

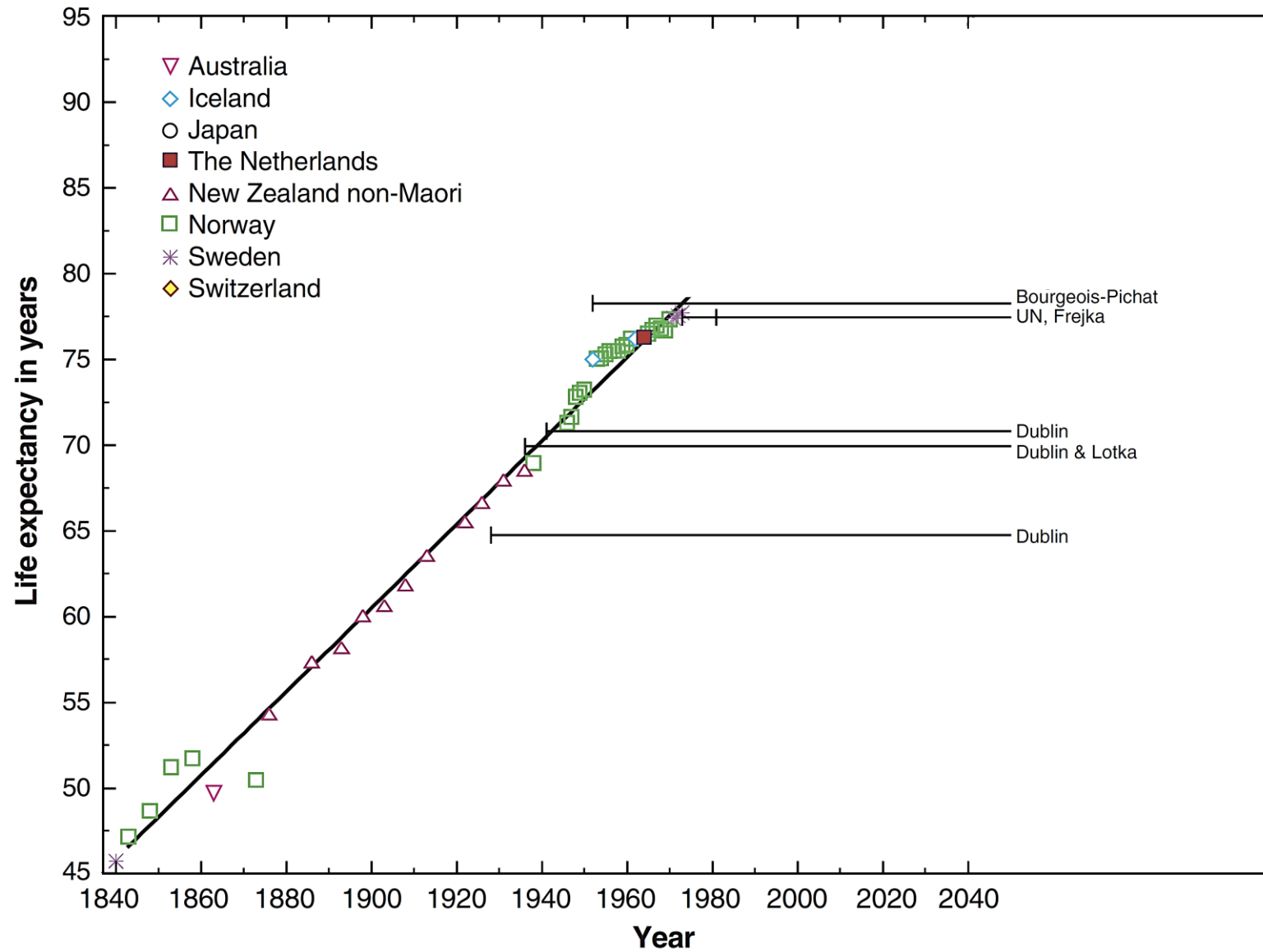
Measuring Biologic Age
January 19-20, 2022

This meeting will be held virtually via Zoom.

How we Age

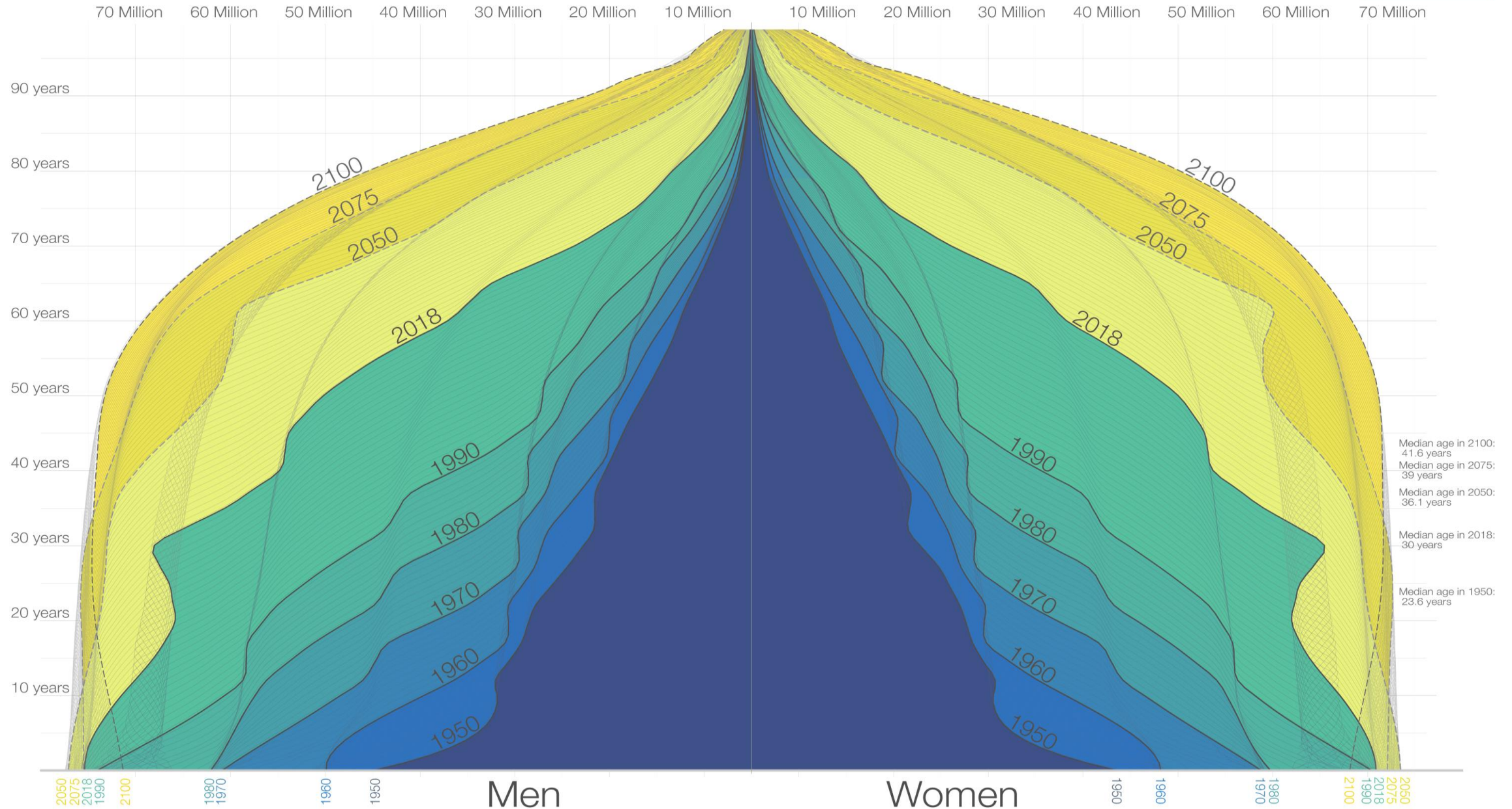
Luigi Ferrucci, MD, PhD
Intramural Research Program
National Institute on Aging, NIH
Baltimore - MD

Record female life expectancy 1840 to the present. Horizontal black lines show asserted ceilings on life expectancy, with a short vertical line indicating the year of publication (Vaupel et al 2002).



The Demography of the World Population from 1950 to 2100

Shown is the age distribution of the world population – by sex – from 1950 to 2018 and the *UN Population Division's* projection until 2100.

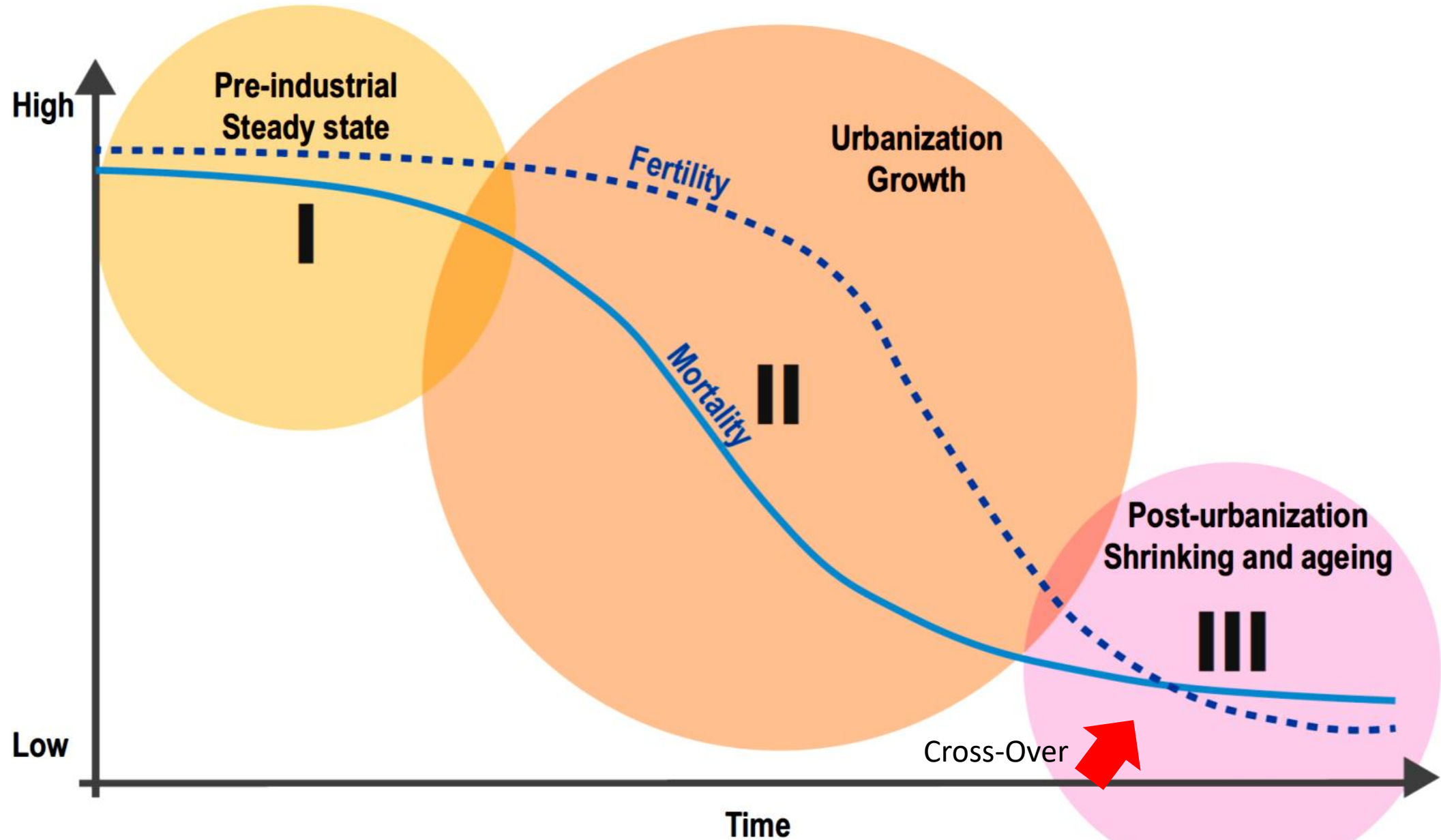


Data source: United Nations Population Division – World Population Prospects 2017; Medium Variant.

The data visualization is available at [OurWorldinData.org](https://ourworldindata.org), where you find more research on how the world is changing and why.

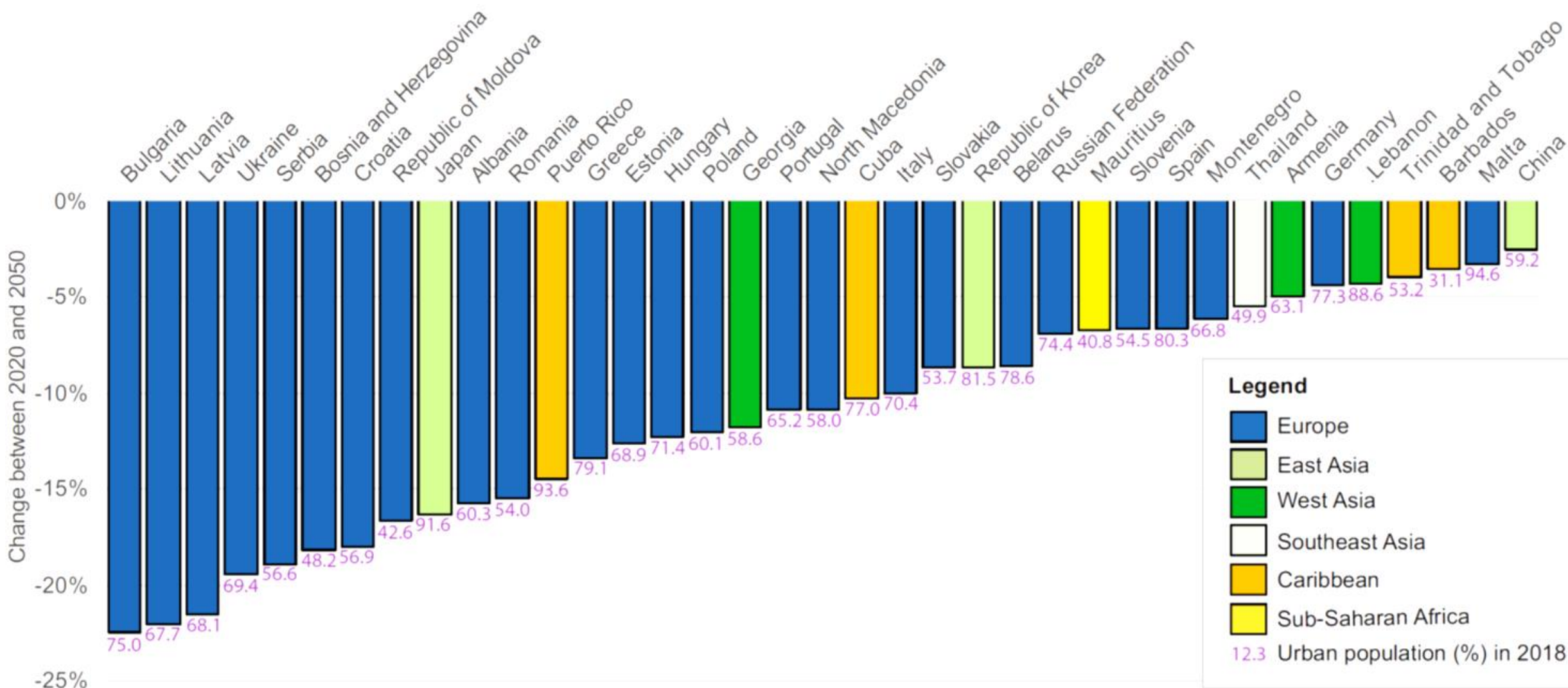
Licensed under CC-BY by the author Max Roser.

Evolution of the Relative Levels of Mortality and Fertility Rates Over Time



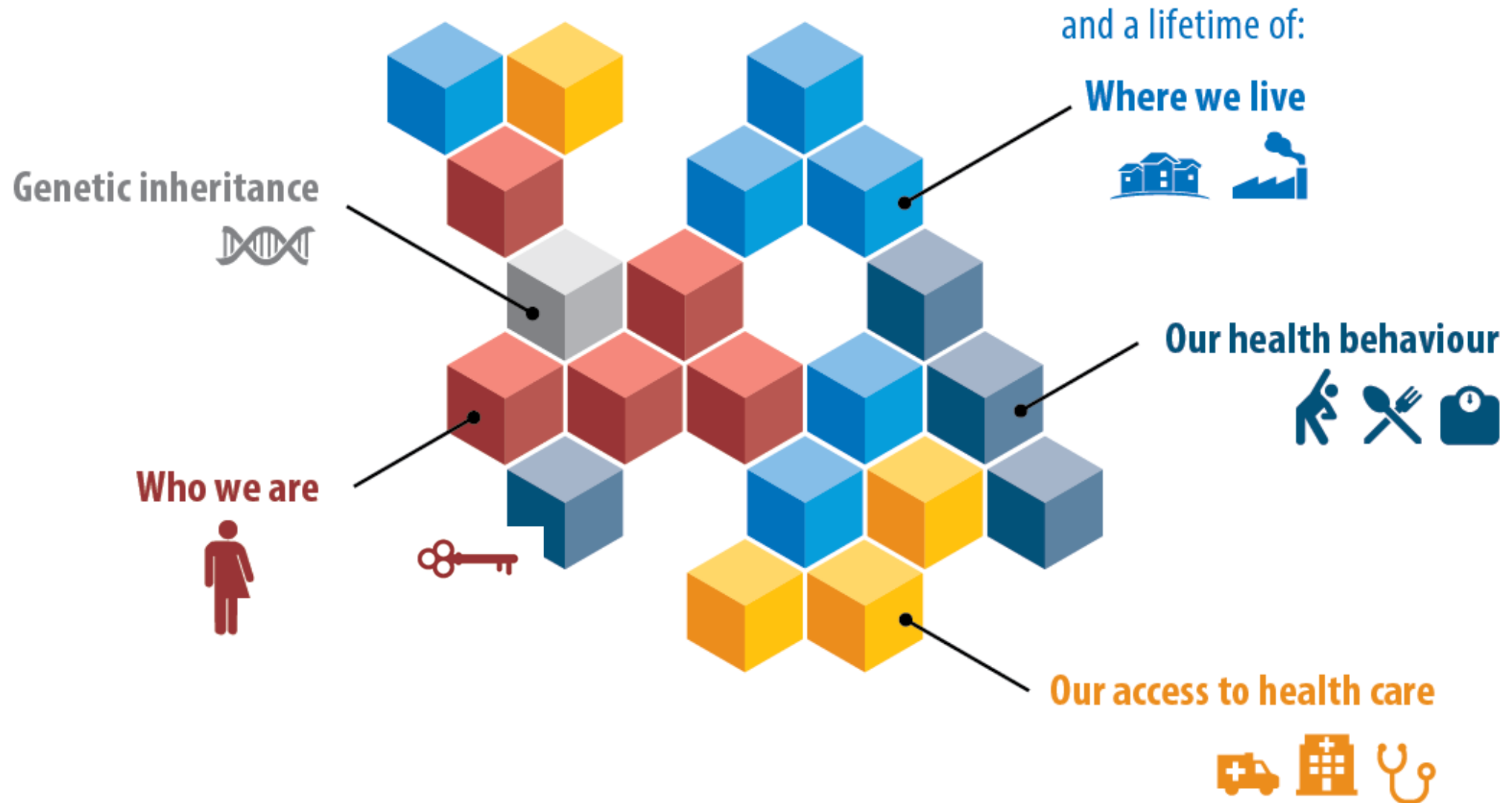
Countries with the highest projected population shrinking by 2050.

Note: The bars denote the projected fraction of population shrinking between 2020 and 2050 (in %)

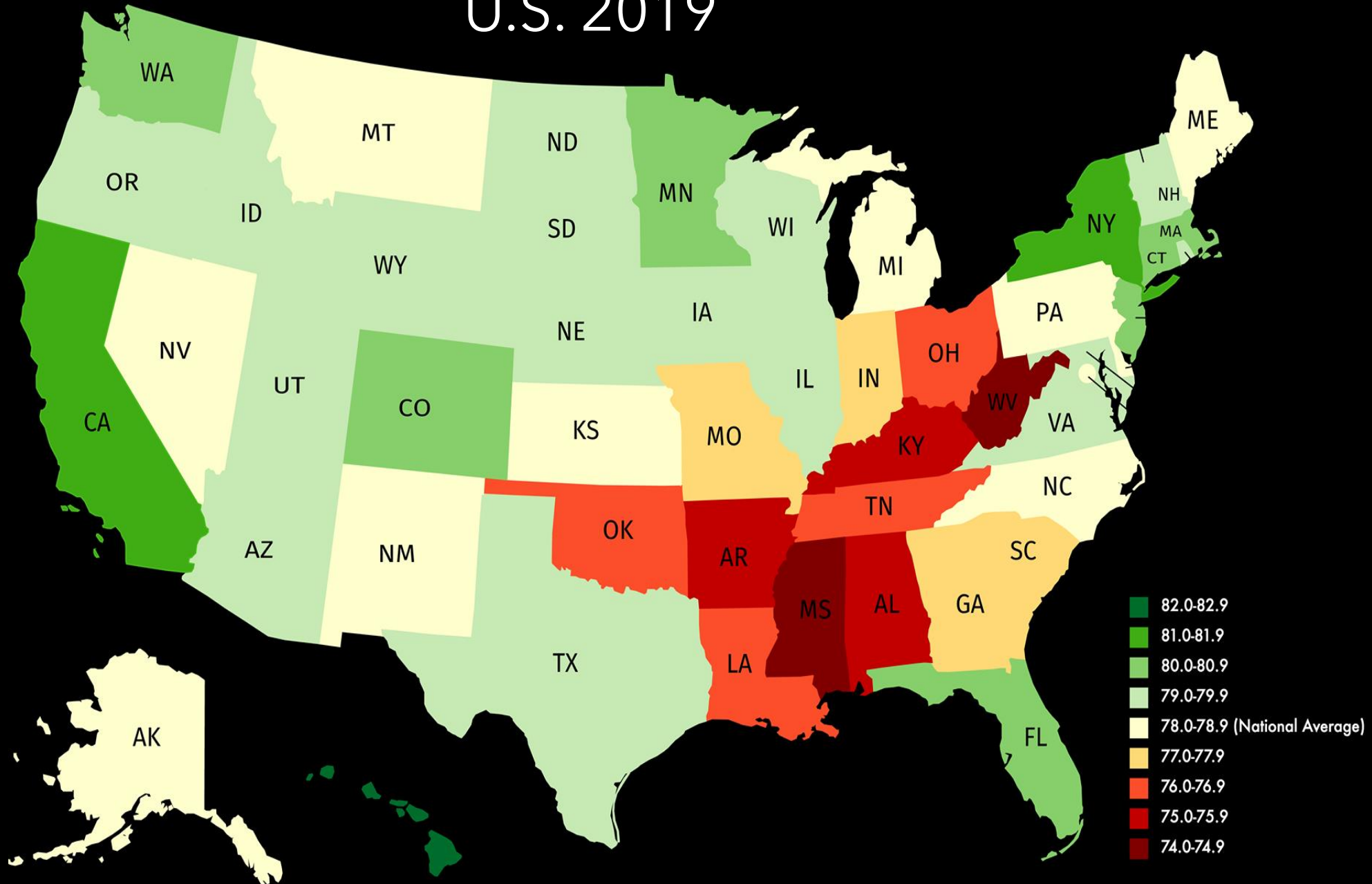


Increases in Health and Longevity are not Random

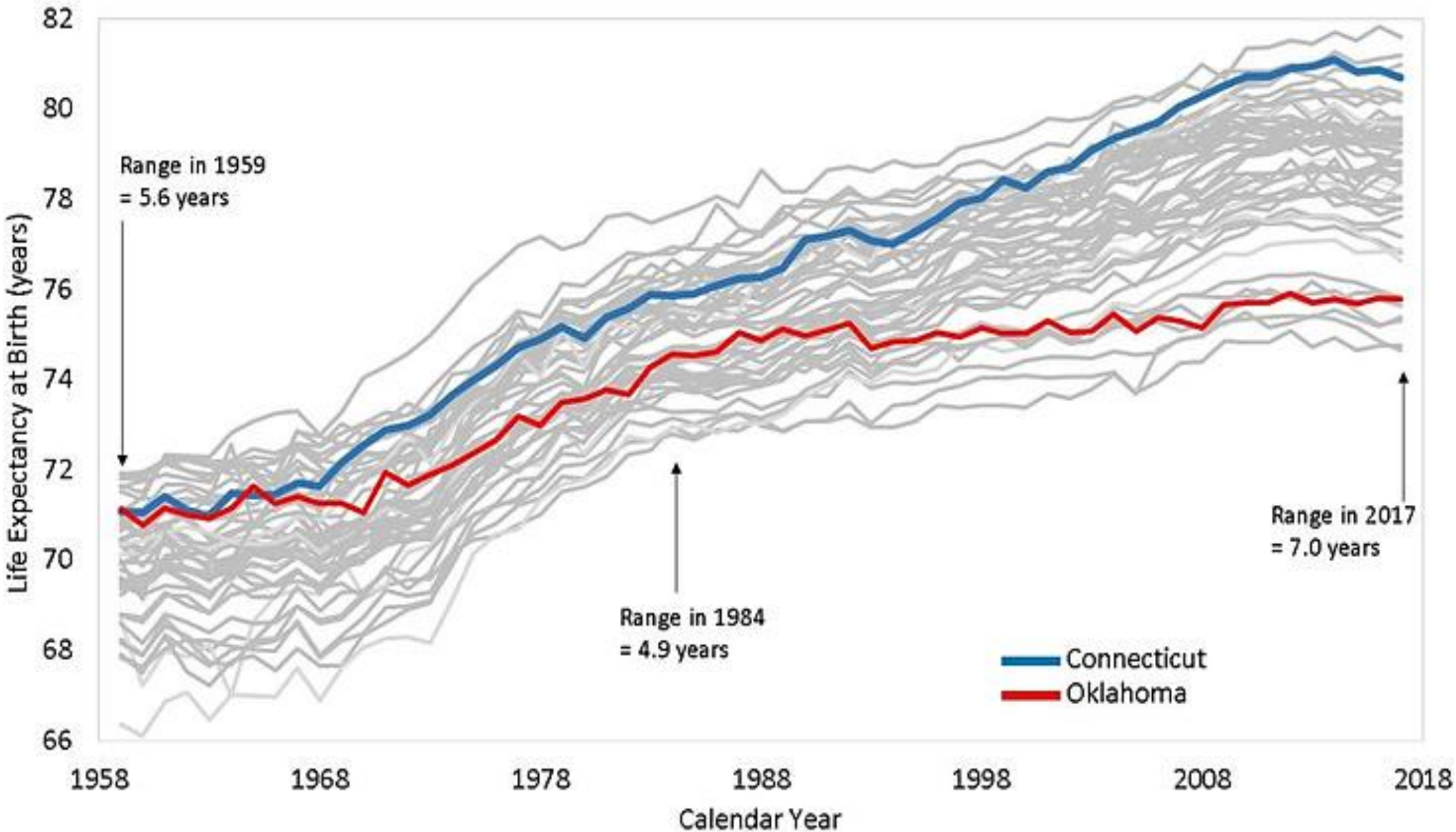
What makes us age differently?



The Map of Longevity U.S. 2019

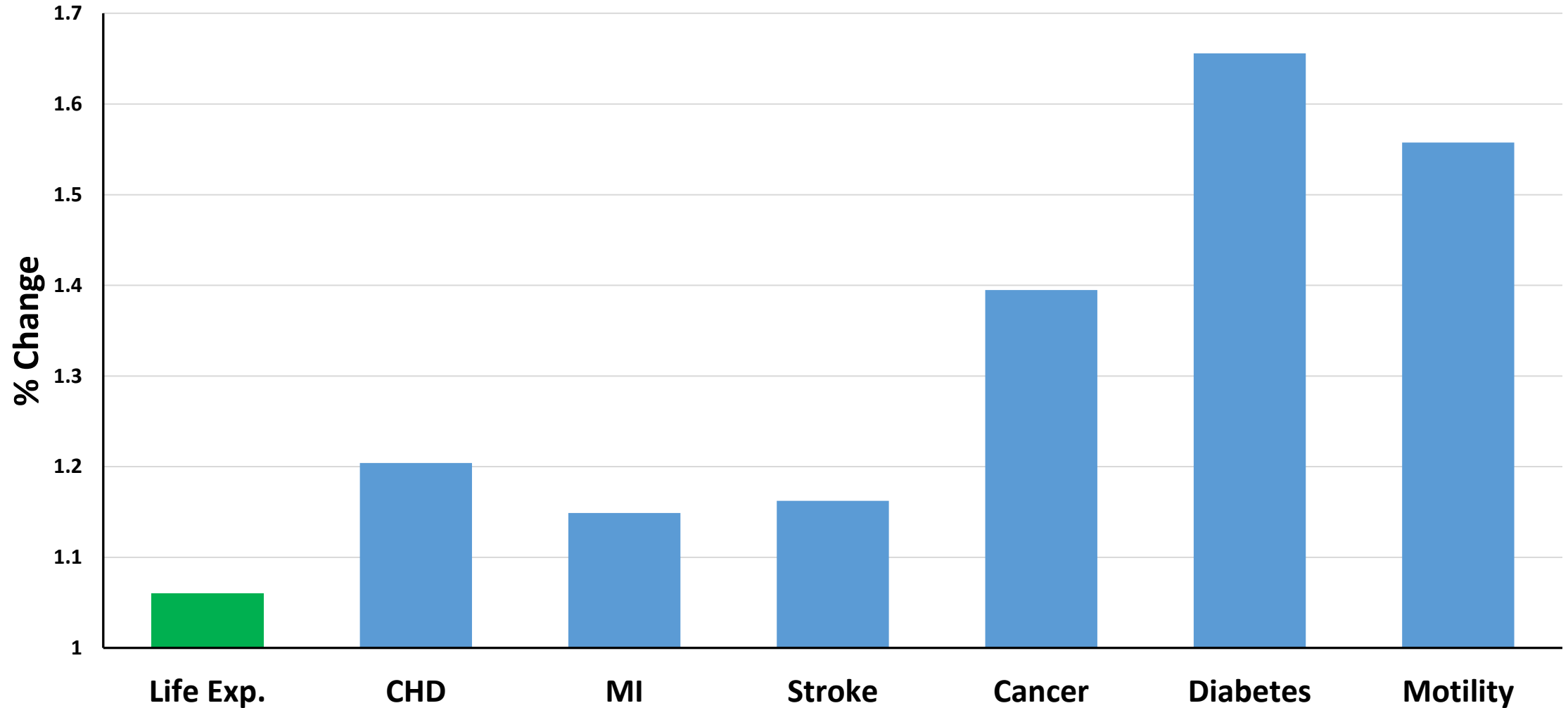


Changes in Life Expectancy at Birth Between 1958 and 2018 in Different States

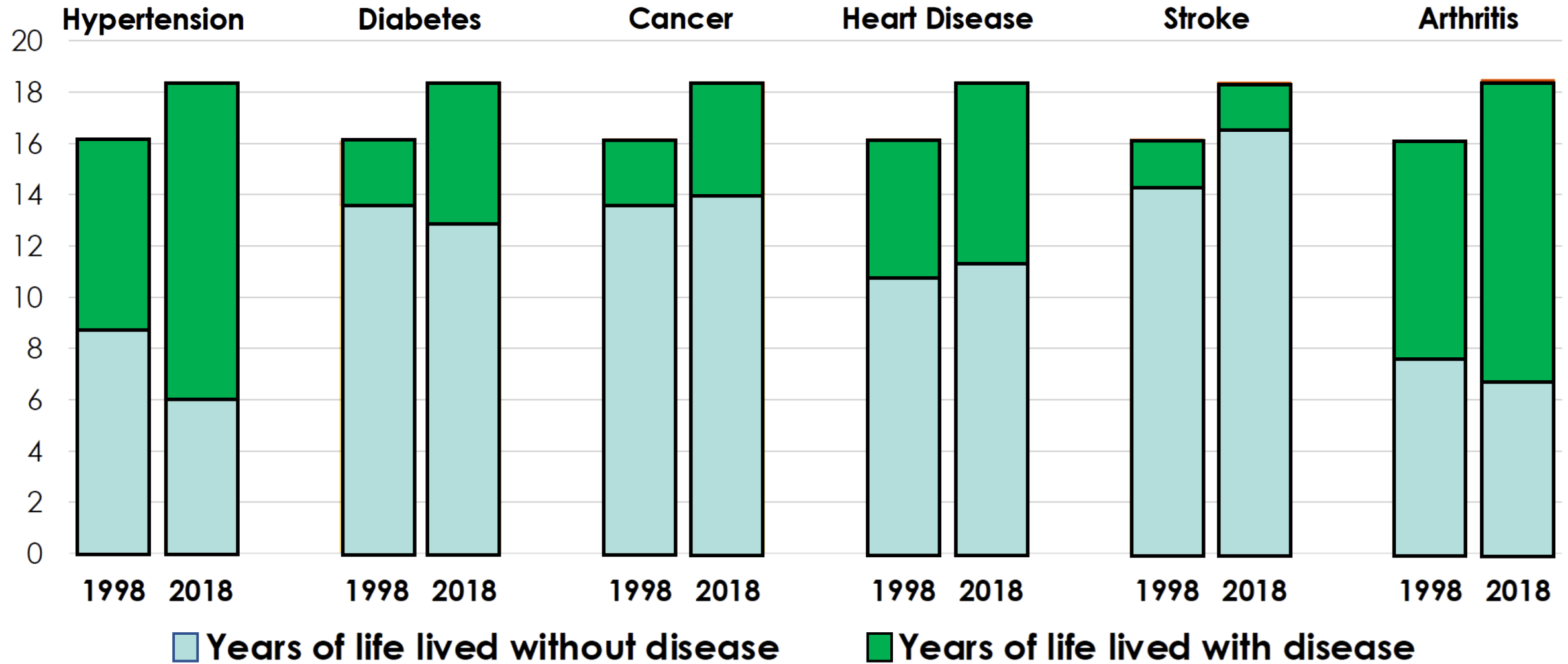


The Increase in Lifespan is not Matched by Increases in Healthspan

Changes (1998-2006) in those over 60 years old

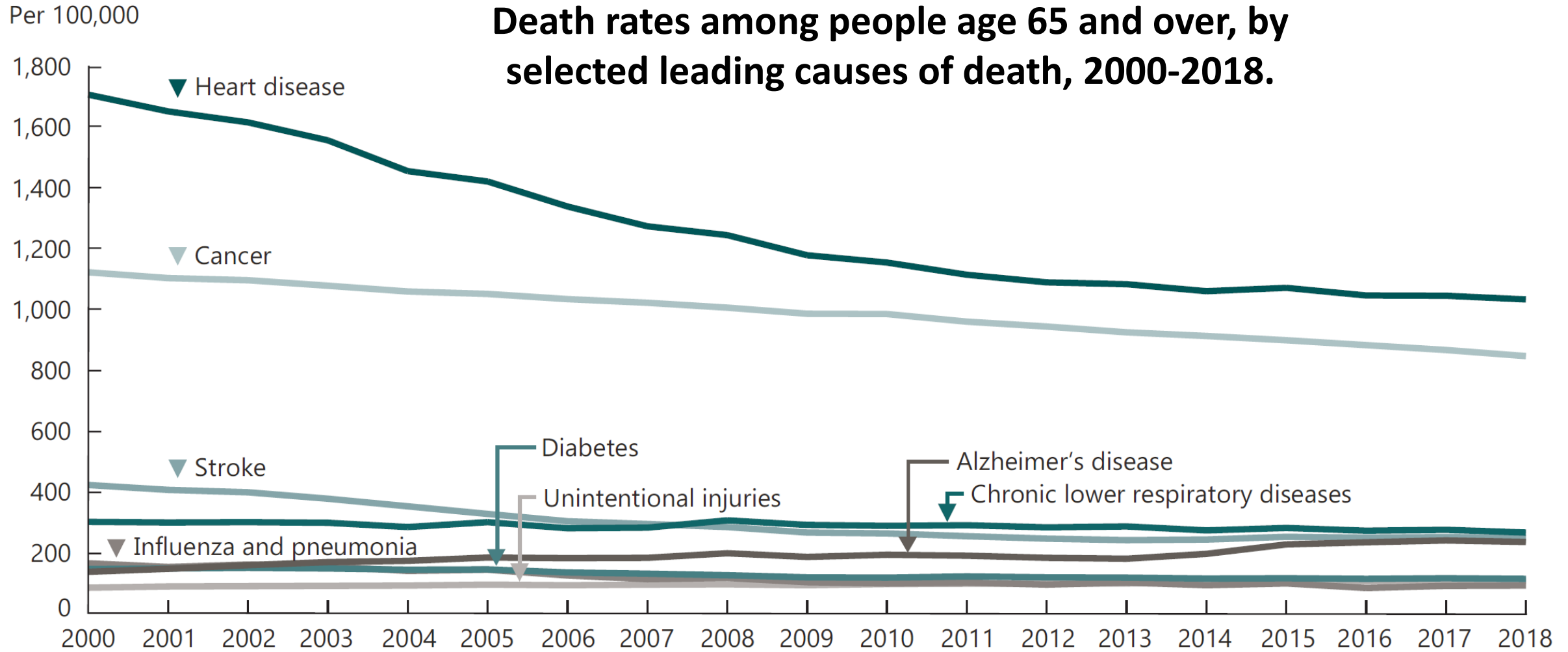


Increase over 20 years in the overall period of time that men over 65 in the U.S. lived with disease, HRS (E. Crimmins, PAA Presidential Address 2021)



The Decline of Mortality is Mostly Attributable to Cardiovascular Diseases and (to a lesser extent) Cancer. Chronic Complex Multimorbidity is on the Rise

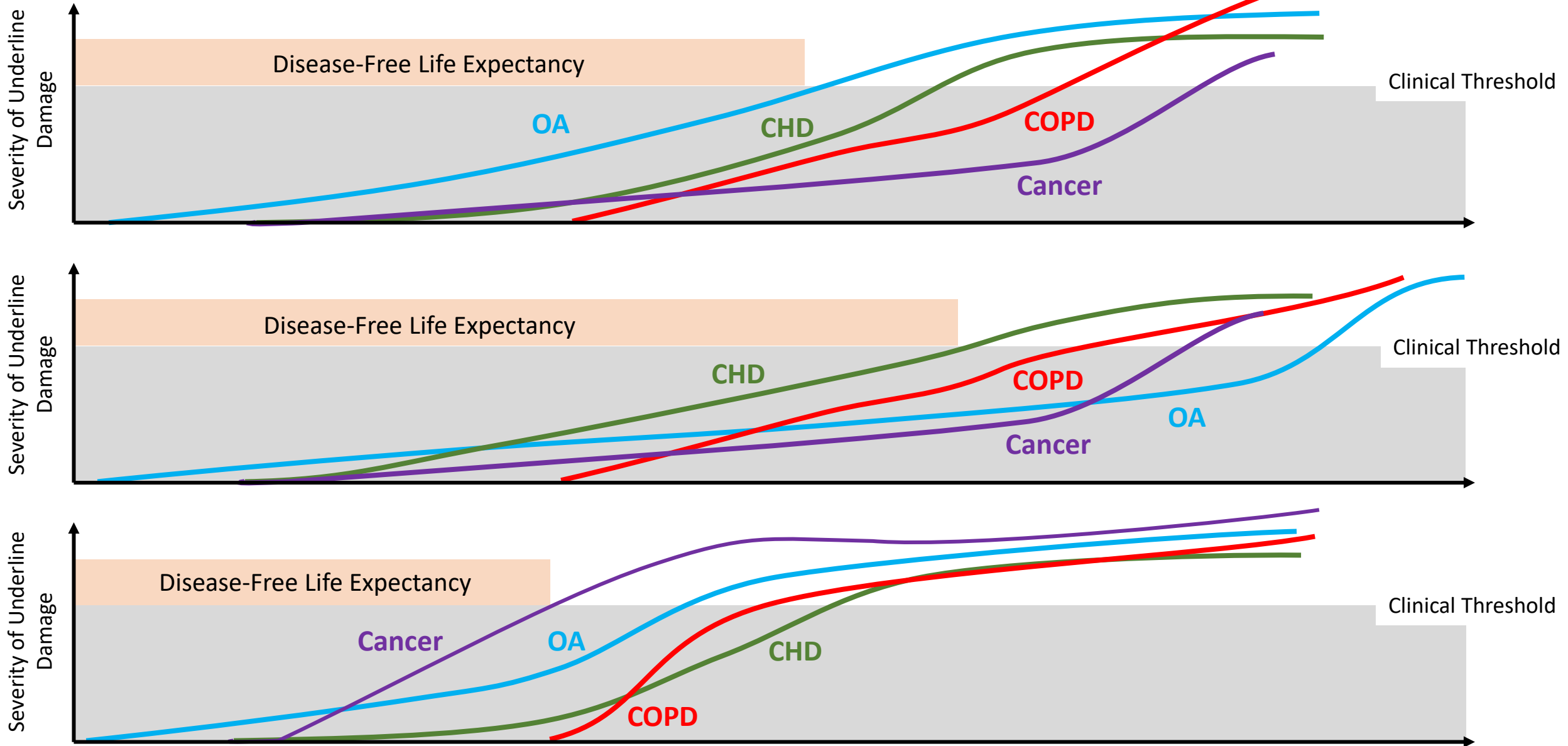
Death rates among people age 65 and over, by selected leading causes of death, 2000-2018.



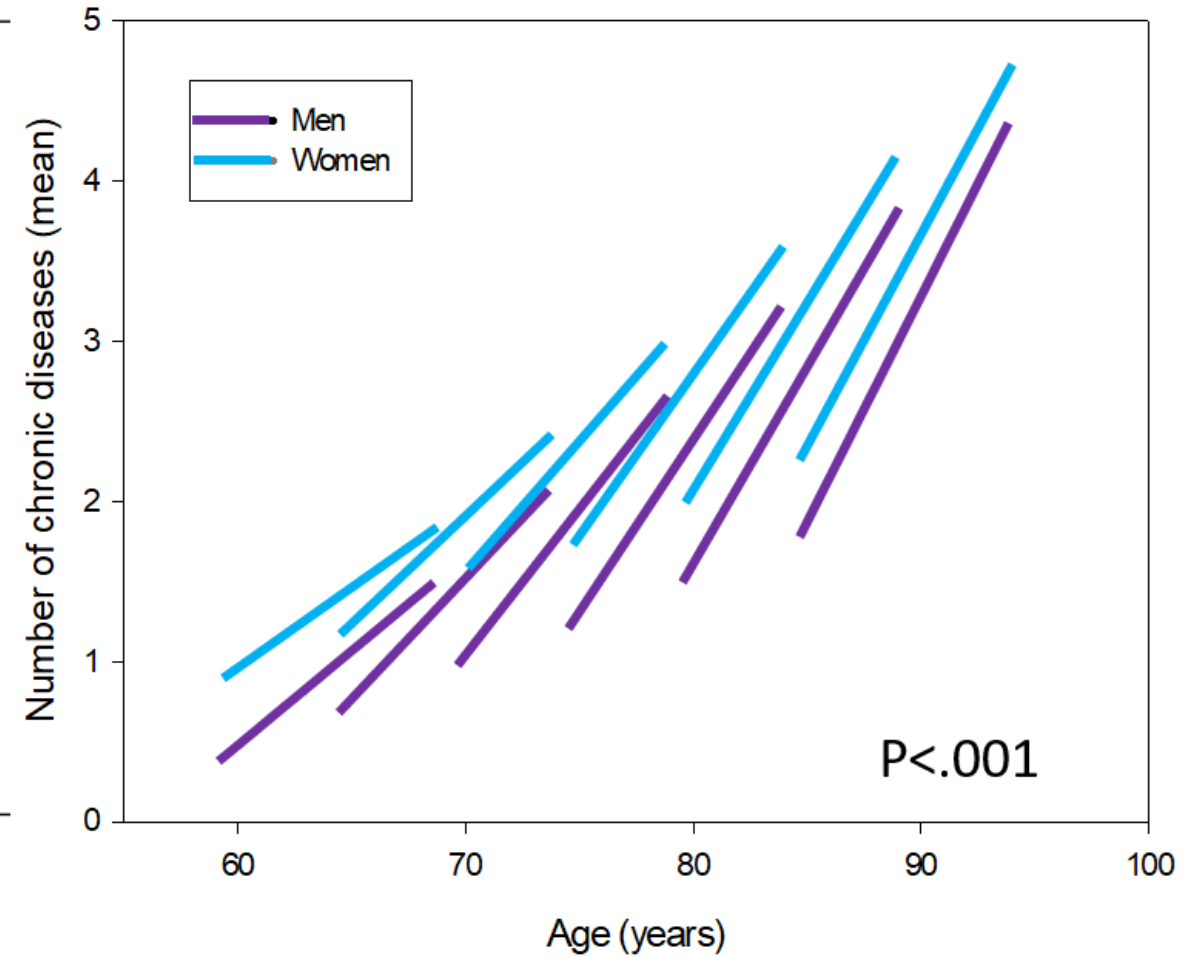
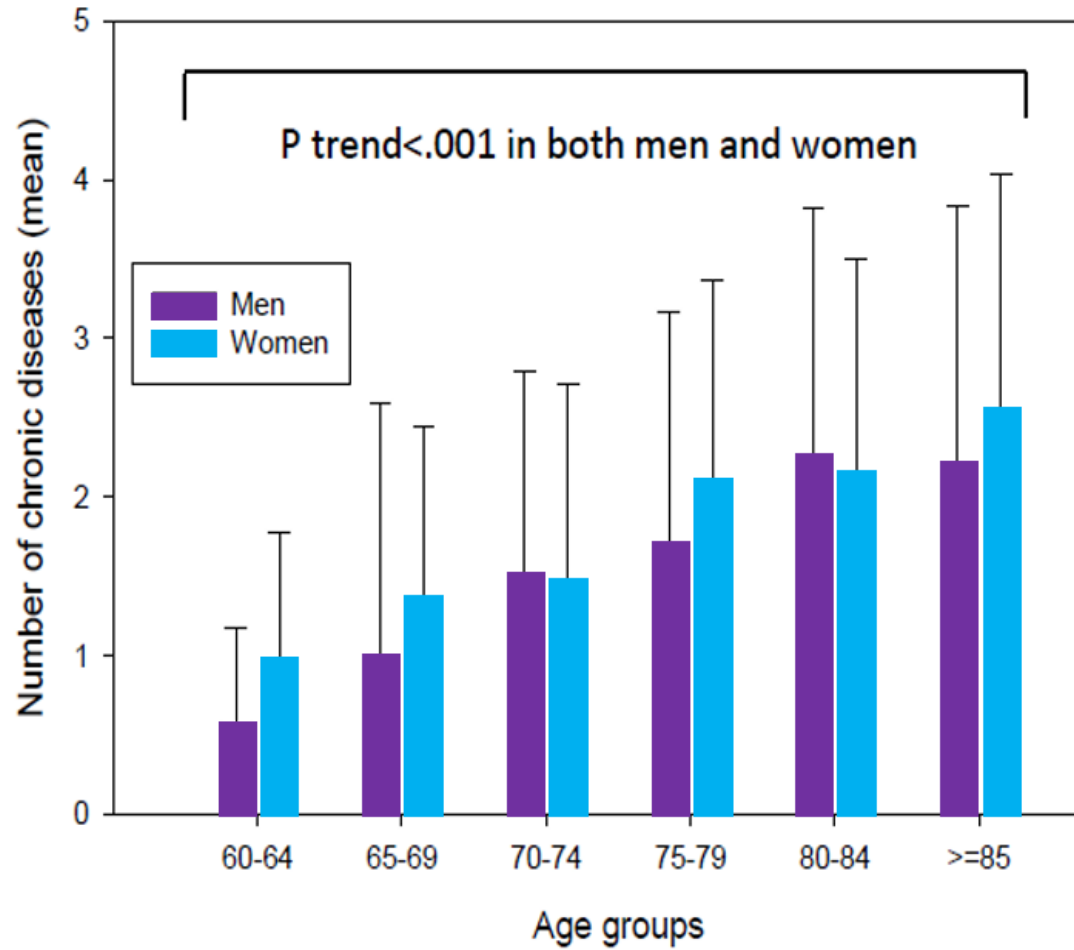
Rates are age adjusted using the 2000 U.S. standard resident population.

SOURCE: National Center for Health Statistics, National Vital Statistics System

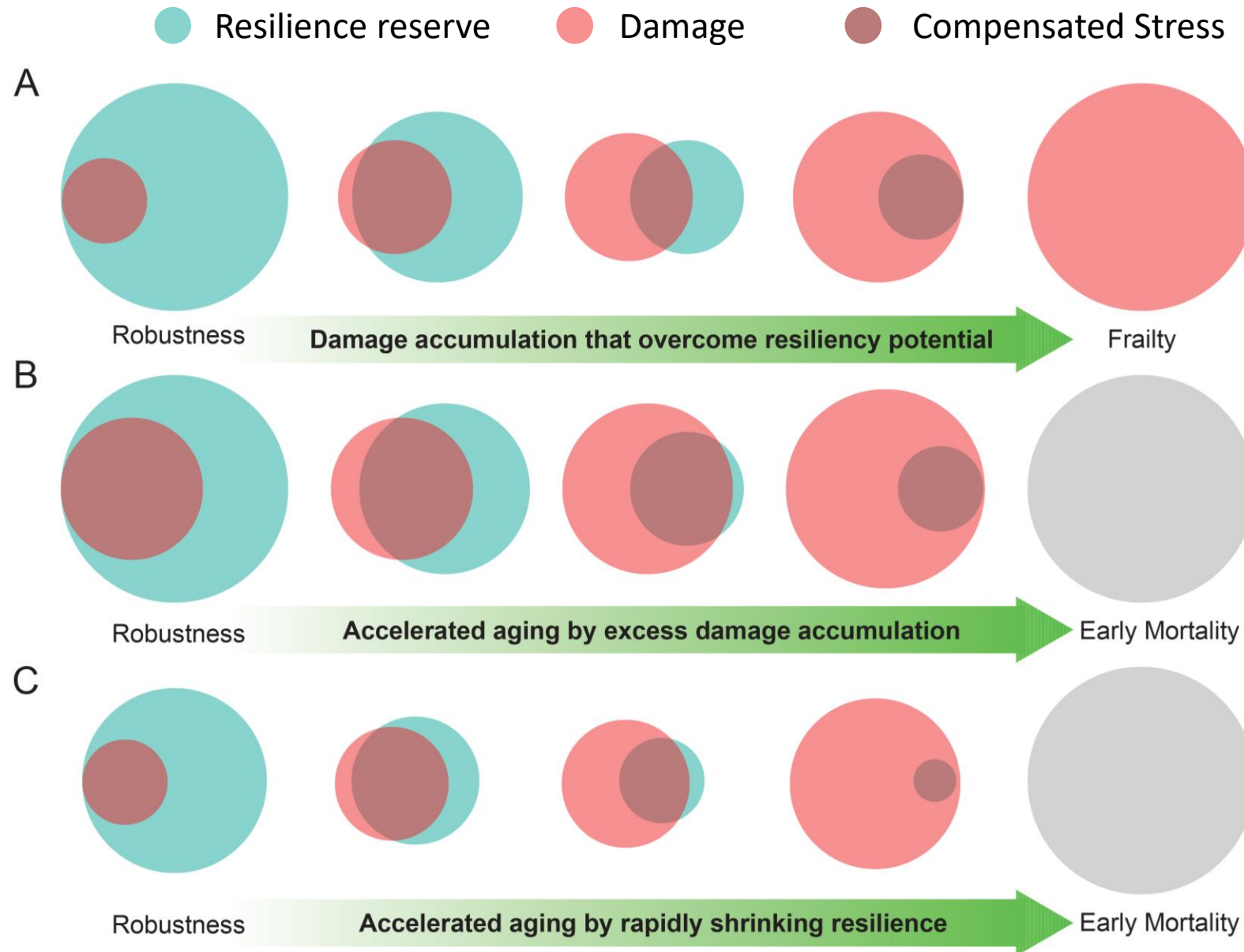
Aging is the Strongest Risk Factors for All major Age-Related Chronic Diseases

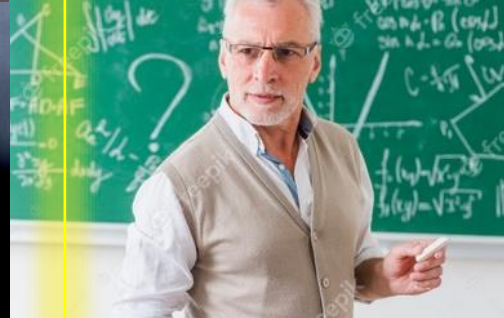
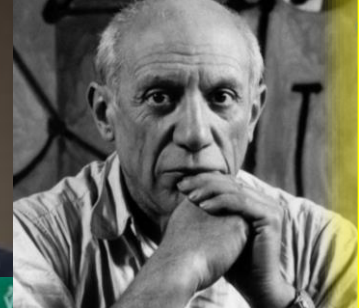
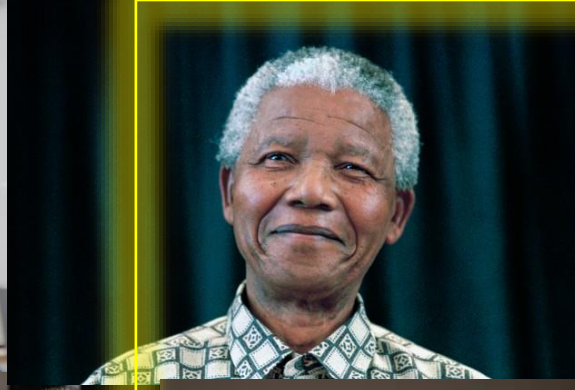


Aging and Multimorbidity



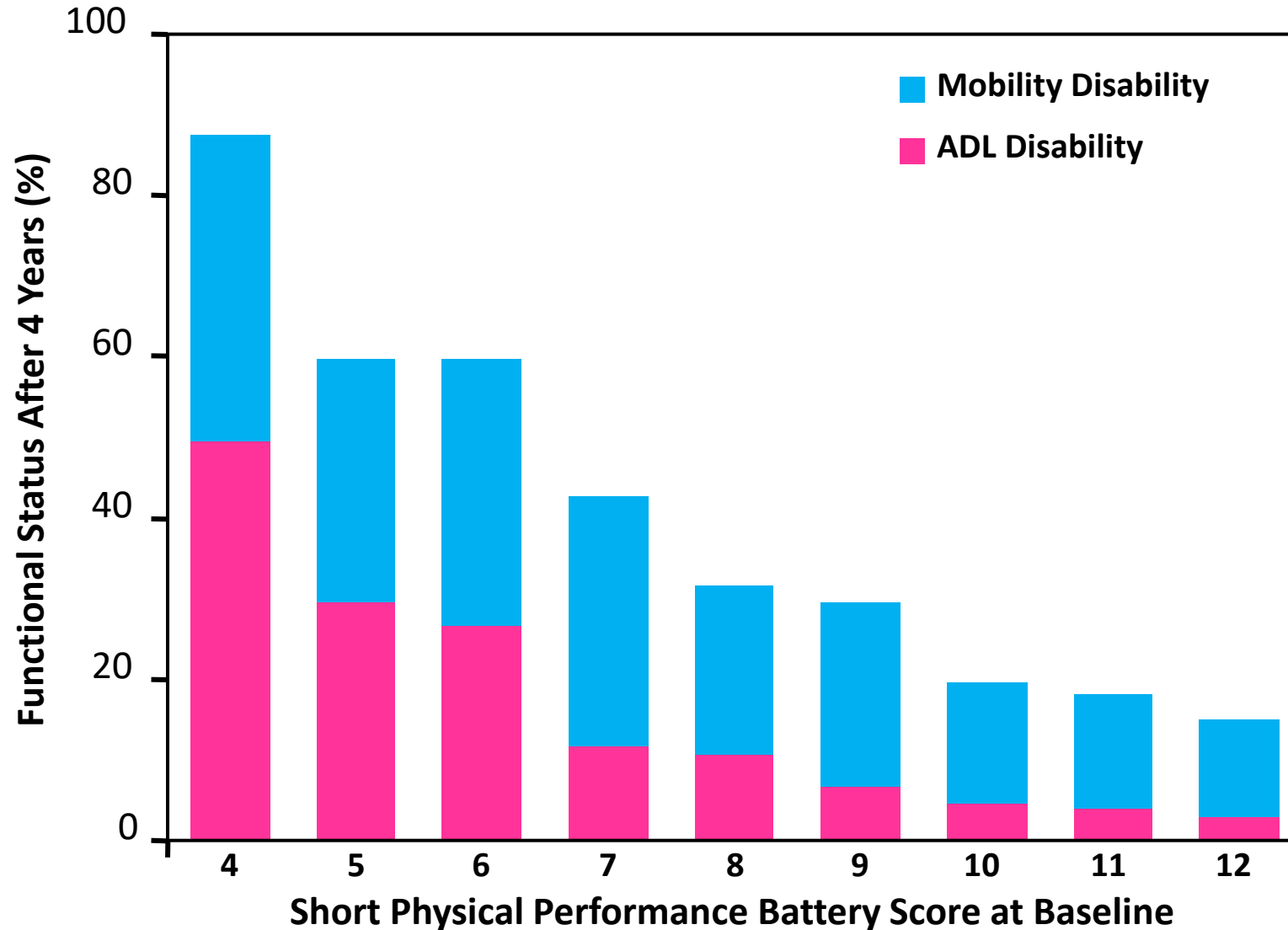
A Model of Intrinsic Aging



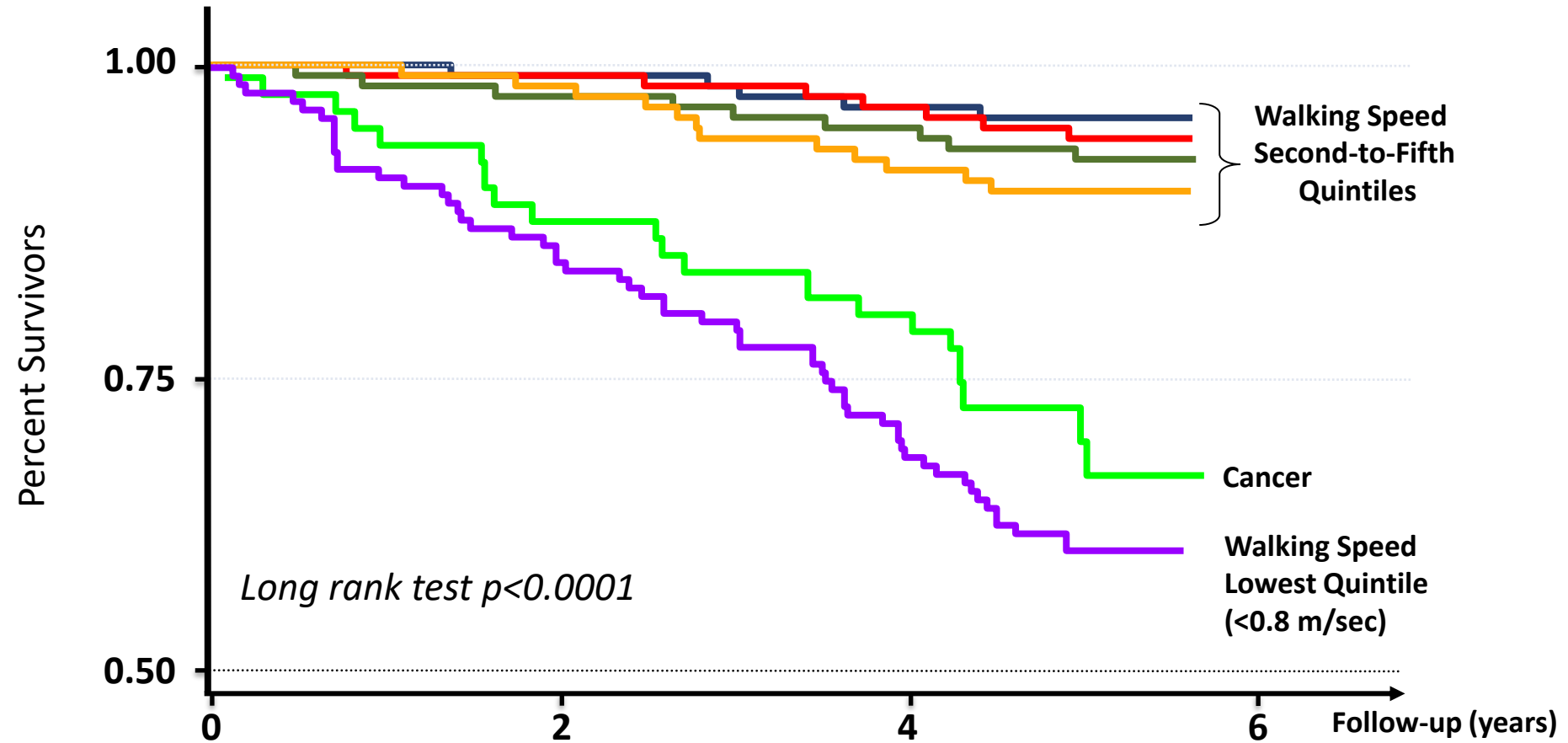


LOWER-EXTREMITY FUNCTION IN PERSONS OVER THE AGE OF 70 YEARS AS A PREDICTOR OF SUBSEQUENT DISABILITY

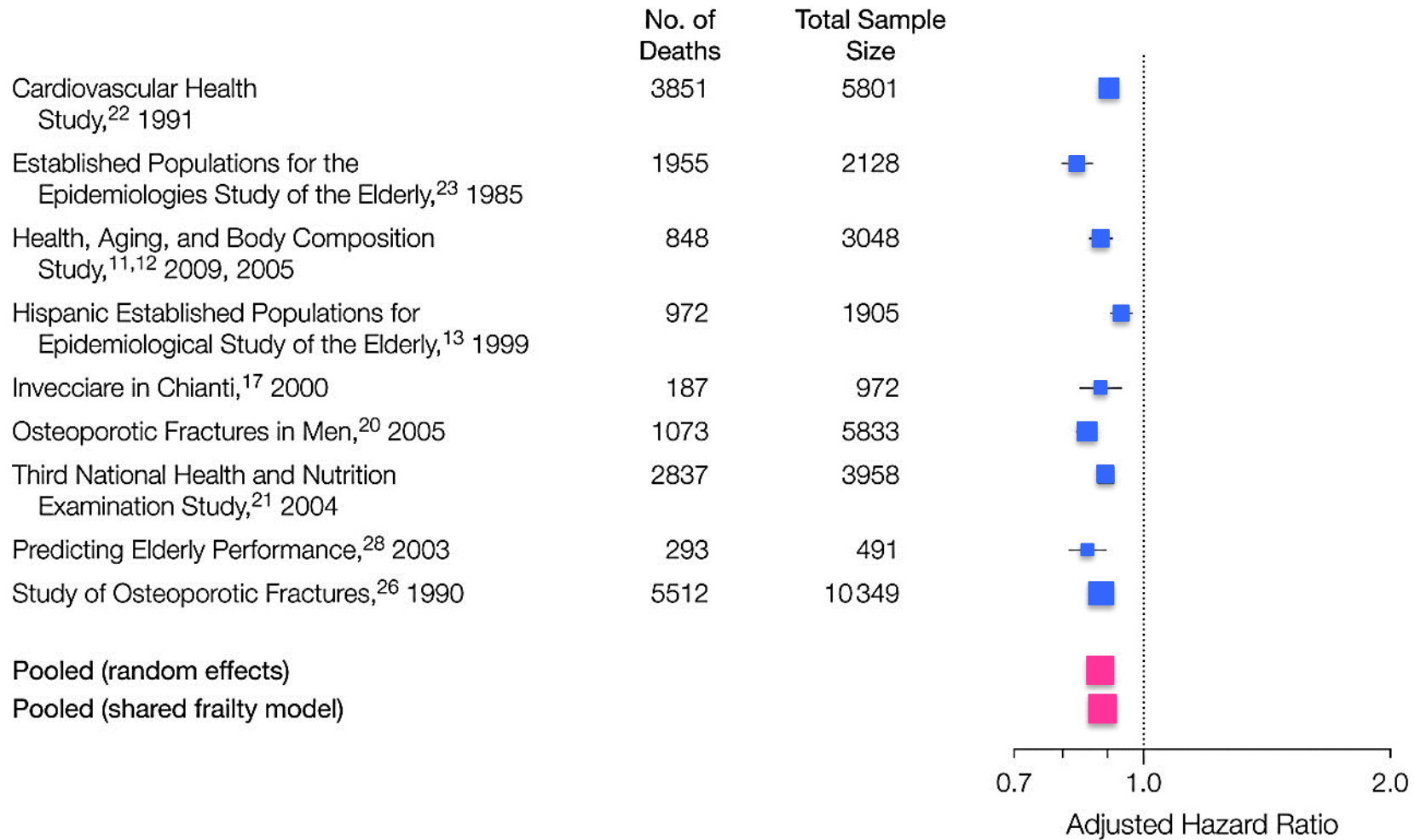
JACK M. GURALNIK, M.D., PH.D., LUIGI FERRUCCI, M.D., PH.D., ELEANOR M. SIMONSICK, PH.D.,
MARCEL E. SALIVE, M.D., M.P.H., AND ROBERT B. WALLACE, M.D.



Walking Speed is a Powerful Predictor of Mortality

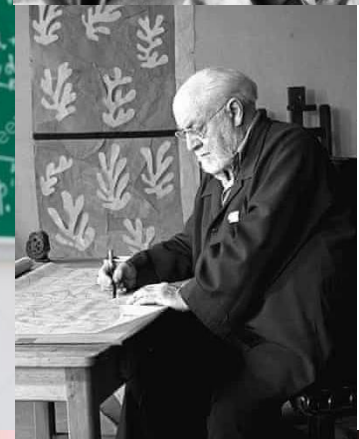
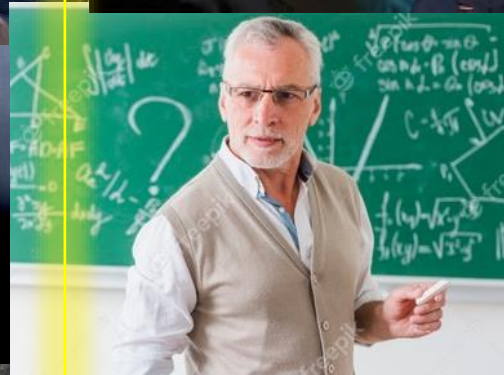
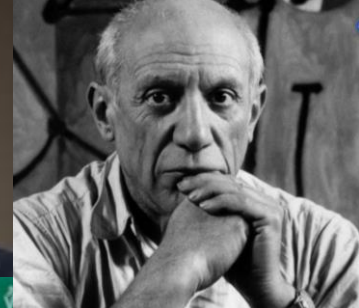


Age-Adjusted Hazard Ratio for Death per 0.1-m/s Higher Gait Speed



Studenski, S. et al. JAMA 2011;305:50-58

JAMA



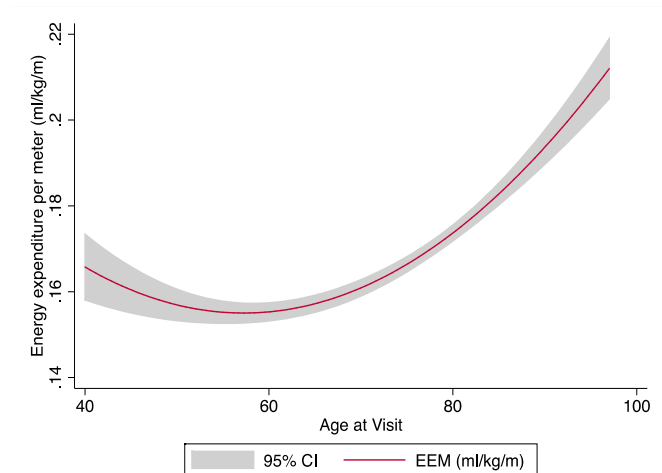
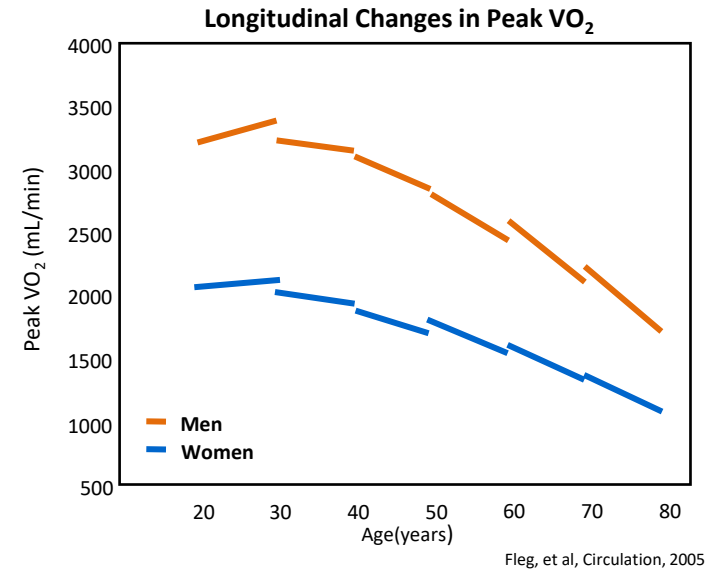
Changes in Energy Regulation with Aging

- Lower Peak VO_2
- Lower Resting Metabolic Rate
- Greater energetic cost of walking

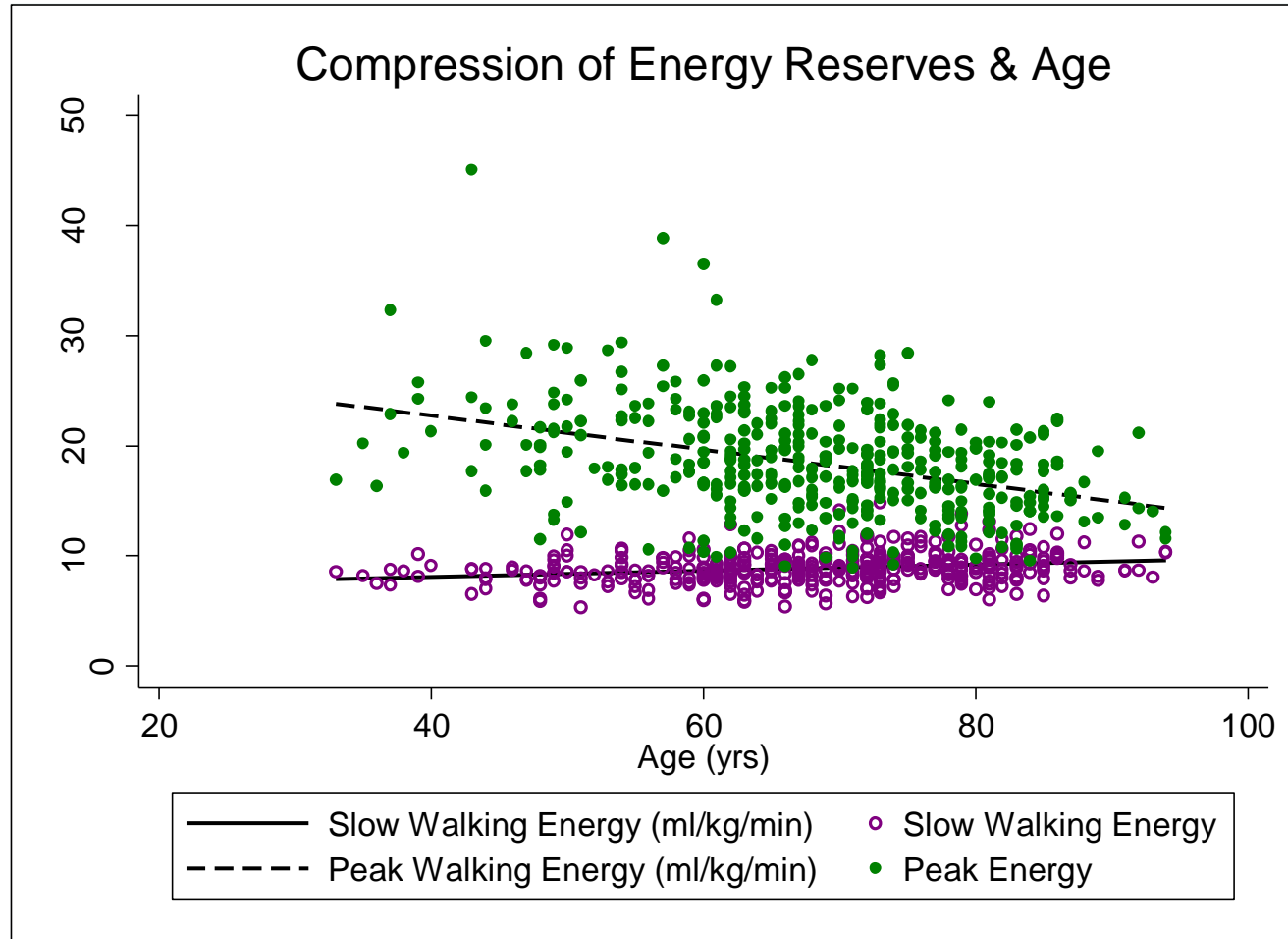
Energy Reserves Expressed as:

Cost of walking (ml/kg/min)

Peak VO_2 (ml/kg/min)

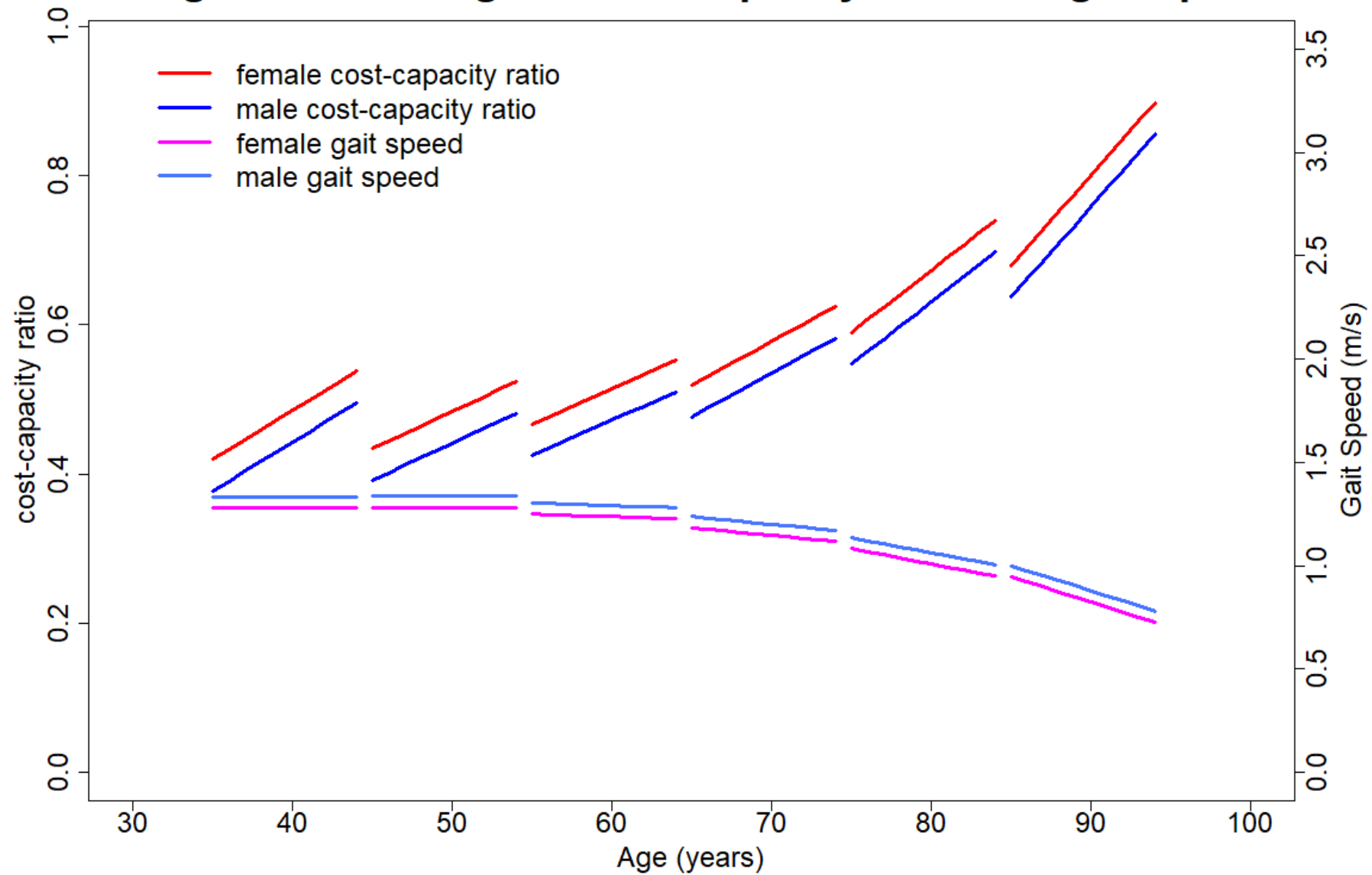


Energy Reserves & Aging



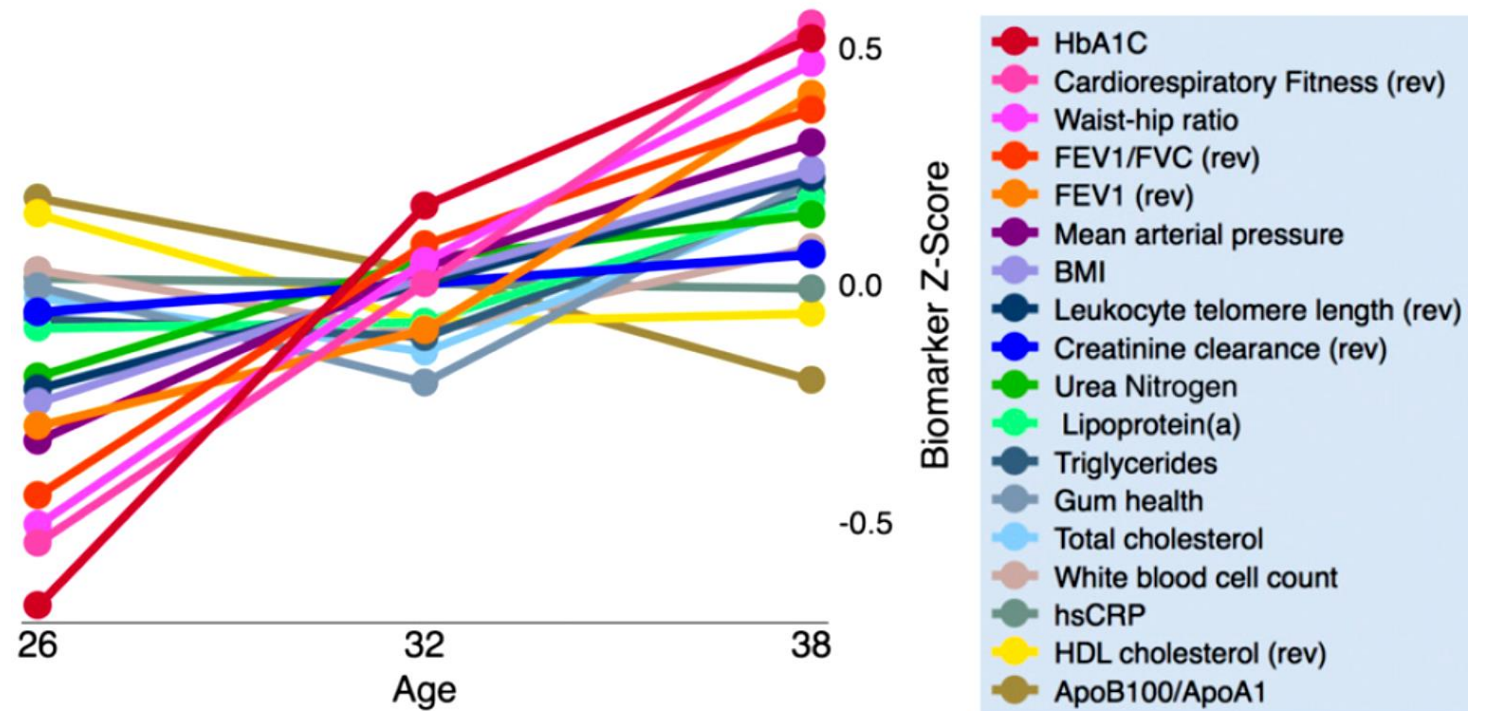
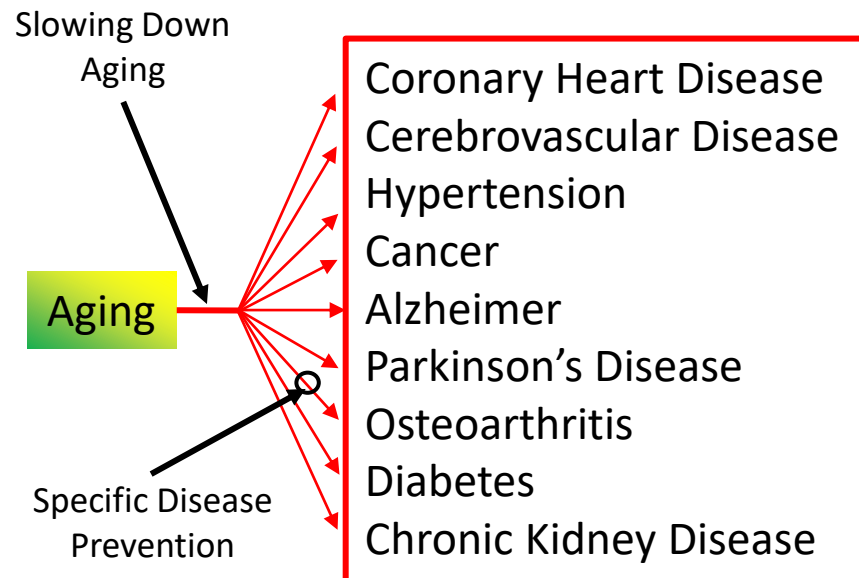
- Younger, healthier persons tend to walk at $< 50\%$ of their peak VO_2
- Older adults with a higher costs and lower capacity tend walk with an energetic cost that is close to peak VO_2

Longitudinal Change of cost-capacity ratio and gait speed



Assessing the Rate of Aging

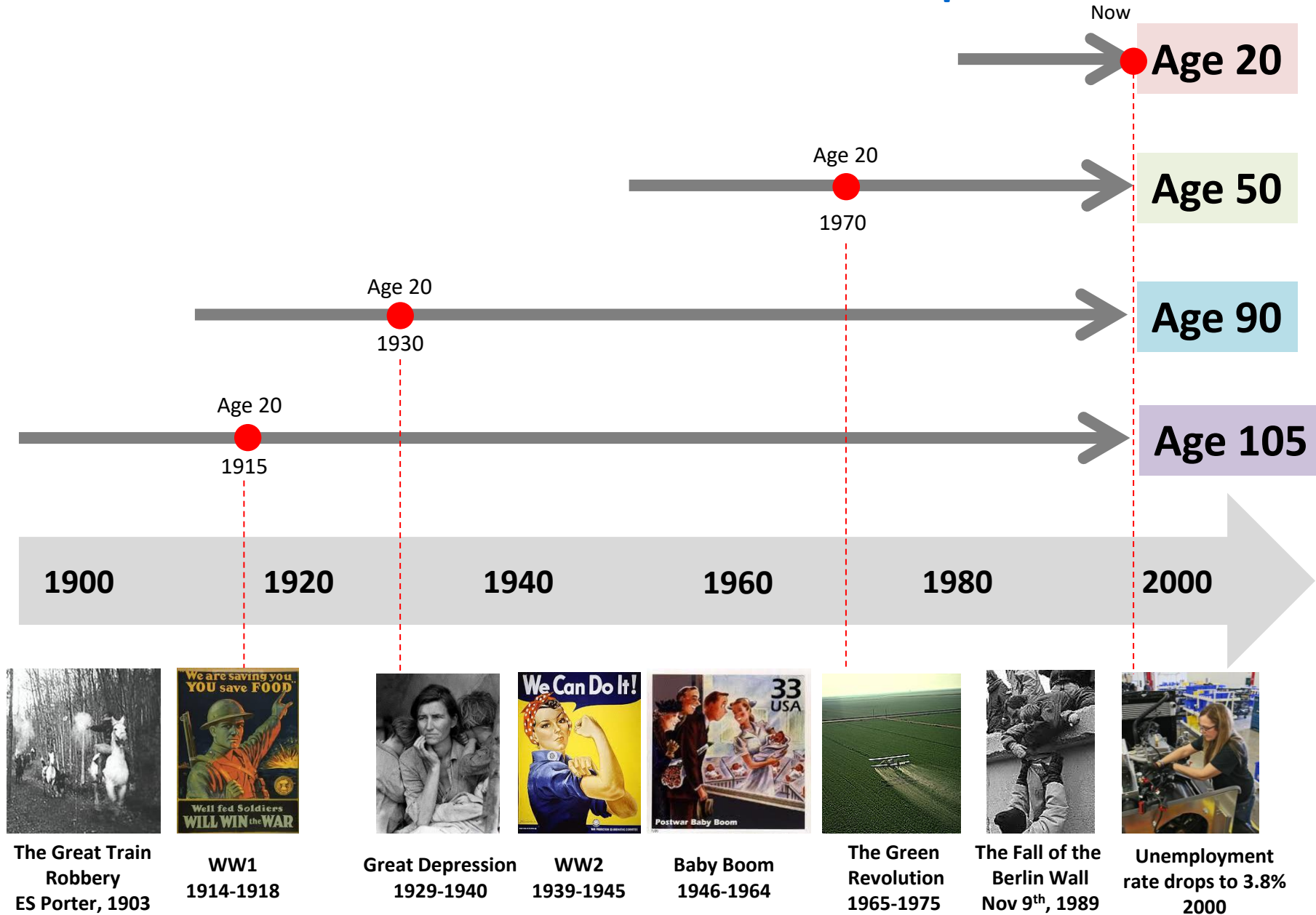
- Interfering with the fundamental basic mechanisms of aging may reduce the age-related global susceptibility to age-related chronic diseases (Seals & Melov, 2014, left figure).
- But. . . can we slow down aging? . . . And, before that, can we measure aging?



Belsky DW et al. Proc Natl Acad Sci U S A. 2015 Jul 28;112(30):E4104-10.

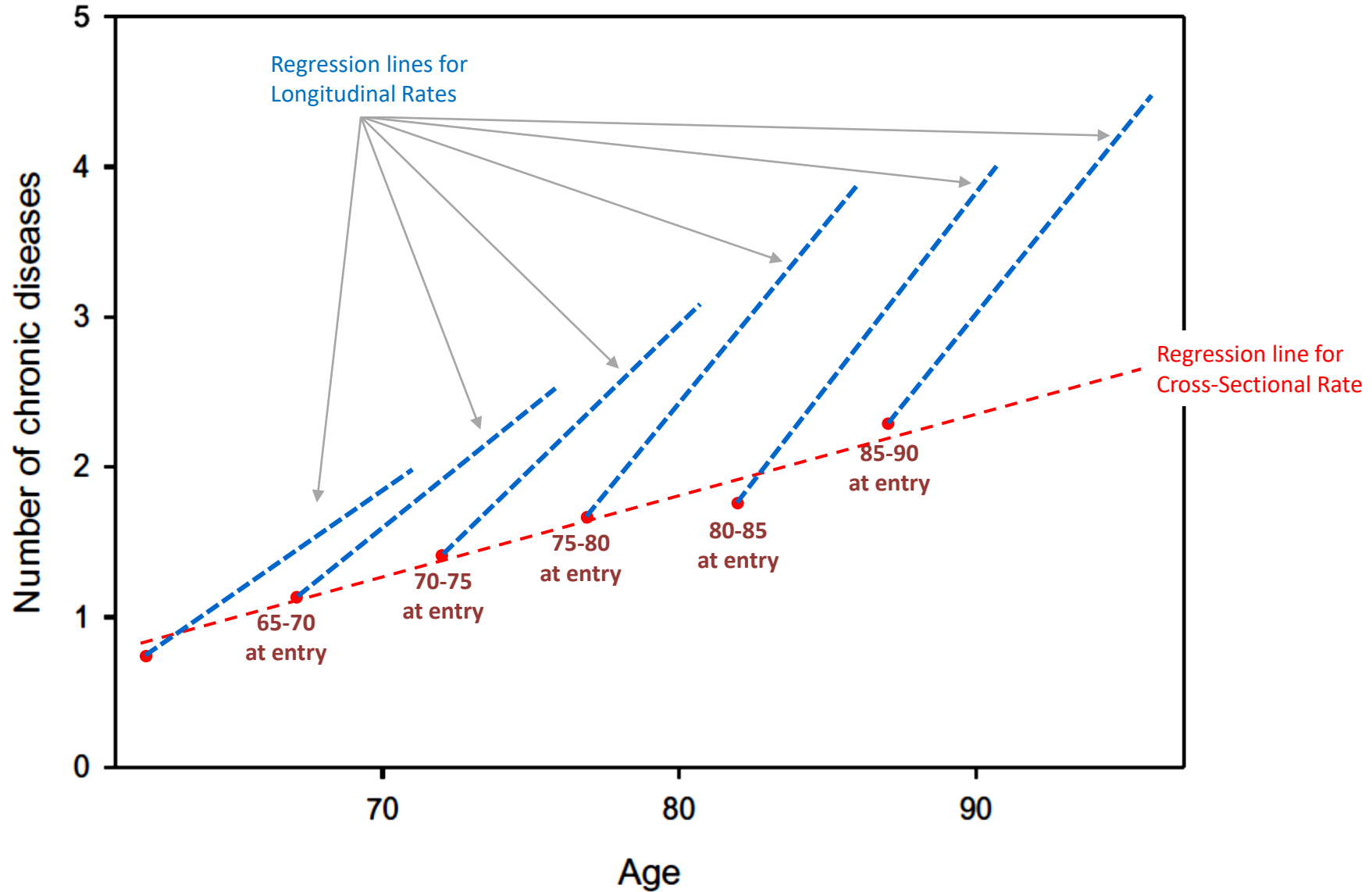
Why Longitudinal Studies?

1. To deal with different lifetime exposures



Why Longitudinal Studies?

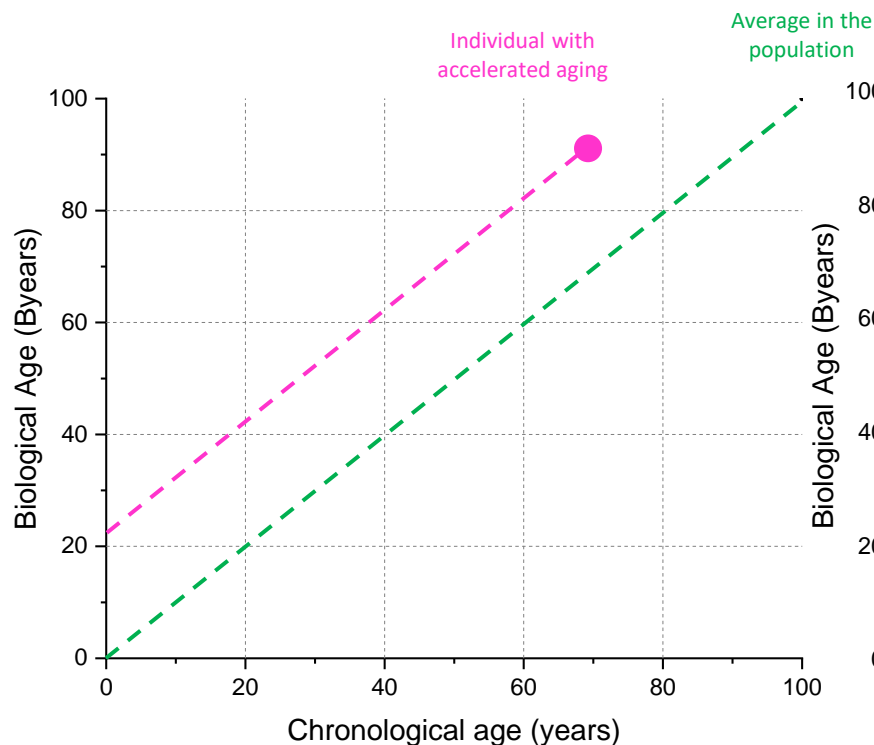
2. To deal with selective mortality or loss to follow-up (real data from BLSA)



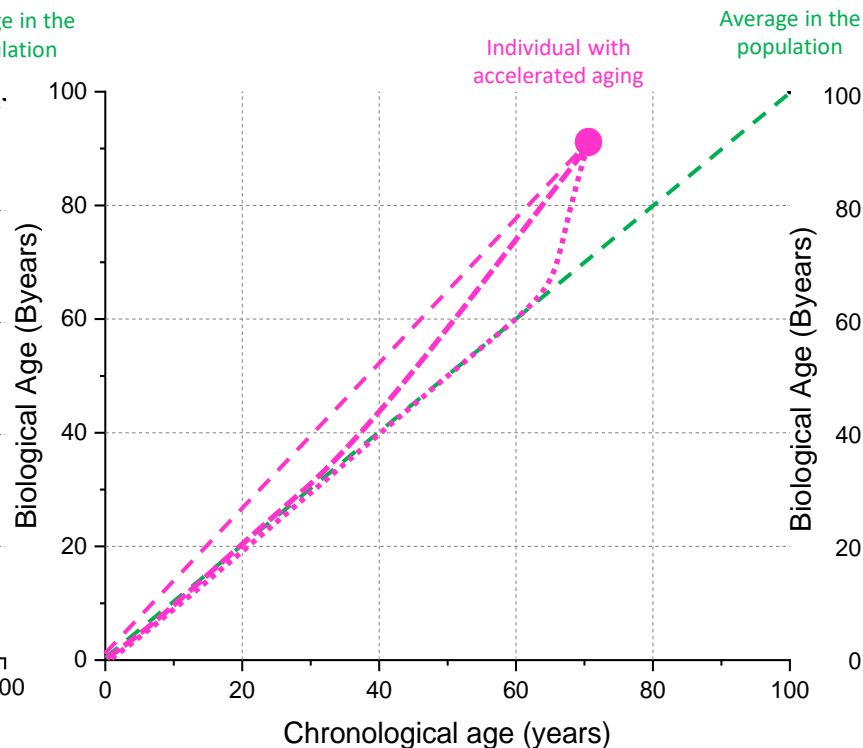
Accelerated Aging Comes in Many Flavors



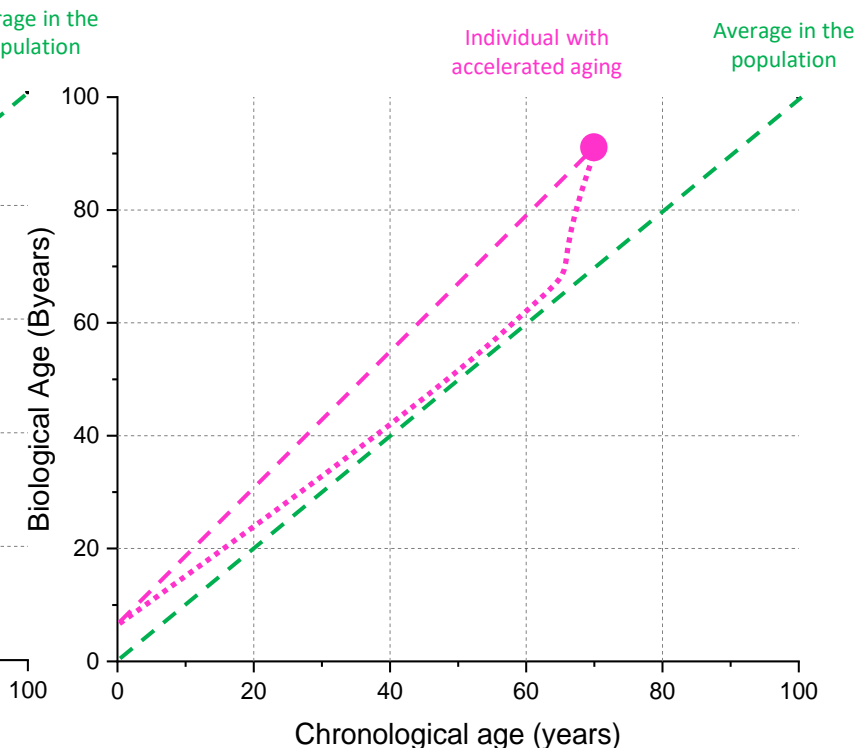
Studying longitudinal relationships between chronological and biological age is fundamental to understand mechanisms of accelerated aging and develop strategies aimed at slowing down the pace of aging, thereby preventing chronic diseases and functional decline.



Older biological age at birth and “normal” pace afterward.

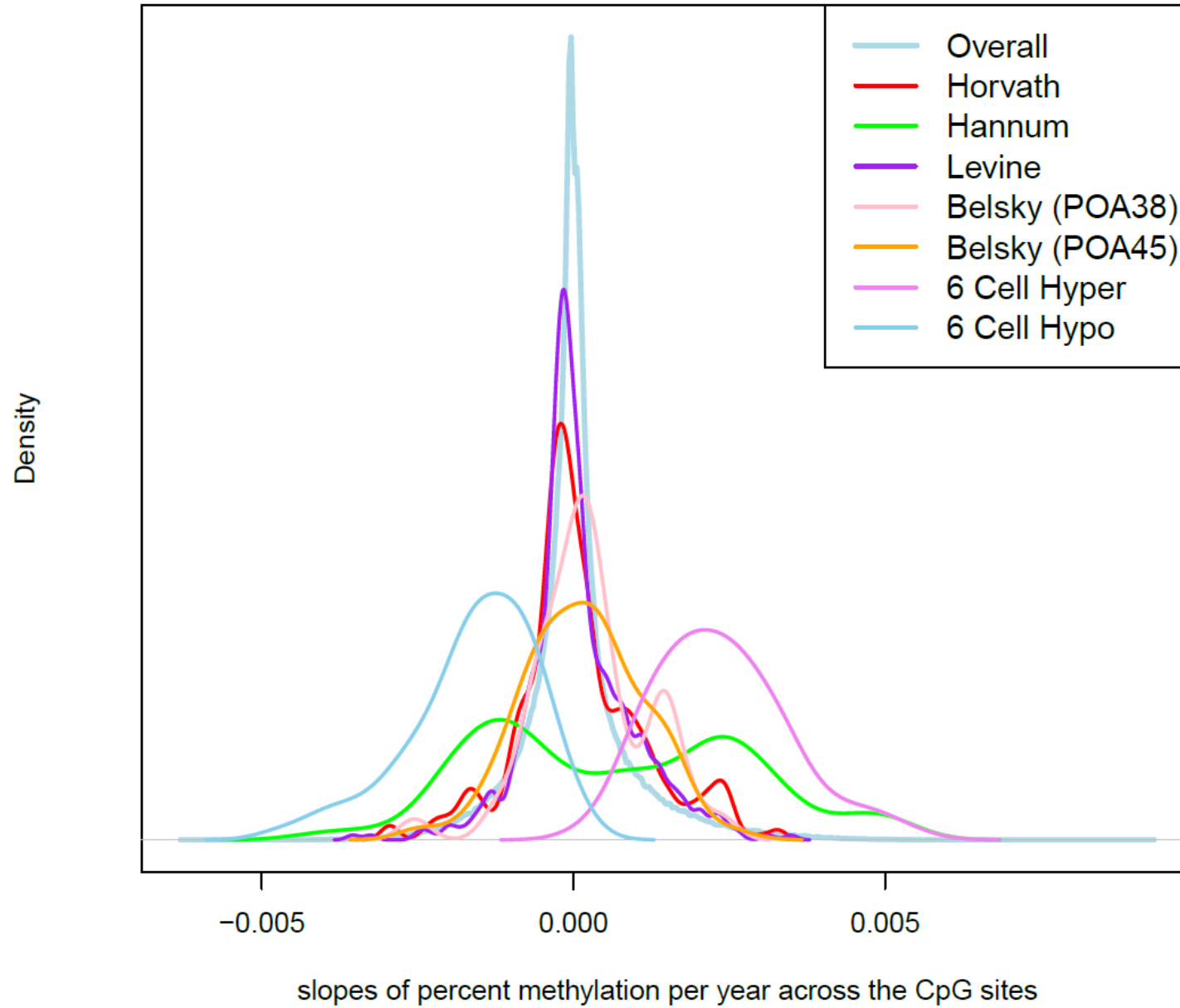


Normal biological age at birth and “accelerated” pace afterwards.



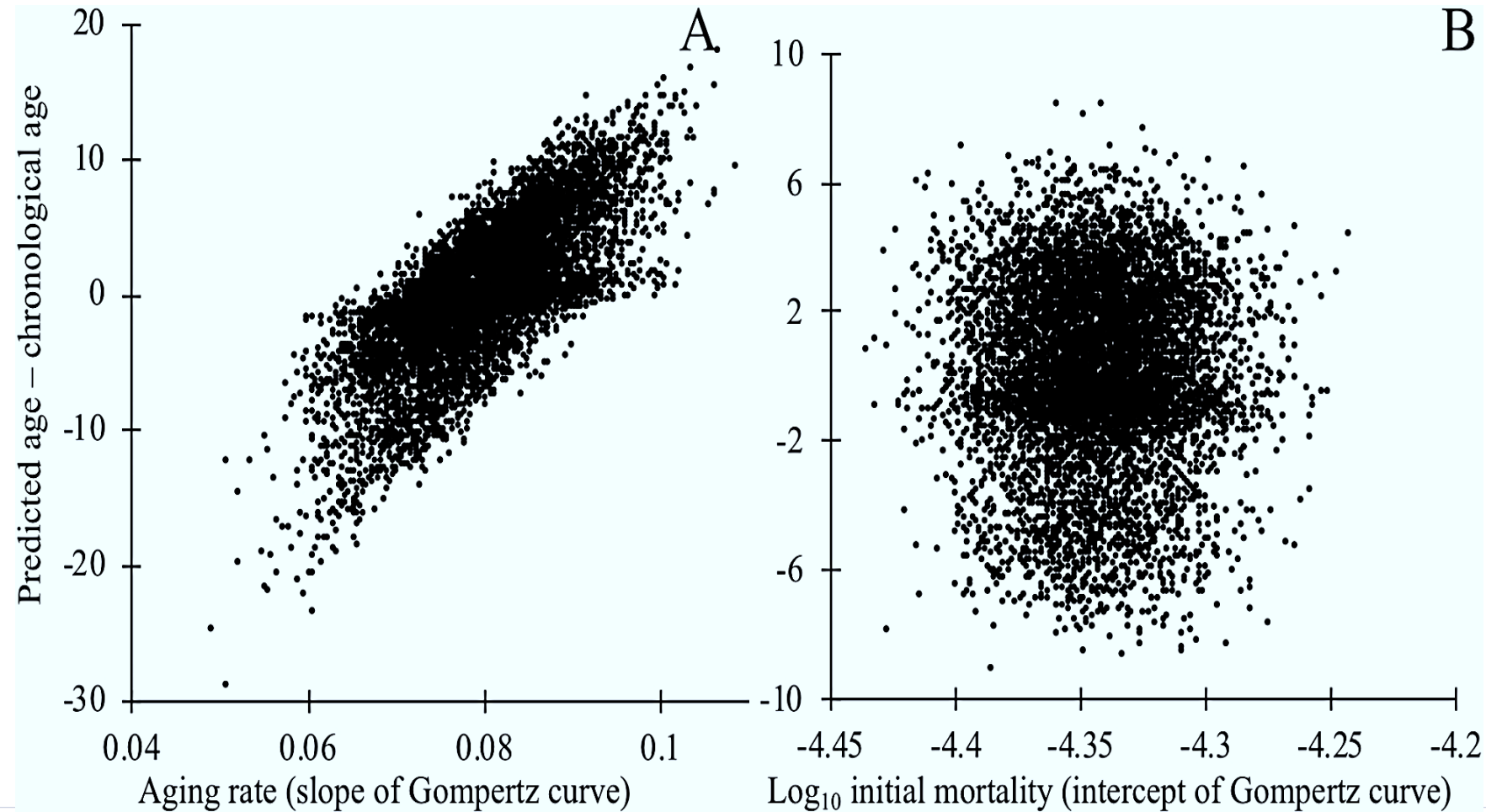
Both older biological age at birth and “accelerated” pace afterwards.

Distribution of slopes of percent methylation per year across clocks



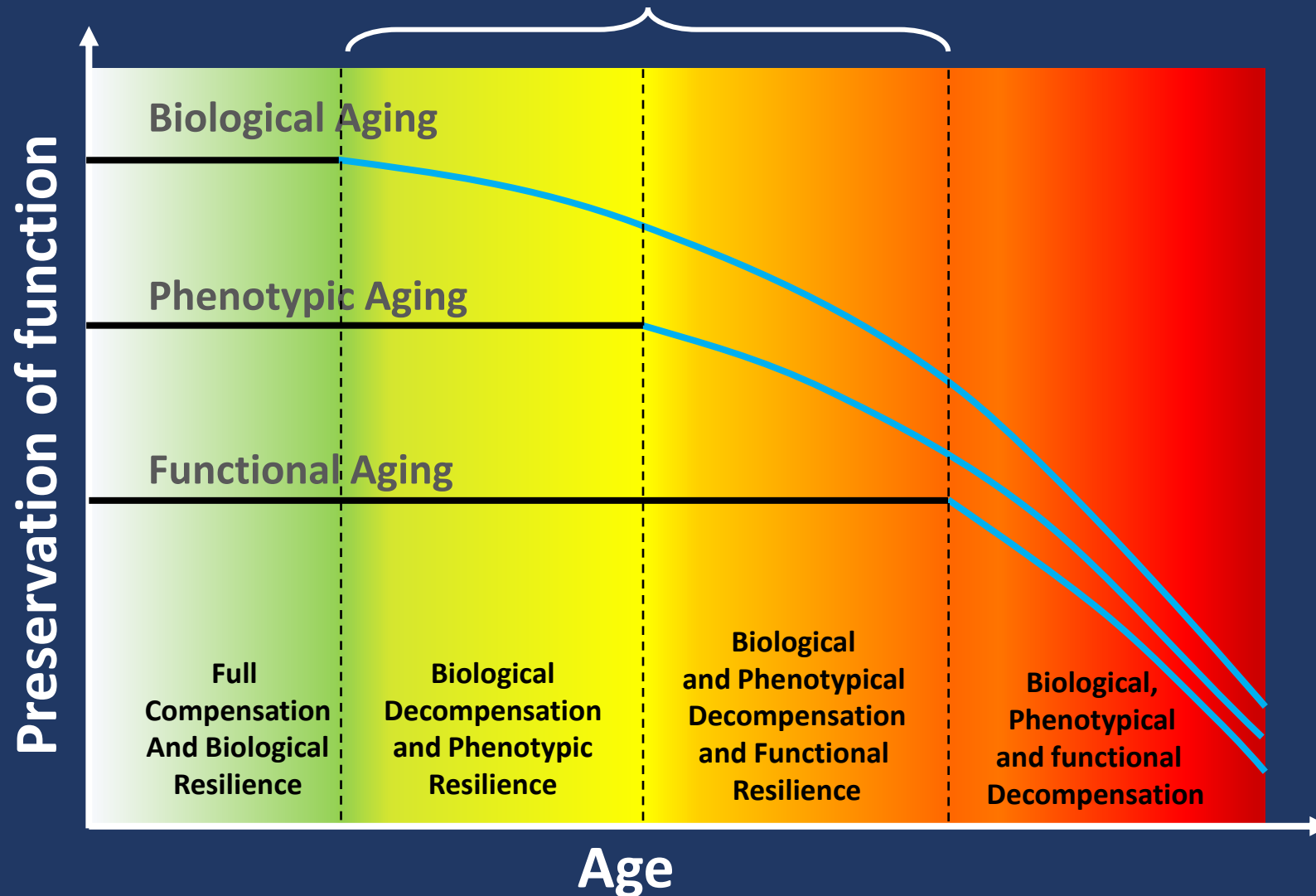
Biomarkers for Aging Identified in Cross-sectional Studies Tend to Be Non-causative

Individuals with lower intrinsic mortality rates are likely to survive to older ages than their peers with high mortality rates and are more likely to be observed at older ages. This bias, known as “cohort selection”, complicates the search for biomarkers of aging



The deviation between an individual's chronological age and predicted age informs the rate of aging, as measured by the slope of the Gompertz mortality curve (A), but not the intercept of the Gompertz mortality curve (B)

Can we assess the rate of decline in this period?



"It would be so nice if something made sense for a change."

(Alice's Adventures in Wonderland; July 4, 1865 - Charles L. Dodgson)

