

How to Survive to 100

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Outline

- What is aging
- Should you try to live to 100?
- Genetic Factors
- Environmental Factors
- Lifestyle Factors
- Interventions

Theories of Aging

- Stochastic-aging is accumulated damage, oxidative stress (free radicals), glycation
- Developmental-Genetic-aging is pre-programmed, telomere length
- Maximum Lifespan Potential vs. Life Expectancy

Is it reasonable to live to 100?

- Societally
- Individually

Societally

- **Inferno (Dan Brown)**
- **Logan's Run**
- **Soylent Green**
- **Star Trek – Episode # 72**

Individually

- **Ezekiel Emanuel**
- **Uwe Reinhardt**
- **Anecdotal evidence**
- **Hawaiian Lifespan study**

Hawaiian Lifespan Study

- **1292 Hawaiian men of Japanese ancestry, start age 71-82 with 21 year follow-up**
- **77% survived to age 85 (34% healthy)**
- **24% survived to age 95 (<1% healthy)**
»Bell et. Al. JAGS 62:880, 2014

Correlates with Survival and Health

- **ABI, BP, inflammatory markers,**
- **Education, cognitive score, marital status**
- **BMI, smoking, activity level, alcohol use**

Probability

	<u>Risk factor -0</u>	<u>Risk factor 5 +</u>
Survive to 95	27%	7%
Survive to 100	4%	0.1%
Healthy survival to 90	4%	0.01%
Healthy survival to 100	0.002%	

Early Hawaii Heart Program

Survival/ health predictors 45-68 yo

- High grip strength,
- normal weight, no smoking, modest alcohol
- normal glucose, normal TG, normal BP,
- high education, marriage

»Wilcox et al. JAMA
296:2343, 2006

General Influences in Aging

(Successful or not)

- Genetics
- Environment
- Lifestyle choices
- Medical Interventions

Genetic Effects on Aging

- Longevity genes
- Shortevity genes

Danish Twin study

- Evaluated 2872 pairs of same sex Danish twins
 - Estimated 25% longevity (23-26) explained by genetics
 - »Herskind et. al. Human Genetics
- 97:319 March 1996

Longevity Genes

- FOX03A3
 - Hawaii, Italy, Germany, Dutch
- Apo E
- X Chromosome

Genetics

Long lived populations develop:
CV disease, DM, dementia 10+ years
after average groups

Shortevity genes

- Li-Fraumeni
- LPA gene
- Down's
- Progeria

Genetics – Other Factors

- Attractive people live longer
- Tall people die sooner

General Influences in Aging

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Environmental

- May explain 25-30% of variation in longevity
- Common predictors of successful aging:
 - Female gender
 - High SE status, married
 - being happy, good cognitive function
 - not smoking, exercise

British Civil Service (Whitehall) Study

- People in lowest levels of British Civil Service: have double the morbidity, triple the CV death of those in highest grades.
 - » Marmot et. al. Lancet 337:1387, 1991

Environmental Factors- Minimally Modifiable

- **Richest 1 %**
- **Win Oscar, Nobel, Olympic medal**
- **Marry someone younger**
- **Breast-feed**
- **If male, have a daughter**

Sleep and Longevity

- **85+ yo compared with 20-30, 60-70 yo**
- **Have more WASO, shorter sleep, less efficiency, better standardized sleep and wake times, awaken earlier**
- **Have better lipid profiles**

»**D. Mazotti et. al., Front
Aging Neuroscience**

6:134 June 2014

Metabolic Rate

- **IDEAL aging in BLSA associated with significantly lower resting metabolic rate**

Schrack, et. Al, JAGS 62:667, 2014

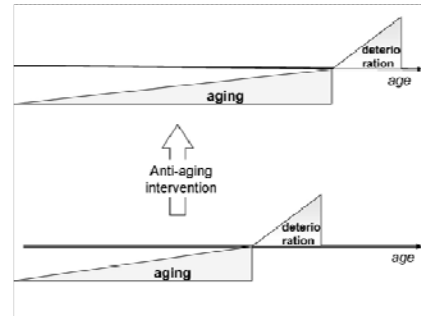
General Influence in Aging

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General Influences in Aging

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Aging – Slowing the Process



Mikhail V Blagosklonny - Why human lifespan is rapidly increasing: solving "longevity riddle" with "revealed-slow-aging hypothesis" Aging April 2010

Lifestyle Choices

- Tobacco Use
- Weight/Obesity
- Diet
- Exercise/Activity
- Alcohol Use
- Vitamins & Supplements
- Cognitive/Psychological Strategies

Tobacco Use

- It's just bad for you
- Life may be shortened by 11-28 minutes per cigarette.
- May impact longevity by as much as 10 years
- Quitting smoking appears to help at any age
- Not starting helps the most.

Weight - Calorie Restriction

- Studies in the 1930's on rats
 - 20-40% increase in life expectancy.
- Primate models
 - Improved cholesterol levels, blood pressure, insulin levels.
- Biosphere 2 participants
 - 2 years in a controlled environment.
 - Biomarker findings similar to rats and primates
 - » Walford et al, J Gerontol A Biol Sci Med Sci 2002 Jun 57(6):B211-24

Weight - Calorie Restriction

- Minnesota Starvation Experiment - 1940's
 - Explore the effects of famine, 40-50% calorie deficit
 - Improvement in some biomarkers, but also depression, preoccupation with food, social isolation, poor concentration.

Weight - “Obesity Paradox”

- Multiple studies over the past decade have shown that there may be a survival benefit to a higher weight.
 - *Diabetes Care August 2013 vol. 36 no. Supplement 2 S276-S281*
- Systematic review that appeared in JAMA in 2013 concluded that all-cause mortality was not higher in overweight (BMI 25 to <30) and grade I obesity (BMI 30 to <35)
 - *Flegal, et al. JAMA.309(1):71-82, 2013*
- Lowest risk around BMI of 25, and highest risk at either extreme of BMI.

Weight - Conclusions

- Calorie restriction without malnutrition may have some survival benefit in humans.
- Obesity at higher levels (BMI 35+) consistently associated with higher mortality
- “IDEAL” patients – Insight into Determinants of Exceptional Aging and Longevity patients in the Baltimore Longitudinal Study on Aging.
 - IDEAL patients had lower resting metabolic rate (RMR)
 - Lower RMR correlates with longevity.
 - Being fully functional and free of disease (except controlled HTN) correlates better with RMR than body composition
 - » *Schrack, et. Al, JAGS 62:667, 2014*

Exercise

- Does not have to be daily
- 150 minutes or more each week is optimal
 - Aerobic activity
 - moderate intensity (enough to raise heart rate)
 - 50% of total time (75 minutes/week)
 - Muscle strengthening activity
 - working all major muscle groups
 - 2 more days a week

Exercise

- Correlates with lower resting heart rate
- Improves cholesterol profiles
- Maintains muscle mass
- Reduces risk of some cancers (colon cancer, breast cancer, possibly others).
- Improves mental health/mood
- Improves sleep
- Independent of above effects may extend life by 6 months

» Wright et al. NEJM 339(6): 380-386, 1998

Diet/Nutrition

- Few studies that examine diet over prolonged period of time, especially in isolation from other lifestyle interventions.
- Most conclusions based on observations of populations and analysis of dietary habits of groups with known longevity (Sardinia - Italy, Okinawa - Japan, Loma Linda - California)
- Mediterranean Diet
 - One of the better researched
 - Appears to reduce risk of heart disease
 - Difficult to exclude effects of other lifestyle interventions

Diet/Nutrition - Conclusions

- Portion size matters
- More vegetables/fruits
- Less meats, especially processed meats
- Legumes/Nuts
- Whole grains/fiber
- Fish
- Low added sugar/salt
- High anti-oxidant foods – coffee
- Alcohol

Alcohol

- “Moderation”
 - Up to 1 drink/day for women and men > 65 years of age
 - Up to 2 drinks/day for all other men
 - Heavier use appears to tip scale toward more harm/less benefit (head & neck cancer, breast cancer)
- Benefits of “moderation”
 - Raises HDL level
 - Improves sensitivity to insulin
 - Decreases blood clotting (in a beneficial way)

Vitamin & Supplements

- Lots of claims, little data.
- Iowa Women’s Health Study published 2011 in JAMA suggested increased mortality risk of some common supplements, most notably iron.
 - » *Arch Intern Med.* 2011;171(18):1625-1633.
doi:10.1001/archinternmed.2011.445
- 2012 Cochrane review of common antioxidants found no benefit in prevention, and likely increased mortality with beta carotene, vitamin E and possibly vitamin A supplementation.
 - » Cochrane Database of Systematic Reviews 2012, Issue 3. Art. No.: CD007176. DOI:

Vitamins/Supplements - Conclusions

- Malnutrition is harmful - correction of deficiencies is important.
- Optimization of vitamins/micronutrients likely beneficial. Still working on determining optimal levels of some vitamins.
- Excess supplements/Mega doses offer no clear benefit and might cause harm

Tobacco, Exercise, Diet, Alcohol

- Those who are unfavorable in all categories
 - At age 40:
 - May reduce life by 17 years (man) or 14 year (woman).
 - At age 75:
 - the 10 year mortality rate is nearly double
- Tobacco use appear to be dominant risk factor
- Other appear to be more equal in effect

Cognitive/Psychological Strategies

- Educate yourself
 - Strong benefit through at least high school
 - Additional benefit to college or beyond
- Continue to learn new skills
- Stay informed
- Continue intellectual stimulation into retirement

“100 Ways to Live to 100” www.huffingtonpost.com 09/23/2013

Cognitive and Psychological Strategies

Positive Affect

Adults who scored highest for a positive affect had a death rate 50% lower than those who scored lowest over 5 years. Steptoe et al, PNAS 108(45) 18244-8, 2011



Smile

Bigger smiles, longer life?

“100 Ways to Live to 100” www.huffingtonpost.com 09/23/2013

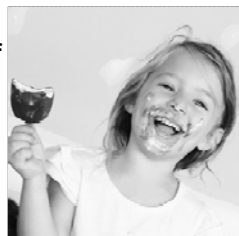
Cognitive and Psychological Strategies

Laugh

Found to be a key indicator of well being in older adults

Think well of yourself

People who rate their health as good have lower risk of death.



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Cognitive and Psychological Strategies

- Be Conscientious
 - Think about death
 - Choose healthy habits,
 - Prioritize own health
 - “Pessimistic enough to care”

“100 Ways to Live to 100” www.huffingtonpost.com 09/23/2013

Cognitive and Psychological Strategies

- Deal with Stress
 - Be resilient
 - Meditate
 - Exercise
 - Take Vacations
 - Have a pet



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Find a Purpose

- Have a reason to live
- Have a spiritual life
- Volunteer
- Mentor younger individuals
- Turn off the TV



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Fun Family Facts

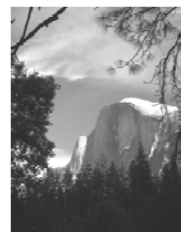
- Get married
- But don't argue
- And don't stay in bad marriage
- Have kids
- But stop at 2
- Dads - have a daughter
- Moms - have twins



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Other “Fun” ways to live longer

- Shop a bit more
 - People who shop frequently live longer
- Move to Hawaii
 - Or North Dakota
 - Or to the mountains
- Take a siesta
- Live in a blue state
- Get Busy
 - Men who have sex more often have a lower rate of CAD
 - Women who enjoy sex may live up to 8 years longer

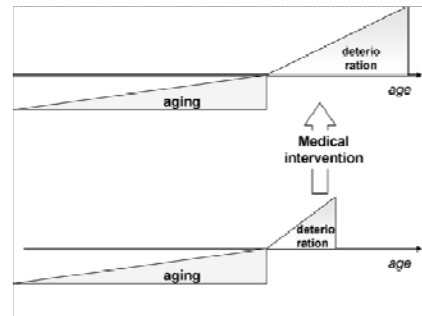


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Aging – Medical Intervention



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Primary Care Considerations

- Counseling and education on Lifestyle measure previously discussed (Tobacco, Exercise, etc)
- Immunizations
- Screening Tests
 - Extensive guidelines from US Preventive Services Task Force
 - Aimed at preventing or detecting conditions early

Managing Conditions

- Conditions easy to detect through physical exam or lab screening
- HTN, Hyperlipidemia, Diabetes management
- Clear guidelines based on studies/data and calculated overall risk
- Studies support reduction in mortality when managed well

Medical Procedures

- **Cardiac Interventions** – angioplasty, stents, bypass grafts, valve replacement surgery.
- **Dialysis** for end stage renal disease, kidney transplants
- **Cancer Treatments**
- **Surgery** – appendectomies, gall bladder removal.

Effects on Life Expectancy

Intervention	Target Population	Gain in Life Expectancy
Vaccines	Infant/Child/Adolescent	0.7 months
Moderate Exercise	Adults	6.2 months
Quitting Smoking	Adults	28-34 months
Pap Smears	Adult Women	3.2 months
Mammograms	Adult Women	0.8-3.1 months
Colon Cancer Screening	Adults > age 50	2.5 months

Wright et al. NEJM: 339(6) 380-386, 1998

Effects on Life Expectancy

Intervention	Target Population	Gain in Life Expectancy
Treat HTN	DBP > 105	66 months
Treat high cholesterol	Total cholesterol > 300	50-76 months
Cardiac stent placement	Diagnosed CAD	1-14 months
Defibrillator placement	Recurrent ventricular arrhythmias	28-34 months
Prophylactic Mastectomy	BRCA -1 or 2 positive	36-46 months
Appendectomy	Suspected appendicitis	9-31 months

Wright et al. NEJM: 339(6) 380-386, 1998

Negative Impacts of Medical Care

- **Adverse outcomes that shorten life**
- **Medical Errors**
- **Adverse drug reactions**
- **Nosocomial infections**
- **Surgical Complications**

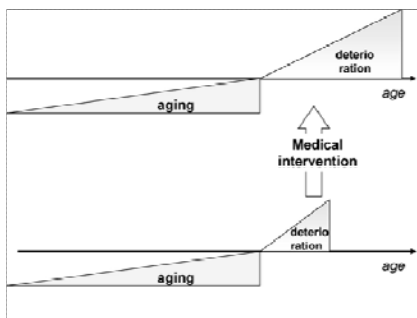
Summary of Impact on Life Expectancy

- Difficult to determine precise impact of medical care.
- Gain of 23 years in life expectancy in first half of 20th century largely attributed to 'mastery of infection'
 - » J Lederberg. International Herald Tribune, 1996

Summary of Impact on Life Expectancy

- Gain of 7.5 years in life expectancy in second half of 20th century. Estimated that about 50% of that due to improved medical care, such as gains from better management of chronic disease that is amenable to treatment
 - » JP Bunker. J Roy Coll Physicians 1995; 29:105-12
- Some of the most significant gains are in quality of life (e.g. treatment of cataracts)

Aging – Medical Intervention



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"We have to age, but we can, to some extent, add years to life, and to a far greater extent, add life to years"

- David Katz, M.D.