CORRESPONDENCE

Correspondence on the paper by Krauss–Etschmann S, Bush A, Bellusci S, *et al.*

We have read with interest the paper of Krauss–Etschmann *et al.*¹ This is an important contribution to the current understanding of prenatal and early life events impacting chronic respiratory disease development and progression across the life cycle. A major challenge is to combine expertise in human conditions with complementary model systems. Better understanding of these links should allow novel prevention strategies to promote healthy ageing. In its important final message, the authors propose a roadmap for integrative research.

Since 2004, several initiatives funded under the EU Framework Programme for Research and Technological Development FP6–FP7 have attempted to identify, compare and evaluate pooling data from existing European birth cohorts with a major focus on respiratory and allergic diseases and their risk factors (GA²LEN: *Global Allergy and European Network*, FP6; ENRIECO: *Environmental Health Risks in European Birth Cohorts*, FP7; CHICOS: *Developing a Child Cohort Research Strategy for Europe*, FP7; and MeDALL: *Mechanisms of the Development of ALLergy*, FP7).² MeDALL emphasised the importance of multidisciplinary dialogue and integrative research to link molecular mechanisms with the population-based distribution of allergic diseases from birth to adolescence.²

Developmental origins of ageing are in the EU research and political agenda. The Polish Priority of the EU Council (2011) promoted the recognition, prevention and management of chronic respiratory diseases in children to impact healthy ageing.³ The Cyprus Presidency of the EU Council (2012) identified research needs on birth cohorts to understand early determinants of chronic diseases.⁴ The previous initiatives are important in identifying research needs and strategies to be addressed in Horizon 2020 in Europe. Action Plan B3 (integrated care for chronic diseases) of the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA) includes health promotion and management with a life cycle perspective. To find novel health promotion strategies in chronic diseases, the results of FP6 and FP7 projects on prenatal and early life events, as well as epigenetics, will be

discussed in a meeting organised in the fall of 2013 by the Region Languedoc Roussillon within the framework of Action Plan B3 of the EIP on AHA.⁵

We fully support the road map of Krauss–Etschmann *et al.*¹ for a cross-disciplinary research. We also think that through collaborations with other EU projects, the target on chronic respiratory diseases of the COST action may be expanded to allergic diseases on one hand, and to all chronic diseases on the other.

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Contributors Dear Doctor Bush, We have read with great interest the recent paper of Krauss–Etschmann *et al* published in *Thorax* this month. We would like to make the following very positive comments for future collaboration. Best regards. JB.

Competing interests JB has received honoraria for participation in scientific and advisory boards, giving lectures, and press engagements from Actelion, Almirall, AstraZeneca, Chiesi, GlaxoSmithKline, Meda, Merck, Merck Sharpe & Dohme, Novartis, oM Pharma, Sanofi-Aventis, Schering Plough, Stallergènes, Takeda, Teva and Uriach. TK has received research support from the European Union (EU) and DTG. DSP has received, for the University of Groningen, funding for research from Chiesi and AstraZeneca, and also for consultancies and/or lecturing at international meetings from AstraZeneca, Boehringer Ingelheim, Chiesi, GSK, Nycomed and TEVA.

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