe

At the 71<sup>st</sup> WHO Regional Committee for Europe (September 2021), the European Heart Network was accredited as a non-state actor with official links to WHO Europe. As an accredited non-state actor, EHN will be invited to participate in Regional Committee meetings, which take place in September every year. EHN will therefore be able to participate as an observer, submit written and oral statements and record video statements, which will also be made available on the WHO Europe website.

In addition, EHN is encouraged to continue to strengthen its collaboration with WHO Europe's technical units and country offices throughout the year. EHN is also welcomed to contact WHO with questions and suggestions on how they can intensify collaboration with EHN or with non-state actors in general. Active partnership is encouraged, so that the common goal of improving the health of the people in the WHO European Region and delivering on the European Programme of Work as endorsed by the Regional Committee can be achieved. To this end, a three-year work plan between WHO Europe and EHN has been agreed.

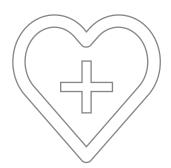
# Cardiovascular health in Europe, in times of the Covid-19 Pandemic



Covid-19 taught us important lessons. Existing cardiovascular conditions massively increased the negative effects of Covid-19 infections: data have shown that pre-existing cardiovascular conditions are particularly important predictors of Covid-19 severity and mortality. Conversely, after contracting Covid-19, frequent outcomes in patients are cardiovascular conditions, often with longterm health effects.

EHN together with its members, took on the challenge and exchanged about latest developments to support patients, for example Covid-19 research on CVD or online communication and tools to interact with CVD patients. Furthermore, EHN members kept in close contact through virtual EHN Annual workshop sessions. The sessions intended to address the challenges, but also the opportunities which Covid-19 presented in terms of Covid-19 strategy, digital tools, and cross-border topics. It was invigorating to see how committed and innovative EHN members were in taking on the challenge and standing united in support of cardiovascular health in Europe.

The Covid-19 pandemic brought much disruption and suffering to Europe, but it also enabled the recognition of health as wealth, as well as the need for resilient health care systems across borders. It also clearly brought the urgency of addressing cardiovascular health in Europe to the forefront, being the most urgent matter in terms of epidemiology, economic burden, and a serious threat to a healthy European population.



# Publications, position papers and statements, responses and media at a glance



## Publications

EHN revised paper on 'Early detection of cardiovascular disease'

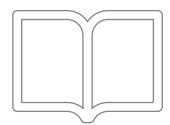
In January 2021, EHN published its revised paper on 'Early detection of cardiovascular disease'. It focuses on strategies for prevention at an individual level and early identification of so-called high-risk individuals; that is, people who are at high risk of developing or dying from cardiovascular disease.

It builds upon available evidence from several studies and evidence gathered by experts as part of the WHO initiative on screening, published in the WHO Health Evidence Network (HEN) report 'What is the effectiveness of systematic population level screening programmes for reducing the burden of cardiovascular disease?', which synthesizes several high-quality, randomised controlled trials.

Key messages include:

- there is potential value of case-finding within clinical practice, which involves assessing individuals that may be at risk of CVD when they use the healthcare system.
- evidence-based, targeted case-finding in selected settings and to specific population groups known to be at high risk are more likely to be effective for reducing CVD.
- digital technologies and Big Data could potentially transform early detection, for example by stratifying the population into risk groups using data from electronic health records or by self-monitoring, but further research and scientific validation of such technologies are needed.

Reducing the burden of cardiovascular disease remains important in the WHO Europe region and must also be a priority for the EU and Member States to meet their commitments on international frameworks, including the 2030 Agenda for Sustainable Development Goals (SDGs) and the WHO Global Action Plan for the Prevention and Control of Non-Communicable Diseases, which recommends improving prevention, early detection, treatment and sustained management of people with or at high risk of cardiovascular disease.



## **Position Papers**

EHN position paper on 'Heated Tobacco Products and cardiovascular disease'

EHN's new position paper published in September 2021 on Heated Tobacco Products (HTPs) and cardiovascular disease shows that HTPs are particularly harmful to the cardiovascular system as they increase the heart rate and blood pressure (similar to conventional cigarettes). HTPs have similar devastating effects on cardiovascular health as conventional cigarettes.

EHN's recommendations on Heated Tobacco Products are:

- a clear definition of HTPs is imperative.
- users of HTPs suffer from similar, devastating effects on cardiovascular health as conventional cigarette users. They can therefore not be recommended as safe alternatives, nicotine replacement therapies or quit aids.
- HTPs produce second-hand smoke, both indoors and outdoors and can therefore not be considered safe for non-users.
- considering the similarities in CVD outcome in users of HTPs and conventional cigarettes, both should be subject to the full effect of the Tobacco Products Directive. In countries where the TPD does not apply, HTPs should be subject to the same smoke free legislation.
- considering the similarities in CVD outcome in users of HTPs and conventional cigarettes, taxes and excise duties on HTPs should be at the same level as for conventional cigarettes.

## Statements

EHN calls to protect children from the marketing of nutritionally poor food November 9, 2021

## Media

EHN published an article in the publication of the European Observatory on Health Systems and Policies on the urgency of a European CVD plan:

<u>Rise like a phoenix: Health at the heart of a resilient future for Europe (Eurohealth)</u> (who.int) December 2021



# Policies to advance cardiovascular health in Europe



## Early detection of cardiovascular disease

To reduce the onset of cardiovascular disease (CVD), it is crucial to identify those persons at high risk of developing CVD, and to provide them with appropriate advice and preventive treatment.

The <u>EHN revised paper 'Early detection of cardiovascular disease</u>' calls for a European wide joint action and/or network of Member States, supported by experts, to identify the most effective policies, measures, and programmes for reaching out to and managing high risk individuals for cardiovascular disease and to detect those with specific, highly treatable cardiovascular conditions. EHN together with partners of EACH are jointly advocating for a joint action funded by the EU4Health programme to support Member States to implement early detection programmes, raise awareness of the disease, improve data collection and share best practices.

# The potential of digitalisation for cardiovascular health and innovation

Digitalisation has increasingly been embedded in our everyday life. Digital technologies have begun to change the practice of medicine, hence research and innovation. The availability of a broad scope of tools, whether electronic health records, mobile health tools, wearables, registries or other, have spurred tremendously the health data generation. Digitalisation, big data and artificial intelligence are steering medicine to a bottom-up data management that involves real-time data extraction and analysis of various data sources. This offers the opportunity to boost clinical and pharmacological research in CVD by improving the design, speed and efficacy of more targeted and multi-country clinical trials at lower cost and in less time, without compromising safety of patients. Real world data can provide important information, complementing clinical trial data: on the natural course of a disease, on patient characteristics (including patient groups that are normally not covered, such as cardiovascular patients with comorbidities, young women or other), on therapeutic gaps and quality of life. Digitalisation can also serve as an external reference for determining comparative effectiveness of medical technologies and medicines.

Patients' meaningful involvement in both research for novel products and in the medicines' regulatory process is a key factor for building trust in future innovations. Patient needs and expected outcomes are key to factor-in from the outset to ensure relevance, value, efficacy and adherence. Interoperability is crucial. A robust collection of high-quality data coming from patient reported outcomes is increasingly important to better evaluate the added value of a medicine.



In order to unleash the full potential of health data, the European Commission is working on several initiatives, including the Pharmaceutical Strategy for Europe and the European Health Data Space. <u>The Pharmaceutical</u> <u>Strategy for Europe</u> aims at creating a future proof regulatory framework and at supporting industry in promoting research and technologies that reach patients in order to fulfil their therapeutic needs while addressing market failures. In 2021, the European Heart Network contributed to two European Commission consultations (in April and December 2021) and a technical consultation meeting in May 2021.

The European Health Data Space (EHDS) will be a key pillar for a strong European Health Union and the first common EU data space in a specific area to emerge from the European strategy for data. The European legislative proposal is expected in 2022 and will aim to support individuals to take control of their own health data, support the use of health data for better healthcare delivery, better research, innovation and policy making and enable the EU to make full use of the potential offered by a safe and secure exchange, use and reuse of health data. In 2021, the European Heart Network contributed to several virtual meetings aimed at feeding the process of the development of the proposal. EHN's involvement in the European Medicines Agency, particularly in the EMA-HMA Big Data Steering Group, has been crucial in this respect. In the course of 2021, EHN participated in 19 meetings of the EMA, either as speaker or participant, looking at the various aspects of data use for research, innovation, policy and regulatory decision making.

## **Changing food environments**

Current food and consumption patterns are not only undermining people's health but they are also often based on unsustainable production systems. EHN already addressed this point in 2017 when it produced its paper on Transforming European Food Systems for Cardiovascular Health. This debate is now at the centre of further food policy development, not only at EU level, but also at WHO and UN level. Together with the EU Food policy Coalition, EHN is involved in developing views on the changes needed to address the health and environmental impacts of food production, availability and consumption and environmental impacts of food production, availability and consumption, to assure that these systems are more sustainable and contribute to people's health. EHN was actively involved in the development of several statements and position papers in 2021.

## Food and nutrition policy at EU level

The European Commission presented its views for the future of EU food policies in its Farm to Food strategy in 2020. In the framework of this strategy, several developments in which the European Heart Network was involved have taken place:

- EHN was an active contributor to the European Commission led dialogues with stakeholders on the EU Code of Conduct on Responsible Food Business and Marketing Practices. The code of conduct was launched on 5 July 2021. It consists of voluntary commitments made by food business operators, which contribute to a food environment that makes healthy and sustainable food choices easier. If these commitments are deemed insufficient, the Commission will consider legislative measures.
- The Farm to Fork Strategy sets as one of its activities to 'determine the best modalities for setting minimum mandatory criteria for sustainable food procurement to promote healthy and sustainable diets, including organic products, in schools and public Institutions' by Q3 of 2021. EHN participated in these preparatory meetings. Together with a coalition of health and environment NGOs, EHN is outlining criteria for public procurement rules for canteens in schools and public institutions.
- The Farm to Fork Strategy sets as a major objective to develop a Proposal for a legislative framework for sustainable food systems by 2023. Preparatory work to transform the EU Food policy legislation has started in 2021, and in the last quarter of 2021, the European Commission opened a feedback procedure on this topic. EHN responded in November 2021, basing its replies on the EHN position paper on 'Transforming European Food policies for cardiovascular health'.
- In December 2021, EHN organised a meeting with its members active in food and nutrition policies, to prepare a response to the Commission consultation on nutrient profiles and on front of pack nutrition labelling. The final response was sent to the Commission in the first quarter of 2021.

**\** 12

## Marketing of unhealthy foods to children

Marketing of unhealthy foods to children is one of the main contributors to high levels of obesity, a well-known risk factor for cardiovascular disease. In November 2021, the Healthy Marketing Coalition, which consists of several European health and consumer organisations including EHN, <u>launched a call to protect children from nutritionally poor food</u>. This call accompanies the launch of a Blueprint EU Directive, showing how the EU can use its powers to effectively regulate cross-border marketing.

## EU trans-fat free as of April 2021

As of 1 April 2021, foods containing more than 2g/100g of industrially produced trans fatty acids are no longer allowed on the EU market. The removal of these trans fatty acids (TFAs) from the food supply is one of the most straightforward public health interventions in the EU. EHN has campaigned for many years to remove industrially produced TFAs from the food chain and is happy to see its sustained efforts bore fruit.

## Tobacco control and smokefree policies

Via its membership of the Smokefree Partnership (the EHN CEO is the current president of the SFP), EHN is contributing to the revision of the Tobacco Taxation Directive. High taxation of tobacco products is known to be an important contributor to reduced consumption of tobacco products. EHN pleaded for increased taxes and excise duties in the EU public consultation on this topic.

On 17 March 2021, the European Commission consulted with EU health NGOs on topics to be included in the upcoming (2023) review of the Tobacco Products Directive. Although the review is only in a preparatory stage at the moment, EHN's input, based on its two position papers (Heated tobacco products and cardiovascular disease and Electronic cigarettes and cardiovascular disease) were of the utmost importance in this consultation.

# **Cardiovascular patients**



## **EHN Patient Working Group**

Almost half of EHN members are patient organisations supporting people living with cardiovascular disease and representing the patient voice at national level. Their combined outreach is over 2 million patients and carers in Europe.

# Linking patients with the research and medical communities

In addition to working closely with EHN's <u>Research</u> <u>Platform (for more information see below section 7)</u>, EHN and its members carry patient needs and preferences forward in EU-funded projects. Click here for information on EU-funded projects that EHN has been involved in.

As the independent European CVD patient organisation, EHN provides a forum for its member organisations and the patients they represent. Together, we elevate the patient voice to influence EU policies affecting people living with cardiovascular disease and improve cardiovascular health and care across Europe.

Due to the pandemic, EHN members could not meet physically, but held virtual exchanges as part of the EHN series of the Annual Workshop. In May 2021, the group with all EHN members discussed European policy developments in the European Health Data Space and engaging with patients in a digital era.

## **European Medicines Agency (EMA)**

EHN's membership in EMA's Patients and Consumers Working Party (PCWP) dates back to 2008. Within the current mandate, 2019–2022, EHN remains highly active in EMA activities, representing patient interests and providing input as needed on relevant EMA-scientific and regulatory discussions.

In 2021, EHN participated in 6 PCWP meetings and contributed to a variety of portfolios including: Covid-19

vaccines, therapeutics and their surveillance (in particular to how they related to cardiovascular complications and interests of cardiovascular patients); medicines development and authorisation; the potential use of real world health data for regulatory decision making in the whole lifecycle of medicines and medical devices; stakeholders engagement with the EMA, the extension of EMA's mandate, opportunities for collaboration with equivalent groups, such as the FDA Patient Engagement Collaborative; artificial intelligence in clinical trials; pharmacovigilance activities and patient safety. PCWP's new mandate runs from 2022–2025.

In addition, EHN volunteered and participated in two adhoc working groups:

- a stakeholders' group that supported the final stages of the development of the Clinical Trials Information System (CTIS), which went live on 31 January 2022.
- a stakeholders' subgroup that was consulted on the trend of complex medicines' names and the impact that this has on readability/pronunciation, and possibility for medication errors.

Importantly, EHN appointed patients from its membership to participate in CVD-specific scientific advice procedures, review patient information leaflets, as well as other communication documents addressed to patients.

Finally, EHN is a member of the EMA-HMA Big Data Steering Group, representing patient views on all aspects of data use for regulatory decision making across the lifecycle of medicinal products. In 2021, EHN participated in 19 dedicated meetings and public virtual events, either as speaker or participant, providing input on various aspects for the optimal use of data for regulatory decision making, including discussions on data quality, standards, metadata, artificial intelligence, real-world data and real-world evidence, training and expertise of the regulatory network and stakeholder groups, data governance and similar.

# Research

## **EHN Research Platform**

EHN facilitates networking and exchange between its research-funding members, gathered in the EHN Research Platform, as well as their interaction with members of the EHN's Patient Group.

The Research Platform comprises those EHN members that fund cardiovascular research. It serves as the EHN expert group to be consulted in relevant research-related topics and policies. Together, they develop the EHN's positions on issues that directly or indirectly impact CVD research and engage in EU policy discussions to:

- improve awareness of the need for CVD research, and
- influence the EU research framework programme and its implementation, for better balanced EU funding, with sufficient funds available for CVD research.

The Research Platform meets once a year but in addition regular liaison takes place throughout the year via email, subgroup meetings and other means.

Due to the pandemic, EHN members could not meet physically, but held virtual exchanges as part of the EHN series of the Annual Workshop. In October 2021, the group with all EHN members discussed cross-border collaboration on cardiovascular research. *For more information, please refer to* **page 27**.



# European grants and projects

## Big Data@Heart Project

BigData@Heart is a five-year project funded by the Innovative Medicines Initiative (IMI 2), a public-private initiative between the European Union and the European umbrella association of pharmaceutical companies (EFPIA). The project aims to improve patient outcomes and reduce the societal burden of acute coronary syndrome (ACS), atrial fibrillation (AF) and heart failure (HF). It is one of the four disease-specific consortia of the IMI Programme Big Data for Better Health Outcomes.

In February 2021, EHN in collaboration with researchers at the University Medical Centre Utrecht, launched a survey to explore patient and public preferences for concretising data-intensive health research governance.

The <u>public survey</u>, was made available in 11 languages and was open for input until May 2021. It received a total of 1280 responses from 8 European countries. Overall, findings pointed out that:

- greater attention was needed to patient and public preferences and their expectations from public policies on data governance and data governance models.
- policies for strengthening personal control by patients as well as checks and safeguards at the governance level were needed.

The research team will be finalising a paper to be published in 2022. EHN and researchers of the UMC Utrecht are grateful to EHN members for providing input to the design of the survey and for disseminating widely the survey to their constituencies.

In September 2021, the project launched a new podcast series. In the first podcast, Birgit Beger, EHN CEO, discussed the topic of digital health technologies with Donna Fitzsimons, Head of the School of Nursing & Midwifery at Queen's University Belfast, and Thomas Beer, voluntary representative of the German Heart Foundation. They looked at digital technologies' value for cardiovascular patients and healthcare professionals, and their wishes for their future development and use. EHN participated in dedicated consortium virtual meetings, contributed to the development of four project newsletters for 2021 and promoted project findings via its website and social media.



# Annual workshop



The Annual Workshop is the major event for EHN members, where knowledge-sharing and capacity building take place in a convivial atmosphere. At EHN's Board meeting of 25 November 2020, it was decided that due to Covid-19, EHN's Annual Workshop 2021 could not be organised in a 'live' version. Instead, it was decided to organise two virtual meetings and one 'live' meeting (if possible – depending on the evolution of the pandemic) towards the end of the year. In the end, three virtual annual workshop sessions took place throughout 2021.

In discussions with the EHN Programme Committee and the EHN Board, three workshop sessions were designed

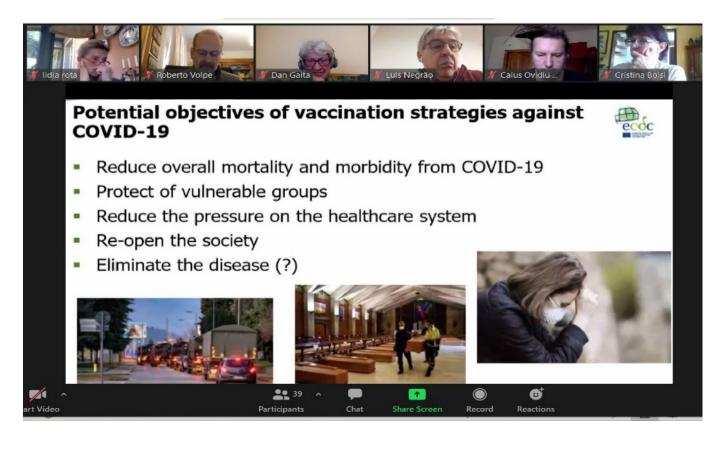
to address as closely as possible, current items of interest and importance for EHN members.

The first theme was dedicated to **Covid-19 strategy** since this presented the major, overarching theme at the time. The second topic, also amplified by Covid-19, was the role of **Digitalisation**, **Artificial Intelligence and CVD**. The series was completed by a third session on the issue of **Cross-border topics: European Union for Health, cooperation in Europe, cross-border Research projects**.

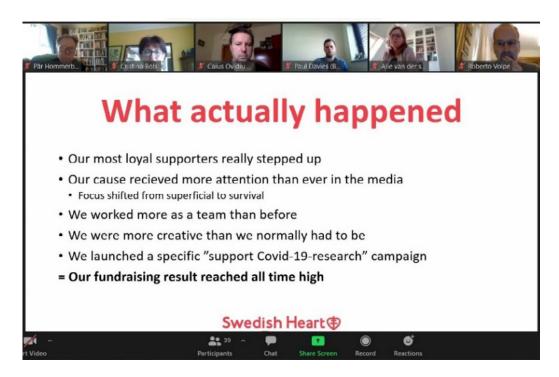
## Virtual Annual workshop meeting 1: Covid-19 strategy Meeting

Thursday 25 February 2021 (10:00–12:15 CET)

**Session 1: Vaccination and patient communication in times of Covid-19** (10:00–11:00)



Session 2: Fundraising and Heart Foundations' organisational issues in times of Covid-19 (11:15–12:15 CET)

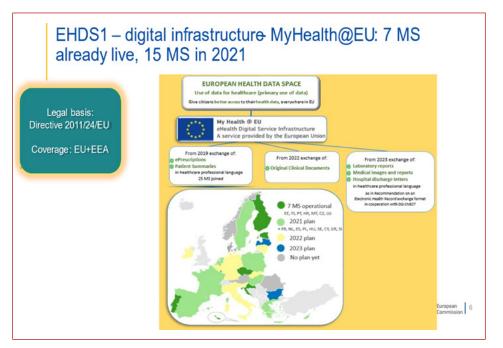


## Virtual Annual workshop meeting 2: Digitalisation, Artificial Intelligence and CVD

Thursday 20 May 2021 (14:30–16:45 CET)

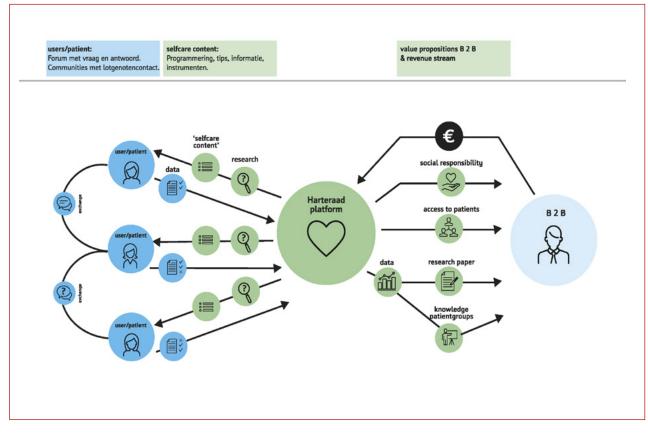
Session 1: The European Health Data Space: an overview of policy and programme priorities

The European Health Data Space presented an important priority of the European Commission to facilitate cross-border exchange and access to different types of health data (electronic health records, genomics data, patient registries etc.) to support healthcare delivery, health research and health policy making. This exchange was an opportunity to have an overview of the state of play and to reflect on opportunities for improving cardiovascular research and services for patients.



## Session 2: Engaging with patients in a digital era – examples from EHN members

Anke Vervoord, Director, Harteraad: The association's digitalisation and engagement with patients



Paolo Magni, MD-PhD, University of Milan and Italian Heart Foundation (IHF): How the pandemic shifted conversation topics about cardiovascular disease

#### **KEY INSIGHTS FOR HEART FOUNDATIONS AND PATIENT ASSOCIATIONS**

- 1. The limited attention to CVDs (incl. prevention issues) registered (in Italy) through the Web conversations is not consistent with the epidemiological relevance of CVDs.
- 2. Crucial role of Web interactions in influencing beliefs and health-related behaviors > urgency to promote novel prevention strategies and to engage people leveraging digital channels and Social Media.
- **3.** Dissatisfaction with the care experience of patients and caregivers grew stronger during the pandemic period.
- Need to develop novel models of patient management, also remotely (digital tools, telemedicine), to encourage citizen/patient involvement and empowerment.
- 5. ....Other considerations?

# Virtual Annual workshop meeting 3: Cross-border collaboration on cardiovascular research

Thursday 21 October 2021 (10:00-12:15 CET)

### Session 1: EU research opportunities: CVD in Horizon Europe

Keynote address by Grzegorz Owsianik, in Unit D1 – Combatting Diseases, Directorate-General for Research and Innovation, European Commission

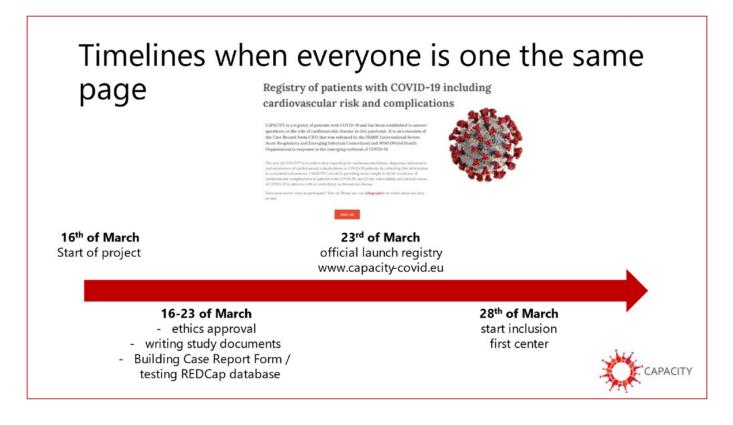
Horizon Europe – Cluster HEALTH Focus on outcomes contributing to the impacts specified per Destination Project proposals should make a clear case (value proposition) supported by a convincing trajectory (pathway to impact) for the project proposal to deliver the output, promote the outcome described in the topic, and contribute to the impact expected under that destination.

- 1. Staying healthy in a rapidly changing society.
- 2. Living and working in a health-promoting environment.
- 3. Tackling diseases & reducing disease burden.
- 4. Ensuring access to innovative, sustainable & highquality healthcare.
- 5. Unlocking the full potential of new tools, technologies and digital solutions for a healthy society.
- 6. Maintaining an innovative, sustainable & globally competitive health industry.

Session 2: CVD and Covid-19: Lessons learnt from research and collaborations

#### Most important lessons learnt from the CAPACITY-COVID registry – Marijke Linschoten, physician and

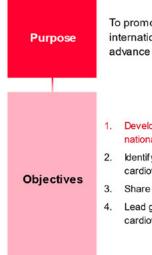
early career scientist, co-founder and coordinator of the CAPACITY-COVID registry



ConclusionFunding CVD-<br/>related Covid-19<br/>projects is in<br/>the interest of<br/>our patients<br/>(= members/<br/>donors)

**An update on the Global Cardiovascular Research Funders Forum** – Nilesh Samani, Medical Director, British Heart Foundation

## The Global Cardiovascular Research Funders Forum





Covid-19 research projects – Martin Vestweber, CEO, German Heart Foundation

- . Develop a mechanism to enable and facilitate multi national investigator -led clinical trials
- 2. Identify, develop and fund collaborative strategic cardiovascular research initiatives
- 3. Share know ledge and best practice
- Lead global advocacy efforts to increase support for cardiovascular research



- American Heart Association
   British Heart Foundation
  - Danish Heart Foundation
    - Dutch Heart Foundation
    - German Centre for Cardiovascular Research
    - Heart and Stroke Foundation of Canada
    - Institute of Circulatory and Respiratory Health, Canada
    - Leducq Foundation
    - National Heart Foundation of Australia
    - National Heart Foundation of New Zealand
    - National Heart, Lung, and Blood Institute, USA

Others may join as formal members or as external partners for specific initiatives

0

**Cooperation in prevention of Covid-19** – Massimo Volpe, President, Italian Society for Cardiovascular Prevention (SIPREC)

	recommendations for remote ry of healthcare to CVD patients
1	Use existing systems and platforms (patient portals) to encourage patients to initiate remote healthcare when available.
2	Create a system that allows some time for urgent consultations. Patients are frightened and they need to be able to ask questions about their health.
3	Provide routine appointments to CVD patients either through telephone or online services.
4	Work with colleagues to ensure that patients are not required to access multiple unconnected services. For example, a telehealth service providing prescriptions to CVD patients will not succeed if pharmacy is not included in the care pathway.
5	Make sure patients know there is a clear line of communication to minimise emergency department overuse for non-critical issues.
6	Ensure that patients with CVD know that sudden change in cardiac symptoms, including breathlessness, chest pain and oedema, still require urgent treatment.
7	Consider use of connected technology. For example, digital trackers, blood pressure monitors, weighing scales to monitor and support.
$\bigotimes$	Ensure privacy, keep it simple, if people need support to start, consider creating a downloadable PDF 'how-to' guide.
9	Resources can be delivered synchronously (i.e. in real time) or asynchronously. Each has a place in supporting people with CVD.
10	Audit your data and report it so that best practice in remote delivery can be upscaled, and lessons learnt can be shared with colleagues around the world.

# Working with the EU Institutions

## **European Commission**

Meeting with the European Commissioner Stella Kyriakides, 18 May 2021





European Commissioner for Health and Food Safety, Stella Kyriakides met with EHN President Floris Italianer, EHN Vice-President Tuija Brax and EHN CEO, Birgit Beger in an online meeting on 18 May 2021. The overall purpose of the meeting was to exchange on the Covid-19 pandemic and the urgency this brought to CVD patients in Europe across all the different health care systems. The EHN President underlined that the European Union needed a European Plan for CVD more than ever before.

## Commissioner's support on World Heart Day

EHN appreciated the Commissioner's personal support of the launch of the European Alliance for Cardiovascular Health on World Heart Day, on 29 September 2021 and looks forward to the continued and fruitful cooperation with the European Commission in making Europe a healthier place for everyone.

## Responses to European Commission's consultations:

- <u>EHN response to the Commission Consultation on the</u> <u>Revision of the EU general pharmaceuticals legislation</u> 20 December 2021
- <u>EHN response to the Commission consultation</u> on the roadmap for the Revision of the EU general pharmaceuticals legislation 27 April 2021
- <u>EHN Response Commission Consultation on EU farm</u> and food products: – review of policy on promotion inside and outside the EU 9 March 2021
- <u>EHN response Structure and rates of excise duty</u> <u>applied to manufactured tobacco</u> 4 January 2021
- <u>EHN response cross border acquisition of excise</u> <u>goods by private individuals</u>
   4 January 2021

## **European Parliament: MEP Heart Group**

<u>MEP Heart Group – The Members of the European Parliament Heart Group</u> is a forum which provides MEPs with an opportunity to generate dialogue, outreach and activities at EU and Member State level. It is made up of MEPs who have an interest in promoting measures that will help reduce the burden of cardiovascular diseases (CVD) in Europe and raise CVD as a priority on the EU political agenda.

The Secretariat of the MEP Heart Group is managed by the European Heart Network and the <u>European Society of Cardiology</u>

## MEP Heart group meeting on 03 February 2021

The MEP Heart group held a virtual meeting on 3 February entitled: 'Lessons learned from Covid-19 for Cardiovascular Health: Health Systems Resilience & Digital Transformation' where an MEP Heart Group statement was released: Lessons learned from Covid-19 for Cardiovascular Health MEP Heart Group Statement Feb2021.pdf

### MEP Heart Group meeting on 28 June 2021

On 28 June, a meeting of the MEP Heart Group took place on '*The EU funding landscape: promoting innovation for cardiovascular health*'. The programme of this meeting can be found <u>via this link</u>. The EU Commissioner for Research, Mariya Gabriel, spoke about *Horizon Europe & opportunities for cardiovascular research*, and the Deputy Director General of DG Santé, Pierre Delsaux, discussed about *Synergies between Horizon Europe & EU4Health: What role for HADEA in addressing cardiovascular health*. EHN members participated actively in the debate, with Christine Dehn, Patient Representative & EU Affairs Manager from the German Heart Foundation, talking about 'addressing unmet patient needs' in a session on '*The need for patient-centred innovation for improved cardiovascular treatment and care*'.

## Call-to-action-MEP-HG-Event-28.06-FINAL.pdf (mepheartgroup.eu)



In clockwise order: Commissioner for Research, Mariya Gabriel, MEP Co-Chair: Maria Carvalho, EHN CEO: Birgit Beger, Katholieke Universiteit Leuven, Prof. Dr. med. PhD. Karin Sipido, ESC Advocacy Committee Chair: Prof Hugo Katus



Maria da Graça Carvalho MEP (EPP, PT), Co-chair of the MEP Heart Group



**Brando Benifei** MEP (S&D, IT) Co-chair of the MEP Heart Group

#### MEP Heart Group meeting on 29 June 2021

On 29 June, together with the Smoke Free Partnership, three Groups of MEPs (MEP Heart Group, MAC (MEPs against Cancer) and MEP Lung Health Group) organised a virtual meeting on *'Europe's path to the Tobacco Products Directive 3.0'* on the upcoming revision of the Tobacco Products Directive and the next steps to take. During a panel discussion with participants from WHO and the European Parliament, Rutger Haandrikman, Team Manager Healthy Living & Public Affairs from the Dutch Heart Foundation presented the work done by the Dutch Smoke Free Alliance. More information can be found here: 29 June 2021 – Europe's path to the Tobacco Products Directive 3.0 – MEP Heart Group

## MEP Heart Group and Challenge Cancer Intergroup meeting on 9 December 2021

MEP Heart Group and the <u>Challenge Cancer Intergroup</u> held a joint meeting on 9 December entitled: '*Cancer Cardiovascular Co-morbidities and Complications: the opportunities for action*'. Cardiovascular disease is the most frequent side effect of cancer treatment, due to cardiotoxicity, which refers to toxic effects of cancer treatments on the heart function.

The programme included a keynote speech by the European Commission DG SANTE Director-General, Sandra Gallina and EHN speakers from the Spanish Heart Foundation, Lucía Martinez Santamaria (patient testimonial) and Dr. Teresa Lopez (patients' views in Cardio-oncology).

A Joint Statement on Cancer, CVD comorbidities and complications: opportunities for action was published on the same day.

## **EU Health Policy Platform**

The EU Health Policy Platform is an online forum of exchange between the European Commission and the community of EU health stakeholders. The online platform facilitates online discussions and frequent webinars. Online exchanges and collaborations lead up to the Platform's Annual Meeting.

In 2021, the EU Health Policy Platform hosted stakeholders' consultation discussions on priorities and actions to be funded by the EU4Health Programme. EHN actively participated in virtual meetings and shared its priorities verbally and in writing via available online tools (e.g. posts in appointed virtual spaces).

In December 2021, the European Commission set up an online stakeholder group for the 'Healthier together' Initiative. It aims to gather input for the four strands covered by the initiative. EHN is actively participating in the stakeholders group.

# Cooperation

## World Health Organization (WHO) – Regional office for Europe

As reported above, EHN was accredited at the 71<sup>st</sup> WHO Regional Committee for Europe as a WHO non-state actor in September 2021. This



will allow the European Heart Network to participate in future sessions of the WHO Regional Committee for Europe.

Due to Covid-19, there were no in-person meetings with WHO in 2021. However, EHN participated in the WHO Regional Committee for Europe online meeting. EHN also participated in the NCD Advisory Council Meetings in which EHN CEO, Birgit Beger, was invited as a member in a private capacity. EHN also participated in the WHO meeting on Commercial Determinants of Health (June 2021).

## **European Society of Cardiology**

EHN cooperates closely with the European Society of Cardiology (ESC). The two organisations jointly support the MEP Heart Group. EHN and ESC join



of Cardiology

forces to ensure that prevention of and research into cardiovascular disease remain a priority in EU policies and programmes. In 2020, the two organisations worked closely together to publish a blueprint for action on cardiovascular disease in the European Union.

An important stepping stone in the cooperation of the two organisations has been the plan and its fruitful implementation of founding the European Alliance for Cardiovascular Health in 2021.

## European Association of Preventive Cardiology

The objective of the European Association of Preventive Cardiology (EAPC) is to

promote excellence in



EAPC European Association of Preventive Cardiology European Society of Cardiology

research, practice, education and policy in cardiovascular health, and primary and secondary prevention. The CEO of EHN is a member of EAPC, its Cardiovascular Prevention Implementation Committee and is a consultant in the section on Population Science and Public Health.

In 2021, EHN joined the EAPC Task force on Walk10! The overall aim of Walk10! is to increase physical fitness in sedentary and obese individuals with CV risk factors, to gain knowledge on nutrition and exercise, to change nutrition and exercise habits and to reduce weight. The goal is that the participants achieve to walk (or run) 10km at a closing event. While many EHN members already have such programmes in place, it is of course interesting to find synergies between the activities of EHN and EAPC.

## **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 2020, EHN's Treasurer, Kristina Sparreljung, Secretary General of the Swedish Heart Lung Foundation, became a member of the WHF Board. EHN's CEO is a member of the WHF's Advocacy Committee.



In 2021, the EHN Board agreed to have a new cooperation with WHF, the so-called CVD scorecards; a project which aims to collect data on the burden of CVD. The Scorecard project focuses on the following aspects:

• assess and visualise the state of national CVD prevention and management programmes.

**European Heart Network** 



- highlight progress on the path to achieve Sustainable Development Goals (SDGs) Target 3.4 (by 2030 reduce by one-third premature mortality from noncommunicable diseases – NCDs) through prevention and treatment and to promote mental health and wellbeing) and motivate countries to take action.
- identify key policy gaps and create a sense of urgency for action needed at national and global levels.
- help prioritise specific policies or programmes to better align resources to areas of need.

Scorecards have already been prepared for Africa, and the Inter-Americas. EHN is now collecting data from the UK, Germany, France, Spain and Italy. To this end, EHN will liaise with its members from these countries to undertake the research. Results should be available in 2022.

## **European Chronic Disease Alliance**

The European Chronic Disease Alliance (ECDA) is a coalition of 11 European health organisations (EHN being one of them) sharing the same interests in combatting preventable chronic diseases through European policies that impact health. ECDA represents



millions of chronic disease patients and over 200 000 health professionals.

More information about ECDA can be found at: www.alliancechronicdiseases.org

## **Smoke Free Partnership**

The Smoke Free Partnership (SFP) is a large European coalition of around 50 partner organisations working on EU policy analysis and advocacy to



mobilise decision makers to make tobacco control a political priority. SFP's main partners are the Belgian Foundation Against Cancer, Cancer Research UK, the Dutch Cancer Society, the Norwegian Cancer Society, and the European Heart Network. The Belgian Foundation Against Cancer is SFP's Associate Partner. The former EHN Director, Susanne Løgstrup, was President of SFP from 2016 to 2018. EHN CEO, Birgit Beger, joined the SFP Board as a member in December 2020 and became President of SFP as of December 2021.

More information about SFP can be found at: <u>https://</u> <u>smokefreepartnership.eu</u>

## **Public Health Organisations**

EHN is an active member of the European Public Health Alliance (EPHA), which unites a range of organisations throughout



Europe that cover a broad spectrum of health issues. EHN participated in EPHA's working groups, notably in food and nutrition, air quality, access to medicines, digital health and ad hoc discussions on the marketing to children and the horizontal aspects of the Europe's Beating Cancer Plan.

# **Conferences and meetings**

Please find below a selection of events in which EHN participated.

#### JANUARY

EU4Health Programme 2021–2027, the vision for a healthier European Union, 22 January 2021

European Commission high level meeting on EU Code of Conduct on Responsible Food Business and Marketing Practices, 26 January 2021

Building a European Health Union for stronger EU preparedness and response for health crises, European Commission webinar, 29 January 2021

#### **FEBRUARY**

MEP Heart Group event: Lessons learned from Covid-19 for Cardiovascular Health: Health Systems Resilience & Digital Transformation: 3 February 2021

European Commission stakeholders meeting on ERA4Health research partnership, 17 February 2021

EHN virtual Annual Workshop, Covid-19 Strategy Meeting, 25 February 2021

#### MARCH

EMA Patients and Consumers' Working Party and Healthcare Professionals' Working Party joint meeting, 2–3 March 2021

European Commission EU4Health Workshop, 24 March 2021

EHN and ESC CVD data meeting, 25 March 2021

#### APRIL

ESC Preventive Cardiology Congress 2021 *"Managing cardiovascular risk factors: who's job is it?"*, 16 April 2021

Joint HMA-EMA virtual Workshop on Artificial Intelligence in Medicines Regulation, 19–20 April 2021

French Permanent Representation-ECDA meeting, 23 April 2021

### MAY

Joint EMA-HMA Data Standardisation Strategy – stakeholder virtual workshop, 18 May 2021

EHN Annual Workshop, Digitalisation: opportunities for improving cardiovascular health, 20 May 2021

EHN Annual General Assembly, 20 May 2021





## JUNE

WHO meeting on Non-State actor (NSA) engagement, 16 June 2021

EHN virtual meeting with the European Commissioner for Health and Food Safety, Stella Kyriakides, 18 June 2021

MEP Heart Group meeting: The EU funding landscape: promoting innovation for cardiovascular health, 28 June 2021

Smoke-free Partnership, MEPs Against Cancer and MEP Heart Group joint meeting, 29 June 2021

## JULY

EU High level launch of code of conduct for responsible Business and Marketing Practices: 5 July 2021

#### **SEPTEMBER**

Regional Technical Consultation to Support the Development of the WHO NCD Implementation Roadmap 2021, 7 September 2021

71st session of WHO Regional Committee meeting: acceptance of EHN as Non-State Actor, 13–17 September 2021

Good Clinical Practice Inspectors Working Group (GCP IWG) meeting with interested parties: AI in clinical trials, EMA virtual meeting, 14 September 2021

A new European Alliance for Cardiovascular Health Because EACH person counts! -Policy Debate, 27 September 2021

European Health Forum Gastein, The heartbeat of health innovation, 28 September 2021

#### OCTOBER

EHN Annual Workshop, Cross border collaboration on cardiovascular research, 21 October 2021

#### **NOVEMBER**

BigData@Heart Annual meeting, 15–16 November 2021

EMA Patients and Consumers' Working Party and Healthcare Professionals' Working Party annual meeting, 24 November 2021

## DECEMBER

Roundtable on Cholesterol and FH Prevention with WHF and Belgian Cardiology League, 2 December 2021

EPHA General Assembly: EHN participation, 5 December 2021

MEP Heart Group meeting: Cancer Cardiovascular Co-morbidities and Complications: the opportunities for action, 9 December 2021

European Commission Stakeholders webinar, Heathier Together – EU Noncommunicable Diseases Initiative, 15 December 2021

# **EHN governance**

Information about EHN and its structure, governance and finances are publicly available on its website.

## Membership

In 2021, EHN had member organisations from 24 countries in Europe.

## **General Assembly**

The General Assembly is comprised of all the member organisations of EHN.

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

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

# 13

## Board

EHN is governed by a Board that can comprise no fewer than three members and no more than eight. In 2021, EHN's Board was composed of 8 Board members:

Tuija Brax, Vice President Finnish Heart Association
Tim Collins, Irish Heart Foundation
Dan Gaita, Romanian Heart Foundation
Charmaine Griffiths, British Heart Foundation
Floris Italianer, President, Dutch Heart Foundation
Paola Santalucia, Italian Association Against
Thrombosis and Cardiovascular Diseases (ALT Onlus)
Kristina Sparreljung, Treasurer, Swedish Heart Lung
Foundation

Martin Vestweber, German Heart Foundation



**Floris Italianer,** President



Dan Gaita



**Tuija Brax,** Vice-President



Tim Collins



Kristina Sparreljung, Treasurer



Paola Santalucia



Martin Vestweber



**Charmaine Griffiths** 

## **EHN Secretariat**

EHN has maintained an office in Brussels since 1992. The Network has functioned as a legally registered, non-profitmaking association in Belgium (AISBL) since 1993.

The EHN Brussels office has a team of five people to coordinate EHN's work. The Brussels office acts as the central point for communication between the member organisations, facilitates its advocacy work with the institutions of the European Union, initiates research and publications work to underpin advocacy work, and organises the Annual Workshop, seminars and meetings for members. EHN also participates in pan-European projects.



EHN Staff, left to right: Marilena Vrana; Joëlle De Beys; Marleen Kestens, in front: Birgit Beger, Maria Cummins

## EHN member organisations in 2021

Country	Member name	
Belgium	Belgian Heart League*	
Bosnia and Herzegovina	Foundation of Health and Heart	
Croatia	Croatian Heart House Foundation	
Denmark	Danish Heart Foundation*	
Faroe Islands	Faroese Heart Foundation	
Finland	Finnish Heart Association*	
Germany	German Heart Foundation*	
Greece	Hellenic Heart Foundation	
Iceland	Icelandic Heart Association	
Ireland	Irish Heart Foundation*	
Italy	Italian Association against Thrombosis and Cardiovascular Diseases (ALT Onlus)	
itaty	Italian Heart Foundation	
	Italian Society for Cardiovascular Prevention (SIPREC)	
Lithuania	Lithuanian Heart Association	
Netherlands	Dutch Heart Foundation	
Nethertanus	Harteraad (Heart Council)*	
Portugal	Portuguese Heart Foundation*	
Romania	Romanian Heart Foundation*	

Country	Member name
Serbia	Serbian Heart Foundation
Slovenia	Slovenian Heart Foundation*
Spain	Spanish Heart Foundation*
Sweden	Swedish Heart and Lung Association*
	Swedish Heart Lung Foundation
Switzerland	Swiss Heart Foundation*
Turkey	Turkish Heart Foundation
United Kingdom	British Heart Foundation*

\* These member organisations are either dedicated patient organisations or organisations in which working for and with patients makes up an important part of their activities.

# Accounts

Auditor's report to the board of the European Heart Network for the year ended December 31, 2021.

# Respective responsibilities of the Board and auditors

The Board and the Company's management are responsible for the preparation of these financial statements. Our responsibility is to issue a report on these financial statements based on our review.

We conducted our review in accordance with the International Standard on Review Engagements 2400. This Standard requires that we plan and perform the review to obtain moderate assurance as to whether the financial statements are free of material misstatement. A review is limited primarily to inquiries of company personnel and analytical procedures applied to financial data and thus provides less assurance than an audit.

## Opinion

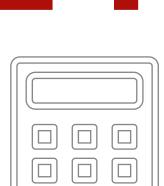
We certify that we have obtained all the information and explanations required by us as auditors and that the attached income and expenditure accounts for the year ended December 31, 2021 and the balance sheet at that date are in accordance with the records maintained by the European Heart Network.

Based on our review, nothing has come to our attention that causes us to believe that the accompanying financial statements are not presented fairly, in all material respects, in accordance with International Accounting Standards.

Kortrijk, 31/05/2022 VANDELANOTTE BEDRIJFSREVISOREN C.V.B.A.

VANDELANOTTE BEDRIJFSREVISOREN C.V.B.A. Represented by Frank VANDELANOTTE Certified Public Accountant

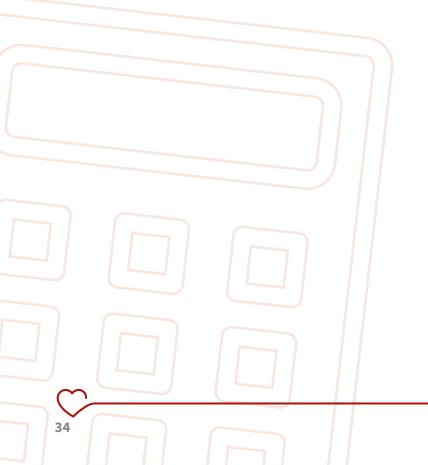
Kortrijk, 17/05/2022 VANDELANOTTE BEDRIJFSREVISOREN CV Represented by Frank VANDEL ANOTTE Certified Public Accountant



## **Key figures**

	2021	2020	2019	2018	2017	2016
Member subscriptions	476,060.41	581,761.96	558,600.00	564,827.00	564,827.00	548,372.00
EU grants & other income	33,519.87	67,287.54	391,335.61	380,650.52	65,143.64	51,351.88
Financial income	651.45	617.86	408.17	692.05	987.22	2,579.23
Total income	510,231.73	649,667.36	950,343.78	946,169.57	630,957.86	602,303.11
Regular expenditures	538,007.44	622,390.02	563,014.05	561,008.45	519,949.36	461,688.55
Project expenditures	34,185.06	60,616.16	220,636.43	197,924.95	168,504.87	129,031.95
Total expenditures	572,192.50	683,006.18	783,650.48	758,933.40	688,454.23	590,720.50
Surplus / (Deficit)	(61,960.77)	(33,338.82)	166,693.30	187,236.17	(57,496.37)	11,582.61

	2021	2020	2019	2018	2017	2016
Reserve	550,000.00	550,000.00	550,000.00	550,000.00	550,000.00	550,000.00
Net current assets	634,719.34	696,680.11	730,018.93	563,325.63	376,089.46	433,585.83
Total Equity	1,184,719.34	1,246,680.11	1,280,018.93	1,113,325.63	926,089.46	983,585.83



## Income

1 Member subscriptions	2021	2020
1. Member subscriptions	(Euro)	(Euro)
Belgian Heart League	2,327.00	4,654.00
Bosnia Herzegovina Foundation of Health and Heart	1,164.00	1,164.00
British Heart Foundation	94,537.50	189,075.00
Croatian Heart House Foundation	1,164.00	1,164.00
Danish Heart Foundation	57,237.00	49,191.00
Dutch Heart Foundation	104,508.00	116,034.00
Faroese Heart Foundation	1,153.91	1,153.96
Finnish Heart Association	14,385.00	34,319.00
German Heart Foundation	32,489.00	30,897.00
Hellenic Heart Foundation	1,164.00	1,164.00
Hungarian National Heart Foundation		1,164.00
Icelandic Heart Association	4,654.00	4,654.00
Irish Heart Foundation	13,262.00	12,017.00
Italian Association against Thrombosis and Cardiovascular Diseases (ALT)	2,327.00	2,327.00
Italian Heart Foundation	1,164.00	1,164.00
Italian Society for Cardiovascular Prevention	1,164.00	1,164.00
Lithuanian Heart Association	1,164.00	1,164.00
Netherlands, Heart and Vessel Group	4,794.00	5,543.00
Northern Ireland Chest, Heart & Stroke		8,670.00
Portuguese Heart Foundation	2,327.00	2,327.00
Romanian Heart Foundation	1,164.00	1,164.00
Serbian Heart Foundation	1,164.00	1,164.00
Slovenian Heart Foundation	4,654.00	4,654.00
Spanish Heart Foundation	4,654.00	4,654.00
Swedish Heart and Lung Association	4,654.00	4,724.00
Swedish Heart Lung Foundation	75,990.00	79,956.00
Swiss Heart Foundation	40,468.00	14,109.00
Turkish Heart Foundation	2,327.00	2,327.00
SUB TOTAL	476,060.41	581,761.96

## Income

2 Special contributions	2021	2020
2. Special contributions	(Euro)	(Euro)
British Heart Foundation Grant		42,029.00
Swedish Heart Lung Foundation	20,000.00	
Big Data at Heart Project	13,519.87	15,866.54
Other reimbursements		2,132.00
Refunding car SL		7,260.00
SUB TOTAL	33,519.87	67,287.54
	2020	2019
3. Financial income	(Euro)	(Euro)
Investment income	651.45	617.86
TOTAL INCOME	510,231.73	649,667.36

## Expenditures

	2021	2022
	(Euro)	(Euro)
Personnel (excl. specific projects)	459,530.16	530,855.98
Office	4,741.36	10,741.55
Property (incl. insurance)	43,048.53	44,107.58
Travel, subsistence, meetings and conferences (incl. Board)	874.70	3,400.44
Office equipment, computers, IT support	7,832.41	8,894.34
Depreciation (office equipment/computers)	4,603.10	6,278.31
Professional fees	11,171.86	12,035.73
Membership fees	3,293.89	3,487.52
Bank charges	442.12	229.03
Taxes	2,469.31	2,359.54
Total regular expenditures	538,007.44	622,390.02

Continued over the page

36

## Expenditures

	2021	2020
	(Euro)	(Euro)
Smoke Free Partnership	10,000.00	25,000.00
European Chronic Disease Alliance	3,999.99	3,999.99
Annual Workshop		1,516.90
Patients Group seminar		
Capacity-building seminar		
Fundraisers seminar		
Research platform		
Nutrient profiling model		1,920.00
MEP Heart group	671.04	29.04
World No Tobacco Day		
Consultancy support		
Communication	8,698.07	21,646.20
HeartMan		
Big Data at Heart	10,815.96	9,929.03
Physical Activity Paper		
Prevention Guidelines Task Force		
Training Patients		
E-/m Health Paper		-3,425.00
Expert Meetings / teleconferences		
Project fund		
Total operational and project expenditures	34,185.06	60,616.16
TOTAL EXPENDITURES	572,192.50	683,006.18
TOTAL INCOME	510,231.73	649,667.36
SURPLUS/DEFICIT	-61,960.77	-33,338.82
RETAINED RESULT BEGINNING OF PERIOD	696,680.11	730,018.93
RETAINED RESULT END OF PERIOD	634,719.34	696,680.11

## Balance sheet as at December 31, 2021

	2021	2020
	(Euro)	(Euro)
Fixed Assets	3,612.71	8,215.81
Current Assets		
Debtors and prepayments	18,844.44	18,844.44
Cash at bank	1,355,366.23	1,614,270.13
	1,377,823.38	1,641,330.38
Current Liabilities and Provisions		
Reserve	550,000.00	550,000.00
Accrued costs and expenses	161,235.04	171,622.27
Prepaid income	31,869.00	223,028.00
	743,104.04	944,650.27
Net current assets (liabilities)	634,719.34	696,680.11

## BigData@Heart

	2021	2020
	(Euro)	(Euro)
Project expenses	10,815.96	9,929.03
Personnel cost	9,162.36	8,021.03
Staff travel and subsistence	1,653.60	1,908.00
Other costs	0	0
Project income	13,519.87	15,866.54
BigData@Heart	2,703.91	5,937.51

## **Expenditures**

1. Staff costs	2021	2020
	(Euro)	(Euro)
Salaries	337,541.26	341,357.65
Group insurance	20,447.87	27,244.35
Social security employers	74,400.67	75,465.03
Accrued vacation pay	15,627.09	-9,775.75
Insurance personnel	3,177.67	4,281.10
Meal vouchers	7,509.16	7,331.12
Other personnel charges	463.50	452.43
Social office	6,870.88	6,615.02
Recruitment fee	0.00	32,670.00
Interim	2,654.42	53,236.06
Personnel costs to recover	-9,162.36	-8,021.03
	459,530.16	530,855.98

## 2. 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.

## European Heart Network

Rue Montoyer 31 B-1000 Brussels, Belgium T: +32 2 512 91 74 info@ehnheart.org

www.ehnheart.org



european heart network