

ELIQUIS[®]




WORLD HEART
FEDERATION[®]

ANNUAL REPORT

2014

World Heart Federation Strategic Priorities

- 
- Advocate to ensure that CVD is embedded in the global health and development agenda
 - In specific countries, ensure that effective NCD/CVD national plans are in place and operational
 - Accelerate WHO Global Action Plan on NCDs 2013-2020 and Global Monitoring Framework (Nine Targets) 2025 via roadmaps on priority targets (tobacco, secondary prevention; hypertension plus RHD and others as appropriate) and by geography (Brazil, India, African continent, etc)
 - Advocate and convene the global health community around reducing global burden of RHD
 - Amplify the reach of WHF through World Heart Day, World Congress and Emerging Leaders, aligning these platforms closely to the WHF strategy goal to reduce premature CVD Mortality by at least 25% by 2025

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Message from the President

Dear Members, Partners and Friends,

As you know at the start of 2013 I established a set of three presidential priorities, tied to the targets in the WHO Global Action Plan and monitoring framework: secondary prevention, hypertension and tobacco, to help achieve the overall goal of 25 percent reduction in premature mortality by 2025. I am pleased to report that in the second and final year of my term as President we have made excellent progress in moving these priorities forward as well as in ensuring that the organisation has an effective strategy and the right governance to take us through this next vital phase of our development.

With the approval of our new three year plan the World Heart Federation (WHF) is now in an excellent position to make a real difference, working with its members to influence policy and close gaps in implementation of WHO targets around 25x25. Our plan includes a focus on global CVD advocacy, working with national plans, accelerating action through CVD roadmaps and Emerging Leaders and a focus on rheumatic heart disease (RHD), and of course continuing to use World Heart Day and the World Congress of Cardiology and CV Health to extend our message and programmes across the globe. It is my pleasure to pass the volunteer leadership of WHF to Dr Salim Yusuf. I am confident he will continue this vital work in the coming years.

In 2014 we also held another successful WCC, this time in Melbourne, Australia where the theme was “25x25: at the Heart of Global Health.” More than 6,000 CV and public health leaders from over 120 countries gathered in Melbourne to participate in topics ranging from CAD in China to rheumatic heart disease to the role of global advocacy in accelerating heart health. As ever we hosted the General Assembly where our members came together to support changes to our strategy and governance and to elect new officers, including David Wood and Tony Duncan as President-Elect and Vice President-Elect for the current term, as well as Ronald Haddock as Secretary-Treasurer.

2014 saw the start of what will be one of the main pillars of our strategy for the next two years, namely the launch of CVD Roadmaps. These are tools to assemble the evidence for the WHO targets and broader elements of CV health and to identify and overcome the gaps between the goals and realities that countries are facing, including health systems, logistical, financial and other barriers. Autumn 2014 saw three writing groups start work on producing these initial “global” perspectives with a focus on secondary prevention, hypertension and tobacco; these will also be adapted to a country level for more tailored implementation.

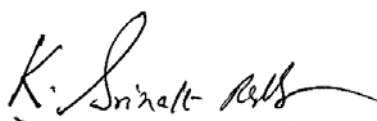
This year we took a fresh look at World Heart Day and used the theme of Heart Healthy Choices, sharing tips through our Members and Partners about what they can do to stay heart healthy whether it be at home, work or at play. We called on people to consider what heart healthy environments look like and to advocate their employers as well as their elected officials to ensure that proven policies including smokefree workplaces, safe and healthy environments for living and exercising were a right and a benefit that should be available to all. We also ran the successful concept of Ground Miles Challenge, in collaboration with Bupa, again in China, Spain and India to encourage people to walk for their health. This year’s focus was to change behaviour in over 10,000 people, helping them reap the benefits of heart health from incorporating regular exercise into their routine.

In the area of tobacco, we made great progress in developing our tobacco roadmap, delineating the central role tobacco plays in cardiovascular health. Rheumatic heart disease continues to be a key priority and our effort included continued advocacy within the sustainable development agenda.

We were proud to continue our sharing of science to an international audience through the journals Global Heart and Nature Reviews Cardiology.

Our work with World Health Organization and the United Nations continue to play a central part in all our efforts. In addition to working closely with WHO on the roadmaps, we submitted our new three year plan and will partner on its implementation in the coming months and years. We continued to represent the CVD community in the NCD Alliance including at the High Level Review in July as well as negotiations around the NCD sub-goal in the new Sustainable Development Goals. These are another means of ensuring that CVD receives the attention it requires in the development agenda, and impacts funding and prioritisation for the next decade and beyond.

Through a consultative process with our members and partners, we also developed a new strategy and recommendations for changes to governance to ensure that WHF is purpose built for a successful future. As I hand over the reins to Dr. Salim Yusuf, I am confident WHF is on course for a successful future while continuing to deliver exceptional projects across the globe.



Professor K. Srinath Reddy

President 2013 - 2014

World Congress of Cardiology 2014

WCC returned for the second time in it's 64 year history to Australia.

Taking place in Melbourne, a total of 6020 attendees from 120 countries around the globe participated in WCC 2014. The top five countries represented in terms of attendees were Australia, India, China, United States and Italy.

WCC is unique in being the only global meeting for CVD held outside of Europe and the United States, and highlighting places where the burden is growing and where innovative approaches are being developed. One of WCC 2014 achievements was to hold the first Global CVD Prevention Roadmap Summit on 4th May 2014. The outcome of the summit directly influenced the global CVD community role in implementing the WHO 25x25 targets. There were also sessions focussed on the implementation of the Political declaration from the United Nations High-Level Meeting on Non-Communicable Diseases that brought together experts from the wider health community, politicians, industry, patient group and policy makers so as we all ensure that cardiovascular health is high on the agenda of governments, donors and multilateral agencies.

A total of 1,425 abstracts were submitted of which 1,222 were accepted as poster presentation and 203 were accepted as oral communication that were inserted in the main scientific sessions. The 4th International Women's conference (jointly organised with AHA) took place on the pre-congress day and was a success. The scientific programme covered diverse topics such as prevention, diagnosis, and management of CVD including acute coronary syndromes, arrhythmias, hypertension, dyslipidaemias, heart failure, peripheral vascular disease, valvular heart disease, and congenital heart disease among others.

With 18 parallel session rooms hosting 212 main scientific sessions and 601 faculty, WCC Melbourne was a scientific, political and commercial success. 87 exhibition stands covering 2,515 square metres of net exhibition space and 18 industry satellite sessions bore testimony to the commercial interest in the region as well as the interest and investment in commercial heart and cardiology services.

WCC 2014 in numbers

- 18 parallel session rooms and 212 main scientific sessions
- 601 speakers
- 1,425 accepted abstracts: 1,222 posters and 203 oral presentations
- 18 industry satellites
- 87 exhibition stands covering 2,515 square meters
- 238 pieces of coverage on various media around the world, with a combined circulation of 800,000,000.
- Over 1,050 tweets were posted in 32 countries, reaching an estimated 2,692,000 people worldwide.



Mexico 2016

Half a century after it was first held in Mexico, the World Congress of Cardiology - now the World Congress of Cardiology & Cardiovascular Health is returning to Mexico City from 4-7 June 2016. Preparations are progressing well for the WCC 2016. It will be co-hosted by the Mexican Society of Cardiology, InterAmerican Society of Cardiology, InterAmerican Heart Foundation, and ANCAM (National Association of Cardiologists of Mexico). Our programme builds on the five focus areas of our strategy – global CVD advocacy; national action in priority countries; capacity building including CVD roadmaps, emerging leaders and primary care, RHD; and global reach through World Heart Day and the Congress.

There will be an invitation only one day summit immediately prior to the start of the Congress, to focus on CVD roadmaps and how countries are moving toward the “25x25” target of reducing premature CVD mortality by 25 percent by the year 2025.

www.world-heart-federation.org/congress-and-events/world-congress-of-cardiology-cardiovascular-health-2016

For all historical and latest information on the World Congress, please visit www.worldcardiocongress.org

WHF Journals

Global Heart

Global Heart is the official journal of the World Heart Federation and provides a forum for dialogue and education on matters relating to the prevention and control of cardiovascular disease worldwide, with a particular focus on low and middle-income countries. There are four published issues per year.

The journal was started in 2011, and in 2014 Global Heart was first indexed in PubMed. The Editor-in-Chief is Dr Jagat Narula, and he is assisted by an international team of eminent cardiologists, researchers, epidemiologists, economists and other leaders in public health who comprise the deputy editors, associate editors, section editors, senior advisory council, and editorial board. In 2014 Dr Pablo Perel became assistant editor.



www.globalheart-journal.com

Nature Reviews: Cardiology

Nature Reviews Cardiology is an official publication of the World Heart Federation. The impact factor is 10.154 compared to 8.833 in 2012. The publication ranks 5th of 125 journals in the Cardiac & Cardiovascular Systems category.



www.nature.com/nrcardio

“Working in partnership to disseminate scientific knowledge to researchers across the world, regardless of income level.”

World Heart Day

This year, on World Heart Day, we put a spotlight on creating heart-healthy environments, inviting members and supporters around the world to join the global movement for better heart-healthy choices, wherever people live, work or play.

At least 80% of premature deaths from heart disease and stroke could be avoided by controlling risk factors. Yet too often society 'blames' the individual: you smoke, you eat and drink too much, you don't exercise.

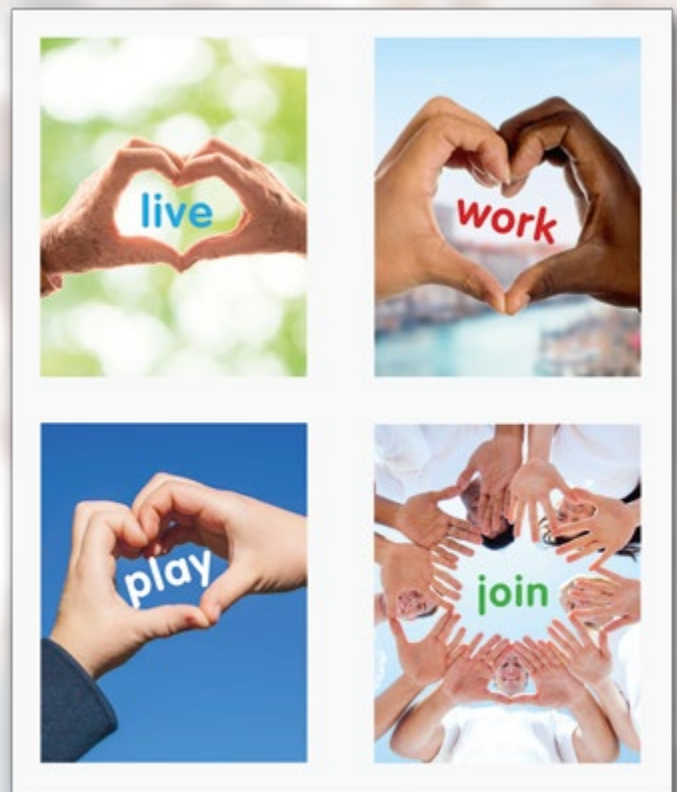
But the environments we occupy - where we live, work and play - can either encourage or discourage the choices to make to be more heart healthy. For example, lack of access to green spaces, unhealthy school meals, overwhelming displays of tobacco, alcohol and fast food, exposure to second-hand smoke.

More people than ever responded creatively to our 2014 theme of heart-healthy environments: we saw a 35% increase in participating organisations between 2013 and 2014 compared to 12% between 2012 and 2013.

We also made a significant impact online through our petition calling on national and international leaders to ensure 'heart-healthy environments'. This was boosted by a Thunderclap project which spread the message to 554,042 social media profiles, and our 'Heart Choices Not Hard Choices' video which gained 148,014 views on Youtube by the end of the September.

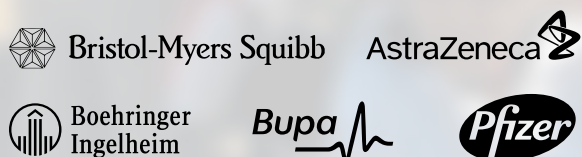
But perhaps the most effective online activities were the lively and sustained World Heart Day social media platforms: through 107 World Heart Day posts we engaged with 308,403 online supporters in September via Facebook; and our Twitter feed was flooded with up to 400 tweets per day.

This combination of worldwide activities on the ground and a concerted online campaign allowed World Heart Day 2014 to reach more people than ever before.



10.8 million

The total number (approx) of individuals taking part in World Heart Day events and activities, compared to 1 million in 2013.



Go Red for Women

Go Red for Women – raising awareness about CVD in women and girls.

Cardiovascular disease doesn't discriminate: women are just as likely as men to be affected and die from CVD, but they tend to be under-diagnosed and under-treated. The international Go Red for Women campaign aims to reduce cardiovascular disease in women by building global awareness and give women the tools to take charge of their heart-health.

Created by the American Heart Association, the campaign has been developed globally by the World Heart Federation and its members around the world. Over 50 organisations are running the campaign, bringing this important issue to the attention of women, journalists, politicians and health professionals.



“Thus far, Go Red for Women has proven a successful tool to raise awareness of CVD in women, the first step in reducing CVD mortality.”

Hearts of Children

WHF and Frédérique Constant partnership to develop the Hearts of Children initiative continued in 2014.

The Hearts of Children initiative strives to protect the hearts of women and children from cardiovascular disease by raising awareness and providing mothers and children with the knowledge, tools and environment to live heart healthily. WHF members had the opportunity to receive one of the 100 “World Heart Federation” limited edition watches donated by Frédérique Constant and use them to help support their events and activities related to women and children, such as Go Red for Women or Rheumatic Heart Disease projects.

This year we were pleased to receive applications from over 20 Members and continue to reach out to maximise participation.



“Working throughout the life-course to promote healthy behaviours and prevent heart disease and stroke.”

CVD on the Global Health Agenda

The aim of the World Heart Federation's advocacy work is to raise the profile of CVD on the global health agenda, ensuring that it delivers for the prevention and control of all CVD issues worldwide.



In 2014, the WHF focused its advocacy efforts on three priority areas: raised blood pressure, secondary prevention, and tobacco control. Working with partners from around the globe, including the World Health Organization which has granted us Official Relations Status, we have:

- **Influenced policy through consultations**
- **Maintained a strong presence at key global health events**
- **Strengthened relationships with governments and healthcare stakeholders; and**
- **Launched targeted communications initiatives.**

Showcasing CVD at the 67th World Health Assembly

The annual World Health Assembly (WHA), held every May at the United Nations Office of Geneva, was leveraged in 2014 as a platform to emphasise the critical state of cardiovascular health worldwide.

As well as tracking and intervening in the main WHA agenda, we organised a special side meeting in partnership with the Permanent Missions and Governments of Malaysia and New Zealand. The event, titled 'Addressing the NCD Challenge in the Post-2015 Development Agenda: the Life-Course Approach', was held inside the Palais des Nations and attracted top speakers from around the world, ranging from Ministers of Health, delegates of the WHO secretariat, and World Heart Federation Members.

CVD issues gained much exposure at the WHA due to this meeting, which stood us in good stead to advocate for CVD as a priority item in the forthcoming global development agenda.

Influencing the United Nations High Level Meeting on NCDs

In July 2014, the World Heart Federation was invited to attend the High Level Meeting of the UN General Assembly to undertake a comprehensive review and assessment of the 2011 Political Declaration on NCDs ('HLM NCDs').

WHF had a longstanding role in this process, having played a significant role in advocating for CVD to be central to the original, pivotal HLM NCDs in 2011. In preparation for the July 2014 meeting, the World Heart Federation proposed recommendations and improvements to the 2014 outcome document and offered 'next steps' for further action on NCDs. During the meeting itself, the World Heart Federation joined with the NCD community in urging national representatives and international bodies to speed up the implementation of commitments made in the 2011 Political Declaration.

The outcome of this UN Review mandated that governments would be obliged to report back progress made on NCDs through two major platforms: the UN Secretary General Progress Report (2017) and the UN High Level Review (2018).

Up to and beyond these major reviews, the World Heart Federation will continue to hold governments accountable to their commitments on NCDs, and will work with Members to provide tools to monitor and evaluate progress in their countries.

Shaping the Post-2015 Development Agenda

The primary aim of the advocacy team in 2014 was to ensure that the global development agenda was set to acknowledge and take action on the pressing issue of CVD.

While the Millennium Development Goals (2000-2015) led to concerted action on some of the key health and development challenges, cardiovascular disease was overlooked by their agenda. Resources and attention were diverted away from NCDs, which were further neglected by the increasingly soloed approach to healthcare delivery encouraged by the Millennium Development framework. As this agenda comes to an end in 2015, the successor goals provide an opportunity to rethink how the global development community can meet the health needs of the world.

Working alongside the NCD Alliance, the World Heart Federation advocated throughout 2014 for an overarching health goal for the Post-2015 period that would be:

- **Universally applicable**
- **Relevant to CVD and NCDs**
- **Able to measure healthy life expectancy across the lifecourse**
- **Focused on health and wellbeing, rather than disease-driven**
- **Able to encompass mortality, morbidity and disability.**

This message was stressed to global development stakeholders and influencers by the WHF delegation to the UN General Assembly in September 2014, where the advocacy team continued to chart and influence the process of Post-2015 goals development.

Alongside an overarching health goal, WHF has communicated the impact of CVD and its importance to the Post-2015 development agenda to a global readership. Towards the end of 2014, the advocacy team highlighted the importance of Universal Health Coverage and health systems strengthening in a WHF CVD Taskforce paper – published in *Global Heart* and the Journals of ACC, AHA and ESC – which encourages the entire CVD community to unite in its efforts to impact the Post-2015 agenda at this crucial juncture in global development.

Tobacco Control

Continuing to build cardiologists' engagement in tobacco control, the World Heart Federation completed the implementation project *Change from Within: Increasing cardiologists' engagement in tobacco control.*



Implemented by member organisations in China and Lebanon, the project developed a curriculum on tobacco cessation that was tailored for training cardiologists, and trained a total of 44 cardiologists to conduct cessation training within cardiology congresses in the Middle East and China. The project, which involved a total of 15 cardiology societies in WHF membership, trained over 2,300 cardiologists in the basics of brief advice, the principles of cessation counselling, and the cardiovascular impact of smoking and secondhand smoke, conducting a workshop for project implementing partners at the World Congress of Cardiology 2014 in Melbourne and two webinars (one for Middle Eastern members and another for Asian members) to share the curriculum and results of training. Successfully enlarging the network of cardiologists engaged in support of tobacco cessation and control.

To engage youth in the control of tobacco and other NCD factors, the World Heart Federation collaborated with the WHO NCD prevention unit and the International Federation of Medical Students to organise a full-day workshop titled 'Youth Take Action on NCDs: a focus on tobacco.' Top tobacco control leaders from governments and civil society including Nicola Roxon (former Australian Health Minister) and Tariana Turia (former leader of the Maori Party in New Zealand) discussed critical issues in tobacco control; youth leaders in tobacco control from New Zealand, Australia, India and Indonesia described their activities combatting the tobacco epidemic.

The World Congress of Cardiology 2014 involved a number of global leaders and networks in tobacco control.

In October 2014, the World Heart Federation travelled to Russia to represent the global CVD network at the 6th Conference of the Parties (COP) of the Framework Convention on Tobacco Control (FCTC). As an official observer of the COP, the WHF delivered an intervention on electronic nicotine delivery systems and accredited a delegation of tobacco control advocates and member organisations. It engaged its membership network to support several national, regional and global campaigns.

“Engaging cardiologists in tobacco cessation”

Rheumatic Heart Disease

The World Congress of Cardiology 2014 in Melbourne, Australia fed the growing global movement to end neglect of RHD. With at least 8 sessions and some 40 abstracts on RHD, the event gathered clinicians, researchers and health advocates specialising this neglected disease.



RHD Australia, working with RhEACH and World Heart Federation, organised the 3rd RHD forum, an evening event that brought leading health officials from New Zealand, Fiji, and Australia together with leaders from the private sector and 160 people from 33 countries. Kenya McAdam, a young indigenous Australian woman who is affected by RHD spoke alongside health leaders and experts. Participants broke into small groups to discuss how to achieve the strategy laid out in the WHF Position Statement on Prevention and Control of RHD published the previous year. At the Congress, leaders in RHD control from the region developed plans for writing a White Paper on RHD in the Pacific.

At the Congress the World Heart Federation launched the RHD TIPS resource, a manual collecting evidence and experience on developing and running RHD programmes. Following the launch, the resource was piloted as a framework for discussing needs in RHD prevention and control with stakeholders including the Ministry of Health, World Health Organization, WHF member societies and other civil society groups in Ethiopia, Egypt and Sudan, and was later presented to stakeholders in meetings in Cambodia, India and Nepal.

In collaboration with its regional members, Pan-African Society of Cardiology and African Heart Network, the WHF awarded small grants for advocacy on RHD to members and/or partners working in South Africa, Sudan, Namibia, Uganda and Mozambique. It also provided support to the Nepal Heart Foundation/Ministry of Health RHD programme for advocacy, awareness-raising and health worker training, and supported further development of the Take Heart film project on RHD.

Physical Activity

WHF five-year partnership with the Union of European Football Associations (UEFA) is promoting heart-healthy behaviours in children and adults.



2014 saw the development of two projects to foster healthy habits in childhood and minimise risk factors leading to heart disease, through the promotion of healthy food, physical activity, sports and football.

The Eat for Goals app, launched in May, offers children the opportunity to cook the same heart-healthy recipes as their favourite football players, leveraging their role model status and showing that cooking healthy food can be simple and delicious. Based on the Eat for Goals cookbook published in 2008, the app is a fun and educational tool, which includes an interactive game, recipes, as well as interesting food facts and tips.

Preparatory work for the Children in the City Campaign has been conducted with our members in two pilot countries, Spain and Romania. Designed to improve access and awareness of physical activity in young people aged 7 to 12 living in selected low-income urban neighborhoods, the project consists of identifying the barriers to physical activity, designing practical interventions and implementing them in communities. A baseline survey has been prepared and run in schools across Romania and in Madrid, and the results will serve to plan cost-effective campaigns and interventions in 2015. The programme is aimed at creating heart-healthy habits which can last for life, while allowing children to have fun playing sports, including football.

As part of the partnership with UEFA, WHF developed its collaboration with the European Healthy Stadia network, supporting their action to develop health promoting policies and practices at Stadia through the development resources, research and on-the ground activities, including the development of World Heart Day with Football Associations.

Learn more:

Eat for goal app: www.worldheart.org/eatforgoals

Children in the City: www.world-heart-federation.org/what-we-do/awareness/children-youth/children-in-the-city

Healthy Stadia: www.healthystadia.eu

25x25: CVD Roadmaps



In 2014 we started an initiative which is key to our strategy and addresses the World Health Organization targets designed to reduce premature mortality from non communicable diseases by 25% by 2025. We started this work as part of the Champion Advocates Programme which was supported by an unrestricted educational grant in 2013/4. Our 25x25 focus gives both our Members and Partners a chance to engage at a local level to help address the gaps in policy which affect the cardiovascular element of the WHO targets. As part of the focus on 25x25 we are beginning to compile roadmaps as a way to articulate the targets which, if addressed successfully, have the greatest chance of achieving the 2025 targets. Our initial focus is on secondary prevention, tobacco control and managing blood pressure, and the objective of the roadmaps is to help countries identify and then tackle the challenges they face in addressing these issues.

Over the next few years we shall be working with Members to implement the roadmaps, starting in 2015 with Brazil and India, to be followed by other priority countries. Another crucial part of the 25x25 focus is the engagement of Emerging Leaders, who not only come together to develop their own capacity to work towards minimising the effects of cardiovascular disease in their own countries but also work with us and our members at a local level to help build and implement the roadmaps.



“Working in partnership to reduce the global burden of heart disease and stroke.”

Patient Advocacy

Patients are an important part of any strategy to improve the health of the population. Not only do they have first hand experience of the effects of, in this case cardiovascular disease, they are also living with the systems which are in place to help manage their condition and are in an excellent position to spot opportunities in the care pathway which could improve diagnosis and outcomes.

In May we brought together a group who worked with or represented patients living with Atrial Fibrillation to look at how better diagnosis and treatment could be achieved. This kind of discussion also sheds light on the social and economic aspects of living with a chronic disease, which are often forgotten and the impact of which are under played.

Patients are an important aspect of the work we do and recognising them as a key stakeholder is essential to have effective and lasting change - their advocacy efforts is also one which as with other disease groups has proven incredibly powerful.



Bristol-Myers Squibb



Partnerships

The World Heart Federation appreciates the support of its Partners in their commitment to supporting the reduction of premature mortality from cardiovascular disease by 25% 2025. Together with its membership, Partners play a crucial role in the success of our mission and activities globally.

2014 saw some significant partnerships, notably:



AstraZeneca
Champion Advocates Programme
(Secondary prevention)



Bayer
25x25



Boehringer Ingelheim
Emerging Leaders



Bristol-Myers Squibb
25x25 & Patient Advocacy



Bupa
Groundmiles & 25x25



Medtronic
Rheumatic Heart Disease



Novartis
25x25



Pfizer
25x25



Unilever
25x25

Financial Statements

Statement of Assets, Liabilities and Reserve Funds

For the year ended 31 December

Expressed in Swiss francs

Assets	2014	2013
Cash and cash equivalents	1,030,132	2,644,787
Accounts receivable	59,388	436,196
Prepaid expenses	127,083	46,478
Accounts receivable members and donors	1,308,267	686,775
<i>Total current assets</i>	2,524,870	3,875,767
Investments	-	-
Escrowed deposits	36,025	97,605
Net fixed assets	14,423	-
<i>Total non current assets</i>	50,448	97,605
Total assets	2,575,318	3,911,843

Liabilities and Funds

Cash and cash equivalents	-	10,480
Accounts payable and accruals	159,406	441,016
Deferred income for 2015 and 2016	311,627	-
WCC 2012 deferred excess	-	1,555,794
Loan	-	133,575
<i>Total liabilities</i>	471,033	2,140,865
<i>Total funds</i>	2,104,285	1,770,978
Total liabilities and funds	2,575,318	3,911,843

Statement of Receipts and Operating Expenditure

For the year ended 31 December

Expressed in Swiss francs

Operating Receipts

	2014	2013
Membership fees	450,779	461,151
World Congress of Cardiology	1,017,252	-
Corporates	1,767,973	2,813,856
Foundations	253,797	344,478
Organisations	407,623	823,310
Other donors	7,675	15,372
Bank interest and money market fund income	-	196
<i>Total operating receipts</i>	<u>3,905,099</u>	<u>4,458,363</u>

Operating Expenditure

Leadership and Management	713,726	528,179
Partnership and Membership Development	376,458	203,724
Activities	238,308	226,392
Projects	2,299,972	2,811,183
<i>Total operating expenditure</i>	<u>3,628,464</u>	<u>3,769,477</u>

Gains and Losses on Investments

Net (loss) / gain on investments	<u>56,672</u>	<u>(57,749)</u>
<i>(Shortage) of operating receipts over expenditure</i>	(333,307)	(631,137)

Organisation

World Heart Federation Board 2013-14

President

Srinath REDDY, MD, DM, MSc

Vice-President

Deborah CHEN

President Elect

Salim YUSUF, DPhil, FRCPC, FRSC

Vice-President Elect

Kingsley K. AKINROYE, MD

Past President

Sidney C SMITH Jr., MD

Past Vice-President

Hans STAM, PhD

Chair, Scientific Policy and Advocacy Committee

Ann BOLGER, MD

Secretary

Nooshin BAZARGANI, MD

Treasurer

Pierre PONCET

Chief Executive Officer

Johanna RALSTON

Continental Representatives:

Asia-Pacific

Asian Pacific Society of Cardiology

Kui-Hian SIM, MD

Asia Pacific Heart Network

Tony DUNCAN

Europe

European Society of Cardiology

Roberto FERRARI, MD, PhD

European Heart Network

Dan GAITA, MD, FESC

Africa

African Heart Network

Habib GAMRA, MD

Inter-America

Interamerican Society of Cardiology

Daniel J. PINEIRO, MD

InterAmerican Heart Foundation

Eduardo MORALES BRICENO, MD

At-large Member

Dayi Hu, MD, FACC, FESC
Chief, Heart Center

Continental Members 2013-14

- African Heart Network
- Asia Pacific Heart Network
- Asia Pacific Society of Cardiology
- European Heart Network
- European Society of Cardiology
- InterAmerican Heart Foundation
- InterAmerican Society of Cardiology
- Pan-African Society of Cardiology



WHF Members

National Members 2014

- A**
All India Heart Foundation
American College of Cardiology
American Heart Association
Argentine Heart Foundation
Argentine Society of Cardiology
Association of Cardiologists of Bosnia and Herzegovina
Association of Cardiologists of Kazakhstan
Association of Doctors of Internal Medicine of Kyrgyz Republic
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- B**
Bangladesh Cardiac Society
Belgian Heart League
Belgian Society of Cardiology
Bolivian Society of Cardiology
Brazilian Heart Foundation (Funcor)
Brazilian Society of Cardiology
British Cardiovascular Society
British Heart Foundation
Bulgarian Society of Cardiology
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- C**
Cameroon Cardiac Society
Cameroon Heart Foundation
Canadian Cardiovascular Society
Cardiac Society of Australia & New Zealand
Cardiac Society of Myanmar Medical Association
Cardiac Society of Nepal
Cardiological Society of India
Chilean Heart Foundation
Chilean Society of Cardiology & Cardiovascular Surgery
Chinese Society of Cardiology
Colombian Heart Foundation
Colombian Society of Cardiology and Cardiovascular Surgery
Croatian Cardiac Society
Cuban Society of Cardiology
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- Cyprus Heart Foundation
Cyprus Society of Cardiology
Czech Society of Cardiology
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- D**
Danish Heart Foundation
Danish Society of Cardiology
Dominican Heart Foundation
Dominican Society of Cardiology
Dutch Heart Foundation
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- E**
Ecuadorian Foundation of Cardiology
Ecuadorian Society of Cardiology
Egyptian Society of Cardiology
Emirates Cardiac Society
-
- F**
Finnish Cardiac Society
Finnish Heart Association
Foundation of Health and Heart (Bosnia and Herzegovina)
-
- G**
Georgian Association of Cardiology
Georgian Heart Foundation
German Cardiac Society
German Heart Foundation
Ghana Heart Foundation
Ghana Society of Hypertension and Cardiology
Guatemala Association of Cardiology
-
- H**
Heart and Stroke Foundation of Barbados Inc.
Heart and Stroke Foundation of Canada
Heart and Stroke Foundation of South Africa
Heart Association of Mozambique
-
- Heart Association of Thailand
Heart Foundation of Jamaica
The Heart Foundation of Malaysia
Heart Foundation of the Philippines
Heart Foundation of Thailand
Hellenic Cardiological Society
Hellenic Heart Foundation
Honduras Society of Cardiology
Hong Kong College of Cardiology
Hong Kong Heart Foundation
Hungarian National Heart Foundation
Hungarian Society of Cardiology
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- I**
Icelandic Heart Association
Indonesian Heart Association
Indonesian Heart Foundation
Iranian Heart Association
Iranian Heart Foundation
Iraqi Cardio-Thoracic Society
Irish Cardiac Society
Irish Heart Foundation
Israel Heart Society
Italian Heart Foundation
Ivorian Heart Foundation
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- K**
Kenya Cardiac Society
Kenyan-Heart National Foundation
Korean Society of Cardiology
Kuwait Heart Foundation
-
- L**
Latvian Society of Cardiology
Lebanese Society of Cardiology and Cardiac Surgery
Libyan Society of Cardiology
Lithuanian Heart Association
Lithuanian Society of Cardiology
Luxembourg Society of Cardiology
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- M**
Macau Association of Cardiology
Macedonian Society of Cardiology
Malta Heart Foundation
Mexican Society of Cardiology
Mongolian Heart Association
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- N**
National Heart Association of Malaysia
National Heart Foundation of Australia
National Heart Foundation of Bangladesh
National Heart Foundation of New Zealand
National Heart Foundation of Papua New Guinea
Nepal Heart Foundation
Nicaraguan Society of Cardiology
Nigerian Cardiac Society
Nigerian Heart Foundation
Norwegian Council on CVD
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- P**
Pakistan Cardiac Society
Pakistan Heart Foundation
Paraguayan Heart Foundation
Paraguayan Society of Cardiology
Peruvian Society of Cardiology
Philippine Heart Association
Polish Cardiac Society
Portuguese Heart Foundation
Portuguese Society of Cardiology
Puerto Rican Society of Cardiology
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- R**
Romanian Heart Foundation
Romanian Society of Cardiology
Rwanda Heart Foundation

WHF Members

National Members

S

San Marino Society of Cardiology
Saudi Heart Association
Senegalese Society of Cardiology
Serbian Heart Foundation
Singapore Cardiac Society
Singapore Heart Foundation
Slovak League Heart to Heart
Slovak Society of Cardiology
Slovenian Heart Foundation
Slovenian Society of Cardiology
Society of Cardiology of El Salvador
Society of Cardiology of Russian Federation
Society of Cardiology of Serbia
South African Heart Association
Spanish Heart Foundation
Spanish Society of Cardiology
Sri Lanka Heart Association
Sudan Heart Institute
Swedish Heart Lung Foundation
Swiss Heart Foundation
Swiss Society of Cardiology
Syrian Cardiovascular Association

T

Taiwan Heart Foundation
Taiwan Society of Cardiology
Tunisia Heart Foundation
Turkish Heart Foundation
Turkish Society of Cardiology

U

Uganda Heart Research Foundation
Uruguayan Society of Cardiology

V

Venezuelan Heart Foundation
Venezuelan Society of Cardiology

Z

Zambia Heart and Stroke Foundation

Associate International Members

Arrhythmia Alliance
Children's HeartLink
Fundacion Araucaria Foundation
Healthy Caribbean Coalition
Heart Foundation (Mauritius)
Heart Friends Around the World
Heartbeat International
Hearts for All (Coeurs pour Tous)
Help for the Development of Health (Aide au Developpement de la Santé)
International Academy of Cardiovascular Sciences
International Council of Cardiovascular Prevention and Rehabilitation (ICCPR)
International Council of Nurses
International Forum for Hypertension Control and Cardiovascular Diseases Prevention in Africa
International Self-Monitoring Association of Oral Anticoagulated Patients (ISMAAP)
International Society for Holter & Non-Invasive Electrocardiology
International Society of Adult Congenital Heart Disease (ISACHD)
International Society of Cardiomyopathy and Heart Failure
International Society of Cardiovascular Disease Epidemiology and Prevention
International Society of Cardiovascular Pharmacotherapy
International Society of Cardiovascular Ultrasound
Lown Institute
Myocarditis Foundation
Preventive Cardiovascular Nurses Association (PCNA)
Society of Cardiovascular Patient Care
World Heart Failure Society
World Stroke Organization

Associate Individual Members

Dr Azzizullah Amir (Afghanistan)
Pascal Bovet MD (Seychelles)

WHF Staff

Associate National Members

Academy of Cardiology at Mumbai

Argentine Federation of Cardiology

Asian Heart Institute and Research Centre

Billion Hearts Beating Foundation

Cardiovascular Society of India

Croi-West of Ireland Cardiac Foundation

Eminence Associates for Social Development (EASD)

Foundation for Lay Education on Heart Diseases

Foundation for the Advancement of Cardiology (Cardioprogress)

Health Related Information Dissemination Amongst Youth (HRIDAY)

Heart and Health Foundation of Turkey

Heart Care Foundation Comilla

Heart Care Foundation of India

Heart Foundation of Thailand under the Royal Patronage

Heart Research UK

Indian Association of Clinical Cardiologists

Indonesian Cardiocerebrovascular Society

National Forum for Heart Disease and Stroke Prevention

Norwegian Heart and Lung Patient Organization

Public Health Foundation of India

Sarawak Heart Foundation

Saving a Child's Heart Initiative

Alma Adler, PhD

Science Officer

Jennifer Diaz

Congress Manager

Alice Grainger-Gasser

Programme Development Manager

Lucy Keightley

Communications and Project Advisor (Consultant)

Léna Lagier-Hässig

Campaigns and Communications Manager

Heidi Lake

Congress and Operations Coordinator

Joanna Markbreiter

Project and Advocacy Officer

Jeremiah Mwangi

Global Policy Advisor

Pablo Perel, MD

Senior Science Advisor

Johanna Ralston

Chief Executive Officer

Sarah Ramsey

Chief Operating Officer

Rachel Shaw

Project Manager (Consultant)



**WORLD HEART
FEDERATION®**

World Heart Federation

32, rue de Malatrex
1201 Geneva
Switzerland

Tel: (+41 22) 807 03 20

Fax: (+41 22) 807 03 39

info@worldheart.org