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The 2nd AIR meeting – the current context of European IPF research and management

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Concluding remarks

This is a very exciting time in IPF research, and we, as physicians, are driving the progress and trying to improve the outlook for patients with this difficult-to-treat disease. This second two-day AIR event was convened in Rome, Italy, in 2012 and brought together leading experts in the treatment and research of IPF, providing a forum for the discussion and sharing of new developments and clinical experience. As with the first AIR meeting, this event was again hugely successful and informative, and these proceedings can be considered essential reading for all clinicians managing patients with IPF in Europe.

The first two articles describe the apparent increasing incidence and poor prognosis of IPF in Europe and emphasise the importance of accurate staging and classification of idiopathic interstitial pneumonias in individual patients. This makes the search for new and effective therapies a priority for the respiratory research community. As eloquently summarised in the second series of two articles, modern biological techniques combined with computational biology techniques are enabling a much clearer understanding of the pathophysiology of IPF and host-environment interactions and their relationship to disease. In particular, the application of '-omics'-based technologies affords the opportunity to overcome the barriers hindering the development of new treatments for IPF. In addition, it is hoped that such disease fingerprinting will permit the discovery of appropriate, practical, and validated disease biomarkers enabling a better measurement of future disease behaviour and response to therapy.

Until recently there were no pharmacological treatments approved for patients with IPF in Europe. A first major step forward has been the European approval of pirfenidone for patients with mild-to-moderate IPF. Pirfenidone has demonstrated statistically significant and clinically meaningful effects in clinical trials. Overall, pirfenidone provides a significant treatment benefit for patients with IPF and represents an appropriate option as first-line therapy for these patients. As reviewed in the penultimate article, the number of clinical trials investigating potentially therapeutic agents acting on various different targets is increasing. This is very encouraging for IPF patients and doctors, in terms of the research effort focused on finding a suitable treatment.

Finally, a series of case studies are described that highlight the diversity and challenges in identifying, managing, and treating individual patients with IPF and provide practical clinical management solutions. Together, it is hoped that the selected proceedings from the meeting, published in this supplement, will provide new insights and a practical resource to clinicians involved in the management of patients with IPF. The intention is for the AIR meeting to become a fixed date in the calendar for respiratory physicians and researchers dedicated to improving knowledge and bringing new hope for IPF patients.

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