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## **How do Changes in Human Longevity Impact on our Demography?**

**by Leonid Gavrilov and Natalia Gavrilova**  
**University of Chicago, USA**

Session 10, Keynote Lecture  
Our Common Future, Essen, November 6th, 2010

Our Common Future, Hannover/Essen, 2-6 November 2010 ([www.ourcommonfuture.de](http://www.ourcommonfuture.de))



# **How do Changes in Human Longevity Impact on our Demography?**

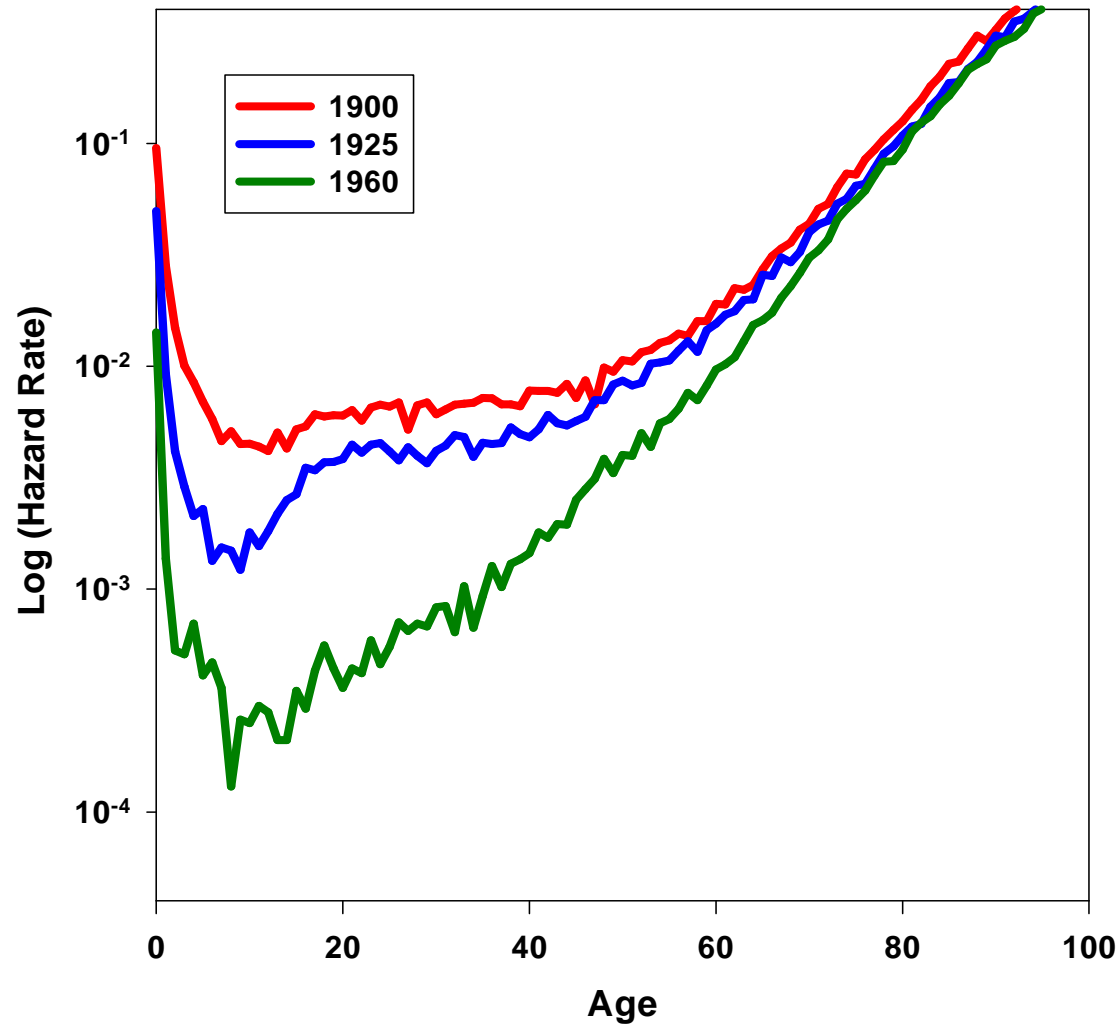
Dr. Leonid A. Gavrilov, Ph.D.  
Dr. Natalia S. Gavrilova, Ph.D.

**Center on Aging  
NORC and The University of Chicago  
Chicago, USA**



**How mortality and longevity  
changed in the 20<sup>th</sup> century?**

# Changes in Mortality, 1900-1960



Swedish females. *Data source:* Human Mortality Database

# The Gompertz-Makeham Mortality Law

Death rate is a sum of age-independent component (Makeham term) and age-dependent component (Gompertz function), which increases exponentially with age.

$$\mu(x) = A + R e^{\alpha x}$$

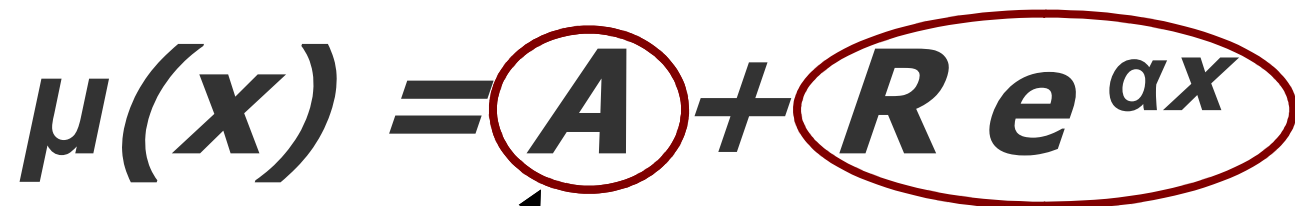
risk of death

$A$  – Makeham term or background mortality

$R e^{\alpha x}$  – age-dependent mortality;  $x$  - age

# How can the Gompertz-Makeham law be used?

By studying the historical dynamics of the mortality components in this law:

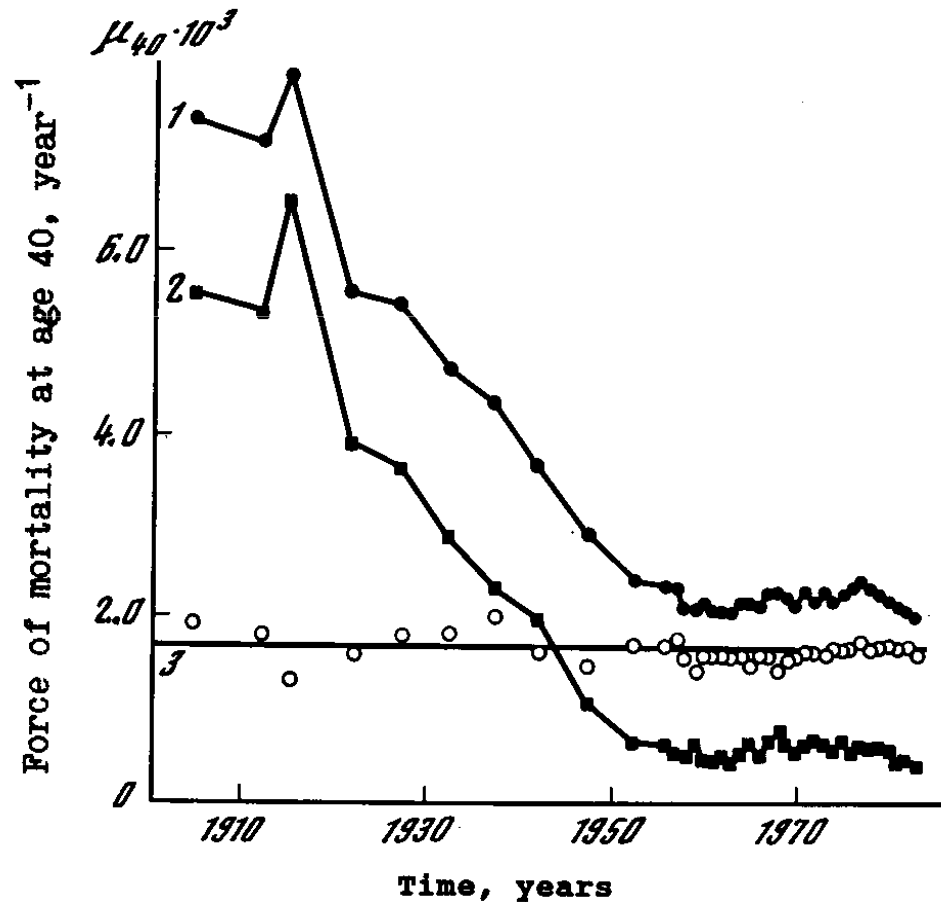
$$\mu(x) = A + R e^{\alpha x}$$
The equation  $\mu(x) = A + R e^{\alpha x}$  is displayed. The term  $A$  is circled in red, and the term  $R e^{\alpha x}$  is enclosed in a red oval. Arrows point from the labels 'Makeham component' and 'Gompertz component' below to these respective parts of the equation.

Makeham component

Gompertz component

# Historical Stability of the Gompertz Mortality Component

Historical Changes in Mortality for 40-year-old Swedish Males



1. Total mortality,  $\mu_{40}$
2. Background mortality ( $A$ )
3. Age-dependent mortality ( $Re^{\alpha 40}$ )

■ Source: Gavrilov, Gavrilova, "The Biology of Life Span" 1991

# In the end of the 1970s it looked like there is a limit to further increase of longevity

## Debate

*Gerontology* 29: 176–180 (1983)

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0304-3243/83/0293-0176\$2.75/0

## Human Life Span Stopped Increasing: Why?

*Leonid A. Gavrilov, Natalia S. Gavrilova, Victor N. Nosov*

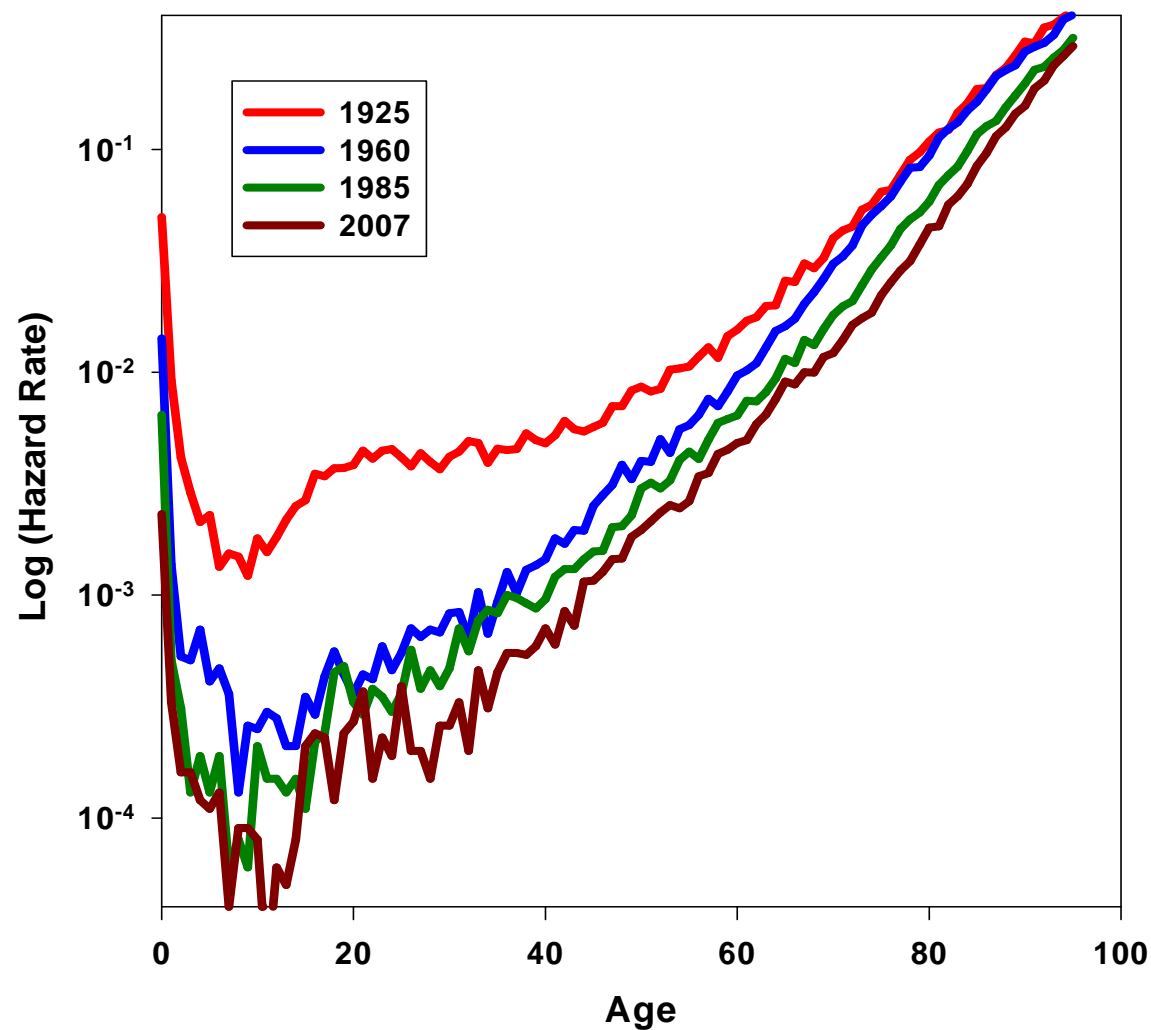
A.N. Belozersky Laboratory of Molecular Biology and Bioorganic Chemistry, and Department of Biology, Moscow State University, Moscow, USSR



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# **Increase of Longevity After the 1970s**

# Changes in Mortality, 1925-2007

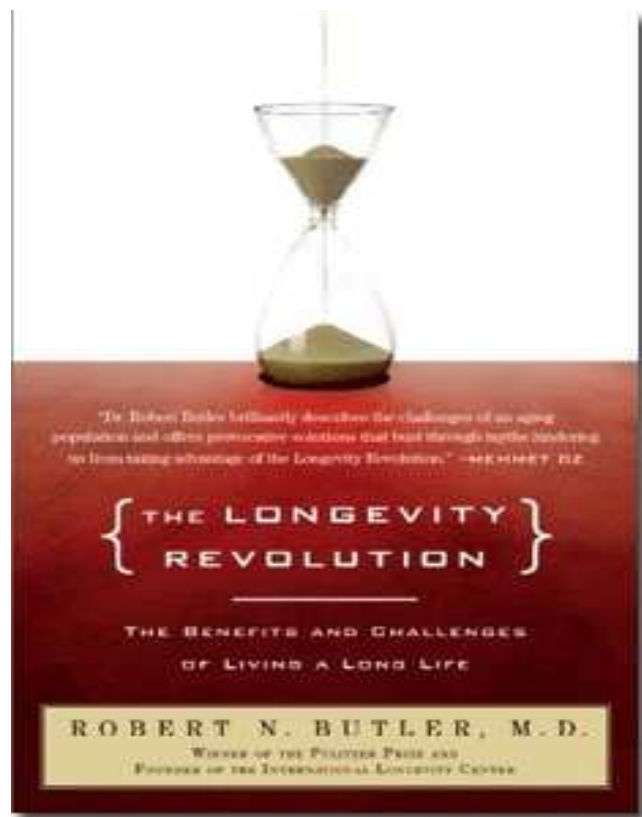


Swedish Females. *Data source:* Human Mortality Database

# Preliminary Conclusions

- There was some evidence for `biological' mortality limits in the past, but these `limits' proved to be responsive to the recent technological and medical progress.
- Thus, there is no convincing evidence for **absolute** `biological' mortality limits **now**.
- Analogy for illustration and clarification: There was a limit to the speed of airplane flight in the past (`sound' barrier), but it was overcome by further technological progress. Similar observations seem to be applicable to current human mortality decline.

# Now We Face a Longevity Revolution Through Biotechnology and Genetic Engineering



- *"... it may soon be possible to delay both aging and age-related disease in humans."*  
(p. 162)

*The Longevity Revolution: The Benefits and Challenges of Living a Long Life.* By Robert N. Butler. 553 pp. New York, PublicAffairs, 2008

## Longevity Revolution (2)



- *"The present level of development of aging and longevity research justifies an Apollo-type effort to control aging ..."* (p. 187)



# **What May Happen in the Case of Radical Life Extension?**



# Rationale of our study

- A common objection against starting a large-scale biomedical war on aging is the fear of catastrophic population consequences (overpopulation)



# Rationale (continued)

- **This fear is only exacerbated by the fact that no detailed demographic projections for radical life extension scenario were conducted so far.**
- **What would happen with population numbers if aging-related deaths are significantly postponed or even eliminated?**
- **Is it possible to have a sustainable population dynamics in a future hypothetical non-aging society?**



# **The Purpose of this Study**

- **This study explores different demographic scenarios and population projections, in order to clarify what could be the demographic consequences of a successful biomedical war on aging.**

# **"Worst" Case Scenario: Immortality**

- **Consider the "worst" case scenario (for overpopulation) -- physical immortality (no deaths at all)**
- **What would happen with population numbers, then?**
- **A common sense and intuition says that there should be a demographic catastrophe, if immortal people continue to reproduce.**
- **But what would the science (mathematics) say ?**

# The case of immortal population

Suppose that parents produce less than two children on average, so that each next generation is smaller:

$$\frac{\text{Generation } (n+1)}{\text{Generation } n} = r < 1$$

Then even if everybody is immortal, the final size of the population will not be infinite, but just

$$1/(1 - r)$$

larger than the initial population.

# The case of immortal population

For example one-child practice ( $r = 0.5$ ) will only double the total immortal population:

$$1/(1 - r) = 1/0.5 = 2$$

**Proof:**

Infinite geometric series converge if the absolute value of the common ratio ( $r$ ) is less than one:

$$1 + r + r^2 + r^3 + \dots + r^n + \dots = 1/(1-r)$$

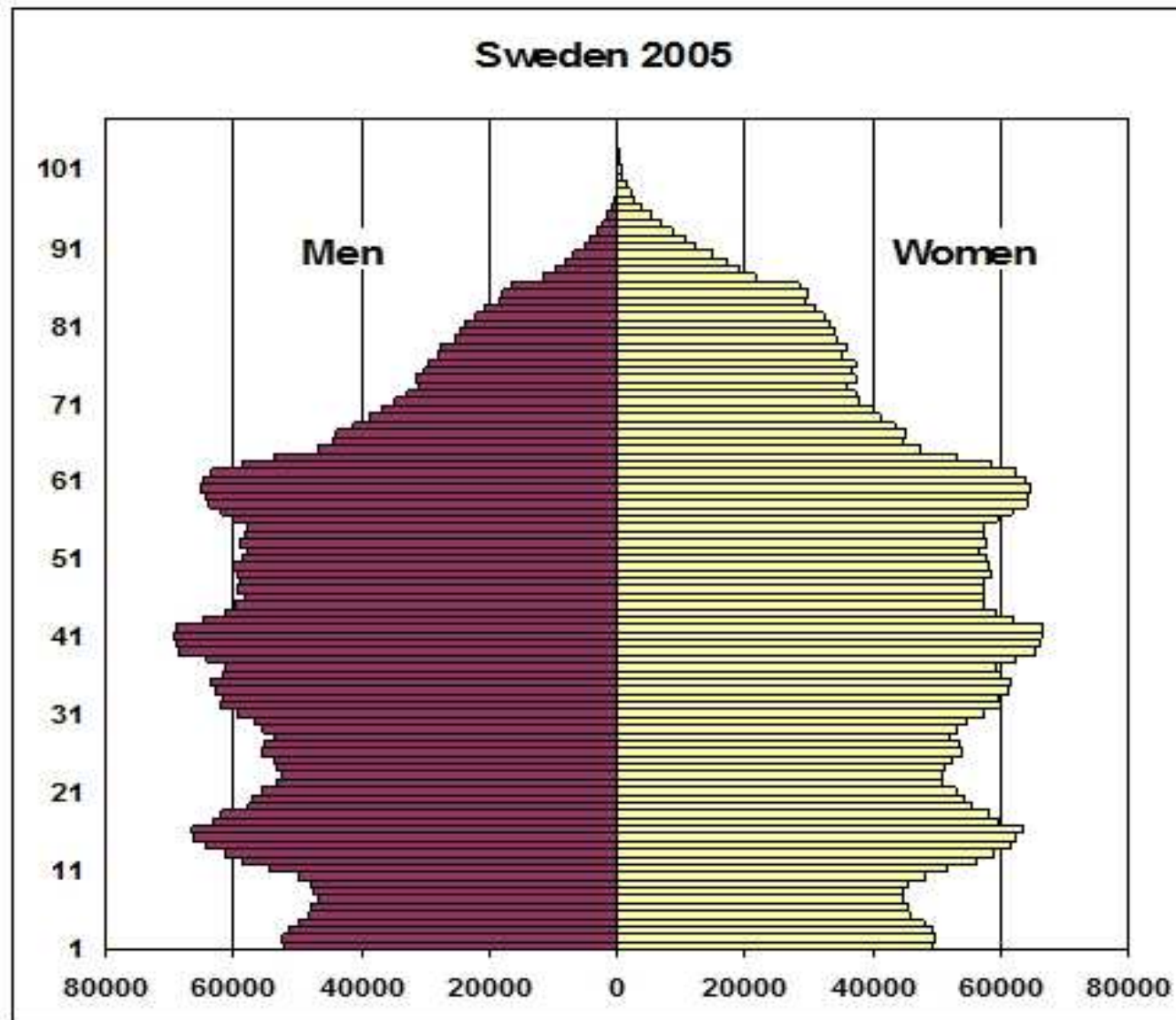
# Lesson to be Learned

- **Fears of overpopulation based on lay common sense and uneducated intuition could be exaggerated.**
- **Immortality, the joy of parenting, and sustainable population size, are not mutually exclusive.**
- **This is because a population of immortal reproducing organisms will grow indefinitely in time, but not necessarily indefinitely in size (asymptotic growth is possible).**

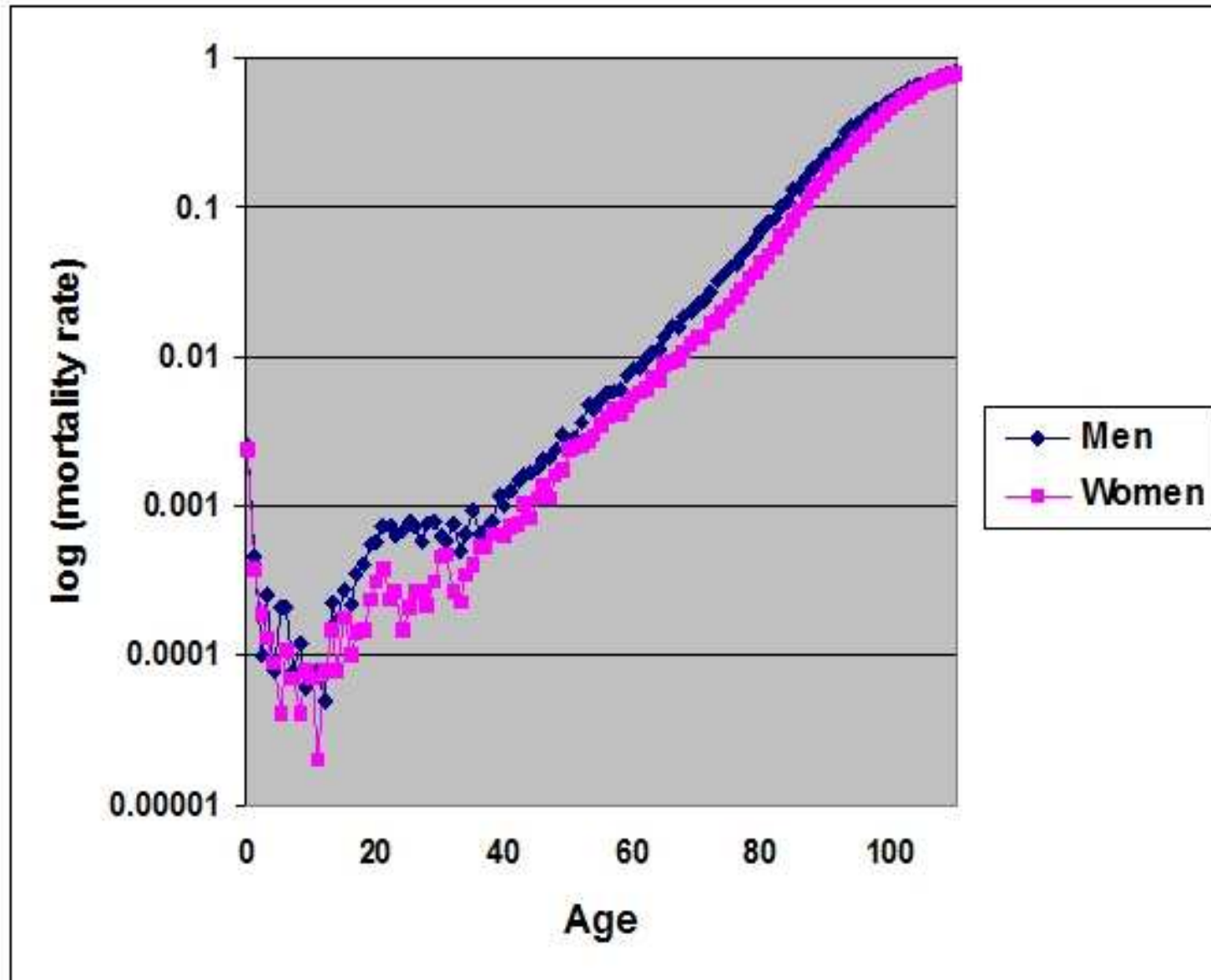
# Method of population projection

- **Cohort-component method** of population projection (standard demographic approach)
- Age-specific **fertility** is assumed to **remain unchanged** over time, to study mortality effects only
- **No migration** assumed, because of the focus on natural increase or decline of the population
- New population projection software is developed using Microsoft Excel macros

# Study population: Sweden 2005

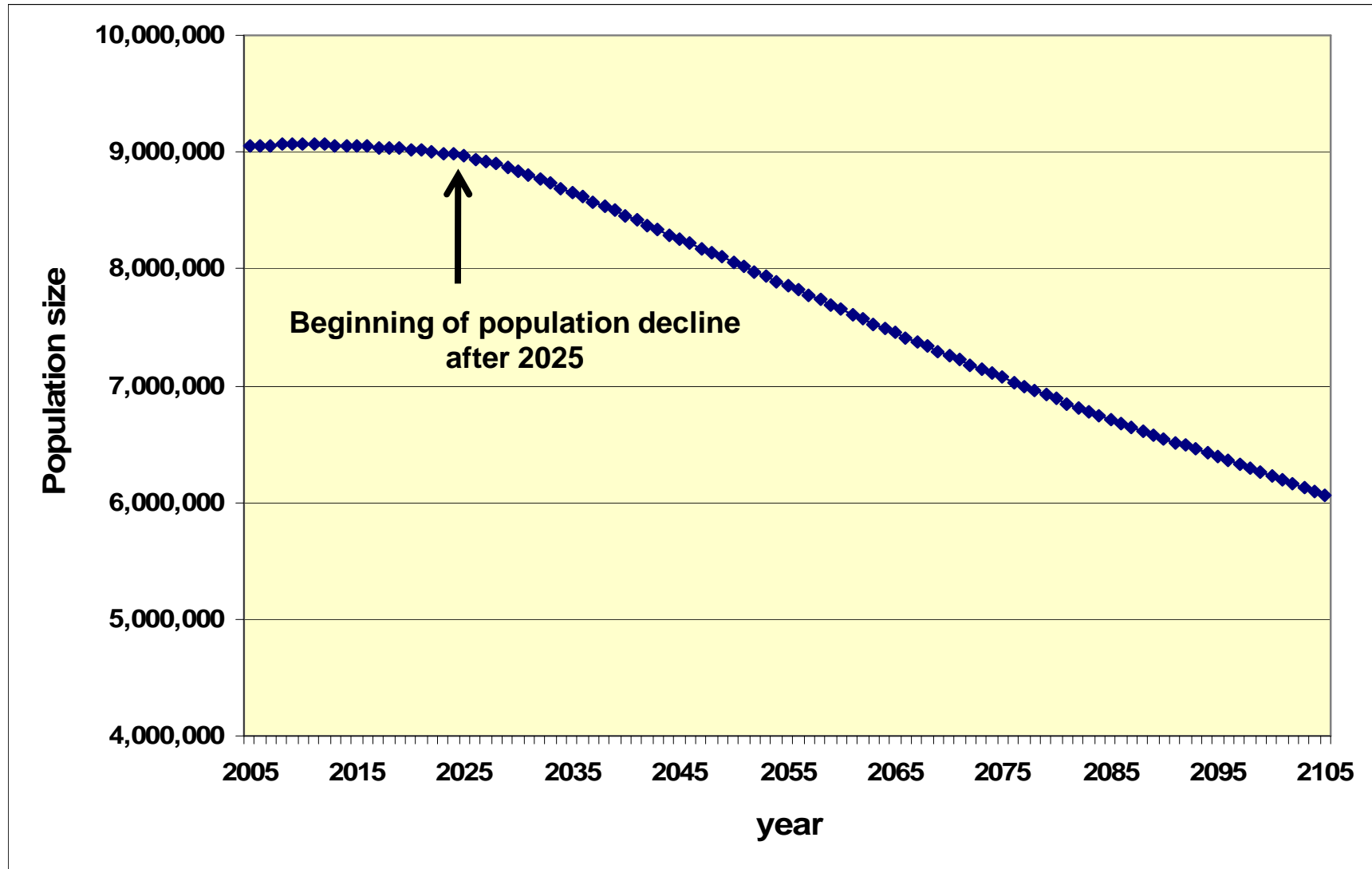


# Mortality in the study population

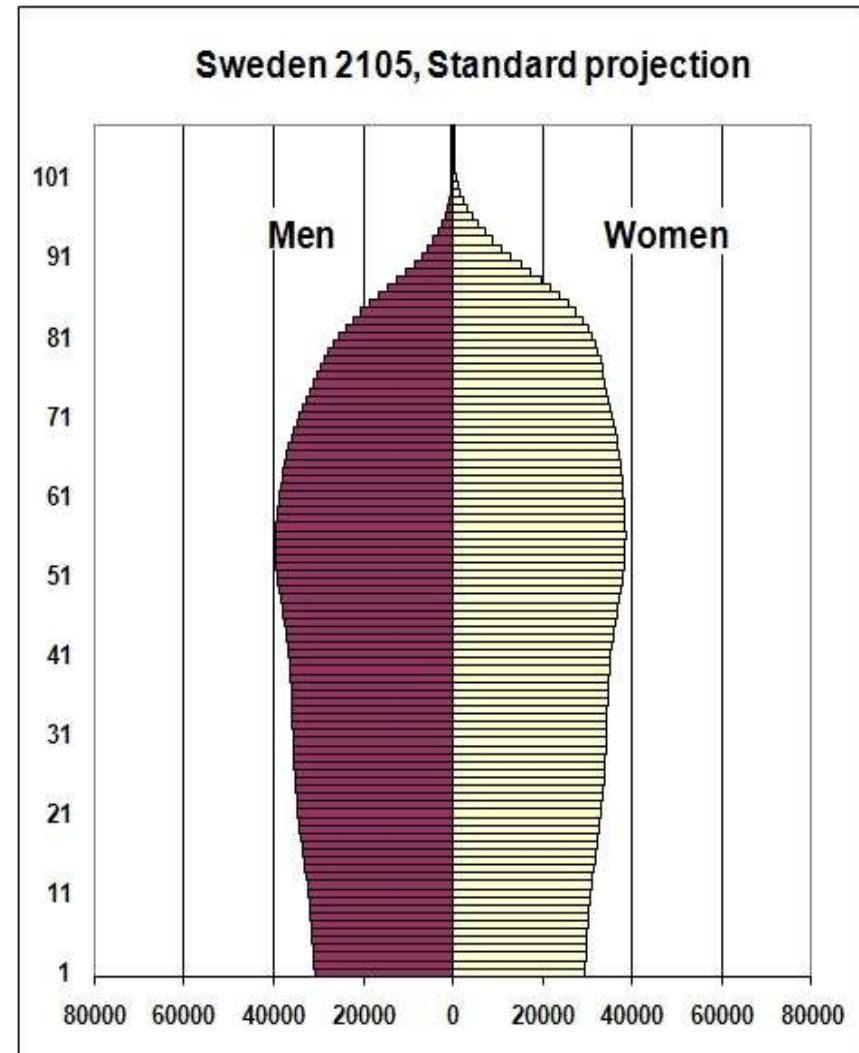
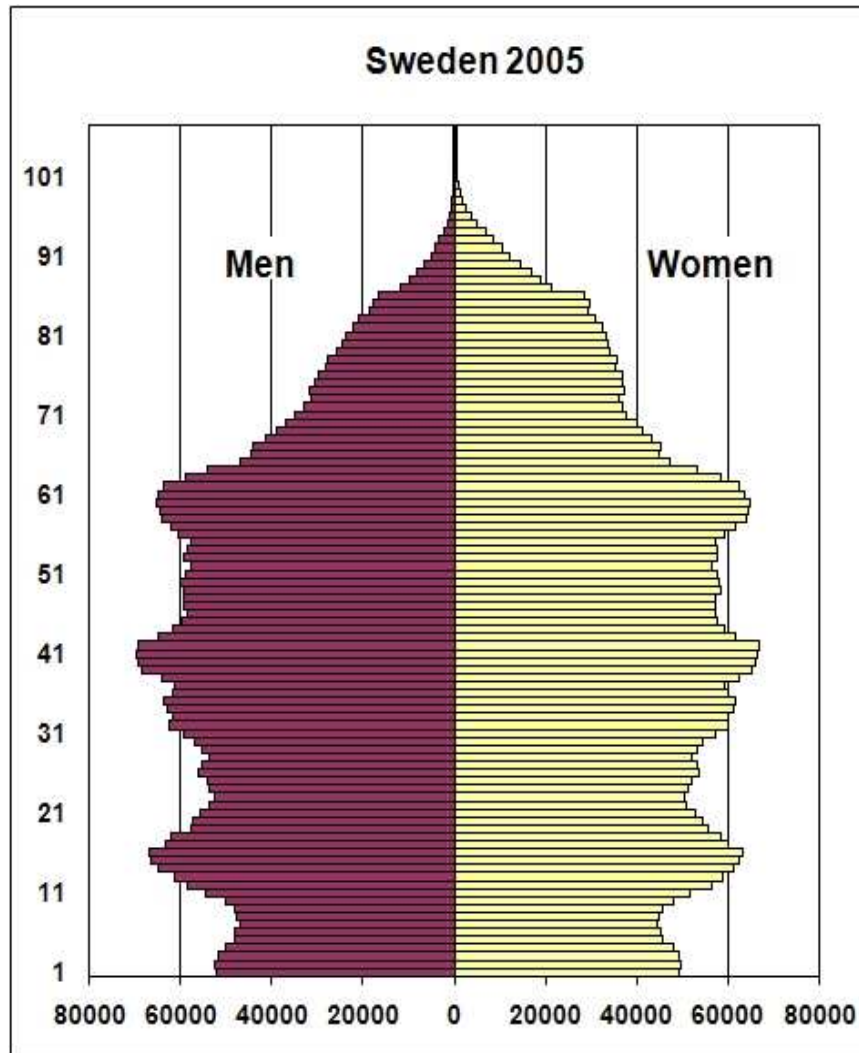




# Population projection without life extension interventions



# Projected changes in population pyramid 100 years later





# **Accelerated Population Aging is the Major Impact of Longevity on our Demography**

- **It is also an opportunity if society is ready to accept it and properly adapt to population aging.**
- 

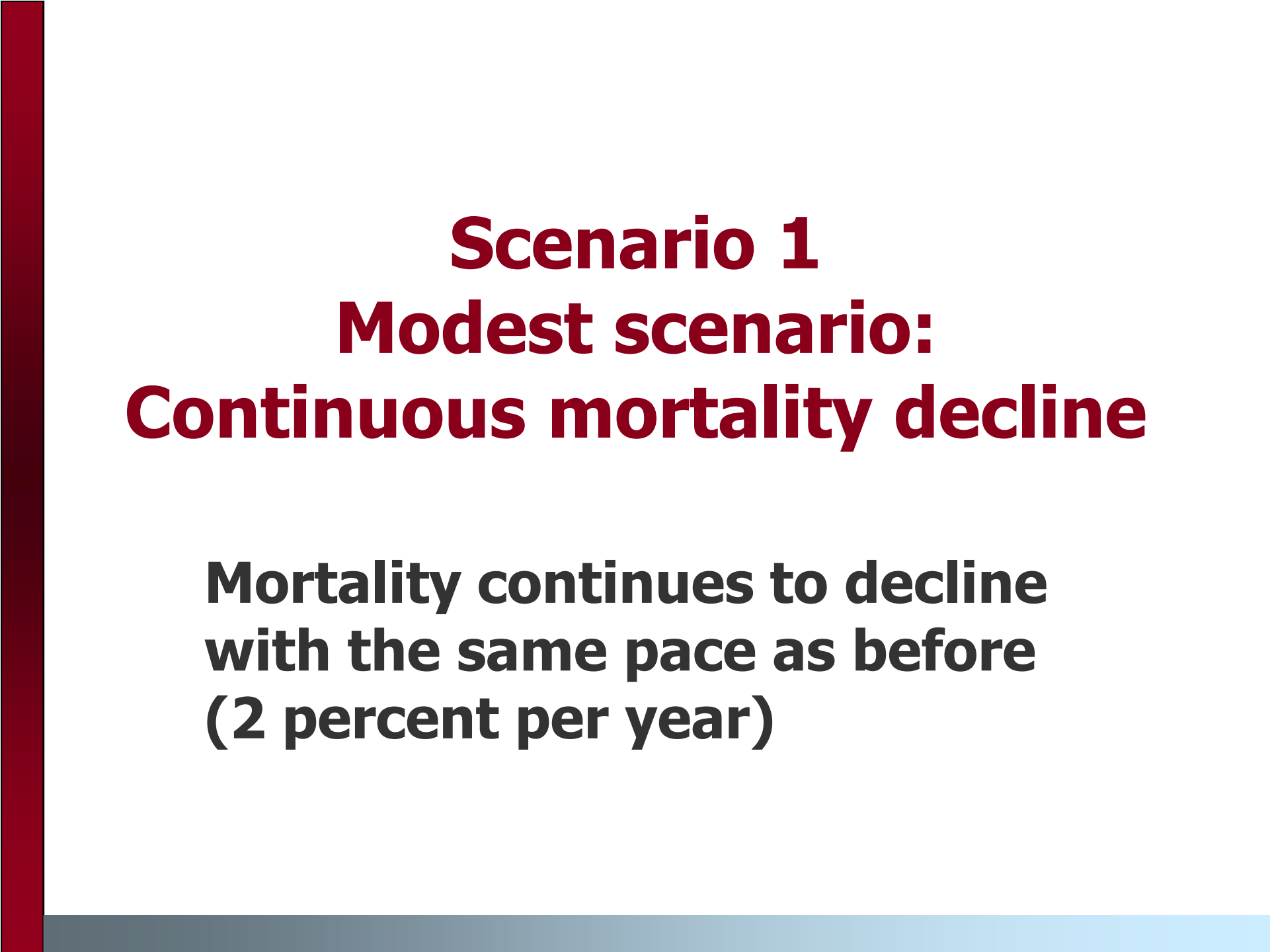
## **Why Life-Extension is a Part of the Solution, rather than a Problem**

- **Many developed countries (like the studied Sweden) face dramatic decline in native-born population in the future (see earlier graphs) , and also risk to lose their cultural identity due to massive immigration.**
- **Therefore, extension of healthy lifespan in these countries may in fact prevent, rather than create a demographic catastrophe.**

# Scenarios of life extension

- 1. Continuation of current trend in mortality decline**
- 2. Negligible senescence**
- 3. Negligible senescence for a part of population (10%)**
- 4. Rejuvenation (Gompertz alpha = -0.0005)**

All anti-aging interventions start at age 60 years with 30-year time lag

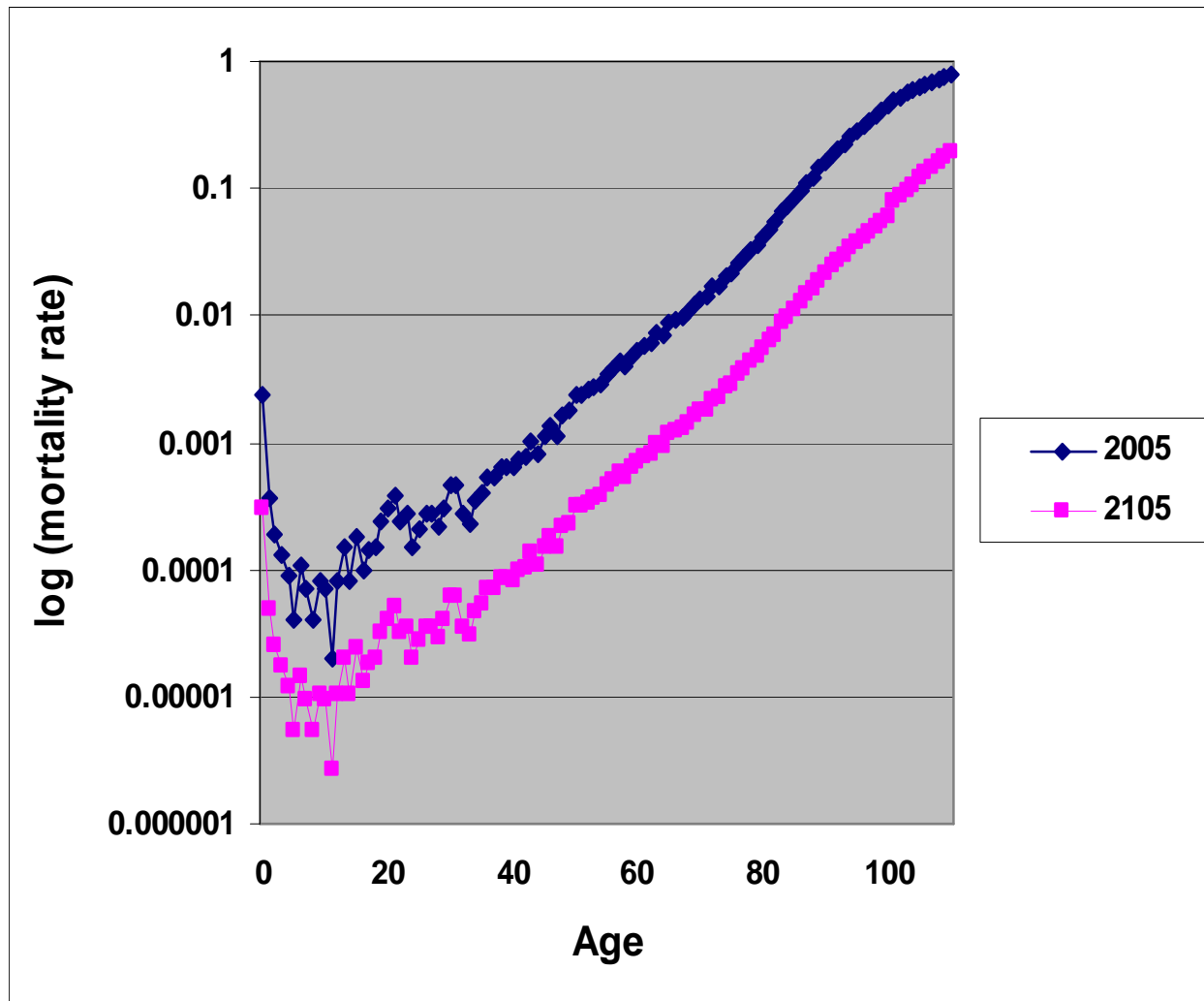


# **Scenario 1**

## **Modest scenario: Continuous mortality decline**

**Mortality continues to decline  
with the same pace as before  
(2 percent per year)**

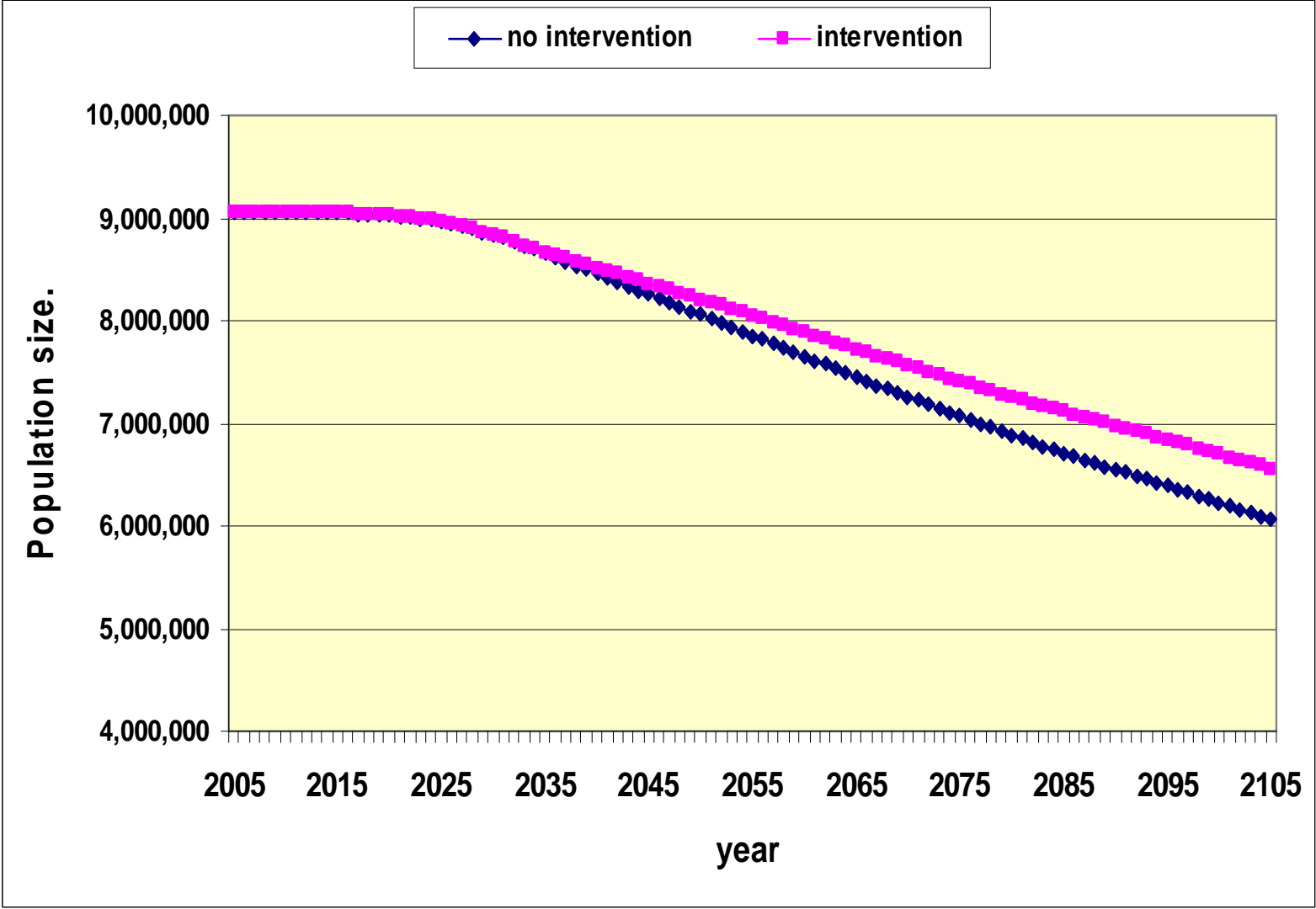
# Modest scenario: Continuous mortality decline



An example  
for Swedish  
females.

Source:  
Human  
mortality  
database

# Population projection with continuous mortality decline scenario



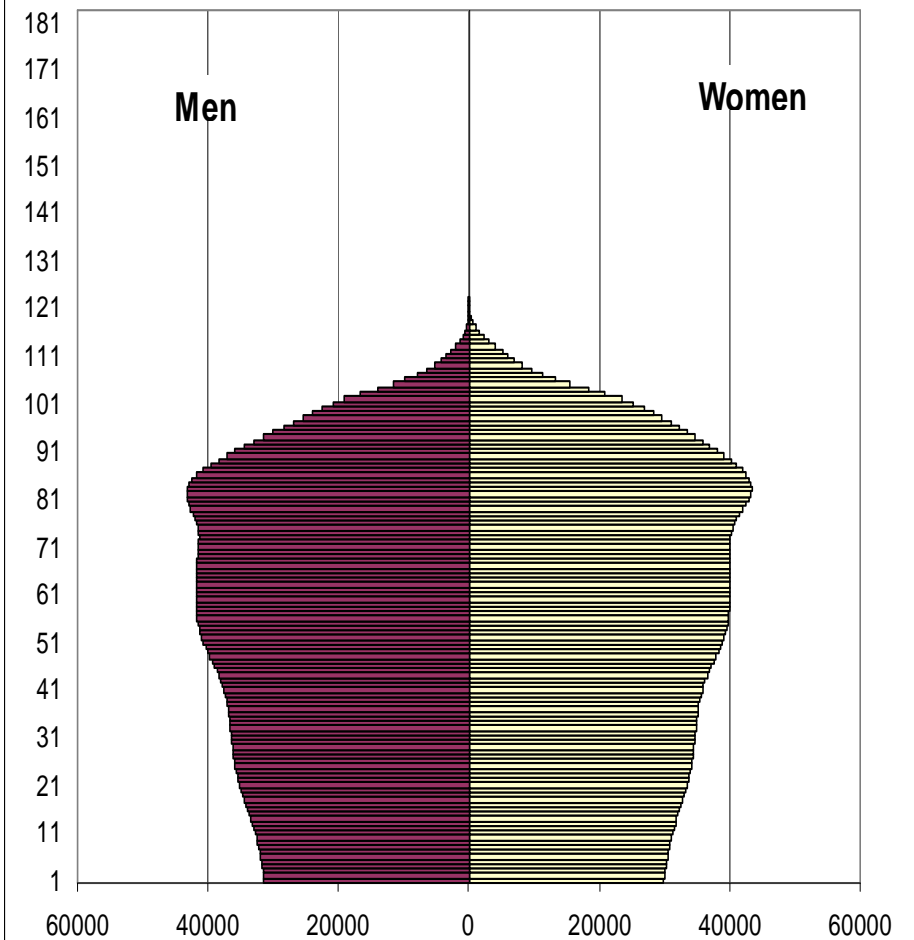


# Changes in population pyramid 100 years later

Sweden 2105, Standard projection



Sweden 2105  
Continuous mortality decline

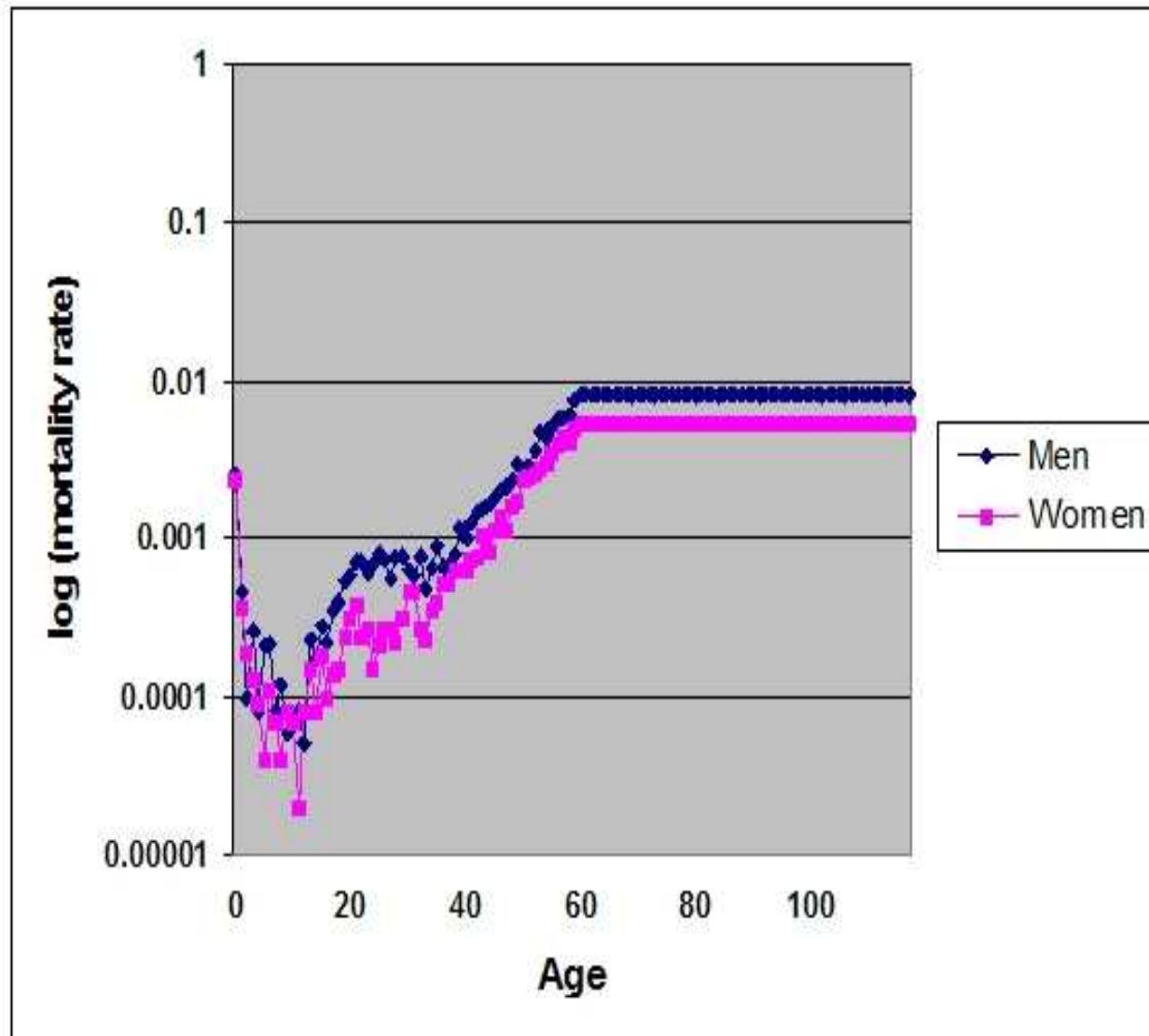


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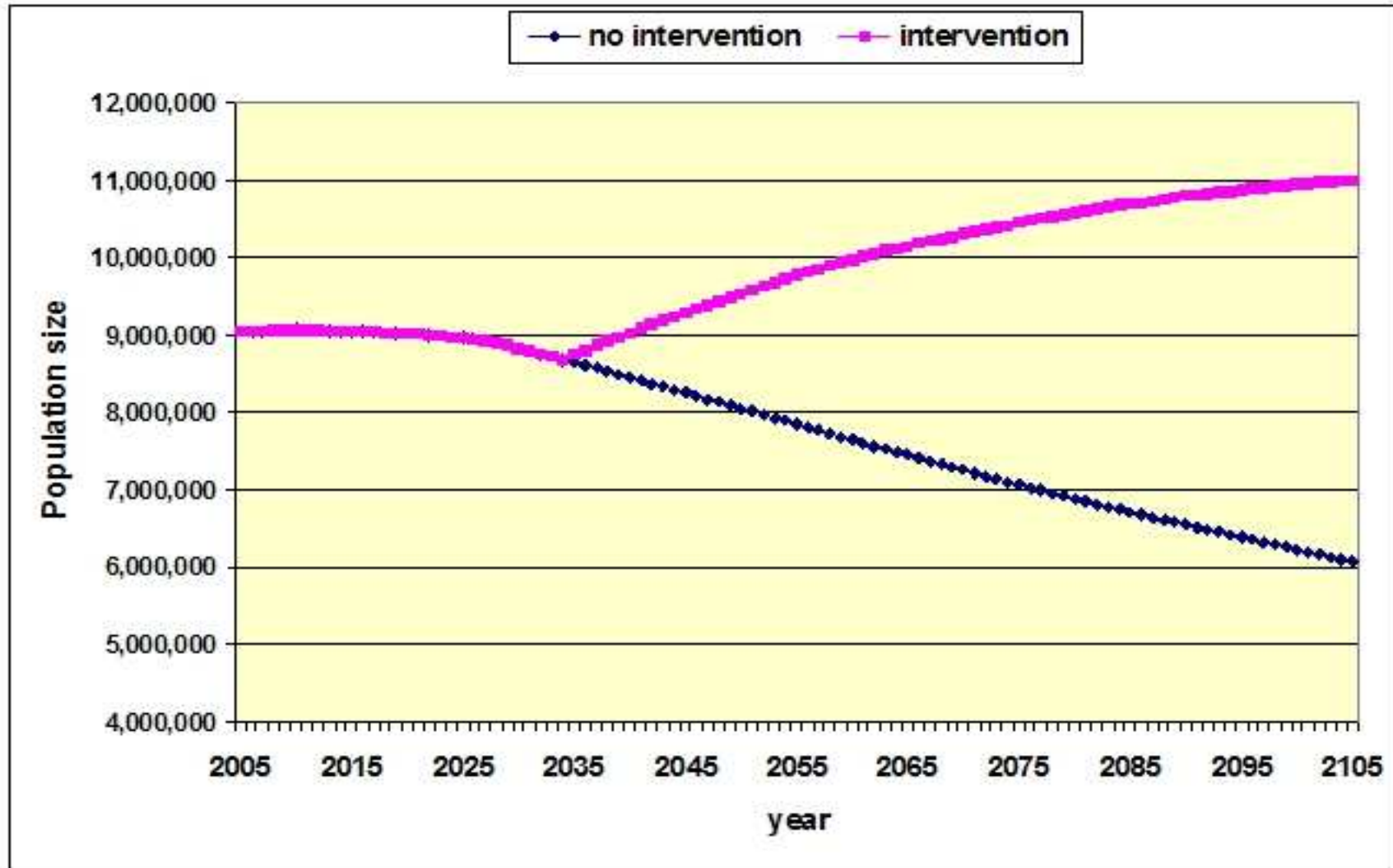
## **Scenario 2**

**Negligible senescence after age 60**

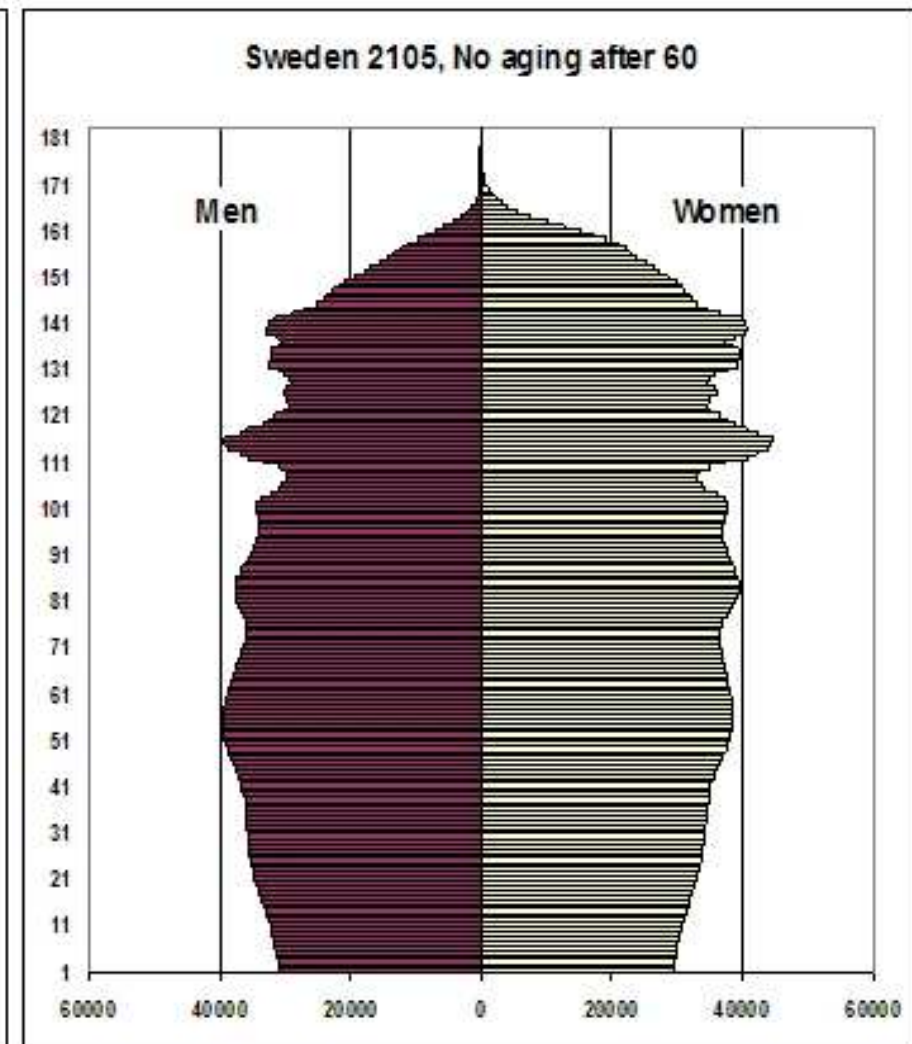
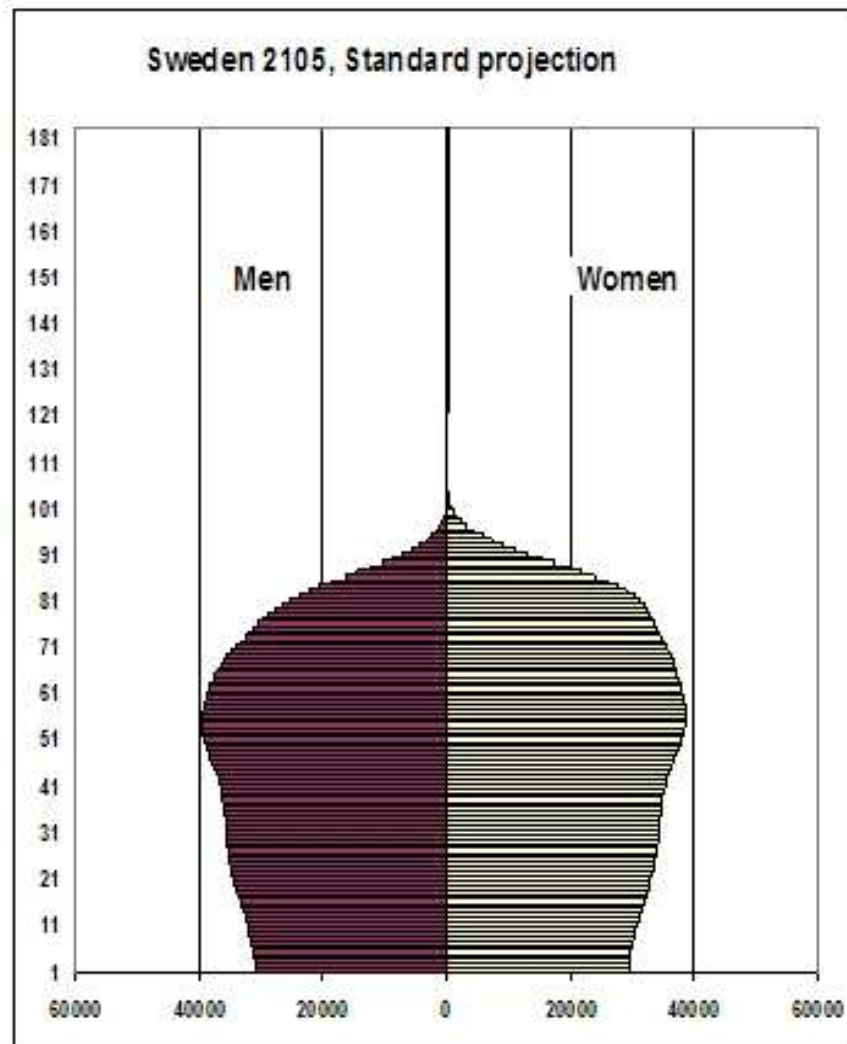
# Radical scenario: No aging after age 60



# Population projection with negligible senescence scenario



# Changes in population pyramid 100 years later



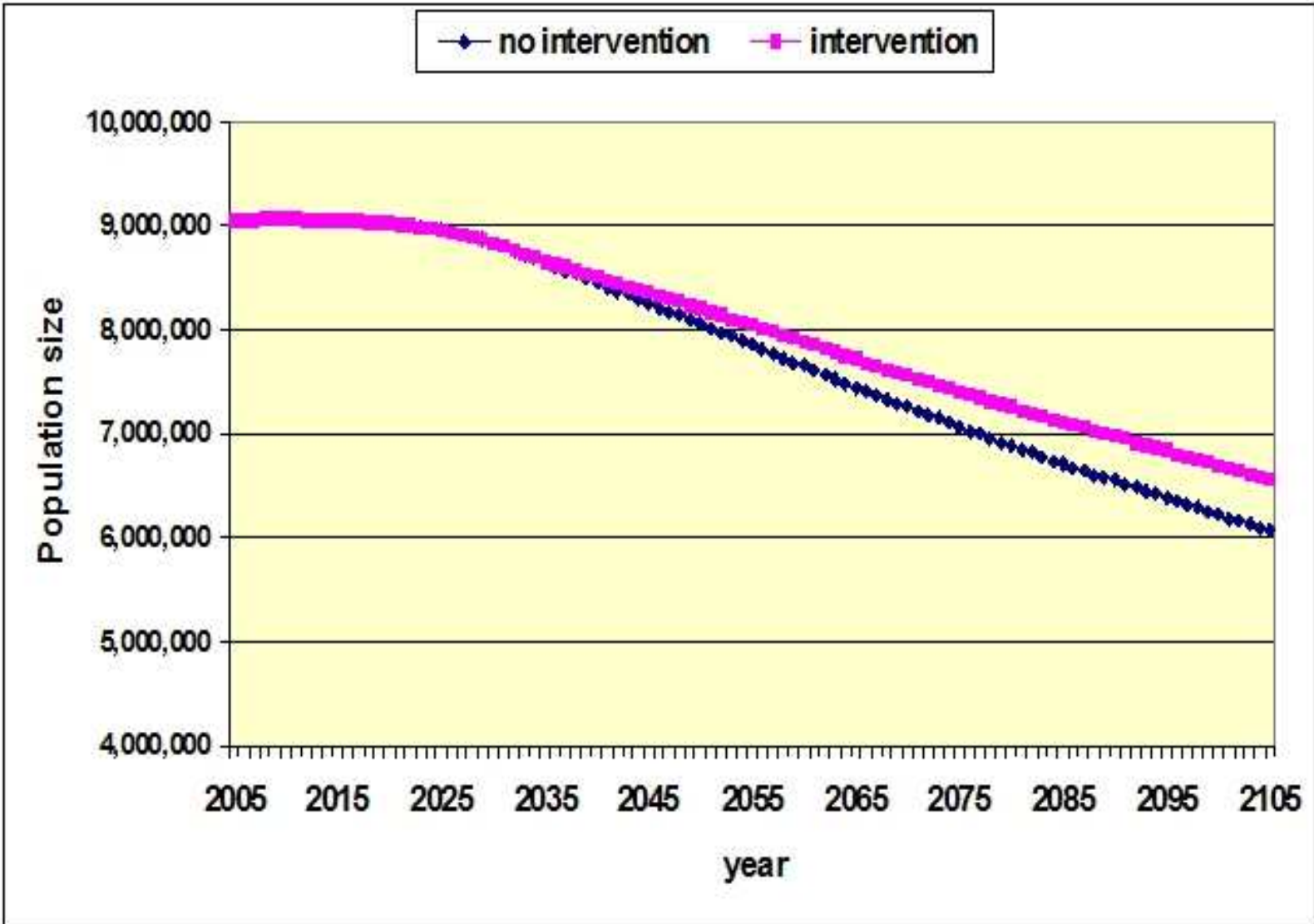
# Conclusions on radical scenario

- **Even in the case of defeating aging (no aging after 60 years) the natural population growth is relatively small (about 20% increase over 70 years)**
- **Moreover, defeating aging helps to prevent natural population decline in developed countries**

## **Scenario 3**

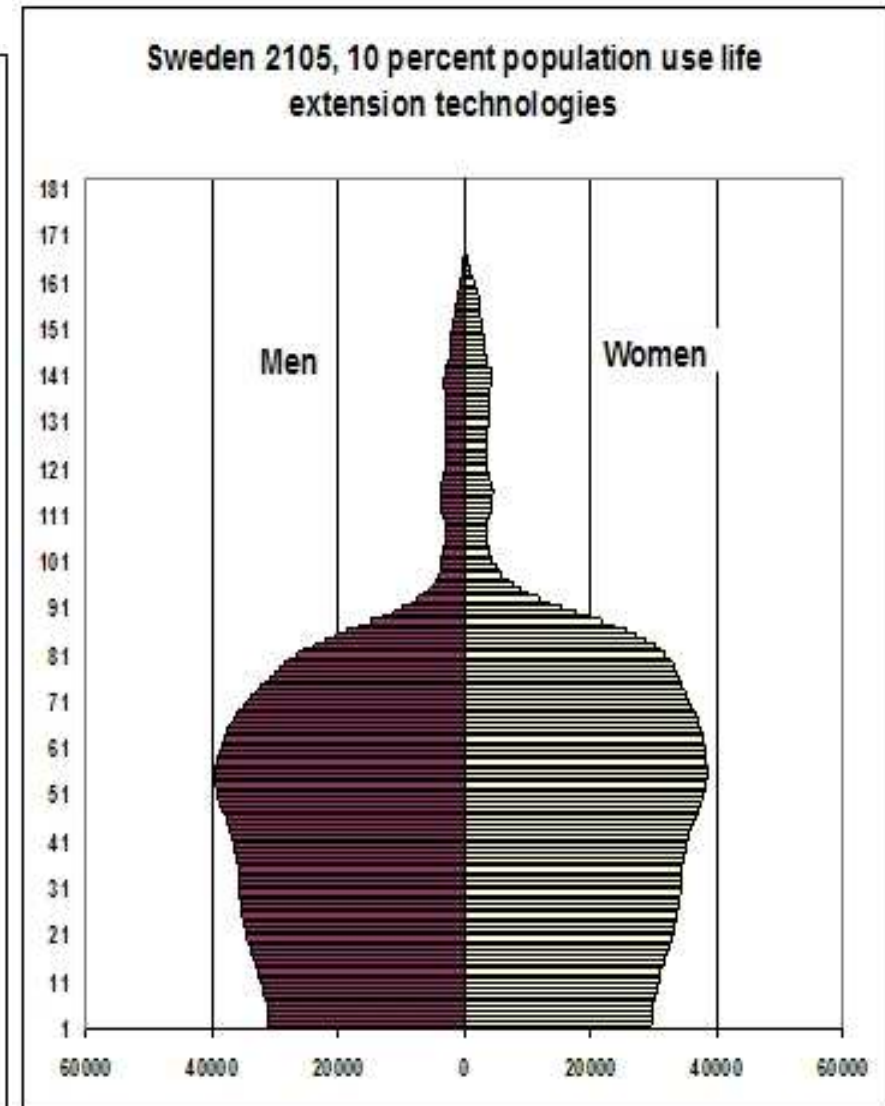
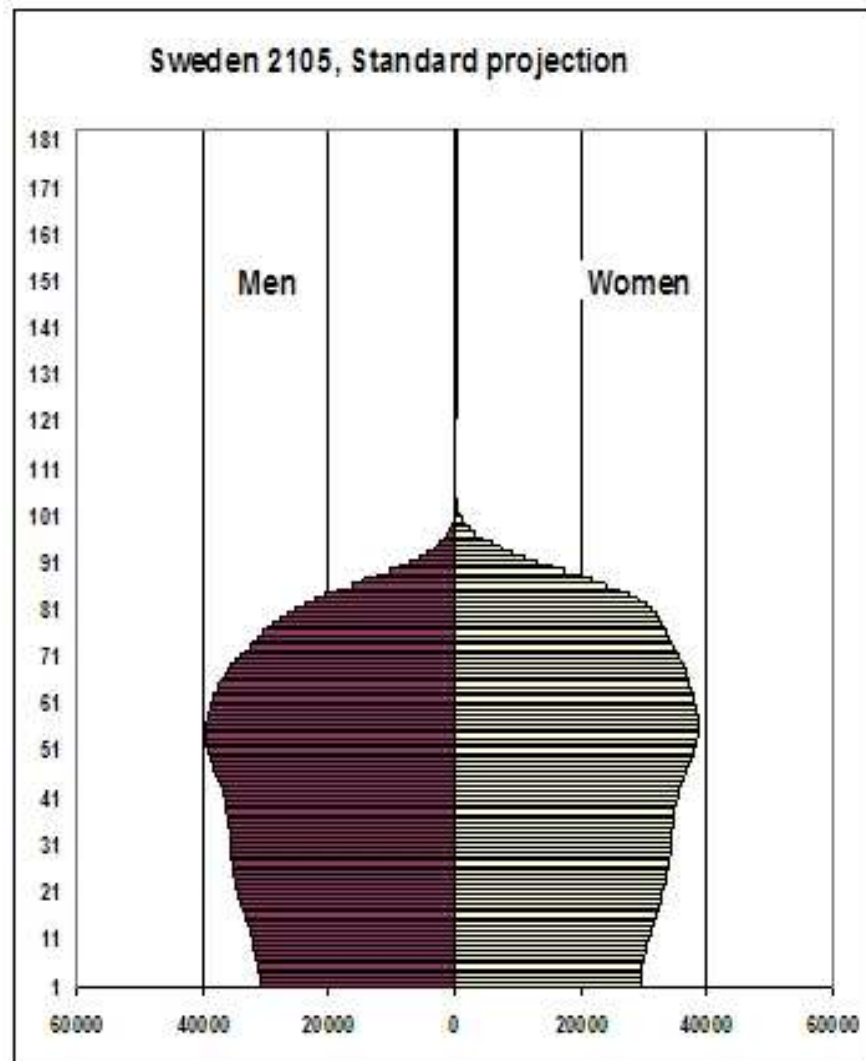
- **Negligible senescence for a part of population (10%)**
- **What if only a small fraction of population accepts anti-aging interventions?**

# Population projection with 10 percent of population experiencing negligible senescence





# Changes in population pyramid 100 years later

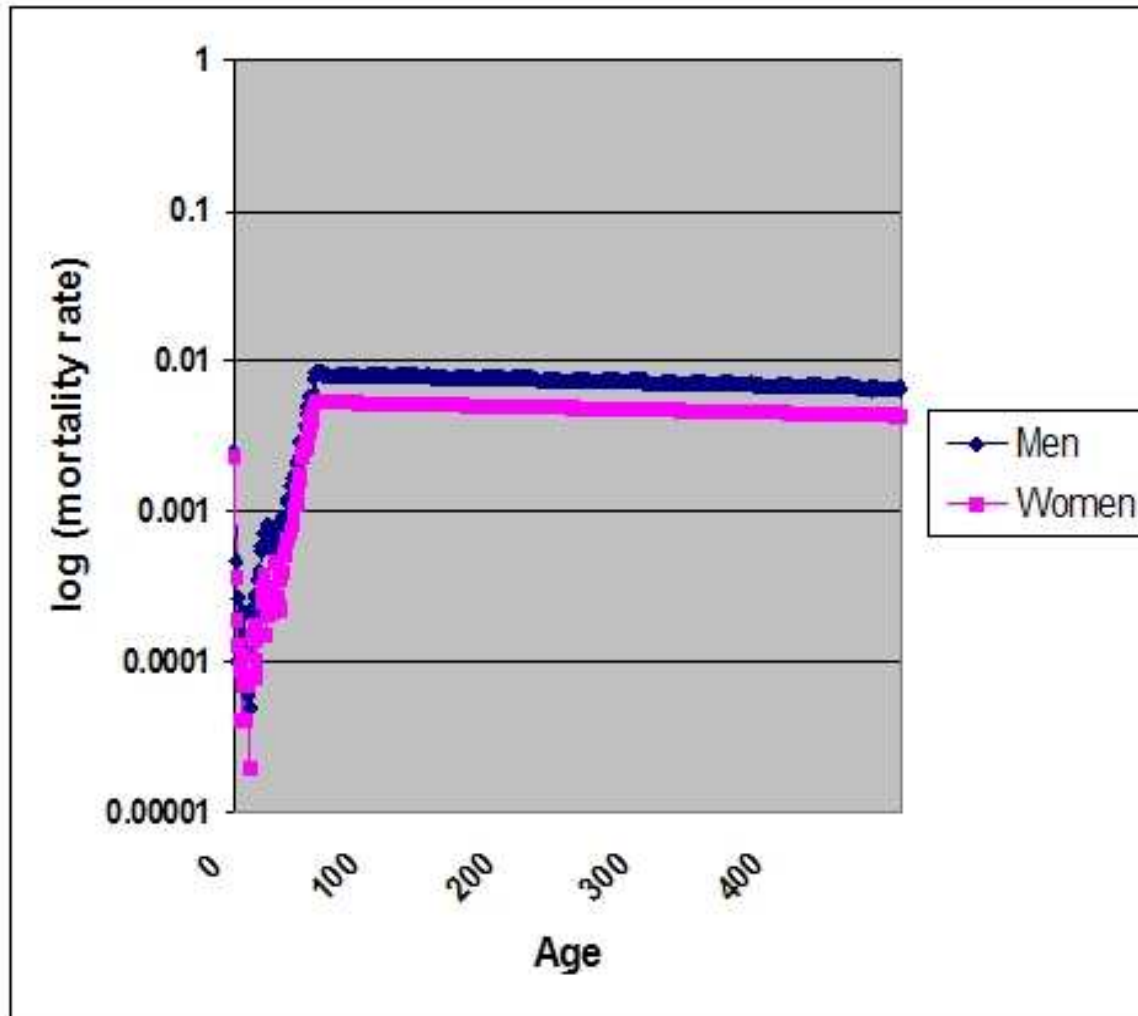


## **Scenario 4: Rejuvenation Scenario**

**Mortality declines after age 60 years until the levels observed at age 10 are reached; mortality remains constant thereafter**

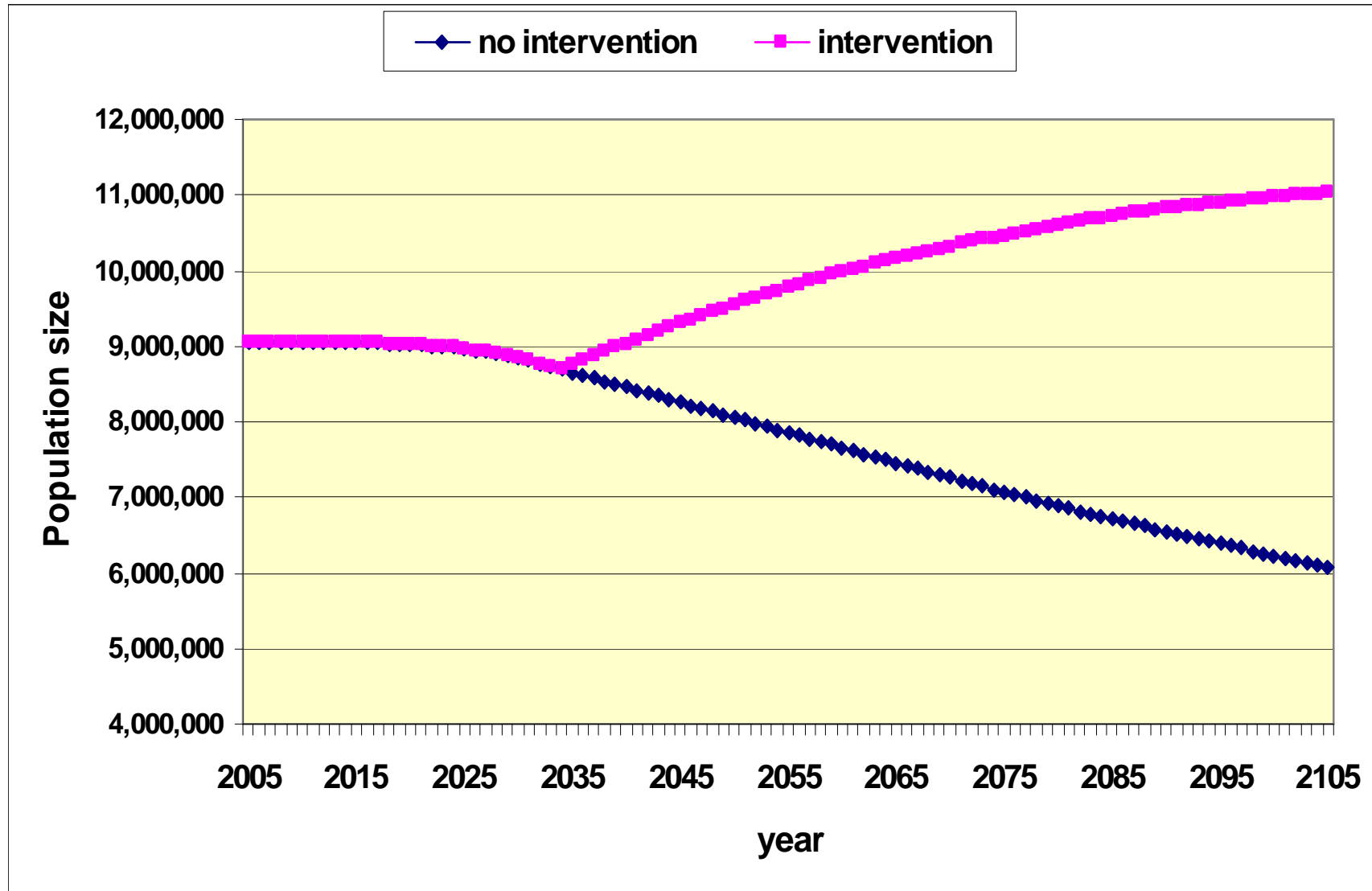
**Negative Gompertz alpha  
(alpha = -0.0005 per year)**

# Radical scenario: rejuvenation after 60



According to this scenario, mortality declines with age after age 60 years

# Population projection with rejuvenation scenario

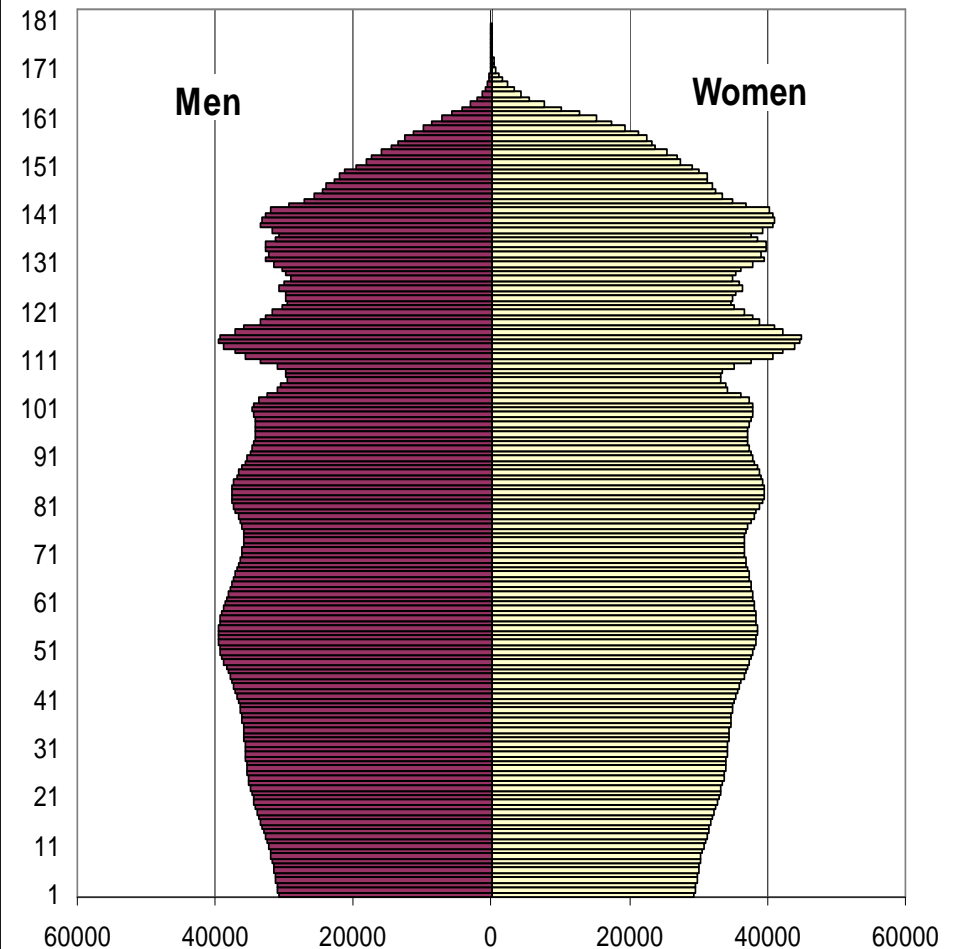


# Changes in population pyramid 100 years later

Sweden 2105, Standard projection



Sweden 2105  
Rejuvenation technologies applied



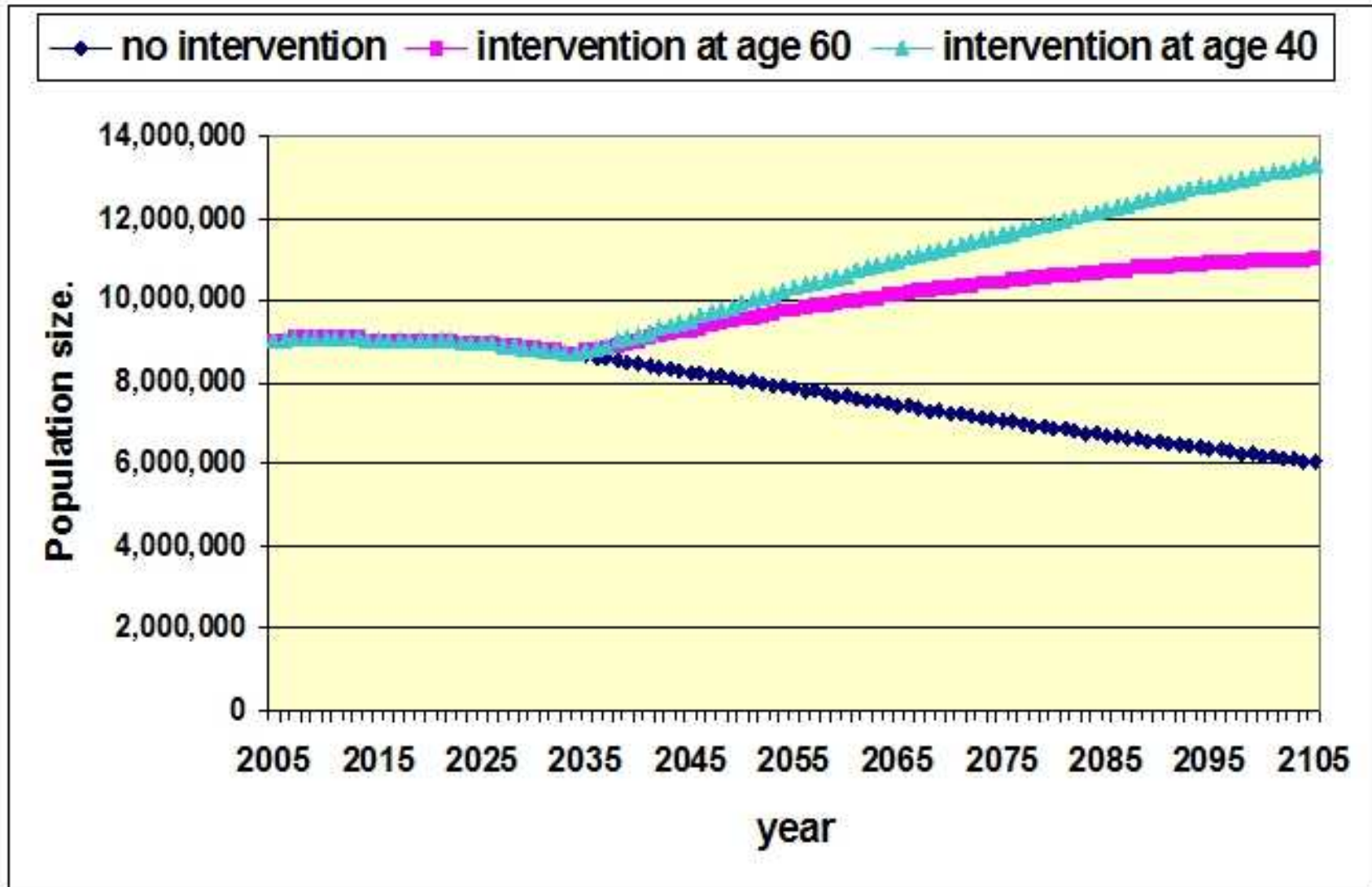
# **Conclusions on rejuvenation scenario**

- **Even in the case of rejuvenation (aging reversal after 60 years) the natural population growth is still small (about 20% increase over 70 years)**
- **Moreover, rejuvenation helps to prevent natural population decline in developed countries**



**What happens when  
rejuvenation starts at age 40  
instead of age 60?**

# Population projection with rejuvenation at ages 60 and 40





# Conclusions

- **A general conclusion of this study is that population changes are surprisingly small and slow in their response to a dramatic life extension.**
- **Even in the case of the most radical life extension scenario, population growth could be relatively slow and may not necessarily lead to overpopulation.**
- **Therefore, the real concerns should be placed not on the threat of catastrophic population consequences (overpopulation), but rather on such potential obstacles to a success of biomedical war on aging, as scientific, organizational and financial limitations.**

# Acknowledgments

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thanks to:**

- **generous support from the  
SENS/Methuselah Foundation**

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