



**ACNAP**

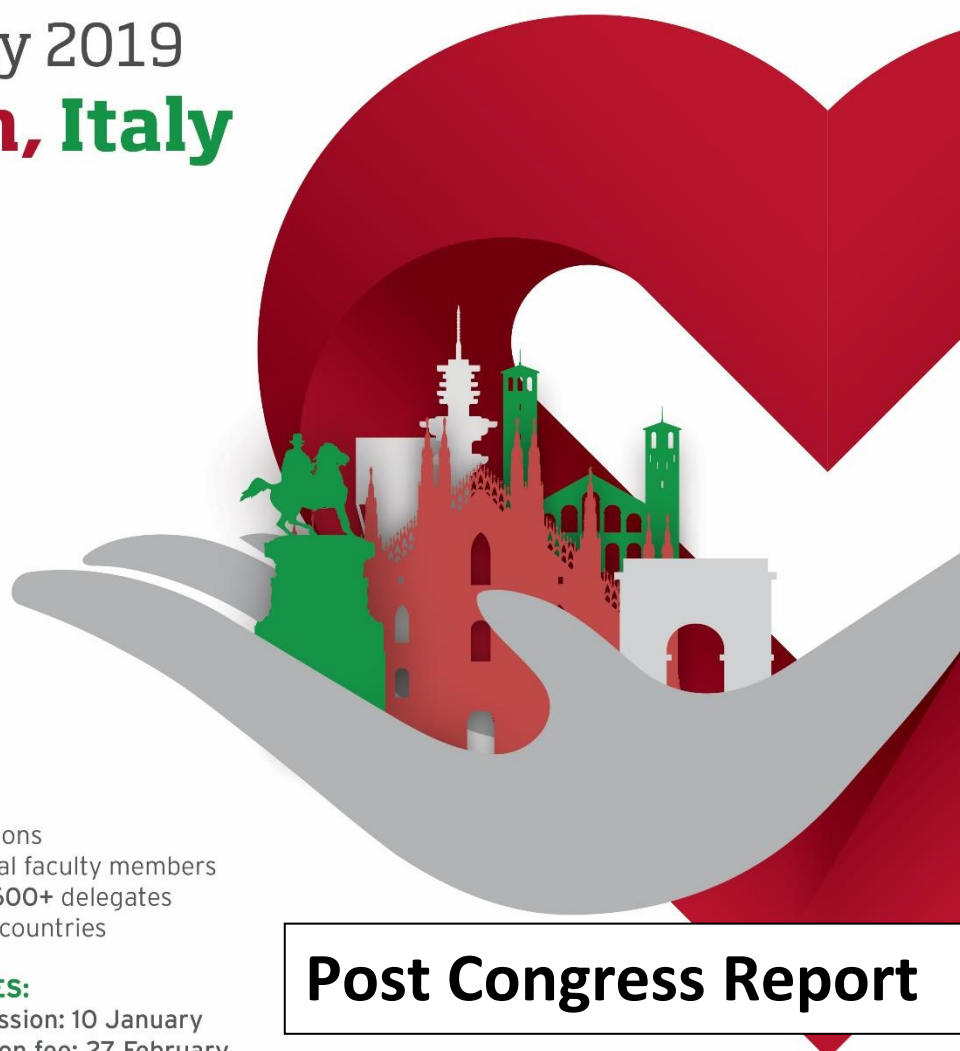
Association of Cardiovascular  
Nursing & Allied Professions

# EuroHeartCare

Annual Congress of the Association of  
Cardiovascular Nursing and Allied Professions

2-4 May 2019

**Milan, Italy**



**KEY FIGURES:**

3 Days, 20 Sessions  
80+ international faculty members  
200 abstracts, 600+ delegates  
HCPs from 40+ countries

**KEY DEADLINES:**

Abstract Submission: 10 January  
Early Registration fee: 27 February  
Late Registration fee: 2 April

**Post Congress Report**

[www.escardio.org/EuroHeartCare](http://www.escardio.org/EuroHeartCare)  
[#euroheartcare](https://twitter.com/euroheartcare)



**ESC**

European Society  
of Cardiology

## Contents

<b>1. General Information</b>	<b>3</b>
<b>2. Scientific Programme</b>	<b>10</b>
<b>3. Registration &amp; Attendance</b>	<b>24</b>
<b>4. Grants</b>	<b>28</b>
<b>5. Industry</b>	<b>30</b>
<b>6. Publications</b>	<b>31</b>
<b>7. Electronic Communications</b>	<b>32</b>
<b>8. Press</b>	<b>52</b>
<b>9. Survey</b>	<b>65</b>

# 1. General Information

EuroHeartCare 2019 was held in Milan, Italy from 2 to 4 May in the MICO Congress Centre.

## 1.1 Quick facts & figures

### Facts and Figures

45 countries represented

#### 495 participants

- 486 Delegates
- 9 Exhibitors

80 Faculty members for 122 roles in the programme

#### 24 Scientific Programme sessions

- 12 Symposia
- 3 Workshops
- 3 Special Events
- 3 Special sessions
- 2 How-to sessions
- 1 Clinical case

3 interactive stage sessions (Non educative sessions, held on the ACNAP interactive stage)

#### 10 Abstract based sessions

- 4 oral abstract sessions
- 1 Clinical case session
- 3 moderated poster sessions
- 2 poster sessions

➤ 313 Abstracts Submitted + 38 Clinical cases TOTAL = 313

➤ 255 Abstracts Accepted + 29 Clinical cases TOTAL = 284 – Acceptance rate total=87%

3 Lecture rooms

1 Workshop room

### **Industry sponsored sessions – Educational grants**

4 sessions supported by educational grants

3 stands at EuroHeartCare 2019 (24m<sup>2</sup> occupied):

- One 12m<sup>2</sup> custom stand
- Three 4m<sup>2</sup> Exhibition Welcome Packages

### **Accreditation**

The congress was accredited through the International Council of Nurses and 30 delegates applied for this accreditation post congress.

## **1.2 General Information**

### **Introduction**

ACNAP is the ESC Association on Cardiovascular Nursing and Allied Professions. ACNAP was officially launched in Munich on August 2018 during ESC Congress. Before being an Association, it was a Council which was developed from the Working Group on Cardiovascular Nursing (established in 1991).

The Annual Spring Meeting on Cardiovascular Nursing became **EuroHeartCare** in 2013.

The aim is to represent a multidisciplinary audience gathering together cardiovascular nurses and Allied Professionals.

### **History**

#### **11th Annual Spring Meeting on Cardiovascular Nursing**

1 – 2 April 2011 (in collaboration with the Belgian Working Group for Cardiovascular Nursing)

Brussels, Belgium

#### **12th Annual Spring Meeting on Cardiovascular Nursing**

16 – 17 March 2012 (in collaboration with the Working Group for Cardiovascular Nurses and Allied Professions)

Copenhagen, Denmark

#### **EuroHeartCare 2013**

22 - 23 March 2013 (in collaboration with the British Association for Nursing in Cardiovascular Care)

Glasgow, Scotland

#### **EuroHeartCare 2014**

04 – 05 April 2014 (in collaboration with The Norwegian Society of Cardiovascular Nurses) Stavanger, Norway

#### **EuroHeartCare 2015**

14 – 15 June 2015 (in collaboration with Croatian Association of Cardiology Nurses) Dubrovnik, Croatia

#### **EuroHeartCare 2016**

15 – 16 April 2016 (in collaboration with the Hellenic Society of Cardiovascular Nursing) Athens, Greece

## EuroHeartCare 2017

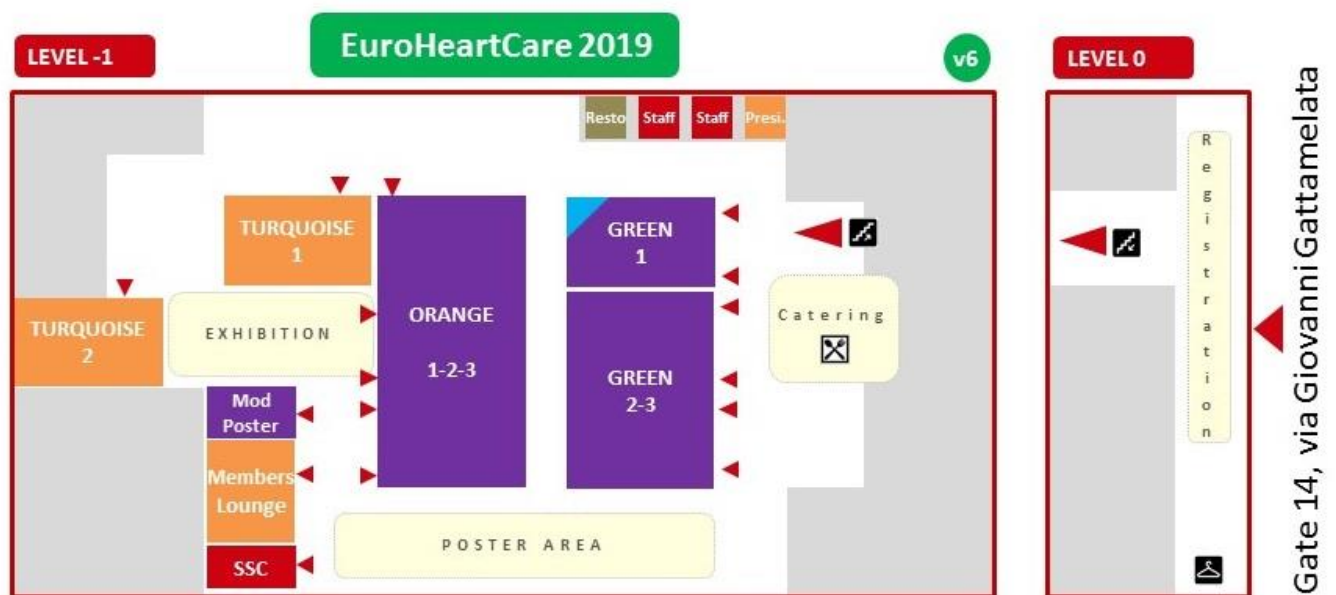
18 - 20 May 2017 (held in collaboration with the Swedish Association on Cardiovascular Nursing and Allied Professions) in Jonkoping, Sweden

## EuroHeartCare 2018

07 – 09 June 2018 was held in Dublin, Ireland in Trinity College

### 1.3 Venue

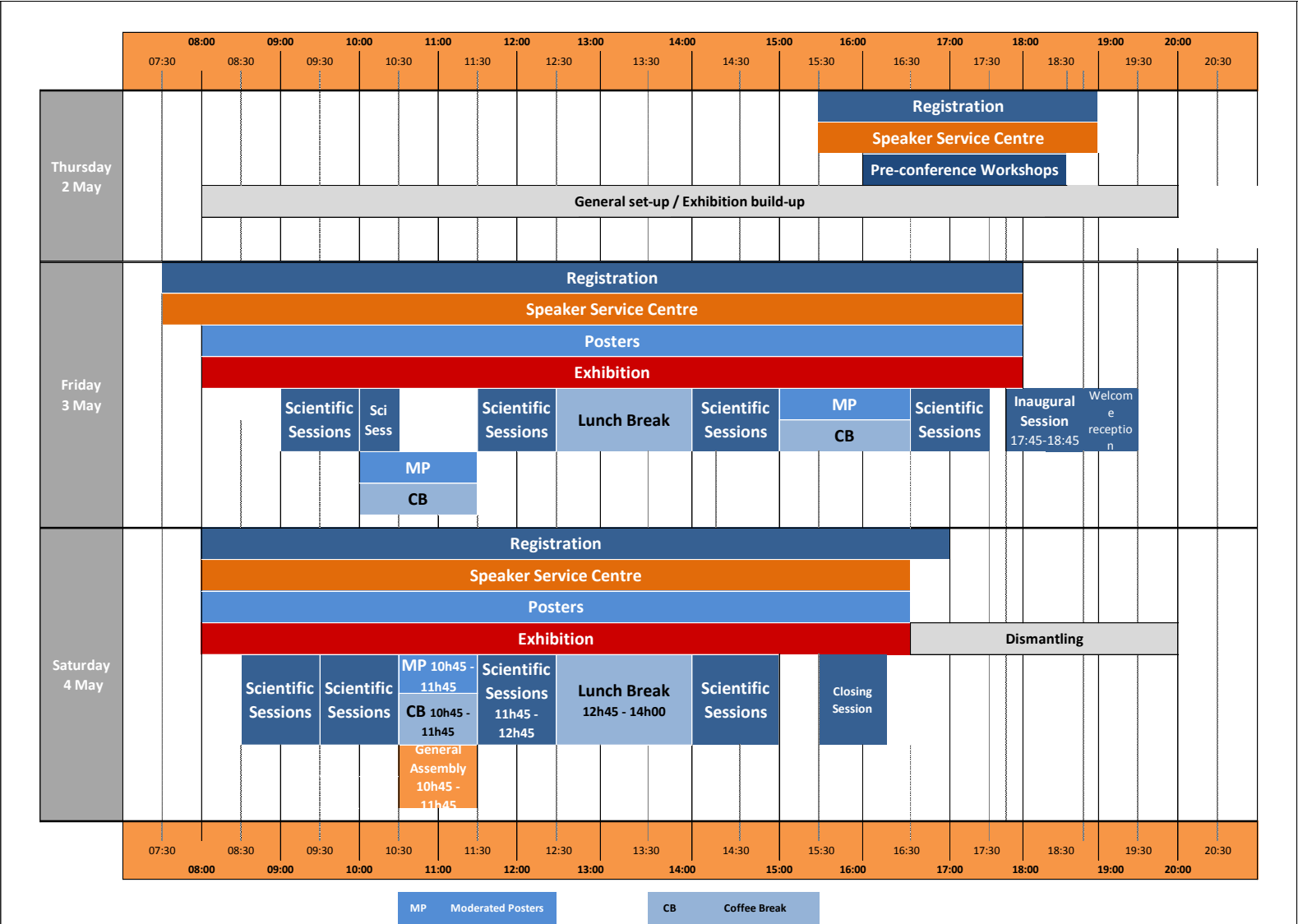
The venue chosen was the MiCo Milano Congress Centre, located in the city centre.



#### Lecture room capacities:

Orange 1-2-3	390 seats
Green 2-3	220 seats
Green 1	100 seats

1.4 Timetable



## 1.5 Space Allocation

The space allocation was organised as follows:

- Level 0: Registration
- Level -1:
  - Speaker Service Centre, ESC staff office
  - 3 Lecture rooms, Exhibition, Coffee break & catering, 2 meeting rooms, Poster area
- Level 1: Childcare

Space allocation chart - EuroHeartCare							Congress dates 2019					
Function	Space required		Space allocated				Thursday 2 May		Friday 3 May		Saturday 4 May	
	Capacity	Style	Room	Sqm	Real	Level	AM	PM	AM	PM	AM	PM
Registration	100	sqm	North entrance		572 m <sup>2</sup>	0	08:00	15:30-19:30	07:30	19:00	08:00-17:00	17:00-19:00
President office	4 pax	Office	Office 5	22 m <sup>2</sup>	4 pax	-1			07:30	19:00	08:00	19:00
ESC staff office 1	5 pax	Office	Office 6	2x25 m <sup>2</sup>	8 pax	-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
ESC staff office 2	5 pax	Office	Office 7	2x25 m <sup>2</sup>	8 pax	-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
ESC staff catering	10 pax	Office	Office 8	26 m <sup>2</sup>	8 pax	-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
Moderated Posters		sqm	Meeting Room 3	50 m <sup>2</sup>	-	-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
Members Lounge		Lounge	Meeting Room 4-5	96 m <sup>2</sup>	40 pax	-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
Speaker Service Centre	10 pax	Office	Meeting Room 6	47 m <sup>2</sup>	-	-1	08:00	15:30-19:30	07:30	19:00	08:00-16:30	16:30-19:00
Exhibition	500-800	sqm	Aisles -1	600 m <sup>2</sup>		-1	08:00	19:00	08:00	20:00	08:00-16:30	16:30-19:00
Catering						-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
Cloakroom						-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
Posters area						-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
Lecture Room 1	400p	Theatre	Orange (1-2-3)	478 m <sup>2</sup>	390p Th.	-1	08:00	19:00	08:30	19:00	08:00-16:30	16:30-19:00
Lecture Room 2	200p	Theatre	Green 2-3	324 m <sup>2</sup>	220p Th.	-1	08:00	19:00	08:30	19:00	08:00-16:30	16:30-19:00
Lecture Room 3	100p	Theatre	Green 1	156 m <sup>2</sup>	100p Th.	-1	08:00	19:00	08:30	19:00	08:00-16:30	16:30-19:00
Lunchs Pre-conference Workshop 1	70p	Classroom	Turquoise 1	156 m <sup>2</sup>	50p Class	-1	08:00	12:00-14:00 16:00-18:30	-	-	-	-
Meeting room 1	20p	Board	Turquoise 1	125 m <sup>2</sup>	30p U	-1	-	-	08:00	19:00	08:00-16:30	16:30-19:00
Meeting room 2	15p	Board	Turquoise 2	125 m <sup>2</sup>	30p U	-1	08:00	19:00	08:00	19:00	08:00-16:30	16:30-19:00
Childcare	-	Special	Meeting 7			0	08:00	19:00	07:30	19:00	08:00-16:30	19:00
	ESC Set-up											
	In use/ Congress											
	ESC Dismantling											



## 1.6 Board & Scientific Committee

### Meet the ACNAP Board 2018-2020

#### EXECUTIVE OFFICERS

President - **Tina Hansen** (Denmark)

President-Elect - **Lis Neubeck** (United Kingdom)

CCNAP Past-Chair - **Ekaterini Lambrinou** (Cyprus)

Treasurer - **Julie Sanders** (United Kingdom)

Editor-in-chief ECJN - **Tiny Jaarsma** (Sweden)

#### BOARD MEMBERS AND COMMITTEE CHAIRS

Congress Programme Committee Chair - **Jennifer Jones** (United Kingdom)

Congress Coordinator - **Izabella Uchmanowicz**, FESC (Poland)

Advocacy & Communications Officer - **Leonie Klompstra** (Sweden)

Membership Officer - **Elena Marques-Sule** (Spain)

Science Committee Chair - **Geraldine Lee**, FESC (United Kingdom)

Education Committee Chair - **Neil Angus**, FESC (United Kingdom)

National Societies Committee Chair - **Lynne Hinterbuchner**, FESC (Austria)

Ex-officio - **Catriona Jennings**, FESC (United Kingdom)

Ex-officio - **Tone Norekvål**, FESC (Norway)

Ex-officio - **Maria Back** (Sweden)

Ex-officio, ESC CEO - **Isabel Bardinnet** (France)

Ex-officio, ESC COO - **Mike Morrissey** (United Kingdom)



#### Active leaders

All ACNAP activities are delivered by volunteers who are leading experts in their fields.

## 2. Scientific Programme

### 2.1 Overview

- 3 lecture rooms (+ 1 Vs 2018)

#### **Total of 27 sessions**

#### **Scientific and Educational Programme:**

#### **24 sessions**

Clinical Cases	1
How-to Session	2
Special Event	3
Special Session	3
Symposium	12
Workshop	3

Special events included:

- 1 Inaugural session
- 1 ACNAP General Assembly
- 1 Closing Ceremony

3 Sessions interactive stage (Non educative sessions, held on the ACNAP interactive stage)

#### **Abstract based programme**

#### **10 sessions**

Abstract Session	4
Clinical Cases	1
Moderated Posters	3
Poster Session	2

Overview of the oral sessions:

- Doctoral Student Session
- Oral Session 1 - Chronic Heart Failure
- Oral Session 2 - Acute Cardiovascular Care
- Oral Session 3 - Social and cultural aspects of Heart Disease
- Clinical Case Session (The winner receives the Clinical Excellence Award)

## Faculty Members (Without Special Event)

### 122 Roles – 80 Faculty

Faculty	Roles
Chairpersons	56
Discussants	2
Abstract Judges	6
Speakers	58
<b>TOTAL</b>	<b>122</b>

## 2.2 Faculty

Roles	2016		2017		2018		2019	
	persons	roles	persons	roles	persons	Roles	persons	roles
Chairperson		30		34		37		56
Speaker		36		44		54		58
Discussant		20		21		23		2
Judge Abstract		9		9		12		6
	63	95	61	108	88	126	80	122

Number of roles	2017	%	2018	%	2019	%
1	29	48%	61	69%	52	65
2	21	34%	19	22%	17	21,25
3	7	11%	5	6%	8	10
4	4	7%	3	3%	3	3,75
<b>Total</b>	<b>61</b>		<b>88</b>		<b>80</b>	

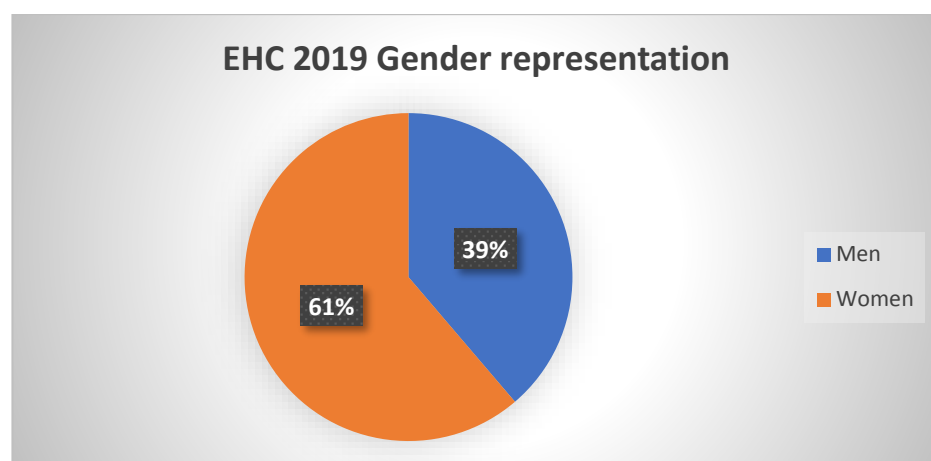
ESC Region	2016	2017	2018	2019
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Asia Pacific	4	3	3	1
ESC Countries	57	54	81	75
North America	2	4	4	4
South & Central America	-	-	0	0
Total	63	61	88	80

Faculty by Country	2016	2017	2018	2019	Variance
Australia	2	2	2	1	-1
Austria	1		1	1	0
Belgium	2	2	2	2	0
Canada	1			0	0
Croatia	1		1	1	0
Cyprus	2	1	1	1	0
Denmark	3	5	4	6	2
Finland			1	3	2
Germany		1		0	0
Greece	15	1	2	0	-2
Hungary	1			0	0
Iceland	1		1	1	0
Ireland * <i>host country 2018</i>	6	5	41	1	-40
Italy* <i>host country 2019</i>	1	2	1	15	14
Jordan	1			0	0
Lebanon	1			0	0
Malta	1			0	0
Netherlands	4	4	2	0	-2
New Zealand	1	1	1	4	3
Norway	3	4	1	1	0
Poland	2	1	2	2	0
Slovenia		1		0	0

Spain	1		1	1	0
Sweden	4	17	3	7	4
Switzerland	1			1	1
United Kingdom	7	10	17	26	9
USA	1	4	4	4	0
Grand Total	63	61	88	80	-8

## Gender representation



Gender	2017	2018	2019	Variance 2018/2019
Men	26%	22%	39%	+17% men
Women	74%	78%	61%	

## 2.3 Topics

Topic	Abstract session (without poster sessions)	Scientific and educational programme	Total
10 - Chronic Heart Failure			
10.4 - Chronic Heart Failure – Treatment	1		1
10.4.9 - Chronic Heart Failure: Multidisciplinary Interventions		1	1
11 - Acute Heart Failure		1	1
13 - Acute Coronary Syndromes		1	1
14 - Acute Cardiac Care	1		1
15.4.2 - Valvular Heart Disease: Intervention		1	1
28 - Risk Factors and Prevention		3	3
28.11 - Nutrition, Malnutrition and Heart Disease		1	1
28.7 - Diabetes and the Heart		1	1
28.9 - Stress, Psycho-Social and Cultural Aspects of Heart Disease		4	4
28.99 - Risk Factors and Prevention – Other		1	1
30 - Cardiovascular Disease in Special Populations		1	1
30.5 - Cardiovascular Disease in the Elderly		1	1
32 - Cardiovascular Nursing		1	1
34 - Public Health and Health Economics		1	1
34.99 - Public Health and Health Economics - Other		1	1
4 - Arrhythmias, General		1	1
90.15 - Association of Cardiovascular Nursing & Allied Professions	3	4	7
99 – Other			
Total	5	24	29

## 2.4 Sessions

		2016	2017	2018	2019
Scientific and Educational Programme	How-to Session	1	2	0	2
	Satellite Symposium	2	0	2	0
	Special Event	4	4	3	3
	Symposium	8	9	10	12
	Workshop	0	2	5	3
	Clinical case				1
Abstract	Abstract Session	2	2	3	4
	Clinical Cases	1	1	1	1
	Moderated Posters	3	3	3	3
	Poster Session	2	2	3	2
	<b>TOTAL</b>	<b>23</b>	<b>25</b>	<b>30</b>	<b>31</b>

## 2.5 Abstracts

Overview of submissions by type						
EuroHeartCare congress	Abstract 2017	Clin.Case 2017	Abstract 2018	Clin.Case 2018	Abstract 2019	Clin.Cases 2019
<b>TOTAL Submitted</b>	194	35	250	37	275	38
<b>TOTAL Accepted</b>	168	25	232	36	255	29
<i>Oral</i>	24		32		20	
<i>Poster</i>	145		212		274	
<i>Moderated poster</i>	24		24		30	
<b>% acceptance rate</b>	84%		90%		87%	
<b>Cut-off grade</b>	5.86		5		5	
<b>Accepted withdrawn</b>	30	0	31	5	27	0
<b>Expected onsite</b>	138	25	201	31	228	29
<b>Total expected Onsite</b>	163		232		257	
<b>No shows (abs + Clin.c)</b>	37		40		44	
<b>Presented</b>	126		192		213	

### Top countries with accepted abstracts & Clinical cases - comparison table

Country	2017 Total	2018 Total	2019 Total	Country	2017 Total	2018 Total	2019 Total
<b>Grand Total</b>	<b>193</b>	<b>268</b>	<b>284</b>	Lithuania	2	2	0
Albania	1	1	1	Macedonia The Former Yugoslav Republic of		1	0
Australia	5	8	4	Malta	1	0	0
Austria		2	2	Mexico	0	1	0
Belgium	1	2	2	Morocco	0	2	1
Bosnia and Herzegovina	0	0	1	Netherlands	5	4	2



Brazil	13	1	4	New Zealand	0	2	0
Bulgaria	1		0	Norway *	18	7	4
Canada	1	7	3	Pakistan	1	0	1
China People's Republic of	0	1	0	Pakistan	1		
Columbia	0	0	1	Poland	11	13	13
Costa Rica		1		Portugal	3	13	7
Croatia	0	0	5	Qatar	0	0	3
Cyprus	3	3	5	Romania	0	3	2
Czech Republic	1	1	3	Russian Federation	3	14	13
Denmark	7	18	11	Rwanda	0	1	0
Egypt	5	3	2	Saudi Arabia	3	3	1
Faroe Islands	0	1	0	Serbia	1	1	0
Finland	1	2	2	Slovak Republic		2	0
France	1	0	0	Slovenia	1	0	0
Germany	1	4	0	South Africa	1	1	0
Greece	0	1	7	Spain	6	16	7
Hong Kong SAR People's Republic of China	0	4	0	Sweden	37	18	19
Iceland	3	5	2	Switzerland	0	1	1
India	2	0	2	Tunisia	0	1	0
Iran (Islamic Republic of)	5	0	1	Turkey	2	4	0
Ireland *	9	29	9	Ukraine	1	2	2
Israel		2	4	United Kingdom	16	25	39
Italy *	8	13	61	United States of America	9	10	8
Japan	1	0	3	Uzbekistan	2	3	2
Jordan	0	0	2	Vietnam		8	10

Kazakhstan	0	0	1				
Korea Republic of	1	2	10				
Lebanon	0	0	1				

**\* Norway host country in 2017 - Ireland host country in 2018 – Italy host country in 2019**

### **No Show by country**

The “No –Show”: *Are considered “no show” all presenters of accepted abstracts who haven’t displayed their posters during the congress and haven’t notified the scientific department of their withdrawal.*

<b>No show by Country</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
Albania	1		
Australia			1
Bosnia and Herzegovina			1
Brazil	1		
Bulgaria			
Canada			
Chile			
China People's Republic of		1	
Cyprus			1
Egypt	3	2	2
France	1		
Germany			
Greece			4
India	1		2
Iran (Islamic Republic of)			1
Ireland	1	5	
Israel			1
Italy	2	5	1
Korea Republic of	1		1
Morocco		2	1
Netherlands		1	

Norway	<b>1</b>		
Poland	<b>3</b>		<b>2</b>
Portugal	<b>2</b>	<b>2</b>	
Romania		<b>1</b>	
Russian Federation	<b>3</b>	<b>4</b>	<b>7</b>
Saudi Arabia	<b>2</b>	<b>3</b>	<b>1</b>
Serbia	<b>1</b>		
South Africa	<b>1</b>		
Spain	<b>3</b>		
Sri Lanka			
Sweden	<b>1</b>	<b>1</b>	
Tunisia		<b>1</b>	
Turkey	<b>2</b>		
Ukraine	<b>1</b>	<b>1</b>	<b>2</b>
United Kingdom	<b>4</b>	<b>2</b>	<b>3</b>
USA		<b>1</b>	<b>1</b>
Uzbekistan	<b>2</b>	<b>2</b>	<b>2</b>
Vietnam		<b>6</b>	<b>10</b>
Grand Total	35 persons / 37 Abstracts	31 persons / 40 Abstracts	36 persons /44 abstracts

## 2.6 Occupancy of scientific sessions

### Scientific sessions ordered by head count peak

Session Title	Head count peak
How to enhance self-efficacy in cardiovascular care	134
Inaugural session	131
Latest evidence in heart failure management: what is emerging between 2016 and 2021 Guidelines? - Joint session with the Heart Failure Association (HFA) - <i>This session is supported by Boehringer Ingelheim and Lilly Alliance in the form of an educational grant. The scientific programme has not been influenced in any way by its sponsor.</i>	129
Oral session - Chronic Heart Failure <i>This session is supported by Novartis Pharma AG in the form of an educational grant. The scientific programme has not been influenced in any way by its sponsor.</i>	94
Patient and carer involvement for better cardiovascular care	91
Approaches to optimising psychosocial health in cardiovascular care	90
What is new in the prevention and management of arrhythmias? <i>ACNAP in collaboration with European Heart Rhythm Association (EHRA)</i>	87
Masterclass - Lifestyle approaches to managing cardiovascular disease	87
What is new in the world of TAVI? <i>ACNAP in collaboration with European Association of Percutaneous Cardiovascular Interventions (EAPCI)</i>	80
Revolutionising cardiovascular care: e-health and telemedicine <i>This session is supported by WeHealth by Servier in the form of an educational grant. The scientific programme has not been influenced in any way by its sponsor.</i>	79
Advances in the surgical management of heart failure <i>ACNAP in collaboration with ESC working group on cardiovascular surgery</i>	70
A new era for cardiac rehabilitation and secondary prevention?	70
ACNAP General Assembly	70
Advances in interventional cardiology <i>ACNAP in collaboration with the European Association of Percutaneous Cardiovascular Interventions (EAPCI)</i>	68
Advances in risk factor assessment and management <i>Joint with European Association of Preventive Cardiology (EAPC)</i>	68
Oral abstract session - Acute Cardiovascular Care	65
Adjusting care to enhance optimal outcomes in elderly patients	63
Advancing prevention and management of diabetes <i>This session is supported by Novo Nordisk in the form of an educational grant. The scientific programme has not been influenced in any way by its sponsor.</i>	54
Oral abstract session - Doctoral Students	52

Cardiovascular nursing in Italy	51
Clinical case session	48
New ESC guidelines: arterial hypertension, cardiovascular diseases during pregnancy, syncope and myocardial revascularization	48
Special considerations in cardiovascular health	40
How to write a successful abstract.	30
Screening of depression and anxiety in the clinical setting	25

## Detailed occupancy per session per day & start time

### Friday 03 May

Session Title	Session Start	Head count peak
Approaches to optimising psychosocial health in cardiovascular care	9:00	90
Revolutionising cardiovascular care: e-health and telemedicine <i>This session is supported by WeHealth by Servier in the form of an educational grant. The scientific programme has not been influenced in any way by its sponsor.</i>	9:00	79
Advances in interventional cardiology <i>ACNAP in collaboration with the European Association of Percutaneous Cardiovascular Interventions (EAPCI)</i>	9:00	68
How to enhance self-efficacy in cardiovascular care	10:30	134
Oral session - Chronic Heart Failure <i>This session is supported by Novartis Pharma AG in the form of an educational grant. The scientific programme has not been influenced in any way by its sponsor.</i>	11:30	94
Patient and carer involvement for better cardiovascular care	11:30	91
What is new in the world of TAVI? <i>ACNAP in collaboration with the European Association of Percutaneous Cardiovascular Interventions (EAPCI)</i>	11:30	80
Advances in the surgical management of heart failure <i>ACNAP in collaboration with ESC working group on cardiovascular surgery</i>	14:00	70
Advances in risk factor assessment and management <i>Joint with European Association of Preventive Cardiology</i>	14:00	68
Adjusting care to enhance optimal outcomes in elderly patients	14:00	63
What is new in the prevention and management of arrhythmias? <i>ACNAP in collaboration with European Heart Rhythm Association (EHRA)</i>	16:30	87
Advancing prevention and management of diabetes <i>This session is supported by Novo Nordisk in the form of an educational</i>	16:30	54

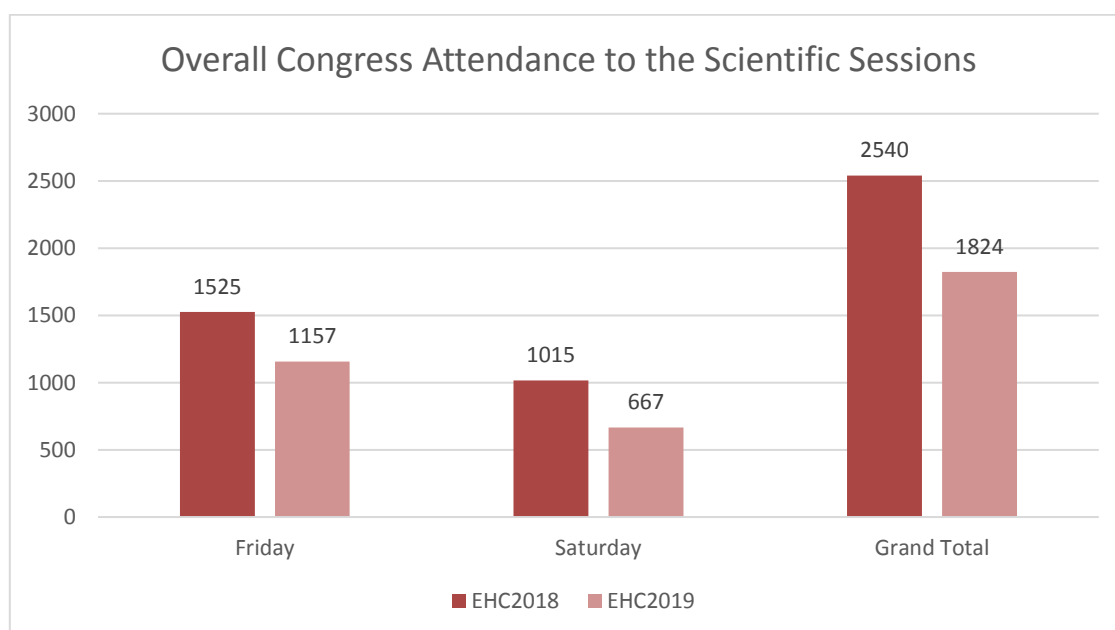
<i>grant. The scientific programme has not been influenced in any way by its sponsor.</i>		
Clinical case session	16:30	48
Inaugural session	17:45	131

### Saturday 04 May

A new era for cardiac rehabilitation and secondary prevention?	8:30	70
Cardiovascular nursing in Italy	8:30	51
How to write a successful abstract.	8:30	30
Masterclass - Lifestyle approaches to managing cardiovascular disease	9:45	87
Oral abstract session - Doctoral Students	9:45	52
New ESC guidelines: arterial hypertension, cardiovascular diseases during pregnancy, syncope and myocardial revascularization	9:45	48
ACNAP General Assembly	10:45	70
Latest evidence in heart failure management: what is emerging between 2016 and 2021 Guidelines? - Joint session with the Heart Failure Association (HFA) - This session is supported by Boehringer Ingelheim and Lilly Alliance in the form of an educational grant. The scientific programme has not been influenced in any way by its sponsor.	11:45	129
Oral abstract session - Acute Cardiovascular Care	11:45	65
Screening of depression and anxiety in the clinical setting	11:45	25
Special considerations in cardiovascular health	14:00	40

Date	Session time	EHC2018	EHC2019
Friday	08:30:00	345	
	09:00:00		90
	10:00:00		79
	10:30:00		134
	11:00:00	390	68
	11:30:00		94

	12:30:00		91
	12:45:00	370	
	13:30:00		80
	14:00:00	220	201
	16:30:00	200	189
	17:45:00		131
	<b>Total</b>	<b>1525</b>	<b>1157</b>
Saturday	08:30:00	255	151
	09:45:00		187
	10:45:00		70
	11:00:00	300	
	11:45:00		219
	12:45:00	150	
	14:00:00	140	40
	15:45:00	170	
	<b>Total</b>	<b>1015</b>	<b>667</b>
	<b>Grand Total</b>	<b>2540</b>	<b>1824</b>



## 2.7 Prizes & Awards

- **3 best Moderated Posters**

*The 3 winners have received a certificate.*

- **3 best oral abstracts**

*The 3 winners have received a certificate + free registration for next year congress*

- **1 oral abstract session – Doctoral Student**

*The winner has received a certificate + free registration for next year congress*

- **1 Clinical Excellence Award**

*The winner has received 2 000€ + free registration for next year congress*

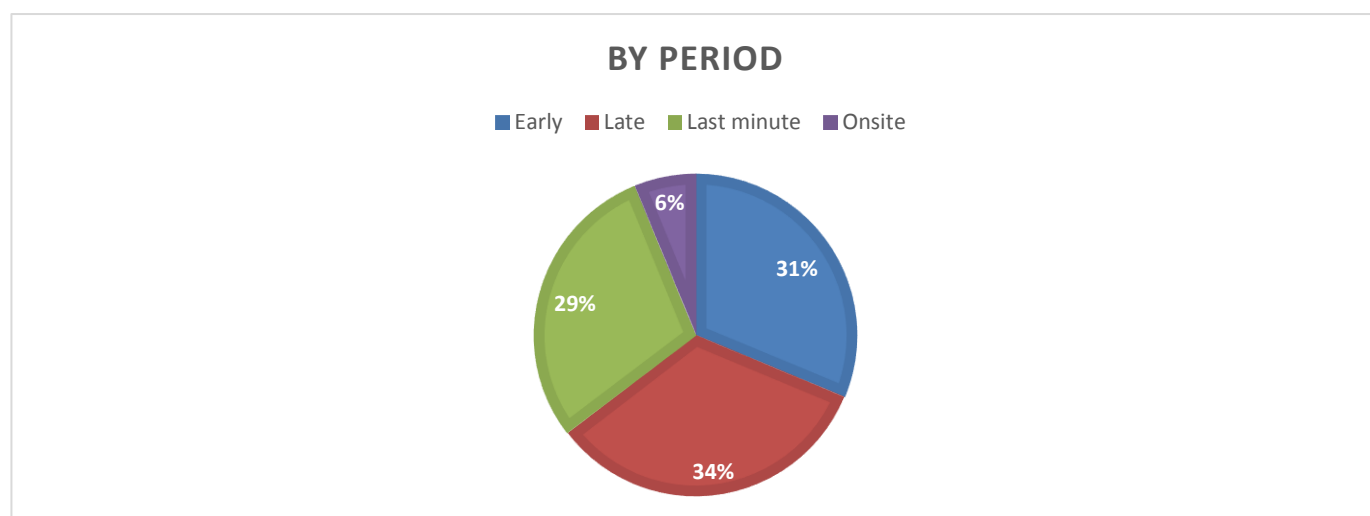
## 3. Registration & Attendance

Intro: delegate profile (provided by Marketing) with comparison over 3 last editions + overview chart (active, paying, exhibitors & press)

### 3.1 Fees with comparisons + deadlines + new/special fees (local ...)

	2016 Athens	2017 Jonkoping	2018 Dublin	2019 Milan	+/- 2018
Active Delegates (incl Press)	448	332	607	<b>486</b>	-121
Exhibitors	16	35	12	<b>9</b>	-3
Total	464	367	619	<b>495</b>	-124

### 3.2 Chart with percentage of registration after each deadline (i.e: early 50%; late 30% last minute 20%)





### 3.3 Delegate breakdown per activity

ACTIVITY	Number of delegates
Nurse - Nurse	52,06%
Not available	16,46%
Allied Professional - Scientist/ Biomedical Scientist	9,05%
Physician Cardiologist - Clinical Cardiologist	5,76%
Other - Other Healthcare Profession	5,14%
Other - Other	1,85%
Allied Professional - Medical Technologist / Medical Technician / Technician	1,44%
Nurse - Advanced Nurse Practitioner	1,44%
Allied Professional - Paramedic	0,82%
Physician Cardiologist - Interventional	0,82%
Nurse - Nurse Practitioner	0,62%
Physician (non-cardiologist) - Cardio-Thoracic Surgery	0,62%
Allied Professional - Administrator	0,41%
Allied Professional - Dietician	0,41%
Allied Professional - Echocardiographer / Sonographer	0,41%
Physician (non-cardiologist) - General Practitioner / Family Medicine	0,41%
Physician (non-cardiologist) - Neurologist	0,41%
Allied Professional - Clinical Bioengineer	0,21%
Allied Professional - Physiotherapist	0,21%
Allied Professional - Radiographer	0,21%
Other - Industry Representative	0,21%
Physician (non-cardiologist) - Endocrinologist	0,21%
Physician (non-cardiologist) - Internal Medicine	0,21%
Physician (non-cardiologist) - Vascular Surgery	0,21%
Physician Cardiologist - Acute Cardiac Care	0,21%
Physician Cardiologist - Prevention & Rehabilitation	0,21%

### 3.4 Registration by origin incl. details of ESC countries

Country	Dublin 2018	In% of total	Milan 2019	In % of total	2019 vs 2018
United Kingdom of Great Britain & Northern Ireland	68	11,22%	75	15,63%	7,00
Italy	8	1,32%	68	14,17%	60,00
Denmark	25	4,13%	36	7,50%	11,00
Sweden	38	6,27%	31	6,46%	-7,00
Croatia	18	2,97%	28	5,83%	10,00
Greece	37	6,11%	24	5,00%	-13,00
Netherlands (The)	22	3,63%	20	4,17%	-2,00
Finland	24	3,96%	18	3,75%	-6,00
Norway	27	4,46%	16	3,33%	-11,00
Poland	10	1,65%	15	3,13%	5,00
United States of America	19	3,14%	15	3,13%	-4,00
Belgium	10	1,65%	12	2,50%	2,00
Ireland	131	21,62%	11	2,29%	-120,00
Austria	2	0,33%	8	1,67%	6,00
Japan	0	0,00%	8	1,67%	8,00

Germany	7	1,16%	6	1,25%	-1,00
Portugal	4	0,66%	6	1,25%	2,00
Russian Federation	2	0,33%	6	1,25%	4,00
Spain	10	1,65%	6	1,25%	-4,00
Korea (Republic of)	0	0,00%	5	1,04%	5,00
Switzerland	6	0,99%	5	1,04%	-1,00
Albania	2	0,33%	4	0,83%	2,00
Australia	8	1,32%	4	0,83%	-4,00
Canada	5	0,83%	4	0,83%	-1,00
Cyprus	6	0,99%	4	0,83%	-2,00
Czechia	3	0,50%	4	0,83%	1,00
Iceland	4	0,66%	4	0,83%	0,00
Romania	20	3,30%	4	0,83%	-16,00
France	4	0,66%	3	0,63%	-1,00
Israel	3	0,50%	3	0,63%	0,00
Lebanon	0	0,00%	3	0,63%	3,00
Slovenia	4	0,66%	3	0,63%	-1,00
Brazil	2	0,33%	2	0,42%	0,00
Estonia	0	0,00%	2	0,42%	2,00
Jordan	0	0,00%	2	0,42%	2,00
Lithuania	47	7,76%	2	0,42%	-45,00
Moldova (Republic of)	0	0,00%	2	0,42%	2,00
Serbia	1	0,17%	2	0,42%	1,00
Ukraine	1	0,17%	2	0,42%	1,00
United Arab Emirates	0	0,00%	2	0,42%	2,00
Bahamas	0	0,00%	1	0,21%	1,00
Egypt	0	0,00%	1	0,21%	1,00
Latvia	0	0,00%	1	0,21%	1,00
Malta	3	0,50%	1	0,21%	-2,00
Qatar	0	0,00%	1	0,21%	1,00
Bulgaria	1	0,17%	0	0,00%	-1,00
Costa Rica	1	0,17%	0	0,00%	-1,00
Faroe Islands	4	0,66%	0	0,00%	-4,00
Hong Kong	1	0,17%	0	0,00%	-1,00
Hungary	5	0,83%	0	0,00%	-5,00
Mexico	2	0,33%	0	0,00%	-2,00
New Zealand	1	0,17%	0	0,00%	-1,00
Pakistan	1	0,17%	0	0,00%	-1,00
Saudi Arabia	2	0,33%	0	0,00%	-2,00
Singapore	2	0,33%	0	0,00%	-2,00
Slovakia	2	0,33%	0	0,00%	-2,00
South Africa	2	0,33%	0	0,00%	-2,00
Sudan	1	0,17%	0	0,00%	-1,00

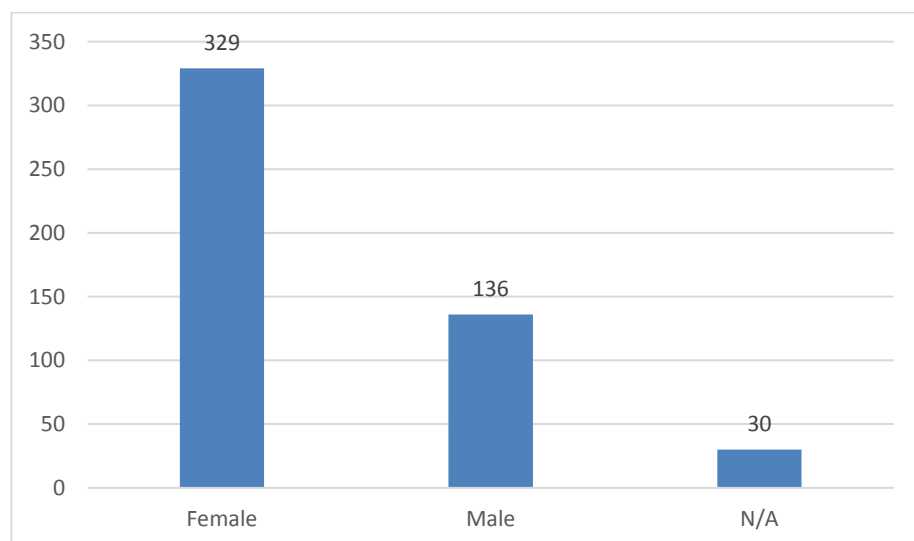
### Top 10 countries of origin

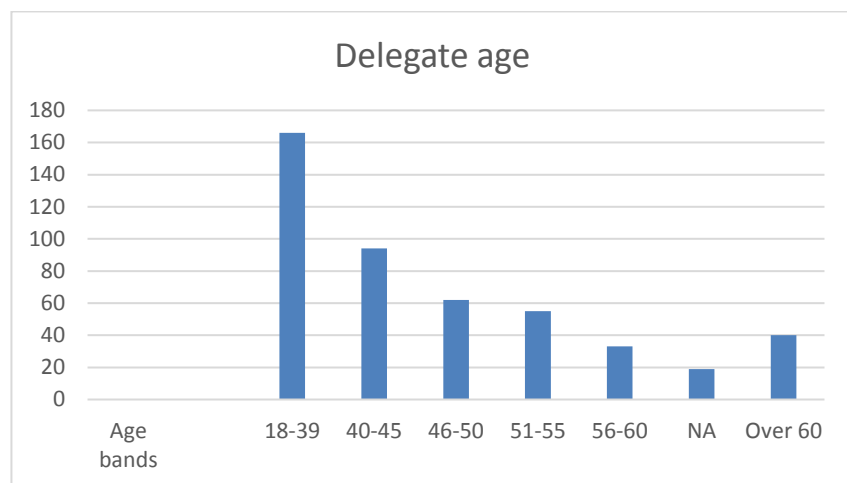
Country	Dublin 2018	Milan 2019
United Kingdom of Great Britain & Northern Ireland	68	75
Italy * host country	8	68
Denmark	25	36
Sweden	38	31
Croatia	18	28
Greece	37	24
Netherlands (The)	22	20
Finland	24	18
Norway	27	16

### By Region

Region	2016 Athens	2017 Jonkoping	2018 Dublin	2019 Milan	+/-
Africa	0	1	3	0	-3
Asia Pacific	16	10	15	22	-7
Esc	425	305	560	447	-113
North America	7	15	26	19	-10
South & Central America	0	1	3	3	0
<b>TOTAL</b>	448	332	607	495	-112

### 3.5 Delegates gender & age





### 3.6 Returning delegates

- 23 % (114 delegates) 2018 and 2019 Congresses
  - 14 % (71 delegates) attended 2017 and 2019
  - 9,8 % (49 delegates) attended all the congresses since 2017
- 49 Delegates attended all congress since the last 2 years

### 3.7 Exhibitors attendance (comparison evolution since 2013)

Badge type	Dublin 2018	Milan 2019	+/-
General Exhibitor badges	26	4	-22
Scientific Exhibitor badge	32	5	-17
Total Exhibitor badges	59	9	-50

## 4. Grants

### 4.1 Project summary & Criteria

For the first time this year, ACNAP offered 50 Educational Grants to nurses and allied professionals who have limited access to funding or difficulties to obtain financial assistance in order to help them to attend the EuroHeartCare 2019 Congress.

#### Eligibility criteria

At the time of the application, the applicants were required to:

- Be an ACNAP Silver Member
- Have not attended the last two editions (2017 Jönköping – 2018 Dublin)

## **The Grant**

- 500€ (Five hundred Euros) as a contribution to cover travel and accommodation costs
- Complementary Congress registration; voucher to be picked up onsite on the first day of the congress

## **Conditions**

The grant was intended to be used for the EuroHeartCare 2019 Congress only (not possible to be transferred to another edition).

EuroHeartCare 2019 Congress Travel Grant winners were required to sign the presence file upon arrival and departure (mandatory for payment of the grant) at the ACNAP stand. The payment of the grant occurred after the congress.

## 5. Industry

### 5.1 Exhibition

3 stands at EuroHeartCare 2019 (24m<sup>2</sup> occupied):

- One 12m<sup>2</sup> custom stand
- Three 4m<sup>2</sup> Exhibition Welcome Packages

### 5.2 Unrestricted Educational Grants

#### **Friday 3 May 2019 9:00**

**Revolutionising cardiovascular care: e-health and telemedicine**

Sponsor WeHealth Digital Medicine

Attendance: 78 scanned

#### **Friday 3 May 2019 11:30**

**Oral session - Chronic Heart Failure**

Sponsor Novartis Phama AG

Attendance: 99 scanned

#### **Friday 3 May 2019 16:30**

**Advancing prevention and management of diabetes**

Sponsor Novo Nordisk

Attendance: 71 scanned

#### **Saturday 4 May 2019 11:45**

**Latest evidence in heart failure management: what is emerging between 2016 and 2020 Guidelines?**

Sponsor Boehringer Ingelheim and Lilly Alliance

Attendance: 135 scanned

**No Industry post congress survey will be conducted this year.**

## 6. Publications

### 6.1 *First announcement*

1st Print: 05/11/2018 – 2700 ex

### 6.2 *Final programme & PAAG*

#### **Final Programme**

Launched online 16/04/2019. Shared on escardio.org

Page views 276

[[https://www.escardio.org/static\\_file/Escardio/Congresses/EuroHeartCare/Documents/EHC2019.FP.pdf](https://www.escardio.org/static_file/Escardio/Congresses/EuroHeartCare/Documents/EHC2019.FP.pdf)]

#### **Programme at a glance**

650 ex. Printed & Delivered 26/04/2019

The programme at a glance is meant to fit in delegate's badge holders. The PAAG was given to delegates when entering the congress for the first time.

#### **Posters**

100 ex – delivered 25/9/2018

#### **Communication channels**

- Flyers and ads
- Dedicated ecampaigns
- My ESC Newsletter
- ACNAP Bulletin and bulletins of other associations
- Congress news (printed and online)

#### **Communication planning**

- June – October 2018: Congress dates
- November - January: Abstract Submission
- December – May 2019: Registration
- May 2019: Congress activities
- May 2019 onward: Congress resources

## 7. Electronic Communications

### 7.1 Ecampaigns (stats)

#### Dedicated e-campaigns

E-campaigns were sent to the following target audiences:

- Those interested in Congresses and meetings, Cardiovascular Nursing
- ACNAP members
- Profession = administrator, engineer, medical technician, other, other healthcare professions, paramedic, dieticians, psychologists, pharmacists, nurses
- EuroHeartCare attendees 2016+2017+2018
- EuroHeartCare abstract submitters 2016+2017+2018
- Countries: Italy, Denmark, Poland, Sweden, UK, Iceland, Germany, Russian Federation, Croatia, Ireland, Norway

Send date	Subject	Sent to	Unique Opens	Open Rate	Unique clicks	Total Clicks	Click Rate
07/11/18	Abstract Submission Open	47340	13196	28.21%	1448	4072	3.1%
03/01/19	Abstract submission deadline	52337	12327	23.64%	1526	4333	2.93%
30/01/19	Early fee deadline	53347	12835	24.16%	1374	4044	2.59%
20/02/19	Register by 27 Feb	64082	14254	22.32%	1582	5020	2.48%
08/03/19	Late fee – one month left	56567	17570	31.14%	1606	4477	2.85%
28/03/19	Last days to register	59584	12646	21.30%	1400	3771	2.36%
01/04/19	Ecampaing in Italian	11643	2731	23.56%	180	343	1.55%
25/04/19	Attendance Guide	417	269	64.51%	130	292	31.18%
29/04/19	Travel Strikes	366	253	69.13%	35	95	9.56%
04/05/19	Post Congress survey	374	231	61.93%	155	259	41.56%



## 7.2 eCongress News

Sent every morning before the congress starts

Audience: all attendees and on Day 2 an edition was sent to ACNAP Members

Send date	Subject	Sent to	Unique Opens	Open Rate	Unique clicks	Total Clicks	Click Rate
03/04/19	Daily congress news – Day 1 (Delegates)	426	205	48.26%	55	150	12.94%
04/04/19	Daily congress news – Day 2 (Delegates)	426	197	46.35%	46	137	10.82%
04/04/19	Daily congress news – Day 2 (ACNAP Members)	2360	586	24.88%	158	546	6.71%

## 7.3 Social media activity

### Facebook

The image shows two Facebook posts from the European Society of Cardiology. The left post features a group photo of four people and promotes the EuroHeartCare2020 Annual Congress, scheduled for 4-6 June in Seville, Spain. The right post is a text-based announcement for a 'Speed Mentoring session' during the congress, encouraging participants to register by 14 April via a provided link. Both posts show engagement metrics such as 'People Reached' and 'Engagements'.

Post Total Reach: 13925

Post Total Reach: 10522

Post Total Impressions: 20257	Post Total Impressions: 14842
Engaged users: 819	Engaged users: 171



European Society of Cardiology

February 20 · 🌐

▶ ACNAP

⋮


This year #EuroHeartCare will be one of a kind, #ACNAP first congress since becoming an association 🥳  
 Free reg for Silver Member Nurse Students who register before 27 February  
<https://bit.ly/2GTI6NF>



 Kristina Scerbakovaite, Mona Schlyter and 18 others

 6 Shares

Post Total Reach: 9861	Post Total Reach: 6683
Post Total Impressions: 13690	Post Total Impressions: 9570
Engaged users: 176	Engaged users: 97



European Society of Cardiology

February 21 · 🌐


⋮

Post Total Reach: 6683

Post Total Impressions: 9571

Engaged users:97


This year #EuroHeartCare will be one of a kind, #ACNAP first congress since becoming an association.  
 Free reg for Silver Member Nurse Students who register before 27 February  
<https://bit.ly/2GTI6NF> Please spread the word 🙏



ESCARDIO.ORG

Register for EuroHeartCare

The official ESC website: Register for the next EuroHeartCare Congress. Take advantage of the best fees by registering early!




6,683


People Reached

117

Engagements

Boost Post

 Camille Esc, Lavi Baciú and 15 others

 2 Shares

 **European Society of Cardiology**  January 10 · 🌐

#EuroHeartCare is gonna be one of kind this year! Dr. Ekaterini Lambrinou says it all 😊

The deadline to submit your abstract for #EuroHeartCare 2019 has been extended to 15 January.

Don't wait and submit now <https://bit.ly/2QyPEp2>

#ACNAP













16,878 People Reached      1,326 Engagements      [Boost Post](#)

 82      4 Comments 20 Shares

Post Total Reach: 16878	Post Total Reach: 10578
Post Total Impressions: 24143	Post Total Impressions: 14744
Engaged users: 826	Engaged users: 356
Views: 5,2K	

## Twitter - Top Posts

	<u>Impressions</u>	<u>Engagements</u>	<u>Engagement rate</u>
 <b>European Society of Cardiology</b> @escardio · May 1 Dear #cardiotwitter friends,  With #EuroCMR and #EuroHeartCare both taking place 2-4 May, expect a high volume of tweets from @escardio these days 😊 Do join us in the conversations and help spread the science!  #cardiology #cardioed #cardiologists	18,661	211	1.1%
 <b>European Society of Cardiology</b> @escardio · May 4 A huge thank you to all our #cardiotwitter friends for their amazing tweets, you're the best! See you next time 🙏  @Angie_Durante89 @LeonieKlompstra @proftomquinn @juarezr @MartorMaria @EkateriniL @Luciani_Michela @gianlucanurse @C_Andreae @EditorEJCN  #EuroHeartCare #ACNAP <a href="https://pic.twitter.com/m66Q891IMD">pic.twitter.com/m66Q891IMD</a>	5,923	297	5.0%

	<b>European Society of Cardiology</b> @escardio · May 3 We're really excited to announce the launch of the new ACNAP Young community (YoCo) 😊👥  <a href="#">#EuroHeartCare</a> <a href="#">#ACNAP_YOCO</a> <a href="#">#cvnurses</a> <a href="#">#cardiotwitter</a> @LienDesteghe @BorregaardBritt <a href="#">@staceystewart25</a> pic.twitter.com/IB2UTmnlXN	4,863	183	3.8%
	<b>European Society of Cardiology</b> @escardio · May 2 Integrated care: a need to extend the collaboration between the different health care departments and involvement of the patient and of the integrated accessible health care systems (example e-health) by @J_Hendriks1  <a href="#">#EuroHeartCare</a> <a href="#">#ACNAP</a> pic.twitter.com/iGxvAm5qWf	4,337	142	3.3%
	<b>European Society of Cardiology</b> @escardio · May 4 People with <a href="#">#HF</a> and <a href="#">#Diabetes</a> have a 10 fold higher risk of mortality. Promising results in reducing hospitalisation for these patients come from Metformin and SGLT2 inhibitors by @m_piepoli  <a href="#">#EuroHeartCare</a> <a href="#">#ACNAP</a> pic.twitter.com/n8baUqSOLP	4,329	151	3.5%
	<b>European Society of Cardiology</b> @escardio · May 2 Increasing adherence to prescribed heart <a href="#">#medicine</a> can be achieved with patient centred pharmacists led guidance by Dr @DrRaniKhatib  <a href="#">#EuroHeartCare</a> <a href="#">#ACNAP</a> pic.twitter.com/PkaQFYMhcU	4,165	90	2.2%
	<b>European Society of Cardiology</b> @escardio · May 3 Physical activity: how should we deal with it, recommending and quantifying it for best clinical outcome? by Dominique Hansen.  <a href="#">#EuroHeartCare</a> <a href="#">#ACNAP</a> pic.twitter.com/Sb0jf6Ttl8	3,692	100	2.7%
	<b>European Society of Cardiology</b> @escardio · May 3 Andrea Greco: self-efficacy can explain health behaviour, also in <a href="#">#cardiovascular</a> care.  <a href="#">#EuroHeartCare</a> @UniBergamo <a href="#">#ACNAP</a> pic.twitter.com/XRDqGJwq89	3,485	90	2.6%
	<b>European Society of Cardiology</b> @escardio · May 4 Telemonitoring usage and integration advantages for reducing CV patients (re)hospitalizations ~ perspectives by @EditorEJCN  <a href="#">#EuroHeartCare</a> <a href="#">#ACNAP</a> pic.twitter.com/bYPZGartPX	3,264	144	4.4%
	<b>European Society of Cardiology</b> @escardio · May 4 Different approaches in lifestyle for <a href="#">#bloodpressure</a> and lipid control by Dr Susan Connolly.  <a href="#">#EuroHeartCare</a> <a href="#">#ACNAP</a> pic.twitter.com/eJjXWxil2k	3,656	143	3.9%





European Society of Cardiology

32,615 followers
2mo • Edited

...

We are pleased to share that Professor [Barbara Casadei](#) will be joining us at [#EuroHeartCare](#) this year! Join us for her presentation on asymptomatic atrial fibrillation: detection, clinical significance, treatment. ...see more



98 • 1 Comment

Like

Comment

Share

Post Total Impressions:8,488

Engagement rate:3,13

Post Total Impressions: 14,791    Views:4,193

Engagement rate: 1.89%



European Society of Cardiology

32,615 followers
4mo

...

There is a first time for everything. Drum roll, please!

Announcing: [#ACNAP](#) is now offering education grants to get you to ...see more



97

Like

Comment

Share

Post Total Impressions:15,266

Engagement rate:3.37%

Instagram



Publiée le 03/05/2019, à 17:16

européancardiology  
Mico Milano Convention Centre

167 1 1 5

Interactions ⓘ

européancardiology Fun & Networking on top of the Science 🌐

87  
Actions réalisées à partir de cette publication

Visites de profil 87

Découverte ⓘ

#nurses #medicine #health #instanurses #instapic #congress #cardiology #heart #science #picoftheday #fun #smiles #young #ACNAP #ACNAP\_YOCO

6666  
Comptes atteints  
2 % ne vous suivaient pas

Abonnements 1

Couverture 6666

Impressions 16 894

Aimé par ataste\_oftravel et 165 autres personnes

3 MAI



européancardiology  
MiCo - Milano Congressi

Publiée le 03/05/2019, à 13:06

européancardiology We're really excited to announce the launch of the new ACNAP Young community (YoCo) 🌐

#instanurses #EuroHeartCare #ACNAP #cardiology picture #picoftheday #milan #congress #young #smiles #community #ACNAP\_YOCO

2 sem

cristiana.immonteiro How can we join? 🙋

2 sem Répondre

Afficher les réponses (1)

Aimé par ataste\_oftravel et 214 autres personnes

3 MAI

Interactions ⓘ

90  
Actions réalisées à partir de cette publication

Visites de profil 90

Découverte ⓘ

8142  
Comptes atteints  
1 % ne vous suivaient pas

Abonnements 2

Couverture 8142

Impressions 13 180



européancardiology

Publiée le 04/04/2019, à 09:07

#nurses #cardiovascular #heart #health #picoftheday #meeting

7 sem

drjaquish If improved fitness & strength gains are something you're interested in, we should definitely connect 🌐

7 sem 1 mention J'aime Répondre

Aimé par ataste\_oftravel et 176 autres personnes

4 AVRIL

Interactions ⓘ

83  
Actions réalisées à partir de cette publication

Visites de profil 82

Clics vers le site web 1

Découverte ⓘ

6521  
Comptes atteints  
3 % ne vous suivaient pas

Abonnements 0

Couverture 6521

Impressions 16 295

## 7.4 ESC congresses mobile app

### 7.4.1 Facts & Figures

#### Overview:

Key figures on EuroHeartCare 2019 module

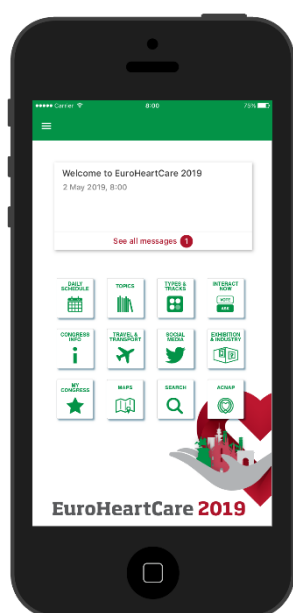
- 379 downloads (+24% compared to 2018) – 490 delegates (-19% compared to 2018)
- Search: mostly used to search for presentations (21%)
- Major actions done by users
  - Access the Daily Schedule (87%)
  - Access the Latest Messages section (85%)
  - Access Topics/Types & Tracks lists (64%)
- Get access to the resources post congress by email
  - **436** resource requests received from 2 April until 6 June
  - **178** resource requests on Friday 3 May (congress day 2)
  - **104** unique resources requested
  - **33** unique My ESC Account holders hit the “Receive Resources” button and did so for an average of **13** different presentations – median is at 8.

### 7.4.2 Project Description

#### EuroHeartCare 2019 module

The EuroHeartCare module – part of ESC Congresses app (available for iPhones, Android phones, iPad & Android tablets) was made available on the App Store® and Google Play on **2 April 2019**.

The mobile app contained:



- The up-to-date scientific programme of the Congress (including abstracts)
- Congress floor plans (congress floor plan overview and Exhibition map)
- Congress general information
- ACNAP corporate information
- An easy-to-use search function which enables users to search for sessions, posters, speakers, exhibitors and general info
- Notes section on sessions/presentations
- Personal schedule planner with the ability to select sessions of interest and synchronise the planner with the online Scientific Programme & Planner (SP&P) as well as between devices
- Dedicated section for personal appointments from My Programme with synchronisation between devices
- Social media content sharing tools via Facebook, Twitter and LinkedIn as well as via email
- Stand-alone app features: once downloaded, no need to connect to the internet to access all congress info

### **NEW in 2019:**

- Evaluate functionality at session and presentation levels (rate and leave a comment)
- Access to the resources via the app for sub-specialty congresses

### **Project Objectives**

The project objectives were to:

- Ensure smooth dissemination of EuroHeartCare scientific programme and general information to participants
- Enhance the delegates' congress experience by facilitating and optimising decision-making for participants
- Offer functionalities to congress delegates:
  - Daily news pushed on mobile devices
  - Interactive maps to locate exhibitors and sessions rooms
  - Abstracts available for consultation offline within the app
  - Powerful search functionality throughout the app
  - Creation of personalised programmes
  - Note taking for sessions and ability to share these with colleagues
  - Find practical information about the congress
- Provide participants and exhibitors with sustainable content options
- Broaden the access to social networking platforms
- Create an interaction and engagement with users
- Extend the EuroHeartCare congress brand and experience
- Decrease the need for paper programmes on-site
- New technologies to reach a younger target audience
- Reach delegates through their "personal" telephone to easily keep in touch with them

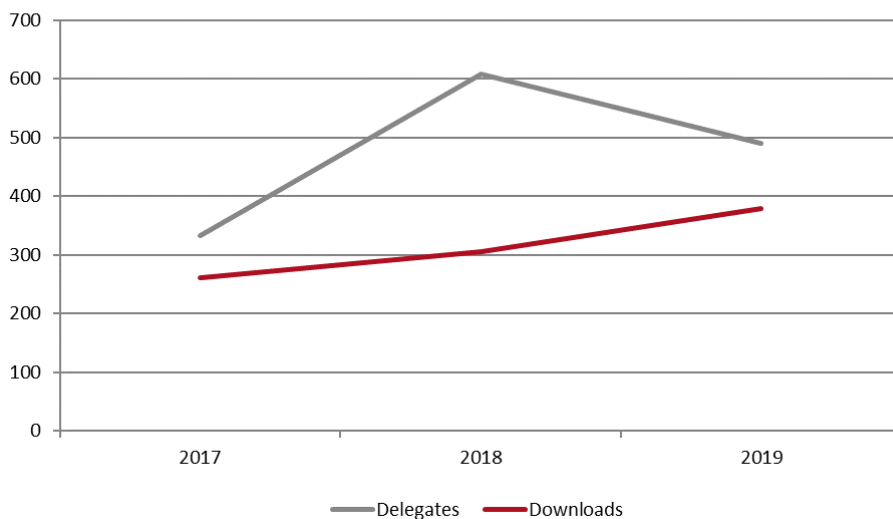
## **10.4.3 Mobile App Figures**

### **General metrics**

The congress app was downloaded **379 times** (+24% compared to 2018). 490 participants (-19%), including exhibitors.

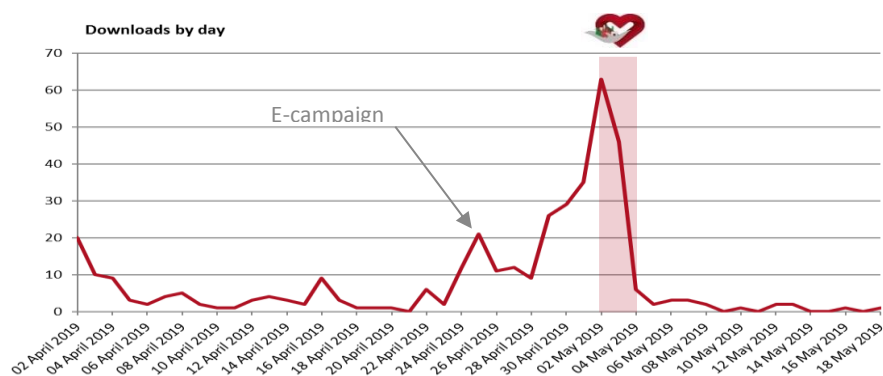


Compared evolution between number of delegates and downloads



## Downloads per day

The app was launched on 2 April (1 month before the congress) to encourage downloads before the event (to limit WIFI access on site) and to allow participants to prepare their congress programme via the app.



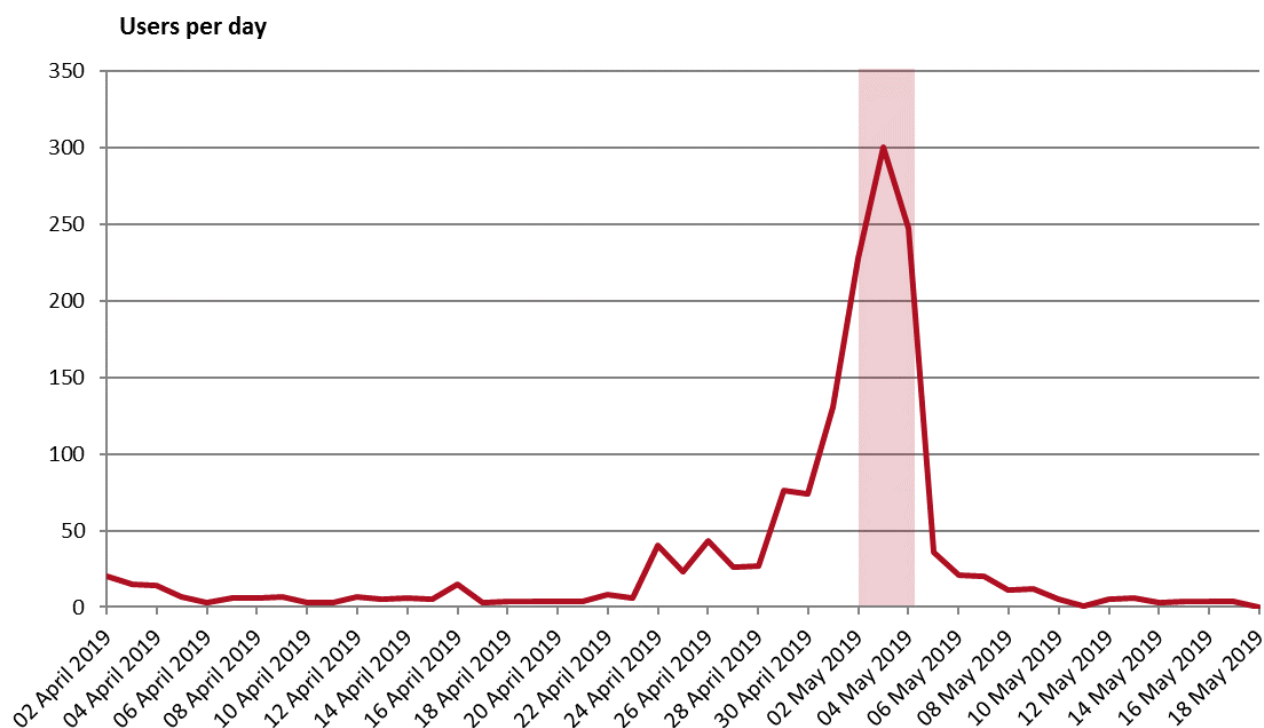
## Downloads per period

Period	2019		2018	
	No. of downloads	Distribution	No. of downloads	Distribution
<b>Pre-Congress</b>	247	<b>65%</b>	209	<b>69%</b>
<b>Congress Day 1</b>	63	17%	54	18%
<b>Congress Day 2</b>	46	12%	24	8%
<b>Congress Day 3</b>	6	2%	6	2%
<b>Post-Congress</b>	17	4%	12	4%
<b>TOTAL</b>	<b>379</b>	-	<b>305</b>	-

## Users per day

This graph shows the number of active devices connected to EuroHeartCare 2019 module. One user = one device: if you use the app on your iPad and your iPhone on the same day, you will be counted twice. A user is only counted if he/she undertakes an action within the app (app launch, click of a button, access a map ...).

On the most intensive day – congress day 2 – the app was used on 300 devices, representing 79% of downloads (62% in 2018).



## User behaviour

### Overall functionalities

The three most used functionalities are:

- Access the Daily Schedule (87%)
- Access the Latest Messages section (85%)
- Access Topics/Types & Tracks lists (64%)

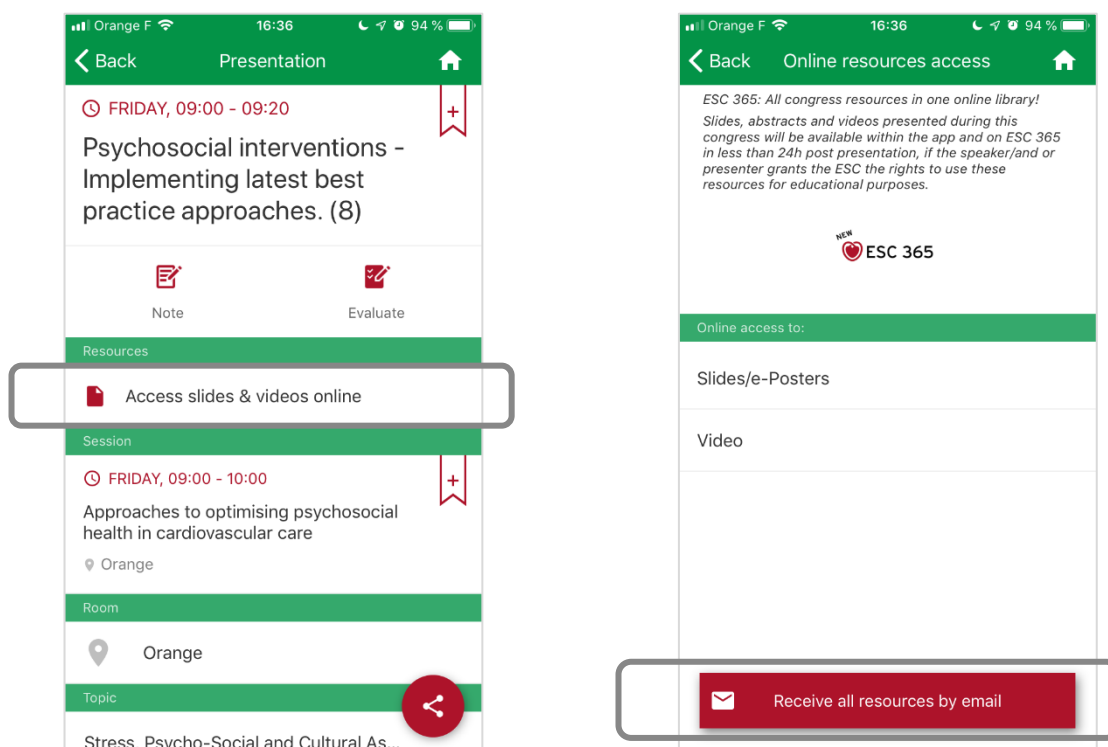
### Mobile App interactive sessions

There were 4 “Mobile App – Vote & Ask a question” sessions. The “vote” functionality has not been during the congress.

- Maximum number of questions asked per session: 2 (“Dietary controversies: the truth about diet “low carbs, fasting and high fat diets”)
- Average number of questions asked per session: 2

### Receive the resources post congress button

This functionality was implemented in 2015 for ESC Congress and was made available for sub-specialty congresses following ESC Congress 2018: when clicking on a presentation, the user has the possibility, by clicking on a dedicated button, to receive an email after the congress which includes the resources (direct link to ESC 365) of the selected presentation.



In total, there were:

- **436** resource requests received from 2 April until 6 June
- **178** resource requests on Friday 3 May (congress day 2)
- **104** unique resources requested
- **33** unique My ESC Account holders hit the “Receive Resources” button and did so for an average of **13** different presentations – median is at 8.

*Note: Resources were made available within 24h of a presentation being given subject to speaker/presenter authorisation.*

The top 10 of most requested presentations is as follows:

	Presentation title	Related session	No. times requested
1	Patient and carer rights and our duties: what every cardiovascular care professional should know.	Patient and carer involvement for better cardiovascular care	13
2ex	Why patient engagement in guideline development is a must for advancing cardiovascular care.	Patient and carer involvement for better cardiovascular care	12
2ex	Group-based lifestyle counselling – a new way for multidisease prevention in public health care.	A new era for cardiac rehabilitation and secondary prevention?	12
4	Key messages to implementing best practice guidelines for atrial fibrillation.	New ESC guidelines: arterial hypertension, cardiovascular diseases during pregnancy, syncope and myocardial revascularization	11
5ex	How to enhance self-efficacy in cardiovascular care.	How to enhance self-efficacy in cardiovascular care	10
5ex	Physical activity: how to assess and prescribe?	Advances in risk factor assessment and management	10
5ex	What does the latest trial data in cardiac rehabilitation say?	A new era for cardiac rehabilitation and secondary prevention?	10
8ex	Assessing risk in CVD patients using calculating risk scores.	Advances in risk factor assessment and management	9
8ex	Optimising medication: challenges in implementing guidelines.	Latest evidence in heart failure management: what is emerging between 2016 and 2021 Guidelines?	9
10ex	Assessment & management of the patients with diabetes and CVD.	Advancing prevention and management of diabetes	8
10ex	Gaming for Health.	Revolutionising cardiovascular care: e-health and telemedicine	8
10ex	Evaluation of the mobile apps for the e- and m-health.	Revolutionising cardiovascular care: e-health and telemedicine	8
10ex	TAVI without anaesthesia, what is the plan?	What is new in the world of TAVI?	8
10ex	Being a person at risk: how to communicate?	Advances in risk factor assessment and management	8
10ex	How to write a successful abstract	How to write a successful abstract.	8

	Presentation title	Related session	No. times requested
10ex	Exactly what can lifestyle achieve in blood pressure and lipid control?	Masterclass - Lifestyle approaches to managing cardiovascular disease	8
10ex	New frontiers in physical activity and cardiovascular disease.	Masterclass - Lifestyle approaches to managing cardiovascular disease	8

### Evaluation form functionality

This year, users were able to evaluate sessions and presentations – possibility to rate (between 1 and 5, 5 being the best rating) and send their comments.

	Sessions	Presentations
<b>Rating - average</b>	4.1	4.3
<b>Rating - median</b>	4	5
<b>Number of unique evaluated items</b>	23	84
<b>Total number of votes</b>	53	205
<b>Number of comments sent</b>	12	48

Most of the comments received were highly positive.

### User behaviour regarding sessions

The top 20 most **popular sessions**

Rank	Session title	No. Views
1	Advances in interventional cardiology	470
2	Revolutionising cardiovascular care: e-health and telemedicine	389
3	Poster Session 1	350
4	Masterclass - Lifestyle approaches to managing cardiovascular disease	327
5	Approaches to optimising psychosocial health in cardiovascular care	308
6	Dietary controversies: the truth about diet – low carbs, fasting and high fat diets	307
7	New ESC guidelines: arterial hypertension, cardiovascular diseases during pregnancy, syncope and myocardial revascularization	307
8	Pre-conference workshop: - Advanced practice: how to implement it into clinical practice and how to generate research	306
9	What is new in the world of TAVI?	303

Rank	Session title	No. Views
10	Patient and carer involvement for better cardiovascular care	299
11	Oral session - Chronic Heart Failure	288
12	Latest evidence in heart failure management: what is emerging between 2016 and 2021 Guidelines?	282
13	Oral abstract session - Doctoral Students	275
14	How to enhance self-efficacy in cardiovascular care	270
15	Poster Session 2	255
16	A new era for cardiac rehabilitation and secondary prevention?	252
17	Moderated poster session - Public health and cardiac rehabilitation	248
18	Special considerations in cardiovascular health	247
19	Inaugural session	243
20	What is new in the prevention and management of arrhythmias?	242

### User behaviour regarding exhibitors

#### Popular exhibitors ranking

Rank	Exhibitor name	No. of views
1	ACNAP - ESC	280
2	BioSenseTek Corp.	38
3	H&S S.p.a.	29
4	SAGE Publishing	29
5	Novartis Pharma AG	15
6	Boehringer Ingelheim and Lilly Diabetes Alliance	14
7	WeHealth by Servier	11
8	Novo Nordisk	9

### User behaviour regarding home menu buttons

#### Overview

Rank	Name	Views	No. of users	Views per user	% of users
1	Daily Schedule	3,574	333	10.7	87
2	Latest Messages	1,906	322	5.9	85
3	My Congress	910	202	4.5	53
4	By Topics	878	243	3.6	64
5	By Types & Tracks	878	243	3.6	64
6	Interact now	732	148	5.0	39
7	Congress Info	553	204	2.7	54
8	Travel & Transport	372	155	2.4	41
9	Exhibition & Industry	233	128	1.8	34

### What users searched for

Top 10 searched items in the mobile app are:

Rank	Searched word	No. of times searched
1	jaarsma	15
2	pucciarelli	14
3	ausili	10
4	stromberg	9
5ex	hendriks, vellone	8
7ex	kato, lambrinou, lauck, luciani, massouh, tavi	7

Top ten most viewed topics/types & tracks

Rank	Topic/Types & Tracks	No. of Views	No. of Times as Favourite
1ex	<i>Special Event</i>	110	3
1ex	CARDIOVASCULAR NURSING	110	2
3	<i>Poster Session</i>	89	0
4	Cardiovascular Nursing	78	0
5	HEART FAILURE	76	1
6	CORONARY ARTERY DISEASE, ACUTE CORONARY SYNDROMES, ACUTE CARDIAC CARE	69	1
7	ARRHYTHMIAS AND DEVICE THERAPY	67	1
8	<i>Moderated Posters</i>	65	0
9	CARDIOVASCULAR DISEASE IN SPECIAL POPULATIONS	62	1
10	<i>Abstract Session</i>	57	0

Top ten most viewed speakers/presenters

Rank	Name	No. of Views↓	No. of Times as Favourite
1	E. Lambrinou (Limassol, CY)	17	0
2ex	JL. Jones (Uxbridge, GB)	15	0
2ex	L. Hinterbuchner (Bergheim, AT)	15	0
4ex	B. Borregaard (Odense, DK)	11	0
4ex	D. Ausili (Monza, IT)	11	0
6ex	B. Borregaard (Odense C, DK)	10	0
6ex	E. Vellone (Rome, IT)	10	0
8	R. Juarez-Vela (Logrono, ES)	9	1
9ex	C. Ross (Craigavon, GB)	8	1
9ex	T. Hansen (Copenhagen, DK)	8	0
9ex	T. Jaarsma (Norrkoping, SE)	8	0
9ex	T. Quinn (London, GB)	8	0



## Most read messages

Top ten most read messages

Rank	Message	Date sent	Views ↓	No. of users	Views per user	% of users
1	Our tips to make the most of the congress	29 Apr 2019 10:00	187	137	1.4	36
2	Connect to congress free wifi	2 May 2019 14:00	179	138	1.3	36
3	EHC 2019 abstracts are now available through this app	26 Apr 2019 14:00	160	128	1.3	34
4	Welcome to your congress app	02 Apr 2019 12:00	157	130	1.2	34
5	Pick up your Gift!	03 May 2019 12:00	141	121	1.2	32
6	Young Community Launch Event	03 May 2019 10:00	132	118	1.1	31
7	Get your lunchbox	03 May 2019 09:30	132	121	1.1	32
8	Get a head start: registration is open tomorrow	01 May 2019 14:00	132	110	1.2	29
9	It's time to learn!	03 May 2019 06:00	128	108	1.2	28
10	To reject or to accept, that's the question	03 May 2019 08:45	127	117	1.1	31

## ACNAP section

Rank	Section	Views ↓	No. of users	Views per user	% of users
1	Education	55	37	1,5	10
2	Membership	51	43	1,2	11
3	Visit our Stand	48	37	1,3	10
4	About ACNAP	46	40	1,2	11

### 10.4.4 Promotion of the App

#### In stores

The ESC Congresses mobile app is distributed via 2 channels: the App Store® and the Google Play store. The EuroHeartCare congress content was available as of **2 April 2019**.

## **On the ESC website**

The app was promoted in the [“Your attendance guide” webpage](#); this web page gave users the links to the app stores to push downloads.

## **E-Campaigns**

The mobile app was also promoted in congress related e-campaigns.

E-campaigns	Sent on	# of recipients	Open rate	No. of downloads on that day
Congress e-campaign – Register now to save	8 March	56,567	31%	-
Congress e-campaign – Get ready for Milan	25 April	417	62%	+21
Congress e-campaign - eDaily news - day 1	3 May	425	49%	+46

## **On printed/online elements**

- In the Final Programme and Programme at a glance
- On-site signage in the registration area

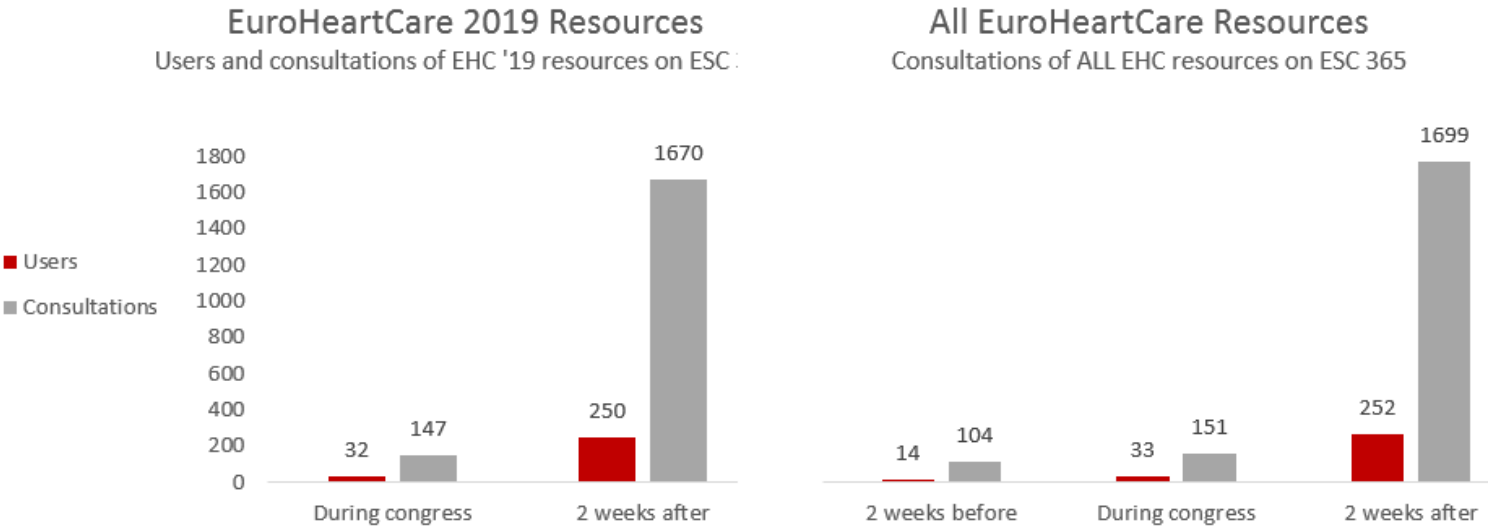
## **7.5 Banners**

Electronic banners were created in different formats and displayed on:

ACNAP Bulletins, My ESC News, other association bulletins, online journals

7.6 ESC 365

During EuroHeartCare 2019, 33 users consulted 151 EuroHeartCare scientific resources on the ESC 365 platform. 147 (97.3%) of these consultations were of scientific resources from EuroHeartCare 2019. EuroHeartCare 2019 Congress resources remain free to all for 3 months post-congress before becoming an ACNAP member benefit. Scientific resources from previous EuroHeartCare Congresses are an ACNAP member benefit. There has been continued high usage of ESC 365 in the 2 weeks post-congress with 252 individual users consulting nearly 1700

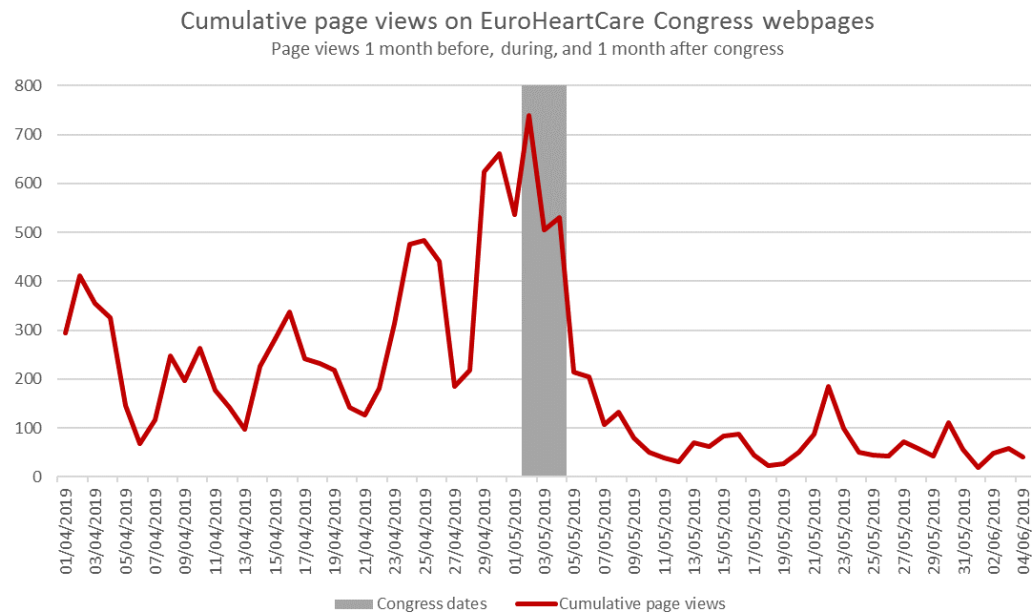


scientific resources from EuroHeartCare congresses.

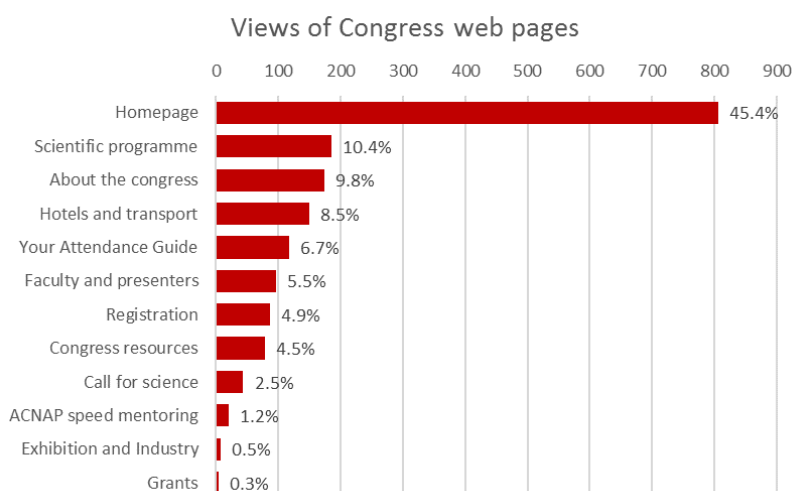
7.7 Webpages

Total views of EuroHeartCare Congress web pages during congress (2-4 May 2019): 1,774

Day 1: 739  
Day 2: 505  
Day 3: 530



The most visited page during the congress was the EuroHeartCare Congress homepage with **806** views (45.4% of total views).



## 7.8 Miscellaneous

### Marketing page

<https://www.escardio.org/Marketing/EuroHeartCare2019>

A marketing page was created on 6 February 2019 and the link was included in ACNAP and other association Bulletins, EuroHeartCare ecampaigns and My ESC News.

766 pageviews

## 8. Press

### 8.1 Key numbers

Press coverage	Date	Articles	Top Coverage
EuroHeartCare 2019	1-4 May 2019	454	<a href="#">La Depeche</a>
<a href="#">“I’m here for breast cancer. Why are you talking to me about my heart?”</a>	4 May 2019	91	<a href="#">Science Daily</a> <a href="#">MedicalXpress</a>

<a href="#">Exercise may improve memory in heart failure patients</a>	<b>4 May 2019</b>	95	<a href="#">Giornale Trentino</a>  <a href="#">Correio Braziliense</a>
<a href="#">Avoid smoky environments to protect your heart</a>	<b>3 May 2019</b>	153	

## **8.2 Coverage analysis**

EuroHeartCare 2019 received a very satisfactory coverage considering the size of the congress (486 attendees). With 3 press releases issued we collected 454 press articles and reached Europe, USA, and Arabic countries both in medical and lay news outlets.

One press release in particular: “Avoid smoky environments to protect your heart” highlighting the danger of secondhand smoke was covered by major lay news outlets like Correio Braziliense or NDTV and reaching a large audience in Brazil and India.

### 8.3 Trending keywords

## WORD CLOUD BY KEYWORDS





## VOLUME - SPLIT BY LANGUAGE



8.4 Clippings

Outlet: NDTV, India





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TRENDING


Top 5 Protein Bars That Can Be Made At Home For Weight Loss

Weight Loss: 4 Tips That Can Speed Up Recovery After A Workout


These 4 Mistakes On A Protein-Rich Diet Can Ruin Your Weight Loss Goals


Energy Drinks Can Be Bad For Your Heart! Here's Why You Should Avoid Them

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Message

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Home » Living Healthy » To Prevent High Blood Pressure, Avoid Passive Smoking At Home And Workplace

## To Prevent High Blood Pressure, Avoid Passive Smoking At Home And Workplace

High blood pressure: Passive smoking at home or work has been found to be linked with a 13% increased risk of hypertension.

Updated: May 4, 2019 10:29 IST By: IANS 2-Min Read

SHARES      




Image credit: istockphoto.com/Nastco

The study found the link between high blood pressure and secondhand smoking

Living with a smoker after age 20 is associated with a 15 per cent greater risk of developing high blood pressure, warn researchers, adding that avoiding smoky environments can reduce the risk of hypertension.

Passive smoking at home or work was linked with a 13 per cent increased risk of hypertension.

Exposure to passive smoking for 10 years or more was related to a 17 per cent increased risk of hypertension and men and women were equally affected, said the researchers at "EuroHeartCare 2019", a scientific congress of the European Society of Cardiology in Milan, Italy on Friday.







## Science News

from research organizations

### Exercise may improve memory in heart failure patients

Date: May 4, 2019

Source: European Society of Cardiology

Summary: Two-thirds of patients with heart failure have cognitive problems, according to new research.

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##### Mind & Brain

- › Dementia
- › Stroke
- › Intelligence
- › Behavior

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#### FULL STORY

Two-thirds of patients with heart failure have cognitive problems, according to research presented today at EuroHeartCare 2019, a scientific congress of the European Society of Cardiology (ESC).<sup>1</sup>

Heart failure patients who walked further in a six-minute test, which shows better fitness, as well as those who were younger and more highly educated, were significantly less likely to have cognitive impairment. The results suggest that fitter patients have healthier brain function.

Study author Professor Ercole Vellone, of the University of Rome "Tor Vergata," Italy, said: "The message for patients with heart failure is to exercise. We don't have direct evidence yet that physical activity improves cognition in heart failure patients, but we know it improves their quality and length of life. In addition, studies in older adults have shown that exercise is associated with improved cognition – we hope to show the same for heart failure patients in future studies."

The cognitive abilities that are particularly damaged in heart failure patients are memory, processing speed (time it takes to understand and react to information), and executive functions (paying attention, planning, setting goals, making decisions, starting tasks).

"These areas are important for memorising healthcare information and having the correct understanding and response to the disease process," said Professor Vellone. "For example, heart failure patients with mild cognitive impairment may forget to take medicines and may not comprehend that weight gain is an

Home / Cancer  
Home / Cardiology



f 4

t 3

in Share

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🕒 MAY 4, 2019

## 'I'm here for breast cancer. Why are you talking to me about my heart?'

by European Society of Cardiology

Many physicians are not telling cancer patients about the cardiotoxicity risks of treatments and may not be fully aware of the dangers themselves. A new study reveals an urgent need to look after the hearts of these patients. The research is presented today at EuroHeartCare 2019, a scientific congress of the European Society of Cardiology (ESC).



"There was no mention that it could lead to heart disease. Would have been nice to know."


The growing number of cancer survivors and increasing number of over-65s needing chronic cancer therapy mean that the need for cardio-oncology services is rising. Heart failure caused by cancer therapy can occur up to 20 years after treatment. In 2012 over

32 million people worldwide were living with cancer.

"Depending on the type of chemotherapy and radiotherapy, between 1% and 25% cancer patients may develop heart failure due to cancer treatment," said study author Professor Robyn Clark, of Flinders University, Adelaide, Australia. "Risk also depends on cardiovascular risk factors such as smoking and obesity. Better monitoring of the heart and intervention before, during and after treatment can prevent or lessen the impact of this cardiotoxicity."

The researchers reviewed medical records of 46 randomly selected cancer patients with cardiotoxicity who attended one of three hospitals between 1979 and 2015. Just 11% were referred to a cardiologist before chemotherapy and less than half (48%) were referred to a heart failure clinic after cancer treatment. Almost 40% were overweight or obese, 41% were current or ex-smokers, 24% were regular consumers of alcohol, 48% had hypertension, and 26% had diabetes.

In a subset of patients, practice was compared before (1994-2011) and after (2012-2015) the 2012 European Society for Medical Oncology guidelines were published. Referral to a cardiologist before chemotherapy rose from 0 to 23% and conducting a baseline echocardiogram of the heart increased from 57% to 77%.



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Home » Living Healthy » Weight Loss: Exercise Helps Boost Memory In Heart Failure Patients




## Weight Loss: Exercise Helps Boost Memory In Heart Failure Patients

During the research, the "Montreal Cognitive Assessment" test was used to measure cognitive function and exercise capacity was measured with a six-minute walk test.

Updated: May 5, 2019 10:15 IST By: IANS

SHARES








Image Credit: istockphoto.com/Dirima

Exercising is important for people with heart ailments.

Heart patients who exercise regularly and have better fitness are likely to have less cognitive impairment, says a study. Fitter patients have better memory, it adds.

"The message for the patients with heart failure is to do exercises," said study author Ercole Vellone, Professor at University of Rome Tor Vergata, Italy.

The study analysed data from over 600 male patients, aged 67-71 years, with heart failure from six countries. During the research, the "Montreal Cognitive Assessment" test was used to measure cognitive function and exercise capacity

59



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Des médecins alertent sur  
l'urgence de surveiller le cœur  
des patients atteints de cancer

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Les traitements administrés pour traiter le cancer ont des conséquences sur la santé cardiaque des patients, rappelle une étude présentée samedi 4 mai dans le cadre du congrès de la Société européenne de cardiologie.

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"Selon le type de chimiothérapie et de radiothérapie, entre 1% et 25% des patients atteints d'un cancer peuvent développer une insuffisance cardiaque due au traitement anticancéreux".

L'insuffisance cardiaque causée par le traitement du cancer peut survenir jusqu'à 20 ans après le traitement, expliquent les scientifiques à l'origine de l'étude. "Selon le type de chimiothérapie et de radiothérapie, entre 1% et 25% des patients atteints d'un cancer peuvent développer une insuffisance cardiaque due au traitement du cancer", a rappelé Robyn Clark, professeure à l'université Flinders (Adélaïde, Australie) et autrice principale de l'étude présentée lors du congrès EuroHeartCare 2019.

L'équipe de la Pr Clark a examiné les dossiers médicaux de 46 patients atteints

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Sei in: **Salute e Benessere** » Fino a 1/4 malati cancro può avere...

## Fino a 1/4 malati cancro può avere problemi cuore per chemio

06 maggio 2019 A- A+

(ANSA) - ROMA, 6 MAG - A seconda del tipo di chemio e radioterapia, dall'1% al 25% dei malati di cancro può sviluppare problemi al cuore a causa dei trattamenti oncologici. Un rischio però di cui i pazienti spesso non vengono informati dai medici. Il problema è stato presentato dai ricercatori australiani della Flinders university al congresso della Società europea di cardiologia in corso a Milano. I problemi cardiaci causati dai trattamenti oncologici possono presentarsi anche 20 anni dopo dalla loro fine. "Il rischio dipende anche da altri fattori di pericolo cardiovascolari, come il fumo e l'obesità - sottolinea il ricercatore Robyn Clark - Un miglior monitoraggio del cuore e degli interventi prima, durante e dopo la terapia può prevenire, o ridurre l'impatto della tossicità dei farmaci di radio e chemioterapia per il cuore". Gli studiosi hanno rivisto i dati medici di 46 malati di cancro, selezionati casualmente, con problemi di cardiotossicità, e seguiti in ospedale tra il 1979 e 2015, scoprendo che solo l'11% era stato mandato dal cardiologo prima della chemioterapia, e che meno della metà era stato indirizzato ad una struttura cardiologica dopo la terapia. Quasi il 40% era sovrappeso o obeso, il 41% fumatore o ex-fumatore, il 24% consumava regolarmente alcol, il 48% soffriva di ipertensione e il 26% di diabete. Per un sottogruppo di pazienti, sono stati confrontati i dati prima e dopo la pubblicazione nel 2012 delle linee guida della Società europea di oncologia medica, osservando che i pazienti inviati ad un cardiologo prima della chemioterapia erano saliti dallo 0 al 23%, e che l'esecuzione di un ecocardiogramma era passata dal 57% al 77%. I pazienti, secondo le raccomandazioni della Società europea di cardiologia, andrebbero informati dei rischi per il cuore prima di iniziare il trattamento, in modo da smettere di fumare, mangiare sano, fare esercizi, controllare il peso e segnalare segni o sintomi di problemi cardiovascolari. (ANSA).



**Foto**

**TOP VIDEO**



Kim fa fucilare staff per fallimento vertice con Trump - Vid...



Donna muore incastrata sotto convoglio metro a Roma - Video -...



La neve si scioglie e le marmotte si risvegliano dal letargo...decisa...



Lazfons, le fiamme distruggono il maso - Locale -...

da Tebbole

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Auto Moto

da Tebbole

**Video**

Una 'cuffia' riduce lo



# Fumaça do cigarro aumenta o risco de hipertensão, aponta pesquisa

Estudo com mais de 131 mil fumantes passivos mostra que a condição amplia, em média, em 13% a possibilidade de desenvolver hipertensão, resultado reforça a importância de diversificar medidas de combate ao tabagismo

**VS** Vilhena Soares

postado em 08/05/2019 06:00 / atualizado em 07/05/2019 22:12



Estudos têm mostrado que a condição de fumante passivo também é uma ameaça à saúde. Pesquisadores coreanos acabam de revelar uma consequência da exposição indireta ao cigarro que a torna ainda mais preocupante: há aumento significativo no risco de surgimento de hipertensão, doença crônica responsável por infartos, derrames e insuficiência renal. Detalhes do trabalho inédito foram apresentados no EuroHeartCare 2019, um congresso científico da Sociedade Europeia de Cardiologia (ESC), realizado, na semana passada, em Milão, na Itália.

No estudo, foram analisados 131.739 indivíduos — um terço deles do sexo masculino — que nunca haviam fumado e com idade média de 35 anos. Os cientistas analisaram os níveis de cotinina — principal metabólito da nicotina — presentes na urina dos voluntários e os correlacionaram com informações sobre saúde cardiológica. Como resultado, concluíram que o tabagismo passivo em casa ou no trabalho está associado ao aumento médio de 13% no risco de hipertensão.



**Brasileiro:**



Pa  
At  
Br

## MAIS LID.

- 1 07/00 - 22/02/19  
[Sinusite por coronavírus pode ser in](#)
- 2 08/10 - 09/08/19  
[Mães recebem dicas para afastar dos](#)
- 3 08/18 - 15/05/19  
[Distúrbio de atenção e hiperatividade](#)
- 4 08/00 - 12/06/19  
[Cérebro interpreta realidade](#)
- 5 07/00 - 02/06/19  
[Estudo mostra que a maioria dos](#)

## BLOGS





PROFITEZ DES MOIS CANONS

Du 1er mars au 30 avril 10€ DE RÉDUCTION Pour l'achat d'un Amincissant 7 Nuits

J'en profite

Somatoline Cosmétique

## Des médecins alertent sur l'urgence de surveiller le cœur des patients atteints de cancer

SANTÉ

Publié le 06/05/2019



"Selon le type de chimiothérapie et de radiothérapie, entre 1% et 25% des patients atteints d'un cancer peuvent développer une insuffisance cardiaque due au traitement anticancéreux" © Peopleimages / iStock.com



(Relaxnews) - Les traitements administrés pour traiter le cancer ont des conséquences sur la santé cardiaque des patients, rappelle une étude présentée samedi 4 mai dans le cadre du congrès de la Société européenne de cardiologie.

L'insuffisance cardiaque causée par le traitement du cancer peut survenir jusqu'à 20 ans après le traitement, expliquent les scientifiques à l'origine de l'étude. "Selon le type de chimiothérapie et de radiothérapie, entre 1% et 25% des patients atteints d'un cancer peuvent développer une insuffisance cardiaque due au traitement du cancer", a rappelé Robyn Clark, professeure à l'université Flinders (Adélaïde, Australie) et autrice principale de l'étude présentée lors du congrès [EuroHeartCare 2019](#).

L'équipe de la Pr<sup>o</sup> Clark a examiné les dossiers médicaux de 46 patients atteints de cancer cardiotoxique sélectionnés au hasard admis à l'hôpital entre 1979 et 2015. Seulement 11% ont été référés à un cardiologue avant la chimiothérapie et moins de la moitié (48%) ont été orientés vers une clinique spécialisée en cardiologie après le traitement de leur cancer.

Près de 40% étaient en surpoids ou obèses, 41% étaient des fumeurs ou d'anciens fumeurs, 24% étaient des consommateurs réguliers d'alcool, 48% souffraient d'hypertension et 26% étaient diabétiques. Des profils qui correspondent tous à des facteurs de risques cardiovasculaires.

### Une surveillance avant, après et pendant le traitement

Onze des patients qui ont participé à l'étude ont été interrogés sur leurs habitudes de vie. Plus de la moitié d'entre eux a expliqué avoir commencé à manger sainement après leur diagnostic de cancer, mais ne semblaient toutefois pas comprendre l'importance d'une alimentation équilibrée.

### LIRE LE JOURNAL



#### NOUVELLE GAMME

Une expertise pharmaceutique réaffectée cliniquement

Somatoline Cosmétique

### LES + PARTAGÉ

1

**Santé** En voyage conseils à garder cas de morsure d

2

**Le saviez-vous ?** jeudi 30 mai est-i

3

**Société** Fin de vie servent les direct anticipées et corr écrire ?

4

**Santé** Un appel lancé pour la Box Franche-Comté, de sang du group

5

**Santé** Le nombre régresse mais la au tabac ne dimi



# Un estudio revela la necesidad urgente de cuidar los corazones de los pacientes con cáncer

- Hasta un 25% de pacientes que recibe tratamiento oncológico desarrolla algún grado de cardiotoxicidad, que puede llegar a ser muy grave



Existe la necesidad urgente de cuidar los corazones de estos pacientes. - Archivo

R. I.

@abc\_salud

Madrid - Actualizado: 05/05/2019 18:57h

Es posible que muchas personas que están recibiendo tratamiento para el cáncer **no tengan información suficiente sobre los efectos tóxicos de algunas terapias sobre el corazón**. La responsabilidad, en muchas ocasiones, no es de los médicos porque muchos ignoran la importante cardiotoxicidad de algunos tratamientos. Por ello, un nuevo estudio presentado en [EuroHeartCare 2019](#), el congreso científico de la [Sociedad Europea de Cardiología](#) (ESC), revela la necesidad urgente de cuidar los corazones de estos pacientes.

El cada vez mayor número de supervivientes a un cáncer y el creciente número de personas mayores de 65 años que necesitan terapia crónica contra el cáncer muestra una necesidad urgente: **la necesidad de servicios de cardio-oncología**.

## NOTICIAS RELACIONADAS

El síndrome de 'corazón roto' puede originarse en el cerebro

## LO MÁS LEÍDO EN LA VOZ DIGITAL

Salud

La Voz Digital

- 1 La última generación de antiandrógenos rescata a los pacientes con cáncer de próstata con metástasis



- 2 Las carnes rojas y blancas son igual de malas para el colesterol



- 3 Un hombre sufrió una erección de nueve días tras un accidente de moto



- 4 Ibuprofeno, paracetamol, antiácidos, vitaminas... Los riesgos de los medicamentos sin receta más utilizados



- 5 La mitad de los pacientes que tienen un implante desarrollan una enfermedad periimplantaria



## ULTIMOS VIDEOS



**Dos paracaidistas británicos repiten el salto que hace 75 años realizaron sobre las tropas nazis**



Expectación mediática ante la llegada de



Granada celebra por todo lo alto el ascenso a



## 9. Survey

### 12.1 Introduction

The survey was sent to 373 delegates attendees (who opted in for the emails communication) to collect their feedback. The objectives of the survey are:

- General feedback on congress organisation
- Future expectations

This survey was sent out on May 4th, at the end of the congress in order to reach the delegates as soon as possible and to have the highest possible quality of responses.

The survey obtained an outstanding response rate of 40.75% for the overall audience (152 individuals).

As a reference, the response rate for the previous post-congress survey in 2017 was 26.32% (55 individuals).

### 12.2 Overall feedback from email question



**EuroHeartCare** 2-4 May – Milan, Italy

**Thank you for attending EuroHeartCare 2019.**

We hope you had time to experience the best of the congress during scientific sessions as well as the lounge and exhibitions areas.

Your experience and feedback are especially important to us, so please take this short survey.

 It was great       It was OK       It was poor

All comments and suggestions will help us improve your experience at EuroHeartCare 2020 next year in Seville, Spain from 4 to 6 June, 2020.

Thank you for your time.

The EuroHeartCare Team

 **ESC**

Our Diversity is Our Strength

Once again, this year we have an impressive open rate and click rate, with an 62.19% open and 41.82% click.

This first question gives us the general feeling of respondents concerning EuroHeartCare 2019.



<b>55.3%</b>	<b>16.5%</b>	<b>1.8%</b>
<b>114</b>	<b>34</b>	<b>5</b>

(\* the remaining 17.7% clicked on other links such as social media, etc)

Of all respondents, 55.3% rated the congress overall as 'great' and 16.5% rated it 'OK'. Only a very small percentage of respondents, 1.8%, representing 5 persons have responded it was "poor".

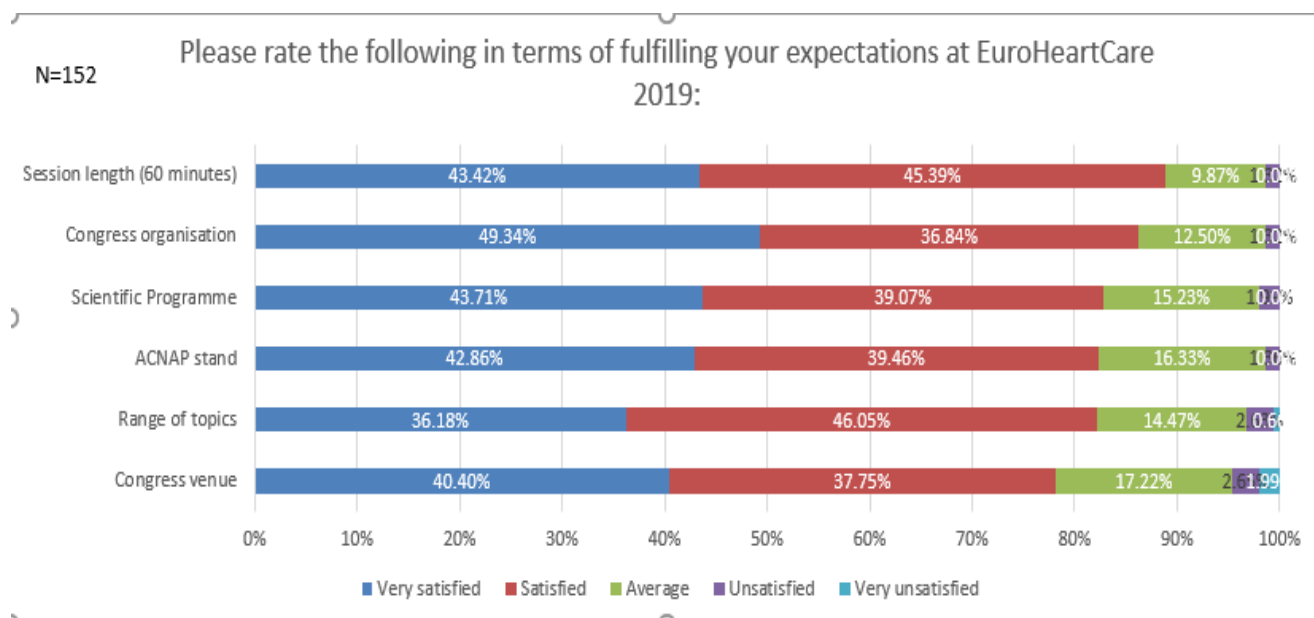
In order to present the findings of this survey we have categorised this report into 6 sections:

- 1/ Overall Congress Satisfaction and experience
- 2/ Delegate' satisfaction with the scientific programme
- 3/ Awareness and funding experience
- 4/ ACNAP members
- 5/ Delegates' profile
- 6/ Delegates' comments

### 12.3 Delegate satisfaction with congress

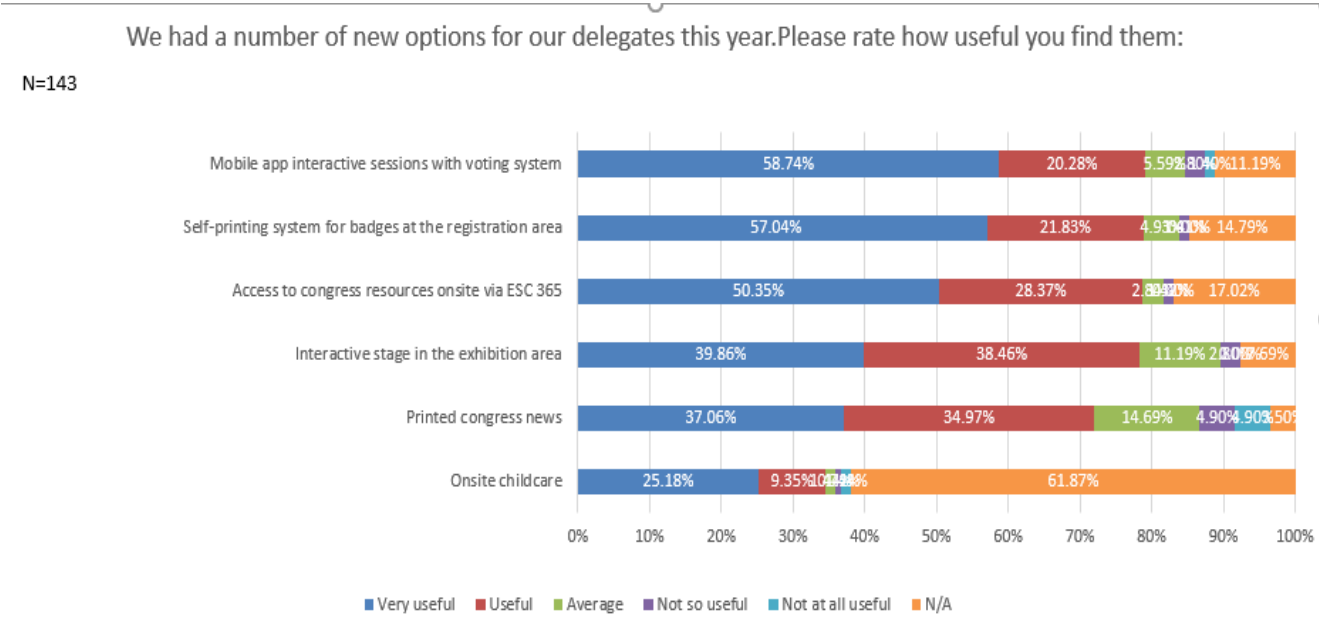
The general level of satisfaction of attendees this year is 83.41% "very satisfied and satisfied". (Method: average of sums of "Very satisfied" and "satisfied" of each item)

The level of satisfaction has slightly decreased compared with last year (2018 87.94 %).



The respondents are mainly satisfied with all the items listed. Compared with last year, new items have been added such as "Session length" which is an item that the respondents are the most satisfied with (88,81%). It is interesting to see the number of respondents in % who choose "average" for each item. There is probably room for improvement for each item in order to convert those figures into "satisfied" or "very satisfied".

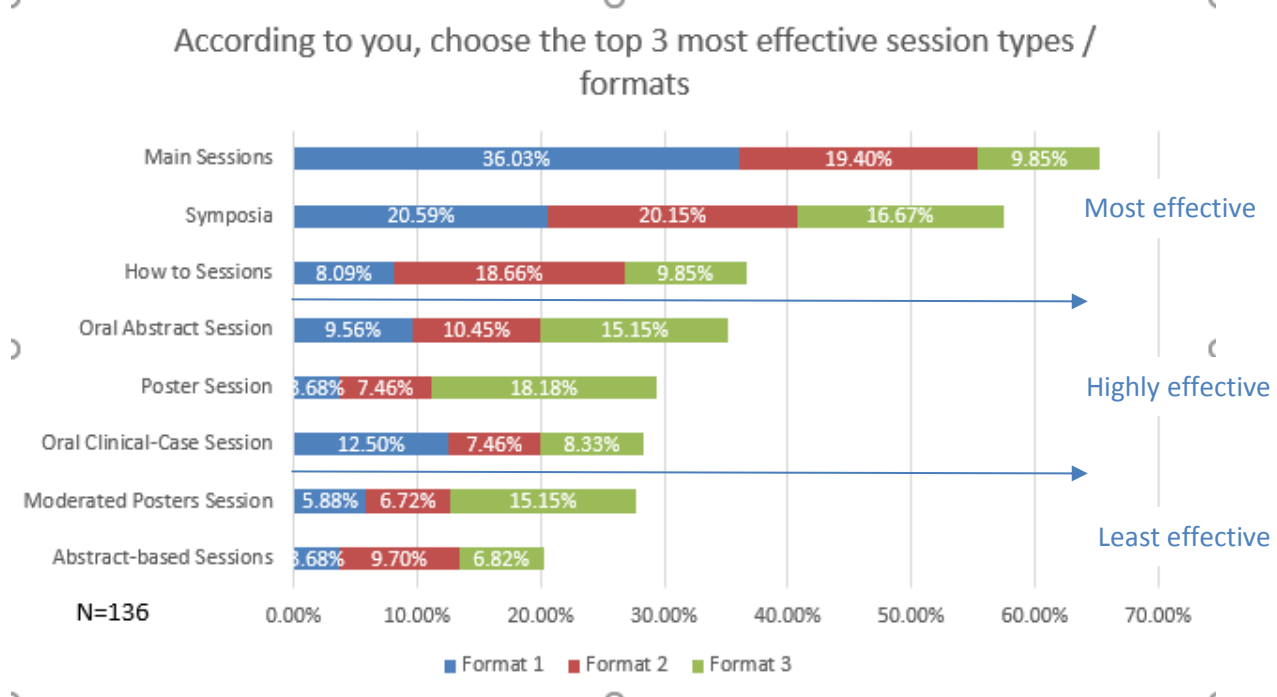
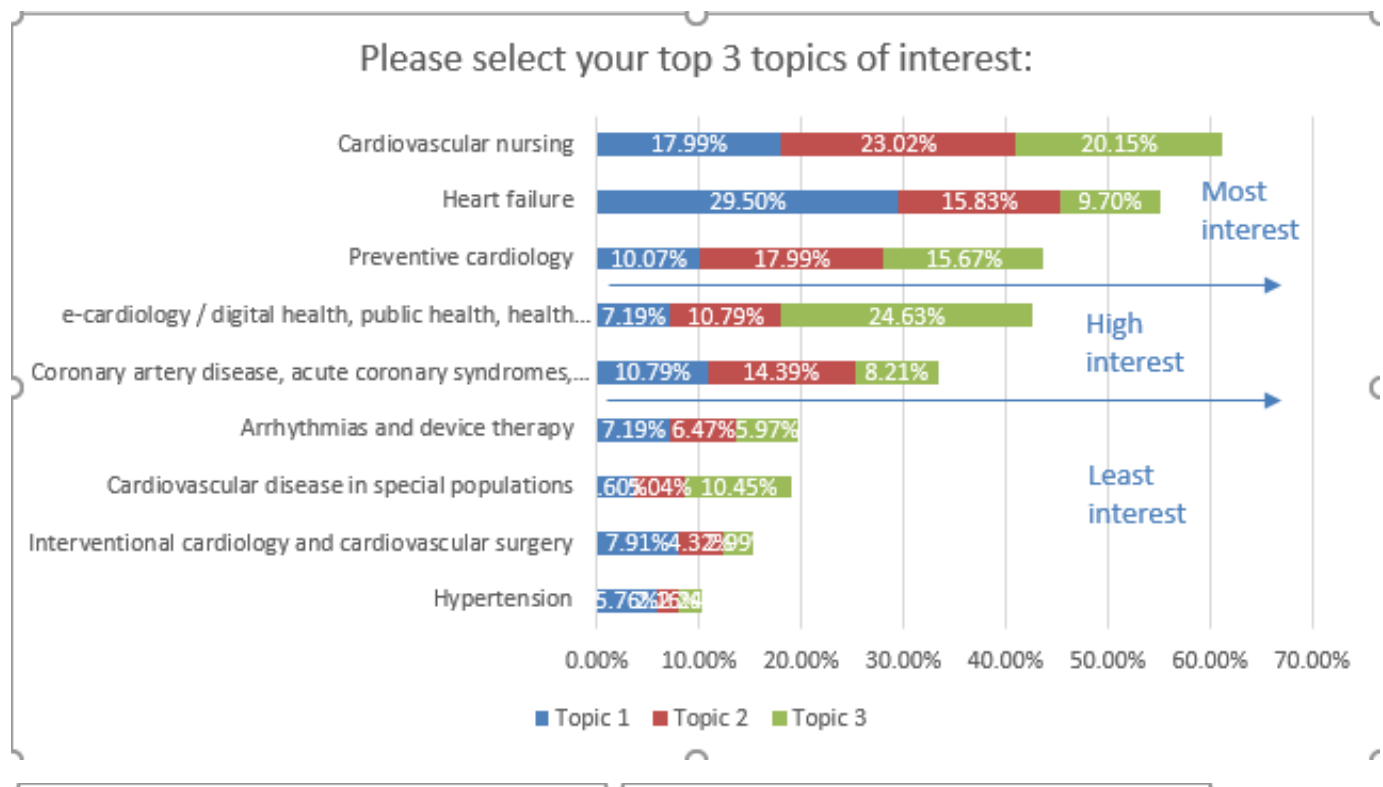
For the first edition of EuroHeartCare held by an Association, new features have been implemented during the congress for the delegates. We asked them to give their feedback regarding those new features.



The item has been sorted combining the mean of “Very Useful” and “Useful”. The 4 items “Mobile app interactive session with voting system”, “Self-printing system for badges at the registration area”, “Access to congress resources onsite via ESC365” and “interactive stage in the exhibition area” are definitely the most useful items selected by the respondents with broadly the same percentage of responses. 14,69 % of the respondent judge the usefulness of “the printed congress news” as “Average”.

12.4 Delegates satisfaction with Scientific programme

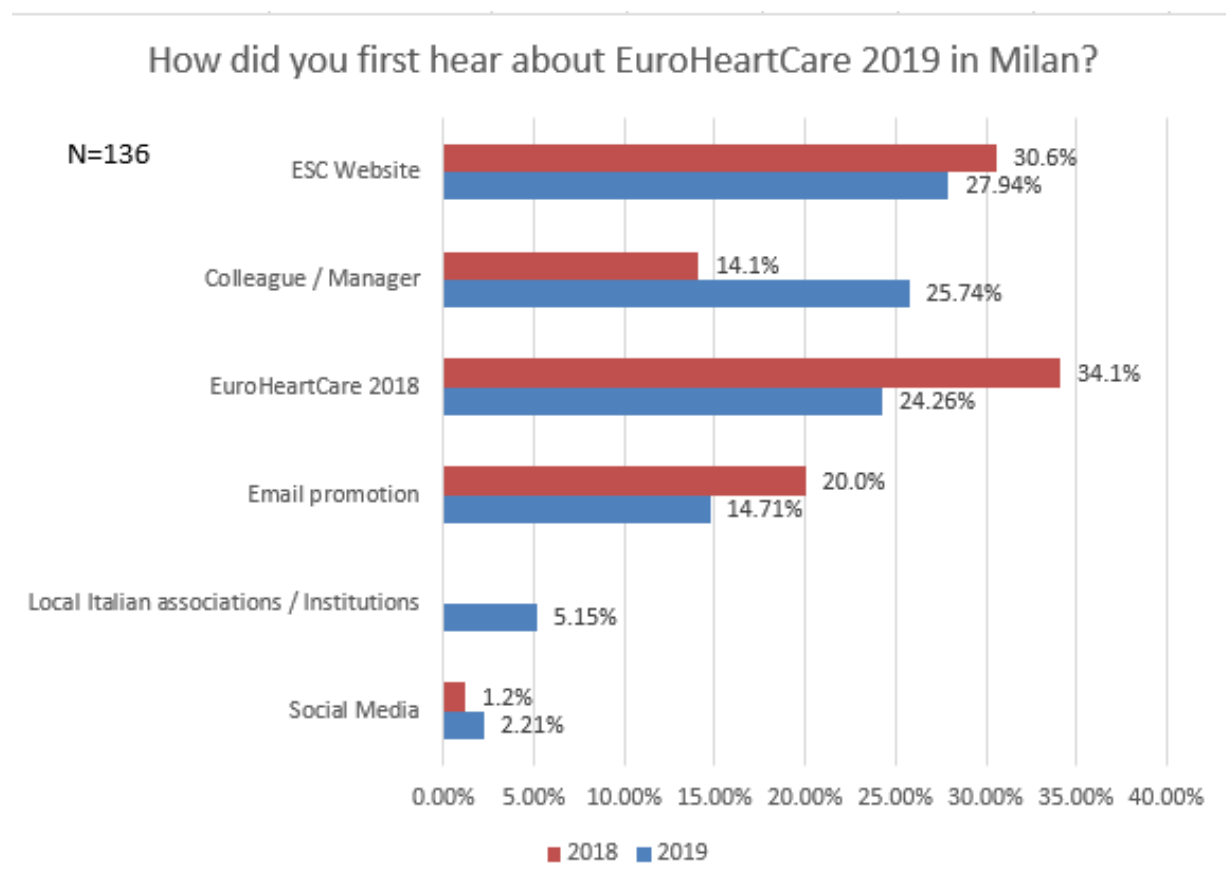
We asked the delegates to select their top 3 topics. Unsurprisingly “Cardiovascular nursing” is the most selected topic. We sorted them by “Most interest”, “High interest” and “Least interest”. Last year we asked broadly the same question but with some different options but Heart Failure was the topic with “Most interest”.



This year we asked the delegates which of the types of format are the most effective. “Main sessions” is considered the most effective by the respondents. We divided the responses into “Most effective”, “Highly effective” and “Least effective”.

In order to measure the impact of our communication for EuroHeartCare, we asked the delegates how they heard about the congress.

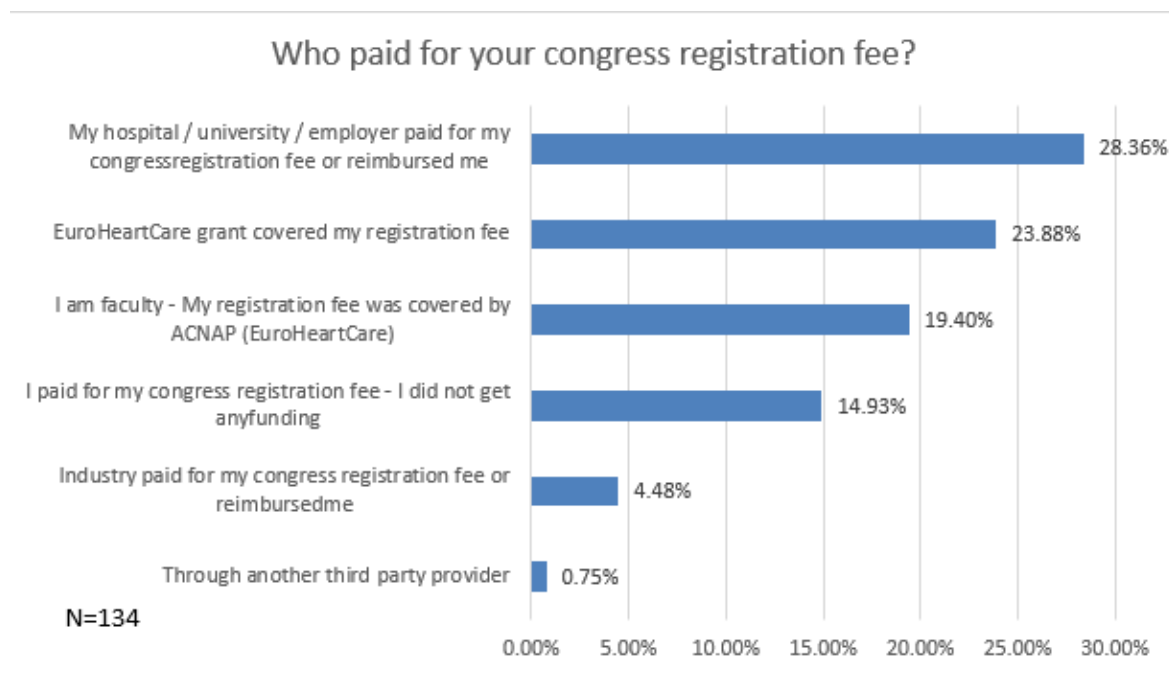
## 12.5 Awareness and funding experience



*Note: The option “Local Italian associations/ Institutions” was not proposed in EuroHeartCare 2018 post congress survey.*

Compared to last year the figures are slightly different. This year “ESC website” got the highest percentage compared to last year where delegates heard more about the EuroheartCare 2018 during the 2017 edition. It is interesting to see the increase between 2018 and 2019 for “Colleague/ Manager” option. Word of mouth seem to be an interesting way of communication and we should keep pushing people to spread the word.

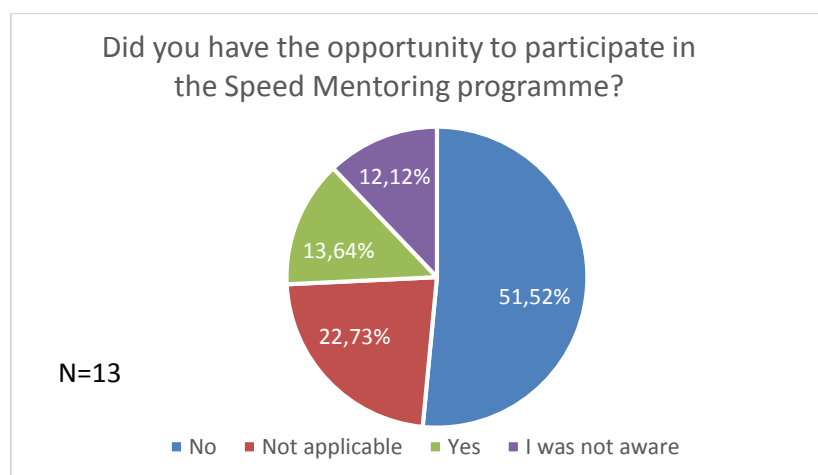
In order to have more details on delegate source of funding, we asked them to specify how they paid for their registration.



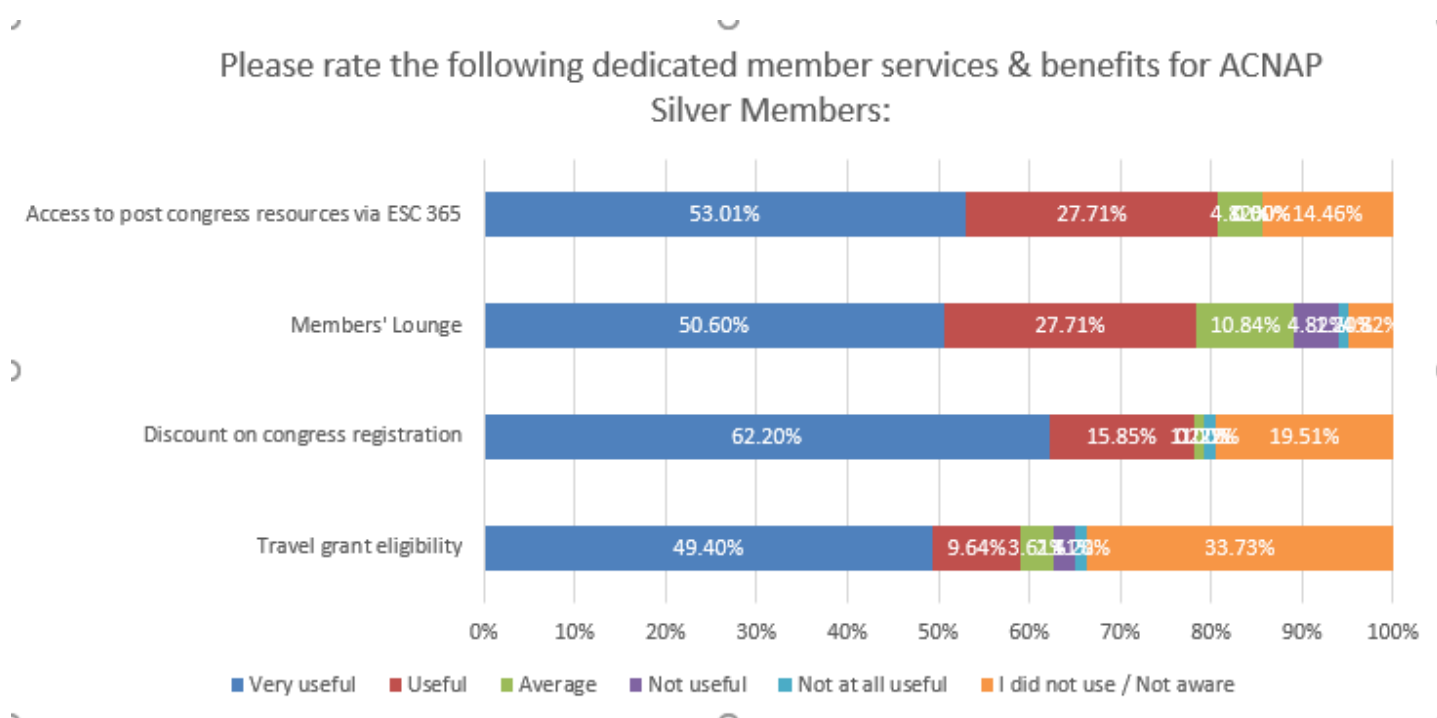
This year, the registration fee seems to be mostly covered by Hospital, University or Employer compare to other congresses. Thanks to the new grant opportunities this year, 23,88 % of the respondents had their fee covered by the “EuroHeartCare” grant. Compared to last year there are fewer delegates who paid for their own registration (28,2% in 2018).

## 12.6 ACNAP Members

We also asked some questions specifically for Silver Members



We also wanted to get their feedback on their benefits.



By adding together “Very useful” and “Useful” we can see that respondents consider “Access to post congress resources via ESC 365” and “Members Lounge” as most useful but monetary benefits seem to be the most important element considering the fact that Nurses have less revenue than the average health care professional specialising in cardiology.

For those who are not members we asked them what the main reason were for not becoming a Member.

15,50% (20 respondents) of the respondents consider that the current benefits are not attractive and 22,48% (29 respondents) were not aware of the membership offer. A comment box was available to give other reasons which has been filled out by 80 respondents: most of them just commented that it is not applicable to them because they are already members. A very few of them shared with us other reasons:

“I was a silver member according to my badge, but I don’t know why, I didn’t pay for that...”

“Well I do NOT know if I am a Member or not”

“Already Fellow of ESC”

“It's expensive”

“I am an ESC Fellow already - why is this not incorporated?”

“It is not paid by the hospital”

## 12.7 Delegate Profile

Please note that those figures come from a question included in the survey



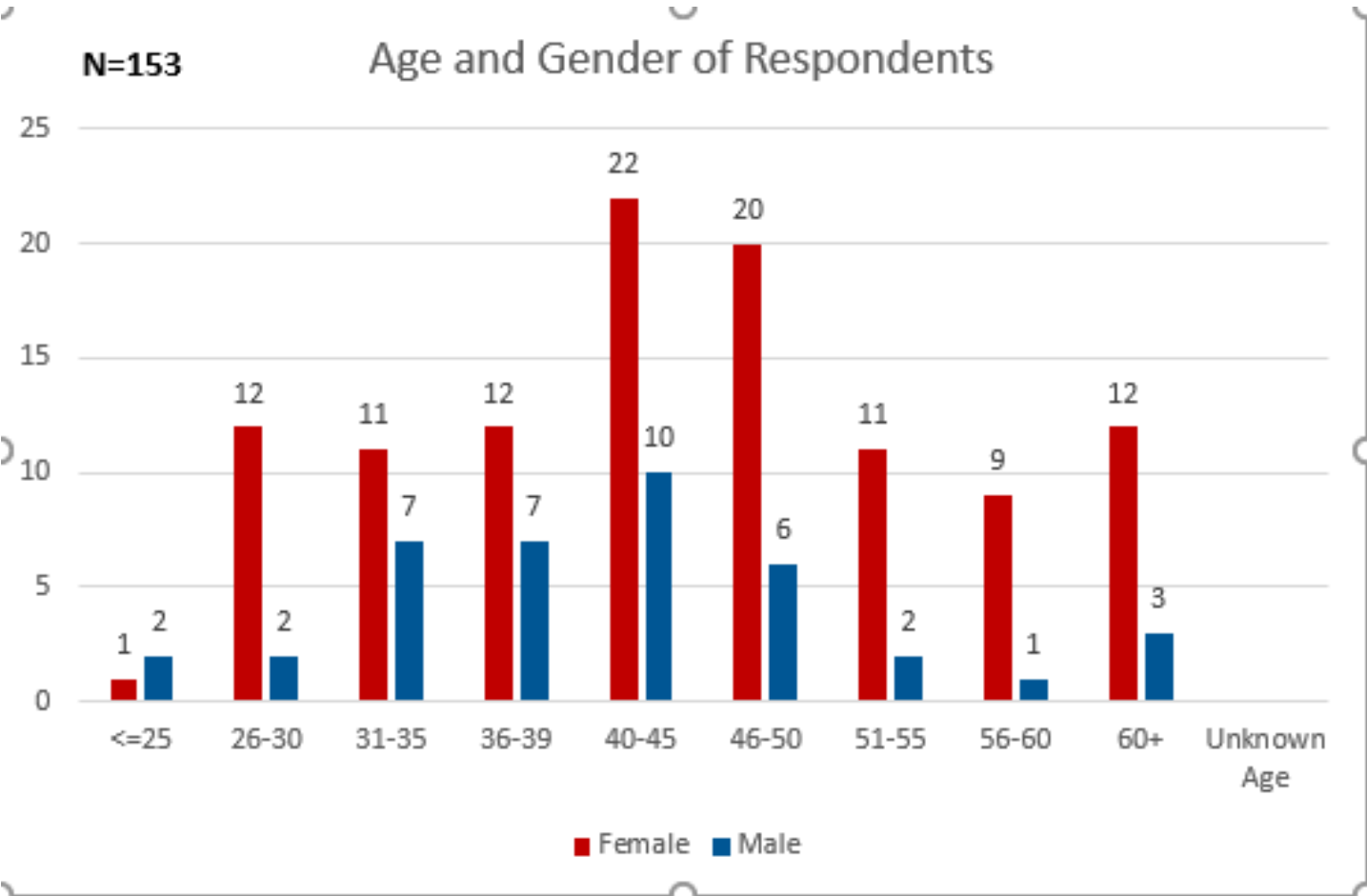
With no surprise most of the respondent are Nurses. We asked also to respondent to specify which allied profession they are practicing. 22 respondent mentioned their speciality as follow:

"Occupational Therapist"  
"Pharmacist"  
"Doctor"  
"pharmacist"  
"Exercise scientist"  
"Physiotherapist"  
"Physiotherapist"  
"Psychologist"  
"Internal medicine"  
"Health scientist"  
"Psychologist"  
"Nurse scientist, clinical nurse leader"  
"Pharmacist"  
"biomedical scientist"  
"Cardiologist"  
"Public Health Epidemiologist and medical interpreter"  
"Neurology"  
"biomedical engineer"  
"Cardiologist"  
"Head of the research lab"  
"Internal medicine"  
"Physiotherapist"



Please note that the following figures mentioned here come from the delegates who clicked on the CTA (call to action) button “take the survey” from the email sent. They may not have fully completed / taken the survey.

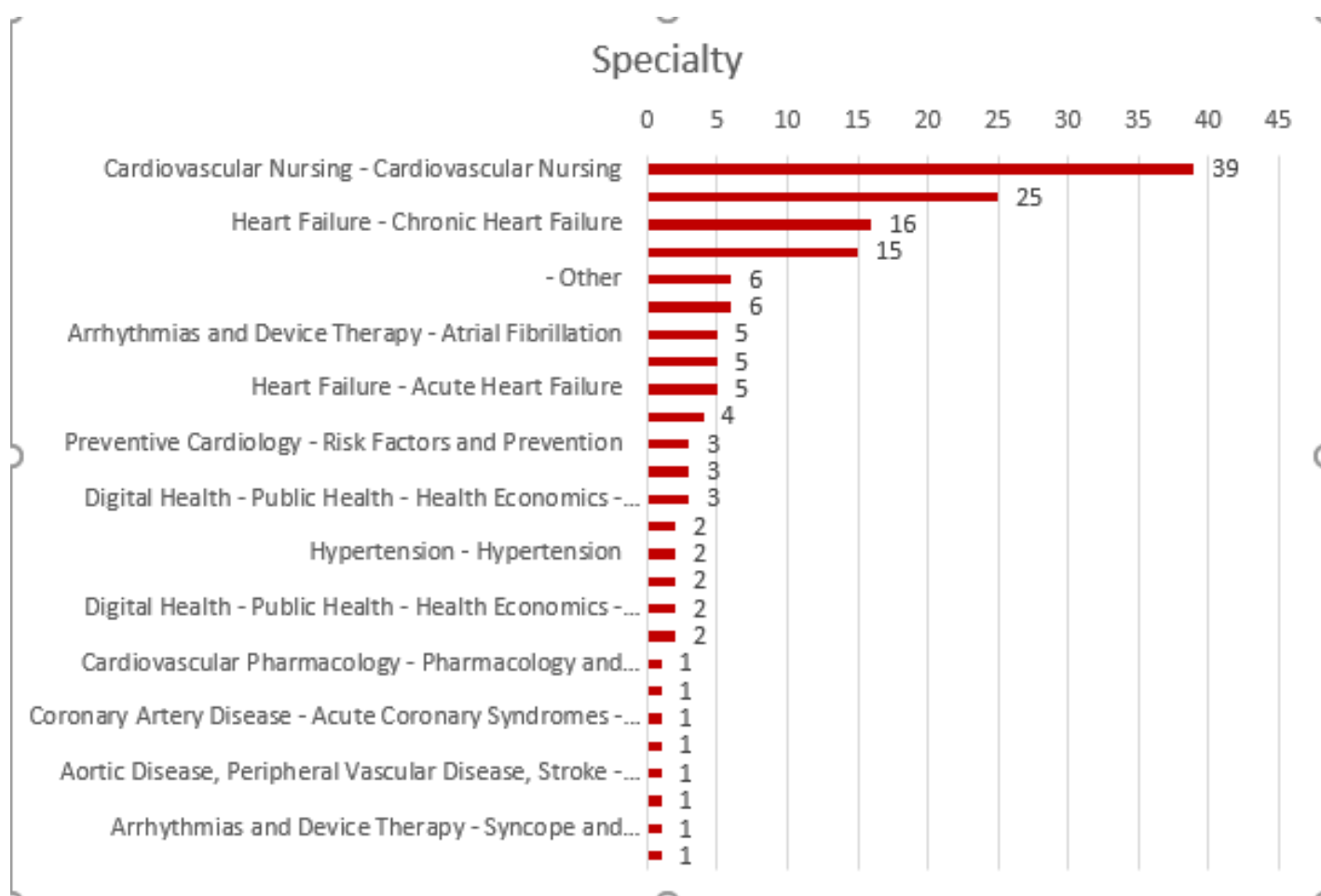
By Age and Gender



By Profession

Row Labels	Sum of Student	Sum of In training	Sum of Practicing	Sum of Grand Total
-				6
Allied Professional - Administrator			1	1
Allied Professional - Clinical Bioengineer			1	1
Allied Professional - Paramedic			2	2
Allied Professional - Physiotherapist			1	1
Allied Professional - Scientist/ Biomedical Scientist	3		14	17
Grand Total	9	5	129	153
Nurse - Advanced Nurse Practitioner			3	3
Nurse - Nurse	6	2	83	91
Nurse - Nurse Practitioner			2	2
Other - Other			2	2
Other - Other Healthcare Profession		1	11	12
Physician (non-cardiologist) - Cardio-Thoracic Surgery			1	1
Physician (non-cardiologist) - Internal Medicine			1	1
Physician (non-cardiologist) - Neurologist		1		1
Physician Cardiologist - Clinical Cardiologist		1	6	8
Physician Cardiologist - Interventional			1	1
Unknown Profession				3

### More accurate information on delegate specialty



## 12.8 Delegates comments

We have given the opportunity to delegates to express their thoughts in an open-ended question.

There are two major topics on which delegates had the most to say:

- Congress organisation
- Sessions

## Congress organisation

Respondent mainly react to the length of the break that was too long.

- "Make the day shorter, and if needed add another day (keep the working hours shorter).- Provide resting places (chairs) within the location"
- "Too long breaks midday and time to wait for next session sometimes around the lunch to long"
- "More seats for sitting during the breaks. Some speaker has to prepare their presentation a little bit better. The possibility to make an international desk experience sharing session, where colleagues from different countries share their experience (as an additional session maybe)"
- "The programme did not have any speakers from pharmacy. If EuroHeartCare and ACNAP wants to attract Allied Professionals, you need to offer sessions by allied professionals. The programme should include sessions and speakers that attract allied professionals. For example - should there be a theme about Medicines Optimisation in various cardiovascular diseases? should there be expert pharmacists talking about the pharmacological management of Heart Failure or MI or other topic around medicines optimisation. So both topics + speakers from pharmacy would attract pharmacists more."
- "I would have preferred more emphasis on physical activity - although I understand that this might not be a priority for others."
- "Not too long pause between the sessions. It should be nice if there was some coffee/ water at the beginning of the day"
- Second runner ups should be awarded especially when the winners have won for many years consecutively
- "A bigger room for the moderated poster stand"
- "Provision of some computers would be a helpful resource to utilise at breaks time/lunchtime."
- "Speed mentoring was most useful so please include more of this."
- "For EuroHeartCare 2018 and 2019, I did not receive registration badge in USA prior to having to leave for conference. At conference, told badge already processed. Perhaps out-of-EU participants should just pick up badge at conference. Thank you for all your work."
- "Friday was a very long day with too long time given for only moderate poster sessions. I suggest having the welcoming on thursday after the pre-conference workshops instead of friday."
- "Include some social activities in the program (e.g., combining a walk and a social event)"
- "it would be helpful to know and to see in the programme, what profession speakers have (nurse, physician, dietician, physiotherapist, etc)"
- "To give the speakers more questions the app for this should be used and the moderators should encourage the public to use the app"
- "This year the service at the venue wasn't satisfying. There is no access to water (to drink) and very cold rooms."
- "Maybe congress fees should be a little lower for nurses and allied professions, especially those who have to travel from another country."
- "Would have been useful to condense the congress without such long breaks. Potentially additional time for the networking session - this felt rushed and did not provide the opportunity to network with all members of the congress."
- "No overlap between sessions in different rooms"

## Sessions

- "Limit the time of oral presentation to allow time for questions and discussion. Add more topics for oral presentation (i.e cardiac surgery) to attract other nurses/AHP to join"

- "I was disappointed that on the first day the session entitled patients and carers only had one session out of the three that actually discussed carers. This session was also held at the same time as two other carer related presentations were happening in another room. Given how few oral abstract presentations were delivered regarding the involvement of carers I would suggest this should be reflected on for next year"
- "More oral presentations. Maybe a small room over a whole day"
- "1. Sessions: Title of the session/presentation didn't match with the contents of the presentation. Level of the sessions were partly low 2. program: on Friday there were too much time between the sessions. "Topic of pre-workshop was in 2018 better chosen" 3. congress location: rooms were too noisy"
- "More events / main sessions for all delegates"  
"Focus on "whats new" in different areas of the cardiology"
- "Moderated poster sessions more visible and more space."
- "in the presentations of nurses who were not very familiar with english translate the questions in their language, the answers were not very profession"
- "Poster session wasn't so valorised. It would be better give more time (not during the others conferences) to delegates for explain posters!"
- "clinical cases, demos, practical workshops, multidisciplinary examples, posters on big screen so that it is possible to see them during presentation"
- "Only two parallel sessions"
- "Make sure that if language may be a problem, that at least one of the chairs is a native English speaker/ good English speaker"
- "better chosen lecturers. Better preparation. Guidelines are not the most important thing in cardiac nursing. Being smart is important but let's not go crazy"
- More talks on medicines, medication related guidelines, improvements in pharmacotherapy
- "More practical or hands on sessions"
- "More interactive sessions (e.g. voting)"
- "Target audience seemed a bit unclear. Sessions good for developing cardiac nurses/ahp which is great as advanced practitioners tend to get support to attend other cardiac meetings for their specific speciality area. To support the learning opportunity for developing teams it would have been good to have had sessions which covered a couple of aspects of the clinical area being presented followed by a clinical scenario to help them apply the learned knowledge ( syncope session covered this method well but the diet session went a step further utilising the voting system at stages of their presentation which was fun)."