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INTRODUCTION

In 2015, EASL will host its 50th Annual Meeting, and the Journal of Hepatology will mark its 30th birthday. 2015 will therefore be a year of celebration, but before heading too far into the future, it is time to reflect on past achievements, and to review what EASL has done throughout 2013.

We are happy to witness the unprecedented wealth of exciting data presented at the International Liver Congress™ (ILC) which was highlighted by the increased number of delegates 9,612 at the 2013 congress in Amsterdam. EASL’s Journal, the Journal of Hepatology, continues to feature high-quality articles, and in 2013 for the first time ever surpassed an impact factor of 10 confirming it as one of the two premier Journals in the field of liver disease.

Apart from the International Liver Congress™, there have been other successful educational events over the past year. The EASL Special Conference on Liver Cancer Management, originally scheduled for June 2013 in Istanbul, had to be rescheduled due to unforeseen circumstances. It was replaced by an HCC Summit and rescheduled to take place in Geneva, February the following year. The HCC Summit would combine the best of basic and clinical Hepatocellular Carcinoma research in one meeting.

EASL is especially proud to have successfully expanded its educational services by introducing the latest in modern technologies; the development of the smart phone iLiver app, and the launch of the most advanced online educational resource on the market, the Liver Tree™.

In 2013, EASL continued to promote research not only through presentations at events, but also through an ever increasing number of fellowships to young investigators; Short-Term research, Entry-Level, Post-Doc, and Physician Scientist programmes. For the first time, EASL decided to launch the funding of data research projects through a new initiative entitled EASL Registry Grants. Up to €150,000 to be awarded for the data collection of liver disease to encourage the sharing of research findings in Hepatology. The funding provided by EASL will help to organize consortia dedicated to gathering information with a specific focus on liver disease.

In times of increasing competition for young doctors in many fields of medicine, EASL is dedicated to helping to attract the brightest brains into the field of Hepatology and has chosen to inaugurate the EASL Mentorship programme. EASL aims to provide its young and talented colleagues with the skills and the contacts they need to succeed in the highly competitive field of liver disease research.

EASL is also recognizing that with shrinking resources and an ageing population in Europe, public health issues are becoming increasingly important. This is why EASL is now undertaking considerable efforts to work with the European Commission and the European Parliament not only for putting more emphasis on liver disease research but also for generating more attention to the rather neglected field of chronic liver disease.

Thank you for your continued commitment to EASL and support towards our efforts in the global fight against liver disease.

Prof. Markus Peck-Radosavljevic
Secretary General
EASL is an association that is not only dedicated to the pursuit of excellence in liver research, and in the clinical practice of liver disorders, but one that also provides education to all those interested in hepatology. EASL is run 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) all 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, the association 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.

EASL Governing Board (As of April 2013, after approval at the International Liver Congress™ in Amsterdam)
The EASL Building, Home of European Hepatology

One of the most important events in EASL’s history occurred during 2013; we acquired our own premises for the first time. The EASL Building, Home of European Hepatology, represents a significant landmark in the development of the Association and in the view of the Governing Board it indicates maturation. For many years EASL operated out of the offices of our professional congress and association management company. In 2009 Jean-Michel Pawlotsky set up our own office in Geneva run by the current executive director, Grégoire Pavillon and the former assistant director, Laetitia Bru. Based in rented premises in Geneva the office staff has grown as the association evolved to the point where new premises were urgently required. Driven by the need to find appropriate accommodation as well as a need to make a prudent investment to secure EASL’s capital assets the Governing Board embarked on a property search in the Geneva region. The final result meets all the criteria set out by the Governing Board. Located in central Geneva the EASL Building is easy to access from the airport, provides enough space for all the new functions that the office have taken on in the last few years with room for expansion. EASL now has a secure base right in the centre of Europe. The EASL team are delighted with their new accommodation and it provides an excellent venue for the majority of Governing Board meetings. I know that they would welcome a visit from any EASL members who find themselves in Geneva.

— Prof. Mark Thursz
EASL Executive Director’s overview

To follow-on from Prof. Mark Thursz’s words, I confirm that the EASL Office has been in constant evolution and expansion since it was established in Geneva in January 2009. Upon my appointment by Prof. Jean-Michel Pawlotsky, I initiated the association journey seconded by Laetitia Bru and Emilie Keller, and 4 years later we have 14 employees in the EASL office! In 2013, the EASL staff was delighted to move into their ‘own’ new premises. Our motivation is to manage even more tasks and duties in-house and to rely less and less on external partners.

The team works hard behind the scenes to ensure that a wide range of EASL educational events and services are provided to the association members, as well as to Hepatology community at large, in a timely manner. The team develops and maintains a host of online platforms and tools including; the weekly newsletters, the EASL website, iLiver app, congress app, and the LiverTree™ virtual e-library. Our role is also to animate the discussions on the EASL social media channels; EASL facebook, twitter, Google +, and Linkedin. If you haven’t yet joined a group discussion or commented online then there’s no time like the present to do so!

You may have already viewed and shared some of the EASL video materials that the team also produces. These are publicly available on the EASL Europe YouTube account for the benefit of all.

EASL membership is managed from the EASL office headquarters in Geneva. We aim to provide our members with the services and structure that they expect and need from an association like ours. The Journal of Hepatology team is also housed within the EASL premises, and their days are filled with proofreading, editing, designing and selecting the content of the Journal. But, our work isn’t only confined to the actions managed from EASL office in Geneva.

We also have staff located in Brussels, in the heart of the EU action. Our aim is to raise the profile of liver disease and to get involved in public health policy. As the association continues to grow, expectations continue to rise. Our role is to serve the EASL Governing Board, and the EASL members, so please continue to support us by participating in the events hosted by EASL, by using the educational materials available, and by following EASL across the various web platforms.

By sharing EASL news, stories and events with your colleagues and peers, we can continue to strengthen our association, and together we shall combat liver disease.

THE HOME OF HEPATOLOGY
NEW HEADQUARTERS IN GENEVA
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 to prevent liver related deaths
- Promote clinical, basic and translational research
- Foster international scientific exchange
- Advise European health authorities concerning liver diseases, the provision of clinical services, and the need for research funding
- Raise public awareness of liver diseases and their management
The International Liver Congress™ (ILC) is the annual meeting of the European Association for the Study of the Liver (EASL). It takes place 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 (PGC) providing an overview of different features in Hepatology. The PGC 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.

A Basic Science Seminar and Nurses and Associates Forum run simultaneously alongside the Postgraduate Course providing presentations of interest to all sectors of hepatology.

The International Liver Congress™ 2013 held in Amsterdam, The Netherlands, April 24-28 was EASL’s most successful annual meeting to-date in terms of media positioning, coverage, and overall attendance. All figures showed a record high; 9,612 attendees onsite, 178 journalists at the congress with an unprecedented 81 attending EASL’s official press conferences. 6,920 stories appeared in top-tier media outlets across the globe, straddling both medical and non-medical consumer media, further cementing EASL’s position as a leading authority on liver disease in Europe. The total number of abstracts submitted was 2,521 including Late-Breakers of which 1,434 were accepted.

The scientific programme was composed of 6 Plenary lectures: (4 General & 2 State-of-the-Art sessions), 13 EASL symposia sessions, 16 parallel sessions & 5 Grand Rounds, Workshops included 28 Early Morning Workshops with limited attendance, a Postgraduate Course, Basic Science Seminar and Nurses and Associates Forum.

In 2013, the International Liver Congress™ played host to 13 Industry Sponsored Symposia, and 3 Poster Sessions (consisting of poster sessions and oral presentations of chosen e-Posters).

The EASL Postgraduate Course has covered the following topics:

- TRANSPLANATATION AND THE LIVER – Amsterdam 2013
- ALCOHOLIC LIVER DISEASE – Barcelona 2012
- CHOLESTATIC DISEASES OF THE LIVER AND BILE DUCTS – Berlin 2011
- MANAGEMENT OF ACUTE CRITICAL CONDITIONS IN HEPATOLOGY - Vienna 2010
IN APRIL 2013, EASL COUNTED 3,687 ACTIVE MEMBERS FROM 101 COUNTRIES ACROSS THE WORLD.
In addition to a very informative scientific programme, EASL introduced the following new initiatives in Amsterdam, 2013.

**LIVER TREE™**

The Liver Tree™ is a continuously growing eLearning portal dedicated to Hepatology. The LiverTree™ provides instant access to indexed slides according to topics of interest selected within a scientific tree. This innovative concept of indexed slides allows users to instantly find and view very specific topics and content that matters to them in their research practice. Users no longer have to search through thousands of online presentations and slides until they find the few slides that are of real interest to them. The LiverTree™ is designed to identify specific sections of each presentation that correspond to a particular search topic and displays them for the user to view.

The LiverTree™ is offered as part of the EASL membership package and accessible through the Members’ Zone of the EASL website.

**NATIONAL ASSOCIATIONS VILLAGE**

EASL continues to offer national associations the chance to promote their own society, national activities and events at the International Liver Congress™. In 2013, the following National Associations participated:

<table>
<thead>
<tr>
<th>Country</th>
<th>National Association</th>
</tr>
</thead>
<tbody>
<tr>
<td>Armenia</td>
<td>Armenian Liver Forum</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>Association for the Study of the Liver, Dhaka, Bangladesh (ALSDB)</td>
</tr>
<tr>
<td>Belarus</td>
<td>Byelorussian Gastroenterology Association</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>Bulgarian Association for the Study of the Liver (BgASL)</td>
</tr>
<tr>
<td>Germany</td>
<td>German Association for the Study of the Liver (GASL)</td>
</tr>
<tr>
<td>Great Britain</td>
<td>British Liver Trust</td>
</tr>
<tr>
<td>Greece</td>
<td>Hellenic Association for the Study of the Liver (HASL)</td>
</tr>
<tr>
<td>Italy</td>
<td>Italian Association for the Study of the Liver</td>
</tr>
<tr>
<td>Jordan</td>
<td>Jordanian Society of Gastroenterology</td>
</tr>
<tr>
<td>Poland</td>
<td>Polish Association for the Study of the Liver (PASL)</td>
</tr>
<tr>
<td>Romania</td>
<td>Romanian Association for the Study of Liver (ARSF)</td>
</tr>
<tr>
<td>Russia</td>
<td>Russian Scientific Liver Society (RSLS)</td>
</tr>
<tr>
<td>South Korea</td>
<td>Korean Association for the Study of the Liver (KASL)</td>
</tr>
<tr>
<td>Spain</td>
<td>Spanish Association for the Study of the Liver</td>
</tr>
<tr>
<td>Switzerland</td>
<td>Swiss Association for the Study of the Liver (SASL)</td>
</tr>
<tr>
<td>Turkey</td>
<td>Turkish Association for the Study of the Liver (TASL)</td>
</tr>
<tr>
<td></td>
<td>Mediterranean Association for the Study of the Liver (MASL)</td>
</tr>
</tbody>
</table>

_EASL Annual Report 2013_
YOUNG INVESTIGATOR EVENTS

At the International Liver Congress™ 2013, a special ‘YI lounge’ was reserved exclusively for Young Investigators (those under 35 and still in training) within the EASL booth. In this restricted area, Young Investigators were able to network with other young fellows from around the world, socialize and talk with the Young Investigator Concerted Action Group representatives, and find information on the EASL Masterclass, Mentorship programme, upcoming Schools of Hepatology, as well as discover the Journal of Hepatology.

The Young Investigators’ Seminar held on Friday April 26, 2013 focused on research achievements and the controversial issues in the field of cell therapies for liver diseases. A State-of-the-Art Lecture introduced each of the multiple cell sources and their clinical relevance, and was followed by complementary presentations on relevant and controversial issues. In addition, a Young Investigators’ Forum was organized on Saturday April 27, 2013. EASL continues to offer YI bursaries to the presenting authors of the best accepted abstracts supporting young investigators by helping them financially to attend the International Liver Congress™.

SOCIAL NETWORKING

ILC momentum was gained in the run-up to the annual congress and throughout the 5-days of the event through the EASL online community. Detailed information is provided on the EASL website www.easl.eu. Updates are given via Facebook and Google +. Hot topics and news are shared through a Twitter account dedicated solely to the International Liver Congress™ (www.twitter.com/ILCpress).

The Twitter feed was initiated to inform the international media onsite, but has gradually developed into a much wider used platform by the entire Hepatology community. The EASL Linkedin group continues to generate open discussions (not specifically related to the congress) on a variety of topics related to the liver.
Networking and exchange of knowledge are optimised onsite using cutting edge applications such as Q4U and Chance2Meet. Q4U, a sophisticated and focused Q&A platform, was implemented during the 2013 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. Chance2Meet, on the other hand, facilitates networking and meetings with peers.

A highlights video was developed post-congress showcasing key moments of the Amsterdam congress. It is currently visible on the EASL YouTube account http://www.youtube.com/user/EASLEurope giving those who were not able to attend a flavour of what they missed!
## ILC 2013 Facts and Figures

### ILC FACTS AND FIGURES

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Congress</th>
<th>Venue</th>
<th>Number of Registered Delegates</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>49</td>
<td>London</td>
<td>objective: 10,000!</td>
</tr>
<tr>
<td>2013</td>
<td>48</td>
<td>Amsterdam</td>
<td>9,612</td>
</tr>
<tr>
<td>2012</td>
<td>47</td>
<td>Barcelona</td>
<td>9,415</td>
</tr>
<tr>
<td>2011</td>
<td>46</td>
<td>Berlin</td>
<td>8,062</td>
</tr>
<tr>
<td>2010</td>
<td>45</td>
<td>Vienna</td>
<td>7,602</td>
</tr>
<tr>
<td>2009</td>
<td>44</td>
<td>Copenhagen</td>
<td>7,017</td>
</tr>
<tr>
<td>2008</td>
<td>43</td>
<td>Milan</td>
<td>7,480</td>
</tr>
<tr>
<td>2007</td>
<td>42</td>
<td>Barcelona</td>
<td>5,769</td>
</tr>
<tr>
<td>2006</td>
<td>41</td>
<td>Vienna</td>
<td>5,162</td>
</tr>
</tbody>
</table>

### AMSTERDAM 2013 CONGRESS STATISTICS

- Clinical Researcher: 18%
- Basic Science Researcher: 10%
- Clinical Practitioner: 41%
- Industry / Corporate Professional: 19%
- Other: 12%
- Student: 3%
- Nurse / Healthcare Practitioner: 3%
- Resident / Research Fellow: 4%
- Epidemiology / Statistics: 1%
- Health Administrator: 1%
TOPICS OF INTEREST

- Viral Hepatitis: 32%
- Liver Transplantation: 9%
- Nafd / nash: 8%
- End-Stage Liver Disease: 6%
- Autoimmune: 5%
- PBC - Cirrhosis: 5%
- Liver Regeneration / growth: 5%
- Vaccines: 5%
- Genetic Aspects: 5%
- Hypertension: 4%
- Amyloid Degeneration Of...: 4%
- 4,143 Total non-unique responses

PARTICIPANT’S WORK PLACE

- University: 37%
- University Hospital: 22%
- Hospital: 22%
- Industry: 5%
- Others: 5%
- Laboratory: 3%
- Research Institute: 3%
- Private Practice: 2%
- Press: 2%
- 2,927 Total responses

The International Liver Congress™ 2014 (EASL’s 49th annual congress) is planned for London, UK, April 2014. A full account of the 2014 meeting will be provided in next year’s Annual Report.
Overview 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 up to 800 participants. The scientific programme of each Special Conference is built around a single topic discussed in a State-of-the-Art format.

SPECIAL CONFERENCES
In 2013, EASL scheduled a Special Conference dedicated to Liver Cancer Management. Due to unforeseen economic and political matters at the time, this event was cancelled when travel to Turkey was considered dangerous. The event was finally combined with the 2014 EASL Monothematic Conference also dedicated to Liver Cancer that was initially planned to take place in Munich, Germany. This resulted in a broader and enhanced programme aimed at a much wider audience. The new concept, the EASL HCC Summit, was planned to take place in Geneva, Switzerland from February 13-16, 2014, and the programme would offer two sub-components; a Basic Science programme on Molecular Pathogenesis & Translational Research in Liver Cancer followed by a Clinical programme on Liver Cancer Management.

The 2014 Special Conference on Optimal Management of Hepatitis B Virus Infection will be co-sponsored by APASL, Asian Pacific Association for the Study of the Liver, and is to be hosted in Athens, Greece, September 25-27, 2014.

MONOTHEMATIC CONFERENCES
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 where interaction between speakers and attendees is highly encouraged. The programme is reviewed and approved by the EASL Educational Councillors and Governing Board.

In 2013, EASL organised three Monothematic Conferences:
• Systems Biology of the Liver: Systems Biology and Clinics Face à Face, February 21-23, 2013, Luxembourg, Luxembourg
• Bacterial Infections in Cirrhosis, May 24-25, 2013, Barcelona, Spain
• Translational Research in Chronic Viral Hepatitis - Bridging Basic Science and Clinical Research, November 29–30, 2013, Lyon, France

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.

181 delegates registered to the Systems Biology of the Liver conference in Luxembourg. Participants came from 25 different countries, and the top 10 countries attending the congress were:

<table>
<thead>
<tr>
<th>Rank</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Germany</td>
</tr>
<tr>
<td>2</td>
<td>France</td>
</tr>
<tr>
<td>3</td>
<td>Turkey</td>
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<tr>
<td>4</td>
<td>Switzerland</td>
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<td>5</td>
<td>The United Kingdom</td>
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<td>6</td>
<td>Spain</td>
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<td>7</td>
<td>Belgium</td>
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<td>8</td>
<td>The Netherlands</td>
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<tr>
<td>9</td>
<td>USA</td>
</tr>
<tr>
<td>10</td>
<td>Italy</td>
</tr>
</tbody>
</table>
The content and organisation of the conference was evaluated by course attendees (0 indicates the lowest score, 10 indicates the highest score).

210 delegates were registered to the Bacterial Infections in Cirrhosis conference in Barcelona. Participants came from 37 different countries, and the Top 10 countries attending the congress were:

1. Spain
2. Italy
3. The United Kingdom
4. Ukraine
5. Germany
6. Switzerland
7. Portugal
8. Austria
9. Belgium
10. France

The overall satisfaction of the scientific programme was very high as is shown by the evaluation results below:

As for the Translational Research in Chronic Viral Hepatitis Monothematic Conference in Lyon, 277 participants attended the event from 38 different countries. The Top 10 countries attending the conference were:

1. France
2. Thailand
3. Germany
4. Switzerland
5. Egypt
6. The United Kingdom
7. Spain
8. Belgium
9. Bulgaria
10. Italy

Again the overall rating of the scientific content and quality of the presentations was high.
In 2014, EASL will host a Monothematic Conference on Primary Biliary Cirrhosis (PBC) in Milan, Italy. The objectives of this event are to review current finding and address key open questions regarding PBC, including:

- The real role of genetics and epigenetics in the development of the disease
- Why there are large geographical variations in disease frequency across Europe
- Why PBC occurs predominantly in women
- What causes disabling symptoms such as fatigue
- Why the autoimmune attack is focused on the biliary epithelium
- New theories on potential environmental triggers, such as chemical xenobiotics, to be explored together with the processes within the unique immunological milieu of the liver which lead to the breaking of self-tolerance
- Currently described animal models of PBC

SCHOOLS OF HEPATOLOGY

The EASL Schools of Hepatology began in 2003 and are educational events held apart from the International Liver Congress™. Aiming 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.

Each year, EASL organises 1 Basic School and 2 Clinical Schools targeting young fellows enrolled in hepatology-oriented departments, or more experienced clinicians who want to be exposed to the newest trends in hepatology. Participants have to apply for a place on the course; application for the EASL Schools of Hepatology is free and open to young fellows under the age of 35 and/or still in training.

EASL covers transportation of selected applicants, costs to attend the school and accommodation during the event. Approximately 30 places are available for each school and priority is given to registered EASL members during the selection process.

Courses are usually held in a medical institute, research centre 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 case-based discussions.

The EASL Educational Councillors and Governing Board review and select programmes proposed by the chairs. The Educational Councillors review all the applications from young hepatologists and choose the course candidates primarily based on their dedication to hepatology and their age. Priority is given to first time participants and a small number of participants are chosen (30 to 40 maximum) in order to facilitate discussions during each school.

In 2013, EASL organised the following Schools of Hepatology:

The EASL Basic School of Hepatology on Stem Cells and the Liver provided students with a better understanding of:

- adult liver stem cells, their contribution to liver regeneration and cancer
- techniques for researching progenitor cells such as animal models of liver regeneration and progenitor cell activation and laser capture microdissection of liver tissue
- reprogramming adult cells and the differentiation of pluripotent stem cells to produce hepatocyte like cells, including techniques for production, analysis of function and their potential
- “stem cell therapy” trials for liver disease including the results of recent studies and suggestions on how such trials should be conducted and data analysed
- barriers/pathways to the development of GMP compatible cells for clinical therapy
- current knowledge of stem cells as sources of liver cancer, including methods to analyze the “stemness” of cancer stem cells and the biology of such cells.

The Clinico-Pathological EASL Clinical School of Hepatology offered case discussions with the faculty on pathogenesis of fibrocystic liver disease and covered:

- PSC and malignancies
- Cholangioscopy
- Biliary echoendoscopic interventions
- Histological diagnosis of primary liver cancer
- Surgical treatment of HCC
- HCC and liver transplantation
- Rare primary liver tumours
- Chemoembolization
The main topics to be presented include; Cysts in the liver, Malignancy of the biliary tract, Primary liver tumours as well as live demonstration.

The General Hepatology Clinical School was designed for physicians who are at the beginning of their specialisation in Hepatology. Attendees would review the most important areas in the management of liver diseases and learn about specific questions in the treatment of common liver diseases. The following case discussions would take place with the faculty:

- Cholestasis of pregnancy
- Augmentin-induced cholestasis
- Co-infection HIV/HCV
- Skin care during DAA therapy
- Transjugular intrahepatic portosystemic shunts (TIPS)
- Portal vein thrombosis
- Polycystic liver disease
- Adenomas
- Cholangiocarcinoma
- Liver abscess

The main topics to be covered include; Cholestasis, Viral hepatitis, Cirrhosis, Metabolism/Genetics and Vascular/Cancer. 34 young investigators coming from 17 different countries took part in this event. Overall the course evaluations deemed the school scientific content as excellent or above average.

In 2014, 3 schools of Hepatology will be organized:

**EASL Basic School of Hepatology, Course 9: Epithelial Mesenchymal Interactions in Liver Development, Diseases and Cancer. January 24-25, 2014, Milan, Italy.**

Course content: Mechanisms that regulate the functional interactions between epithelial liver cells, in particular cholangiocytes, hepatic progenitor cells on one side, and mesenchymal and inflammatory cells, such as macrophages, on the other. The histogenesis and cell fate of epithelial and mesenchymal cells during liver repair is an area of current controversy and clarification of definitions and further experimental evidence, as well as a clear understanding of the available experimental models and their limitation is needed. Additionally, the prospects for therapy of chronic liver diseases and liver cancer based on the presented mechanism will be discussed, taking into account new biotechnological advances.

**EASL Clinical School of Hepatology, Course 22: Cholestatic Liver Disease. May 8–9, 2014, Amsterdam, The Netherlands.**

Course content: Cholestasis is an impairment of bile formation at the level of the hepatocyte and/or the biliary tree. Features of cholestasis dominate chronic cholestatic liver diseases and extrahepatic bile duct obstruction but can also be observed as a form of organ failure in a severely ill patient with a hitherto normal liver. Cholestasis is often seen in drug-induced liver injury. In children, cholestasis may hint at a genetic defect of hepatic metabolism including bile acid synthesis, membrane transporter formation and function, or bile duct development.

Although patients with chronic cholestatic liver disease are best treated by expert adult and pediatric physicians, patients with cholestasis are regularly seen in the surgical and obstetric ward and the intensive and coronary care units. Therefore, non-expert doctors need to be educated on basic aspects of liver physiology. Cholestasis as a consequence of extrahepatic obstruction by a stone or tumour is often easily diagnosed. A more difficult situation arises when cholestasis occurs as a consequence of malfunction of one of the hepatic transport pumps secondary to overt or occult sepsis, drugs, pregnancy, cardiac failure or post-operative secretory failure. Ursodeoxycholic acid has been unchallenged as a drug for the treatment of primary biliary cirrhosis and less so for the treatment of primary sclerosing cholangitis.

Usefulness of this event to my practice
- Excellent 76%
- Above Average 24%

Scientific content of this event
- Excellent 73%
- Above Average 27%
Currently, various nuclear receptor and bile acid receptor agonists are subject of randomized trials the outcomes of which are eagerly awaited. The emergence of these drugs will change the field dramatically as some not only are candidate drugs for the treatment of cholestatic liver disease but also for seemingly unrelated conditions as non-alcoholic steatohepatitis and diabetes mellitus. Thus, the hepatologist is becoming more and more a metabolic doctor. In order to capture these changes a thorough understanding of liver physiology is mandatory.

In this EASL School of Hepatology we shall present and discuss new data on diagnosis and management of cholestasis and cholestatic liver disease.

EASL Clinical School of Hepatology, Course 23: Liver Cirrhosis - A Systemic Disease, November 28-29, 2014, Belgrade, Serbia.

This course will be held in the ‘white city’ where the Pannonian plain meets the Balkans. The location is symbolic for the school, whose primary objective is to provide training and education at the interface between the broad area of liver diseases and the peaks of medicine in its liver-related sub-specialties. As comprehensive care for patients with end stage liver disease challenges us not only as Hepatologists but also as Internists, it is important to discuss state-of-the-art management of cirrhotic patients reviewed from different perspectives. Severe impairment of the liver function discloses its importance for almost any other organ including the immune system, nutrition and metabolic functions. We are therefore required to consider the widespread functional consequences of liver failure from every aspect of medicine. The course format is designed to incorporate state-of-the-art reviews, problem based approaches and to encourage discussion. Up to date content will be guaranteed by a distinguished faculty, who also represents a balanced equilibrium of truly European experts. The goal of the course will thus be to develop a holistic approach to the patient with liver cirrhosis. This aim is also reflected in the choice of our host city Beograd located at one of Europe’s largest connections - the Danube.

NEW! EASL MASTERCLASS

At the end of 2013, EASL launched the very first 2-day Masterclass, the first event of its kind ever organised by the association. The course was dedicated to “Hot Topics in Hepatology” and was held from November 14–16, 2013 in Bordeaux, France.

The EASL Masterclass offers a combination of scientific content with training in other areas (i.e. presentation skills presented by a professional coach) offered in a workshop style atmosphere. Participants are given the possibility to give scientific/clinical presentations, and sessions are organised as “pro & con – open discussions”. There are ample networking opportunities between Young Investigators and this is a unique occasion to meet senior EASL experts, Key Opinion Leaders (KOLs) in the field of Hepatology. Students also get the chance to hear about a “personal hepatology story” via a talk given by a prominent EASL member, and the opportunity to learn what makes a hepatologist successful.

During the first EASL Masterclass students learnt about 4 hot topics:

- Genetic liver diseases
- Hepatitis E – relevant or over diagnosed?
- Microbiota and the liver
- New diagnostic approaches for liver fibrosis

Application for the EASL Masterclass is made online via www.easl.eu. Participants have to submit proof of their status as a YI (young investigator) - 35 years and under and/or still in training. Those interested are requested to submit an abstract that they would like to present during the Masterclass (presentations should ideally be topically related to one of the 4 hot topics listed), and should be prepared to present a clinical case report that can be discussed with peers.
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 has reached almost 4000 members to-date.

<table>
<thead>
<tr>
<th>CATEGORIES</th>
<th>GREEN PACKAGE</th>
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<td>Online version of the Journal of Hepatology and all other benefits*</td>
<td>Online &amp; printed version of the Journal of Hepatology and all other benefits*</td>
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<td>Annual Fee</td>
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<td>Regular (for individuals residing in Europe and Israel.)</td>
<td>€150</td>
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<td>Corresponding (for individuals from non-European countries.)</td>
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<td>Trainee (For trainees up to 35 years old who wish to become active members. Proof of age and status (copy of ID and letter from head of department) are required for this category.)</td>
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<tr>
<td>Emeritus (Open to members who have attained the age of 65 and have been EASL members for at least ten years.)</td>
<td>€25</td>
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BENEFITS

As an EASL member you will enjoy the following benefits:

- Access to the online version of the Journal of Hepatology*
- Reduced registration fees to The International Liver Congress™ (ILC) and all EASL Meetings
- Free access to the LiverTree™
  EASL Webcasts, Presentations, Case Studies, Interactive quizzes, and more...
- Possibility to host fellows as part of the EASL Fellowship Programme
- Opportunity to organise EASL Monothematic Conferences and EASL Special Conferences
- Chance to host one of the EASL Schools of Hepatology
- Free weekly e-Newsletter
- Application support for the EU Research Framework Programme

*Members wishing to receive printed copies of the Journal of Hepatology can still opt for the paper version for an additional €50 per year.

Join the EASL Community and connect with other experts in Hepatology via the EASL Members’ Zone!
Mentorship

In November 2012, the association launched the EASL Mentorship programme and now offers 2 Mentorships per year. The Mentorship programme was created as a means of enhancing scientific exchange and personal developmental relationships in which a more experienced and knowledgeable hepatologist will guide a young investigator (registered EASL members under the age of 35 and/or still in training) through a crucial stage of their career path.

The Mentorship programme is a 12 month programme and entails informal face-to-face communication during a sustained period of time, between the mentor (who is perceived to have greater relevant knowledge in the field of hepatology) and the mentee (who is perceived to have less experience). The programme is not simply about answering ad hoc questions or providing occasional help, it is about establishing an ongoing relationship involving continuous learning, dialogue, and challenge. EASL Mentorship is a process that involves communication and is relationship based, it is a process enabling the informal transmission of knowledge and a means of support for the mentee that is relevant to work, career, and professional development.

In 2014, the Mentorship programme will continue with two new mentors; Prof. Peter LM Jansen and Prof. Peter Ferenci. Further details of the Mentorship programme can be found on www.easl.eu/fellowship/mentorship.

2013 MENTORS & MENTEES

Massimo G. Colombo, Professor of Gastroenterology at the University of Milan, Italy. His research studies and interests include diagnosis and treatment of viral hepatitis and liver cancer.

Prof. Colombo is the mentor for:
Dr. Bulent Baran

Jaime Bosch, Professor of Medicine and Senior Consultant Hepatologist at the IMD, Hospital Clinic, University of Barcelona, Spain, and Director of the CIBERehd, Instituto de Salud Carlos III, Ministerio de Economía y Competitividad. His research interests are the pathophysiology and treatment of portal hypertension.

Prof. Bosch is the mentor for:
Dr. Bogdan Procopet
EASL Sheila Sherlock Fellowship Programme

2013 SHORT-TERM FELLOWSHIP

The recipients of the short-term fellowship are:

- Frans Cuperus, Austria
- Evaggelia Liaskou, UK
- Lemonica Koumbi, UK
- Gianna Aurora Palumbo, Italy

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.

Full details of the fellowships programmes can be found on www.easl.eu/_fellowship

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

Every year EASL offers the following fellowship programmes:

- **POST-DOCTORATE** €40,000 awarded (up to 3 fellowships)
- **ENTRY-LEVEL** €30,000 awarded (up to 3 fellowships)
- **PHYSICIAN-SCIENTISTS** (1 six month fellowship €20,000 and 1 twelve month fellowship €40,000)
- **SHORT-TERM** (EASL financially supports a total yearly grant of €24,000 (12 x €2,000 per month). This amount is divided between the total numbers of successful awardees, according to the length of fellowships requested by the applicants. The maximum length of each fellowship must not exceed 3 months. EASL offers two periods for short-term fellowship applications during the year).
Concerted Action Groups

EASL has created Concerted Action Groups (CAG) to improve collaboration between basic and clinical scientists from range of disciplines who share common specialist interests.

While fostering interactions among scientists, the Concerted Action Groups are intended to carry out educational activities in a specific area, field or discipline of Hepatology. In particular, the Concerted Action Groups advise the EASL Governing Board on its educational programmes. There are 3 Concerted Action Groups to-date.

1. Basic Science CAG
2. Young Investigators CAG
3. Public Health CAG

The Basic Science CAG is formed of basic scientists working in different fields and disciplines that are of interest for hepatology research. While acting as an advisory group to the EASL Governing Board the group also aims to:

• foster interactions between basic scientists and clinical researchers in the field of Hepatology
• advise the EASL Governing Board on fundamental scientific and technological developments that may help increase the basic science contents of EASL educational activities such as Monothematic Conferences and Basic Schools of Hepatology
• contribute to the elaboration of the programmes of the International Liver Congress™ (Basic Science Seminar, Grand Rounds, Translational Workshop, Basic Symposia, State of the Art lecture). The objective being to select topics and speakers that make these activities attractive to researchers with interest in fundamental aspects of liver pathophysiology and disease treatment

The Basic Science CAG currently has 7 group members and 2 co-chairpersons. The group meets face-to-face once a year during the International Liver Congress™, and group members maintain regular contact via e-mail the rest of the year. Consultations to the CAG members circulate very efficiently by e-mail whenever needed. Decisions are taken by consensus, which in basic science is easily achieved.

The Young Investigator Concerted Action Group (YI-CAG) contributes to the following initiatives established by EASL:

• YI Masterclass
• Fellowships (over €500,000/year)
• Schools of Hepatology (YI attendance fully covered by EASL)
• Mentorship programme
• YI Concerted Action Group
• Specific YI sessions held during the International Liver Congress™
• YI travel bursaries for all EASL meetings
• YI networking event and lounge during the International Liver Congress™

The group advises the EASL Governing Board on specific educational activities for young hepatologists, and organises the YI activities during the International Liver Congress™ (YI seminar, YI forum, YI social event). In addition, the group organised a very successful EASL Masterclass in Bordeaux together with Devi Sonida-Mey from the EASL office in 2013. The Masterclass photo album can be seen on the EASL Facebook page.

Laurent Castera, EASL Vice-Secretary Governing Board representative, is responsible for the YI CAG. He is seconded EASL-YI representative Gunda Millonig.
The YI CAG suggested the new fellowship for protected research time for physician-scientists which was approved by the EASL Governing Board.

Future group initiatives include:

- Starting an internet platform for the exchange of research information (e.g. lab protocols, basic statistic knowledge, link collection for research-relevant webpages)
- Organizing practical YI courses during the International Liver Congress™ e.g. how to write a scientific abstract, how to apply for grant money
- Promoting interaction among EASL-YIs for future co-operation and collaboration (e.g. scientific speed dating)
- Other members of the YI CAG are, Joshi Deepak, Germani Giacomo, Rautou Pierre-Emmanuel, and Liberal Rodrigo.

Young Investigators is a group of EASL Ambassadors under the age of 35 and still in training with active EASL Membership. This vibrant group aims to build an active and dynamic community of YIs, and has countless ideas on ways to promote and facilitate discussion and exchange of information via EASL online forums and at EASL events. The group would like to see the creation of more YI Events like the EASL Masterclass. The group participates in the social networking event dedicated to YIs held during the International Liver Congress™. It also provides opportunities to contribute to the development of iPhone and iPad applications. The YI CAG aims to create an online network of friends via the EASL Facebook page and wants to engage in the development and update of the EASL Wikipedia page. The objective being to encourage YIs to become EASL members, and ensure that existing members renew and stay actively involved in all EASL activities.

The YI CAG meets twice a year: once at the International Liver Congress™ and once approximately 6 months later in order to plan and organise all activities. In April 2014, two YI CAG members will step down and new members are to be elected.

The primary role of the Public Health CAG is to advise the EASL Governing Board specifically regarding the EU programmes.

The group has 1 or 2 meetings per year. One of which is organised during the International Liver Congress™. Each member of the Public Health CAG is expected to give 3 years commitment to EASL and members step down at different times in order to allow progressive transition, and enabling a constant record of previous meetings and discussions. It is important to have a balanced nationality split within this group.

The Public Health CAG is chaired by EASL Governing Board Scientific Committee member Alessio Aghemo, Italy.

THE MAIN GOALS OF THE GROUP ARE TO:

- attract scientists and healthcare providers with an interest in public health, prevention and control of liver disease
- improve the role of EASL in providing educational activities in these fields
- assist the EASL Governing Board on public health issues, and on the organization of specific initiatives
- review EASL Clinical Practice Guidelines and other official documents related to public health issues
- facilitate the relationship with existing public health boards, and to improve lobbying and cooperation initiatives with official institutions.

FUTURE PROJECTS INCLUDE:

- Contribution to future International Liver Congress™ scientific programmes and a Public Health Workshop in Vienna
- Development of the HEPAMAP chapter on public health
- Ongoing discussions about a possible Public Health School of Hepatology
EASL has continued to develop Clinical Practice Guidelines (CPGs) since the first issue that was released in October 2008. These guidelines are distributed via the Journal of Hepatology and 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.

In 2013, the Clinical Practice Guidelines to Optimise the Management of Hepatitis C Virus Infection were reexamined and a 2013 Revised Version was made available in line with emerging and evolving Hepatitis C treatments.

**OTHER EXISTING EASL CLINICAL PRACTICE GUIDELINES INCLUDE:**

- Management of Hepatitis C Virus Infection
- 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

**FUTURE PUBLICATIONS THAT ARE ‘WORK IN PROGRESS’ INCLUDE:**

- Management of Acute Liver Failure
- Autoimmune Hepatitis
- Benign Liver Tumors
- Gallstones Disease
- Liver Biochemistry Tests
- Liver Transplantation
- Vascular Liver Disease
- NAFLD / NASH

**AASLD/EASL JOINT GUIDELINES ON HEPATIC ENCEPHALOPATHY:**

In autumn 2009, initial discussions began between the American Association for the Study of Liver Disease (AASLD) and EASL regarding the creation 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. These guidelines, approved by the AASLD and EASL, shall represent the position of both associations from a European and American perspective. The document is intended for use by physicians, and the recommendations shall suggest preferred approaches to the diagnostic, therapeutic and preventive aspects of care. The AASLD/EASL Practice Guidelines are intended to be flexible, in contrast to standards of care, which are often inflexible policies to be followed in every case. Specific recommendations are to be based on relevant published information. The writing group has continued their efforts since and the final manuscript is planned to be approved by AASLD and EASL. Governing Boards for co-publication in Hepatology and the Journal of Hepatology in 2014.
The principle role of the Ethics Committee is to ensure the integrity of the EASL Clinical Practice Guidelines and of the EASL Governing Board.

The Committee’s role is to review and control the professional status of panel members involved in the creation of the EASL Clinical Practice Guidelines to eliminate the potential for real or perceived bias which might undermine the integrity of the guidelines. In addition, the Ethics Committee will respond to complaints made by EASL members, governmental authorities or regulatory agencies about the conduct of any Governing Board member and members of any other EASL board or EASL representative. The Ethics Committee decides on guidelines for reviewing appointments to the Clinical Practice Guideline panels. Candidate membership of the panels are firstly proposed by the EASL Governing Board then approved by the Ethics Committee according to the guidelines.

Complementary information of the Ethics Committee role can be found on the EASL website: www.easl.eu/_about-easl/easl-ethics-committee

*David Adams and Mario Mondelli will step down in April 2014.*
WHAT WE DO IN PUBLIC AFFAIRS
EASL works at EU level in Brussels and at international level in Geneva to advance liver disease policy. Working in partnership with a range of other stakeholders including Members of the European Parliament, the European Commission and other health organisations our goal is to reduce the burden of liver disease in Europe by advocating for more research funding and effective prevention policies. Focusing on key areas such as viral hepatitis, research policy and alcohol policy we continue to make progress in a difficult advocacy environment and draw attention to the key role and expertise that EASL can offer to promote liver health across Europe.

ACTIVITIES IN 2013
LAUNCH OF THE BURDEN OF LIVER DISEASE
In 2013 EASL published its first major EU advocacy report. The Burden of Liver Disease looked at liver disease prevalence and risk factors across the European region and highlighted the many gaps in our knowledge that still exist. The report was launched at the European Parliament in Brussels in February 2013 to a very positive reception.

FRIENDS OF THE LIVER
On the same day a new European Parliamentary group, the Friends of the Liver consisting of 8 MEPs from all over Europe was launched. The aim of the group is to raise awareness and build support for liver research and prevention policies in the European Parliament. EASL provides the secretariat for this group.

HEPATITIS
Hepatitis continues to rise up the agenda of the EU institutions as a health issue. The European Centre for Disease Control established a working group in 2013 to draft an EU strategy on hepatitis. EASL Secretary-General, Markus Peck, is a member of the working group, which will report in 2015.

As a result of advocacy work by EASL and its partners in 2012 and 2013, hepatitis has also been included as a priority area for funding in the new EU 2014-2020 Health Action plan. First calls for proposals are expected in late 2014.

In the autumn of 2013 eleven MEPs published a written resolution for adoption by the European Parliament calling on the Council and Commission to do more on viral hepatitis in the EU. EASL worked with the European Liver Patients Association and other partners to contact all 766 MEPs asking them to sign the resolution. Although the resolution failed to get the required 50% of MEP signatures needed to forward it to the Commission, the resolution was signed by almost 100 MEPs, indicating a growing awareness and support for more measures on hepatitis in the European Parliament.

EASL has also been working with the Correlation Network on hepatitis C and drug users. The Network is co-funded by the Health and Justice directorates-general of the European Commission and brings together over 30 organisations working in the field of infectious diseases. The aim of the project is to contribute to knowledge and capacity and raise awareness. Activities include an inventory of evidence on hepatitis C and drug use, peer training, a literature review and policy and advocacy campaigns.

RESEARCH POLICY
The first calls for projects under the new Horizon 2020 research programme were published by the Commission in December 2013. The focus of health projects for the first two years of the programme is on personalising health care by concentrating on big data, better diagnostics, development of therapies and better disease prevention policies. Funding for liver disease-related projects accounted for approximately €230 million Euros in Framework Programme 7 (and around 4% of the health budget). We will continue to advocate for more funding for liver disease research in coming years.
ALCOHOL POLICY
Working with six other partners, including the European Liver Patients Association and alcohol control group Eurocare, EASL co-organised and participated in the first ever Awareness Week on Alcohol Related Harm in Brussels from 13-17 May 2013. Events included a breakfast briefing hosted by the Estonian Permanent Representation to the European Union on 14 May, which was attended by almost 50 participants including Member State health attachés, WHO representatives and European Commission officials. On 15 May Irish MEP Nessa Childers hosted a hearing in the European Parliament calling for a new integrated EU alcohol strategy.

The Alcohol Awareness Week took place following a series of roundtable discussions held with other partners in 2012 and 2013.

Following the success of the Alcohol Awareness week the partners worked with MEPs in the autumn of 2013 to support a resolution calling on the Commission and Member States to renew the alcohol strategy. The outcome of this campaign will be reported in the 2014 annual report.

EASL was also a member of an expert group established by the Organisation for Economic Cooperation and Development (OECD) to draft a report on health harms and economic costs of alcohol related disease. The report will be published in 2014.

CLINICAL TRIALS
2013 saw an increased focus on transparency around clinical trials as the European Union negotiated a revised clinical trials directive and the European Medicines Agency revised its policy on access to clinical trials data. EASL took part in the EMA online consultation on its draft policy and contributed amendments to the draft clinical trials directive.

PARTNERSHIPS
The wide range of European policy measures affecting liver disease and hepatology health professionals presents many challenges and requires a co-ordinated response. For this reason EASL is actively engaged in partnerships with a growing number of medical societies, health NGOs, the WHO and other agencies. These include membership of the European Chronic Disease Alliance, whose 10 members advocated strongly for an EU chronic disease strategy throughout 2013. We are also members of the Biomed Alliance, which campaigns for increased EU funding and visibility for health research. On alcohol policy we work closely with Eurocare. The European Liver Patients Association (ELPA) remains a strong partner in all our work on general liver disease and prevention activities.

We will continue to build these partnerships throughout 2014 and we look forward to engaging more with our members and new partners to ensure that European liver health is given the recognition, funding and prevention policies it deserves by the new European Parliament and Commission in 2014.
EASL e-Learning

EASL continues to develop 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. The official eLearning portal of EASL was launched at the International Liver Congress™ in 2013 and the LiverTree™ was born.

Visit www.easl.eu_online-mobile-education

LIVERTREE™
LiverTree™ is the most advanced, flexible and powerful online learning tool in the field of liver research, offering a vast range of high quality scientific content. The LiverTree™ offers EASL members free access to a highly structured and well organized platform of educational material.

LiverTree™ uses a powerful search algorithm that allows users to filter, drill down and browse content quickly and easily. The platform offers rapid access to a vast range of scientific material.

SEARCHES CAN BE PERFORMED BY:
- Topic and sub-topic
- Types of content/activity
- Sources of content
- Groups of content (Level of content, practice guidelines, etc.)
- Date
- Keywords
- Search history

CONTENT CAN ALSO BE DISPLAYED BY:
- Most Recent
- Most Popular
- Alphabetical Order
- Parent Topic and more...

As users type, a search box appears showing; suggested keywords, suggested topics, and suggested speakers/authors. The natural navigation flow has been designed to enhance the users’ navigation experience. The portal has been created to firstly allow visitors to find content and more experienced users to combine multiple numbers of filters to make precise searches. The intuitive structure enables easy access to all content that is efficiently organized by topic, event, speakers/authors and other user friendly categories.

Search features of the portal

This powerful search tool allows searches by keywords so that users can instantly find an entire selection of related content available from among the vast library of listed educational webcasts, learning quizzes, scientific posters, conference abstracts as well as precisely matching slides.
In the future, users will also be able to collect ECMEC CME credits by completing mobile CME courses accredited by UEMS, self-assessments, clinical cases & more.

The LiverTree™ will change the way specialists interrogate and retrieve precise information from scientific presentations and lectures, and is a major breakthrough in online education.

iLiver APP
Following the launch of the iLiver app in Barcelona 2012, an Android version was released at the beginning of 2013, and iLiver downloads currently count 5,442 Android smartphones and 743 tablets, in addition to the 15,000+ iOS users.

iLiver was developed by EASL as an interactive and dynamic application for professional use at patient bedside. It delivers instant medical information and clinical recommendations to medical experts (i.e. hepatologists, gastro-enterologists and internal medicine specialists) and contains rigorously reviewed and updated information specifically related to liver diseases.

ILIVER FEATURES THE FOLLOWING DISEASES:

- Acute Liver Failure
- Alcoholic Liver Disease
- Ascites
- Autoimmune Hepatitis
- Budd-Chiari Syndrome
- Cholestasis - PBC & PSC
- Drug-Induced Liver Injury
- Extra-Hepatic Portal Vein Thrombosis
- Gallstones
- Haemochromatosis
- Hepatic Encephalopathy
- Hepatitis A
- Hepatitis B/Hepatitis D
- Hepatitis C
- Hepatitis E
- Hepatocellular Carcinoma
- Hepatorenal Syndrome
- Infections in Cirrhosis
- Liver Diseases in Pregnancy
- Liver Transplantation
- Non-Alcoholic Steatohepatitis
- Non-HCC Liver Tumours
- Portal Hypertension
- Wilson’s Disease

Additional chapters on Paediatrics Liver Disease and Alpha 1 Antitrypsin Deficiency are to be added, translated language versions will also be made available in the future.

The app is free and accessible via the Apple Store and Google Play.

For more information visit
www.easl.eu/_online-mobile-education
The Journal of Hepatology

The JOURNAL OF HEPATOLOGY is the official Journal of EASL. Since its creation in 1985, the Journal has seen an impressive development and readership numbers are ever increasing. Over time, it has developed into one of the leading journals in the field, publishing the newest discoveries in hepatology. The EASL membership includes free access to the Journal of Hepatology.

In 2013, the JOURNAL OF HEPATOLOGY obtained an impact factor of 10.401. With this impact factor, the official journal of EASL is perceived as the fastest growing and most consistently impactful hepatology publication over the past 8 years. (source: Thomson® Scientific) which is a continued testament to the Journal’s outstanding relevance in the field. The 2013 impact factor now places the Journal of Hepatology 2nd in the field of ‘Hepatology’ (source: Thomson® Scientific) and 5th in the field of ‘Gastroenterology and Hepatology’.

The impact factor growth (Figure 1.) has been mirrored by the continuous increase in the number of submissions (Figure 2.) to the Journal and downloads from the different platforms where the Journal is hosted.

The 2012-2013 Editorial Team includes one Editor-In-Chief, two Co-Editors, sixteen Associate Editors, six Special Section Editors, two Focus Editors, two Web Editors, and a Statistical Consultant. The Journal Editorial Office team is located within the EASL headquarters in Geneva, Switzerland, and is comprised of one Editorial Manager, one Editorial Coordinator, one Medical Illustrator, and one freelance Graphic Designer. With the arrival of the new Editorial team lead by Professor Didier Samuel in 2009, quite a few changes were made to improve the layout of the Journal, to better control the quality of the papers published, and to strive to attract the most updated state-of-the-art content. These efforts have been fruitful, the Journal enjoys a high brand recognition (due, in part, to the original art covers and skillful figure redesign) and it is now perceived as one of the most innovative players in the field.

The Journal publishes 20 original manuscripts per month, a step forward from the 14 the Journal was publishing before the arrival of the new team. Along with the traditional review format, the Journal publishes a series of Special Section articles (Figure 3.). The Focus section highlights the most poignant manuscript in each issue, while Hepatology Snapshot aims to briefly 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. Frontiers in Liver Transplantation gives insight into the most recent developments in the transplantation field and emphasizes that it is now considered a permanent trend within the field of hepatology. The most relevant papers published in other journals are highlighted in
the International Hepatology section. The Letters to the Editor provide short comments on topical issues or readers’ reactions to articles published in the Journal. In past years, several new features have been implemented all aiming at keeping the Journal at the state-of-the-art in publishing, anticipating new developments to make it accessible to an even wider audience. To this end, in 2011 the Journal created a new website layout. The website currently continues to serve as a platform to highlight the Journal content and gives easy access to all articles, open access reviews and special sections.

The success of these changes is illustrated by the number of visitors and downloads which have both increased since (Figures 3).

The Journal is now part of the evolving global communication scene and readers can find the Journal on Facebook, Twitter, LinkedIn and Google+.

In 2013, the Journal went mobile and is now available on the iPad.

An App was developed by EASL with the intent to keep the unique look and feel of the Journal when reading articles on the iPad. In contrast to the website, the issues are also accessible, including supplementary data and pdf reprints, while offline. And as an EASL member, the issues on the iPad are free of charge. App figures currently show that 1700 users have downloaded the free Journal App and around 500 readers have accessed the monthly issues. In 2014 the Journal website will undergo further change in order to continue to evolve alongside tablet computers and smart phone technology.

The development of the last years is a story of success, illustrated by increased impact factor, increased number of visitors and downloads of Journal articles (both from the Journal website and Science direct). Clearly, the Journal has achieved foresee new developments in state-of-the-art in publishing thereby making it accessible to an even wider audience.
EASL Communications & Social Media

EASL continues to assimilate social media into its communication strategy, and now connects to the Hepatology community via the EASL facebook, Twitter, Linkedin, Google + and YouTube. These channels complement the EASL website www.easl.eu where all information related to the association, its services and events can be found.

Interaction via FACEBOOK began in 2011 and continues to evolve. The EASL facebook page currently has 2,761 likes. Join the community, connect now and like EASL!

EASL HAS TWO TWITTER ACCOUNTS

@EASLnews that reaches out with daily news and events related information. This twitter account started in 2011 has 1,658 followers to-date.

@ILCpress was initiated specifically for media representatives at the International Liver Congress™. This channel is used as a means to inform all journalists about hot press topics, scientific data and stories of interest before, during and after the annual congress. @ILCpress currently has 966 followers.

GOOGLE+ has 51 followers to-date and over 80,000 views indicating that the circles of friends interact and share the information posted by EASL.

The EASL Europe YOUTUBE CHANNEL is an interesting way to showcase Hepatology focused video clips. Videos range from expert panel discussions, to scientific presentations, International Liver Congress™ highlights and talking heads, as well as the animated history of Hepatology, the LiverTree™ and creation of the iLiver.

THE LINKEDIN GROUP ‘EASL- European Association for the Study of the Liver’ counts 1,334 members who actively discuss liver related subjects. Discussion topics include:

• Italian MEP asks EU Commission about Medicines and side effects on the liver
• Changing Tides in Hepatitis C Virus (HCV) Treatment: The New Wave of HCV Drugs and Effects on Enrollment Trends
• Metabolomics applications in Liver Research
The 2013 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™ in Amsterdam, April 2013. This was mainly due to a further increase in membership and the huge success of the International Liver Congress™ that was attended by over 9,000 delegates. Once again, thanks go to the Banque Cantonal Vaudoise, EASL’s banking partner, as income from investments even slightly exceeded the expected figures, despite the persisting unfavourable financial context. Thanks also go to the 2013 four EASL Premium Sponsors (Bristol-Myers Squibb, Gilead, M.S.D., and Roche) who confirmed their unrestricted grant supporting the initiatives of the association throughout the year.

In summary, the main sources of income for 2013 were represented by the International Liver Congress™ revenues (≈ 43%) and the unrestricted support from Premium Sponsors (≈ 21%); EASL memberships accounted for ≈ 11%.

The provisional income for 2014 is expected to be close to €4,5 million, taking into account that three Premium Sponsors have confirmed their unrestricted support: Bristol-Myers Squibb, Gilead, and Abbvie. The 2014 International Liver Congress (ILC™) in London had a huge success, with more than 10,800 participants and, therefore, is expected to provide revenue enabling the association to once again cover over 40% of the global income.

The provisional expenses for 2014 are expected to overcome the income because of the decision to put into practice new initiatives, especially in the field of i-Tools, and the need to expand the manpower in the EASL Office, that is preparing to entirely take over the organization of all the EASL meetings and congresses, including the ILC™. Thus a slight negative provisional balance for the 2014 (- € 127,909) has been presented and approved in the business meeting held during the London ILCTM.

### Incomes (in € Mio)

<table>
<thead>
<tr>
<th>Year</th>
<th>0</th>
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<th>2</th>
<th>3</th>
<th>4</th>
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<td></td>
<td></td>
<td>4,554,739</td>
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</tr>
<tr>
<td>2013</td>
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### Expenses (in € Mio)

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<th>Year</th>
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<th>3</th>
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## Auditor's Report of the European Association for the Study of the Liver 2013

**Balance sheet as of 31st December 2013**

<table>
<thead>
<tr>
<th>Assets</th>
<th>2013</th>
<th>2012</th>
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</thead>
<tbody>
<tr>
<td>Cash</td>
<td>2'755</td>
<td>3'874</td>
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<tr>
<td>Working accounts banks</td>
<td>5'007'912</td>
<td>3'750'933</td>
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<tr>
<td>Investment deposit</td>
<td>8'200'829</td>
<td>7'640'925</td>
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<td>Accounts receivable &amp; Accrued Assets</td>
<td>387'152</td>
<td>855'082</td>
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<tr>
<td>Withholding tax</td>
<td>1'949</td>
<td>1'925</td>
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<tr>
<td>VAT receivable</td>
<td>24'710</td>
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<td>Computer</td>
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<td>10'122</td>
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<tr>
<td>Building furnitures</td>
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<tr>
<td>Building</td>
<td>6'176'573</td>
<td>5'332'288</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td><strong>19'929'933</strong></td>
<td><strong>17'605'366</strong></td>
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<table>
<thead>
<tr>
<th>Liabilities and shareholders’ equity</th>
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<tr>
<td>Mortgage</td>
<td>1'863'068</td>
<td>1'887'380</td>
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<td>Accrued liabilities Expenses</td>
<td>1'286'837</td>
<td>794'380</td>
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<td>Accrued liabilities Membership</td>
<td>287'338</td>
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<td>Accrued liabilities Journal</td>
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<td>165'000</td>
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<td>Accrued liabilities Sponsors</td>
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<td>Accrued liabilities Congress</td>
<td>1'752'009</td>
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<td><strong>Total liabilities</strong></td>
<td><strong>5'354'251</strong></td>
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<th>Equity</th>
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<td>Capital contribution</td>
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<td>1'842'618</td>
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<td>Result brought forward</td>
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<td>10'987'817</td>
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<td>Result for the period</td>
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<tr>
<td><strong>Total equity</strong></td>
<td><strong>14'571'582</strong></td>
<td><strong>14'052'840</strong></td>
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**TOTAL LIABILITIES AND EQUITY**

<table>
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<tr>
<th></th>
<th>2013</th>
<th>2012</th>
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<tbody>
<tr>
<td><strong>19'929'933</strong></td>
<td><strong>17'605'366</strong></td>
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### Profit and Loss account for the period from 1st January to 31st December

<table>
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<tr>
<th></th>
<th>2013</th>
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<tr>
<td></td>
<td>EUR</td>
<td>EUR</td>
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<tr>
<td><strong>REVENUES FROM THE ASSOCIATION’S ACTIVITIES</strong></td>
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<tr>
<td>Membership fees</td>
<td>529'713</td>
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<td>Revenue from annual congress (ILC)</td>
<td>2'218'702</td>
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<td>UEGW</td>
<td>57'143</td>
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<td>Royalties for journal of Hepathology</td>
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<td>Support from industry</td>
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<td>Building income</td>
<td>68'090</td>
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<td>Other income</td>
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<td><strong>Total revenues from the association’s activities</strong></td>
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<td>4'271'572</td>
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<tr>
<td><strong>Financial revenues and costs</strong></td>
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<td>Unrealized investment gain</td>
<td>73'597</td>
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<td>Financial charges</td>
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<td><strong>Net financial income</strong></td>
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<td><strong>Total income</strong></td>
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<tr>
<td><strong>EXPENSES</strong></td>
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<td>EASL Congress &amp; Conferences (Monothematic + Special Conf.)</td>
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<td>635'311</td>
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<td>Schools of Hepatology</td>
<td>122'241</td>
<td>96'923</td>
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<tr>
<td>GB Honorarium &amp; GB Secretariat</td>
<td>125'200</td>
<td>125'000</td>
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<td>GB Meetings</td>
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<td>Professional consultants (Lawyer, accountant, audit, …)</td>
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<td>115'637</td>
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<td>Sister Societies Meetings &amp; Promotion</td>
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<td>109'555</td>
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<td>Endorsed Meetings</td>
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<td>Press Agency</td>
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<td>Clinical Practice Guidelines</td>
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<td>EU Policy Activities / EU Public Affairs</td>
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<td>Fellowships</td>
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<td>Mentorship</td>
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<td>154'732</td>
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<td>Journal of Hepatology</td>
<td>306'167</td>
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<td>EASL Office</td>
<td>1'160'491</td>
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<td>VAT</td>
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<tr>
<td><strong>RESULT FOR THE PERIOD</strong></td>
<td>522'742</td>
<td>1'222'405</td>
</tr>
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</table>