Systems Approach in Multifactorial Chronic Diseases with Co-Morbidities

# 1- Chronic diseases: the global health priority

## **Chronic diseases**





- Group III Injuries
- Group II Other deaths from NCDs
- Group II Premature deaths from NCDs (below 60 years), which are preventable
- Group I Communicable diseases, maternal, perinatal and nutritional conditions



## **Common risk factors of major NCDs**

	Tobacco use	Unhealthy diets	Physical inactivity	Harmful use of alcohol	Biomass fuel combustion
cardio- vascular diseases	X	X	X	X	X
Diabetes	X	X	X	X	
Cancer	X	X	X	X	X
Chronic respiratory diseases	X		X		X

# Ageing and co-morbidities of NCDs



## **Chronic diseases cluster in co-morbidities**



Barmett et al, Lancet 2012

## Life time risk of chronic diseases

### Ontario



To T, Wang C, Guan J, McLimont S, Gershon AS. What is the lifetime risk of physician diagnosed asthma in Ontario, Canada? *Am J Respir Crit Care Med.* 2010 Feb 15;181(4):337-43

Systems Approach in Multifactorial Chronic Diseases with Co-Morbidities

1- Chronic diseases: the global health priority

2- Systems biology to understand the complexity of chronic diseases

Socio economic determinants

#### Life style - environment Risk and protective factors

Tobacco smoking, Pollutants Allergens, Nutrition, Infections Physical exercise, Others









Systems biology on precise phenotypes



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1- Chronic diseases: the global health priority

2- Systems biology to understand the complexity of chronic diseases

**3- Integrated approach to re-define and stratify chronic diseases** 

### Fighting chronic diseases for active and Healthy ageing in Languedoc Roussillon

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MACVI	A×LR	Taille de la police Augmenter Réinitialiser Diminuer   contre les MAladies Chroniques Recherche   pour un VIeillissement Actif en LANGUEDOC-ROUSSILLON	A K			
ACCUEIL ENJEUX INITIATIVES	PARTENARIATS					
Vous êtes ici : <u>Accueil</u> = Qui sommes nous ?		÷ =				
Le projet MACVIA*LR	Combattre les maladies chroniques pour un vieillissement en					
Nos engagements	bonne santé					
Documents	Le Languedoc Roussillon po	rteur d'un projet innovant, intégré et en réseau				
Agenda	Centré autour de tous les pa	atients de la Région				
Connexion	En partenariat avec les acteurs publics et privés de la Région (et au delà)					
	Pour réduire les hospitalisati	ions pour maladies chroniques de 30% en 2020 chez les sujets de plus de 65 ans				
	Four reduire les hospitalisati					
▲▲ MARS 2013 ►►► Lun Mar Mer Jeu Ven Sam Dim	Avec un fort impact socio-éc	conomique régional				

**Classical phenotypes** 

Hypothesis-driven





### Definition of severe asthma (Geneva, 6-7 April 2009)

#### Workshop summary

#### Uniform definition of asthma severity, control, and exacerbations: Document presented for the World Health Organization Consultation on Severe Asthma

Jean Bousquet, MD, PhD,<sup>a,b</sup> Eva Mantzouranis, MD, PhD,<sup>d</sup> Alvaro A. Cruz, MD,<sup>e</sup> Nadia Ait-Khaled, MD, PhD,<sup>f</sup> Carlos E. Baena-Cagnani, MD,<sup>a</sup> Eugene R. Bleecker, MD,<sup>b</sup> Chris E. Brightling, MRCP, PhD,<sup>i</sup> Peter Burney, MA, MD, FRCP, FFPH, FMedSci,<sup>i</sup> Andrew Bush, MD, FRCP, FRCPCH,<sup>k</sup> William W. Busse, MD,<sup>n</sup> Thomas B. Casale, MD,<sup>a</sup> Moira Chan-Yeung, MD,<sup>p</sup> Rongchang Chen, MD,<sup>a</sup> Badrul Chowdhury,<sup>r</sup> Kian Fan Chung, DSc, MD,<sup>1</sup> Ronald Dahl, MD, DrMedSci,<sup>s</sup> Jeffrey M. Drazen, MD,<sup>t</sup> Leonardo M. Fabbri, MD,<sup>u</sup> Stephen T. Holgate, MD, DSc,<sup>v</sup> Francine Kauffmann, MD,<sup>b,c</sup> Tari Haahtela,<sup>w</sup> Nikolaï Khaltaev,<sup>s</sup> James P. Kiley, PhD,<sup>y</sup> Mohammad R. Masjedi,<sup>as</sup> Yousser Mohammad, MD,<sup>bb</sup> Paul O'Byrne, MB, FRCPI, FRCP(C), FRCPE, FRCP(Glas),<sup>ce</sup> Martyn R. Partridge, MD,<sup>m</sup> Klaus F. Rabe,<sup>dd</sup> Alkis Togias, MD,<sup>s</sup> Christiaan van Weel, MD, PhD,<sup>ee</sup> Sally Wenzel,<sup>ff</sup> Nanshan Zhong, MD,<sup>q</sup> and Torsten Zuberbier,<sup>99</sup> Montpellier, Villejuif, and Paris, France, Geneva, Switzerland, Brazil, Cordoba,



#### Based on NAEPP, 2007



### **Uniform severity of chronic diseases**

	Asthma	Diabetes
Underdiagnosis	Risk of acute exacerbation	Risk of coma and death
Effective treatment	ICS, ß2 agonists	Insulin, oral drugs
No treatment available/affordable	Risk of acute exacerbation	Risk of coma and death
Incorrect diagnosis	COPD (adults) CF (children)	Weight loss
Difficult-to-treat disease	Compliance Inhaler misuse Risk factors	Compliance Complications Risk factors
Controlled treatment dependent disease	Risk of exacerbation when treatment stopped	Risk of death when treatment stopped
Uncontrolled treatment resistant disease	Treatment resistant asthma: Risks	Insulin-resistant diabetes Risks

# **Chronic disease clinic**

MACVIA\*LR



# **Chronic disease clinic**



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# **Chronic disease clinic**



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### Physicians in rural areas Le Monde 7 avril 2012



MACVIA\*LR

Nombre de médecins généralistes libéraux\* pour 100 000 habitants



Nombre de médecins généralistes libéraux\* de moins de 40 ans pour 100 000 habitants



### MACVIA\*LR

# **DeProPass**

Dépistage de Proximité des Pathologies Associées aux maladies chroniques

> - Département de médecine générale de MTP-Nîmes

- CHU de Nîmes

Systems Approach in Multifactorial Chronic Diseases with Co-Morbidities

1- Chronic diseases: the global health priority

2- Systems biology to understand the complexity of chronic diseases

3- Integrated approach to re-define and stratify chronic diseases

4- Across the life cycle

#### POSITION PAPER

#### Prevention and control of childhood asthma and allergy in the EU from the public health point of view: Polish Presidency of the European Union

B. Samoliński<sup>1,\*</sup>, A. Fronczak<sup>2</sup>, P. Kuna<sup>3,\*</sup>, C. A. Akdis<sup>4,\*</sup>, J. M. Anto<sup>5,\*</sup>, A. Z. Bialoszewski<sup>1</sup>, P. G. Burney<sup>6,\*</sup>, A. Bush<sup>7,\*</sup>, A. Czupryniak<sup>2</sup>, R. Dahl<sup>8</sup>, B. Flood<sup>9,\*</sup>, G. Galea<sup>10</sup>, M. Jutel<sup>11</sup>, M. L. Kowalski<sup>12,\*</sup>, S. Palkonen<sup>9,\*</sup>, N. Papadopoulos<sup>13,\*</sup>, F. Raciborski<sup>1,\*</sup>, D. Sienkiewicz<sup>14</sup>, A. Tomaszewska<sup>1</sup>, E. Von Mutius<sup>15,\*</sup>, D. Willman<sup>16</sup>, A. Włodarczyk<sup>2</sup>, O. Yusuf<sup>17</sup>, T. Zuberbier<sup>18,\*</sup> & J. Bousquet<sup>19,\*</sup>

<sup>1</sup>Department of Prevention of Envinronmental Hazards and Allergology, Medical University of Warsaw, Warsaw, Poland; <sup>2</sup>Ministry of Health, Warsaw, Poland; <sup>3</sup>National programs against asthma and the Polish national asthma program – Polasthma, Medical University of Lodz, Łódź, Poland; <sup>4</sup>European Academy of Allergy Clinical Immunology (EAACI), Swiss Institute of Allergy and Asthma Research (SIAF), Christine Kühne-Center for Allergy Research and Education, Davos, Switzerland; <sup>5</sup>Centre for Research in Environmental Epidemiology (CREAL), Barcelona, Spain; <sup>6</sup>Imperial College, London, UK; <sup>7</sup>Imperial College and Royal Brompton Hospital, London, UK; <sup>8</sup>Department of Respiratory Diseases, Aarhus University Hospital, Aarhus, Denmark; <sup>9</sup>European Federation of Allergy and Airways Diseases Patients' Associations (EFA), Brussels, Belgium; <sup>10</sup>WHO Europe, Copenhagen, Denmark; <sup>11</sup>Department of Clinical Immunology, Wroclaw Medical University, Wroclaw, Poland; <sup>12</sup>Department of Immunology, Rheumatology and Allergy, Medical University of Łódź, Łódź, Poland; <sup>13</sup>Department of Allergy, European Academy of Allergy Clinical Immunology (EAACI), 2nd Pediatric Clinic, University of Athens, Athens, Greece; <sup>14</sup>European Public Health Alliance, Brussels, Belgium; <sup>15</sup>University Children's Hospital, Munich, Germany; <sup>16</sup>Silvermedia, Sp. z o. o. Sp. k., Krakow, Poland; <sup>17</sup>The Allergy & Asthma Institute, Islamabad, Pakistan; <sup>18</sup>Department of Dermatology and Allergy, Charité, Berlin; <sup>19</sup>University Montpellier-1 and Inserm CSEP 1018, WHO Collaborating Center for Asthma and Rhinitis, Montpellier, France

To cite this article: Samoliński B, Fronczak A, Kuna P, Akdis CA, Anto JM, Bialoszewski AZ, Burney PG, Bush A, Czupryniak A, Dahl R, Flood B, Galea G, Jutel M, Kowalski ML, Palkonen S, Papadopoulos N, Raciborski F, Sienkiewicz D, Tomaszewska A, Von Mutius E, Willman D, Włodarczyk A, Yusuf O, Zuberbier T, Bousquet J. Prevention and control of childhood asthma and allergy in the EU from the public health point of view: an urgent need to fill the gaps. *Allergy* 2012; DOI: 10.1111/j.1398-9995.2012.02822.x.





Allergy

#### NEWS AND COMMENTARIES

#### Impact of early diagnosis and control of chronic respiratory diseases on active and healthy ageing

#### A debate at the European Union Parliament

J. Bousquet<sup>1,2,3</sup>, C.C. Tanasescu<sup>4</sup>, T. Camuzat<sup>5</sup>, J.M. Anto<sup>6,7,8,9</sup>, F. Blasi<sup>10,11</sup>, A. Neou<sup>12</sup>, S. Palkonen<sup>13</sup>, N.G. Papadopoulos<sup>14,15</sup>, J.P. Antunes<sup>16</sup>, B. Samolinski<sup>17</sup>, P. Yiallouros<sup>18</sup>, T. Zuberbier<sup>12,19,20</sup>

Allergy 68 (2013) 555-561





contre les MAladies Chroniques pour un Vieillissement Actif en LANGUEDOC-ROUSSILLON







#### The role of developmental determinants of chronic diseases and frailty in ageing: From science to value creation and policies

Région Languedoc Roussillon (MACVIA-LR, EIP on AHA Reference Site) University Montpellier 1 CHRU Montpellier and Nîmes MeDALL (Mechanisms of the Development of Allergy, FP7)

European Innovation Partnership on Active and Healthy Ageing: DG Sanco and DG CONNECT Framework Programme 7, DG Research National Institute of Allergy and Infectious Diseases (NIH)

Proposal following the recommendations of the EU Council of the Polish (2011) and Cyprus (2012) Presidencies

Montpellier, 2-3 December 2013

Systems elements for integrated care in multifactorial chronic diseases with co-morbidities

- 1- Chronic diseases: the global health priority
- 2- Systems biology to understand the complexity of chronic diseases
- **3- Integrated approach to re-define and stratify chronic diseases**
- 4- Chronic diseases tackled across the life cycle