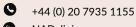
# NADclinic®

PERSONALISED LONGEVITY

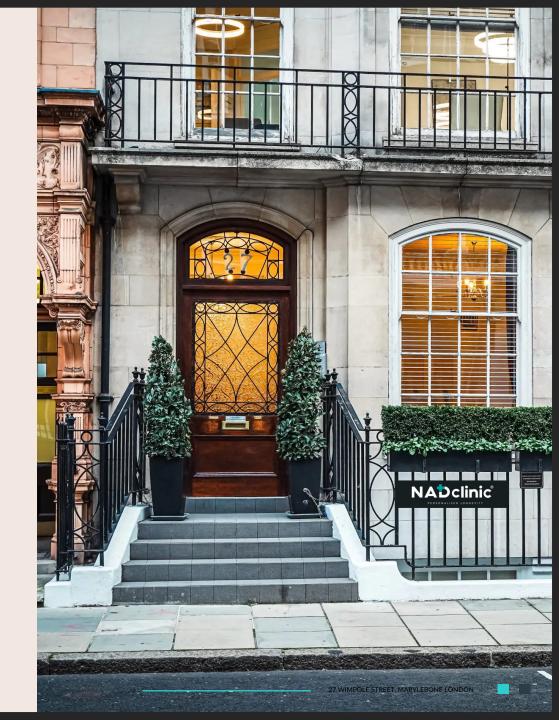
# AN INTRODUCTION TO NAD+ THERAPIES





NADdirect.com

info@nadclinic.com



# WHAT IS NAD+?

Nicotinamide Adenine Dinucleotide

### **Pioneering preventive health**

"NAD+ IV Therapy is at the forefront of the exponential growth in preventative health innovation, human performance and the elongating life-span space."

### THE CRITICAL ROLE OF NAD+

NAD+ is an essential housekeeping molecule found in every cell of the body, participating in numerous metabolic pathways. It serves as a vital cofactor and driving force for various critical cellular processes, such as energy metabolism, mitochondrial function, biosynthesis, gene expression, DNA repair, immune function, and ageing.

As a coenzyme, NAD+ performs two crucial functions: it acts as an electron transporter in cellular respiration and adenosine triphosphate (ATP) production, and it also serves as a substrate for poly (ADP-ribose) polymerase (PARP) and sirtuin (SIRT) enzymes, which are involved in DNA repair, gene regulation, and cell signalling - as well as being a substrate for CD38 ectoenzymes. A sustained imbalance in NAD+ metabolism can disrupt physiological functions, potentially leading to diseases such as metabolic disorders, cancer, premature ageing, and neurodegenerative conditions. The impact of NAD+ deficiency on various diseases through the manipulation of cellular communication networks can be mitigated by NAD+ therapeutic intervention.

In essence, without NAD+, we would die. NAD+ is as vital to our bodies as oxygen. By enhancing and optimising NAD+ levels through therapeutic intervention, we can improve both mental and physical human performance and extend our lifespan.



NAD+ IS CRUCIAL FOR LIFE



NAD+...

IS INVOLVED IN ALL BODY FUNCTIONS

maintaining healthy DNA.

THAN REPRODUCED

Our body cannot reproduce

our thirties - and this ability

LEVELS DECLINE WITH

The decrease in NAD+ levels is the

scientific trigger for the decline of

functions that leads to early aging

The decline of NAD+ levels will be

such as a unhealthy diet, stress, alcohol and substance abuse.

accelerated by poor lifestyle choices

and potentially chronic disease.

further declines with age.

many basic physiological

IS DIMINISHED BY LIFESTYLE CHOICES

AGEING

NAD+ sufficiently as we reach

NAD+ is involved in hundreds

of metabolic functions, ranging from energy creation to

IT IS FASTER CONSUMED







KEY FACTS

### NAD+



Novel form of Vitamin B



Natural coenzyme found in all living cells

_		_
		_

Directly Involved in the ATP (Energy) production

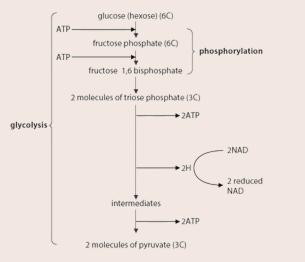


No reported side effects

# NAD+ & GLYCOLYSIS

Figure a. shows the series of steps that make up glycolysis. These steps all happen in the cytoplasm of a cell.

- Glycolysis is the splitting, or lysis, of glucose. It takes place in the cytoplasm of a cell.
- Glycolysis is a series of reactions (steps) in which a glucose molecule is eventually split into pyruvate (links Glycolysis to Krebs cycle).
- Hydrogen is transferred to the carrier molecule NAD (nicotinamide adenine dinucleotide). The NAD is now reduced NAD. Two molecules of reduced NAD are produced for each molecule of glucose entering Glycolysis. The hydrogens carried by reduced NAD can easily be transferred to other molecules.



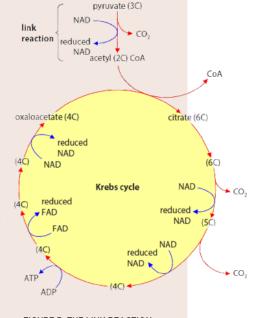


FIGURE B. THE LINK REACTION AND KREBS CYCLE

# THE LINK REACTION & KREBS CYCLE

NAD+ participates in energy creation by acting as a delivery mechanism. This molecule donates and accepts electrons to and from enzymes in the mitochondrial membrane. It is these electrons that fuel chemical reactions in the mitochondria. Without a sufficient supply of NAD+, the mitochondria can't adequately convert the nutrients from the foods we eat into usable energy.

The crucial role of NAD+ in different biological functions such as ageing, metabolism, mitochondrial function, immunological pathways, oxidative stress, gene expression, and apoptosis has been extensively investigated. Many studies have found that altered and reduced NAD+ levels play an important role in stimulating metabolic disorders, neurodegenerative disorders and tumorigenesis.

# ELECTRON TRANSPORT CHAIN & OXIDATIVE PHOSPHORYLATION

Reduced NAD is produced in Glycolysis and in the Krebs cycle. The reduced NAD from Glycolysis was formed in the cytoplasm, but it can pass through the mitochondrial envelope and enter the matrix. These reduced NAD molecules move from the mitochondrial matrix to the inner membrane. Here, the hydrogens that they are carrying are removed. These hydrogens are later used to produce large amounts of ATP-by-ATP synthase.

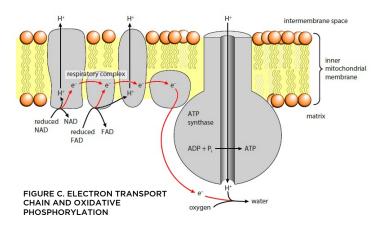
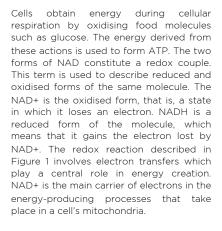


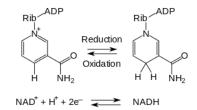
FIGURE A. THE SERIES OF STEPS THAT MAKE UP GLYCOLYSIS

# THE REDOX **REACTION OF NAD**

### **NAD+ THERAPY** TARGETS ALL KIND OF MITOCHONDRIAL DISEASES

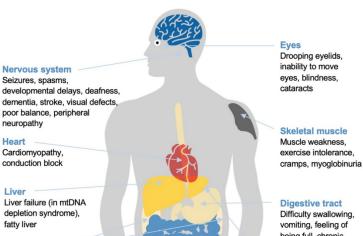


Mitochondria are known as the "powerhouses of the cell." These membrane-bound organelles are found in almost every living cell in the body, including the heart, brain, muscles, and lungs. They generate most of the energy needed to power the cell's biochemical reactions. The energy produced by the mitochondria is stored in the adenosine triphosphate molecule (ATP).



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The crucial role of NAD+ in different biological functions such as aging. metabolism, mitochondrial function, immunological pathways, oxidative stress, gene expression, and apoptosis has been extensively investigated. Many studies have found that altered and reduced NAD+ levels play an important role in stimulating metabolic disorders, neurodegenerative disorders and tumorigenesis.



### **Kidneys**

**Nervous system** 

Seizures, spasms,

neuropathy

Cardiomyopathy,

conduction block

Heart

Liver

fatty liver

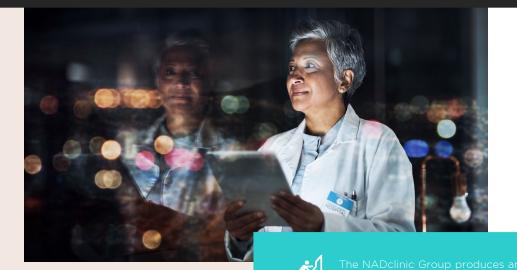
Fanconi's syndrome, nephrotic syndrome (in coenzyme Q10 deficiency)

depletion syndrome),

**Digestive tract** Difficulty swallowing. vomiting, feeling of being full, chronic diarrhea, intestinal obstruction

**Pancreas** Diabetes

Over 50 rare diseases are categorised as rare mitochondrial diseases, which can often have serious effects on skeletal muscle. cardiac muscle, or the central nervous system, for which there are few available therapies and a high unmet medical need.



## NAD+ THERAPY HELPS DIRECTLY REPLENISH NAD+ LEVELS

### NAD+ BIOSYNTHESIS

To compensate for a reduction in natural NAD levels, most NAD+ is recycled via salvage pathways from nicotinamide riboside (NR), nicotinamide (NAM) and nicotinic acid (NA), which are the three main B3 vitamins that function as precursors of NAD+ (Figure 2). Each contributes to the generation of NAD+ via distinct metabolic pathways but which may be inadequate to support healthy NAD+ levels.

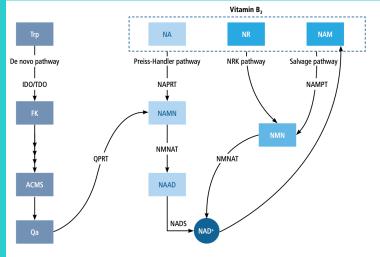
These precursors appear to have differing efficacy as primary sources of sufficient quantities of NAD+ particularly to tissues in which there is high metabolic stress and consequent high demand. Most cells and tissues utilise NR to produce NAD+, however where a deficiency exists, tryptophan catabolism through the kynurenine pathway is the sole route for de novo NAD+ synthesis and interestingly, altered kynurenine pathway activity has frequently been linked to ageing and some age-associated diseases.

### CAN DECLINING NAD+ LEVELS BE RESTORED?

Low levels of NAD can be caused by a deficiency in the synthesis/salvage pathways, excessive DNA damage due to free radicals or ultraviolet light, or chronic immune activation. Activation of PARPs in the presence of excessive or accelerated DNA damage leads to depletion of NAD.

When NAD levels become critically low, adenosine triphosphate (ATP) production decreases, ATP stores are utilised and eventually, cell death ensues. The increased activity of CD38 and other NADconsuming ectoenzymes in chronic immune activation similarly depletes NAD.

Decreased NAD levels may be a major factor in ageing and age-related degenerative diseases of the heart, brain, liver, kidney, and skin.



Tp: tryptophan; NA: niacin; NR: nicotinamide fiboside; NAM:: nicotinamide; IDO: indoleamine 2,3-dioxygenase; TDO: tryptophan; CA: advoycenase; NARPIT: nicotinate phosphoribosyltransferase; NRK: nicotinamide niboside kinase; NAMPI: nicotinamide phosphoribosyltransferase; RK: formylkynurenine; NAMN: nicotinate monorudeotide; NMK: nicotinamide monorudeotide; ACMS: Samino 3-carbosymuconate semialdehyde; QPRT: quinolinate phosphoribosyltransferase; NAAD: nicotinate adenine dinucleotide; NAMS: NAD: synthase; NMNAT: nicotinamide monoruleotide adenylyltransferase; Qa: quinolinic acid; NAD:: nicotinamide adenine dinucleotide

Figure 2. Basic NAD<sup>+</sup> biosynthesis pathways<sup>1</sup> [1[ Page 3

### WHAT IS NAD+ **USED FOR** PHYSIOLOGICALLY?

- Energy Production (ATP)
- Chromosome Stability
- DNA Repair (PARP 1)
- Immune Cell Signalling
- Telomere Elongating
- Neurotransmitter (Brain Health)
- Longevity Mechanisms (Sirtuins 1-7)



### NAD+ LEVELS DROP BY **50% BETWEEN THE AGES** OF 40 & 60

NAD+ is constantly being consumed by all physical and mental functions and unfortunately, our physiological system consumes NAD+ faster than it can reproduce it once we are into our thirties. The ageing process, increases chance of DNA damage. inflammation and reduced mitochondrial function which parallelly negatively affects the body's ability to produce NAD+.

Emerging anecdotal and science-based evidence has implicated dysregulated NAD+ metabolism in the age-related functional decline of various tissues and organs, with lower levels of NAD+ correlated with diseases of ageing, other metabolic disorders and neurodegenerative diseases. On average, NAD+ levels drop by 50% between the ages of 40 and 60 which is the scientific trigger for the decline of many basic physiological and physical functions.

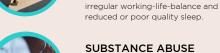
Therefore, therapeutically intervening and elevating NAD+ levels offers a solution for preventive health and cellular health optimisation.

# WHAT CAUSES DECREASE IN NAD+?











Excessive alcohol, nicotine, recreational drugs, prescribed medication or other substances decrease NAD+ levels

Various lifestyle choices might

negatively influence our NAD+



Ageing is most commonly associated with decreased levels of NAD+. Levels decline by half by the time a human is middle aged, with implications for combating age-related conditions and diseases

### CHRONIC DISEASES

Chronic illness is typically a result of mitochondrial dysfunction. which can be triggered by decreased NAD+ levels.

### **NAD+ Levels Decline With Age**

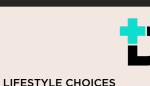


AGE

NAD+ (ng/mg protein), measured in human skin

ource: Zhu, Xiao-Hong, et al. "In Vivo NAD Assay Reveals the Intracellular IAD Contents and Redox State in Healthy Human Brain and Their Age

FIGURE 3: THE DECLINE OF NAD+ LEVELS WITH AGEING



### NAD+ IV IS TYPICALLY USED FOR THE FOLLOWING REASONS:

- Improving Metabolism
- Addressing Chronic Fatigue
- Combatting Ageing
- Fighting Chronic Conditions
- Improving Concentration &
  Focus
- Relieving Burnout & Stress
- Lifestyle Detoxing
- Increasing Fertility Levels



### NAD+ IV SOLUTION

Available in 200mg & 500mg per Vial

NADclinic produces and supplies NAD+IV as an intravenous solution, the most effective and efficient way of increasing the body's own NAD+ levels.

Studies prove that restoring levels of NAD+ in your cells has benefits for your brain and body, helping repair DNA, protect brain cells from damage, reduce inflammation and prevent ageing.

- Prescription only
- Available in 500mg and 200mg
- Infusion duration: 60 90 minutes
- Pharma grade NAD+ solution
- 18-months stability
- Storage between 2-8 degrees
- Distributed via our accredited
  pharmacy partners

Recommended to start with five sessions

•

NADclinic NAD+ IV Solution is available in 500mg and 200mg vials. Please contact NADclinic directly for details of your local Pharma distributor. NAD+ IV is available on prescription only and supplied to licensed medical practitioners only.

### NAD+ OPTIMA MAX

Available in 100mg & 250mg per Tablet

Optima Max is a daily oral supplement, clinically developed by our research and development team and based on the same formulation as NADclinic's best in class NAD+ IV protocol.

Optima Max is proven to increase and sustain NAD+ to optimum levels, energising the mitochondria in our cells and improving focus, concentration and cognitive function. Optima Max has the highest purity and potency of any nonprescription NAD+ supplement available.

NADclinic Optima Max is vegetarian, vegan and contains no artificial flavors. Optima Max is produced in a GMP-compliant and registered facility with rigorous third-party testing by independent labs during and after manufacturing.

- Prescription free
- Organic product
- Contains no World Anti Doping
  Agency (WADA) banned substances
- Manufactured in GMP production facility
- Two tablets daily
- Optima oral formulation 99% equivalent to NAD+ IV for maximum efficacy
- Stability 24 months
- Global distribution network



### WHAT CAN PATIENTS EXPECT FROM THE **BIOAGE TEST?**

- Development of an individual therapy plan based on results
- Complete and targeted support of the ageing process throughout vour life
- Individual food, lifestyle and nutrient recommendations to slow down the ageing process
- Recommendations for tailormade customised supplements according to the patient's individual needs

### BIOAGE **DNA TEST**

With the BioAge DNA test, we can accurately determine the body's biological age. In other words - this test measures how well or poorly the body is functioning relative to chronological age. With this information, it's possible to build a plan to reduce or maintain this number for patients.

The BioAge DNA Test functions by measuring the length of telomeres. Telomeres are organic 'caps' covering the ends of each DNA strand, safeguarding it during cell replication. Every time a cell divides, this 'cap' shortens, eventually becoming too short to enable proper cell function - which results in cell death.

Although this is a natural occurrence during our lifespan, specific factors can hasten the process, such as poor diet, lack of exercise, smoking and alcohol consumption, obesity, and stress.

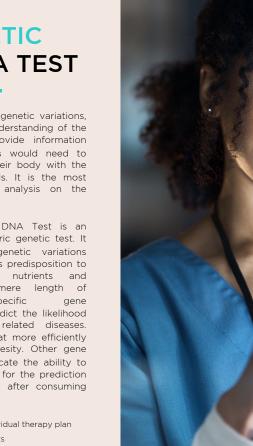
Through DNA screening and subsequent comprehensive DNA analysis with Fagron Genomics, you will have the information to develop a bespoke NAD+ Anti-Ageing IV Infusion Regimen. This in turn will help maintain or improve the age of your patients' cells.

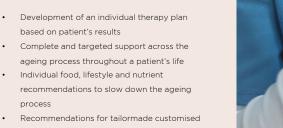
### BIOGENETIC 360° DNA TEST

This test analyses 384 genetic variations. to provide a deeper understanding of the body. It will also provide information detailing what patients would need to focus on to provide their body with the nutrients it really needs. It is the most complete nutrigenetic analysis on the market.

The BioGenetic 360° DNA Test is an innovative two-parametric genetic test. It identifies significant genetic variations related to an individual's predisposition to metabolise particular nutrients and determines the telomere length of chromosomes. Specific gene polymorphisms can predict the likelihood of obesity and its related diseases. Individuals who store fat more efficiently are more prone to obesity. Other gene variations can also indicate the ability to digest lactose, allowing for the prediction of potential discomfort after consuming foods containing it.

- Development of an individual therapy plan based on patient's results
- · Complete and targeted support across the ageing process throughout a patient's life
- recommendations to slow down the ageing process
- Recommendations for tailormade customised supplements according to the patient's individual needs
- Biological age
- Genetic cause of overweight and obesity
- Macro and micro metabolism
- Intolerances and deficits





\*RESULTS AVAILABLE BETWEEN 10-14 WORKING DAYS



**Reduce your** 

patient's true age

### **OUR PRODUCTS** & SERVICES

Supply of NAD+ IV Solution

Supply of NAD+ Supplements

NADclinic Clinical Partnerships

Marketing & Business Development

**Genomics Testing & Diagnostics** 



### TURNKEY SOLUTION FOR **NAD+ THERAPY**

At NADclinic, we're proud to be an innovative, forward-thinking transformational company. Staffed with a team of expert medical professionals specialising in functional medicine, nutrition, neurology and complementary therapies. NADclinic's core philosophy is optimising psychological and physical health and elevating human performance.

Fundamentally, we achieve this through harnessing the unique power of NAD+ - supporting a range of proprietary therapeutic protocols and therapies developed by our in-house scientific R&D team. Each one of our clinical locations or partner locations are centres of excellence, adhering to and delivering the latest cutting-edge NAD+ innovation via our Gold standard, lifestyleorientated science led protocols and programmes.

NADclinic Group are internationally recognised as the world leaders in preventative health innovation and suppliers of accredited NAD+ IV, NAD+ Therapeutics, and NAD+ supplements.

# ABOUT NADCLINIC



### IAIN DE HAVILLAND CEO & Founder

An experienced CEO. entrepreneur, investor and lifestyle-aficionado, lain is also a passionate NAD+ Pioneer driving the business globally, since inception.



### DR. LUKAS H. KOHLER



Lukas is focused on a holistic, nonsurgical approach, combining minimally invasive procedures with other anti-ageing treatments to achieve the best possible results

### LEONA KROEHLE

After working for many years in oncology, Leona now specialises entirely in human performance and longevity focused infusion protocols and complementary treatments.

NADclinic

### **ESTABLISHED SINCE 2018**

PROPRIETARY **CLINICS IN LONDON &** CAPE TOWN

15 PARTNER CLINICS IN

EUROPE & UK

100K

TREATMENTS ANNUALLY WITHOUT ANY RECORDED SIDE EFFECTS

500+

**DOCTORS & THERAPISTS IN EUROPE** USING OUR NAD+ PRODUCTS



# WE OFFER NAD+ THERAPY END-TO-END

In 2016, there were estimated to be less than a dozen clinics in the United States offering NAD+ therapy. In 2022, there are over 1,100 available clinics. Currently, NADclinic Group supplies NAD+ products to over 500 doctors, clinics and therapists globally in over 30 countries.

BENEFITS			
Preferential prices for NADclinic partners			
NAD+ education			
Best-in-class proprietary NAD+ IV protocols			
Be part of a strong community and recognised global brand			
Access to promotion materials and merchandise			
Direct line to NAD+ experts			
Dedicated website and landing pages			
Become part of the NADclinic network			

### REFERENCES



[1] Understanding the immune response in COVID-19 - new opportunities and new insights; Denovo Medica, Prof. Guy Richards; https://www.denovomedica.com/cod-online/wo-content/uploads/Understandine-the-immune-response-in-COVID-19-new-opportunities-and-new-insights---Online.odf

[2] Jones, M. Fosbery, R. Taylor, D. Gregory, J. 2020. Biology for Cambridge International AS & A Level. 5th Edition. Cambridge University Press. University Printing House, Cambridge CB2 8BS, United Kingdom. https://wiseec.com/wor-content/uploads/2021/08/Cambridge-International-AS-and-A-Level-Biology-Coursebook.pdf.odf

[3] Zhu XH, Lu M, Lee BY, Ugurbil K, Chen W. In vivo NAD assay reveals the intracellular NAD contents and redox state in healthy human brain and their age dependences. Proc Natl Acad Sci U S A. 2015 Mar 3;112(9):2876-81. doi: 10.1073/pnas.1417921112. Epub 2015 Feb 17. PMID: 25730862; PMCID: PMC4352772.

### Further References

Ying W, Wei G, Wang D, Wang Q, Tang X, Shi J, Zhang P, Lu H. Intranasal administration with NAD+ profoundly decreases brain injury in a rat model of transient focal ischemia. Front Biosci. 2007 Jan 1;12:2728-34. doi: 10.2741/2267. PMID: 17127275.

Rutherford L, Gadol E, Broom SL, Olds T, Mestayer RF, et al. (2020) Intravenous Administration of Nicotinamide Adenine Dinucleotide Alleviates Tremors Associated with Parkinson's Disease: A Case Report. J Gerontol Geriatr Med 6: 046.

Roh E, Park JW, Kang GM, Lee CH, Dugu H, Gil SY, Song DK, Kim HJ, Son GH, Yu R, Kim MS. Exogenous nicotinamide adenine dinucleotide regulates energy metabolism via hypothalamic connexin 43. Metabolism. 2018 Nov;88:51-60. doi: 10.1016/j.metabol.2018.08.005. Epub 2018 Sep 1. PMID: 30179604.

Hou Y, Lautrup S, Cordonnier S, Wang Y, Croteau DL, Zavala E, Zhang Y, Moritoh K, O'Connell JF, Baptiste BA, Stevnsner TV, Mattson MP, Bohr VA. NAD+ supplementation normalizes key Alzheimer's features and DNA damage responses in a new AD mouse model with introduced DNA repair deficiency. Proc Natl Acad Sci U S A. 2018 Feb 20;115(8):E1876-E1885. doi: 10.1073/pnas.1718819115. Epub 2018 Feb 5. PMID: 29432159; PMCIDI: PMC5828618.

Won SJ, Choi BY, Yoo BH, Sohn M, Ying W, Swanson RA, Suh SW. Prevention of traumatic brain injury-induced neuron death by intranasal delivery of nicotinamide adenine dinucleotide. J Neurotrauma. 2012 May 1;29(7):1401-9. doi: 10.1089/neu.2011.2228. Epub 2012 Apr 17. PMID: 22352983; PMCID: PMC5972775.

Pillai VB, Sundaresan NR, Kim G, Gupta M, Rajamohan SB, Pillai JB, Samant S, Ravindra PV, Isbatan A, Gupta MP. Exogenous NAD blocks cardiac hypertrophic response via activation of the SIRT3-LKB1-AMP-activated kinase pathway. J Biol Chem. 2010 Jan 29;285(5):3133-44. doi: 10.1074/jbc.M109.077271. Epub 2009 Nov 24. PMID: 19940131; PMICD: PMC2823454.

Zhang Y, Wang B, Fu X, Guan S, Han W, Zhang J, Gan Q, Fang W, Ying W, Qu X. Exogenous NAD(+) administration significantly protects against myocardial ischemia/reperfusion injury in rat model. Am J Transl Res. 2016 Aug 15;8(8):3342-50. PMID: 27648125; PMCID: PMC5009387.

Xu W, Li L and Zhang L (2020) NAD+ Metabolism as an Emerging Therapeutic Target for Cardiovascular Diseases Associated With Sudden Cardiac Death. Front. Physiol. 11:901. doi: 10.3389/fphys.2020.00901

Abdellatif M, Sedej S, Kroemer G. NAD+ Metabolism in Cardiac Health, Aging, and Disease. Circulation. 2021 Nov 30;144(22):1795-1817. doi: 10.1161/CIRCULATIONAHA.121.056589. Epub 2021 Nov 29. PMID: 34843394.

Mericskay M. Nicotinamide adenine dinucleotide homeostasis and signalling in heart disease: Pathophysiological implications and therapeutic potential. Arch Cardiovasc Dis. 2016 Mar;109(3):207-15. doi: 10.1016/j.acvd.2015.10.004. Epub 2015 Dec 18. PMID: 26707577.

Block T, Kuo J. Rationale for Nicotinamide Adenine Dinucleotide (NAD+) Metabolome Disruption as a Pathogenic Mechanism of Post-Acute COVID-19 Syndrome. Clin Pathol. 2022 Jun 24;15:2632010X221106986. doi: 10.1177/2632010X221106986. PMID: 35769168; PMCID: PMC9234841.

Miller R, Wentzel AR, Richards GA. COVID-19: NAD+ deficiency may predispose the aged, obese and type2 diabetics to mortality through its effect on SIRT1 activity. Med Hypotheses. 2020 Nov;144:110044. doi: 10.1016/j.mehy.2020.110044. Epub 2020 Jun 29. PMID: 32758884; PMCID: PMC7322475.

Omran HM, Almaliki MS. Influence of NAD+ as an ageing-related immunomodulator on COVID 19 infection: A hypothesis. J Infect Public Health. 2020 Sep;13(9):1196-1201. doi: 10.1016/j.jiph.2020.06.004. Epub 2020 Jun 7. PMID: 32534944; PMCID: PMC7275989.

Brenner, C. Viral infection as an NAD+ battlefield. Nat Metab 4, 2-3 (2022). https://doi.org/10.1038/s42255-021-00507-3

Altay O, Arif M, Li X, Yang H, Aydın M, Alkurt G, Kim W, Akyol D, Zhang C, Dinler-Doganay G, Turkez H, Shoaie S, Nielsen J, Borén J, Olmuscelik O, Doganay L, Uhlén M, Mardinoglu A. Combined Metabolic Activators Accelerates Recovery in Mild-to-Moderate COVID-19. Adv Sci (Weinh). 2021 Sep;8(17):e2101222. doi: 10.1002/advs.202101222. Epub 2021 Jun 28. PMID: 34180141; PMCID: PMC8420376.

Breton M, Costemale-Lacoste JF, Li Z, Lafuente-Lafuente C, Belmin J, Mericskay M. Blood NAD levels are reduced in very old patients hospitalized for heart failure. Exp Gerontol. 2020 Oct 1;139:111051. doi: 10.1016/j.exger.2020.111051. Epub 2020 Aug 9. PMID: 32783906.

Imai S, Guarente L. NAD+ and sirtuins in aging and disease. Trends Cell Biol. 2014 Aug;24(8):464-71. doi: 10.1016/j.tcb.2014.04.002. Epub 2014 Apr 29. PMID: 24786309; PMCID: PMC4112140.

Sun C, Wang K, Stock AJ, Gong Y, Demarest TG, Yang B, Giri N, Harrington L, Alter BP, Savage SA, Bohr VA, Liu Y. Re-equilibration of imbalanced NAD metabolism ameliorates the impact of telomere dysfunction. EMBO J. 2020 Nov 2;39(21):e103420. doi: 10.15252/embj.2019103420. Epub 2020 Sep 16. PMID: 32935380; PMICI: PMC7604620.

Amano H, Chaudhury A, Rodriguez-Aguayo C, Lu L, Akhanov V, Catic A, Popov YV, Verdin E, Johnson H, Stossi F, Sinclair DA, Nakamaru-Ogiso E, Lopez-Berestein G, Chang JT, Neilson JR, Meeker A, Finegold M, Baur JA, Sahin E. Telomere Dysfunction Induces Sirtuin Repression that Drives Telomere-Dependent Disease. Cell Metab. 2019 Jun 4;29(6):1274-1290.e9. doi: 10.1016/j.cmet.2019.03.001. Epub 2019 Mar 28. PMID: 30930169; PMCID: PMC6657508.