

# AGING, BUT NEVER OLD

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**AGING, BUT NEVER OLD**

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# AGING, BUT NEVER OLD

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*The Realities, Myths, and  
Misrepresentations of the  
Anti-Aging Movement*

JUERGEN BLUDAU, MD

The Praeger Series on Contemporary Health and Living  
*Julie Silver, Series Editor*



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# SERIES FOREWORD

## CONTEMPORARY HEALTH AND LIVING

Over the past 100 years, there have been incredible medical breakthroughs that have prevented or cured illness in billions of people and helped many more improve their health while living with chronic conditions. A few of the most important 20th century discoveries include antibiotics, organ transplants and vaccines. The 21st century has already heralded important new treatments including such things as a vaccine to prevent human papillomavirus from infecting and potentially leading to cervical cancer in women. Polio is on the verge of being eradicated worldwide, making it only the second infectious disease behind smallpox to ever be erased as a human health threat.

In this series, experts from many disciplines share with readers important and updated medical knowledge. All aspects of health are considered including subjects that are disease specific and preventive medical care. Disseminating this information will help individuals to improve their health as well as researchers to determine where there are gaps in our current knowledge and policy makers to assess the most pressing needs in healthcare.

Series Editor Julie K. Silver, MD

Assistant Professor

Harvard Medical School

Department of Physical Medicine and Rehabilitation



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# FOREWORD

As a 71-year-old woman, this I know for sure. What a wonderful moment to be alive. Modern medicine has reinvented the world of aging, making available new knees, hips, and shoulders, repairing hearts, and creating miracle drugs. However, physical rehabilitation is just one component of this aging journey. We must prepare mentally as well, and this can be a significant factor. The medical world can do just so much; the rest is up to us.

Whether we are the ones being cared for or the caregivers, this book encourages us to look forward, urging us to prepare ourselves for the unique challenges we will face as older citizens and, at the same time, assuring us that there are still opportunities for great joy and satisfaction. Yes, we will be facing a new reality, but dedicated physicians are working tirelessly to enrich and extend our lives.

This is not a one-size-fits-all book. It emphasizes the many variables among those in our age group. Some of us will age with minimal health issues, while others will struggle with chronic ailments. Yet, this is not the time to look back with regret. It is more a time to celebrate what still can be. Rejoice in what you have done in your life. Surround yourself with positive, active, fun, and grateful people. Our mission now is to keep relevant and useful, setting goals and doing good deeds.

Reading books like *Aging, But Never Old* arms us with the wisdom to understand and embrace this moment. Who better to entrust our health management to than specialists dedicated to the study of the unique issues of aging? Who better than geriatricians to look to for advice and counseling?

The new reality of our lives may not be a walk in the park; it may just be a walk on a walker. Just do what you can do; accept what is and move on. It is not too late to dream, to plan, or to do something remarkable. This is the key to never getting old.

Jo Ann K. Medalie  
Chair, Broward County Library Advisory Board  
Producer, Broward Meet the Press  
Assistant to City Manager, Fort Lauderdale

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A special thank you goes to Dr. Julie Silver who inspired me to write a book and supported me in this endeavor.

And I would have never been able to write this book if it wasn't for the tremendous work and guidance of Dr. Susan Aiello, to whom I owe many thanks for keeping me organized, focused, and on top of my assignments.

Last but not least, I thank my family: my wife, Paola, and my children, Sebastian, Hannah, and Oliver, for their understanding on the many occasions when my thoughts were on this book instead of with them.

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# INTRODUCTION

I shall not mind  
the whiteness of my hair,  
or that slow steps  
falter on the stair,  
or what strange image  
greet me in the glass . . .  
if I can feel,  
as roots feel in the sod,  
that I am growing old to bloom  
before the face of God.

*Author unknown*

Getting old is often considered an unavoidable dread. Old age in itself is not a disease, but rather a *wonder of the beauty of life*. Aging is a gift. Aging is unique to each person. Aging is a collection of life experiences that may bring wisdom and happiness to a person. Aging changes a person's perspective of life. What seemed important in younger years may no longer carry the same significance in old age. Older adults do not need to prove themselves anymore. They can enjoy life's moments more richly. And good health becomes the most important part of aging. However, being an older adult can mean being more vulnerable to certain states of ill health. Believe it or not, this is something that older adults and babies have in common. In infancy and childhood, most of the organ systems are in the process of reaching maturity and, therefore, are at times more susceptible to diseases. In old age, these same organ systems are trying to maintain their functional capacity through the wear and tear of decades of use.

Although bookstores are literally bulging with books on aging written for the general public, there is a surprising paucity of books that shed any light on the evidence-based scientific information about the process of aging and what it means for your health. Although grandma's advice might have had

some merit in its day, current health recommendations and treatment options are based on the best available scientific data. Without such evidence, it is difficult to judge the risks and benefits of most therapies.

So, this book fills that gap. It will give you the real data—what we really know, and sometimes what we don’t—in an understandable and practical way. It is based on my experience as a geriatrician, a physician who specializes in clinical care of older adults. It is not intended to be an exhaustive or comprehensive account of every disease related to old age, but rather an attempt to raise awareness about the major issues that affect us as we age, as well as how to manage these ongoing changes in our lives. For example, in the following pages, you’ll find insight and guidance for having productive visits with your doctor and other members of the healthcare team, up-to-date information on medications and how to take them, the current recommendations for nutrition and exercise for older adults, and much more. Throughout, I offer practical tips on improving quality of life in old age.

If I can achieve even some of these goals, I will consider myself fortunate to have served one of the fastest-growing segments of our society—older adults and those who love and care for them.

# 1

## THE SECRETS OF AGING

What is aging really? We hear about it and read about it almost every day. We see it in ourselves, and we recognize it with mixed feelings in our children and with trepidation in our parents. But when asked to explain aging, we fumble for the right words and are surprised how difficult it is to actually define. Does it refer to a time period? Is it the process of maturing? Or, more bluntly, is it just growing old? Whatever it is, today's Western society does not embrace aging as a value; in fact, it often tends to stigmatize it. Some of us cope by using adjectives like *successful* or *healthy* to try to feel better about it. Others hold tight to the messages of those in the anti-aging movement like the American Academy of Anti-Aging Medicine, proclaiming "anti-aging medicine is ushering in the Ageless Society."<sup>1</sup>

In this book, I'll try to shed some light on and insight onto aging. The more we understand aging, the better we will be at coping and adjusting to it instead of fighting it or looking for our lost youth. Hippocrates (430 BCE to ca. 370 BCE) suggested "that old age was cold and wet," referring to a failure of the heart with age, while the prominent Roman physician Galen (129–200 CE) felt "that old age was cold and dry."<sup>2</sup> Although we have a better understanding of aging today than our predecessors did thousands of years ago, there are still diametrically opposed views on aging. And despite incredible advances in science, medicine, and technology, we have been unable to stop the aging process. The quest for a cure for aging has been popular throughout the ages and still is. How ironic is it that in searching for the fountain of youth, Ponce de León discovered Florida, which is often referred to as the nation's nursing home? And how is it that despite the promises of myriad anti-aging businesses and the millions of dollars spent by consumers, we are still growing older?

If you are interested in really knowing what aging is about and what we can do about it and what is not yet possible, then this is the book you want to read. While I cannot guarantee you will always find upbeat information,



and you definitely won't find incredible cures, I will give you honest, up-to-date, scientifically proven information.

Let's start then with some thought-provoking statements about aging. Unfortunately, I do not know the authors.

"Aging is relative. A mosquito is old in a day, a dog is old at 15 years, a human is old at 90. A tortoise can outlive humans by more than 200 years. A redwood tree can live more than 2000 years."

"Aging is activity-specific: 40 is old for baseball and young for politics; 18 is old enough for the army but too young for life."

"Aging is cultural. When most of the population was younger than 30, anyone older than 30 was old. Now we talk of the "young-old" as 65-74, "middle-old" as 75-84, and "old-old" as 85+. When more of us live to be 100, we will change the categories again."

## AN ATTEMPT AT A DEFINITION OF AGING

Aging might best be described as "an irreversible process characteristic of each species" that "occurs over time independent of any specific disease or trauma to the body."<sup>3</sup> Another way of saying this is that aging is a "gradual deterioration of physiological function [normal functions of the body]," resulting in a "loss of viability and increase in vulnerability."<sup>4</sup>

In summary:

- Aging is not a disease or a collection of diseases.
- The aging process varies considerably in individuals.
- Aging makes our bodies more susceptible to various diseases.

## THEORIES OF AGING

The question remains: What is the fundamental cause of aging? In a search for a single all-encompassing process, biologists, researchers, geneticists, physicians, philosophers, religious leaders and, of course, enterprising scam artists have managed to put forward hundreds of theories. Let's look at a few to give you a taste of how broad views are about the aging process. A popular viewpoint is the "Wear-and-Tear Theory," which portrays aging as a slow but steady wearing out of different parts of the body. A good example is the development of osteoarthritis in the hips and knees and the stiffening of the arteries. Another idea is the "Autoimmune Theory," which suggests that with increasing age, the body's immune system tends to malfunction and then starts attacking itself. This reminds me of the famous saying, "the revolution eats its own children." The "Aging Clock Theory" thinks of a clock, ticking away slowly and steadily within our bodies until it stops ticking altogether. A good example of this is the menstrual cycle, which runs its inevitable course over a woman's lifetime, coming to a programmed end. This theory sparked interest in hormonal

therapy because some hormones are at higher levels in younger people than in older people. One of these hormones in particular is the growth hormone dehydroepiandrosterone (DHEA), one of the all-time favorites of the anti-aging business. More recently, researchers have discovered that the end tips of chromosomes, called *telomeres*, tend to get shorter each time a cell divides. Could they be the small ticking clocks that count down the time of a cell? I am surprised we have not seen any ads for replacement clocks offered by the anti-aging business.

Another similar theory that considers aging as a preprogrammed process is the “Cellular Theory” of aging, which is based on the idea that cells can replicate only so many times until they run out of steam. This theory dates back to the 1960s; it started in the laboratory, where cells were found to have a fixed life span. An interesting, albeit morbid, piece of information is that it was discovered that this fixed life span was a characteristic of normal cells, while cancer cells can seem to go on replicating forever. So it seems that the answer to the ever-burning question, “Can human bodies become immortal?” would therefore be yes, but that humans will “have to get cancer in order to do it.” And “therein lies the rub” (borrowed from William Shakespeare, *The Tragedy of Hamlet, Prince of Denmark*).

Yet another theory, known as the “Cross-Linkage Theory,” refers to the accumulation of waste products. Collagen, a protein found in many parts of our body, contains cross-linking compounds. These compounds result in the loss of elasticity of body tissues, which shows up in different ways. For

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**Life span** is referred to as the “genetically determined absolute life of a specific animal species under the best of environmental circumstances.”<sup>6</sup>

**Life expectancy** “. . . is the average number of years that a human population of a given age and sex can expect to live under current conditions.”<sup>6</sup> Life expectancy has dramatically increased over the last 100 years from an average of 47 years in 1900 to around 80 years at the beginning of this century. Good public health initiatives, reduced infant mortality, better sanitation, clean water, and medicines like antibiotics have made this possible. Although the increase in life expectancy will not continue at this dramatic rate, we should see further slow improvement with more emphasis on preventive strategies. For example, heart disease and stroke can be reduced through smoking cessation, exercise and weight control, and better control of cholesterol and blood sugar.

### **Compression of morbidity**

One hundred years ago, people died at all ages primarily from accidents and infectious diseases. Nowadays, we are shocked when we hear about a young person dying, and the cause is usually a tragic accident. Infectious disease is largely prevented by vaccination, and most cases that do develop can be cured. The vast majority of people die in old age from chronic diseases like heart disease, lung disease, or cancer. The result is that we have managed to push death to the later years of a person's life, in other words, we have compressed the morbidity.

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example, it helps explain the fact that most of us at about age 45 start needing reading glasses because the lenses of our eyes start to stiffen. It also explains our skin becoming less elastic and forming those dreaded wrinkles.

Along the same line of thought is the “Free Radical Theory,” which advocates the idea that free radicals are formed in cells as by-products of cell metabolism. These free radicals are toxic and damage the cells from within. The cells respond to this insult by using antioxidants, which act as a garbage collection service and “mop up” the free radicals. This is what has prompted the craze in antioxidant supplements, headed by the now disgraced vitamin E. It seems you cannot watch television, read the newspaper, or go to a supermarket without being inundated with the latest, and, of course the best, antioxidant supplement.<sup>5</sup>

### AGING IS LIKE A HOUSE

I like to compare the aging of the human body to the aging of a house. When the house is newly built, everything is in pristine shape, working well and without problems (at least we hope so considering the size of our mortgage).

But over the years, parts of the house wear out and sometimes major repairs become necessary. The weather and the elements do their destructive job on the outside of the house in a similar way the environment does to our bodies. The sun, rain, wind, and snow make the paint crack and the wood rot, just like our skin suffers from spending hours in the sun, even if we’re covered in tanning oil. While we can easily get a daily weather prediction on the local news or online, we can’t change it or its effects on our house. So, we make sure to maintain our house by painting it regularly, cleaning the gutters, and repairing the roof and other damage as soon as possible. The same holds true for our health. If we maintain our bodies by not smoking, drinking alcohol carefully, exercising, and watching our diet, we’ll keep ourselves in the best shape possible for the years to come.

Likewise, there is daily wear and tear inside the house. Walls and floors can get scratched, tiles may crack, appliances break, fuses blow, and pipes burst. Certainly, we can’t move out of the house to avoid any wear and tear, so instead we take care of it and protect it as much as possible by keeping appliances in good working condition, following maintenance instructions, and calling the plumber as soon as we find a leak. Compare the interior of the house to genetically determined disease in people, which is part of our DNA, or genetic code. While we cannot alter our genetic code, we can screen for certain diseases so that we can catch them early enough to treat them more successfully (see Chapter 8, “Health Maintenance”).

While our houses and bodies cannot remain in their original pristine conditions, maintaining them well and practicing prevention will allow them both to age gracefully. Our house may eventually become a charming historic building, in much the same way that we become fit and healthy octogenarians.

## SKIP THE THEORIES—WHAT ACTUALLY HAPPENS?

Are you ready for the truth and nothing but the truth? Because, beware, this is not for the feeble. In the words of Bette Davis, “Old age is no place for sissies.” So, you may want to sit back, put on some calming background music like Mozart’s *Requiem* or Beethoven’s *Symphony No. 5*, and take a deep breath before you continue to read. You can also skip this section or plan to read it later after you’ve read a few other chapters.

Fortunately, aging is a painless and amazingly slow process that we don’t recognize on a daily basis, unless of course you have spent some time at 1600 Pennsylvania Avenue in Washington, DC. Again, aging is *not* a disease; rather, it predisposes us to diseases. Another important concept about aging is that every person ages differently. Whatever happens is most likely a combination of internal (genetic) and external (environmental) factors.

With that in mind, let’s look at our bodies as they age ever so slowly, starting on the outside first. As we get older, we tend to shrink a little, meaning that our height tends to decrease while, unfortunately, our weight tends to increase. As you will surely have noticed, men have a propensity to get round in the waist, and women in the hips. Our skin gets thinner and more wrinkled. Our hair thins and turns white or gray. Mucous membranes become drier, and we have fewer sweat glands. As a result, we’re not able to regulate our body temperature as well, and we tend to “feel the cold more.”

Typically, our hearing ability declines steadily, especially for high-frequency sounds. Wouldn’t you know it that men are more affected than women? And to add insult to injury, wax buildup tends to increase with age, too. In our eyes, the lenses become less transparent, which can lead to cataracts. The term *cataract* is derived from the Greek word *cataractos*, which describes rapidly running water. When water is turbulent, it is transformed from a clear medium to white and cloudy.<sup>7</sup> The pressure within our eyes may increase and damage the visual nerve. This condition is called glaucoma, also referred to as the “silent thief of sight.”<sup>8</sup> Macular degeneration is another common eye disease in which the macula, “the central area of the retina, a paper-thin tissue at the back of the eye where light sensitive cells send visual signals to the brain,” deteriorates.<sup>9</sup> Add some changes in color vision, especially greens and blues, to all this, and you will surely agree that we need a good ophthalmologist in addition to those designer reading glasses.

Our senses of smell and taste are not spared either. The nerves in the nose involved in smell slowly deteriorate, which also results in subtle changes in our taste sensation. The number of taste buds on our tongue also diminishes, leaving us with less ability to taste sweet and salty foods so that more of the sour and bitter tastes come through. Now doesn’t that make you feel better?

Our joints tend to start to creak, ache, and get stiff from the constant wear and tear, and we can predict the weather better than most meteorologists. Just wait until it’s time for you to cut your toe nails. They often become so thick that you may seem to need rose clippers instead of normal trimmers.