Editorial

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Editorial

The last year has seen much change in *Reviews in Clinical Gerontology*, and this will continue over the next year.

At the beginning of last year I took over as Editor from Professor Ray Tallis, whose vision, drive and initiative were instrumental in establishing what *Age Ageing* has recently referred to as one of the major review journals in the field on gerontology. The year also saw a major change in the section editors, the only one remaining from *l'ancien régime* being Bob Baldwin, our section editor for Old Age Psychiatry. The contributions of David Barer, Ioan Davies, Emily Grundy, Jackie Oldham and Peter Overstall have been considerable, and their contribution, with Ray, to *Reviews* cannot be understated.

I am convinced however that the new editorial team is equally eminent and able. Professor Peter Crome, Professor of Geriatric Medicine at the University of Keele has taken over as Clinical Geriatrics section editor. Peter's expertise in therapeutics, stroke medicine and, most importantly, as a down-to-earth practising geriatrician, will prove invaluable in the further development of the Clinical Geriatrics section. Professor Alan Sinclair from the University of Birmingham takes over as the section editor for Biological Gerontology. Alan is also an MD but has considerable experience in the field of biological gerontology, his own personal interest being the role that free radicals play in aging and age-related disease, particularly diabetes. The combination of a biogerontological scientific training coupled to a clinical perspective can only be of benefit to his role as editor of this sub-section. Dr Norman Vetter is an epidemiologist and public health doctor of considerable renown in the field of aging. As the former director of the research team for Care of Elderly People in Cardiff, his contribution to aging research and, in particular, the place of the elderly person in the wider community has been considerable. We welcome him to *Reviews* as a valuable member of the team. Reflecting changes in health and social care, his section is being renamed 'Social and Psychological Gerontology and Health Management'. Finally, Dr Jolyon Meara, Senior Lecturer in Geriatric Medicine in North Wales, is a geriatrician with special skills in the rehabilitation of the neurologically disabled in the community, working in a challenging rural environment. He is Secretary of the British Geriatrics Society Parkinson's Disease Special Interest Section and has a special interest in movement disorders.

The strategic aims of *Reviews* have not altered, in that we wish to provide a biological and social scientific focus for those specializing in the health care of older people, and also a clinical perspective to people working in the basic sciences. We will continue in our drive to bring an update to all relevant aspects of gerontology in a repeating cycle over three to four years. However we will also strive to cover new, topical and important issues as they arise and continue to welcome *ad hoc* occasional papers on subjects of general gerontological interest.

Finally, we wish to broaden the scope of *Reviews* to take into account the aspirations of our colleagues all over the world, and to this end we will be widening the scope of our editorial board to include some of the major opinion leaders in all aspects of gerontology throughout the world.

We hope *Reviews in Clinical Gerontology* is a forum that will allow workers in the different branches of this very wide field to update themselves on the areas that are of interest and importance to those who are working in gerontology, but may have a slightly different focus to their own. Social gerontologists must be aware of medical advances, nurses must be aware of psychological advances, physicians must be aware of social sciences. Without this cross-fertilization, gerontology will be the less: we will strive to make *Reviews in Clinical Gerontology* the forum that will facilitate this interplay.