

# ACT

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## ACT, Change, and Gratitude

Change is an inevitable feature of life. And "changes" is central in the name of the ACT study: Adult CHANGES in Thought. Change is especially noticeable as we age to the last decades of life (just as change is so evident in early life and development, especially as young people enter puberty). ACT studies the many changes of aging, particularly cognition and mental states.

ACT participants, and earlier Alzheimer's Disease Patient Registry participants, have contributed to amazing changes in our knowledge of aging since we received our first grant way back in 1986! The scientific community, practitioners and the public now appreciate seminal ACT findings such as the dramatic increase in the frequency of dementia after age 80, when the public health burden is greatest. And while Alzheimer's disease is most common, later-in-life dementia typically has multiple other types of neurodegenerative changes, a fact now well-known and accepted thanks to the ACT study. We've also found ways to reduce age-related decline and thereby delay onset of dementia. Indeed, there are now hopeful data suggesting that rates of dementia late in life **are** declining in advanced countries. This change is related to better socioeconomic conditions, control of cardiac risk factors and healthier lifestyles. ACT study results have contributed to changes in knowledge about wellbeing in aging, findings about the protective effect of exercise, better control of blood pressure and cardiovascular risk factors, and avoiding commonly used drugs with anticholinergic effects such as over-the-counter antihistamines and certain prescription drugs. International reports (such as from the *Lancet* Commission on dementia) and national consensus reports from our National Academy of Medicine based their recommendations on prevention and care for dementia on ACT findings.

Thanks to the efforts and commitment of our participants, staff and faculty, our sponsor, the National Institute on Aging, invited ACT to compete for a much larger award to expand ACT, based on the treasure trove of decades of longitudinal data describing changes in over 5,700 participants. This dramatic change means ACT will endure — bigger and better — with a special emphasis linking the best lab-based neuroscience, imaging, genomics, proteomics, and other omics with our legendary community-based cohort receiving comprehensive care, first through Group Health and now through Kaiser Permanente Washington. For me and my colleagues, this giant award (nearly \$56 million) is truly a dream come true!

On a more personal note, as of July 1st, I have officially retired from Kaiser Permanente. As the founding Lead Researcher of ACT since 1986 (and with 75 years to my credit and 11 young grandchildren in tow), this is a good time for change for me. I have reduced my work commitments, using University of Washington (UW) Medicine as my home base, which is where the ACT research originated as a joint UW/Group Health project. I leave ACT in the capable hands of my co-leads Paul Crane and Andrea LaCroix, as well as interim KPWA leads Jen Nelson and Rita Mangione-Smith.

How will I spend my time, you ask? I am planning to continue scholarly work about 2 days per week, mostly writing and analyses involving ongoing projects related to aging and the brain along with mentoring and promoting research careers of younger scientists. I will continue to exercise regularly by cycling, walking, hiking, and skiing with my wife and friends. I love projects around the house — raising vegetables, fruits, and berries, and getting fresh eggs from my chickens! I'll be an activist ager — but also be wise enough to accept some inevitable changes that come with aging — I will seek to minimize decline and adapt. I'll exercise my mind with ongoing piano lessons and practicing, reading, and participating in a book club, and continuing to pursue an active spiritual life, which has become increasingly important to me as I move into older age. And not to mention I'll have a lot more time to

spend with all my grandchildren!!! My “aging” plan is largely based on ACT research, my years of clinical practice, common sense, and good fortune! Essentially, I plan to put into practice what I wrote in our book *ENLIGHTENED AGING* during my sabbatical at Cambridge.

In closing this chapter of my life, allow me to express my gratitude for the ACT study and especially YOU, our ACT participants, as well as your family, friends, and caregivers. I am so very grateful for all you have contributed to the public good, to science, and to me as a caring, curious physician and scientist. Thank you for teaching me so much.

With deep and profound gratitude,

Eric B. Larson, MD, MPH

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