

# EAPC's 'Country of the Month' prevention web section going global

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Cardiovascular disease (CVD) remains the leading cause of death worldwide despite the progress that has been made in recent decades in the treatment of heart disease. The results of the Survey of Risk Factors (SURF) and the EuroAspire surveys show a persistently high prevalence of unhealthy lifestyles, modifiable risk factors and inadequate use of drug therapies and cardiac rehabilitation in European countries. Despite the evidence-based recommendations from the 2016 European guidelines on cardiovascular disease prevention in clinical practice there are still many gaps that prevent the adequate implementation of preventive measures across Europe. Identifying and addressing these gaps is crucial, not only to prevent the development of CVD but also to address the rising healthcare costs.

Prevention is a national matter and is organised differently in every country. It is not possible to use a one size fits all solution. Different implementation strategies should be considered and tailored to the local setting of a particular country or region. In 2013, the European Association of Preventive Cardiology (EAPC) launched the Country of the Month (COM) reports to support European Society of Cardiology (ESC) member countries in improving CVD prevention. These reports have been compiled by the network of more than 50 national CVD prevention coordinators, a core gathering of dedicated cardiologists with specific expertise in cardiovascular prevention within the EAPC.

The overall objective of this initiative is to facilitate implementation of CVD prevention by providing web-based information on prevention among the ESC member countries and by inspiring both national

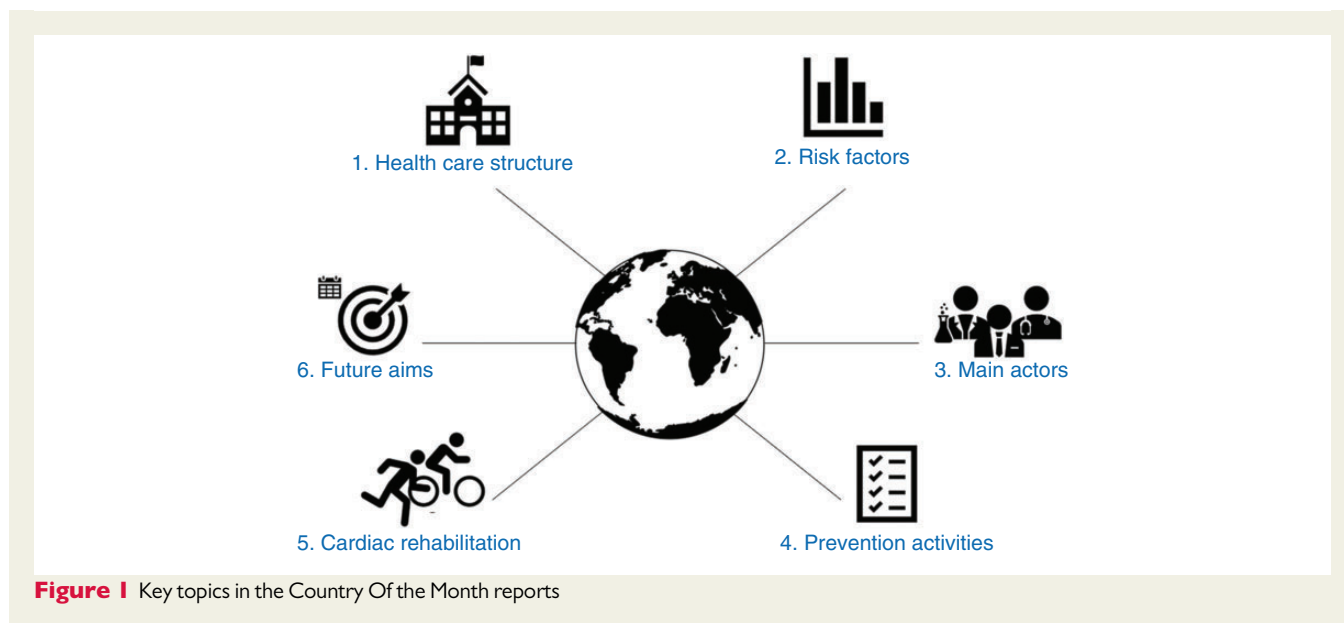


Figure 1 Key topics in the Country Of the Month reports

coordinators and others working in the field of preventive cardiology. Every report has the same format so that the information can easily be compared and is regularly updated. There are two main topics: CVD prevention and cardiac rehabilitation. As of today, the EAPC has gathered reports from 45 different countries. A lot can be learned from these reports. For instance, the obtained information from the reports was used to create an overview of cardiac rehabilitation in ESC member countries with the objective to advance the knowledge about European national cardiac rehabilitation settings and homogenise data arising from the published COM reports. In addition, the overviews include best practices from individual countries that can facilitate other countries to target and improve their cardiovascular prevention efforts. [Figure 1](#) shows the six key topics that are discussed in every COM report.

Over the years the EAPC has created a growing global network with promising partnerships. This has generated great initiatives such as joint sessions and educational events. The EAPC global network facilitates international collaboration and is a precious resource for organisations involved in the promotion of excellence in primary and secondary prevention on a global scale. To learn more on the organisation of CVD prevention in these countries, the EAPC will now expand the COM reports to the ESC affiliated member countries (see [Table 1](#)). Argentina is the first country to provide a report on how prevention is managed in their country, a highly informative document! More countries will follow in the upcoming months, so stay tuned.

**Table 1** Previous country reports

Year	Countries
2014	Israel (update statistics in 2019), Turkey, Ireland, the Netherlands, Germany, Iceland, Estonia, Sweden, Bulgaria, Poland, Latvia, Lithuania, Egypt, Lebanon, Russia, Kazakhstan
2015	Portugal, Spain (update on activities in 2018), Malta, United Kingdom, Slovakia, Slovenia, Greece, Italy, Bosnia & Herzegovina, Croatia
2016	Belgium, France, Hungary, Romania, Denmark, Austria, Switzerland, Norway
2017	Belarus, Ukraine, Serbia, Georgia, Republic of Moldavia
2018	Libya, Montenegro, Finland, Azerbaijan, Cyprus
2019	Luxemburg

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