

JAGS Comes of Age: 50 Volumes Worth!

The American Geriatrics Society (AGS) was organized on June 11, 1942, at the Hotel Brighton in Atlantic City, New Jersey. Meetings of the AGS were conducted annually at different major cities in the United States. At or around the ninth annual session of AGS, the Society voted to have its own journal. It was decided to begin publishing on or after January 1, 1953.¹ Each member was charged \$7.50 per year for the journal, with the total dues for AGS being \$15.00 annually. The publisher would be The Williams and Wilkins Company of Baltimore, Maryland.

With the publishing of this January 2002 issue, the *Journal of the American Geriatrics Society* (affectionately and simply called JAGS) has reached a milestone of 50 volumes of outstanding papers on cutting-edge clinical research in geriatrics; state-of-the-art reviews on pathophysiology, diagnosis, treatment, and prevention of health problems of old age; innovative approaches to and models of health-care delivery for the older population; education and training issues for a variety of health disciplines; editorials by leading experts in the field of aging; in-depth reviews of relevant geriatric literature; and commentaries by the readership of JAGS. In January 2003, JAGS will officially complete 50 years of publication for the Society—the *Journal's* golden anniversary!

To help commemorate the publishing of the first issue of the 50th volume of JAGS, we have invited editorial comments from three of the most recent editors of the *Journal*, Dr. Gene Stollerman, Dr. David Solomon, and Dr. William Applegate. Dr. Paul Beeson, the most senior of the recent editors, was unable to submit an editorial for health reasons. However, he conveyed to the editorial office his "best wishes and congratulations" to the *Journal*.

As part of my editorial, I am reproducing excerpts of the editorial written by the first editor of JAGS, Dr. Willard O. Thompson, in the January 1953 issue. In addition, the table of contents of the January 1953 issue is reprinted. Throughout the rest of this year, we are planning to reprint all seven of the clinical papers published in the January 1953 issue and to invite a leading expert to provide an editorial commentary on the topic and how the field has evolved since 1953. I hope the readers of JAGS and members of the AGS will take great pride in the growth and maturation of the *Journal* into the leading publication in geriatrics. It is only through your continued support and the hard work and commitment of past great editors, associate editors, editorial board members, and referees/reviewers that such an achievement could be realized. The editor and editorial staff of JAGS thank you!

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Aging Comes of Age

The Modern Concept of Geriatrics

Everyone hopes to live to a ripe old age in a state of good health. People have been growing old for a long time, but it is only in recent years that the breadth and scope of the problems presented by the aging population have been recognized. Life expectancy at birth has increased for a variety of reasons including reduction in infant mortality, improvement in medical care in general, control of many infectious diseases, improved nutrition, and others. It is estimated that by 1975 there will be between 17 and 20 million people in this country 65 years of age and over.

While life expectancy at birth has been greatly increased since 1900, life expectancy at the age of 65 has been increased only slightly. Therefore, two serious problems must be faced—the care of the aging population and a concentrated attack on the causes of aging so that ways and means of increasing the life expectancy of people who have reached the age of 65 years may be discovered.

Geriatrics presents a great variety of problems and must be looked upon from the broadest possible point of view. The care of older people concerns physicians in practically every special field of medicine as well as the general practitioner, who probably sees more older people than the specialist. Even the pediatrician may find himself interested in the problem because as patients are followed from birth to old age, various causes of aging may be discovered in infancy and childhood.

Studies of causes of aging and attempts to improve the medical care of older people must be correlated with developments in all other fields which contribute to the welfare of the aging population. Attention must be focused on economic status, housing, personnel problems particularly with regard to the age of retirement, rehabilitation, and improvement in nursing care. There should be close coop-

eration with all groups interested in the welfare of older people.

The causes and prevention of arteriosclerosis, heart disease, renal disorders, various types of cancers, and the role of hormones in the aging process are problems which deserve special study.

There is no uniformity of opinion as to what constitutes old age. Most companies fix their age of retirement at 65, but there is a growing realization that many individuals are capable of active work beyond this age, whereas others are incapable of working until they are that old. The rules which should govern the age of retirement deserve the most careful scrutiny. It might be well for purposes of study to establish the dividing line at the age of 50 years with full realization that regardless of which age is selected, there will be many individual variations.

The New Monthly Journal of the American Geriatrics Society

Rapid developments in the field of geriatrics and the expansion of the Society have made possible the publication of the *Journal of the American Geriatrics Society*. This journal has been designated the official publication of the

organization and is owned by the American Geriatrics Society. This is the first issue of the new journal which will be published each month by The Williams & Wilkins Company of Baltimore.

The Society is very grateful to the publishers for the excellent cooperation which they have shown and for helping in a large measure to establish the journal. It is also grateful to the large number of outstanding authors who have either submitted manuscripts or who have indicated that they will do so within a relatively short period of time, and to the men who have agreed to serve as Associate Editors. It wishes to thank the various organizations that have shown their interest in the problems of geriatrics by making generous contributions to the Society and by using this journal as an advertising medium.

Every physician, whether he be a specialist or a general practitioner, will profit from reading this journal because it will contain material covering all phases of geriatric medicine.

W.O. Thompson, MD

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