



European Respiratory
Society

European
Respiratory
Society

Annual Report 2004



PROMOTING RESEARCH



FOSTERING EDUCATION



**STIMULATING KNOWLEDGE
EXCHANGE**



IMPROVING PATIENT CARE

Our mission

The European Respiratory Society aims to alleviate suffering from respiratory disease and to promote lung health through research, knowledge sharing, medical and public education, and working with patient organisations.

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This annual report reflects our activities over the fiscal year
April 1, 2004 – March 31, 2005

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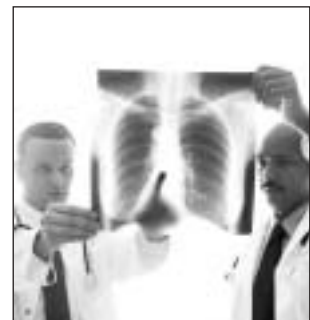
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Message from the President



Ronald Dahl, ERS President
2004–2005

The European Respiratory Society (ERS) is a young society, which has been constantly growing since its formation in 1990. **In 2004, the membership grew by 10% and we now have over 7,500 members.** With the introduction of new membership categories, set up specifically to make the ERS more accessible to low-income countries, we hope to see the numbers rise even further. This will strengthen our commitment in being the **European voice** to promote and improve lung health through research, education and advocacy.

The ERS has made a number of significant developments in 2004, contributing to its continued success. The ERS Annual Congress is now not only Europe's largest annual scientific gathering in respiratory medicine but also the world's, with nearly **15,000 participants** at the Glasgow Congress in 2004.

The Society is dedicated to boosting public and political awareness of the importance of lung health. In 2004, great efforts were made to raise **the profile of respiratory disease at the European Union (EU)** level, specifically in the policy areas of research, environment and tobacco control. Projects undertaken by the ERS included its essential contribution to the ASPECT (Analysis of the Science and Policy for European Control of Tobacco) consortium, and subsequent publication of the European Commission funded ASPECT report in October 2004: *"Tobacco or Health in the European Union: Past, Present and Future"*.

The ERS is also working closely with European National Societies, to influence EU Members of Parliament and national ministries to ensure that respiratory diseases are included in the final EU **7th Research Framework Programme (FP7)**, to be decided in the EU parliament in October 2005. Another important development in 2004, was the establishment of the **Forum of European Respiratory Societies (FERS)** which will lead to a unified effort and greater collaboration between European and national societies, strengthening their ability to influence governmental policy agendas.

The European Respiratory Society Journals (Publications Office) had an extremely successful year. They made the switch to a new journal hosting platform for the *European Respiratory Journal* "Highwire" and as a result saw the hit

rates increase from **5,000 per month to over 100,000 per week.** Financially, for the first time, they also made a net profit, largely due to the increased request for reprints.

An important communication tool for our members is the ERS website. The old website had a limited capacity and could not be expanded in direct relationship to the increased ERS activities. Therefore, a new website was developed and launched in May 2004. Since the launch the average monthly hit rates have increased from 148,648 to 197,326. Which means we now have an **extra 584,137** hits on our site every year.

The **ERS School launched a new educational journal** in September 2004, *Breathe – Continuing Medical Education for Respiratory Professionals* and the initial response from readers has been excellent. The ERS School Courses have also seen their popularity grow since they were first set up in 2003. In fact the number of external courses were doubled in 2004 and some even have to be repeated in 2005 to fulfil the demands. In 2004, the ERS School took the important decision to initiate a Task Force to help define the standard of education and training for pulmonologists across Europe. From this they hope to **develop a recognised curriculum** and provide high-quality teaching material to fulfil these needs. The ultimate aim being to develop a European training programme which will result in a **European Certificate in Pulmonology.**

Collaborations and alliances with other professional organisations have grown during the year. Cooperation with the American Thoracic Society (ATS) included the development of the first ever **web-based guidelines** on chronic obstructive pulmonary disease.

The many developments and initiatives within the ERS in 2004, have only been possible through the dedicated work of the ERS officers, who through their time, knowledge and expertise provide the resources necessary to ensure the continued success of the Society, supported by the staff at the ERS Headquarters in Lausanne, the ERS Brussels office and the European Respiratory Society Journals office in Sheffield.

A handwritten signature in blue ink, appearing to read 'R Dahl'.



ERS Publications

“SCIENCE AT THE CUTTING-EDGE”

Helping people breathe through educational publishing

The ERS Journals fulfil all aspects of the ERS mission statement by promoting research, improving patient care and fostering education, all through exchange of knowledge in the form of scientific and clinical publishing.

Each publication within the ERS portfolio has a different target audience, allowing our members to select which publications best meets their needs. As well as serving an increased number of members the *European Respiratory Journal (ERJ)*, has over 1,200 institutional subscribers and has defied the trends by increasing the total number of subscriptions in 2004.

This year has been a very successful year for the ERS Journals and one where we have been able to build on previous successes.

European Respiratory Journal

The *ERJ* is the “business card” of the ERS; it is one of the most highly regarded peer-reviewed respiratory journals worldwide, and with its improved online submission, 2004 has seen a record number of submissions, over 1,500. With an acceptance rate of only 22% the quality of the content just gets better and better, which is indicated by the 2004 impact factor of 3.1.

Readers of the *ERJ* have been enjoying the improved *ERJ* online since September 2004. Hosted by HighWire, the functionality of the new online system is far superior to the

old system and as a result hit rates have increased from 5,000 per month to over 100,000 per week, which translates to over 175,000 articles downloaded per month! This means that we can suddenly reach many more clinical and scientific “customers”, thereby serving our readership better than ever before. This will further strengthen the scientific reputation of the *ERJ*, since the number of online hits is a predictor of the number of subsequent citations, which in turn has a positive effect on the impact factor, a key marker for ranking scientific journals.

With all these new features available we took the opportunity to revitalise the *ERJ*, giving it a new bright and dynamic front cover and a more up-to-date article layout starting in the January 2005 issue.

Whilst revenue generated has been at an all time high for the Journals, effective reduction of costs has resulted in a surplus for the first time this year; money which will be used to fund other ERS activities such as Fellowships.

Reprints of particular articles are increasingly required by the pharmaceutical companies to market their products. Sales of these reprints amounted to €700,000 at the end of 2004, which represented a 60% increase compared to 2003. This shows a growing trend when taken with the fact that 2003 figures were 50% higher than 2002; highlighting the growing interest in the *ERJ* and the quality of articles published.



Peter J. Sterk and Klaus F. Rabe, ERJ Editors in Chief

ERJ meets the press

From deep vein thrombosis caused by too much sitting at a computer screen to candles in churches, the articles in the *ERJ* have attracted an enormous amount of interest from the press. The *ERJ* is mentioned regularly by the BBC, has appeared in *New Scientist* and appears in national and international press monthly, facilitating the dissemination of information and raising the profile of the ERS around the world. Thanks to Eric Scharelig and all his staff at Cedos International (ERS Press Office) for all their hard work and efforts.

ERJ Editors in Chief

After two years in office, 3,000 manuscripts, and several important technological improvements in the *ERJ*, Peter Sterk and Klaus Rabe, the Editors in Chief of the *ERJ*, are still very much enjoying the challenge of “manning the helm” of a successful journal.




Maintaining the quality of research published in the *ERJ* is a number one priority. This includes the best clinical research as well as basic science in respiratory medicine.

From patients to cells and molecules, and back again! The journal concentrates on the novel developments that are relevant for clinicians, epidemiologists, and biomedical scientists. It covers the whole spectrum from: genetics to infections, asthma to lung cancer, the animal laboratory to the intensive care unit. This is the mission of the *ERJ*. We aim to make it an attractive journal, based on quality. “ We published 290 papers in 2004, which is a considerable decrease when compared to 2003. First, this is due to a more critical attitude of the Editorial Board and, secondly, to the abolition of *ERJ* Supplements in 2004”. Improvements have also been made in the verdict time “The average verdict time (between submission and first decision by the editor) has been reduced to 28 days. The aim of the Editorial Board is to reduce the verdict time by another week to 21 days in 2 years from now”. Their challenges don’t end there; as with all scientific journals they have to consider the impact factor “No matter how we think about it, the impact factor is the most commonly used marker of the scientific ‘weight’ of a journal. Even though it does not rate individual papers or authors, it is increasingly used for this purpose by universities and grant funding bodies.... Our aim is to get the *ERJ* in the top four respiratory journals by 2007. The *ERJ* has published 290 papers, and if our selection turns out to be successful, we estimate that it will reach an impact factor >4 in 2006 (released in 2007).”

European Respiratory Review

The *European Respiratory Review (ERR)* publishes state-of-the-art reviews on current topical issues in respiratory medicine, science and surgery. This publication is popular among readers who want a review of a single subject area. In 2004 the Editor in Chief, Sherwood Burge, attracted some very interesting topics covering chronic obstructive pulmonary disease, asthma management and community-acquired pneumonia.

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	ERJ Published monthly Print run: 7,000+ Distribution: ERS members, libraries and institutions, website		ERM Published 4 times a year Print run: 7,000+ Distribution: ERS members, website, libraries and institutions, and individual purchasers		ERR Published 4+ times a year Print run: 7,000+ Distribution: ERS members, libraries and institutions, website, and individual purchasers
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 Emiel F.M. Wouters
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 P. Sherwood Burge
 Alvar G.N. Agusti
 Gerhard W. Sybrecht
 Kai-Håkon Carlsen



Walter McNicholas

European Respiratory Monograph

The *European Respiratory Monograph (ERM)* series are highly valued throughout the world as exceptional learning aids. They are suitable for all levels of research, teaching and reference and are popular with all our

“Improved online access to the ERJ has resulted in an increase in the number of hits from 5,000 per month to over 100,000 per week!”

members. These publications are also sold as individual publications and links through Amazon and other booksellers have ensured that sales have increased in the last few years. Some of the Monographs were so popular that they sold out and had to be reprinted; evidence of the exceptional quality content that is in these publications. Emiel Wouters, the Chief Editor of the *ERM*, orchestrated the publication of four diverse issues in 2004: *Pulmonary Vascular Pathology: a Clinical Update; Antibiotics and the Lung; Surgery for Non-Neoplastic Disorders of the Chest; and Imaging.*

European Lung White Book

The *European Lung White Book*, published jointly by the ERS and European Lung Foundation (ELF), provides the first comprehensive survey on respiratory health in Europe and demonstrates how respiratory disease affects European Health systems. It was launched in the European Parliament on November 25, 2003 and is available in an abbreviated version: *Lung Health in Europe – Facts & Figures* (aimed at the media and the general public). In 2004, the abbreviated version was translated into several European languages and is now available in: French, German, Italian, Russian, Dutch, Polish and Spanish. With the total distribution of both versions amounting to over 40,000 copies. The year 2005, will see further translations into Danish and Greek.

Launch of the new ERS Website

The new website was launched successfully under the leadership of the ERS Web Editor, Alvar G.N. Agusti, in May, 2004. The new website was developed to cater for the growing needs of our users and to overcome the many technical limitations presented by the old website.

Since the launch the annual hit rates have increased from 1,783,778 to 2,367,915. The objective of the ERS website is to promote the ERS mission by improving and accelerating communication among its members. All aspects of ERS activities are integrated in the website. It also helps to promote respiratory medicine in general and, in particular, the activities of the Society to other national and international medical, scientific and patient societies, the media, health authorities and the general public.

> www.ersnet.org/publications



ERS Newsletter
 Published 6 times a year
 Print run: 7,000+
 Distribution: ERS members individual subscribers and web-site



Breathe - Continuing Medical Education for Respiratory Professionals
 Published 4 times a year
 Print run: 15,000+
 Distribution: ERS members, Congress Participants



European Lung White Book
 Published 2003, *Lung Health in Europe – Facts & Figures* translated 2004
 Print run: 40,000+
 Distribution: National Societies, Sponsors, individual purchasers

ERS School: the educational arm of the ERS



“LEARNING FROM THE EXPERTS”

Objectives

The main aim of the ERS School is to provide postgraduate education across Europe, with the ultimate objective of improving the quality of respiratory medicine and clinical care for patients with lung disease. Furthermore, the ERS School aims to harmonise clinical practice within respiratory medicine throughout Europe.

This is achieved by:

- Providing educational resource material and teaching tools.
- Offering continuing medical education (CME) to ERS members through the European Board for Accreditation in Pneumology (EBAP).
- Developing a criteria for training specialists in respiratory medicine; with the ultimate aim of forming a recognised curriculum, which will map the educational capacities of respiratory specialist departments in Europe and set standards for the required knowledge and skills necessary to become a European Respiratory Specialist.

ERS School activities

The ERS School Chair, Kai-Håkon Carlsen, is supported by three Directors each focused on one of the three main activities of the School:

- 1) Postgraduate Courses at the ERS Annual Congress

- 2) Educational activities and courses held outside of the ERS Annual Congress, throughout Europe
- 3) Web-based educational activities: e-Learning Centre

Congress Postgraduate Courses

In 2004, at the ERS Annual Congress in Glasgow, 22 half-day Postgraduate Courses were organised on the first day. These courses are held every year and are becoming increasingly popular. They are designed for clinicians and allied respiratory professionals, and are broad-based to cover essential major topics in respiratory medicine. Seven courses have been running since 2003, as they form part of a series designed to be completed over a 3-year period. The topics covered by these courses, referred to as Core Curriculum Courses, for the period 2003–2005 are: Basics in chest imaging, Lung cancer, Asthma, COPD, Sleep problems, Paediatric respiratory medicine and Respiratory physiology.

“Meet-the-Professor” Seminars

There were 20 “Meet-the-Professor” Seminars, organised by the ERS School, held during the ERS Annual Congress. These Seminars are aimed at small audiences and have approximately 20 participants, enabling them to have close communication and contact with the Professor.

ERS School Courses

The ERS School Courses are 3–4 day Postgraduate

Courses organised outside the Congress in locations all over Europe. These courses were initiated in 2003 and four were organised for the first year. The success of these courses saw the number double to eight in 2004. The courses are interactive and bring the speakers and participants in close contact with each other, providing them with a great opportunity for exchanging knowledge and obtaining the most up-to-date information in the field.

Bursaries are provided for the courses to support participants from low-income countries. For example, 70 bursaries were provided to participants of the Smoking Cessation Course held in Bucharest (Romania) in December 2004. Further to the continued popularity of these courses and the fact that all eight courses were fully booked in 2004, we look forward to another successful year in 2005 with many exciting courses planned.

Breathe: the new educational journal from the ERS

An exciting new development in September 2004, was the successful launch of *Breathe – Continuing Medical Education for Respiratory Professionals* during the ERS Annual Congress in Glasgow. It is the official educational journal of the ERS School and aims to provide respiratory professionals, including ERS members and other interested readers, with up-to-date information on topics of interest in their daily clinical practice. *Breathe* publishes peer-reviewed articles and offers the added advantage of giving readers the opportunity to earn CME credits by taking part in the *Breathe* CME test programme.

Educational Task Forces and European training in respiratory medicine

In 2004, it was decided that the ERS School would initiate a Task Force to help define the standard of education and training for pulmonologists across Europe. From this we hope to develop a recognised curriculum and provide high-quality teaching material to fulfil these needs. The ultimate aim being to develop a European training programme which will result in a European Certificate in Pulmonology. This project will be further developed in 2005 and will be carried out in collaboration with the Forum of European Respiratory Societies (FERS), EBAP and the pneumology section of Union Européenne des Médecins Spécialistes (UEMS).

ERS School Seminars

The ERS School provides financial assistance to support seminars held during certain national or regional meetings. The programme is planned jointly with the local organisers, and the ERS School covers the cost of 2–4 speakers (usually representing ERS). In 2004, a total of €47,000 was spent in supporting such seminars, as detailed in table 1 overleaf.

e-Learning Centre

The e-Learning Centre was created in late 2002, in order to give members centralised access to all the educational material produced by the ERS. The year 2004, has seen a huge increase in the amount of material available through the e-Learning Centre and it now contains a wealth of valuable educational tools for respiratory professionals worldwide.

The following are just some of the resources that can be found in the e-Learning Centre:

- Interactive case reports with audio and web casts
- ERS Annual Congress presentations and abstracts
- Presentations from the: Lung Science Conference; International Consensus Conference; Research Seminars
- Postgraduate Course booklets from the ERS Congress
- Publications: *Breathe* and the *European Respiratory Monograph*
- Educational material from all external ERS School Courses
- Printed and web-based guidelines

> www.ersnet.org/elearning



“Harmonising standards throughout Europe”

Table 1 – School seminars held in 2004

Seminar Title	Place	Date 2004
1st International Orphan Pulmonology Conference	Vilnius, Lithuania	April 17
Acute exacerbations of chronic respiratory failure: diagnosis and therapeutical approaches	Sibu, Romania	April 22-24
Course on Lung Cancer chemotherapy for interns in pulmonology	Athens, Greece	Spring 2004
The new insight of pulmonology: update for diagnostics and treatment options	Astana, Kazakhstan	June 3-4
Pulmonary hypertension: new aspects in pathophysiology, diagnosis and treatments	Bucharest, Romania	June 17-18
Asthma and COPD: one or two diseases	Bratislava, Slovak Republic	June 18
Current advances in pulmonary medicine	Budapest, Hungary	September 18
Advanced respiratory update for South-Eastern Europe	Belgrade, Serbia	November 11-13
2nd Postgraduate Course on Medical Thoracoscopy	Heraklion, Greece	November 13

In 2004, a study of ERS members based in different European countries was carried out to assess their interest in web-based educational activities. This was done, in part, through the e-ProLearn project, an European Union (EU) supported programme. The results from this study will form the basis for further developments in 2005 which include: 1) an image database; 2) interactive web-based courses for CME accreditation; and 3) an interactive web-based course on asthma as a model for other interactive courses, together with an evaluation of the needs of the target audience.

Educational research grants

Educational research grants are open for application by any member of the ERS. Funded projects are aimed at research in education for respiratory medicine, either for undergraduate or for continuous medical education (including paediatrics, intensive care and surgery). The following grants were awarded in 2004:

- Martyn R. Partridge (London, UK). How best do we teach accurate diagnosis of respiratory conditions? €11,660
- C. Michael Roberts (London, UK). Understanding the use of a web-based clinical image database by respiratory specialists. €9,717
- Snezana Radic and Zorica Zivkovic (Belgrade, Yugoslavia). Childhood asthma educational and smoking prevention project. €9,717

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- Pawel Sliwinski
- Nicolino Ambrosino
- Stefano Nava
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- Isabella Annesi-Maesano
- Andrew Bush
- Emilio Canalis
- Frans De Jongh
- Francesco Blasi



Kai-Håkon Carlsen

> www.ersnet.org/school



Educational Fellowships & Grants

“STRENGTHENING THE FIGHT AGAINST LUNG DISEASE”

ERS Fellowships

The ERS offers both short- (up to 3 months) and long-term (12 months) training and research fellowships. Professionals actively engaged in clinical and basic research in respiratory medicine and clinical pulmonary

practice can apply for the fellowship schemes. They enable qualified doctors and respiratory investigators to carry out specific research and clinical projects or to obtain training in a clinical or research unit in another European country (applicants can be from outside

Table 1 – Long-term fellowships awarded in 2004

Name	Project Title	Home Country	Host Country
Yanina Balabanova	A modern approach to the molecular epidemiological, radiological and immunological analysis of tuberculosis in Samara, Russia.	Russia	UK
Antoine Roch	Effect of hypoxia on alveolar epithelial ionic transport in an <i>in situ</i> model of type II alveolar cells.	France	Belgium
Nese Aydemir	Gender differences and cardiovascular complications in patients with obstructive sleep apnoea.	Turkey	Sweden
Rachel Louise Anderson	The relationship between respiratory pathogens and airway antimicrobial polypeptides in patients hospitalised with acute exacerbations of COPD.	UK	The Netherlands
Nicolas Regamey	Is there any relationship between early onset of inflammation and structural airway wall changes in cystic fibrosis?	Switzerland	UK
Gernot Rohde	Influence of antimicrobial peptides on viral infections in COPD.	Germany	UK
Argyris Tzouveleakis	Association of the “Sarcoidosis disease set” with single nucleotide polymorphisms of a defined range of genes involved in innate immunity to both the susceptibility and the progression of the subsets of sarcoidosis.	Greece	UK
Hilary McLoughlin	Positive pressure ventilation for patients with heart failure without evidence of sleep-disordered breathing.	Ireland	UK
Bülent Taner Karadag	Prevention of allergy - Effects of vaccinations, infections and antibiotic use on sensibilisation in children related to farming and anthroposophic lifestyle.	Turkey	Germany
Laurence Dewachter	Role of angiotensin and its receptor TIE2 in pathogenesis of pulmonary hypertension: interaction with the serotonin transporter.	Belgium	France
Alfonso Torrego	Expression profiling of microdissected human airway epithelial cells and smooth muscle tissue in asthma: probing the mechanism of action of corticosteroids.	Spain	UK
Dilyara Yanbaeva	Chemokine and chemokine receptor gene variants and risk of chronic obstructive pulmonary disease.	Russia	The Netherlands
Sonia Khirani	Monitoring respiratory mechanics in ventilator-dependent patients.	France	Italy

PROMOTING RESEARCH

Europe, as long as the work is carried out in Europe). These fellowships, funded by the ERS, enable enthusiastic investigators and clinicians to develop essential skills and experience that will be invaluable throughout their respiratory careers.

In 2004, the ERS Executive Committee on recommendation from the Scientific Committee awarded 13 long-term research fellowships, which amounted to an investment of €371,028. The awardees were short listed from 31 applications and are listed in table 1.

Twenty-two short-term fellowships for training (10) and for research (12) were also granted in 2004 with a total investment of €126,725 (table 2).

There can be little doubt that the ERS is doing its very best to support research and training to fight respiratory disease in Europe.

> www.ersnet.org/fellowships

Table 2 – Short-term fellowships awarded in 2004

Name	Project Focus (Keywords)	Home Country	Host Country
Jakub Radlinski	Sleep apnoea, autonomic reactivity, automated analysis	Poland	Sweden
Nathalie Gosselin	Pneumology, paediatrics, virology, allergology, RSV	Belgium	UK
Ely Ruy Jover	Lung transplant	Chile	Spain
Flora Pompeo	Inflammation, NF-kB, IκB kinases, COPD	Italy	France
Rollin Tabuena	Transbronchial needle aspiration, malignancy, granulomatous disorders, interventional bronchoscopy	Philippines	Italy
Eunice André	Cough, PAR2, TRPV1, sensitisation	Brazil	Italy
Elisabetta Balestro	COPD, non-invasive mechanical ventilation, physiology	Italy	Spain
Emad Eldin Mustafa			
Hassan Ibrahim	Bronchoscopy, thoracoscopy, diagnostic, intervention	Egypt	Belgium
Robert Christians Buttery	Endobronchial, ultrasound, staging, diagnosis	UK	Germany
Andriy Tsyurulnyk	Sarcoidosis, inflammation, chemokines, expression	Czech Rep.	Austria
Evgenia Kolesnikova	Hypoxic ventilatory response, hyperoxia, breathing regulation, Fos	Ukraine	Poland
Konstantin Tetenev	Respiratory muscle, fibres, COPD	Russia	UK
El Rhazi Karima	St George Respiratory questionnaire, quality of life, Morocco	Morocco	France
Mikhail Atyukov	Lung transplantation, thoracic surgery	Russia	France
Tatiana Philippova	Lung transplantation, pulmonology disease	Russia	France
Christophe Alfons			
Dooms	EBUS, lung cancer, TBNA, N-staging	Belgium	Germany
Ebru Yalçın	Pulmonology, children, plethysmography, lung function tests	Turkey	The Netherlands
Anna-Karin Larsson	Nitric oxide asthma antigen airway smooth muscle contractions	Sweden	Germany
Firdy Permana	Passive smoking, cotinine, ETS, Indonesia	Indonesia	Sweden
Maura Camozzi	<i>Aspergillus fumigatus</i> , pentraxin 3, lung, transgenic mice	Italy	Switzerland
Gudrun Weinmayr	Rhinoconjunctivitis, ISAAC, atopy, risk factor	Germany	Italy
Raffaele Dellaca	Non-invasive mechanical ventilation, chronic obstructive pulmonary disease, forced oscillation technique, positive end expiratory pressure	Italy	UK



ERS Annual Congress

“UNITING EXPERTS WITH A COMMON GOAL”

The world's largest respiratory congress

The ERS Annual Congress is not only Europe's largest annual scientific gathering in respiratory medicine but it is also the largest in the world, with nearly 15,000 participants and growing each year. This event provides a platform for important improvements in the understanding and treatment of lung diseases, with speakers from among the world's leading experts in this field. It provides the perfect forum for the presentation of research findings and exchange of knowledge.

The 2004, 14th ERS Annual Congress was held in Glasgow (Scotland, UK) and exceeded all expectations.



Micheál Martin (Irish Minister for Health and Children), speaks during the opening ceremony of the ERS Annual Congress

A new record was set for the number of abstracts submitted and the scientific programme was of the usual high standard with good attendance at the Symposia and Postgraduate Courses. A novel event, introduced in 2004, was the Primary Care Conference held immediately before the main meeting and which attracted over 500 delegates.

The Scientific Programme

Since the first ERS Annual Congress in Brussels in 1991, an increasing number of participants, including physicians, researchers, young and senior scientists (both basic and clinical), allied professionals, exhibitors and industry managers, with either a professional interest or personal curiosity in respiratory medicine, have been attending the ERS Annual Congress. From the few thousand attendees at the first Congress, the number of attendants now consistently hits the 14–15,000 mark. Several thousand, as shown by the abstracts submission/acceptance bars in figure 1, attended the Congress to present and discuss their original data in many oral presentation, poster discussion and thematic poster sessions.

The aim of the ERS Congress is to provide participants with up-to-date information, combined with a vision for the future. The ERS Annual Congress is a real international arena with attendants and delegates coming from over 100 countries from all continents (table 1). We are

“The world’s largest respiratory congress”

particularly pleased that, while the traditional European Countries confirmed their strong presence, the newly affiliated EU countries also increased their participation, the Russian Federation is becoming more influential, and both the Middle-East and the Asian Pacific areas increased their scientific interaction with the ERS.

The Annual Congress is not only an outstanding chance to improve scientific knowledge, but it is also a great opportunity to meet friends and colleagues. The success of the Congress is determined by the participants and the quality of the science, and we are dedicated to continued improvement and development of the Scientific Programme.



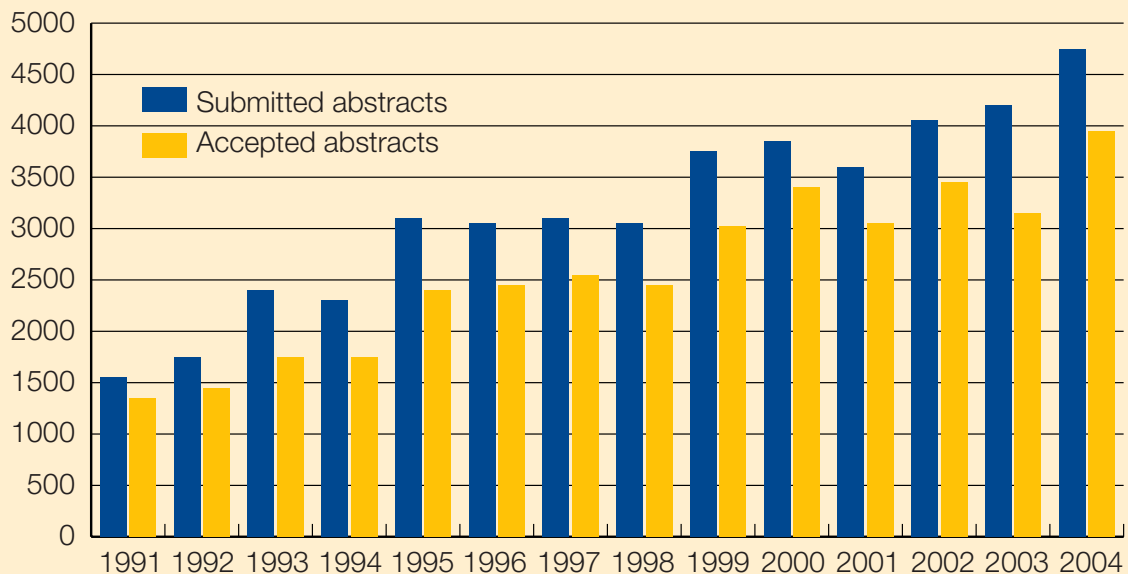
Table 1 – Top 10 participating countries in 2004

UK	1630
Germany	788
Italy	698
France	682
Spain	512
USA	505
Turkey	465
The Netherlands	439
Switzerland	363
Greece	356

Increasing public awareness: the “Breath of Life” campaign

During the Congress, the ERS and the European Lung Foundation (ELF) hosted a 2-day spirometry testing event in the centre of Glasgow. With the theme, “Take ten minutes. Put your lungs to the test”, this event aimed to raise public awareness about lung disease and, in particular, about COPD. This initiative underlines the ERS commitment to promote better understanding of lung disease to the general public.

Figure 1 – Number of abstracts submitted and accepted for the ERS Congress over the years



Media coverage on television, most evenings leading up to the congress, combined with extensive press and radio coverage, drew over 2,000 people to the tent during the weekend. Response from the public was very positive, and people frequently commented that they were surprised how simple it was to test their lungs. People queued both days outside the tent well before its official opening time. A team of volunteer nurses, technicians and doctors tested 1,000 people and more than 11% of those tested showed impaired lung function



Volunteer nurses tested 1,000 people at the spirometry tent

and were given an official letter advising them to seek further guidance from their general practitioner (GP).

Press activities

The 14th ERS Annual Congress was also a success in terms of onsite press activities, media attendance and the interest generated from journalists worldwide. There were 180 registered journalists from 32 countries, and 90 media organisations from all corners of the globe who requested our embargoed press releases by e-mail.

The three ERS press conferences, which essentially covered six different themes, were also very successful, thanks to the efforts of the 12 distinguished speakers who were kind enough to take up our invitation.

> www.ersnet.org/congresses

Honouring significant contributors to lung health

The following awards were presented during the opening ceremony:

- **Presidential award:** Professor Eliot A. Phillipson (Toronto, Canada)
For his contribution to respiratory medicine particularly in the area of breathing disorders during sleep.
- **Congress Chair award:** Professor Sir John Crofton (Edinburgh, UK)
For his pioneering work in tuberculosis, and for being one of the “giants” of respiratory medicine.
- **European Lung Foundation:** Professor Robert Loddenkemper (Berlin, Germany).
For his contribution to respiratory medicine through the conception and coordination of the *European Lung White Book*.
- **Special Award for exceptional achievement in lung health:** Micheál Martin (Ireland, UK) the Irish Minister for Health and Children
In recognition of his political leadership in introducing legislation for banning smoking in the workplace in Ireland.

Glasgow Congress Committee

Chairs

William MacNee & Robin D. Stevenson

Walter McNicholas

Claudio F. Donner

Laurent P. Nicod

Friedrich Kummer

Peter Lange

Phillip Tønnesen

Andrea Rossi



William MacNee



Robin D. Stevenson

Scientific Activities



“FACILITATING THE EXCHANGE OF INFORMATION”

ERS Scientific Committee

In the year 2004, the ERS Executive Committee (on the recommendation of the Scientific Committee) directed substantial resources to the scientific activities of the ERS, which are so important for the Society's mission to promote research and respiratory medicine in Europe. The total budget dedicated to scientific activities (at the discretion of the Scientific Committee) in 2004, amounted to over 1 million euros.

Funds were directed into four main areas to support respiratory medicine and science throughout Europe:

1. Task Forces
2. Research Seminars
3. The ERS Lung Science Conference
4. ERS Fellowships

The Scientific Committee (Chair, Assembly Heads, and Treasurer) administer these important and significant resources of the Society. Any application whether it be for a Task Force, Seminar or Fellowship is peer-reviewed before any decision is taken.

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Assembly and Group Officers are dedicated to providing the highest-quality scientific programme for the Annual Congress

Scientific Assemblies

To facilitate exchange of information and knowledge among its members, the ERS created 10 scientific assemblies. The Assemblies serve as a forum and sit at the heart of the Society. They influence and guide its scientific direction.

An important part of the work of these Assemblies is to help nurture ERS Task Forces designed to address specific problems concerning lung health in Europe.

“There can be little doubt that the ERS is doing its very best to support research and training to fight respiratory disease in Europe”

Task Forces

The Society financially supports ERS members wishing to form Task Forces and produce position papers, statements or guidelines that subsequently become the official ERS documents on issues relating to respiratory medicine. These guidelines are extremely important as they enhance general scientific understanding, especially in areas where controversy exists or procedures are unclear. They also establish a consensus and are effective tools when combating disease at an international level. Task Force proposals go through a peer-review system before being presented to the Scientific Committee by the relevant Assembly Head and being approved by the Executive Committee.

Eight new Task Forces were approved by the Scientific Committee in the year 2004, with a total investment of €72,897 as shown in table 1. These Task Forces are expected to complete their work in 2005.

ERS/ATS joint guidelines on the diagnosis and treatment of COPD

The Executive Committee of the ERS in cooperation with the Board of Directors of the American Thoracic Society (ATS) endorsed a new set of guidelines on chronic obstructive pulmonary disease (COPD), which were finalised in 2004. “Standards for the diagnosis and treatment of patients with COPD” updated the respective sets of guidelines, produced by both societies, almost 10-years ago. During the last decade, many new concepts and therapeutic options in the field of COPD

have been identified. Hence there was an urgent need for these guidelines to be updated. The guidelines were launched in May 2004, and are available as a “live” web-based document. An accompanying summary of the guidelines was published in the *European Respiratory Journal* in June 2004.



The ERS/ATS COPD Guidelines are available as a “live” web-based document.

Table 1 – Task Forces approved in 2004

Assembly	Task Force	Financial Support €
1.0 Clinical	Smoking-related interstitial lung disease (ATS/ERS)	7,516
2.0 Respiratory Intensive Care	Ethics and decision making in end stage lung disease	14,582
5.0 Clinical Allergy & Immunology	Outcomes for COPD pharmacological trials: from lung function to biomarkers The assessment of cough ERS/ATS Asthma control and exacerbations: standardising endpoints for clinical asthma trials	26,349
6.0 Occupation & Epidemiology	Guidelines for smoking cessation in patients with respiratory diseases COPD epidemiology in Eastern and Western Europe	23,446
7.0 Paediatrics	ERS/ATS Working group on infant and young children pulmonary function testing	1,004



Participants at the Lung Science Conference

Research Seminars

The purpose of Research Seminars is to gather a small group of well-established and preferably young investigators with a view to addressing scientific topics in-depth, including recently published work and research in progress. There is the ultimate aim of breaking new ground. Research Seminars are held over two days and take place in easily accessible European cities.

Three Research Seminars were held in the financial year 2004:

- 1) **The bronchial smooth muscle in airway responsiveness** (Gothenburg, Sweden)
June 19–22, 2004
Participants: 50
Budget allocated: €38,628
- 2) **Genotyping and phenotyping of diffuse parenchymal lung diseases** (Freiburg, Germany)
November 13–14, 2004
Participants: 60
Budget allocated: €43,778
- 3) **Adaptations to hypoxia** (Palermo, Italy)
March 4–5, 2005
Participants: 70
Budget allocated: €48,077

> [www.ersnet.org/education & research](http://www.ersnet.org/education&research)

ERS Lung Science Conference

The focus of the ERS Lung Science Conference is basic science. The Conference combines state-of-the-art lectures from internationally renowned scientists, together with poster and oral presentations from young clinical and non-clinical scientists, with much time for discussion. This dynamic conference attracts exciting new science and the opportunity for participants from many different disciplines to meet and discuss basic scientific processes and form future collaborations.

The Second ERS Lung Science Conference held in Taormina (Sicily) at the end of March 2004 was very successful, attracting over 170 participants. This Conference continued the series on lung inflammation begun in 2003, the specific theme being “Application of our knowledge of the basic processes of lung inflammation in lung diseases”. The conference was again held in the beautiful surroundings of Taormina, Sicily, enhancing the participants enjoyment of the event.

The 3rd ERS Lung Science Conference held at the end of March 2005 completed the series on lung inflammation. A new series on Hypoxia in Lung Biology and Disease will begin in 2006.

Scientific Committee

Chair

Andrea Rossi

Gerhard W. Sybrecht
Ulrich Costabel
Tobias Welte
Monica Spiteri
Paolo Palange
Ratko Djukanovic
Benoit Nemery
Jorrit Gerritsen
Gilbert Massard
Rik Gosselink
Tom Schaberg



Andrea Rossi

Advocacy and EU Policy Development

“RAISING THE PROFILE OF LUNG DISEASE”

Advocacy and policy development objectives of the ERS

The year 2004, was an extremely busy one for the ERS Brussels Office, as we moved into new premises near the European Parliament and employed two new staff members, bringing the total to three. Activities were expanded, existing partnerships with other health and environment organisations were developed and new ones created.

Externally, 2004 was one of the most momentous years in the history of the European Union (EU). May 1, saw the expansion of the EU from 15 to 25 countries. In June, 731 Members of the European Parliament (MEPs) were elected to and joined the European Parliament. A new Commission of 25 members took up office on November 23.

Research

The research activities have been centred on:

1. Contributing to developments in the future EU research policy

The ERS has been involved with the Commission proposal for the 7th Framework Research Programme (FP7). Two position papers supporting the inclusion of respiratory diseases in FP7, were prepared as a contribution to the consultations that the Directorate General of Research launched in August and November 2004. These position papers were presented to the

European Commission and distributed in the European Parliament. The position papers have also been used by National Societies to gather support at the national level for future discussions on the FP7 proposal.

“Creating and expanding existing alliances”

2. Raising the profile of the ERS within the EU research environment

Presenting a list of prospective independent experts to the European Commission for project evaluation and monitoring, in addition to attending Commission-organised conferences/workshops on issues of interest for the ERS contributed to raising the awareness of the ERS and its goals. Visits to Commission Officials and MEPs have also reinforced the process.

3. Providing information on research funding to ERS members

Providing information to our members on EU affairs has been improved by the creation of the “EU Corner” on the ERS Website. It holds information on research and other relevant EU programmes. This site is regularly updated with Calls for Proposals and any other issues of importance. Individual advice to ERS Members has also been provided.

Environment policy

ERS participated actively in the formulation of the EU Action Plan on Children’s Health and Environment. In

October 2003, Peter Helms (former Chair of the ERS Paediatric Respiratory Epidemiology Group) was asked by DG Sanco (Directorate General for Health and Consumer Affairs) to Chair the Technical Working Group (TWG) on Children's Respiratory Health, which was set up by the European Commission in October 2003.

The Action Plan was published in May 2004. The European Parliament initiated its own report on the plan and we submitted amendments in support of respiratory health and tobacco control. At the beginning of December the Dutch Presidency held a two-day conference on the Action Plan. The ERS attended this conference and spoke on indoor air issues at a non-governmental organisations event.

Tobacco control

Much of the tobacco-control activity centred on the production of the European Commission funded ASPECT (Analysis of the Science and Policy for European Control of Tobacco) report: *Tobacco or Health in the European Union: Past, Present and Future*. The report was an overview of EU action on tobacco control over the past 15 years and looked at all aspects of policy,



including health effects, economics, effective interventions and tobacco product regulation and ended with a series of recommendations to national governments and EU institutions. We put together a consortium of health organisations and European and international tobacco-control experts to draft the report. The report was co-written by the ERS Brussels Office and edited jointly with the ERS Journals Office in Sheffield (UK).

The report was published by the Commission on October 22, 2004, and has been welcomed by tobacco-control policy makers and advocates from around the world. The full report is available in English on the ERS website (www.ersnet.org/eu-corner).

The ERS also actively campaigned for European Community (EC) and member-state ratification of the Framework Convention on Tobacco Control (FCTC), and organised a global e-mail campaign to persuade member states to give the go-ahead for EC ratification in June.

ERS Brussels Office in 2004 and beyond

The objectives of the ERS at the Brussels Office in 2004 were to:

- Build on work undertaken and gains made in 2003 to raise the profile of the ERS amongst the EU institutions, politicians and policy makers.
- Make available ERS scientists and experts to EU policy makers to assist with EU policy formation.
- Create and expand existing alliances with other partners sharing the same aims to achieve our EU objectives.
- Effectively influence the policy agendas in key areas of interest to the Society. In 2004, these key areas were: research; environment policy; tobacco control.

In addition, the ERS also took part in the first inter-governmental working group to set up the Conference of the Parties (CoP) for the FCTC in June 2004.

Other activities

Lobbying on proposed EU chemicals legislation REACH

In September, we joined forces with European Public Health Alliance (EPHA) Environment Network (EEN), the World Wildlife Fund (WWF) and the British Medical Association (BMA) to lobby MEPs on the REACH (Registration, Evaluation and Authorization of Chemicals) regulation proposal. Meetings were set up with a number of individual MEPs to express support for the proposal.

Conferences and seminars

The ERS was actively involved in planning, organising and presenting at a number of European tobacco-control events over the year. These events have included workshops on tobacco product regulation, research and indoor air. Key meetings included the European Union Presidency Conference on Tobacco Control in Limerick (June 17–18, 2004) and the World Health Organization Ministerial conference on Children's Health and the Environment (June 23–25, 2004).

“EU research policy developments, environment policy and tobacco control are amongst the key focus areas of the ERS Brussels Office”

Policy submissions to the Commission

In 2004, we also coordinated policy recommendations and submissions on respiratory research in FP7, tobacco control research in FP7 and the future of EU public health policy.

> www.ersnet.org/eu-corner

Advocacy Committee

Chair

Ronald Dahl

Giovanni Viegi
Walter McNicholas
Andrea Rossi
Zorica Zivkovic
Laurent P. Nicod



Ronald Dahl

Membership



“THE ERS VISION IN MOTION”

Attracting an increasing number of members

The ERS is a Society of individual members and depends on their contributions for the success of its activities. One measure of the strength of our Society is the size of the membership. This has been increasing steadily, and is now at nearly 7,500, not only a rise of 10% in the last year (2003–2004), but a significant increase compared with the 5,000 members in the year 2000. This is very encouraging, but the Executive Committee noted 2 years ago that there are approximately 30,000 respiratory physicians and similar doctors in Europe (World Health Organization (WHO) definition), and of course thousands more further afield. It seems legitimate therefore to consider that we have a huge opportunity to engage with and attract many more members from our constitute countries. New members will benefit from the greatly expanded scientific and educational opportunities the Society has developed in the last few years.

With this in mind, the Membership Committee decided to review the ERS membership structure in 2003. This has not been done for more than 8 years.

The proposals approved by the Executive Committee and adopted for the new structure are illustrated in table 2

(table 1, lists the benefits prior to the implementation of the new structure).

The main changes: how will ERS members benefit?

The most far reaching changes concern the members from Central and Eastern European countries of the former Soviet Union (USSR). To date, they have been offered a greatly discounted membership rate (Associate Membership) with almost full benefits for €10 per year. However, the ERS was heavily subsidising these memberships; in particular, the cost of producing and mailing the ERS publications. Hence, the Membership Committee decided that in order to provide a cost-effective service to our Associate Members, electronic access to all of the ERS publications would be preferable. Furthermore, it was agreed that basing the membership fees on the gross national product (GNP) per capita for different countries, as published by the World Bank, would be beneficial to members worldwide. For wealthier countries, members pay an unchanged full fee of €170, whereas for countries with a per capita GNP of less than \$10,000 it is €85. The Society has deliberately created cheaper (€10–30) memberships in order to cater for the needs of Associate Members. The fee for Senior and Junior members has also been significantly reduced.

Table 1 - Membership categories by country and benefits up until March 31, 2005

Membership Category	Benefits							Eligibility						
	Fee CHF	ERJ	ERR	ERM	Newsletter	Electronic Publications	Electronic Learning	Gen Assembly	Member	Assembly/Group Vote	Officer	National Delegate Voting Rights	Stand	Congress Discount
Full Membership														
Full Member	250	X	X	X	X	X	X	X	X	X	X	X	X	X
ATS	213	X	X	X	X	X	X	X	X	X	X	X	X	X
Eastern European full member	125	X	X	X	X	X	X	X	X	X	X	X	X	X
Junior, Senior	110	X	X	X	X	X	X	X	X	X	X	X	X	X
Affiliate Membership														
Allied Health Professionals														
World	70				X	X	X	X	X	X	X	X	X	X
Associate Membership														
Eastern Europe	10			X	X	X	X	X	X	X	X	X	X	X

Postal charges of CHF 20 are required for members living outside of Europe
 Junior Member - Age 35 and under / Senior Member - Age 65 and over

Table 2 – Membership categories by country and benefits from April 1, 2005

Membership Category	Country GNP \$	Benefits							Eligibility						
		Fee Euro	ERJ	ERR	ERM	Newsletter	Electronic Publications	Electronic Learning	Gen Assembly	Member	Assembly/Group Vote	Officer	National Delegate Voting Rights	Stand	Congress Discount
Full Membership															
World	>10,000	170	X	X	X	X	X	X	X	X	X	X	X	X	
ATS (joint)		145	X	X	X	X	X	X	X	X	X	X	X	X	
Europe	< 10,000	85	X			X	X	X	X	X	X	X	X	X	
Outside Europe	< 10,000	85				X	X	X	X	X	X	X	X	X	
Junior, Senior															
World	>10,000	85	X	X	X	X	X	X	X	X	X	X	X	X	
Europe	< 10,000	50	X			X	X	X	X	X	X	X	X	X	
Outside Europe	< 10,000	50				X	X	X	X	X	X	X	X	X	
Affiliate Membership															
Allied Health Professionals															
World		50				X	X	X	X	X	X	X	X	X	
Associate Membership															
World	3-10,000	30					X	X				X			
World	< 3,000	10					X	X	X			X			

A person from a country with a GNP of less than \$10,000 may receive printed publications if the membership fee of € 170, plus, for members outside Europe, the usual postal charge of € 10.
 Junior Member - Age 35 and under/ Senior Member - Age 65 and over

Fundamental reasons for modernising the membership structure:

1. To encourage as many professionals as possible to become full participating members of the ERS.
2. To encourage membership of junior (doctors in training) and members of the profession supplementary to medicine (e.g. respiratory nurse specialists, physiotherapists, technicians).
3. To enable colleagues from economically disadvantaged countries to benefit from reduced fees for ERS membership.
4. To recognise that the economic and political climate in Europe is changing.

We recognise that for some members from Eastern Europe, the new structure represents a small increase in fee but a change in benefits. We have reinstated voting rights for National Delegate elections, and we are considering the areas of Group and Assembly voting as

“The ERS is working hard to modernise the Membership structure and expand our Membership for the benefit of present and potential members worldwide”

well as the Congress discount. On the whole however, we feel that this is an attractive price structure, and hope that many Central and Eastern Europeans, and others from similar countries will continue to be full members and benefit from the services the ERS provides. When the financial consequences of the latter are clearer to the Society, after the ERS Copenhagen Annual Congress 2005, we will review the structures again in late 2005.

The introduction of these categories, and the phasing out of the old, coincided with the installation of new computer software at the ERS Headquarters (Lausanne, Switzerland). The new Membership database will enable our Membership department to remain efficient and responsive.

The new categories are being phased in gradually. Old

Associate Members are continuing their membership until 2005/6, and 3-year members are encouraged to wait until their membership expires before changing to the new system.

The ERS plans to assess its Membership profile in 2006 to ensure that the changes have achieved their intended effects, especially in terms of opening up membership to those countries that did not have the resources to previously benefit from the valuable information and resources available through the ERS.



Joint memberships

American Thoracic Society

For some time, ERS members paying the full fee have been eligible for a 15% discount if they are simultaneously members of the American Thoracic Society (ATS), and there has been great interest in applying this to members of European National Societies.

German Thoracic Society

With the assistance of the ERS Treasurer, Gerhard Sybrecht, the German Society is piloting a joint National Society/ERS membership, in which ERS membership will be offered to members of the German Thoracic Society for a 15% reduction in fee. It is hoped that this will result in an increase in ERS membership. If it does, we may be able to expand this scheme much further as we already have expressions of interest from other Societies such as the British Thoracic Society.



SEPAR/Hellenic Thoracic Society / EdiAipo

Although the ERS conducts its affairs using the English language, we are aware that not all of our potential members are fluent in English and they may experience some difficulties in reading and speaking it. To combat this problem, in the past 3 years, we have developed a number of joint memberships with national societies, where the members can access ERS educational material online and selected papers from the *ERJ* are published in their native language in four issues per year.

This was implemented in Italy (EdiAipo) and Spain (SEPAR) where it has been very successful with approximately 850 new members as a result of this initiative. A similar scheme linking the ERS with the Hellenic Thoracic Society is also underway. We are in negotiations with Turkey, and are very keen to expand this scheme further.

In addition, for the first time, a new fellowship jointly sponsored by the ERS and SEPAR was awarded to Hernán Abraham Manrique Chávez from Peru who will train in Spain.

Readdressing the balance

The number of women training to be physicians is rapidly increasing. Up until now, the ERS has been unable to assess the gender balance of its Membership, but, with our new Membership registration forms and database, we are able to record gender, which will allow us to conduct a detailed survey of a sample of women members. From this, we will be able to determine if we need to alter our activities or offer new facilities.

The future and beyond...

The ERS puts a lot of effort into attracting new members at the ERS Congress and at other societies' meetings around the world. Increasing Congress numbers mean that the opportunities to appeal to new members are

“The Society has seen a 10% increase in its membership over the past year and with the introduction of the new membership categories we hope to see a further rise”

greater than ever, and we hope to continue to provide excellent introductory packages, as we did in 2004 with the launch of the new journal *Breathe*. The ERS is working hard to modernise the Membership structure and expand our Membership for the benefit of present and potential members and patients everywhere.

> www.ersnet.org/membership

Membership Committee

Chair

Martin F. Muers

- Giovanni Viegi
- Gerhard W. Sybrecht
- Alvar G.N. Agusti
- Ineta Grislé
- Vesna Petrovic
- Mina Gaga



Martin F. Muers

Building Alliances with Other Professional Organisations



“UNIFYING EFFORTS IN THE GLOBAL FIGHT AGAINST LUNG DISEASE”

Working together for a better future

Partnerships with other international and domestic societies and professional organisations are a key element in the broad ERS mission to decrease global morbidity and mortality from respiratory disorders and life-threatening acute illnesses. These alliances, partnerships and working relationships create a synergistic force that serves to strengthen the work of the ERS.

Forum of European Respiratory Societies

An important development during 2004 has been the establishment of a Forum of European Respiratory Societies (FERS). This initiative was the brainchild of Walter McNicholas (ERS President 2003–2004). The primary focus was to ensure greater collaboration between European and national societies by coordinating activities and ultimately strengthening the ability of these societies to promote respiratory health and influence governmental policy agendas. Improved communication with the national societies will also help joint membership initiatives with the ERS. The assistance of FERS will be most valuable in unifying continuing medical education (CME) accreditation systems throughout Europe, as well as helping in the ultimate adoption of a European curriculum in Respiratory medicine.

We are working hard, together with FERS to influence European Union (EU) Members of Parliament (MEPs) and

national ministries to ensure that respiratory diseases are included in the final EU 7th Research Framework Programme (FP7), to be decided in the EU parliament in October 2005. FP7 is the instrument that allows the EU to support research in the EU. Respiratory diseases were not included in the first proposals for FP7, therefore lobbying efforts were undertaken with support at national level. National Society representatives were strongly encouraged to contact their National Ministries of Research and Health civil servants. Two position papers were prepared with contributions from ERS members and from representatives from national societies. The objectives of which were:

- 1) To have respiratory diseases included in the group of major diseases in the next framework programme of research.
- 2) To contribute to European research policy and raise awareness on respiratory science.

American Thoracic Society

Cooperation with our sister organisation the American Thoracic Society (ATS) resulted in the development of the first ever web-based guidelines for the diagnosis and treatment of patients with chronic obstructive pulmonary disease (COPD). The guidelines were published in May 2004, and are available on both the ATS and ERS websites. The unique modular structure provides greater flexibility, as it allows the modules to be updated frequently, to keep abreast of future advances or discoveries. Joint Task Forces, Consensus Statements,

courses and the exchange of ideas at the twice-yearly retreat help in the unification of efforts for the global fight against lung disease.

World Health Organization

The continuing relationship between the ERS and the World Health Organization (WHO) has resulted in a number of important initiatives in 2004. Our contribution was key to the publication of the report entitled *Preparing a Health Care Workforce for the 21st Century: The Challenge of Chronic Conditions*. The purpose of which is to guide future worldwide strategic developments on education and training of health professionals, and to provide care for patients suffering from chronic conditions more effectively. We are also a founding member of the WHO initiative the Global Alliance against Respiratory Diseases (GARD) the aim of which is to ensure that respiratory diseases become a worldwide priority and to establish surveillance, proper diagnostics and availability of affordable treatments for patients in middle and low income countries.

Forum of International Respiratory Societies

The Forum of International Respiratory Societies (FIRS) was created to combine the efforts of sister organisations, on a global level, to tackle the worldwide burden of lung disease. FIRS works closely with WHO and actively supported, and lobbied for the implementation of the Framework Convention on Tobacco Control (FCTC). The objective of the FCTC is “to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to tobacco smoke.” It was unanimously adopted by the 56th World Health Assembly. Since the Convention opened for signature on June 30, 2003, 168 countries have signed and on November 30, 2004, Peru became the 40th state to ratify the Treaty, therefore the WHO FCTC entered into force on February 27, 2005.

FIRS Task Forces were also implemented in 2004 and the one on “Standardised Pulmonary Function Testing” has been finalised and approved. The data will be collated and translated where necessary, and the Working Group will draft recommendations on the simplified technical aspects of spirometry. The written reports will be ready in

Autumn 2005 and the final document will be ready in 2006.

International Society of Aerosols in Medicine

ERS set up a new alliance with the International Society of Aerosols in Medicine (ISAM), in 2004, to stimulate interdisciplinary cooperation and exchange of information in all aspects of aerosol research in medicine at an international level. ERS and ISAM leaderships meet periodically to discuss ways in which ISAM and ERS can work together on mutual goals particularly concerning their joint commitment to improving lung health through research, education and advocacy for patient care. They will meet these common goals by: producing joint ERS/ISAM Task Forces which will be set up through the relevant ERS Assemblies with the ultimate goal of producing guidelines; setting up joint courses during their respective yearly congresses; producing joint editorials on aerosol science in the field of medicinal aerosols to be published in the *European Respiratory Journal*; and establishing joint membership schemes.

American College of Chest Physicians

Two “Meet the Professor” Seminars were given in cooperation with American College of Chest Physicians (ACCP), during the ERS Annual Congress in Glasgow (September 2004), and *vice versa* at the ACCP Chest meeting in Seattle, October 2004. The success of this reciprocal arrangement has resulted in plans for future cooperation in 2005, at the ERS Congress in Copenhagen and at the Chest meeting in Montreal. In addition, joint Postgraduate Courses will be held in Copenhagen, the course “Moving on from the Millennium: developing trends in respiratory medicine” will take place with an equal number of speakers representing ERS and ACCP, and during the Chest meeting in Montreal, a PG course on “Sleep-related disorders” will be organised with faculty from ERS, ACCP and the Canadian Thoracic Society.

European Board for Accreditation in Pneumology

The European Accreditation Council for Continuing Medical Education (EACCME) was established by the Union Européenne des Médecins Spécialistes (UEMS) in

1999 in order to assess the CME value of international meetings. It was intended that the specialist sections of UEMS under the umbrella of EACCME would recommend the number of CME credits for international educational events.

Several of the UEMS sections, in association with their European specialist societies, have set up European Specialty Accreditation Boards which undertake to assess proposed events in their own specialties for educational quality according to strict criteria. The first ESAB was the European Board for Accreditation in Cardiology (EBAC) and the European Board for Accreditation in Pneumology (EBAP) was later set up on the same lines.

EBAP comprises six members, three from the ERS and three from UEMS. Since January 2005, EBAP has assessed 14 planned international respiratory events and has approved 11 of them as worthy of appropriate CME credits. At the recent FERS meeting, held in Brussels (April 2005), the EBAP president outlined the development of EBAP and asked the national respiratory societies for their support in this initiative.

World Asthma Meeting

We joined the ATS, Asthma Foundation of Thailand, the Thoracic Society of Thailand the Allergy and Clinical Immunology of Thailand, Anti-Tuberculosis Association of Thailand, and other worldwide respiratory societies, to co-sponsor the 4th World Asthma Meeting (WAM). It took place in February 16–19, 2004 in Bangkok (Thailand). WAM takes place every three years and as one of a number of sponsoring organisations that support this meeting, the ERS also assisted with the educational and scientific programme and was responsible for final decisions affecting the meeting based on a business plan drawn up by the hosts. The thrust of WAM is educational and clinical and the size of the meeting is determined by the importance of asthma in the region in which WAM takes place.

European Lung Foundation

The European Lung Foundation (ELF) is the “public voice of the ERS”, it was set up in 1999 with the mission of helping the European scientific community share its expertise in respiratory medicine with the public. ELF is

the only pan-European foundation dedicated to lung health. The ELF draws together the knowledge of leading European scientific and medical experts to help: 1) raise public awareness about respiratory disease and its related risks; 2) create new links between authorities in the European Community and specialists in lung health; and 3) improve the quality of medical service delivered in Europe for respiratory disease.

Since 2002, the ELF, together with other partners, have supported national campaigns in Sweden, Austria and Scotland in 2004, to promote the prevention and early diagnosis of COPD. These initiatives are part of a global European public awareness campaign on lung health challenging the public to put their lungs to the test, by taking a spirometry test, in the “The Breath of Life” campaign.



Report from the ERS Treasurer

“EXPANDING ACTIVITIES IN ACCORDANCE WITH THE ERS MISSION”

As the Society's Treasurer, I am very pleased with its financial health. The sound financial situation provides the Society with the ability and flexibility for further development and expansion of its activities in accordance with its statutes and mission.

Balance sheet

The ERS has a significant cash reserve, which can be seen as being “life insurance” for the Society. Approximately 70% of our income is derived from one single source, the Annual Congress. Although it is insured against potential threats, there are many events (e.g. terror attacks, viruses, etc.) that could lead to the Congress being cancelled resulting in a complete loss of income for that particular year. The cash reserve would therefore, soften the blow of such an occurrence and

Figure 1 - Income from the financial year 2004-2005

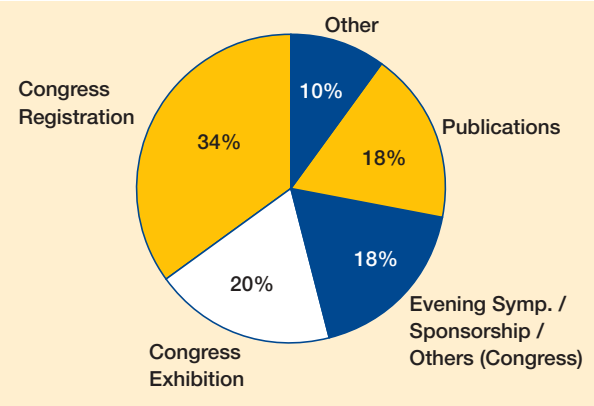
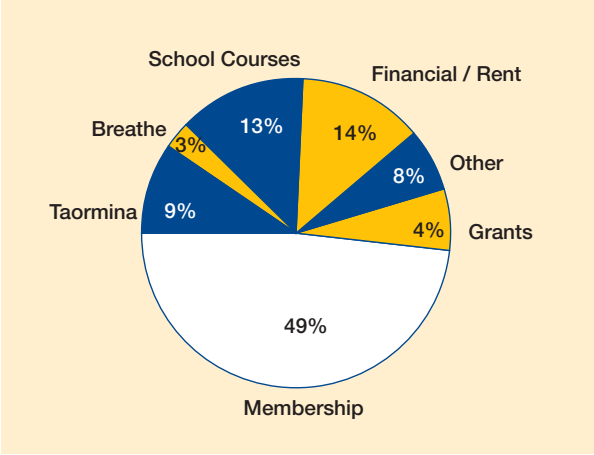


Figure 2 - Detail of other income 2004-2005



allow the Society to continue functioning. This need for a significant cash reserve is also the reason why the ERS headquarters (HQ) building was mortgaged and not fully paid up.

It is the aim of the ERS to maintain reserves at the current level. This means that we have to balance income and expenditure of our yearly operational budget.

Financial results for the year end March 31, 2005

The income chart (Figure 1) clearly demonstrates the importance of the Congress for the overall revenue of the Society.

Table 1 - The ERS Headquarters balance sheet

	March 31, 2005	March 31, 2004
Assets €		
Cash and securities	5,098,355	3,928,814
Receivables / prepaid expenses / stocks	869,977	1,262,103
Financial assets (guarantee deposits)	244,136	243,148
Fixed assets	4,688,613	4,767,794
Total assets	10,901,081	10,201,859
Liabilities / Society's equity		
Accounts payable	1,157,895	616,746
Accrued expenses / deferred Income	1,237,182	1,118,669
Provisions	863,803	796,702
Mortgage	2,692,307	2,820,512
Society's equity	4,949,894	4,849,230
Total liabilities / Society's equity	10,901,081	10,201,859

The Congress income can be broken down into three major categories:

- Congress registration which represents 34% of the Society's total income. This position has been growing steadily over the past few years in proportion to the growing importance of the ERS Congress
- Sponsorship and grants (18%)
- Commercial exhibitors (20%)

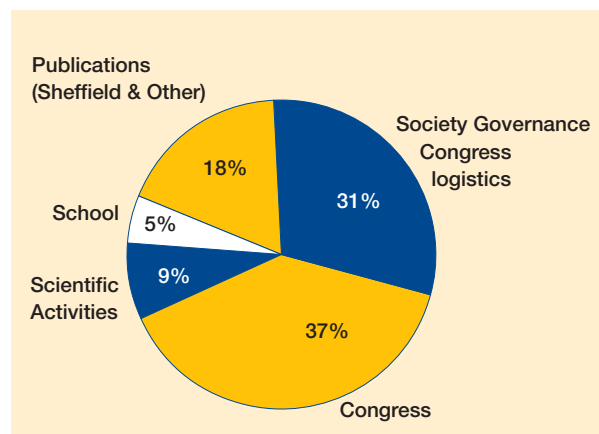
The latter two are also constantly growing, however, at a slower rate relative to registration.

It has always been the Treasurer's intention to keep the Congress expenses at or below 50% of Congress income to finance the Society's governance and administration, and to allow the expansion of the scientific and school activities. Fellowships, Research Seminars, Task Forces and the high-level scientific conference have been ongoing activities, gaining in importance over the years. School courses and the ERS School journal *Breathe* are all new additions. Many of the scientific activities also generate income. However, ERS offers financial support as well as staffing to make them more affordable to a wider audience, in particular those coming from low-income countries.

Good news from the European Respiratory Society Journals, they managed a turnaround and generated a

surplus of €154,510. In recent years, the Society subsidised the Journals with the income generated from membership to the value of over €600,000. Reprints, library subscriptions and advertising from the *European Respiratory Journal* are the main income generators.

Figure 3 - Expenditure



Gerhard Sybrecht, ERS Treasurer

Corporate Investors

The respiratory market place ranges from large international pharmaceutical organisations researching and delivering new therapies, to manufacturers and distributors of the latest technologies in diagnosis and alleviation of lung disease.

The European Respiratory Society is supported by around 120 of these companies at its Annual Congress and throughout the year. This includes exhibition, advertising, sponsorship, educational symposia, grants

for basic and clinical research and support for advocacy within the European Union.

This investment allows ERS the independence to fund important respiratory research and advance the never-ending goal of promoting and sharing improved respiratory knowledge and health to all the citizens of the European Community and beyond.

We would like to thank the following for their valuable support during 2004:

A

Actelion Pharmaceuticals Ltd, CH
Adelphi Group, GB
Aerocrine, SE
Air Liquide Santé International, FR
Airox Ltd, FR
Airsep Corporation, US
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