

THE RISK OF LIVING LONGER

Thank you for joining us – the webinar will start shortly



Douglas and Uli ask the ultimate question of human longevity for financial institutions:

How long can we go?



Season 2 program

Session 1 Sept 10th, 2024	Longevity Science – Advancing from Cure to Prevention	•	Dominik Thor, Geneva College of Longevity Science	Today!
Session 2 Oct 2024	Behavio(u)ral change	•	Further details coming soon	
Session 3 Nov 2024	Quantifying the effects of geroscience	•	Further details coming soon	
Session 4 Dec 2024	Preventing dementia	•	Further details coming soon	

For full details and registration for the series,

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THE RISK OF LIVING LONGER

Longevity Science – Advancing from Cure to Prevention



Douglas Anderson
(Chair)
Club Vita



Ulrich Stengele
(Chair)
Nationwide Financial



Dominik Thor (Panelist)

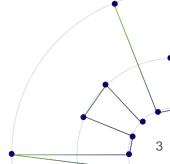
Geneva College of Longevity Science



Poll question

"How familiar are you with the field of Longevity Science?"

- Never heard of it
- I've heard of it, but I'm not entirely sure what it is
- I think I have a good understanding of the field
- I am an expert in the field of longevity science











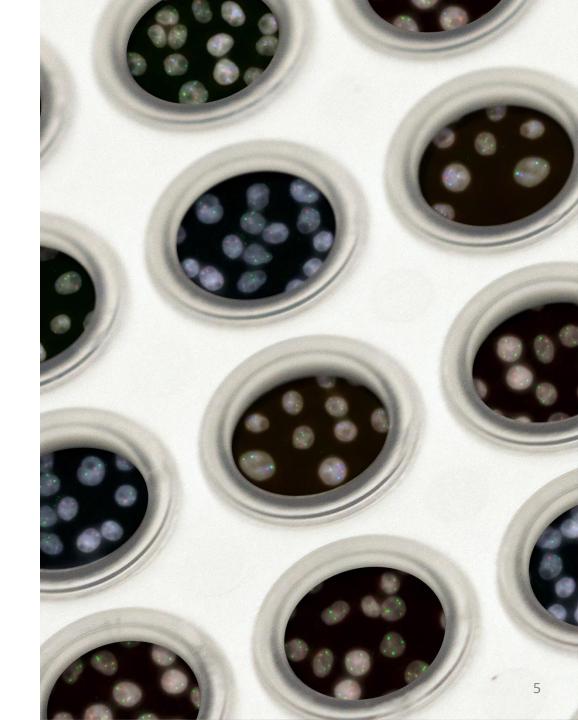


Webinar Series: The Risk of Living Longer

Longevity Science – Advancing From Cure To Prevention

1. What is Longevity Science?

Regardless of the specific diseases that are identified as the leading causes of death, old age always is their predominant risk factor. Researchers in longevity, therefore, argue that age itself is the ultimate leading cause of death. This perspective challenges traditional views and underscores the importance of addressing aging as a medical condition.

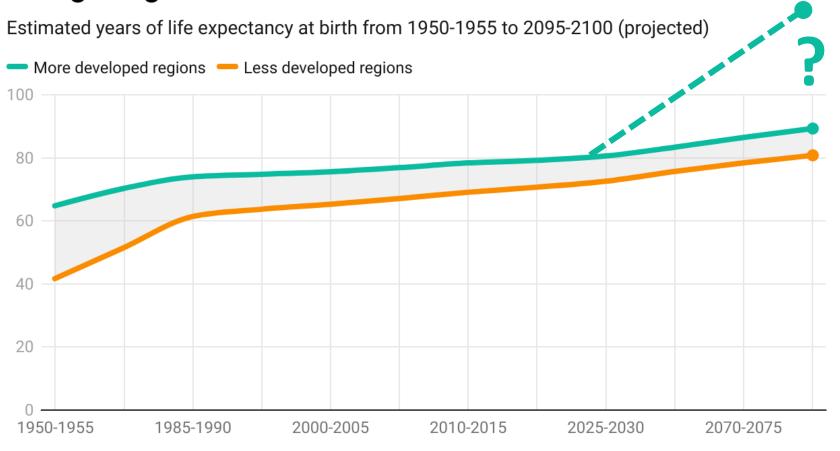






Increasing Life
Expectancy has
Sparked
Interest in
Longevity.

Living Longer

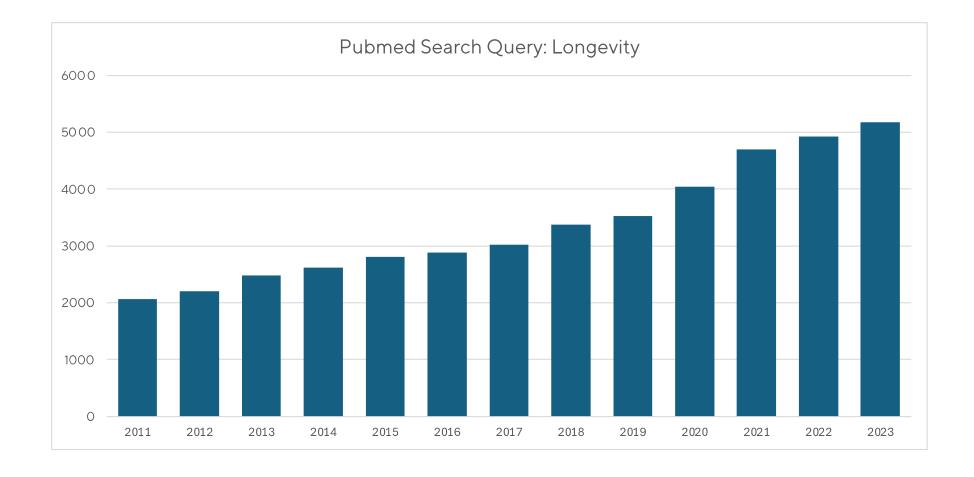


Source: UN Department of Economic and Social Affairs • Created with Datawrapper





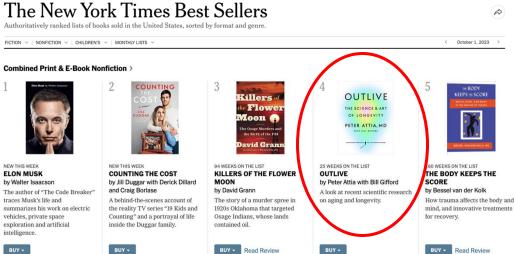
A Surge in
Longevity
Research
Driven By
Advances in
Biotech,
Genetics, and
Personalized
Medicine.







Growing Public Interest in Longevity













A Holistic Understanding of Longevity. Longevity is often thought of simply as living longer when the concept of longevity actually is more encompassing and nuanced, including different important aspects:

- 1. **Lifespan** extension refers to increasing the number of years a person lives, aiming to push the boundaries of the maximum human lifespan through medical and lifestyle interventions.
- 2. Extending **Healthspan** involves delaying or preventing the onset of chronic diseases and conditions associated with aging, thereby ensuring that more of a person's life is spent in good health.
- **3. Quality of Life** the overall well-being and satisfaction experienced by individuals, including physical, mental, and social aspects.





Longevity
Science Could
Redefine
Humanity's
trajectory.

The Personal and Societal Benefits of Longevity:

- **Enhanced Family Bonding:** Increased lifespan affords us ample time to cherish moments with our relatives, fostering stronger familial connections and building enduring recollections.
- Extended Work Engagement: With prolonged vitality, individuals can continue their professional endeavors, utilizing their expertise and knowledge for an extended duration.
- **Economic Advancement:** A lengthier, healthy lifespan translates into more years of financial productivity, potentially boosting economic growth on a national scale.
- Accumulation of Wealth: Extended careers provide individuals with additional opportunities to save and invest, augmenting personal finances and bolstering financial stability.
- Cultural and Intellectual Exchange: Longevity encourages interactions between different generations, facilitating the sharing of ideas, values, and wisdom across diverse age demographics.

- Active Community Participation: With increased longevity comes the ability to actively engage in community activities, contributing to social causes and initiatives for communal progress.
- Opportunities for Entrepreneurship: Prolonged lifespan opens doors for latecomers to the entrepreneurial scene, allowing them more time to innovate, establish businesses, and make economic contributions.
- Sustainable Social Welfare Systems: Individuals who enjoy longer, productive lives contribute to social welfare programs over extended periods, ensuring the longevity and viability of these systems for future generations.
- Extended Access to Wisdom: Longevity affords individuals the opportunity to tap into accumulated wisdom and experience for more prolonged periods, enriching personal growth and societal knowledge.
- **Encouragement of Innovation:** With longer lifespans, there is a greater potential for fostering innovation as individuals have more time to explore ideas, take risks, and contribute fresh perspectives to various fields.





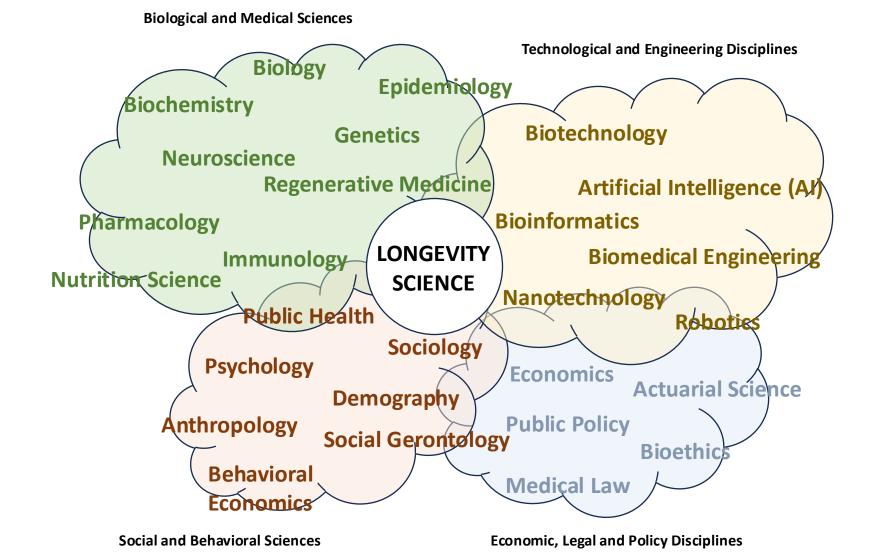
Longevity
Science as an Independent
Scientific
Discipline.

	Scope	Goals	Approach
Longevity Science	Focuses on extending lifespan and healthspan through interdisciplinary research and innovation.	Aims to extend healthy, productive years of life.	Proactive and integrative, using advanced technologies and interdisciplinary methods.
Medicine	Concentrates on diagnosing, treating, and preventing diseases within the existing healthcare framework.	Seeks to maintain and restore health by treating diseases.	Reactive and treatment- oriented, with a focus on individual health issues.
Gerontology	Studies aging from a multidisciplinary perspective, including biological, social, and psychological aspects.	Aims to understand aging and improve the quality of life for older adults.	Research-focused, considering mostly social and psychological factors.





Mapping Out Inter-disciplinary Longevity Science.







Why is Longevity Sciences needed?

- **1. Holistic Approach:** Longevity science integrates insights from multiple fields to address aging from a broader perspective, focusing on both lifespan and healthspan.
- 2. Unified Focus on Aging: It brings together diverse fields like biology, medicine, technology, and sociology with the common goal of understanding and improving the aging process.
- **3. Efficient Collaboration:** A dedicated field fosters collaboration across disciplines, leading to more coordinated research and innovation.
- **4. Targeted Solutions:** Longevity science develops specific interventions aimed at delaying aging, rather than addressing individual diseases separately.
- **5. Societal Impact:** It addresses the wide-reaching effects of aging on healthcare, economy, and public policy, ensuring a comprehensive response to global demographic changes.





Historical
Parallels to
Public Health
Demonstrate
Potential
Impact.

- Public health serves as a strong reference point, being a relatively young discipline that has already
 made a tremendous impact on global health. Both fields are inherently interdisciplinary, drawing
 from diverse areas of science, medicine, and social policy.
- The growth of scientific understanding regarding the sources and control of disease in public health
 demonstrated how targeted interventions could significantly improve societal health. This causeand-effect relationship between disease control and public well-being, once understood, led to its
 widespread acceptance as a public responsibility and in turn to a dramatic increase in expected life
 expectancy.
- Similarly, as **longevity science** advances, its insights could shape public health policy and education and encouraging proactive measures to further **increase lifespan and healthspan**.





The First
Dedicated
Longevity
Science
Curriculum



The First Institution for Higher Education in Longevity Science

Geneva College of Longevity Science

Academic Degree

Executive Master of Science in Longevity; EMSc Longevity (GCLS)

Period of Study

2 semesters (12 Months)

Language

English

Format

Distance learning, part-time

ECTS Credits

60

Introduction to Longevity Science

Biomedical Foundations of Aging

Nutrition and Longevity Exercise Physiology and Aging

Technological Innovations in Longevity Ethics and Policy in Longevity Science

Public Health and Epidemiology of Aging Social and Psychological Dimensions of Aging

Medical Longevity
Intervention

Longevity Supplements and Compounds

15

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Webinar Series: The Risk of Living Longer

Longevity Science – Advancing From Cure To Prevention

2. Is Prevention Really Better than a Cure?

Prevention is generally considered better than a cure, both in terms of health outcomes and financial savings. Preventing disease is generally more effective and less costly than treating it.







Why
Prevention?
The Example of
Cardio-vascular
Disease

It is estimated that for every \$1 spent on preventive health programs, up to \$6 in future healthcare costs can be saved.

The Example of Preventing Cardiovascular Disease:

Cost of Preventive Measures of high blood pressure (hypertension):

- Annual blood pressure screening: \$10–\$50 per person
- Lifestyle intervention (e.g., weight loss, smoking cessation, exercise programs): \$200–\$500 per year
- Medication for managing high blood pressure: \$300–\$1,000 per year for generic drugs
- Total annual prevention cost: approximately \$510-\$1,550 per person.

Cost of Cure (Treatment after Cardiovascular Disease / Heart Attack)

- Hospitalization: \$20,000-\$40,000 (including diagnostic tests, hospital stay, and initial treatment)
- Surgery (if needed), such as coronary artery bypass surgery: \$70,000-\$200,000
- Post-surgery rehabilitation: \$1,000–\$5,000
- Long-term medications and follow-up care: \$2,000-\$10,000 per year for life
- Total cost of a heart attack: between \$90,000 and \$250,000 for the first year of treatment.





Age is the Primary Risk Factor for Various Diseases, Overshadowing Other Factors in Significance.

AGE vs. SMOKING: The presence of benzopyrene in cigarette smoke heightens the likelihood of structural disruptions in DNA strands. This increased focus on DNA repair mechanisms by epigenetic factors can lead to misregulated genes, creating an environment conducive to cancer cells. Consequently, smoking for an extended period elevates the risk of lung cancer by five times. However, reaching the age of 50 increases the cancer risk a hundredfold, and by 70, it skyrockets to a thousandfold. It is evident that age represents the most significant risk factor for diseases, necessitating our urgent attention.

AGE vs. CHOLESTEROL: Elevated cholesterol levels may amplify the risk of heart disease by up to twenty times - however, being eighty years old escalates the risk to 500 times that of someone in their twenties. Eating a plan-based diet may reduce the risk of dementia by threefold, but the difference in dementia rates between eight-five year olds and those of individuals aged sixte-five and less is three hundredfold. Adopting a plant-based diet might decrease the risk of dementia by more than 50% but staying younger seems more effective dementia of individuals aged eighty-five is 300 times more likely than in those aged sixty-five and below.6

⁶ https://pubmed.ncbi.nlm.nih.gov/32111640/





Optimal
Prevention –
Addressing
Biological Age.

- Should we focus fighting individual diseases or we look into something that could prevent all of them?
- Even a cure for cancer would only increase the average life expectancy in the US by 3 years, as there are other age-related diseases that will continue to affect our wellbeing as we grow older.
- Aging is the single greatest risk factor for many chronic diseases, including heart disease, cancer, diabetes, and Alzheimer's.
- Understand the underlying biological processes that cause aging at the cellular and molecular levels could lead to therapies that target the root causes of multiple diseases simultaneously.
- The only question that remains, is it doable? Many experts say yes. And even the WHO already implies the modifiable nature of ageing.



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3. What is Preventative Medicine?

By prioritizing prevention, the burden of chronic diseases can be reduced, health outcomes improved, and healthcare costs saved.







What is Preventative Medicine?

Preventive medicine is a medical practice focused on preventing diseases, injuries, and health conditions before they occur, rather than treating them after they have developed.

Preventive medicine includes strategies such as:

- Screening programs (e.g., mammograms, colonoscopies) to detect early signs of disease.
- Vaccination to protect against infectious diseases.
- Health education promoting healthy behaviors like regular exercise, a balanced diet, smoking cessation, and stress management.
- Behavioral interventions targeting lifestyle factors that increase disease risk (e.g., obesity, high blood pressure).
- Early intervention for individuals at high risk of developing diseases due to genetic or environmental factors.





Why is it Often Called Medicine 3.0?

The concept of Medicine 3.0 is often hailed as the next evolution of healthcare and represents a shift from treating diseases to preventing them.

Medicine 1.0



Medicine 2.0



Medicine 3.0

- Traditional model of medicine
- Reactive = focusing on treating diseases after they emerged
- One-size-fits-all approach
- Less effective for chronic conditions and long-term health management

- Evidence-based approach to healthcare
- Focus on managing chronic diseases like diabetes, heart disease, through better diagnostics, medications, and managing risk factors.
- Treating diseases rather than preventing them.

- Strong emphasis on early detection and intervention to prevent the onset of diseases
- Personalized = integrates genetic, environmental, and lifestyle factors to tailor health interventions to the individual
- Data-driven using technology and AI.





Longevity
Medicine as
the Next
Evolution After
Medicine 3.0.

The concept of Longevity Medicine is a related concept but has a different focus.

- Shares a preventative, ultra-personalized approach using new technologies.
- But **emphasises targeting the most dominant risk factor of diseases (age)** rather than individual diseases.
- Specifically targets **extending lifespan and healthspan**, focusing on slowing or even reversing the aging process and treating age-related conditions.



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4. How to Foster Change?

How might healthcare systems, traditionally focused on treatment rather than prevention, transition to a prevention-first approach?







Hurdles to
Taking a More
Preventive
Approach.

- **Financial incentives:** Healthcare systems are often rewarded for treating illness rather than preventing it.
- Cultural resistance: Both providers and patients are accustomed to reactive care.
- **Upfront costs:** Implementing preventive measures may require initial investment before long-term savings are realized.
- Lack of infrastructure: Systems may not have adequate technology or resources to track and implement preventive care.





Proposals for Changes.

- Revised payment models: Shift payment systems from fee-for-service to valuebased care, where providers are rewarded for keeping patients healthy rather than for the volume of treatments. This incentivizes preventive care and long-term health management.
- Education and awareness: Both healthcare professionals and patients need education on the importance of prevention. Foster a Prevention-Oriented Culture and encourage companies - healthy employees are more productive and cost less in healthcare.
- Policy reforms: Government policies should incentivize preventive care, such as subsidizing screenings and wellness programs.
- Technological investment: Utilize data analytics and health monitoring tools to predict and prevent diseases.
- Use data analytics and performance metrics: Tracking health outcomes can demonstrate the cost savings and effectiveness of prevention. Track preventive care outcomes, such as reductions in chronic disease rates or hospital admissions and hold healthcare providers accountable.



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5. How to Encourage Wider Buy-in in Society?

Making Medicine 3.0 and Longevity Medicine more accessible.







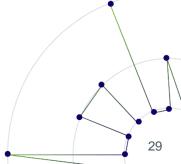
Make Longevity Medicine Affordable.

- ✓ Subsidize research and development.
- ✓ Foster global collaborations to share research and costs
- ✓ Encourage public-private partnerships.
- ✓ Speed up translation of innovations.
- ✓ Invest in preventive care to reduce future costs.
- ✓ Expand insurance coverage for longevity treatments.
- ✓ Promote generic alternatives to expensive drugs.
- ✓ Scale up production to lower prices.
- ✓ Incentivize affordable healthcare innovations.

Poll question

"On a scale of 1 (not for me) to 5 (fantastic) how would you rate today's webinar?"







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Thank you

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Mapping Out Inter-disciplinary Longevity Science.

Biological and Medical Sciences

- Biology Understanding the cellular and molecular mechanisms of aging.
- Genetics Study of genetic factors that influence longevity and aging.
- Biochemistry Investigation of the biochemical processes related to aging.
- Neuroscience Exploring the aging brain and cognitive decline.
- Regenerative Medicine Developing therapies to repair or replace aging tissues and organs.
- Pharmacology Researching drugs that can slow or reverse the aging process.
- Epidemiology Studying population health trends related to aging.
- Geriatrics Medical care and treatment for elderly populations.
- Immunology Understanding how the immune system ages and its role in longevity.
- Nutrition Science Investigating how diet influences lifespan and healthspan.
- Public Health Addressing aging at a population level, focusing on prevention and wellness.

Technological and Engineering Disciplines

- Biotechnology Developing tools and treatments to combat aging, such as gene editing and stem cells.
- Artificial Intelligence (AI)— Analyzing health data to predict aging patterns and personalize treatments.
- Bioinformatics Using computational tools to study aging and longevity at a molecular level.
- Biomedical Engineering Designing devices and technologies to enhance health in older adult.
- Nanotechnology Exploring tiny interventions at the cellular level to repair age-related damage.
- Robotics Assisting with elderly care through robots and automation.





Mapping Out Inter-disciplinary Longevity Science.

Social and Behavioral Sciences

- Sociology Examining the societal implications of aging populations.
- Psychology Understanding mental well-being, cognitive function, and emotional health as people age.
- Demography Studying the age structure of populations and the impact of increasing longevity.
- Anthropology Exploring cultural differences in aging and longevity.
- Social Gerontology Focusing on the social aspects of aging, including retirement, caregiving etc.
- Behavioral Economics Analyzing how people make health and financial decisions that affect longevity.

Economic, Law and Policy Disciplines

- Economics Studying the impact of longer life on healthcare, pensions, and workforce productivity.
- Healthcare Economics Investigating the costs needed to support aging populations.
- Actuarial Science Assessing risks of increased longevity, especially for insurance and pension systems.
- Public Policy Developing policies to address the needs of aging societies.
- Labor Economics Analyzing how an aging workforce affects employment.
- Bioethics Addressing ethical concerns around life extension, resource allocation, and end-of-life care.
- Medical Law Navigating legal issues related to healthcare access and the use of new technologies.
- Social Welfare Examining how social safety nets are adapted for aging populations.