

Mitokines and Volatile Organic Compounds (VOCs) in human aging and extreme longevity

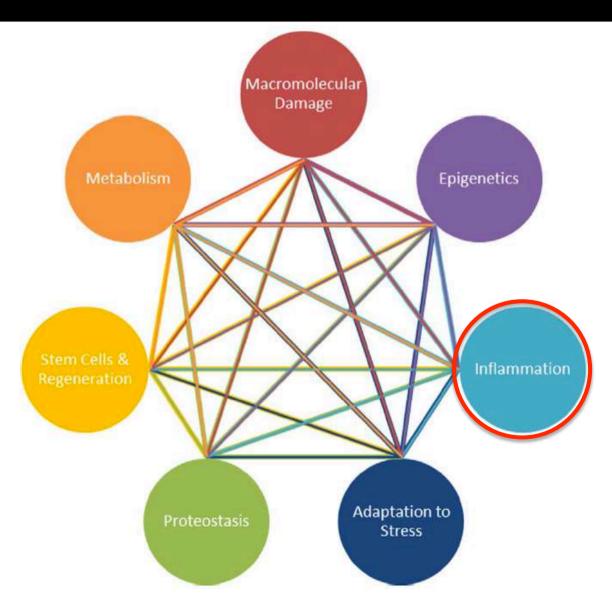
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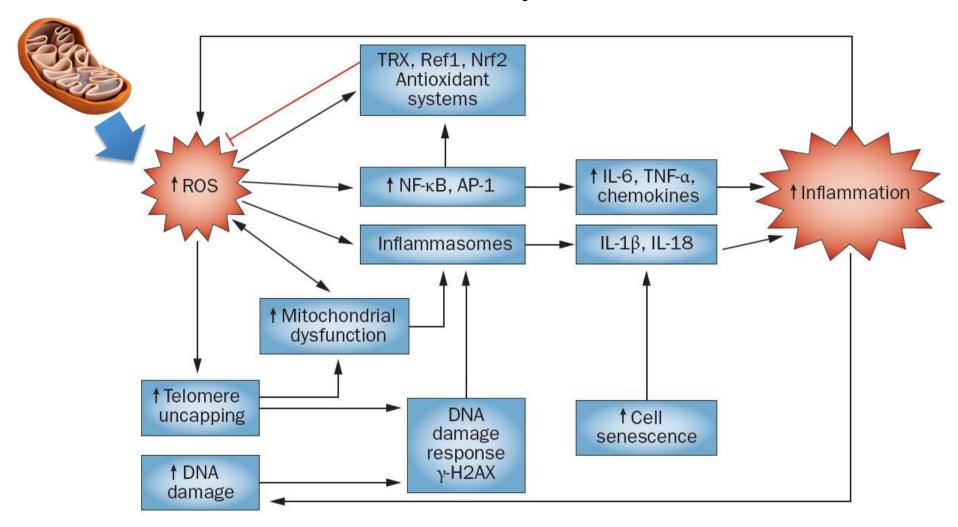




The "seven pillars" of aging



Is inflammaging (at least in part) linked to mitochondrial dysfunction?



However, mitochondria can be determinants of longevity as a mild dysfunction can trigger a number of stress responses (ISR, UPR^{mt}) and the positive effects of these responses can spread through the organism via soluble mediators indicated as mitokines

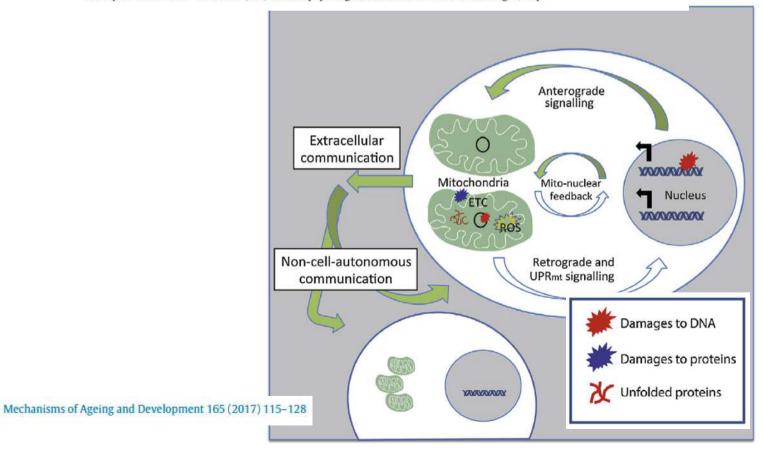
Mitochondria and mitochondria-induced signalling molecules as longevity determinants

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The Cell-Non-Autonomous Nature of Electron Transport Chain-Mediated Longevity

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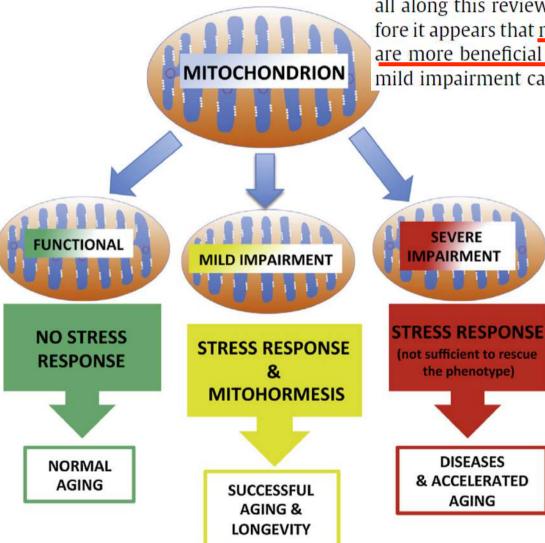
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"We report that the alteration of mitochondrial function in key tissues is essential for establishing and maintaining a prolongevity cue.

We find that regulators of mitochondrial stress responses are essential and specific genetic requirements for the electron transport chain (ETC) longevity pathway. Strikingly, we find that mitochondrial perturbation in one tissue is perceived and acted upon by the mitochondrial stress response pathway in a distal tissue."

[...] Because this signal is the product of perceived mitochondrial stress that results in increased survival, we have termed this cell-non-autonomous signal a "mitokine."

more recent evidence suggests that a certain level of mitochondrial impairment seems to be functional to attain longevity in animal models, as it effectively activates a stress response able to modulate a series of rescue mechanisms and promote survival as discussed all along this review and summarised at a glance in Fig. 2. Therefore it appears that mitochondria with mild functional impairment are more beneficial than perfectly working mitochondria, as this mild impairment can act as a hormetic signal.



Rose et al., 2016

What about centenarians?

Based on this assumption and on data on inflammation, it could be hypothesised that they are characterized by mildly defective mitochondria

Research Paper

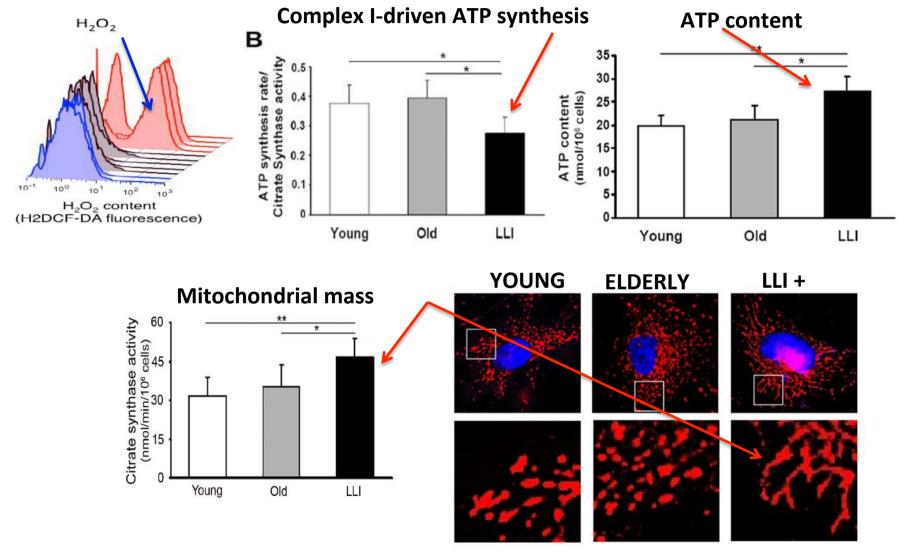
Mitochondria hyperfusion and elevated autophagic activity are key mechanisms for cellular bioenergetic preservation in centenarians

Gianluca Sgarbi^{1*}, Paola Matarrese^{2,3*}, Marcello Pinti⁴, Catia Lanzarini⁵, Barbara Ascione², Lara Gibellini⁴, Emi Dika⁵, Annalisa Patrizi⁵, Chiara Tommasino², Miriam Capri^{5,6}, Andrea Cossarizza⁷, Alessandra Baracca¹, Giorgio Lenaz¹, Giancarlo Solaini¹, Claudio Franceschi^{5,6,8,9}, Walter Malorni^{2,10}, and Stefano Salvioli^{5,6}

REMODELING OF MITOCHONDRIAL BIOENERGETICS IN 100+

Mitochondria from fibroblasts of 100+ displayed lower complex I-driven ATP synthesis and higher H2O2 production, but maintain energetic competence (ATP production) due to compensatory mechanisms (maintained supercomplexes organization, increased mitochondrial mass and autophagy, with hyperfused elongated/networked mitochondria.

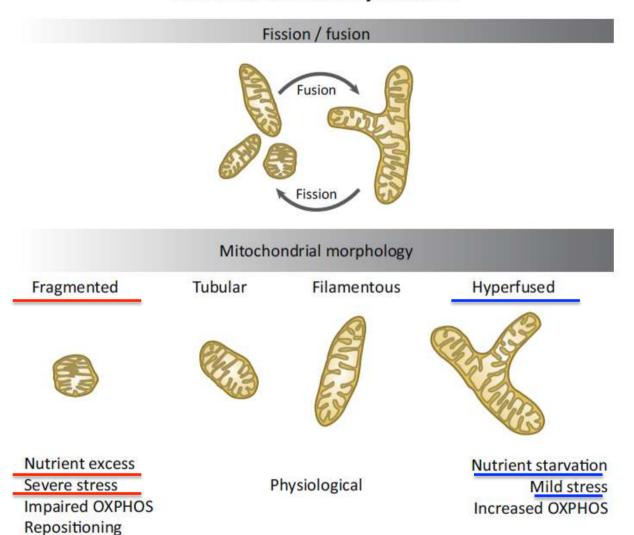
Mitochondria from DFs of centenarians (LLI) produce \underline{more} ROS (H_2O_2) and are $\underline{defective}$ in Complex I-driven ATP synthesis, but maintain global energetic competence by upregulating mitochondrial mass and forming large networks.



Sgarbi et al., Aging 2014

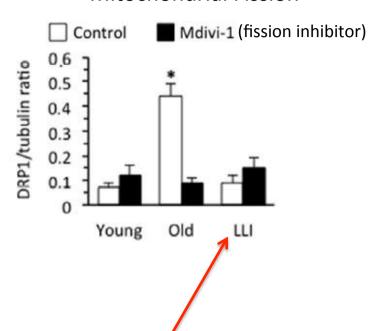
Mitochondrial Morphology Is Linked to the Cellular Metabolic State

Mitochondrial dynamics

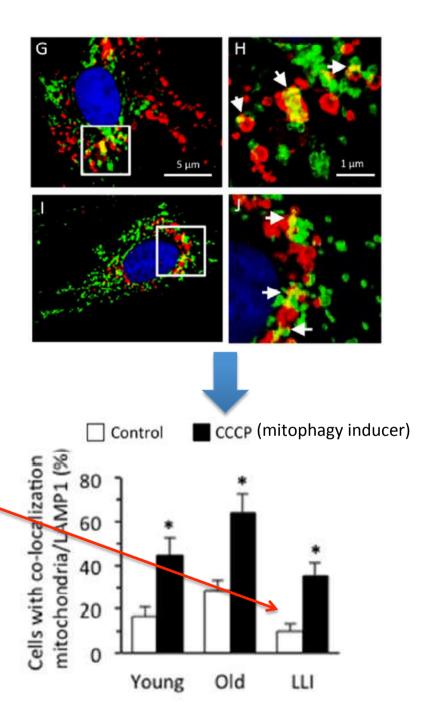


Rambold and Pearce 2017

Mitochondrial Fission



Centenarians (LLI) have low levels of mitochondrial fission and mitophagy



The phenotype of centenarians largely overlaps that of persons under calorie restriction, even though they never fasted during their life

(Franceschi, Ostan & Santoro Annu Rev Nutr. 2018)

Adaptation	Parameter	Calorie-restricted diet (people aged 21–60 years)	Centenarians (>100 years)	References	
Concordant					
Glucose metabolism	Glucose	1	1	4, 10, 31, 33, 54, 69, 71, 100, 101, 108, 121, 136,	
	Insulin	↓	1	137, 139, 141	
	Insulin sensitivity	↑	1		
Blood pressure	Systolic	↓	↓	47, 64, 108, 109, 114, 135, 139, 141, 151	
	Diastolic	↓	↓		
Thyroid	Т3	↓	↓	54, 66, 75, 137, 141	
Lipid profile	Total cholesterol	↓	1	1, 10, 33, 108, 121, 139–141	
	LDL cholesterol	1	1		
	Triglycerides	1	1		
Body composition	BMI	↓	+	1, 33, 101, 103, 108, 136, 137, 139–141, 145, 14	
	Fat-free mass	1	1		
	Bone mineral density	↓	↓		
Metabolism	Cortisol	= or ↑	↑	4, 10, 18, 66, 122, 136, 141, 145	
	Adiponectin	↑	1		
	Leptin	1	1		
	Tryptophan	↓	1		

- a number of mitokines have been identified. Some of them are nuclear encoded and are expressed in response to UPR^{mt}. These include Fibroblast Growth Factor 21 (FGF21) and Growth Differentiation Factor 15 (GDF15).
- FGF21 is a hormone-like member of FGF family involved in metabolic processes, also described as stress hormone for its role as a potent longevity factor.
- **GDF15** is a member of the transforming growth factor (TGF)-β family, produced by several tissues. It is considered an indicator of mitochondrial dysfunction in muscle and it has cardioprotective and neuroprotective activity.
- In addition to nuclear encoded mitokines, a number of peptides encoded by mitochondrial DNA, including Humanin (HN), are produced in response to mitochondrial stress and have anti-apoptotic and neuro- and cardioprotective effects. It also improves mitochondriogenesis and insulin sensitivity.

Autophagy deficiency in muscle mtDNA mutations Other mutations affecting mitochondrial function Metformin

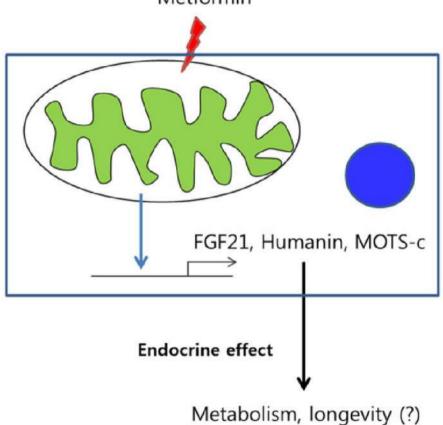


Figure 1. Non-cell-autonomous systemic effect of mitochondrial stress. Diverse mitochondrial stress can induce mitokines that can affect whole-body metabolism or longevity.

Lee 2015

- ❖ Mitokines are part of a stress-induced response that likely goes beyond mitochondria and entails the involvement of other organelles (ER, nucleus). It is debated whether they increase with age and how much they are expressed in long-lived people.
- ❖ Moreover, they are also found associated with a number of diseases, therefore it is not clear whether this response is always beneficial or can turn detrimental in certain conditions.

We then wondered whether centenarians were characterized by elevated levels of these mitokines with respect to elderly persons





Original Article

Human Aging and Longevity Are Characterized by High Levels of Mitokines

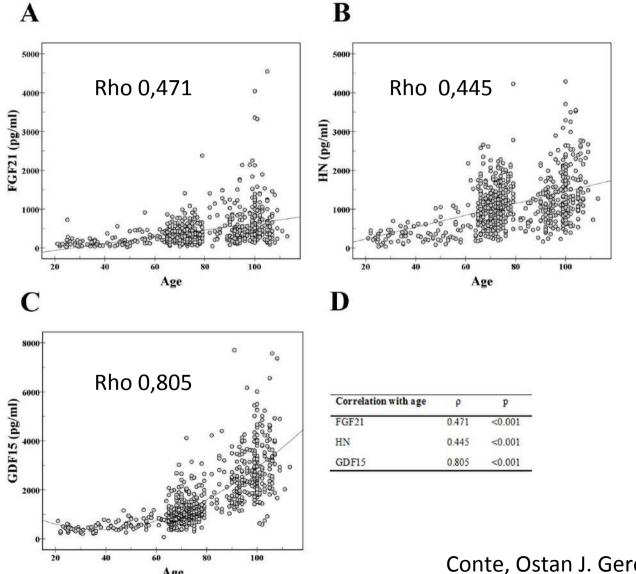
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FGF21, Humanin and GDF15 Studied cohort

	YA	EL	00	CENT
N	79	336	155	123
Men/Women, N	22/57	163/173	66/89	32/91
Age (yrs)	41.0 [20.0]	72.0 [6.0]	94.0 [7.0]	102.0 [5.0]
BMI (kg/m²)	22.97 [4.53]	26.9 [4.6]	25.56 [4.79]	23.95 [4.31]
Handgrip (Kg)	33.25 [12.6]	31.0 [16.0]	18.0 [10.6]	11.5 [9.0]
HOMA-IR	1.37 [0.61]	2.11 [2.14]	0.99 [1.17]	0.9 [1.23]
$\textbf{HDL cholesterol} \; (mg/dL)$	53.0 [24.0]	54.76 [22.2]	55.0 [24.0]	45.0 [17.0]
$\textbf{Triglycerides} \; (mg/dL)$	73.75 [59.3]	98.4 [53.2]	103.0 [51.0]	108.0 [55.5]
CRP (mg/dL)	0.95 [1.8]	1.09 [1.9]	4.0 [1.0]	3.8 [10.2]
Albumin (g/dL)	4.45 [0.5]	4.33 [0.4]	4.5 [1.9]	3.7 [0.8]
Total protein (g/dL)	7.19 [0.5]	7.2 [0.84]	6.89 [0.88]	6.67 [0.9]
Uric acid (mg/L)	4.25 [1.76]	5.32 [1.81]	1.43 [3.74]	5.5 [2.33]
Creatinine (mg/L)	0.89 [0.14]	0.84 [0.26]	1.11 [0.46]	1.03 [0.55]

FGF21, Humanin and GDF15 plasma levels show a positive correlation with age

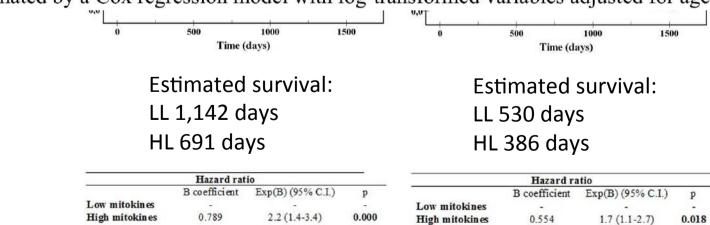


Conte, Ostan J. Gerontol, 2018

Nonagenarians and centenarians with low level of mitokines (LL) have a slight but significant survival advantage

	Nonagenarians		Centenarians	
	1,0	-⊓High mitokines -⊓Low mitokines	1,0-	-□Low mitokines -□High mitokines
Hazard ratio				
	B coefficient	Exp(B) (95% C.I.)	р	
FGF21	0.25	1.29 (1.04-1.60)	0.019	
HN	0.32	1.37 (1.01-1.86)	0.042	
GDF15	0.61	1.84 (1.19-2.85)	0.006	

Supplementary Table 4. Association of mitokines with mortality in nonagenarians and centenarians estimated by a Cox regression model with log-transformed variables adjusted for age and gender.



Elderly subjects with low levels (LL) of FGF21 and GDF15 have better biochemical parameters than those with high levels (HL)

Median [interquartile range]

Group (N)	LL (273)	HL (63)	р
Men/Women (N)	127/146	36/27	0.130
Age, mean (SD)	71.0 (4.0)	72.7 (3.9)	0.011
FGF21	284.1	431.5	0.000
HN (pg/mL)	1086.2	1047.1	0.876
GDF15 (pg/mL)	952.0	1835.2	0.000
BMI (kg/m^2)	26.6 [4.6]	28.6 [5.0]	0.007
Glycemia (mg/dL)	98.2 [14.7]	103.2 [21.0]	0.012
Insulin ($\mu U/mL$)	8.6 [7.9]	10.0 [8.5]	0.007
HOMA-IR index	2.0 [2.0]	2.6 [2.6]	0.002
Total cholesterol	200.0 [44.6]	186.5 [49.5]	0.036
HDL cholesterol	55.9 [22.0]	49.8 [25.7]	0.015
Triglycerides	96.3 [49.7]	107.6 [78.7]	0.037
C-Reactive Protein	1.0[1.7]	1.3 [2.5]	0.012
Creatinine (mg/dL)	0.8 [0.2]	0.9 [0.3]	0.003

Conclusions /1

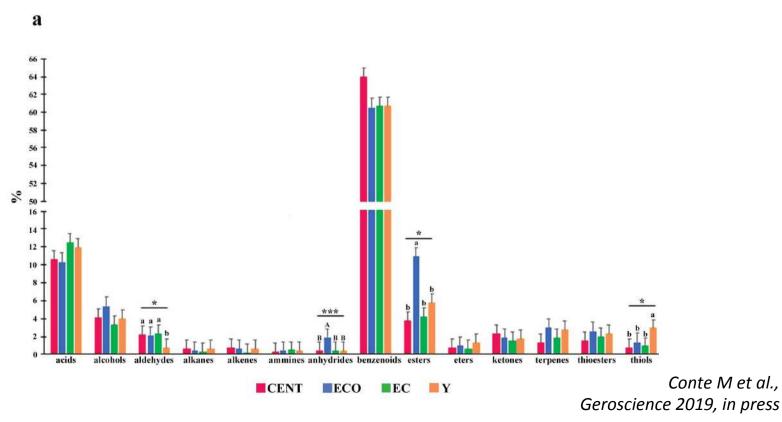
- Centenarians are characterized by elevated levels of mitokines, suggesting that they have a working mechanism of response to (mitochondrial) stress.
- ❖ The preponderant and most upregulated mitokine appears to be GDF15, which is also emerging as the most altered serum protein during aging.
- However, high levels of mitokines are correlated with diseases and mortality (in particular GDF15) indicating a compromised health condition that is not rescued by the positive effect of these mitokines.
- GDF15 is more sensitive to mitochondrial stress and health status than FGF21 and HN.



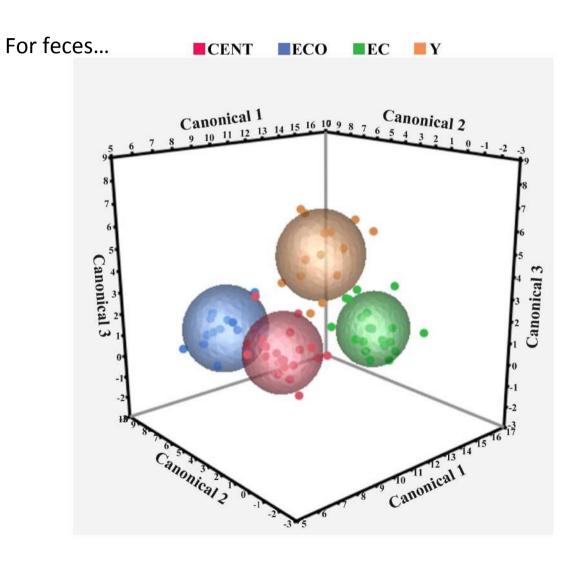
Looking for metabolic markers that could discriminate age groups, we studied Volatile Organic Compounds (VOCs) in feces and urine of 73 volunteers from 24 to 106 years of age, including CO and their spouses...

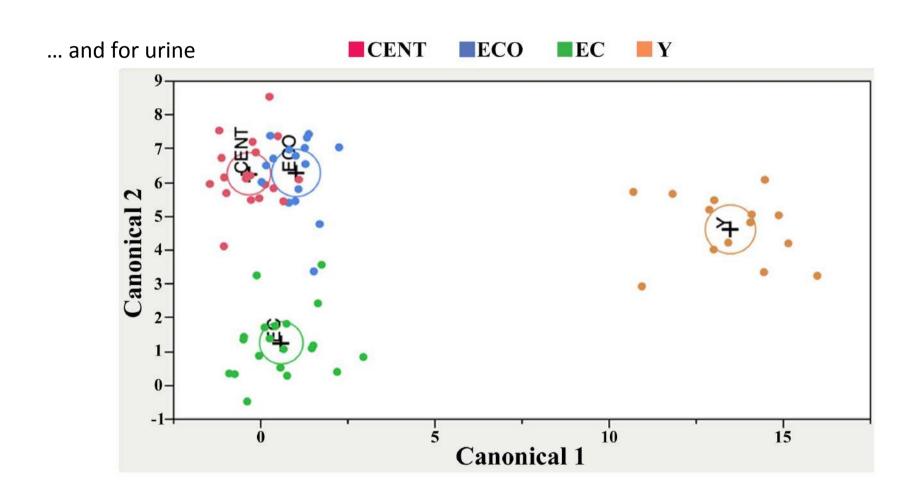
Group (N°)	Age range	Sex (N°)	Average number of diseases	Type of diseases (N°)
Y (15)	24-36	4M, 11F	0	
EC (20)	61-85	12M, 8F	1.8	arthrosis (7), chronic obstructive pulmonary disease (3), chronic renal failure (1), diabetes (2), hypercholesterolemia (5), hypertension (10), hypothyroidism (2), osteoporosis (4)
ECO (16)	67-76	6M, 10F	0.6	arthrosis (2), hypercholesterolemia (2), hypothyroidism (2), osteoporosis (4)
CENT (22)	100-106	4M, 18F	3.1	angina pectoris (2), autoimmune diseases (1), cancer (in remission) (1), chronic obstructive pulmonary disease (4), chronic renal failure (3), dementia (2), depression/anxiety (3), diabetes (3), heart failure (5), hepatitis (1), hypertension (14), hyperuricemia (2), hypothyroidism (2), irregular heart rhythm (6), osteoporosis (6)

- ❖ A total number of 110 VOCs were detected in fecal samples and 33 in urine samples by means of microextraction-gas chromatography-mass spectrometry technique (SPME-GC/MS).
- Some of these VOCs were present only in specific age groups, suggesting that they can be used as markers of age.
- ❖ Relative abundance is also modified according to age for specific classes of VOCs, in particular in feces.

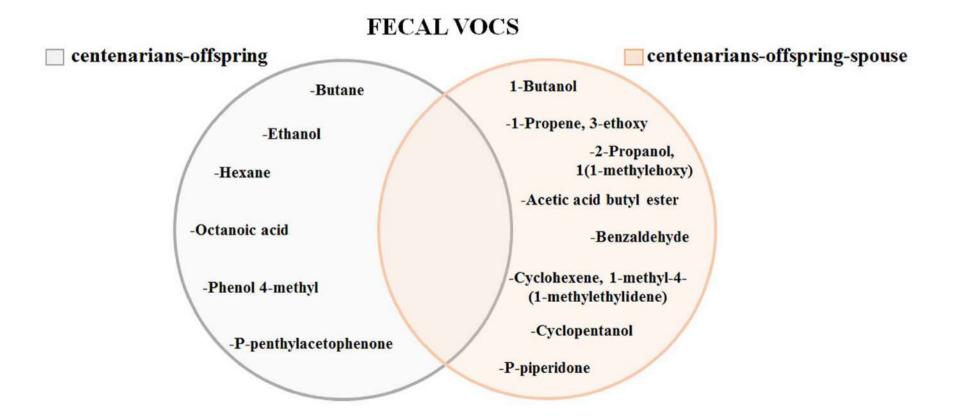


Accordingly, a discriminant analysis is able to clearly separate the 4 groups (young, elderly, centenarians and centenarians' offspring).

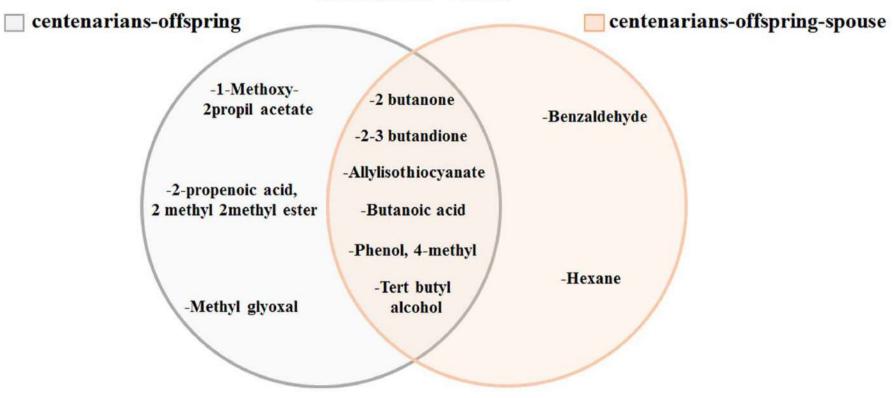




❖ Taking advantage of the presence of trios centenarian-offspring-spouse, we were able to identify VOCs that are shared by couples (family trait) or trios (environmental influence).



URINARY VOCS



As a whole, the most discriminative VOCs associated with the different aging phenotypes appear to be the following:

FECES		Discrimination
VOC formic acid, butyl ester 4-carene 1H-indole, 5 methyl	ASSOCIATION WITH Healthy aging and longevity Healthy aging and longevity Healthy aging and longevity	EC from ECO and CENT
butanoic acid methyl ester ethanol butanoic acid ethyl ester butanoic acid, 3-methyl-, 2-methyl propyl	Age (within familiar longevity) Age (within familiar longevity) Age (within familiar longevity) Age (within familiar longevity)	CENT from ECO
ester dimethyl trisulfide 1H-indole, 3 methyl	Aging Aging	Y from CENT, ECO, EC
URINE		
VOC 2-butanone isopropyl alcohol 2-pentanone 3-penten-1-ol pyrrole	ASSOCIATION WITH Aging Aging Aging Aging Aging Aging	Y from CENT, ECO, EC
carbon dioxide benzaldehyde 2,3,6-thrichloro acetone trichloromethane benzaldehyde butanoic acid	Healthy aging and longevity	CENT and ECO from EC

Conclusions /2

- ❖ VOCs can be a mirror of the organismal metabolism and proved to be able to discriminate age groups.
- ❖ Interestingly, VOCs appear able to discriminate also health status (EC vs ECO) and are affected by familiar components (genetics?).
- All together, mitokines and VOCs could add up to the list of biomarkers of age useful to dissect chronological and biological age, and to identify subjects at higher risk for agerelated diseases. Further studies are needed to formally prove their predictive capacity as biomarkers.

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