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ERS Leadership and Offices	4
Presidential Message	6
Science	10
Education	20
Advocacy and European Affairs	26
Publications	32
ERS International Congress and	38
Conferences	
European Lung Foundation	42
Healthy Lungs for Life	46
Office, Membership and Financial Report	50

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EXECUTIVE COMMITTEE MEMBERS



Jørgen Vestbo President



Elisabeth Bel Past President



Guy Joos President Elect



Mina Gaga Vice President



Mark Elliott Treasurer



Giovanni Battista Migliori Secretary General



Stephen Holgate Science Council Chair



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Dick Heederik Occupation and Epidemiology

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Paolo Navalesi **Respiratory Intensive** Care



Christian M. Kaehler Cell and Molecular Biology



Maria R. Bonsignore Clinical Physiology, Sleep and Pulmonary Circulation



Ian M. Adcock Airway Diseases





Fabio Midulla Paediatrics



Dragan R. Subotic Thoracic Surgery and Transplantation



Irene Steenbruggen Allied Respiratory Professionals



Stefano Aliberti **Respiratory Infections**



Nicolas Schönfeld Thoracic Oncology

ERS SENIOR STAFF



Werner Bill ERS Executive Director



Steve Sealy Associate Director, Director of Corporate Relations, Marketing and Communications



Carine Pannetier Director of Science and Education



Pippa Powell Director of the European Lung Foundation



Brian Ward Director of European Affairs



Betty Sax Head of ERS Executive Office



Stéphane Dupasquier Head of IT, Infrastructure and Services



Elin Reeves Head of Publications



Patricia Foo Director of Congress and Events

ERS OFFICES

ERS has three offices:

- Lausanne (ERS Headquarters),
- Sheffield (ERS Publications, Communications and European Lung Foundation)
- Brussels (ERS Advocacy and European Affairs)

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PRESIDENTIAL MESSAGE

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"We will continue to strive to keep ERS a Europeanbased international player in international health and we will gradually adjust to meet the needs of a changing world."

ERS President, Professor Jørgen Vestbo



"The European Respiratory Society is thriving. Founded on our three core areas of science, education and advocacy, we aim to promote lung health and alleviate suffering from respiratory diseases.

The challenge is significant, with the respiratory "big five" diseases (asthma, chronic obstructive pulmonary disease, tuberculosis, pneumonia and lung cancer) taking an annual toll on mortality globally. However, as the world around us is changing, so must we. The ERS 5-year strategy is now into its third year and within this period we have seen significant changes in ERS.

THE CHANGING ERS

In October 2015, the ERS Management Group reviewed progress made with our 5-year strategy. We were happy that we are fulfilling what we set out to do – to transform ERS into a truly international society with a European base. This marks a change in strategy for ERS from previous years and, as a consequence, we now number more than 40,000 members. I am happy to see that we are now signing international membership agreements with national societies of allied healthcare professionals and scientists, as well as with respiratory doctors. To help us broaden access to ERS activities and resources, we are also testing whether similar agreements can be reached with, for example, national paediatric societies. We have seen over the last 3 years that the new membership structure clearly enables closer and more productive relationships between ERS and national societies.

We are in the process of launching the ERS Research Agency, an innovative suggestion in the ERS strategy and a topic we have handled carefully. The Research Agency working group produced an internal White Paper after consultation with members and potential external stakeholders and following discussions, an introductory editorial was published in the *European Respiratory Journal*. The next steps will include a survey to gather ERS members' knowledge of existing datasets, support for consortia working on Horizon2020 bids and, using the inspiration of EU-funded projects such as U-BIOPRED, a joint externally funded research project is planned for an integrated study of COPD, one of the respiratory diseases' "big five".

ERS INTERNATIONAL CONGRESS AND MEETINGS – ALL ABOUT NETWORKING

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40,000 members

The Congress in Amsterdam was also truly international. With a record of more than 23,000 participants, this meeting provided an excellent basis for understanding new science, learning from experts and not least networking with old and new colleagues. The 1-day live endoscopy session was also a huge success due to the hard work of so many clinicians and staff members. It has also gone on to receive international acclaim with a European Association Award for the 'Best Use of Event Technology'.

Our ERS Lung Science Conference is held in March each year in Estoril, Portugal. This event has grown in size and impact and this year, to an even greater extent, provided valuable opportunities for early career members to meet, engage and network.

We know that webinars will be a big part of scientific meetings and education moving forwards, but there is a real value in the extensive face-to-face networking at all our meetings, allowing for invaluable bonds to be formed between research groups, educational leaders and clinicians. The ERS Early Career Members' Committee has an imminent impact on our Congress and our meetings – they are the networkers of the future and we are proud of the valuable contribution they deliver to all our activities.

In June, the Presidential Summit 2015 was held in Brussels and the topic was Personalising Respiratory Care in Europe. An impressive faculty gave a status of where we currently are and where we are heading with telemedicine and promising new technologies. A flavour of the meeting can be seen on an ERS Vision video, produced by ERS under the leadership of ERS Past President Professor Elisabeth Bel.

THE INTERNATIONAL ERS

ERS is pleased to have a number of strong international collaborators. As part of the Forum of International Respiratory Societies (FIRS), we work together with other regional respiratory societies for the benefit of global lung health. In Amsterdam at our International Congress, we launched the Decade of the Lung and later in 2015 FIRS were invited to Geneva to discuss asthma and COPD with the World Health Organization (WHO).

In the field of TB, our global engagements are fruitful and we remain committed to battle TB whenever and wherever possible.

We also continue to have a presence at the meetings of other regional respiratory societies and in 2016 we helped launch the first Pan-African Thoracic Society Congress in Nairobi and we look forward to working together on the second Congress in 2018.

THE FUTURE ERS

Our 5-year strategy will continue to be implemented in the coming years. In June 2016, we have a stakeholder analysis planned to help us comprehend how the changes to the society have had an impact on how we are viewed by our collaborators. We will continue to strive to keep ERS a European-based international player in international health and we will gradually adjust to meet the needs of a changing world.

SCIENCE

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"With this highly productive infrastructure, we have delivered a range of publications, activities and events supporting the ERS's mission of promoting the best science in respiratory medicine."

ERS Science Council Chair, Professor Stephen Holgate



ERS Science Council Chair, Professor Stephen Holgate

"The Science Council has been extremely active over the last year focused upon strengthening respiratory disease research and the clinical evidence base.

"The Science Council comprises a Chair, a Chair-Elect, three Council Directors and the ERS Assembly Heads. The work is predominantly undertaken by three working groups – the Guidelines working group, the Conference and Seminars working group and the Fellowships and Awards working group.

"With this highly productive infrastructure, we have delivered a range of publications, activities and events supporting the ERS's mission of promoting the best science in respiratory medicine.

"A new Clinical Research Collaborations Director position has been created to reflect the increased workload in this area. To strengthen the links between advocacy and science activities, a new EU Scientific Relations Director will collaborate closely with the Science Council, which will involve research advocacy and supporting ERS with its involvement in Horizon2020 proposals.

"None of this great work would have been possible without the extraordinary dedication of our Council and working group members and the very able support that the ERS Office staff have provided."



TASK FORCES AND GUIDELINES

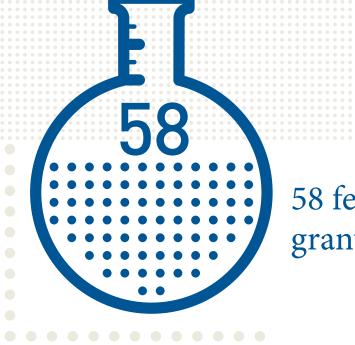
ERS provides financial support to groups of members looking to produce guidelines, statements and technical standards. These documents seek to enhance our understanding of specific topics in the respiratory field and provide recommendations and conclusions for respiratory professionals to follow.

Key achievements:

In January 2016, newly appointed Guidelines Director Professor Marc Miravitlles presented his 3-year strategy, which included developing user-friendly guidelines, improving the dissemination through new technologies, greater collaboration with sister societies, increasing patient involvement and managing conflicts of interest in task forces.

Key statistics:

- 17 new Task Force applications were received
- 10 new projects selected
- 13 Task Force documents published in the year:
- > Monitoring asthma in childhood
- > ERS task force statement: diagnosis and treatment of primary spontaneous pneumothorax
- > Consensus on smoking cessation in COPD and other pulmonary diseases: management of hard-core smokers with co-morbidities
- > An official European Respiratory Society/American Thoracic Society research statement: interstitial pneumonia with autoimmune features
- > An official ATS/ERS/JRS/ALAT clinical practice guideline: treatment of idiopathic pulmonary fibrosis
- > 2015 ESC/ERS Guidelines for the diagnosis and treatment of pulmonary hypertension
- > Report of the European Respiratory Society/European Cystic Fibrosis Society task force on the care of adults with cystic fibrosis



58 fellowship grants accepted

- > Obstructive sleep disordered breathing in 2- to 18-year-old children: diagnosis and management
- > ERS statement on the multidisciplinary respiratory management of ataxia telangiectasia
- > Toward the standardisation of lung sound nomenclature
- > ERS/ATS official policy statement on pulmonary rehabilitation
- > Chronic pulmonary aspergillosis: rationale and clinical guidelines for diagnosis and management
- > Use of exercise testing in the evaluation of interventional efficacy: an official ERS statement

CLINICAL RESEARCH COLLABORATIONS

Networks of researchers, from both within and outside the Society, are eligible to apply for funding to form a Clinical Research Collaboration (CRC). This funding is available to support projects with the aim of improving respiratory medicine in topics that have historically received less visibility.

Key statistics:

- 8 applications submitted
- 5 proposals were accepted for funding:
 - > The Global Lung Function Initiative (GLI) network
 - Enhancing participation of asthmatic children in therapeutic trials of new biologics and receptor blockers (SPACE – Severe Paediatric Asthma Collaborative in Europe)
 - > ERS pan-European IPF registry and biobank (ARIANE-IPF)
 - > RATIONAL an ERS research network for real-life assessment of targeted and immunotherapies in lung cancer care
 - > The European research collaboration for children's interstitial lung disease (ChILDEU)

RESEARCH SEMINARS

In-depth discussion between experts is essential for scientific progress. ERS Research Seminars provide a forum for debate and discussion on key topics, looking at recently published papers and ongoing topics.

Key achievements:

4 seminars were held this year:

- Targeted Therapy for Lung Cancer (6-7 May, 2015)
- Proteases at the cutting edge: friends or foes in chronic lung diseases? (11–13 November, 2015)
- Genetics, epigenetics and exposomics: novel methods to study gene-byenvironment interactions (2–3 December, 2015)
- Challenges in Respiratory Medicine (11–12 February, 2016)

FELLOWSHIPS

ERS Fellowships provide qualified scientists, clinicians and allied health professionals with the opportunity to conduct pioneering research in a different setting to their own. This serves the respiratory community by facilitating the sharing of knowledge between centres across the world.

Key statistics:

- A total of 58 research fellowships granted within the reporting period.
- The launch of a new Fellowship in Guidelines Methodology saw 2 recipients selected.
- The number of scientists applying for Long-Term Fellowships increased by 75%, with around 55 submissions per round.

Key achievements:

- ERS has increased the number of Long-Term Fellowships it offers, including the launch of a Scientifically Developing Countries (SDC) Fellowship, expanded cofounding partnerships with 2 respiratory societies and launching a new Fellowship programme in paediatrics, the Child Lung Health Fellowship.
- The ERS Short-Term Fellowship portfolio has expanded, with a new programme in memory of Dr Valia Kechagia and a cofounding partnership with the Turkish Thoracic Society (TTS).
- Two new Fellowships in Industry, offering 12-month placements at Novartis, were launched. ERS is currently in discussion with other companies to expand these opportunities.
- The RESPIRE 3 programme has been accepted for funding.

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LONG-TERM RESEARCH FELLOWSHIPS 2016 - 16 FELLOWSHIPS

Name & Type of Fellowship	Project	Home – Host countries
Astghik Baghdasaryan Child Lung Health SDC	Identification of disease specific molecules by exhalomics using secondary electrospray ionisation mass spectrometry (SESI-MS) for early detection of inflammation and infection in cystic fibrosis lung disease	Armenia to Switzerland
Olivier Burgy ERS/EMBO Joint Fellowship	Targeting the WNT/TGF-axis in pulmonary fibrosis	France to Germany
Bo Chawes International Fellowship	The early life metabolome, vitamin D supplementation, and prevention of childhood asthma	Denmark to USA
Paula Escudero Standard Fellowship	Regulation and pathogenetic function of the metalloproteinases ADAM10 and ADAM17 in chronic hypoxia-induced arterial pulmonary hypertension - lung inflammation	Spain to Germany
Azmy Faisal Standard Fellowship	Respiratory mechanics and skeletal muscle impairment in smokers at risk for COPD	Egypt to UK
Maged Hassan Fayed SDC Fellowship	The efficacy of sonographic and biological pleurodesis indicators of malignant pleural effusion (SIMPLE)	Egypt to UK
Lars Harbaum Standard Fellowship	Clinical utility of circulating lipidomics in pulmonary arterial hypertension	Germany to UK
<mark>Melissa Kovach</mark> Standard Fellowship	The IL-36 cytokine family in chronic obstructive pulmonary disease	USA to Sweden
Zafeiris Louvaris Standard Fellowship	Effects of inspiratory muscle training on inspiratory muscle oxygen delivery and dyspnoea sensations in patients with severe COPD	Greece to Belgium
Hubertus Luijk International Fellowship	Predicting chronic lung allograft dysfunction by unique immunologic blood profiling	Netherlands to USA
<mark>Yoshiki Motoji</mark> Standard Fellowship	Right ventricular function at rest and at exercise by 3D echocardiography in healthy subjects and in patients with PAH	Japan to Belgium
<mark>Iñigo Ojanguren</mark> Standard Fellowship	Low-dose chlorine inhalation-related airway changes in healthy humans	Spain to Canada
Otavio Ranzani Standard Fellowship	Dual antibiotic coverage with or without corticosteroids in an animal model of severe pneumococcal pneumonia: a randomized controlled trial	Brazil to Spain
Rim Sabrina Sarker SDC Fellowship	An aberrant function of CARM1 in promoting smoke-induced airway epithelial injury: A novel mechanism of COPD pathogenesis	Bangladesh to Germany
Khrystyna Semen SDC Fellowship	Food-derived antioxidants as an add-on to sildenafil therapy in pulmonary arterial hypertension	Ukraine to Netherlands
Xavier Waltz ERS/SPLF Joint Fellowship	Impact of intermittent hypoxia and obstructive sleep apnoea on cerebral microvascular blood flow variability at very low frequencies	Canada to France

SHORT-TERM RESEARCH TRAINING FELLOWSHIPS 2015 - APRIL AND OCTOBER ROUND - 30 FELLOWSHIPS

Name & Type of Fellowship	Project	Home – Host countries
Lieuwe Durk Jacobus Bos International Fellowship	Association of pulmonary microbial communities and metabolic products during the development of pneumonia	Netherlands to USA
David Chapman Standard Fellowship	The effect of a high fat meal on airway hyperresponsiveness in asthma	USA to Italy
Fiona Cleutjens Standard Fellowship	Screening of cognitive impairment in COPD	Netherlands to Italy
<mark>Marijke Dieltjens</mark> Standard Fellowship	Alterations in cardiovascular profile and neurocognitive function during non- invasive device therapy for obstructive sleep apnoea	Belgium to Sweden
Martin Dres International Fellowship	Ultrasonographic evaluation of the diaphragmatic function under mechanical ventilation in critically ill patients. Comparison with the bilateral phrenic stimulation - reference technique	France to Canada
<mark>Alexandra Firsova</mark> Standard Fellowship	Paracrine effects of stem cells in an in vitro model of bronchopulmonary dysplasia of prematurity	Sweden to Germany
<mark>Shigefumi Fukui</mark> Standard Fellowship	The efficacy of sildenafil as a bridge therapy for pulmonary endarterectomy or balloon pulmonary angioplasty	Japan to Italy
Elisabetta Gamen International Fellowship	Histone deacetylase 7 mediated metabolic remodelling: a new crosslink between pulmonary hypertension and cancer	Germany to Canada
Ahmed Mohamed Ahmed Gharib SDC Fellowship	Characterisation of circulating tumour cells in patients with lung cancer	Egypt to Denmark
Anastasios Giannou Standard Fellowship	Using orthotopic tracheal transplantation to study airway progenitor cell fate during carcinogenesis	Greece to Germany
<mark>Anna Gungl</mark> Standard Fellowship	The role of infections in acute respiratory worsening in lung fibrosis.	Austria to Germany
Hanne Hoaas International Fellowship	Long-term integrated telerehabilitation of COPD Patients. A multi-centre randomised controlled trial (iTrain)	Norway to Australia
Andrea Hulina Standard Fellowship	The role of stress protein Hsp70 and cigarette smoke in the inflammatory response in chronic obstructive pulmonary disease	Croatia to Netherlands
Georgios Kaltsakas Standard Fellowship	Is arterial stiffness a consequence of respiratory failure?	Greece to UK
Nikolaos Kanellakis Standard Fellowship	Proteomics analysis of malignant pleural effusion for prediction of favourable prognosis and pleurodesis success	Greece to UK
Marcus Emanuel Larsson Standard Fellowship	Investigation of the role of macrophages during the course of asthma	Italy to Germany
Irisz Karolina Levai Standard Fellowship	Continuous laryngoscopy during exercise	UK to Norway
Paul Joseph McKiernan Standard Fellowship	Transcriptional regulation of the miR-17~92 cluster: an investigation into the role of oestrogen in cystic fibrosis	Ireland to UK
<mark>Renae McNamara</mark> Standard Fellowship	Determining the metabolic load of walking in water compared to walking on land (over-ground) in people with COPD, who are normal weight and obese, compared to peak exercise metabolic response: a prospective, randomised cross-over pilot trial	Australia to Netherlands
Olivia Meira Dias Standard Fellowship	Evaluation of small airway involvement in patients with chronic hypersensitivity pneumonitis and its impact on exercise limitation	Brazil to Italy



SHORT-TERM RESEARCH TRAINING FELLOWSHIPS 2015 - APRIL AND OCTOBER ROUND - 30 FELLOWSHIPS

Name & Type of Fellowship	Project	Home – Host countries
Nikolay Moroz Standard Fellowship	Epigenetic control of diaphragm atrophy during prolonged mechanical ventilation	Canada to Belgium
Selina Mary Parry Standard Fellowship	Understanding muscle wasting and intervention efficacy using muscle biopsy analysis in the respiratory critically ill population	Australia to UK
Andreia Lucia Pinto Standard Fellowship	Ultrastructural studies in primary ciliary dyskinesia of the respiratory tract	Portugal to UK
Maximilian Walter Plank Standard Fellowship	IL-22-secreting CD4+ T helper cells (Th22 cells) represent a unique T cell lineage with gene and non-coding RNA expression profiles distinct to Th17 and other Th cell subsets	Australia to UK
Athanasia Proklou Standard Fellowship	Idiopathic pulmonary fibrosis (IPF) and obstructive sleep apnoea (OSAHS): investigation of common pathogenetic pathways and emerging biomarkers	Greece to UK
Sandeep Sahay Standard Fellowship	Does resting mean pulmonary artery pressure of 21-24 mmHg predicts impaired functional capacity and exercise pulmonary hypertension?	USA to France
Fabienne Danielle Simonis Standard Fellowship	Early recognition of development of ARDS in critically ill patients using physiologic and biologic signals instead of clinical signs and symptoms	Netherlands to Spain
Sami Olavi Simons Standard Fellowship	Immunophenotyping the COPD frequent exacerbator phenotype	Netherlands to UK
Marcelo Santos Audon Vargas Standard Fellowship	Role of non-invasive multidetector tools in the diagnosis of pulmonary veno- occlusive disease (PVOD)	Argentina to France
Ardak Zhumagaliyeva SDC Fellowship	Diagnostics and management of alpha 1 antitrypsin deficiency	Kazakhstan to Italy

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ERS/EU RESPIRE2 (3RD ROUND) - 8 FELLOWSHIPS

Name & Type of Fellowship	Project	Home – Host countries
Vasileios Andrianopoulos Marie Curie fellow	Carbon dioxide partial pressure oscillations during exercise: relation to cerebral blood flow regulation and to the prevalence of cognitive dysfunction in COPD	Netherlands to Germany
Matteo Bonini Marie Curie fellow	Inflammatory and functional biomarkers of the Th2-low endotype in exercise- induced asthma	Italy to UK
<mark>JanWillem Duitman</mark> Marie Curie fellow	Identification, validation and characterization of the endogenous protease activated receptor-1 agonist driving pulmonary fibrosis	Netherlands to France
<mark>Eleftheria Letsiou</mark> Marie Curie fellow	Targeting C5a in severe pneumococcal pneumonia: a role for neutrophil extracellular traps and microparticles to mediate sepsis and organ failure	USA to Germany
John McDonough	Exploring the transcriptome and microbiome of endstage idiopathic pulmonary fibrosis	Canada to Belgium
Danilo Pietrelli	Deciphering the mechanisms of zinc-mediated host defence against M. tuberculosis and other lung pathogens	Italy to France
Dwayne Roach	Respiratory phage therapy: questioning the immune response to phages in the airways	USA to France
Argyrios Tzouvelekis Marie Curie fellow	The role of phosphatases as antifibrotic regulators of fibroblast homeostasis in pulmonary fibrosis	USA to Greece

EDUCATION

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"Underpinning all our activities is the aim to enable professionals to access their own specific training needs."

ERS Education Council Chair, **Dr Gernot Rohde**



ERS Education Council Chair, Dr Gernot Rohde

"Our role is to provide quality educational activities for medical professionals across Europe."

"This year has seen an exciting change in the way we deliver our educational offerings to our members. We have investigated the varying needs of recertification for respiratory trained professionals across Europe, and are continuing to ensure that all our activities are aligned with these needs.

"This has seen us restructure our projects to focus our activities on four key areas of medical education: curriculum development, educational programmes, assessments and e-learning. The aim is to enable respiratory professionals to access a variety of relevant learning opportunities to suit their needs and area of interest.

"As we move forwards, we will continue to build on this mission with structured programmes and online tools to support the development of an online portfolio."



CURRICULUM DEVELOPMENT

A key aim for ERS is to standardise respiratory education across Europe, providing quality benchmarks with the aim of driving standards in the field. Activity includes developing set curricula across key topics in the respiratory field and developing compact guides on these key areas.

This core area of activity was established under the Harmonising Education in Respiratory Medicine for European Specialists (HERMES) initiative. The work of the various HERMES Task Forces will now be built upon and embedded across all educational activities.

Key achievements:

- The Respiratory Physiotherapy Task Force completed the Adult track of the Physiotherapy Curriculum, which received a positive evaluation from national experts and the medical educational adviser.
- Consensus on a Respiratory Infections Syllabus for training was achieved by the Respiratory Infections Task Force.
- The Thoracic Oncology Task Force has completed its curriculum, with the participation of official representatives from the European Society of Thoracic Surgeons (ESTS), European Society for Radiotherapy and Oncology (ESTRO) and the European Society for Medical Oncology (ESMO).

Key statistics:

- 1,300 responses from the ERS membership on a Delphi Technique survey launched by the Adult HERMES Task Force
- 2 new ERS Handbooks were launched:
 - > ERS Practical Handbook of Noninvasive Ventilation (both print and e-book)
 - > Self-assessment in Respiratory Medicine (2nd Edition) (both print and e-book, and an interactive app)

PROGRAMMES

ERS Education programmes aim to deliver established curricula in key areas of respiratory medicine *via* courses and other learning opportunities. Throughout the year, a range of activities are available to disseminate the latest concepts and techniques. This area has developed to deliver structured training programmes, including new training methods.

Key achievements:

- A new PhD was launched in cooperation with Maastricht University to assess how medical education can be harmonised across different healthcare systems in different countries.
- New training methods, such as simulation-based training and small study groups, have been introduced.

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Key statistics:

- 12 courses took place as part of the Spirometry Training Programme, with new programme delivery in Portugal and Poland.
- 20 courses delivered:

Thoracoscopy and pleural techniques	14–17 April, 2015	Marseille, France
Research in respiratory medicine – strategies for success	28–30 May, 2015	Milan, Italy
Adult HERMES Summer School	17–20 June, 2015	Barcelona, Spain
Paediatric HERMES Summer School	17–19 June, 2015	Barcelona, Spain
Hot topics in the management of patients with nontuberculous mycobacterial disease	23 June–7 July, 2015	Online
Rigid bronchoscopy	25–27 June, 2015	Marseille, France
Smoking cessation using innovative techniques	2–4 July, 2015	Athens, Greece
Prepare your congress contribution – How to create and present a poster	9 July, 2015	Online
Prepare your congress contribution – How to develop and present an oral presentation	8 September, 2015	Online
Prepare your congress contribution – How to chair thematic poster and poster discussion	10 September, 2015	Online
Paediatric bronchoscopy	14–16 September, 2015	Paris, France
Interventional bronchoscopy	15–17 October, 2015	Athens, Greece
Thoracic imaging	22–24 October, 2015	Barcelona, Spain
Non-invasive ventilation: advanced	5–6 November, 2015	Milan, Italy
Medical thoracoscopy	12–14 November, 2015	Thessaloniki, Greece
Thoracoscopy and pleural techniques	17–20 November, 2015	Marseille, France
Cystic fibrosis	19–21 November, 2015	Prague, Czech Republic
Lung transplantation: sharing experience across Europe	4–6 February, 2016	Istanbul, Turkey
Comprehensive management of dyspnoeic patients	1–17 March, 2016	Online
Thoracic ultrasound	17–18 March, 2016	Odense, Denmark

E-LEARNING

The ERS e-learning website boasts the largest CME collection for respiratory diseases and treatments. The resources are continuously expanding and offer essential opportunities for continued professional development.

Key achievements:

• In 2015, Respipedia, a peer-reviewed wiki dedicated to respiratory medicine, was launched. The site provides an accessible encyclopaedia, written, edited and peer-reviewed by a community of respiratory experts, acting as a comprehensive resource for professionals looking for information on a range of respiratory topics.

Key statistics:

- 21 articles were published on Respipedia across the year and written by 80 authors
- Over 4,200 webcasts containing more than 2,000 hours of lectures
- Over 9,000 slide presentations and 17,000 e-posters

ASSESSMENTS

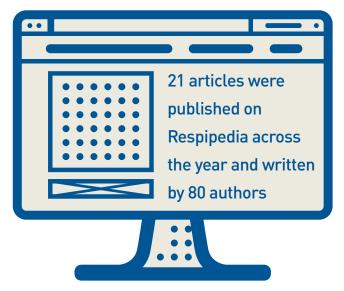
ERS assessments provide an opportunity for respiratory professionals to evaluate their learning and assess further educational needs. ERS Education offers opportunities for this as part of the HERMES examinations in Adult and Paediatric respiratory medicine, as well as assessment for the ERS Spirometry Driving Licence. ERS in partnership with EBAP now provides Training Centres in Adult Respiratory Medicine the opportunity to benchmark against other European centres and obtain European accreditation through the ERS/EBAP training centre accreditation programme.

Key achievements:

- A new working group was developed to introduce a certification programme within the endobronchial ultrasound (EBUS) project.
- 1 more training centre was accredited and the revised criteria for training centres in adult respiratory medicine were published in *Breathe* in March 2016 (a total of 3 training centres are now accredited: Germany, Hungary and Switzerland)

Key statistics:

- 168 people registered for all 3 categories in HERMES examinations in Adult respiratory medicine. Out of 138 European diploma candidates, 104 passed and received the diploma (compared with 64 people passing in 2014).
- 25 people registered for all 3 categories in HERMES examinations in Paediatric respiratory medicine. Out of 22 European diploma candidates, 16 passed and received the diploma (compared with 11 passing in 2014).
- Part 2 Examination for the ERS Spirometry Driving Licence took place in 7 countries. In total, 227 participants successfully passed the programme and received their Driving Licence.



ADVOCACY AND EUROPEAN AFFAIRS

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"We have made huge steps so far and we must build on this success to prevent the rise of respiratory diseases and protect future generations."

Advocacy Council Chair, **Professor Christina Gratziou**



Advocacy Council Chair, Professor Christina Gratziou

"ERS has engaged in advocacy activities since its foundation in 1990 and advocacy continues to be a core pillar of the Society today."

"The Advocacy Council is committed to achieving the Society's mission of promoting respiratory health to alleviate suffering from respiratory disease.

"This year, our activities have been broad and wide-reaching. The ERS Advocacy Council, along with its three subcommittees (the Environment and Health Committee, the Tobacco Control Committee and an ad hoc COPD committee), have continued to concentrate advocacy activities at the EU Level with a focus this year on the Clean Air Package and National Emissions Ceiling Directive, non-communicable diseases (NCDs) and COPD, and tobacco control and prevention.

This year we have also established two new working groups to help put a spotlight on TB at the EU level and on tobacco control in Latin America – the latter has seen a positive collaboration with national and regional respiratory societies in Latin America. New collaborations with WHO and other alliances were also created in accordance with the ERS strategic plan.

"In all these key areas, ERS has provided the scientific evidence base to demonstrate the need for greater action in science, research and prevention of respiratory diseases. We have made huge steps so far and we must build on this success to prevent the rise of respiratory diseases and protect future generations."

THE ERS PRESIDENTIAL SUMMIT

In June 2015, the fifth ERS Presidential Summit took place in Brussels, providing an opportunity to discuss pressing issues at the interface of patients, science and policy in the respiratory field. Entitled 'Personalising respiratory care in Europe', the event looked at how information and communication technology, together with a move towards precision medicine, is revolutionising healthcare.

Key statistics:

• 100 stakeholders attended the event from a range of backgrounds.

100 stakeholders attended the ERS Presidential Summit

CONTINUED ADVOCACY ON AIR POLLUTION AND EU LEGISLATION

This year, European policymakers have been considering an important piece of legislation on air pollution: the National Emissions Ceiling (NEC) Directive. The NEC Directive sets limits for certain pollutants in each member state and, if ambitious, it could save over 200,000 lives by 2030 across the EU.

Key achievements:

- ERS has continued to support a strong directive through meetings with governments, Members of the European Parliament (MEPs) and EU Officers, along with a widespread campaign, including opinion articles, newspaper adverts and an advocacy paper calling for strong and ambitious limits within the Directive.
- The campaign succeeded retaining the Directive on the agenda and saw the strengthening of some elements of the Directive by the European Parliament. At the time of printing, the Directive had entered trilogue discussions between the Council, Parliament and Commission, to achieve a first reading agreement.

ADVOCACY ACTION ON LUNG CANCER

On 23 June 2015, ERS convened a high-level roundtable discussion on lung cancer in Brussels. Hosted by Member of the European Parliament (MEP), Professor Philippe Juvin, the event aimed to discuss strategies for how to improve lung cancer prevention, treatment and management at a research and policy level.

Key achievements:

• The event concluded that to tackle the deadliest cancer in Europe, the EU and the scientific community need to continue working together and guarantee further research, better protection for the citizens from risk factors and provide EU guidelines on early screening.

ADVOCACY ON COPD: HEALTHY LUNGS FOR LIFE

The World Health Organization (WHO) predicts that COPD will become the third leading cause of death worldwide by 2030. ERS is committed to raising awareness of the burden of COPD and this year, under the Healthy Lungs for Life campaign, a new brochure was launched including key recommendations for how the European Union can tackle the issue.

Key achievements:

• A policy brochure for COPD in Europe was launched at an event in November 2015 at the European Parliament. The event was hosted by MEP Claudiu Ciprian Tanasescu and attended by representatives of EU institutions, EU political parties and permanent representations of EU member states.

NEW AD HOC WORKING GROUP ON TB ADVOCACY

During the Congress in Amsterdam, the Advocacy Council officially created an ad hoc working group on TB advocacy. This group is tasked with the refocusing of TB advocacy projects within ERS for the next 3 years.

Key achievements:

- The working group has actively participated in the European Parliament's workshop on TB, HIV and Hepatitis C.
- A new webpage was published containing all European policy developments as well as ERS projects in the area of TB.
- An ERS/WHO Europe survey was launched on refugees and TB control.
- An ERS/European Region of the Union statement was published on TB control and the refugee emergency.

ADVOCACY ON TOBACCO CONTROL

In line with the expanding ERS membership, the ERS Advocacy Council has also expanded its activities in the field of tobacco control.

Key achievements:

- A new Latin American working group on tobacco control was formed with members from the Iberian Peninsula, as well as South and Central American countries.
- This working group has already successfully developed its first paper analysing different aspects of tobacco control in these countries, such as trends on prevalence and mortality for tobacco consumption and legislation on smoke-free environments.
- ERS is a partner in the EU Horizon 2020 Eurest Plus project, which aims to monitor the impact of the implementing acts of the Tobacco Products Directive and assess these within the contest of Framework Convention on Tobacco Control ratification at the EU level

DATA PROTECTION REGULATION

ERS worked with other actors in the field of health research to voice concerns about a data protection package, which could have harmed the progression of medical research in the EU.

Key achievements:

• The EU institutions agreed a good compromise on the package with exemptions included that are required for scientific research to continue, whilst at the same time recognising the need for updated and adequate data protections rules for personal data.

COLLABORATION WITH WHO AND OTHER ALLIANCES

To ensure advocacy activities are effective, ERS continues its long-standing collaboration with international organisations such as WHO and other stakeholders.

Key achievements:

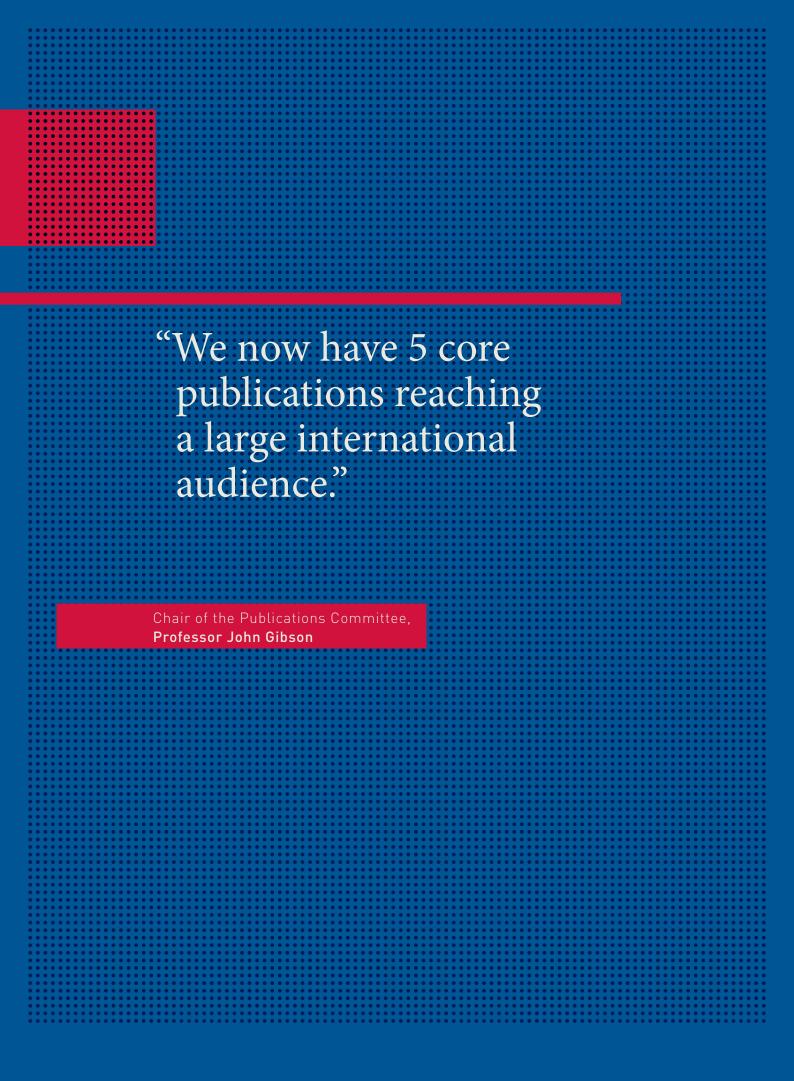
- Throughout the year, ERS participated in several WHO activities, such as the WHO Consultation on the Non-communicable disease (NCD) Global Action plan 2013-2020 Appendix 3 update and the WHO Expert Reference Group on the European NCD Action Plan 2016-2020.
- ERS and WHO signed an agreement to elaborate in-depth multi-annual cooperation in the areas of advocacy and educational training in TB and smoking cessation, including the development of an app for both patients and professionals on smoking cessation for TB patients and a training programme for healthcare professionals.
- This year, ERS adopted a Code of Conduct for healthcare professionals and scientific organisations developed by the BioMed Alliance, of which ERS is a founding member.
- BioMed Alliance also published policy positions in the areas of animal research, budget cuts to the EU Framework Programme for Research and Innovation 'Horizon 2020', as well as the 'Stop Vivisection' European Citizen's Initiative.
- The Alliance of Chronic Diseases, a coalition of 11 European health organisations co-founded by ERS, published its position on factors which heavily influence chronic disease: industrially produced trans fats and air pollutants. These papers describe the main existing issues in Europe in these areas and include EU-level policy recommendations.

OTHER ACTIVITIES

ERS is a Knowledge Partner for the EU-funded platform 'REIsearch', which acts as a bridge that connects multi-stakeholders to discuss topics linked to scientific research and to societal challenges that Europe will face in the years to come.

PUBLICATIONS

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Publications Committee Chair, Professor John Gibson

"A key component of ERS's achievements since its foundation has been its strong portfolio of publications."

"The collection offers respiratory professionals from all backgrounds a wide choice of material to enhance their continued professional development and to keep them abreast of the latest scientific advances in the field.

"This year saw the first articles published in our newest journal, *ERJ Open Research*, along with two new editors taking over the helm for *Breathe* and the *European Respiratory Review*. I am proud to support such a strong team of editors, editorial board members and reviewers across all our publications. Their hard work and dedication helps us drive forward advances in the respiratory field.

"We now have 5 core publications reaching a large international audience. As we look to the future, we plan to further refine and develop the publications and continuously adapt to the rapidly changing publishing environment."

EUROPEAN RESPIRATORY JOURNAL

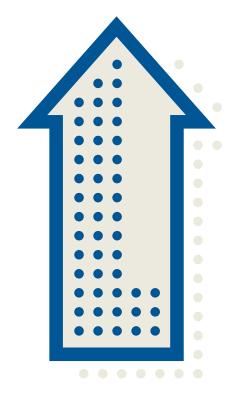
Under the chief editorship of Professor Marc Humbert, this year has seen the publication of numerous and excellent guideline documents, strategy summaries and task force reports both from ERS Task Forces and collaborations between ERS and other national societies, among other highlights. The 2015 impact factor is 8.332 (increased from 7.636 in the previous year), a new record for the journal that sees it move up to third place in the Respiratory System category.

Key statistics:

• Approximately 4.3 million page views over the period (an increase from 3.8 million in the previous reporting year)

Key documents:

- An official American Thoracic Society/European Respiratory Society statement: research questions in COPD
- An official European Respiratory Society/American Thoracic Society research statement: interstitial pneumonia with autoimmune features
- ERS task force statement: diagnosis and treatment of primary spontaneous pneumothorax
- ESR/ERS white paper on lung cancer screening
- 2015 ESC/ERS Guidelines for the diagnosis and treatment of pulmonary hypertension



The *ERJ* 2015 impact factor is 8.332 – a new record

ERJ OPEN RESEARCH

As Chief Editor, Professor Anita Simonds has overseen the first articles published in *ERJ Open Research*. The open access, online-only, continuously published journal has seen a healthy level of submissions and, at the end of March 2016, the journal had been indexed on the Directory of Open Access Journals (DOAJ), and more indexing applications had been made.

Key statistics:

- Over 30 original articles and reviews published, plus research letters and study protocols
- Online page views growing month on month

EUROPEAN RESPIRATORY REVIEW

The *European Respiratory Review* welcomed a new editor to the helm in January 2016. Dr Sergio Harari, who took over from Professor Vincent Cottin, works at the Division of Pulmonary Diseases, Ospedale San Giuseppe, Milan, Italy, and has been a member of the *Review* editorial board since 2008 and a member of the *ERJ* editorial board since 2013. Under his editorship, new article types will be introduced, including Frontiers in Clinical Practice; and Mini Reviews: Health and Politics.

Key statistics:

> Approximately 845,000 page views over the period (increased from 610,000 in the previous reporting year)

ERS MONOGRAPH

Over 70 books have been published since the launch of the *Monograph*, providing in-depth coverage of the clinical aspects of a wide variety of respiratory conditions. Under the Chief Editorship of Professor Robert Bals, four new issues have been published this year:

- June 2015 Lung Cancer
- September 2015 Controversies in COPD
- December 2015 Imaging
- March 2016 Idiopathic Pulmonary Fibrosis

OVER 5 MILLION

BREATHE

Dr Renata Riha began her mandate in September 2015, taking over from Dr James Paton. As a Consultant in Sleep and Respiratory Medicine in Edinburgh, UK, Dr Riha brings a wealth of clinical experience alongside a long history of publishing experience, including as the author of book chapters and involvement in editorial boards of sleep journals.

Key achievements:

> New features in Breathe this year include: Physiology Masterclass; Radiology Corner; Meet the Assemblies; and Confidences de Salon (an interview with key ERS leaders)

THE ERS INTERNATIONAL CONGRESS AND CONFERENCES

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The Congress is the largest meeting in the respiratory field, bringing together over 23,000 delegates.



ERS Congress Chairs, **Professors Pieter Hiemstra and Christian Taube** ERS Science Council Chair, **Professor Stephen Holgate** ERS Education Council Chair, **Dr Gernot Rohde**

The 25th ERS International Congress took place in September 2015 in Amsterdam, the Netherlands.

The Congress is the largest meeting in the respiratory field, bringing together over 23,000 delegates. It offers participants an outstanding scientific and educational programme aimed at professionals from all disciplines including researchers, clinicians, general practitioners, allied health professionals and patients.

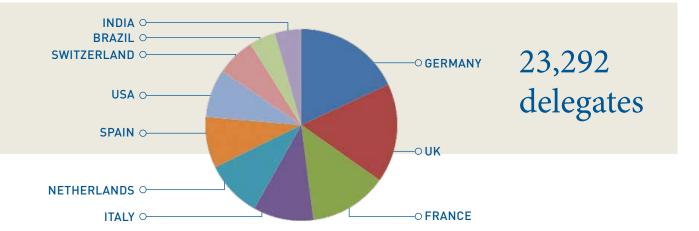
Key statistics:

- 23,292 delegates
- 5,421 abstracts submitted, including 333 late-breaking abstracts
- 4,021 abstracts accepted, including 157 late-breaking and 35 LSC abstracts
- 493 scientific and educational sessions
- 57 industry-sponsored sessions
- 157 sponsored delegates
- 29 grants and awards offered

Key achievements:

It was the first time that the Congress programme was developed under a unified committee – the International Congress Programme Committee, comprising the Science and Education Council Chairs, the Congress Chairs, the Assembly Heads and Assembly Secretaries. The Committee aims to work together, using a cross-cutting multidisciplinary approach, to deliver the best and most balanced programme for respiratory physicians in training as well as certified researchers and allied health professionals, using state-of-the-art educational tools and the most up-to-date scientific content.

2015 marked the first-ever live endoscopy sessions at the ERS Congress. The event saw live cutting-edge medical procedures transmitted across four sessions to a large auditorium room for delegates to view in real time. The doctors performing the procedures could interact directly with the audience in the auditorium room, and explain the procedure as they were doing it. The sessions were very well received among delegates and have gone on to receive a European Association Award for the 'Best Use of Event Technology'.



A new feature, Oncology Tuesday, put a spotlight on cutting-edge science and new techniques in the field of thoracic oncology. Speakers across a range of sessions discussed topics including multi-line therapies in non-small cell lung cancer, resistance to therapy, immune intolerance and how best to implement lung cancer screening for prevention.

This year's programme offered more educational sessions than ever before with 81 sessions covering all aspects of education at different levels. This included two new formats of challenging clinical case-based sessions and 'how to' sessions. The popular Respiratory Championship was held a second time, including a new feature which allowed the audience to answer on their mobile devices.

Alongside existing grants and awards, two new awards were presented for excellence in the field. The ERS Gold Medal in COPD and the ERS Maurizio Vignola Gold Medal in Asthma were given to Professor Annemie Schols and Professor Adnan Custovic, respectively.

LUNG SCIENCE CONFERENCE 2016

The 13th Lung Science Conference entitled 'System approaches in lung diseases' took place on March 10–13, 2016 in Estoril, Portugal.

Key statistics:

- 165 delegates
- 10 awards given including the William MacNee Award (for the winner of the Young Investigator session), the Best Oral Presentation Award and eight Distinguished Poster Awards

SLEEP AND BREATHING CONFERENCE 2015

The third international conference organised by the ERS and the European Sleep Research Society (ESRS), took place in Barcelona from 16–18 April, 2015.

Key statistics:

- 836 participants
- 36 educational and scientific sessions

ENDORSED EVENTS

ERS is frequently asked to endorse educational and scientific meetings that fulfil standards of performance and scientific quality.

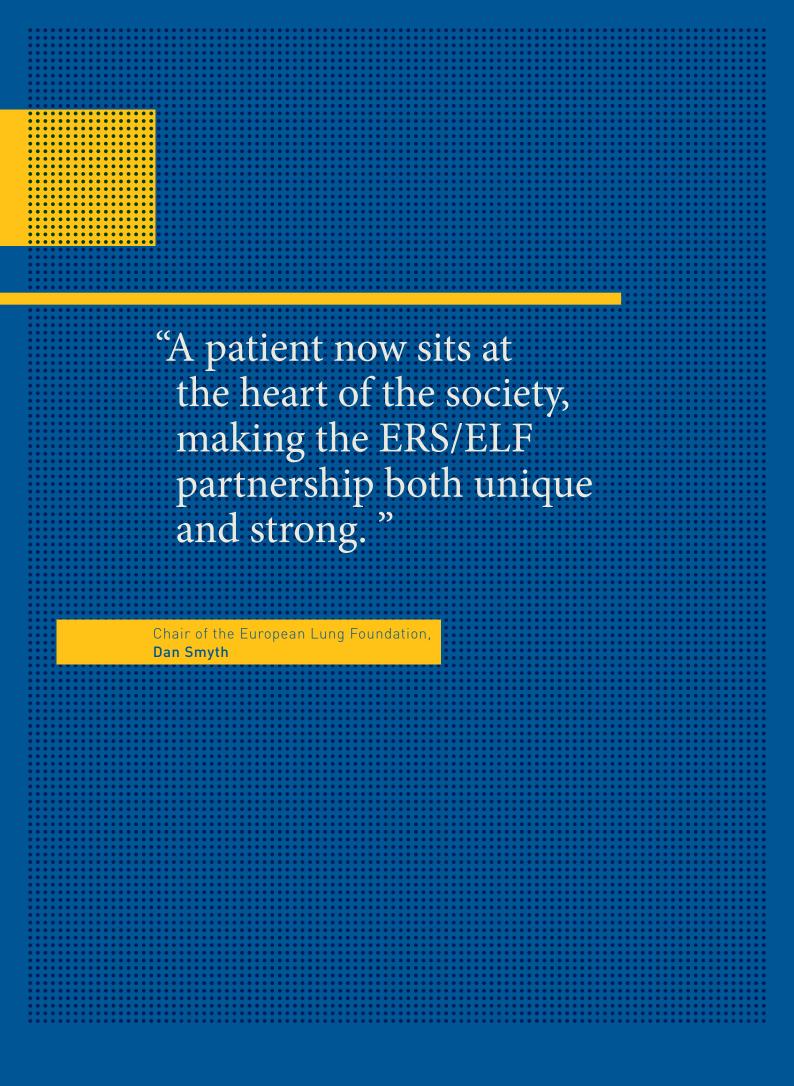
Key statistics:

• 31 requests were received for event endorsement and 27 event programmes were endorsed



EUROPEAN LUNG ELF EUROPEAN FOUNDATION

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Chair of the European Lung Foundation, Dan Smyth

"The overall vision of ELF is to bring together patients and the public with respiratory professionals to positively influence lung health."

"To achieve this, ELF works to incorporate the patient voice at every level of ERS, from its management through to core activities and events.

"The last year has seen our network growing, along with patient involvement in all ERS activities and the Congress in particular. I was delighted that we held the first International Patient Advisory Committee meeting this year, which has been set up to develop global relationships with respiratory patient organisations. This saw 19 organisations represented from across the globe, including the USA, Latin America and Japan.

"My first full year as ELF Chair has been exciting and encouraging. I am also now a member of the management group of ERS and, as such, a patient now sits at the heart of the society, making the ERS/ ELF partnership both unique and strong."

PATIENT INVOLVEMENT IN ERS ACTIVITIES

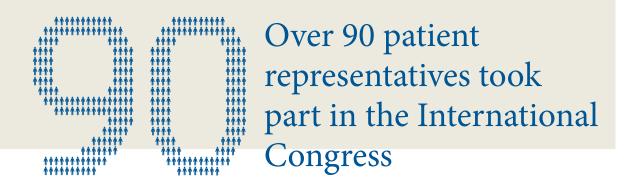
ELF actively involves patients across ERS activities to ensure that project outcomes address concerns of patients and to optimise dissemination. To support this area of activity, ELF has developed new disease-specific patient advisory groups in a number of fields to provide expertise and perspectives to relevant activities and to run patient priority websites for different conditions.

Key achievements:

- ELF input into a total of 10 task forces throughout the year
- Patient advisory groups established in:
 - > Lung cancer: 17 members from 9 countries
 - > Lymphangioleiomyomatosis (LAM): 9 members from 8 countries
 - > Bronchiectasis: 40 members from 11 countries

PATIENT INVOLVEMENT AT CONGRESS AND CONFERENCES

In addition to patient involvement in ERS activities, ELF facilitates patient involvement in key ERS events and conferences, including arranging for patient speakers and enabling patients to attend key sessions.



Key achievements:

- Over 90 individual patients, carers and patient organisation representatives and 42
 patient organisations took part in Congress, including 14 patient speakers and 9
 patient demonstrators.
- A new mentoring scheme saw patients at Congress supported individually by doctors to ensure they felt comfortable and confident.
- Two ELF abstracts were accepted an oral presentation on the European Asthma Research and Innovation Partnership (EARIP) and a poster discussion on the findings of the pulmonary rehabilitation (PR) patient experience survey, part of the ERS/ATS PR Policy Task Force.
- ELF funded 3 patient representatives to attend the ERS Lung Science Conference to learn about the latest research in the field.

THE EUROPEAN PATIENT AMBASSADOR PROGRAMME (EPAP)

ELF further developed the European Patient Ambassador Programme (EPAP; www.EPAPonline. eu) to give patients and carers the skills needed to effectively input into healthcare.

Key achievements:

- 159 participants have joined EPAP this year (584 in total).
- A new Dutch version of the Programme was launched during the Congress.
- A new Facebook page was developed for all Ambassadors.
- A new Patient Advisory Group was formed to manage the work of the project. A number of partners, including Longfonds, PGO Support and NIHR CRN, are now officially using the programme to train their patients.

PATIENT EDUCATION AND RESOURCES

ELF supports ERS members by providing them with resources to share with their patients. This includes patient information factsheets, a multilingual website with information on lung diseases and risk factors, news and opportunities for patients to get involved and social media channels.

Key achievements:

- 4 new factsheets produced: rare lung cancers, primary spontaneous pneumothorax, your lungs and exercise and exercise and air quality: 10 top tips
- Over 40,000 website visitors per month
- 745 new Facebook likes over the year (a total of 2,631)
- 1,471 new Twitter followers over the year with a total of 4,879
- 88,878 views of ELF YouTube videos

EU PROJECTS

ELF is regularly invited to participate in EU-funded, European-wide projects to facilitate patient input and act as a disseminator of research. ELF was involved in 4 projects over the year and worked on various project proposals.

Key achievements:

- Disseminated key findings from the U-BIOPRED project, which concluded this year.
- Participated in an EU-project kick-off meeting for FRESHAIR, a new Horizon2020 global project to improve health outcomes for people at risk of or suffering from noncommunicable diseases in low-resource settings.



Focusing on prevention, the campaign galvanises healthcare professionals, policymakers, patients, the general public and the media, and encourages them to take action for better lung health.

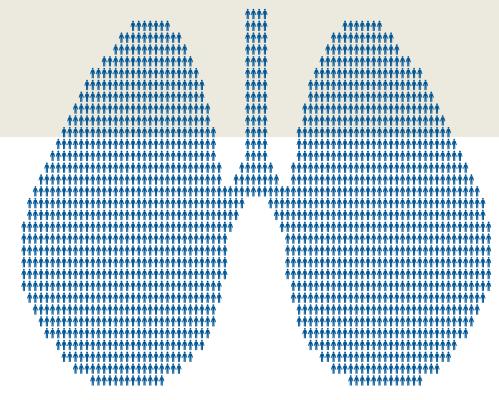


Healthy Lungs for Life

The year-long global lung health campaign, Healthy Lungs for Life, entered its second year, with the theme "Take the Active Option"

Launched in 2014, the Healthy Lungs for Life (HLFL) campaign aims to unite all stakeholders in respiratory health under one umbrella, working towards one goal.

The theme for the 2015–2016 campaign was: Take the Active Option. The launch took place at the International Congress and saw a range of activities and events held in Amsterdam during the Congress, with a wealth of materials available in the aftermath to support colleagues around the world to hold their own awareness-raising events.



1,124 lung function tests in Amsterdam city centre

Focusing on prevention, the campaign galvanises healthcare professionals, policymakers, patients, the general public and the media, to take action for better lung health. A set of impactful statements was shared across a broad advertising campaign in the city of Amsterdam, encouraging people to take the active option for better lung health. The campaign also encompassed "Guerrilla" advertising techniques, including stickers on bus stops encouraging people to walk to the next stop and bike seat covers encouraging people to choose routes with cleaner air when they cycle.

Working with local partners, iAmsterdam, a cycling route through the city centre, which utilised paths and roads with lower levels of pollution, was produced and shared not only with congress delegates, but also with members of the public.

At the Congress centre venue, a programme track took delegates through hot topics and sessions focused on the benefit of activity. In addition, ERS Assembly leaders encouraged ERS members and all delegates to take part in a competition to walk 10,000 steps a day, collecting free Healthy Lungs for Life pedometers and sharing photos on social media.

In the city centre, a huge public health event was held focusing on lung health and activity, offering members of the public the chance to have their lung function tested. Evening events were also held for patients to learn more about lung disease from ERS leaders.

The campaign was also taken to Brussels, where stakeholders discussed the importance of activity, particularly in relation to COPD (see Advocacy chapter).

A new theme will be launched in 2016, aiming to reach an even bigger audience as the campaign continues to grow.

Key statistics:

- 8,578 website visits
- 1,623 views of HLFL videos on YouTube
- 256 events around the world registered
- 1,124 members of the public had their lung function tested over 2 days on Dam Square and Beursplein in the city centre
- 160 patients attended the "Meet the expert sessions", with 4 top expert speakers and many questions
- 10,000 city maps printed with iAmsterdam showing HLFL routes in the city
- 5,000 bike seat covers, 5,000 bike hangers and 850 stickers placed around the city to encourage people to get active

OFFICE, MEMBERSHIP AND FINANCIAL REPORT

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"The future of the Society is at the forefront of all our decisions about expenditure and investment and we remain committed to securing financial stability now and in the years to come."

Treasurer, Dr Mark Elliott

"We are proud that we have been able to make ERS resources and activities available to a broader spectrum of the respiratory arena."

General Secretary, Professor Giovanni Battista Migliori



"This year, we have continued in our strategy to strengthen partnerships with national societies across the globe. Our membership currently stands at approximately 40,000, representing more than 140 countries worldwide.

"We are proud that we have been able to make ERS resources and activities available to a broader spectrum of the respiratory arena. We have collaboration agreements with more than 57 organisations worldwide and have signed a total of 26 new contracts this year. We value the collaboration of every single member and each partner we work with as we work towards the common goal of fighting respiratory diseases.

This year saw ERS join with our respiratory societies as founding members of two new alliances seeing strong collaborations between different nations. This included the Associação Respiratória de Língua Portuguesa (ARELP) and the Association of Russian Speaking Experts in the field of Respiratory Medicine (ARSRM). Both alliances were formed with the aim of increasing the sharing of scientific knowledge, education and advocacy between Portuguese-speaking and Russian-speaking countries respectively.

"In addition, we also revamped and improved the World Village at the ERS Congress ensuring that all our partner organisations could effectively network with delegates on site.

"We have also increased our collaborations with international organisations, sharing the same mission and goals as ERS. This has included formal agreements with the World Health Organization, the European Centre for Disease Prevention and Control (ECDC), the Union Against Tuberculosis and Lung Disease and La Asociación Latino Americana de Tórax (ALAT).

"Within Latin America we have worked with our partners (ALAT and the Sociedade Brasileira de Pneumologia e Tisiologia (SBPT). ERS is specifically supporting projects on spirometry, tuberculosis (TB) and the fight against tobacco.

"Our dedicated leadership is supported by a committed team in our staff offices. We have optimised our capacity and functionality across our three offices in Lausanne, Sheffield and Brussels to manage the strategy and new challenges."





"Our financial position during this year has remained strong and we have continued to control our expenditure.

"Our financial position during this year has remained strong and we have continued to control our expenditure. As a not-for-profit organisation, we are required to reinvest the money we hold in our reserves and as part of our 5-year strategy we are expanding our activities and investing in key areas of growth. With this expansion, we have experienced our first loss, with an excess of almost €1.7 million expenses over revenue. Key areas of growth and expansion this year include the fellowship programmes, our collaborations in the field of TB, ELF and Healthy Lungs for Life and the increase in staff to manage the extension of scientific and educational projects offered by ERS. This year has also seen the mortgage on the office building in Lausanne paid off in full.

"The future of the Society is at the forefront of all our decisions about expenditure and investment and we remain committed to securing financial stability now and in the years to come.

"Independence and integrity continue to be central to ERS's mission and aims. We achieve this principle through strict governance, including establishing a Code of Conduct for interactions with our Commercial Partners–our policy can be downloaded from: www.ersnet.org/about-us/who-we-are

"Additionally, all ERS officers and members of the Society's committees, working parties and sub-committees complete an annual Declaration of Interest (DoI), which we publish on our website. We have continued our membership of the European Medicines Agency and subscribed to the Code of Conduct of the EU Transparency Register, demonstrating our commitment to these collective principles of operating in an honest and open way. A full audit report from the Society is available to download online: www.ersnet.org/accounts."

INCOME STATEMENT

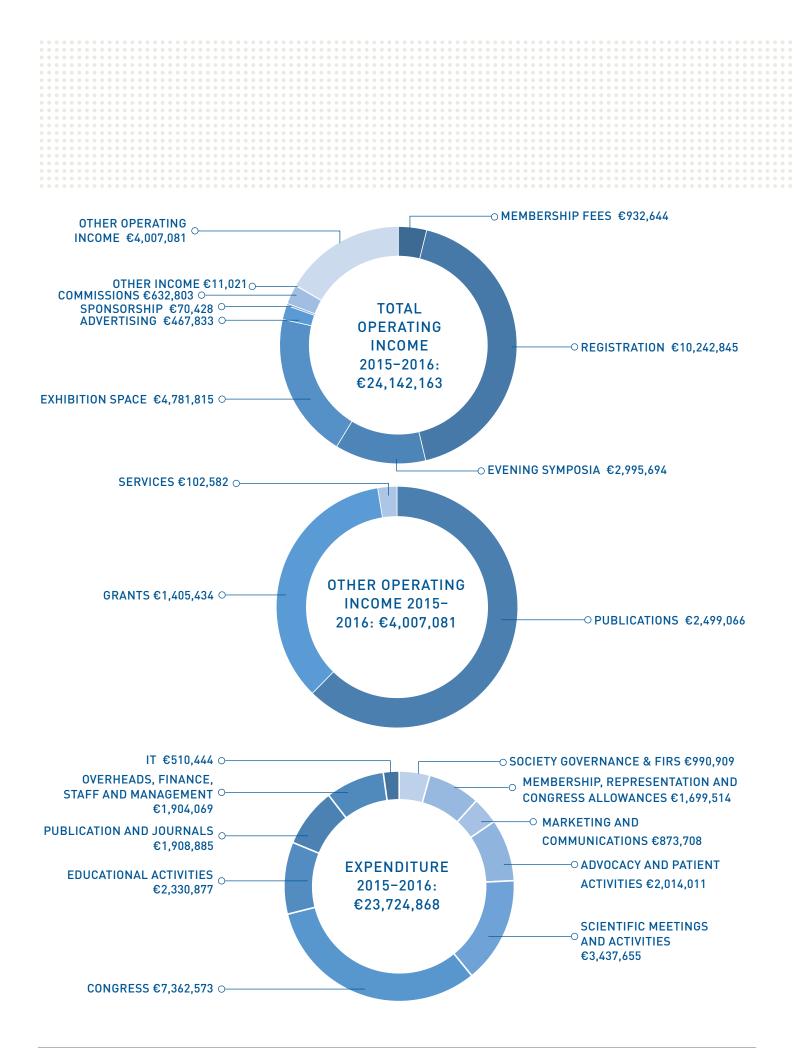
Total operating income	2015-2016
Membership fees	€932,644
Registration	€10,242,845
Evening symposia	€2,995,694
Exhibition space	€4,781,815
Advertising	€467,833
Sponsorship	€70,428
Commissions	€632,803
Other income	€11,021
Total meeting income	€19,202,438
Publications	€2,499,066
Grants	€1,405,434
Services	€102,582
Total of other operating income	€4,007,081
Total operating income	€24,142,163

Operating expenditure	2015-2016
Society governace & FIRS	€990,909
Membership, represenation and Congress allowances	€1,699,514
Marketing and communications	€873,708
Advocacy and patient activities	€2,014,011
Scientific meetings and activities	€3,437,655
Congress	€7,362,573
Educational activities	€2,330,877
Publication and journals	€1,908,885
Overheads, finance, staff and management	€1,904,069
IT	€510,444
Building and maintenance fund	€692,224
Total	€23,724,868

BALANCE SHEET

Assets	March 31, 2015
Cash and securities	€18,032,694
Receivables / prepaid expenses / stocks	€1,897,612
Other current assets	€1,688,046
Financial assets (loans / guarantee deposits)	€23,630
Fixed assets	€5,847,167
Total assets	€27,489,149

Liabilities / Society's equity	March 31, 2015
Accounts payable	€3,443,074
Accrued expenses / deferred income	€2,415,917
Provisions / non current liabilities	€3,898,692
Mortgage	-
Society's equity	€17,731,466
Total liabilities / Society's equity	€27,489,149



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COMMERCIAL PARTNERS:

AstraZeneca Bayer AG Baywater Healthcare BD Beauty Gate LTD Bedfont Scientific Beijing Ronguri-Century Scie. & Tech. Co. Ltd Besmed Health Business Corp BioMed Central **Biomedical Systems** Bioxydyn Ltd. BLUESOM BMC Medical Co. Ltd Boehringer Ingelheim BOSCH HEALTHCARE SOLUTIONS GMBH Boston Scientific BPR Medical Ltd Breas Medical AB BresoTec Inc. Broncus Medical Inc. CareFusion Germany 234 GmbH Chart BioMedical Ltd Chiesi Farmaceutici S.p.A CIDELEC CK Aspire Clement Clarke International Ltd Cook Medical **COPD** Foundation COSMED CSL Behring GmbH Cyclomedica Europe Ltd DEHAS Medizintechnik & Projektierung GmbH DeVilbiss Healthcare GmbH ECO MEDICS AG EFPIA- The European Federation of Pharmaceutical Industries and Associations Egyptian Congress of Pediatric Pulmonology and International Pediatric Pulmonology Congress (ECPP & IPPC) ELSEVIER Emka Technologies EOVE Erbe Elektromedizin GmbH ERT, Inc. E-TOP UNION INC.

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