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All in the Name

By Linda Gebroe

For decades, physicians and philosophers have debated whether aging can--or should--be called a disease. The argument might seem trivial, but the answer could shape the way scientists, legislators, and society in general deal with the process of growing old.

Think about "aging," and a range of images might spring to mind. Many are pictures of infirmity: farsightedness, osteoporosis, diabetes, heart disease, and cognitive decline. Although growing old is often linked with illness, scientists and ethicists continue to ponder the wisdom of defining aging itself as a disease.

The discussion is more than a philosophical exercise. If aging were declared a disease, the public might clamor for an intensive search for a cure--and research agencies might be more apt to fund that endeavor, says Arthur L. Caplan, director of the Center for Bioethics at the University of Pennsylvania in Philadelphia. Such antiaging treatments might extend the average human life span by decades. Others argue that categorizing aging as a disease only stigmatizes the elderly and encourages hucksters who wish to ply their quick fixes. Growing old should be considered a natural process, says Harry R. Moody, director of the Institute for Human Values in Aging, affiliated with the International Longevity Center in New York City. People should make healthy lifestyle choices now to improve their chances of leading productive, active lives in their later years, he says. Caplan and Moody present their cases in this month's SAGE Crossroads Webcast debate, "Is Aging a Disease?"

Biologically speaking, aging looks exactly like a disease, Caplan says. "[Blood] vessels are stretched out, bones are brittle, joints are stiff, hearing and vision are going," he says. These are all symptoms of disease. According to Caplan, conditions that are considered diseases share a certain set of criteria: Their symptoms induce discomfort or suffering, and they produce structural changes and functional impairment. "By these standards, if we looked at someone who was 90,

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we'd say he or she was diseased," says Caplan.

But aging isn't a condition that occurs suddenly, says demographer S. Jay Olshansky of the University of Illinois, Chicago. It's a process that takes place our whole lives. "Aging begins at conception," he says. As soon as our cells start to grow and divide, they begin to accumulate damage that will eventually overwhelm them, destroying tissues, organs, and ultimately the whole body. Thus, Olshansky concludes, "aging is not a disease. It's an expected phenomenon."

He says he can understand why some people want to call aging a disease, though. "Doing so implies that aging is an unnatural state, like an infectious disease that results from something we do. They say if we can acquire it, we can get rid of it."

Some researchers are loath to call aging a disease because they haven't yet nailed down what it means to "age." Some 70-year-olds are mentally and physically fit, leading active, social lives. Others have deteriorated significantly and need assistance with basic functioning. In 1988, the National Institute on Aging launched a decade-long research initiative to identify biological markers that track with biological age. The initiative failed (see "Magic Markers"). "To purport that aging is a disease when we can't even measure it is folly," concludes Moody.

Moody says he fears that such declarations merely open the doors to snake oil salesmen who have some potion to peddle. "There are people calling aging a disease and saying they have the cure for it," he says. "But none of these products has been proven to work." For that reason, he adds, "I'd resist the idea of calling aging a disease."

And the all-out effort that many researchers are making to manipulate aging might be misplaced, says Moody. Perhaps they'll succeed someday, he says. "But to me it's like interstellar travel. I think it's a tremendous waste of money and resources and probably not technologically feasible."

Instead of scrambling for a cure that might never emerge, Moody says that society should invest in the well-being of senior citizens. For example, stressing good nutrition, regular exercise, and mental health intervention has already contributed to a steady improvement in the health of the elderly, he says. "The percentage of people in nursing homes has gone down considerably in the last 10 to 12 years," Moody says. "There'd be millions more people in nursing homes today if the health of the [aged] hadn't improved so much." Furthermore, labeling aging a disease might only stigmatize a population that has more than enough challenges to cope with.

Caplan is well aware of the charges. "My goal is not to put down or dismiss the elderly as a category of people who are all sick and diseased," he says. "But if you take a cold, hard look at it, aging is a disease that affects us all. Wouldn't it be in

everyone's best interest to see aging as the kind of disease worth spending money on?"

Not that spending money on the problem is likely to eliminate aging altogether. On this matter, Caplan and Moody agree. "We're still going to die," says Moody. "Trying to prevent it is pointless."

"As someone who's been to a lot of faculty meetings," adds Caplan, "I can assure you, living forever is not my idea of a good time."

We might not live forever, but the debate about whether aging is a disease is not likely to expire anytime soon.

Linda Gebroe is a freelance writer living in San Francisco. She's not sure whether aging is a disease, but she's quite certain she's older than she's ever been.