



Preface



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Editors

Since 1992 when the topic of infectious diseases in older adults was first published in *Clinics in Geriatric Medicine*, there have been substantial progress and advances in the broad area of infections in older adults. These contributions have been made by geriatricians with interest and expertise in infections, infectious disease subspecialists with an interest in aging, and other medical and surgical specialist/subspecialists addressing infections in older patients in their practice. With the expanding aging population in both the United States and worldwide, health issues associated with aging are major personal and public health concerns. Although cardiovascular diseases, cancers, strokes, dementia, pulmonary disease, and diabetes mellitus are listed as major causes of death in older adults, in many instances the final cause of demise is complications associated with infections.

Over the nearly 25 years since the last *Clinics in Geriatric Medicine* on “geriatric infectious diseases,” we have learned much about aging and infections, such that in this current issue of *Clinics in Geriatric Medicine* we will discuss only 13 infection-related topics compared to the 17 subjects we covered in the 1992 issue of *Clinics in Geriatric Medicine*. New topics covered in this issue include intra-abdominal infections, *Clostridium difficile* and Norovirus diarrheal diseases, bone and joint infections, human immunodeficiency virus infection, and herpes zoster infection. Updated concepts of aging and immunity are included in the article on Host Resistance and Immunology of Aging as well as current and new antibiotics recommended for common infections in older adults in the Principles of Antimicrobial Therapy article. The articles on Clinical Features of Infections, Bacterial Pneumonia, Tuberculosis, Urinary Tract Infection, Infections in Long-Term Care Setting and Vaccinations have all been revised to reflect the most current information on the diagnosis, treatment, and prevention of these infections.

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