



UW-Madison
Institute on Aging



Department of
Veterans Affairs
VA Geriatrics Research
Education and Clinical Center

Aging Notes

Spring, 1997

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NEW DIRECTIONS FOR INSTITUTE ON AGING ADVISORY BOARD

Mission and Goals

The mission of the Advisory Board is to provide counsel to the Institute, to create a bridge between the University and its constituencies, and to build a solid financial foundation to enable the Institute to reach—with excellence—its goals of creating new knowledge and communicating and applying that knowledge for the benefit of an aging society.

The Advisory Board—working with the Institute on Aging staff and the UW Foundation—has five broad goals.

*To interpret and communicate the mission of the Institute to various communities and constituencies and to highlight the Institute's achievements, opportunities and needs.

*To identify resources—both human and financial—that will enable the Institute to realize its vision, fulfill its mission and reach its goals.

*To give leadership—within Wisconsin and the nation—to generate financial, public and University support for the work of the Institute.

*To review program directions of the Institute and provide advice and support for aging programs.

*To comprise a critical audience for the research, education and public service initiatives of the Institute with the perspectives of community and University leaders concerned for the health and well-being of aging populations and the productivity of University personnel.

Membership

Appointed by the Deans of the Medical and Graduate Schools, the following persons are members of the Institute on

Aging Advisory Board. The Advisory Board is balanced between community and University representatives with both "communities" sharing responsibility for the direction and support of the Institute's mission:

Betsy Abramson-Elder Law Center, Madison; **Rabbi Jan Brahms**-Temple Beth El, Madison; **Margery Buckeridge**-Evansville; **Dennis Carr**-Montfort; **Richard Cates**-Lawton & Cates Law Office, Madison; **James Crow**-Genetics, Emeritus, Madison; **Sarah Dean**-McBeath Foundation, Milwaukee; **Donald Harkness**-Medicine; **Robert Hauser**-Sociology; **Vera Jones**-Cross Plains; **Henry Lardy**-Biochemistry, Emeritus, Madison; **Eugene Lehrmann**-Madison; **Jean Manchester Biddick**-UW Foundation; **Donna McDowell**-Bureau on Aging, Madison; **Jay Noren**-Preventive Medicine; **Sharee Pemberton**-Chicago; **Louise Rusch**-Madison; **William Sewell**-Chancellor, Emeritus, Madison; **James Sykes**-Cremer Foundation, Madison; **Wilson Thiede**-Education, Emeritus, Madison; **Marge Tobias**-Middleton; **Carol Toussaint**-Madison.

March Meeting

In March the Institute's Advisory Board met in what members called an historic session. The members—from the University and the community—agreed to an action plan to achieve strategic results.

Former Chancellor, William Sewell, said the need to attract outstanding individuals to top positions in aging at the University is critical; he urged the Advisory Board to seek internal and external financial support for, at minimum, two named professorships.

Eugene Lehrmann, Past AARP President, made a compelling case for creating a permanent Institute on Aging scholarship fund to support five graduate students in gerontology or geriatrics each year. He proposed a goal of \$1.5 million for the fund. Building a world-class program in aging, he said, requires attracting outstanding faculty and students.

ADVISORY BOARD CONT...

James Sykes, Past Chair of the National Council on the Aging and an Associate Director of the Institute, offered a futuristic view of what an effective Institute on Aging would provide, beyond the campus. He described the Institute as a resource center capable of providing diverse services to professionals and citizens seeking ways to deal with rapidly aging populations throughout the state and nation.

Interim Director, Carol Ryff, spoke of Wisconsin's strengths for building a premier aging program. The number and quality of the University's longitudinal databases are a "national resource," she said. Highly significant multi-disciplinary research conducted by Institute affiliates is evidence that involving various disciplines is not only productive but also essential for valid investigations into aging and longevity.

UW Foundation official, Mark Lefebvre, outlined HealthStar—a major initiative of the Medical School and the Foundation. HealthStar promises substantial new resources to attract outstanding faculty and students and to expand Institute offerings in research, education, clinical practice and service. \$50 million has been set as HealthStar's goal for program development throughout the Medical School of which the Institute on Aging is an integral part.

Action Plan: Year 2000 Objectives

The Advisory Board set the following objectives "by the year 2000:"

*To develop resources for two endowed chairs and two named professorships in gerontology and geriatrics.

*To establish a fund with sufficient resources to support five fellowships per year for highly qualified persons pursuing careers in gerontology.

*To create a new initiatives fund with resources to enable the Institute to encourage faculty development, retain qualified investigators between grants, and to support special events and publications important to maintaining high visibility for aging programs.

In addition, Board members agreed to work with the Institute's Steering Committee to plan and execute appropriate activities and publications for the Institute's 25th anniversary in 1998.

NINTH ANNUAL COLLOQUIUM ON AGING

The Institute on Aging's 9th Annual Colloquium on Aging was held on Thursday and Friday, April 17 & 18. Eugene Lehrmann spoke at the dinner lecture on Thursday night at the University Club. The topic of his lecture was "Aging in America." Mr. Lehrmann has had a long and distinguished career as a teacher, as an administrator for education programs and as an advocate for the elderly. He served as the National President of AARP in 1995 and continues to serve on the AARP Executive Committee and Board Financial Committee, as a member of the National Legislative Council, and as chair of the AARP Andrus Foundation Board of Trustees. He is also the Vice-President of the Wisconsin Board of Long-Term Care and was appointed to the Federal Reserve Board's Consumer Advisory Council in 1995.

The Thursday night dinner lecture also included the presentation of the New Investigator Awards. **Diane Shinberg**, a research assistant and doctoral student in Sociology, was awarded the New Investigator Award for excellence in Social/Behavioral Aging Research. Her research was directed by Professor Robert Hauser of the Sociology Department and Professor Nadine Marks of the Child & Family Studies Department. **Maureen Ripple**, a postdoctoral trainee at the Institute on Aging, was awarded the New Investigator Award for excellence in Biomedical Aging Research. Her research was directed by Professor Richard Weindruch of the Department of Medicine. Both recipients were awarded a certificate and a monetary award of \$250.

Friday's Colloquium included the Emeritus Professor Luncheon and Lecture with Herbert M. Howe speaking on "The Guinea Pig Roars: Medical Misadventures of a Family since the Revolution." Dr. Howe is the distinguished Emeritus Chair of the Department of Hebrew and Semitic Studies, a highly respected scholar and teacher in the Integrated Liberal Studies department for many years, and a member of the Madison and University community for more than fifty years.

Also included in the Colloquium were presentations of a wide variety of recent aging studies conducted by faculty, staff, and students from the University of Wisconsin-Madison. Dr. Joseph Kennitz of the Primate Center led a panel discussion entitled "Nutrition and Aging in Rhesus Monkeys" in addition to the four papers and eight poster presentations.

Both the dinner lecture and the Colloquium were well attended again this year. About 65 people attended the Thursday night dinner lecture and about 90 people attended the Emeritus Professor Luncheon and Lecture.

VA GRECC NEWS

Robbins Appointed to National Committee

Dr. JoAnne Robbins has been appointed to the Aging and Geriatric Disorders Medical Research Advisory Group (MRAG) by Dr. John Feusner, Chief Research and Development Officer for the Department of Veterans Affairs. Paul Hoffman, Director of Medical Research Service, conceived the establishment of MRAGs in nine areas, one of which is Aging & Geriatric Disorders, to analyze the Medical Research portfolio and to provide advice to him on a variety of policy issues. He will involve senior investigators, including Dr. Robbins, in the decision-making process at VA Headquarters. Specifically, the MRAGs will conduct regular portfolio review and analysis, suggest new areas of investigation to be undertaken by VA investigators, advise the Director, Medical Research Service, on specific needs for clinician and non-clinician Ph.D. investigators within their areas of expertise, and prioritize merit review proposals at the funding margin based on relevance and portfolio needs. The MRAGs will impact virtually every program administered by the Medical Research Service.

UCEA, Student Achievement Award

Diane Bright, social work graduate student, has been named the outstanding nontraditional degree student in the United States by the University Continuing Education Association (UCEA). She was honored for her achievements at an awards ceremony at UCEA's 82nd Annual Conference in Louisville, Kentucky in April of this year. Ms. Bright is currently completing field work at the Madison Veterans Hospital in the Geriatric Evaluation and Management Program which is a clinical program within the Geriatric Research, Education, and Clinical Center. She will graduate in May with a Master of Science in Social Work from the University of Wisconsin-Madison.

VA GRECC/IOA AFFILIATE RESEARCH

AGING

Unlocking the Secrets of Fewer Calories Dr. Brian Goodman

Eating nutritionally well-balanced meals containing about 30% fewer calories has consistently been shown to prolong life span and prevent development of age-related diseases in rats.

Dr. Brian Goodman has adapted special computer programs to imitate how this works. He found that caloric restriction helps monkeys in the same way that tune-ups help car engines: both make the system run more efficiently. In monkeys, this occurs because fewer calories cause the digestive process that turns food into blood sugar (called metabolism) to adjust itself. The calorie-restricted animals are able to maintain blood sugar levels like those of unrestricted animals, even though they have much less sugar in their diets.

Calories, Aging, and Genetic Abnormalities Dr. Thomas Pugh

This project's goal is to identify some of the abnormalities that develop with age in the DNA of animals. DNA is the unit of genetic codes or inherited instructions that form the blueprint for animal development. The study focuses on large pieces of DNA that seem to disappear frequently from cells as animals get older. Researchers will also study tissue sections from monkeys and rats fed a diet that has reduced calories (30% fewer calories) but is nutritionally complete. They will try to find out what effect this diet has on the development of the DNA abnormalities. Such caloric-restricted diets have extended the life span of rats and mice and are now being tested in monkeys.

Lower Calories=Longer Lives Dr. Richard Weindruch

Dr. Richard Weindruch's 20-year research career has focused on the process of aging. This look at aging has studied what happens when calories—the energy content of food—are limited. Dr. Weindruch found that restricting the intake of calories slows aging in mice and rats. He has been investigating two main questions: how does eating foods with fewer calories retard aging and disease in mice and rats, and does it slow down aging in animals closer to humans such as monkeys? The answers to these questions may lead to increases in the normal span of good human health. New evidence suggests that caloric restriction may slow aging by reducing damage to tissues.

ALZHEIMER'S DISEASE

Eating and Alzheimer's: What Caregivers Say Dr. Beverly Priefer

A major goal in caring for individuals with Alzheimer's disease is to keep them well-nourished. To help identify eating problems, a questionnaire was sent to caregivers identified by the local chapter of the Alzheimer's Association. Caregivers who answered and returned the questionnaire documented a number of eating problems. Almost half of the demented persons being cared for had lost weight in the previous three months and needed some help to eat each meal. About one-quarter of these persons always used one or more utensils

VA GRECC/IOA AFFILIATE RESEARCH CONT....

incorrectly and choked at least weekly. Results were presented at Gerontological Society of America meetings in Washington, DC in 1996.

DEMENTIA

Dementia's Effect on Eating Ability Dr. Beverly Priefer

Reviews are taking place to assess the eating ability of two groups of people suffering from dementia. One group is patients who were admitted to a VA medical or surgical ward in 1995. The other group consists of residents who are in assisted living facilities owned by Elder Care Concepts, Inc. Medical records are being studied to look for signs of weight loss and difficulty in eating. Researchers hope to find out if persons with different types of dementia are at greater risk than others for not getting enough nutrition and for being dependent on others to help them eat.

HORMONES

Patterns of Stress Hormone in Blood Dr. Molly Carnes

Combat veterans often suffer from depression, anxiety, alcoholism, and post-traumatic stress disorder. These disorders all involve malfunction of the endocrine glands and hormones or chemical messages they produce. One such gland stimulates the body's "fight or flight" response to stress by making the hormone, ACTH. ACTH is released in regular and irregular bursts, a process Dr. Molly Carnes has been studying for over ten years. Recently, she discovered in rats that destroying the brain site that regulates ACTH does not stop ACTH release. It does, however, alter the timing and magnitude of ACTH made in response to a physical stress similar to dehydration. Future studies of these and other chemical signals are needed to find ways to prevent stress illnesses.

OSTEOPOROSIS

Osteoporosis Clinic Started Dr. Molly Carnes

Osteoporosis is a crippling disease leading to brittle, easily broken bones. It afflicts 25 million Americans and causes 1.5 million fractures annually. While twice as common in women, this disease affects men, too. Men who have smoked, consumed a lot of alcohol, taken steroids such as prednisone, or have mobility problems due to any chronic illness are especially at risk.

The Madison VA Hospital has begun an Osteoporosis Clinic. The Clinic offers both men and women veterans a complete medical check-up, nutritional exam, on-site measure of bone mineral thickness or density, and physical therapy recommendations tailored to prevention and treatment of osteoporosis. In addition, knowledgeable physicians and pharmacists provide management ideas and information about the disease.

PROSTATE CANCER

Getting Rid of Hot Flashes Dr. Addi Gudmundsson

Hot flashes occur often in men who undergo some of the treatments for prostate cancer. These hot flashes are like those that women have during menopause and may substantially affect quality of life. A VA research project has now linked their cause to instability in the brain center that serves as a thermostat for body temperature. The study was done on veterans who had hot flashes after surgical removal of their testes as a treatment for prostate cancer. The study found that a specific temperature regulator—a protein called Interleukin-6 (IL-6)- increased after hot flashes began. This suggests that drugs to stop IL-6 release might eliminate the hot flashes. Such drugs are currently being developed.

Harnessing Nature to Aid Prostate Cancer Dr. George Wilding

More than 350,000 American men will be diagnosed with prostate cancer in 1997, and 42,000 will die from this disease. Although hormone treatments may work for a short time, no effective treatment exists after hormone therapy fails. Now, natural products derived from lavender oil, Vitamin D, and parts of a plant in India are being tested in the Prostate Cancer Clinic of the Madison Geriatric Research, Education, and Clinical Center (GRECC). These studies are examining use of natural products, which differ from chemotherapy, against advanced prostate cancer.

SWALLOWING

Swallowing Muscles Change With Age Dr. JoAnne Robbins

Swallowing difficulties or dysphagia are common in 20% of patients in VA hospitals and up to half of patients in nursing homes. To prevent related complications such as dehydration, malnutrition, and pneumonia, Dr. JoAnne Robbins, Associate Director of Research for the Madison Geriatric Research, Education, and Clinical Center (GRECC), has been studying how swallowing takes place in older persons. She has found that speed and strength of head and neck muscles begin to decline at about age 45. By age 65, even healthy persons are

VA GRECC/IOA AFFILIATE RESEARCH CONT....

more at risk to choke when they swallow. Understanding how mouth and throat muscles change with age sets the stage for ways to help elderly people swallow more easily and safely.

A National Study Comparing Swallowing Treatments

Dr. JoAnne Robbins

Liquid aspiration (choking) is common among patients with dementia and Parkinson's disease. The aspiration may be minimized or eliminated by feeding suggestions that direct the food down the "right pipe" instead of into the lungs. Two frequently given suggestions—a simple chin tuck or thickening thin liquid to nectar or honey consistency—have never been evaluated in terms of their effectiveness, yet both may improve the ability to drink liquids.

A large national research project involving 28 hospitals (including 5 VA hospitals) and 100 nursing homes is underway to compare effectiveness of these two techniques in preventing pneumonia and increasing nutrition and water intake. The central laboratory for the project is the Swallowing Research Laboratory at the VA Hospital in Madison.

What Causes Swallowing Problems

Dr. Chandar Singaram

Swallowing disorders are common among elderly VA patients. Several projects in Dr. Chandar Singaram's laboratory aim to understand better what causes these disorders. One study found that patients with difficulty swallowing had reduced numbers of a sensory nerve in their esophagus, the tube carrying food into the stomach. Other research projects involve a disease called achalasia. People with this disease can't swallow food because the valve at the top of their stomach does not relax after swallowing to allow food to pass. Dr. Singaram has found the reason for this—the nerves that should tell the valve to relax are missing! This ongoing study is focused on determining exactly why this happens and what new treatments can be used.

WALKING ABILITY

Decline in Walking During Hospitalization

Dr. Jane Mahoney

VA researchers have gathered concrete evidence from several different hospitals that older adults are at high risk for becoming unable to walk alone when they become hospitalized.

The investigators reported at a recent meeting of the Gerontological Society of America that one in eight hospitalized older adults lost the ability to walk independently. One-fourth of these did not regain walking ability three months later. This research will help doctors to identify older adults who are at risk and guide them through exercise therapy to prevent loss of walking ability.

Falls After Hospital Discharge

Dr. Jane Mahoney

Older patients who experience decline in walking ability during hospitalization may also find that this loss of mobility increases their risk for falls after discharge. VA researchers found that many older patients fall in the month after discharge. Patients who require home nursing services after discharge are at highest risk for falling. Because such falls often result in rehospitalization due to injuries, a study has been started to see if older adults can re-strengthen their leg muscles after a hospitalization. After hospital discharge, patients will do intensive exercises at home for 6 weeks. Exercises are leg lifts with ankle weights. Researchers hope these exercises improve balance, strength, and the ability to do daily activities like bathing and climbing stairs.

WISCONSIN STATE BOARD ON AGING AND LONG TERM CARE

Expanding Advocacy in Nursing Homes:

The Volunteer Ombudsman Project

Interested in making a difference to the lives of nursing home residents??? The State of Wisconsin Board on Aging and Long Term Care is recruiting volunteers who are interested in the problems of aging persons. Volunteer Ombudsmen visit an assigned nursing home near their home on a weekly basis. During these visits, Volunteers observe and report nursing home residents' living conditions and work with nursing home staff to resolve the residents' concerns or complaints. Also, volunteers refer and network residents to regional ombudsmen and to other sources of information on services in the long term care system.

Thorough training is provided along with periodic in-services with fellow volunteers. A minimum of 6 months volunteer time working 2-1/2 to 3 hours per week is requested. However, you schedule your own hours - we are flexible. **For more information call Bonny Klotz at 1-800-242-1060 or (608) 261-9393.**

NEW INVESTIGATOR AWARD RECIPIENTS FOR 1997

Biomedical Research Award

Maureen Ripple

Department of Medicine

Androgens alter the prooxidant-antioxidant balance of human prostate carcinoma cells.

Prostate cancer is a disease associated with aging. Also commonly associated with increasing age is a shift in the prooxidant-antioxidant balance of many tissues toward a more oxidative state. It was hypothesized that androgen exposure, which has long been associated with the development of prostate cancer, is a means by which the prooxidant-antioxidant balance of prostate cells is altered. Using established prostate carcinoma cell lines, Ripple studied the effects of androgens on various parameters of oxidative state (e.g. generation of hydrogen peroxide and hydroxyl radical, lipid peroxidation, carbonyl formation, and oxygen consumption) and antioxidant defense mechanisms (e.g. the glutathione system and catalase). Androgen-responsive LNCaP, and androgen-independent, DU145, prostate carcinoma cell lines were exposed to 5 α -dihydrotestosterone (DHT) or to the synthetic androgen, R1881. It was found that physiological concentrations of DHT and R1881 are capable of inducing oxidative stress in LNCaP cells as measured by an increase in hydrogen peroxide and hydroxyl radical formation and in lipid peroxidation and carbonyl levels, both indicators of oxidative damage. DHT and R1881 have no effect on oxidative stress measurements of androgen-independent DU145 cells. LNCaP mitochondrial activity measured by tetrazolium reduction is significantly elevated above control levels by 0.1-1.0nM DHT and by 0.5-1.0nM R1881 ($p < 0.001$). Oxygen consumption and catalase activity are increased 60 and 40% ($p < 0.03$, $p < 0.01$) above control in LNCaP cells treated with 1nM R1881. R1881 also causes a decrease in intracellular glutathione concentrations and an increase in γ -glutamyl transpeptidase activity in LNCaP cells. Ascorbic acid is capable of reducing R1881-associated oxidative stress and blocking the increase in γ -glutamyl transpeptidase activity. These data suggest physiological levels of androgens are capable of increasing oxidative stress in androgen-responsive prostate carcinoma cells which may be due in part to increased mitochondrial activity. Androgens also alter glutathione levels and the activity of certain detoxification enzymes important for maintenance of the cellular prooxidant-antioxidant balance.

M. Ripple, W. Henry, R. Rago, R. Weindruch, and G. Wilding. Department of Medicine, Environmental Toxicology Center, Institute on Aging, UWCCC and Veteran's Administration Hospital, Madison, WI.

Social/Behavioral Award

Diane Shinberg

Sociology & Center for Demography and Ecology

Sex and Sickness: Gender Gaps in Health at Midlife

Gender differences and similarities in health at midlife were evaluated using an array of nine self-reported health outcomes from the Wisconsin Longitudinal Study. Previous findings that women experience higher levels of physical illness and disability days were confirmed in this sample of non-Hispanic white 53 year olds. Women had more physical symptoms, more total illnesses, more days in bed, and more work-limiting conditions than men. Also confirming previous findings, men in this sample had more cardiovascular problems than women. There were no differences by gender in health care utilization as captured by any hospitalizations in this sample. Women appeared to expect more specific complications in their health for the same reported levels of general health as men. Even though women reported more physical symptoms and illnesses than men, they were no less optimistic than men in evaluating their health overall. In multivariate analyses various behavioral, demographic, economic and social characteristics were controlled to determine whether such factors masked or accentuated gender differences and similarities in health. Models that included controls for socioeconomic factors measured across the life course exhibited the largest and most consistent impact on gender gaps in health. Net of socioeconomic factors, women's health improved relative to men's. While controlling factors related to social integration (such as marital status, marital quality, and friendships) made little difference in the relationship of gender to health, controlling contemporary health behaviors favored men's health relative to women's and influenced the gender gaps in health in the opposite direction from controlling socioeconomic factors.

*Research for this paper was supported by the National Institute on Aging's FIRST Grant Award (R29AG12731) to Nadine F. Marks and benefited from facilities provided by a center grant from the National Institute on Child and Human Development (P30-HD058760) to the Center for Demography and Ecology (CDE) of the University of Wisconsin-Madison. The Wisconsin Longitudinal Study (WLS) 1992-93 has its principle support from the National Institute on Aging (AG9775), with supplemental support from the National Science Foundation (SES-9023082), the John D. and Catherine T. MacArthur Foundation Research Network on Successful Midlife Development, the Spencer Foundation, and the Graduate School of the University of Wisconsin-Madison. The WLS was designed and carried out at the Institute on Aging and CDE at the University of Wisconsin-Madison under the direction of Robert M. Hauser.

VITAMIN K SUPPLEMENTATION STUDY

It has recently been suggested that unrecognized vitamin K insufficiency may be common in older individuals. There is conflicting evidence that this may be associated with the development of osteoporosis, a common bone weakening disease seen with advancing age. To further evaluate this possibility, UW IOA investigator, Neil Binkley, M.D., in collaboration with John Suttie, Ph.D., Departments of Biochemistry and Nutrition, has begun a study to assess the prevalence of vitamin K insufficiency in a normal North American Population.

While it has classically been accepted that inadequate vitamin K supply leads to bleeding, as documented by prolongation of the prothrombin time, it is now appreciated that this is a manifestation of severe deficiency. Other measures, such as the serum concentration of a bone protein, undercarboxylated osteocalcin, are much more sensitive markers of an individual's vitamin K status. Using this measurement, investigators in Europe have reported that the majority of postmenopausal women are deficient in vitamin K, and furthermore, that vitamin K supplementation may reduce urinary calcium loss. Consistent with this, vitamin K insufficiency may also be associated with an increased risk for hip fracture. Additionally, some reports indicate that use of anticoagulant treatment, such as warfarin, a vitamin K antagonist, is associated with lower bone mass. If these reports are confirmed, vitamin K supplementation could become part of standard osteoporosis prevention and treatment strategies.

Drs. Binkley and Suttie have designed their study to be the base from which to further assess the role of vitamin K in bone loss. Their study will document the prevalence of vitamin K inadequacy in healthy normal adults by measuring parameters of vitamin K adequacy before and following one and two weeks of vitamin K supplementation. Volunteers are comprised of young (age 18-30) and older (age 65-80) men and women residing in Madison and surrounding communities. This study is being conducted at the Institute on Aging in the UW Medical Sciences Center and the Geriatrics Section Research Offices at 2870 University Avenue and is being coordinated by Ms. Diane Krueger. If you would like more information, or are interested in participating in this study, please contact Ms. Krueger at 608-265-6410.

WISCONSIN SYMPOSIUM ON EMOTION

The Third Annual Wisconsin Symposium on Emotion titled "Emotion, Social Relationships and Health," was held May 2-3, 1997 at the Wisconsin Center. This well attended event, sponsored by Kemper K. Knapp Bequest, Institute on Aging, Department of Psychology and Department of Psychiatry, was directed by Dr. Carol Ryff, Department of Psychology and Institute on Aging.

Friday and Saturday's Symposium included the following topics:

"Marital and Parent-Child Relationships and Child and Adult Health: A Theory and Some Preliminary Data," Dr. John M. Gottman, Professor of Psychology, University of Washington, Seattle, Washington.

"Relationship Experiences and Emotional Well-Being," Dr. Harry Reis, Professor of Psychology, University of Rochester, Rochester, New York.

"Having a Good Cry: Group Expression of Emotion and Health Outcome Among Breast Cancer Patients," Dr. David Spiegel, Professor of Psychiatry and Behavioral Sciences, Stanford University, Stanford, California.

"Elective Affinities and Uninvited Agonies: Mapping Emotion with Significant Others Onto Health," Dr. Carol Ryff, Professor of Psychology, University of Wisconsin, Madison Wisconsin & **Dr. Burton Singer**, Professor of Demography and Public Affairs, Princeton University, Princeton, New Jersey.

"You Gotta Have Friends!: Social Conflicts, Social Ties and Susceptibility to Infection," Dr. Sheldon Cohen, Professor of Psychology, Carnegie Mellon University, Pittsburgh, Pennsylvania.

"How Do Others Get Under Our Skin?: Social Relations and Health," Dr. Teresa Seeman, Associate Professor, School of Gerontology, University of Southern California, Los Angeles, California.

"Vulnerable Points in the Life Span When Stressors Can Impact Immunity," Dr. Christopher Coe, Professor of Psychology, University of Wisconsin, Madison Wisconsin.

An edited volume will follow from the conference.

NEWS ON GRANTS

Pending Proposals:

Kameron Maxwell, Richard Weindruch, Professor, Medicine, **"The Development of Novel Compounds to Reduce the Mitochondrial Free Radical Production and Aging."**

Ze Huang, Assistant Scientist, Primate Center, American Federation for Aging Research, **"Effects of Aging and Dietary Restriction on Insulin Receptor mRNA Splicing in Liver of Rhesus Monkeys."**

Gayle Love, Assistant Scientist, Institute on Aging, NIH, **"Identifying the Emotions of Resilience."**

Robert Auerbach, Professor, Zoology, NIH, **"Yolk Sac Stem Cell Differentiation in vitro and in vivo."**

Keith Meyer, Assistant Professor, Medicine; **Robert Auerbach**, CO-PI, Professor, Zoology, Beryllium Industry Scientific Advisory Committee. **"A Mouse Model of Beryllium Disease."**

ANNOUNCEMENTS

Fall Course Offering in Aging Betty R. Hasselkus, Associate Professor

The course **Therapeutic Science 750: Research Issues in Aging and Health** will be offered in the fall of 1997. This course is appropriate for master's level students or beginning doctoral students; it provides both an overview of research issues in aging and health and an opportunity for each student to review literature in depth in an individual area of interest. This course is an approved course for the Specialist in Aging Certificate from the Institute on Aging.

INSTITUTE ON AGING WEBSITE

To access the IOA home page:

[HTTP://WWW.SSC.WISC.EDU/AGING](http://www.ssc.wisc.edu/aging)

Articles for Newsletter

If you wish to submit an article or other information for this newsletter, please contact Michael Hunt, Kay Smith, or Kathy Page at 262-1818.

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