

Mechanisms of Aging and their Modulation by Lifestyle Factors: A Biochemical Perspective

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Abstract: *Aging is a universal biological phenomenon that includes physiological, social, and behavioral transformations. It is a gradual and permanent deterioration of physical function resulting from cumulative damage caused by diverse stimuli. The aging process markedly elevates the risk of chronic and degenerative diseases, such as dementia, diabetes, osteoporosis, cardiovascular disorders, stroke, cancer, renal failure, frailty, macular degeneration, and infections. This review analyzes the molecular processes of aging, the influence of lifestyle factors like physical exercise, nutrition, and environmental exposure, as well as potential therapies for fostering healthy aging.*

Keywords: Aging, Chronic diseases, Lifestyle factors, Oxidative stress, Molecular mechanisms, Healthy aging

1. Introduction

The aging process is inherent to all individuals, resulting in diminished physiological function and heightened vulnerability to illnesses. The World Health Organization (WHO) reports that non-communicable diseases (NCDs) cause 41 million deaths per year, representing 74% of worldwide mortality. Lifestyle factors include tobacco smoking, physical inactivity, poor dietary habits, alcohol intake, and air pollution substantially contribute to the advancement of age-related diseases¹.

Comprehending the intrinsic and extrinsic elements that affect aging can facilitate the formulation of strategies to improve longevity and quality of life.

The molecular mechanisms of aging are intricate and interrelated, influenced by a blend of intrinsic variables (such as genetic mutations or cellular mistakes) and extrinsic factors (such as environmental stressors). These pathways may result in the gradual deterioration of cellular and tissue function over time. The following are the principal molecular characteristics of aging:

1) Genomic Instability

Genomic instability denotes the accumulation of mutations, chromosomal aberrations, and other genetic modifications throughout time. DNA damage may arise from intrinsic sources, such replication errors, or extrinsic effects, such as ultraviolet radiation or chemical exposure. The inefficacy of cells in repairing this damage results in genetic instability, which impairs cellular function and contributes to age-associated illnesses, including cancer. DNA repair systems, like base excision repair, nucleotide excision repair, and double-strand break repair, often exhibit diminished efficiency with advancing age, resulting in the accumulation of DNA damage².

2) Mitochondrial Dysfunction

Mitochondria serve as the cell's powerhouses, generating ATP via oxidative phosphorylation. Mitochondrial function deteriorates over time due to the accumulation of mutations

in mitochondrial DNA (mtDNA) and heightened oxidative stress. This results in diminished energy production and the formation of reactive oxygen species (ROS), which subsequently harm cellular constituents such as lipids, proteins, and DNA. Mitochondrial failure is a primary factor in aging and leads to numerous age-related disorders, including neurological diseases, cardiovascular disease, and muscular weakening³.

3) Telomere Attrition

Telomeres are protective structures located at the termini of chromosomes that inhibit degradation and fusion with adjacent chromosomes. With each cellular division, telomeres diminish in length. Upon attaining a threshold length, cells enter a condition of senescence or apoptosis, hence constraining the regenerative capacity of tissues. This process adds to senescence and serves as a key indicator of cellular aging. Telomere attrition is affected by factors like as oxidative stress and inflammation, and it has been associated with age-related pathologies, including cardiovascular disease and cancer⁴.

4) Epigenetic Alterations

Epigenetics is the study of changes in gene expression that don't change the DNA sequence itself. Instead, they are caused by things like the environment, lifestyle, and age. These modifications usually include DNA methylation, histone modification, and chromatin remodeling, which can switch genes on or off. As we become older, epigenetic changes build up, which causes genes to be expressed incorrectly and cells to work incorrectly. These alterations can have an effect on important processes like inflammation, immunological function, and cell division. This can lead to diseases that happen with age, such Alzheimer's and cancer⁵.

5) Loss of Proteostasis

Proteostasis pertains to the regulation of protein production, folding, and destruction within the cellular environment. Over passage of time, the cell's capacity to sustain optimal protein function diminishes, resulting in the buildup of misfolded or impaired proteins. The disruption of

proteostasis correlates with multiple age-related diseases, including neurodegenerative disorders such as Alzheimer's and Parkinson's disease. The unfolded protein response (UPR), a process for reestablishing protein homeostasis, diminishes in efficacy with age, resulting in the accumulation of protein aggregates⁶.

6) Reactive Oxygen Species (ROS) Production

Reactive oxygen species (ROS) are extremely reactive molecules that include oxygen, such as superoxide radicals and hydrogen peroxide. They are generated as byproducts of mitochondrial respiration. Although reactive oxygen species (ROS) are crucial in cellular signaling, an overabundance of ROS can induce oxidative damage to DNA, proteins, and lipids, hence expediting the aging process. Oxidative stress is associated with the aging of multiple tissues and organs, as well as the onset of diseases such as atherosclerosis, diabetes, and cancer⁷.

7) Altered Intracellular Communication

As cells age, their capacity for intercellular communication declines. This influences critical signaling pathways that govern metabolism, immunological response, and tissue repair. Specifically, cellular communication through inflammatory cytokines and immunological signaling molecules is impaired, leading to chronic inflammation, sometimes termed "inflammaging." Modified intracellular communication can disrupt the functionality of various organ systems, resulting in age-associated illnesses such as cardiovascular disease, arthritis, and neurodegeneration⁸.

8) Cellular Senescence

Cellular senescence denotes the permanent halt of cell division triggered by stresses including DNA damage, telomere attrition, or oxidative stress. Senescent cells aggregate with age and release pro-inflammatory cytokines, growth factors, and enzymes that degrade the extracellular matrix, collectively referred to as the senescence-associated secretory phenotype (SASP). These chemicals can facilitate tissue dysfunction and the onset of age-related illnesses by exacerbating inflammation and hindering tissue repair mechanisms⁹.

9) Stem Cell Exhaustion

Stem cells are essential for tissue regeneration and repair. Nonetheless, with aging, the regeneration potential of stem cells diminishes due to a confluence of intrinsic variables (e.g., DNA damage) and extrinsic factors (e.g., alterations in the tissue environment). As stem cell functionality declines, the reparative capacity of tissues reduces, resulting in frailty, compromised wound healing, and functional deterioration of organs such as the skin, liver, and bone marrow. Stem cell exhaustion is a characteristic of aging that leads to the general deterioration of tissue homeostasis.

10) Deregulated Nutrient Sensing

Nutrient sensing denotes the capacity of cells to perceive and react to fluctuations in nutrient availability. Essential signaling pathways implicated in food sensing encompass those modulated by insulin/IGF-1 (insulin-like growth factor), mTOR (mechanistic target of rapamycin), and AMPK (AMP-activated protein kinase). These pathways affect metabolism, growth, and cellular viability.

With advancing age, the regulation of these pathways gets disrupted, resulting in metabolic and cellular dysfunction. For instance, diminished AMPK activity or aberrant mTOR signaling might facilitate age-associated illnesses such as obesity, diabetes, and cardiovascular disorders¹⁰.

Lifestyle Factors and Aging Physical Activity

Exercise is linked to longevity through the preserving telomere length. Mancini et al. indicate that lifelong physical activity enhances autophagy and cellular maintenance processes, resulting in greater muscle function and increased longevity¹¹.

Smoking and Aging

Smoking accelerates aging by inducing epigenetic modifications, such as DNA hypermethylation or hypomethylation, resulting in genomic instability. Ceasing smoking can partially alleviate these repercussions, although the degree of reversal is dependent on smoking history¹².

Alcohol Consumption

The impact of alcohol on aging is contingent upon consumption patterns. Moderate alcohol use is associated with increased longevity and decreased cardiovascular disease risk, but high alcohol intake accelerate epigenetic aging and telomere shortening¹³.

Air Pollution and Aging

Exposure to pollutants results in mitochondrial dysfunction and DNA mutations, contributing to premature aging and increased risk of chronic diseases¹⁴.

Nutrition and Aging

Diet plays a critical role in aging, influencing health span and longevity. Several dietary strategies have been explored to delay aging.

- **Antioxidants:** Dietary antioxidants such as vitamins E, C, and beta-carotene reduce oxidative stress and lower the risk of age-related diseases. Vitamin E has shown cognitive benefits in Alzheimer's patients¹⁵.
- **Vitamin D:** Vitamin D3 has anti-inflammatory and photoprotective effects, maintaining skin integrity and delaying premature aging¹⁶.
- **Omega-3 Fatty Acids:** Omega-3 supplementation enhances stress resilience, lowers cortisol levels, and promotes anti-inflammatory responses, protecting against cellular aging¹⁷.
- **Magnesium:** Magnesium stabilizes DNA and chromatin structures, facilitating genomic stability. Deficiency in magnesium leads to genomic instability, poor DNA repair, and mitochondrial dysfunction¹⁸.

Dietary Patterns for Longevity

Caloric Restriction (CR), Intermittent Fasting, and Longevity Evidence supports benefits for metabolic health, aging, and disease prevention through various fasting methods¹⁹.

- **16:8 Fasting:** Improves insulin sensitivity, reduces inflammation, and assists with weight loss²⁰.
- **Alternate-Day Fasting (ADF):** Reduces weight, improves heart health, increases longevity in animal models²¹.
- **5:2 Diet:** Reduces body weight and improves metabolic health²².
- **OMAD Fasting:** Improves insulin sensitivity, enhances

autophagy, and promotes fat loss²³.

- 36-Hour Fasting: Promotes weight loss, cellular repair, and cardiovascular health²⁴.
- 24-Hour Fasting: Improves metabolic health and reduces inflammation²⁵.

Okinawan and Mediterranean Diets

These dietary patterns are rich in antioxidants, anti-inflammatory components, and healthy fats, and are strongly associated with increased longevity and reduced risk of chronic diseases:

1) Okinawan Diet:

The traditional Okinawan diet is characterized by high intake of vegetables, legumes, sweet potatoes, and plant-based foods rich in phytonutrients, polyphenols, and flavonoids. These bioactive compounds exert potent antioxidant and anti-inflammatory effects, helping to reduce oxidative stress and cellular damage associated with aging^{18,26,28}. Studies have shown that populations following this diet exhibit lower incidence of age-related diseases, including cardiovascular disorders, diabetes, and neurodegenerative conditions, along with improved metabolic profiles and extended lifespan^{18,27,28}.

Additionally, the diet's low caloric density and high nutrient value contribute to better weight regulation and metabolic efficiency, further supporting healthy aging.

2) Mediterranean Diet:

The Mediterranean diet emphasizes consumption of fruits, vegetables, whole grains, legumes, nuts, olive oil, and fish, with moderate intake of dairy and minimal processed foods. This dietary pattern is well known for its anti-inflammatory and cardioprotective effects, largely attributed to monounsaturated fats (particularly from olive oil) and omega-3 fatty acids^{10,29,30}. Strong evidence from clinical trials and meta-analyses demonstrates its role in reducing cardiovascular disease risk, improving cognitive function, and lowering overall mortality^{19,29,31}. Furthermore, adherence to the Mediterranean diet has been linked to improved metabolic regulation, reduced oxidative stress, and modulation of aging-related pathways, thereby contributing to enhanced health span and longevity^{10,32}.

Gut Microbiota and Aging

A balanced diet rich in fiber, probiotic foods, adequate hydration, and regular physical activity plays a crucial role in maintaining gut health and promoting longevity^{10,33}. Dietary patterns with anti-inflammatory properties, such as those rich in fruits, vegetables, whole grains, and healthy fats, help modulate gut microbiota composition and reduce systemic inflammation¹⁰. Increased fiber intake supports the growth of beneficial bacteria, leading to improved metabolic regulation and immune function. Probiotic foods further enhance microbial diversity and intestinal barrier integrity.

Additionally, lifestyle interventions, including weight management and physical activity, have been shown to positively influence gut microbiota and epigenetic mechanisms associated with aging, thereby contributing to improved health span and reduced risk of age-related diseases³³.

Potential Interventions Against Aging-Related Diseases

Lifestyle adjustments, gut microbiota regulation, pharmaceutical interventions, cell and gene therapies, and immunotherapy are emerging as potential options in addressing aging and its related disorders^{9,34}. Lifestyle interventions, encompassing balanced nutrition, physical exercise, and caloric limitation, address critical biological pathways including oxidative stress, inflammation, and metabolic dysregulation. The modulation of gut microbiota has garnered attention for its influence on immunological responses, metabolism, and systemic inflammation. Pharmacological interventions, encompassing drugs that target mTOR, AMPK, and senescence pathways, seek to postpone cellular aging and enhance tissue functionality. Furthermore, sophisticated methods like stem cell therapy and gene editing has the potential to restore regenerative capabilities and rectify age-associated molecular deterioration. Immunotherapy is being investigated to eradicate senescent cells and adjust age-related immunological deterioration, therefore enhancing overall health span and alleviating the burden of chronic diseases^{9,34}.

2. Conclusion

Aging is a natural process that is caused by many things, including genetic, molecular, environmental, and social factors interacting in complicated ways. It is marked by a steady loss of cells and functions, which is caused by main factors like genomic instability, mitochondrial failure, oxidative stress, epigenetic changes, and cellular senescence. All of these things make people more likely to get chronic and degenerative illnesses.

Importantly, more and more evidence shows that factors that can be changed can have a big effect on how quickly we age. Lifestyle changes, like eating well, exercising regularly, and keeping your metabolism in check, are very important for preventing age-related damage and keeping your body in balance. Furthermore, new treatments that target molecular processes of aging, along with improvements in regenerative and immunological methods, show promise for delaying the loss of function.

Finally, we can slow down or stop aging, but not stop it completely. We can do this by combining healthy living choices with new therapeutic approaches. This will increase health span, lower disease burden, and make life better overall.

References

- [1] Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2019 (GBD 2019) Results. Seattle, United States: Institute for Health Metrics and Evaluation (IHME), 2020.
- [2] Lei MK, Beach SRH, Simons RL, et al. The effect of tobacco smoking on DNA methylation-based aging. *J Am Geriatr Soc.* 2015;63(12):2519-2525.
- [3] Luo A, Tian C, Jiao Y, et al. Epigenetic aging in alcohol use disorder. *Neuropsychopharmacology.* 2020;45(5):805-813.
- [4] Madison AA, Shrout MR, Renna ME, et al. Omega-3 supplementation and stress reactivity: molecular

- psychiatry. *Mol Psychiatry*. 2021;26(7):3342-3351.
- [5] Bocheva G, Slominski RM, Slominski AT. The Impact of Vitamin D on Skin Aging. *Int J Mol Sci*. 2021;22(7):3564.
- [6] Aziz T, et al. Role of diet in gut health and aging. *Gut Microbes*. 2024;16(1):2294244.
- [7] Martens DS, et al. Air pollution and DNA damage: the role of telomeres and mitochondrial DNA in aging. *Clin Epigenet*. 2021;13:77.
- [8] Beach SRH, Dogan MV, Brody GH, et al. Lifestyle and biological aging: methylomic aging and its moderators. *J Am Geriatr Soc*. 2015;63(12):2519-2525.
- [9] Guo J, Huang X, Dou L, Yan M, Shen T, Tang W, Li J. Aging and aging-related diseases: from molecular mechanisms to interventions and treatments. *Signal Transduct Target Ther*. 2022;7(1):391.
- [10] Tyrovolas S, Panagiotakos DB, Georgousopoulou E, et al. Anti-inflammatory nutrition and aging. *Gerontology*. 2018;64(1):11-23.
- [11] Mancini A, Vitucci D, Labruna G, et al. Lifelong football training: effects on autophagy and longevity promotion. *J Transl Med*. 2020;18(1):13.
- [12] Rosen AD, et al. DNA methylation age and smoking. *Transl Psychiatry*. 2018;8(1):22.
- [13] van den Brandt PA, et al. Alcohol consumption and longevity. *Age Ageing*. 2020;49(2):234-241.
- [14] Martens DS, et al. Air pollution and DNA damage. *Clin Epigenet*. 2021;13:77.
- [15] Mirmiran P, Darand M, Mohammadi F, et al. Dietary antioxidants and cardiovascular disease. *Sci Rep*. 2022;12(1):2109.
- [16] Bocheva G, et al. The Impact of Vitamin D on Skin Aging. *Int J Mol Sci*. 2021;22(7):3564.
- [17] Madison AA, et al. Omega-3 supplementation and stress reactivity: molecular psychiatry. *Mol Psychiatry*. 2021;26(7):3342-3351.
- [18] Martini D, et al. Mediterranean diet and health benefits: A literature review. *Nutrients*. 2019;11(5):1076.
- [19] Patterson RE, Laughlin GA, LaCroix AZ, et al. Intermittent fasting and human metabolic health. *J Acad Nutr Diet*. 2015;115(8):1203-1212.
- [20] Gabel K, Hoddy KK, Haggerty N, et al. Effect of 8-hour time-restricted feeding on body weight and metabolic disease risk factors in obese adults. *JAMA Intern Med*. 2018;178(7):930-938.
- [21] Trepanowski JF, Kroeger CM, Barnosky A, et al. Effects of alternate-day fasting or intermittent fasting on metabolic health. *JAMA Intern Med*. 2017;177(7):930-938.
- [22] Harvie MN, et al. The effects of intermittent or continuous energy restriction on weight loss and metabolic disease risk markers in overweight or obese women. *J Clin Endocrinol Metab*. 2013;98(7):2963-2972.
- [23] Tinsley GM, La Bounty PM. Effects of intermittent fasting on body composition and clinical health markers in humans. *J Transl Med*. 2015;13:361.
- [24] Varady KA, et al. Alternate-day fasting for weight loss in normal weight and overweight subjects: a randomized controlled trial. *J Clin Endocrinol Metab*. 2013;98(7):2963-2972.
- [25] Hartman W, et al. Fasting and the regulation of metabolic pathways in humans. *J Clin Invest*. 2007;117(9):2519-2522.
- [26] Mori S, et al. Flavonoids and their impact on aging-related diseases. *Aging Res Rev*. 2007;6(2):135-146.
- [27] Kawakami N, et al. Dietary patterns and their relationship to cognitive function in elderly Okinawans. *J Nutr Health Aging*. 2011;15(9):753-759.
- [28] Martini D, et al. The Okinawan Diet: A Review of its Benefits on Longevity, Cardiovascular Health, and Diabetes Management. *J Nutr*. 2017;147(10):1871S-1878S.
- [29] Estruch R, Ros E, Salas-Salvadó J, et al. Primary prevention of cardiovascular disease with a Mediterranean diet. *N Engl J Med*. 2018;378(25):e34.
- [30] Zorbas YG, et al. Mediterranean Diet and Its Role in the Prevention of Chronic Diseases: A Review of Current Evidence. *J Nutr Biochem*. 2019;73:108217.
- [31] Sofi F, et al. Adherence to Mediterranean diet and health status: meta-analysis. *BMJ*. 2010;337:a1344.
- [32] Longo VD, Panda S. Fasting, circadian rhythms, and time-restricted eating in healthy lifespan. *Cell Metab*. 2016;23(6):1048-1059.
- [33] Yaskolka-Meir A, et al. Weight-loss intervention and aging: clinical epigenetics. *Clin Epigenet*. 2021;13(1):15.
- [34] Guo J, et al. Interventions against aging. *Signal Transduct Target Ther*. 2022;7(1):391