

New concepts for research in Elderly Care and Healthy Ageing.

Game changers for prevention and treatment



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Outline Integrated Approaches in Research

Why investigate ageing
What is healthy ageing by nature
By nurture, how to monitor and influence healthy ageing

Game changers: Integrating basic, biomedical and medical research

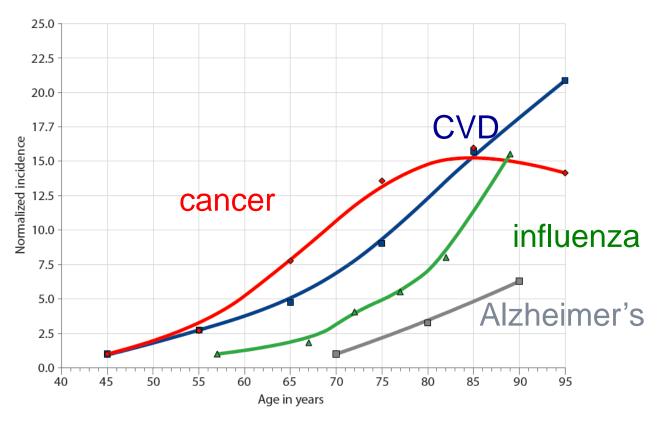
LUMC: Medical Research Profile on Ageing

National: Dutch Society for Research on Ageing (DuSRA) More systematic observation of elderly in the clinic

Not treating Teaching



Age is the strongest risk factor for common diseases



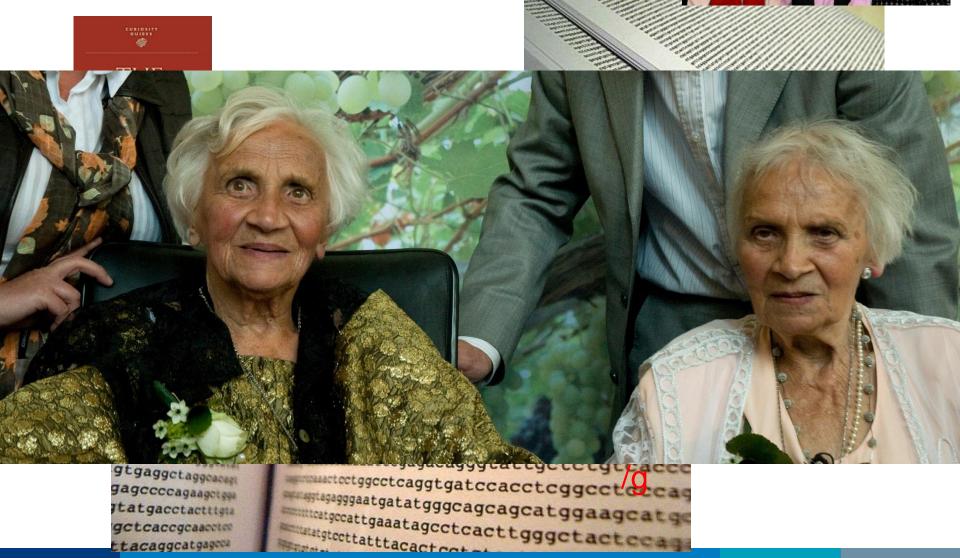
20 % of life EU citizen spend in disability

- ▶ 65 + doubles before 2060
- > 85 + triples before 2060
- Co-morbidity, polypharmacy, heterogeneity/biological age ---personalized medicin

Healthy Ageing by nature. Leiden Longevity Study (3500 individuals)

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gctcaccgcaacctco ttacaggcatgagcou



The genome of the oldest old in the EU





- EU longevity research

 APOE; Chrome 5q3.33; EBF1
- ☐ Worlwide longevity research (EU, US, China)



Aging Cell (2013) 12, pp184-193

Doi: 10.1111/aœl.12039

Genome-wide linkage analysis for human longevity: Genetics of Healthy Aging Study

Human Molecular Genetics, 2014, Vol. 23, No. 16 4420–4432 doi:10.1093/hmg/ddu139 Advance Access published on March 31, 2014

Genome-wide association meta-analysis of human longevity identifies a novel locus conferring survival beyond 90 years of age

Leiden Longevity Study Nature: drivers of healthy ageing

Nature: Intrinsic immune and metabolic health: Clinical Variables, Metabolites, Imaging (brain) Morbidity, Mortality

Energy metabolism/nutrient sensing: Lipids, Insulin, Thyroid, mTOR
Bonus

Can you influence it?

6 16-Jun-16

Neuro-cardiovascular



Musculoskeletal

Albert Einstein SP
Luiz Vicente Rizzo
Edson Amaro
Fabio Gazelato de Mello Franco

Classifying individuals

- -Developing biomarkers
- -Insight in heterogeneity

Immune
/Metabolic
Health

Biological aging

Understanding pathways

- -Biomechanics
- -Cellular mechanisms
- -Molecular pathways

Patient based interventions

- -Improving therapies
- -Improving preventions
- -Insight in responses to stress

Growing Old Together (GOTO) Study design



13-weeks intervention

- 12.5% reduced dietary intake
- 12.5% increased physical activity

Baseline



Before baseline:

- FFQ
- IPAQ
- Accelerometer
- 24 hr blood glucose
- At baseline : Blood, fat, muscle



During intervention

- 4 x 24h recalls
- Diary
- Hunger and satiety questionnaires





One week before end:

- Accelerometer
- 24 hr blood glucose
- Blood, fat, muscle

Research questions:

 Is this "common sense" lifestyle intervention feasible and healthy for all older adults (≈ 60 years old)?

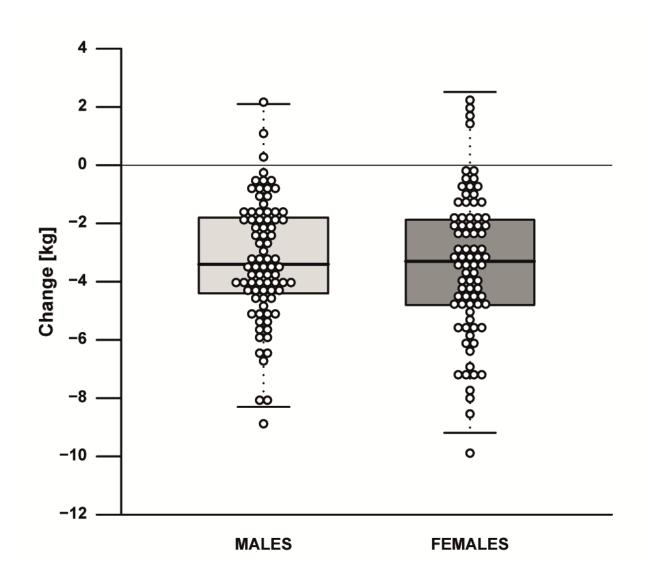
Healthy Ageing Result of GOTO intervention



- 60-70 year old : Feasible : window of opportunity
- Buddy effect and coaching
- Well-being improved
- Sleep improved
- Metabolic health improved
- Longevity family members not different from spouse
- But: Heterogeneous responses

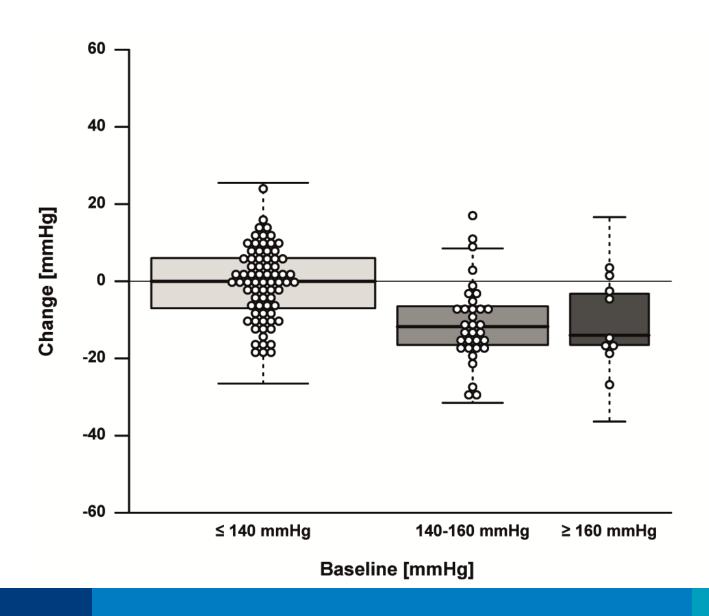
GOTO: Weight change after 13 weeks





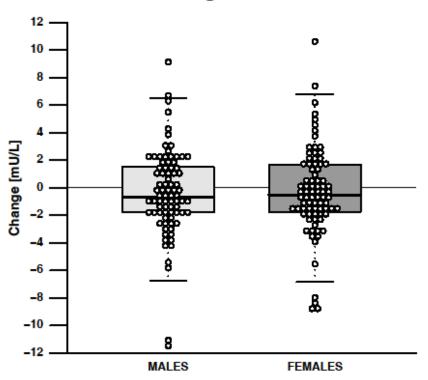
GOTO: Change in systolic blood pressure after 13 weeks





GOTO Change in insulin after 13 weeks





Healthy Ageing



- Heterogeneous responses
- Research in Public/Private Collaboration
- How to understand: blood, fat and muscle studies
- How to monitor: Biomarkers (Brainshake, Pfizer, Philips)
- How to motivate: AGO study in 60 +



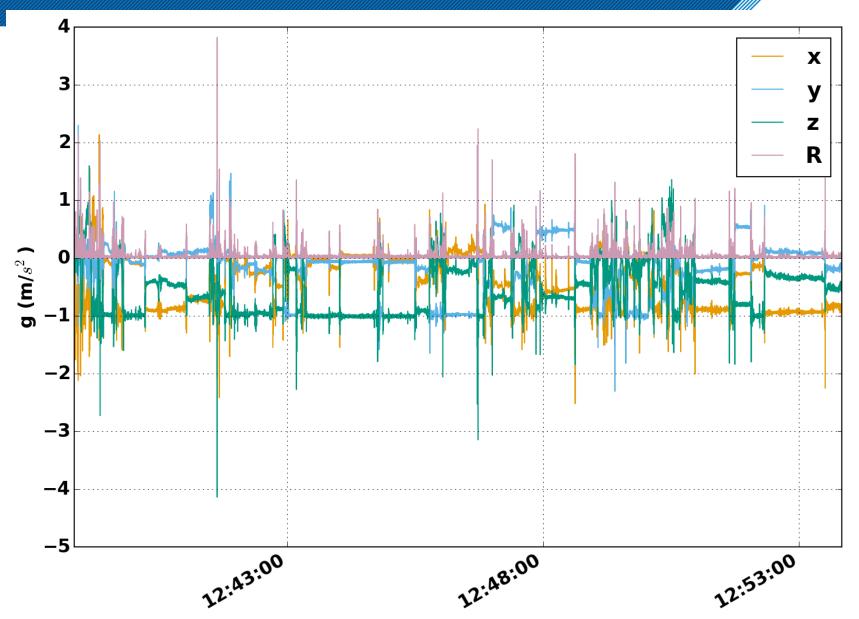








Monitoring Behavioral patterns
Sensors of heart rate variability, accelerometers etc.

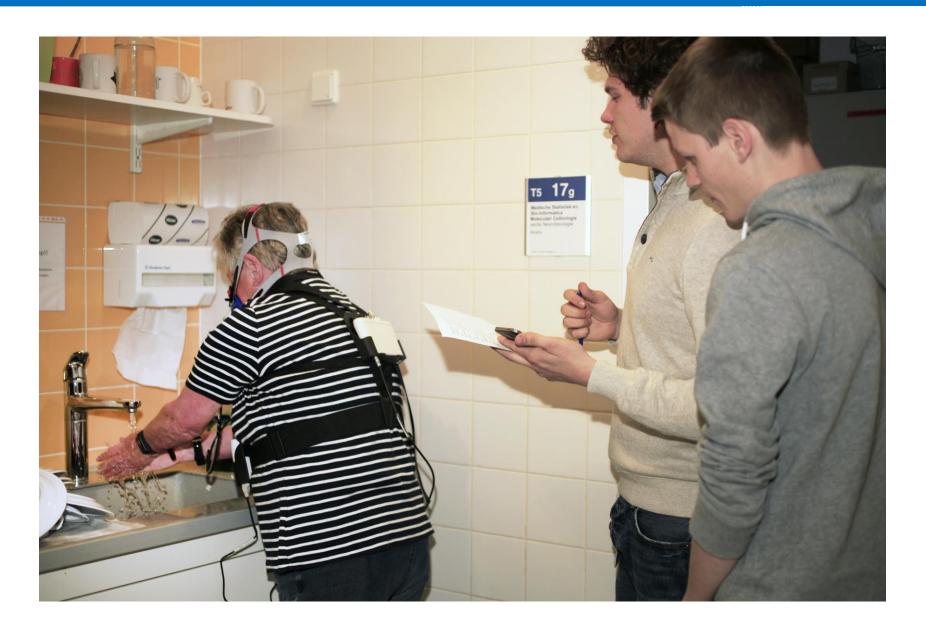


Wearables not tested in elderly 'in the wild'. Investigation of 35 subjects 60-70 years

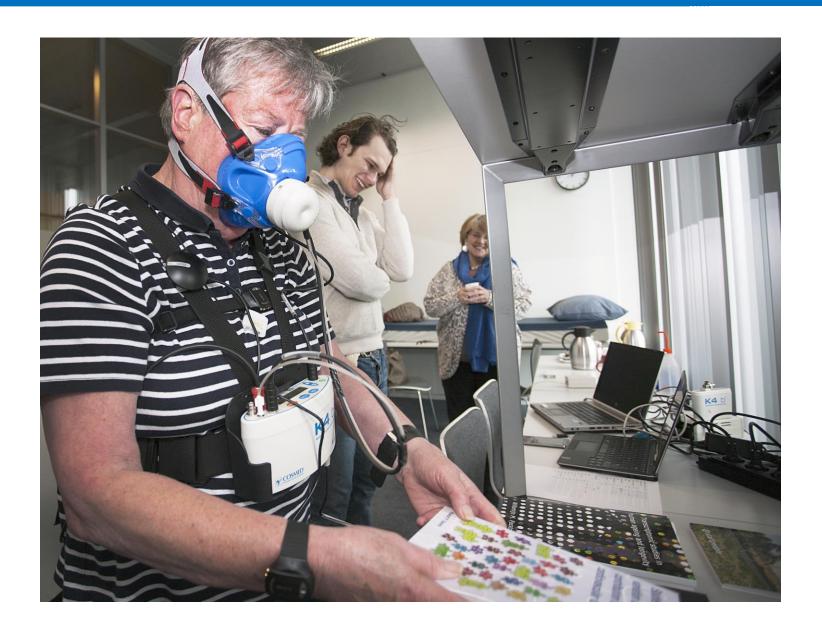


Device	Location		
GENEActiv	Right wrist (strap)		
	Right ankle (strap)		
Equivital	Chest* (belt)		
Activ8	Upper leg (adhesive tape)		
COSMED K4 b ²	Nose & mouth (face mask) and torso (belt)		
Philips DirectLife activity monitor	Hip (belt)		
	Chest (necklace)		
Experimental Philips activity monitor	Left wrist (strap)		
Polar Electro	Collection unit: attached to K4 b² belt.		
	Sensor unit: chest* (belt)		

Washing dishes (3 minutes)



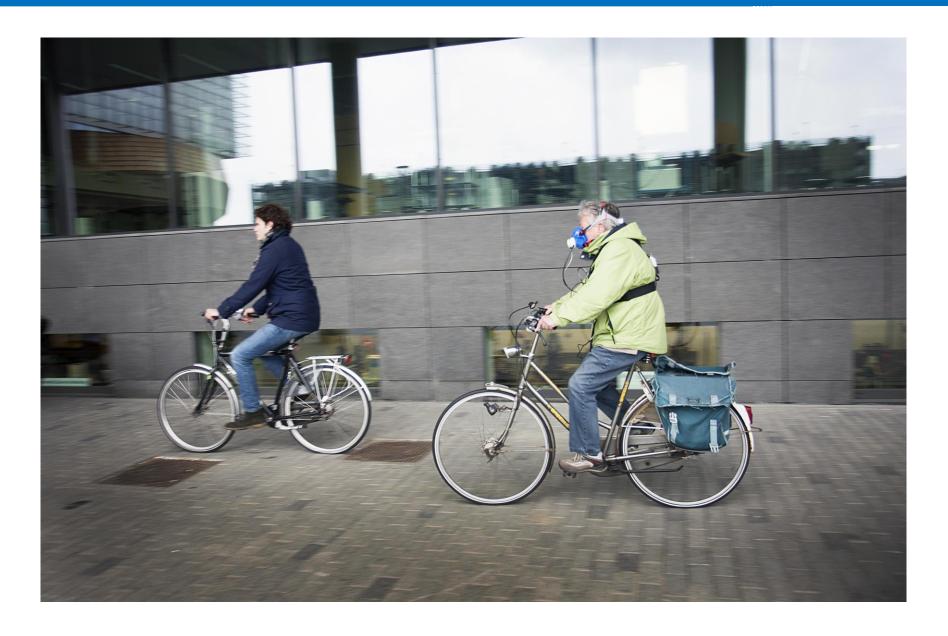
Organize bookshelf (3 minutes)



Vacuuming (3 minutes)



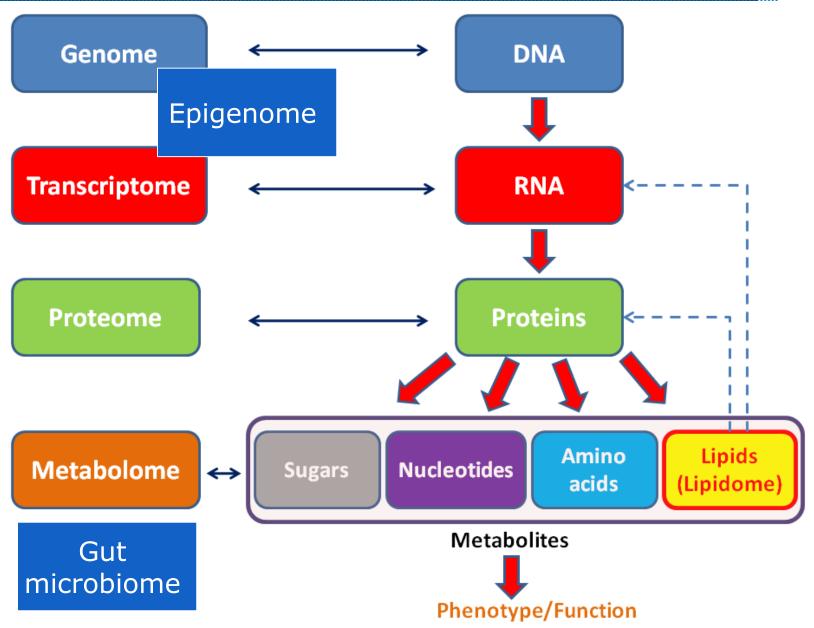
Cycling (15 minutes)



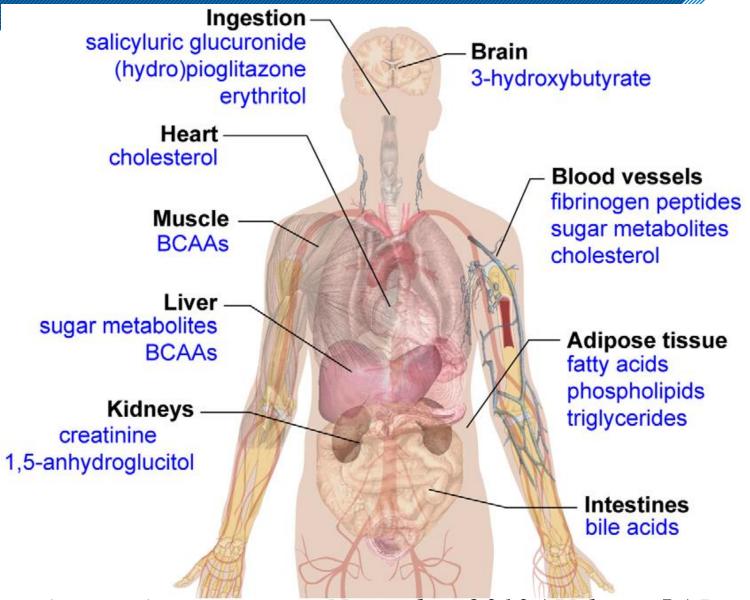
Evaluation of Interventions



Molecular Monitoring: BIOMARKERS Big data in the right context (BBMRI)



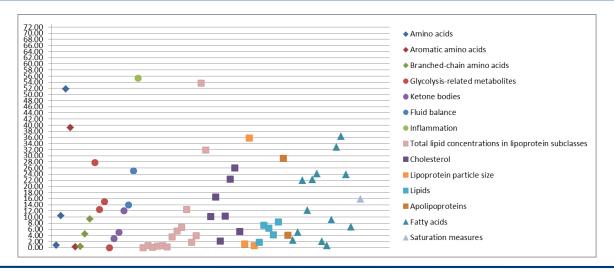
BIOMARKERS: Metabolites in blood/urine monitoring tissue conditions

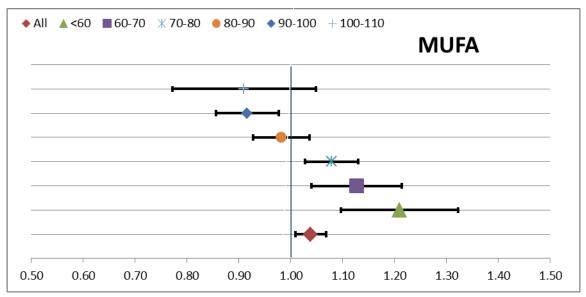


Suhre et al. PLoS ONE | November 2010 | Volume 5 | Issue 11

Topic	Study	Follow Up (y)	Cases	Controls	
Migrain	LUMINA/CHARM/RVCL		439	125	
	NTR VU	4.4	897	1000	
	ERF EUMC		360	1000	22 cobouts in DDMADI
Dementia	VUMC Alzheimer	3	1100	400	22 cohorts in BBMRI
	EUMC dementia		1000	1000	
Depression	NESDA VU	6	1200	400	
	NTR VU	4.4	1000	1000	
Martality	EUMC depression		900	1000	VU
Mortality	All cohorts				\/II\/C
Ageing	LLS LUMC	10	998	2313	
	EUMC 85+	1-11	400	1200	EUMC
CardioVascular	Alpha/Omega MUMC	5.5	459	476	UMCG
Disease	BIOMArCS EUMC		900		UNICG
	STEMI UMCG		400		MUMC
	UNCORBIO UMCU	3	1200		WUR
	PROSPER LUMC	3.2	418	579	
Type 2 Diabetes	CODAM MUMC	7	145		AMC
	Maastricht Study MUMC		854		RUMC
	DZS West-Friesland VUMC	10	1000		KOIVIC
	HELUIS AMC		500		
Osteoarthritis	GARP LUMC	2-6	412	2030	Disease-specific
	RAAK-PAPRIKA LUMC		476	2030	
	EUMC OA	6.6	793	1000	Generic profiles
Omico	CHECK	8	981		•
Omics	500 FG			500	
	LifeLines			1500	

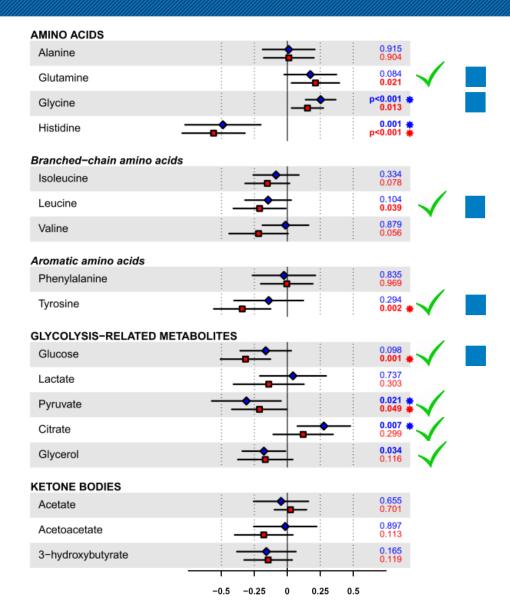
Metabolites and Mortality (N=40.000) Personalised/stratified risk assessment



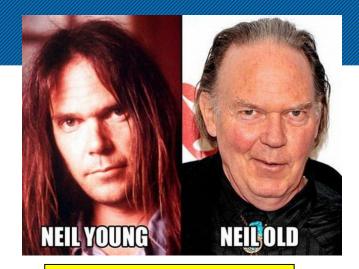


GOTO: Beneficial Profile after intervention





* Independent of weight change



Aging is Inevitable

Stay Fit, Stay Vertical





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Game changers: Integrating basic, biomedical and medical research

LUMC: Medical Research Profile on Ageing

National: Dutch Society for Research on Ageing (DuSRA)

More systematic observation of elderly in the clinic (TENT)

Not treating

Teaching



National Biobanking: BBMRI.Nl

Triaging Elderly Needing Treatment (TENT)



Standardized vitality assessment and biobanking







28 Grote visite poli 31 mei 2016

Not Treating or Nutritional Medicin

JAMA Internal Medicine

Formerly Archives of Internal Medicine

Original Investigation

Effect of Discontinuation of Antihypertensive Treatment in Elderly People on Cognitive Functioning the DANTE Study Leiden A Randomized Clinical Trial

Justine E. F. Moonen, MD; Jessica C. Foster-Dingley, MSc; Wouter de Ruijter, MD, PhD; Jeroen van der Grond, PhD; Anne Suzanne Bertens, MD; Mark A. van Buchem, MD, PhD; Jacobijn Gussekloo, MD, PhD; Huub A. Middelkoop, PhD; Marieke J. H. Wermer, MD, PhD; Rudi G. J. Westendorp, MD, PhD; Anton J. M. de Craen, PhD; Roos C. van der Mast, MD, PhD

IMPORTANCE Observational studies indicate that lower blood pressure (BP) increases risk for cognitive decline in elderly individuals. Older persons are at risk for impaired cerebral autoregulation; lowering their BP may compromise cerebral blood flow and cognitive function.

OBJECTIVE To assess whether discontinuation of antihypertensive treatment in older persons with mild cognitive deficits improves cognitive, psychological, and general daily functioning.

DESIGN, SETTING, AND PARTICIPANTS A community-based randomized clinical trial with a blinded outcome assessment at the 16-week follow-up was performed at 128 general practices in the

- Invited Commentary page 1630
- Supplemental conte jamainternalmedicine
- CME Quiz at jamanetworkcme.com

29 2016

Master Vitality and Ageing







Leiden University Medical Center

Master Vitality and Ageing focus on

Content

- Biological mechanismes of ageing
- Older individuals
- Organisation of ageing society
 - Skills
- Communication in science
- Evidence research
- Academic Skills



After graduation

Scientific career

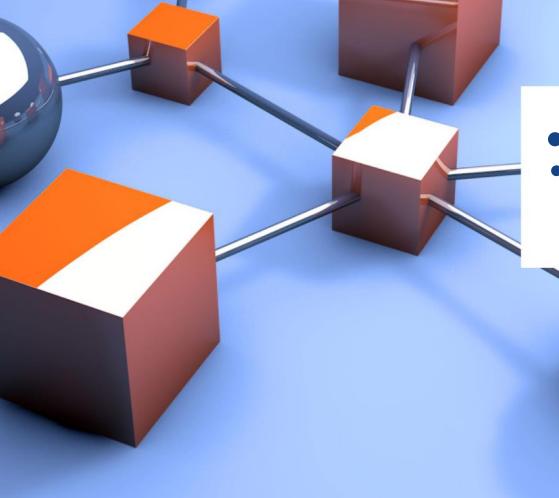
Further education in science (leading to a PhD degree)

Medical career

Further medical education (geriatrics, internal medicine, general prac

Management career

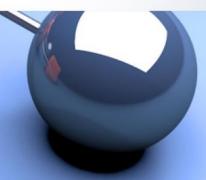
Management position in care organisation governmental organisations







Biobanking and BioMolecular resources Research Infrastructure The Netherlands



BBMRI-NL: Biobanking and BioMolecular resources Research Infrastructure in The Netherlands

- Nation wide biobanking infrastructure
- Founded in 2009: Dutch node of EU BBMRI-ERIC
- > 200 Dutch biobanks
- Sharing of Molecular, Clinical, Imaging Data. Accessible for scientific community.
- Big data combined to stimulate personalized /stratified medicine
- Dutch National Tissue Bank Portal



Ambition BBMRI-NL

Catalogue

Find data item and sample collections

Data

Filter and download for further analysis

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Workflows

Data entry and management workflows

GWAS

Explore summary level GWAS data



Harmonisation

Ontologies, standards, tools



Analyse

Multi-omics association &



Pipelines

Next-Generation



visualization tools



Sequencing



Integration

Personalized and stratified medicine markers



Share

Friends, Groups and Permission management



Mutation

Explore genetic mutations and patho-genicity effects



Organization

Institutes, Departments, People, Locations & Containers



Imaging

File storage and analysis for images and data



Website BBMRI.nl



Catalogue with > 200 biobanks

ELSI center of expertise



HOME

BBMRI-NL CATALOGUE

BIOBANK SERVICES -

ELSI SERVICES -

HEALTH-RI

PUBLICATIONS -

ABOUT BBMRI-NL

CONTACT

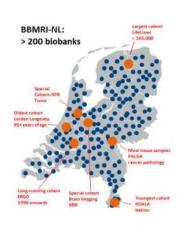
Tools & Applications

WELCOME TO THE BBMRI-NL WEBSITE

For over six years, BBMRI-NL has been actively promoting collaboration and standardization between biobanks in the Netherlands. We represent the main body of biobanks in this country, including the PALGA pathology collections, large population cohorts such as LifeLines, ERGO, NTR, and LLLS, and clinical collections (Parelsnoer Institute, HEBON, KOALA, to name but a few).

Now, we have set our aims at uniting all relevant biomedical research infrastructures into one streamlined, efficient body of research infrastructure.

Towards a National Biobanking Infrastructure





BBMRI.nl Ethical, Legal, Social issues the site for the public, donors, politics and press

The donor as partner

How to involve patients and the public in the governance of biobanks and registries

BIOBANKEN.NL



Alles over biobanken

Biobanken.nl is de website voor iedereen die meer wil weten over biobanken. Voor iedereen die meedoet aan een wetenschappelijk onderzoek; of benieuwd is wat er gebeurt met de buisjes bloed die je hebt laten prikken om je ijzergehalte te testen; of een werkstuk voor school aan het maken is over DNA, biobanken, medisch onderzoek of verwante onderwerpen.

Je vindt hier allerlei informatie over biobanken, de geldende wet- en regelgeving, links etc.

Netherlands BBMRI NL Law & Legal Templates Overview Netherlands Population Biobanks 2 Netherlands Clinical Biobanks 3 Netherlands Data Protection (Data Processing Notification Requirements) 4 Biobank Regelgeving 5 Biobank Data: Toegang & Delen 6 Blobank Koppelen: Record-Linkage 7 Biobank Terugkoppelen: Feedback Portal Netherlands Population Biobanks Netherlands Clinical Biobanks

Netherlands Data Protection (Data Processing Notification Require Biobank Regelgeving

Biobank Data: Toegang & Delen

Biobank Koppelen: Record-Linkage

Biobank Terugkoppelen: Feedback Portal

- Wat zijn biobanken?
- Waarvoor dienen biobanken?
- Biobanken in Nederland
- Van wie zijn de biobanken?
- Wetten en regels
- Onderzoek met biobanken

Music, Science and Humor Collaborations with Brasil

