## Mechanisms of ageing

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ARTICLE

## Abstract

Recent experimental work from a variety of biological systems, ranging from yeast to human beings, lends increasing support to the view that stochastic damage inflicted to biological macromolecules is the driving force for the ageing process. The damage is derived from small reactive molecules, most prominently reactive oxygen intermediates (ROI), that arise during normal cellular metabolism and are associated with important if not essential cellular functions. The major classes of macromolecules at risk are proteins, lipids and DNA, but damage to DNA (both nuclear and mitochondrial) may entail particularly severe consequences. Cellular dysfunction resulting from macromolecular damage can be detected as a variety of expressions, such as genomic instability, inappropriate cell differentiation events or cell death. While for post-mitotic cell types replacement of the dead cell by another cell of the same lineage is not possible, mitotic cell types may initially replace dead cells via cell proliferation. But exhaustion of the selfrenewal capacity of the respective lineage, by either replication-associated or damageassociated telomere shortening, will ultimately also lead to loss of parenchymal cell mass and functional impairment of tissues, the latter being a typical feature of ageing of tissues and organs. It has been demonstrated in various experimental systems that the rate ageing of can be retarded by lowering the production of endogenous ROI or by improving cellular anti-oxidative defences. Whether augmentation of cellular DNA repair capacity will have the same effect remains to be seen.

Ageing can been defined as the time-dependent general decline of physiological functions of an organism, which is associated with a progressively increasing risk of morbidity and mortality.<sup>1</sup> The field of biogeronotology is currently in the process of developing into an important and competitive discipline of basic biomedical research, but the mechanisms underlying ageing are still far from being understood.

Table 1 presents a selection of the currently preferred biological systems in ageing research. The major results from work performed in all

these diverse systems is summarised in a highly simplified scheme as given in Fig. 1, which is by no means intended to be comprehensive. The driving force for the ageing process seems to be 'damage' (i.e. stochastic chemical change) inflicted to biological macromolecules, which interferes with their function. Importantly, most damage is derived from small reactive molecules that arise during normal cellular metabolism and are associated with important if not essential cellular functions such as oxygen transport and respiration, phagocyte activity, or detoxification of xenobiotics. Reactive oxygen intermediates (ROI; comprising singlet oxygen, superoxide, hydrogen peroxide and hydroxyl radicals) feature most prominently among these endogenous damaging agents and can create a state of 'oxidative stress'.<sup>33</sup> In addition, nitric oxide and its metabolite peroxinitrite, as well as endogenously formed alkylating agents and the aldehyde products of lipid peroxidation, all have the capacity to damage macromolecules. The major classes of macromolecules at risk are proteins, lipids and DNA, but damage to DNA may be particularly harmful, since in contrast to most other macromolecules there is little if any turnover of DNA to dilute the damage. In addition, since all genetic information of the cells resides in DNA and most genes are present at a low copy numbers, any errors in the coding function of DNA can 'amplify' to the level of proteins and their respective functions. It should be noted that mitochondria carry their own genome, and mitochondrial DNA is particularly vulnerable to oxidative damage to the close proximity to the respiratory chain, the major site of ROI formation,<sup>34</sup> and is subject to a very high mutation rate.35

The cellular dysfunction resulting from macromolecular damage can be detected as a variety of expressions, such as genomic instability, inappropriate cell differentiation events or cell death. Genomic instability is a term collectively describing alterations in the genome, such as point mutations in DNA, amplifications and deletions of DNA sequences, gene rearrangements, and structural or numerical chromosomal aberrations. Genomic instability is recognised as a driving force for the process of carcinogenesis, and indeed for most cancers the single most important risk factor is age.<sup>36</sup> Damage-driven cell differentiation events, on the other hand, can lead to secondary consequences, resulting from

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Species	Available biological material and typical experimental setting
Saccharomyces cerevisiae (yeast)	• Transformation experiments (gene knock-out/overexpression) <sup>2,3</sup>
Podospora anserina (filamentous fungus)	<ul> <li>Long-lived laboratory strains available<sup>4</sup></li> <li>Genes identified which confer life span extension if inactivated<sup>4</sup></li> </ul>
Caenorhabditis elegans (nematode)	<ul> <li>Mutants isolated with extended life span<sup>5</sup></li> <li>Transgenic worms with extended life span<sup>5</sup></li> <li>Caloric restriction to extend life span<sup>6</sup></li> </ul>
Drosophila melanogaster	<ul> <li>Drugs which mimic Mn-superoxide dismutase to extend life span<sup>7</sup></li> <li>Transgenic flies with extended life span<sup>8</sup></li> <li>Low-molecular-weight antioxidants in diet to extend life span<sup>9</sup></li> </ul>
Rodents	<ul> <li>Mutants with premature ageing (e.g. Klotho<sup>10</sup>)</li> <li>Transgenic mice to study accumulation of mutations<sup>11</sup></li> <li>Gene knock-out mice to create symptoms resembling normal human ageing<sup>12</sup> or to extend life span<sup>13</sup></li> <li>Tissue stem cells and ageing<sup>14</sup></li> <li>Caloric restriction to extend life span<sup>15,16</sup></li> </ul>
Primates Humans	<ul> <li>Cell culture work (including transfection experiments) on cellular stress responses<sup>17</sup></li> <li>Caloric restriction<sup>18</sup></li> <li>Progeroid syndromes (e.g. Werner syndrome, <sup>19,20</sup> Progeria Hutchinson Gilford,<sup>21</sup> DNA repair deficiency syndromes<sup>22</sup>)</li> <li>Comparisons between long-lived people (centenarians) and controls<sup>23,24</sup></li> <li>Cell culture work (including transfection experiments) on replicative ageing and cellular stress responses<sup>25–32</sup></li> </ul>

It should be noted that in all the systems listed above comparative studies between young and old individuals are being conducted concerning gene expression or at the level of organ/cellular function.

alterations in the metabolism of the differentiated cell (e.g. altered pattern of secretion of inflammatory mediators or extracellular matrix components). Finally, non-functional or dysfunctional cells can be eliminated by apoptosis (programmed cell death). The immediate consequences will differ according to cell type: For postmitotic cells (e.g. neurones, muscle cells), replacement of the dead cell by another cell of the same lineage may not be possible. Instead, neighbouring cells may take over the function of the lost one to some extent, while the filling of the 'empty space' will rather occur by proliferating connective tissue, equivalent to scar formation. For mitotic cell types (e.g. stem cell systems, fibroblasts), the lost cell may initially be replaced via cell proliferation, thus preventing any immediate structural or functional impairment of the tissue. However, the proliferative self-renewal capacity of the respective lineage declines and eventually becomes exhausted, be it through reaching replicative senescence<sup>25</sup> (the 'Hayflick limit') due to the replication-associated loss of telomeric repeat units at the end of chromosomes<sup>26</sup> or due to accelerated telomere loss resulting from the accumulation of DNA damage in telomeres.<sup>29</sup> Then the same situation arises as outlined above for post-mitotic cells, and the loss of parenchymal cell mass as well as functional impairment will become manifest, the latter being a typical feature of ageing in many tissues and organs.

It is likely that cells may accumulate damage or genomic instabilities slowly over time without any significant phenotypic effect. Only when a critical threshold of cumulative damage (or of primary consequences of damage) is reached will the cells cease to function properly. Such functional deficit will first become manifest if the organism is undergoing some

physical stress (such as trauma, vigorous physical activity, electrolyte and nutrient imbalances, infection), thus challenging the spare capacities of organ function which are lost with ageing.

Based on the above reasoning, the following may be deduced:

(1) A low rate of endogenous ROI formation will keep the risk of DNA damage low. In fact, a long-lived mutant of the filamentous fungus Podospora anserina displays reduced ROI production in mitochondria.<sup>4</sup> Likewise the rate of mitochondrial ROI formation has been shown to be much lower in long-lived versus short-lived vertebrate species.<sup>37,38</sup> Interestingly, caloric restriction (i.e. undernutrition coupled with a full supply of vitamins, minerals and other essential dietary components) in rodents seems to decrease ROI formation,<sup>16</sup> and this may be a crucial mechanism for its life-span extension and anti-cancer effects.

(2) Efficient anti-oxidative defences will prevent at least some ROI from damaging DNA. To some extent, cells are protected against the damaging effects of ROI by means of non-enzymatic and enzymatic antioxidant activities through which oxidants are detoxified before they can damage cellular macromolecules.<sup>33</sup> In a number of experimental systems involving genetic or pharmacological interventions it could be demonstated that an increased cellular anti-oxidative capacity retards the ageing process and extends life span.<sup>7-9</sup>

(3) DNA repair mechanisms will antagonise the accumulation of DNA damage. Once DNA damage has already been inflicted, at least some may be removed by DNA repair activities. The pivotal importance of efficient DNA repair systems in the protection against physical or chemical carcinogenesis has long been demonstrated in a number of experimental systems<sup>22</sup> and positive

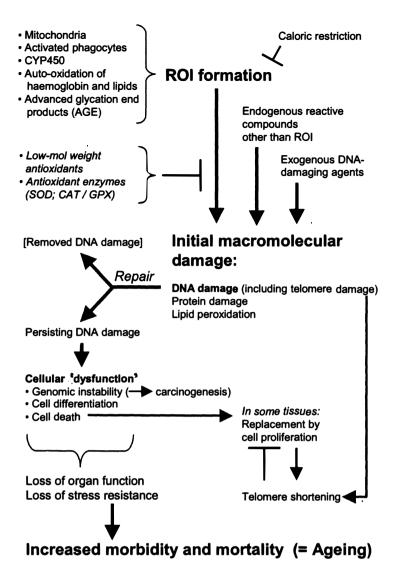


Fig. 1. Macromolecular damage and the ageing process. CAT, catalase; CYP450, cytochrome P450; GPX, glutathione peroxidase; ROI, reactive oxygen intermediates; SOD, superoxide dismustase. For details see text.

correlations have been described between the activity of DNA nucleotide-excision repair and life span of mammalian species.<sup>39,40</sup> Whether augmentation of cellular DNA repair capacity will have the same effect remains to be seen.

Our own work has been focused on an enzymatic activity, poly(ADP-ribosyl)ation,<sup>41,42</sup> which is triggered by DNA strand breaks and is associated with DNA baseexcision repair<sup>43</sup> (i.e. a pathway that preferentially deals with oxidative DNA damage). In a comparative study we established a positive correlation between the cellular capacity to form poly(ADP-ribose) and life span in mammalian species,<sup>44</sup> and we have begun to unravel the underlying mechanism at the molecular level.<sup>45</sup> In addition, we showed an association between high cellular poly(ADP-ribosyl)ation capacity and longevity in humans.<sup>24</sup> Furthermore, we performed cell culture transfection experiments to further elucidate the biological role of poly(ADP-ribosyl)ation. Our recent data revealed that poly(ADP-ribosyl)ation acts as a negative regulator of genomic instability.46 Viewed

together with the fact that cells from long-lived species<sup>44</sup> or individuals<sup>24</sup> possess high poly(ADP-ribosyl)ation capacity, the picture emerges that poly(ADP-ribosyl)ation may actually be a key factor responsible for tuning the rate of genomic instability events, provoked by the constant attack by endogenous and exogenous DNA-damaging agents, to a level that is just appropriate for the longevity potential of a given organism or species.<sup>47</sup>

Ageing-associated diseases and disabilities can affect any organ in the body and place an already enormous yet rapidly growing burden on the social and economic systems in developed countries. It is obvious that detailed studies of the multiple components of cellular damage, protection and repair pathways and their networks of interaction<sup>48</sup> are required to fully understand the molecular basis of the ageing process. Such understanding is indispensable if we are to develop novel modalities of prevention and treatment of ageingassociated pathologies. Our own work cited here was supported by grants from the Deutsche Forschungsgemeinschaft (Bu 698/2-1, -2, -3, and -4) and from the EU Commission (Concerted Action Programme on 'Molecular gerontology: the identification of links between ageing and the onset of age-related diseases [MOLGERON]': BMH1 CT94 1710).

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