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Welcome Rebeca Wong, PhD

Director of the World Health Organization/Pan American Health Organization
Collaborating Center on Aging and Health

Top researcher on Hispanic health issues to direct WHO/PAHO center on aging at UTMB



Rebeca Wong, an internationally recognized investigator of Hispanic health issues, has been named director of the World Health Organization/Pan American Health Organization Collaborating Center on Aging and Health at the University of Texas Medical Branch at Galveston.

“Dr. Wong is internationally recognized for her research on Hispanic health and aging,” said Dr. James S. Goodwin, director of UTMB’s Sealy Center on Aging. “She is perhaps the leading authority on issues involving border health and migration. In many ways, given her close ties to health investigators throughout Latin America, she is the perfect leader for the UTMB WHO Center for Aging and Health.”

Wong is a senior research scientist and associate director of the Maryland Population Research Center at the University of Maryland. She earned her doctorate in economics from the University of Michigan and is former faculty member of the Johns Hopkins School of Public Health and Georgetown University. Wong is expected to take her new position at UTMB around January 2008.

A native of Mexico and a U.S. citizen, her research interests include old-age consequences of life cycle economic and family decisions, old-age consequences of

life style risk factors, mortality and health consequences of Mexico-U.S. migration, and cross-national comparisons of health and social inequality in Latin America.

In addition to leading the WHO center at UTMB, Wong will serve as a professor in the Department of Preventive Medicine and Community Health and a senior fellow in the Sealy Center on Aging.

“We see this as a significant hire for UTMB,” said Kenneth J. Ottenbacher, current director of the WHO center. “Her recruitment to UTMB will substantially increase our visibility in two areas of importance at UTMB - aging and minority/Hispanic health.” Ottenbacher, who is stepping aside to make room for Wong, is director of the UTMB Center for Rehabilitation Sciences and senior associate dean for graduate education and research in the School of Allied Health Sciences.

Recent Scientific Accomplishments

Dr. Wong’s research agenda deals with the economic demography of Hispanic and immigrant populations in the U.S. and in Latin America, especially Mexico. Her research focuses on two main areas: 1) migration and old-age consequences, and 2) health and aging. In these broad topics, Wong applies a cross-national perspective to study health and aging processes of the population. In a 2005 paper in *Population and Development Review* with Ken Hill, she used data from Mexico and U.S. censuses to estimate the net flow of migrants from Mexico to the U.S., yielding an estimate of 400,000 net

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migrants per year. In the area of health and aging, she and colleagues are using this cross-national perspective to study the determinants of health among older adults in Latin America. In a 2006 special volume of the journal *Health and Aging* edited by Wong and colleagues, and a special volume of the *Panamerican Journal of Public Health*, several papers use data from different countries to conclude that regardless of context and the stage of demographic and epidemiologic transitions, the perceived quality of memory dominates the self-report of global health by older adults in Latin America. Also using a cross national perspective, in a 2006 paper in *Research on Aging*, Wong and former student Juan José Díaz find that health insurance plays a key role in the propensity to use health care among Mexicans in both Mexico and the U.S. However, the effect varies by type of health care service, concluding that health insurance plays a major role for the type of service for which there are no low-cost alternatives in the country, such as doctor visits in the U.S. In a 2007 paper in *International Migration Review*, Wong and co-authors find that, after controlling for migration selectivity, older adults in Mexico who are former U.S. migrants have large wealth advantage over Mexicans who never left for the U.S. The paper concludes however, that the mechanisms of this wealth advantage may not be straightforward. The accumulated wealth advantage may not necessarily originate from the old adults' own trips to the U.S.; part of the economic gain may be due to skills they acquired in the U.S. which provided them with higher earnings upon returning to Mexico, or by their children's subsequent U.S. migration which allowed the older adults to accumulate wealth through remittances.

Funded Research

Over the last three years, Wong was co-investigator on an R01 grant from NIA (1999-2004) that funded the Mexican Health and Aging Study (MHAS). The study seeks to study aging in Mexico with a wide socioeconomic perspective, included the collection of two waves of a national survey among older adults in Mexico in 2001 and 2003, and used protocol and instruments that are highly comparable to the U.S. Health and Retirement Study. The study has an emphasis on past migration from Mexico to the U.S. to understand the selection process of initial and return migrants, and how these selections result in patterns of health observed in old age among U.S. populations.

Wong is currently principal investigator (PI) of an R01 from NIA (2005-2009) that examines the health and aging patterns of older populations in Latin America with an emphasis on migration selection. She also has an active R03 funded by NIA (2006-2008) that seeks to construct a secondary database on the past context of Mexicans in the MHAS cohorts, and explore the use of indicators that capture this historical context in models of old-age well being. Wong also has an active R01 from NICHD (2007-2012) with colleagues from UCLA and Princeton to study social differentials in health among Latinos in the U.S.

RECENT PUBLICATIONS

Al Snih S, Markides KS, Ray LA, Freeman JL, Ostir GV, Goodwin JS. 2006. "Predictors of health care utilization among older Mexican Americans." *Ethnicity & Disease*, 16:640-646.

Al Snih S, Markides KS, Ray LA, Freeman JL, Ostir GV, Goodwin JS. 2006. "Health care use by older Mexican Americans." *Ethnicity & Disease*, 16:754.

Al Snih S, Ottenbacher KJ, Markides KS, Kuo YF, Eschbach K, Goodwin JS. 2007. "The effect of obesity on disability vs mortality in older Americans." *Archives of Intern Medicine*, Apr 23;167(8):774-80.

Alfaro-Acha A, Al Snih S, Raji MA, Markides KS, Ottenbacher KJ. 2006. "Handgrip strength and cognitive decline in older Mexican Americans." *Journal of Gerontology: Medical Sciences*, 61:859-865.

Alfaro-Acha A, Al Snih S, Raji MA, Markides KS, Ottenbacher KJ. 2007. "Does 8-foot walk time predict cognitive decline in older Mexican Americans?" *Journal of the American Geriatrics Society*, Feb;55(2):245-51

Amador LF, Al Snih S, Markides KS, Goodwin JS. 2006. "Weight change and mortality among older Mexican Americans." *Aging Clinical Experimental Research*, 18:196-204.

Amador LF, Al Snih S, Markides KS, Goodwin JS. 2006. "Body mass index and change in blood pressure over a 7-year period among older Mexican Americans." *Clinical Interventions in Aging*, 3:275-282.

Børsheim E, Kobayashi H, Traber DL, Wolfe RR. 2006. "Compartmental distribution of amino acids during hemodialysis induced hypoaminoacidemia." *American Journal of Physiology: Endocrinology & Metabolism*, 290: E643-E652.

Børsheim E, Kien LC & Pearl WM. 2006. "Differential effects of dietary intake of palmitic acid and oleic acid on oxygen consumption during and after exercise." *Metabolism*, 2006; 55(9): 1215-21.

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The UTMB Claude D. Pepper Older Americans Independence Center Update

In 1999, The University of Texas Medical Branch, Sealy Center on Aging was awarded a \$6.5 million 5-year grant from the National Institute on Aging (NIA) to establish the *UTMB Claude D. Pepper Older Americans Independence Center (OAIC)*, the only Pepper Center serving the Southwest. Since declining function, particularly mobility, is a major contributor to loss of independence, UTMB researchers studied how muscle building and function change with age. Funding for the UTMB OAIC grant was renewed by NIA for an addition 5 years beginning in 2005. During these next 5 years, the UTMB OAIC will examine muscle function from interdisciplinary perspectives across the entire spectrum of biomedical investigation, from molecular biology to outcomes assessment. The following is a report that appeared in Reuters Report and the UTMB newsroom on August 9, 2007 featuring research conducted by UTMB Pepper Center investigators including UTMB rehabilitation sciences postdoctoral fellow T. Brock Symons (lead author on the paper), research nurse Scott Schutzler, clinical research coordinator Tara Cocke, Associate Professor David L. Chinkes and University of Arkansas professor Robert R. Wolfe. Support for the study was provided by the National Cattlemen's Beef Association Checkoff Program and UTMB's National Institutes of Health / National Institute on Aging Claude D. Pepper Older Americans Independence Center.

Where's the beef? Not enough of it is on elders' plates, muscle-metabolism study suggests...

Investigators with the UTMB Pepper Center have good news for people who want to stay strong in their old age: Older adults' bodies seem to work as well as younger people's when it comes to turning high-protein food into muscle. A new study published in the August issue of the *American Journal of Clinical Nutrition* (Symons TB, Schutzler SE, Cocke TL, Chinkes DL, Wolfe RR, Paddon-Jones D. 2007. "Aging does not impair the anabolic response to a protein-rich meal." *American Journal of Clinical Nutrition*, Aug;86(2):451-6) suggests that a diet containing a moderate amount of protein-rich food such

as beef, fish, pork, chicken, dairy or nuts may help slow the deterioration of elderly people's muscles. Reducing the decline in muscle mass among the elderly is crucial to maintaining their health and independence. Consuming adequate protein is essential for making and maintaining muscles. It's common for people to lose muscle mass as they age, and in the elderly this can mean greater susceptibility to illness and falls. But it hasn't been clear whether age itself impairs the body's ability to synthesize muscle protein after a protein-rich meal.



Douglas Paddon-Jones, PhD

Since nutritional studies show that many elderly individuals eat less protein than the average person, researchers have reasoned that if the elderly simply increased their protein intake, they might slow down muscle loss — as long as old age doesn't inherently interfere significantly with the ability to make muscles out of the protein in food.

"We wanted to know if there is some reason your grandmother's body, for example, can't stimulate muscle growth in response to eating the same protein-rich meal that you eat, which might over time contribute to muscle loss," said Douglas Paddon-Jones, an associate professor in UTMB's departments of physical therapy and internal medicine. Paddon-Jones is the senior author of the paper.

He and his colleagues recruited 10 adults older than 65 years and 10 men and women in their 30s and 40s. The researchers took blood samples and biopsies of muscle tissue before and after serving each study participant a patty made of lean ground beef.

They found that within the 5 hours after the meal, older and younger adults showed a similar increase in muscle-protein synthesis.

Yet despite this similarity, older adults tended to have significantly less muscle mass than their younger counterparts. This discrepancy, according to Paddon-Jones, points to the importance of older adults' getting enough protein in their diets on a daily basis.

“We’ve done studies in the past with specialized drinks containing amino acids—the chemical building blocks of proteins—but this was the first time anybody’s looked at a real food and its ability to stimulate muscle growth in both the young and elderly,” Paddon-Jones said. “What we learned was really encouraging, because it suggests that elderly people actually can benefit from eating a moderate serving of protein-rich foods. That’s something they aren’t doing enough now—in fact, between 16 and 27 percent of older adults are eating less than the USDA’s recommended daily allowance of protein.”

Proteins like meat, fish, poultry and dairy products are readily available, the researchers point out, and generally less expensive and more palatable than protein supplements.

Elderly people may eat less protein for a number of reasons, said Paddon-Jones, including cost, the fact that many foods may not taste as good to them as they once did, difficulty chewing, limited menus in nursing homes or assisted living communities, and decline in appetite. Another important contributor to muscle loss in the elderly is a lack of exercise, he noted.

Even among the elders who volunteered for the study, whom Paddon-Jones described as typically more physically active than most others in the elderly population, “a disturbing thing was that on average they had 12 kilograms (26.5 pounds) less lean muscle mass than the younger people we tested.” That difference, he said, would probably be even greater in the general population. In other words, compared to a young adult, a typical elderly person lacks the advantages provided by more than 26 pounds of muscle—a deficit that in some cases could lead an older person to being permanently bedridden by an injury or illness.

“A high percentage of elderly folks who break a hip or suffer a major injury never get out of bed again, and one of the big reasons is that they rapidly lose so much muscle mass and strength that they become physically incapable of getting up,” Paddon-Jones said. “Sufficient muscle is fundamental for the activities of daily living, movement and independence—it’s definitely a quality-of-life issue.”

Soham Al Snih, MD, PhD featured in Reuters

(April 24, 2007) report on obesity <http://www.reuters.com/article/healthNews/idUSN2334871320070424>



Soham Al Snih, MD, PhD

Soham Al Snih, MD, PhD, research scientist for the Sealy Center on Aging, was featured in a news article on obesity among older adults based on her recent publication (Al Snih S, Ottenbacher KJ, Markides KS, Kuo YF, Eschbach K, Goodwin JS. 2007. “The effect of obesity on disability vs

mortality in older Americans.” *Archives of Internal Medicine*, Apr 23;167(8):774-80.)

Dr. Al Snih and colleagues studied 12,725 adults 65 years or older. None were disabled at the beginning of the study, which started in 1982 and ended in 1993. The researchers questioned the volunteers every year about health conditions, demographics and psychosocial characteristics. Blood pressure, height and weight and physical function were also measured. Over the 11 years, 3,570 of the volunteers became disabled, and 2,019 died.

“Subjects with BMIs of lower than 18.5 (underweight) or 30 or higher (obese) at baseline were significantly more likely to experience disability during the follow-up period,” Al Snih’s team wrote.

But being simply overweight did not cause health trouble. People with BMIs of 25 to 30—150 pounds to 180 pounds (68 to 82 kilograms) for someone 5 feet 5 inches—lived longer than people who weighed less. “Disability-free life expectancy is greatest among subjects with a BMI of 25 to less than 30,” the researchers wrote.

Other studies have also found underweight and normal weight older adults may have a lower immediate risk of death.



STUDENT SCHOLARSHIP AWARDS/RECOGNITION

► Frank Lemus, Ph.D.

Dissertation Title: *“Community correlates of pneumonia hospitalization and mortality among persons 65 years and older in Texas counties”* Degree awarded, August, 2007 from Department of Preventive Medicine and Community Health. Dissertation Committee Chair: Jean Freeman, Ph.D.

Description: For his dissertation research, Frank developed estimates of health care quality among older adults (65+) for all Texas counties using the Texas Hospital Discharge Data system. The measures are based on the Agency for Healthcare Research and Quality (AHRQ) Indicators: bacterial pneumonia hospitalizations (primary care) and pneumonia inpatient mortality (hospital inpatient care). Of interest was the relationship between these quality measures and characteristics of each county such as income distribution, availability of health care resources and the county’s composition of minority groups. This is an innovative use of hospital discharge data and has enormous potential for programs aimed at developing “healthy communities” and reducing disparities among different population groups. This research was funded by a Dissertation Grant from AHRQ (R36HS016381, F. Lemus).

Future Plans: Frank was selected as a post-doctoral Jeane B. Kempner Scholar for 2007- 2008, and will remain at UTMB during this training period. His postdoctoral studies will be at the Sealy Center on Aging, where he will build on his health services research pre-doctoral training to explore “Community correlates/impact of influenza and pneumonia vaccination on community health among older adults (65+) in Texas counties.” He has a continuing research interest in U.S. (Texas) – Mexico border health.



UPCOMING EVENTS

11th Annual Forum on Aging

Once again the Sealy Center on Aging in conjunction with Research Services will be sponsoring the Forum on Aging. The event is scheduled for **Wednesday, October 3, 2007, from 5-7 p.m.** in the Levin Dining Hall. This poster forum is designed to inform gerontology researchers and the general UTMB community of the types of aging research, programs and educational initiatives conducted at UTMB. The Forum also highlights resources available from the Sealy Center on Aging, and throughout UTMB and the Galveston-Houston area.

All are invited to attend—so please mark your calendars. All guests and participants will view posters representing a wide diversity of topics, with adjoining study areas and visits with presenters. Monetary prizes will be awarded for the best student posters. Wine and cheese will be served.

Grants

James S. Goodwin, director, Sealy Center on Aging; PI: University of Texas Medical Branch Claude D. Pepper OAIC Grant Number: 5 P30 AG024832; University of Texas Medical Branch OAIC Request for One Time Supplemental Funds by the National Institutes of Health (NIH)—\$147,291 (*one year 9/01/07–4/30/08*).

Project Title: “Proteomics analysis of the muscle contractile apparatus in Vastus lateralis muscle of hemiparetic stroke patients—identification of oxidatively damaged proteins.” PI: John Papaconstantinou

Collaborating Center: University of Maryland Pepper Center (Charlene Hafer-Macko, MD).

PEPPER CENTER RECRUITMENT

To answer questions about why muscle function deteriorates with age, researchers with the Pepper Center are looking for volunteers 60 years-old or older, and in good general health. For information contact: Susan Minello (409) 772-8350, Roxana Hirst (409) 772-3588 or use our toll-free number (800) 298-7015.

THE SEALY CENTER ON AGING VOLUNTEER REGISTRY

More than 700 volunteers have joined the UTMB Sealy Center on Aging Volunteer Registry to participate in a variety of UTMB research projects. If you are 55 or older and would like information on becoming a volunteer, please call Roxana Hirst or Susan Minello, registry coordinators, (409) 772-3588 or (800) 298-7015.

Medical Student Training in Aging Research Program (MSTAR)

UTMB Sealy Center on Aging in collaboration with the University of Pittsburgh offered an 8- to 12-week intensive experience for 3 first-year medical students and co-sponsored a 4th student who completed a summer research program at Johns Hopkins.

The MSTAR program features:

- an individualized research experience under a sponsoring mentor
- a structured didactic experience directly linked to student research projects
- opportunities to interact with potential role models and peers
- efforts to build a sense of identity and membership for participants
- positive and rewarding experiences in aging research

Students and their projects included:



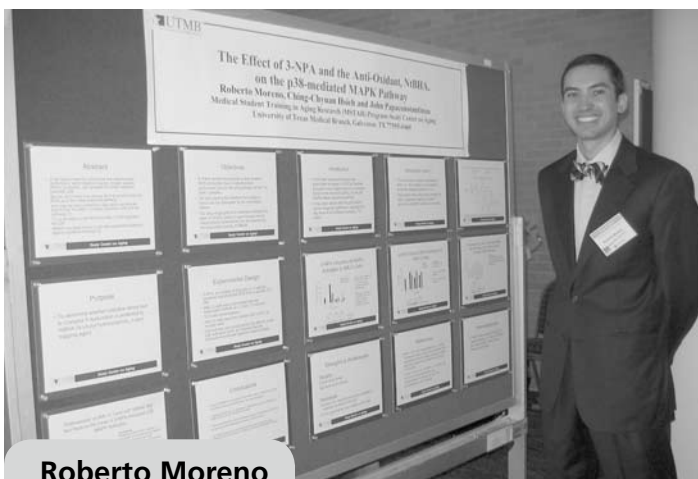
Darshe Edge

Project title: Age associated increase in coagulation and reduced activation of PI3K signaling pathway in mice with endotoxemia



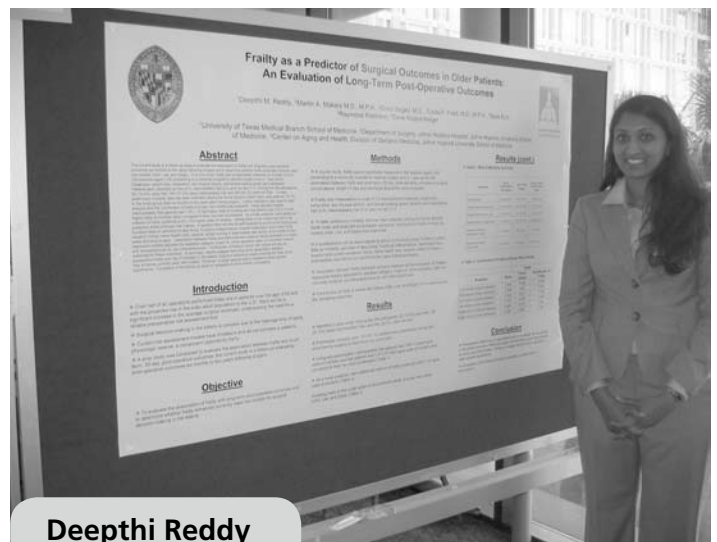
Eric Rosenberger

Project title: Fischer 344 x Brown Norway rats and DBDB knockout mice: Short-term consequences of type 1 and 2 diabetic hyperglycemia in rodent models



Roberto Moreno

Project title: The Effect of 3-NPA and the Anti-Oxidant, NtBHA, on the p38-mediated MAPK pathway



Deepthi Reddy

(completed summer research program at Johns Hopkins)

Project title: Frailty as a predictor of surgical outcomes in older patients: An evaluation of long-term post-operative outcomes

RECENT PUBLICATIONS FROM SCSA FACULTY AND STUDENTS

- Børsheim E, Bui Q-U.T, Wolfe RR.** 2007. "Plasma amino acid concentrations during late rehabilitation in patients with traumatic brain injury." *Archives of Physical Medicine and Rehabilitation*, 88(2):234-8.
- Boylston WH, DeFord JH, Papaconstantinou J.** 2006. "Identification of longevity-associated genes in long-lived Snell and Ames dwarf mice." *Age*, 28, 125-144.
- Eschbach K, Kuo YF, Goodwin JS.** 2006. "Errors in ascertainment of Hispanic ethnicity on the California death certificate: Implications for the explanation of the Hispanic mortality advantage." *American Journal of Public Health*, 96:2209-2215.
- Eschbach K, Stimpson JP, Kuo YF, Goodwin JS.** 2007. "Mortality of foreign-born and US-born Hispanic adults at younger ages: a reexamination of recent patterns." *American Journal of Public Health*, 97(7):1297-304.
- Fitts RH, Romatowski JG, Peters JR, Paddon-Jones D, Wolfe RR, Ferrando AA.** 2007. "The deleterious effects of bed rest on human skeletal muscle fibers are exacerbated by hypercortisolemia and ameliorated by dietary supplementation." *American Journal of Physiology: Cell Physiology*, Jul;293(1): C313-20.
- Fujita S, Rasmussen BB, Bell JA, Cadenas JG, Volpi E.** 2007. "Muscle intracellular amino acid kinetics in women and men." *American Journal of Physiology: Endocrinology & Metabolism*, 292:77-83.
- Fujita S, Abe T, Drummond MJ, Cadenas JG, Dreyer HC, Sato Y, Volpi E, Rasmussen BB.** 2007. "Blood Flow Restriction during Low-Intensity Resistance Exercise Increases S6K1 Phosphorylation and Muscle Protein Synthesis." *Journal of Applied Physiology*, Jun 14.
- Fujita S, Dreyer HC, Drummond MJ, Glynn EL, Cadenas JG, Yoshizawa F, Volpi E, Rasmussen BB.** 2007. "Nutrient signaling in the regulation of human muscle protein synthesis." *Journal of Physiology*, Jul15;582(Pt 2):813-23.
- Fujita S, Rasmussen BB, Cadenas JG, Drummond MJ, Glynn EL, Sattler FR, Volpi E.** 2007. "Aerobic exercise overcomes the age-related insulin resistance of muscle protein metabolism by improving endothelial function and Akt/mammalian target of rapamycin signaling." *Diabetes*, Jun;56(6):1615-22.
- Giordano SH, Lee A, Kuo Y-F, Freeman J, Goodwin JS.** 2006. "Late gastrointestinal toxicity after radiation for prostate cancer." *Cancer*, 107(2): 423-432.
- Giordano S, Zhang DD, Kuo YF, Freeman JL, Goodwin JS.** 2006. "Use and outcomes of adjuvant chemotherapy in older women with breast cancer." *Journal of Clinical Oncology*, 24:2750-2576.
- Goodwin JS, Nguyen-Oghali T, Kuo YF, Ottenbacher K.** 2007. "Epidemiology of Medicare Abuse: the example of power wheelchairs." *Journal of the American Geriatrics Society*, 55:221-226.
- Kaushik VP, Al Snih S, Ray LA, Raji MA, Markides KS, Goodwin JS.** 2007. "Factors associated with seven-year incidence of diabetes complications among older Mexican Americans." *Gerontology*, 53(4):194-9.
- Luo R, Giordano SH, Freeman JL, Zhang D, Goodwin JS.** 2006. "Referral to medical oncology: A crucial step in the treatment of older patients with Stage II colon cancer." *The Oncologist*, 11:1025-1033
- Ostir GV, Goodwin JS.** 2006. "Anxiety in persons 75 and older: findings from a tri-ethnic population." *Ethnicity and Disease*, 16:22-27.
- Ostir GV, Goodwin JS.** 2006. "High anxiety is associated with an increased risk of death in an older tri-ethnic population." *Journal of Clinical Epidemiology*, 98 (6): 382-388.
- Paddon-Jones D.** 2006. "Interplay of stress and physical inactivity on muscle loss: nutritional countermeasures." Recent Advances in Nutritional Sciences. *Journal of Nutrition*, Aug; 136(8):2123-6.
- Reyes-Ortiz, CA, Goodwin JS, Freeman JL, Kuo YF.** 2006. "Socioeconomic status and survival in older patients with melanoma." *Journal of the American Geriatrics Society*, 54:1758-1764.
- Rotkiewicz AM, Al Snih S, Kuo J, Raji MA, Markides KS, Goodwin JS.** 2006. "Cognitive decline in older Mexican Americans with diabetes." *JNMA*, 98:1840-1847.
- Shahinian VB, Kuo YF, Freeman JL, Goodwin JS.** 2006. "Determinants of androgen deprivation use for prostate cancer: role of the urologist." *Journal of the National Cancer Institute*, 98(12): 839-845.
- Stimpson JP, Kuo YF, Ray LA, Raji MA, Peek MK.** 2007. "Risk of mortality related to widowhood in older Mexican Americans." *Annals of Epidemiology*, 17(4):313-9.
- Stimpson JP, Ju H, Raji MA, Eschbach K.** 2007. "Neighborhood deprivation and health risk behaviors in NHANES III." *American Journal of Health Behavior*, 31(2):215-22
- Stimpson JP, Eschbach K, Peek MK.** 2007. "Effect of immigrant status on risk of depressive symptoms associated with spouse's chronic conditions." *Journal of Immigrant Minority Health*, 9(1):29-34.
- Sun D, Cree MG, Zhang X-J, Børsheim E, Wolfe RR.** 2006. "Measurement of stable isotopic enrichment and concentration of long chain fatty acyl-carnitines in tissue by ion-pairing HPLC/MS." *Journal of Lipid Research*, 47(2):431-439.
- Tan A, Freeman DH, Goodwin JS, Freeman JL.** 2006. "Variation in false-positive rates of mammography reading among 1067 radiologists: a population based assessment." *Breast Cancer Research and Treatment*, 100:309-318
- Wilkinson GS, Kuo YF, Freeman JL, Goodwin JS.** 2007. "Intravenous bisphosphonate therapy and inflammatory conditions or surgery of the jaw: a population-based analysis." *Journal of the National Cancer Institute*, 99(13):1016-24.



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Information

Contact Tony DiNuzzo, Ph.D., at (409) 772-5367, or the Sealy Center on Aging, (409) 747-0008, for information regarding items in this issue.

THE SEALY CENTER ON AGING at UTMB has openings for pre-doctoral and post-doctoral positions for Fall of 2008. Funded by a training grant from the National Institute on Aging, these research positions focus on the health of older minorities, with a particular emphasis on older Hispanics. Fellows will collaborate with any of more than 15 center faculty with more than \$42 million in ongoing aging research in the areas of medical outcomes, health service utilization, social epidemiology, psychosocial stress, and health promotion as they pertain to older minorities. The pre-doctoral stipend is approximately \$20,000; post-doctoral stipends range from \$36,000–\$51,000 depending on experience level. Applicants must be U.S. citizens or permanent residents. Applicants should send a letter stating research interests, relevant prior training, and curriculum vitae to: Jean Freeman, Ph.D., Sealy Center on Aging, The University of Texas Medical Branch, 301 University Blvd., Galveston, TX, 77555-0460. Email: jfreeman@utmb.edu.

UTMB is an equal opportunity, affirmative action institution which proudly values diversity. Candidates of all backgrounds are encouraged to apply.

Donations and Bequests UTMB's Sealy Center on Aging welcomes contributions to further geriatric research, education and training. You can help by contributing to the Fund for the Study of Aging, or contact us for information on how to select a particular program to support. Donations can be made to honor an individual and are deductible for income tax purposes to the extent allowed by law. Donations and bequests may be sent to:

The Fund for the Study of Aging
The Sealy Center on Aging
UTMB Office of University Advancement
301 University Blvd.
Galveston, TX 77555-0842

Please direct inquiries to: (409) 772-3950.

For more information on the Sealy Center on Aging, please go to our web site: <http://www.utmb.edu/aging/>