

From the Editor

Healthy aging and inequity

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Dear colleagues,

Healthy ageing is a challenging concept. The European Innovation Partnership on Active and Healthy Ageing aims to increase the average healthy lifespan in the EU with two years. At the same time, we see an increase in health inequities in many Western societies, challenges that developing countries faced for decades in much worse circumstances. The challenges we face to increase healthy ageing cannot be addressed by working from an individual perspective. From the social perspective, there is ample evidence that education, work status, income and gender significantly influences a persons' health. The place where people are born, where they grow up, work and age contributes significantly to people's health and life expectancy.

JBMR supports IOS Press' actions relating to the Sustainable Development Goals (SDGs) and commits to their diversity and inclusion statement: "We advocate for sustainable practices in the scholarly ecosystem and act as a champion for the SDGs. We are committed to developing and building on our own sustainable practices to support the SDGs, with targets and actions established through a dedicated working group." JBMR's goal is to have better international, discipline, sex, and specialty area diversity.

As you can conclude from the above, healthy ageing is not a concept that starts from retirement; more, it starts from the conception. The genes that have been passed through by parents will set a basis for risks and opportunities for a healthy life. Research on healthy musculoskeletal ageing should start early on, and many risk factors for musculoskeletal disorders are not well known.

In the current issue of JBMR, we see authors picking up this important challenge. We start this issue with a publication of Agnieszka and colleagues that retrospectively studied the prevalence of asymmetry and muscle tone in the first year of life of children with idiopathic scoliosis. The authors conclude that both may be important in the development of scoliosis, which may in an early state be addressed by musculoskeletal therapists. Another study by Schwertner and colleagues addresses the childhood population and studied the awareness of postural habits and prevalence of low back pain in children between 15–18 years. They found amongst other findings a point prevalence of 27% of low back pain in this population.

In the working population in Saudi Arabia, Algarni found that the majority of workers experience a form of musculoskeletal pain with neck and low back pain being reported the most. The author concludes that there is much work from the employer's context to address and pay attention to musculoskeletal health of their employees.

In two studies in this issue (Tüttüncüler et al. and Kataoka et al.), specifically the elderly are addressed.

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The first addresses balance and consequently, the risk of falling after a uni- versus a bilateral total knee arthroplasty, while the second addresses the psychological consequences of spinal compression fractures.

Taken together, this issue is filled with healthy ageing research, covering important domains of musculoskeletal health from the first year of life, to arthritis and fractures in the elderly. It is with great pleasure that the Editor's Choice is awarded to Schwertner and colleagues, who raised awareness once more that prevalence of low back pain in young people is very high, and that pos-

ture, lifestyle and movement may contribute to healthy development.

I hope you enjoy reading this issue.

Remko Soer
Editor-in-Chief