

Drivers of Longevity

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An actuarial and medical perspective

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Quiz

In 2015, what was the average life expectancy at birth of the global population?

- 1. 76.8 years (average life expectancy in the European region)
- 2. 71.4 years
- 3. 67.7 years (global life expectancy at birth in 2000)
- 4. 63.1 years (2015 healthy life expectancy at birth)



Quiz

Which country currently has the total longest life expectancy?

- 1. Japan
- 2. Switzerland (longest male life expectancy 81.3 years)
- 3. Norway (longest life expectancy in 1960 73.6 years)



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Quiz

What is the socio-economic gap in male life expectancy at birth in England and Wales?

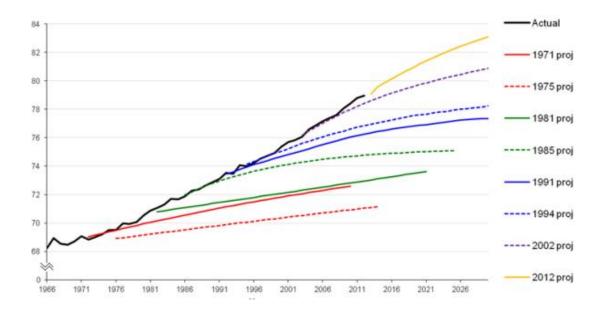
- 1. 3.7 years (UK gender gap)
- 2. 5.9 years
- 3. 7.3 years (US gap between highest and lowest educational groups)
- 4. 9.3 years (gap between Mexico and Japan female life expectancy)



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Why this presentation?

24 November 2017



Source: ONS, National Population Projections Accuracy Report, July 2015

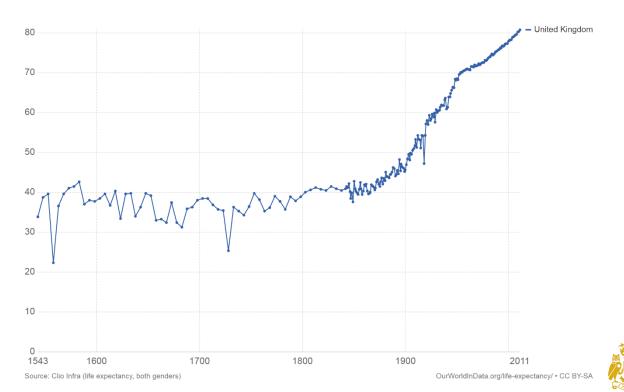


Drivers of Future Longevity

- Introduction: A Look Back
- Medical Progress
- Socio-economic Influences
- Medical Progress the Next Generation
- Conclusion



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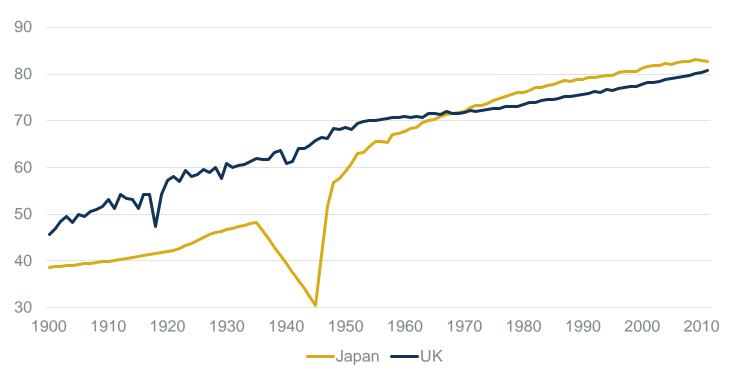




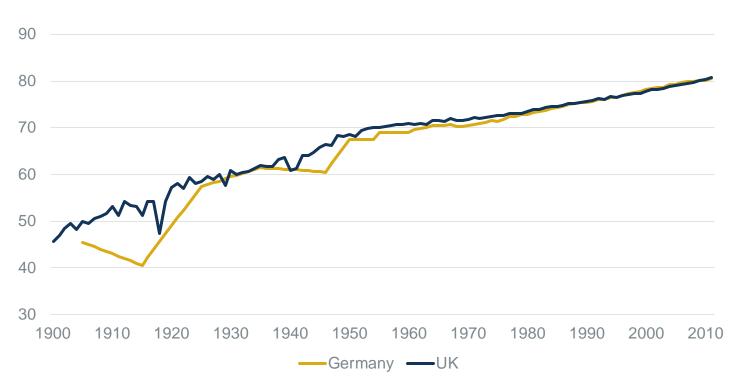
Institute

and Faculty

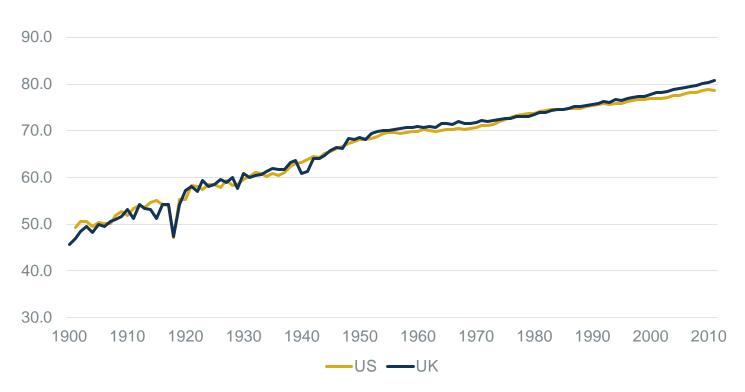
of Actuaries



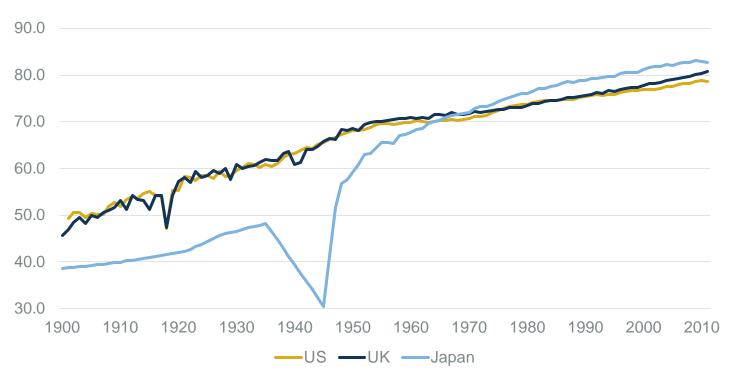






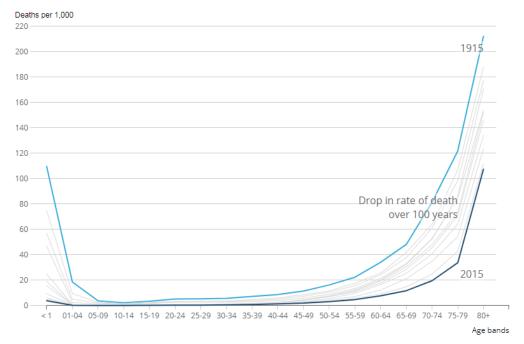








Death rate by age, England and Wales, 1915 to 2015

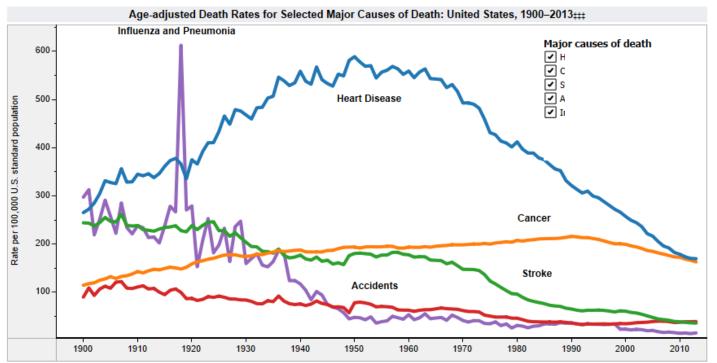


Source: 21st century mortality files, ONS and 20th century mortality files, ONS



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What happened in the 20th century?





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Source: CDC

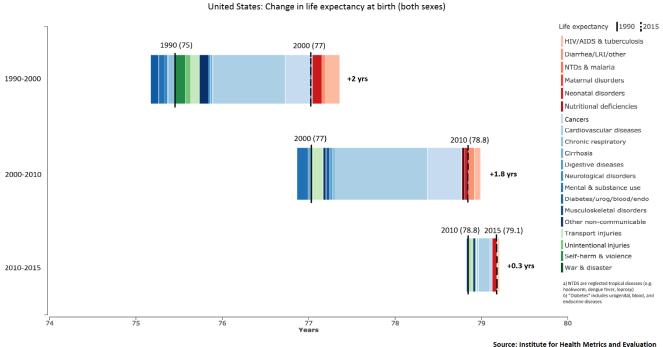
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Gains in life expectancy are dropping



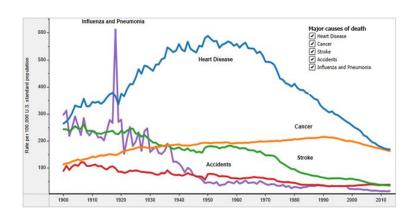


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Drivers of future longevity 24 November 2017

Heart disease: past and present

- Medical innovations
 - CAD investigation & treatment: ICU, coronary angiogram, clot busters, CABG, stents
 - BP control and new drugs ACE inhibitors
 - Lipid research, treatment with statins
 - Heart rhythm control, atrial fibrillation, anticoagulants, pacemakers, ICD
- Public health, lifestyle
 - Immunization
 - Education, screening for BP, cholesterol, smoking, diabetes, diet, exercise



- Other heart
 - Congenital heart defect surgery
 - Disappearance of rheumatic heart disease

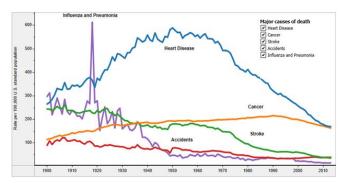


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Heart disease: future

Future

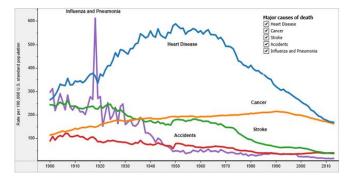
- Primary goal is prevention of coronary artery disease
- Established disease cannot be reversed
- Innovations in medical treatment will benefit, but...
- Most gains through CV risk factor reduction and treatment
- Challenge of public inertia to healthy diet, weight loss, exercise, smoking cessation, treatment
- Political role, e.g. banning soft drinks in schools, smoking in public places, and more?
- Continued mortality improvement may prove difficult with obesity epidemic





Cancer: present and future

- Medical innovations
 - Early detection, screening mammography, PSA, occult blood, chest X-ray, family history
 - Improved imaging
 - Surgical improvements, more localized treatment
 - Chemotherapy, radiotherapy





Trends in 5-year Relative Survival Rates (%), 1975-2012

1975-1977	1987-1989	2006-2012
49	55	69
75	84	91
50	60	66
34	43	63
12	13	19
82	88	93
47	51	73
36	38	46
3	4	9
68	83	99
72	79	79
	49 75 50 34 12 82 47 36 3 68	49 55 75 84 50 60 34 43 12 13 82 88 47 51 36 38 3 4 68 83

Institute and Faculty of Actuaries

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Source: American Cancer Society & SEER

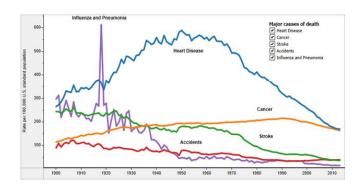
Cancer: present and future

Future

- Liquid biopsy
- Immunotherapy
- Check-point inhibitors
- Personalized medicine
- Early detection through screening at risk populations

Challenges and limitations

- Widespread, unselected screening too many false positives
- Personalized treatments will be very expensive, and regulatory barriers
- Current treatment effective, breast cancer 92% 5 yr survival, but lung cancer still laggat
- Improvements in LE slowing

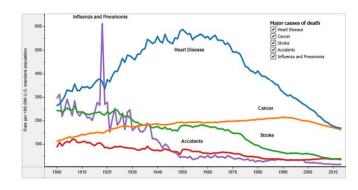


and Faculty

of Actuaries

Stroke: present and future

- Medical innovations
 - Dedicated stroke units
 - Thrombolytics
 - BP control and new drugs ACE inhibitors
 - Lipid research, treatment with statins
 - Heart rhythm control, atrial fibrillation, anticoagulants, ablation
- Future
 - Regrowth of dead brain tissue unlikely
 - Improvements more in disability
 - Benefits at older ages have less impact on longevity



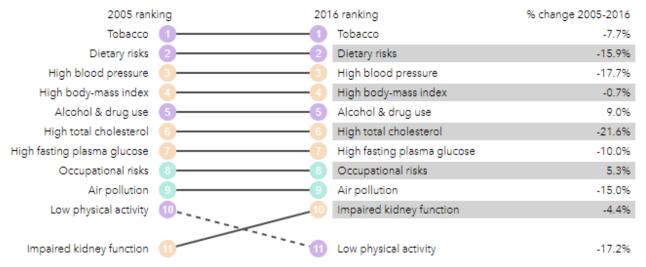


What risk factors most drive death and disability – UK?

Metabolic risks

Environmental/occupational risks

Behavioral risks



Source: Institute of Health Metrics and Evaluation

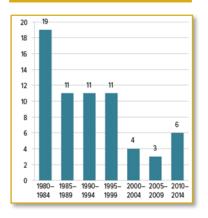


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Antimicrobial resistance - AMR

- Rapid growth of antibiotic resistance
- Primary causes overuse of antibiotics in human and veterinary care
- Methicillin-Resistant Staphylococcus Aureus (MRSA): kills more Americans than HIV/AIDS, Parkinson's, Emphysema & Homicide
- Caesarean deliveries, joint replacements, cancer drugs and organ transplants supported and made safe by antibiotics
- Steady fall in new antibiotic development last 30 years, inadequate to replace obsolescence from AMR
- More difficult to find new antibiotic than other drugs & less profit
- Patents expire before R&D costs recouped

New Antibiotic Approvals in the US

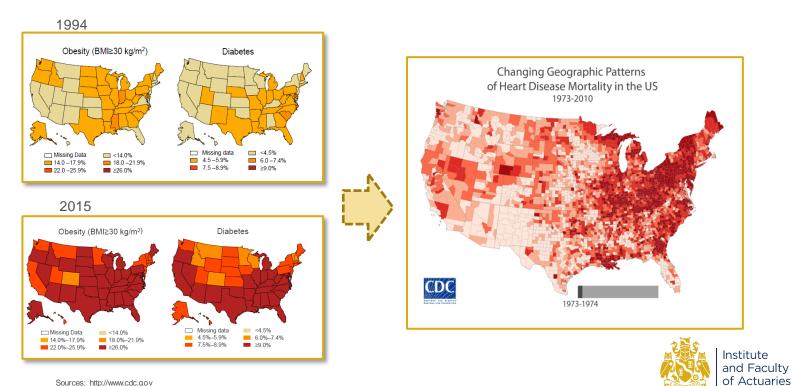


Source: P T. 2015 Apr;40(4):277-83



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Obesity Epidemic

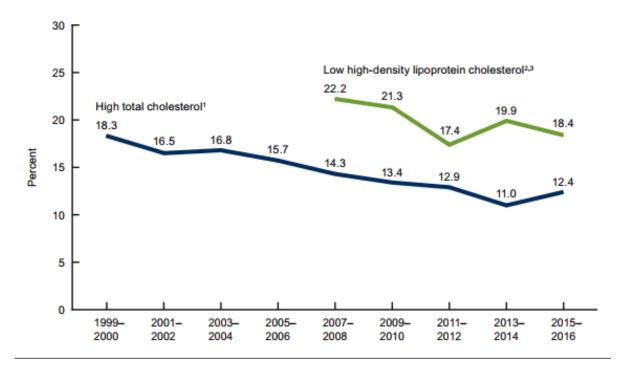


Sources: http://www.cdc.gov

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Age-adjusted high total cholesterol and low HDL among US adults 1999–2000 to 2015–2016





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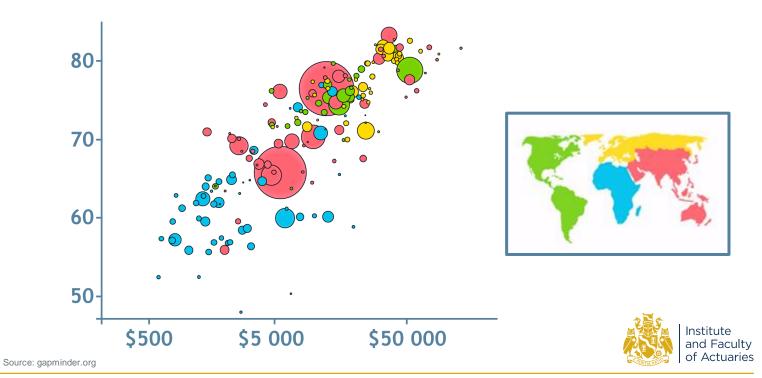
https://www.cdc.gov/nchs/data/databriefs/db290.pdf

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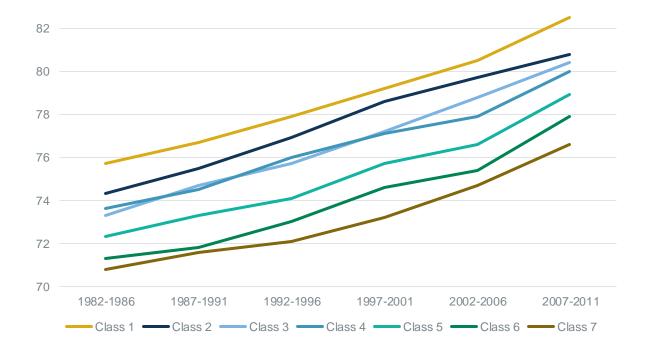


Life Expectancy vs. GDP per Capita



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Social disparity – Life expectancy

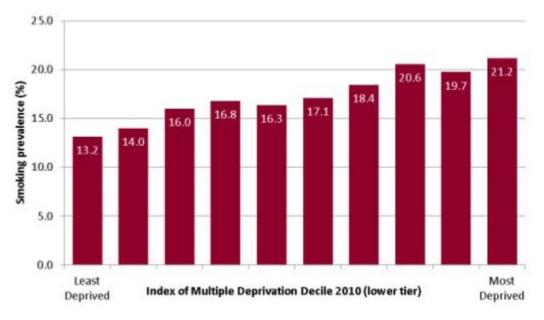




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Source: ONS Longitudinal Study

Social disparity – Tobacco prevalence



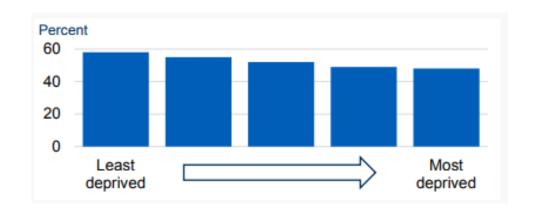




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Social disparity – Childhood diet

Consume 5 or more portions of fruit and vegetable a day

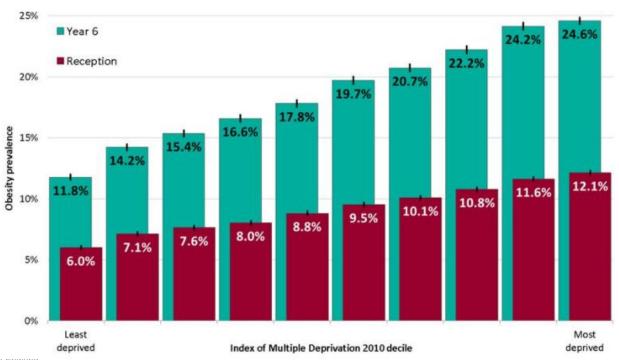


Source: Health and Social Care Information Centre (HSCIC)



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Social disparity – Child obesity



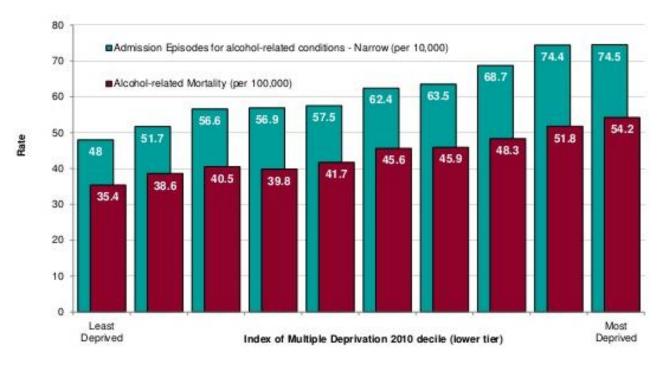


Source: Public healt⊓ ⊑ngianu

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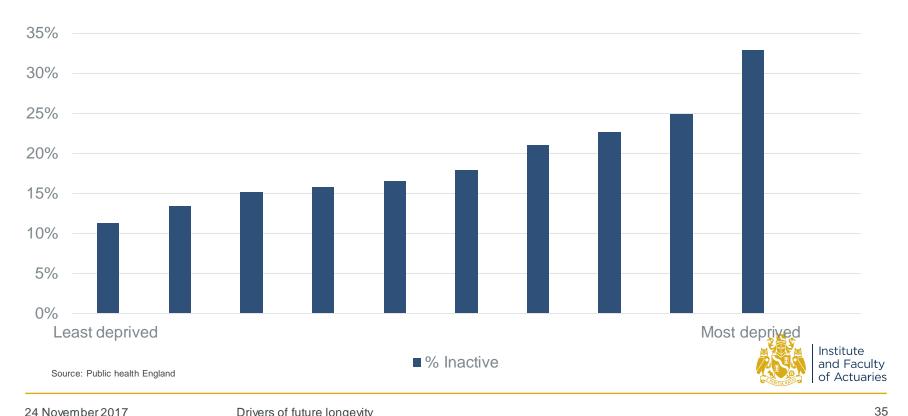
Social disparity – Alcohol use





Source: Public health England

Social disparity – Physical inactivity



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Medical Progress – the Next Generation

- Gains of medical progress can't repeat the old and will need new directions, but basics remain.....
- Prevention, early diagnosis, lifestyle improvements remain important
- What will make the difference?
 - Artificial intelligence
 - Genomics
 - Stem cell therapy



The Next Generation – Artificial Intelligence

- Diagnosis
 - interpreting images, Al software to analyse symptoms and signs
- Online consultations
 - Babylon app asks questions, arranges online GP appointment and sends prescriptions
- Treatment
 - IBM Watson assisting in cancer therapy
- Precision medicine
 - search and match mutations with diseases in huge data sets of genetic information and medical records
- Drug creation
 - Al technology can do 2 months work in one day searching therapies based on molecular structure
- Healthcare revolution
 - possible only if available to mainstream users

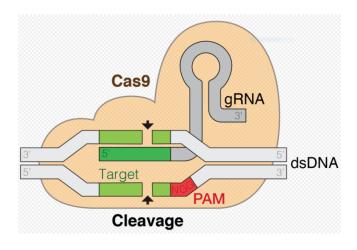


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The Next Generation - Genomics

Gene editing

- CRISPR/Cas9 and other molecular scissors on cells outside body and re-infusing them
- Infusing molecular scissors which are activated in target tissue, e.g. Hunter's syndrome in liver
- Still in R&D
- Potential for single-gene disorders such as cystic fibrosis, haemophilia, and sickle cell disease
- Precision or personalized medicine
 - Mining data sets of genetic information and medical records to find links between mutations and disease
 - Developing cancer drugs for mutations found



https://upload.wikimedia.org/wikipedia/commons/5/51/GRNA-Cas9.png



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The Next Generation - Stem cell therapy

- Regenerative medicine
 - Heart damage repair
 - Diabetes type 1
 - Replacing organs joints, trachea, skin, bladder, heart
- Hematopoietic stem cell transplantation (bone marrow or umbilical cord blood)
 - thalassaemia, sickle-cell disease, leukaemia
- Microtissue platforms ("Organ on a chip") mimics specific organ functions
 - Heart, kidney, lung
 - Testing of drugs & replace animal testing
 - Modelling diseases (cancer)





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Conclusions

- Gains in medical progress can't repeat the old and need new directions, but basics remain.....
- Prevention, immunization, screening, early diagnosis, lifestyle improvements
- Future medical gains in LE?
 - Artificial intelligence
 - Genomics
 - Stem cell therapy
- Potential losses in LE?
 - AMR, obesity, alcohol and drug abuse, pollution, climate change, population growth, food shortage, conflicts



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Questions

Comments

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