

Why Do We Age?

The science of senescent cells

**Let's change the question to
HOW Do We Age?
and talk about senescent cells and inflammation**

Since the early 1800s, our life expectancy has increased from 40 years to 80 years.

In the wake of that, it has led to the #1 cause of dying:
Aging!

Current average age at *global* level is 73.7 years

What do our cells do?

Normal cells have a limited capacity for cell division - about 50 times - before division is irreversibly stopped and the cells enter a state known as **cellular senescence**.

Life and division of various cells

Rapidly Dividing Cells

- **Skin cells:** Every few weeks
- **Intestinal lining cells:** Less than a week
- **Blood cells:** Live for 3 to 120 days (330 billion cells replaced *daily!*)

Moderately Dividing Cells

- **Fat cells (adipocytes):** Replace at a rate of about 8% per year
- **Red blood cells:** Have a lifetime of about 4 months

Slowly Dividing Cells

- **Muscle cells:** 15 years
- **Fat cells:** Last an average of 12 years
- **Heart muscle cells:** Estimates vary, but replacement occurs at a slow rate of 0.5% to 30% per year

Non-Dividing Cells

- **Neurons in the central nervous system**
- **Lens cells in the eyes**

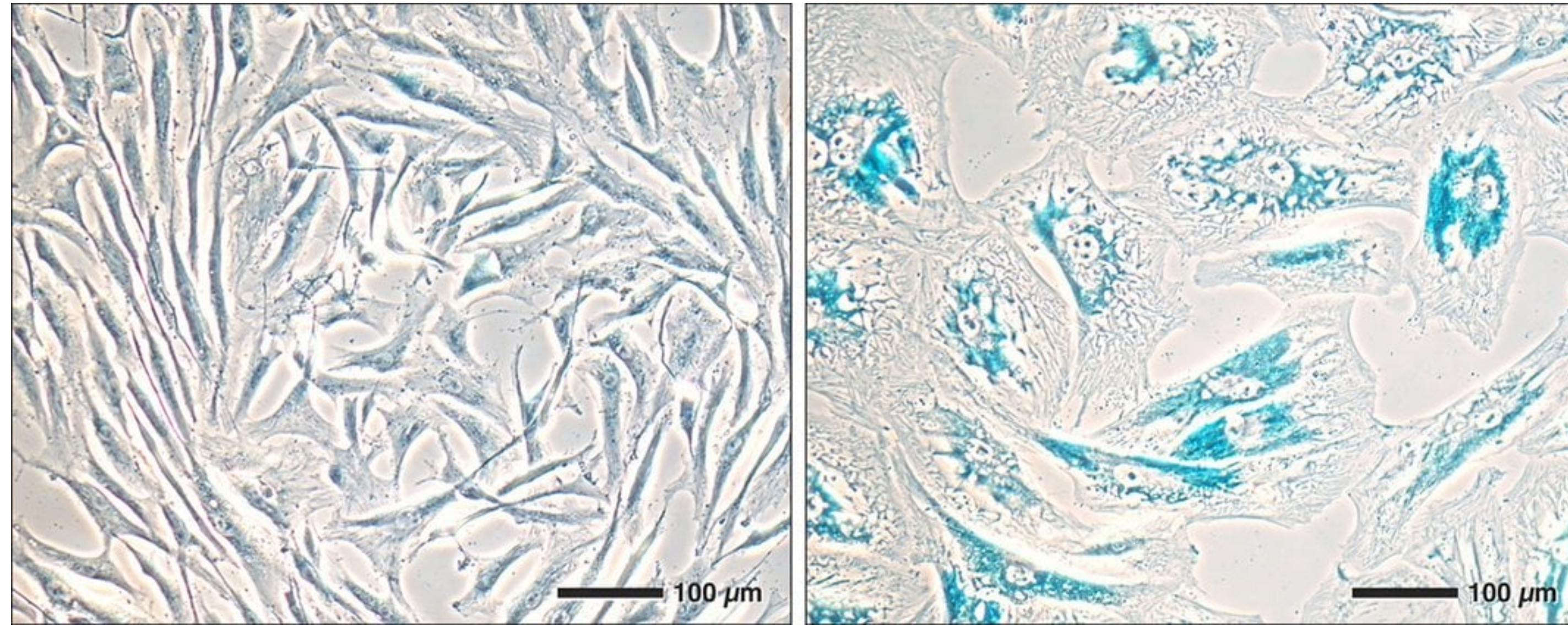
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Senescent cells are in a kind of stasis and decline - *but they don't die*. They are still metabolically active BUT . . .
unlike young and healthy cells, they produce proteins that upregulate* immune responses in nearby tissues and distant organs.

*) increase the quantities of cellular components

Lab grown cells



Young cells

Older cells

When cells reach this state of senescence, they grow larger and start exhibiting a variety of genetic abnormalities.

Scientists have identified a dozen biological changes that correspond with aging.

All of them are associated with inflammation - the pillar of aging* . . .

*) And the latest research suggests that that's also the case with dementia

The link between
INFLAMMATION - DISEASES - AGING
is now called
INFLAMMAGING

The history of inflammation

- Acute inflammation - swelling, pain, heat, and redness - was described by Roman encyclopedist Aulus Celsus more than 2,000 years ago.
- In 1839 German scientists identified **leukocytes**, or white blood cells
- In 1882, Mechnikov described the way leukocytes consumed bacteria and dead cells (Nobel Prize in 1908).
- In 1927, Sir Thomas Lewis discovered that **histamines** play an important role in the response to bodily harm
- In 1980s, interleukine-1, the first of 11 inflammatory markers called **cytokines**, was identified

Before we despair . . .

Inflammation isn't inherently bad or good.

Depending on the situation,
we just need the “right amount” of it!

Inflammation is good

- You could never heal a wound or fight many diseases without it,
and
- If you have an infection and you don't have inflammation, you're going to die

The 5 steps of immune defence . . .

HOW THE BODY FIGHTS INFECTION

1 First responders
Trillions of white blood cells circulating in the bloodstream are mustered to the infected area in 15 to 20 minutes.

2 The heat of battle
Macrophages (meaning "big eaters" in Greek) strategically stationed throughout the body seek out, engulf, and devour the bacterial invaders.

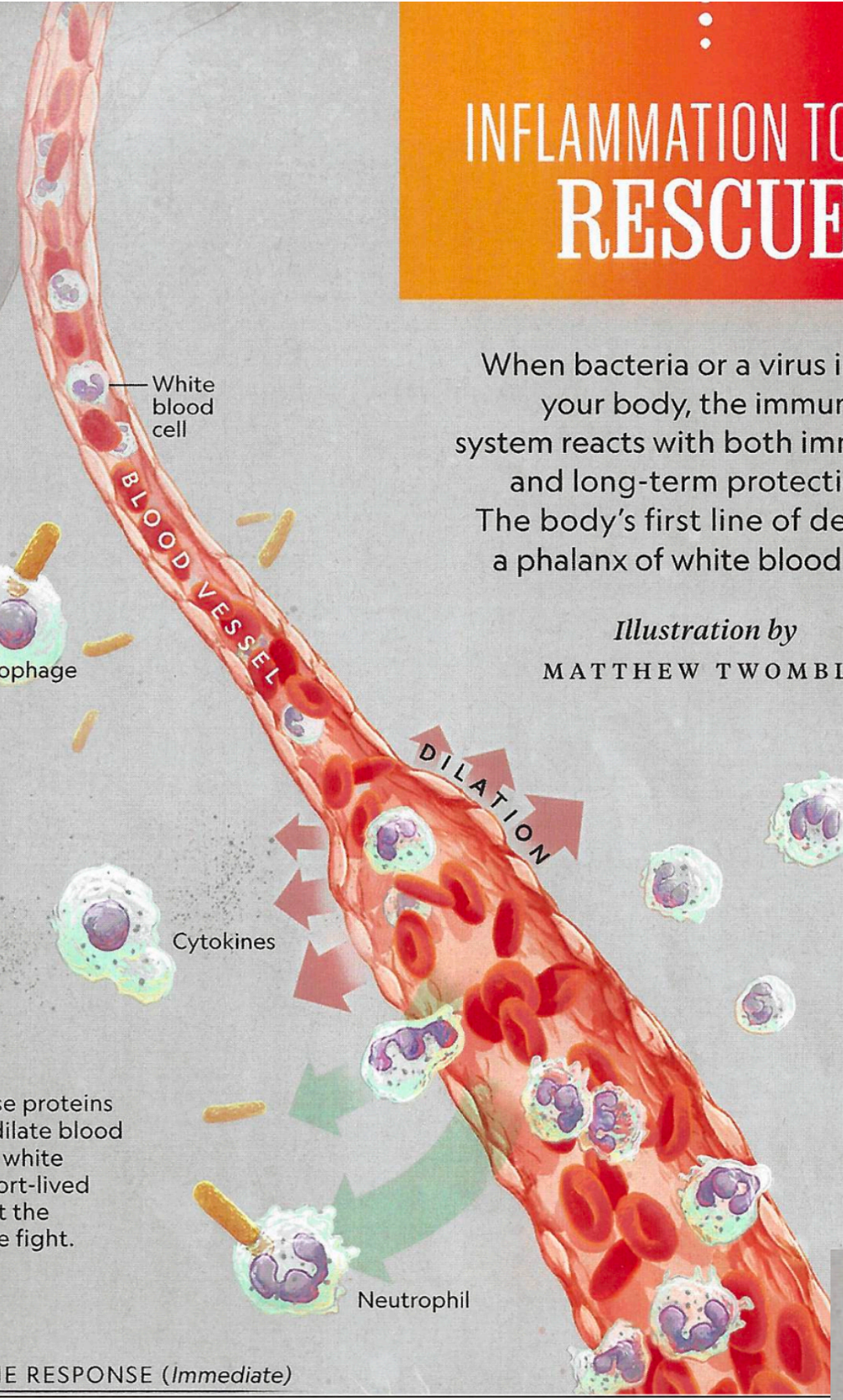
3 Calling in the reserves
Macrophages also release proteins called cytokines, which dilate blood vessels. A flood of other white blood cells, including short-lived neutrophils, can now exit the bloodstream and join the fight.

▲ INNATE IMMUNE RESPONSE (Immediate)

INFLAMMATION TO THE RESCUE

When bacteria or a virus invade your body, the immune system reacts with both immediate and long-term protections. The body's first line of defense: a phalanx of white blood cells.

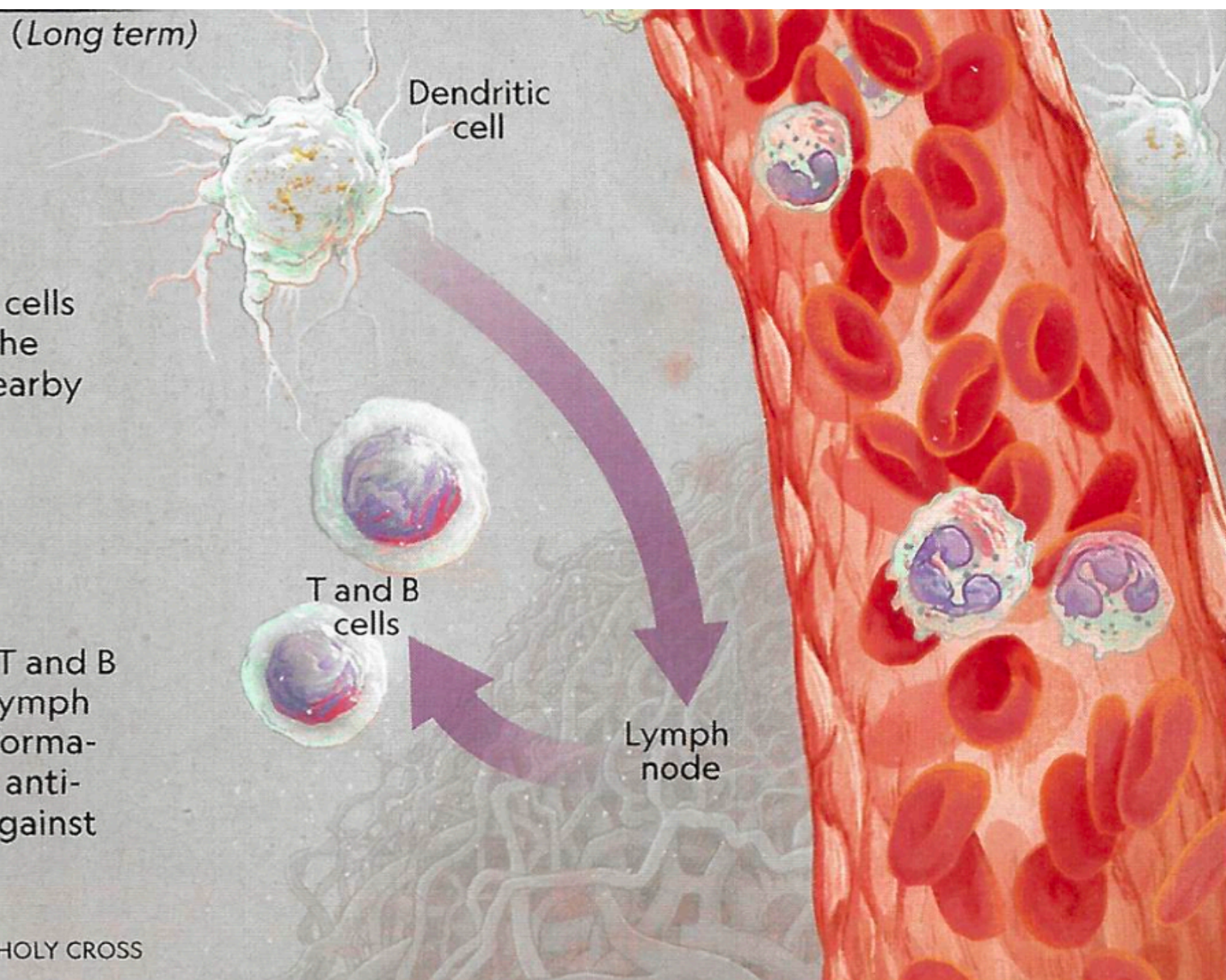
Illustration by
MATTHEW TWOMBLY



▼ ADAPTIVE IMMUNE RESPONSE (Long term)

4 Sharing reconnaissance
As the battle subsides, data-collecting dendritic cells relay information about the pathogen's proteins to nearby lymph nodes.

5 Long-term defenses
Formed in bone marrow, T and B cells now residing in the lymph nodes use this protein information to help B cells create antibodies that will protect against future attacks.



T-cells regulate the body's immune response - stopping the immune system from overreacting and controlling inflammation and protecting against **autoimmune diseases**

Healing

INFLAMMATION

Autoimmune diseases

Damaged body cells

Destroyed brain cells

Lifestyle stress

Infections

Weakened immune cells

Naturally occurring oxidants impact the aging process, particularly in vascular and neuronal aging, through - among other things - **mitochondrial impairment**, and induction of cell death pathways

Cytokines

Defective mitochondria

AGING
cell division

EPIGENETICS

- overwhelms the DNA repair mechanism
- damage to cell DNA
- ruins the regulation of pro-inflammation cytokines

Inflammatory molecules

Turn on/off of genes

Shortening of telomeres

protein signals

Upregulating

SENECENT CELLS

Damaged DNA

Time to despair . . .

Inflammation is good -

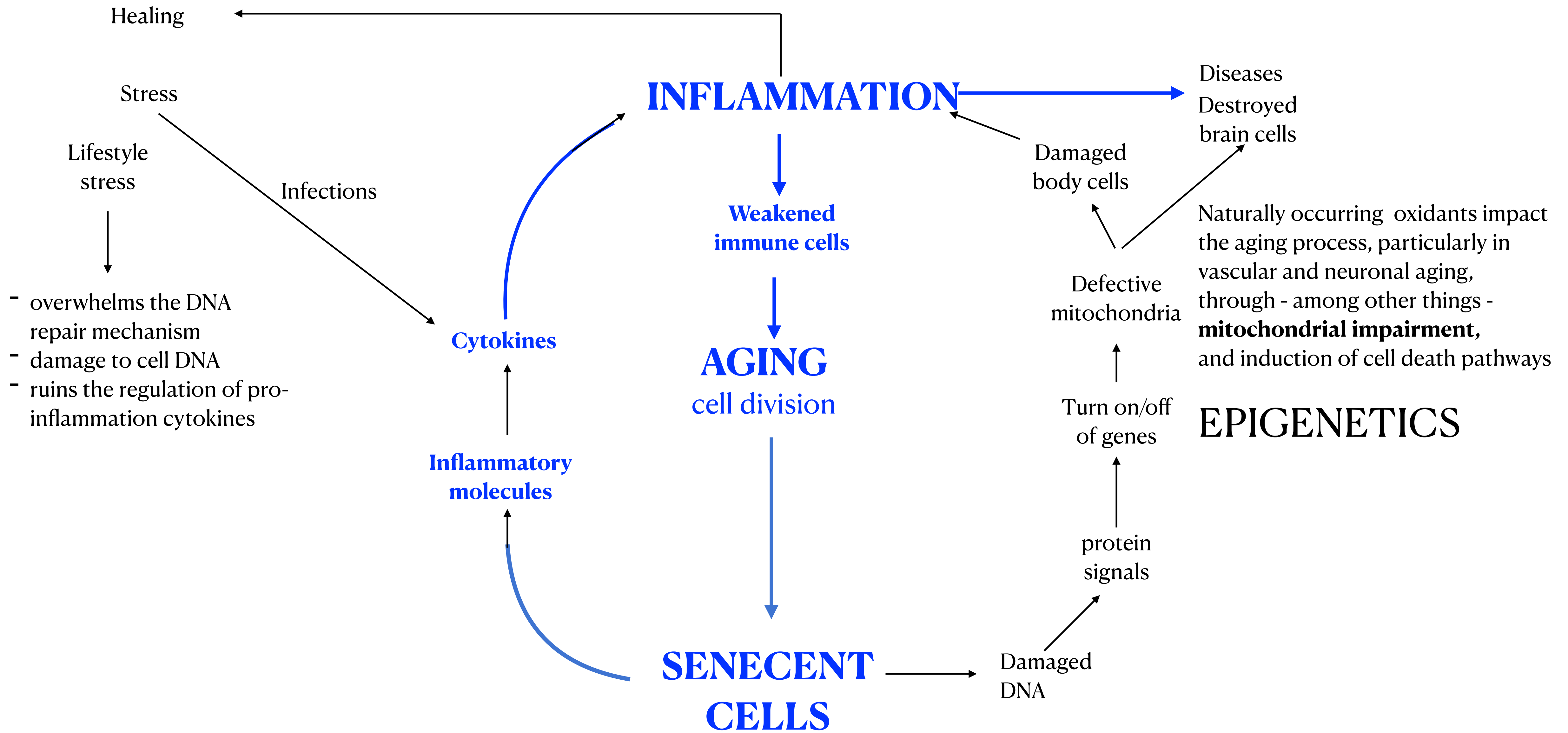
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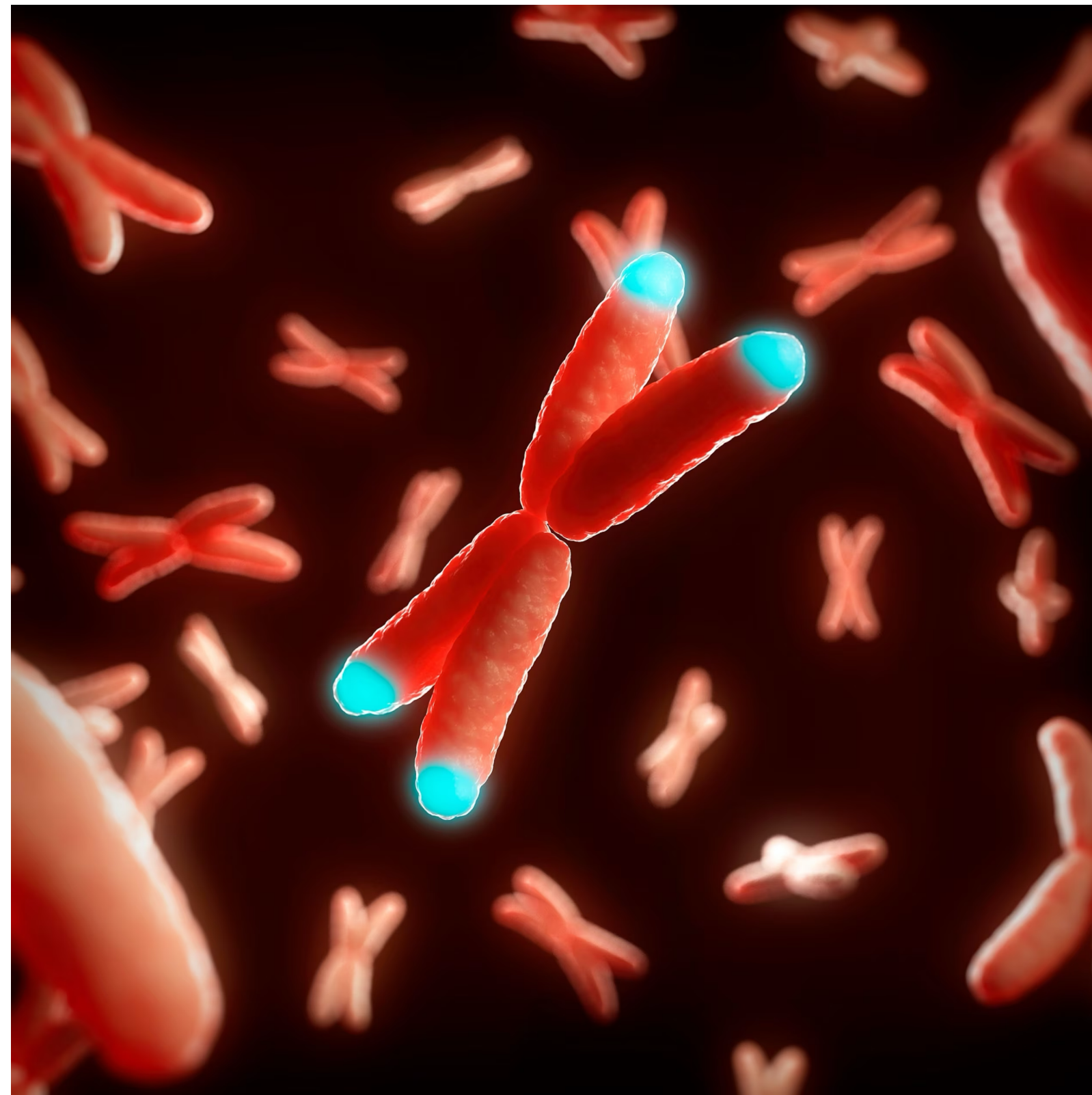
It's losing control of inflammation that is bad -

Inflammation accelerates aging and diseases. The
key mechanism is **Cytokines**

> age 50: some cytokines > age 65: a lot of cytokines



On top of all this, we have . . .
the telomeres



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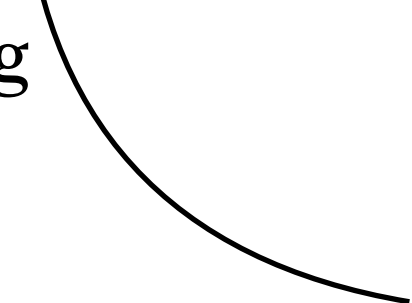
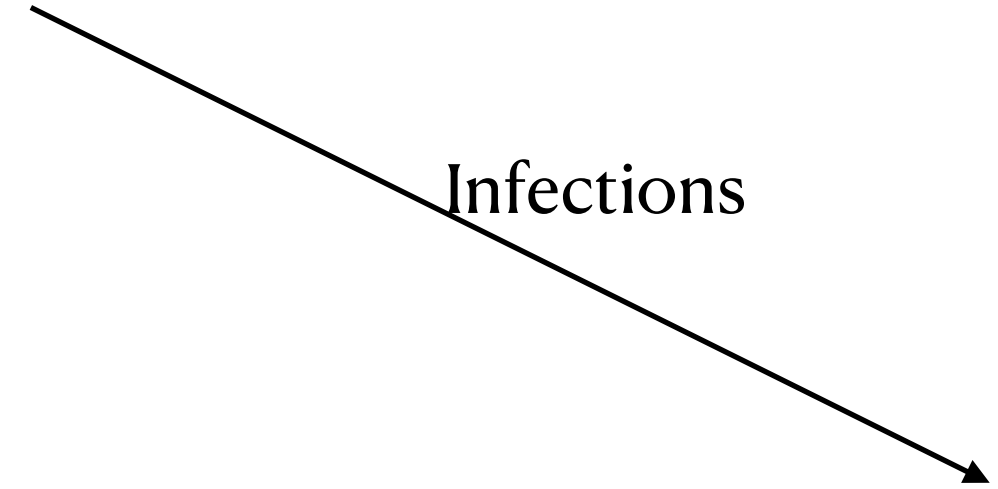
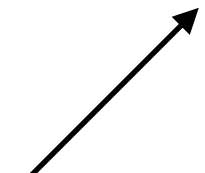
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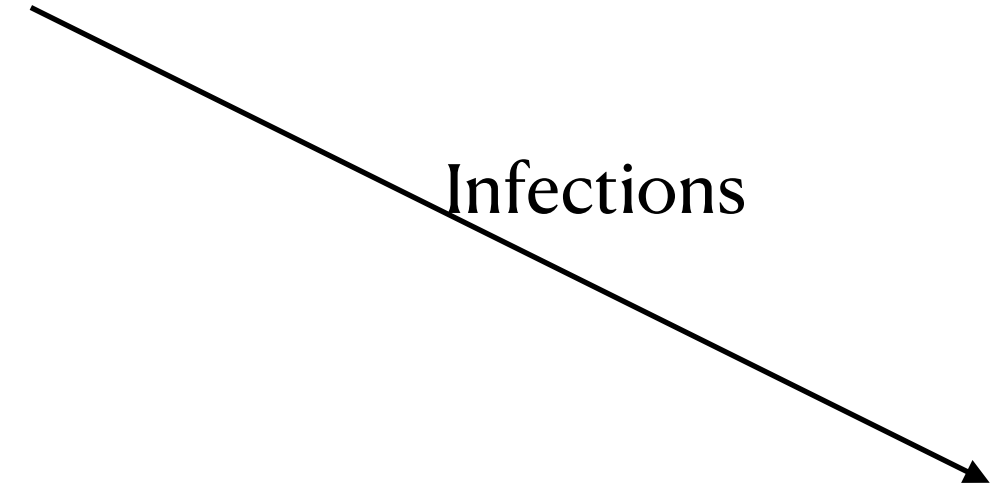
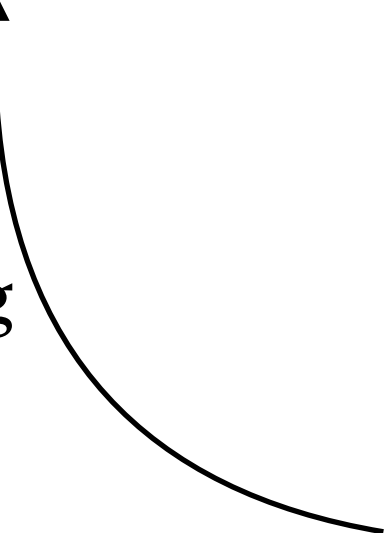
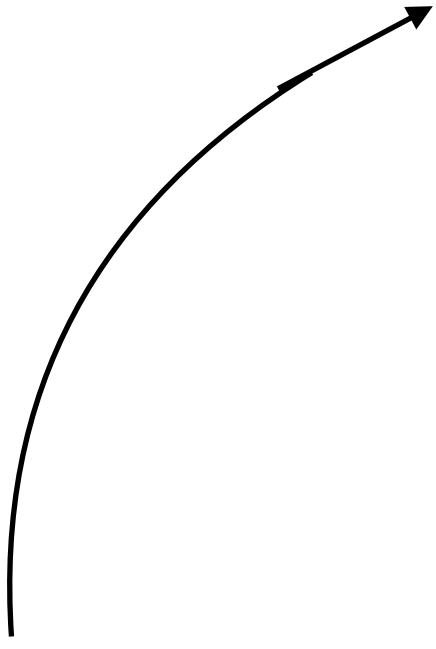
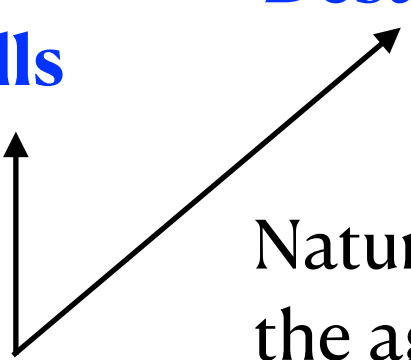
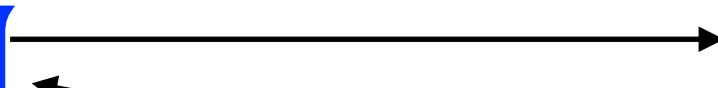
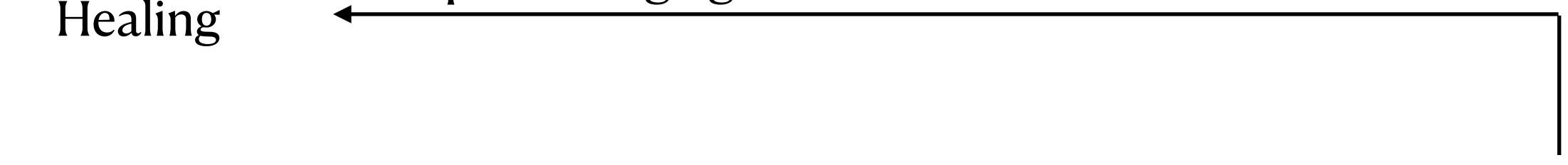
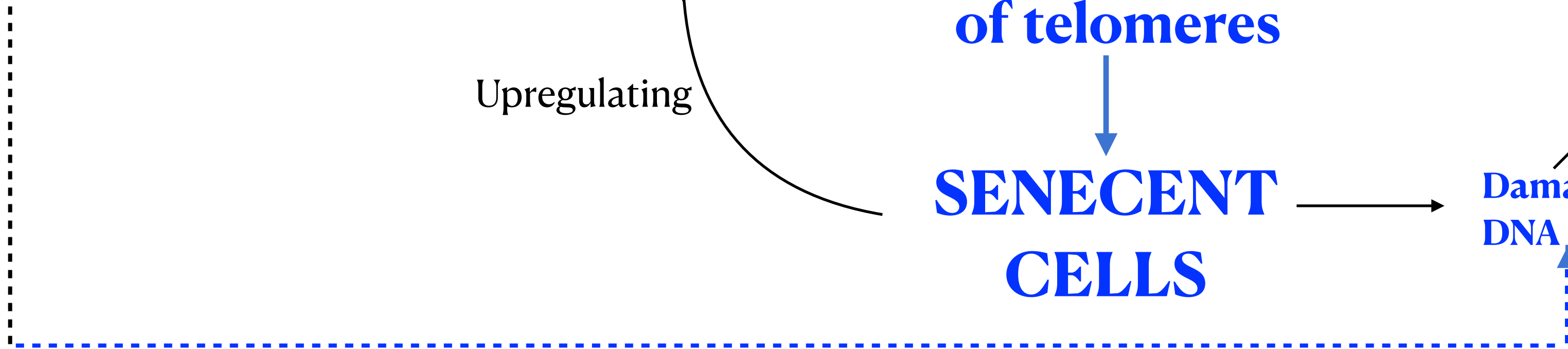
Inflammatory molecules

Upregulating

Infections

Lifestyle stress

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. . . still, it's not all bad - senescent cells are important
There's more to senescence than just cells running out of steam.

Researchers have found that senescent cells in adult mice participate in wound healing. . .

During normal wound healing, fibroblasts* cells **turn senescent**, **fill in** a wound, and **release** compounds that **promote repair** of the tissue and *then* **call in** immune cells to **destroy** them. . .

*) connective-tissue cells

... still, it's not all bad - senescent cells are important
There's *more to senescence than just cells running out of steam.*

The problem is if senescent cells hang around for *too* long!

As we age, the immune system isn't up to the task of eliminating senescent cells *before* they start producing a harmful cocktail of molecules that damage surrounding tissues.

Also: To selectively induce senescence in **cancer** cells (so far only test tube research)

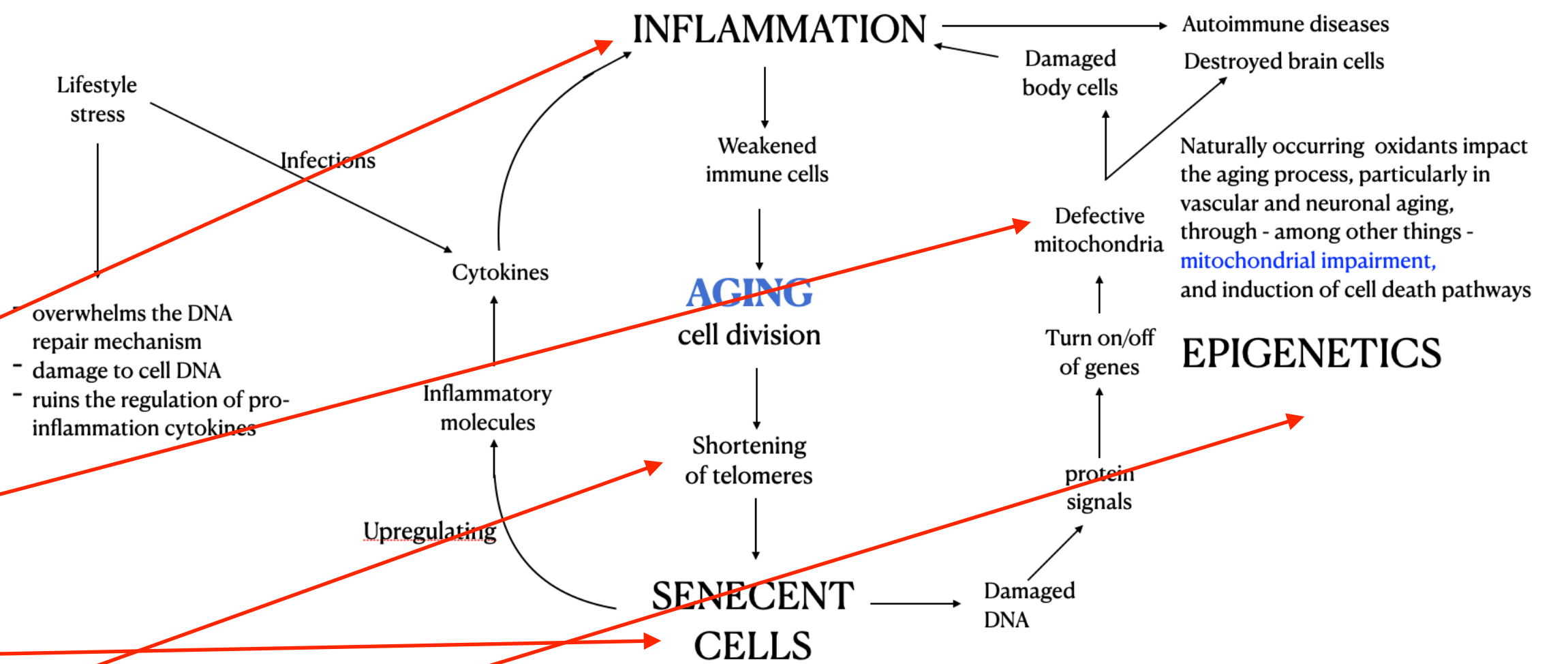
So, what can be done about aging?

1. Research makes progress
2. WE can do something

So, what can be done about aging?

Scientists are working on . . .

- Interfering in **all the pathways** in the chart
- Interventions that target inflammation
- Apply **senolytics** (agents, like enzymes) to kill senescent cells
- Enhance **mitochondria** - products like NAD⁺ (Nicotinamide Adenine Dinucleotide) is a crucial **coenzyme** found in all living cells that plays a central role in aging and in most cellular processes.
- Restore telomeres by using telomerase reverse transcriptase (TERT), an **enzyme** that helps **synthesize and extend telomeres**. TERT levels - important for the life of and forming of neurons - are reduced as we age!
- Erase a cell's identity and revert it back to a **stem-cell**-like state



So, what can be done about aging?

WE can improve our life style

Lifestyle factors

- diet (microbiome)
- exercise
- sleep (light pollution)
- hearing/vision
- reduced stress
- infections

INFLAMMATION

Autoimmune diseases



So, what can be done about aging?

About diets/supplements, see:

Resveratrol: <https://www.healthline.com/nutrition/resveratrol>

<https://www.nationalgeographic.com/premium/article/food-diet-inflammation>



Bryan Johnson, the guy who's trying to "Don't Die"

<https://www.youtube.com/watch?v=6BP6V6wIvqY>

So, what can be done about aging?

Food for thought:

The bioethical question is

... what would it mean for society to continually rewind the clock on aging?

Thank You

for your attention

