## Preface

Healthy Aging: What Do We Mean, and How Do We Accomplish It?





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"It's not the years in your life that count. It's the life in your years." This quote, or a variant of it, has been attributed to Adlai Stevenson, Abraham Lincoln, Dr Edward Stieglitz, and others. It is a goal that is central to Geriatric Medicine: the idea of maintaining vitality throughout the life course. But healthy aging is a complex construct, which differs between individuals and between populations and cultures, and also changes over time within an individual. It incorporates concepts that are more traditional to Medicine, such as preventing and treating illness; ideas that are important in Geriatrics, like preserving function, cognition, and quality of life; and values that resonate with older adults, like maintaining a sense of purpose, having meaningful relationships, and being able to live according to one's values.

We know that the aging experience can be impacted significantly by a person's life course, which includes lifestyle. Science is showing the power of healthy lifestyle to increase longevity, compress morbidity, and facilitate a broad definition of health, that encompasses not only avoiding or delaying disease but also living a life of meaning, joy, dignity, gratitude, and connectedness.

In this issue on healthy aging, we bring together concepts from 2 disciplines: the tenet of Geriatrics that works with patients at whatever point they are in their lives, to understand and then foster their goals, and the focus of Lifestyle Medicine, which seeks to develop systems and interventions that help to reduce the impact of chronic disease, by delaying onset, reducing severity, and even reversing chronic illness. It is my hope that the efforts of these 2 fields, which each push the boundaries of current health care, can connect in a way that improves the opportunities for all to live a healthy life.

Two elegant conceptual articles start this discussion. Dr Aronson writes about untangling concepts like usual versus normal aging, and healthy versus successful aging; and how the goals of healthy aging change across the stages of old age, and when

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viewed from a population level down to the level of the individual. Drs Muniak and Mulhausen articulate the principles of Geriatrics that can be applied to healthy aging and addressing lifestyle, such as an appreciation of and comfort with complexity and holistic thinking, a focus on personal interactions, an understanding of the patient's biopsychosocial circumstances, and a focus on goals and motivation.

We then turn to a discussion of the components outlined in the Rowe and Kahn model of successful aging, as Dr Kadambi and colleagues discuss the interaction of multimorbidity, functional decline, and cognition; Dr Cleveland presents evidence on preventing dementia, and Drs Kusz and Ahmad review issues of preserving engagement and nurturing resilience. Dr Nwagwu and colleagues address an issue central to Geriatrics, namely, frailty, and Ms Roderka and colleagues present an issue that is increasingly impacting the aging experience: obesity.

The next section discusses Lifestyle Medicine and reviews evidence of how it impacts healthy aging. Several of the pillars of Lifestyle Medicine are then addressed: Dr Black and Ms Bowman discuss nutrition; Dr Eckstrom and colleagues discuss physical activity, and Dr Friberg Felsted addresses mindfulness and stress. The next 2 articles discuss the need to broaden our approach to promoting wellness through our focus on systems: Dr Sharda and colleagues address an expanded approach to prevention beyond a primarily medical model, and Dr Daniel discusses best practices that promote healthy aging. Finally, Dr Lianov presents an overview of how to work with patients to help them make and sustain changes that will foster healthy aging.

The current medical system does not optimally promote healthy aging, but we have an opportunity to change this by developing health-enhancing networks that foster this outcome. Healthy aging can best be achieved by an integration of efforts: from the population, to the health care system, to the individual. We need a change in medical culture and resource allocation in order to do this. The fields of Geriatric and Lifestyle Medicine, which each have a history of embracing system change to improve outcomes for our patients, can develop synergistic efforts to promote healthy aging for all. The time is now!

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## 2 / 2 SRURHOST.XYZ/RESEARCH