“Five-Year Geriatrics Promotion Plan to Support Healthy Longevity”
by the Japan Geriatrics Society
"Five-Year Plan to Promote Geriatrics in Support of Achieving Healthy Longevity" by the Japan Geriatrics Society

Introduction: To members of the Japan Geriatrics Society

The public health insurance crisis, the drastic increase in poverty-stricken older people, and many complicated social issues, together with the problems in medical care, in the acute and chronic phases in the field of medical care for older people with low scientific evidence, are being exhibited in Japan, which is now the country with the highest life expectancy. The Japan Geriatrics Society is being asked regarding the sort of blueprints we draw upon to combat these challenges, and this time, we have formed a working group to establish a "Five-Year Plan to Promote Geriatrics in Support of Achieving Healthy Longevity," in order to clarify how our Geriatrics Society would specifically respond to these challenges.

We established the following five themes: "I. Dissemination and education of geriatrics and medical care for older people"; "II. Achievement of healthy longevity through prevention of frailty"; "III. Effective early intervention and promotion of social strategies for dementia"; "IV. Promotion of research on definition of older people and call for national debate"; and "V. Fostering and support of basic aging research." The first theme is an approach to proactively show, in a visible manner, how geriatrics should be treated in society by acknowledging the situation in which the concept of geriatrics that responds to older people in a comprehensive and scientific manner currently in Japan is not well recognized in society. Frailty in the second theme and dementia in the third theme are the fields with the most characteristic research and medical treatment in the geriatrics field, so we put together the activities that the Geriatrics Society should incorporate, as academia, while nationwide efforts are carried out. While the content concerning the definition of older people in the fourth theme relates to the recommendation jointly announced with The Japan Gerontological Society in January 2017, stating the definition of older people as 75 years old or older, we regard this recommendation as an opportunity to connect academic society and the nation. The reason why we have chosen this topic as a theme is to express that the academic society feels the need to act jointly with the people with a single purpose, in order to solve various problems in our super aged society, and try to show, from the standpoint of the academic society, the measures to consider, together with the people, in terms of how to specifically implement the issues from 1 to 3 in society. The fifth theme involves revitalizing basic research to support such activities of the academic
society, in addition to presenting measures to better solve the current problems. Academic efforts are also the original mission of the academic society.

Although the root of these five themes is the concept of aiming for a society in which Japanese citizens can pursue healthy longevity, we are also aware that the results will provide great guidance on how to deal with the wave of rapid aging in the world, because Japan is the country that has achieved the longest life expectancy. Of course, it is a fact that Japanese geriatrics is not only on the cutting edge of the world. We will establish an activity plan keeping in mind internationalization in each of the five themes, with the aim of contributing to the world, over the long term, via healthcare systems including geriatrics in Japan.

In this 5-year plan, we analyze the <present situation> from various angles in these five themes, to specifically show the <action plan> for each. The plan is not meant to solve all the issues in five years, but rather to clarify the goal of achievement status in 5 years within the academic society, by setting specific annual targets in line with individual activity plans, and we will take steps to divide them into those to promote the achievement of the goal and those that require modification in setting the goal. We hope that all members of the Japan Geriatrics Society will share this program so we can work together to achieve the plan.

Although this plan is an activity plan as the Japan Geriatrics Society, there are also many that aim for cooperation with related organizations and we need your support and cooperation. Furthermore, the plan contains a lot of content on the government's health and longevity policy and individual health problems. We would like the administration, mass media, everyone in educational circles, from primary to higher education, and even every citizen to understand the content of the 5-year plan that the Japan Geriatrics Society has set as a goal, with certain measures possibly being required to obtain support from the relevant parties in achieving this plan, depending on the opinions and content thereof. We will indicate concrete milestones for achieving the plan as soon as possible this time, while sharing this 5-year plan with all of our members to receive specific opinions. After going through this process, we will announce the 5-year plan for the government, related organizations, the media and the people, and strive to lead in the proactive awareness of geriatrics.

February 1, 2018

The Japan Geriatrics Society
Executive Director: Hiromi Rakugi
Vice Executive Directors: Masahiro Akishita, Hidenori Arai
Working Group “Five-Year Plan to Promote Geriatrics in Support to Achieve Healthy Longevity“
Representative: Hidenori Arai
Committee Members: Kaoruko Aita, Katsuya Iijima, Masato Eto, Satoru Ebihara, Takao Suzuki, Hajime Takechi
Five-Year Plan to Promote Geriatrics in Support of Achieving Healthy Longevity
by the Japan Geriatrics Society

＜Table of contents＞
I. Dissemination and education on geriatrics and medical care for older people
   1) Promotion of medical treatment and care to realize the final stages of a rich life
      A. Dissemination and education of the importance of geriatrics
      B. Promotion of comprehensive medical care for older people
      C. Promotion of home medical care
      D. Formation of social consensus, its education and promotion of educational activities, concerning end-of-life care, advance care planning, and education on life and death
   2) Formation of the bases for medical care, research and education of geriatrics, including personnel training for this purpose
      A. Training geriatric specialists who will be responsible for future geriatrics and medical care for older people
      B. Establishment of a geriatric education system, connecting universities across the country, based on the medical education models and core curriculums
      C. Standardization of medical training for older people on a national scale along with activities based thereon
      D. Establishment of a base for translational infrastructure, including "education, research, and clinical practice" in each local branch unit (establishment of a geriatrics center)
      E. Training and utilization of female members (doctors, nurses, medical staff, and researchers)
   3) Preparation of guidelines on geriatrics and strengthening collaborations with other academic societies and organizations across fields
      A. Dissemination and education of the guidelines of safe drug therapy
      B. Collaborative planning and co-hosting of other academic societies and organizations and symposiums at academic meetings
      C. Preparation of clinical guidelines and treatment guidelines for older people, in collaboration with other academic societies and organizations
      D. Establishment of a qualification and certification system, in collaboration with societies of medical staff members related to the Japan Geriatrics Society
   4) Strengthen international leadership in the field of geriatrics
      A. Training young geriatricians focusing on Asia
      B. Strengthening research networks with Asia and the West
C. Prepare guidelines for sarcopenia, frailty, etc. in Asia
D. Establishment of English sessions at academic meetings and promotion of overseas presentations
E. Invite the International Association of Gerontology and Geriatrics (IAGG) and the Asian and Oceania IAGG

II. Achievement of healthy longevity through prevention of frailty
   1) Establishment of evidence construction and guidelines on frailty & independent nursing care support
   2) Dissemination of concept of frailty to actual clinical practice
   3) Implementation of prevention and countermeasures against frailty

III. Effective early intervention and promotion of social strategies for dementia
   1) Contribution to efforts on dementia prevention
   2) Deepen the societal understanding, as a whole, of dementia and contribute to participating in society among people and families with dementia
   3) Promotion of research on dementia support, using ICT, IoT, robot technology, AI, etc.

IV. Promotion of research on the definition of older people and call for national debate
   1) Revitalization of dialogue with citizens on the definition of older people
   2) Implementation of questionnaire surveys for citizens, in cooperation with the Cabinet Office

V. Fostering and support of basic aging research
   1) Establishment of locations to exchange information with various research institutions, in order to develop basic aging research
   2) Strengthen cooperation with the Japan Society for Biomedical Gerontology
   3) Lobbying activities for expansion of research areas
“Five-Year Geriatrics Promotion Plan to Support Healthy Longevity”
by the Japan Geriatrics Society

With the longest lifespan in the world, Japan is facing various issues with care for old people. The country is dealing with complex societal problems including a crisis in universal health insurance coverage and a massive increase in the number of impoverished older people. The conditions surrounding these issues are changing significantly. To address the next five years, we drafted a 5-Year Geriatrics Promotion Plan to Support Healthy Longevity, taking a long-term view to consider what kinds of specific support the Japan Geriatrics Society can provide.

The Japan Geriatrics Society

President: Hiromi Rakugi
Vice President: Hidenori Arai, Masahiro Akishita
Chairman: Hidenori Arai
Committee Members: Kaoruko Aita, Satoru Ebihara, Masato Eto, Katsuya Iijima, Takao Suzuki, Hajime Takechi

“Five-Year Geriatrics Promotion Plan to Support Healthy Longevity”
The Japan Geriatrics Society

I. Disseminate the implication of geriatrics and medical care for older people
   - The concept of geriatrics that provides comprehensive and evidence-based support for older people is not well understood in Japan.
   - Assertively show people how geriatrics and older people care work in a visualized manner.

II. Achieve healthy longevity through prevention of frailty
   - The most distinctive areas of research and medical care in the field of geriatrics.
   - While various activities are performed across the nation, we will publicize the goals of the Society’s activities as an academic group.

III. Effective early intervention and promotion of social strategies for dementia
   - Create opportunities for our society to connect with people by proposing that the older population be defined as those 75 years and older.
   - In order to solve various issues with our super-aging society, our society must come together with the people. To do this, we will propose the strategies and direction for the national discussion from the viewpoint of our society.

IV. Promote research on the definition of older people and call for national discussion
   - Create a basis for the society’s activities from I to IV.
   - Show the strategies to put core research and interdisciplinary studies into action and our society’s role in their implementation.

V. Fostering and support of basic aging research
“Five-Year Plan to Promote Geriatrics in Support of Achieving Healthy Longevity”

the Japan Geriatrics Society

I Disseminate the implication of geriatrics and medical care for older people

- Promote medical treatment and care that will achieve a fulfilling end of life.
- Create hubs for geriatric care, research and education, and train capable personnel to realize these benchmarks.
- Create geriatric guidelines. Strengthen partnerships with other multidisciplinary academic organizations and groups.
- Strengthen our international leadership in the field of geriatrics. Take measures to prevent frailty in order to achieve healthy longevity.

II Achieve healthy longevity through prevention of frailty

- Accumulate evidence on frailty and support for independence and disability prevention, then update the guidelines.
- Spread awareness on the concept of frailty within clinical practices.
- Put frailty prevention and countermeasures into action.

III Effective early intervention and promotion of social strategies for dementia

- Contribute to dementia prevention initiatives.
- Deepen the understanding of dementia throughout society. Contribute by participating in community activities for families and individuals dealing with dementia.
- Promote research into dementia support using ICT, IoT, robotic technology, and AI.

IV Promote research on the definition of older people and call for national discussion

- Spark a dialog between people regarding the definition of older people.
- Partner with the Cabinet Office to survey people.

V Fostering and support of basic aging research

- Establish information exchange centers at various research bodies in order to expand basic research on aging.
- Strengthen partnership with the Japan Society for Biomedical Gerontology.
- Conduct lobbying activities to expand the research field.

Dissemination and education on geriatrics and medical care for older people

1) Promotion of medical treatment and care to realize the final stages of a rich life

A Dissemination and awareness raising of geriatrics

- Awareness raising of geriatrics among all primary care physicians.
- Full awareness of geriatrics among medical students and junior / senior residents.
- Awareness of the role of geriatrics among all health care professionals.
- Awareness of the role of geriatrics in the government.
- Awareness of the role of geriatrics among people and the mass media.

B Promotion of comprehensive medical care for older people

- Clarify the role of geriatricians.
- Disseminate awareness of available outpatient assessments (CGA7, frailty check, etc.).
- Accumulation of evidence on comprehensive medical care.
- Establish incentives for geriatric care, including for frailty care teams, sarcopenia treatment teams, etc.
Dissemination and education on geriatrics and medical care for older people

1) Promotion of medical treatment and care to realize the final stages of a rich life

**Promotion of home medical care**

- Complete and announce service guidelines for home medical care for older people within the 2018 fiscal year.
- Publicize the guidelines with the Japanese Academy of Home Care Physicians and the National Center for Geriatrics and Gerontology.
- Promote home medical care with the National Home Medical Care Conference and the Japan Home Health Care Alliance.
- Create an educational model for home medical care at university medical schools and across local regions.

### 5-Year Plan Milestones

<table>
<thead>
<tr>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Making guidelines for home medical care for older people</td>
<td></td>
<td></td>
<td></td>
<td>Academic symposiums and workshops for older people care</td>
</tr>
<tr>
<td>Making guidelines and its dissemination</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partner with the National In-home Medical Care Conference and the Japan Home Health Care Alliance to promote home medical care</td>
<td></td>
<td>Publicize and practice in-home medical care in partnership with in-home medical care organizations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create an educational model on home medical care at medical schools and each local area</td>
<td>Implement and analyze surveys.</td>
<td>Create educational models.</td>
<td></td>
<td>Conduct trial runs of educational models</td>
</tr>
</tbody>
</table>

Formation of social consensus, dissemination and awareness raising of end-of-life care, advance care planning, and thanatology

**Background and Issues**

Our super aging society is reaching a period of high mortality. Death does not mark a failure of medicine but rather it emphasizes the importance of quality of death (QOD). At present, there is doubt as to whether the patient and his/her family are receiving adequate hospice care and being provided with a respectable death. A decision-making process needs to be developed that first respects the wishes of the patient.

**5-Year Plan Moving Forward**

- Establish definitions, proposals, and guides for advance care planning (ACP).
- Plan to educate how to provide end of life care (EOLC), including ACP, for medical staff and citizens.
- Understand conditions and problems relating to EOLC for non-cancer patients. Educate in cooperation with partner associations and organizations.
Dissemination and awareness raising on geriatrics and medical care for older people

1) Promotion of medical treatment and care to realize the final stages of a rich life

Formation of social consensus, dissemination and awareness raising of end-of-life care, advance care planning, and thanatology

<table>
<thead>
<tr>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) ACP initiatives</td>
<td>1) Define ACP. 2) Start creating proposals based on ACP definitions.</td>
<td>Complete ACP proposals.</td>
<td>ACP dissemination (together with EOLC).</td>
<td></td>
</tr>
<tr>
<td>2) Dissemination and awareness raising of EOLC and clinical thanatology</td>
<td>EOL educational seminars for citizens and medical professionals (collaborated with the University of Tokyo, Death &amp; Life Studies and Practical Ethics Center).</td>
<td>Plan yearly EOLC training as an academic conference.</td>
<td>Collaboration with other medical organizations including Japan Medical Association.</td>
<td></td>
</tr>
<tr>
<td>3) Ideal quality of EOLC among non-cancer patients</td>
<td>Understand problems with on-the-ground conditions and medical treatment (create a working group).</td>
<td>Create a joint plan (including considerations to create guidelines) with partner associations (organizations) (Japanese Society for Palliative Medicine, Japanese Academy of Home Care Physicians, Japan Medical Association, etc.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2018年6月

Copyright © 一般社団法人日本老年医学会

the Japan Geriatrics Society

“Five-Year Plan to Promote Geriatrics in Support of Achieving Healthy Longevity”

2) Formation of the bases for medical care, research and education of geriatrics, including personnel training for this purpose

A. Train geriatric physicians to contribute to future geriatric medicine and older people care.
   ① Establish a geriatric training program in prefectures nationwide.
   ② Have all university hospitals contribute by establishing independent or partnered facilities with geriatric training programs as part of a new system of medical fields.
   ③ Establish five specialized older people care divisions (geriatric internal medicine, comprehensive older people medical treatment, etc.) at university hospitals and core hospitals.
   ④ Train approximately 100 geriatric physicians per year, aiming for a total of 2,000.

B. Create a geriatric medical education system based on the Model Core Curriculum for Medical Education in partnership with universities across the nation.
   ① Standardize geriatric medical education in university faculties of medicine nationwide.
   ② Aim to establish geriatric medicine courses at universities.

C. Standardization of medical training for older people on a national scale and activities based on it.
   ① Develop and continually revise e-learning curriculums for older people care.
   ② Establish a course structure and accreditation for older people care education as a continuing education program for non-geriatric physicians.

D. Set up a geriatric center at each local area with a transnational unit that includes education, research, and clinical practice.
   ① Conduct a survey on the necessity of centers for gerontology, geriatrics, and dementia (include comparisons with other countries).
   ② In regards to setting up the facilities above, discussions will involve outside experts (Diet members, the MEXT, and the MHLW).

E. Aim to increase the proportion of female members, female geriatric physicians, and female delegates, in addition to expanding activities for female members.
   ① Educate on the usefulness of females with careers in geriatric medicine field.
   ② Learn about the careers of female members (make directory).
   ③ Promote communication among female members.
   ④ Increase activity among female members, specialists, and delegates.
   ⑤ Create activities for female members in the organization.
   ⑥ Set up day-care centers and other facilities at academic meetings and other settings.

2018年6月

Future outlook of past medical fields: Jointly work with geriatric organizations to establish cross-faculty geriatric research centers at universities nationwide

Copyright © 一般社団法人日本老年医学会
Dissemination and education on geriatrics and medical care for older people

1. Dissemination and education on geriatrics and medical care for older people

2. Formation of the bases for medical care, research and education of geriatrics, including personnel training for this purpose

A. Train geriatricians to contribute to future geriatric medicine and older people care.

B. Create a geriatric medical education system based on the Model Core Curriculum for Medical Education in partnership with universities across the nation.

C. Standardize older people care training on a national scale. Carry out activities based on these standards.

D. Set up a geriatric center at each local area that includes education, research, and clinical practice.

E. Expand training and activities for female members

**2018**

- Establish geriatric training programs in prefectures nationwide.
- Increase the allotment of geriatric physicians in core hospitals.
- Train geriatric physicians (100 per year).
- Increase entrants into specialist geriatric medical training programs and geriatric related courses.
- Create a geriatric medicine training course for new medical interns.
- Use the results of these studies to make proposals, take action, and lobby the MEXT.
- Use existing educational resources and e-learning for junior residents and undergraduates (particularly for students dispatched to the countries).
- Conduct lobbying activities (towards Diet members) establishment of geriatric course in medical school.
- Conduct a survey on the necessity of centers for gerontology, geriatrics, and dementia (including comparisons with other countries).
- In regards to setting up the facilities above, discussions will involve outside experts (congress members, the MEXT, and the MHLW).

**2019**

- Carry out a study on the state of geriatric medicine education at university faculties nationwide.
- Study the state of education for universities with geriatric medicine-related courses.
- Study geriatric medicine education abroad.
- Undergraduate web courses and e-learning that work to standardize geriatric medicine curriculum.
- Have periodic discussions with the MEXT and other government agencies.
- Revise the Medical Care Handbook on Health and Longevity.

**2020**

- Create a curriculum based on the handbook.
- Plan to educate using the curriculum.
- Dissemination of elderly person medical care certification system (increase the number of people accredited).
- Conduct a survey on the necessity of centers for gerontology, geriatrics, and dementia (including comparisons with other countries).
- In regards to setting up the facilities above, discussions will involve outside experts (congress members, the MEXT, and the MHLW).

**2021**

- Make a list of female members of each branch.
- Fostering of female leaders by branch.
- Construction of exchange and support system for female member by branch.
- Distribution of female membership list to branch presidents.
- Request branch presidents to appoint female delegates.
- Discover female physicians with careers and familiarization of the specialist physician system and examination.
- Plans for female students and residents at summer seminars.
- Distribution of lists of female members to branch presidents and chairpersons of academic conferences.
- Plans for female students and residents at summer seminars.

**2022**

- Create links to sites for female members in each society/sites that help train women.
- We recommend routinization of childcare system at academic meetings.
- Participation in the gender equality promotion meetings of 13 societies of internal medicine.
- Joint symposium on gender equality with relevant academic societies.
**Dissemination and education on geriatrics and medical care for older people**

1. **Dissemination and enlightenment of older people care (geriatrics), quality improvement to standardization**

   - **Certification by The Japan Geriatrics Society [Certified older people care system]**
     - **Medical Training Committee for Geriatric Care**
       - **Goal**: The goal is to provide many physicians, who are also responsible for older people care, with knowledge and qualifications for older people care (geriatrics).
       - **Steps in certification**: We first establish two types of certified physician system (update every five years)
         - Participation in training sessions (based on the medical care workshop for the older people: details as shown below).
         - Case presentations, and 3) proficiency check tests
       - **Start**: Start from 2018 in order to disseminate certified physicians across the country

   - **Certified integrated community care geriatricians (tentative)**

   - **Older people care workshop (2 days)**

   - **Certified geriatric care facility management physicians**
     - General Practice Workshop for geriatric care facility management physicians
       - 4 days
       - Our goal is the training of management physicians who have greater ability than a certain level as management physicians of geriatric care facilities and can play an active role in the field of geriatric care facilities.
       - Include the contents of the workshop of geriatrics.

   - **Certified older people nutrition therapy physicians**
     - **Older people nutrition therapy workshop (former TNT-Geri workshop)**
       - 2 days
       - Aim to train physicians with comprehensive knowledge and skills necessary for nutritional therapy in order to provide effective and safe nutritional therapy for older people.
       - Learn relatively advanced skills by organizing workshops and classroom lectures.

   - **Certified integrated community care geriatricians (tentative)**
     - Regional comprehensive care workshop (certification training for specialists)
     - Contents are currently under review

---

**Making guidelines on geriatrics and strengthening collaborations with other academic societies and organizations across fields**

- **Dissemination and education of the guidelines of safe drug treatment**
- **Collaborative planning and co-hosting of other academic societies and organizations at academic meetings**
- **Establishment of a qualification and certification system, in collaboration with societies of medical staff members related to the Japan Geriatrics Society**
- **Making clinical guidelines for older people, in collaboration with other academic societies and organizations**

**Example**: Lifestyle-related disease guidelines for the older people (the Japan Diabetes Society, the Japan Society of Hypertension, the Japan Society for the Study of Obesity, and the Japan Atherosclerosis Society)

---

*2018年6月*  
Copyright © 一般社団法人日本老年医学会
Dissemination and education on geriatrics and medical care for older people

Making guidelines on geriatrics and strengthening collaborations with other academic societies and organizations across fields

Cooperation mainly in line with geriatrics education and the viewpoint of establishment of certification

Cooperation mainly based on the making of clinical guidelines and an academic viewpoint

- 2018
- 2020
- 2022

Control and dispatch of the academic knowledge on frailty and sarcopenia

- Maintenance and renewal of clinical guidelines
  - From viewpoints of both evidence and practice
    - Control of evidence: Clinical guidelines
    - Return to the place of practice: Medical practice guide
    - Revise regularly

- Building evidence
  - Research promotion (basic, clinical, large multi-cohort, patient intervention to community intervention, and translational)
  - Systematic review and meta-analysis

- Expansion of human & material resources
  - Training of leaders for the local practice, such as instructors, maintenance of facilities, and creation of educational materials

Extension of practice: Regional prevention and measures at clinical sites

- Dissemination in each local area and expansion of regional activities
  - Increase awareness of frailty
  - Efforts, practice and dissemination of frailty prevention activities

- Collaboration
  - Quality improvement
  - Efficiency improvement

To realize a society with active and healthy longevity

- Extension of a healthy life span, improvement of quality of life, and reduction of health inequalities

Achievement of healthy longevity through prevention of frailty
### Contributing to dementia prevention, and conclusion of the Orange Registry Cooperation Agreement

<table>
<thead>
<tr>
<th>Year</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>Collection of lifestyle-related disease and dementia information</td>
<td>Preparation of meta-analyses for intervention studies</td>
<td>Start guideline making for intervention studies</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Development of a livable town in which those with dementia can participate

<table>
<thead>
<tr>
<th>Year</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>Collection of Social Inclusion information</td>
<td>Collaboration with EUGMS, and AGS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2019</td>
<td>So that every geriatrician becomes a dementia support physician</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Promotion of IoT Robot AI technologies

<table>
<thead>
<tr>
<th>Year</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>Hold continuous symposiums on advanced technologies in the field of geriatrics</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2019</td>
<td>Organize issues</td>
<td>Basic proposal for fusion and segregation of people and advanced technology</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Proposal of affiliated organization

- **2022**
  - The Japan Diabetes Society
  - The Japanese Society of Hypertension
  - Japan Society for the Study of Obesity
  - National Center for Geriatrics and Gerontology

- **2021**
  - Dementia medical care promotion meeting
  - Working of those involved
  - Association of people with dementia and their families
  - Oita Pref., Aichi Pref., Obu City, Kobe City

- **2020**
  - Dementia medical care promotion meeting
  - Working of those involved
  - The Japanese Society for Dementia Care
  - Japanese Society for Medical and Biological Engineering
  - The Japanese Association of Rehabilitation Medicine
  - Center of Assistive Robotics and Rehabilitation for Longevity and Good Health

---

**Recommendation on the definition of older people**

The proposal for changing the definition of older people will trigger the discussions on how to select the way of medical treatment, care and welfare, in a super-aging society, under the current status of the rejuvenation of older people.

### Activation of dialogues with the citizens

- Academic discussions (academic symposiums, etc.)
- Awareness raising activity to citizens (open lectures)
- Problem presentation and questionnaire surveys via media

### The Japan Geriatrics Society

**Nation-wide Discussion on the State of the Super-Aging Society**

To an ageless society

### Promotion of continuous research

- Dissemination to the world
- Continuous exchange of views with the Cabinet Office and the MHLW
- Questionnaire surveys for those in cooperation with the Cabinet Office
- Proposals that capture awareness changes of citizens

**Examples of issues in the national debate**

- What is required for pre-older or older individuals to act and exist as a supporter or a motivator of society (individuals, techniques, and systems), conversion to "medical care for cure and support", approach to end-of-life, possibility of rejuvenation of older people, etc.
### 5-year planning milestone

<table>
<thead>
<tr>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Activate dialogues with the people</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic symposium</td>
<td>Public lectures</td>
<td>Press seminar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint questionnaire surveys with the media (negotiate for each theme)</td>
<td>Negotiation</td>
<td>Planning</td>
<td>Survey and Analysis</td>
<td>Round-table discussions and symposiums</td>
</tr>
<tr>
<td><strong>Promotion of continuous research</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Continuous exchange of views with the Cabinet Office and MHLW</td>
<td>Information transmission of definition change recommendations to WHO and the world</td>
<td>Questionnaire surveys for those in cooperation with the Cabinet Office</td>
<td>Proposals that capture the awareness changes of citizens</td>
<td></td>
</tr>
<tr>
<td><strong>Theme of discussion</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Call for a national debate on the state of a super-aged society</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>● What is required for a pre-old age or an old age individual to act and exist as a supporter or a motivator of society (individuals, techniques, social system, medical system, and culture), end-of-life attitude, etc.</td>
<td>● Conversion to “medical care for cure and support”</td>
<td>● Possibility of continuous rejuvenation of the old people</td>
<td>● End-of-life attitude</td>
<td>● Realization of an ageless society</td>
</tr>
</tbody>
</table>

---

### Fostering and support of basic aging research

- **Establishment of locations to exchange information with various research institutions, in order to develop basic aging research**
- **Strengthen cooperation with the Japan Society for Biomedical Gerontology**
- **Lobbying activities for expansion of research areas**

<table>
<thead>
<tr>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information exchange with each research institute</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strengthen cooperation with the Japan Society for Biomedical Gerontology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lobbying activities for expansion of research areas</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The Japan Geriatrics Society

“Five-Year Geriatrics Promotion Plan to Support Healthy Longevity”

Promotion of geriatrics open to society

In addition to the understanding by the government, mass media, educational field, and by each citizen, We would like to receive your opinions and support to achieve our plans.

We hope to hold discussions and joint activities to promote geriatrics in achieving healthy longevity.

The Japan Geriatrics Society (Executives, Committee chairperson, and others)

Hiromi Rakugi (President), Hidenori Arai (Vice President, WG Chairman), Masahiro Akishita (Vice President),


Bold: WG members