DOCUMENT SUMMARY This study provides biological evidence that lifetime trauma exposure physically accelerates aging in midlife women. Using advanced "epigenetic clocks" derived from DNA, the research finds that experiencing two or more traumas is linked to faster biological aging. Critically, this effect was primarily observed in Black women, highlighting the compounded impact of trauma and systemic stressors, which directly supports the Enlitens model of experience shaping biology.

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FORMATTED CONTENT

Lifetime Trauma Exposure and Accelerated Epigenetic Aging Among Midlife Women

Why This Matters to Enlitens

This research is a cornerstone for the Enlitens mission, providing hard, biological evidence that lived experience—specifically trauma—changes the body at a cellular level. It perfectly illustrates our core belief that there is no "normal" brain (or body), only adaptations to the life one has lived. The paper's use of epigenetics to show how trauma "gets under the skin" and accelerates aging gives a powerful scientific vocabulary to the work we do.

The findings are especially critical for two of our key populations. First, the exclusive focus on midlife women provides insight into the complex interplay between trauma and the rapid biological changes of menopause. Second, the finding that the trauma-aging link is most pronounced in Black women offers stark, measurable evidence for the "weathering hypothesis" and the biological cost of systemic racism. This paper provides the scientific ammunition to argue that trauma-informed, culturally-responsive care is not an optional add-on but a biological necessity.

Critical Statistics for Our Work

Study Population

- **Sample:** 216 women for the lifetime trauma analysis; 123 for the childhood maltreatment analysis.
- Age: The average age was 59 years old.
- Race/Ethnicity: The sample was 82% non-Hispanic White and 14% Black.
- Trauma Exposure:

- 35% of women had no lifetime trauma exposure.
- 25% had one lifetime trauma.
- 39% had experienced two or more lifetime traumas.
- Childhood Maltreatment (in subset):
 - 47% had a history of any abuse or neglect.
 - 12.5% had a history of sexual abuse.

Key Findings on Trauma and Accelerated Aging

- Lifetime Trauma: Women who experienced two or more lifetime traumas had significantly greater epigenetic age (measured by GrimAge) and a faster pace of aging (measured by DunedinPACE) compared to women with no lifetime traumas.
 - After controlling for variables, experiencing 2+ traumas was associated with an epigenetic age approximately
 - **1.8 years older** via GrimAge.
 - The association with GrimAge for 2+ traumas was statistically significant (p=.004).
 - The association with DunedinPACE for 2+ traumas was also significant (p=.003).
- Childhood Sexual Abuse: A history of childhood sexual abuse was independently associated with 2.2 greater years of epigenetic aging (GrimAge). This finding was statistically significant (p=.021).
- Racial Differences: The link between lifetime trauma and accelerated aging was primarily observed among Black women.
 - Among Black women, lifetime trauma exposure was associated with
 3.6 greater years of epigenetic aging (GrimAge) compared to their non-exposed Black counterparts.
 - The study observed statistically significant interactions between trauma and race for GrimAge (p=.04) and EEA (p=.03).

Methodology We Can Learn From

This study moves beyond subjective reports of distress and connects trauma to a physical, measurable outcome.

- **Epigenetic Clocks:** The core of the study is the use of epigenetic clocks, which measure biological age based on patterns of DNA methylation (DNAm). DNAm is an epigenetic mechanism that can be influenced by lifestyle and environmental factors, like stress.
- Generations of Clocks: The study uses multiple "generations" of these clocks:
 - First-generation (e.g., Hannum, Horvath): Correlate well with chronological age but weakly with disease outcomes.
 - Second-generation (e.g., GrimAge, PhenoAge): Better predictors of adverse health outcomes, morbidity, and mortality. GrimAge, a key clock in this study, was trained to predict death based on DNAm surrogates for plasma proteins and smoking.

- Third-generation / Pace of Aging (DunedinPACE): Tracks the speed of aging and is an even better predictor of mortality and chronic disease than earlier clocks.
- Validating Self-Report: The study uses the Brief Trauma Questionnaire for lifetime trauma and the

Childhood Trauma Questionnaire (CTQ) for childhood maltreatment. By showing a strong statistical link between scores on these self-report measures and a biological outcome (epigenetic age), the study provides powerful validation for the clinical importance of a person's reported history.

Findings That Challenge the System

- Trauma is Biological, Not Just Psychological: This research provides concrete, cellular-level evidence that psychological trauma becomes physically embedded in the body, accelerating the aging process. It refutes any notion that trauma's effects are "all in your head" by showing they are "in your cells."
- **Experience Over Labels:** The study's primary predictor wasn't a diagnosis like PTSD, but the *number of traumatic events* experienced over a lifetime. This demonstrates that the cumulative weight of life experience is a powerful determinant of biological health, a model central to Enlitens' philosophy.
- Systemic Racism Has a Biological Cost: The stark finding that the trauma-aging link was primarily driven by Black women provides direct support for the "weathering hypothesis". It suggests that the chronic stress of discrimination and systemic inequity creates a vulnerability that compounds the biological impact of discrete traumatic events, leading to earlier health deterioration.

Populations Discussed

- **Midlife Women:** The entire study was conducted in a sample of 216 midlife women (average age 59), a critical period of biological change.
- **Trauma Survivors:** The study specifically categorizes participants by their lifetime exposure to trauma (0, 1, or 2+ events).
- Childhood Abuse Survivors: A subset of 123 women was analyzed for the long-term impact of childhood abuse and neglect, using the CTQ. The study found a specific link between childhood sexual abuse and accelerated aging.
- Black Women: A small but significant portion of the sample (14%, N=32) was Black.
 Exploratory analyses revealed that the association between trauma and epigenetic aging was strongest and most statistically significant in this group, highlighting them as a population particularly affected by the biological burden of trauma.

Quotes We Might Use

- On the Core Concept: "Trauma exposure may be linked to accelerated biological aging."
- On the Mechanism: "DNAm is one form of epigenetic regulation of gene expression. It is modulated in part by life-style and environmental factors and is thereby a plausible mechanism through which traumatic stress may be related to poorer health..."

- On the Key Finding: "Relative to women without trauma exposure, those with
 ≥2 lifetime traumas had older epigenetic age, GrimAge... and
 DunedinPACE..."
- On the Disproportionate Impact on Black Women: "Exploratory models suggested that trauma was related to epigenetic age primarily among Black women."
- Quantifying the Racial Difference: "...greater lifetime trauma exposure associated with accelerated epigenetic age largely among Black women, among whom lifetime trauma exposure was associated with 3.6 greater years of epigenetic aging (GrimAge) relative to their nonexposed Black counterparts."
- Connecting to the Weathering Hypothesis: "...broadly consistent with the large body of work on the 'weathering hypothesis' that finds Black women, regardless of socioeconomic status, are more likely to experience early health deterioration compared to their White female and male counterparts..."
- On the Importance of a Life-Course Perspective: "However, studies have largely considered childhood abuse, with limited consideration of lifetime trauma exposure, particularly for women."

Clinical Implications

- Trauma as a Health Risk: This study positions trauma, especially multiple exposures, as a significant risk factor for accelerated biological aging and, by extension, earlier onset of chronic diseases. This underscores the importance of trauma prevention and intervention as public health priorities.
- The Need for Trauma-Informed Physical Healthcare: Clinicians should understand
 that a patient's trauma history is directly relevant to their physical health and aging
 trajectory. A history of trauma may indicate a need for more vigilant screening for agerelated diseases.
- Culturally-Responsive Care: The findings for Black women are a clear call to action.
 They provide a biological basis for understanding how systemic stressors and trauma
 intersect to create profound health disparities. Effective care for Black women must be
 trauma-informed and actively acknowledge and address the impact of racism and
 discrimination.
- Validating Patient Narratives: The fact that retrospective, self-reported trauma is a strong predictor of a biological outcome validates the importance of listening to and believing patients' life stories. Their history is written in their cells.