What are your professional roles and activities?
I am a clinician-scientist and professor for the Division of Geriatrics. I spend about one third of the time doing clinical work, including outpatient clinics and attending on the geriatric medicine inpatient service, geriatrics inpatient consultation service, and palliative care service at UCLA Ronald Reagan Medical Center and UCLA Medical Center, Santa Monica. I teach geriatric fellows and medical residents during their clinical rotations and give lectures on research methodologies to junior faculty members and fellows. Of course, as a clinician-scientist, I spend a lot of my time doing population-based research.

What led you to become a geriatrician?
I chose the field of geriatric medicine because I believed that I would be able to make a difference for older patients through my clinic practice as well as research. These beliefs have not changed after 16 years at UCLA. I like the complexity of caring for older adults, both in their medical management and the psychosocial aspect of their care.

What do you enjoy most about being a geriatrician?
I enjoy the interaction with my patients on a personal level, learning about their life experiences, and getting their perspective and wisdom on life.

What are the biggest challenges in geriatrics?
I believe the biggest challenge is continuing to improve healthcare for an aging population with the finite resources available to our society. This is not just providing excellent medical care to individual patients but also involves greater efficiencies in care delivery, better access, and rational financing of the care system.

What is your wish list?
My first wish is world peace, given that I have flown 117,821 miles on United Airlines so far this year and my next India trip may include the Kashmir region. I also hope to obtain additional funding that would allow me to further investigate the relationship between psychosocial factors and health in older adults. After all, why should we only treat people’s illnesses without changing the conditions that make them sick in the first place?
What is your average day like?
It is not easy to describe what my average day is like. I have both challenging and rewarding tasks that I complete. It could be a day of attending both geriatrics and palliative care services in the hospital, seeing patients at the clinic, writing manuscripts or grant proposals, or flying on a plane for a research project. Regardless of the specific activities, I could say that my average day is doing something I enjoy.

Tell us a little about your research activities.
I have focused on relationships between psychosocial factors and health in older adults living in different countries. I have been involved with the Longitudinal Aging Study in India (LASI), the China Health and Retirement Longitudinal Study (CHARLS), Indonesia Family Life Survey (IFLS), and Midlife in the United States (MIDUS) Study. These studies will not only examine the relationships between psychosocial factors in health in individual countries, but also allow for cross-country comparisons that will explore the effects of different health policies and care delivery systems. For LASI alone, we will be following a nationally representative sample of 60,000 individuals every two years.

What might someone be surprised to know about you?
I used to be a quite good ballroom dancer (at least that is what I believe).