

Targeting Aging with Metformin (TAME): A Concrete Plan to Pave the Way for Targeting Aging

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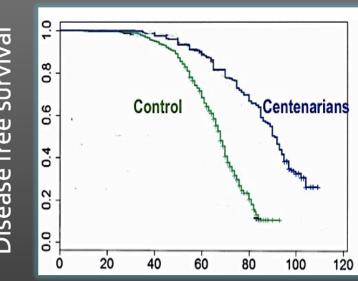
Those living longer also maintain health longer, even as they grow old

Centenarians also exhibit compressed morbidity, meaning fewer years living with disease, and economic benefit for society

Longevity genes have been identified and have been translated into drugs

Is it possible to extend healthspan and not only lifespan?

Disease free surviva

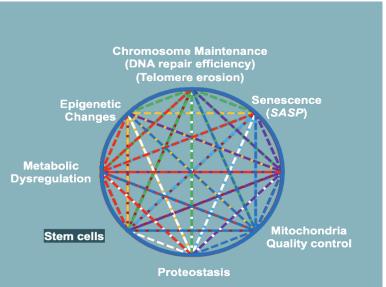


Age of onset of disease (females)

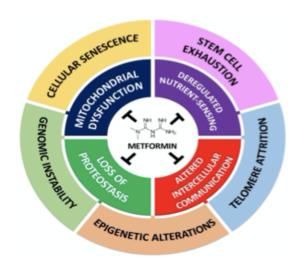


Why do we think we can increase healthspan and lifespan for everyone?

 Hallmarks of aging provide a theory of promising targets



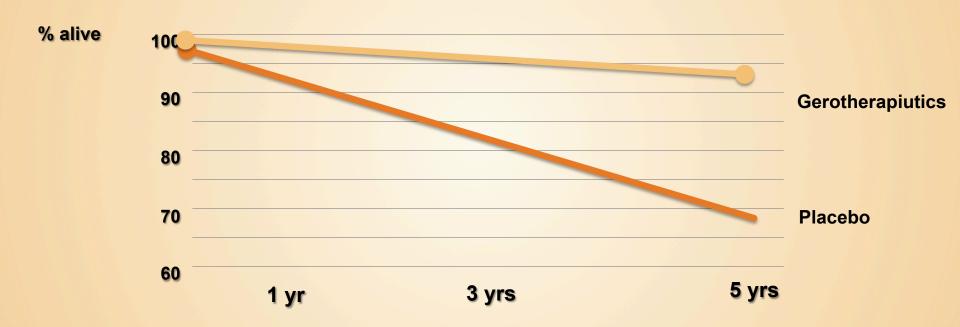
2) TAME provides the road map necessary for success.



Metformin targets ALL the hallmarks of aging



What is required for gerotherapeutics in humans:

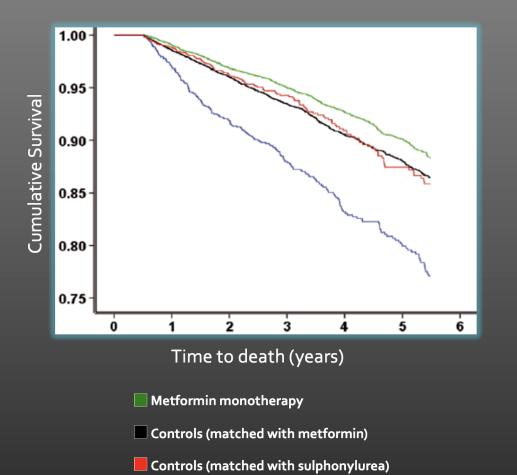




Metformin may be a gerotherapy

There is evidence that drugs like Metformin may decrease mortality, even in non-diabetics

If we can demonstrate that even one drug can be repurposed as a generalpurpose mortality mitigator, the path for other gerotherpeutics will be cleared



Sulphonylurea monotherapy

Metformin may also have substantial effects on healthspan in humans

Metformin:

- Prevents diabetes (T2DM) (DPP)
- Prevents cardiovascular diseases (UKPDS)
- Is associated with less cancer
- Slow cognitive decline and AD

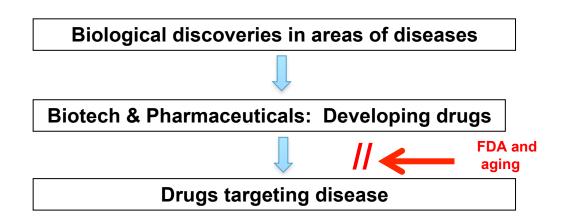
Thus, metformin is the perfect **tool** for repurposing a gerotherapeutics



Can we repurpose Metformin to target aging?

If diseases of aging are not recognized as preventable conditions:

- Healthcare provider would not pay for their clients.
- Pharmaceuticals will not develop other, better and combination of drugs.





TAME Study Design

(In consultation with the FDA)

Inclusion Criteria: Age 65-80

N = 3,000

Double blind placebo-controlled trial

(Clinical) Time to incidence of any major age-related disease:

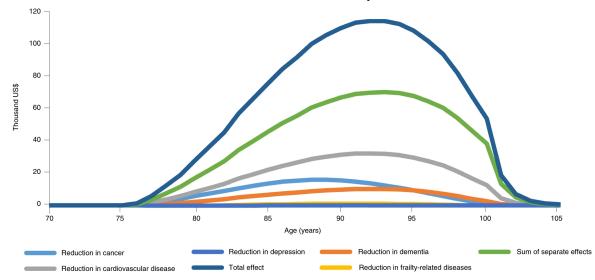
MI, stroke, cancer*, CHF, MCI/dementia, or death. FDA

((Biological) Change in metformin levels and biomarkers of aging and age-related diseases NIA.



TAME will cost ~\$50M, but the economic benefits may mean it pays for itself (~\$100M)

The value for each year (by age) of improvements in the incidence of various diseases under simulated impact of metformin.



AJ Scott et al., The economic value of targeting aging

Nature Aging (2021)



FDA Response to TAME

The TAME Study:

- Provide proof of concept that aging can be targeted and healthspan can be extended
- Inspire the FDA to make aging an indication
- Provide a template for biotech and pharma of how to move forward with their clinical studies and new biotech opportunities

The TAME Trial infrastructure is ready today



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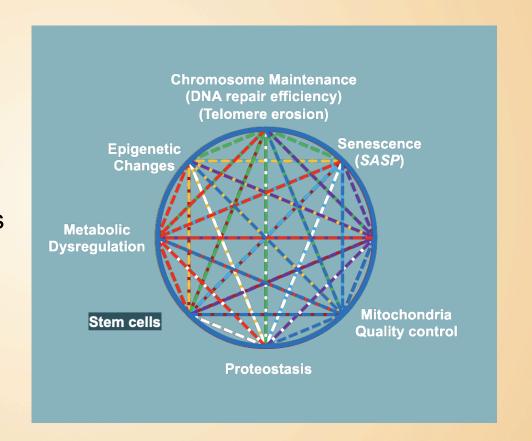


Learn more at www.afar.org/tame-trial

Thank you

The drivers of aging are diverse and systemic within the body, defying quantification by a single measure

Without a way of quantifying the progress of aging, drugs cannot be approved as effective, insurers will never pay for treatments, and drugs targeting aging cannot be developed





By understanding the mechanisms by which a single drug, like Metformin, slows down aging, we will better understand aging itself

The performance of other drugs can then be measured against their influence on these pathways

TAME is designed to be a pathbreaker for aging therapies

Inclusion Criteria: Ages 65-80, slow gait or incidence of age-related disease

Primary Outcome: Time to incidence of major age-related health outcome

The Goal:

- Demonstrate broad age-related effects
- Capture data on biomarkers of aging



Thank You

Why should you commit to increased health span and longevity?

Possible definitions:

- Compressed Morbidity
- Aging Reversal
- Total Absence of Evidence of Aging

Life expectancy today is unprecedented relative to the past, and healthspan has generally increase with it