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## Editorial

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# Chronic disease or chronic diseases: is the whole different from the sum of the parts?

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About 15 years ago I spent a sabbatical year at the University of Amsterdam. When I first arrived, I naturally made the rounds meeting the staff. When I asked one senior professor about her research interests, she replied “Chronic disease.” “That’s nice,” I said, assuming that she meant etiological research on one or more chronic diseases, “Which ones?” She was as mystified by my question as I was by her first response. It turned out that she studied chronic disease as a phenomenon: its impact on individuals, their caregivers and society, its implications for health care, etc. And this was my introduction to chronic disease (singular) as a research topic.

Since then, I have increasingly realized that the phenomenon of chronic disease *in general* is worthy of research, teaching, policy and programs. Gerontologists have had a similar approach for years, being often more interested in the fact that an individual has one or more chronic diseases and in the impact of these on that person’s health, than on the individual diseases. (Of course, this is sometimes of necessity, since it can be hard to make a specific diagnosis in very old people.) Similar thinking underlies the International Classification of Functioning, Disability and Health<sup>1</sup> (ICF) and its predecessor, the International Classification of Impairment, Disability and Handicap, which emphasizes the individual’s ability to carry out functions and roles rather than the individual diseases that cause these limitations. The title of the US sister publication to *Chronic Diseases in Canada* (CDIC), *Preventing Chronic Disease* (singular), published by the Centers for Disease Control and Prevention (CDC), seems to hint at the same point. But note the use of both singular and plural in the documents mentioned in the next paragraph.

The risk factors for several major chronic diseases have turned out to be remarkably similar, further suggesting that prevention can often focus on chronic disease in general rather than (or as well as) individual chronic diseases. Perhaps too strongly (because it ignores the role of genetic factors), the WHO’s *Preventing Chronic Diseases: a vital investment*<sup>2</sup> points out that “common, modifiable risk factors underlie the major chronic diseases. These risk factors explain the vast majority of chronic disease deaths at all ages, in men and women, and in all parts of the world.” The Chronic Disease Prevention Alliance of Canada (CDPAC; slogan, “reducing chronic disease in Canada”) in its vision document *Primary Prevention of Chronic Diseases in Canada: a Framework for Action* calls for a comprehensive and integrated approach to primary prevention: “A key stimulus for initiating a framework for primary prevention was a shared interest and need among the national disease strategies—cancer, stroke, diabetes, heart health, lung, healthy living and chronic disease—to align their contributions to primary prevention.”<sup>3</sup> Again, this suggests that the target will often be chronic disease in general. Of course, we also need to consider the individual diseases, especially for their treatment.

The first in the CDPAC framework’s four components is resources, which includes research and innovation and also knowledge exchange. CDIC is an appropriate venue for dissemination of these activities, and is interested in both chronic diseases and chronic disease. Probably most of our articles have dealt with the former—consistent with the plural in our title—but we would welcome more submissions on the latter.

## References

1. World Health Organization. International Classification of Functioning, Disability and Health. Geneva: World Health Organization, 2001 [cited on 2009 Sep 4]. Available from: <http://apps.who.int/classifications>
2. Le Gales-Camus C, Beaglehole R, Epping-Jordan J, Vita-Finzi L, editors. World Health Organization. Preventing chronic diseases: a vital investment. WHO global report [Internet]. Geneva: World Health Organization, 2005 [cited on 2009 Sep 4]. Available from: [http://www.who.int/chp/chronic\\_disease\\_report/contents/en/index.html](http://www.who.int/chp/chronic_disease_report/contents/en/index.html)
3. Garcia J, Riley B. Primary prevention of chronic diseases in Canada: a framework for action [Internet]. Ottawa (ON): Chronic Disease Prevention Alliance of Canada; July 2008 [cited on 2009 Sep 4]. Available from: <http://www.cdpac.ca/media.php?mid=451>