



EXECUTIVE COMMITTEE

President:

Prof Gary Andrews, Australia

Secretary General:

Prof Mary Luszcz, Australia

Treasurer :

Mr Charles Young, Australia

President Elect:

Dr Gloria Gutman, Canada

Past President:

Prof Edit Beregi, Hungary

COMMUNICATIONS

Website:

www.cas.flinders.edu.au/iag

E-mail:

iag@flinders.edu.au

Telephone:

+61 8 8201 7552

Facsimile:

+61 8 8201 7551

Postal Address:

Centre for Ageing Studies,
Flinders University of South Australia,
Laffer Drive, Science Park,
Bedford Park, South Australia 5042
Australia

IN THIS ISSUE

From the President	1
From the Secretary General	3
From the Treasurer	4
2001 World Congress Updates	6
Abstracts of Novartis Award-Winners	7
Journals	9
Congress Calendar	11

FROM THE PRESIDENT

It has been my great pleasure to attend and participate in all of the IAG's regional events held during this year. This included the Pan American Congress held in San Antonio in February; the Asia/Oceania Regional Conference, Seoul, Korea in June; the European Regional Conference in Berlin, Republic of Germany in July and the COMLAT meeting that took place in Havana, Cuba in September. Finally I met the newly constituted North American Regional Committee at the Gerontological Society of America Meeting in San Francisco in November. All of these meetings were highly successful and demonstrated that the IAG and gerontology generally is active and prospering at regional level throughout the world. The contributions of the Regions to the promotion and development of gerontology in this International year

of Older Persons has been most impressive. I applaud the efforts of all of our regional colleagues in this respect.

At the Regional Conference in Seoul I was able to honour, with the first ever Presidents Medal awarded within a Region, one of the longest standing and most devoted and energetic contributors to gerontology internationally and regionally - Ruth Inall of Australia.

President of IAG Addresses United Nations General Assembly on Importance of Research

The 1999 International Year of Older Persons is now drawing to a close. To celebrate the Year and note its achievements the General Assembly of the United Nations held four Special Sessions over two days, the 4th and 5th October, for the purpose of discussing the global issues associated with ageing and the progress made during the International Year.

Representatives of a number of international peak organisations concerned with ageing were invited to make a brief statement of the General Assembly on the second day of the Special Sessions. I was invited as President of the International Association of Gerontology to speak on the importance of research. Other organisations invited to make short statements to the UN's principal body included the International Federation on ageing (IFA), Help Age International (HIA) and the AARP.

My ten minute address is reproduced below:

"Madam Chair, Excellencies, Ladies and Gentlemen:

It is my great honour to address you on behalf of the International Association of Gerontology.



Ruth Inall being awarded an IAG President's medal for her outstanding contribution to the development of gerontology and service to the Asia/Oceania Region of the IAG at the Asia Oceania Regional Congress in Seoul

I have arrived at this platform, before you, after a fairly long personal journey, a journey of 22, 314 days and 5 hours or more conventionally if you like around 61 years and five months and 3 days.

Some of you are here after a shorter time some longer but we have all travelled the same path – it is simply the path of life and for each of us there was a beginning and middle and will be an end.

Collectively the beginnings are now obscure and set some billions of years from here and no end is foreseeable.

Our individual and collective paths have many passages and along them, as you have been reminded in these past days, are encountered many wonders and also many seen and unseen risks, temptations and threats but also great opportunities.

The territories through which we pass are variously charted by different conventions and some of us are equipped with better and more useful maps to guide us than others..

What we are want to call human development and ageing is simply our progress along these metaphorical paths. It is defined by the passage of time and by our individual and collective metamorphoses from birth through early and later childhood, adolescence, adulthood, middle and old age and eventually death. Convention defines the boundaries for each of these territories through which we move and old age is no exception its limits are arbitrarily defined for us.

Over time our observations and investigation along the way have provided more or less information, knowledge and enlightenment concerning each of the territories through which we generally pass. The intense self examination we have indulged in has told us much. However, while we know a great deal about human development and ageing from a myriad of professional and technological and even spiritual perspectives how much we know is vastly exceeded by what we don't know and what we need to know.

In recent times in history two major developments have taken place - on average our paths have significantly lengthened (we are living longer than ever before – in just this last 50 years 7,305 days or 20 years has been added globally on average to the length of individual paths) and there are many more in far greater numbers and proportion than before who now tread those latter days. Each and every month now there are a net almost one million more individuals who have travelled 60 years or more and _ of these additional numbers are people who live in developing countries.

This is what defines individual and population ageing. The extension of life and the increasing numbers and proportion of older persons consequent upon this and the reduction that has occurred almost everywhere in fertility have resulted in extraordinary change in the demographic landscapes and herald the prospect of societies where in the foreseeable future one in every three persons at any time will be in the category we commonly call 'old'.

How shall we face these changes. How shall we respond? Are the dire predictions of a demographically fuelled time-bomb that threatens to bankrupt governments with unsustainable social security and health care provisions accurate? How can we ensure quality of life and not just additional years of life? How can we add life to years and

not just years to life in the 21st century? These are just some of the challenges now facing us.

I speak here on behalf of the world's scientific and professional gerontological community researching, teaching and working in the many fields of practice related to ageing.

The International Association of Gerontology is made up of more than 50 national gerontological societies worldwide spanning all the regions of the developed and developing world. My remit is to bring to your urgent attention the need for far greater investment globally in research, in the gathering of knowledge and understanding that can shed light upon our metaphorical path of life and can significantly lessen the risks and and immediate dangers before all of us as we age individually and as societies..

Research, especially in recent times has already provided powerful indicators to effectively steer us publically and individually away from imminent hazards. Thus, our understanding of the risk factors for serious and even fatal heart disease has guided public health policies and healthy individual behaviour to achieve in many countries astounding reduction in cardiovascular morbidity and mortality. Understanding of the pathogenesis of osteoporosis particularly that manifesting in post menopausal women and the potential value of hormonal replacement has saved many from crippling disease and avoided otherwise enormous health care expenditure in treatment of the consequences of this scourge.

Yet real investment in furthering our basic knowledge of the processes and consequences of ageing at every level – molecular and cellular, bio-medical, clinical, psychological, behavioural, social economic and environmental has been pathetically minuscule compared with many other areas that seem to grab human attention more effectively such as cancer research, AIDS or maternal and child health to name a few.

I said at the beginning we are all of us on the same path – ageing however defined is the ultimate universal impacting directly and indirectly on us all. Overcoming the serious risks associated with it can benefit all present and future – no other endeavour I can imagine has such potential to wrought such global and common good.

In the face of truly overwhelming demographic, epidemiologic and economic transitions that will inevitably be played out as a consequence of the phenomenon of human ageing as we move into the 21st century real action is needed. Knowledge and understanding is achieved by active investigation not by contemplation. The investigative tools available to us at a time in history are extraordinary. This is a time when given the necessary resources we can unravel the mysteries of the human genome; when we can confidently analyse whole population trends; when we can gain unprecedented insights into individual human motivations and behaviours; when we can point realistically to risk factors for disease and disablement and tap essential disease causality leading to real prospects of prevention and cure.

None of this can be achieved without real resolve. In the face of such a major global challenge a comparably global response would not be unprecedented – the considerable population growth issues the World became aware of around the middle of this century gave rise to the World Fertility Studies. These directed massive resources worldwide into

research on fertility, reproductive health and child and maternal health issues. This ultimately provided the knowledge and information to give direction to the policies and programmes that achieved astounding reductions in infant and maternal mortality while at the same time achieving reduction in population growth.

What is needed now is a similar level of global commitment in responding to population ageing internationally, regionally and nationally. A commitment that recognises the importance of population ageing as one of the greatest challenges facing the world as we enter the new century and new millennium.

This august body of the General Assembly has the awesome responsibility of mobilising and leading an effective global response aimed ultimately at ensuring quality of life for all and the achievement of a true 'society for all ages'. History will judge us all - this house, the international professional community and all who promote and advocate the cause of ageing - very severely indeed if in retrospect we are seen to have failed to grasp the opportunities presented in this

unique time in history to ensure better prospects for all of humanity. I feel totally confident in committing the World's scientific, professional and academic gerontological community to contributing our wholehearted support of the United Nations efforts in this noble venture."

IAG 50th Anniversary and Strategic Planning Meeting

I am pleased to announce that the IAG Executive has decided to hold a Special Meeting of the Presidents of member associations of IAG, the Regional Chairs and IAG Executive to celebrate the Association's 50th year. The meeting is planned to take place in Salsamaggiore, Italy. Dr. Mario Passeri, Regional Chair for Europe has successfully negotiated an arrangement for the Salsamaggiore Terme Foundation to host the meeting which is scheduled for 9-11 December, 2000. The IAG will offer travel subsidies to member associations to assist presidents (or their nominees) to attend this most important event. Details will be forward to Association Presidents and Regional Chairs early in the New Year.

FROM THE SECRETARY GENERAL

Since our last newsletter, all Regions of IAG have held their Congresses. I was only able to attend the Asia-Oceania Regional Congress in Seoul, along with the IAG President who also attended the European Regional Congress in Berlin, Germany and that of ComLat in Havana, Cuba. My first-hand experience, and reports from the President, indicate that the Congresses have been universally successful and provide a testimony to the vitality of ageing research around the world. It has been especially gratifying in the International Year of Older Persons to have such an energetic and informative series of scientific meetings.

At both the Seoul and Berlin Congresses ad hoc meetings of those members of the IAG Executive and Regional Chairs in attendance were held. Several matters were discussed, including revisions to the Manual of Operating Procedures (MOP), Status of the North American Regional Committee (NARC), Update on Planning for the XVII World Congress in Vancouver (see separate article), and Strategic Planning for the IAG, Celebrating the 50th Anniversary of the IAG.

Minor changes were suggested to the current revision of MOP. For instance, the history of the emergence of MOP needs to be made clear; information on the Pan American Congress needs to be added; responsibilities of the IAG in contrast to the World Congress Organising Committee need to be clarified; and other historical details need to be added to provide a more complete picture of the operation of the Association.

Although the NARC has been in existence for some time, it has been operating without formal By-laws, which are required by the IAG's By-laws. In addition there have been separate Chairs and Secretaries for Canada and the United

States. The three member organisations, the Gerontological Society of America, the Canadian Association of Gerontology, and the American Geriatrics Society, have been working for some time to correct this situation. In Seoul, Dr. Jeffrey Halter was able to join the meeting as the NARC representative to discuss a draft set of By-laws for NARC. These were accepted by the meeting, with minor amendments to bring them into line with the IAG's By-laws and past practice. The By-laws will be available on the IAG Website. Office Bearers for the Region have now been elected. James Sykes will be the NARC Chair, and Dr. Norah Keating will be Secretary. Dr. Peter Whitehouse will serve as Deputy Chair for the NARC.

The newest Region, ComLat now remains to develop formal By-laws. This process is underway. It was agreed that these formalities would assist in the smooth running of future Pan American Congresses, which are a joint inter-regional (bi-hemispheric) effort of the NARC and ComLat.

The need for some strategic and forward planning for the IAG was discussed at length. A preliminary draft of issues that might be included in a strategic plan was tabled by the President. It was pointed out that the year 2000 marks the 50th anniversary of the establishment of the IAG. Hence, it is propitious to hold a special meeting that would both celebrate this milestone and provide an opportunity for doing strategic planning for the IAG. Extensive discussion canvassed possible timing and locations, as well as financial requirements, format for such a meeting and who would attend. In order for the initiative to be successful, resources beyond those of the IAG will need to be secured. These details have now been confirmed.

FROM THE TREASURER

It is that time of year for IAG Dues to be paid. To those who are forwarding remittance for membership, we would like your cooperation by providing your source nation on the bank forms and also to forward to the Secretariat confirmation of the telegraphic transfer. Thank you in anticipation.

Please find following the Audited Financial Statement. There was some difficulty in obtaining the final audit due to establishing the final figures from European banks. I take this opportunity to thank the previous Executive Committee in Hungary for their excellent services. We will be compiling the 1999 Audited Financial Statement shortly and it is anticipated that it will be published in the next IAG Newsletter.

Audited Financial Statement

INTERNATIONAL ASSOCIATION OF GERONTOLOGY INCOME AND EXPENDITURE STATEMENT FOR THE PERIOD 1 JULY 1997 TO 31 DECEMBER 1998

INCOME	AUS	US\$
Contributions from Congress	121,220.00	76,342.35
Funds movements in Investments held	23,091.93	[908.10]
Donations from Congress		
For sending grant to Canadian Association of Gerontology	59,453.00	31,584.68
For post Congress proceedings	40,000.00	24,795.44
Dues	40,217.00	24,834.97
Interest	11,171.15	8,924.84
Surplus	472.21	293.42
TOTAL INCOME	<u>284,118.52</u>	<u>183,708.34</u>
EXPENDITURE		
Administration & Operating	13,512.15	8,561.95
Bank Fees	150.54	470.23
Printing & Stationery	5,891.33	3,727.88
Proceedings	36,947.80	23,902.93
Surplus	10,023.89	6,777.76
Taxes	2,623.87	1,614.10
Website	1,110.00	688.07
TOTAL EXPENDITURE	<u>71,270.78</u>	<u>44,342.61</u>
SURPLUS (DEFICIT) FOR PERIOD	<u>212,847.74</u>	<u>139,365.73</u>

INTERNATIONAL ASSOCIATION OF GERONTOLOGY STATEMENT OF ASSETS AND LIABILITIES FOR THE PERIOD 1 JULY 1997 TO 31 DECEMBER 1998

ASSETS	AUS	US\$
Bank SA Cheques Account	30,777	24,000
Bank SA BHF/For Account	33,090	33,885
Credit Suisse		
- Current Account	2,575	1,398
- Cash Management Account	90,697	56,187
- Bond Account	18,379	11,389
ICM Deposit	140,000	82,983
Reserve/Retires - Interest	3,688	2,370
Sending Loan to Canadian Association of Gerontology	48,399	30,000
	<u>408,315</u>	<u>231,190</u>
LIABILITIES		
Creditors & Accounts	8,218	3,239
NET ASSETS	<u>399,097</u>	<u>227,948</u>
RECONCILIATION		
Opening Balance		
- Reciprocity Cheques Account	97,167	64,091
- Credit Suisse		
- Current Account	1,078	813
- Cash Management Account	60,281	32,324
- Bond Account	14,799	10,952
Surplus	216,943	119,286
Income & Expenditure Statement	209,877	247,348
Total	<u>399,097</u>	<u>227,948</u>

INTERNATIONAL ASSOCIATION OF GERONTOLOGY

COMPILED REPORT

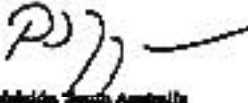
On the basis of information provided by the Committee of the International Association of Gerontology, we have compiled, in accordance with APS 9 "Statement on Compilation of Financial Reports", the financial statements for the period 1 July 1997 to 31 December 1998, as set out in the attached statements of income and expenditure and statement of assets and liabilities.

The Committee is responsible for the information contained in the special purpose financial report and has determined that the accounting policies used are consistent with the financial reporting requirements of the Association and are appropriate to meet the needs of the members.

Our procedures have been limited to the classification and summarization of information to compile this special purpose financial report from the information provided to us by the Committee and do not include verification or validation procedures. No audit or review has been performed and accordingly no assurance is expressed.

Neither the firm nor any member or employee of our firm undertakes any responsibility or accepts liability in any way whatsoever in any process other than the members in respect of the special purpose financial report including any errors or omissions in the special purpose financial report however caused.

Kennedy & Co
Chartered Accountants


Adelaide, South Australia
Dated 23 September 1999

INTERNATIONAL ASSOCIATION OF GERONTOLOGY

Notes to and Forming Part of the Accounts
For the Period Ended 31 December 1998

Note 1: Statement of Accounting Policies

These financial statements are a special purpose financial report prepared in order to satisfy the Committee's accountability requirements. The Committee has determined that the Association is not a reporting entity as defined in Statement of Accounting Concepts 1: Definition of the Reporting Entity, and therefore there is no requirement to apply accounting concepts or standards in the preparation and presentation of these statements.

No statements of accounting concepts or accounting standards have been applied.

The statements are prepared on an accrual basis from the records of the association. They are based on historic cost and do not take into account changing money values or, except where stated, current values of non-current assets.

Note: The Hungarian Account was closed on 23/12/97 when the sum of USD\$74,770.11 (opening balance at 1 July 1997 plus dues subsequently received from member associations) was transferred to the Adelaide Account.

Canadian Association of Gerontology

July 1-6, 2001 - Vancouver, Canada

Preparations for the 2001 World Congress of Gerontology in Vancouver are well underway. First and foremost, an outstanding scientific and educational program is planned for the Congress. Distinguished scholars from around the world will present the latest information on a comprehensive array of topics that span the major issues in individual and population aging, public policy and practice, basic and applied research in gerontology and geriatrics, education, advocacy, administration, etc.

In addition to carefully selected plenary speakers, there will be 150 invited symposia. Selection from the many excellent proposals brought forward has been made in consultation with an international committee of experts that included the IAG Executive Committee; the Chairs of the IAG regions; representatives of the Gerontological Society of America, the Canadian Association on Gerontology, and the American Geriatrics Society; and representatives of the UN's Programme on Aging, WHO, PAHO and the Novartis Prize Committee. In keeping with the theme of the Congress, "Global Aging: Working Together in a Changing World", the aim in selecting symposium organisers and plenary speakers was to provide a balance between established scholars and new investigators, disciplines and regions, with recognition given to the importance of contributions from developing countries.

At the Vancouver Congress particular emphasis will be placed on providing quality sessions that will be eligible for Continuing Education credits applicable to many disciplines and countries.

The educational program will also include site visits to world class research and educational facilities -- at Simon Fraser University, the University of British Columbia, and the University of Victoria -- and to innovative seniors' day and wellness programs, housing and care facilities, and venues that serve Vancouver's multi-ethnic seniors community. In addition, there will be a major exhibits program and trade show associated with the Congress.

Companion Events

A number of companion events are being held in conjunction with the 2001

World Congress, with dates scheduled either immediately before or after the Congress. Confirmed events to date include:

- American Association of Aging's 5th International Conference on Case Management
- 5th International Conference on Communication, Ageing and Health
- 4th Conference of the International Association of Homes and Services for the Ageing
- Annual meeting of the Canadian Society of Geriatric Medicine
- Injury Prevention Conference
- Meeting of REVES - the International Network of Health Expectancy and Disability Process



Standing left to right: Dr M. Passeri, Dr J. Gray, Dr M Pelaez, Ms C. Schutz, Dr R. Fisher, Dr A. Kalache, Dr M. Acanfora, Dr A. Wister, Dr M. Gerety, Dr A. Svanborg, Dr N. Sayeg, Dr H. Orimo.

Seated left to right: Prof. M. Luszcz, Dr G. Gutman, Prof. G. Andrews, Mr C. Young, Dr E. Beregi, Dr H. Hermanova.

Promotion

Promotion of the 2001 World Congress has included attending and exhibiting at many key gerontological events. So far in 1999 we have exhibited at the 2nd Pan American Congress of Gerontology in San Antonio, USA; the 6th Asia/Oceania Regional Congress of Gerontology in Seoul, Korea; the 4th European Region Congress in Berlin, Germany; the 9th Congress of the International Psychogeriatric Association in Vancouver, Canada; the 4th World Congress of the International Federation on Aging in Montreal, Canada; and the 3rd Congress of the Latin American Region of the IAG in Havana, Cuba. Already there has been tremendous interest and response to the 2001 World Congress of Gerontology.

Timelines

The First Announcement will go out in the fall of 1999. In order to incorporate new data and emerging issues, the Call for Papers will not be sent until June of 2000 with a closing date of December 31, 2000.

Further Information

If you would like to have your name added to the mailing list for the call for papers and/or for registration material, or for further information about the 2001 World Congress, visit the Congress website at www.harbour.sfu.ca/iag/, email iag@sfu.ca, fax +1 (604) 291-5066,



Dr Osvald Preto Ramos, new President Latin American and Caribbean Region IAG, Dr Gloria Gutman, President-Elect IAG and Mr James Sykes, President North American Region IAG at IV Congress of COMLAT, Havana, Cuba Sept. 29 - Oct. 1, 1999

or write to:

2001 World Congress of Gerontology Secretariat,
Gerontology Research Centre, Simon Fraser University,
2800 - 515 West Hastings Street,
Vancouver, BC, Canada, V6B 5K3.

ABSTRACTS OF NOVEMBER 1999 VARTIS AWARDS-WINNERS

Presented at the Asia/Oceania Regional Congress, Seoul, South Korea June 1999 by Edward G. Lakatta, M.D. (Gerontology Research Centre, Baltimore, U.S.A.)

Cardiovascular Ageing in Health is "RISKY"

Specific pathophysiologic mechanisms that cause clinical cardiovascular disease become super-imposed on cardiac and vascular substrates that have been modified by ageing, per se. Thus, the normal ageing process ought not to be a normal process. Rather, age-associated changes in otherwise healthy persons might be targets of interventions designed to prevent the epidemic of cardiovascular disease at later ages.

Between the ages of 20 and 90 years the large elastic arteries become dilated and become thicker. The vascular intima thickens during ageing, and exhibits features that strikingly resemble those that occur during early atherosclerosis. Vascular smooth muscle tone is increased due to reduced vasodilatory effects of B-adrenergic receptor and endothelial mediated signalling. The composite vascular alterations are accompanied by arterial stiffening that produces a late augmentation in central systolic arterial pressure. Age-associated changes in cardiac structure and resting function suggest that these are, in part, adaptive, i.e., they occur in response to ageing of the arterial system. Cardiovascular reserve

function in older persons is limited by a diminished responsiveness to B-adrenergic modulation and augmented vascular overload.

There is some evidence to indicate that diet, exercise habits, or pharmacologic agents have chronic effects in both the heart and blood vessels of older individuals. Physical conditioning can improve the aerobic capacity of older individuals by increasing both the maximum cardiac output and O₂ utilisation. Chronic administration of angiotensin converting enzyme inhibitors delays or prevents major age-associated aortic and cardiac remodelling in rodents. Novel agents that break non-enzymatic cross-links or inhibit elastin degradation appear to reduce arterial stiffness. These preventative lifestyle or pharmacological strategies can be undertaken to some extent even now, but additional studies of the specific risks of each "normal" age-associated change are still required. Future genetic characterisation of individuals will allow person-specific stratification with respect to risk, efficacy, and cost effectiveness of preventative measures. Finally, an elucidation of the age associated cardiovascular changes at the cellular and molecular levels may also render gene therapy feasible to prevent or ameliorate cardiovascular aging in healthy persons.

Presented at European Regional Congress, Berlin, July, 1999 by Paul B Baltes (Max Planck Institute for Human Development, Berlin, Germany)

On the Incomplete Architecture of Human Ontogeny

The focus is on the basic biological-genetic and social-cultural architecture of human development across the life span. The starting point is the frame provided by past evolutionary forces. A first conclusion is that for modern times and the relative brevity of the time windows involved in modernity, further change in human functioning is primarily dependent on the evolution of new cultural forms of knowledge rather than evolution-based changes in the human genome. A second conclusion concerns the general architecture of the life course. Three governing lifespan development principles coexist. First, because long term evolutionary selection evinced a negative age correlation, genome-based plasticity and biological potential decrease with age. Second, for growth aspects of human development to extend farther into the life span, culture-based resources are required at ever increasing levels. Third, because of learning (eg. negative transfer), the efficiency of culture is reduced as lifespan development unfolds.

Joint application of these principles suggests that the lifespan architecture becomes more and more incomplete with age. Three examples are given to illustrate the implications of the lifespan architecture outlined. The first is a general theory of development involving the orchestration of three component processes and their age related dynamics: Selection, optimisation, and compensation. The second example is theory and research on lifespan intelligence that distinguishes between the biology-based mechanics and culture-based pragmatics of intelligence and specifies distinct age gradients for the two categories of intellectual functioning. The third example considers the goal of evolving a positive and biological and cultural scenario for the last phase of life (fourth age). Because of the general lifespan architecture outlined, this objective becomes more and more difficult to achieve. In fact, for other reasons (such as the obsolescence created by rapid technological change) the 21st century can be considered as the century of the permanently incomplete mind.

The advent of intervention genetics creates a new scenario with promise and despair. Promise because of the possibility to complete the biological-genetic architecture of the life course through a priori and posteriori genetic engineering, despair because of a new schism created by the risk of disassociation of the time course of genetic intervention and cultural evolution. For the first time in history, humankind is truly in charge of its bio-cultural "natural" destiny.

Molecular, Cellular & Tissue Gerontology

Spa (Sol Cross), Belgium, 6-10 May 2000

Organised in association with the International Association of Gerontology (IAG) and United Nations Programme on Ageing

Scientific Organisers

O. Toussaint, Namur, Belgium (Chair person)
T. B.L. Kirkwood, Newcastle, U.K.
B. F.C. Clark, Aarhus, Denmark
C. Franceschi, Bolona, Italy
E. S. Gonos, Athens, Greece
J.-N. Octave, Brussels, Belgium
A. Delacourte, Lille, France
J. Remacle, Namur, Belgium
E. Slagboom, Leiden, The Netherlands

Preliminary Programme

Theories of ageing, Model organisms (C. elegans, Podospora, Drosophila, Yeasts), Cellular ageing & defence systems (DNA repair, PARP, proteasome, etc), Bioenergetics & Ageing, Stress-induced senescence (gene expression, telomeres, etc), Human Genetics & Longevity, Caloric Restriction, Myocytes & Telomerase, Age-related pathologies (osteoarthritis, Alzheimer Disease, Parkinson Disease, etc), Technologies in molecular & cellular biology

Provisional List of speakers

Andersen, U. of Southern California, USA
Arrigo, U of Lyon, France
Bohr, NIA, Baltimore, USA
Brand, U of Cambridge, UK
Bürkle, Heidelberg DKFZ, Germany
Butler-Browne, U Paris VI, France
Campisi, UC Berkeley, USA
De Benedictis, University of Calabria, Italy
Franceschi, U of Bolona, Italy
Friguet, U of Paris VII, France
Gonos, NHFR Athens, Greece
Hoeijmakers, U of Rotterdam, The Netherlands
Janssen-Dürr, Inst. Biol. of Aging, Austria.
Jazwinski, Louisiana State University, USA
Johnson, U of Colorado, USA
Kirkwood, U of Newcastle, UK
Linnane, Center for Mol. Biol. & Medicine, Melbourne, Australia
Octave, UC Louvain, Belgium
Osiewacz, U of Frankfurt, Germany
Partridge, University College London, UK
Rattan, U of Aarhus, Denmark
Richter, ETH Zürich, Switzerland
Rodemann, U of Tübingen, Germany
Roth, NIH, Johns Hopkins University, USA
Schipper, Mc Gill U., Canada
Slagboom, TNO Leiden, The Netherlands
Toda, Tokyo Metropolitan Inst. of Gerontology, Japan
Toussaint, U of Namur, Belgium
van Leuven, KU Leuven, Belgium
von Zglinicki, Charite Berlin, Germany
Weindruch, University of Wisconsin, USA
Information: olivier.toussaint@fundp.ac.be

ON LINE SYLLABUS IN GERIATRICS

WEB LAUNCH

In August, 1999 the Novartis Foundation for Gerontology American Geriatrics Society and the launched an International Review Syllabus in Geriatrics on the Foundation's web site as part of its Learning Center. It can be found at:

<http://www.healthandage.com/fphysi.htm>.

The content of the programme is based on the 4th edition of the AGS Geriatric Review Syllabus (GRS4), adapted and simplified as appropriate for an international audience of educators and practitioners.

The on-line Syllabus is intended to address the need for basic information on the aging process and the care and treatment of older people. It is easily accessible, especially where high quality learning material may not be readily available, and its content is complementary to the full syllabus published by the AGS.

The objectives of the programme are to make positive contributions to the prevention and treatment of age-related dysfunctions through:

- facilitating access to comprehensive educational material in Geriatrics
- supporting geriatric education among health care teams through a didactic and user-friendly format
- focussing the content on the management of older patients

The site is under continuous development, and new or revised sections will be added on a regular basis from August 1999 on.

Syllabus Contents List:

- Ageing
- Demography
- General management principles
- Geriatric syndromes
- Other conditions common in older people

For further information email: info@healthandage.com

JOURNALS

HALLYM INTERNATIONAL JOURNAL OF AGING

Hallym University in Korea has been designated by the Korean government as a university specialising in Gerontology and has received research funding. Both Undergraduate and Graduate Schools of Hallym University have established courses on Gerontology and Geriatrics. In the quite near future, Hallym University will be developed as a center for studies on aging in the Asian region.

Considering the cultural characteristics of Asia including Korea, Hallym University plans to publish an academic journal called, (HIJA) Hallym International Journal of Aging. The papers published in HIJA will focus on Family Care and Community Care and deal in depth with the fields of Behavioural and Social Science. The Editorial Committee is composed of prominent scholars from America, Europe and Asia. Only outstanding research papers, selected after careful review will be published.

For further information, please contact Prof. Hyunsook Yoon (Editor)
Graduate School of Social Welfare
Hallym University
37-12 Zamwon-dong, Socho-ku
Seoul Korea 137-030
Email: hyyoon@sun.hallym.ac.kr

THE HONG KONG JOURNAL

The Hong Kong Journal of Gerontology was established in 1986 and is a bilingual scholarly journal published by the Hong Kong Association of Gerontology twice a year. The Journal is committed to the improvement of practice, extension of knowledge, as well as development, promotion and dissemination of research findings in very broad fields of gerontology. The Journal also aims at providing linkages of regional and international research, education, and gerontological research and practice.



VISIT THE IAG Website
www.cas.flinders.edu.au/iag

All manuscripts and editorial communications should be addressed to:

The Editor,
Hong Kong Journal of Gerontology
GPO Box 10020
Hong Kong
Email: emfleung@ha.org.hk

GERONTOLOGY

Gerontology publishes manuscripts on all aspects of experimental, clinical, and behavioural science research into the aging process. It accepts particularly high-quality, original research papers in all disciplines of gerontological research. Gerontology is also the sponsoring Journal of the IAG.

Gerontology welcomes submissions which represent a conceptual advance or an original approach to the understanding of the molecular or behavioural basis of aging. From the clinical angle we would like papers of general interest submitted concerning the aetiology, pathogenesis, prevention and treatment of diseases or abnormalities of the elderly. Papers in the fields of neuroscience, cardiology, infectious disease and immunology, cancer, and epidemiology, to name just a few subjects of interest, will find a place in Gerontology, as will those reflecting current developments in the behavioural sciences.

Only original papers written in English are considered and should be sent to:

Prof. Dr. W. Meier-Ruge
Insitut für Pathologie der Universität Basel
Gerontologische Forschung
Schönbeinstrasse 40
CH-4003 Basel Switzerland
Email: karger@karger.ch
www.karger.com

AGING – CLINICAL AND EXPERIMENTAL RESEARCH

Aging – Clinical and Experimental Research publishes original studies in gerontology, geriatrics and related fields. Original Articles, Short Communications, Letters to the Editors, Review Articles and Editorials. Original Articles should be based on original rather than confirmatory data. It is assumed that all human investigations have been conducted according to the principles expressed in the Declaration of Helsinki.

Information can be sent to:

from European, Asian, and African countries:

Gaetano Crepaldi, M.D
Editor in Chief
AGING/Clinical and Experimental Research
Istituto di Medicina Interna
Università di Padova
Via Giustiniani 2
35128 Padova Italy
Fax: 39 049 8212151
Email: aging@ux1.unipd.it

from American and Pacific countries:

Roger J.M. McCarter, Ph.D
Executive Editor
AGING/Clinical and Experimental Research
Dept. of Physiology
University of Texas
Health Science Center at San Antonio
7703 Floyd Curl Drive
San Antonio TX 78284-7756 USA
Fax: (210) 567 4331
Email: MCCarter@uthscsa.edu

MEMBERSHIP UPDA TE

The IAG Executive has recommended to Council members admission to membership of the Maltese Association of Gerontology and Geriatrics and the Philippine Association of Gerontology, Inc. Individual membership has also been recommended for Dr. Abdulrazzak Abyad of Lebanon.

These recommendations have now been approved.

2000**August 25 - 28****2nd European Congress of Biogerontology
From Molecules to Human**

2nd European Congress of Biogerontology
Prof. Vladimir N. Anisimov
Gerontological Society of the Russian Academy of
Sciences

N.N Petrov Research Institute of Oncology
Pesochny-2 St. Petersburg 189646

Russia

Website: <http://www.gerontology.spb.ru>

2001**July 1 - 6****World Congress of Gerontology
Vancouver, British Columbia**

Gloria M. Gutman, Ph.D, Professor and Director
Gerontology Research Centre
Simon Fraser University at Harbour Centre
#2800- 515 West Hastings Street,
Vancouver, B.C. Canada V6B 5K3
Tel: 604/291-5062 Fax: 604/291-5066
E-mail gutman@sfu.ca
WEB SITE <http://www.harbour.sfu.ca/gero>

2003**Pan American Congress of Gerontology
Buenos Aires, Argentina**

Argentine Medical Association
Argentine Society of Gerontology & Geriatrics
French 2657 (1425)
Buenos Aires ñ Argentina
Tel: + 54 11 4805 1699/7501
Fax: +54 11 48057051
E-mail: sagg@connmed.com.ar
Website: <http://www.sagg.org.ar>

2005**18th World Congress of Gerontology
Rio de Janeiro, Brazil****2000****January 21 - 25****Ageing, Spirituality and Pastoral Care in the 21st Century
Canberra, Australia**

Capital Conference Planners
1 Dakin Place, Hackett, ACT 2602
Phone: + 02 62480302, Fax: + 02 6247 3122
Email: aspcon@interact.net.au

February 21 - 24**8th Congress on International Association of BioMedical
Gerontology**

"Healthy Aging For Functional Longevity: Molecular and
Cellular Interactions in Senescence"

Kyongju, Korea

Congress Secretariat

Department of Biochemistry

Seoul National University College of Medicine
28 Yongon-dong, Chongno-gu, Seoul, 110-799, Korea

Phone: 82 2 740 8241, Fax: 82 2 744 4534

Email: judykang87@yahoo.com

Attn: Judy Kang / Convention Manager

July 9 - 18**World Alzheimer 's Congress 2000**

"With Change in Mind"

Washington DC, USA

Phone: 1 312 335 5813, Fax: 1 312 335 110

Email: alzheimer2000@alz.org - Web: www.alzheimer2000.org

September 2 - 15**Royal College of Physicians of Edinburgh "Health care for
Older People: The UK Experience"**

Edinburgh, UK

Miss Christina Gray

International Medicine Dept.

Royal College of Physicians of Edinburgh

9 Queen Street, Edinburgh EH2 1JQ, UK

Email: c.gray@rcpe.ac.uk

2001**February 4 - 7,****International Psychogeriatric Association (IPA)
Secton of Psychiatry of Old Age (SPOA)
Royal Australian & New Zealand College of
Psychiatrists**

Lorne, Victoria, Australia

Secretariat:

c/- ICMS Pty Ltd

84 Queensbridge Street, Southbank, Victoria 3006

Australia

Telephone: +61 3 9682 0244, Fax: +61 3 9682 0288

E-mail: ipajm@icms.com.au

INTERNATIONAL YEAR OF OLDER PERSONS 1999 – POSTSCRIPT

With the distribution of this newsletter the IYOP '99 comes to an end but many of the key activities generated throughout the Year will continue

The IAG will maintain a significant role in a number of these. The Research Agenda on Ageing for the 21st Century Project will convene a final Expert Consultative Meeting in association with Novartis Foundation for Gerontology and the UN under the IAG aegis in December, 2000 and the IAG will continue to have input into the follow-up of the Year in its consultative capacity to the UN.

Consequent upon resolutions made the Special UN General Assembly Sessions held in October in New York some notable activities in which IAG will have input include a proposed Review of the International Plan of Action on Ageing and the Development of a Strategic Plan for the 21st Century. The UN has provisionally proposed that a 2nd World Assembly on Ageing be convened in 2002 most likely to be hosted by the Government of Spain. In the same year the German Government is proposing to hold a meeting involving European and North American governments and NGO's on ageing that will form an important input to the proposed World Assembly.

The UN has indicated its desire to engage NGO's fully in these important global ventures. It is critical for the IAG to be able to effectively respond. The planned 50th Anniversary Meeting of National Association Presidents, Regional Chairs and the IAG Executive in December, 2000 will be an opportunity for our Associations to formulate a response and strategically plan our on-going involvement in these activities and events. The IAG has a vital role in conveying the views and expertise of the world gerontological scientific community to these exercises that are of world wide significance.

Gary Andrews
President



REMINDER:

The Executive welcomes input from member organisations about activities or initiatives of interest to our readership. Short articles or notices can be emailed or faxed to the Secretariat in Adelaide

IAG REGIONAL CHAIRS

COMLAT REGION

Chair
Dr Ernesto Chalita
COMLAT Region IAG
Nogoya 5051
BUENOS AIRES 1417 ARGENTINA
Fax: +54 15660369 Email: chalita@connmed.com.ar

Secretary
Dr Miguel Angel Acanfora
Sociedad Argentina de Gerondologia y Geriatria
Av. figueroa Alcorta 3700 9-B
BUENOS AIRES 1425 ARGENTINA
Fax: +54 1 8016238 Email: acanfora@connmed.com.ar

ASIA/OCEANIA

Chair
Dr Hajime Orimo
The Japan Gerontological Society
Tokyo Metropolitan Geriatric Hospital
35-2 Sakaecho, Itabashi-Ku
TOKYO 173 JAPAN
Fax: 39 521 290776 Email: orimo@tmig.or.jp

Secretary
Dr Yoshinosuke Fukuchi
Asia/Oceania Region
Yoshikawa Building No 2,
2 Floor 2-9-8 Hongo Bunkyo-ku
TOKYO 113-0033 JAPAN
Fax: +81 3 5684 3382

EUROPEAN REGION

Chair
Dr Mario Passeri
Istituto Di Clinica Medica
Generale e Terapia Medica
Universita di Parma Via Gramsci 14
PARMA 43100 ITALY
Fax: +39 521 290776
Email: m.passeri@rsadvnet.it

Secretary
Dr Francisco Guillen Llera
Secretary, European Region of IAG
Permanent Secretariat, PO Box 9191
2080 MADRID SPAIN
Fax: +3413345150 Email: fguillenl@segg.org

NORTH AMERICAN REGION

Chair
James T. Sykes, M.A.
University of Wisconsin
2100 Rowley Avenue Madison, WI 53705
Tel: (608) 238-2015
Fax: (608) 238-2013
E-mail: james.sykes@mail.admin.wisc.edu

Secretary
Norah C. Keating, PhD
Professor, Department of Human Ecology
University of Alberta 3-22 Human Ecology Building
Edmonton, AB, Canada
T6G 2N1
Tel: 780 492-4191
Fax 780 492-3012