## **Ageing and Age-related Diseases**

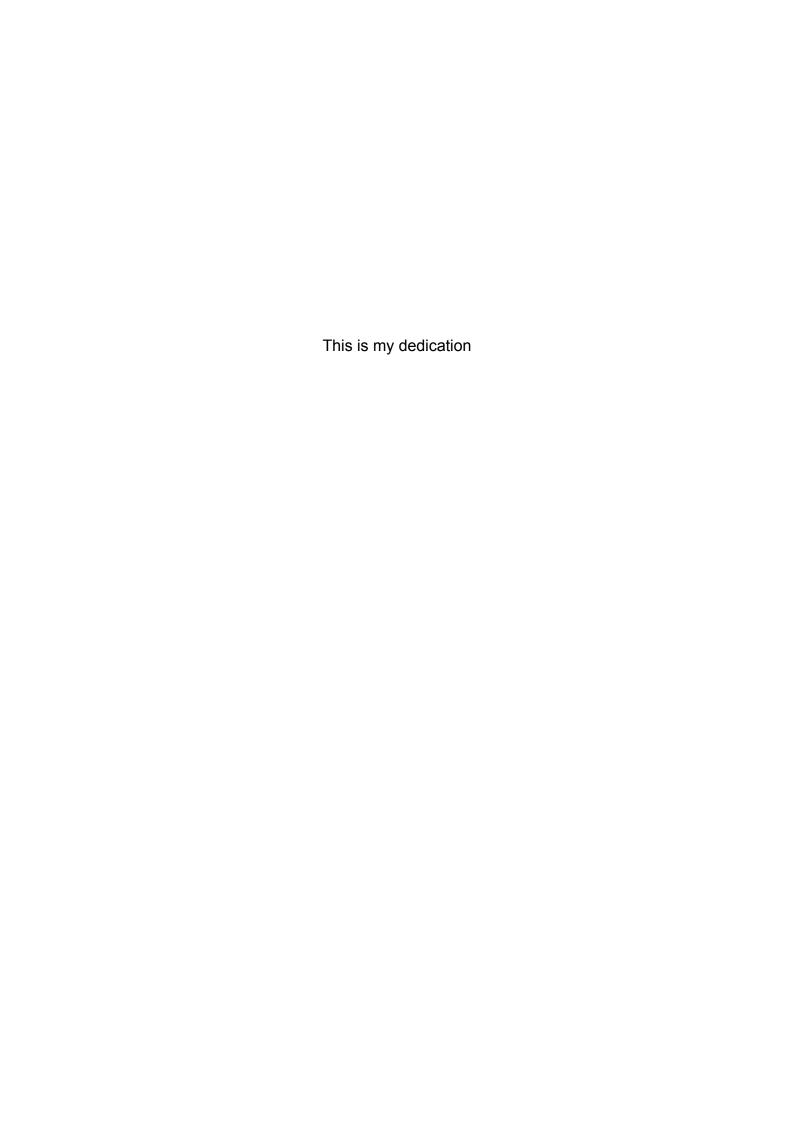


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> This dissertation is submitted for the degree of Philosophy of Science

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#### **Declaration**

I hereby declare that this dissertation s the result of my own work and includes nothing which is the outcome of work done in collaboration except as declared in the Acknowledgement and specified in the text. This work is not substantially the same as any that I have submitted, or, is being concurrently submitted for a degree or diploma or other qualification at the University of Cambridge or any other University or similar institution. I further state that no substantial part of my dissertation has already been submitted, or, is being concurrently submitted for any such degree, diploma or other qualification at the University of Cambridge or any other University of similar institution except as declared in the Preface and specified in the text. This dissertation contains fewer than 60,000 words including appendices, bibliography, footnotes, tables and equations and has fewer than 150 figures.

Handan Melike Dönertaş April 2020

## Acknowledgements

I acknowledge everyone

#### **Abstract**

This is my abstract

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## **Chapter 1**

#### Introduction

In recent years, there has been a demographic shift towards an aged population in all countries, and this trend is expected to continue. Considering the increase in the median population age and the prevalence of ageing-related diseases, understanding the molecular nature of ageing and ageing-related health outcomes is becoming a particular interest in the research community.

Ageing is suggested to be a complex state with many contributors. Thus, collecting information from different components (both genetic and environmental) is crucial. Today, there are multiple relevant data sources that we can utilize (Table 1) in order to understand the link between ageing and ageing-related diseases and to prioritize drugs with a potential to improve health during ageing.

## **Chapter 2**

# **Drug Repurposing for Ageing**

### References