Introduction of Abstracts to be Presented at the Third Chinese Congress on Gerontology, and Health Industry

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It is again with great pleasure that we introduce the research work to be presented at the third Chinese Congress on Gerontology and Health Industry (CCGI), which is published in abstract form in this issue of the Journal of the American Geriatrics Society (JAGS). The CCGI is a national conference organized by the Chinese Geriatrics Society (CGS), Chinese Medical Association. The third CCGI conference will be held on September 12–14, 2014 in the city of Suzhou, Jiangsu Province, the People’s Republic of China. Held in the same city on September 13-15 of last year, the second CCGI conference, received very positive feedback in China and proved to be a great success, with 182 abstracts published by JAGS September 2013 supplement issue [J Am Geriatr Soc 2013; 61 (S3): S307–S370]. As a result, the number of collaborating professional organizations and government agencies related to geriatrics, gerontology, and senior healthcare has increased to 36 this year, compared to 32 last year. In addition, we have 191 quality abstracts to be included in this issue, about 5% increase from last year.

Similar to the second CCGI conference last year, the work to be presented at the third CCGI conference this year encompasses many important areas of geriatrics and gerontology, from basic aging research to clinical trials; from clinical observation to large epidemiological studies; and from biological investigations to social and behavioral research. Studies concerning cardiovascular diseases, neurodegenerative conditions, malignancies, and other common age-dependent chronic conditions are abundant. Moreover, a number of abstracts describe important findings on genetic polymorphisms in Parkinson’s disease and cognitive impairment in the genetically homogeneous population in Xinjiang Uygur Autonomous Region, northwest of China. Several others describe promising results from clinical trials of traditional Chinese herbal medicine for age-related chronic diseases. Also well represented are the cutting-edge basic aging research topics including stem cell biology, carcinogenesis, and cellular senescence. Publication of such exemplary work in geriatrics and gerontology in this supplement issue of JAGS will further our effort to promote meaningful scientific and scholarly exchange with the geriatrics community in the United States and around the world. To this end, we would like to thank again the leadership of JAGS, particularly Dr. Thomas Yoshikawa, Editor-in-Chief, and Mr. Kurt Polesky, Business Development Manager at Wiley for their support and effort in making this a success.

As pointed out in JAGS September 2013 supplement issue, China has the largest aging population in the world. The need for the development of quality geriatrics care and aging research in that vast country is unprecedented. With the support from Chinese government agencies and the entire society, the current CGS leadership is dedicated to the development of standards for high quality geriatrics clinical care and education as well as advancement of gerontological research, a necessary step towards establishing geriatrics as a medical subspecialty in China. For instance, CGS is leading the way in developing and standardizing geriatric medicine textbooks as well as organizing national training courses for academic leaders in geriatrics and gerontology. In addition, US medical philanthropy such as the Milstein Medical Asian Partnership (MMAAP) Foundation has established the Irma and Paul Milstein Program for Senior Health to provide private funding for further development of geriatric medicine and aging research programs in China. It is hoped that leaders in the US geriatrics community can partner with their colleagues in China to apply for such funding (see the MMAAP Foundation website www.mmaapf.org for details). Furthermore, the healthcare market in China has been recently opened to the private sector, and the Chinese government encourages the introduction of innovative geriatrics care models and senior healthcare management expertise to meet the healthcare needs of Chinese senior citizens, creating a unique opportunity for geriatrics.
experts overseas to further senior healthcare development in China. The CCGI conference can serve as an important platform and useful networking for not only scientific and scholarly exchange, but also potential partnership with Chinese colleagues and senior healthcare development opportunities. At the second CCGI conference last year, we developed a symposium entitled “AGS and GSA in China” which was a success. In fact, our Chinese colleagues had hoped to have even more discussions and exchanges of ideas with American colleagues on the many topics in geriatrics and gerontology, particularly on geriatrics care models and translational aging research. To encourage and welcome participation from the AGS and GSA members, the CCGI Organizing Committee has decided to waive conference registration fee and cover conference-related travel expenses in China (i.e., hotel stay and meals during the conference).

As we did in JAGS September 2013 supplement issue, we acknowledge the challenges for continuing such international efforts. Kudos again to CGS and the CCGI Organizing Committee on securing funds to support such efforts, soliciting submission of quality abstracts for a relatively underdeveloped discipline across China, and conducting vigorous scientific peer review. Despite our experience from the second CCGI conference last year and our best effort to edit, some abstracts, in their translation into English, inevitably contain language errors. As such, we would like to ask for our readers’ understanding of any oversight and their feedback so that we can make further improvements in the future. To this end, we would also like to thank everyone who is involved in this important work, both in China and in the United States. Once again, we wish the third CCGI conference a great success!