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| **The prevalence of treatable traits in patients with fibrosing interstitial lung disease** |
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| **Introduction/Aim:** Patients with fibrosing Interstitial lung disease (ILD) present with heterogeneous clinical histories, comorbidities, and socioeconomic backgrounds and exposures that may impact their disease progression. In the current zeitgeist, there is minimal literature regarding current recommendations for complex lung disease that is inclusive of individual comorbidities. The “treatable traits” approach provides patient-centred care tailored to each patient’s unique clinical phenotype to target modifiable drivers of health status, with relevance to the underlying ILD. This study examined the prevalence of clinically relevant treatable traits in a large cohort of patients with fibrosing ILD.  **Methods:** The prevalence of treatable traits was assessed in the Royal Prince Alfred Hospital site of the Australasian Interstitial Lung Disease Registry (“RPAH registry”) patients between 2016-2023. The treatable traits were recorded against the hospital registry to assess prevalence and associated diagnoses.  **Results:** Fifteen treatable traits were identified from the literature and grouped into four domains: aetiological, pulmonary, extrapulmonary, behavioural/lifestyle. Across the RPAH registry, 790 patients with fibrosing ILD were included. Patients expressed a median of five traits with behavioural/lifestyle traits presenting as the most common domain. The most prevalent traits were Polypharmacy (n=540/709, 76.16%), Dyspnoea (n=529/790, 66.96%), Intractable chronic cough (n=458/790, 57.97%), Cigarette smoking (current or history as smoker: n=434/768, 56.51%), and Environmental exposure (organic and inorganic; n=397/790, 50.25%).  **Conclusion:** Treatable traits were successfully mapped in patients within the RPAH registry. The prevalence of treatable traits varied across domains and individuals, suggesting the need for a more comprehensive individualised approach to ILD management and treatment strategies.  **Key Words:** Interstitial Lung Disease, Treatable traits**,** Pulmonary Fibrosis.  **Grant Support:** This work was funded by the Centre of Research Excellence in Pulmonary Fibrosis, which is funded by the NHMRC (GNT1116371 and GNT2015613), Lung Foundation Australia, anonymous philanthropy and Foundation partner Boehringer Ingelheim. |