

Visions of the Future

Jaba Tkemaladze

E-mail: jtkemaladze@longevity.ge

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Abstract

This paper posits that the most significant long-term existential risk to human civilization is not an acute technological or environmental catastrophe, but a chronic, systemic decay driven by the psychological and demographic consequences of a biologically capped lifespan. The entrenched expectation of mortality before 120 years fosters a condition of "temporal myopia," which cultivates cultural short-termism, consumerist nihilism, and demographic apathy. A critical and compounding aspect of this risk is the observed strong negative correlation between high cognitive ability and reproductive rates, leading to a systematic, dysgenic drain on humanity's problem-solving capacity. This creates a recursive threat far greater than any single hazard, as it erodes the intellectual capital necessary to navigate all other complex challenges. To counter this civilizational trajectory, we propose a novel biomedical paradigm: a strategy of continuous personal rejuvenation. This approach is based on utilizing in-vitro gametogenesis to generate autologous gametes, followed by auto-fertilization to create a new embryonic lineage. This protocol enables a comprehensive reset of cellular age, including the critical de novo formation of young centrioles, addressing the Centriolar Theory of Organismal Aging. The resulting young, perfectly matched adult stem cells are proposed for periodic autologous transplantation to maintain the body's regenerative potential indefinitely. We argue that this intervention transcends its medical purpose. By enabling the indefinite maintenance of cognitive and physical vitality, it allows the most capable individuals to remain active contributors for centuries, provides time for wisdom to accumulate, and transforms detrimental demographic structures. Therefore, rejuvenation biotechnology should be framed not as a mere luxury, but as a necessary civilizational safeguard—a strategic imperative to prevent a slow-motion intellectual and demographic collapse and to secure a flourishing long-term future for humanity.

Keywords: Biogerontology, Existential Risk, In-Vitro Gametogenesis, Centriolar Theory of Aging, Cognitive Decline, Demographic Transition, Rejuvenation Biotechnology, Stem Cell Therapy, Temporal Myopia.

Introduction

For decades, the discourse on existential risks has been dominated by acute, tangible threats: nuclear annihilation, runaway climate change, and more recently, the perils of artificial superintelligence (Bostrom, 2014). While these dangers demand serious attention, they overshadow a more insidious and fundamental crisis—one that is chronic, systemic, and rooted in the very biological fabric of our species. This crisis is the civilizational consequence of a biologically capped human lifespan. The tacit acceptance of a maximum life expectancy, historically hovering around 70-80 years with a theoretical ceiling near 120 (Dong et al., 2016), is not merely a medical statistic; it is a psychological and sociological paradigm that actively undermines humanity's long-term resilience and potential. This paradigm, which we term "Temporal Myopia," fosters a culture of short-termism and demographic apathy, creating a feedback loop that systematically erodes our collective cognitive capital (Sandeep & Gopesh, 2017).

The specific danger I have long emphasized is subtle yet profound: the ingrained expectancy of mortality before 120 years catalyzes a form of cultural nihilism, drives demographic decline, and, most critically, precipitates the systematic disappearance of the most intellectually capable individuals from the gene pool. This is not a Malthusian fear of overpopulation, but its antithesis—a fear of a qualitative decline amidst quantitative change. Empirical evidence consistently demonstrates a significant negative correlation between cognitive ability and reproductive rates in developed societies (Beauchamp, 2016; Kanazawa, 2014). The individuals most likely to engage in long-term planning, to contribute to scientific and cultural advancement, and to comprehend complex systemic risks are precisely those who are increasingly opting for low fertility or childlessness (Lynn & Harvey, 2008). This creates a recursive, long-term civilizational risk far greater than any single technological threat, as it directly attacks the engine of human ingenuity required to navigate all other challenges.

This phenomenon is exacerbated by the psychological impact of a finite lifespan. Research in behavioral economics and psychology has shown that temporal discounting—the tendency to value immediate rewards more highly than future ones—is a fundamental feature of human cognition (Green & Myerson, 2004). When the "future" is constrained to a single human lifetime, this bias becomes institutionalized. Our economic systems prioritize quarterly profits over centurial stability (Sandeep & Gopesh, 2017), our political cycles rarely extend beyond the next election, and our environmental policies become reactive rather than proactive. Why make profound sacrifices for a future in which one's own existence, and that of one's immediate descendants, is guaranteed to be erased? The work of Lifshin et al. (2018) on mortality salience further illustrates how awareness of death can shape cultural worldviews and fuel intergroup conflict, diverting resources from cooperative, long-term projects.

The prevailing biomedical approach to aging, which focuses on combating individual age-related diseases like cancer, cardiovascular disease, and Alzheimer's, is akin to plugging holes in a sinking ship without addressing the corrosive seawater that is biological aging itself (López-Otín et al., 2013). While these efforts have extended life expectancy, they have failed to significantly increase healthspan, often leading to a prolonged period of frailty and morbidity (Chatterji et al.,

2015). This "failure of success" places an ever-growing burden on healthcare systems and does nothing to reverse the underlying psychological and demographic trends driving civilizational nihilism.

Therefore, a paradigm shift is required. We must reconceptualize aging not as an immutable fact of life, but as a malleable biological process that can be targeted for intervention (de Magalhães, 2014). In this paper, I propose that the most effective countermeasure to the crisis of Temporal Myopia and intellectual decline is a strategic intervention aimed at the root cause: the progressive loss of physiological and cognitive function. I outline a detailed biotechnological strategy for continuous rejuvenation, a process designed to maintain an individual in a state of youth and health indefinitely. The cornerstone of this approach is a novel application of in-vitro gametogenesis (IVG) to generate perfectly matched, biologically young autologous stem cells for periodic transplantation.

The scientific premise rests upon the body's aging being driven, in large part, by the functional decline of its endogenous stem cell populations (Goodell & Rando, 2015). These cellular reservoirs of renewal themselves accumulate damage, undergo epigenetic drift, and enter states of senescence, leading to failed tissue maintenance and regeneration (López-Otín et al., 2013). My proposed strategy seeks to periodically replenish these pools with new, young stem cells. The key innovation lies in the method of generating these cells. Unlike simply harvesting and expanding a person's existing adult stem cells—which would merely propagate their aged state—this protocol leverages the germline's unique ability to reset epigenetic age (Seisenberger et al., 2012). By using IVG to create a new embryonic lineage from a somatic cell and then deriving pluripotent stem cells from it, we can obtain cells that are genetically identical to the donor but biologically pristine. A critical component of this reset is the generation of new, young centrioles—organelles essential for proper cell division and function that deteriorate with age and are not fully reset in cloning techniques (Fishman et al., 2017; Szollosi et al., 1972).

This paper will argue that such rejuvenation biotechnology transcends its medical purpose. By enabling the indefinite maintenance of cognitive and physical vitality, it offers a direct antidote to civilizational decline. It allows the most capable minds to remain active contributors for centuries, accumulating wisdom and guiding long-term projects. It provides time for the less wise to mature and for society to accumulate knowledge. In this vision, conquering aging is not an act of vanity, but a fundamental safeguard—a necessary step to secure a flourishing future for human civilization against the slow, certain threat of intellectual and demographic collapse.

The Central Problem: Civilizational Nihilism from a Capped Lifespan

The most profound threats to a system are often not those that attack it from the outside with sudden force, but those that insidiously undermine its foundational principles from within. For human civilization, the tacit societal and individual acceptance of a biological ceiling of approximately 120 years (Dong et al., 2016) represents precisely such a threat. This predetermined horizon is not a neutral fact of biology; it is an active agent shaping human

psychology, culture, and demography, fostering a condition of "temporal myopia" that permeates our collective existence. This myopia, characterized by a systemic prioritization of the immediate future over the long-term, manifests as a triad of interlinked pathologies: cultural short-termism, consumerist nihilism, and demographic apathy. Together, they constitute a primary, yet critically overlooked, existential risk (Maher & Baum, 2013).

The Psychology of Temporal Myopia and Short-Termism

The human brain has evolved remarkable cognitive capacities, yet it remains profoundly influenced by heuristics and biases that favor immediate rewards over distant gains, a well-documented phenomenon known as temporal discounting (Green & Myerson, 2004). When the ultimate "future" is constrained to a single, biologically capped lifetime, this cognitive bias becomes a cultural and economic paradigm. The field of neuroeconomics has shown that the perception of finite time directly influences decision-making circuits, such as the prefrontal cortex and striatum, promoting choices with immediate payoffs (Peters & Büchel, 2011). This neural underpinning helps explain why, at a societal level, we witness a dominance of short-term planning cycles. Our economic systems are overwhelmingly geared towards quarterly profits, often at the expense of long-term stability and sustainability (Sandeep & Gopesh, 2017). Similarly, political institutions, bound by election cycles rarely exceeding a few years, struggle to implement policies whose benefits may only be realized decades later, such as comprehensive climate change mitigation or foundational scientific research (Jacobs, 2016).

This short-termism is not merely a practical failure but a psychological adaptation to mortality. Terror Management Theory (TMT) posits that a significant amount of human behavior is driven by the need to manage the anxiety inherent in the awareness of one's own death (Pyszczynski et al., 2015). While TMT often focuses on cultural worldview defense, its principles extend to temporal perception. The certainty of death within a known timeframe can lead to a devaluation of the far future, as the individual's symbolic or literal participation in it is guaranteed to cease. This fosters a "legacy gap," where the incentive to build for a future one will not see is psychologically weakened, directly impacting investments in infrastructure, environmental stewardship, and basic science (Wade-Benzoni, 2002).

Consumerist Nihilism and the Erosion of Meaning

The logical extension of a short-term perspective in a secular, consumption-driven world is a form of consumerist nihilism. If life is finite and no transcendent meaning is universally accepted, then the accumulation of experiences, status, and material possessions becomes a primary, if ultimately unsatisfying, source of purpose (Kasser & Sheldon, 2000). This is not a philosophical abstraction but a observable socio-cultural trend. Research has linked materialistic value orientation with lower levels of personal well-being and higher ecological footprints (Brown & Kasser, 2005). The "hedonic treadmill," where constant consumption is required to maintain a baseline level of happiness, creates a feedback loop that further entrenches short-term economic thinking and depletes planetary resources (Diener et al., 2006).

This nihilistic undercurrent is exacerbated by the changing nature of community and knowledge. In a world of rapid technological change and attenuated intergenerational connections, the long-term projects that once provided meaning—building a family business, maintaining a multi-generational homestead, preserving local traditions—lose their coherence. The individual's life becomes a discrete, self-contained unit, and its purpose is often reduced to the optimization of personal pleasure and the avoidance of suffering within its brief span. This mindset is anathema to the long-term, multi-generational projects that civilization requires to overcome its greatest challenges, from space exploration to the ethical stewardship of biotechnology (Bostrom, 2014).

Demographic Apathy and the Quantitative Decline

The most concrete and measurable consequence of temporal myopia is the global phenomenon of demographic transition towards sub-replacement fertility rates (Vollset et al., 2020). While often discussed in economic terms of aging populations and strained social security systems, the root cause is deeply psychological. The decision to reproduce is, fundamentally, an act of faith in the future. It represents a massive investment of resources, time, and emotional energy for a reward that is decades away. When the cultural narrative is one of finite time, environmental uncertainty, and personal fulfillment through consumption rather than generativity, the cost-benefit analysis shifts decisively against childbearing (Balbo et al., 2013).

This is not merely a problem of quantity, but of a specific qualitative dynamic that intensifies the civilizational risk. As modern societies increase their human capital through education and cognitive demanding work, the opportunity costs of childbearing rise disproportionately for the most intellectually engaged individuals (Beauchamp, 2016). The very people who are most likely to understand complex long-term risks, contribute to technological innovation, and engage in sophisticated long-horizon planning are those most likely to delay or forgo reproduction entirely due to the high personal and professional costs involved (Kanazawa, 2014). This creates a recursive, dysgenic loop: the cognitive resources most essential for solving the long-term problems of civilization are being systematically withdrawn from the future gene pool and meme pool (Lynn & Harvey, 2008). The work of Conley (2016) and others on the sociogenomics of educational attainment further suggests that the environmental pressures that discourage high-aptitude individuals from reproducing may be compounded by underlying genetic factors, accelerating the decline.

In conclusion, the capped lifespan is not a passive backdrop but an active driver of civilizational pathology. It amplifies innate cognitive biases towards short-termism, fuels a consumption-oriented nihilism that erodes meaningful long-term projects, and triggers a demographic apathy that selectively disadvantages the most capable minds. This triad creates a slow, systemic, and self-reinforcing process of decay that is far more dangerous than any single catastrophic event. It is a crisis of time itself, and addressing it requires a fundamental intervention not just in our culture, but in our biology. The following section will detail a biotechnological strategy designed to break this cycle at its root by targeting the biological ceiling of the human lifespan.

The Mechanism of Intellectual Decline: Dysgenic Reproduction Patterns

The civilizational nihilism engendered by a capped lifespan, as outlined in the previous section, does not operate as a uniform force across all segments of society. Its impact is profoundly selective, creating a critical and compounding feedback loop that directly targets humanity's cognitive engine. A substantial and growing body of evidence indicates a strong negative correlation between high cognitive ability and reproductive rates (Beauchamp, 2016; Kanazawa, 2014). This is not a transient demographic anomaly but a persistent trend in post-industrial societies, whereby the most intellectually capable and forward-thinking individuals are systematically self-selecting out of the gene pool. This process creates a long-term, recursive drain on humanity's collective problem-solving capacity, representing a direct threat to our ability to navigate an increasingly complex future (Lynn & Harvey, 2008).

Empirical Evidence for the Negative Correlation

The inverse relationship between intelligence and fertility is a well-replicated finding in sociological and psychological literature. Longitudinal and cross-sectional studies across various developed nations consistently demonstrate this pattern. For instance, an analysis of Swedish population data found a negative association between IQ and the probability of having any children for both men and women, even after controlling for educational attainment (Lynn & Van Court, 2004). Similarly, a study using data from the National Child Development Study in the UK confirmed that higher childhood cognitive ability predicted lower fertility in women by age 42, primarily through delayed age at first birth and a higher rate of childlessness (Bajekal, 2005).

This correlation extends beyond general intelligence (g factor) to specific traits and achievements that are proxies for high cognitive function. Educational attainment, one of the strongest correlates of intelligence, shows a particularly stark negative relationship with fertility (Skirbekk, 2008). Women with higher levels of education uniformly have fewer children on average, a trend observed globally as nations undergo the demographic transition (Kravdal & Rindfuss, 2008). Furthermore, individuals in highly cognitively demanding professions, such as scientific research and academia, often exhibit lower fertility rates and higher rates of childlessness compared to the general population (Hose et al., 2020). This suggests that the drain is not merely on genetic potential for intelligence, but also on the immediate cultural and intellectual capital that drives innovation.

The Causal Nexus: Why the Most Capable Choose Not to Reproduce

The mechanisms driving this dysgenic trend are multifactorial, rooted in rational cost-benefit analyses shaped by modern socio-economic structures and the psychological impact of a finite lifespan.

The Opportunity Cost Hypothesis: In knowledge-based economies, the pursuit of education and career advancement for high-aptitude individuals entails a significant temporal and financial investment. The years dedicated to undergraduate, graduate, and post-graduate training often coincide with peak fertility (Balgopal, 2016). The opportunity cost of pausing a demanding career for child-rearing is perceived as exceptionally high for these individuals, leading to delays that frequently result in reduced family size or permanent childlessness (Hose et al., 2020). This is a rational economic decision in a context where a single, short lifespan forces a choice between professional achievement and generativity.

The Environmental Concern and Existential Risk Hypothesis: Intellectually capable individuals are more likely to be aware of, and concerned by, large-scale, long-term problems such as climate change, resource depletion, and overpopulation (Kellstedt et al., 2008). This awareness can lead to a conscious decision to limit or forgo reproduction out of a sense of ethical responsibility towards a perceived bleak future for the next generation (Connelly, 2008). This is a tragic irony: the very capacity to understand civilizational risks leads to a behavioral response that diminishes the future capacity to manage them.

The Delayed Gratification and Hyper-Agency Model: High intelligence is associated with a greater ability to delay gratification and engage in long-term planning (Shamosh & Gray, 2008). However, in a context of temporal myopia, this trait can paradoxically work against reproduction. Individuals may feel the need to achieve a certain level of financial security, stable housing, and career establishment before considering children—a threshold that is continually pushed further into the future in unstable economies (Balbo et al., 2013). This "hyper-agency" over life planning, when constrained by a biological clock, can result in missing the window for reproduction entirely.

The Genetic and Cultural Confound: It is crucial to acknowledge that the observed patterns are not purely environmental. Behavioral genetics research indicates that both educational attainment and age at first birth are moderately heritable traits (Barban et al., 2016). Furthermore, studies using polygenic scores for educational attainment have shown that these scores are negatively correlated with fertility, suggesting a potential genetic component to the observed selection (Beauchamp, 2016; Conley et al., 2016). This implies that the modern environment is selectively disfavoring a complex constellation of traits—including cognitive ability, patience, and future-time perspective—that are genetically correlated and beneficial for solving complex problems.

The Long-Term Recursive Drain on Problem-Solving Capacity

The consequence of this systematic selection is not a one-time loss but a recursive, civilizational-level decay. If each generation sees a slight decrease in the genetic and cultural propensity for high cognitive function, the effect compounds over time (Lynn & Harvey, 2008). This creates a dangerous feedback loop: as the average problem-solving capacity declines, society becomes less equipped to address the very challenges—technological stagnation, environmental crises, political instability—that may have contributed to the dysgenic pressure in the first place.

This is not a simplistic argument for a "genetic apocalypse," but rather a recognition that the gene-environment correlation is powerful. The environments that foster innovation—advanced research institutions, complex technological systems, sophisticated governance—are created and maintained by individuals with high cognitive abilities. A gradual decline in the population-level capacity to sustain these environments could lead to a slow but irreversible civilizational regression (Woodley of Menie et al., 2017). The loss is dual: we lose both the immediate intellectual output of the non-reproducing elite and their potential to pass on the traits that would produce similar minds in the next generation.

In summary, the dysgenic reproduction pattern is a powerful mechanism that translates the abstract crisis of temporal myopia into a concrete, quantitative decline in human capital. The most capable minds, burdened by high opportunity costs, existential anxieties, and a rational approach to a finite life, are opting out of the future. This creates a long-term civilizational risk far greater than any single pandemic or economic crash, as it systematically disassembles the primary tool—human intelligence—that we rely upon for survival and progress. The following section will propose a radical intervention aimed not at changing reproductive choices through policy, but at removing the fundamental biological constraint that underpins this entire destructive feedback loop: the limited healthspan itself.

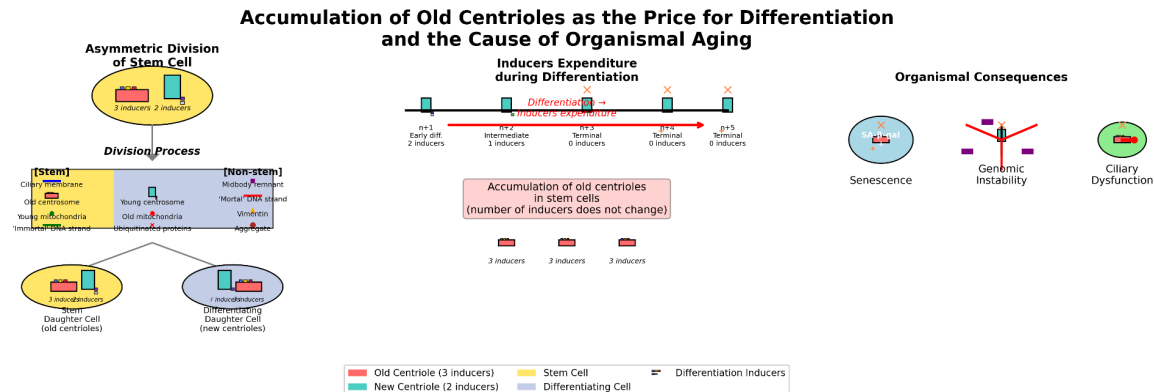
The Cellular Mechanism: Centriolar Renewal as the Key to Youth

The proposed strategy of continuous rejuvenation, as outlined previously, hinges on the ability to generate stem cells that are not merely genetically matched but are biologically young. While the derivation of such cells via in-vitro gametogenesis (IVG) provides a pathway for comprehensive epigenetic reset (Hayashi et al., 2012; Seisenberger et al., 2012), a deeper, organelle-level mechanism underpins its superior efficacy over other nuclear reprogramming techniques. The key innovation of our proposed protocol lies not in the avoidance of Somatic Cell Nuclear Transfer (SCNT), but in its purposeful supersession. By creating a pathway for auto-fertilization between gametes derived from a single individual, we establish a new embryonic lineage that is both nuclear and cytoplasmic in origin from the donor. A critical feature of this process is the recapitulation of the natural gametogenic elimination of the parental centrioles, followed by the de novo formation of new centrioles during in-vitro syngamy. The imperative for de novo centriologenesis is explained by the Centriolar Theory of Organismal Aging (Tkemaladze J., 2023). This process resets cellular age to its maximum potential, which is paramount for the de novo generation of new, young centrioles—organelles essential for proper cell division, differentiation, and the developmental competence of daughter cells. Stem cells equipped with young centrioles exhibit faster and more accurate division kinetics, thereby accelerating tissue regeneration and, consequently, rejuvenating the entire organism.

Figure 1. (A) Asymmetric division of stem cells and centriole inheritance. Stem cells undergo asymmetric division, resulting in two distinct daughter cell fates. The mother (old) centriole (red) contains more differentiation inducers, while the daughter (new) centriole (teal) contains less inducers. During division: (i) Stem daughter cell inherits predominantly old centrioles, maintaining stem cell properties with unchanged differentiation inducers numbers; (ii) Differentiating daughter cell inherits predominantly new centrioles, initiating the differentiation pathway; and this daughter centriole gives off 1 differentiation inducer, which is introduced into the nuclear DNA -> switches off the active gene network -> switches on another gene network -> irreversible differentiation occurs.

(B) Differentiation progression and inducer expenditure. The temporal sequence illustrates progressive differentiation through cellular generations ($n+1$ to $n+5$). New centrioles in differentiating cells progressively expend their differentiation inducers: generation $n+1$ ($n+2$ inducers, early differentiation) \rightarrow $n+2$ ($n+1$ inducer, intermediate) \rightarrow $n+3$ onward (0 inducers, terminal differentiation). Concurrently, old centrioles accumulate in the stem cell compartment while maintaining constant inducers numbers, preserving stem cell identity. Damage markers (\times , $+$) appear from generation $n+3$, indicating accumulating centriolar damage.

(C) Organismal consequences of centriolar aging. Accumulation of damaged, non-repairable centrioles in stem cells leads to three major aging phenotypes: (i) Cellular senescence characterized by SA- β -galactosidase positivity; (ii) Genomic instability manifested by multipolar spindle formation and chromosomal missegregation; (iii) Ciliary dysfunction with disrupted primary cilium formation, impairing critical signaling pathways (Hedgehog, Wnt). These processes collectively contribute to tissue degeneration and organismal aging.



Centrioles are cylindrical structures of somatic (non-embryonic) animal cells. Each centriole is associated with hypothetical sets of differentiation inducers. During asymmetric divisions of the maternal stem cell, the daughter cell, which retains its stemness, inherits new structures and molecules from the maternal cell (e.g., new nuclear DNA, mitochondria, proteins), but an old centriole with two old differentiation inducers from a pair of centrioles in the maternal cell. The release of one differentiation inducer from the differentiation set does not occur in the daughter cell. In contrast, the differentiating daughter cell receives old structures from the maternal cell (e.g., old nuclear DNA, mitochondria, proteins), but newly formed centrioles with a smaller number of inducers. Within it, a single differentiation inducer is released from the differentiation complex. During further differentiation, the reserve of differentiation inducers is consistently depleted: at early stages, their number decreases, at intermediate stages, they remain minimal, and by the terminal stage, differentiation inducers disappear completely. Since stem cells repeatedly undergo cycles of asymmetric division without repairing old centrioles, old centrioles do not leave the stem cell niche. The number of differentiation inducers associated with an old centriole remains constant, while their chronological (thermodynamic) age and the degree of structural "wear" of the centriole of the stem cell increase from cycle to cycle. This long-term retention of old centrioles in stem cells is accompanied by a number of consequences for the organism. Aggregation of old centrioles is associated with an increased tendency toward

senescence, increased genomic instability, and impaired ciliary function. Thus, the asymmetric distribution of centrioles—a hypothetical key mechanism for ensuring correct differentiation—creates a long-term biological cost: the actual accumulation of a pool of stem cells with structurally and functionally aging organelles, which contributes to organismal aging.

The Limitations of SCNT and the Centriolar Inheritance Problem

Somatic Cell Nuclear Transfer (SCNT), commonly known as cloning, has been a foundational technique for cellular reprogramming. It involves transferring the nucleus of a somatic cell into an enucleated oocyte, leveraging the oocyte's cytoplasm to reprogram the somatic nucleus back to an embryonic state (Wilmut et al., 1997). While successful in generating viable offspring and pluripotent stem cells, SCNT has inherent limitations, particularly concerning cytoplasmic inheritance. A crucial component of the cytoplasm is the centrosome, the cell's primary microtubule-organizing center, which governs the mitotic spindle apparatus, cell polarity, and intracellular transport (Conduit et al., 2015). In most animal cells, the centrosome consists of a pair of centrioles.

Critically, in sexual reproduction, the centriole is typically inherited solely from the spermatozoon, while the oocyte contributes the bulk of the cytoplasm but actively degrades its own centrioles (Szollosi et al., 1972). In SCNT, this natural paradigm is broken. The enucleated oocyte, now serving as the recipient, lacks centrioles. The donor somatic cell nucleus arrives with its own aged centrosome. This somatic centrosome is then often utilized to organize the first mitotic divisions of the reconstructed embryo (Simerly et al., 2003). This means that an organelle that has accumulated a lifetime of molecular wear-and-tear—including structural imperfections, post-translational modifications, and associated protein aggregates—is carried forward into the new embryonic lineage. Evidence suggests that centrioles are remarkably stable structures that can persist throughout an organism's lifespan, acting as a repository of cellular age (Wang & Stearns, 2017). The persistence of an aged centriole may contribute to the well-documented inefficiencies and abnormalities observed in SCNT-derived embryos, including developmental failures and premature aging phenotypes in cloned animals (Loi et al., 2011).

The IVG and Auto-Fertilization Protocol for a Complete Cellular Reset

Our proposed methodology circumvents this fundamental limitation by recreating the conditions of natural fertilization, but within an autologous context. The process begins with the generation of gametes—both oocytes and sperm—from the same individual via IVG protocols (Hikabe et al., 2016; Zhou et al., 2016). A pivotal step in natural gametogenesis is the elimination of the parental centrioles. During oogenesis, centrioles are deliberately lost, ensuring the mature oocyte is devoid of them (Szollosi et al., 1972). Similarly, spermatogenesis involves a profound remodeling of the cytoplasm and organelles to create a highly specialized sperm cell, with the centriole playing a critical role in the formation of the flagellar axoneme (Fishman et al., 2017).

When these in-vitro derived gametes are brought together in auto-fertilization, the resulting zygote is a product of two gametes that have undergone a developmental program designed to create a new, totipotent entity. Just as in natural fertilization, where the sperm provides the

centriole and the oocyte provides the environment for its duplication, our protocol allows for this event to occur de novo. The sperm-like cell derived from the individual contributes a centriole that, while functional, is newly formed through the IVG process, and thus free of the accumulated damage of a somatic centriole. Upon entry into the oocyte-like cytoplasm, this centriole is duplicated, forming the new centrosomal foundation for all subsequent cell divisions of the nascent embryo (Palazzo & Godinho, 2018). This represents a complete reset of the centrosomal aging clock.

The Centriolar Theory of Organismal Aging and its Reversal

The critical importance of this centriolar reset is underscored by the Centriolar Theory of Organismal Aging. This theory posits that the progressive dysfunction of centrioles and centrosomes acts as a fundamental timer of aging at the cellular and organismal level (Tkemaladze J., 2023). With age, centrioles can become structurally unstable, lose their precise duplication fidelity, and impair their function as microtubule organizers (Bettencourt-Dias & Glover, 2007). This has cascading consequences:

Mitotic Errors: Aged or dysfunctional centrioles can lead to mitotic defects, including chromosome mis-segregation and aneuploidy, which are hallmarks of aging and cancer (Gönczy, 2015).

Ciliopathy and Signaling Defects: Primary cilia, which are nucleated by the mother centriole, are crucial signaling hubs for pathways like Hedgehog and Wnt. Centriolar aging can disrupt ciliary function, impairing tissue homeostasis and repair (Anvarian et al., 2019).

Stem Cell Exhaustion: The fidelity of asymmetric cell division in stem cells—a process essential for maintaining tissue regeneration—is dependent on the correct orientation of the mitotic spindle, which is governed by the centrosome (Yamashita et al., 2010). Centriolar aging can disrupt this process, leading to premature stem cell depletion (Liang et al., 2020).

By generating new, pristine centrioles de novo through the IVG and auto-fertilization protocol, we directly target this proposed root cause of organismal aging. The stem cells derived from the resulting embryo are not only epigenetically rejuvenated but are also equipped with a young, fully functional centrosomal system.

Functional Consequences: Enhanced Regeneration and Organismal Rejuvenation

The transplantation of these "centriole-young" stem cells into an aged organism would confer a significant regenerative advantage. Hematopoietic stem cells (HSCs) with young centrioles would divide more rapidly and faithfully to reconstitute an aged immune system and blood lineage (Wagner et al., 2017). Mesenchymal stem cells (MSCs) would exhibit enhanced migratory and differentiation potential for tissue repair (Ullah et al., 2015). Because these cells outcompete the resident, aged stem cells whose divisions are hampered by their older, less efficient centriolar equipment, they would lead to a systemic rejuvenation of the body's regenerative capacity.

In conclusion, the centriolar reset is not a secondary benefit but a cornerstone of the proposed rejuvenation strategy. It moves the intervention beyond nuclear and epigenetic reprogramming to a holistic, organelle-level renewal. By leveraging the unique biology of gametogenesis and fertilization to generate new centrioles de novo, we can produce stem cells that are truly, comprehensively young. This approach directly addresses the Centriolar Theory of Aging and provides a mechanistic foundation for achieving the sustained healthspan extension necessary to avert the civilizational crisis of intellectual decline.

The Societal Benefit: Civilizational Safeguard

The preceding sections have detailed a looming civilizational crisis driven by temporal myopia and dysgenic fertility, and have outlined a novel biotechnological intervention to counteract the biological process of aging at its root. It is now critical to contextualize this intervention not merely as a medical breakthrough for individual health, but as a profound societal imperative. Rejuvenation biotechnology, as proposed herein, transcends the goal of treating disease. By enabling the indefinite maintenance of cognitive and physical vitality, it directly counters the systemic risks outlined in this paper. It allows the most capable individuals to remain active contributors for centuries, provides time for the less wise to mature, and enables society to accumulate knowledge and wisdom in a continuous, compounding manner. Thereby, it acts as a direct antidote to the impending demographic and intellectual collapse. In this framing, rejuvenation biotechnology is not a luxury or an ethical quandary, but a necessary safeguard for the long-term survival and flourishing of human civilization (de Grey & Rae, 2007).

Halting the Intellectual Drain and Accumulating Wisdom

The most immediate societal benefit is the arrest of the recursive drain on humanity's cognitive capital. As established, the current demographic trend selectively removes high-ability individuals from the future population through their reduced fertility (Beauchamp, 2016; Kanazawa, 2014). Rejuvenation therapy directly mitigates this loss by extending the healthy, productive lifespans of these very individuals. A scientist, engineer, or philosopher with a lifespan of 300 years could contribute to their field for centuries, achieving levels of mastery and insight that are unimaginable within a conventional 80-year lifespan (Maher & Baum, 2013). This extends the period of peak cognitive output, which typically occurs in mid-adulthood and gradually declines, potentially indefinitely (Hartshorne & Germine, 2015).

Furthermore, this paradigm facilitates the deep accumulation of wisdom. Wisdom, distinct from raw intelligence, is a complex trait involving pragmatic knowledge of life, emotional regulation, and the ability to make balanced judgments in the face of uncertainty. It is strongly correlated with age and life experience, but its development is often cut short by cognitive decline and mortality (Jeste et al., 2010). With extended healthspans, individuals would have the time not only to acquire vast amounts of knowledge but also to integrate this knowledge into a nuanced, systemic understanding of the world. The presence of a larger cohort of "wise elders"—individuals with centuries of integrated experience—could profoundly improve societal decision-making in governance, ethics, and long-term planning, counteracting the short-termism

that currently plagues our political and economic systems (Sandeep & Gopesh, 2017). This provides a corrective mechanism: while the less wise would have more time to learn and mature, the already-wise would remain to guide the process.

Transforming Demographics and Alleviating the Burden of Aging

The current global demographic shift towards an increasingly aged population poses severe economic and social challenges. Falling birth rates and rising life expectancies are leading to a smaller workforce supporting a larger population of retired, frail elderly, straining healthcare systems and social security frameworks (Chatterji et al., 2015). Rejuvenation biotechnology promises to fundamentally reshape this problematic demographic structure. By compressing morbidity and extending healthspan, the concept of a "retirement age" would become obsolete (Farrelly, 2020). Individuals could remain active, productive members of the workforce for centuries.

This would transform the dependency ratio, alleviating the economic burden on younger generations and creating a society composed of multiple generations of healthy, contributing adults (Weber, 2020). The societal cost of treating the chronic diseases of aging—which currently consumes a vast portion of healthcare budgets—would be dramatically reduced as the incidence of these diseases is postponed indefinitely (Goldman et al., 2013). This economic dividend could then be redirected towards education, infrastructure, and scientific research, creating a virtuous cycle of investment in the future.

Enhancing Cultural and Scientific Continuity

The rapid turnover of human generations, while a driver of cultural change, also leads to a perpetual loss of tacit knowledge and a "reinvention of the wheel." Complex scientific projects, such as the fight against climate change or long-duration space exploration, require stability and continuity that outstrip a single human lifetime (Maher & Baum, 2013). A society comprising long-lived individuals would possess a much stronger cultural and scientific memory. Lessons learned from past crises would be retained in living memory, not just in history books. Research programs could be pursued with a consistency and long-term vision that is currently impossible when principal investigators retire or die after a few decades (de Grey & Rae, 2007).

This continuity would be particularly valuable for "tacit knowledge"—the unwritten, intuitive knowledge gained through decades of experience in a complex field. The loss of such knowledge when an expert retires is a significant setback for many organizations and scientific disciplines. Indefinite healthspan would allow for the preservation and continuous refinement of this invaluable resource, accelerating the rate of scientific and technological progress (Weber, 2020).

Ethical and Equitable Implementation as a Prerequisite

It is imperative to acknowledge that the societal benefits outlined are contingent upon the equitable development and distribution of this technology. If access to rejuvenation therapies were restricted to a small, wealthy elite, it could exacerbate existing inequalities to an unprecedented degree, creating a literal biological caste system (Partridge et al., 2011). Therefore, the development of this technology must be accompanied by a parallel development of ethical and policy frameworks aimed at ensuring its broad availability as a universal human right, much like public health initiatives of the past (Farrelly, 2020).

Research into public attitudes towards life extension indicates a complex mix of hope and concern, with worries often centered on overpopulation, boredom, and equity (Partridge et al., 2009). Addressing these concerns proactively through transparent dialogue and careful policy planning is essential. The goal is not to create an immortal ruling class, but to foster a society where every individual has the opportunity to enjoy a long, healthy, and productive life, thereby enriching the collective whole.

The civilizational risks we face—the dysgenic drain on intelligence, the economic burden of an aging population, and the short-termism born of a capped lifespan—are interconnected symptoms of a single underlying problem: the biological reality of aging. The proposed strategy of continuous rejuvenation, leveraging IVG and centriolar renewal, offers a comprehensive solution. It targets the root cause, not the symptoms. By decoupling healthspan from chronological age, we can initiate a positive feedback loop: retained intellectual capital accelerates scientific progress, which further refines rejuvenation therapies and solves other existential challenges, leading to a more stable, wise, and resilient civilization.

Therefore, the pursuit of rejuvenation biotechnology must be recognized as a global priority. It is a necessary safeguard, a strategic investment in the very cognitive and demographic foundations upon which our future depends. To reject this pursuit is to accept the slow, certain decline foretold by our current demographic and psychological trajectories. To embrace it is to choose a vision of the future where humanity can truly flourish, unbounded by the biological constraints that have defined our species until now.

Discussion

The analysis presented in this paper posits a fundamental reevaluation of existential risk. We have argued that the most profound threat to human civilization is not an immediate, external catastrophe, but a slow, internal decay driven by the psychological and demographic consequences of a biologically capped lifespan. The evidence for a strong negative correlation between cognitive ability and reproductive rates is robust and persistent across post-industrial societies (Beauchamp, 2016; Kanazawa, 2014; Lynn & Van Court, 2004), creating a recursive drain on our collective problem-solving capacity. The proposed intervention—a strategy of continuous rejuvenation via autologous stem cells derived from an IVG and auto-fertilization protocol—is presented not merely as a medical breakthrough, but as a necessary civilizational safeguard to counteract this decline. This discussion will synthesize the argument, address

potential limitations and ethical objections, and consider the broader implications of this paradigm shift.

Synthesis of the Argument: From Cellular Renewal to Civilizational Resilience

Our thesis connects a microscopic biological mechanism to a macroscopic civilizational outcome. At the cellular level, the aging process is driven by the accumulation of damage, including the progressive dysfunction of stem cell pools and the deterioration of fundamental organelles like centrioles (López-Otín et al., 2013; Tkemaladze J., 2023). The proposed IVG-based protocol directly targets this by enabling a near-complete reset of cellular age. The critical step of de novo centriologenesi during auto-fertilization (Fishman et al., 2017; Szollosi et al., 1972) ensures that the resulting stem cells are not only epigenetically young (Hayashi et al., 2012) but also equipped with a pristine centrosomal system, which is essential for high-fidelity cell division and differentiation (Gönczy, 2015). The periodic transplantation of these cells aims to maintain the body's regenerative capacity indefinitely, thus compressing morbidity and extending healthspan (de Grey & Rae, 2007).

This individual-level medical benefit is the foundation for the societal-level impact. By eliminating the certainty of age-related decline and death before 120 years, we directly attack the root of "temporal myopia" (Sandeep & Gopesh, 2017). When the future horizon of an individual extends for centuries, the psychological and economic calculus changes. Long-term projects, from environmental restoration to interstellar exploration, become personally relevant (Maher & Baum, 2013). Furthermore, by enabling the most intellectually capable individuals to remain healthy and productive for centuries, we halt the dysgenic cycle that is currently selectively removing their cognitive traits from the population (Lynn & Harvey, 2008). This allows for the accumulation of wisdom (Jeste et al., 2010), the preservation of tacit knowledge, and the creation of a demographic structure where experience does not equate to frailty, thereby alleviating the economic burden of an aging population (Goldman et al., 2013).

Addressing Limitations and Ethical Counterarguments

The vision outlined is ambitious and inevitably faces significant scientific, ethical, and practical challenges that must be rigorously addressed.

Scientific and Technical Hurdles: The entire protocol hinges on the successful development of safe and efficient human in-vitro gametogenesis. While groundbreaking progress has been made in murine models (Hikabe et al., 2016; Zhou et al., 2016), translating this to humans presents a formidable challenge, including ensuring the genomic stability of derived gametes and embryos. Furthermore, the directed differentiation of the resulting embryonic stem cells into specific, functional adult stem cell populations (e.g., HSCs, MSCs) with high purity and without tumorigenic risk remains an area of active research (Ditadi et al., 2015; Ullah et al., 2015). The long-term effects of periodic, whole-system stem cell replenishment are unknown and would require decades of careful preclinical and clinical study.

The Equity and Justice Problem: This is perhaps the most significant ethical challenge. If such a powerful technology were to become available, there is a grave risk that it would initially be accessible only to a wealthy global elite, potentially creating a biological caste system of "ageless" elites and a mortal underclass (Partridge et al., 2011). This could exacerbate existing social inequalities to an unprecedented degree. Proactive policy, perhaps framing access to rejuvenation as a universal human right or a public health imperative, would be essential to avoid this dystopian outcome (Farrelly, 2020). The development path must be as concerned with equitable distribution as it is with scientific efficacy.

Psychological and Societal Adaptation: The prospect of living for centuries is psychologically daunting. Research into public attitudes reveals concerns about boredom, loss of meaning, and the psychological impact of outliving multiple generations of loved ones (Partridge et al., 2009). Society would need to adapt profoundly—rethinking concepts of career, marriage, education, and retirement (Weber, 2020). However, it is crucial to note that the goal is not to extend the period of decrepitude, but to extend healthspan. A 250-year-old in a 25-year-old's body would likely find new purposes, relationships, and careers, just as people do now across a standard lifespan.

Overpopulation and Resource Concerns: A common objection is that defeating death would lead to unsustainable overpopulation. This objection rests on a Malthusian perspective that ignores the demographic transition. The very same societies where rejuvenation would first be adopted are those with the lowest birth rates (Vollset et al., 2020). Furthermore, as individuals have more time to achieve their goals, the perceived need to have children early or at all may diminish, potentially further lowering birth rates. The solution to resource constraints lies in technological innovation and sustainable practices—the very progress that a long-lived, intellectually robust population is better equipped to achieve.

Future Directions and Concluding Implications

The vision presented here mandates a reorientation of scientific and public policy priorities. Future research must aggressively pursue the foundational science of IVG, centriolar biology, and stem cell transplantation. Concurrently, ethicists, economists, and policymakers must begin the complex work of designing frameworks for the clinical translation, regulation, and equitable distribution of rejuvenation therapies.

In conclusion, the choice facing humanity is not between a familiar present and an uncertain future with radical life extension. The choice is between two futures: one of slow, certain intellectual and demographic decline driven by our current biological constraints, and one of renewed potential, where we actively seize control of our biological destiny to secure a flourishing, long-term civilization. The arguments and evidence presented herein suggest that the dysgenic drain on human intelligence constitutes a primary existential risk. The continuous rejuvenation strategy, while technologically formidable, offers a plausible and direct pathway to mitigate this risk. It represents a definitive break from the reactive paradigm of treating age-related diseases, and instead proposes a proactive, systemic intervention for sustaining the health of both the human body and the body politic. Therefore, the pursuit of rejuvenation

biotechnology must be recognized not as a niche scientific endeavor, but as a critical, overarching goal for ensuring the long-term survival and vitality of human civilization.

Conclusion

This paper has articulated a comprehensive argument for a paradigm shift in how we perceive the greatest long-term threat to human civilization and the most viable strategy to counter it. We have moved beyond conventional narratives of existential risk to identify a slow, insidious, and systemic process of decay: the civilizational nihilism and intellectual decline driven by the biologically capped human lifespan (Dong et al., 2016). The evidence is compelling that a strong negative correlation exists between high cognitive ability and reproductive rates, creating a dysgenic feedback loop that systematically drains humanity's most critical resource—its problem-solving capacity (Beauchamp, 2016; Lynn & Harvey, 2008). This trend, compounded by the short-termism inherent in a society of individuals with finite horizons (Sandeep & Gopesh, 2017), constitutes a primary existential risk far more profound than any single technological or environmental catastrophe.

In response, we have proposed a radical but scientifically-grounded solution: a strategy of continuous rejuvenation. This approach is founded on leveraging the power of in-vitro gametogenesis (IVG) to generate autologous, biologically young stem cells (Hayashi et al., 2012; Hikabe et al., 2016). The key innovation of this protocol lies in its ability to effect a complete cellular reset, culminating in the de novo formation of young centrioles during auto-fertilization—a crucial advantage over somatic cell nuclear transfer that directly addresses the Centriolar Theory of Aging (Fishman et al., 2017; Tkemaladze J., 2023; Szollosi et al., 1972). The periodic transplantation of these pristine stem cells aims to maintain the body's regenerative potential indefinitely, thereby compressing morbidity and extending healthspan (de Grey & Rae, 2007; López-Otín et al., 2013).

The ultimate significance of this intervention, however, transcends the monumental achievement of conquering age-related disease for the individual. Its true value is as a civilizational safeguard. By enabling the indefinite maintenance of cognitive and physical vitality, this technology directly counters the mechanisms of intellectual decline. It allows the most capable minds to remain productive contributors for centuries, fostering an unprecedented accumulation of knowledge and wisdom (Jeste et al., 2010). It transforms the demographic structure of society, alleviating the economic burden of an aging population and creating a future where experience is not synonymous with frailty (Goldman et al., 2013; Vollset et al., 2020). Most importantly, it dismantles the psychological architecture of "temporal myopia," incentivizing long-term planning and stewardship on a scale that matches the grandeur of humanity's potential (Maher & Baum, 2013).

The path forward is undeniably fraught with formidable challenges. The scientific hurdles of perfecting human IVG and safe, large-scale stem cell therapies are significant (Zhou et al., 2016). The ethical imperatives of ensuring equitable access and navigating the profound societal changes are equally daunting and must be addressed with proactive and rigorous policy (Farrelly, 2020; Partridge et al., 2011). Public discourse must engage with the psychological and

philosophical dimensions of extended lifespans to foster a mature understanding of this new potential reality (Partridge et al., 2009).

Nevertheless, the choice before us is clear. We can accept the current trajectory—a slow but certain convergence towards a future of intellectual stagnation, demographic imbalance, and cultural short-termism. Or, we can choose a different vision. We can choose to invest in a future where biological aging is not an immutable fate, but a treatable condition. We can choose to create a civilization where the cumulative wisdom of centuries guides our decisions, where the human mind is preserved in its prime, and where our horizons are limited only by our collective imagination.

The pursuit of rejuvenation biotechnology, therefore, is not a niche medical quest or a fantasy of immortality. It is a strategic, necessary, and urgent investment in the very foundations of a flourishing long-term civilization. It is the most profound safeguard we can devise against the quiet, creeping threat of our own biological limitations. The vision of the future we choose to build begins with the choices we make today, and embracing this scientific frontier is perhaps the most critical choice of all.

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