



Review Article

Cancer Pharmacology: Understanding the Mechanisms of Anti-Cancer Drugs

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Abstract

Cancer pharmacology is the study of how drugs interact with cancer cells and how they can be used to treat cancer. It involves understanding the molecular and cellular mechanisms of cancer cells, as well as the development and testing of new cancer drugs. Cancer pharmacology is an essential field in the fight against cancer as it helps to develop more effective and less toxic treatments for cancer patients. Essential Concepts of Cancer Pharmacology include understanding the different types of cancer cells and how they behave, as well as the mechanisms by which cancer cells grow and spread. This knowledge is used to develop drugs that target specific pathways or molecules involved in cancer growth and spread. The primary categories of cancer medications encompass chemotherapy, precision therapy, immune-based therapy, and hormone-based therapy. Different classes of drugs have distinct mechanisms of action and are employed to treat specific types of cancer. Drug resistance presents a substantial obstacle in the field of cancer pharmacology. Cancer cells can develop resistance to drugs, making them less effective over time. Researchers are working to develop new drugs and treatment strategies to overcome this problem. Adverse Effects and Management are also important considerations in cancer pharmacology. Many cancer drugs can cause side effects, and managing these side effects is an important part of cancer treatment. Future Directions in Cancer Pharmacology include the development of new drugs and treatment strategies, further to the use of custom designed treatment to tailor treatments to personal patients.

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Introduction

Cancer Biology

“Cancer” refers to a collection of diseases that are marked by the uncontrolled proliferation and dissemination of anomalous cells in the body.[2] These cells can infiltrate and damage healthy tissues, resulting in severe health issues and potentially fatal outcomes. Cancer can arise in any part of the frame and may influence humans of all ages.

Cancer cells exhibit several distinct characteristics that set them apart from normal cells. They can also spread to unique additives of the body through the bloodstream or lymphatic system, a technique called metastasis.[3]

Understanding the biology of cancer is essential for developing effective cancer treatments. Cancer pharmacologists study the molecular mechanisms that drive cancer growth and metastasis and identify targets for drug development. They also investigate the interactions between cancer cells and the immune system and develop immunotherapies to enhance the body's natural defenses against cancer.[3]

Pharmacokinetics and Pharmacodynamics

Pharmacokinetics and Pharmacodynamics are important principles in most cancers' pharmacology. Pharmacokinetics refers to the look at the manner tablets are absorbed, distributed, metabolized, and eliminated with the useful resource of the use of the body.

Cancer pharmacologists use pharmacokinetics and pharmacodynamics to optimize drug dosing and minimize side effects. They also investigate drug-drug interactions and drug-gene interactions to predict drug efficacy and toxicity.

In summary, cancer pharmacology is a complex and rapidly evolving field that requires a deep understanding of cancer biology, pharmacokinetics, and pharmacodynamics. By studying these essential concepts, we can develop effective cancer treatments and improve patient outcomes.

Major Classes of Cancer Drugs

There are several major classes of cancer drugs that are used to treat malignant or cancerous diseases. These classes include cytotoxic agents, targeted therapies, and immunotherapies.

Cytotoxic Agents

Cytotoxic agents are also known as chemotherapy drugs. They paint through killing swiftly dividing cells, inclusive of most cancer cells. These tablets are not particular to most cancer cells and can kill wholesome cells, mainly to face consequences which include hair loss, nausea, and fatigue.[1] Cytotoxic agents can be given orally, intravenously, or topically. Examples:

Alkylating agents: These drugs work by adding an alkyl group to DNA, which prevents the cancer cells from dividing. Examples include cyclophosphamide, chlorambucil, and busulfan.

Antimetabolites: These drugs interfere with the DNA synthesis process, preventing cancer cells from dividing. Examples include methotrexate, 5-fluorouracil, and gemcitabine.

Chemical compounds known as topoisomerase inhibitors impede the function of topoisomerases, enzymes crucial for DNA strand separation in replication, thereby hindering the division of cancer cells. Etoposide, irinotecan, and topotecan are some examples of these inhibitors.[5]

Mitotic inhibitors: These drugs interfere with the microtubules that help separate chromosomes during cell division, preventing cancer cells from dividing. Examples include paclitaxel, docetaxel, and vinblastine.

Targeted Therapies

Drugs categorized as targeted therapies aim at specific molecules or pathways implicated in the growth and advancement of cancer. These drugs are designed to be more specific to cancer cells and have fewer side effects than cytotoxic agents. Targeted remedies may be given orally or intravenously. Examples of targeted treatments include:

Tyrosine kinase inhibitors: These drugs block the activity of tyrosine kinases, which are enzymes that help cancer cells grow and divide. Examples are imatinib, erlotinib, and sunitinib.[5]

Monoclonal antibodies: These drugs are designed to target specific proteins on the surface of cancer cells, triggering an immune response that kills the cancer cells. Examples consist of trastuzumab, rituximab, and bevacizumab.[4]

Proteasome inhibitors: These drugs block the activity of proteasomes, which are enzymes that help cancer cells break down proteins. Examples include bortezomib and carfilzomib.

PARP inhibitors: These drugs block the activity of PARP, an enzyme that helps repair damaged DNA. Examples include Olaparib, rucaparib, and niraparib.

Immunotherapies

Immunotherapies are a type of cancer treatment that enhances the immune system's ability to identify and combat cancer cells. These pills can be given orally or intravenously.[2] Examples:

Checkpoint inhibitors: These drugs block the activity of proteins that prevent immune cells from attacking cancer cells. Examples embody pembrolizumab, nivolumab, and ipilimumab.

CAR T-cell therapy: This therapy involves removing T-cells from a patient's blood, genetically modifying them to goal most cancers cells, after which infusing them lower back into the patient's body. Examples include tisagenlecleucel and axicabtagene coalesce.

Cancer vaccines: These vaccines stimulate the immune gadget to understand and assault most cancer cells.

In conclusion, there are several major classes of cancer drugs that are used to treat malignant or cancerous diseases. These classes include cytotoxic agents, targeted

therapies, and immunotherapies. Each class of drugs has its own unique mechanism of action and side effect profile.[2]

Drug resistance presents a substantial obstacle in the field of cancer pharmacology.

Drug resistance is a significant impediment to the treatment of cancer. Despite the development of new drugs, cancer cells can become resistant to chemotherapy, targeted therapy, and immunotherapy. In this part, we will delve into the processes that lead to drug resistance and explore methods to counteract it.

Mechanisms Underlying Drug Resistance

There are several mechanisms that cancer cells can use to become resistant to drugs. Some of these mechanisms are:

Altered drug targets: Cancer cells can alter the targets of drugs by mutating the genes that encode them. This can make the drugs ineffective or reduce their potency.[4]

Enhanced drug efflux: Cancer cells can increase the expression of transporters that pump drugs out of the cell, reducing their intracellular concentration and effectiveness.

Activation of alternative pathways: Cancer cells can activate alternative pathways that bypass the targets of drugs. This can render the drugs ineffective.

Resistance to apoptosis: Cancer cells can become resistant to apoptosis, a form of programmed cell death that is induced by chemotherapy and other drugs. This can allow the cells to survive and continue to grow.

Overcoming Drug Resistance

There are a multitude of strategies available to combat drug resistance in cancer. Some of these strategies are:

Combination therapy: Using two or more drugs that target different pathways can reduce the likelihood of drug resistance and increase the effectiveness of treatment.[4]

Targeting multiple pathways: Targeting multiple pathways that are involved in cancer growth and survival can reduce the likelihood of drug resistance and increase the effectiveness of treatment.

Immunotherapy: Immunotherapy can activate the immune system to recognize and attack cancer cells, reducing the likelihood of drug resistance and increasing the effectiveness of treatment.[2]

Drug delivery systems: Using drug delivery systems that can selectively target cancer cells can increase the intracellular concentration of drugs and reduce the likelihood of drug resistance.

In conclusion, drug resistance is a major obstacle in the treatment of cancer. Gaining insights into the processes that lead to drug resistance and devising methods to counteract it are crucial for enhancing the efficacy of cancer treatments.

Negative Reactions and Their Control

Frequent Adverse Effects

Cancer pharmacology involves the use of drugs to treat cancer. While these drugs can be effective in killing cancer cells, they can also cause adverse effects. Frequent adverse effects of cancer pharmacology include nausea, vomiting, fatigue, anemia, hair loss, and mouth sores.

Nausea and vomiting are the various most feared aspect effects of maximum cancers chemotherapy. Although cutting-edge treatments to manipulate acute chemotherapy-brought on nausea and vomiting (CINV) are powerful in maximum patients, behind schedule CINV is extra hard to manipulate.[1] Tiredness is another prevalent outcome of cancer medication that can greatly impact a patient's overall well-being.

Management Strategies

Handling the negative impacts is a crucial part of cancer medication. Different approaches can be used to deal with these effects.

For example, antiemetic drugs can be used to manage nausea and vomiting. These capsules paintings with the aid of blocking off receptors inside the mind that cause the vomiting reflex. Other drugs can be used to manage fatigue, such as psychostimulants.[1]

In addition to pharmacological management, non-pharmacological strategies can also be employed. These consist of changes in diet, like steering clear of spicy or fatty meals, as well as relaxation methods, such as deep breathing and meditation.

Table shows some of the frequent adverse reaction of cancer pharmacology and their management strategies.

Table 1

Adverse Effect	Management Strategy
Nausea and vomiting	Antiemetic drugs
Fatigue	Psychostimulants
Anemia	Blood transfusions
Hair loss	Wearing a wig or head covering
Mouth sores	Topical anaesthetics

In conclusion, cancer pharmacology can cause adverse effects that significantly affect a patient's quality of life. However, various management strategies can be employed to manage these effects. It is important for healthcare professionals to work closely with patients to develop an individualized treatment plan that minimizes adverse effects and maximizes treatment efficacy.

Future Directions in Cancer Pharmacology

As cancer pharmacology continues to advance, we see a shift towards personalized medicine and nanotechnology-based treatments. These two areas show great promise in improving cancer treatment outcomes.

Personalized Medicine

Personalized medicine involves tailoring cancer treatment to an individual patient's genetic makeup, lifestyle, and environment. This method enables a more focused and efficient therapy, lowering the chances of adverse reactions and enhancing the probability of a favorable result.

Advances in genomic sequencing and analysis have made it possible to identify specific genetic mutations that drive the growth of certain cancers. By targeting these mutations with precision therapies, we can improve treatment outcomes and reduce unnecessary treatments.

In addition to genomic analysis, personalized medicine also considers lifestyle and environmental factors that may influence cancer development and progression. By considering these factors, we can develop more comprehensive treatment plans that address the root causes of cancer. [1]

Conclusion

Nanotechnology in Cancer Treatment

Nanotechnology involves the use of tiny particles, often on the scale of nanometers, to deliver drugs directly to cancer cells. This method enables a more precise and efficient therapy, minimizing the chance of adverse reactions and enhancing the probability of a favorable result.

Nanoparticles can be designed to target specific cancer cells, delivering drugs directly to the site of the tumor. This approach reduces the risk of damage to healthy cells and tissues, improving treatment outcomes and reducing side effects.

In addition to drug delivery, nanotechnology can also be used to enhance imaging and diagnostics. Nanoparticles can be designed to bind to specific cancer cells, making them easier to detect with imaging technologies such as MRI or CT scans.

As we continue to explore the potential of nanotechnology in cancer treatment, we are likely to see more targeted and effective therapies that improve treatment outcomes and reduce side effects.

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