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## What promotes longevity?

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### Abstract

**Introduction** Scientists try to answer on the need of a long life with a full physical capability. Nonagenarians, centenarians and their closest family members are characterized by a survival benefit throughout life. Moreover, twin studies of longevity suggest that around 25% of the variation in lifespan in developed countries may be inherited. It is therefore worth to examine the role of inter-relationship between nature vs nurture in longevity increment.

**Material and methods** Articles in the EBSCO database have been analyzed using keywords: longevity, gene, behavior, environment. The available literature was subjectively selected. Then, the newest version of every paper was searched for.

**Results** Restriction of calories as well as intake of desirable nutrients can promote adequate control of metabolic pathways and gene expression. APOE, DRD4, Paraoxonase 1, SIRT 3 and SIRT 5 genes can play an important role in longevity.

**Conclusions** Genetic profile and environmental factors seems to both influence on the longevity. Relationships between genetic profile, behavior pattern, quality of life, years spent free from activity limitations and longevity should be examined, to be able to give a recipe on living a long and happy life.

**Keywords** longevity, gene, behavior, environment

## **Introduction**

The will to live a long life with a full physical capability is a constantly returning theme in culture. Focusing only on one element; namely the Fountain of Youth, numerous sources from worldwide origin is known in today's cultural heritage which are about water which increase vital force of anyone who drinks or bathes in it. Scientists also joined to the search for the secret of longevity. Nonagenarians, centenarians and their closest family members are characterized by a survival benefit throughout life [1, 2]. Lower risk of the two leading causes of death: coronary artery disease, cancer can translate on longevity [3, 4] as well as lack of type-2 diabetes. Moreover, longevity traits of such as: low glucose levels and preserved insulin sensitivity [5, 6] could reveal itself in middle aged members of long-living families. Therefore, it is worth to examine the background factors which facilitate longevity.

### **1.1 Molecular mechanism of longevity. Translation of research evidence from animals to humans**

Many studies show that the most effective method in prolonging life is calorie restriction (CR), it was confirmed in mice, rats, fruit flies, worms, and yeast [7, 8, 9]. Older rodents with CR diet seems to have similar pattern of gene expression to their younger counterpart with ad libitum diet [10]. The sirtuin pathway can play one of the main roles in beneficial effects of CR diet. Sirtuins are deacetylases that regulate/silence gene expression. The pro-longevity effects of CR in yeast require an intact sirtuin pathway [11, 12]. Another main player in longevity is the mammalian target of rapamycin (mTOR), which is an evolutionarily conserved nutrient-sensing protein kinase. It belongs to the phosphoinositide 3-kinase (PI3K)-related protein kinase family and acts as a central regulator of growth and cell division [13]. Several interventions involving mTOR pathway result in increased longevity of various creatures, such as: inhibition of the mTOR signaling pathway in yeast [14] *Caenorhabditis elegans* [15] and rodents [16]. Inhibition of this pathway could provide cardiovascular benefits and improved metabolic function [13]. Inhibition of the mTORC1 pathway may be a one of potential causes of CR, what in turn lead to decrease in cancer incidence and growth rate [17], implying that enhanced mTOR signaling plays a central role in cancer progression and in both Type 1 and Type 2 diabetes, with chronic activity of mTORC1 contributing to obesity and insulin resistance [18].

Resveratrol, one of the polyphenols included in many products, inter alia in red wine, is widely examined in terms of possible pro-health activity. In one study, incorporating both in vivo and in vitro methods, resveratrol suppressed AT1R expression through SIRT1 activation

[19] Authors conclude that inhibition of the renin-angiotensin system may play a role in the prolonging of the lifetime and inhibiting atherogenesis effects of resveratrol [19]. Large part of evidence reveals that resveratrol mimics the effects of CR in increasing the longevity, however, the biological background remains unknown. One of possible explanation is that both CR and resveratrol improve insulin sensitivity, what leads glucose levels reduction in the body [20, 21, 22].

## **1.2 Role of genetic profile in longevity**

Twin studies of longevity suggest that around 25% of the variation in lifespan in developed countries may be inherited [23]. One of candidates on “longevity gene” is the Apolipoprotein E (apoE), involved in lipoprotein metabolism and many other crucial functions [24]. The gene on chromosome 19q13.2 has three common alleles, e2, e3, and e4. Carriers of the e4-allele have higher risk of coronary heart disease and Alzheimer’s disease, relative to people with the most common genotype, e3e3, and carriers of the e2-allele have lower risk [24, 25, 26]. The APOE e4 allele is commonly found among African-Americans (20%), Caucasians (15%) and Japanese (10%) [26]. Interestingly, there could be some sex differences in relation of APOE alleles and longevity. Results of studies on population from southern region of Italy showed that grouping participants due to sex, greater number of e2 carriers was noted only in elderly and centenarian men and not in women [27]. In addition, studies based on a population of 2118 nonagenarian Caucasian sibling pairs from 15 study centers of 11 European countries showed that APOE locus is a longevity gene. Moreover, Authors declare that additional longevity loci could be possibly identified at 14q11.2, 17q12-q22, and 19p13.3-p13.11 [28]. In line with these results, are conclusions from studies based on another population of 403 nonagenarians and 1670 controls younger than 65 years [29] and in a study of 763 long-lived individuals and 1085 younger controls [30] and by a longitudinal study of 1606 Danes which revealed the highest effect size of APOE allele and longevity in the oldest subgroup [31].

FOXO1 polymorphism can play an essential role in longevity in humans [32]. However, these results were not replicated by studies based on large European sample [28].

Moreover, mitochondrial DNA haplotypes, which in most multicellular organisms is maternally inherited, may play a crucial role in longevity. Population-based studies in Europe and Japan have reported that some mitochondrial DNA haplotypes are more common in centenarians than in the general population [33, 34, 35, 36, 37, 38].

The human sirtuin 3 (SIRT3) gene encodes a mitochondrial protein (SIRT3). Studies based

on a population from southern Italy [39] founded coexistence between a marker of SIRT3 and survivorship in a group of males. Moreover, Sirt1, a potential marker and modulator of the drug resistance phenotype in cancer could play a main role in longevity [40]. In addition, there are some tissue-specific examinations on effects of gene polymorphisms on ageing. For example, one low-expressing polymorphism of a Sirtuin5 (SIRT5<sup>prom2</sup>). In a cross-cohort microarray examination of several human brain areas, the largest effect of aging was showed in cingulate, but not amygdala [41].

The DRD4 receptor belongs to the D2-like class of receptors, expressed in several brain regions, with high levels in prefrontal cortex [42]. In a studies comparing two populations (n1=310, n2=2902) the oldest-old population had a 66% increase in individuals carrying the 7R allele of the DRD4 gene [43].

Moreover, studies examining Paraoxonase 1 (PON1) is one of the most commonly examined genes in terms of cardiovascular risk, oxidative stress and inflammation. Results show that PON1 gene variants at codon 192 impact on the probability of attaining longevity, and that subjects carrying RR and QR genotypes (R+ carriers) are favored in reaching extreme ages [44].

In addition, two studies based on the same population from Finland it was shown that subgroup characterized by the high producer genotype of Interleukin-6 (IL6) is associated with increased mortality [45] and that characterized by the high produce of C-reactive protein (CRP) genotype had shorter life expectancy [46]. Curcumin may protect against oxidant- and lipid-induced damage in the inflammatory cells of the vascular system, thus reducing the risk for age-associated cardiovascular disease by increasing FoxO3 activity [47]. The concept of inflammAGING have both solid theoretical background [48] which was later appreciated in experimental studies on interaction of the longevity and genetic profile [49].

### **1.3 Role of diet in longevity**

A study on a sample of 7989 men aged 65 to 83 years from Perth, Western Australia has verified that a “healthy lifestyle”, which included diet, allows for a lengthening of the average life by a nearly five years [50]. The researchers from Denmark came to similar conclusions, studying a group of women aged 60 to 69 years, where they emphasize the importance of the type of diet. According to the results, a Healthy Traditional Dutch Diet, with high intakes of vegetables, fruits, nonalcoholic drinks, dairy products and potatoes, can reduce mortality risk by 30%, compared to diet with high intakes of meat, potatoes, vegetables and alcoholic drinks [51].

There are currently many studies on the effects of the Mediterranean Diet (MD), which is combination of fruit and vegetables, fish, cereals and polyunsaturated fats, on longevity, and its meaning has been declared by United Nations Educational, Scientific and Cultural Organization (UNESCO) in 2010 [52, 53]. Recent studies indicate the impact of MD on reducing cancer progression and the incidence of obesity and obesity-related diseases, such as metabolic syndrome, which prolongs the life expectancy [53]. MD appears to be more effective in terms of longevity promotion, than traditional diet for a given area and should be widely recommended, for example in Great Britain [54]. However, studies from Denmark show that a Healthy Traditional Dutch Diet is even more beneficial than MD in terms of longevity and pro-health effects [51].

The effects of particular types of food on aging process seems to be important also. Results of studies conducted in Shanghai shows that eating fruits and drinking milk at a young age lower the risk of developing high blood pressure in middle and old age [55]. Other studies underline the importance of eating fruits and vegetables in preventing the development of osteoporosis [56] and high levels of LDL cholesterol [57], which can significantly prolong human life and improve its quality.

#### **1.4 Methodological problems in researches on longevity**

Based on the above reviewed results, one can suppose that years of staying healthy/without diseases life is a crucial factor in longevity. Indeed, other Authors proposed three ways to becoming a centenarian: surviving one or more potentially fatal age-related diseases, delaying their onset, or staying healthy [58]. In contrary to that, Eurostat statistics show “gender gap” in longevity in favor for greater longevity of women. Men longevity are on average shorter, although greater proportion of life is spent free from activity limitations [59].

However, studies on longevity are not free from methodological problems. Lewis et al propose that two of commonly stated assumptions in such studies are very labile [60]. The first assumption, that allele frequencies in the different age groups are similar do not take into account, inter alia, various migrations of populations. Another assumption of independency between genotype and year of birth in terms of risk of mortality [60]. This assumption may be broken, especially when taking into account that often examined population is the European one which the date birth is around a second world war or around, when unusual environmental factors occurred.

Moreover, studies on p66Shc in relation to the coronary artery disease occurrence concluded,

that variations of this gene which could have potential influence on patients health state are so rare in a examined population, that this gene is not involved in the mechanism of coronary artery disease [61].

One can suppose that empirical evidence on methodological weaknesses of studies on longevity can be revealed by the French paradox. It is understood as a high intake of dietary cholesterol and saturated fat but low coronary heart disease death rates and has several potential explanations [62]. Pattern of attitude and behavior such as pleasure-centered attitude to food and regular, moderate wine drinking pattern could possibly explain in part this paradox [62]. Moreover, the pattern of leisure time physical activity can play a significant role as well [62]. Most importantly, it show to scientists how much is yet to-be discovered.

### **Conclusion**

Both genetic profile and environmental factors seems to influence on longevity. Most importantly, longevity seems to be more dependent on the second factor, which means that it is worth to conduct epidemiological studies on longevity, which results could be translated to popular science sources available to laymen which want to gain the knowledge, especially about potentially modifiable factors that increase longevity. It seems that the target group of recipients of such information should not be restricted to older people only: longevity seems to be a result from life-long daily pattern of behaviors, what was confirmed by the results of researches, with important point in the mid-life. In terms of longevity, diet plays a crucial role. Restriction of calories as well as intake of desirable nutrients can promote adequate control of metabolic pathways and gene expression.

Further studies on the role of the genetic profile in longevity should incorporate large populations to ensure proper size of subgroups with even the most uncommon alleles. Moreover, diet pattern, for example: alcohol consumption should not be measured in quantity only manner; it seems reasonable to measure the time of intake (wine to dinner pattern in Mediterranean diet vs binge drinking at night). In addition, the level of social contacts, approach to coping with daily life problems etc. might be included into analysis also. The role of physical activity, which description was beyond of the scope of above review, could also be examined due to the fact of well-known disease prevention effects, what in turn can potentially promotes longevity. Last but not least, relationships between behavior pattern, quality of life, years spent free from activity limitations and longevity should be examined to give a clues on living a long and happy life.

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