



INOCA
INTERNATIONAL

Newsletter

SUMMER EDITION · JULY 2026



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INOCA and Multiple Long-Term Conditions · The INOCA Weekly Digest

A WELCOME FROM OUR FOUNDER

Six weeks, and counting...

Hello everyone, and a very warm welcome to our Summer 2026 edition! I hope you are all keeping well and enjoying your Summer.

What a year this is turning out to be! As I write this, we are just six weeks away from ESC Congress 2026 in Munich – and this year we are bringing a world-premiere, patient-led documentary as well as hosting our INOCA International Meeting of Minds, and will welcome ESC Attendees for the very first time to

The INOCA Lounge

The perfect place to take a seat and talk about INOCA!

In addition to all of this, we will also have the launch of something we've been quietly building for months. Something that is just a little bit different, but something that brings insight into the patient journey in a way that has not ever been done before.

This newsletter edition is also full of the work that makes those big moments possible: highlights from our funders and supporters – the Shockwave Reducer symposium at EuroPCR 2026, the new World Heart Federation Roadmap on integrated care – a global publication I was honoured to co-author – and the launch of not one, but two new series: one highlighting the potential complexities and co-morbidities of INOCA, and the other, our brand-new INOCA Weekly Digest, where we share with busy clinicians and healthcare professionals the news items that have caught our eye that week.

And woven through it all, as always, is the reason we do this: for the very many patients around the world who deserve to be believed, and the clinicians, researchers and partners who work alongside us to make that the standard of INOCA care everywhere.

To every single one of you – “Thank You”

Working with each of you is always a genuine privilege and a genuine honour.

Maria George

Founder, INOCA International
www.INOCAInternational.com

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Week 6 of 11 on the road to Munich – follow the countdown on our LinkedIn. #ESC2026

Short on time at ESC? Busy schedule?

Book a seat in The INOCA Lounge to set up a meeting!

Munich Is Calling

We are just weeks away from ESC Congress and this year's INOCA International Meeting of Minds! Here's what's coming —

Every August, the European Society of Cardiology Congress gathers more than 30,000 cardiologists, researchers, clinicians and industry leaders from around the world. It is the beating heart of cardiovascular dialogue and from 28th to 31st August, INOCA International will be right at the heart of it once again, honoured, for the second year running, to be hosted by ESC Congress.

MEETING OF MINDS 2026 · SUNDAY 30 AUGUST

This year's Meeting of Minds really is something special. We have spent months designing a day that will include **real patient voices, real clinical moments, and one solitary chair that stays empty throughout the meeting** – for a reason.

AI and diagnostics take centre stage in a way you won't have seen at any cardiology congress before. We are keeping the detailed information under wraps until the day, but if you are going to be at ESC, block Sunday 30 August in your diary now, and reserve your seat, because you won't want to miss this!

*One chair stays empty —
You will understand why on the day.*

If you have attended any of our INOCA International Meetings before, you will already know that the Meeting of Minds has a very special atmosphere. Egos are left at the door, as everyone who attends is there to learn from one another and to better understand the reality of INOCA – for patients, for clinicians, for healthcare services and providers, and for all those involved in caring for INOCA patients.

Turn the page for the world premiere of our patient-led documentary, your invitation to The INOCA Lounge, and details of the brand new INOCA Educational Ecosystem.



Meeting of Minds 2026 — ESC Congress Munich, Sunday 30th August. From Invisible to Unmissable.



The very special atmosphere of the Meeting of Minds — hosted by ESC Congress in Madrid, 2025.

Access All Areas

On 30th August, in a room full of the world's leading cardiologists, we will premiere something we have never done before: **a patient-led documentary, filmed inside one of the world's leading cardiac centres.**

We are not going to tell you what happens in it. We are going to let cardiologists, pharma and industry professionals all find out when it premieres live, in Munich, on Sunday 30th August at The INOCA International Meeting of Minds.

What we will say is this:

It ends in complete silence. On purpose!

THE INOCA LOUNGE

The INOCA Lounge is built to be seen from every direction. It is positioned at one of the busiest junctions on the venue floor, and will be there for all four days of Congress. Step inside for a moment of calm between sessions, pick up the headphones and listen to real patient voices, watch documentary trailers playing out onto the walkway. Make sure you mark us in your diary – then head in our direction, take a seat and let's talk INOCA!

AND ONE MORE THING...

In Munich we will also be unveiling our **INOCA Ecosystem** – a full, evidence-based knowledge pathway spanning ten dedicated content series, from Understanding INOCA (module 1 has already been released on LinkedIn to an excellent response). The full series of 10 will include looking at Clinical Pathways through to Patient Voice, Expert Insights and Global Impact.

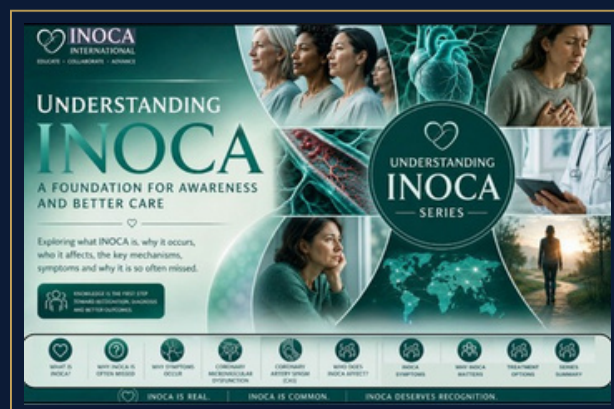
Built for patients, clinicians, researchers, industry partners and advocates alike, because educating one audience about INOCA was never going to be enough. **Join us for the launch at The Meeting of Minds on Sunday 30th August!**



Access All Areas: Where the Invisible Becomes Unmissable – premiering at ESC Congress 2026.



The INOCA Lounge – a place for conversation, reflection and connection. Listen. Understand. Connect.



The INOCA Ecosystem – a series of 10 modules covering topic areas for clinicians, patients, providers, pharma and industry.

Evidence in Action



Advancing care for angina with the Shockwave Reducer - highlights from the symposium at EuroPCR 2026 in Paris.

At EuroPCR 2026, the Shockwave Medical symposium – **“Evidence in Action: Advancing Care for Angina with Shockwave Reducer”** – contributed to the ongoing discussion around the identification and management of patients with persistent angina symptoms, across both obstructive and non-obstructive (INOCA/ANOCA) disease.

The session brought together complementary perspectives: **Dr Oriol Rodriguez** on the clinical evidence in obstructive disease; **Dr Ranil de Silva** on the impact of angina on patients; **Dr Mike Foley** with insights into the mechanism of action of the Shockwave Reducer from **ORBITA-COSMIC**; and **Prof Marius Tomaniak** on current evidence and future directions in non-obstructive coronary disease.

Across the discussion, one consistent theme emerged: the move towards mechanism-based, patient-centred care - with a clear focus on symptom relief and quality of life.

Additional EuroPCR sessions reinforced this evolving perspective. **Dr Jeremie B.** shared a practical approach to angina management, while an expert interview with **Dr Tim van de Hoef** and **Dr Tommaso Gori** explored the shift away from broadly labelling patients as “refractory” towards identifying underlying mechanisms and enabling more tailored treatment strategies.



Prof Marius Tomaniak presents “Growing Evidence for Non-obstructive CAD” at the Shockwave Reducer symposium, EuroPCR 2026 – charting the evidence from the MACCUS randomised trial through to the REDUCER-I non-obstructive subanalysis.



You can watch the full interview here – “Refractory angina and coronary sinus reducer: from established applications to future outlooks” → youtu.be/G6FjY_sohRc

ABOUT THIS PARTNERSHIP

INOCA International is proud to count Shockwave Medical among the valued partners supporting our work in 2026.

Partnerships like this help us to deliver independent, patient-led understanding and awareness to a global audience of patients and professionals.

Putting People at the Heart of Care

The new WHF Roadmap for Integrated Care of Cardiovascular Disease and Multiple Long-Term Conditions With the patient voice, and our Founder, at the table!

At INOCA International we know that cardiovascular disease rarely exists in isolation. Many patients live with multiple long-term conditions, often navigating a complex healthcare system that treats each diagnosis separately rather than caring for the whole person.

We were proud to be invited recently to co-author the new **World Heart Federation Roadmap for Integrated Care of Cardiovascular Disease and Multiple Long-Term Conditions** – an important publication bringing together the expertise of 17 leaders in cardiovascular medicine, integrated care, advocacy and health policy. We are especially honoured that our Founder, Maria, was invited to contribute as a **co-author**, ensuring that the voices and experiences of patients living with conditions such as INOCA and ANOCA were also part of this global conversation.

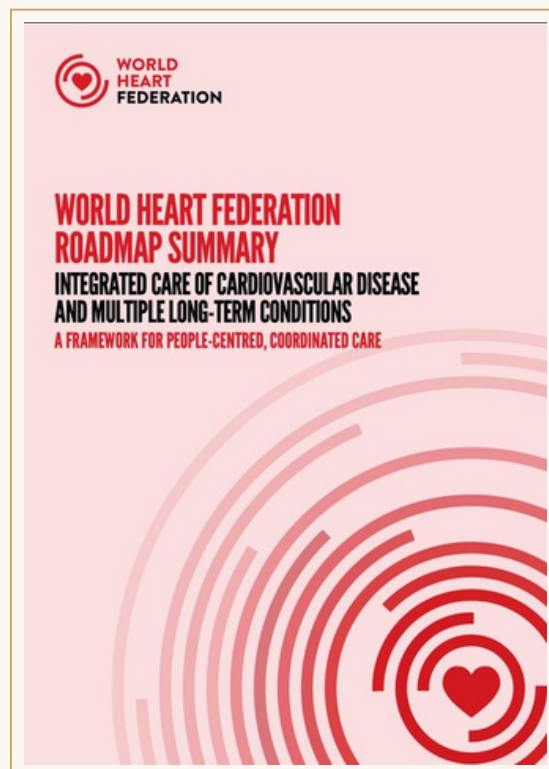
The need for change has never been greater.

Cardiovascular disease remains the world's leading cause of death, claiming over **20 million lives yearly** – and these conditions rarely strike alone, with **more than one-third of adults globally** now living with multiple chronic health conditions. Yet healthcare systems are often still designed around individual diseases rather than around the people living with those conditions.

The Roadmap offers a practical framework to help healthcare professionals, policymakers and health systems to create more coordinated, person-centred care. When care is organised around the whole person, evidence suggests that it can reduce treatment burden, improve coordination between providers, lower avoidable hospitalisations, and ultimately improve quality of life.

We are proud to stand alongside the World Heart Federation and the many outstanding experts who brought this ambitious project to life. Most of all, we are grateful that the patient voice continues to be recognised as an essential part of shaping the future of cardiovascular care.

Read the full Roadmap → world-heart-federation.org/resources/whf-roadmap-integrated-care



The World Heart Federation Roadmap Summary. A framework for people-centred, coordinated care.



Top 10 take-home messages. What every stakeholder should know about integrated care for CVD and MLTC.

What Is Being Said to Your INOCA Patients?

An open message to cardiologists everywhere.

You may be providing excellent care to your INOCA patients. You may understand the evidence and may recognise the symptoms, you may refer appropriately for testing, and manage these patients with the seriousness they deserve. **But do you know what is being said to them elsewhere?**

Patients are still being told that INOCA does not exist. That it is “not a thing.” That their symptoms “aren’t cardiac.” That their angiogram is normal, so their heart is fine. Some are even being made to feel that it is all in their head, or that they simply have anxiety.

“We don’t treat INOCA here.”

For INOCA patients, this is not just frustrating – it can also be harmful for their heart and their mental health.

INOCA is a recognised form of ischaemic heart disease. Coronary microvascular dysfunction and coronary vasospasm are real, diagnosable and treatable. Yet patients often continue to face delay, dismissal, misunderstanding and fragmented care.

And just this week, at a very large city centre hospital in the UK, an INOCA patient in crisis reported being told that she was being discharged home despite ongoing and unresolved chest pain, because – **“We don’t treat INOCA here.”**

Excellent practice in one centre does not protect patients from poor understanding in another. As many INOCA patients are painfully aware, access to appropriate testing remains uneven, awareness of the condition is patchy, and many INOCA patients are still fighting to have their symptoms believed.

Every clinician who understands INOCA can change the course of a patient’s care. Every accurate explanation, every appropriate referral and every evidence-informed treatment plan matters.

Please keep asking questions. Please keep learning. Keep challenging outdated assumptions. And please help us to ensure that INOCA patients receive informed, consistent and compassionate care – wherever they live.

Learn more about INOCA at www.INOCAInternational.com



Have you heard the patient voice? Real people living with INOCA. Just one of the experiences waiting for you in The INOCA Lounge

EVERY INOCA PATIENT SHOULD LEAVE WITH

BELIEF

Your symptoms are real.

UNDERSTANDING

A normal angiogram does not exclude coronary microvascular dysfunction or coronary vasospasm.

A PLAN

Clear next steps for appropriate investigation, treatment, follow-up or specialist referral.

Understanding INOCA

Education has the power to change lives and our first LinkedIn education series reached thousands within days of launching!

Every day, people living with INOCA face the challenges of a condition that remains widely under-recognised and often misunderstood. Improving awareness among patients, clinicians, researchers and healthcare professionals is one of the most important steps towards improving diagnosis, treatment and long-term outcomes.

That is why we launched our first LinkedIn education series and the response exceeded expectations: within days, the series had reached thousands of people and generated engagement from clinicians, researchers, patients, healthcare organisations and the cardiovascular and diagnostics industries worldwide. It reinforced something we have always believed: **there is a real appetite for reliable, evidence-informed education about coronary vascular disorders.**

INOCA IS NOT BENIGN

Carefully developed to be both accessible and clinically credible, the first module in the series explored what INOCA is; who it affects; why symptoms occur; coronary microvascular dysfunction (CMD) and coronary artery spasm (CAS); why standard cardiac tests may not identify coronary vascular dysfunction; why recognition matters; and some of the current approaches to diagnosis and treatment.

If you haven't followed the series yet, we encourage you to take a look at module 1 – the posts are also designed to be easily shared with colleagues, healthcare professionals, family and friends too!

There are 9 more modules to follow, covering diagnostics, treatments, testing, management, support and much more.

Want a sneak preview? All 10 INOCA modules will be showcased at the Meeting of Minds on Sunday 30th August at ESC Congress! Make sure you request a place if you want to keep up to date with or even be part of our newly launching INOCA Knowledge Ecosystem!

Below are just 4 of the slides from module 1 of 10 in the series – this module was on 'Understanding INOCA' – 1 down NINE more modules to go!

The image displays four slides from the INOCA Knowledge Ecosystem, specifically from module 1, 'Understanding INOCA'. Each slide features the INOCA International logo, a central illustration of a heart or coronary arteries, and key information about the condition.

- Slide 1: What is INOCA?**
 - INOCA (Ischaemia with No Obstructive Coronary Arteries) is a condition where blood flow to the heart is reduced, despite no major blockages.
 - Common underlying mechanisms include:
 - Coronary microvascular dysfunction
 - Vasospastic angina
 - It's real. It matters.
 - INOCA is often underdiagnosed and is frequently misunderstood.
- Slide 2: What is Microvascular Dysfunction (CMD)?**
 - In CMD:
 - The small vessels may not dilate normally
 - Blood flow to the heart muscle may be reduced
 - Symptoms can occur despite non-obstructive coronary arteries
 - CMD is one of the key mechanisms underlying INOCA.
- Slide 3: Understanding Treatment in INOCA**
 - Management approaches may include:
 - Lifestyle and risk factor management
 - Symptom-directed therapies
 - Mechanism-based treatment strategies
 - Rehabilitation and pacing approaches
 - Research and innovation in INOCA and refractory angina continue to evolve, including emerging interventional and device-based approaches for selected patients.
 - TREATMENT often needs to be individualised depending on the underlying mechanism involved.
- Slide 4: Why Do Symptoms Occur in INOCA?**
 - Coronary Microvascular Dysfunction and Coronary Artery Spasm (Vasospasm) are key mechanisms in INOCA.
 - Recognition is essential. Understanding leads to better care.
 - Microvascular Dysfunction
 - Coronary Artery Spasm (Vasospasm)
 - INOCA is a problem of function not just structure.

Each slide includes a footer with the following statistics: 91% Global Reach (175 countries), Patients, Clinicians, Researchers and more, all working together, Improving knowledge and Understanding in INOCA, Over 100,000 website views, and Over 5,500 patients in the online forum we link to.

New from INOCA International

*Alongside Understanding INOCA, two brand-new series have launched this summer!
One exploring the bigger clinical picture and one bringing you the week's INOCA news in minutes!*

INOCA DOES NOT ALWAYS OCCUR ALONE

Our new five-part LinkedIn series, **INOCA & Multiple Long-Term Conditions**, looks beyond the coronary arteries to the whole person. For some people, coronary microvascular dysfunction may sit alongside other long-term conditions that share common vascular, metabolic or inflammatory pathways – including hypertension, HFpEF, chronic kidney disease, diabetes and insulin resistance, autoimmune and inflammatory conditions, and metabolic syndrome.

The series explores those shared pathways – endothelial dysfunction, inflammation, oxidative stress and impaired small-vessel regulation – through to what integrated, person-centred care really means when treatment burden exceeds patient capacity.

Association does not imply causation, and care should always be individualised; but one message runs through every post: **understanding the person, not just the diagnosis, is at the heart of best care.**

THIS WEEK IN INOCA – THE INOCA DIGEST

And for everyone who wants to stay current with the latest INOCA news without searching for it: our brand-new **INOCA Weekly Digest** has just launched!

Every week we gather a selection of the latest INOCA news, research and announcements from across our global community and bring our choices to you all in one post so that busy clinicians, researchers, healthcare professionals and more can catch the items that caught our eye, in minutes.

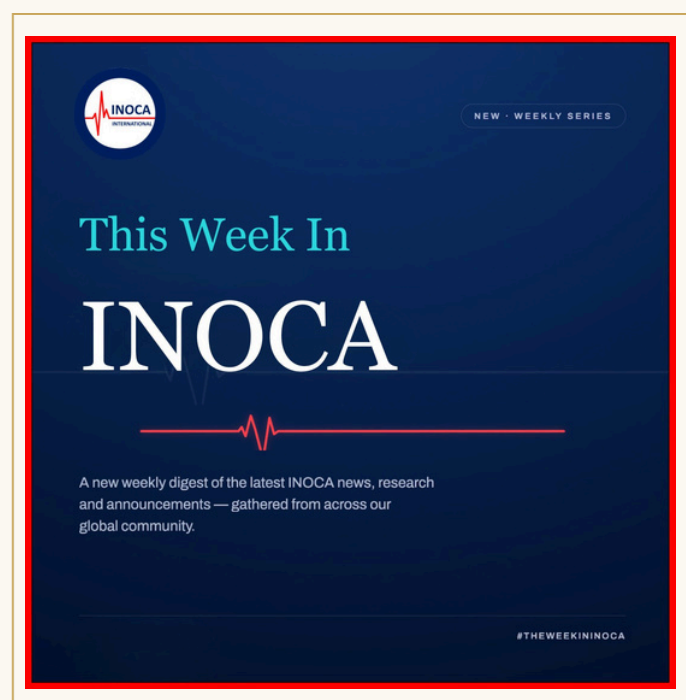
Look out for This Week in INOCA on LinkedIn each week, and follow us so the latest posts arrive directly in your notifications.

You can check out all our LinkedIn posts and follow us/connect with us here –

<https://www.linkedin.com/in/inoca-international-152753231/>



INOCA & Multiple Long-Term Conditions



This Week In INOCA — our new weekly digest series.

Reaching the World

From a small patient-led initiative to a globally recognised advocacy organisation

Developed independently, fully supported by our dedicated International Medical Advisory Board, and delivered by a passionate wholly volunteer team.



205,000+

WEBSITE VIEWS
ACROSS 54 LANGUAGES

5,800+

PATIENTS IN OUR
WORLDWIDE COMMUNITY

5,000+

FOLLOWERS ON X — 95%
MEDICAL PROFESSIONALS AND
RELATED INDUSTRY

80+

FREE EDUCATIONAL VIDEOS,
PLUS PODCASTS & DOWNLOADS

10

PROFESSIONAL EDUCATION VIDEOS
ON THE OFFICIAL
NHS E-LEARNING PLATFORM

5

TRANSLATION COLLABORATIONS
SPANISH, CHINESE, DUTCH,
CZECH & BULGARIAN

RECOGNISED EXCELLENCE

- ◆ World Heart Federation Associate Member
- ◆ World Heart Federation Best Video Campaign Award
- ◆ Hosted by the European Society of Cardiology Congress
- ◆ UK National Health Service partnership

PARTNER WITH US

We are fortunate to partner with some of the leading names in the cardiology world, including the World Heart Federation, Medical Education Global Solutions, Translational Medicine Academy and Shockwave Medical.

As our projects grow, we are inviting organisations that share our commitment to improving cardiovascular care to become part of the journey.

Whether you work in diagnostics, pharmaceuticals, medical devices or cardiovascular research, partnering with INOCA International means supporting a trusted, independent, patient-led organisation reaching an increasingly global audience - currently across 176 countries (91% of the world) and across both sides of the patient-professional conversation.

If you like what we do and want to be a part of it too, we would be delighted to hear from you: contact@INOCAInternational.com



INOCA

From Invisible To Unmissable

SEE YOU IN MUNICH!

28 – 31 AUGUST 2026

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