Newcastle 85+ Study

https://neurodegenerationresearch.eu/survey/newcastle-85-study/

Title of the cohort

Newcastle 85+ Study

Acronym for cohort

Newcastle 85+ Study

Name of Principal Investigator

Title Professor
First name Thomas
Last name Kirkwood

Address of institution where award is held

Institution Newcastle University Institute for Ageing and Health

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Funding source

Medical research council

1. The cohort includes, or expects to include, incidence of the following conditions

- Alzheimer's disease and other dementias
- Parkinson's disease
- Neurodegenerative disease in general

When studies on the above condition(s) are expected to become possible

Already possible

2a. Stated aim of the cohort

To investigate in great detail the clinical, biological and psychosocial factors associated with ageing among a fully representative cohort all born in 1921 and aged 85 at entry.

2b. Features distinguishing this cohort from other population cohorts

High recruitment rate (72%) from target population including those living in institutions and with cognitive impairment. Very extensive multi-dimensional health assessment including a wide range of functional tests and assessments, blood-based biomarkers, activity monitoring and questionnaires, as well as review of GP records.

3a. i) Number of publications that involve use of cohort to date

6

3a. ii) Up to three examples of studies to date (PI, Institution, Title of Study)

Kirkwood, Newcastle University Institute for Ageing and Health, Health and disease in 85 year olds Adamson, Newcastle University Institute of Health and Society, Dietary assessment in the Newcastle 85+ study

Jagger, Newcastle University Institute for Ageing and Health, Projections of future care needs

3b. Publication list/link to where data or publications are accessible (if available)

Collerton J, Barrass K, Bond J, Eccles M, Jagger C, James OFW, Martin-Ruiz C, Robinson AL, von Zglinicki T, Kirkwood TBL. The Newcastle 85+ study: biological clinical and psychosocial factors associated with healthy ageing: study protocol. BMC Geriatrics. 2007;7:14.

Collerton J, Collerton D, Arai Y, Barrass K, Eccles M, Jagger C, McKeith IG, Saxby BK, Kirkwood TBL. A comparison of the acceptability, feasibility and utility of computerised and pencil and paper tasks in assessing cognitive function in community dwelling older people in the Newcastle 85+ Pilot Study. Journal American Geriatric Psychiatry 2007;55:1630-1635.

Collerton JC, Martin-Ruiz C, Kenny A, Barrass K, Von Zglinicki T, Kirkwood TBL, et al. Telomere length is associated with left ventricular function in the oldest old: the Newcastle 85+ study. European Heart Journal 2007;28:172-176.

Adamson AJ, Collerton J, Davies K, Foster E, Jagger C, Stamp E, Mathers JC, Kirkwood TBL; Newcastle 85+ Study Core Team. Nutrition in advanced age: dietary assessment in the Newcastle 85+ study. Eur J Clin Nutr. 2009;63:S6-18.

Collerton J, Davies K, Jagger C, Kingston A, Bond J, Eccles MP, Robinson LA, Martin-Ruiz C, von Zglinicki T, James OF, Kirkwood TBL. Health and disease in 85 year olds: baseline findings from the Newcastle 85+ cohort study. BMJ. 2009;339:b4904.

Jagger C, Collerton JC, Davies K, Kingston A, Robinson LA, Eccles MP, von Zglinicki T, Martin-Ruiz C, James OF, Kirkwood TBL, Bond J. Capability and dependency in the Newcastle 85+ cohort study. Projections of future care needs. BMC Geriatrics 2011;11:21.

3c. Information (i.e. research findings) expected to be gained from the population cohort 4a. Study criteria: age range of participants at recruitment

Age in years from: 85
To ('until death' if applicable): 86

4b. Study criteria: inclusion criteria

Resident in Newcastle or North Tyneside and registered there with a GP.

Born in 1921

4c. Study criteria: exclusion criteria

None other than exclusion by GP as being in last stages of terminal illness or as posing a potential safety risk to a visiting member of the research team.

5. Size of the cohort (i.e. number of participants enrolled)

1,000 - 5,000 participants

6a. Measures used to characterise participants

6b. Additional measures for participants with a clinical disorder

No

6c. Are there defined primary and secondary endpoints (e.g. defined health parameters)

No

7. Study design

Prospective cohort

8. Cases matched by

Age

9a. Does the study include a specialised subset of control participants

No

9b. If yes, description of specialised subset of control participants 10a. i) Data collection start date

01-06-2006

10a. ii) Data collection end date

31-03-2011

10a iii) Data collection for this study is

- Data collection ongoing
- Data analysis ongoing
- Closed to new patients

10b. Plans to continue the cohort study beyond the current projected end date

Yes – funding applied for

11. Data collected

Only through the study

12. System in place to enable re-contact with patients for future studies

Yes (participants have given permission to be re-contacted via the PIs to ask if they would participate in further studies)

13a. Format and availability of data stored in a database

Yes/No % available

Data summarised in database Yes 85%

Database is web-based

Database on spreadsheet Yes 85%

Database is on paper

Other (specify)

Language used:

13b. Format and availability of data held as individual records

Yes/No % available

Data held as individual records

Data is web-based

Data held on computer based records Yes 85%

Data held on cards

Other (specify)

Language used:

14a. Are data available to other groups

Yes

14b. Access policy/mechanisms for access if data are available to other groups

- Apply to PI or co-ordinator at resource
- Access Committee mechanism

15. Data sharing policy specified as a condition of use

No requirement to make data publicly available

16a. Are tissues/samples/DNA available to other groups

16b. i) Description of available tissues/samples/DNA

Living donors: blood derivatives

• Living donors: DNA

16b. ii) Form available tissues/samples/DNA are supplied in

Secondary samples: plasmaSecondary samples: DNA

16b. iii) Is the access policy/mechanism for obtaining samples the same as that for obtaining data

Yes

17. Is information on biological characteristics available to other groups

• Yes, for all the cohort