

Life extension technology gives us a bleak future: more white men

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I was raised in a household in which my mother, a divorced old-school feminist, openly hoped for the day when the "racist, angry old white men," who keep our country in sociopolitical purgatory, would die. In my youth, her mantra made me optimistic that the passing of time alone might alleviate some of our country's most persistent conservative tendencies: hostility towards reproductive rights, demonization of the poor, environmental recklessness. But almost 30 years later, she's still saying it, and given the <u>United</u> <u>States'</u> (and <u>the world's</u>) increasing population of old folk—where whites continue to outlive <u>people of color</u> and education access <u>creates huge gaps</u> in life expectancy—she might be saying it until she dies.

<u>Since 1840, life expectancy has been on a steady rise</u>, but <u>a recent CDC report created</u> <u>some alarm</u> when it revealed that the death rate of whites in the U.S. increased slightly between 2013 and 2014 due to the murders, suicides, and alcohol and drug overdoses that canceled out gains in cancer and heart disease treatment. What some reports failed to mention was that <u>life expectancy for whites diverges along gender lines</u>, with women in rural and small town settings coming out on the bottom. If you're an American woman who lives into old age, you'll probably be kept alive for longer than your grandparents thanks to medical advances. But you have to <u>make it through your 30s</u>, 40s, and 50s first. It's a reminder of what the World Health Organization has pointed out while advocating for better systems of national care: <u>health inequalities are untouched</u> by recent increases in life expectancy.

This coverage made me think of the burgeoning life extension craze that's <u>set up shop in</u> <u>Silicon Valley</u> courtesy of extremely rich white men who think the biggest health problem facing the country—and the world—isn't about access, education, bad policies, or wealth inequality but rather insufficiently aggressive medical advancements. I first heard of the life extension movement more than a decade ago, when I met a fervent practitioner who took hundreds of vitamins and supplements each day. His behavior seemed eccentric and harmless at the time, but as more members of our country's .01%— almost always male, and almost always white—become engaged in the attempt to draw out life spans, the potential dystopian consequences are harder to ignore. While people of color, trans folks and the poor struggle to live within the timespan they're allegedly already allotted by virtue of living in an industrialized nation, a handful of powerful white guys promote themselves as humanitarians for trying to extend the already long lives of the favored few. There aren't many futures more chilling to me than one in which not even the march of time can free us from our oligarchs.

That's a little hyperbolic, I know, since most advocates for a radically extended lifespan don't believe actual immortality is achievable. But establishing a much longer life expectancy, whether that means a life that lasts 120 years or 500 years, would demand solutions to many fresh problems: Who pays for the treatments that make prolonged life possible? How would people afford basic expenses during their extra decades when <u>they're already struggling</u> to provide for themselves now? Would we be living more years only <u>so we could work more years</u> and if so, is the longer life bargain worth it?

Those are moot inquiries for the world's richest citizens, which is why they've not preoccupied themselves with providing answers. The men who serve as the face of the movement aren't doing it many favors to win hearts and minds. Oracle co-founder Larry Ellison, who's spent almost half a billion dollars backing anti-aging research, has <u>said</u> death makes him "very angry" and that it's "incomprehensible": "How can a person be there and then just...not be there?" (This is the type of juvenile reaction that's passed off as "disruptive" and bold inquiry among the tech genius set.)

Similarly, uber-rich libertarian Peter Thiel—in the news recently for spinning his personal vendetta against Gawker as "philanthropy"—<u>repeatedly tells reporters</u> the story of when he first learned of death at age three; his attitude toward mortality has been in a state of arrested development ever since. When <u>George Packer of *The New Yorker*</u> prodded Thiel to comment on the access and affordability discrepancies life extending technologies might entail, Thiel delivered one of the most dismissive non-replies of all time: "Probably the most extreme form of inequality is between people who are alive and people who are dead."

This cavalier vapidity led Packer to summarize Thiel's vision of an ideal future as one in which "a few thousand Americans ... live to a hundred and fifty, while millions of others ... perish at sixty." Meanwhile, aspiring Renaissance man, <u>Russian billionaire Dmitry</u> <u>Itskov</u>, is devoted to pioneering cybernetic immortality by 2045 so he can "finally have 10,000 years for numerous hobbies." Which is a fine dream, but perhaps not a helpful one when juxtaposed against the fact that few fellow humans have the disposable income to fully devote themselves to even one hobby, let alone "numerous" ones.

Such immature self-interest is made more troubling by disingenuous attempts to conceal it, which often borrow from the rhetoric of socially conscious organizing. Those most publicly engaged in staving off death frame their efforts as morally unimpeachable, conceived in a

spirit of egalitarian benefit and heroic humanitarianism rather than borne of their own primitive existential struggles and egomania. Bill Maris, who helped found Google's longevity-focused Calico Labs, <u>creates a convenient false dichotomy</u> "between making a lot of money or finding a way to make people live longer," as if the technologies and medicines related to the latter wouldn't be hugely profitable—Calico is a for-profit company, after all—or as if the latter is less selfish. (The goal is rarely making "people" in the abstract live longer; "I just hope to live long enough not to die," Maris has said.)

Worse is the non-billionaire face of anti-aging promotion, British researcher Aubrey de Grey, who tars criticism as the symptom of a widespread "pro-ageing trance" that renders people complacent and foolish with regards to combating the scourge of age. If not for that trance, we'd all be "<u>agitating</u>" like righteous revolutionaries to put an end to the tyranny of organic life's limits. de Grey has implied that old people at peace with their mortality probably just aren't "getting [much] out of life"—no way are they mature, rational folks who led a life with which they're content.

And, <u>under the guise of fighting ageism</u>, he's described opposition to or disinterest in life extension as a type of discrimination against the elderly and therefore an ethical failure. These ideas are showcased in a piece he wrote for the Cato Institute, a libertarian think tank co-founded by one of the "<u>cartoonish evil</u> billionaire"—and at this point, quite old—Koch brothers. It's within this essay that de Grey calls George W. Bush "an icon of contemporary moral philosophy" in an attempt to illustrate that even simpletons can recognize "it is wise to always err on the side of life." (I think. Either that or he was being sincere, a possibility I'm not uncharitable enough to consider.)

Furthermore, de Grey, and the foundation he cofounded, is <u>explicitly critical</u> of the amount of money spent on HIV and cancer compared to how much is invested in life extension in and of itself. For he and his colleagues, it's not just that extending life should be a medical priority, it's that it should be *the* priority. Google CEO Larry Page has also <u>described anticancer efforts</u> as not effective enough in improving life expectancy and suggested that cancer research is evidence of us not "focus[ing] on the right things"—in spite of the fact that, because of the cell replication required to live, cancer is currently "<u>inevitable</u>" if a human lives for long enough.

de Gray <u>recognizes the threat</u> cancer proposes to long life-havers, but believes cancer <u>can</u> <u>only be eliminated through eradication of a specific gene</u> present in each cell of the human body, and subsequent stem cell treatments to deal with the considerable side effects. If this sounds like it would be very expensive, don't worry; de Grey claims it's "<u>inevitable</u>" that anti-aging treatments will be free and widely available. (In his defense, he lives under the UK's health care system, not ours.) Mostly, though, he <u>ridicules questions regarding</u> <u>inequality</u> as worthlessly speculative about the future, and deems them <u>an unreasonable</u> <u>obstacle to research</u> that should be undertaken regardless of its own wider-reaching implications.

Refusing to grapple with ethical and practical inquiries before pouring resources into a colossal project with a dubious benefit is, to me, far more irresponsible than allowing life to resolve in the natural way. But for de Grey, death is an absolute ill and life an absolute

good; if you're living, you're better off, no matter what your circumstances. (He's used the case of persistently vegetative Florida woman Terry Schiavo to raise the issue of whether it's preferable to perpetuate one's life at all costs. I suspect I'm in considerable company when I say, "no" and also, "maybe choose a different example.") <u>Most Americans aren't interested in clinging to life at all costs</u>, and most of us <u>don't want to live much longer than we already do</u>. We (rightly) suspect that our quality of life will diminish as time passes, and feel guilty about further taxing the environment and finances of those left to care for us. That's not a "pro-ageing trance"—that's common sense and basic decency.

There's nothing objectively offensive about Ellison, Itskov, and Thiel wanting to live forever because they're afraid to die or because their fortunes require centuries within which to be fully exhausted. No matter how selfishly conceived, the research they fund might result in a host of discoveries with benefits even outside the range of its guiding purpose.

But it could also yield procedures and products available only to the most affluent and well-positioned among us, technologies that help these people further consolidate their wealth and power in dramatic ways. It's not wrong for the rest of us to be suspicious or critical of their project's motives and execution. And as Silicon Valley titans <u>ignore their</u> <u>own water crisis</u> while trying to devise ways for their individual, water-consuming selves to stick around for an extra century on top of all the new lives we'll be welcoming onto the planet, we're equally justified in withholding the good Samaritan status they try to claim.

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It's disconcerting to see intelligent people treat aging as a "<u>fundamental unsolved problem</u>" or a "<u>side-effect</u>" instead of an elegant solution to an ecosystem that entails living beings using limited resources. We're finite because our resources are finite. Life needs to be recycled so more life is perpetuated; just give a listen to "The Circle of Life" if you need refreshing on that point. For an individual to opt out of death entirely has serious repercussions for everyone, and every*thing*, else.

de Grey makes a valid point in arguing that many existing medical processes are methods of postponing death—and for years, the question has been posed as to whether we already <u>live too long</u>. (Many misanthropes, environmentalists, and pragmatic thinkers say yes.) Yet many medical processes are also, and sometimes primarily, concerned with alleviating *suffering*, a word that rarely comes up when life extension is at the fore. Very few of us want to suffer or believe suffering serves a purpose. But plenty people, Ellison and Thiel excepted, recognize the value of death and may want to die after they feel they've sufficiently lived.

When I think about the nightmarish possibility of a world in which health care inequalities are even further exacerbated, two things come to mind. The first is Dick Cheney, the former vice president, shooter-in-the-face of a friend, and ghoulish <u>war criminal</u> who received a heart transplant in 2012, at age 71, after struggling with his health for years. During his time in office, it was something of <u>a nation-wide joke</u> that he <u>would never die</u>;

here was a man as amoral and <u>openly reviled</u> a politician as the U.S. had ever seen, yet not even natural causes could rid us of him. I imagine his natural lifespan prolonged far beyond the extra years he's already obtained through his disproportionate wealth and privilege—a Dick Cheney who lasts another 30 years, another 50, another 100—and I shudder.

The second is of one of my <u>favorite bell hooks quotes</u>: "Women and children all over the world want men to die so they can live." She delivers this line in the context of reflecting on how patriarchal power poisons men, and renders their very lives—shaped by the toxic pressures of entitlement, violent tendencies, and unearned authority—antithetical to the ability of others to pursue fully realized and free self-determination. Sometimes, living under the broken and unjust systems governing our country means a natural death seems like the best hope we have of sloughing off our worst fellow humans. It's cold comfort, but it's some comfort nonetheless. Give me a world in which oligarchs and politicians are biologically incapable of staying in power for centuries or else, please, give me an early death.