



IAGG2023

Asia / Oceania Congress of Gerontology and Geriatrics Bid for Yokohama



For Enhanced Wellbeing in Later Life through Innovation and Wisdom Sharing
June 12- 15, 2023



Introduction from the Chair



The Inevitable Paradigm Shift from Simple Cures to Cures with extended Care Support in a Super-Aged Society

Japan's low birthrate and aging population does not simply mean that the number of older people will increase. It means that the number of people aged 85 or above who are unable to maintain basic activities of daily living (ADL) such as walking and eating, and who are unable to live by themselves, will increase. Above all else, we must appreciate that the situation of an older person, both physiologically and socially, differs qualitatively from that of a young person.

One-third of the older population aged 80 and above can be classified as "frail," exhibiting the mental and physical debilitation and decline associated with advancing age. If people in this state of frailty undergo a surgical procedure, only one in twenty, or 5%, will be able to return to their own homes and reintegrate into society. In addition, dementia is frequently concurrent with frailty. It is currently the case that the majority of dementia sufferers in Japan live at home, but when the behavioral and psychological symptoms of dementia (BPSD) are present, the burden on the family is high.

Up to the present, we have thought it sufficient that medical treatment should preserve ADL; however, whether or not the individual under treatment is able to return to their former life will be the measure of medical treatment for older people in the future. It will be essential for us to determine measures to address the frailty and dementia which can characterize old age, and to make the transition from medical care focused exclusively on achieving a cure in the acute phase, to medical care that cures and supports, encompassing rehabilitation and the provision of care to family caregivers during the recovery phase.

In order to realize high-quality and efficient medical care that is both curative and supportive, it will be necessary to provide training and education to medical and nursing staff.

What will be required will be to reduce the stress of treatment on patients during the acute phase, for example through the use of minimally invasive surgical techniques and administration of the minimum necessary drugs. In the area of nursing care for dementia patients, it will be essential to provide support for consultation with caregivers, and to ensure that knowledge regarding responses and methods of treatment able to ease BPSD is passed on. This will necessitate a certain amount of spending, but from the long-term perspective it represents an extremely important investment.

At the same time, the expenses associated with medical and nursing care of older people will also steadily increase, rising year by year until they resemble a tsunami poised to engulf Japan. While a decline in the quality of medical and nursing care for older people might aid public finances, the burden would be borne by families, with consequences including the leaving of employment for caregiving and "elder to elder care". In order to enable us to avoid worst case scenarios, all citizens must consider these problems to be their own, and make the appropriate relevant choices.

Kenji TOBA
Chair, Local Organizing Committee
President of Tokyo Metropolitan Institute of Gerontology



Yokohama is Japan's first harbor city which opened to the world almost 150 years ago. Since then Yokohama has been vigorously acquiring new cultures and information from foreign countries, which entitles Yokohama as the birthplace of Japan's modern culture. When you come to Yokohama, you can see several ships resting at the harbor along with the world's largest clock-style Ferris wheel, located inside of Yokohama Cosmo World. The wheel stands as the landmark of the Minato Mirai 21 district at a total height of 112.5m, diameter of 100m, and 60 gondolas that each seat 8 people for a total capacity of 480 people. Therefore, we included a ship and wheel in the logo to represent these grand **symbols** of Yokohama.

1. Host Organization

The Japan Gerontological Society

[Founded / Established: November, 1959]

The Japan Gerontological Society (JGS) was established in 1959 as a national association in the field of gerontology in Japan. The JGS is an interdisciplinary scientific society, engaging in research focused on the problems of aging and the service and care of older people, not only in the economic and sociological realms but also in the areas of social welfare sciences, psychology, architecture, health sciences,

nursing, and psychiatry. The society has a wide range of members of various backgrounds, from social, behavioral, and health science researchers to doctors, nurses, and other welfare and nursing care professionals. In addition to a major academic meeting with its member societies every other year, the JGS has held additional annual workshops and symposiums since 2002.



The Japan Geriatrics Society

[Founded / Established: November, 1959]

We strive for the progression of geriatric medicine by collaborating with and coordinating academic conferences, held with the purpose of connecting members, encouraging domestic and international relations, spreading information and promoting

research in the field of gerontological medicine. It is our goal to further contribute to society through the utilization of the academic culture developed by our country.

The Japan Socio-Gerontological Society

[Founded / Established: November, 1959]

The Japan Socio-Gerontological Society was established as a denomination of the Japan Gerontological Society. It has developed as an interdisciplinary scientific society, engaging in research focused on the problems of aging and the service and care of older people, not only in the economic and sociological realms but also in the areas of social welfare sciences, psychology, architecture, health sciences, nursing, and psychiatry. The society has a wide range of members of various backgrounds, from social, behavioral, and health science researchers to doctors, nurses, and

other welfare and nursing care professionals. It also plays a role in publishing the highly respected Japanese Journal of Gerontology quarterly, which consists mainly of submitted essays. In addition to a major academic meeting with its member societies every other year, they have held additional annual workshops and symposiums since 2002.

The Japan Society for Biomedical Gerontology

[Founded / Established: May, 1981]

An extensive scientific society which conducts research on the elucidation of effects on older people and the development of

aging prevention, focusing primarily on the study of Drosophila developed from cultured cells as well as other high-level animals.

The Japanese Society of Gerodontology

[Founded / Established: September, 1990]

Our purpose is to contribute to the medical care and treatment of older people through general research on oral aging problems, dental-related medicine and welfare in an aged society, and an

understanding of results of collaborative research and publications with other scientific societies.

Japanese Psychogeriatric Society

[Founded / Established: May, 1986]

Today, the expectations of psychogeriatric medicine are rising rapidly, and thus it is imperative for those involved to take the necessary steps to prepare. There is a sense of urgency in psychogeriatric medicine, with the issue of dementia as the greatest challenge. In addition, afflictions such as delusion, neurosis, and depression which can easily be seen in old age, as well as other psychological obstacles that go hand in hand with physical ailments, must also be targeted. There are many reasons for the increase of physical and socio-psychological factors involved in the expression of psychological obstacles of old age. The understanding of their specific

symptoms and aspects of treatment, not merely as an extension of general psychiatry, is necessary from the point of view of psychogeriatric medicine. Based on these circumstances, The Japanese Psychogeriatric Research Society was founded in 1986 as a gathering of those with profound interest in this field, with the purpose of presenting results of habitual research and exchanging information. In 1988, it was reorganized as The Japanese Psychogeriatric Society and continues as such to this day.

Japan Society of Care Management

[Founded / Established: July, 2001]

In the nursing care insurance system, the introduction of care management is still in its infancy. It is our hope that care management of the highest quality can be realized through the progression of interdisciplinary research, promotion of relationships and mutual cooperation among researchers, coordination of domestic and international scientific associations, proper instruction

in care management technology, and societal development efforts. By improving the quality of life for those people who need assistance, we hope to contribute to the creation of a rich global society.

Japan Academy of Gerontological Nursing

[Founded / Established: November, 1995]

In 1990, gerontological nursing education was first promoted separately from adult nursing education because of the increase in the Japanese aging population. Following its introduction, the Japan Academy of Gerontological Nursing was established in 1995. Since the 1970s the population in Japan has been rapidly aging. In response, a wide variety of activities and research have been conducted in nursing care settings. However, the gerontological

nursing curriculum was not introduced until about 20 years later. Our organization was formed 5 years after that. From 1970 to 1995, researchers were obligated to present or publish in their related fields. Once the Japan Academy of Gerontological Nursing began, researchers responded with publications and presentations on "the provision of high-quality care for older people."

2. Congress City and Country



About Japan

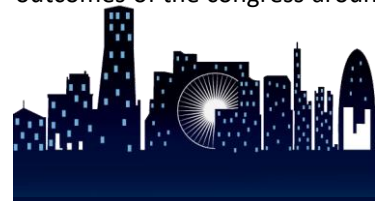
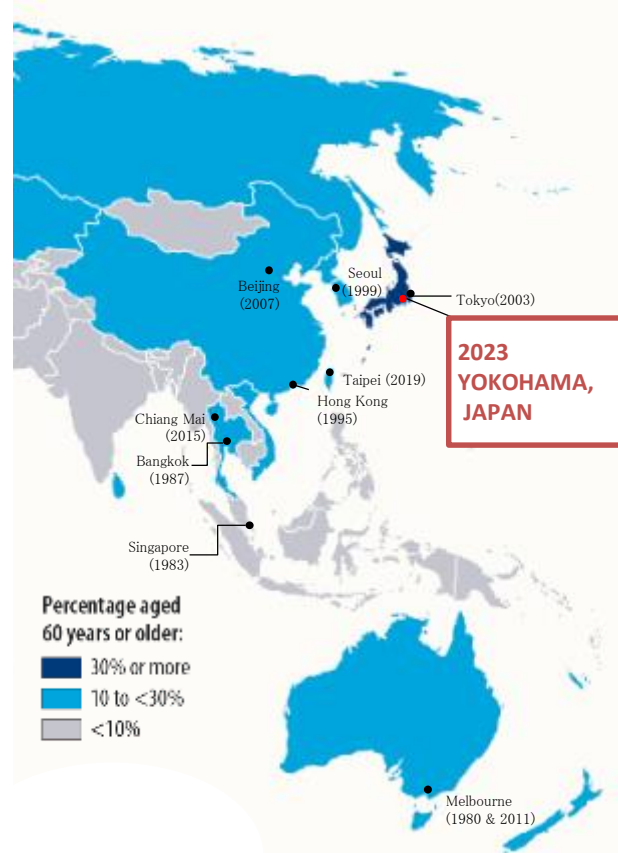
Japan has long been considered the picture of longevity and health. Major factors behind this include the country's lifestyles, climate, culture and diet. A spirit of respect for the aged is also deeply rooted in the culture, as is commonly true in Asian countries.

So, why look to Japan now?

Population If we look at changes in the percentage of the population aged 65 years and older, while Japan could previously be found on the lower end of the scale, in 2000, it ranked highly on the charts for major countries, exceeding 23% in 2010 and predicted to approach 30% in the near future.

Aging In other words, from 2020 to 2030, every country will go through the aging process that Japan has experienced between 2000 and 2020.

Research Japan has given importance to geriatric medicine at an early stage and conducted research to date. We believe that organizing this congress in Japan in 2023 will offer an important opportunity for people to confirm the outcomes of research by Japan and think about the concept of geriatric medicine throughout Asia. We also believe that, as a leader in this field, Japan can play a role in spreading the outcomes of the congress around the world.



About Yokohama

Since Japan opened its doors to the world, Yokohama has been the nation's key entry point for international trade and communications, bringing in global perspectives, new ideas and multiculturalism. The port city has always been recognized for being open to business and to an exchange of expertise through international trade and conventions.

Fresh breezes and refreshing ideas are integral to Yokohama being the nation's center for innovation in science and technology. Major universities, medical and scientific research centers based here will contribute to the success of global conferences.

- **The second largest city** in Japan, located in 30 minutes distance from Tokyo by train or car
- **Ease of access** is anticipated to draw even more participants
- Has **28 universities**, with medical schools strong in bioscience and biotechnology fields.
- **Over 14,000 rooms** in the City, including five-star hotels such as the InterContinental and Sheraton
- **Over 14,000 shops** in the whole City- boutiques, department stores, shopping malls
- **Over 34 million tourist visitors** yearly, and a gateway to favorite touristic areas: Tokyo, Kamakura, Mt. Fuji, Kyoto
- Appeal of **low lodging costs** for young researchers and professionals from developing countries

3. Secretary of the Organizing Committee



ARAI Hidenori
National Center
for Geriatrics and
Gerontology

2019 Jun	:	President, Japan Gerontological Society
2019 Apr	:	President, National Center for Geriatrics and Gerontology, Japan
2018 Apr	:	Director, National Center for Geriatrics and Gerontology, Japan
2015 Apr	:	Director, Center for Gerontology and Social Science, Japan
2009 Apr	:	Professor, Kyoto University Graduate School of Medicine, Japan
1991 Mar	:	Ph.D., Kyoto University Graduate School of Medicine, Japan
1984 Mar	:	M.D., Kyoto University School of Medicine, Japan

4. Plenary Lectures

José R. JAUREGUI

Buenos Aires University |
La Matanza University

Liang-Kung CHEN

National Yang Ming University | NYMU
Aging and Health Research Center

SEIKE Atsushi

Keio University

HARA Eiji

Osaka University

SUMI Yuka

WHO Medical Officer

Chang Won WON

Kyung Hee University School of
Medicine

YOSHIMORI Tamotsu

Osaka University

AKIYAMA Hiroko

The University of Tokyo

OKANO Hideyuki

Keio University

Jean-Pierre MICHEL

Geneva University

5. Program Streams and Themes

“For Enhanced Wellbeing in Later Life through Innovation and Wisdom Sharing”

A program structured around the idea of “A Life of 100 Years”

Dementia

- Community care for old people living with dementia in the perspective of care management
- The progress and brand-new approach to neurodegenerative disease research.
- Biology of cognitive aging across species
- Driving of older people with cognitive decline
- Application of biomarkers capable of classifying dementia
- Management of BPSD
- Neuroimaging of neurocognitive disorders
- Non-pharmacological intervention for dementia

Gerodontology

- Oral frailty: Assessment and interventions
- Oral functions, diet styles, nutrition
- Oral health and cerebro/cardio vascular disease; challenges for prevention and rehabilitation

Geriatrics

- End-of-life care in care facilities
- Geron-technology in long-term care
- Team approach for secondary fracture prevention
- Strength-based Approach in Prevention and Rehabilitation
- Fall prevention in different settings
- Incontinence management: Evidence update
- Management of malnutrition and anorexia
- Preoperative care for surgical patients
- Definition and diagnosis of sarcopenia
- Digital technology and health of older people
- Policy strategy for frailty and locomotive syndrome
- Management of diabetes in older adults
- Cross talk related to muscle health
- Multimorbidities and polypharmacy
- Neurosurgery for older people
- Anti-thrombosis and anti-coagulation for older patients

Social

Science

- Community-Based Integrated Care/Public Health Program
- Interdisciplinary study of supercentenarians: exploring healthy longevity
- Community building for Aging in Place
- Health Inequality in Gerontology
- Social isolation and health in the post-COVID-19 era
- Prevention of functional decline during COVID-19 epidemics
- Fostering intergenerational interactions in countries in Asia/Oceania
- Psychosocial factors of well-being, psychological adaptation, and healthy longevity

Care DX

- International perspectives on family caregiving for older adults
- Work in Older Age: Active aging in employment and social participation among older adults
- Disaster preparedness for older adults: what we learned?
- Exploring healthy longevity: results from the panel surveys in Asia/Oceania region
- Higher education in Gerontology
- Active Aging Index in the ASEAN region

Aging

Science

- Cellular aging: from pathology to therapy
- Nutrition and Aging
- Molecular Mechanisms of Sarcopenia Prevention and Improvement by Exercise

TMIG

Sponsored

- Recent Advance of Robotic and AI technology for cognitive impairment
- Challenges and Prospects of Integrated Cohort for Frailty and Dementia
- Recent Advance of Wearable Watch for Frailty

NCGG

Sponsored

- Healthy aging, lifestyle and biomarkers: Japan-Taiwan collaborative studies
- Psychological resources for aging well

6. Congress Venue

Space at **PACIFICO Yokohama** has been reserved. PACIFICO Yokohama has several facilities that can be arranged in different styles.

"North", a new and state-of-the-art conference facility, will open in 2020 and has also been reserved.



About PACIFICO Yokohama

PACIFICO Yokohama was **ranked No.1** amongst major convention centers in Japan in terms of the number of events and attendees. It has been ranked one of the **top convention complexes** in the country for more than 10 years, **as well as ranked first in number of events held and total event participants** in 2017.

*MICE facilities exclude universities and hotels

**Source: Japan National Tourism Organization: "Statistics of International Conferences"

PACIFICO Yokohama is one of **Japan's best** convention complexes designed to include all necessary functions and provide all necessary facilities for conventions and other large-scale-events.

The beautiful exterior of the building, reminiscent of "wave, wind and light," is one of the symbols of the historical and cosmopolitan Yokohama, the second largest city in Japan.

Hall No.	Name	m ²	Capacity
Main Hall	G5 - G8	2991m ²	T2500
Parallel 2	G301 + G302	531m ²	T400
Parallel 3	G303 + G304	587m ²	T440
Parallel 4	G401 + G402	531m ²	T400
Parallel 5	G403 + G404	587m ²	T440
Registration Desk Exhibition Poster Session	G1 - G4	2991m ²	

- Prayer's room will be prepared in the vicinity for those whose faith is Muslim.
- PACIFICO Yokohama can serve **vegetarian and Muslim-friendly meals** to participants, needless to say the **local and authentic Japanese foods**.

7. Accommodation Options

Yokohama offers a **wide variety of accommodation**, from five-star hotels to budget accommodation. There are over **14,000 rooms** in the City, and approximately 7,600 rooms within walking distance from the main convention venue, PACIFICO Yokohama.

The Kahala Hotel & Resort Yokohama, adjacent to the "North" of PACIFICO Yokohama, will be reserved for invited guests.

For younger participants, rooms that can be shared with several people – a recently-new style of accommodation – will be available as another inexpensive lodging option.

8. Transport to and From the Congress Venue

Yokohama is ideally located and is easily accessible by air, train and sea.

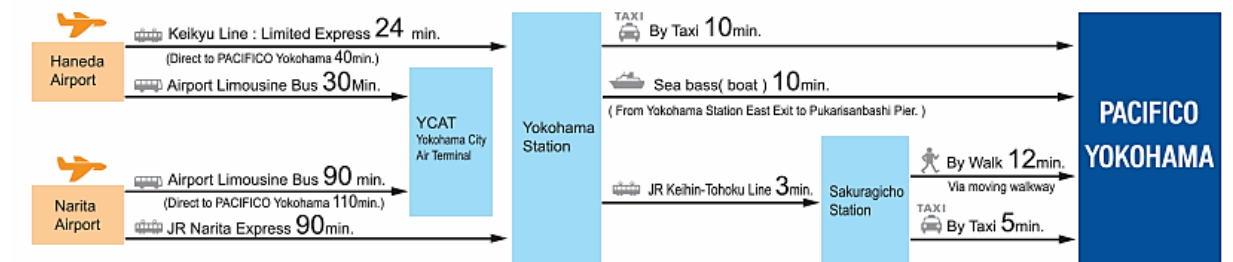
- It is close to **two major airports**: only 24 minutes by train from Tokyo International Airport (Haneda) and 90 minutes from Narita International Airport.

There are flights to 104 destinations of 42 countries from these airports and it is **easy for congress attendees** from around the world to reach Yokohama.

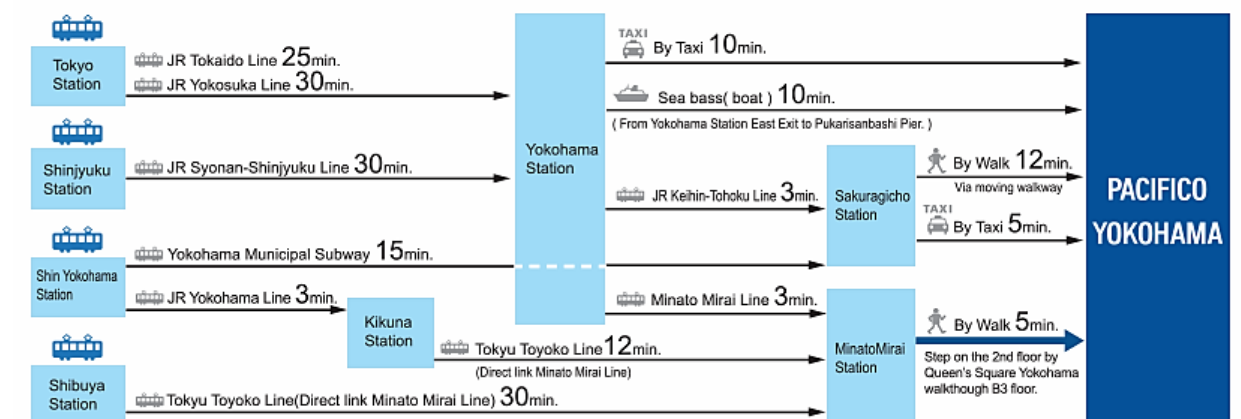
- The travel time between Yokohama and Tokyo by car or train is only 30 minutes. The Shinkansen bullet train line directly connects Yokohama and major cities including Kyoto, Osaka and Nagoya. This location provides great accessibility to attendees who wish to **enjoy sightseeing** in Japan.

-**Direct limousine bus** access from both Narita and Haneda airports makes the newly opened 'North' extremely convenient.

Access by air



Access by train / Shinkansen Line



9. Upcoming Dates

Register Now! IAGG-AOR2023 Congress is open for registration. Please don't miss out!

Congress Registration

Early Bird Registration **until March 15, 2023!**
<https://www.iagg2023.org/registration.html>



Call for Papers

Abstract submission deadline: **January 27, 2023!**
EN: <https://www.iagg2023.org/call-for-papers.html>
CLOSED



Submitted Symposium Proposals

Accepting submissions **until January 13, 2023!**
<https://www.iagg2023.org/symposium.html>
CLOSED



Sponsorship & Exhibition

Accepting applications **until January 31, 2023!**
EN: <https://www.iagg2023.org/sponsorship.html>

