

Integrative Analysis of Longitudinal Studies on Aging (IALSA) Review

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Our main goal this summer was to identify how healthy, successful and optimal aging was being defined.

Our first goal was to generate a list of keywords that could be used to help us create a search for longitudinal studies relating to healthy aging, with a target population of adults 50+.

Next we constructed a spreadsheet to help determine common keywords, definitions and operationalizations that were present in the articles.

Depp, C. A., et al.	Health Status*	successful aging: nonsmoking, and absence of disability, arthritis, and diabetes.	disability and/or physical functioning
Depp, C. A., et al.	Aging/*physiology	greater physical activity, more social contacts, better self-rated health, absence of depression and cognitive impairment, and fewer medical conditions.	self-reported activities of ADLs and less often IADLs, objective performance (ability to walk a quarter mile, grip strength).
Depp, C. A., et al.	Aging/*psychology	the absence of disability with lesser inclusion of psychosocial variables	arthritis, hearing problems, ADLs, smoking, systolic blood pressure, medical conditions, global cognitive function, depression
Depp, C. A., et al.	Geriatric Assessment/*methods	involving freedom from disability along with high cognitive, physical, and social functioning.	diabetes, cognitive impairment
Depp, C. A., et al.	Activities of Daily Living	elderly individuals adapt to age-associated changes, view themselves as successfully aging, or avoid morbidity until the latest time point before death	subjective health and well-being, social functioning and personality characteristics
Depp, C. A., et al.	Quality of Life	adults whose health status was similar to that of younger people or functionally ideal aging ("escapers" of physical illnesses and disability).	
Depp, C. A., et al.	Social Behavior	people who experience disability/chronic illness but maintain cognitive functioning, life satisfaction, and social engagement ("survivors" of physical illness and disability)	

From this, we obtained a list of phrases for healthy, successful and optimal aging that were used in the next wave of searches.

Phrase
Change in health
Chronic health
Cognitive function
Decline in mobility
Disability free
Functional ability
Functional decline
Functional health
Functional health limitations
Functional performance
Functional reserve capacity
Functioning status
Good functional health
Limitations of daily activities
Natural history of health
Physical function
Physical performance
Physical symptom trajectory

For our searches, we used the databases EBSCO and PsycInfo. As the searches progressed our search terms became more focused, narrowing certain terms to either the subject or abstract of an article. By doing so, we reduced the amount of results found and were able to then determine the articles relevance to our topic of healthy, successful and optimal aging.

#	Query	Results
S1	"health trajectories" or "healthy aging" or "successful aging" or "optimal aging" or "healthy ageing" or "successful ageing" or "optimal ageing" or su wellbeing and su "well-being" or su "well being" or vitality or "healthy life expectancy"	38863
S2	SU "health status" or SU "quality of life" or SU "Geriatric Assessment" or SU "functional ability" or SU "functional decline" or "health risk factors" or "health transitions" or SU comorbidity or healthspan or "natural history of health" or SU "health behavior"	307809
S3	(S1 or S2) and SU aging and SU humans	5393
S4	SU "longitudinal studies" or longitudinal or AB followup or TX "cohort study" or TX "panel study" or TX trajector*	544481
S5	SU health status and SU aging	3032
S6	(S3 and S4) OR S5	3400
S7	(S3 OR S5) AND S4	868

As a team we coded the articles and determined which were beneficial to the project and which were not.

			The impact of change in cognitive functioning and cognitive decline on disability, well-being, and the use of healthcare services in older persons. Results of Longitudinal Aging Study Amsterdam	H. C. Comijs, M. G. Dik, M. J. Aartsen, D. J. Deeg and C. Jonker	The study investigated the impact of change in cognitive functioning and cognitive decline on disability, well-being, and the use of healthcare services among older persons in the Longitudinal Aging Study Amsterdam (LASA). Data were collected from 1,349 subjects, aged 65-85 years, who had scores of 24 and higher on the Mini-Mental State Examination (MMSE) at baseline, over a period of 6 years in three waves. The results indicate that cognitive decline and changes in cognitive functioning in older persons who were either not impaired or only mildly cognitively impaired at baseline have an impact on disability, well-being, and the use of healthcare services. With the aging of the population, the number of persons with cognitive impairment is likely to increase, and appropriate services should be available to them.
deb	D2; D3; D5; SYR;	assoc w named study;			
amp	D2 D5 D3 SYR				
Monica	SYR				
sparks	D2; D3; D5; SYR;	assoc w named long study; multiple meas;			
Torrie	SYR				

An example of a final coded entry by IALSA

Yanagita, M., B. J. Willcox, et al. (2006). "Disability and depression: Investigating a complex relation using physical performance measures." American Journal of Geriatric Psychiatry **14**(12): 1060-1068.

"Status of IALSA Review": **D2 D4 SYR**

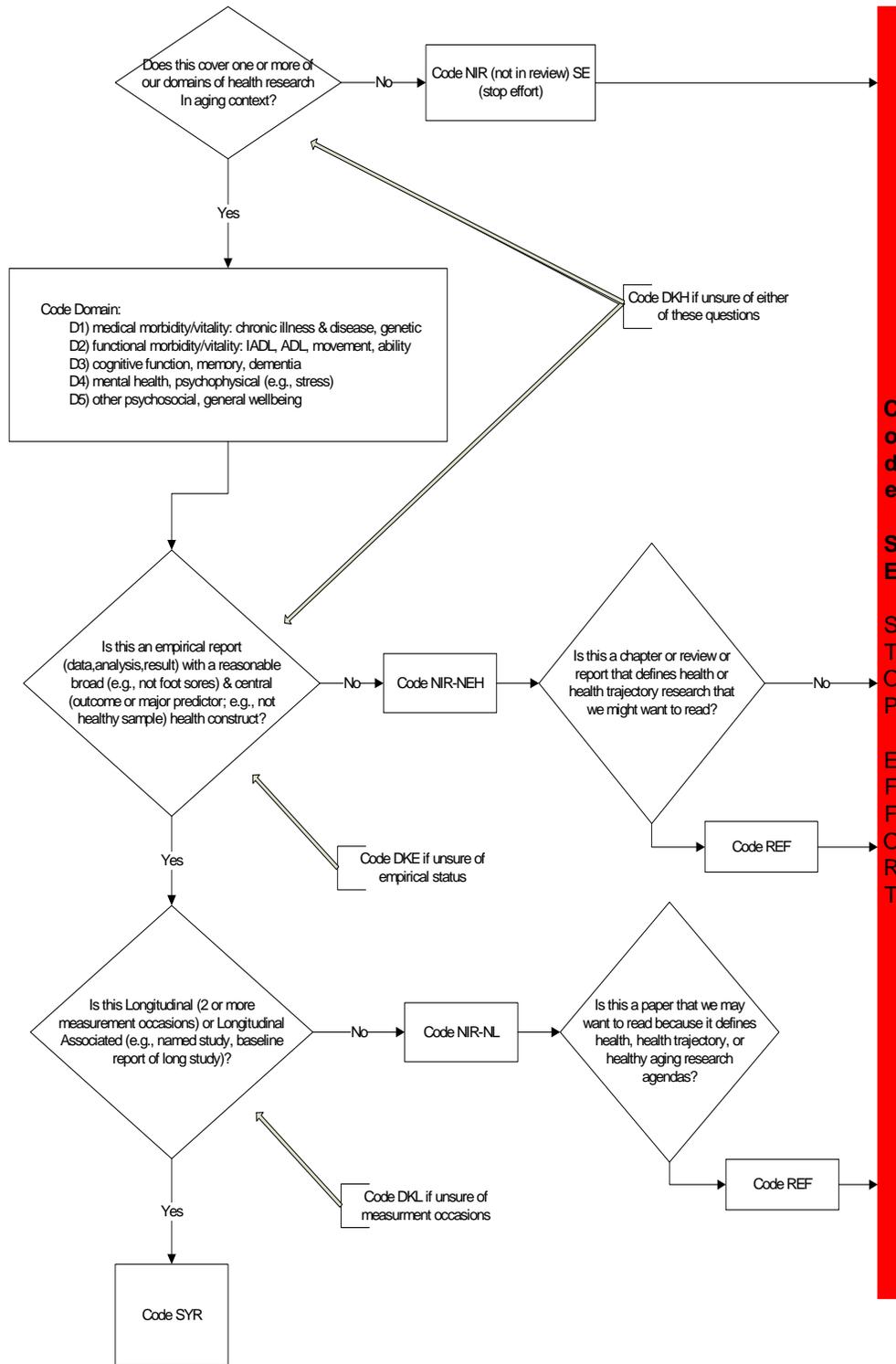
"Status of PDF": undetermined

"IALSA Reviewer Comments": **longitudinal associated only - is a XS analysis of 4th Honolulu Heart Program exam.**

Key Word List

disabilities
depression
physical performance measures
older men
Aging
Human Males
Major Depression
Motor Processes

Objective: The objective of this study was to examine the relation of physical performance measures with depressive symptoms in older men. Method: A cross-sectional, multivariate comparison of several measures of upper- and lower-extremity performance and their relation with depressive symptoms was performed in 2,856 older Japanese American men, aged 71-93 years, who participated in the fourth examination of the Honolulu Heart Program. Depressive symptoms were measured using an 11-item version of Center for Epidemiologic Studies Depression (CES-D) Scale. A score of at least 9 (from a maximum score of 33) is considered clinically significant. Timed functional performance tests, including walking and repeated chair stands, were used to assess lower-extremity performance; handgrip strength was used as an indicator of upper-extremity performance. Results: Two hundred eighty-three participants (9.9%) had a score of 9 or greater on the 11-question CES-D Scale and were considered to be at high risk for depression. Time to walk 10 feet and time to complete five chair stands were significantly longer in those with depressive symptoms, whereas handgrip strength was significantly lower. Only the association of gait speed (time to walk 10 feet) and depressive symptoms remained significant when all physical performance measures were simultaneously included in a multivariate analysis. Conclusion: These results demonstrate physical performance measures, particularly gait speed, may be important potential correlates of depression in community-dwelling older men. (PsycINFO Database Record (c) 2008 APA, all rights reserved) (from the journal abstract)



Code SE STOP EFFORT

Lifespan, Life Expectancy vs HealthSpan, Healthy Life Expectancy



Lifetime vs Vital Years, Years of Functional Autonomy