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Preface

Genetics and Epigenetics in Aging and Longevity: Myths and Truths[☆]

Aging is an irreversible complex biological process, characterized by progressive decline in organismal function and increased vulnerability to chronic diseases including cardiovascular diseases, dementia, cancers, and metabolic diseases. With the increase in human lifespan, we are facing a rapidly growing aging population in our society and associated high health care burden [1]. To this end, how to best promote the healthy aging (healthspan) and longevity (lifespan) becomes an intimate issue for health care professionals. The search and identification of aging/longevity-associated genes and signal pathways such as Sirtuins have greatly assist us to unveil the molecular mechanisms underneath aging and healthspan [2,3]. Despite of the recent advancement in medicine and evidence-based therapies, unfavorable structural and functional changes develop in organs with time, culminating in the increased prevalence of diseases such as cardiovascular and chronic diseases (e.g., cancer and metabolic anomalies) in the elderly [1,4]. For example, ventricular dilatation, deterioration of cardiac function and reserve, endothelial dysfunction and hypertension develop with age to impose a high cardiovascular morbidity and mortality [2,3]. Up-to-date, several theories were postulated for biology of aging including the ‘free radical theory of aging’, the ‘glycation theory of aging’, the ‘evolutionary theory of aging’, the ‘replication theory of aging’ and the ‘telomerase length theory of aging’ [4], to trigger adaptive and maladaptive organismal changes under the interactions of genes and environments. A better and thorough understanding of the complex genetic and epigenetic regulation of aging process and longevity should help to better develop new strategies to confront challenge brought forward by this irreversible biology process. Here we are presenting this special issue of “BBA Mol Basis Disease” on “Genetic and epigenetic regulation of aging and longevity”. Our enthusiasm for this topic rooted from the profound prevalence of genetic and epigenetic cues for lifespan extension and health aging. Disruption of these genetic and epigenetic processes often leads to changes in the course of lifespan, with various pathological sequelae. To optimize the health care management in the elderly, it is imperative to improve our knowledge for genetic and epigenetic regulation of aging process and longevity. For example, chromatin connectivity is likely compromised with age, resulting in the displacement of constitutive heterochromatin by the senescence-associated heterochromatin, a process essential for aging [5]. This special series has gathered 20 clinical and experimental contributions from experts around the world discussing the current understanding of the mechanisms in the genetic and epigenetic regulation of aging and longevity, and the potential for targeting novel pathways to combat aging complications.

In the first article of this series, Morris, Willcox and Donlon

summarized the latest data on genetic and epigenetic cues to human aging and longevity. While environmental and lifestyle factors play a pivotal role at younger ages, genetics seems to carry a more important weight in extreme old ages. These authors discussed ~57 lifespan genetic loci from genome-wide studies and highlighted the contribution of defective transcriptional and chromatin networks in cellular function, stress resistance and aging [5]. In the second article, Khan and colleagues revisited a number of model organisms including yeast, ciliate, nematode, arthropod, fish, rodent, primate and human to dissect the genetic cues of longevity in these species. They also compared the genetic contributions of longevity mechanisms including adrenergic system, insulin/IGF-1, and mTOR in these species [6]. In the third article of this series, Oien and Moskovitz discussed the genetic regulation of the methionine sulfoxide reductase system in relevance to longevity and age-related diseases [7]. Methionine oxidation of proteins and insufficient methionine sulfoxide reductase are commonly associated with aging-related diseases such as neurodegenerative disease and cancer [7]. In the fourth article, Jin and associates reviewed the contribution of long noncoding RNAs in aging and aging complications, and discussed the potentials of using long noncoding RNAs as biomarkers and potential therapeutic targets for aging-associated diseases [8]. Long noncoding RNAs belongs to a class of regulatory ncRNAs with transcript length > 200 nucleotides. These highly specific and low conservative regulators are believed to govern certain aging phenotypes and ultimately lifespan. In the next article by Yang and colleagues reported that miR-216a regulated telomerase activity and macrophage polarization during atherosclerosis progression. Their data revealed that miR-216a promoted telomerase activation in macrophages through the Smad3/NF- κ B pathway [9]. In the sixth article of this section, Zhu and colleagues examined the influence of mitochondrial aldehyde dehydrogenase (ALDH2) deficiency on high-cholesterol diet-induced atherosclerotic plaque progression and vulnerability in ApoE^{-/-} mice. Their results showed that plaque area was decreased while plaque instability was aggravated by ALDH2 deficiency. Further scrutiny revealed that ALDH2 deficiency acted through accelerating ROS-mediated VSMC senescence [10]. A unique cardioprotective role has been suggested for ALDH2 in cardiovascular homeostasis [11]. In this work, ALDH2 inhibited oxLDL-induced mitochondrial ROS production and activation of downstream p53/p21/p16 signaling cascades [10]. The seventh article by Ji's group revealed that oxLDL induced S-nitrosylation of eNOS, which promoted interaction between eNOS and β -catenin, transcriptional capacity of β -catenin, cell migration and adhesion in endothelial cells [12]. In the eighth article of this series, Sowers and colleagues reviewed a number of signaling pathways associated with

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pathophysiological changes in endothelium including Sirtuin 1, Klotho, fibroblast growth factor 21 (FGF21), and renin angiotensin-aldosterone system. Their review has offered a contemporary viewpoint on the molecular mechanisms and pathophysiological changes in endothelial senescence and aging-associated cardiovascular disease [13]. In the next article, Chi and coworkers reported the current understanding on senescence of VSMCs and related aging disorders. The importance of VSMC senescence has been increasingly recognized in vascular aging [14]. In the 10th article of this series, Ma and colleagues discussed the benefits of the longevity gene sirtuins in regulating atherosclerotic cellular senescence, and the potentials of targeting sirtuins in therapeutics against atherosclerosis [15]. In the 11th article by Blüthgen and colleagues, cardiovascular aging was recapitulated in *Drosophila*. Given the multi-faced cardiac functional deterioration with aging and the limitation of examining cardiac aging using human subjects or mammals, *Drosophila melanogaster* may serve as a powerful model to examine the molecular and genetic aspects of cardiac senescence in a short timeframe [16]. Likewise, Wang and coworkers discussed mitochondrial regulation of cardiac aging, molecular mechanisms behind anti-aging treatment, and the potential interventions that alleviate cardiac aging through regulation of mitochondria [17]. In the 13th article of this series, Wang and associates examined the impact of ablation of Akt2 (cardiac isoform of Akt) and AMPK α 2 on the development of cardiac aging. Their results revealed that increased age (12 months) did not exhibit notable changes in cardiac geometry, contractile function, morphology, ultrastructure, and mitophagy, although Akt2-AMPK ablation predisposed age-induced unfavorable changes in geometry, TEM ultrastructure, and function. These data suggested that Akt2-AMPK double knockout predisposes cardiac aging related to compromised mitophagy [18]. In the next article by Linsey and colleagues, molecular and cellular indicators were tested to correlate with the extent of dilation of left ventricle following myocardial infarction in an effort to improve diagnostic and prognostic capabilities. Using the mHART 1.0 database, these authors concluded that insufficient macrophage-mediated inflammation is indicative for accentuated left ventricular dilation. Their study revealed a composite panel including plasma MIP-1 γ , lymphotactin, and GCP-2, and left ventricular infarct Ccr8 and macrophage numbers to reflect left ventricular LV dilation [19]. Population-based and experimental data have suggested a close tie between age-related diseases (e.g., cardiac aging) and obesity. In the fifteenth article by Sun and coworkers, the authors discussed the contribution of autophagy failure in obesity-related cardiac aging, and how obesity may predispose the pre-matured cardiovascular aging [20]. Along the same line, increased prevalence of type 2 diabetes mellitus is commonly associated with aging, with diabetic microvascular complications (such as retinopathy and nephropathy) displaying some poor efficacy using classical glucose lowering drugs. Gut microbiota becomes a potential resource for therapeutics to modulate host immunity and metabolism. In the sixteenth article, Fernandes and colleagues provided an in-depth view on the crosstalk between gut microbiota and host immunity/metabolism, and how it characterizes human gut microbiota signatures of elderly and diabetic patients [21]. In the seventeen articles, Sun's research group demonstrated that systemic deletion of Mst1 gene rescues against diabetic cardiomyopathy through Parkin-mediated mitophagy. Mst1 disruption restores mitochondrial autophagy in diabetic heart [22]. In the next article, Zhai and coworkers detected that higher intracellular cholesterol levels due to loss of ATP-binding cassette A1 (ABCA1) stimulated the epithelial sodium channel (ENaC) in aging mice. This study implies that reduced ABCA1 level may mediate aging-associated hypertension by way of ENaC through elevation of intracellular cholesterol [23]. Given that elderly populations often suffer from inadequate intake of vitamins, folate and iron [24], Zhang and colleagues provided an overview of iron metabolism in the nineteenth article of the series. These authors discussed how iron disorders (both deficiency and overload) may promote heart failure and provide the clinical perspective on the treatment

options for iron metabolism disorders [25]. In the last article of the series, Lee and colleagues discussed how EWSR1 (Ewing Sarcoma breakpoint region 1/EWS RNA binding protein 1) regulates organismal function and aging through genetic and epigenetic pathways [26]. Recent evidence revealed a role for EWSR1 mutation in central nervous disorders including amyotrophic lateral sclerosis and frontotemporal dementia [27]. Therefore, a better description of the bona fide role of EWSR1 should help to better manage aging and its association with brain disorders.

Although this special issue should help to improve our knowledge in the race to identify genetic and epigenetic cues for aging and longevity, the topics described here may have raised more questions than answers. For example, while it is somewhat practical to monitor organ and cellular function, whether these genetic and epigenetic regulations also affect lifespan remain a mystery in higher species. Next, animal or cell models for human aging suffer from limitations to recapitulate the pathological changes under authentic clinical settings. In particular, some closely related species may display drastic difference in lifespan. A typical rat survives for 5 years while the naked-mole rat can live to 30 years. Even within the same species, drastic variation can be seen for the rate of aging and lifespan (such as the queen and worker honey bees) [4]. Therefore, it is rather difficult to pinpoint which particular genetic or epigenetic alteration will be superior in dictating aging and longevity. We hope that this special series will help us to accelerate the race for ultimate identification of the genetic and epigenetic control of aging and longevity.

Transparency document

The [Transparency document](#) associated with this article can be found, in online version.

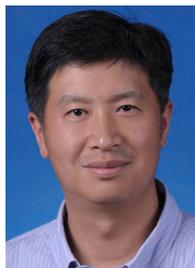
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