The effect of dietary micronutrients and micronutrient supplementation on telomere length

A thesis submitted for the degree of Doctor of Philosophy

Carly Jane Moores

BBiotech (Hons), GC Research Commercialisation

School of Health Sciences, Faculty of Medicine, Nursing and Health Sciences, Flinders University

Preventative Health Flagship, CSIRO Animal, Food and Health Sciences

March 2014



Table of contents

Abstract	xi
Candidate d	leclaration xiii
Acknowledg	gements xiv
List of figure	es xvi
List of abbre	eviationsxxii
Standard in	ternational units of measurexxvi
Orders of m	nagnitudexxvi
	ction and literature review1
	omeres and telomere function1
	Telomere length2
	Telomerase enzyme and ALT mechanism2
	Telomere length and ageing2
1.2 Telo	omere length epigenetics4
	DNA methylation and telomere length4
	1.1 Subtelomeric DNA methylation5
1.2.3	1.2 TERRA6
1.2.2	Chromatin and histone modifications6
1.2.3	Post translational modifications to telomerase7
1.2.4	MicroRNAs and telomere length7
1.3 Dise	ease and other influences on telomere length8
1.3.1	Environmental and lifestyle influences on telomeres8
1.3.2	Diet and telomere length9
1.4 Fold	ate and folic acid11
1.4.1	Pathways and functions in the cell including importance for
genom	e health11
1.4.2	MTHFR 677 genotype can influence folate metabolism13
1.4.3	Sources of folate; diet, fortified foods and supplementation 13
1.4.4	Australian folate RDI and actual consumption15
1.4.5	Consequences of folate insufficiency15
1.5 Mic	cronutrients, DNA damage and disease17
1.6 Fold	ate and telomere length19
1.7 Knc	owledge gaps and other challenges identified from the literature21

2	Projec	t synopsis, aims and hypotheses	23
2	.1 P	oject synopsis	23
2	.2 A	ms	25
2	.3 Н	ypotheses	26
,		ials and methods	
3	.1 q	PCR for absolute telomere length	27
	3.1.1		
	3.1.2	Positive and negative controls for qPCR	28
	3.1.3		
	3.1.4	qPCR mastermix	30
	3.1.5	PCR cycle conditions	31
	3.1.6	Absolute telomere length calculations	32
3	.2 P	olypill human study	33
	3.2.1	Ethics, recruitment and reimbursement	33
	3.2.2	Inclusion and exclusion criteria	33
	3.2.3	Study design, randomisation and blinding	34
	3.2.4	Polypill study power	35
	3.2.5	•	
	3.2.6	· ·	
	3.2.7	Collection blood from volunteers	41
	3.2.8	Blood processing for separation of plasma and PBMC	42
	3.2.9	Plasma measurements	42
	3.2.1	0 Isolation of DNA from PBMC	43
	3.2.1		
	-	ented in Chapters 4, 5 and 6	
3		vitro modelling	45
	3.3.1		
	3.3.2	,	
	3.3.3	,	
	3.3.4	•	
	3.3.5		
	3.3.6		
	3.3.7		
	3.3.8	·	
		neric sequence	
	3.3.9	,	
3	.4 St	atistical analysis	55

4.1	Intr	oduction	57
4.	1.1	Telomeres	57
4.	1.2	Dietary micronutrients, DNA and telomeres	57
	4.1.	2.1 In vitro studies	58
	4.1.	2.2 Caloric, protein and amino acid restriction	58
	4.1.	2.3 Cross-sectional studies: self-reported data	59
	4.1.	2.4 Cross-sectional studies: associations of telomere length with	
		hemical data	
4.	1.3	Aims and hypotheses	62
		thods	
4.	2.1	WHO definition of BMI categories	
4.	2.2	Socio-Economic index for areas	
4.	2.3	Statistical analyses	
4.3		sults	
4.4	Dis	cussion	92
4.	4.1	Recent supplementation use did not influence telomere length	92
4.	4.2	Telomere length did not significantly differ with gender	94
4.	4.3	BMI and obesity did not significantly affect telomere length	95
4.	4.4	Telomere length was not correlated with age	96
4.	4.5	Telomere length was associated with parental age	96
4.	4.6	Telomere length was associated with plasma biochemical measur	
	4.4.	6.1 Telomere length was negatively associated with homocysteine	
		6.2 Telomere length was positively associated with vitamin D1	04
		6.3 Appropriateness of plasma micronutrients as biomarkers of osure	ne.
1	-	Additional covariates of telomere length identified in recent	00
		ure were unmeasured1	07
	4.8	There is evidence of telomere length heterogeneity across differe	
ch	rom	osomes, chromosome arms, and tissue types1	
4.5	Cor	nclusions1	12
4.	5.1	Significance1	12
4.	5.2	Strengths and weaknesses1	12
4.	5.3	Future studies1	13

5	The im	pact of a micronutrient <i>Polypill</i> on telomere length <i>in vivo</i> over time.
	5.1 Int	roduction
	5.1.1	Intervention studies or RCTs and telomere length 115
	5.1.2	Longitudinal studies of telomere length 117
	5.1.3	Polypill intervention study rationale
	5.1.4	Aims and hypotheses
	5.2 Me	thods
	5.2.1	Randomisation to treatment groups124
	5.2.2	Missing samples
	5.2.3	Definition of seasons
	5.2.4	Longitudinal-specific calculations and analyses125
	5.2.5	Statistical analyses
	5.3 Res	sults
	5.3.1	Description of the study population 127
	5.3.2	Effect of <i>Polypill</i> supplementation on micronutrient levels 129
	5.3.3	Effect of <i>Polypill</i> supplementation on telomere length131
	5.3.4	Analyses by telomere length trajectory
	5.3.5	Partial and bivariate correlation143
	5.3.6	Linear regression
	5.4 Dis	cussion 166
	5.4.1	The <i>Polypill</i> study was a successful double-blinded RCT
	5.4.2	Polypill supplementation increased plasma micronutrients and
	decrea	ased homocysteine166
		Telomere length change over time was used to determine telomere
		trajectory
		3.1 There is potential for regression toward the mean in telomere
		th trajectory analyses
	5.4.4	Telomere length trajectory is associated with change in plasma zinc
	E 1 E	Correlation of work 16 telemore length with covariates differed
		Correlation of week 16 telomere length with covariates differed reatment group
		Telomere length at week 16 was correlated with change in plasma
		nutrients
	5.4.	6.1 Increase in plasma calcium over time was negatively associated
		n telomere length at week 16 176
	5.4.	6.2 Increase in plasma magnesium over time was negatively
	asso	ociated with telomere length at week 16 177
		Week 0 telomere length significantly explained week 16 telomere
	length	in regression models
	5.4.8	Changes in plasma zinc and niacin explained change in telomere
	_	in regression models
	5.4.9	Study limitations and power179

5.5 Co	nclusion181
5.5.1	Significance
5.5.2	Strengths and weaknesses
5.5.3	Future directions
•	study to investigate the impact of a modified micronutrient <i>Polypill</i>
	re length <i>in vivo</i> over time183
	roduction183
	Aims and hypotheses183
6.2 Me	ethods
6.2.1	Missing samples
6.2.2	Randomisation to treatment groups186
6.2.3	Longitudinal-specific calculations and analyses186
6.2.4	Statistical analyses
6.3 Re	sults187
6.3.1	Descriptives of the treatment population187
6.3.2	Telomere length changes and trajectories over time187
6.4 Dis	scussion198
6.4.1 modif	There were no significant changes in telomere length within fied <i>Polypill</i> or placebo groups198
6.4.2	Modified Polypill supplements differentially influenced telomere
trajec	tories
	Previous treatment allocation influenced telomere length trajectory nodified <i>Polypill</i> formulations199
6.4.4	Those in the telomere shortened trajectory were most likely to be
male,	have lower BMI and longer telomeres at week 16200
6.4.5	Limitations of this study design201
6.5 Co	nclusions202
6.5.1	Significance
6.5.2	Strengths and weaknesses202
6.5.3	Future directions202

7 A	quan	titative PCR method for the detection of uracil bases within the	
telom	ere		203
7.1	Int	roduction	203
7	7.1.1	Uracil in DNA	203
7	7.1.2	Uracil in DNA and folate	206
7	7.1.3	Uracil in the telomere	206
7	7.1.4	Measurement of base damage within the telomere	207
7	7.1.5	Aims and hypotheses	208
7.2	Me	ethods	209
7	7.2.1	USER™ enzyme	209
7	7.2.2	Deoxyuridine oligonucleotide standards	209
7	7.2.3	A standard curve of telomere standards containing uracil	209
7	7.2.4	Sensitivity of the USER-qPCR method	211
7	7.2.5	WIL2-NS in vitro experimentation	211
7	7.2.6	Statistical analysis	211
7.3	Re	sults	213
7	7.3.1	The USER assay with synthetic telomere oligonucleotides	
C	contai	ining deoxyuridine displayed proof of concept	213
7	7.3.2	Verification with <i>in vitro</i> challenge	216
		2.1 Live cell concentration was decreased with reduced folic acid	
		centration and increased dUTP concentration	
		2.2 There was a significant effect of dUTP on telomere length	216
		2.3 There were no significant effects of folic acid or dUTP on	240
		cil/kb telomere sequence	
		2.4 Telomere length was non-significantly correlated with uracil mere	•
7.4		cussion	
		Pre-qPCR digestion with USER enzyme mix enables the detectio	
		in telomeric sequence	
	7.4.2	Both folate deficiency and dUTP supplementation in vitro impact	
-		ell concentration at day 7	
7	7.4.3	Folic acid deficiency did not significantly alter telomere length	226
7	7.4.4	dUTP supplementation of 15 µM was associated with longer	
t	elom	eres	226
-	7.4.5	Uracil/kb telomere length was not significantly altered with folio	
a	acid d	eficiency or dUTP supplementation	227
-	7.4.6	Telomere length may be influenced by the content of uracil in	
		eric sequence	
7.5		nclusion	
	7.5.1	Significance	
	752	Future directions	230

8 and		ects of folic acid, SAM and dUTP on telomere length, telomeric unethylation in WIL2-NS cells	
		roduction	
		DNA methylation and folate	
	8.1.2	DNA methylation and nutrients	
	8.1.3	Subtelomeric DNA methylation and telomere length	.234
	8.1.4		
8	8.2 Me	ethods	. 236
	8.2.1	WIL2-NS in vitro experimentation	.236
	8.2.2	Telomere length and telomere uracil content	.236
	8.2.3	Global cytosine DNA methylation	.236
	8.2.4	Statistical graphs and analyses	.237
8	3.3 Res	sults	. 239
		Experiment one: Folic acid, dUTP and SAM influenced WIL2-NS of ty	
		Experiment one: Folic acid, SAM and dUTP influenced WIL2-NS ere length	. 241
	8.3.3	Experiment one: Folic acid and SAM influenced telomeric uracil nt in WIL2-NS cells	
	8.3.4	Experiment one: Folic acid, SAM and dUTP influenced global 5-vlcytosine content in WIL2-NS cells	
	8.3.5	Experiment two: Folic acid, and SAM influenced WIL2-NS cell ty	
	8.3.6	Experiment two: Folic acid, dUTP and SAM influenced WIL2-NS ere length	
		Experiment two: SAM, but not folic acid or dUTP influenced eric uracil content in WIL2-NS cells	. 251
		Experiment two: Folic acid, dUTP and SAM concentration nced global 5-methylcytosine in WIL2-NS cells	.253
8		cussion	
	8.4.1	FA, dUTP and SAM may affect cell viability alone and interactive	
	0		•
	8.4.2	Telomere length	. 257
	8.4.3	Telomeric uracil	. 257
	8.4.4	Global 5-methylcytosine	. 259
8	3.5 Co	nclusion	. 261
	851	Future directions	261

9 Disc	cussion, conclusions and knowledge gaps	263
	Discussion and conclusions	
9.1		
9.1		-
9.1		
Pol	lypill composition	
	4 <i>In vitro</i> : uracil within the telomere can be detected by a nethod	•
	5 <i>In vitro</i> : folic acid may influence telomere integrity, function	•
9.2	Remaining knowledge gaps	269
	1 What are the optimal micronutrient conditions for telome gth?	
	.2 Are PBMCs the optimal tissue for measuring telomere len w long should an intervention study examining telomere lengt	•
9.2 len	3 Is telomere quality and functionality more important that gth?	
9.3	Overview of main study findings and future directions	273
9.3	.1 Diet	273
9.3	3.2 Base damage	273
9.3	.3 Heritability	274
9.3	.4 Future directions	274
10 App	endices	277
10.1	Supplementary data	277
10.2	Publications arising from this thesis	319
10.3	Presentations at scientific meetings arising from this thesis	333
10.	3.1 Oral	333
10.	3.2 Oral/poster	333
10.	3.3 Poster	333
Doforon	cos	225

Abstract

Telomeres are nucleoprotein complexes, which cap the ends of linear chromosomes to prevent against chromosome end-to-end fusions in the cells. The underlying DNA sequence in humans is a TTAGGG hexamer that is repeated many times at each telomere. Due to the end-replication problem at DNA ends, the length of the telomere sequence shortens with each cycle of cell division. Telomere length has been associated with chronic disease, markers of oxidative stress and inflammation as well as diet patterns and individual nutrients. Evidence in the literature indicates that telomere length has both elements of heritability and may be modified by various environmental exposures including diet. However, the relationship of telomere length with dietary micronutrients in Australian populations has been largely unexplored. Additionally, the possibility that nutrients can influence telomere length in humans gives rise to the opportunity to modify telomere length through targeted dietary interventions. A double-blinded micronutrient intervention randomised controlled trial (RCT) - the Polypill study - provided the opportunity to assess changes in telomere length over time in a metropolitan Australian population.

Peripheral blood mononuclear cell (PBMC) telomere length in a healthy cohort of middle-aged South Australians was measured and cross-sectional associations with demographic and anthropometric variables were explored. Plasma levels of dietary micronutrients such as vitamin D and the metabolite homocysteine (associated with B vitamin deficiency) were correlated with telomere length. Vitamin D was found to be positively associated with PBMC telomere length while plasma homocysteine was inversely associated with PBMC telomere length.

The *Polypill* double-blinded RCT investigated changes in PBMC telomere length following 16 weeks of treatment with a micronutrient supplement containing folic acid, vitamin B_{12} , vitamin E, retinol, nicotinic acid and calcium (FBERNC) and compared this change to participants who received an inactive placebo. When groups were compared, there were no significant differences in the

mean changes in telomere length over time. Additionally, there was no significant difference in the proportions of individuals placed in telomere length trajectory groups defined as telomere sequence loss, maintenance or gain.

It was hypothesised that the integrity of the telomere sequence may be a more valuable biomarker than telomere length alone to assess responses to B vitamin supplementation. As uracil misincorporates in to the genome under low folate conditions, a qPCR method to detect uracil within the telomere sequence was conceived and optimised. The reproducible assay was developed with the use of synthetic uracil-containing primers and was then applied to DNA extracted from the WIL2-NS human lymphoblastoid cell line cultured in vitro under low folic acid and with supplemented dUTP. Next, in vitro modelling with various concentrations of folic acid, dUTP and additionally Sadenosyl methionine (SAM) were performed with the WIL2-NS cell line. There were no clear trends of either folic acid, dUTP or SAM on cell viability, telomere length, telomeric uracil content nor global methylation. Additionally, complex but statistically significant interactive effects for each of the experimental endpoints were noted indicating the possibility of strong homeostatic mechanisms regulating telomere integrity under conditions of folate deficiency and dUTP excess.

Candidate declaration

I certify that this thesis does not incorporate without acknowledgment any material previously submitted for a degree or diploma in any university; and that to the best of my knowledge and belief it does not contain any material previously published or written by another person except where due reference is made in the text.

Carly Moores

March 2014

Acknowledgements

Foremost, I would like to express my deepest gratitude to Nathan O'Callaghan for his professional support, advice and supervision. I also acknowledge the experienced supervision and guidance provided by Michael Fenech. I thank you both for your encouragement, patience and scientific expertise — I feel I am tremendously fortunate to have been your student.

I gratefully acknowledge all those involved in the *Polypill* study, in particular Bruce Armstrong, Peta Forder and Mark Donoghoe. I also thank Blackmores for their kind contribution of the tablets and capsules used in the intervention study. Additionally, I also thank the staff in the Research Clinic at CSIRO Animal, Food and Health Sciences (CAFHS) for the execution and management of the *Polypill* intervention study. I am greatly appreciative to staff in the Nutritional Genomics Laboratory for the processing of human samples from the study. I also acknowledge the friendship and support I have received from many in the research group, especially that from Tori Nguyen, Maryam Hor and Paul Cavuoto.

I acknowledge supplementary assistance from CAFHS data custodian Julie Syrette, Human Research Ethics Committee Secretary Kathryn Bastiaans and Site Manager extraordinaire Peter Royle. Further, I am extremely grateful to the CSIRO Preventative Health Flagship for providing me with a generous stipend as well as project and travel funding.

I am grateful to Bianca Benassi-Evans, Cassandra McIver, Sasja Beetstra-Hill and Emily Brindal for their friendship, mentorship and latte dates! I am endlessly thankful to have met each of you, as you are exceptional scientists I deeply admire.

I greatly thank past and present students at CAFHS who have provided encouragement, inspiration and peer-support, including Ann Chua, Arnida Teh, Eva Pedersen, Geetha Gopalsamy, Kacie Dickinson, Laura Edney, Mansi Dass Singh, Natalie Baack, Penny Main, Razinah Sharif, Sarah Brooker, Sau Lai Lee, Tatiana Goncalves and Tom Wycherley.

I thank Flinders University for the provision of resources, and I acknowledge Pam Sykes for her co-supervision and staff from the Faculty of Medicine, Nursing and Health Sciences, Research Services, Higher Degrees and Scholarships offices.

To my family, friends and Cheyne's family, I thank you for your support and encouragement during these many years of study. I am especially thankful to my nephew Mason, who instantly made the hardest times more endurable. I lovingly thank Cheyne for being my travelling buddy, one-man seminar rehearsal audience, and for his endless source of support, as well as distraction!

Finally, I am grateful to the volunteers who participated in the *Polypill* study and I thank them for their involvement and contribution to scientific research.

List of figures

Figure 1.1 – Schematic diagram of the lariat structure at the terminal telomere end 1
Figure 1.2 – Lifestyle, genetic and environmental factors which influence DNA, telomere welfare and risk of ageing-related diseases
Figure 1.3 – Chemical structure of folic acid11
Figure 1.4 – Folate metabolism
Figure 3.1 – Schematic of study design
Figure 3.2 – Number of participants and dropouts by each study phase 36
Figure 3.3 – Concentrations of each of the three treatments used in vitro 45
Figure 3.4 – Staggered timeline of cell culture experiments
Figure 4.1 – Descriptions of the socio-economic index for areas measures 65
Figure 4.2 – Absolute telomere length against age, by gender
Figure 4.3 – Scatterplot matrix of bivariate correlation associations reported in Table 4.777
Figure 4.4 – Scatterplot of absolute telomere length against age, BMI, maternal age and paternal age at week 0
Figure 4.5 – Scatterplot matrix of bivariate correlation associations between telomere length and measured plasma micronutrients at week 0, as reported in Table 4.8
Figure 4.6 – Absolute telomere length against plasma homocysteine at week 0
Figure 4.7 – Absolute telomere length against plasma vitamin D at week 0 for all participants, and individually for females and males
Figure 5.1 – Timeline of study defining week 0 and week 16 124
Figure 5.2 – Graphical representation of the mean change in absolute telomere length over time and by treatment group
Figure 5.3 – Graphical representation of individual telomere length trajectory from week 0 to-, for all participants
Figure 5.4 – Graphical representation of individual telomere length trajectory from week 0 to 16, for all participants, by treatment group
Figure 5.5– Telomere length trajectory is associated with change in plasma zinc
Figure 6.1 – Schematic of study detailing the six modified <i>Polypill</i> active treatments used in the second intervention
Figure 6.2 – Graphical representation of change in telomere length from week
16 to week 32. by treatment group

Figure 7.1 – Incorporation of uracil in DNA204
Figure 7.2 – Pyrimidine metabolism
Figure 7.3 – Products from complete USER digestion of the 4U-containing
telomere oligomer210
Figure 7.4 – Schematic representation of the experimental cultures212
Figure 7.5 – Standard curve of telomere oligonucleotide containing 0, 1, 2 and 4U214
Figure 7.6 – Standard curve of 0 – 100% 4U telomere oligonucleotide215
Figure 7.7 – Live cell concentration following 7 day in vitro culture217
Figure 7.8 – Telomere length218
Figure 7.9 – Number of uracil bases/kb telomere sequence220
Figure 7.10 – Correlation of telomere length with uracil bases/kb telomere
sequence221
Figure 8.1 – DNA methylation: chemical conversion of cytosine to 5-
methylcytosine
Figure 8.2 – Schematic representation of the experimental cultures238
Figure 8.3 – Experiment one: viable cells at day 7240
Figure 8.4 – Experiment one: telomere length
Figure 8.5 – Experiment one: uracil/kb telomeric sequence
Figure 8.6 – Experiment one: percent global 5-methylcytosine246
Figure 8.7 – Experiment two: viable cells at day 7248
Figure 8.8 – Experiment two: telomere length
Figure 8.9 – Experiment two: uracil bases/kb telomere sequence252
Figure 8.10 – Experiment two: percent global 5-methylcytosine254
Figure 9.1 – Piecing together the main study findings to identify the remaining knowledge gaps275
Figure 10.1 – Scatterplot matrix of bivariate correlation associations reported in Table 5.8290
Figure 10.2 – Scatterplot matrix of bivariate correlation associations reported in Table 5.9291
Figure 10.3 – Scatterplot matrix of bivariate correlation associations reported in Table 5.10292
Figure 10.4 – Scatterplot matrix of bivariate correlation associations reported in Table 5.11

List of tables

Table 1.1 – Dietary sources of folate14
Table 1.2 – Various dietary micronutrients and their function with DNA in the cell
Table 3.1 – Human telomere and 36B4 single copy gene forward and reverse primer sequences and oligonucleotide standards
Table 3.2 – Amount of telomere oligonucleotide standards and kb telomere sequence used in the qPCR assay
Table 3.3 – Amount of <i>36B4</i> oligonucleotide standards and kb telomere sequence used in the qPCR assay
Table 3.4 – Make up of telomere and 36B4 single copy gene qPCR reactions 31
Table 3.5 – PCR cycling conditions for telomere length and 36B4 single copy gene amplification
Table 3.6 – Micronutrients and doses in the <i>Polypill</i>
Table 3.7 – EAR, RDI and UL for <i>Polypill</i> micronutrients
Table 3.8 – Formulation of folic acid and vitamin B_{12} tablet administered in the <i>Polypill</i> intervention study
Table 3.9 – Formulation of nicotinic acid and calcium carbonate tablet administered in the <i>Polypill</i> intervention study
Table 3.10 – Formulation of vitamin E and retinol capsule administered in the <i>Polypill</i> intervention study
Table 3.11 – Collection and distribution of blood samples for various analyses 41
Table 3.12 – Oligonucleotide sequences used in optimisation of the USER assay52
Table 3.13 – Standard curve of DNA with 50% methylated cytosine used in global methylation assays54
Table 4.1 – Characteristics of the study population
Table 4.2 – Distribution of body mass index categories of participants 69
Table 4.3 – Self-reported recent supplement use prior to study period 70
Table 4.4 – Measured micronutrient levels in study participants71
Table 4.5 – Telomere length for all participants, by gender and obesity at week 072
Table 4.6 – Demographic and anthropometric descriptives of the study population at week 0, by self-reported recent supplementation status
Table 4.7 – Correlation matrix of telomere length with age, maternal age, paternal age and BMI at week 0
Table 4.8 – Bivariate correlation matrix of telomere length with measured plasma micronutrient status at week 0

Table 4.9 – Partial correlation matrix of telomere length with measured plasma micronutrient status at week 0, with adjustment for participant age, gender,
maternal age, paternal age and BMI84
Table 4.10 – Multiple linear regression model one: demographic factors, BMI and previous supplement use as predictors of telomere length at week 088
Table 4.11 - Multiple linear regression model two: measured plasma
micronutrients as predictors of telomere length at week 090
Table 5.1 – Longitudinal telomere length investigations from the literature118
Table 5.2 – Demographic and anthropometric descriptives of the study population at week 16127
Table 5.3 – Demographic and anthropometric descriptives of the study
population at week 16, by treatment group128
Table 5.4 – Change in plasma micronutrient levels and homocysteine from week 0 to 16, by treatment group
Table 5.5 – Change in telomere length from week 0 to week 16, by treatment group
Table 5.6 – Demographic and anthropometric descriptives and telomere length of the study population, by treatment group and telomere length trajectory from week 0 to week 16
Table 5.7 – Change in plasma micronutrient levels of the study population, by treatment group and telomere length trajectory from week 0 to week 16140
Table 5.8 – Bivariate correlation matrix of telomere length, change in telomere length and plasma micronutrient status from week 0 to week 16, for <i>Polypill</i> group
Table 5.9 – Bivariate correlation matrix of telomere length, change in telomere length and plasma micronutrient status from week 0 to week 16, for Placebo group
Table 5.10 – Bivariate correlation matrix of telomere length at week 16, change in telomere length from week 0 to week 16, participant age, maternal age, paternal age and BMI, for <i>Polypill</i> group
Table 5.11 – Bivariate correlation matrix of telomere length at week 16, change in telomere length from week 0 to week 16, participant age, maternal age, paternal age and BMI, for placebo group
Table 5.12 – Partial correlation matrix of telomere length, change in telomere length and plasma micronutrient status from week 0 to week 16, with adjustment for participant age, gender, maternal age, paternal age and BMI, for <i>Polypill</i> group
Table 5.13 – Partial correlation matrix of telomere length, change in telomere length and plasma micronutrient status from week 0 to week 16, with adjustment for participant age, gender, maternal age, paternal age and BMI, for placebo group
Table 5.14 – Multivariate linear regression to explain telomere length at week 16, for all participants
Table 5.15 – Multivariate linear regression to explain telomere length at week 16, for <i>Polypill</i> group

Table 5.16 – Multivariate linear regression to explain telomere length at week 16, for placebo group
Table 5.17 – Multivariate linear regression to explain telomere length at week 16 with change in micronutrients from week 0 to week 16, for <i>Polypill</i> group160
Table 5.18 – Multivariate linear regression to explain telomere length at week 16 with change in micronutrients from week 0 to week 16, for placebo group
Table 6.1 – Demographic and anthropometric descriptives and telomere length, by treatment group from week 16 to week 32
Table 6.2 – Change in telomere length from week 16 to week 32, by treatment group
Table 6.3 – Telomere length trajectory from week 16 to week 32, by treatment group
Table 6.4 – Week 16 to week 32 treatment allocation for week 16 and week 32 completers
Table 6.5 – Demographic and anthropometric descriptives and telomere length of the study population, by telomere length trajectory from week 16 to week 32
Table 7.1 – Partial correlation of individual WIL2-NS endpoint measures 222
Table 7.2 – Partial correlation of group WIL2-NS endpoint measures 223
Table 8.1 – Micronutrients which can influence DNA methylation 233
Table 10.1 – Volunteer withdrawals during the <i>Polypill</i> study: stage and reason for withdrawal, adverse events
Table 10.2 – Volunteer withdrawals during the <i>Polypill</i> study, by study phase and treatment group
Table 10.3 – Compliance data from week 0 to week 16 <i>Polypill</i> intervention, by treatment group
Table 10.4 – Compliance data from week 16 to week 32 <i>Polypill</i> intervention, by treatment group
Table 10.5 – Correlation of longitudinal telomere length measures for al participants, and separately for week 0 – week 16 groups
Table 10.6 – Differences in plasma micronutrient levels and homocysteine at week 0 and 16 in <i>Polypill</i> supplement group
Table 10.7 – Differences in plasma micronutrient levels and homocysteine at week 0 and 16, by treatment group
Table 10.8 – Demographic and anthropometric descriptives and telomere length of the study population, by telomere length trajectory from week 0 to week 16
Table 10.9 – Change in micronutrient levels by telomere length trajectory 287

Table 10.10 – Bivariate correlation matrix of telomere length and change in telomere length with change in plasma micronutrient status from week 0 to week 16288
Table 10.11 – Bivariate correlation matrix of telomere length at week 16, change in telomere length from week 0 to week 16, participant age, maternal age, paternal age and BMI294
Table 10.12 – Partial correlation matrix of telomere length and change in telomere length with change in plasma micronutrient and homocysteine status from week 0 to week 16, with adjustment for participant age, gender, maternal age, paternal age and BMI
Table 10.13 – Micronutrient and homocysteine concentrations at weeks 0, 16 and 32 by season of blood sample collection
Table 10.14 – Micronutrient and homocysteine concentrations at week 0, 16 and 32 by season of blood collection, and treatment group304
Table 10.15 – Supplementary data from Chapter 7: cell count data, population doublings and produced homocysteine309
Table 10.16 – Supplementary data from Chapter 7: telomere length, USER ΔC_T and uracil per kb telomere sequence310
Table 10.17 – Supplementary data from Chapter 8: cell count data, population doublings and produced homocysteine – experiment one
Table 10.18 – Supplementary data from Chapter 8: cell count data, population doublings and produced homocysteine – experiment two

List of abbreviations

5-MeTHF 5-methyltetrahydrofolate

5,10-MeTHF 5,10-methylenetetrahydrofolate

A adenine

ALT alternate lengthening of telomeres

ANOVA analysis of variance

ATCC American Type Culture Collection

AUD Australian dollar

B₂ vitamin B₂/riboflavin
 B₆ vitamin B₆/pyridoxine
 B₁₂ vitamin B₁₂/cobalamin

B unstandardised regression coefficient

B in FBERNC vitamin B₁₂ (Polypill)

β standardised regression coefficient

BER base excision repair
BFB breakage-fusion-bridge

BHMT betaine homocysteine methyltransferases

BMI body mass index

bp base pairs

C cytosine

C in FBERNC calcium (Polypill)

CBMN cytokinesis-block micronucleus assay

CH₃ methyl group CO₂ carbon dioxide

CpG cytosine phosphate guanine

CRP c-reactive protein

CSIRO Commonwealth Scientific and Industrial Research Organisation

C_T cycle threshold

CV coefficient of variation CVD cardiovascular disease

Δ change

 Δ_{0-16} change from week 0 to week 16 Δ_{16-32} change from week 16 to week 32

 $\begin{array}{ll} \Delta C_T & \text{change in cycle threshold} \\ \text{DC} & \text{dyskeratosis congenita} \\ \text{DDR} & \text{DNA damage response} \end{array}$

DHF dihydrofolate

DMSO dimethylsulfoxide

DNA deoxyribonucleic acid

DNMT DNA methyltransferase

dNTP deoxyribonucleotide triphosphate dTTP deoxythymidine triphosphate

dU deoxyuridine

dUTP deoxyuridine triphosphate dUMP deoxyuridine monophosphate

E vitamin E/alpha-tocopherol (*Polypill*)
EAR estimated average requirement
EDTA ethylenediaminetetraacetic acid

ex. excludes

F folate (*Polypill*)
FA folic acid

FBS foetal bovine serum

FFQ food frequency questionnaire
FISH fluorescence in-situ hybridisation
FPG formamidopyridine DNA glycosylase

G guanine

H₂O water

HBSS hanks balanced salt solution

hOGG1 human 8-oxoguanine DNA N-glycosylase 1 HPLC high performance liquid chromatography

HREC human research ethics committee

hTERT human telomerase reverse transcriptase

ICF immunodeficiency, centromere instability and facial anomalies

syndrome

IEO index of education and occupation

IER index of economic resources

IRSD index of relative socio-economic disadvantage

IRSED index of relative socio-economic advantage and disadvantage

IU international unit IQR interquartile range

kb kilobase

LDL low density lipoprotein

m⁵C 5-methyl cytosine

hm⁵C 5-hydroxymethyl cytosine

MN micronuclei

MTHFR methylene tetrahydrofolate reductase

MTR methionine reductase

MTRR methionine synthase reductase

n number

N nicotinic acid (*Polypill*)

n-3 omega 3 *n*-6 omega 6

NAD nicotinamide adenine dinucleotide

NADP nicotinamide adenine dinucleotide phosphate

NaK sodium-potassium

NER nucleotide excision repair

NHANES National Health and Nutrition Examination Survey NHMRC National Health and Medical Research Council

NO nitric oxide

NTC no template control

P probability

PARP poly ADP ribose polymerase
PASW predictive analytical software
PBL peripheral blood lymphocytes
PBMC peripheral blood mononuclear cells

PCR polymerase chain reaction PUFA polyunsaturated fatty acid

qPCR quantitative polymerase chain reaction

qFISH quantitative fluorescence in-situ hybridisation

R Pearson correlation coefficient

R in FBERNC retinol (Polypill)

R² coefficient of determination
 RCT randomised controlled trial
 RDA recommended daily allowance
 RDI recommended daily intake

RNA ribonucleic acid

RP-HPLC reverse phase high performance liquid chromatography

SAM s-adenosyl methionine SD standard deviation

SDS sequence detection software

SE standard error

SEIFA socio-economic index for areas
SEM standard error of the mean
SHMT serine hydroxymethyltransferase
SNP single nucleotide polymorphism

T thymine

TERRA telomeric repeat-containing RNA
TERT telomerase reverse transcriptase
TGA Therapeutic Goods Administration

THF tetrahydrofolate TL telomere length

TPE telomere position effect

TRAP telomere repeat amplification protocol

U uracil

UDG uracil DNA glycosylase
UL safe upper level of intake

USER uracil specific enzyme reagent

UTR untranslated region

UV ultra violet

VNTR variable number tandem repeat

Standard international units of measure

°C	degrees Celsius
Gy	Gray
h	hour
L	litre
m	metre
mol	mole
М	molar
min	minute
S	second

Orders of magnitude

```
(×10<sup>6</sup>)
Μ
                   mega
                                     (×10<sup>3</sup>)
                   kilo
k
                                     (×10<sup>-3</sup>)
                   milli
m
                                     (×10<sup>-6</sup>)
                   micro
μ
                                     (×10<sup>-9</sup>)
n
                    nano
                                     (×10<sup>-12</sup>)
                   pico
p
                                     (×10<sup>-15</sup>)
                   femto
                                     (×10<sup>-18</sup>)
                   atto
а
```