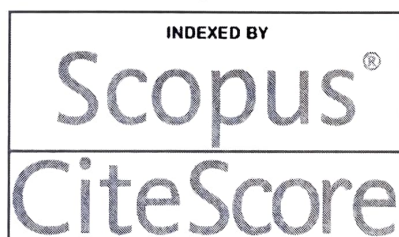




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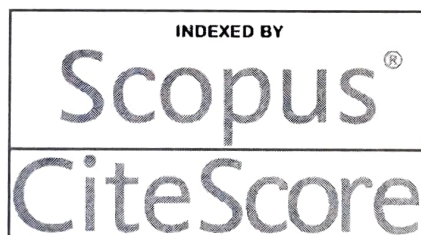
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Gogineni Neeshma, Sushil Chakravarthi.N.C, K. Ravi, Davis D, Suvetha Siva, Shreya Kishore

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An alarming presence of carcinogenic pesticide residues above recommended maximum residual limit (MRL) in fruits and vegetables in Tamilnadu, India causing a public health catastrophe

Nimmy P, Prabu D, Dinesh Dhamodhar, Sindhu R, RajMohan M, Bharathwaj VV, Sathiyapriya S, Savitha S

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Adherence Behavior of Type-2 Diabetic Patients to Medication, Nutrition, and Physical Activity in a Population of the City of Nador North-East Morocco



Navigating the Future of Cancer Diagnosis: A Comprehensive Review of Novel Approaches for Community-Based Treatment

Srinivas Ravella¹, M. Angel², Heamavathi Subramanian³, Neelaveni Thangavel⁴, Mahesh Namballa⁵, Dara Lokesh⁶, Abhishek Kumar Mishra⁷, G Venkata Nagaraju⁸

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Abstract

In addition to their ability to maintain proliferative signalling, insensitivity to growth suppressive signals, resistance to cell death, unlimited replication capability, promotion of angiogenesis, stimulation of invasion and metastasis, reprogramming of environmental and cellular metabolism, and evasion of immune destruction, cancer cells are distinguished by their uncontrollable cell proliferation. Cancer cells that have genetic alterations are able to evade apoptosis and the regulatory mechanisms of the cell cycle. While genetic changes also have a big impact, environmental variables is a major influence in the development of cancer. Cancer risk is increased by a number of chemical and physical carcinogens, including alcohol use, smoking, and asbestos exposure. Dietary ingestion of aflatoxin and arsenic also increases the risk of cancer. The development of cancer is also influenced by biological carcinogens, such as infections caused by specific bacteria, viruses, or parasites. Remarkably, lifestyle variables including smoking, drinking, having a high body mass index, eating poorly, and not getting enough exercise account for about one-third of cancer-related fatalities. Thanks to the advancements in cancer vaccines, immune checkpoint inhibitors (ICIs), and CAR-T cells, immunotherapy has become a highly effective cancer treatment option in recent times. Preclinical research has demonstrated that CAR-T cell and immune checkpoint inhibitor combination therapy is more effective than individual treatments in treating a variety of cancers. The development of novel genomic and molecular medicines has made it more crucial than ever to create and interpret molecular tumour profiles precisely in order to provide personalised cancer treatment. But in this developing field, the remarkable developments in molecular methods and the accuracy of the data acquired with these instruments are important factors to take into account.

Keywords: Cancer, Immune destruction, Biological carcinogens, immunotherapy, molecular therapies, malignancies

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1. Introduction

One in six deaths worldwide are attributed to cancer, making it a serious global health concern. In 2020, there were an estimated 19.3 million new cases of cancer and a tragic 10 million deaths from cancer. Cancer is a complex sequence of illness conditions that progresses intricately due to a loss of

growth control. For many years, the only available forms of treatment were chemotherapy, radiation therapy, and surgery, either alone or in combination. On the other hand, current discoveries on the mechanisms underlying the development of cancer have resulted in a notable enhancement of treatment approaches. Combinatorial techniques have shown promise

in the treatment of cancer. These approaches may involve a combination of standard chemotherapeutics such as taxanes and platinum compounds, or they may involve several targeted therapies. A paradigm shift in the management of cancer is reflected in the emergence of novel techniques such as biological molecules, immunological-mediated therapy, and pharmaceuticals. These strategies demonstrate the unwavering effort to withstand mortality and increase survival in metastatic cancer by being used even in situations where traditional medicines are ineffective. The creation of novel medications that target neoplastic cancers depends on a thorough comprehension of the features and processes particular to various tumour types. Chemotherapy, which is acknowledged as the most efficient and popular treatment, uses genotoxicity to attack tumour cells, mainly by generating reactive oxygen species that kill these cells. Another common strategy is the use of hormone therapies, which function as cytostatic drugs by limiting the growth of tumours through a variety of mechanisms, including hormone receptor blocking, restriction of adrenal steroid synthesis, and hormonal growth factor limitation via the hypothalamic-pituitary-gonadal axis (HPGA). This narrative evaluation explores cutting-edge tactics that are presently undergoing development in addition to giving a summary of the most cutting-edge and innovative cancer treatments. By addressing the shortcomings of conventional treatments, these tactics hope to provide fresh insights into the identification and management of cancer. The influence of these novel anti-cancer strategies is highlighted by the state of clinical practice today, opening the door to more successful cancer diagnosis and treatment in the future [1-6].

2. Treatment options for cancer

The two main categories of cancer treatment techniques are advanced or new modalities and conventional (traditional). Over half of all ongoing clinical trials in modern medicine are focused on developing novel treatments for cancer. The kind of cancer, where it is located, and how far along it is in its progression all affect the therapy option. Conventional cancer treatment approaches, such as radiotherapy, chemotherapy, and surgery, have long been the cornerstones of the field. Nonetheless, a variety of cutting-edge techniques have emerged as a result of the area of cancer research's evolution. Contemporary treatment options for these include stem cell interventions, anti-angiogenic medicines, hormone therapy, immunotherapy, and dendritic cell-based immunotherapy. These innovative methods mark a new chapter in the battle against this intricate and multidimensional illness and demonstrate the advancements made in 183utilizing 183183 therapies to the unique features of the malignancy.

2.1 Traditional cancer treatments

The most typically recommended conventional cancer treatment strategies involve surgically removing the tumours and then starting chemotherapy or radiation therapy with x-rays. Eleven Surgery is the most effective of these therapies while the disease is still in its early stages. Radiation therapy can cause damage to healthy cells, organs, and tissues. Chemotherapy reduces morbidity and mortality, but nearly all of the chemicals used in this treatment cause

damage to healthy cells, especially to those that proliferate and grow rapidly. Treatment resistance is a phenomenon that happens when an anti-cancer treatment causes cancer cells that were initially suppressed by the medicine to become resistant to it. It is among the principal problems with chemotherapy. The primary causes of this are elevated drug efflux and decreased medicine absorption. There are a number of drawbacks to the conventional chemotherapeutic approach, such as challenging dosage selection, low selectivity, rapid drug metabolism, and generally unfavourable side effects.

2.1.1 Cutting-Edge and Novel Cancer Treatments

The largest obstacles to treating cancer and 183utilizing 183 its symptoms are drug resistance and its delivery mechanisms, even though there are already several approved treatment options and drugs on the market. Standard cancer treatment is less effective due to the pathophysiology of the tumour and the aberrant design of the blood arteries in the tumour tissue. The list of innovative and unique cancer therapies that are now being used has both benefits and drawbacks.

2.1.2 Treatment Using Stem Cells

Bone marrow (BM) contains undifferentiated cells called stem cells that can develop into any kind of body cell. Another potentially helpful and secure cancer treatment option is stem cell therapy. One potential application of stem cells, now in the exploratory clinical trial stage, is the regeneration of other injured tissue. Clinical trials are actively using bone marrow, adipose tissues, and connective tissues to harvest mesenchymal stem cells (MSCs).

2.1.3 Stem Cells with Pluripotency

With the exception of placental cells, embryonic stem cells (ESCs) are distinct from the homogenous inner mass cells of the embryo and can differentiate into any type of cell. The discovery of Yamanaka factors in 2006 revolutionised cell biology by enabling the generation of pluripotent stem cells (iPSCs) from living cells in a culture. 17 iPSCs and ESCs are the same, but iPSCs and ESCs are morally clear-cut because they do not involve the destruction of embryos. Currently, hematopoietic embryonic stem cells (hESCs) and induced pluripotent stem cells (iPSCs) are used in the generation of effector T cells and natural killer (NK) cells, as well as in the development of anti-tumor vaccines.

2.1.4 Adult Stem Cells

Neural stem cells (NSCs), myeloid stem cells (MSCs), and hematopoietic stem cells (HSCs) are three types of adult stem cells (ASCs) that are commonly used in cancer therapy. HSCs, which are present in BM, have the ability to create every adult blood cell in the body. Currently, leukaemia and multiple myeloma are the only conditions for which the FDA has approved the infusion of cord blood-derived HSCs. Twenty MSCs are found in many tissues and organs, and they are essential for tissue repair and cell regeneration into osteocytes, adipocytes, and chondrocytes. Because of their special biological characteristics, MSCs are