

## IN BRIEF ...

# HUMAN RIGHTS AND NEUROTECHNOLOGIES' IMPACT ON OLDER PERSONS – ASSESSING THE BENEFITS AND RISKS

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## INTRODUCTION

The intersection of neurotechnology and geriatric medicine represents one of the most promising yet ethically complex frontiers in contemporary healthcare innovation. As global populations age rapidly, with the World Health Organization projecting that the number of people aged 60 and above will increase from 1 billion in 2020 to 2.1 billion by 2050, the burden of age-related neurological conditions continues to escalate.<sup>1</sup>

Neurotechnologies, encompassing a broad spectrum of devices and interventions that interface directly with the nervous system offer unprecedented opportunities to address cognitive decline, motor impairments, and neuropsychiatric conditions prevalent in elderly populations.<sup>2</sup> There is a growing recognition that older persons may benefit significantly from tailored neurotechnological interventions. However, the unique physiological, cognitive, and social characteristics of aging populations necessitate careful consideration of both therapeutic potential and associated risks.<sup>3</sup>

This briefing seeks to provide a comprehensive framework for understanding current neurotechnology developments, their specific applications for older persons, associated benefits and risks, and the critical research questions that must guide future investigation and policy development. The significance of this research area extends beyond individual patient outcomes to encompass broader societal implications, including healthcare system sustainability, intergenerational equity, and the fundamental question of what constitutes successful aging in an era of technological enhancement.

## CURRENT NEUROTECHNOLOGY DEVELOPMENTS RELEVANT TO OLDER PERSONS

### COGNITIVE ENHANCEMENT AND DEMENTIA INTERVENTION TECHNOLOGIES

The development of neurotechnologies specifically targeting cognitive decline represents a rapidly evolving field with particular relevance to elderly populations. Transcranial direct current stimulation (tDCS) and transcranial magnetic stimulation (TMS) have emerged as leading non-invasive approaches for addressing mild cognitive impairment and early-stage dementia. These technologies work by modulating neural activity in specific brain regions associated with memory formation, executive function, and attention processing.<sup>4</sup> Deep brain stimulation (DBS) applications have expanded beyond movement disorders to include experimental treatments for treatment-resistant depression and cognitive enhancement in neurodegenerative conditions.<sup>5</sup>

## **MOTOR FUNCTION RESTORATION AND MOBILITY ENHANCEMENT**

Age-related motor decline, including conditions such as Parkinson's disease, essential tremor, and general frailty, represents another major application area of neurotechnologies for older persons. Brain-computer interfaces (BCIs) are being adapted to control assistive devices, robotic exoskeletons, and smart home environments, potentially enabling elderly persons with motor impairments to maintain independence and quality of life.<sup>6</sup> Neurotechnologies have shown promise in addressing chronic pain conditions common in elderly populations, while also potentially improving mobility through targeted neural pathway activation.<sup>7</sup> Functional electrical stimulation (FES) systems are being refined to provide more natural movement patterns and reduce the risk of falls through improved balance and coordination.<sup>8</sup>

## **SENSORY RESTORATION TECHNOLOGIES**

Sensory impairments significantly impact quality of life in elderly populations, and neurotechnology offers innovative approaches to address these challenges.<sup>9</sup> Advanced cochlear implants and auditory brainstem implants are already being optimized for older persons while considering age-related changes in neural plasticity and auditory processing.<sup>10</sup> Retinal implants represent another emerging technology that may benefit older persons with age-related macular degeneration and other vision-limiting conditions.<sup>11</sup>

## **BENEFITS OF NEUROTECHNOLOGY FOR OLDER PERSONS**

### **ENHANCED QUALITY OF LIFE AND FUNCTIONAL INDEPENDENCE**

The primary benefit of neurotechnology applications for older persons lies in their potential to preserve or restore functional independence across multiple domains. Cognitive enhancement technologies may help elderly individuals maintain mental acuity longer, potentially delaying the need for intensive care interventions and preserving personal autonomy.<sup>12</sup> Motor restoration can enable continued participation in meaningful activities and reduce dependence on caregivers.

Neurotechnology therapeutics can also offer the potential for personalised interventions tailored to individual ageing trajectories and specific impairment patterns.<sup>13</sup> Emerging neurotechnologies can now be adjusted in real-time based on patient response and changing needs, providing a level of customization particularly valuable in the heterogeneous elderly population.<sup>14</sup>

### **ECONOMIC AND HEALTHCARE SYSTEM BENEFITS**

From a broader perspective, effective neurotechnology interventions for elderly persons could significantly reduce healthcare costs by delaying institutionalization, reducing hospitalization rates, and minimizing the need for intensive caregiving services.<sup>15</sup> The economic burden of age-related neurological conditions is substantial, and technologies that can extend healthy aging or slow disease progression represent important cost-effectiveness considerations for healthcare systems worldwide.<sup>16</sup>

### **SOCIAL AND PSYCHOLOGICAL BENEFITS**

Neurotechnologies may also provide significant social and psychological benefits by enabling elderly persons to maintain social connections, continue engaging in meaningful activities, and preserve their sense of identity and purpose.<sup>17</sup> Treatments that enhance communication abilities, support memory function, or improve mobility can have profound impacts on social isolation and depression, which are significant concerns in elderly populations.<sup>18</sup>

## **RISKS AND ETHICAL CONSIDERATIONS**

### **SAFETY AND PHYSIOLOGICAL RISKS**

The use of neurotechnologies in elderly populations raises unique safety concerns related to age-related changes in brain function. Elderly individuals may be more susceptible to adverse effects from neural stimulation due to altered blood-brain barrier function, increased cerebrovascular fragility, and reduced neural plasticity.<sup>19</sup> The risk-benefit profile of invasive procedures requires careful evaluation considering shorter life expectancy and higher surgical risks.<sup>20</sup>

### **COGNITIVE AND PSYCHOLOGICAL RISKS**

The potential for neurotechnologies to alter personality, decision-making capacity, or sense of self in older persons constitutes a genuine human rights risk. Concerns arise as to whether cognitive enhancement technologies might create unrealistic expectations or interfere with natural ageing processes.<sup>21</sup> The possible psychological impact of becoming dependent on devices for basic cognitive or motor functions also requires careful consideration.

### **ETHICAL AND SOCIAL JUSTICE CONCERNS**

The use of neurotechnologies for treatments raises fundamental questions about distributive justice, accessibility, and the potential for creating or exacerbating health disparities. High costs associated with many neurotechnologies may limit access to wealthy individuals or well-funded healthcare systems, potentially creating new forms of inequality in ageing experiences.<sup>22</sup>

Coercion on older persons to accept technological interventions, particularly in institutional settings where the benefits may accrue primarily to caregivers or healthcare systems rather than the individuals themselves, are also of concern. Ensuring informed consent becomes more complex when dealing with individuals who may have cognitive impairments or who may not fully understand the long-term implications of neurotechnology interventions.<sup>23</sup>

## **REGULATORY AND OVERSIGHT CHALLENGES**

### **REGULATORY FRAMEWORK DEVELOPMENT**

Current legislative and regulatory frameworks applying to neurotechnologies may not adequately address the unique considerations relevant to older patients. Age-specific clinical trial requirements, safety monitoring protocols, and efficacy standards need development to ensure appropriate oversight of neurotechnology applications in older persons' treatment using neurotechnologies.<sup>24</sup>

### **HEALTHCARE INTEGRATION AND TRAINING**

The successful implementation of neurotechnology for elderly persons may require significant changes in healthcare delivery models, including specialized training for clinicians, neurologists, and other healthcare providers. Integration of neurotechnologies with existing care coordination systems and consideration of caregiver needs and capabilities will prove essential in deployment.<sup>25</sup>

## FURTHER CONSIDERATIONS:

- How might cultural attitudes toward ageing and technology acceptance influence the uptake and effectiveness of neurotechnologies interventions in different populations of older persons?
- What role should family members and caregivers play in decision-making on the application of neurotechnologies in treating older persons with cognitive impairments?
- How can artificial intelligence (AI) capabilities be integrated with neurotechnologies to provide more personalized and adaptive interventions for older persons?

## CONCLUSIONS

- The development and application of neurotechnology for elderly populations represents a complex intersection of technological innovation, clinical need, and ethical consideration. While these technologies offer significant potential benefits including enhanced quality of life, preserved independence, and improved management of age-related neurological conditions, they also present substantial risks and challenges that must be carefully addressed.
- The unique characteristics of elderly populations, including increased vulnerability, altered physiology, and complex social circumstances, necessitate specialized approaches to neurotechnologies development and implementation. Current research gaps include limited age-specific clinical trial data, inadequate understanding of long-term outcomes, and insufficient attention to human rights, ethical and social justice considerations. Successful integration of neurotechnologies into healthcare will require interdisciplinary collaboration amongst clinicians, ethicists, policymakers, and older persons themselves. Priority should be given to developing age-appropriate safety protocols, establishing ethical frameworks for implementation, ensuring equitable access, and conducting rigorous long-term outcome studies.
- The potential societal benefits of effectively harnessing neurotechnology for healthy ageing are substantial, including improved quality of life for millions of older persons, reduced healthcare costs and enhanced social and economic participation. However, realising these benefits will require careful attention to the risks and challenges identified in this analysis, as well as continued investment in research. A key objective must be to develop and implement neurotechnologies that enhance rather than replace human capabilities, preserve dignity and autonomy, and contribute to a vision of aging that emphasizes continued growth, contribution, and well-being throughout the human lifespan. This will require not only technological innovation but also social innovation in how we conceptualize and support an ageing global population.

## FURTHER RESEARCH QUESTIONS

1. **Efficacy and Safety Optimisation** How can neurotechnology interventions be optimized for the unique physiological and cognitive characteristics of older persons while maintaining safety standards? This issue encompasses the need for age-specific protocols and safety monitoring approaches that account for the heterogeneity of ageing processes.<sup>26</sup>
2. **Long-term Outcomes and Quality of Life** What are the long-term effects of neurotechnology interventions on quality of life, functional independence, and overall well-being in older persons? This concern necessitates longitudinal studies that examine not only clinical efficacy measures, but also patient-reported outcomes and indicators such as social functioning scores.

3. **Ethical Framework Development** How can legal and ethical frameworks be developed to guide the responsible implementation of neurotechnology in elderly populations, particularly regarding issues of autonomy, consent, and distributive justice?
4. **Health Equity and Access** What strategies can ensure equitable access to beneficial neurotechnology interventions across diverse elderly populations, considering socioeconomic, cultural, and geographic factors? This concern reflects the need to prevent neurotechnologies from exacerbating existing health disparities.<sup>27</sup>
5. **Integration of Neurotechnologies with Existing Care Models** How can interventions be effectively integrated into existing care models and healthcare systems to maximize benefits?

## END NOTES

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