

# Stem Cell Therapy as An **Antiaging** Tool

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# Seeking the Optimal



# What Causes Our Decline ?



Root Cause:  
the **Aging** process

# Osteoarthritis

- Not a disease of “wear & tear”
- It is a **systemic inflammatory condition**
- implanted knee construct gets destroyed in an osteoarthritic knee
- **lagging regenerative capacity** prevents adequate repair

**Damage** → **Repair**



**Supply**

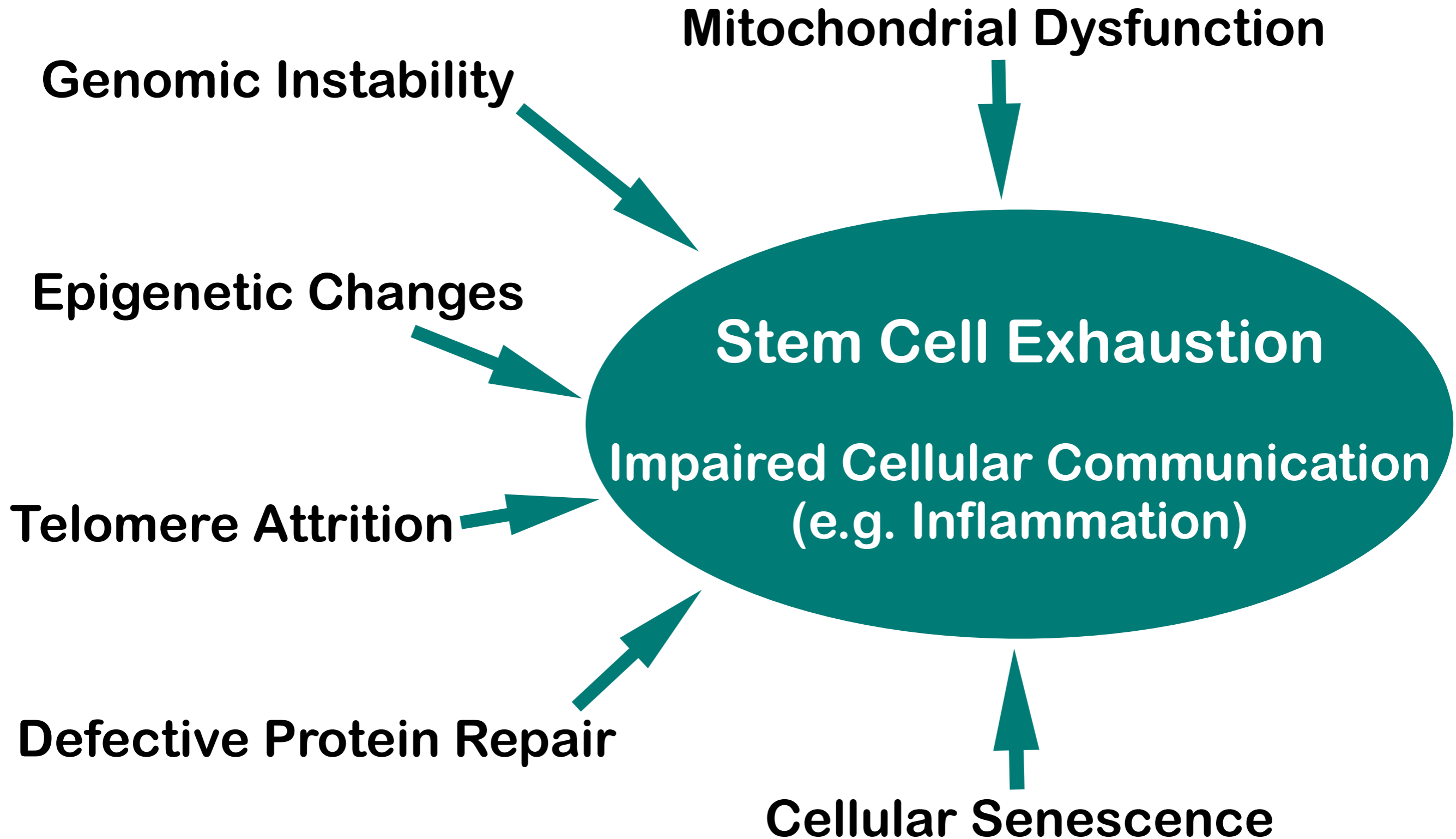
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**Demand**



# What Causes Aging?



# What's **Disease**? What's **Aging**?





# “Inflammaging”



# Markers of Aging

- even in apparently healthy elderly, levels of **inflammatory markers** such as IL-6 and TNF- $\alpha$  are **elevated**, even in the absence of any infection. In younger people, such cytokines are tightly regulated.



- inflammatory response is the main driver of tissue damage associated with **almost ALL age-related diseases**.
- elevated levels of inflammatory markers can **predict disease and disability** in the aging population.
- increased IL-6 and CRP levels are **strongly linked to** poor physical performance, decreased muscle strength, cognitive decline in the elderly, and early death.

# Stem Cells as **Anti-aging** strategy by targeting **inflammation**

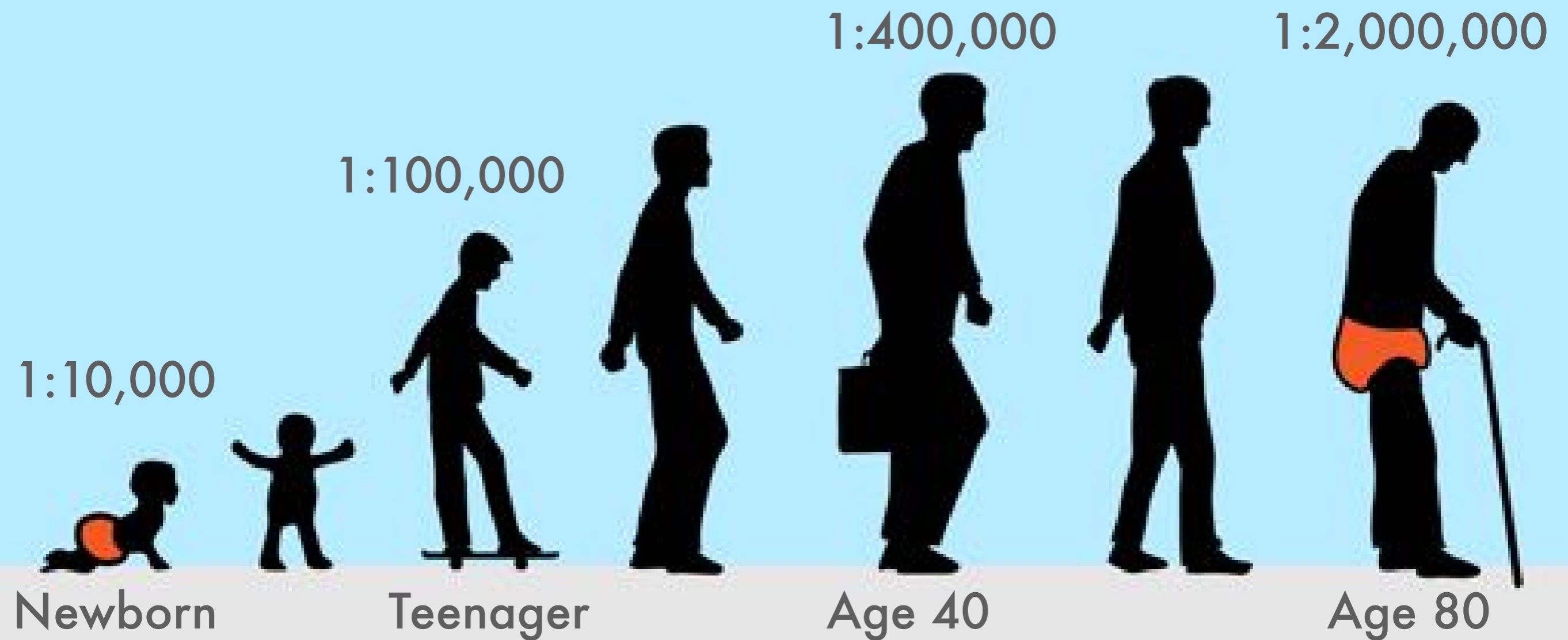
- R. Gonzalez et al, Cell & Tissue Transplantation & Therapy 2015

- In a rat traumatic brain injury model (TBI), intravenous infusion of MSCs **decreased brain inflammatory cell infiltration, microglia, and apoptotic cell numbers**
- in 172 rheumatoid arthritis (RA) and 16 systemic lupus erythematosus (SLE) patients, allogenic MSCs infusion helped **reestablish balance** in immune response from a pro-inflammatory to an anti-inflammatory state, with **significant decreases in IL-6, TNF- $\alpha$ , and CRP levels**.
- in patients with ankylosing spondylitis with high disease activity, infusing allogenic MSCs **decreased CRP level and disease activity**.
- in patients with Crohn's disease refractory to biologic therapy showed similar results — MSC therapy correlated with **improved quality of life and improved CRP levels**.

# We are made from **Stem Cells**

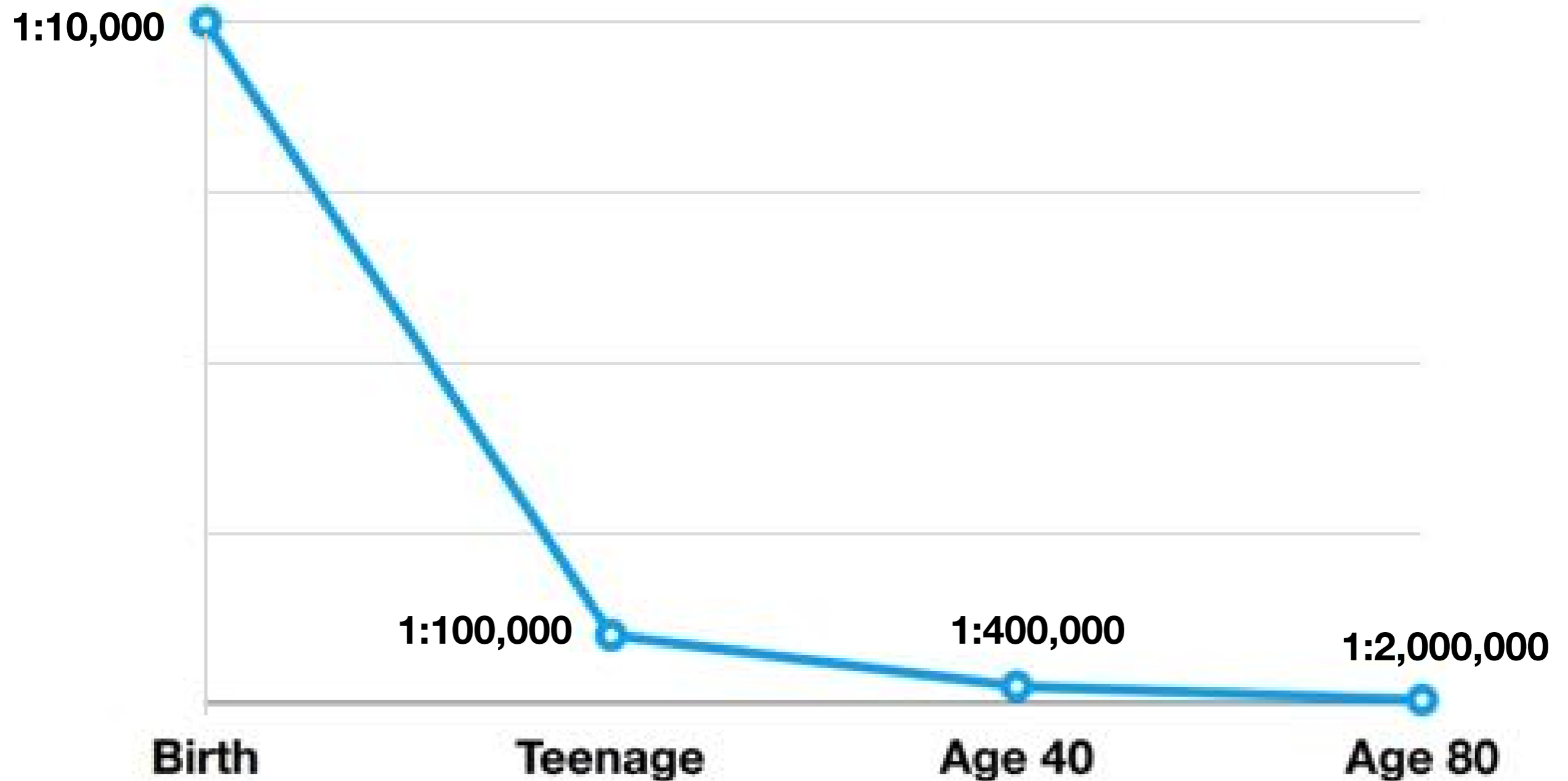


As we age...  
some stem cells **die**  
some go **dormant**



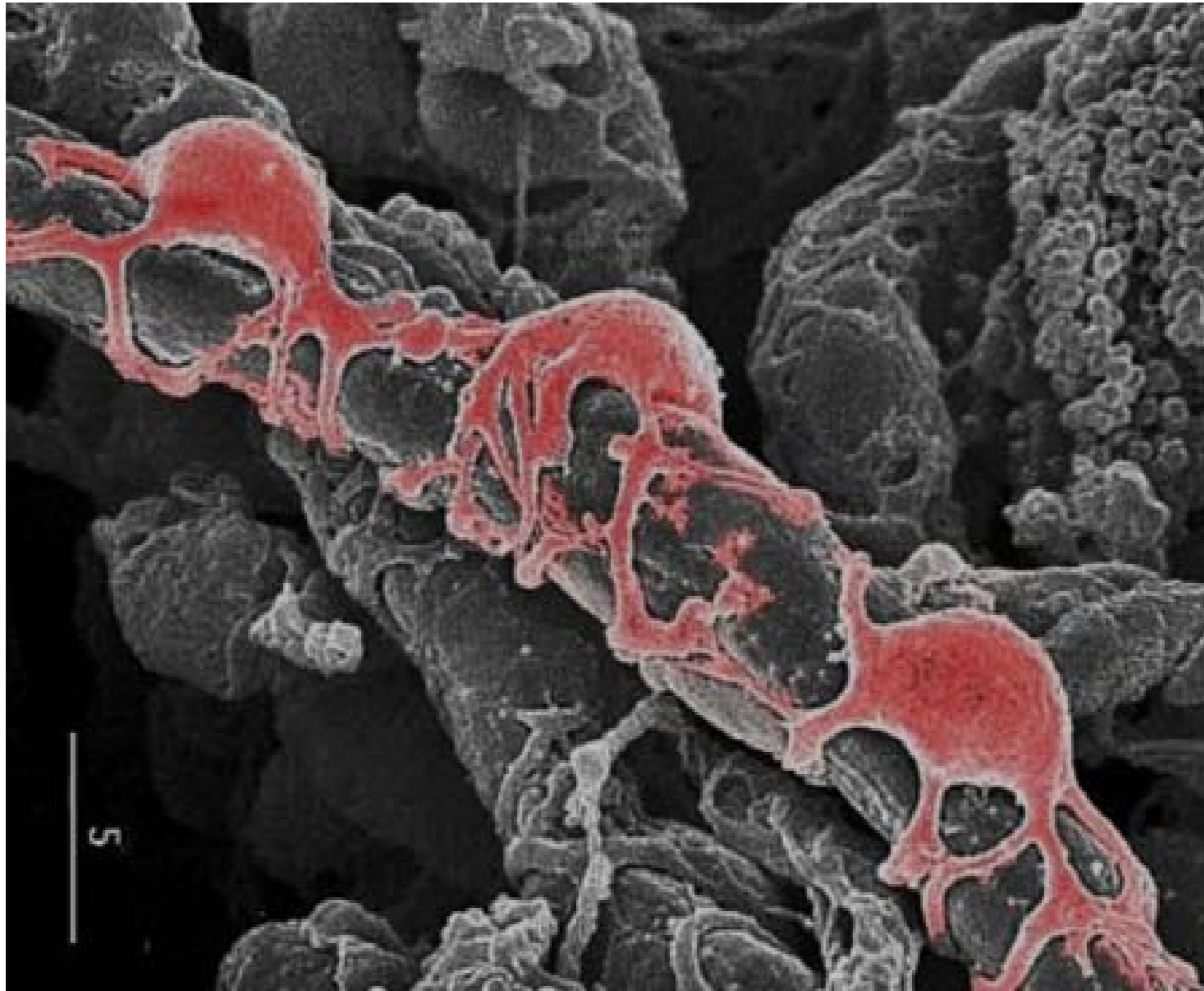
# of MSCs : Total # of Cells in our body

# Decline in MSC Supply as we age



# Where Are MSCs?

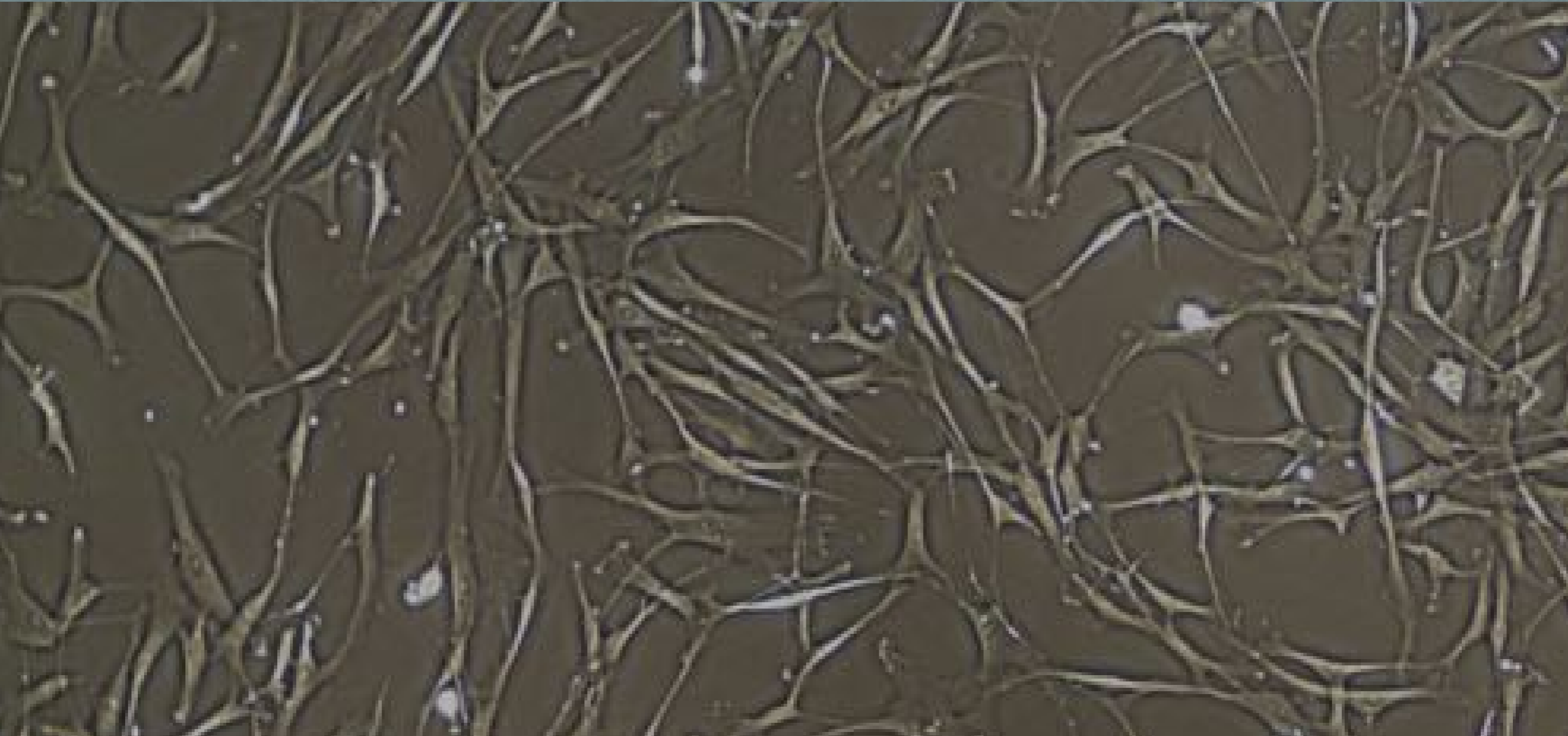
**Pericytes**



**MSCs**

Courtesy of  
Lipogem &  
Dr. Arnold  
Caplan

# MSCs = Medicinal Signaling Cells?



Orchestration of **Regeneration**



# How Do MSCs Help Us?

**Anti-inflammatory**

**Immunomodulatory**

**Regenerative**

**Angiogenic**

**Mitochondrial transfer**

**Anti-fibrotic**

**Anti-apoptotic**

**Pro-apoptotic**

**Anti-microbial**

# Young vs. Old MSCs

# Does **Age** Matter?

- Lifelong perseverance of **Adult MSC** make them particularly susceptible to **accumulation of cellular damage** — which can lead to cell death, senescence, loss of regenerative function, and even neoplastic transformations
- **Neonatal MSC** (such as from Wharton's jelly) are **spared of pro-aging factors**

# Age Matters Evidence

- **Aged adipose derived MSCs** are **significantly compromised** in their ability to support vascular network formation, **unable to rescue** age-associated impairments in cutaneous wound healing.
  - K. Stenderup, “Aging is associated with decreased maximal life span and accelerated senescence of bone marrow stromal cells,” *Bone*, 2003
- **Bone marrow derived MSCs** have **less myogenic potential and engraftment properties** than developmentally early MSCs.
  - C. H. Ting, “Age-related decreases of serum-response factor levels in human mesenchymal stem cells are involved in skeletal muscle differentiation and engraftment capacity,” *Stem Cells and Development*, 2014
- **BMSCs** exhibit **age-related decline** in inflammatory response, cytokine/chemokine receptor expression important for MSC migration and activation, and immunomodulatory activities.
  - M. L. Bustos, “Aging mesenchymal stem cells fail to protect because of impaired migration and antiinflammatory response,” *The American Journal of Respiratory and Critical Care Medicine*, 2014.

# Age Matters Evidence

- **Genes related to senescence** increase in ADSC with age.
  - E. U. Alt, “Aging alters tissue resident mesenchymal stem cell properties,” *Stem Cell Research*, 2012.
- Aging alters the availability of CD45-/CD34+/CD133+ ADSC and their **angiogenic properties**.
  - R. Madonna, “Age-dependent impairment of number and angiogenic potential of adipose tissue-derived progenitor cells,” *European Journal of Clinical Investigation*, 2011.
- **Increased levels of ROS** have been reported in aging BMSC.
  - A. Stolzing, “Age-related changes in human bone marrow-derived mesenchymal stem cells: consequences for cell therapies,” *Mechanisms of Ageing and Development*, 2008.
- Old ADSC are **more sensitive to microenvironmental ROS**, with impaired therapeutic effectiveness.
  - L. Li, “Aging increases the susceptibility of MSCs to reactive oxygen species and impairs their therapeutic potency for myocardial infarction,” *PLoS ONE*, 2014.

# Age Matters Evidence

- “Young” MSC (1-5 yrs of age) **outperformed** “older” MSC (50-70 yrs of age) in improving cardiac parameters after MI
  - M. Fan, “The effect of age on the efficacy of human mesenchymal stem cell transplantation after a myocardial infarction,” *Rejuvenation Research*, 2010.
- MSC from young individuals can undergo **neuroectodermal differentiation** in vitro, but BMSC from elderly patients cannot do so.
  - A. Hermann, “Age-dependent neuroectodermal differentiation capacity of human mesenchymal stromal cells: limitations for autologous cell replacement strategies,” *Cytotherapy*, 2010.
- Adult MSC are exposed to a lifetime of factors, e.g. **NSAIDs** — may inhibit MSC chondrogenic differentiation and disrupt endochondral bone formation.
  - I. Pountos, “NSAIDs inhibit in vitro MSC chondrogenesis but not osteogenesis: implications for mechanism of bone formation inhibition in man,” *Journal of Cellular and Molecular Medicine*, 2011.

# Age Matters Evidence

- **Lifestyle** affects quality of MSC — ADSC from **high-fat** fed mice showed higher adipogenic and lower endothelial differentiation potential in vitro compared to control group.
  - V. Lamontagne, “High-fat diets-induced metabolic alterations alter the differentiation potential of adipose tissue-derived stem cells,” *Open Journal of Endocrine and Metabolic Diseases*, 2013.
- Osteogenic potential from **obese patients** are impaired - mineralization nodules are fewer and smaller.
  - M.Roldan, “Obesity short-circuits stemness gene network in human adipose multipotent stem cells,” *The FASEB Journal*, 2011
- Metabolic diseases like **diabetes** alters ADSC milieu & diminishes the cells' ability to establish vascular network both in vitro & in vivo.
  - R. C. Rennert, “Diabetes impairs the angiogenic potential of adipose-derived stem cells by selectively depleting cellular subpopulations,” *Stem Cell Research & Therapy*, 2014.

**35% of adults at age >20 are overweight, 11% obese, 8% with DM**  
(according to WHO)

# Mesenchymal Stem Cell Aging: Mechanisms and Influences on Skeletal and Non-Skeletal Tissues

- H. Liu et al, *Experimental Biology and Medicine* 2015

- Aging leads to **decreased bone marrow MSC pool, & biased differentiation** into adipocyte at the cost of osteoblast - underlying the etiology of osteoporosis
- Transplanting young MSCs into the bone marrow of aged mice not only **rescues bone loss**, but also **delays aging**. Even subcutaneous implantation of MSCs suppresses aging-related degeneration of various organs!
- Aging of MSCs is also detrimental to **non-skeletal tissues**, including the hematopoietic system
- Aging compromises the **therapeutic potentials** of MSCs, including cells from aged individuals, or cells cultured for many passages



# Transplantation of MSCs from **Young Donors** Delays Aging in Mice

- J. Shen et al, *Scientific Reports*, 2011

- Stem cells isolated from older donors have **defective functions**, such as impaired capacity to proliferate and differentiate when compared to those from young individuals
- Comparing function of BMSCs isolated from **young** (1–2 months old) vs. **old** (20-24 months old) mice — BMSCs from old animals had significantly less capability for differentiation (into bone, muscle, fat or neurons)
- transplantation of **young** BMSCs significantly **delays** the decrease of bone densities, while **old** BMSCs transplantation may actually **accelerate** the decline of bone density.

# Antiaging Evidence

# Health Span-Extending Activity of Human Amniotic Membrane- and Adipose Tissue-Derived Stem Cells in F344 Rats

- D. Kim et al, *Stem Cell Translational Medicine*, 2015

- Aging leads to progressive deterioration of cholinergic and dopaminergic systems.
- Concentrations of neurotrophins in the brain and muscles decline, leading to **reduced neurogenesis** and **accelerated muscular atrophy**, which lead to impairments of **cognitive** function and **physical** activity.
- Aging also leads to **exhaustion of the stem cell population**. Various stem cells exert neuroprotective effects and enhance functional recovery by secreting neurotrophic factors.
- Concentrations of TBARS (byproducts of lipid peroxidation) significantly increase in the brain, muscles, heart, liver, and lungs of aged rats, along with a low vessel density.

## Health Span-Extending Activity of Human Amniotic Membrane- and Adipose Tissue-Derived Stem Cells in F344 Rats

- D. Kim et al, *Stem Cell Translational Medicine*, 2015

- ADMSCs (adipose-derived MSCs) was shown to exert preventive and therapeutic effects on the memory deficit of AD (Alzheimer's disease) model mice, **increased brain concentrations of ACh, BDNF, and NGF** and improved cognitive and physical functions of aging mice
- ADMSCs secrete a very high concentration of **vascular endothelial growth factor (VEGF)**, contributing to prolongation of life span in an amyotrophic lateral sclerosis (ALS) mouse model
- **Muscle-derived Stem/Progenitor Cells (MSPCs)** also extended health spans and life spans of progeria mice by restoring microvessels and muscle fibers through secreted factor(s)

## Health Span-Extending Activity of Human Amniotic Membrane- and Adipose Tissue-Derived Stem Cells in F344 Rats

- D. Kim et al, *Stem Cell Translational Medicine*, 2015

- This experiment: **aged (10 month old)** male F344 rats were divided into 3 groups: vehicle (n = 20), human amniotic membrane-derived mesenchymal stem cells (AMMSC)-transplant group (n = 20), and ADMSC-transplant group (n = 30)
- 1 million of either human AMMSCs or human ADMSCs (from 53 year old woman) were given per rat **intravenously** (via tail vein), once a month throughout the rest of their lives.
- AMMSCs and ADMSCs **improved cognitive and physical functions** of naturally aging rats, extending life span by 23.4% and 31.3% respectively.

## Health Span-Extending Activity of Human Amniotic Membrane- and Adipose Tissue-Derived Stem Cells in F344 Rats

- D. Kim et al, *Stem Cell Translational Medicine*, 2015

- by the time rats reached **20 months of age**, only 30% of control (vehicle-treated) rats survived, compared with 70% and 100% survival of AMMSC- and ADMSC-treated rats, respectively.
- By **23 months of age**, all rats in the vehicle group died, whereas AMMSCs and ADMSCs groups had survival rates of 60% and 72% respectively
- The transplanted cells were found to **differentiate into neurons**, exhibiting differentiation rates of 62-76% in AMMSCs and 54-75% in ADMSCs, respectively

## Health Span-Extending Activity of Human Amniotic Membrane- and Adipose Tissue-Derived Stem Cells in F344 Rats

- D. Kim et al, *Stem Cell Translational Medicine*, 2015

- **Brain neurotrophic factors** such as BDNF, NGF, GDNF, and VEGF markedly decreased in aged rat brain compared with young animals. These were **upregulated** by transplantation of AMMSCs or ADMSCs. **VEGF** that possesses angiogenic potential was greatly increased **to levels higher than in young rats**.
- **Muscular neurotrophic factors** such as BDNF, GDNF, VEGF, and IGF-1 that had decreased in aged rats were also **restored** by transplantation of AMMSCs or ADMSCs. **GDNF and IGF-1** related to motor neuron development and muscular innervation and myogenesis were upregulated **to levels higher than in young rats**
- Transplantation of AMMSCs or ADMSCs significantly **increased the number of blood vessels comparable to that of young rats**, indicative of increased angiogenesis.

## Health Span-Extending Activity of Human Amniotic Membrane- and Adipose Tissue-Derived Stem Cells in F344 Rats

- D. Kim et al, *Stem Cell Translational Medicine*, 2015

- Tissue injury was nearly fully attenuated by transplantation of AMMSCs and ADMSCs
- Monthly transplantation of AMMSCs or ADMSCs markedly increased the stamina and cognitive function of aged rats
- ACh concentrations in CSF and muscles of aged (21-month-old) rats were much lower than those of young (7-week-old) animals. These decreased ACh levels in CSF and muscles were significantly restored following transplantation of AMMSCs or ADMSCs
- Alteration in gene expressions of cholinergic nerve markers associated with aging were markedly restored after transplantation of AMMSCs or ADMSCs.



## Health Span-Extending Activity of Human Amniotic Membrane- and Adipose Tissue-Derived Stem Cells in F344 Rats

- D. Kim et al, *Stem Cell Translational Medicine*, 2015

- The number of **host stem cells** in aged rats is only 27.8% that of young rats. Transplantation of AMMSCs or ADMSCs **increased** the number of host stem cells **to the level comparable to young rats**, indicative of resumption of neurogenesis.
- expression of CCL11 (eotaxin), **a chemokine suppressing neurogenesis**, increases during aging, along with marked decrease in MAP2, a **neuronal skeletal protein**. These changes were **fully reversed** after transplantation of AMMSCs or ADMSCs.
- stem cell therapy increased the concentration of ACh and recovered neurotrophic factors in the brain and muscles, leading to **restoration of cholinergic and dopaminergic nervous systems, microvessels, muscle mass, and antioxidative capacity**.

# Extension of Maximal Lifespan and High Bone Marrow Chimerism After Nonmyeloablative Syngeneic Transplantation of Bone Marrow From Young to Old Mice

- M. Kovina, et al, *Frontiers in Genetics*, 2019

- This experiment: beginning at the age of 15 months (equivalent to **human age of 75 years**), when about 50% of the mice have died, intravenous BM transplantation from young mice were given
- Dosing: 100 million nucleated cells from BM of young donors per injection through tail vein, and **repeated 6 times within 3 months**
- **Mice aged 3-15 weeks** from the same strain but heterozygous for the green fluorescent protein transgene were used as BM donors.

- Cont'd -

## Extension of Maximal Lifespan and High Bone Marrow Chimerism After Nonmyeloablative Syngeneic Transplantation of Bone Marrow From Young to Old Mice

- M. Kovina, et al, *Frontiers in Genetics*, 2019

- Results: **maximum lifespan** in transplanted mice **increased by  $31 \pm 5\%$**
- **Survival time** from the beginning of the experiment was **increased by 3.2 fold**
- At age 19.3 months: the last mouse of the **control** group died “sedentary, almost immobile, and hunchbacked with poor hair,” the **transplanted** mice were active, had even spine, and shiny even hair
- The observed lifespan extension was accompanied by **extension of an active and healthy life period**
- The **chimerism** of the BM 6 months after the transplantation was **28%**
- Result is highly encouraging for clinical applications for aged humans (70–80 years old)

# Evaluation of Immune response to Intravenously Administered Human Cord Blood Stem Cells in the Treatment of Symptoms Related to Chronic Inflammation

- Mehling et al., *Journal of Stem Cell Research & Therapy* 2015

- 20 patients were treated for conditions associated with **chronic inflammation** (such as osteoarthritis, post-traumatic arthritis, inflammatory back pain, left shoulder bursitis and herniated disc), as well as for the purpose of **anti-aging**
- 1x IV infusion of 25 million HUCB stem cells in 100ml NS
- Patients did not demonstrate changes in inflammation markers in 3 mos, but:
- 10 patients showed significant **improvement in CBC, CMP, AST/ALT, & Lipid panel**
- Antiaging benefits are evaluated at 24 hrs, 2 wks and 3 mos after therapy. At 3 mos, there is significant improvement in **skin, hair & nail growth, energy level, libido, mood, sleep, & pain level**

# Mesenchymal Stem Cell Therapy for **Aging Frailty**

- Hare et al, *Frontiers in Nutrition*, 2018

- **Frailty syndrome** is characterized by declines in lean body mass, strength, endurance, balance, gait speed, activity and energy levels, and organ physiologic reserve
- Frailty increases the **risk** of falls, hospitalizations, institutionalization, disability, and death
- Cardiovascular Health Study (**CHS**) **Index** defines frailty as having 3 out of 5 criteria indicating “compromised energetics”: weak grip strength, low energy levels or self-reported exhaustion, slow gait speed, low physical activity, and/or unintentional weight loss
- Prevalence of **frailty** in age > 65 in the US: **7–12%**
- Prevalence of **pre-frailty** in age > 65 in the US: **35 - 50%** (pre-frailty - when meeting 1-2 out of 5 criteria defined in CHS index)
- **Comorbidities**, esp. cardiovascular, pulmonary, musculoskeletal, neurologic, and psychiatric, are more prevalent in pre-frail compared to non-frail persons

# Mesenchymal Stem Cell Therapy for **Aging Frailty**

- Hare et al, *Frontiers in Nutrition*, 2018

- There is **strong link** between frailty, inflammation, & impaired ability to repair tissue injury due to decreases in endogenous stem cell production & function
- An individual's endogenous stem cell production/function **decrease with age**
- Aging induces a “**quiescence-to-senescence switch**” in stem cells, causing degradation in extracellular matrix and the stem cell niches in tissues — leading to reduced stem cell self-renewal, maintenance and regenerative potential
- Altered and dysfunctional stem cell niches have been implicated in frailty syndrome
- As MSCs undergo senescence, their multilineage differentiation, homing capacity, immunomodulatory and wound healing properties **gradually disappear**
- **Intravenously delivered allogeneic MSCs** are safe and produce significant improvements in physical performance measures and inflammatory biomarkers

# Antiaging Stem Cell Therapy Protocol

# Dosing Recommendation



- Minimally manipulated **birth tissue-derived** MSCs
- **2 million** MSCs for every 60 lbs of body weight
- **add 2 million** for age >65-70
- **add 2 million** for severe/aggressive disease state
- Treatment intervals can range between 3-12 months based on individual needs



Live More Years  
with Vitality



# Thank You!

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American Academy of Integrative Cell Therapy