

DOCUMENT SUMMARY This longitudinal study provides compelling evidence that the timing of puberty during adolescence has lasting biological consequences, predicting accelerated cellular aging and increased mortality risk 14 years later in young adulthood. Analyzing a predominantly Black sample, the research finds that both the objective physical timing of puberty (phenotypic) and an individual's subjective perception of being early (perceived) are linked to these negative health markers. This highlights how developmental experiences and the stress associated with them become biologically embedded, reinforcing the Enliten's model of experience shaping biology.

FILENAME Goering2025_Research_Article_PubertyTiming_EpigeneticAging

METADATA Primary Category: RESEARCH Document Type: research_article Relevance: Core Update Frequency: Static Tags: #epigenetics, #puberty, #development, #biological_aging, #stress, #BIPOC, #health_disparities, #self_report, #trauma_informed_care Related Docs: Thurston2025_Research_Article_Trauma_EpigeneticAgingInWomen

FORMATTED CONTENT

Pubertal Timing as a Predictor of Epigenetic Aging and Mortality Risk in Young Adulthood

Why This Matters to Enliten's

This research provides a perfect case study for our core principle of biological embedding—how the life a brain and body has lived shapes its biology. By tracking adolescents into adulthood, this study demonstrates that the developmental experience of pubertal timing has measurable epigenetic consequences 14 years later.

Crucially, the study distinguishes between *phenotypic* timing (objective physical maturation) and *perceived* timing (the subjective feeling of being early or late). The finding that both predict long-term health risks validates our emphasis on the importance of a client's internal, lived experience; it's not just what happens to you, but how you experience it that gets written into your cells. With its predominantly Black sample, this paper provides vital data on how these processes contribute to health disparities, making it directly relevant to our commitment to culturally-responsive and trauma-informed care.

Critical Statistics for Our Work

Study Population & Design

- **Sample:** 350 individuals from a longitudinal study.
- **Demographics:** 80% Black, 19% non-Hispanic White; 58% female.

- **Timeline:** Pubertal timing was assessed in early adolescence (average age 13), and epigenetic outcomes were measured in young adulthood (average age 27).

Key Findings on Puberty and Epigenetic Health

- **Mortality Risk:** Both early *perceived* pubertal timing and early *phenotypic* pubertal timing predicted a higher epigenetic mortality risk in young adulthood, even after adjusting for covariates like early-life stress, BMI, and smoking.
- **Pace of Aging:** Early *phenotypic* pubertal timing predicted an accelerated pace of biological aging (measured by DunedinPACE).
- **GrimAge Clock:** In initial analyses, both perceived and phenotypic early pubertal timing were correlated with accelerated GrimAge. However, this link did not remain statistically significant after adjusting for all covariates.
- **PhenoAge Clock & Sex Differences:** The results for the PhenoAge clock were more complex and showed a non-linear pattern:
 - Off-time *phenotypic* timing (i.e., being either early or late) was associated with accelerated PhenoAge, but **in males only**.
 - Unexpectedly, off-time *perceived* timing was linked with *lower* PhenoAge acceleration in both sexes.
- **Racial Disparities:** The study confirms that Black youth experience, on average, both earlier pubertal timing and accelerated epigenetic aging compared to White youth.

Methodology We Can Learn From

The study's strength lies in its longitudinal design and its nuanced measurement of pubertal timing.

- **Two Distinct Measures of Pubertal Timing:** The researchers assessed pubertal timing in two separate ways at age 13:
 - **Perceived Pubertal Timing:** A subjective measure based on a single question asking adolescents to compare their own development to same-sex peers ("Do you think your body has changed any earlier or later than most others?"). This captures the psychosocial stress of social comparison.
 - **Phenotypic Pubertal Timing:** A more objective measure derived from self-reported Tanner stages (using line drawings) that were then statistically adjusted for the youth's precise chronological age. This captures the physiological reality of being physically mature for one's age.
 - These two measures were not significantly correlated, supporting their use as distinct indicators of different aspects of the pubertal experience.
- **Modern Epigenetic Clocks:** The study used second- and third-generation epigenetic clocks (GrimAge, DunedinPACE, and PhenoAge) which are validated against health outcomes and mortality, making them better biomarkers of health than older, first-generation clocks. It also included a specific DNA methylation-based mortality risk score.

Findings That Challenge the System

- **Subjective Reality Shapes Biology:** The discovery that *perceiving* oneself as an early developer predicts a higher epigenetic mortality risk score 14 years later is a powerful

argument against dismissing subjective experience. It demonstrates that the psychological stress of feeling "off-time" has tangible, long-term biological consequences that are distinct from the effects of objective physical changes.

- **Developmental Timing is a Lifelong Health Issue:** This research reframes puberty as a critical period where the *timing* itself becomes a risk factor for adult chronic disease. It provides a plausible biological mechanism (DNA methylation) for how this early life experience gets embedded and influences health decades later.
- **Beyond Simple "Early is Bad" Models:** While the results largely support the hypothesis that early timing is a risk, the nuanced finding for PhenoAge in males (where both early *and* late timing predicted accelerated aging) supports a "deviance hypothesis". This shows that simple linear models are insufficient and that *any* deviation from the norm can be a stressor, which aligns with the Enliten philosophy of recognizing diverse developmental pathways.

Populations Discussed

- **Racially Diverse Youth:** A key strength of the study is its focus on a sample that is 80% Black, providing much-needed data on a population underrepresented in this area of research.
- **Males and Females:** The study explicitly tested for sex differences, finding a key difference in the effects of off-time pubertal timing on the PhenoAge clock (males were affected, females were not).
- **Low-Income Youth:** The sample had an overrepresentation of families with lower incomes, making the findings particularly relevant to the intersection of socioeconomic status, development, and long-term health.

Quotes We Might Use

- **On the core finding:** "...experiencing pubertal maturation at a younger age and perceiving one's pubertal timing as earlier compared to peers is associated with negative health outcomes in the form of accelerated cellular aging and epigenetic mortality risk in racially diverse male and female adults."
- **On the mechanism:** "Changes in DNA methylation may present a mechanism explaining why early maturing youth are at a higher risk for chronic disease later in life."
- **On stress:** "As early pubertal timing is associated with higher stress... these higher stress levels may alter the epigenome in ways that make early maturing youth more prone to poorer health outcomes during adulthood."
- **On the deviance hypothesis in males:** "...phenotypic off-time pubertal timing predicting more accelerated PhenoAge in males."
- **On racial disparities:** "...the greater prevalence of both early pubertal timing and accelerated epigenetic aging in racial/ethnic minority youth may be one factor that contributes to health disparities."
- **On the two types of timing:** "While perceiving one's own pubertal timing as earlier relative to peers may induce stress primarily on a psychosocial level, earlier phenotypic pubertal timing relative to chronological age may induce stress primarily on a physiological level..."

Clinical Implications

- **Early Identification:** Pubertal timing, assessed both objectively and subjectively, can serve as an early identifier for individuals at higher risk for accelerated aging and adverse health outcomes in adulthood.
- **Tailored Interventions:** Because perceived and phenotypic timing are distinct and both carry risks, interventions should be tailored.
 - Youth who *perceive* themselves as early may benefit from support that reduces peer comparison and promotes positive self-image.
 - Youth who are *phenotypically* early may need interventions focused on coping with hormonal stress and creating environments where they are not treated differently due to their appearance.
- **Addressing Health Disparities:** The findings "underscore the need of targeted interventions that may include monitoring and early intervention for the health risks associated with early pubertal timing and accelerated cellular aging in racially diverse youth."