

A Chance to Understand the Use of Chronically Used Drugs in Cancer Therapy

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Introduction

Cancer, a complex and life-threatening disease, remains a significant global health challenge. Over the years, medical advancements and research have led to the development of various treatments, including surgery, radiation therapy, and chemotherapy. Chemotherapy, in particular, has been an integral part of cancer treatment since the mid-20th century. However, the success of chemotherapeutic drugs varies, and some cancer types exhibit resistance to these drugs, leading to treatment failure and disease progression. To combat these challenges, researchers are increasingly exploring the potential of chronically used drugs, initially designed for other medical conditions, as adjuncts to cancer therapy. This article delves into the concept of utilizing chronically used drugs in cancer therapy, highlighting their mechanisms of action, potential benefits, challenges, and ongoing research in this field [1].

The idea of repurposing chronically used drugs in cancer treatment stems from the recognition that certain medications designed for other diseases possess properties that might be beneficial in combating cancer. This approach offers several advantages, such as faster drug development timelines, reduced costs, and established safety profiles. Additionally, repurposed drugs often have well-defined pharmacokinetics and are readily available; making them potentially accessible to a larger population of cancer patients. Various chronically used drugs have demonstrated potential anticancer effects through distinct mechanisms of action. Drugs like Non-Steroidal Anti-Inflammatory Drugs (NSAIDs), including aspirin, have been studied for their potential to inhibit tumor growth and metastasis. These drugs can modulate inflammation-associated pathways and suppress the production of pro-inflammatory molecules linked to cancer progression. Some drugs used to treat autoimmune diseases, such as methotrexate, have shown anticancer activity by interfering with key metabolic pathways in cancer cells, disrupting their ability to proliferate. Certain medications used for cardiovascular conditions, such as bevacizumab, have been repurposed as anti-angiogenic agents in cancer therapy. They target Vascular Endothelial Growth Factors (VEGF) to inhibit the formation of blood vessels that supply nutrients to tumors, impeding tumor growth [2].

As cancer cells can develop resistance to traditional chemotherapeutic agents, repurposed drugs with unique mechanisms of action may provide an alternative treatment strategy to overcome drug resistance. Lower Development Costs and repurposed drugs have already undergone extensive safety testing and clinical trials for other indications, which could expedite their approval process and significantly reduce drug development costs. Accessible and Cost-effective Treatment Options: Repurposed drugs are often generic and widely available, making them more affordable and accessible to patients globally. Despite the promising potential of repurposed drugs in cancer therapy,

several challenges and limitations need to be addressed. Some repurposed drugs may not exclusively target cancer cells, leading to off-target effects and potential toxicity to healthy tissues [3].

Description

The optimal dose and safety profile of a drug might differ when used for cancer treatment compared to its original indication. Determining appropriate dosing regimens is crucial to avoid adverse effects. While some repurposed drugs have demonstrated anticancer effects in preclinical studies or early-phase clinical trials, more extensive research is needed to establish their efficacy and safety in larger patient populations. The lack of strong intellectual property protection for repurposed drugs may hinder pharmaceutical companies' interest in investing resources for cancer-specific clinical trials. The promising potential of repurposed drugs in cancer therapy has driven significant interest in research and clinical trials. These studies aim to validate the anticancer effects of specific drugs, determine appropriate dosages, identify patient populations that may benefit most, and assess the drugs' safety profiles when used in combination with standard cancer treatments [4].

The repurposing of chronically used drugs in cancer therapy offers an exciting avenue for advancing cancer treatment and improving patient outcomes. By leveraging existing knowledge and therapeutic options, researchers have the opportunity to explore unconventional approaches to combat cancer effectively. However, rigorous research, well-designed clinical trials, and careful consideration of potential side effects and limitations are necessary to fully realize the benefits of repurposing drugs for cancer treatment. As ongoing research continues to shed light on the possibilities, the integration of repurposed drugs into cancer therapy may lead to significant strides in the fight against cancer, offering hope and new treatment options to patients worldwide.

The concept of repurposing or repositioning drugs involves identifying new therapeutic uses for medications that are already approved for other indications. This approach is attractive due to its potential to significantly reduce drug development timelines and costs, as the safety profiles and pharmacokinetics of the repurposed drugs are generally well-known. When applied to cancer therapy, this strategy can uncover drugs that might have previously shown limited efficacy in their original indications but demonstrate unexpected benefits in targeting cancer cells.

One of the key advantages of repurposing chronically used drugs is that they often have a well-established route of administration, dosage, and safety data from long-term use in other diseases. This knowledge can be leveraged to accelerate their integration into cancer treatment protocols, potentially leading to quicker clinical translations. Metformin is a widely prescribed oral antidiabetic medication for type 2 diabetes. Research has revealed that metformin can inhibit cancer cell growth and proliferation. It activates the Amp-Activated Protein Kinase (AMPK) pathway, which plays a crucial role in regulating cellular energy homeostasis. Additionally, metformin has been associated with a reduced risk of certain cancers in diabetic patients. Clinical trials are ongoing to explore metformin's potential as an adjuvant therapy in various cancer types [5].

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Received: 01 July, 2023, Manuscript No. jnmrt-23-108988; Editor Assigned: 03 July, 2023, PreQC No. P-108988; Reviewed: 15 July, 2023, QC No. Q-108988; Revised: 20 July, 2023, Manuscript No. R-108988; Published: 27 July, 2023, DOI: 10.37421/2155-9619.2023.14.553

Conclusion

Aspirin is a Nonsteroidal Anti-Inflammatory Drug (NSAID) commonly used to alleviate pain and reduce fever. Studies have suggested that aspirin might possess anti-cancer properties, particularly in colorectal cancer. Aspirin can suppress inflammation, inhibit tumor angiogenesis, and induce apoptosis in cancer cells. The potential benefits of low-dose aspirin in cancer prevention and treatment are being investigated in clinical trials. Statins are widely used to lower cholesterol levels and prevent cardiovascular diseases. Recent studies have shown that statins can impede cancer cell proliferation and induce cell death in certain cancer types. Their ability to disrupt the mevalonate pathway, which is essential for cell growth, makes statins an attractive candidate for cancer therapy. However, more research is needed to elucidate their optimal use in oncology.

Acknowledgement

None.

Conflict of Interest

There is no conflict of interest by author.

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How to cite this article: Alli, Wahaj. "A Chance to Understand the Use of Chronically Used Drugs in Cancer Therapy." *J Nucl Med Radiat Ther* 14 (2023): 553.