

## THERAPIES

**Aging Intervention Therapies As Part Of A Self Directed Age Management Research Program**

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[www.AgingIntervention.org/1\\_UpcomingPersonalTherapies.pdf](http://www.AgingIntervention.org/1_UpcomingPersonalTherapies.pdf)

Last updated June 15 2019 1:55 pm. Constantly improved. Check for updates.

**CONTACT ME** if you would like to discuss.

**WHAT AGING INTERVENTION THERAPIES DO YOU KNOW OF?**

**\*\*\* Be assured our conversation will be CONFIDENTIAL if you want. \*\*\***

Contact me at [JAdams@AgingInterventionFoundation.org](mailto:JAdams@AgingInterventionFoundation.org)

or call (949) 922-9786 (US)

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**Friendly disclaimer:** These are ideas that I use in my own self-directed age management program. It's not my intention to provide specific medical advice but rather to provide others with information to better understand their health. This is not medical advice including diagnosis and treatment. Always seek the advice of a trained health professional for medical advice, diagnosis or treatment.

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**For aging intervention and increasing healthspan start with the fundamentals – USE COMMON SENSE – HAVE REGULAR HEALTH AND DISEASE SCREENINGS**

I could name a number of prominent people – well known individuals as well as members of our own aging intervention community – had they detected diseases and received treatment early would probably still be alive today.

**To increase healthspan and lifespan, start with the foundation of**

- **Get early diagnosis and treatment for disease conditions with regular health and disease screenings – regular medical and dental checkups, blood tests, eye screenings, colonoscopy, mammogram and others advised by your doctor.**
- **Great nutrition with reduced calories** (may include some form of **fasting**)
- **Exercise**
- **Mental well-being** – includes stress reduction, adequate sleep, positive thinking, meditation, compassion, forgiveness, and grounding in the present with a vision for the future.

Volumes are written about nutrition, exercise, and mental well-being, and details are beyond the scope of this writeup.

- And dental care, moderate and appropriate amounts of well-designed nutritional supplements, adequate amounts of water (possibly filtered or alkaline), reduce risks, reduce toxicity, personal safety and security, sexuality, spirituality.
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**Lists of Aging Intervention Therapies, and the ones I have done and plan for the future are below -- but first:**

**Everyone is different. This is not intended as a list for you to follow -- but rather information on what I have done, and plan to do in the future -- so you and your doctor can make informed choices about what's best for you.**

**You should study and understand these therapies before beginning. Everything should be done with emphasis on safety and doing no harm, and under physician guidance and approval.**

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**When I learn of a new aging intervention therapy, some of the many questions I ask include:**

How do we know it works?

Is it safe?

Would we become dependent on it?

Where would it fit in the priority of available therapies?

How do we get it?

What's the cost and is it cost effective?

How to test/evaluate results?

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### **Personalization, Dosing and Combinations**

Different people can experience a wide range of responses to different therapies.

What works in one person may not work in another – and another may experience a negative effect.

And personalized dosing can be important.

Re combinations – it's good to effect multiple aging systems. Sometime therapies with the intended effect or target that don't work individually will work when combined -- or will work better when combined.

And it would probably be desirable to combine different therapies with different effects or targets on aging systems.

Dosing becomes even more important, as sometimes therapies that worked well with no side effects, will now result in side effects. For example, they may compete for the same clearance pathways resulting, in effect, to something like overdoses.

To be determined – order of therapies. For example, first senolytics to clear old cells (including stem cells) THEN any stem cell therapy.

**Some Aging Intervention Therapies I have heard of – planning to evaluate many of them. Let me know of others you know of.**

**\*\*\* Be assured our conversation can be CONFIDENTIAL if need be. \*\*\***

**Contact me at [JAdams@AgingInterventionFoundation.org](mailto:JAdams@AgingInterventionFoundation.org) or call (949) 922-9786.**

**A list of therapies I have personally done and plan for the future is BELOW this list.**

Extracellular Vesicles / Exosomes	Senolytics* (dasatinib, quercetin, fisetin, FOXO4-DRI, theaflavins and others) <b>SEE CAVEATS/ WARNINGS BELOW*</b>	Metformin
Nutritional supplements -- Safe, effective and proven	Conservative program with basics of great nutrition with reduced calories, exercise, stress reduction and others.	GDF-11
Umbilical cord plasma	Rapamycin	GCSF granulocyte-colony stimulating factor
NAD – Infusion, patch, RealNAD buccal lozenges, nicotinamide riboside, other NAD precursors and supplements	Stem cells	J147
Heart Rate Variability (HRV) management	Fasting -- Partial day fasting (16:8), Valter Longo prolon fasting mimicking diet. Will also evaluate 5:2, DASH diet, Warrior diet and others.	Compounds that promote ketogenesis – HVMN Ketone beta-hydroxybuterate (BHB), others
High intensity interval training (HIIT)	Antibiotics – azithromycin, doxycycline, tetracycline, minocycline and others as senolytics and other age management effects	HMR (Health Management Resources) diet, nutrition and fat loss program
Microbiome management -- probiotics and prebiotics	Oxytocin -- lactobacillus reuteri 6475	LDL reduction through diet and statin (rosuvastatin)
QiGong breathing, Muse meditation headband, meditation and other methods to improve heart rate variability and blood pressure	Under guidance of expert neuro endocrinologist: hGH, testosterone DHEA, other hormones and precursors	Proprietary anti-inflammatory with novel delivery system. Soon to be disclosed and available by a leader in our community
Meditation and Mindfulness	Peptides	MitoQ
Platelet rich plasma	Methylene blue	C60
Everolimus	Statins	Low dose naltrexone
Spermidine	Percepta	Florbetaphir
SS-31 / elamipretide	PBT-2 (quinoline)	Algebrum / ALT-711
Klotho	CoQ10	Low dose lithium
Anti-retrovierals / HIV drugs	Green, white and black tea, and coffee	Lion’s mane
Cat’s claw (Percepta brand)	Purple sweet potatoes	
Unique proprietary plasma fraction under development by two of our associates -- youth enhancing components derived from blood	Gene editing, gene therapy	Nanotechnology -- nanobots to repair cellular components and DNA, and remove debris

developed by members of our community		
Yaminaka factors	Find your personal weak link and fix – kidney, liver, eyes, ears, etc	Take some of our own cells, grow them up in quantity, isolate the mitochondria from them (maybe after testing for low mutation load), and inject them back into ourselves
Magnesium (for aches)	Very long term and this is way out there -- Lab grown bodies for full body transplant (head onto new body)	

**\* CAVEATS and WARNINGS -- Caution is advised re. excess senolytics.**

*Vince Giuliano* advises senolytic signaling is critical for cell renewal – you need enough inflammation and senescence so if you go overboard in senolytics therapy it’s bad, you will miss out on cell renewal.

[www.anti-agingfirewalls.com/2018/09/02/aging-cell-and-tissue-repair-renewal-and-regeneration-inflammation-and-the-sasp](http://www.anti-agingfirewalls.com/2018/09/02/aging-cell-and-tissue-repair-renewal-and-regeneration-inflammation-and-the-sasp)

More is often not better. Quote by *Reason*: **All senolytics, so far, look like things you would take once every few years at most.** More won't be any more effective than that one dose - it will kill the senescent cells it can kill the first time, and won't be helpful again until more senescent cells turn up in volume.

[www.fightaging.org/archives/2018/03/how-to-plan-and-carry-out-a-simple-self-experiment-a-single-person-trial-of-senolytic-peptide-foxo4-dri#caveats-in-more-detail](http://www.fightaging.org/archives/2018/03/how-to-plan-and-carry-out-a-simple-self-experiment-a-single-person-trial-of-senolytic-peptide-foxo4-dri#caveats-in-more-detail)

Senescent cell researcher *Dorota Skowronska-Krawczyk PhD* personally discourages us from having long treatments with senolytic drugs. In fact she suggests they should only be taken for short periods interspaced with longer recovery times.

*James Kirkland MD PhD* recommends not evaluating senolytics on our own at this early stage.

Similar cautions apply to other therapies. There’s a lot we don’t know about this new frontier.

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**Short term plan** (since 1999 and into the future about 2-3 years):

Refine program using therapies that are available now -- combinations and dosing to gain added years or a decade or two.

Test and evaluate aging intervention therapies for ongoing use.

Past examples: umbilical cord plasma, senolytics (dasatinib plus quercetin), oxytocin, hormones, conventional methods and others.

Near term future: exosomes, rapamycin, others. Biomarkers/objective measures will be applied to determine the best personal programs.

**Long term plan** starting approx. 2021-2022:

Initiate major program and/or partner with others on development of NEW BLOCKBUSTER therapies that will allow us to stay youthful and healthy, and making the world a better place, for as long as we choose – more than a few years or a couple decades.

Includes gene editing, new technologies to reset the epigenome to a more youthful biological age, nanotechnology, supercentenarian (oldest humans 110+) research to understand why they are so long lived -- and this will seem highly visionary and extreme, and even bizarre -- full body transplant with lab-grown bodies (obviously this one is very long term).

And many other innovative advances yet to be conceived.

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### **Therapies And Methods I Have Done**

- As of the date of this document my current program consists of carefully testing and evaluating multiple aging intervention therapies, from advanced pharmaceuticals to common sense approaches, with the intention of fine tuning dosing and combinations.
  
- As of current date cycling through each of these on separate days:
  - Day 1) Weightlifting,
  - Day 2) high intensity interval training,
  - Day 3) Begin 16 hr partial day fast at about 3:30 pm with 20 min aerobic movement at around 6 pm.
  
- **2019 Partial day fasting (16:8) along with Vitamin C 500 mg 2x daily plus vitamin E 200 IU daily for epigenetic maintenance and prevent LDL oxidization, plus fish oil, and occasional multivitamin and brain mix (ginkgo biloba Leaf extract, vinpocetine, and huperzine alkaloids).**

A high level epigenetic scientist advised me that vitamin C has positive effects on the epigenome. Another researcher who has devoted considerable time to studying vitamin C advised it prevents LDL from oxidizing, and should be used in combination with vitamin E.

Also I continue hearing about the positive effects of fish oil.

These have been added to my daily nutritional supplements (along with a multivitamin and brain supplement [ginkgo biloba, vinpocetin, huperzine alkaloids] about every other day).
  
- **2019 Dasatinib plus Quercetin**

One light dose 40 mg dasatinib and 400 mg quercetin.

After taking I felt OK, slight headache, maybe just a little wobbly and giddy for part of the day. Slight headache seemed to continue on and off, and I felt kind of “bad”, for a few days.

Several other measures of inflammation, aberrant cells and others were inconclusive.

An innovative senescent cell test for before and after senolytics therapy that measures gene activity by isolating RNA was developed by scientists at a top research lab. We are awaiting a final report with rejuvenation score.

Lead researcher’s comments after preliminary report:  
*Without too much generalizing the data I think it is safe to say that senescence is much less present in the analyzed samples after treatment, which I think is a nice sign.*

But at 14 days after the therapy, DNA methylation age had increased by .7 years, and LevineCramer phenotypic age increased 1.66 years. So maybe the D+Q did age me, but maybe this increase has something to do with artifact or measuring components that were released into the system.

- **2019 Heart Rate Variability (HRV).** Note: Higher HRV is associated with better health, better performance and greater relaxation. Used Elite HRV software and CorSense finger monitor. Followed breathing exercise instructions built into the Elite HRV software. HRV before: 45, after: 61. Repeated a some time later, HRV before: 40, after: 45. Will continue.
- **2019 Reduced LDL** I had allowed dietary “indiscretions” in the form of fatty foods creep in so I greatly reduced foods with fats in them. Over 7 weeks reduced LDL 18.9%, HDL by 2%, total cholesterol 11.6%, VLDL by about 5-8.3%, Total cholesterol/HDL ratio 12% and LDL/HDL ratio 19.7%.
- **2018-2019 High intensity interval training (HIIT)**  
Although this was not well controlled as data was taken 5 months prior to starting HIIT, not immediately before, I am confident the objective and subjective measures demonstrated positive results.  
HIIT should be worked up to, and previously as part of my walking 3-4 days a week I have been doing some fast running, but not nearly as intense as HIIT.  
**Zymo DNAm showed a reduction of 3.25 yr, and the Levine/Cramer spreadsheet results indicated about the same -- 3.35 reduction in phenotypic age.**  
My subjective feeling is that it feels good and is very producing positive results. Next morning upon waking I definitely feel I had deeper more replenishing sleep.  
Like a car, sometimes it just feels good to open it up and run it on the autobahn.  
  
Also I got married (but we were together for 10 years and living together for 6 so no big change). And my brother and my cats died so this brought a lot of sadness. Re. the cats though, there’s a lot less hair, dander etc floating around, and I no longer deal with cleaning up litter and breathing the fine particles so there could be a relief on the immune and other systems. Or maybe unfavorable shared microbiome was involved.  
  
**Change was positive and significant, and I attribute it to HIIT although not completely certain.** This can be the case in N=1 human studies. We’re not lab rats in a controlled environment.
- **2018-2019 HMR (Health Management Resources) diet, nutrition and fat loss program through the Univ of California Irvine Weight Management Program**  
I personally didn’t do this, but since it had a positive result it’s worth describing here. Monitored close female associate (age 64) who lost about 1 pound per week for ten weeks.

Glucose, LDH, LDL Cholesterol went from high out of range to within range.  
Levine/Cramer spreadsheet phenotypic age reduced 2.5 yr. Appearance improved.  
Persistent cough decreased dramatically.

- **2018 Proprietary anti-inflammatory with novel delivery system.**  
Briefest summary: **VERY** informal test. Had CRP, IL6, Fibrinogen, TNFa tested. Next day took 1-1/2 teaspoon, retested. CRP, IL6, Fibrinogen decreased significantly.  
More detail is available, but I expect this is what you would predict.  
So many therapies to evaluate, so moved on to some others. Planning to ultimately include this as part of my program.
- **2017 Lanasterol, canine eye drops in left eye for cataract**  
Result: It did not remove the cataract. It's possible that it slowed the progression, but I wanted clear vision so went ahead and had a lens replacement. Replacement worked and I'm happy with it.
- **2017 Umbilical cord plasma – 100 mL**  
Note: no babies are harmed in gathering the umbilical cord.  
Result: Shifts in multiple biomarkers and objective measures to a somewhat more youthful profile.  
Contact me for details.
- **2016 Started utilizing DNA methylation (DNAm) testing.**  
Eight person evaluation of Zymo DNA methylation test.  
Result: This proved to be a valuable measure of biological age and results of therapies.  
One subject did this before and after GDF-11 and had a positive result with lowered DNAm age.
- **2015 Novel therapy intended to upregulate oxytocin**  
Result: Our biomarkers and objective measures were simple and in early development – we only used CBC and CRP. At first with CBC and CRP there appeared to be no discernable effect. However recent breakthrough was created consisting of an analytical method to evaluate phenotypic age i.e. apparent biological age, and apparent DNA methylation age, as implied by blood variables from a standard CBC and CRP tests. “Levine/Cramer spreadsheet”. It showed a 4.69 year reduction in phenotypic age.
- **2008 approx. Metformin**  
Result: Assuming positive effects based on research. Minimal side effect, somewhat greater inclination toward dessert foods.
- **2002 The Soy Experiment**  
I had heard that soy was good for you, so I began consuming large amounts of soy, like soy beans, soy milk, tofu. Later hormone panel indicated high, out of range estradiol. Estradiol is a form of estrogen, a female sex hormone. The negative, and feminizing effects of estradiol unappealing to me so soy consumption was greatly reduced.

- **2001 hGH**  
It may have had some regenerative effects but I did not have access to nor any skill to interpret lab test results and other measures. But there were side effects -- I felt uneasy and sometimes angry.
  - **2000 Conservative program with basics of great nutrition with reduced calories, exercise, stress reduction and other common sense approaches.**  
Result: Positive results. Improved lab results, increased sense of well being.
  - **1999 Testosterone, megadoses of multiple nutritional supplements and multiple “anti-aging drugs” often from questionable sources.**  
Result: This overly aggressive and naïve program making me sick, even though it was under the supervision of an MD who had a great presentation and who I trusted. The MD later lost his license.
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### Planned for the Near Future

- Exosome infusions. So far we have carefully evaluated a number of suppliers.
- Compounds that promote ketogenesis – HVMN Ketone beta-hydroxybuterate (BHB), others
- Valter Longo prolon fasting mimicking diet [www.valterlongo.com/fasting-mimicking-diet-longevity](http://www.valterlongo.com/fasting-mimicking-diet-longevity) Will also evaluate 5:2, DASH diet, Warrior diet and others.
- NAD – RealNAD buccal lozenges, infusion, patch, nicotinamide riboside, other NAD precursors and supplements
- GDF11
- Rapamycin
- Refine nutritional supplement intake
- Senolytics – Completed dasatinib and quercetin. Considering fisetin, Senex, EMIQ, FOXO4-DRI, theaflavins and a number of others.  
\* **SEE Caution is suggested re. excess senolytics BELOW**
- Umbilical cord plasma – Larger doses, completed small dose  
Note: no babies are harmed in gathering the umbilical cord.  
One source: [www.clinicaltrials.gov/ct2/show/study/NCT03229785](http://www.clinicaltrials.gov/ct2/show/study/NCT03229785)
- Magnesium (for aches)
- QiGong breathing, Muse meditation headband, meditation and other methods to improve heart rate variability and blood pressure
- LDL reduction through diet and statin (rosuvastatin)
- Peptides
- C60
- Increase metformin from 500 mg 2x daily
- Meditation and Mindfulness
- GCSF granulocyte-colony stimulating factor
- A new, innovative and proprietary anti-inflammatory mix created by one of our advanced associates

- Antibiotics – azithromycin, doxycycline, tetracycline, minocycline and others as senolytics and other age management effects
- Microbiome -- probiotics and prebiotics – monitor with uBiome or others. I started paying attention to this when heard microbiome affects DNA methylation, now hearing about from many sources
- J147
- Melatonin
- Caloric reduction and restriction, measure inflammation, cholesterol and immune effects.
- Stem cells
- MitoQ
- Platelet rich plasma
- Methylene blue
- Maybe Spermidine
- Multiple nutritional supplements and prescription meds – attention paid to combinations and dosing
- hGH (revisit – tried it 16 years ago, uncertain results)
- Among many others.

### **Later – Under Development**

- Unique proprietary plasma fraction under development by two of our associates -- youth enhancing components derived from blood developed by members of our community.
- Exosome/extracellular vesicles therapies -- compare older adult plasma extracellular vesicles (EVs) with 18-25 year old and cord plasma EVs. Design or extract ones in young for injection into old (simpler, mass produced, injection rather than infusion).
- Gene editing, gene therapy
- Nanotechnology -- nanobots to repair cellular components and DNA, and remove debris.
- Yaminaka factors
- Find your personal weak link and fix – kidney, liver, eyes, ears, etc
- Take some of our own cells, grow them up in quantity, isolate the mitochondria from them (maybe after testing for low mutation load), and inject them back into ourselves
- Very long term – and this is way out there -- Lab grown bodies for full body transplant (head onto new body).

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### **NOT ON THE LIST**

#### **No plan B – it's do or die.**

- Cryonics.
- Upload the mind into a computer. Reasons why this is not such a good idea would take up too much space here. You're welcome to contact me to discuss, or google "arguments against uploading mind into computer"  
[https://www.google.com/search?q=arguments+against+uploading+mind+into+computer&rlz=1C1CHBF\\_enUS723US723&oq=arguments+against+uploading+mind+into+computer&aqs=chrome..69i57.9273j0j7&sourceid=chrome&ie=UTF-8](https://www.google.com/search?q=arguments+against+uploading+mind+into+computer&rlz=1C1CHBF_enUS723US723&oq=arguments+against+uploading+mind+into+computer&aqs=chrome..69i57.9273j0j7&sourceid=chrome&ie=UTF-8)

OK, maybe transplant the brain into a device or onto a robot body would work. But personally, I'll take a regular body -- enhanced to withstand disasters like assaults and plane crashes etc.

**Enough visionary, for now working on the MY LIST “here are now” above.**

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## **DEVICES**

### **Plan to get:**

Dexcon continuous glucose monitor

<https://www.dexcom.com>

### **Used/Using:**

Keto-Mojo Blood Ketone and Glucose Testing Kit

Monitors ketones, glucose, hematocrit, hemoglobin

<https://keto-mojo.com/products/ketone-glucose-meter-basic-starter-kit>

Elite HRV software with CorSense finger sensor.

Previously used the Polar H7 sensor strap, finger sensor is much easier.

It's a valuable low-cost tool, not professional grade.

[www.elitehrv.com/corsense](http://www.elitehrv.com/corsense)

iHeart

Includes pulse oximeter, calculates “internal age” from aortic pulse wave velocity.

Measures bpm (pulse rate), SpO2 (blood oxygen level), AoPWV (aortic pulse wave velocity).

[www.concordhealthsupply.com/iHeart-Your-Internal-Age-p/75007.htm](http://www.concordhealthsupply.com/iHeart-Your-Internal-Age-p/75007.htm)

[www.concordhealthsupply.com/Articles.asp?ID=261](http://www.concordhealthsupply.com/Articles.asp?ID=261)

Muse meditation headband

Useful for relaxation and meditation.

<https://choosemuse.com>

Oura ring

Measurements related to sleep include readiness score, sleep score and nightlong HRV.

<https://ouraring.com>

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**What therapies are you planning?**

**What devices do you know of?**

**Let me know at [JAdams@AgingInterventionFoundation.org](mailto:JAdams@AgingInterventionFoundation.org)**

**or call (949) 922-9786**

Misc. reference

<https://www.colorado.edu/today/2018/03/28/pill-staves-aging-its-horizon>

Protocol statement: <https://clinicaltrials.gov/ct2/show/NCT02921659?term=Nicotinamide+Riboside&rank=6>

Abstract: <https://www.ncbi.nlm.nih.gov/pubmed/29599478>  
PubMedCentral: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5876407/>  
Published paper: <https://www.nature.com/articles/s41467-018-03421-7>

**This is one in a set of four. See companions to this document:**

1) Background and outlines our mission:

[www.AgingIntervention.org](http://www.AgingIntervention.org)

2) Describes main methods:

[www.agingintervention.org/1\\_SmallStudyFormat.pdf](http://www.agingintervention.org/1_SmallStudyFormat.pdf)

3) Biomarkers and objective measures of results:

[www.agingintervention.org/1\\_BiomarkerPersonalPracticalBasicList.pdf](http://www.agingintervention.org/1_BiomarkerPersonalPracticalBasicList.pdf)

4) Therapies my group of associates and I are evaluating and testing on ourselves:

[www.agingintervention.org/1\\_UpcomingPersonalTherapies.pdf](http://www.agingintervention.org/1_UpcomingPersonalTherapies.pdf)

Age Reversal Network — a Valuable Resource

\* Please let me know if you review their info or join – [Jadams@grg.org](mailto:Jadams@grg.org) or (949) 922-9786 \*

[www.age-reversal.net](http://www.age-reversal.net)

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