

A young boy with dark hair, wearing a light blue and white striped shirt and grey shorts, is bent over on a sandy beach. He is using his right index finger to draw a heart shape in the sand. The heart is made of dark, wet sand and is partially complete. In the background, the ocean waves are visible under a blue sky with some clouds.

World Heart Federation 2002 Annual Report



**WORLD HEART
FEDERATION®**

The World Heart Federation helps
people achieve a longer and better



life through
prevention and
control of heart
disease and
stroke, with a
focus on low and
middle-income
countries.



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MESSAGE FROM THE PRESIDENT AND THE CEO

2002 was a very good year for the World Heart Federation, serving as a stepping stone on the road to active, effective implementation of our mission. Thanks to the hard work of Board Members, staff and volunteers, this year can be considered a success, financially, operationally and collaboratively. We expanded the reach of our key advocacy initiative, World Heart Day. We increased global medical community focus on the urgent need for prevention of cardiovascular disease through our World Heart and Stroke Forum and thanks to the work of our Scientific Councils and Foundations' Advisory Board, we have intensified our work on education and training programmes to build capacity in our member organizations. However, much work remains to be done before we can achieve a measurable impact on cardiovascular disease in low and middle-income countries.

Financial Results

Financially, the World Heart Federation experienced strong growth in revenues and net income due in large part to a successful XIV World Congress of Cardiology in Sydney. Our co-hosts, the Cardiac Societies of Australia and New Zealand, did an excellent job of organizing a scientifically inspiring congress, despite adverse political and economic circumstances. Our financial position remained strong also thanks to the continued support of some key sponsors from the pharmaceutical and food industries. The relationships with these sponsors continue to strengthen. Spending levels were held constant year on year. Management of reserves remained challenging given adverse market conditions, but a highly conservative investment profile, coupled with a change in our private bank, reduced the downside impact of the markets.

Operational Improvements

We used this good financial base to prepare our organization for future growth and effective implementation of our three pillars of activity: education and training, advocacy, and the sharing of science and research. Substantial Board and Geneva office time was invested in the development of a fundraising strategy. We established a development team in Geneva with strong Board involvement, developed our case for support, identified prospective donors and installed appropriate fundraising IT tools.

We also continued to develop our communications-driven advocacy efforts. We issued six press releases covering topics such as stress, obesity and physical activity, as well as our collaboration with the WHO Global Embrace programme and the latest findings of the 2002 World Health Report. We placed them in the international press while distributing them simultaneously to our members for use at national and local levels. Our international press coverage on heart disease and stroke grew ten times vs. 2001. We believe that this effort on the part of the World Heart Federation and its members is critical to putting the prevention and control of heart disease and stroke in the public eye and eventually on policy-makers' agendas.

Global Collaboration

The World Heart Federation is fully committed to working in concert with its members and in partnership with agenda setting organizations such as the World Health Organization (WHO).

Our World Heart Day programme involved 90 member countries and 147 member organizations in a united effort to call the world's attention to the growing burden of cardiovascular disease and disturbing risk factor trends in low and middle-income countries. As we work together on World Heart Day we all begin to tap into the full potential of this extensive global member network.

The World Heart and Stroke Forum put Cardiovascular Disease Prevention high on the scientific agenda by holding open meetings at major scientific congresses. The Forum continues to attract key

partner organizations such as the International Obesity Taskforce, the International Council of Nurses, and the International Diabetes Federation, just to name a few of the 50 partner organizations involved. The WHO is fully committed to supporting our Forum efforts.

Perhaps most importantly, we have intensified our focus on building capacity in our member network. The World Heart Federation Council on Epidemiology continues to train young epidemiologists, mainly from low and middle-income countries, via its annual ten-day seminar. In 2002 the seminar was held in Kerala, India. Our Council on Rheumatic Fever and Rheumatic Heart Disease is working in close collaboration with the WHO. The World Heart Federation Member Foundations' Programme, held in conjunction with the Sydney World Congress, brought together 53 people from a wide range of countries and organizations for training in fundraising, health promotion programmes directed at major risk factor trends, particularly in the areas of nutrition and physical activity, as well as the key elements of tobacco control lobbying and coalition building.

The Future

Despite good progress in building financial strength, improving operations and enhancing global collaboration with members and partners, much remains to be done. We must focus on clear action plans and priority setting for our education and training programme, the first pillar of activity for the World Heart Federation. Education and training is critical to help build medical and non-medical capacity in our member network. We will help enhance existing scientific council training programmes. We must go beyond raising awareness and extend further into the creation of long-term sustainable advocacy programmes in such areas as tobacco control and smoking cessation, women and heart disease, and children and adolescent education. We plan to intensify our relations with our regional and national societies of cardiology and major international scientific societies through active collaboration on training workshops, meetings and congresses. In this way we can help share the latest science in patient care and population health with the parts of the world that need it most. We must support necessary research in low and middle-income countries and we must continue to build partnerships and coalitions.

The work of the World Heart Federation will never be done. We are grateful to all members of the Board, past and present, for all the energy and enthusiasm invested in our organization. More than 50 years of contributions from all parts of the globe have helped get the World Heart Federation to where it is today. We still need the help of many to prevent and control cardiovascular disease in low and middle-income countries. We need cardiovascular disease prevention and control to figure prominently on the global political agenda and that will take a team effort.



Mario F. C. Maranhão, MD
President



Janet Voûte
Chief Executive Officer

THE WORLD HEART FEDERATION

The World Heart Federation is a non-governmental organization dedicated to the prevention and control of cardiovascular disease around the world. It is a membership organization that brings together the strength of the medical community (societies of cardiology) with the public health community (heart foundations). At the end of 2002, there were 168 member organizations operating in 100 countries both at a national and regional level. The three pillars of activity of the World Heart Federation are education and training, advocacy and the sharing of science and research through meetings, congresses and other media. Together with its members, the World Heart Federation raises awareness of heart disease and stroke, advocates for policy changes and shares scientific and population health experience to build sustainable capabilities at a national and regional level.

The Global Pandemic of Cardiovascular Disease

- Heart disease is the world's number one killer. It is responsible for one in every three deaths. It affects both women and men, with no respect for geography or economics.
- Eighty per cent of the 17 million deaths caused by heart disease worldwide occur in low and middle-income countries. Risk factors linked to cardiovascular disease are already among the top ten risk factors for the global disease burden in low-income countries, and have become the dominant risk factors for death and disability in middle-income countries.
- Children are at increasing risk, in particular through tobacco smoking (active and passive), overweight, obesity and lack of physical activity.
- Deaths among women due to heart disease are eight times higher than breast or ovarian cancer.
- Cardiovascular death and disability can be reduced by more than 50% by taking simple and cost-effective preventive measures which deal with the risk factors.
- Contrary to popular thinking, heart disease research, prevention and treatment are not well funded, particularly in low and middle-income countries.

With the identification of cardiovascular disease as the primary noncommunicable health problem throughout the developing world, the role of the World Heart Federation in devoting particular attention to cardiovascular diseases in developing countries has become more pressing. By drawing on the medical knowledge and experience of its members, the World Heart Federation is engaged in the global effort to fight heart disease and stroke, with a particular focus on preventing risk factors in developing countries becoming as prevalent as they have in the developed world.

ACTIVITIES



EDUCATION AND TRAINING

The education and training activities of the World Heart Federation strive to develop sustainable capacity in its national and regional member organizations, enabling them to carry out effective heart disease and stroke prevention and control activities targeted at both the population and the individual.

African Twinning Programme: The African continent suffers from a double burden of disease as, in addition to infectious diseases, noncommunicable diseases such as cardiovascular disease are on the rise, with an average age at death at least 10 years younger than in developed countries. To address this growing burden, the World Heart Federation has initiated a twinning programme with the aim of developing an effective network of heart foundations which will be in a position to play a leading role in the prevention and control of heart disease.

In 2002, the existing African Heart Network further developed its activities, and a number of twinning programmes were initiated by established heart foundations, committed to assisting in the creation and development of new foundations in Africa: the Netherlands with Morocco, Denmark with Kenya, Ireland with Egypt and Pakistan with Tunisia.

Heart Foundation Training: The XIVth World Congress of Cardiology and the workshops organized by continental heart networks provided an opportunity for the World Heart Federation to hold a series of training sessions for heart foundations. These sessions, held on an annual basis, continue to provide tools to build capacity in the foundation network.

P.D. White Traineeship Programme: The World Heart Federation continued to provide financial support for staff members of heart foundations in low and middle-income countries to visit established Heart Foundations for training purposes. In 2002, P.D. White traineeship grants were provided for staff from three heart foundations. The British Heart Foundation received one grantee from the Pacific Region and one from Africa, while the Heart and Stroke Foundation of Canada received one staff member from an Asian heart foundation.

Twin Centres Programme: The World Heart Federation provided grants for four young cardiologists, enabling them to spend one year in a hospital of their choice, thereby creating long-term personal contacts between two medical centres. For example, a cardiologist from Algiers who had spent a year at the Hôpital Jean Rostand in Paris was able to involve the Paris hospital in the inauguration of a new cardiology centre in Algeria the following year. In 2002, these grants enabled a cardiologist from Brazil to work for one year in Milan, Italy, a Bulgarian cardiologist in Berne, Switzerland, a Nepalese cardiologist in Sydney, Australia and a Nigerian cardiologist in London, United Kingdom.

35th International Teaching Seminar on Cardiovascular Epidemiology and Prevention: This seminar, which took place in September in Kerala, India, was attended by 33 participants from 21 countries, who were provided with basic training in epidemiological research and the application of research findings in the prevention of heart disease.

ACTIVITIES



ADVOCACY

The World Heart Federation has a major role to play in ensuring that governments and non-governmental organizations adopt and implement broad policies for cardiovascular disease prevention. It advocates for public policies to address the cultural and socio-economic factors that affect an individual's ability to adopt a heart-healthy lifestyle. It also develops international activities to raise public awareness of heart disease and stroke.

World Heart Day 2002: This annual event, which aims to increase public awareness and promote preventive measures to reduce the incidence of cardiovascular diseases worldwide, has been very successful in reaching the public at large in many countries throughout the world. Ninety countries participated in World Heart Day 2002, which focused on obesity, physical activity and nutrition, three interrelated areas in cardiovascular disease prevention.

Events held by member organizations were numerous and often extremely creative, such as walks, runs, exercise sessions, workshops and seminars, heart fairs, public testing of blood pressure and blood glucose levels, children's theatrical performances, healthy cooking competitions and distribution of leaflets, posters, T-shirts and baseball caps, as well as numerous television and radio features. The World Heart Day Website (www.worldheartday.com), which received one million hits in 2002, provides detailed information on the events organized in each country.

Advocacy on Tobacco Control: Tobacco use is the leading cause of preventable death, disease and disability in the world today. Smoking is responsible for nearly five million deaths each year, of which over one-third are due to cardiovascular diseases.

2002 was a year of intensive negotiations over the Framework Convention on Tobacco Control (FCTC). The World Heart Federation, the International Union Against Cancer and the International Union against Tuberculosis and Lung Disease were dubbed the "Big Health Movement" as they joined forces in the negotiations to advocate for tough tobacco control legislation and the importance of not subordinating public health to commercial interests. World Heart Federation members lobbied their governments for a strong position on the treaty.

Heart Health Advocacy: The World Heart Federation strongly endorsed the recommendations of WHO's *World Health Report 2002* which urges countries to focus on risk factors to health and on means of prevention at a population-wide level. Through its far-reaching member base, the World Heart Federation was able to draw attention to data showing that risk factors linked to cardiovascular disease are becoming prevalent in low and middle-income countries to the point of being dominant risk factors for death and disability in middle-income countries.

ACTIVITIES



ADVOCACY THROUGH COMMUNICATION

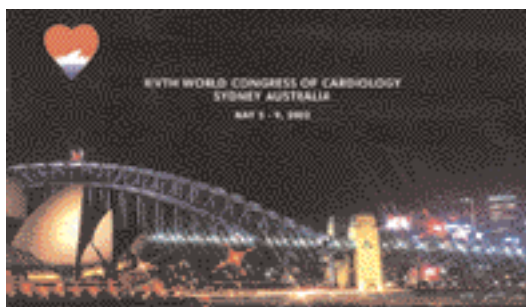
Visibility and press coverage are essential for the World Heart Federation to build public and policy-maker awareness of the risk factors leading to cardiovascular disease and the cost-effective prevention measures that can be taken. In addition, as a member-based organization with a global reach, the World Heart Federation has an important role to play in keeping its members updated on the latest developments regarding prevention and control of heart disease.

Newsletter: *Heartbeat* is the World Heart Federation newsletter, with a circulation of approximately 12,000. In 2002, the layout of *Heartbeat* was redesigned, integrating the organization's new logo and corporate identity. Each issue contains the latest news about the organization, international events and activities relating to cardiovascular disease, presents a partner organization or a member of the World Heart Federation and focuses on a specific topic. In the 2002 issues, the focus was on physical activity, obesity and blood pressure.

Press Coverage: A number of press releases were prepared by the World Heart Federation on subjects such as nutrition, physical activity, tobacco cessation, collaboration with WHO and, of course, World Heart Day itself. These press releases generated measurable coverage, reaching an audience of 500 million listeners and readers in the English language media alone. World Heart Federation press releases are also sent to member organizations accompanied by background fact sheets, with the aim of enhancing press coverage locally. In addition, articles appeared in professional journals, such as *The Lancet* and the American Heart Association Journal, *Circulation*, which enable the World Heart Federation to reach out to cardiologists and urge them to join actively in cardiovascular disease prevention efforts.

Website: The World Heart Federation website was redesigned in 2002 as an effective tool for disseminating information to its members and the general public about prevention and control of cardiovascular disease, the organization's activities and relevant international news and events. Furthermore, many documents, such as the World Heart Federation newsletters, press releases, fact sheets and application forms for education and training programmes can be downloaded from the site.

ACTIVITIES



SHARING SCIENCE AND RESEARCH

The World Heart Federation shares existing scientific and public health knowledge with cardiologists, primary care physicians and allied health professionals, especially in low and middle-income countries.

The World Heart Federation sponsors scientific congresses, meetings and workshops that make a contribution towards the prevention and control of cardiovascular diseases, particularly in developing countries. World Heart Federation sponsorship can take many forms including professional or administrative support and the use of the World Heart Federation logo.

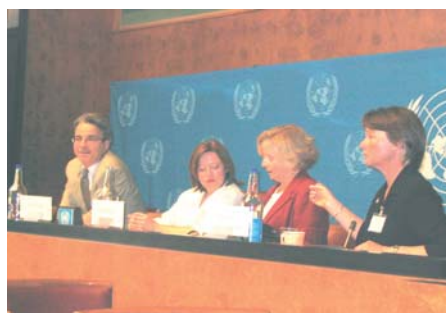
In 2002, the World Heart Federation was involved in the following 12 Congresses and meetings:

- «New Frontiers» of Arrhythmias 2002, Italy (January)
- 51st Annual Scientific Sessions, American College of Cardiology (ACC), USA (March)
- Joint meeting of the Egyptian Society of Atherosclerosis and the 3rd Eastern Mediterranean Congress on Heart Health & Cardiology Update, Egypt (April)
- XXth Congreso Sudamericano de Cardiología & XIV Congreso Boliviano de Cardiología, Bolivia, April
- 2nd International Congress on Cardiovascular Disease, Slovakia (April)
- **XIVth World Congress of Cardiology**, Australia (May)
- 11th International Congress on Cardiovascular Pharmacotherapy, Canada (May)
- CME Course in Cardiology, China (June)
- Second Iberian-American Congress on Cardiac Rehabilitation & Secondary Prevention, Spain (June)
- 19th Scientific Meeting of the International Society of Hypertension, Czech Republic (June)
- XXIV Congress of the European Society of Cardiology (ESC), Germany (August)
- 35th Ten-Day International Teaching Seminar on CVD Epidemiology & Prevention, India (September)
- 75th Scientific Sessions of the American Heart Association (AHA), USA (November)

The XIVth World Congress of Cardiology was held in Sydney, Australia, on 5-9 May 2002. Over 9,000 participants from 115 countries attended the Congress, 200 invited speakers from 53 countries contributed to plenary sessions, symposiums and lectures and approximately 1,880 abstracts were presented and accepted by delegates. The Congress provided an opportunity for the World Heart Federation to share not only the latest science in the treatment of patients, but also the latest thinking in population-based prevention.

The scientific programme focused on the global burden of cardiovascular disease and its likely increase in the future, particularly in developing countries. Many scientific sessions were held in conjunction with heart foundations and dealt with topics such as smoking-related disorders, risk-factor control, lifestyle interventions and coronary heart disease in women.

ACTIVITIES



PARTNERSHIPS

Developing partnerships and joining forces with other organizations and professional bodies at a national and international level provide the World Heart Federation with important alliances, which influence decision-makers and help increase awareness of risk factors and how to prevent cardiovascular disease.

World Health Organization: The World Heart Federation has a close working relationship and is recognized by the World Health Organization (WHO) as its leading NGO partner in cardiovascular disease treatment and control. In 2002, the World Heart Federation was actively involved in the promotion of the *World Health Report*, lobbying for strong tobacco control through the Framework Convention on Tobacco Control, helping to define the WHO noncommunicable disease strategy together with its regional noncommunicable disease programmes, and working on global diet, nutrition and physical activity strategies.

On the occasion of World Heart Day, many World Heart Federation members joined the WHO Global Embrace programme (an annual advocacy event of the Global Movement for Active Ageing, involving a chain of locally organized walks and celebrations encircling the globe during a 24-hour period). The World Heart Federation is also involved in the creation of a noncommunicable disease database as an enhanced surveillance tool for cardiovascular disease risk factors.

World Heart and Stroke Forum: The Forum serves as a platform to facilitate the mission of the World Heart Federation through the development of strategic alliances with major partners who influence the global health agenda and can commit to action. The Forum organizes and facilitates meetings of alliance partners and their key leadership, cooperates with WHO and the World Bank in building on existing relations and, more importantly, recruits other key agenda-setting partners. These include the International Obesity TaskForce, the International Council of Nurses and the International Diabetes Federation.

The role of the Forum is to identify and implement major international project priorities. In 2002, the Forum developed the Principles for National and Regional Guidelines on Cardiovascular Disease Prevention. These principles will be published in 2003 and then implemented with the help of the World Heart Federation regional and national members.

ORGANIZATION

WORLD HEART FEDERATION BOARD 2001-2002



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Jan C VAN DETH

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Ricardo ESPER, MD*

*Not present when the photograph was taken

WORLD HEART FEDERATION GENERAL ASSEMBLY

The World Heart Federation General Assembly was held in Sydney, Australia during the XIVth World Congress of Cardiology. The meeting resulted in a new set of statutes and bylaws which, among other things, created a new category of member (associate national member). This gives the World Heart Federation the opportunity to welcome more like-minded members into the fold and extend its prevention and control message. The General Assembly ratified the membership of 34 new member organizations previously accepted by the Board.

During the General Assembly, the following awards were presented on behalf of the World Heart Federation: World Heart Federation Awards for Cardiology, Gifted Teacher Award, Presidential Citation Award and General Award for Cardiology.

ORGANIZATION

WORLD HEART FEDERATION MEMBERS

CONTINENTAL MEMBERS

ASIAN-PACIFIC SOCIETY OF CARDIOLOGY (APSC)
ASIA PACIFIC HEART NETWORK (APHN)
EUROPEAN HEART NETWORK (EHN)
EUROPEAN SOCIETY OF CARDIOLOGY (ESC)

INTERAMERICAN HEART FOUNDATION (IAHF)
INTERAMERICAN SOCIETY OF CARDIOLOGY (IASC)
PAN-AFRICAN SOCIETY OF CARDIOLOGY (PASCAR)
AFRICAN HEART NETWORK

NATIONAL MEMBERS

Algeria

ALGERIAN SOCIETY OF CARDIOLOGY

Argentina

ARGENTINE SOCIETY OF CARDIOLOGY
ARGENTINE HEART FOUNDATION

Australia

THE CARDIAC SOCIETY OF AUSTRALIA & NEW ZEALAND
NATIONAL HEART FOUNDATION OF AUSTRALIA

Austria

AUSTRIAN SOCIETY OF CARDIOLOGY
AUSTRIAN HEART FOUNDATION

Bangladesh

BANGLADESH CARDIAC SOCIETY
NATIONAL HEART FOUNDATION OF BANGLADESH

Barbados

HEART FOUNDATION OF BARBADOS, INC.

Belarus

BELARUSSIAN SCIENTIFIC SOCIETY OF CARDIOLOGISTS

Belgium

BELGIAN SOCIETY OF CARDIOLOGY
BELGIAN HEART LEAGUE

Bolivia

BOLIVIAN SOCIETY OF CARDIOLOGY

Bosnia and Herzegovina

ASSOCIATION OF CARDIOLOGISTS OF BOSNIA AND HERZEGOVINA

Brazil

BRAZILIAN SOCIETY OF CARDIOLOGY
BRAZILIAN HEART FOUNDATION (FUNCOR)

Bulgaria

BULGARIAN SOCIETY OF CARDIOLOGY

Canada

CANADIAN CARDIOVASCULAR SOCIETY
HEART AND STROKE FOUNDATION OF CANADA
CHILEAN HEART FOUNDATION

Chile

CHILEAN SOCIETY OF CARDIOLOGY & CARDIOVASCULAR SURGERY

Peoples' Republic of China

CHINESE SOCIETY OF CARDIOLOGY

Colombia

COLOMBIAN SOCIETY OF CARDIOLOGY

Croatia

CROATIAN CARDIAC SOCIETY

Cuba

CUBAN SOCIETY OF CARDIOLOGY

Cyprus

CYPRUS SOCIETY OF CARDIOLOGY
CYPRUS HEART FOUNDATION

Czech Republic

CZECH SOCIETY OF CARDIOLOGY

Denmark

DANISH SOCIETY OF CARDIOLOGY
DANISH HEART FOUNDATION

Dominican Republic

DOMINICAN SOCIETY OF CARDIOLOGY
DOMINICAN HEART FOUNDATION

Ecuador

ECUADORIAN SOCIETY OF CARDIOLOGY
ECUADORIAN FOUNDATION OF CARDIOLOGY

Egypt

EGYPTIAN SOCIETY OF CARDIOLOGY

El Salvador

SOCIETY OF CARDIOLOGY OF EL SALVADOR
FINNISH CARDIAC SOCIETY

Finland

FINNISH HEART ASSOCIATION

France

FRENCH SOCIETY OF CARDIOLOGY
FRENCH HEART FOUNDATION

Georgia

GEORGIAN ASSOCIATION OF CARDIOLOGY
GEORGIAN HEART FOUNDATION

Germany

GERMAN CARDIAC SOCIETY
GERMAN HEART FOUNDATION

Ghana

GHANA HEART FOUNDATION

Greece

HELLENIC CARDIOLOGICAL SOCIETY
HELLENIC HEART FOUNDATION

Honduras

HONDURAS SOCIETY OF CARDIOLOGY

Hungary

HUNGARIAN SOCIETY OF CARDIOLOGY
HUNGARIAN NATIONAL HEART FOUNDATION

India

CARDIOLOGICAL SOCIETY OF INDIA
ALL INDIA HEART FOUNDATION

Iran

IRANIAN HEART ASSOCIATION

Israel

ISRAEL HEART SOCIETY

Jamaica

THE HEART FOUNDATION OF JAMAICA

Jordan

JORDAN CARDIAC SOCIETY

Korea, Republic of

THE KOREAN SOCIETY OF CIRCULATION

Latvia

LATVIAN SOCIETY OF CARDIOLOGY

Lithuania

LITHUANIAN SOCIETY OF CARDIOLOGY
LITHUANIAN HEART ASSOCIATION

Macedonia

MACEDONIAN SOCIETY OF CARDIOLOGY

Mexico

MEXICAN SOCIETY OF CARDIOLOGY

Morocco

MOROCCAN SOCIETY OF CARDIOLOGY

Nepal

CARDIAC SOCIETY OF NEPAL
NEPAL HEART FOUNDATION

New Zealand

THE CARDIAC SOCIETY OF AUSTRALIA & NEW ZEALAND
THE NATIONAL HEART FOUNDATION OF NEW ZEALAND

Nigeria

NIGERIAN CARDIAC SOCIETY
NIGERIAN HEART FOUNDATION

Pakistan

PAKISTAN CARDIAC SOCIETY
PAKISTAN HEART FOUNDATION

Paraguay

PARAGUAYAN SOCIETY OF CARDIOLOGY
PARAGUAYAN HEART FOUNDATION

Guatemala

GUATEMALA ASSOCIATION OF CARDIOLOGY

Hong Kong

HONG KONG COLLEGE OF CARDIOLOGY
THE HONG KONG HEART FOUNDATION, Ltd.

Iceland

ICELAND HEART ASSOCIATION

Indonesia

INDONESIAN HEART ASSOCIATION
HEART FOUNDATION OF INDONESIA

Ireland

IRISH CARDIAC SOCIETY
IRISH HEART FOUNDATION

Italy

ITALIAN FEDERATION OF CARDIOLOGY
ITALIAN HEART FOUNDATION

Japan

JAPANESE CIRCULATION SOCIETY
JAPAN HEART FOUNDATION

Kenya

KENYA CARDIAC SOCIETY

Kuwait

KUWAIT HEART FOUNDATION

Lebanon

LEBANESE SOCIETY OF CARDIOLOGY

Macao

MACAU HEART FOUNDATION

Malaysia

NATIONAL HEART ASSOCIATION OF MALAYSIA
THE HEART FOUNDATION OF MALAYSIA

Moldova

MOLDAVIAN SOCIETY OF CARDIOLOGY

Myanmar

CARDIAC SOCIETY OF MYANMAR MEDICAL ASSOCIATION

Netherlands

THE NETHERLANDS SOCIETY OF CARDIOLOGY
NETHERLANDS HEART FOUNDATION

Nicaragua

NICARAGUAN SOCIETY OF CARDIOLOGY

Norway

NORWEGIAN SOCIETY OF CARDIOLOGY
NORWEGIAN COUNCIL ON CVD

Panama

SOCIETY OF CARDIOLOGY OF PANAMA
CARDIOLOGICAL FOUNDATION OF PANAMA

Peru

PERUVIAN SOCIETY OF CARDIOLOGY

Philippines

PHILIPPINE HEART ASSOCIATION INC.
HEART FOUNDATION OF THE PHILIPPINES

Portugal

PORTUGUESE SOCIETY OF CARDIOLOGY
PORTUGUESE HEART FOUNDATION

Romania

ROMANIAN SOCIETY OF CARDIOLOGY
FOUNDATION FOR CARDIAC ASSISTANCE (ASCAR)

San Marino, Republic of

SAN MARINO SOCIETY OF CARDIOLOGY

Serbia and Montenegro

YUGOSLAVIAN SOCIETY OF CARDIOLOGY

Slovakia

SLOVAK SOCIETY OF CARDIOLOGY
"HEART TO HEART" LEAGUE

South Africa

THE SOUTH AFRICAN HEART ASSOCIATION
HEART FOUNDATION OF SOUTHERN AFRICA

Sri Lanka

SRI LANKA HEART ASSOCIATION

Switzerland

SWISS SOCIETY OF CARDIOLOGY
SWISS HEART FOUNDATION

Taiwan

TAIWAN SOCIETY OF CARDIOLOGY
TAIWAN HEART FOUNDATION

Turkey

TURKISH SOCIETY OF CARDIOLOGY
TURKISH HEART FOUNDATION

United Kingdom

BRITISH CARDIAC SOCIETY
BRITISH HEART FOUNDATION

Uruguay

URUGUAYAN SOCIETY OF CARDIOLOGY

Vietnam

VIETNAM NATIONAL HEART ASSOCIATION

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TRINIDAD & TOBAGO:	T Poon-King, MD
MOZAMBIQUE:	Albertino Damasceno, MD
	Beatriz da Conceição da Silveira, MD

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HEART FRIENDS AROUND THE WORLD
HEARTFILE
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INTERNATIONAL SOCIETY FOR HEART RESEARCH
INTERNATIONAL SOCIETY FOR HOLTER & NON-INVASIVE ELECTROCARDIOLOGY, INC.
INTERNATIONAL SOCIETY OF CARDIOVASCULAR ULTRASOUND
INTERNATIONAL STROKE SOCIETY
LATIN SOCIETY OF PAEDIATRIC CARDIOLOGY
THE INTERNATIONAL SOCIETY ON HYPERTENSION IN BLACKS
THE SOCIETY OF CHEST PAIN CENTERS AND PROVIDERS

Poland

POLISH CARDIAC SOCIETY

Puerto Rico

PUERTO RICO SOCIETY OF CARDIOLOGY

Russia

SOCIETY OF CARDIOLOGY OF RUSSIAN FEDERATION

Saudi Arabia

SAUDI HEART ASSOCIATION

Singapore

SINGAPORE CARDIAC SOCIETY
SINGAPORE NATIONAL HEART ASSOCIATION

Slovenia

SLOVENIAN SOCIETY OF CARDIOLOGY
SLOVENIAN HEART FOUNDATION

Spain

SPANISH SOCIETY OF CARDIOLOGY
SPANISH HEART FOUNDATION

Sweden

SWEDISH SOCIETY OF CARDIOLOGY

SWEDISH HEART LUNG FOUNDATION

Syria

SYRIAN CARDIOVASCULAR ASSOCIATION

Thailand

THE HEART ASSOCIATION OF THAILAND
THE HEART FOUNDATION OF THAILAND

Ukraine

UKRAINIAN SOCIETY OF CARDIOLOGY

United States of America

AMERICAN HEART ASSOCIATION
AMERICAN COLLEGE OF CARDIOLOGY

Venezuela

VENEZUELAN SOCIETY OF CARDIOLOGY
VENEZUELAN HEART FOUNDATION