



Ageing and multimorbidity

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This month we begin the State of the Art reviews outlining how ageing interacts with the lung. Read on and age well <http://ow.ly/yKhbZ>

Although growing old is no fun, it beats the other alternative. Unfortunately we are not built like the famous “One Hoss Shay” of Oliver Wendell Holmes’ poem, *The Deacon’s Masterpiece*. This marvellous horse drawn carriage ran for one hundred years to the day and then completely fell apart. We are not so lucky; as we age some body systems fail before others, leading to a vast array of morbidities that come into play and interact with each other. Understanding these morbidities, how they reinforce or detract from each other and their overall effects on the lung was a field that was largely ignored until about a decade ago.

An increasing proportion of older adults are living with multiple health conditions, *i.e.* multimorbidity or noncommunicable diseases, which will be the predominant global public health challenge of the 21st century. Multimorbidity is associated with many major consequences for the individual, including death, disability, institutionalisation, poorer quality of life and higher rates of adverse effects of treatment. The complexity of multimorbidity makes it increasingly difficult to provide optimal care, particularly considering that health professionals and health services are commonly organised to address a single disease. We believe that this needs to be modified by developing and implementing a more holistic approach in both specialist and primary care. While specialists will have to take care of multimorbid patients whose disease is dominated by closely related comorbidities, generalists, internists and, particularly, geriatricians will have to take care of most frail elderly multimorbid patients at the primary care level. Research is urgently needed into how best to train healthcare professionals and to restructure medical schools and healthcare to address the needs of people with multimorbidity.

In this issue of the *European Respiratory Journal* we begin a series of State of the Art review articles that outline how ageing interacts with the lung and many other organ systems. The articles fall into two general categories. In one, the general topic of ageing and the lung is viewed from multiple perspectives, including how early and mid-life events influence how the lung ages. In the other, the interaction between specific organ systems, ageing and the lung is evaluated. Both categories of article promise to help us understand the complex interactions among organs and the process of ageing.

We hope that you will enjoy this special series that we have assembled for the *European Respiratory Journal*. Someday we may learn how to work perfectly for decades and then cease functioning all at once. But until then, understanding the interactions between ageing, the lung and other organ systems may be a guide to understanding the various conditions that our patients present to us. Read on and age well.

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