

EASL ANNUAL REPORT 2010

INDEX

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- 2 **INTRODUCTION**
- 3 **EASL GOVERNING BOARD**
- 4 **EASL MISSION**
- 5 **EASL'S ANNUAL MEETING: THE INTERNATIONAL LIVER CONGRESS™**
- 7 **YEARLY CALENDAR OF EDUCATIONAL ACTIVITIES**
 - EASL SPECIAL CONFERENCE
 - EASL MONOTHEMATIC CONFERENCE
- 9 **EASL SCHOOLS OF HEPATOLOGY**
- 10 **EASL MEMBERSHIP**
- 11 **EASL SHEILA SHERLOCK FELLOWSHIP PROGRAMME**
 - SHORT-TERM TRAINING
 - ENTRY-LEVEL RESEARCH
 - POST-DOC RESEARCH
 - PHYSICIAN SCIENTIST PROGRAMME
- 12 **EASL E-LEARNING**
- 13 **EASL CLINICAL PRACTICE GUIDELINES**
- 14 **EASL EU AND PUBLIC AFFAIRS PROGRAMME**
- 17 **THE JOURNAL OF HEPATOLOGY**
- 19 **FINANCIAL REPORT 2010**
- 21 **AUDITOR'S REPORT OF THE EUROPEAN ASSOCIATION FOR THE STUDY OF THE LIVER**

INTRODUCTION

'Are we doing enough?' is not a question that arises very frequently at EASL Governing Board meetings. The usual question is 'Are we doing too much?' As you read through this report you will see that the EASL Governing Board and the EASL Office have been extremely busy over the past year. With our primary goal in mind, there is always a feeling that we could be doing more to contribute to the elimination of liver diseases. However, with limited resources, we cannot do everything and we therefore try to get our priorities right. We are happy to hear from you if you don't agree.

Lobbying in the EU is a challenging activity in that it is more difficult to measure the outcomes of our efforts than it is when we engage in clinical or research work. Nevertheless we are delighted with the positive responses we have encountered in Commission officials and some of the more enlightened MEPs. At last there are some people in the Brussels community who know where the liver is situated! It is also pleasing to see that a total of €94M were awarded to liver related projects in FP7 2007-2009. Furthermore, there are several topics in FP7 2011 which are ideal for applications from the liver community. On a more sobering note, we do not yet see any movement towards effective policies to control alcohol consumption. It is clear that the alcohol industry remain in control of political opinion. The challenge over the next few years will be to achieve a Council Recommendation on viral hepatitis screening and surveillance.

Whilst the International Liver Congress™ in Vienna 2010 will be best remembered for the volcanic interruptions, the congress in Berlin will hopefully be remembered for outstanding quality and quantity as we surpassed 8000 delegates for the first time. Innovations such as Grand Rounds, summary sessions and the Young Investigators Forum were extremely well received according to our feedback survey. It will certainly be a challenge to the new Governing Board to maintain these standards.

Apart from the International Liver Congress™ there have been other successful educational events over the last year. They are all covered later in this report, but particular attention should be drawn to the delta meeting in Istanbul and the alcohol meeting in Athens. The attendance at both of these meetings exceeded expectations and the quality of presentations and scientific interaction was excellent. Please look out for our December 2011 Special Conference in Lisbon on liver transplantation and future Monothematic Conferences on immune-mediated liver injury (Birmingham, UK January 2012) and vascular liver disease (Estonia June 2012).

EASL's commitment to education is perhaps best exemplified in the Sheila Sherlock Fellowships and this year for the first time we have introduced a Physician Scientist award which should allow clinical scientists to buy themselves out of clinical commitments to facilitate research activity. We hope to see strong competition for these fellowships.

Thank you for committing to EASL and supporting our efforts in the global fight against liver disease.



Prof. Mark Thursz, MD FRCP

EASL SECRETARY GENERAL



Prof. Markus Peck, MD

EASL VICE-SECRETARY

EASL GOVERNING BOARD

EASL is an association dedicated to the pursuit of excellence in liver research and in the clinical practice of liver disorders. EASL is managed by a Governing Board of 11 experts (the Secretary General, Vice-Secretary, Treasurer, 5 Scientific Committee members, the EU Policy Councillor and 2 Educational Councillors) actively engaged and involved in the discipline. Our aim is to actively involve young scientists and hepatologists in a wide range of educational activities to stimulate their contribution and support their research. Throughout its history, EASL has endeavoured to raise awareness and stimulate interest in liver disease. In doing so, EASL has attracted an ever growing number of experts and sponsors concerned with the health and wellbeing of individuals all over the world. We invite all those who wish to take up the challenge, to join EASL and to become part of our vision.



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Dominique-Charles Valla

Educational Councillor

Jean-François Dufour

Educational Councillor

Fabien Zoulim

EASL MISSION

EASL provides professional leadership in the liver disease arena and aims to:

- REDUCE THE PREVALENCE OF LIVER DISEASE IN OUR COMMUNITY AND WORLDWIDE
- MINIMIZE THE SUFFERING OF PATIENTS AND PREVENT LIVER RELATED DEATHS
- PROMOTE CLINICAL, BASIC AND TRANSLATIONAL RESEARCH
- FOSTER INTERNATIONAL SCIENTIFIC EXCHANGE



EASL ILC



The International Liver Congress™ is the annual meeting of the European Association for the Study of the Liver (EASL). It is held every year in April in major European cities with adequate facilities and easy travel connections from all continents. The congress has a scientific programme composed of State-of-the-Art lectures and a large number of symposia complemented by oral and poster presentations for which abstracts are submitted. The congress begins with Joint Workshops followed by a Postgraduate Course providing an overview of different features in Hepatology. The programme content is developed as State-of-the-Art presentations with a special emphasis on clinical practice, as well as question and answer sessions to foster interaction with the audience and to evaluate the overall benefit of the course. The educational value of the course is also evaluated by questionnaires completed by the audience. Previous Postgraduate Courses include:

- **MANAGEMENT OF ACUTE CRITICAL CONDITIONS IN HEPATOLOGY - Vienna 2010**
- **CHOLESTATIC DISEASES OF THE LIVER AND BILE DUCTS – Berlin 2011**

The International Liver Congress™ 2011 held in Berlin, Germany, March 30 - April 3 was a tremendous success. This was EASL's 46th annual meeting and attendance had never been so high with 8062 registered delegates. EASL began a new initiative in Berlin with the organisation of a Basic Science Seminar on viral hepatitis that was particularly well attended. The aim of this seminar was to promote basic science research and to foster interaction between basic science and clinical researchers. The seminar format encouraged informal and lively discussion of the technical challenges and new advances in liver research. This was just one element of a scientific programme of extremely high standard that also included; Grand Rounds, EU Grant Session and the Health Burden of Viral Hepatitis after the WHO resolution - Call for Action. EASL released its 5th Clinical Practice Guidelines on the Management of Hepatitis C Virus Infection during the congress and special emphasis was given to Young Investigators.

Following a successful Young Investigators Forum in Vienna 2010, EASL decided to carry this new initiative forward in 2011 by involving even more young hepatologists. The global objective being to promote hepatology as a career choice for young medical doctors or scientists. EASL aims to be a pillar of support for young scientists by offering education, training, exchange programmes and fellowships. For the International Liver Congress™ 2011, 200 bursaries were granted, EASL provided a Young Investigators Educational Seminar- a statistics course for trainees in hepatology- and hosted a Young Investigators Forum where young professionals could voice their opinion, listen to testimonials and ask for career advice. For the first time ever, EASL also organised a special networking event exclusively for Young Investigators that was strongly supported by members of the EASL Governing Board together with the Honorary President Prof. D. Dhumeaux.

In addition, 17 national liver associations contributed to the National Associations Village to showcase their local actions. 135 journalists were on site and the global media reach generated from the 757 articles written was estimated at 101,927,493 persons. In order to reach out to a wider community, EASL launched its Facebook page www.easl.eu/facebook and a Twitter account www.twitter.com/ILCpress. Networking and exchange of knowledge were optimised with cutting edge applications such as Q4U and Chance2Meet. Q4U, a sophisticated and focused Q&A session, was implemented during the Postgraduate Course. This system enabled delegates to text questions to speakers in real time, while lectures were being given and allowed participants to accurately test their knowledge. What's more, EASL reached a record of 3089 members from all over the world thanks to those who renewed membership or joined the EASL community on site.

FACTS AND FIGURES

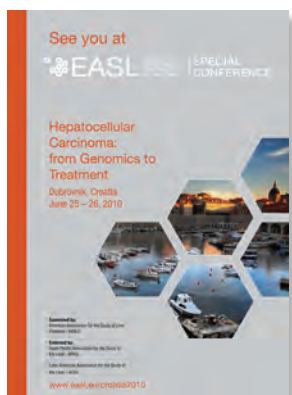
Year	Number of Congress	Venue	Number of Registered Delegates
2012	47	Barcelona	8,250 Expected
2011	46	Berlin	8,062
2010	45	Vienna	7,602
2009	44	Copenhagen	7,017
2008	43	Milan	7,480
2007	42	Barcelona	5,769
2006	41	Vienna	5,162

CONGRESS STATISTICS

Top 10 participating countries / Number of delegates

1	USA	939
2	Germany	873
3	Italy	640
4	France	474
5	UK	472
6	Spain	340
7	China	323
8	Switzerland	220
9	Russia	178
10	Turkey	158

YEARLY CALENDAR OF EDUCATIONAL ACTIVITIES



Beyond its annual meeting, EASL also organises a wide range of activities and key educational events in the field of hepatology. Once a year, EASL hosts a Special Conference attracting between 600 and 800 participants. The scientific programme of each Special Conference is built around a single topic discussed in a State-of-the Art format.

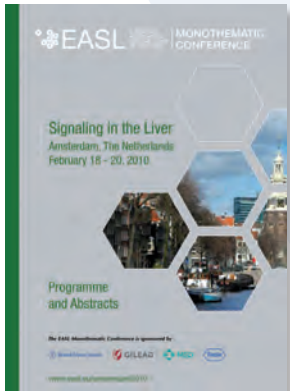
EASL's 2010 Special Conference held in Dubrovnik, Croatia, June 25-26 was dedicated to hepatocellular carcinoma, a serious health problem and the 3rd cause of cancer-related deaths worldwide. Together with sister societies the American Association for the Study of Liver Diseases (AASLD), the Asian Pacific Association for the Study of the Liver (APASL) and the Latin-America Association for the Study of the Liver (ALEH), EASL dedicated its Special Conference to this major subject to discuss screening, diagnosis, treatment and the latest developments on hepatocellular carcinoma.

In 2011, EASL will feature liver transplantation in a Special Conference that will be webcasted. The conference will be held in Lisbon, Portugal from December 15-17, 2011.



EASL also organises 2-3 smaller scale Monothematic Conferences each year attracting up to 300 participants. The attending delegates participate in a scientific programme that is developed on a single topic and discussed in a State-of-the Art format, and interaction between speakers and attendees is highly encouraged. The programme is reviewed and approved by the EASL Educational Councillors and Governing Board.

In 2010, EASL organised 3 Monothematic Conferences:



- **SIGNALING IN THE LIVER**, AMSTERDAM, THE NETHERLANDS, FEBRUARY 18-20
- **DELTA HEPATITIS**, ISTANBUL, TURKEY, SEPTEMBER 24-26
- **ALCOHOLIC LIVER DISEASE**, ATHENS, GREECE, DECEMBER 10-12

The Monothematic Conference on Alcoholic Liver Disease was particularly noteworthy as it formed part of EASL's commitment to the European Alcohol and Health Forum (EAHF). See www.easl.eu for more information

In 2011, EASL has submitted a new commitment to the EAHF entitled European Clinical Practice Guidelines (CPGs) for detection/treatment of alcoholic liver disease (ALD). EASL plans to outline clinical practice guidelines on the detection and treatment of alcoholic liver disease. The elaboration of these guidelines is part of a long-term strategy for addressing alcoholic liver disease and builds on the Monothematic Conference on this subject held in December 2010.

EASL aims for these clinical practice guidelines to become the number one reference for healthcare professionals to improve the diagnosis, management, treatment and care of patients with alcoholic liver disease. They will be disseminated to EASL membership and published online. EASL also envisages working in partnership with other European umbrella organisations that are member of the Forum in order to disseminate the guidelines. In the future, collaboration with national liver associations for the translation and further dissemination of the clinical practice guidelines at national level may also be considered.

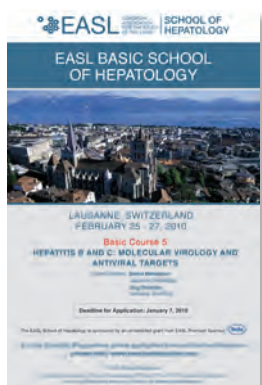
Two monothematic conferences are programmed for 2011.



- **EVALUATION OF DISEASE SEVERITY AND PROGNOSIS IN CHRONIC LIVER DISEASE**, JANUARY 28-29, NICE, FRANCE
- **LIVER FIBROSIS: COMMON AND ORGAN SPECIFIC MECHANISMS**, JUNE 17-18, PETERSBERG, GERMANY

Lexicon : : State-of-the-art applies to the highest level of development in a scientific field achieved at a particular time, as a result of modern methods. The State-of-the-art format referred to above makes reference to the most recent and best, up-to-the-minute scientific data.

SCHOOLS OF HEPATOLOGY



The EASL Schools of Hepatology have moved a long way since they began in 2003. These educational events are held apart from the International Liver Congress™ and aim to diffuse the highest standards in basic and clinical hepatology. The schools are intended as a series of events covering different aspects in the field of liver disease.

They target young fellows enrolled in hepatology-oriented departments, or more experienced clinicians who want to be exposed to the newest trends in hepatology. The age limit is 40 and participants have to apply for a place on the course. Courses are usually held in a medical organisation, research center or university. The school format is that of a residential course with a limited attendance. The schools offer intense interaction, plenty of time for personal discussions and exchange with a distinguished faculty as well as a balanced blend of lectures on theoretical and practical issues with clinical cases-based discussions.

The EASL Educational Councilors and Governing Board review the programmes proposed by the chairs. The Educational Councilors review all the applications from young hepatologists mainly based on their dedication to hepatology and their age, giving priority to first time participants, to select a small number of participants (30 to 40) in order to facilitate discussions during each course.

Each year, EASL organises 1 Basic School of Hepatology and 2 Clinical Schools of Hepatology.

In 2010 EASL organised the following schools:

- **HEPATITIS B AND C: MOLECULAR VIROLOGY AND ANTIVIRAL TARGETS**, LAUSANNE, SWITZERLAND, FEBRUARY 25-27
- **METABOLIC LIVER DISEASES**, TORINO, ITALY, MAY 28-30
- **ENDOSCOPY AND LIVER DISEASE**, BARCELONA, SPAIN, DECEMBER 10-11

The schools have generated such success over the past 7 years that EASL has decided to take the school format beyond Europe and will hold its very first EASL-CHS School of Hepatology in Beijing and Shanghai, April 13-19, 2011. The School will take place in the Beijing Friendship Hospital, Capital Medical University and will be co-organised with professor Ji-Dong Jia and members of the department of hepatology.

Young physicians, GI fellows and infectious disease doctors with an interest in hepatology are invited to attend for two days to listen to lectures and take part in discussions, and workshops on liver topics. Topics will include: Pathology, Radiology, Immunology and case presentations.

From an educational point of view, the emphasis will be placed on active interaction between teachers and participants. Themes to be discussed will be the organisation of a department of hepatology, the organisation of trials, the building of a hepatology career and the writing of a scientific paper.

MEMBERSHIP

EASL is a renowned society of clinicians and scientists striving to promote liver research and improve the treatment of liver diseases worldwide. EASL gathers members from all over the world and currently exceeds 3000 members.

THERE ARE 5 MEMBERSHIP CATEGORIES:

- **REGULAR**
(for individuals from Europe and Israel)
- **CORRESPONDING**
(for individuals from non-European countries)
- **EMERITUS**
(for regular members over 65 years that have been EASL members for at least 10 years)
- **TRAINEE**
(for trainees up to 35 years. Proof of age and trainee status is required)
- **CORPORATE**
(Special conditions for EASL sponsors – please see the EASL Sponsorship brochure for conditions)

MEMBERSHIP BENEFITS INCLUDE:

- **Free annual subscription** to the **Journal of Hepatology**
- **Reduced registration fees** to the International Liver Congress™ and to all other EASL Meetings (see www.easl.eu for full details)
- **Free and instant access to over 500 multimedia presentations** from congresses and e-Series available in both webcast and iPhone/iPad compatible video podcasts
- Possibility to host fellows as part of the **EASL Fellowship Programme**
- Possibility to organise **EASL Monothematic and Special Conferences**
- Possibility to host one of the **EASL Schools of Hepatology**
- EASL bi-monthly **'What's New?'** newsletters and quarterly **'EU Bulletin'**
- **Financial support** for the application to the **EU Research Framework Programme (FP7)**

MANY WAYS
ONE AIM,
BECOME PART OF
OUR VISION...
JOIN EASL!

EASL **SHEILA SHERLOCK** **FELLOWSHIP** PROGRAMME

EASL launched its first research fellowship programme in 1997 to enhance the mobility of investigators within different European institutions, to encourage continued learning and research, and to actively promote scientific exchange among research units in hepatology. The fellowships were dedicated to the memory of Prof. Dame Sheila Sherlock, hence the name EASL Sheila Sherlock Fellowship Programme.

The fellowships have been a great success and EASL currently supports up to 20 laureates each year investing over 500,000€ in post-doctoral, entry-level and short-term training. Due to the ever increasing number of requests from researchers, EASL has decided to launch an additional fellowship opportunity starting in 2011. The new physician-scientists fellowship programme will enable practicing physician-scientists to take leave from their clinical duties for 6-12 months in order to pursue research in a research laboratory.

The following fellowship programmes are available each year:

- **UP TO 3 POST-DOCTORATE FELLOWSHIPS**
- **UP TO 3 ENTRY-LEVEL FELLOWSHIPS**
- **2 PHYSICIAN-SCIENTISTS FELLOWSHIPS**
- **SHORT-TERM FELLOWSHIPS**

EASL E-LEARNING

EASL has developed a wide range of e-learning tools with specialised educational content allowing those interested in hepatology to expand their knowledge on liver disease whilst learning through virtual meetings from across the globe. EASL members can download selected courses, listen to original and exclusive talks, take part in interactive quizzes, view and create multimedia presentations from an e-library of webcasted conferences and obtain CME accreditation on line.

EASL e-learning tools include: webcasts and video podcasts of Monothematic Conferences, Special Conferences, State-of-the-Art lectures and Post-Graduate Courses from the International Liver Congress™, in addition to selected symposia from conferences dedicated specifically to hepatology. EASL also provides exclusive tools for its members; monthly online e-series where special topics are covered in depth by experts in the field, and e-posters enable users to search for specific content, as well as make comments on posters and ask questions to authors.

In a continuous effort to provide innovative educational tools, EASL will be developing the iLiver application throughout 2011. This electronic text book of medicine for iPhone and iPad will give medical experts quick reference to regularly updated information on liver diseases and treatment. The iLiver app will provide easy-to-access EASL validated and frequently updated medical information related to liver diseases in an interactive format that can be used at the bedside by physicians worldwide. The launch is planned at the International Liver Congress™ in Barcelona 2012.



EASL CLINICAL PRACTICE GUIDELINES

EASL develops Clinical Practice Guidelines that are distributed via the Journal of Hepatology. These guidelines define the use of diagnostic, therapeutic and preventive modalities, including non-invasive and invasive procedures, in the management of patients with various liver diseases. They are intended to assist physicians and other healthcare providers as well as patients and interested individuals in the clinical decision making process by describing a range of generally accepted approaches for the diagnosis, treatment and prevention of specific liver diseases.

EASL has already produced the following Clinical Practice Guidelines:

- MANAGEMENT OF CHRONIC HEPATITIS B
- MANAGEMENT OF CHOLESTATIC LIVER DISEASES
- MANAGEMENT OF HFE HEMOCHROMATOSIS
- MANAGEMENT OF ASCITES, SPONTANEOUS BACTERIAL PERITONITIS, AND HEPATORENAL SYNDROME IN CIRRHOSIS
- MANAGEMENT OF HEPATITIS C VIRUS INFECTION



EASL is in continuous development of Clinical Practice Guidelines and aims to release further titles in the future:

- MANAGEMENT OF HEPATOCELLULAR CARCINOMA
- MANAGEMENT OF ALCOHOLIC LIVER DISEASE
- MANAGEMENT OF ACUTE LIVER FAILURE
- MANAGEMENT OF WILSONS DISEASE



New joint guidelines

In autumn 2009, initial discussions began between AASLD and EASL regarding the ignition of joint AASLD/EASL Practice Guidelines. A letter of agreement was signed in September 2010 and work began on the development of guidelines on Hepatic Encephalopathy. The guidelines will be approved by the American Association for the Study of Liver Diseases and the European Association for the Study of the Liver and shall represent the position of both associations. These guidelines are intended for use by physicians, and the recommendations shall suggest preferred approaches to the diagnostic, therapeutic and preventive aspects of care. They are intended to be flexible, in contrast to standards of care, which are inflexible policies to be followed in every case. Specific recommendations are based on relevant published information. A joint publication is planned in Hepatology and Journal of Hepatology. The release is planned for summer 2012.

EASL **EU & PUBLIC AFFAIRS** PROGRAMME

AIMS AND OBJECTIVES

The goals of EASL's EU advocacy programme continue to be promoting research in hepatology, fostering multicentre clinical trials, acting as an advisor to European health authorities and increasing public awareness about liver disease. EASL is now seeing substantial returns from four years of advocacy efforts, and is now recognised as the voice of the liver community in Brussels and Strasbourg which is helping to raise the profile of liver diseases among stakeholders and EU institutions (Parliament, Commission and Council). Positioning ourselves among other healthcare professional groups has been vital in order to have a voice in EU public health policies and in obtaining funding for research in the area of liver diseases.

EASL has chosen to streamline its focus and concentrate efforts on alcohol health policy, research funding, viral hepatitis and liver cancer. It was encouraging for EASL to note that in May 2010 the 63rd World Health Assembly of the WHO passed two resolutions specifically focusing on two areas of interest: Resolution WHA63.13 on Global strategy to reduce the harmful use of alcohol, and Resolution WHA63.18 on Viral hepatitis.

RESOURCES

The EASL Governing Board continues to make the EU Public Affairs programme a priority and throughout 2010 Prof. Mark Thursz, at the time EASL Vice-Secretary, and Prof. Dominique Valla, EU Policy Councillor, worked closely in furthering the EASL agenda in Brussels. From June 2011, new EASL Vice-Secretary, Prof. Markus Peck, will work closely with the EASL EU Policy Councillor, Prof Dominique-Charles Valla. In addition, at the end of 2010 the EASL Governing Board decided that EASL should employ a permanent member of staff to work with them to provide the necessary support and ensure EASL's EU public affairs aims and objectives are met. EASL hopes to establish a permanent presence in Brussels by the end of 2011.

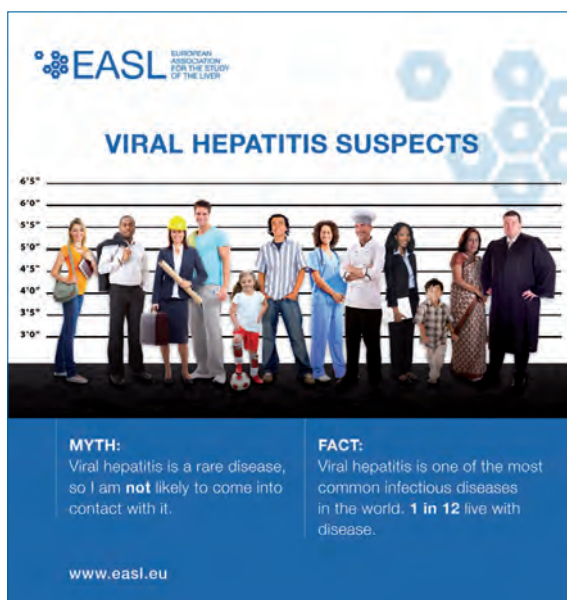
ALCOHOL HEALTH POLICY

In the field of alcohol, EASL has been an active member of the European Alcohol and Health Forum (EAHF) since February 2010. Membership of the forum has allowed increased interaction with Directorate General for Health and Consumer (DG SANCO); it has also cemented collaboration with various NGOs aiming to limit alcohol-related harm, and has led to the establishment of contacts with umbrella organisations for the alcohol industry and trade. As part of its on-going commitment to the EAHF, EASL organised a Monothematic Conference on Alcoholic Liver Disease in December 2010, in Athens. For 2011, EASL's commitment is linked to the publication and distribution of the upcoming EASL Clinical Practice Guidelines on the Management of Alcoholic Liver Disease.



VIRAL HEPATITIS

EASL, working with a number of European experts in viral hepatitis, provides education on viral hepatitis, identifying the key issues in the management of infection and proposing public health policies to address these problems.



EASL continues its cooperation with the European Liver Patient Association (ELPA) in organising events at the European Parliament on the occasion of World Hepatitis Day. As part of its awareness raising work in Brussels, in October 2010, EASL participated in the first Summit Conference on Hepatitis B & C. The conference brought together European and national public health professionals, DG SANCO staff and other stakeholders. In addition, EASL has endorsed ELPA's Call to Action to tackle viral liver hepatitis B and C and to promote systematic screening amongst risk groups. The Call to Action signatories also called for a Council Recommendation on viral hepatitis screening that acknowledges the high burden the disease places on health systems and puts in place measures to identify the large number of undiagnosed carriers.

LIVER CANCER

Although liver cancer has been virtually ignored to date, EASL has taken the pragmatic decision not to launch a unilateral campaign which we do not have the resources to sustain. We have therefore aligned with the European Liver Patients Association (ELPA) and joined the European Partnership Against Cancer an initiative launched by DG SANCO to promote information for the public and patients as well as to generate guidelines for the management of cancer in the European Union. EASL is looking forward to becoming more involved in this initiative and others in 2011.

RESEARCH

In addition to all of the activities above, which aim to raise the profile of liver diseases among European stakeholders and policy makers, EASL has engaged in direct contacts with DG Research officials with a view to ensuring that liver disease features in forthcoming funding calls in the context of the current 7th Framework programme. EASL has also been focusing much of its work over the last year on providing input to the Commission with a view to help it structure its funding strategy from 2014 onwards. EASL has a major role to play in coordinating the actions that national associations for the study of the liver should initiate at the level of the respective member states, to have liver set as a priority in the European research agenda.

Prior advocacy efforts in DG Research have begun to pay dividends in the form of specific liver focused calls in the last two FP7 calls for proposals. The EASL Governing Board is delighted that three multicentre research consortia have been funded in the last year: Fatty Liver, Inhibition of Progression (FLIP) consortia led by Prof. Vlad Ratziu, the HEPTROMIC consortia entitled 'Genomic predictors and oncogenic drivers in hepatocellular carcinoma' led by Prof. Josep M Llovet and the Acute Hepatitis C Consortium (HEPACUTE) led by Prof. Helmut Diepolder. In addition, two further projects to be funded under FP7 have recently been announced: Prevention of Liver Fibrosis and Cancer in Africa (PROLIFICA) led by Prof. Mark Thursz, and MODHEP, led by Prof. Bruno Amati. Despite these successes it clearly remains a difficult objective to persuade DG Research staff to prioritise liver research.

Aware that policymakers often fail to see the link between a strong and competitive research sector and a healthy and active population, which in turns contributes to European Union competitiveness, EASL has recently joined the Alliance for Biomedical Research in Europe. As part of the Alliance, EASL is working together with other organisations in order to further underline this win-win situation to those, in Europe and in Member States, who make the decisions on research priorities and research budgets. The focus of the Alliance is on increased funding for biomedical research, generically.

CHRONIC DISEASES

EASL is a member of the European Chronic Disease Alliance (ECDA), a consortium of professional and patient groups that jointly lobby public health policies which address the major determinants of ill health in Europe: alcohol, tobacco, obesity and lack of physical exercise. As part of the on-going work being carried out by ECDA, a document outlining the case for urgent political action to reduce the social and economic burden of chronic disease through prevention was presented to Health Commissioner, John Dalli, during the course of 2010 and will continue to be disseminated throughout 2011.

THE JOURNAL OF HEPATOLOGY



IN JANUARY 2010,
THE JOURNAL LAYOUT CHANGED.
MOST NOTICEABLE ARE THE NEW
COVERS WHICH ALSO INCLUDE
THE TRADEMARKED EASL LOGO.



The Journal of Hepatology is the official journal of the European Association for the Study of the Liver (EASL), the leading liver association in Europe. Since its founding in 1985, the Journal has seen an impressive development and readership numbers are ever increasing, with a worldwide distribution reaching over 20,000 readers. Under the direction of the Milan Editorial Team led by Prof. Massimo

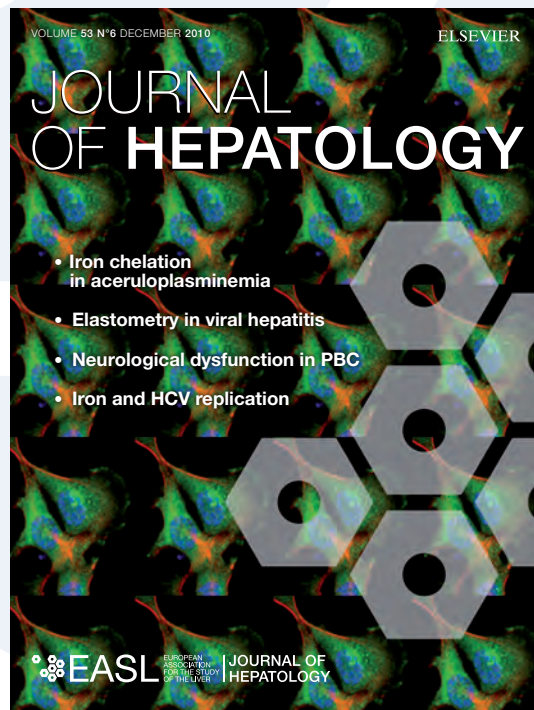
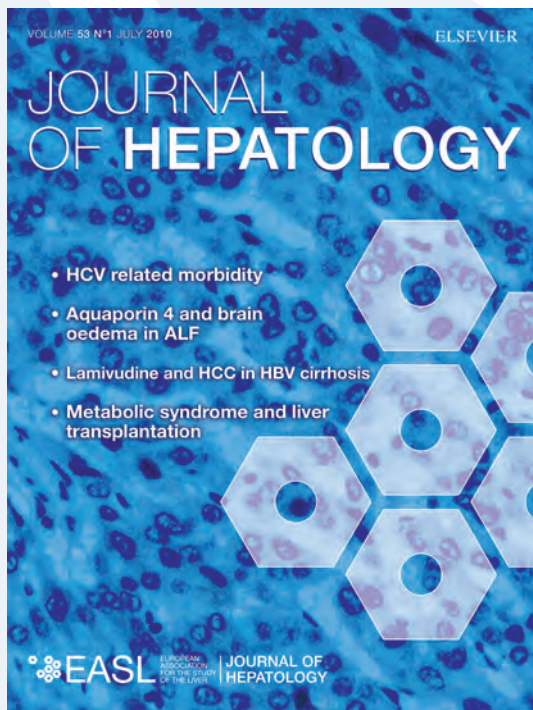
Colombo (2005-2009), the impact factor of the Journal steadily increased to 7.818. In June 2010, EASL proudly announced that the Journal of Hepatology had reached an Impact Factor of 9.334 and is currently ranked as number 4 in the ISI category amongst journals in the field of Hepatogastroenterology: «Gastroenterology and Hepatology» (source: Thomson® Scientific). This ranking is a testament to the journal's outstanding relevance in the field. EASL would like to thank the Journal's editors, reviewers, authors, and readers who have contributed to this outstanding result! The Editorial Team elected in September 2009 is led by Prof. Didier Samuel and expects the impact factor to continue this upward trend.

The Editorial Team 2010-2011 includes one Editor-In-Chief, two Co-Editors, seventeen Associate Editors, eight Special Section Editors, two Focus Editors, and a Statistical Consultant. A new development for the Journal is the establishment of a Central Editorial Office located within the EASL headquarters in Geneva, Switzerland, which is comprised of one Editorial Manager, one Editorial Assistants, one Medical Illustrator, and one freelance Graphic Designer. All manuscript submissions are managed through the new Elsevier Editorial System.

Some of the previously published sections continue in the new version of the Journal but under new names and several new sections have appeared. The Journal has introduced a Focus section to highlight the most poignant manuscripts in each issue. While Hepatology Snapshot briefly aims to describe either a basic mechanism of a molecular pathway, a detailed application of a new drug, or a schematic representation of a clinical aspect in hepatology. The Clinical Application of Basic Science section provides the reader with further insights into basic science within and outside the field of hepatology which have potential clinical application for hepatologists. The section Frontiers in Liver Transplantation provides insight into the most recent breakthroughs in the transplantation field and emphasizes that it is now considered a permanent trend within the field of hepatology. Highly debated issues are highlighted in Controversies in Hepatology. This section not only summarizes the pros and cons of specific issues, but also presents the controversial advice of two experts with differing opinions on a current clinical and basic subject. The most relevant papers published in other journals are highlighted in the International Hepatology section. The section Letters to the Editor provides short comments on topical issues or readers' reactions to articles published in the Journal.

The aim of the Journal of Hepatology is to keep the reader at the forefront of all breakthrough developments in the fields of liver cancer, biliary cancer, viral hepatitis, portal hypertension, liver failure, liver injury, non-alcoholic fatty liver disease, alcoholic liver disease, cholestasis, metabolic disease, autoimmune liver diseases, liver transplantation, and genetic and proteomic developments in Hepatology.

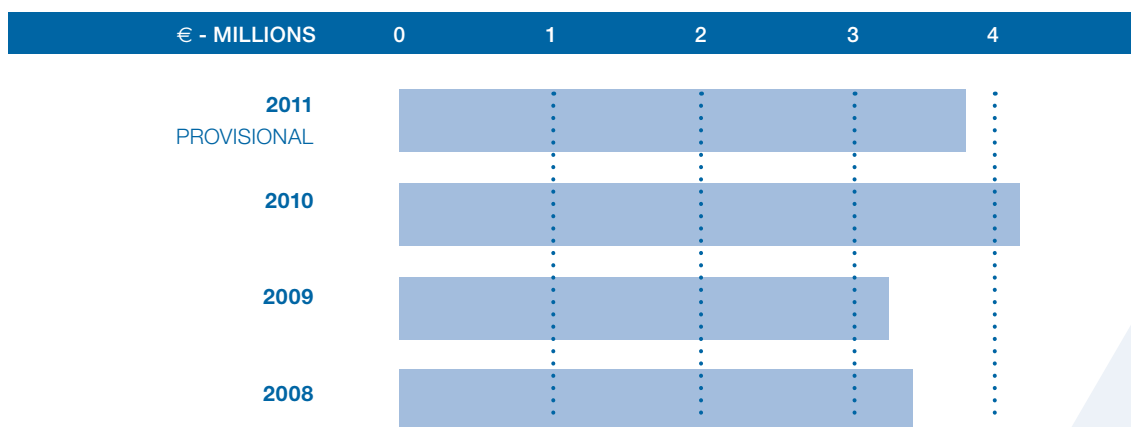
The yearly EASL membership fee includes an annual subscription to the Journal of Hepatology.



EASL FINANCIAL REPORT 2010

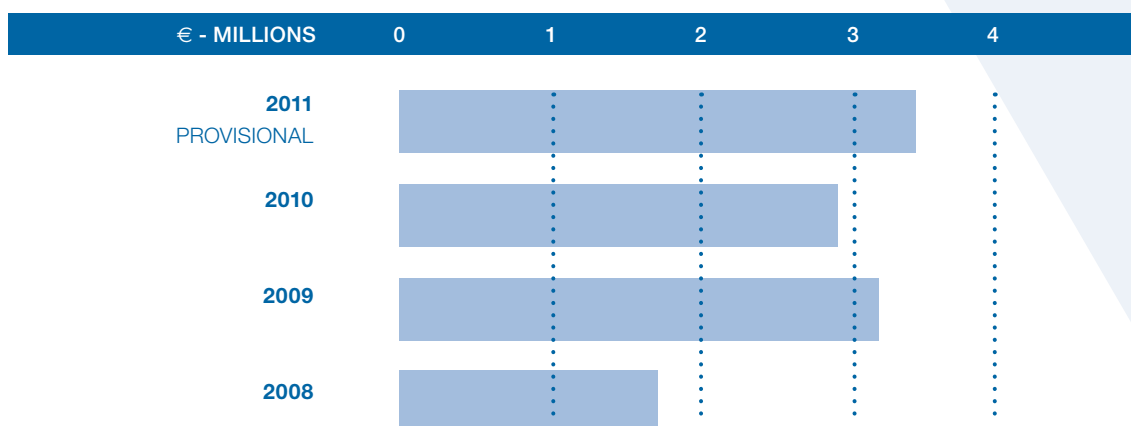
The 2010 income, as shown in the figure below, exceeded that of the provisional budget presented at the EASL Business Meeting held during the International Liver Congress™ (ILC) in Vienna, April 2010. This was mainly due to a sharp increase in membership and the huge success of the ILC that was attended by over 7,600 delegates. In addition, despite the persisting unfavourable financial context due to the worldwide economical crisis, the income from investments exceeded the expected figures. We should pay our respects to EASL's new banking partner, the Banque Cantonale Vaudoise, which has taken charge of EASL finances from the beginning of 2010. The main sources of income for 2010 were represented by the International Liver Congress™ revenues (≈ 41%) and the unrestricted support from Premium Sponsors (≈ 23%): Bristol-Myers Squibb, Gilead, M.S.D., and Roche. EASL memberships accounted for ≈ 8%.

INCOMES



The provisional income for 2010 is expected to be close to €3.7 Million. The 2011 International Liver Congress™ in Berlin was again a great success and will most probably provide revenue enabling the association to once more cover over 40% of the global income. The generous support from Premium Sponsors has also been secured for 2011.

EXPENSES

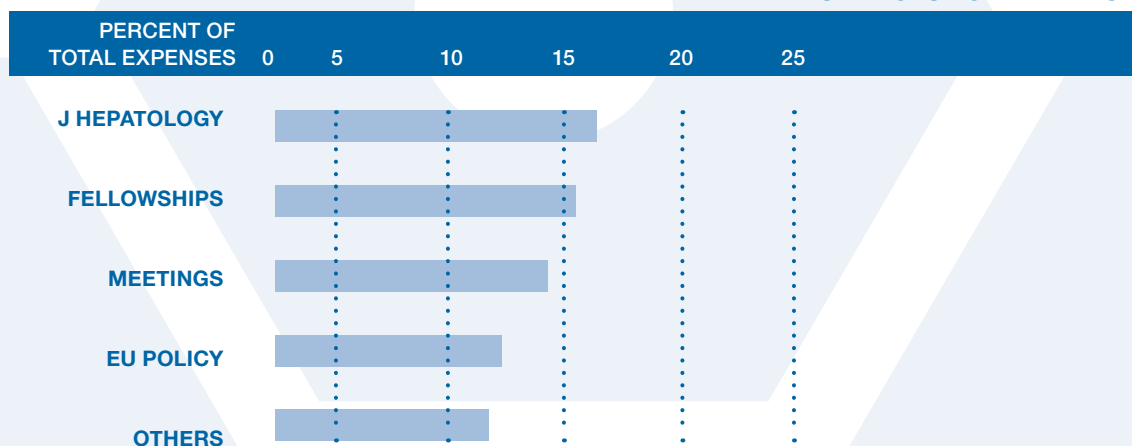


Contrary to 2009, expenses in 2010 were close to what was anticipated in the provisional budget, as shown in the figure herewith. Nevertheless, there are some issues that deserve careful monitoring, such as the costs related to the Editorial Office of the Journal of Hepatology, which enabled, however, substantial improvement of the journal layout and has been of great support to authors and editors. The communication and educational items, including the EASL website and new initiatives like educational tools, and the needs of the EASL Office in Geneva, which increased its number of staff by two employees during 2010.

The slight increase in expenses foreseen in 2011 is mainly due to such issues, to which a greater effort in lobbying activities in Brussels and new forms of fellowships have to be added. The provisional balance for the 2011 budget is expected to be €347,343.

Finally, the great commitment of EASL in providing its members with services is witnessed by the fact that almost 2/3 of the expenses are devoted to this purpose, as illustrated in the final figure.

EXPENSES 2011
SERVICES TO MEMBERS



* Others include: clinical practice guidelines, webcasting, website, and tools

AUDITOR'S REPORT OF THE EUROPEAN ASSOCIATION FOR THE STUDY OF THE LIVER 2010

Balance sheet as of 31st December

	2010 EUR	2009 EUR
ASSETS		
Cash	5'539	1'184
Working accounts banks	5'233'426	4'865'230
Investment deposit	7'769'101	6'023'251
Accounts receivable	242'352	74'550
Withholding tax	2'516	12'424
Debtors	0	0
Total Assets	13'252'934	10'976'639
LIABILITIES AND SHAREHOLDERS' EQUITY		
Accounts payable	5'954	218
Accrued liabilities Expenses	588'660	472'541
Accrued liabilities Membership	259'856	126'967
Accrued liabilities Journal	180'000	0
Accrued liabilities Sponsors	500'000	0
Total liabilities	1'534'469	599'726
EQUITY		
Capital contribution	1'842'618	1'842'618
Result brought forward	8'534'295	8'133'133
Result for the period	1'341'552	401'162
Total equity	11'718'465	10'376'913
TOTAL LIABILITIES AND EQUITY	13'252'934	10'976'639

Donations in kind and services for the year 2010

EASL is very grateful to have received booths at no charge at the following meetings:

American Association for the Study of Liver Diseases (AASLD), Oct 29 - Nov 2, 2010 Boston, Massachusetts, USA

20th Conference of the Asian Pacific Association for the Study of the Liver (APASL), China National Convention Center, March 25-28, 2010 Beijing, China.

United European Gastroenterology Federation (UEGF), UEGW 2010 October 23 - 27, Barcelona, Spain

Profit and Loss account for the period from 1st January to 31st December

REVENUES FROM THE ASSOCIATION'S ACTIVITIES

	2010 EUR	2009 EUR
Membership fees	322'936	273'981
Revenue from annual congress (ILC)	1'884'503	1'292'498
Revenues from meetings	37'749	30'000
UEGW	57'143	73'240
Royalties for Journal of Hepatology	276'576	265'719
Support from industry	1'000'000	988'654
Other income	14'753	80'523
Total revenues from the association's activities	3'593'660	3'004'614

FINANCIAL REVENUES AND COSTS

Gain on investment	3'055	2'910
Loss on investment	-38'183	-2'236
Unrealized investment gain	37'176	361'442
Unrealized investment loss	-105'336	-38'540
Financial income	312'496	234'296
Financial charges	-21'636	-39'531
Exchange loss	-3'453	-8'751
Exchange gain	97'778	0
Net financial income	281'899	509'591

Total income

3'875'558

3'514'204

EXPENSES

EASL Congress & Conferences (Monothematic + Special Conf)	494'902	876'077
School of Hepatology	117'731	152'091
GB Honorarium & GB Secretariat	113'351	0
GB Meetings	81'760	186'958
Investment Meetings	926	2'175
BMI Meetings	4'893	3'813
Professional consultants (Lawyer, accountant, audit,...)	83'488	125'950
Sister Societies Meetings	57'622	18'638
Endorsed Meetings	10'667	63'268
Fundraising	238	0
Kenes invoice	0	-174
Press Agency	81'068	83'413
Clinical Practice Guidelines	3'539	41'435
EU Policy Activities / EU Public Affairs	201'406	211'383
Fellowships	392'004	356'094
Communication & E Tools	133'413	13'673
Communication (Promotion of EASL)	0	90'747
Journal of Hepatology	239'269	204'008
EASL Office - General Administration	548'974	487'930
VAT	-31'245	195'562
Total expenses	2'534'007	3'113'042

Result for the period

1'341'552

401'162

PREMIUM SPONSORSHIP

Companies are invited to support EASL's aims and educational activities on an annual basis through Premium Sponsorship. EASL wishes to take this opportunity to thank it's Premium Sponsors for their commitment and unrestricted educational grants supporting a vast educational programme throughout 2010 as described in this Annual Report.



WHY WE SUPPORT EASL...



Bristol-Myers Squibb

A global biopharmaceutical company whose mission is to discover, develop and deliver innovative medicines. We are committed to Helping Advance the Management of Liver Disease.



GILEAD

Gilead Sciences discovers and develops innovative medicines in areas of unmet need. Aiming to improve patient care in life-threatening diseases, our commitment includes over a decade of liver disease research.



Life writes the questions - We pursue the answers. When it comes to disease there are as many questions as people. We can't provide an answer to them all. But we can help with our expertise. That's why Roche supports EASL.



MSD

From developing new therapies that treat and prevent disease to helping people in need, we're committed to improving health and well-being around the world this is why we support EASL in promoting state-of-the-art education to physicians and scientists.

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