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## Reply to: A Body of Work, A Missed Opportunity: Dyadic Research in Older Adults

Catherine Riffin, PhD<sup>1,a</sup>, Peter H. Van Ness, PhD, MPH<sup>2</sup>, Lynne Iannone, MA<sup>3</sup>, and Terri Fried, MD<sup>2,3</sup>

<sup>1</sup>Division of Geriatrics and Palliative Medicine, Department of Medicine, Weill Cornell Medicine, New York, NY

<sup>2</sup>Department of Internal Medicine, Yale University School of Medicine, New Haven, CT

<sup>3</sup>Veterans Affairs Connecticut Healthcare System, West Haven, CT

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To the Editor: We thank Buck and colleagues for taking this opportunity to provide an expanded review of the literature on dyadic relationships in older adults,<sup>1</sup> an undertaking that was not possible to accomplish in a brief report. The dyadic care typologies highlighted in their review reinforce how our findings (i.e., supportive versus conflicted caregiving relationships) fit within the expanding body of research on this topic. Further, the studies reviewed in their letter coupled with the literature reviewed in our article underscore the multidisciplinary nature of this work, suggesting the need for a coordinated, interdisciplinary approach to conducting research on dyadic relationships. We thank JAGS for bringing this research to a medically-oriented audience and for providing a platform to highlight the importance of caregiving dynamics in older adults' health care.

Buck and colleagues also raise an important point regarding our selection of study participants.<sup>2</sup> They contend that our decision to include participants with a broad spectrum of diseases reflects a lack of understanding of how older adults think about and manage their health conditions. We would like to offer an alternative to their suggestion: If, as Buck and colleagues acknowledge, disease management is driven by symptoms rather than discrete diagnoses, there should be no reason to restrict our research to a single index condition. Furthermore, while it is true that many aspects of self-care and disease management are based on symptoms, the burdens of and tasks required to manage specific diseases are not identical.<sup>3–6</sup> To capture a broad array of disease management tasks, we sought to be as inclusive as possible in selecting study participants. We continue to believe that a strength of our manuscript is that it does not rely on a single index condition, but rather includes a range of conditions.

In sum, we appreciate Buck and colleagues for providing additional context for our findings. The literature presented in their letter underscores the significance of understanding dyadic

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<sup>a</sup>To whom correspondence should be addressed: Catherine Riffin, Division of Geriatrics, Department of Medicine, Weill Cornell Medicine, 525 East 68<sup>th</sup> Street, Box 39, New York City, NY 10065, Telephone: 781-454-6126. [acr2213@med.cornell.edu](mailto:acr2213@med.cornell.edu). Author contributions: Riffin drafted the letter. All authors reviewed and approved this letter prior to submission.

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caregiving relationships and the need for interdisciplinary approaches to addressing this complex and critically important area of research.

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