

 A Singapore Government Agency Website [How to identify](#) 

Keynote Speech on "Enabling evidence-based-longevity innovation through collaborative regulation" by Adj Prof (Dr) Raymond Chua, CEO/HSA, at the NUS Academy for Healthy Longevity 2026 Geromedicine Conference

Prof Andrea Maier and Prof Hans Meij, Co-Founders of the NUS Academy for Healthy Longevity

Distinguished guests and fellow colleagues

1. Good morning everyone. It is my honour to be here with you today at this Geromedicine Conference organised by the NUS Academy for Healthy Longevity.
2. I want to thank the Academy for bringing all of you together for this conference. This is indeed an important platform for the brightest minds in longevity science to come together.
3. The field of longevity field is growing and evolving rapidly around the world. The longevity-related technologies and services market is driven by an ageing population and increasing consumer awareness of preventive healthcare. In Singapore, as our population ages and a healthy lifespan becomes a priority, we have an opportunity to shape this space in a way that is evidence-based, clinically sound, and aligned with public health goals.
4. Given these developments and evolving complexity of longevity science, this space will require scientific staff, clinicians, academicians, industry and regulators, to come and work together in an integrated ecosystem.

Singapore's commitment to redefining healthy ageing

5. Our national priorities also align perfectly with this trajectory. Through the Healthier SG and Age Well SG initiatives, Singapore is embedding prevention, functional health and community support across the lifespan. These are not just policy initiatives. They represent Singapore's commitment to redefining what healthy ageing means.

6. Under the Research, Innovation and Enterprise 2030 plan, or RIE2030, the Government has made substantial investments in research and innovation priorities, including areas focused on ageing. This reflects the Government's position that reducing the chronic disease burden and increasing healthy longevity will yield significant benefits for individuals and our population.

7. Therefore, it is timely to share how HSA is contributing to this national priority for healthy ageing. As you know, HSA is a multidisciplinary scientific and regulatory agency. One of our key roles is to regulate health products to ensure they meet standards of safety, quality and efficacy. When we examine the current landscape of longevity-related health products, we see a growing market. There is a proliferation of products entering the market with varying levels of clinical evidence. This includes products ranging from health supplements to digital applications, and even to diagnostics and repurposed drugs. This creates consumer confusion between well-researched interventions and those with limited evidence or unsubstantiated claims.

Geromedicine As A Paradigm Shift

8. That's why this geromedicine conference is a timely opportunity for us to examine this together. Geromedicine is an emerging field that applies the biology of ageing, or geroscience, to clinical practice. It aims to optimise healthspan and prevent age-related diseases by utilising biomarkers for diagnosis, or gerodiagnostics, and through targeted interventions known as gerotherapeutics, which include both pharmacological and lifestyle interventions. In short, geromedicine is a paradigm shift in how we tackle diseases for the

elderly. It is moving us from treating diseases after they occur, to preventing them by targeting the fundamental mechanisms of ageing. This approach holds immense promise for transforming how we approach healthcare for our ageing population.

9. But to progress on these innovations, we need to have in place the necessary guardrails for responsible advancement. I understand that this conference will discuss repurposed drugs in geromedicine, precision gerotherapeutics, novel biomarkers, ethics, and regulatory pathways. These discussions are crucial because they address the intersection of scientific possibility, as well as regulatory and ethical responsibility.

10. At HSA, we have taken a risk-based regulatory framework that scales from high-risk products requiring rigorous evaluation to low-risk products with proportionate oversight. For products making disease prevention or treatment claims used in clinical practice, our policies require comprehensive evaluation for safety, quality and efficacy. Examples of such products are bisphosphonates and selective estrogen receptor modulators drugs for osteoporosis treatment and prevention and metformin for delaying diabetes onset and treatment. For products that come with general health support claims, we take a lighter-touch approach, treating them as health supplements. This includes ergothioneine and nicotinamide mononucleotide supplements for supporting healthy ageing. This risk-proportionate approach allows innovation to flourish while maintaining appropriate safety standards.

11. However, the longevity space presents unique complexities that challenge conventional regulatory approaches. We do not yet have universally agreed ageing biomarkers that reliably predict long-term functional outcomes. For example, if a biomarker improves, does frailty actually decline? The time horizon of ageing science challenges conventional clinical validation timelines. Amid this uncertainty, consumer confusion can arise, making collaboration not just beneficial but essential. We need the collective wisdom of researchers, clinicians, industry, and regulators working together.

Building Future of Evidence-based Longevity Innovation

12. So how do we build the future of longevity medicine and geromedicine together? First, we must work collaboratively to develop shared standards of evidence, validated biomarkers, appropriate clinical endpoints, and reproducible data. This requires unprecedented cooperation between academia, industry, and regulatory bodies.

13. Second, we need to strengthen clinical governance and co-create adaptive regulatory approaches as the science matures. We are starting to see how some licensed healthcare providers are providing longevity-related tests and prescribing supplements to their patients, and hence, we need to build the governance framework for licensees and medical professionals to provide such longevity-related services safely and ethically.

14. Third, we must conduct comprehensive consumer education to promote scientific literacy. We need to reinforce that longevity is not built on shortcuts or miracle cures. True longevity is built on fundamentals—movement, nutrition, prevention, and connection—complemented, where evidence supports it, by innovation.

15. This brings us back to our central theme: the need for science, clinical practice, industry and regulators to converge and work closely together in shaping the future of longevity innovation. Only through this convergence can we ensure that the promise of geromedicine translates into real benefits for patients and society.

16. Looking ahead, HSA is embarking on a comprehensive review of our regulatory framework for complementary health products, or CHPs. We anticipate finalising the regulations by mid-2028. We will be engaging extensively with the research community, healthcare professionals, and industry stakeholders to gather your valuable insights on this framework. This regulatory modernisation is particularly timely as it will better support the development of longevity health products, whilst ensuring robust consumer protection and clear regulatory pathways for emerging health products.

Conclusion

17. In conclusion, we may not aim to be the loudest voice in longevity innovation. But we should be among the most trusted. The future of healthy ageing depends not on any single breakthrough, but on our collective commitment to evidence-based, ethically grounded progress. We must align innovation with evidence, anchor our progress in ethics, and move forward together as a unified ecosystem. Through that, I believe Singapore can serve as a global exemplar of responsible longevity innovation.

18. Thank you, and I look forward to the rich discussions and engagements ahead that will help shape this exciting frontier of medicine.

 Consumer, Healthcare professional, Industry member

Published: 26 Feb 2026

[Subscribe](#)  to stay up to date with HSA news and regulatory updates.