The Asia Pacific League of Clinical Gerontology and Geriatrics (APLCGG) launched its own journal, Journal of Clinical Gerontology and Geriatrics (JCGG) in 2010; since then, with substantial and growing support from authors in Asia, Europe and North America, the JCGG has provided a respected Open Access academic platform for international research in clinical gerontology and geriatrics.

Until 2018, JCGG had published 250 articles by authors from 35 countries on all continents, of which original research articles accounted for 58% (Table 1), and 30.4% were by authors from Taiwan (Figure 1). From 2010 to 2018, the number of citations per document multiplied from 0.2 to 1.0, with an external citation rate of more than 95%. These gratifying statistics attest to the growing academic reputation of JCGG and accordingly, Clarivate Analytics has added JCGG to its new Emerging Sources Citation Index which covers “peer-reviewed publications of regional importance and in emerging scientific fields”.

We are delighted that JCGG has become a popular choice with researchers worldwide for disseminating their valuable research findings. Among many important and influential articles in the JCGG archive, highlights include the report from an urban aging forum that documented challenging issues related to urban aging in Asian cities, the development of geriatric services and education in different countries, and studies from Egypt, Iran, Brunei, Nigeria, Vietnam, Morocco, Lebanon, and elsewhere, about aging and aged care in diverse countries. Publishing regional information and perspectives is of great research interest for international comparisons and the JCGG is proud to share these resources with the international research community. Accordingly, the APLCGG defrays all publishing costs and authors do not have to

Table 1. Journal of Clinical Gerontology and Geriatrics articles published from 2010 to 2018.

<table>
<thead>
<tr>
<th>Article Type</th>
<th>Number of Papers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Communication</td>
<td>6</td>
<td>2%</td>
</tr>
<tr>
<td>Case Report</td>
<td>34</td>
<td>14%</td>
</tr>
<tr>
<td>Editorial</td>
<td>21</td>
<td>8%</td>
</tr>
<tr>
<td>Letter to Editor</td>
<td>9</td>
<td>4%</td>
</tr>
<tr>
<td>Original Article</td>
<td>146</td>
<td>58%</td>
</tr>
<tr>
<td>Review Article</td>
<td>32</td>
<td>13%</td>
</tr>
<tr>
<td>Special Article</td>
<td>2</td>
<td>1%</td>
</tr>
<tr>
<td>Total</td>
<td>250</td>
<td>100%</td>
</tr>
</tbody>
</table>
Aging Medicine and Healthcare offer appropriate services for people of all ages and capacity to address all aging-related healthcare needs. The risk factors associated with age-related conditions are usually already evident in mid-life, and a life-course approach to pursuing better long-term outcomes is needed to curtail disability-associated life years. Moreover, it broadens healthcare professionals training in their own primary specialty to take into consideration aging and age-related conditions.

Renaming the JCGG after 10 years represents a fresh start and a broader, contemporary scope to tackle the challenges of population aging. Building on the firm foundations laid by JCGG, we intend Aging Medicine and Healthcare to foster research on life-course approaches together with innovative aging-friendly healthcare models. We welcome research from both developed and developing countries, since much more rapid aging in developing countries than developed ones raises challenges unique in human history. Therefore, Aging Medicine and Healthcare will remain Open Access and publish articles with global research interest, as well as regional insights and thereby provide in-depth information for a wide readership including researchers, clinicians, and policy-makers.

REFERENCES


Encouraged by the success and achievements of JCGG, the APLCGG has decided to cover an even broader scope and rename the journal Aging Medicine and Healthcare. The World Report on Aging and Health, published in 2015 by The World Health Organization, advocated a new concept of healthy aging, which emphasizes a life-course approach to maximize functional ability and intrinsic capacity. This provided an important impetus for promoting well-being in later life, and transitioning healthcare services from the paradigm of Geriatric Medicine towards Aging Medicine. Therefore, Aging Medicine and Healthcare will espouse the World Health Organization’s proposals and highlight a life-course approach in aging and the related healthcare services. Although the scope of JCGG was not limited to research about medicine and healthcare for older people, we believe that renaming the journal will consolidate our aims and scope for authors and readers.

Besides embracing a life-course approach to healthy aging, the broadened scope of Aging Medicine and Healthcare will include innovative healthcare service research. Established “age-friendly healthcare services” were previously relatively limited to healthcare for older people, especially those with physical, cognitive or sensory disabilities; however, newly proposed “aging-friendly healthcare services” emphasize a life-course approach in which healthcare systems offer appropriate services for people of all ages and capacity to address all aging-related healthcare needs. The risk factors associated with age-related conditions are usually already evident in mid-life, and a life-course approach to pursuing better long-term outcomes is needed to curtail disability-associated life years. Moreover, it broadens healthcare professionals training in their own primary specialty to take into consideration aging and age-related conditions.

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