

# Low-Dose Rapamycin Passes First Human Safety Trial

Insights from the PEARL Trial: A Landmark Year-Long  
Study



# THE DIMMER SWITCH OF AGING

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## From Transplant to Longevity

Originally discovered in Rapa Nui soil, Rapamycin is an FDA-approved drug traditionally used at high daily doses as an immunosuppressant. Modern geroscience explores its potential at **intermittent low doses** to extend healthspan by modulating the nutrient-sensing mTOR pathway.

# THE PEARL STUDY DESIGN

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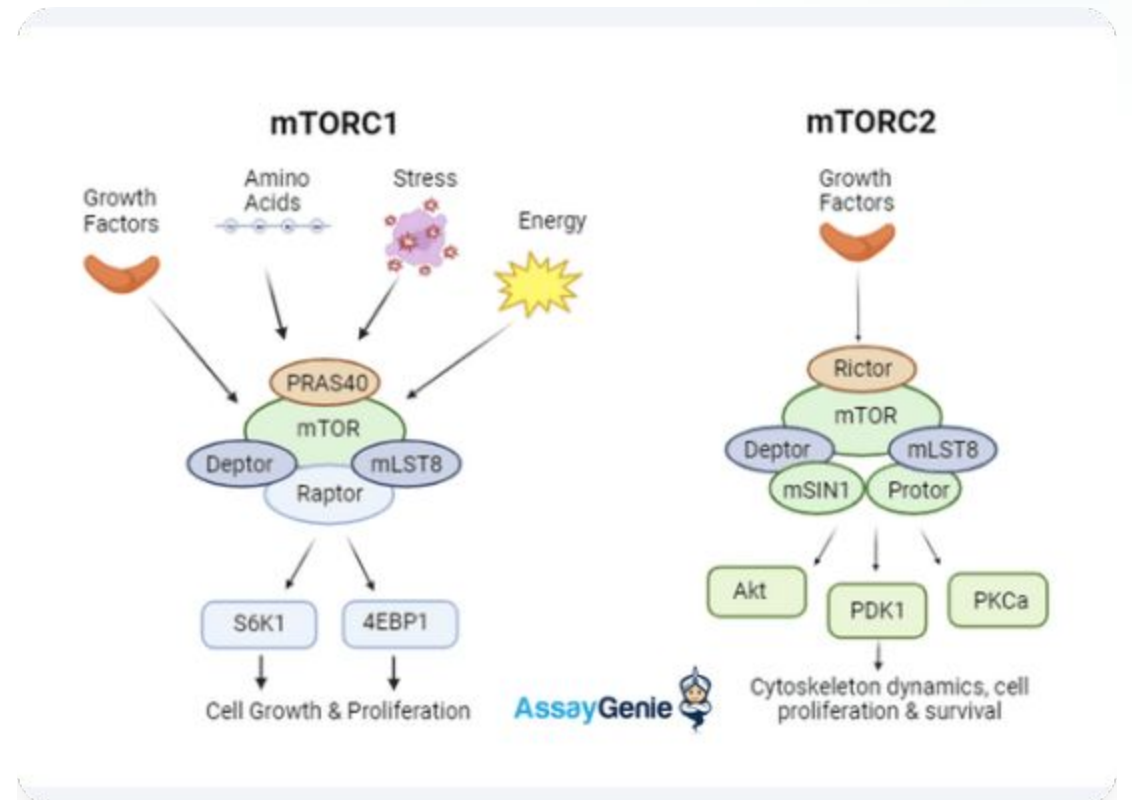
Parameter	Clinical Details
Study Type	Randomized, Double-Blind, Placebo-Controlled (48 Weeks)
Participants	114 Healthy Adults (Aged 50–85)
Dosing Groups	Placebo vs. 5mg Weekly vs. 10mg Weekly (Compounded)
Primary Goal	Evaluate Long-Term Safety and Visceral Adiposity Changes

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# MECHANISM: THE MTOR PULSE

## mTORC1 vs. mTORC2

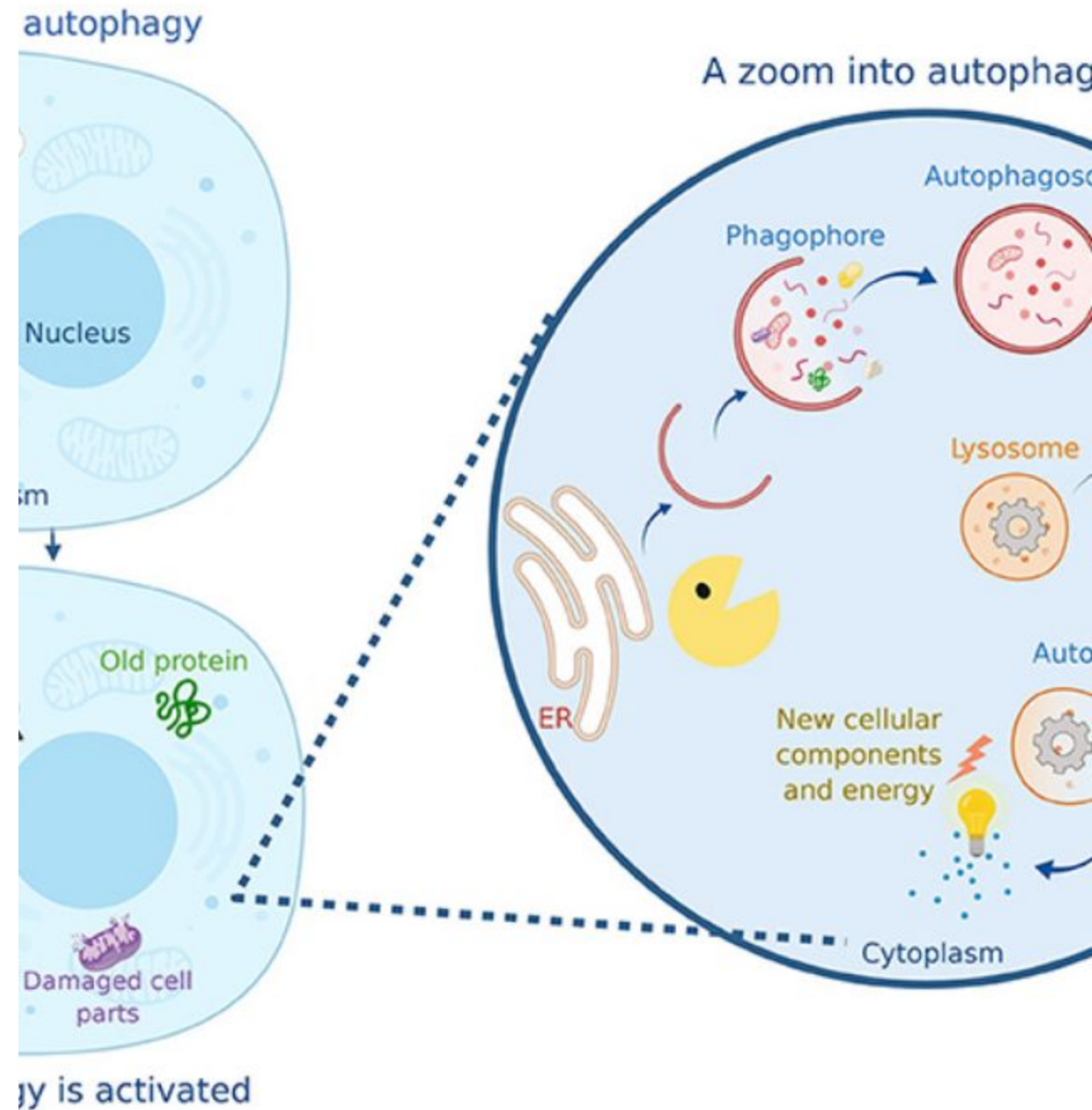
High-dose daily use inhibits both complexes, leading to immunosuppression. The weekly "**pulse**" protocol selectively suppresses **mTORC1** (nutrient sensing) while leaving **mTORC2** (immune integrity) largely intact, allowing for periodic recovery.



# CELLULAR CLEANUP

## Inducing Autophagy

By temporarily braking mTORC1, cells enter a self-cleaning mode known as **autophagy**. This process recycles damaged proteins and organelles, reducing the "toxic burden" that accumulates with age and driving cellular rejuvenation.



# SAFETY PROFILE: ADVERSE EVENTS

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*\*Adverse events were mild and similar across groups. Most common side effect was transient gastrointestinal discomfort. No major metabolic derangement or immunosuppression observed.*

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# KEY FINDING: LEAN MUSCLE MASS



## Benefits in Women

Statistically significant improvement in lean tissue mass observed in women using the 10mg weekly dose.



## DXA Validation

DEXA scans confirmed muscle preservation, suggesting rapamycin may combat sarcopenia (age-related muscle loss).



## Proteostasis

Improved muscle quality via enhanced protein folding and clearance of aggregate damage.

# SIGNIFICANT PAIN REDUCTION

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**p = 0.01**  
Self-Reported Pain Improvement

**5**

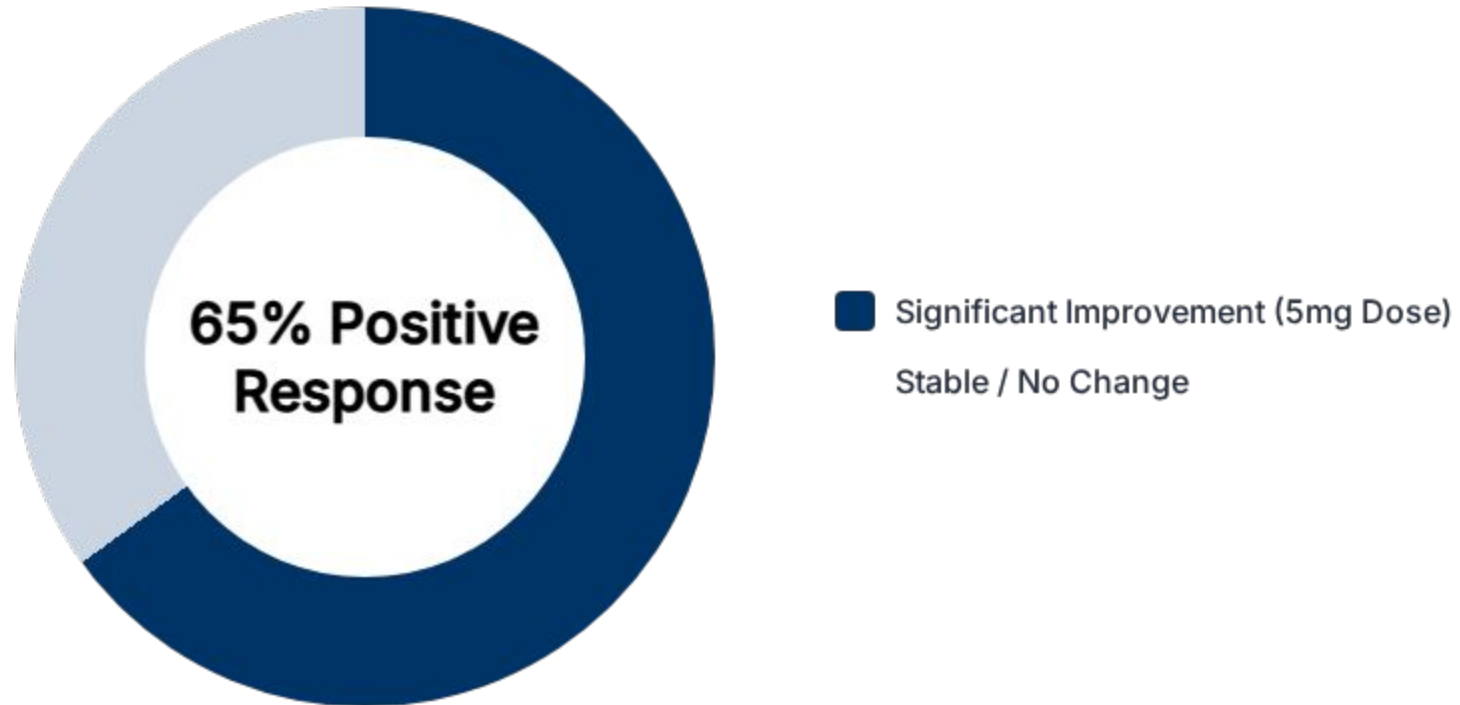
## Gender-Specific Efficacy

The 10mg dose group showed a marked reduction in chronic pain signals, particularly in women. This aligns with previous anecdotal reports and suggests anti-inflammatory benefits at the joint and systemic level.

Researchers noted a medium-to-large effect size ( $\eta^2 = 0.168$ ), indicating a clinically meaningful impact on quality of life.

# EMOTIONAL WELL-BEING SCORES





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Participants in the 5mg weekly group reported improved emotional health and general well-being ( $p = 0.023$ ).

# INTERMITTENT DOSING PROTOCOLS

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-  **The Pulse Method:** Weekly administration allows the drug to clear the system (Trough < 5 ng/mL) before the next dose.
  -  **Bioavailability Lesson:** Compounded rapamycin was found to be 1/3 as bioavailable as generic formulations.
  -  **Clinical Supervision:** Despite safety, protocols should be monitored to manage potential minor lab shifts (e.g., HbA1c).
  -  **Personalization:** Dose-response varies; TROUGH levels are key to avoiding chronic mTORC2 inhibition.
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# AGING METRICS & FUTURE OUTLOOK

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Projected impact: Scaling from pilot RCTs to large-scale bio-marker tracking for human longevity.





# Questions?

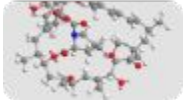
The PEARL trial proves that low-dose, intermittent rapamycin is safe for healthy adults, paving the way for the first true gerotherapeutic interventions.

Reference: Moel et al. (2025). Aging-US Vol 17, Iss 4.

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# IMAGE SOURCES

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