During the last century we have witnessed a steady increase in life expectancy, with the anticipation that by 2050 the number of people over 60 years of age will double compared to today. This aging population will have a major impact on the future design of healthcare systems as an aging population is more likely to present with medical issues and diseases.

A group of diseases that may manifest differently in an aging population are rheumatic diseases. Age-related changes of the immune system and the musculoskeletal system, as well as changes in the drug pharmacokinetics and adverse events in the elderly, are some of the components that require unique diagnostic and therapeutic attitudes, which serve as the basis for the book *Rheumatic Disease in Geriatrics: Diagnosis and Treatment* Gleb Sloboedin and Yehuda Shoenfeld (Eds).

The first section of the book discussed the physiological and pathophysiological changes that characterize aging populations, changes with which most people may be less familiar. One chapter includes a discussion of aging of the skeletal and the immune systems and age-dependent epigenetic changes. An important chapter is devoted to the effect of aging on the pharmacokinetics of drugs and the different approach to adverse drug events.

For example, as the authors emphasize, according to the Beers Criteria, which deals with medications in the elderly, chronic use of non-steroidal anti-inflammatory drugs, which is widely practiced in rheumatic diseases, should be avoided in the elderly.

In the second section, the authors discussed the interpretation of laboratory tests and imaging tests in the elderly. For example, the observation that autoantibodies are present in a large percentage of healthy elderly individuals without any clinical signs of autoimmune diseases requires a different interpretation of those tests.

The next section of the book deals with the manifestations of common rheumatic diseases in the elderly, including chronic diseases that may have started at a younger age as well as diseases that first manifested at an older age.

The third section of the book deals with the clinical approach to elderly patients who present with clinical manifestations of musculoskeletal problems such as monoarthritis, polyarthritis, back pain, and general musculoskeletal pain with emphasis on the differential diagnosis of these symptoms in the aging population and the diagnostic and therapeutic implications.

This textbook is a comprehensive and thorough review of the field of geriatrics and rheumatic diseases and will definitely serve as an important guide for primary physicians, gerontologists, and rheumatologists who treat older people with rheumatic diseases.

**Correspondence**

Dr. Y. Naparstek  
Dept. of Medicine, Hadassah Medical Center and Hebrew University–Hadassah Medical School, Jerusalem 91120, Israel  
email: yashov@hadassah.org.il

---

*Never bear more than one trouble at a time.*  
Some people bear three kinds -- all they have had, all they have now, and all they expect to have.  
Edward Everett Hale (1822–1909), American author, historian, and Unitarian minister