“The ERS’s success can be attributed to the excellent cooperation and dedication to the Society shown from the leadership, the Executive Committee, the assemblies, working groups, and the staff. I would like to extend my thanks to all these people who have made possible the achievements listed in this report.”

ERS President, Peter Barnes
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ERS Leadership

Executive Committee Members

Peter Barnes  
President

Francesco Blasi  
Past President

Elisabeth Bel  
President-Elect

Jørgen Vestbo  
Vice President

GB Migliori  
Secretary General

Mark Elliott  
Treasurer

Stephen Holgate  
Science Council Chair

Anita Simonds  
Education Council Chair

Jean-Paul Sculier  
Secretary for European Affairs

Wisia Wedzicha  
Publications Committee Chair

Monica Fletcher  
European Lung Foundation Chair

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Enrico Clini  
Clinical

Paolo Navalesi  
Respiratory Intensive Care

Christian M. Kaehler  
Cell and Molecular Biology

Wilfried de Backer  
Clinical Physiology, Sleep and Pulmonary Circulation

Ildiko Horvath  
Airway Diseases

Bo E.J. Lundbäck  
Occupation and Epidemiology

Ernst Eber  
Paediatrics

Dragan R. Subotic  
Thoracic Surgery and Transplantation

Thierry Troosters  
Allied Respiratory Professionals

Christoph Lange  
Respiratory Infections

Anne-Pascale Meert  
Thoracic Oncology
ERS has three offices:
Lausanne (ERS Headquarters),
Sheffield (Publications, Communications and European Lung Foundation) and
Brussels (Advocacy and European Affairs)

**Fernando Martin**
ERS Executive Director

**Betty Sax**
Head of Executive office

**Werner Bill**
Assistant Director, Head of Administration,
Finance and Human Resources

**Bouchra Chajaï**
Assisting the Executive Director as Head of Membership

**Steve Sealy**
Head of Marketing and Corporate Relations

**Carine Pannetier**
Head of Scientific and Educational Activities

**Pippa Powell**
Head of Communications and European Lung Foundation

**Elin Reeves**
Head of Publications

**Patricia Foo**
Head of Congress and events

**Stéphane Dupasquier**
Head of IT, Infrastructure and Services

**Brian Ward**
Head of European Affairs
every breath counts
This report aims to give you, our members and key stakeholders, an overview of our achievements this financial year (April 2013–March 2014). ERS is at a successful time in its history. Our three pillars of activity, science, education and advocacy, are all thriving and are successfully underpinned by a strong International Congress and well-respected catalogue of publications.

Since taking on the role of President in September 2013, I have been privileged to oversee a number of key initiatives for ERS.

Development of 5-year strategy

In July 2013, under the Presidency of Francesco Blasi, all members of the Presidential cycle held an important meeting to discuss the ERS Strategy 2013–2018. This meeting included several key decisions that are summarised in the table opposite.

The majority of these initiatives will take place over the coming years, but this was an important meeting to shape the future of ERS and identify core strategic priorities for the next 5 years. More information on the strategy is available in an editorial in the European Respiratory Journal:

erj.ersjournals.com/content/43/4/927.full

ERS 5-year strategy

1. ERS will maintain its European character, but will develop activities that will result in its evolution as a global “magnet” leading to international membership and participation in its activities

2. ERS will adopt a simple and affordable membership fee scheme to foster increased membership numbers

3. ERS will launch the Fellowship of the ERS (FERS) programme

4. ERS will support the establishment of a strong world federation of respiratory societies involved in global respiratory health

5. ERS, through its Scientific Council, will restructure its Assemblies

6. ERS Scientific and Educational Activities Councils will develop a joint plan

7. ERS will explore the development of a research agency

8. ERS will re-organise its advocacy strategy centred around the Advocacy Council and ELF with a new patient Chair

9. ERS will tune its corporate business model and will undertake the necessary rationalisation of offices and staff

10. ERS will establish a corporate marketing plan

11. ERS will adjust its governance/information technology/finance and communications operational functions to enable implementation of strategy decisions
Reinforcing advocacy activities

Over the last year we have reintegrated all our advocacy activities into the Society by reinforcing the existing committee on tobacco control and establishing a new committee for COPD advocacy. I am confident that this move will help ERS to continue to be a major player at the European level. Our work in Brussels has ensured that respiratory medicine is reaching the agenda of policymakers. The field of respiratory medicine is now receiving much greater attention from policy makers in the frame of establishing future chronic disease strategies. Moreover, in the upcoming Horizon2020 research funding programme, there will be an emphasis on the interaction of diseases, rather than looking at one disease in isolation, which represents a big step forward.

Launch of the European Lung White Book

At the 2013 ERS Congress, the European Lung White Book was launched. This is a landmark publication that draws on the latest data from across the continent to present an accurate picture of lung health today. The publication was well-received during the Congress and use of the open-access website continued throughout the year. The full publication is complemented by a concise version of the book, aimed at policymakers and the public, which was developed by ELF. Entitled Lung Health in Europe: Facts and Figures this series of infographics and key areas for action has brought a wider understanding of respiratory health to those outside the healthcare arena. We would encourage all to use this as a source of reliable and up-to-date figures on the state of respiratory health in Europe and call on you all to help improve our collection of data for the next edition.

erswhitebook.org
europeanlung.org/en/lung-disease-and-information

The International Congress

To reflect the success of the Society and the strength of our annual Congress, we have updated the name of the event to the ERS International Congress, reflecting the wide geographical reach of delegates we welcome from across the globe. We hope this will give a clear message that this is a Congress for all respiratory health professionals from all countries and continents.

Transparency

ERS is committed to transparency in all our activities. To demonstrate this commitment, we have published a clear position statement on our interaction with commercial partners, which can be viewed online.

ersnet.org/about-us/who-we-are

ERS is also listed on the EU Transparency Register and has subscribed to the register’s Code of Conduct, which was set up and is operated by the European Parliament and the European Commission. This register confirms that ERS operates in compliance with the law, as well as in due respect of ethical principles.
ERS continues to work with other respiratory societies across the globe via the Forum of International Respiratory Societies (FIRS). In November 2013, FIRS launched a report on World COPD Day entitled “Respiratory diseases in the world. Realities of Today – Opportunities for Tomorrow”.

The report features five major disease areas, including COPD, which is the fourth-leading cause of death worldwide. It also includes 10 key recommendations that FIRS considers to be essential to help reduce the burden of COPD and all respiratory diseases.

This was the first time that experts from the world’s leading lung organisations have come together to call for a worldwide effort to improve healthcare policies, systems and care delivery to make a positive difference to the lung health of the world, and I am proud that ERS was a key player in this.
Science
“ERS’s mission is to promote the best science in respiratory medicine”

“It is the mission of the ERS to promote the best science in respiratory medicine and I have been committed to ensuring this happens at every level of ERS activities this year, from the International Congress, to the Lung Science Conference and Research Seminars.

“This year we have changed the name of the Scientific Committee to the Science Council. The aim of this is really to reflect the important role that the Scientific Directors and subcommittees play, all working under the Science Council to ensure the best-quality science in the ERS. I would like to thank the Scientific Directors for the vital work they play to ensure that all the key scientific areas of the Society continue progressing and pushing forward the boundaries.”

“Looking to the future, we hope to be able to further strengthen science and research in the ERS by ensuring that the ERS Assembly structure is fit for purpose and finding ways to support collaborative and high-level science across Europe”.

Task forces and guidelines

ERS provides financial support to members wishing to form Task Forces to produce consensus statements and guidelines. These documents seek to enhance our understanding of specific issues in respiratory medicine and provide effective tools for healthcare professionals. This year, the following guidelines and consensus statements have been published:

- An official ATS/ERS statement: Key concepts and advances in pulmonary rehabilitation
- International ERS/ATS guidelines on definition, evaluation and treatment of severe asthma
- The European initiative for quality management in lung cancer care
- Specific inhalation challenge in the diagnosis of occupational asthma: consensus statement
ERS believes that in-depth discussion between experts is an essential part of continuing medical education. ERS Research Seminars provide the opportunity for members to discuss on-going research projects and recently published work, in addition to networking with peers and leaders in the field. Four seminars were held this year on a wide range of topics:

- Sensational developments in the airways: the role of afferent hyper and hypo function in respiratory disease
- Optimising models for human lung diseases and drug development
- Translational animal models of asthma
- Protein quality control in lung disease

Clinical Research Collaborations

This year has seen the development of ERS Pan-European multi-centre networks of principal investigators, called ERS Clinical Research Collaborations (CRC). ERS CRCs offer an umbrella for a network of researchers – both inside and outside the Society – to come together and improve knowledge of respiratory science and medicine. They aim specifically to support important projects and topics that have less visibility.

For 2014, the two collaborations that have been selected to be supported are the European Multicentre Bronchiectasis Audit and Research Collaboration (EMBARC) and the International Collaboration to Improve Respiratory Health in Children (INCIRCLE).

Fellowships

“The Fellowship has contributed to the improvement of my skills as a researcher. I have learned to think more independently about what I want to investigate and how to achieve my aims. Being in the UK for a longer time and thereby improving English language skills has also helped to facilitate wider scientific communication.”

Anne-Kathrin Brill - ERS/ELF fellowship recipient

ERS Fellowships provide qualified scientists, clinicians and allied health professionals with the opportunity to conduct pioneering research in a different setting to their own. Short- (up to 3 months) and long- (6–12 months) term Fellowships are available to boost careers and facilitate knowledge sharing between centres across the world.

During the period April 2013–March 2014, 20 long-term Fellowships and 21 short-term Fellowships were awarded, in cooperation with a number of key partners.

EU/ERS RESPIRE2 Post-doc Research Fellowships

A fellowship programme co-funded by the European Union (EU) was also launched in summer 2013. This programme, which is funded under the PEOPLE Marie Curie Actions COFUND programme of the EU’s Seventh Research Framework Programme (FP7), is open to experienced researchers from any discipline to lead an advanced research project.

(This project has received funding from the European Union’s Seventh Framework Programme for research, technological development and demonstration under grant agreement no PCOFUNDGA-2012-600368.)

ersnet.org/fellowships
<table>
<thead>
<tr>
<th>Name</th>
<th>Project</th>
<th>Home country / host country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anne-Kathrin Brill</td>
<td>Development and application of a miniaturised strain gauge to measure pressure applied by nasal and oronasal masks and improve patient tolerance during non-invasive ventilation</td>
<td>Switzerland / UK</td>
</tr>
<tr>
<td>Lidia Casas Ruiz</td>
<td>Exposure-response relations in particulate air pollution and respiratory health: a quasi-experimental study</td>
<td>Spain / Belgium</td>
</tr>
<tr>
<td>Rachel Louise Clifford Jeppson</td>
<td>Investigation of aberrant DNA methylation, its consequence and regulation in asthmatic human airway smooth muscle cells</td>
<td>UK / Canada</td>
</tr>
<tr>
<td>Maaike De Vries</td>
<td>Pim1 kinase, a new therapeutic target in virus-induced asthma exacerbations</td>
<td>The Netherlands / UK</td>
</tr>
<tr>
<td>Virginia Egidio Martin</td>
<td>Role of acid ceramidase in acute lung injury</td>
<td>Spain / Germany</td>
</tr>
<tr>
<td>Valentina Garelli</td>
<td>Incidence and characteristics of respiratory entrainment (reverse triggering) in critically ill mechanically ventilated adult patients</td>
<td>Italy / Switzerland</td>
</tr>
<tr>
<td>Laurent Godinas</td>
<td>Clinical and biological characterisation of a cohort of asymptomatic BMPR2 mutation carriers</td>
<td>Belgium / France</td>
</tr>
<tr>
<td>Lars Harbaum</td>
<td>Role of interleukin 25 on profibrotic activation of airway epithelial cells</td>
<td>Germany / UK</td>
</tr>
<tr>
<td>Kati Johanna Huttunen</td>
<td>Intelligent biomarkers of exposure to mould in indoor air</td>
<td>Finland / UK</td>
</tr>
<tr>
<td>Claire Masterson</td>
<td>Optimising mesenchymal stromal cell: macrophage interactions in acute respiratory distress syndrome</td>
<td>Ireland / Canada</td>
</tr>
<tr>
<td>Maria Elizabeth Ketelaar</td>
<td>Understanding the role of genetic variation of the IL33 gene in asthma</td>
<td>The Netherlands / UK</td>
</tr>
<tr>
<td>Esmaeil Mortaz</td>
<td>Immunological features of chronic obstructive pulmonary disease (COPD) induced by indoor pollution and cigarette smoke</td>
<td>Iran / UK</td>
</tr>
<tr>
<td>Aleksandra Norek Krystyna</td>
<td>Intestinal current measurement as ex vivo biomarker for CF diagnosis and preclinical evaluation of CFTR correctors in CF</td>
<td>Poland / Germany</td>
</tr>
<tr>
<td>Hui Xin Ong</td>
<td>Treatment for chronic lung diseases: optimising the administration of conventional drugs</td>
<td>Australia / UK</td>
</tr>
<tr>
<td>Paul Michel Peeters</td>
<td>Ageing and lung fibrosis: exploring inflamming and the role of the inflammasome in the silica model of fibrosis</td>
<td>The Netherlands / Germany</td>
</tr>
<tr>
<td>Elena Prina</td>
<td>Comparison between lung ultrasound and electrical impedance tomography in the bedside estimation of recruitable alveolar collapse</td>
<td>Spain / Brazil</td>
</tr>
<tr>
<td>Ioannis Psallidas</td>
<td>The biological, radiological and clinical predictors of pleurodesis success in malignant pleural effusion</td>
<td>Greece / UK</td>
</tr>
<tr>
<td>Victor Jesus Samillan Soto</td>
<td>Effects of apelin on in vitro pulmonary vascular remodelling in experimental pulmonary hypertension</td>
<td>Peru / UK</td>
</tr>
<tr>
<td>Chrysanthi Skevaki</td>
<td>DNAzyme-based therapeutic strategies to prevent rhinovirus-induced development and exacerbations of asthma</td>
<td>Greece / Germany</td>
</tr>
<tr>
<td>Junjing Su</td>
<td>The application of wave intensity analysis to pulmonary haemodynamics in health and disease; with specific reference to pulmonary hypertension in patients treated with long-term oxygen therapy</td>
<td>Denmark / UK</td>
</tr>
</tbody>
</table>

*Supported by an unrestricted grant from GlaxoSmithKline
<table>
<thead>
<tr>
<th>Name</th>
<th>Project</th>
<th>Home country / host country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eva Bernardi</td>
<td>Endothelial dysfunction in chronic obstructive disease (COPD) patients. Could this be a pathophysiological link between COPD and some comorbidities and an intriguing outcome in rehabilitation?</td>
<td>Italy / Belgium</td>
</tr>
<tr>
<td>Ioannis Bonovolias</td>
<td>Long-acting muscarinic antagonists in the regulation of pathological metabolism of hyaluronic acid in asthma and chronic obstructive pulmonary disease</td>
<td>Greece / Switzerland</td>
</tr>
<tr>
<td>Nanca Cebron Lipovec</td>
<td>The effect of exercise training on metabolic biomarkers: new leads for nutritional interventions</td>
<td>Slovenia / Netherlands</td>
</tr>
<tr>
<td>Dunitru Chesov</td>
<td>Treatment responses in patients with pulmonary tuberculosis</td>
<td>Moldova / Germany</td>
</tr>
<tr>
<td>Caterina Conti</td>
<td>Distribution of airway mucins MUC5B and MUC5AC in the small airways of different fibrotic lung disease patterns</td>
<td>Italy / UK</td>
</tr>
<tr>
<td>Karima El Rhazi</td>
<td>Impact of diet on lung function and COPD in adults from Morocco – evidence from the Burden of Lung Disease (BOLD) study</td>
<td>Morocco / UK</td>
</tr>
<tr>
<td>Antoine Froidure</td>
<td>Study of CCR7-mediated dendritic cell migration in human allergic asthma</td>
<td>Belgium / France</td>
</tr>
<tr>
<td>Abhishek Goyal</td>
<td>A retrospective study comparing efficacy of everolimus, low-dose Tac and steroids versus antiproliferatives, high-dose Tac and steroids in lung transplant patients</td>
<td>India / Austria</td>
</tr>
<tr>
<td>Thi Lam Hoang</td>
<td>Advanced methods and research techniques for follow-up and maintaining of a population study cohort of obstructive airway diseases and allergy in northern Vietnam</td>
<td>Vietnam / Sweden</td>
</tr>
<tr>
<td>Pavol Joppa</td>
<td>New approach to evaluate body composition in chronic obstructive pulmonary disease (COPD)</td>
<td>Slovakia / The Netherlands</td>
</tr>
<tr>
<td>Anna Konishcheva</td>
<td>The effect of Epstein – Barr virus on human dendritic cell and regulatory T cells functions</td>
<td>Russia / Sweden</td>
</tr>
<tr>
<td>Li Eon Kuek</td>
<td>Expression and function of a novel membrane spanning protein, MS4A8B, in asthma</td>
<td>Australia / UK</td>
</tr>
<tr>
<td>Lea Leonardis</td>
<td>A pilot study to investigate the use of the diaphragm electromyogram to determine the relationship between levels of neural respiratory drive (NRD) and the development of hypercapnia in amyotrophic lateral sclerosis</td>
<td>Slovenia / UK</td>
</tr>
<tr>
<td>Dennis Lex</td>
<td>The role of NPY in virus-induced ARDS</td>
<td>Germany / Japan</td>
</tr>
<tr>
<td>Galit Livnat-Levanon</td>
<td>Monitoring peripheral airway function and inflammation by lung clearance index (LCI) technique</td>
<td>Israel / UK</td>
</tr>
<tr>
<td>Alessandro Marcon</td>
<td>Estimate of exposure to air pollution by means of Geographic Information Systems: applications in population studies on respiratory health</td>
<td>Italy / UK</td>
</tr>
<tr>
<td>Anna Maria Marotta</td>
<td>Analysis to long-term effects of noninvasive ventilation on systemic vascular health in obstructive sleep apnoea (OSA) and obesity hypoventilation syndrome (OHS)</td>
<td>Italy / France</td>
</tr>
<tr>
<td>Ana Oliveira</td>
<td>Adventitious lung sounds: establishing reference values for healthy populations</td>
<td>Portugal / Turkey</td>
</tr>
<tr>
<td>Ruy Pires-Neto</td>
<td>Effect of diesel exhaust exposure on epithelial host defence against infection</td>
<td>Brazil / The Netherlands</td>
</tr>
<tr>
<td>Mario Ricciardi</td>
<td>Retrospective birth dating of human lung cells by accelerator mass spectrometry</td>
<td>Italy / Belgium</td>
</tr>
<tr>
<td>Sofia Tousa</td>
<td>Delineation of the role of human activin-A-induced regulatory T cells in the control of allergic responses</td>
<td>Greece / Switzerland</td>
</tr>
</tbody>
</table>
Education
“Our role in Education is to supply medical professionals across Europe with access to high-quality training and educational resources.”

“This year has seen the educational activities of ERS grow in exciting key areas. Our role in Education is to supply medical professionals across Europe with access to high-quality training and educational resources. To this end, we are embarking on an ambitious project to provide accreditation to training centres thereby supporting them in delivering high-quality training to all the respiratory team. In future we hope to see a network of accredited centres that will deliver the HERMES programmes and bring effective training opportunities to many more professionals across Europe and further afield.

“I have enjoyed working with the Education team in developing the e-learning content on the ERS educational website. We are now providing new ways to learn and improve important skills. New features include individual case reports and skills-based simulators. Furthermore our e-portfolio project is progressing well. These personal online portfolios should not only assist our members fulfil training, CPD/CME and revalidation requirements, but will also help us carry out skills-based assessments. All these new features will be built on in the future under the leadership of the new Chair Gernot Rohde, who I will hand over to in September 2014.”

Standardising education: HERMES

Launched in 2005, the Harmonised Education in Respiratory Medicine for European Specialists (HERMES) projects aim to standardise education across different areas of respiratory medicine. A key development this year is the move to grant accreditation to training centres in Europe. This is a joint venture with the European Board for Accreditation in Pneumology (EBAP), which aims to see local centres deliver HERMES training to bridge the gap between European criteria and local implementation.
It will also provide centres with the opportunity to be part of a pan-European network of training centres in adult respiratory medicine. A pilot phase has been undertaken this year and the project was officially launched in May 2014, where a further six centres were invited to apply for European accreditation of training in adult respiratory medicine.

The main advances in other projects are summarised below:

<table>
<thead>
<tr>
<th>Project</th>
<th>Activity update</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult respiratory medicine</td>
<td>The curriculum on this project will be updated and the accreditation phase has been launched for the accreditation of centres.</td>
</tr>
<tr>
<td>Spirometry</td>
<td>A learning and assessments committee has been established, which has six approved courses worldwide and further requests from four other countries. It is intended to build a structure to support trainers to deliver the European Spirometry Training Programme internationally.</td>
</tr>
<tr>
<td>Respiratory critical care medicine</td>
<td>The assessments working group have been invited to focus on the development of the assessment framework and strategy for this project, along with publishing the curriculum.</td>
</tr>
<tr>
<td>Respiratory sleep development</td>
<td>The curriculum draft has been finalised and as a new initiative, the curriculum will be opened to allied health professionals working in respiratory sleep. An e-portfolio for assessment will also be developed.</td>
</tr>
<tr>
<td>Thoracic oncology</td>
<td>Curriculum development has begun with the task force.</td>
</tr>
<tr>
<td>Respiratory physiotherapy</td>
<td>The syllabus for this new course has been finalised and will be published at the end of 2014. The team will soon begin curriculum development.</td>
</tr>
</tbody>
</table>

Courses to improve medical practice

ERS Education organises courses with the aim of helping to improve medical practice. The information disseminated during the courses introduces the basic concepts and state-of-the-art developments rather than scientific work in progress.

This year, 19 courses were held:

External courses

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cystic fibrosis</td>
<td>Barcelona, Spain</td>
</tr>
<tr>
<td>TB elimination: dream or reality?</td>
<td>Dubrovnik, Croatia</td>
</tr>
<tr>
<td>HERMES summer school</td>
<td>Barcelona, Spain</td>
</tr>
<tr>
<td>TB PAN NET seminar</td>
<td>Moldova</td>
</tr>
<tr>
<td>Thoracic imaging</td>
<td>Barcelona, Spain</td>
</tr>
<tr>
<td>Primary ciliary dyskinesia</td>
<td>Naples, Italy</td>
</tr>
<tr>
<td>Endoscopic ultrasound in the diagnosing and staging of lung cancer</td>
<td>Copenhagen, Denmark</td>
</tr>
<tr>
<td>HERMES Spirometry: train the trainer</td>
<td>Barcelona, Spain</td>
</tr>
<tr>
<td>HERMES Spirometry Training Programme: Part II</td>
<td>Barcelona, Spain</td>
</tr>
</tbody>
</table>
## Hands-on courses

<table>
<thead>
<tr>
<th>Course title</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paediatric flexible bronchoscopy</td>
<td>Paris, France</td>
</tr>
<tr>
<td>Thoracoscopy and pleural techniques</td>
<td>Marseille, France</td>
</tr>
<tr>
<td>Paediatric flexible bronchoscopy</td>
<td>Paris, France</td>
</tr>
<tr>
<td>Interventional bronchoscopy</td>
<td>Athens, Greece</td>
</tr>
<tr>
<td>Medical thoracoscopy</td>
<td>Alexandroupolis, Greece</td>
</tr>
<tr>
<td>Thoracoscopy and pleural techniques</td>
<td>Marseille, France</td>
</tr>
<tr>
<td>Paediatric flexible bronchoscopy</td>
<td>Paris, France</td>
</tr>
</tbody>
</table>

## Online courses

<table>
<thead>
<tr>
<th>Course title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Palliative care</td>
</tr>
<tr>
<td>Hot topics in the management of non-CF bronchiectasis</td>
</tr>
</tbody>
</table>

## Postgraduate courses

ERS organises postgraduate courses during the ERS Congress. The courses are linked with specific modules of the HERMES syllabus. During the ERS Congress in Barcelona, the following PG courses were held:

<table>
<thead>
<tr>
<th>Postgraduate courses</th>
<th>[Attendees]</th>
</tr>
</thead>
<tbody>
<tr>
<td>PG1 Endoscopic lung volume reduction</td>
<td>[88]</td>
</tr>
<tr>
<td>PG2 Imaging in the management of thoracic malignancies</td>
<td>[58]</td>
</tr>
<tr>
<td>PG3 Infections and critical patients: emerging problems and clinical strategies</td>
<td>[28]</td>
</tr>
<tr>
<td>PG4 How to build an experimental animal lung lab</td>
<td>[28]</td>
</tr>
<tr>
<td>PG5 The small airways in lung diseases</td>
<td>[91]</td>
</tr>
<tr>
<td>PG6 Epigenetics of asthma and COPD</td>
<td>[66]</td>
</tr>
<tr>
<td>PG7 Tuberculosis: innovations in clinical and public health management</td>
<td>[53]</td>
</tr>
<tr>
<td>PG8 How to encourage compliance with therapy</td>
<td>[60]</td>
</tr>
<tr>
<td>PG9 How to optimise antibiotic use in respiratory infections</td>
<td>[57]</td>
</tr>
<tr>
<td>PG10 New technology assessment in COPD</td>
<td>[67]</td>
</tr>
<tr>
<td>PG11 NIV in growth areas</td>
<td>[59]</td>
</tr>
<tr>
<td>PG12 New insights in gas exchange: physiological aspects and clinical application</td>
<td>[35]</td>
</tr>
<tr>
<td>PG13 Respiratory complications of obese patients</td>
<td>[61]</td>
</tr>
<tr>
<td>PG14 Cardiopulmonary exercise testing in the evaluation of patients with respiratory diseases</td>
<td>[121]</td>
</tr>
<tr>
<td>PG15 An update of invasive staging of the mediastinum</td>
<td>[29]</td>
</tr>
<tr>
<td>PG16 Spirometry knowledge and basic skills (ESDL)</td>
<td>[103]</td>
</tr>
<tr>
<td>PG17 Diagnostic tests for paediatric pulmonologists</td>
<td>[49]</td>
</tr>
<tr>
<td>PG18 Assessing the health status and quality of life in asthma and COPD patients</td>
<td>[56]</td>
</tr>
<tr>
<td>PG19 Obstructive sleep-disordered breathing throughout childhood: diagnosis, associated morbidity and treatment</td>
<td>[44]</td>
</tr>
<tr>
<td>PG20 Cystic fibrosis: an update of the basic defects and clinical problems in CF children and adults (full day)</td>
<td>[34]</td>
</tr>
</tbody>
</table>

**TOTAL**[1,187]
New resources for online learning

A new addition to the ERS e-learning resources this year was the skills-based simulator training in non-invasive ventilation (NIV). The simulator is unique as it enables the trainee to see how patient’s physiological outcomes would change depending on the trainee’s selected settings on the ventilator.

It can also be used to find out how capable a person is at establishing ventilator settings and understanding and correctly responding to the effect of the ventilator on patient pathophysiology and tolerance. The first three modules were launched in February 2014 and almost 350 people have watched the training simulator.

Continuing Medical Education: CME Online

As part of ERS’s commitment to supporting continued education, the CME Online section of the ERS website now provides detailed case reports for members to read. These reports give information on a specific individual, which is often lost in larger studies. This recounting of clinical experiences is an essential part of advancing medical knowledge and allows users to test themselves and compare how they would have diagnosed the case.

During this year, over 8,900 users have accessed the CME Online content, generating around 94,000 page views.

My Learning Resources

The website has also been revamped giving users a personalised experience and providing links to content matching a user’s profile. In addition the system allows users to create personal bookmarks and stores the browse history. Since its launch more than 500 users have created a personal profile.
Advocacy and European Affairs
“The ERS Tobacco Control Committee was behind a series of actions this year to support the strongest possible Tobacco Products Directive to help protect the health of citizens across Europe.”

“This past year has seen ERS advocacy activities go from strength to strength across a range of policy areas with a view to promoting lung health. Key highlights of the past year have been our intensive action on the tobacco products directive, a high-level launch of the publication *Lung Health in Europe: Facts and Figures* with the EU Commissioner for health, Tonio Borg, and bringing the tuberculosis debate to the fore in the European Parliament.

“2014 sees the election of a new European Parliament and the appointment of a new European Commission. Together with the ERS Brussels office, I will be working to maintain our standing and to build enduring new links and sustainable relations with these policymakers.

You can follow our activities in the *European Respiratory Journal’s* European Lung Corner, which features bi-monthly.”

**Supporting the strongest possible Tobacco Products Directive**

The ERS Tobacco Control Committee was behind a series of actions this year to support the strongest possible Tobacco Products Directive to help protect the health of citizens across Europe. This included a prominent media campaign and lobbying of MEPs. The main outcome was the introduction of combined picture and text health warnings to cover 65% of the front and the back of packages of tobacco products for smoking.

**Other key outcomes of the Tobacco Products Directive**

Ban:
- on flavoured cigarettes and rolling tobacco
- on slim lipstick style packs
- on packs with novelty openings

Cigarette packs will have to be a standard shape, and contain at least 20 cigarettes

Tar, nicotine and carbon monoxide labelling will be removed from packs

New anti-illicit-trade measures:
- a hologram on cigarette packs
- a track-and-trace scheme
Lung health in Europe

In December 2013, the EU Commissioner for Health, Tonio Borg, spoke at a high-level public awareness event to launch the new ERS/ELF publication entitled *Lung Health in Europe: Facts and Figures*, together with the Lithuanian Deputy Minister for Health, Gediminas Cerniauskas. The book was a concise version of the *European Lung White Book* and aimed to provide the latest statistics on lung health to politicians, the public and the media. The book was well received and the book and slide set of the infographics are freely available to download online.

europeanlung.org/en/lung-disease-and-information

Tuberculosis in Europe – eliminating the modern threat

In November 2013, the ERS organised a lunchtime debate, which was hosted by MEP Maria da Graça Carvalho. The event aimed to discuss a European strategy for TB control and elimination. The meeting provided an opportunity to review the TB epidemic in the region and analyse the work of European institutions in the fight against the disease.

Presidential Summit Dublin

The third annual ERS Presidential Summit was held in Dublin in June 2013 in order to prepare for the first round of Horizon 2020 calls and provide input to defining future research priorities. This included looking at research gaps, priorities for patients and the focus on lung health research in the future.

Scientific Panel for Health

A science-led Scientific Panel for Health (SPH) is explicitly being provided for under Horizon 2020. ERS advocated for this as part of our activities in the Alliance for Biomedical Research in Europe and it is hoped this will be a first step towards greater transparency and more deliberate and decisive engagement with the medical and scientific community at the EU level.

Health impact of biomass burning

In March 2013, the ERS Environment and Health Committee organised an expert workshop to address the health impact of biomass burning. The workshop brought together international experts within the field of biomass burning covering six specific areas – emissions from different kinds of wood combustion, exposure to wood smoke indoors and outdoors, toxicology, respiratory and cardiovascular effects, health effects, interventions and wildfires.

The purpose of the event was to review and present the evidence in each area with the ultimate aim of producing a workshop position paper on the health impact of biomass burning in July 2014.
ERS International Congress and events
“The 2013 ERS Congress brought respiratory experts from across the world to our city to discuss the latest advancements in science and clinical studies.”

A wealth of respiratory research

A total of 5,708 abstracts, including late-breaking abstracts, were submitted for the 2013 Congress, which marked a 5% increase from 2012. A total of 4,409 (77%) abstracts were accepted and presented at the Congress in a number of different sessions from oral presentations and thematic posters sessions to hot topic sessions and lunchtime symposia.

An international audience

Over 20,900 delegates attended the ERS Congress in Barcelona. The table below show the top 10 countries by participants.

<table>
<thead>
<tr>
<th>Countries</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Germany</td>
<td>1,973</td>
</tr>
<tr>
<td>UK</td>
<td>1,959</td>
</tr>
<tr>
<td>France</td>
<td>1,438</td>
</tr>
<tr>
<td>Spain</td>
<td>1,381</td>
</tr>
<tr>
<td>Italy</td>
<td>1,301</td>
</tr>
<tr>
<td>USA</td>
<td>793</td>
</tr>
<tr>
<td>Switzerland</td>
<td>703</td>
</tr>
<tr>
<td>the Netherlands</td>
<td>687</td>
</tr>
<tr>
<td>Turkey</td>
<td>621</td>
</tr>
<tr>
<td>Brazil</td>
<td>556</td>
</tr>
</tbody>
</table>
Facilitating continued learning

Over 2,100 delegates registered for an educational session at the 2013 Congress. Participants came from 94 countries to take part in a range of sessions including postgraduate courses, morning seminars, educational skills workshops, meet the expert sessions and educational forums.

Participant feedback indicated that they would like to see how new technologies can be used to make educational sessions more interactive and this will be investigated for future Congresses.

Reaching a local audience

A new session was held in 2013, aimed at a Spanish-speaking local audience. The “Sesión conjunta en castellano organizada por la SEPAR (España) y la ALAT (Latinamérica)” was attended by approximately 250 delegates and was offered as part of the Congress fee.

Sleep and breathing conference 2013

Over 1,177 participants gathered in Berlin in April 2013 for the second Sleep and Breathing Conference. The programme has a predominantly educational focus and included a broad spectrum of participation for delegates ranging from platform lectures, case studies and ‘Meet the Expert’ sessions, together with ‘hands-on’ practical workshops. Co-organised by ERS and the European Sleep Research Society, this event covered all respiratory sleep disorders across 40 different sessions with 106 abstracts.

Lung Science Conference 2013

The Lung Science Conference aims to showcase cutting-edge research and its translation into clinical solutions. In 2013, more than 160 people from 24 different countries attended the annual conference.

19 key speakers, all working in the field of origins and mechanisms of chronic lung disease, shared their expertise and 89 abstracts were presented during the conference. A unique part of the conference is the role of mentoring. Each applicant who receives a bursary to attend the conference is appointed a mentor from a faculty or from the Conference Science Committee. This person is then available to the delegate to discuss both scientific and career questions.

The meeting also aims to reward young scientists for excellence and this year three accolades were given:

<table>
<thead>
<tr>
<th>Award</th>
<th>Recipient(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Willam MacNee Young Investigator Award</td>
<td>Amanda Tatler</td>
</tr>
<tr>
<td>Best Oral Presentation Award</td>
<td>Jessica Vasiliou</td>
</tr>
<tr>
<td>Best Poster Award</td>
<td>Keren Borensztajn, Sara Mathie, Geraint Rogers, Emily J. Swindel, Rebekah Sherburn, Brittan S. Scales, Sumaiyya Thawer, Niki Ubags</td>
</tr>
</tbody>
</table>

Award Recipient(s)
“The ERS Publications collection is strong and varied, and offers ERS members and all respiratory healthcare professionals a wide choice of material to support their scientific development and education. I am proud as Chair of the Publications Committee to have seen all the ERS publications grow stronger under their present Editorships over the current year.

As we look to the future, we plan to expand our portfolio to support the ERJ and to facilitate the publication of more top-quality, ground-breaking scientific and clinical research to enhance respiratory healthcare across the globe.”

ERS has four core publications, which reach an audience of over 820,000 each year.

European Respiratory Journal (ERJ)

The ERJ, the flagship journal of the ERS, had a 2012 impact factor of 6.355. The online version of the journal is the primary delivery format and is incredibly well utilised, with over 3.5 million page views across the year.

Professor Marc Humbert, who began his mandate as Chief Editor of the ERJ in January 2013, has an editorial strategy to reduce publication lagtime and only accept the highest quality papers, which may mean an overall reduction in the number of published papers.

Over the last year, a number of new features have been introduced to the ERJ to engage the readership. These include editing and typesetting accepted manuscripts before they go online ahead of press and introducing a tweetable abstract providing a short summary of the article, which can be easily shared on Twitter.

European Respiratory Review (ERR)

Over the last year, Professor Vincent Cottin, the current Chief Editor of the ERR, has broadened the content of the journal to expand on its existing state-of-the-art review articles, editorials, correspondence and summaries of the most important recent research. New articles that have been introduced include a thematic review series, clinical year in review, cutting-edge mini-reviews, case-based reviews and images.

The ERR has also seen a redesign of the internal layout to improve the reader experience, along with tweetable abstracts.
ERS Monograph

Since the launch of the Monograph in 1995, more than 60 books have been published focusing on in-depth topics and giving a concise, comprehensive guide to symptoms, diagnosis and treatment.

The Monograph website was relaunched at the end of 2013, providing a better reader experience for book content. The Monograph was also indexed on the ISI Book Citation index, which has greatly increased its visibility.

Four issues have been published this year, which include:
- June 2013 – The spectrum of bronchial infection
- Sept. 2013 – Complex pleuropulmonary infections
- Dec. 2013 – Outcomes in clinical trials
- March 2014 – Community-acquired pneumonia

An online bookshop was launched in May 2013, providing an easy way to purchase printed copies of the Monographs, ERS Handbooks and the European Lung White Book.

ersbookshop.com

ERS Handbooks

The ERS Handbooks offer readers compact guides on key areas of respiratory medicine, with the goal of furthering medical education.

Two new books were launched in September 2013:
- ERS Handbook of Respiratory Medicine (2nd edition)
- ERS Handbook of Paediatric Respiratory Medicine.

Breathe

Breathe is the educational publication of the ERS, publishing original review articles, case studies and self-tutorial material. The content is peer reviewed and the CME articles are accredited by the European Board for Accreditation in Pneumology (EBAP).

During the year, its Editor, Jimmy Paton, has introduced new types of articles; these include practical "how to" reviews and a series on "doing science" from the ERS Junior Members Committee, covering topics such as how to produce a poster and how to deliver an oral presentation.

Breathe was also launched on HighWire, positioning the journal’s online presence alongside the other ERS publications.
“The overall vision and mission of ELF is to bring patients and the public together with respiratory professionals to improve respiratory health. ELF and ERS hold a firmly established belief that it is only when patients are actively involved in healthcare that we can ensure the outcomes we are working towards are high quality and patient-focused. This year saw the start of our new strategy, which in line with this belief, will strengthen the role of ELF in providing the patient voice into the life of the ERS and contributing to improvements in respiratory care.

“The European Patient Ambassador Programme is a clear example of how ERS and ELF are finding new and innovative ways to incorporate the patient voice into healthcare. By educating patients with experience of a range of conditions, we are beginning to mobilise a group of ambassadors who can make a real and effective contribution.

“I’m proud that ERS and ELF are leading the way in incorporating the patient voice at the highest level.”

New 5-year strategy

As part of the ERS strategic review that took place in July 2013, the role and mission of ELF was also examined. The outcomes of the review cemented ELF as a core part of the ERS. It was decided that ELF should continue to make patients their primary focus and to enhance their role in patient-related advocacy issues by shared working with the ERS Brussels office. ERS also took the landmark decision to appoint a patient as the new Chair.

Launch of a new website

A key focus for ELF this year was the launch of a new website. The new site includes data from the new edition of the European Lung White Book, written in an accessible format for ELF’s key audiences; patients, the public, policymakers and the media.

The new site, which is available in 8 different languages, will provide a more interactive space for patient organisations to provide their input into the ERS.

europeanlung.org
Patient education

As part of the ELF mission to inform and educate patients, a number of patient information factsheets have also been produced during the year.

<table>
<thead>
<tr>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-cigarettes</td>
</tr>
<tr>
<td>Patient and public involvement</td>
</tr>
<tr>
<td>Bronchoscopy</td>
</tr>
<tr>
<td>Difficult-to-treat and severe asthma</td>
</tr>
</tbody>
</table>

European Patient Ambassador Programme (EPAP)

The European Patient Ambassador Programme (EPAP) has been developed by ELF to help patients and carers across Europe understand how healthcare research and guidelines work and how to get involved and engage in advocacy and media activities at any level.

In 2013–2014 ELF began actively promoting the programme, evaluating its effectiveness and further developing its resources.

EPAPonline.eu

Patients at Congress

ELF began hosting patients at the ERS Congress in 2010. In 2013, 19 patient organisations joined ELF in the World Village. In addition to patient organisations hosting a stand in the World Village, patients are now becoming involved in sessions as speakers and participants, sharing their perspective on a particular disease. In 2013, three patient speakers attended Congress and spoke about a range of topics including lung transplantation for cystic fibrosis, the future of IPF and personalised medicine for lung disease in children.

Task forces

ELF is involved with the task forces of ERS to ensure that new guidelines and consensus statements address key concerns of patients and to optimise dissemination and compliance with the resulting task force outcome.

This year, ELF has been involved with the following task forces

<table>
<thead>
<tr>
<th>Task force</th>
<th>ELF activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pulmonary rehabilitation</td>
<td>ELF produced a patient version of the final consensus statement, including a summarised version of the recommendations and agreed definition of pulmonary rehabilitation</td>
</tr>
<tr>
<td>Severe asthma</td>
<td>ELF produced a patient version of the final guideline on severe asthma</td>
</tr>
</tbody>
</table>

EU projects

As one of the main aims of ELF is to make science accessible to the public, ELF has been invited to participate in a number of EU projects to act as a disseminator of research to a wider audience.

EARIP

In September 2013, ELF was one of a number of organisations who joined together for a new project. The European Asthma Research and Innovation partnership (EARIP) aims to reduce asthma deaths in the continent by 25% within 10 years and by 50% within 20 years. ELF will work with all partners to create a ‘roadmap’ to define and prioritise what is needed to reduce asthma deaths and hospitalisations in all EU member states.
Treasurer’s report
Financial report

I am pleased to report that ERS is in a strong position financially. The Society has worked hard to control its expenditure and grow its income; we have been able to maintain support for and expand existing projects, and are in the fortunate position of being able to develop our ambitious strategy and give more back to the respiratory community.

Over the next few years we are planning a range of new and exciting projects that will benefit our members and contribute to our mission to alleviate suffering from lung health across the world. These are highlighted elsewhere in this report.

Significant challenges lie ahead and we are always looking for new ways to diversify the Society’s sources of income.
We are committed to ensuring the financial stability of the Society, taking a prudent approach in all our decisions about expenditure and investment. In our dealings with our sponsors and financial partners we are transparent and fair, maintaining a level playing field for all. We are a subscriber to the Code of Conduct of the EU Transparency Register.

Our position statement on how we interact with commercial partners can be downloaded from the link below:

ersnet.org/about-us/who-we-are

For a copy of the audited accounts of the ERS for 2013–2014 please go to:

www.ersnet.org/accounts

<table>
<thead>
<tr>
<th>Balance sheet</th>
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</thead>
<tbody>
<tr>
<td>March 31, 2014</td>
</tr>
<tr>
<td><strong>Assets</strong></td>
</tr>
<tr>
<td>Cash and securities</td>
</tr>
<tr>
<td>Receivables / prepaid expenses / stocks</td>
</tr>
<tr>
<td>Other current assets</td>
</tr>
<tr>
<td>Financial assets (loans / guarantee deposits)</td>
</tr>
<tr>
<td>Fixed assets</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
</tr>
<tr>
<td><strong>Liabilities / society’s equity</strong></td>
</tr>
<tr>
<td>Accounts payable</td>
</tr>
<tr>
<td>Accrued expenses / deferred income</td>
</tr>
<tr>
<td>Provisions / non-current liabilities</td>
</tr>
<tr>
<td>Mortgage</td>
</tr>
<tr>
<td>Society’s equity</td>
</tr>
<tr>
<td><strong>Total liabilities / Society’s equity</strong></td>
</tr>
</tbody>
</table>
Investors committed to lung health by supporting the ERS

Company name
Acare Technology Co., Ltd
Actelion Pharmaceuticals Ltd
Adelphi Real World
Aerocrine AB
Air Liquide
Aldo Union
Alere
Almirall
Alpha-1 Foundation
American College of Chest Physicians (ACCP)
American Thoracic Society
APEX MEDICAL, S.L.
Asian Pacific Society of Respirology
Asociacion Latinamericana del Torax
AstraZeneca
Barrington James Ltd
Bayer HealthCare Pharmaceuticals
Bedfont Scientific Ltd
Biocytogen
BioVendor Laboratori medicina a s
BMC Medical Co., Ltd
BMJ Group
Boehringer Ingelheim International GmbH
Boston Scientific
Broncus Medical, Inc.
Buxco Research Systems
Carefusion
Cellestis, a QIAGEN company
Chart BioMedical Ltd
Chiesi Farmaceutici SpA
CHILECOM Medical Devices Co., Ltd
Cidelec
Clement Clarke International Ltd.
Cleveland Clinic Abu Dhabi
CompuMedics Germany GmbH
Cook Medical
COPD Foundation
Cortex Biophysik GmbH
COSMED Srl
Covidien AG
Cryopal
Curative Medical Devices gmbh
DeVilbiss Healthcare
DIMA ITALIA S.r.l.
Dove Medical Press Ltd
AAACI Headquarters
ECO MEDICS AG
EIDIA Co., Ltd.
Eli Lilly and company
ELPEN A.E.
emka Technologies S.A
Epithelix SàRL
Erbe Elektromedizin GmbH
ERT
Ferrer Grupo
Fisher & Paykel Healthcare GmbH & Co. KG
Flight Medical
FluidDA nv
Forest Laboratories UK Ltd
Fritz Stephan GmbH
Medizintechnik
Fujifilm Europe GmbH
Ganshorn Medizin Electronic GmbH
GE Healthcare Respiratory & Sleep – BREAS (SE)
Geratherm Respiratory GmbH
GILEAD
GlaxoSmithKline Pharmaceuticals
Grifols International SA
Hans Rudolph, Inc.
Hill-Rom Company, Inc.
Hitachi Medical Systems
Hoffrichter GmbH
ImThera Medical Inc
Inamed Research GmbH & Co.KG
IngMar Medical
InovaLabs, Inc.
Inspire Medical Systems
InterMune International AG
Intersurgical
Invacare
IOP Publishing
Kare Medical and Analytical Devices Ltd. Co.
Karger Publishers
Karl Storz GmbH & Co. KG
Lancet
Linde Healthcare
Littman 3M
MAQUET GmbH & Co. KG
Masimo
McRoberts
MD Diagnostics Ltd.
Medical Developments UK Ltd
Medical Equipment Europe
Medi-globe GmbH
Medikro Oy
MEDISOFT S.A.
MediSpirit