

Longitudinal Aging Study Amsterdam - New cohorts of young old in the 21st century

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The objective of the study is to establish a data infrastructure to investigate the degree in which current and previous generations of young-old are characterised by healthy and successful ageing.

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Other condition
Study type	Observational invasive

Summary

ID

NL-OMON54733

Source

ToetsingOnline

Brief title

LASA-YoungOld21

Condition

- Other condition
- Age related factors

Synonym

Daily functioning, general health and well-being, social conditions

Health condition

dagelijks functioneren, algemene gezondheid en welbevinden, chronische ziekten

Research involving

Human

Sponsors and support

Primary sponsor: Vrije Universiteit Medisch Centrum

Source(s) of monetary or material Support: Ministerie van OC&W,NWO-MAGW;NWO-SGW,Europese Unie

Intervention

Keyword: Health and well-being, Life course, Longitudinal, Third age

Outcome measures

Primary outcome

Main parameters include objective and subjective indicators of physical, emotional, social and cognitive functioning and care use. Indicators include functional limitations, performance indicators, bloodmarkers (among others glucose and vitamin D), depressive symptoms, social network size and received social support, loneliness, frailty and general cognitive functioning.

Secondary outcome

A broad range of parameters will be included in the data collection. These can be both endpoints of specific studies or be investigated as confounders or mediators. An exhaustive list of items that are part of the data collection can be found in Huisman et al (2011), attached.

A new element in this data collection is an odour test for early identification of Parkinsonism. Respondents will be asked to identify a series of odours from a booklet containing surfaces with sample odours, using a multiple choice format.

In a selection of respondents, in-depth interviews shall be conducted on the topic of people's living environment. Participants are asked to take photographs of their living environment as input for the interview.

During the follow-up measurement of 2018/2019, a week calendar shall be left at the home of a selection of respondents. Respondents are asked to indicate the degree of pain, sleep, appetite, social contacts they experience and their mood, for a week. This week calendar shall be administered among respondents of the LASA Veranderingsstudie (registratienummer 2016/301), a LASA ancillary study, who have filled out the calendar on previous occasions.

Interim questionnaires include the Tilburg Frailty Indicator questionnaire to help monitor frailty.

Study description

Background summary

Important cultural, economic and social shifts in the late twentieth century created the Third Age, a phase of life in which people are supposed to enter old age with the prospect of spending a decade or more free from social obligations in relatively good health and wealth. The question is to what extent this prospect applies to all subgroups within the Dutch young-old population.

Study objective

The objective of the study is to establish a data infrastructure to investigate the degree in which current and previous generations of young-old are characterised by healthy and successful ageing.

Study design

Baseline data collection among an additional cohort of young-old respondents, incorporated within a cohort-sequential longitudinal study of ageing; the Longitudinal Aging Study Amsterdam (LASA). In-depth interviews shall be conducted in a small selection of respondents. During follow-up measurements, participants shall be combined with participants from the existing LASA infrastructure, so that all respondents receive the same measurements and they can be compared on important outcomes. In-between regular follow-up measurements, small-scale questionnaires are administered that focus on a

specific topic.

Study burden and risks

The data collection encompasses a main face-to-face interview and a medical face-to-face interview, consisting of validated questionnaires and including among others performance tests and cognitive tests, a self-administered questionnaire and blood collection. The main and medical interviews will be conducted separately, on average six weeks apart from one another. The main interview takes about 1,5 hours, the medical interview 1 hour. The self-administered questionnaires are left behind by the interviewers conducting the face-to-face interview and are picked up by the medical interviewers, or are sent back via mail by the respondents. Interviews take place at the respondents home address.

Blood will be collected after the medical interview took place. A total of 35ml blood will be collected. In a selection of respondents, in-depth interviews shall be conducted on the topic of people's living environment. Participants are asked to take photographs of their living environment as input for the interview. The interview takes about 1,5 hours.

We consider the most burdensome aspects of the data collection: a) the general cognitive functioning, because these may be confronting to respondents, b) the performance tests, where respondents are asked to walk for a short distance as fast as possible and are asked to stand up from a chair, and c) The spirometry measurement, where respondents are asked to forcefully exhale several times. All data collection is completely observational. The blood collection is the only invasive element of the study, consisting of one venopuncture in the arm. In general the risks associated with participation in the study will be negligible, but for frail older adults the data collection might be more burdensome. To avoid the burden of a full data collection in these respondents, we offer as alternatives to participate in a shortened interview that is administered via telephone, which is less burdensome to respondents, to have a proxy give the interview for them, or not to participate this time but retaining their data in our files for future approach. It should be noted that in this relatively young age group, very few respondents should be expected to be so frail that the data collection is too burdensome.

There are no specific therapeutic benefits of participation in this study, but participation may be beneficial to participants because it may be satisfactory to contribute to a study of relevance to society. Moreover, in case of clearly deviant values on physical tests (e.g. high blood pressure), this will be communicated to the general practitioner of the respondent.

The population base consists of young-old adults aged 55-64 years. We aim for a representative sample, therefore, it is important that people of all abilities are included. We train our interviewers to be sensitive to respondents* needs and abilities. In the past 20 years of working with older respondents of all

abilities, we have accumulated great expertise in this respect.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Ages 55-64 years. The study uses a random sample from the Dutch population registries of 9 municipalities across The Netherlands (the same municipalities as in 1992 and 2002). In addition, the study uses a random sample of Turkish and Moroccan migrants of the same age from 13 large and middle-sized cities in the Netherlands.

Exclusion criteria

Ages other than 55-64 years.

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Prevention

Recruitment

NL

Recruitment status: Recruiting

Start date (anticipated): 22-10-2012

Enrollment: 2748

Type: Actual

Medical products/devices used

Registration: No

Ethics review

Approved WMO

Date: 17-01-2013

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 04-02-2013

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date:	26-03-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	27-10-2017
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	12-09-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	14-05-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	01-09-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	10-03-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	03-08-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	24-07-2023
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	11-07-2024
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	

Date: 23-01-2025
Application type: Amendment
Review commission: METC Amsterdam UMC

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL41346.029.12