

Report of the business meeting of Assembly 1, Vienna 2009 (B. Balbi, Head – J. Vansteenkiste, Secretary and Report)

Report from the Assembly Head

Overall the ERS Congress is a great success as far as science and participation to the event, with more than 19,000 registered attendees. The Clinical Assembly heavily participates in this success as for its many events ongoing and the interest that they are able to attract from Congress attendees. PG courses, Symposia, communication sessions were all, although of course variably, very well attended and the general feed-back is generally positive.

Maybe the only negative comment I keep getting from many members is about E-Communication Sessions, as they can be very frustrating and not enough time-rewarding especially for the role of chairpersons. Probably E-communication sessions could be useful and attractive only for imaging sessions. I will represent this word of criticism on the Congress structure to the Committees in charge of structuring and organizing future Congresses.

As far as the general feeling on the weight of the Assembly inside the Society as depicted from the space we have during the Congress, I would like to remember to all assembly members that, due to the growth of the Society, it is now time for a wider view on this issue: many symposia are usually organised each year at each Congress and thus, basically each Study group will end up having at least one proposal accepted. However, the activities of the Society have grown dramatically over the last years. ERS school is now an important pillar of the Society, new web-based activities are another one, and there is always the possibility to apply for extra-Congress-type of activities/events, as Research seminar (I organised the first one of our Assembly in 2001!) and external Courses. Check the websites for instructions and deadlines and give your contribution to all these events.

As for the main Scientific Programme in Barcelona 2010, we had already accepted two proposals. Other proposals are still pending and depending on the priorities from the Groups they will be supported during the upcoming meetings of the Congress Committee.

Last but not least, this Congress is the term of my mandate and also of that of the Assembly Secretary, Johan Vansteenkiste. We thank you all for your support and wish the Assembly as a whole and the incoming Officers, Vincent Cottin as Assembly Head and Enrico Clini as Assembly Secretary, great success for our Assembly.

As my final take-home message to all Assembly 1 members, I believe that our Assembly represents an integral part of ERS and that its value is in the overlapping and interaction of different groups sharing a common view on Respiratory Medicine in Europe, although coming from different backgrounds.

Report from the Assembly Secretary

Vienna 2009 meeting

Assembly 1 did very well at the Vienna 2009 meeting.

There was a major involvement: 7 of the 23 available slots:

- 2 core curriculum courses
 - Thoracic Oncology (Ass. 1 and 11)
 - Burden of COPD (Ass. 1 and 6).
- 5 other PGCs
 - Drug-induced pulmonary disease (Ass. 1)
 - Interventional Pneumology (Herth)
 - Complexity of COPD (Clini, Burghuber)
 - Exercise testing (Ward, together with Ass. 6 and 9)
 - Pleura (Herth, together wit Ass. 8).

Assembly 1 also had 2 MTPs

- Extrathoracic sarcoidosis

- Simple spirometry for underdeveloped countries

Barcelona 2010 meeting

PGC accepted in the first round of selection are:

- Core Curriculum: Idiopathic pulmonary fibrosis (IPF) (Poletti, I)
- Core Curriculum: Interventional pulmonology (Herth, D)
- Standard: Is gastro-oesophageal reflux (GOR) bad for the lungs? (Dupont, B)

Although there was a core curriculum on ILD, three other Standard proposals on ILD were sent in. With the limitation of available slots, none of these could unfortunately be accepted in the first round:

- Interstitial lung diseases: an overview (Marvisi)
- Diffuse parenchymal lung diseases: associations with tobacco smoking (Antoniou)
- Smoking-related interstitial lung diseases - diagnosis, management and Treatment (Domagala-Kulawik)

The following MTPs are in the running, and will have final discussion at the next School meeting:

- How do I manage ILD in connective tissue disease (Cordier, F)
- Asthma treatment strategies in primary care. New developments (Thomas, UK)
- Can we enhance exercise performance in COPD with nutritional support? (Steiner, UK)
- New proposals are awaited now. Please address Education proposal (PGC – MTP) to the Assembly Secretary.

Elections

- There were the on-site elections for 3 assembly delegates to the Council of the Society. Ulrich Costabel, Sebastian Ley and Venerino Poletti were elected.
- This year there will be no on-line elections for the whole Assembly.

Report from the group meetings

Group 1.2: Rehabilitation and Chronic Care (Chair: S. Singh, Secretary: M. Spruit)

Number of participants: 20

1. Opening by chair.
2. Summary of the ERS 2009:
 - a. 136 abstracts accepted (73% acceptance rate, somewhat lower than ERS mean acceptance rate)
 - b. 2 oral presentation sessions
 - c. 2 E-communication sessions
 - d. 4 thematic poster sessions

Most Group 1.2 activities were planned in the beginning of the ERS 2009.

3. Conference planning ERS 2010 (Barcelona):
 - a. The process of the conference planning has been explained to the participants
 - b. Preliminary decisions were already made in the 2009 spring meeting in Zurich
 - c. Submissions from Group 1.2 were:
 - i. Obesity and the lung
 - ii. Rehabilitation as part of lung cancer management
 - iii. End-of-life care for patients with COPD
 - iv. Resistance training and COPD
 - d. Only 2 postgraduate course topics accepted from Assembly 1:
 - i. Endoscopic lung volume reduction
 - ii. Integrated care for chronic respiratory disease (submitted by Group 1.2 with the Primary Care Group)
 - e. Group 1.2 members are encouraged to submit ideas for
 - i. Symposia (deadline: anticipated 1st deadline March 31st 2010)
 - ii. Meet the professor (deadline: Zurich meeting April 2010)

4. Survey of pulmonary rehabilitation across Europe
 - a. To assess the meaning and capacity of pulmonary rehabilitation
 - b. Choice of outcome measures
 - c. Format of rehabilitation programme
 - d. Should this become an ERS Task Force?
 - e. Possible similar initiatives may have started → needs follow up
5. ERS School activity
 - a. 'Clinical exercise testing' will take place in Rome (Italy) from February 25 to 27, 2010
 - b. Pulmonary rehabilitation course – proposal ready to be submitted, proposed in 2010, proposed location: Belgium → colleagues from Romania asked to consider the possibility to organize the course in Eastern Europe (Romania)
6. ERS website: Rehabilitation & chronic care
 - a. Case based learning?
 - b. ERS-online live lectures?
 - c. Highlights from various congresses?
 - d. List of ERS courses?
 - e. Upcoming educational opportunities?
7. Closing remarks and contact details

The members of Group 1.2 are asked to be actively involved in developing the ERS website for 1.2. For all sorts of questions, ideas, comments and/or complaints you can always send us an e-mail:
 sally.singh@uhl-tr.nhs.uk
 martijnspruit@proteion.nl

Group 1.5: Diffuse parenchymal lung disease (Chair: Carlos Robalo Cordeiro, Secretary Venerino Poletti)

This business meeting was attended by 63 persons.

- The chairman Carlos Robalo Cordeiro emphasizes the role our group had in this Congress with numerous sessions dedicated to diffuse parenchymal lung diseases: Symposia, Oral presentations, Thematic poster sessions and electronic communication sessions. Also the PG course on drug induced diffuse lung diseases and the “Meet the Professor” on Sarcoidosis were very well attended. The abstracts presented in the Congress under the auspices of Group 1.5 were in significant number. However he claimed about a) the fact that the business meeting was scheduled after the Assembly meeting, b) the lack of information in the Congress final program, 3) the group did not have a specific colour (as promised) in the final program of the ERS Congress.
- The Task Forces on IPF and LAM are concluding their job and soon publications reporting their efforts will be available.
- Next meeting of the WASOG-BAL will be held in Maastricht in 2011 organized by Marjolein Drent.
- Ulrich Costabel accounted on the new WASOG website (www.wasog.org).
- Bob Baughman presented the journal Sarcoidosis Vasculitis Diffuse Lung Disease. The journal now is available free online. The drop of the impact factor of the journal was mainly due to the fact that the journal was not published for almost two years.
- Carlos Robalo Cordeiro informed that for the next ERS Congress in Barcelona one symposium organized jointly with Assembly 3 (IPF and lung cancer) was already accepted. From the other Symposia that were presented by members of the group for the 2nd round, he proposed that the proposal “The lung in Hematologic disorders” (by P. Camus) should be considered the more appealing (1st option) and this suggestion was approved by the colleagues attending the meeting. Another proposal (new concepts in science in IPF/NSIP) made jointly with Assembly 3 is also under consideration.
- Venerino Poletti suggested two themes for the “hot topics” in the next ERS Congress [LAM; Non specific interstitial pneumonitis (NSIP)] and one proposal for the lunch session “Rapid on site analysis of BAL fluid: a feasible and useful tool in ILD patients”.
- Athol Wells, Ulrich Costabel and Ganesh Raghu suggested also another title to be considered for the “hot topics” session: “Pro & Con in the classification of Idiopathic Interstitial Pneumonias”.
- Katerina Antoniou and Demosthenes Bouros made known their intention to organize a Research Seminar on IPF next year in Greece, before the Congress of the Hellenic Thoracic Society.
- Venerino Poletti and Marco Confalonieri put forward for consideration the organization of an ERS Course on Diffuse Lung Diseases next year in Trieste.

Group 1.6: General Practice and Primary Care (Chair: Monica Fletcher, Secretary: Niels Chavannes)

1. Welcome and introductions by Monica Fletcher, chair of the Group and Niels Chavannes, Secretary of the Group.
2. No apologies were received.

3. Actions from last meeting. Update on position of Group 1.6 within ERS.
4. Officer voting results. Niels Chavannes elected Chair and Bjorn Stallberg elected Secretary for the period 2009 - 2012.
5. Feedback from Symposia 2009 / Proposed Symposia 2010 and 2011. Very well attended sessions on COPD (late breaking abstract) and asthma (large symposium). Niels informed about the rehabilitation symposium for 2010 in Barcelona and requested suggestions for 2011. Ideas for 2011 are asked for with title, abstract outline plus 4 suggested presentations and speakers, preferably in cooperation with other groups.
6. Primary Care Day 2010: Barcelona? Niels informed about the ongoing discussions about arrangements of a primary care day in 2010 in Barcelona. There was still no decision by ERS. If there will be a primary care day in Barcelona the Spanish Primary Care Respiratory Group would have the main responsibility for the organization of the programme.
7. Numbers of abstracts submitted this year in Primary Care Information about the numbers of abstract received for the Vienna congress. The numbers were approximately the same as previous years. The continuous importance of submitting abstracts to 1.6 Primary Care was emphasized.
8. Recruitment of additional abstract reviewers and session Chairs Information about the need for additional reviewers and for Chairs for sessions.
9. Collaborations with other organisations Information about IPCRG (Niels), GARD (Niels) and ELF (Monica).
10. Any Other Business Monica Fletcher – Outgoing Chair was thanked by Niels Chavannes for her hard and successful work as a chair.

As Secretary and reporter of Assembly 1, I would also like to thank all members and officers for their support and participation to the activities of Assembly 1 over the past 3 years. I wish a good start to Enrico Clini and all other new officers, and look forward to fruitful cooperation with Assembly 1 in my next function as Assembly 11 Secretary (Thoracic Oncology).