



A MAGNETIC APPROACH TO CANCER

¹C R Mathangi

¹High School Student

¹PSBB LLA

Abstract

Cancer has, for long, been the bane of humanity, claiming the lives of those who would have been a lovely contribution to the society, if given the chance. Its cure, however, has been no boon either. Many a cure for cancer such as chemotherapy, radiotherapy, surgery, etc. have been found. Chemotherapy, has however been the limelight of cancer treatment till date. This is because many prefer chemotherapy treatment — a method that deteriorates the general health of the individual, by causing several side effects. Now, a new treatment has come up — one that may save many lives.

A solution that will be explained using a beginner's physics law — magnetism, with the extensive usage of biology. In magnetism, we all know like poles repel and unlike poles attract. The following treatment will work similarly. In this method, a non-toxic (mainly non-carcinogenic) and edible polymer, made using the hydrophilic cyclodextrin and wrapped up using hydrophobic polyurethane, to a biological nanoparticle such as those nanoparticles produced by bacterial magnetosomes, synthesized by magnetotactic bacteria, which would target only cancerous cells, without harming the healthy cells — just like a north pole getting attracted to a south pole.

1 Main text

Taking pancreatic cancer, for example, following will be the procedure for carrying out the treatment:

Pancreatic cancer is one of the most lethal types of malignant solid tumor and is typically associated with a poor prognosis. The FDA approved erlotinib in combination with gemcitabine is used for the first — line treatment of advanced pancreatic cancer. Due to poor chemotherapy outcomes, surgical resection remains the primary treatment strategy for pancreatic cancer. An improved understanding of pancreatic tumor biology allowed the development of the novel chemotherapeutic agent, erlotinib. Erlotinib, an inhibitor of epidermal growth factor receptor, passed clinical trials and with gemcitabine, is now approved

for the first – line treatment of advanced pancreatic cancer.

Image Detected. Please upload 200503supp4-25-1.gif.

Diagram 1

Mixing this erlotinib, with gemcitabine, in a polymer that is non-toxic (mainly non – carcinogenic) and edible made using the hydrophilic cyclodextrin and wrapped up using hydrophobic polyurethane, and attaching it to a biological nanoparticle such as those nanoparticles produced by bacterial magnetosomes, synthesized by magnetotactic bacteria. Examples of such polymers that can be used are poly(lactic-co-glycolic acid)(PLGA) and polyethylene glycol (PEG).

Aptamers can be designed as targeting ligands, and can differentiate between diseased cells and healthy cells, thus enabling the selective delivery of therapeutic compounds to target cells. Aptamers are chemically synthesized, and they possess additional advantages over natural antibodies – anti A, anti B, etc – including a smaller size, and an efficient penetration into biological compartments and due to which they accumulate quickly within the tumor tissue. It is possible to chemically modify aptamers to facilitate covalent conjugation to nanomaterials, for example, with 30 or 50 amino groups. Due to their small size, these aptamers can be easily cleared by the kidneys. To delay their clearance, these aptamer nanoparticles can be added to PEG.

Through an MRI, the tumor site can be found. After finding the tumor site, a beam of infrared light to the polymer, that will melt PEG and release erlotinib with gemcitobine only in the cancerous cells. This will not harm the healthy cells in any manner.

This method can be used for treating other types of cancer, like skin cancer, using the FDA approved Encorafenib (Braftovi) + Binimetinib (Mektovi) drugs and similar polymers such as PEG and PLGA. This method can also be used to treat ovarian cancer, colon cancer, lung cancer, breast cancer, leukaemia and all other types of cancer if used effectively with the appropriate drugs.

Following are the FDA approved drugs that can be used for targeted delivery for some type of cancers -

1.	Ovarian	cancer	-	Olaparib	(Lynparza)
2.	Colon	cancer	-	Avastin	(Bevacizumab)
3.	Lung	cancer	-	Erlotinib	
4.	Breast	cancer	-	Trastuzumab	(Herceptin)
5.	Leukaemia		-	Gilteritinib	(Xospata)

Image Detected. Please upload 12995_2007_Article_44_Fig1_HTML.jpg.

Figure 1

Acknowledgments

First and foremost, praises and thanks to the God, Almighty for giving me the strength, knowledge, ability and opportunity to undertake this research study and to persevere and complete it satisfactorily. I definitely have to thank my parents for their extensive love and support throughout my life. Thank you both for giving me the strength to reach for the stars and chase my dreams. I would like to extend my special gratitude to my aunt, Mrs. Deepti. N, a Biology teacher and my cousin brother, Sai Krishna for their great help and support.

Apart from my own efforts, the success of this research paper depends largely on the encouragement and guidelines of many others. I take this opportunity to express my gratitude to the people who have been instrumental in the successful completion of the paper. I wish to place on record my heartfelt and sincere thanks to my research supervisor, Dr. Sreeram Krishnan, for his extensive contribution of time and ideas to make my work productive and stimulating.

During my journey as a student, I found a great teacher, a friend who remains my strength, and a role model who inspired me through her teaching and got me interested in Science. She

was my 8th grade science teacher, Ms. Vijayalakshmi. She, by offering her full support and suggestions has guided me at all times. This research paper would definitely not have been possible without her support and guidelines, for which I shall ever be grateful.

I have great pleasure in acknowledging my gratitude to my teachers Ms. Shanthi Parthasarathy, Ms. Sujatha. S, and Ms Divya Guruprasad who have been supporting me at all times. I would like to extend my deep gratitude to my other Science teachers - Ms. Divya Iyer, Ms. Meenakshi. H, Ms. Gopa Ray and Ms.Kavitha. R who constantly ensured that the fire keeps burning and for being really supportive and encouraging. The credit for all this accomplishment goes to all the science teachers and other subject teachers of P.S.B.B Learning Leadership Academy for being motivative and supportive.

I am very much indebted to Mrs. Mahalaxmi Kumar, our respected Principal and Mrs. Uma Kumar, our respected Vice Principal for giving me such wonderful teachers who gave me the power to dream big.

It would be inappropriate if I omit to mention the names of my dear friends - Kshama.D.Rai, Aakansha Menon, Akshara. K, Janani. K, Jaanavi.V, Ishwaryah. M, Krupa Ishwar, Srinidhi. L and the entire class ' X - A' who have, in their own ways, kept me going on my path to success, assisting me as per their abilities, in whatever manner possible and for ensuring that good times keep flowing.

<https://docs.google.com/document/d/1nWKZof8-NBzk7G5bMDDt2SihE9LoLeby6qbPHz4UINM/edit>

AReferences

1. <https://www.cancernetwork.com/pancreatic-cancer/erlotinibgemcitabine-ups-survival-advanced-pancreatic-cancer> 2. <https://www.ncbi.nlm.nih.gov/books/NBK26811/> 3.
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3759197/> 4.
- <https://www.cancer.gov/about-cancer/treatment/types/targeted-therapies/targeted-therapies-fact-sheet> 5. <https://emedicine.medscape.com/article/1372666-overview> 6.
- <https://www.sciencedaily.com/releases/2019/10/191022142200.htm> 7.
- <https://www.hindawi.com/journals/jdd/2017/9090325/> 8.
- <https://www.intechopen.com/books/recent-advances-in-novel-drug-carrier-systems/targeted-nanoparticles-for-cancer-therapy> 9. <https://www.mayoclinic.org/diseases-conditions/cancer/in-depth/monoclonal-antibody/art-20047808> 10.
- <https://www.frontiersin.org/articles/10.3389/fimmu.2017.01795/full> 11.
- <https://www.sciencedaily.com/releases/2020/01/200123095834.htm> 12.
- <https://www.cancer.gov/about-cancer/treatment/types/photoimmunotherapy-video> 13.
- <https://www.cancer.org/cancer/basal-and-squamous-cell-skin-cancer/treating/targeted-therapy.html> 14. <https://www.cancer.gov/about-cancer/treatment/drugs/colorectal> 15.
- <https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/patients/treatment/types-of-treatment/targeted-therapies> 16.
- <https://www.cancerresearchuk.org/about-cancer/lung-cancer/advanced/treatment/targeted-drug-treatment/about> 17.
- <https://www.curemelanoma.org/patient-eng/melanoma-treatment/targeted-therapy/> 18.
- <https://www.cancer.org/cancer/acute-myeloid-leukemia/treating/targeted-therapy.html> 19.
- https://www.researchgate.net/figure/Targeted-drug-delivery-to-tumors-Passive-targeting-of-nanomedicines-is-accomplished-by_fig1_264038121 20.
- <https://www.slideshare.net/GajananSanap/colon-targeted-drug-delivery-systems> 21.
- <https://occup-med.biomedcentral.com/articles/10.1186/1745-6673-2-16> 22.
- <https://www.understandingnano.com/cancer-treatment-nanotechnology.html>
23. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4465796/>
24. <https://www.nature.com/subjects/nanotechnology-in-cancer>
25. <https://www.sciencedirect.com/topics/pharmacology-toxicology-and-pharmaceutical-science/targeted-drug-delivery>
26. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3272876/>
27. <https://jnanobiotechnology.biomedcentral.com/articles/10.1186/s12951-018-0392-8>