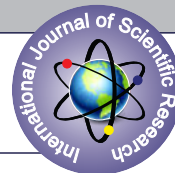


# SASP- NOVEL ROLE EXPLAINED - CHEMOTHERAPY, RADIOTHERAPY, IMMUNOTHERAPY, TARGETED THERAPY AND PREVENTION IN OBESITY ATHEROSCLEROSIS.



## Oncology

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## ABSTRACT

The purpose of the narration is to know the molecular mechanism, fibrosis, pleiotropic effects and co relation between Senescence-Associated Secretory Phenotype SASP, multitargeted role and immunostimulatory nature of SASP, are modulated it for combating cancer other age-related diseases.

## KEYWORDS

SASP, AGING, ATHEROSCLEROSIS, BIOMARKERS

## INTRODUCTION

One promising tumour-prevention mechanism that prevents challenged or premalignant cancerous cells from replicating is cellular senescence. A vital process that exists to prevent tissues from destructive cell proliferation is cellular senescence, which additionally has a tumour-suppressive function. Apart from that after repetitive cell cycle in normal somatic cells coined as replicative senescence and seen in yeast, mammals in vivo. De oxy ribonucleoside (DNA) damaging results in associated stress-induced senescence. A malignancy has been defined by unrestrained proliferation of tumour cells and a greater frequency of somatic mutations than in healthy tissue. Senescence-Associated Secretory Phenotype (SASP), on the other hand, is associated with this steady proliferative arrest state. SASP is associated with the abundant release of proinflammatory signals within the tissue milieu and is, ironically, linked to age-related illnesses such as cancer. The aim of innovative treatments is to eradicate senescent cells through the utilization of senolytics or to eliminate the SASP without killing the senescent cell through utilizing what are known as "senomorphics." Additionally, fresh evidence suggests it is possible to modify the secretome's composition using pharmacological or genetic techniques.

## Mechanism Of Senescence

Cellular senescence defines a phenotype and accompanied by a distinct secretory phenotype SASP produces a various of secreted proteins, cytokines, growth factors, proteases and chemokines<sup>[1]</sup>, the cyclin dependent kinase inhibitors p16 and p21 are induced by persistent DNA damage and in cancer also prevents the multiplication of cell harbouring the arrest of DNA and causes tumorigenesis but also influences the tissue microenvironment that helps in development of secretory phenotype<sup>[1-44]</sup> DNA damage occurred by the Ets family transcription factor by stabilizing p16. Irreversible cell cycle arrest is contributed by CDKIs P21 and P16, these are the compounds responsible for dephosphorylated from RB protein. In human cancer >50% the p53 and p16 are inactivated leads to senescence pathways are vital, high expression of p16 and p21 are more common and in vitro

and in vivo. Various role of SASP in autocrine manner and paracrine manner, re enforcement of cellular senescence of senescent cells and inducing senescence cells in surrounding cells. Released chemokines from senescent cells as SASP factors acts on immune cell such as NK cells and macrophage acts as scavengers, SASP are capable of reprogramming of cells and repair of damaged cells. SASP explained in (Fig:1).

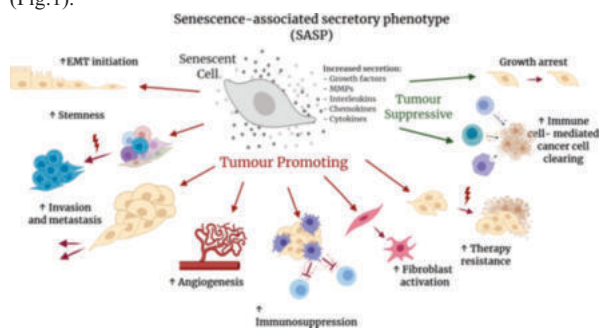


Fig:1

Physiological role of SASP is repairing of damaged tissue in vivo. Transient emergence of senescent cells with SASP in subcutaneous fibroblasts, damaged tissue cells reaffirm the immune cells that contribute to removal of damaged tissue. Fibroblasts produces growth factors as SASP promote the proliferation of skin progenitor cells to generate new skin.<sup>[9,28]</sup>

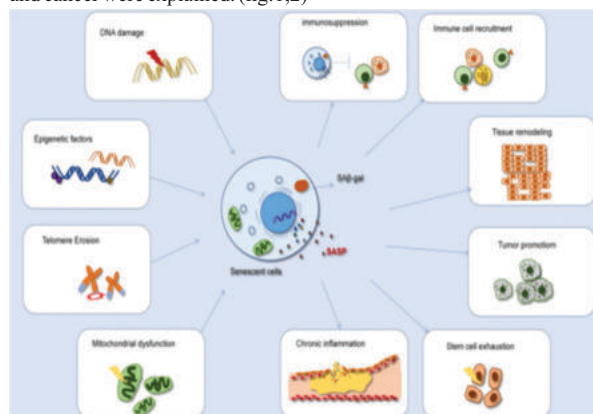
Liver injury where in hepatic stellate cells undergo cellular senescence to produce SASP factor and allow immune cells. Immune cells had a key role in eliminating senescent hepatic stellate cells to suppress the collagen production and prevent fibrosis.<sup>[1,2,9,13,18,19,28]</sup>

Deleterious effects of SASP factors such as aging-associated inflammation and cancer are present. In several studies have reported

that cancer-associated fibroblasts (CAFs). The hepatic stellate cells identified in obesity associated liver tumour microenvironment undergo senescence and promotes tumour -promoting SASP factor production.(Fig; 1,2)(Table -1)<sup>[21,23,44]</sup>

Pathological SASP tendencies tends not to transient but to persist thereby inducing undesirable such as cancer progression or chronic inflammation, mechanism of SASP persists and essential for controlling SASP. (Fig 1,2)

SASP mechanism is explained and mechanism in cancer prevention, chemoprevention, cardiovascular disease neurogenerative disorders and cancer were explained. (fig:1,2)



The SASP role in tumorogenesis, artherosclerosis, fibrosis is explained Table -1<sup>[9,28,35]</sup>

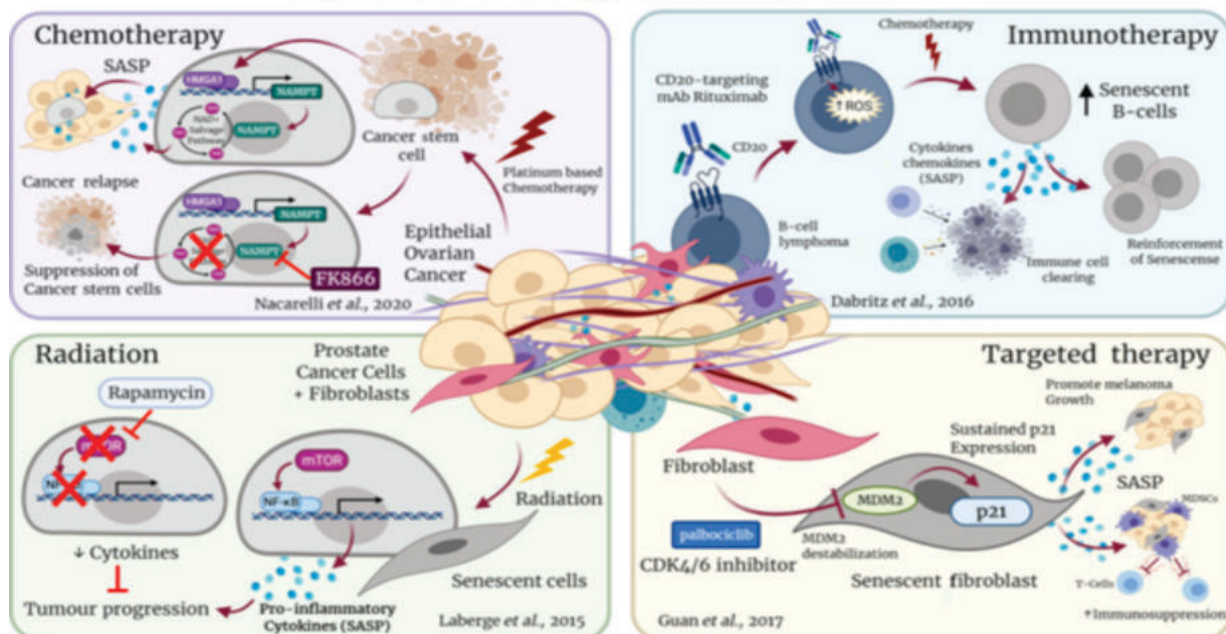
Senescence may arise from an array of cellular strains, including as oxidative stress, telomere or genomic impairment, epigenomic issues, and modifications to oncogenic or tumour suppressor expression. These treatments have an opportunity to activate the retinoblastoma (Rb) and p53 tumor suppressor pathways, which in turn might result in enhanced expression of p16INK4A and cell cycle arrest. Subsequent activation of multiple downstream pathways linked to DNA damage, cell cycle arrest, and inflammation can result in the induction of SASP in these cells. produces inflammatory cytokines such as IL-1a, IL-1b, IL-6, IL-8, IL-18, CCL-2, tumour necrosis factor (TNF-a), metalloproteases (MMP-1, -3, -8, -9, -13), and many growth factors, including vascular endothelial growth factor (VEGF), PDGF-AA<sup>[1,2,5,12,13,20,21,23,25,28,33,38,44]</sup>

|                                   |                                         |
|-----------------------------------|-----------------------------------------|
| ATM                               | CHK2                                    |
| p38 MAPK                          | CCAAT/enhancer-binding proteins (C/EBP) |
| NFκB mTOR and JAK-STAT signalling | Fagat, Ren                              |

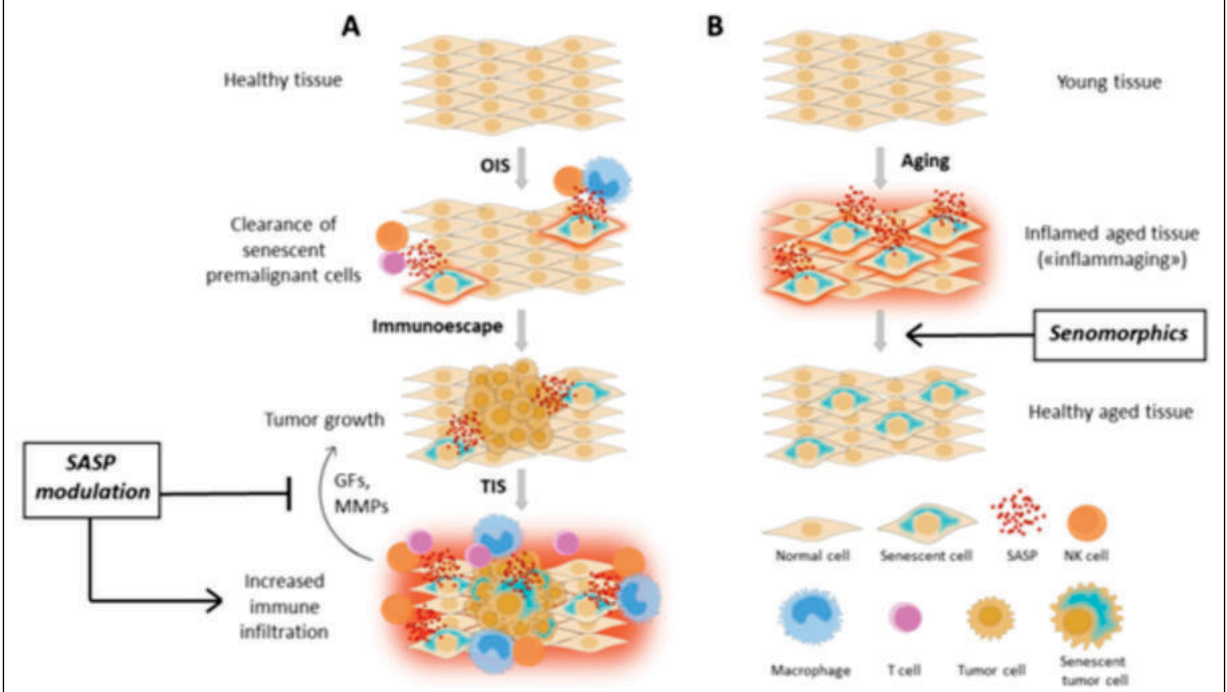
Growth factors (vascular endothelial growth factor (VEGF), platelet-derived growth factor (PDGF), hepatocyte growth factor (HGF)), interleukins (IL-1a, IL-6, IL-8, IL-10, IL-13, IL-15),<sup>[21,23,244]</sup> matrix metalloproteinases (MMP3, MMP9) and cytokines/chemokines (CXCL1, CXCL2, CXCL5, CXCL11, CXCL12, CCL2, CCL20)-non of them were no single phenotype.<sup>[36,37]</sup>

CHEMOTHERAPY, RADIOTHERAPY, IMMUNOTHERAPY, TARGETED THERAPY induce the SASP- catastrophic DNA damage, leading to a DDR, which can cause subsequent senescence and associated SASP. For instance, Logue et al. (2018) found that paclitaxel, a typical drug used to treat triple-negative breast cancer (TNBC), increases the activity of the enzyme inositol-requiring enzyme 1 alpha (IRE1) RNase, which results in abnormal suppression of ER stress. Improvements in SASP-associated factors such IL-6, IL-8, CXCL1, granulocyte-macrophage colony-stimulating factor (GM-CSF), and TGFβ2 are caused by this increase in IRE1 activity.<sup>[6,16,17]</sup>

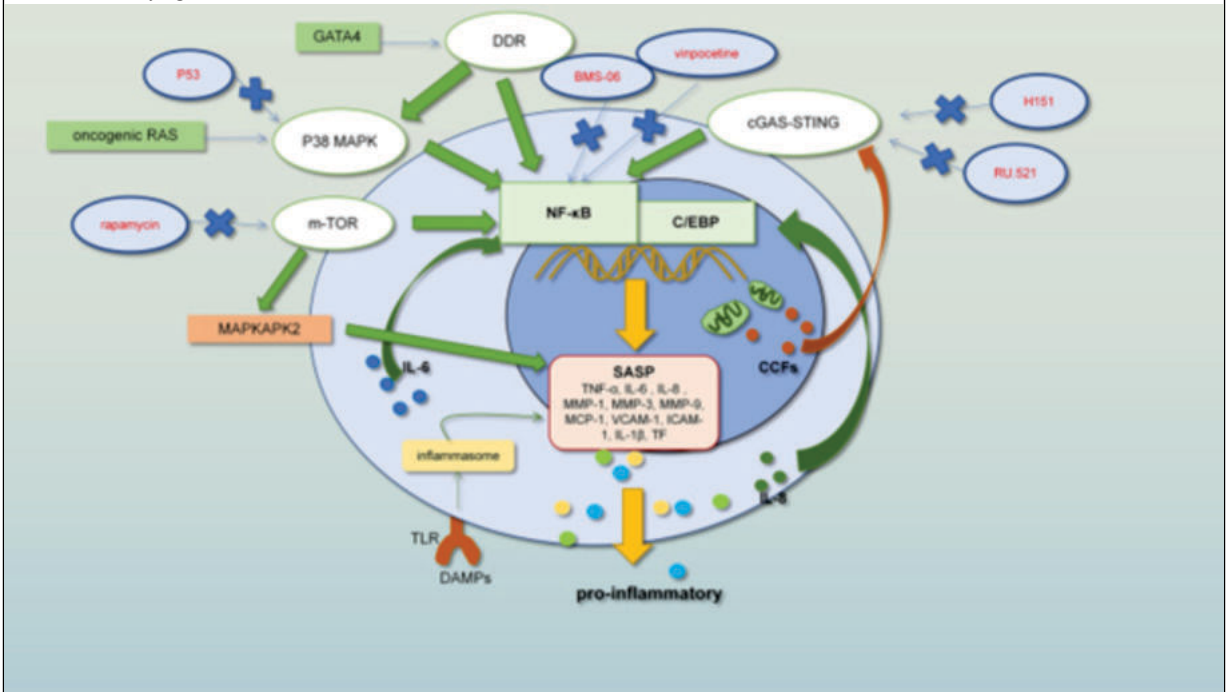
### Key examples of therapy-induced senescence



Therapeutic approach



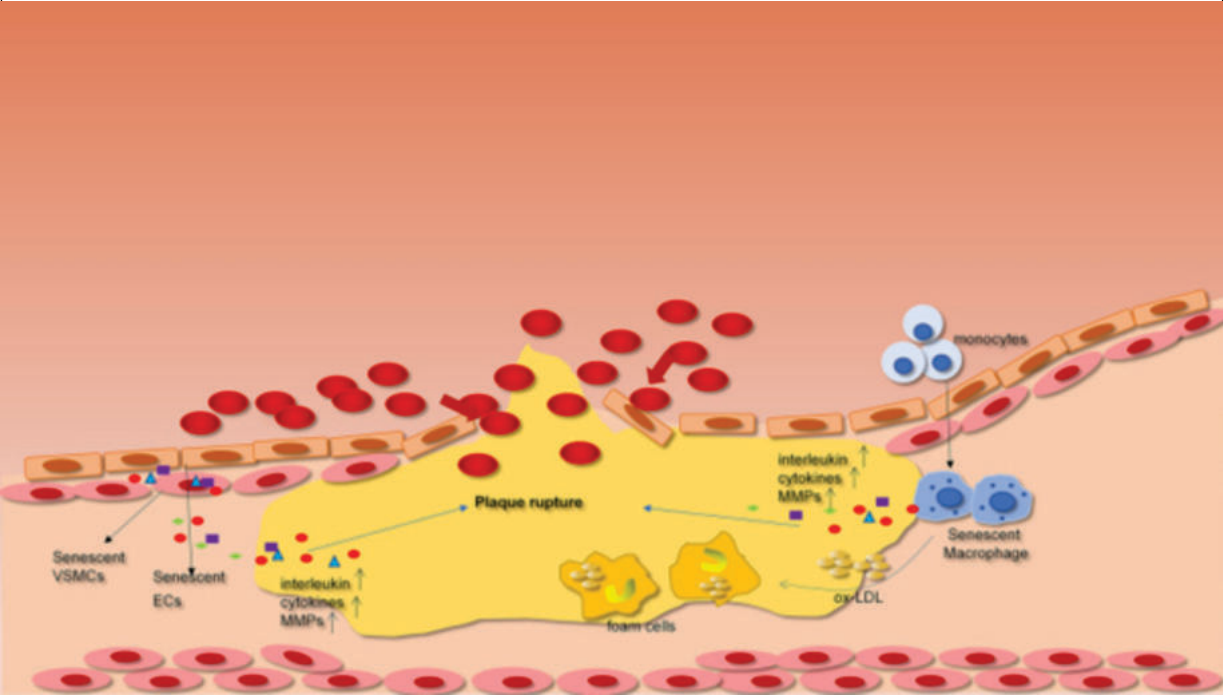
- strong correlation between DNA damage-induced senescence and NF- $\kappa$ B-regulated SASP. Regulatory mechanism of SASP<sup>[6][16][17]</sup>
- Several cellular regulatory factors such as p38MAPK, Jak2/Stat3, inflammasomes, m-TOR, miRNA, GATA-4, macroH2A1 and ATM have been proven to play roles during the generation of SASP. It is worth noting that the regulation of the SASP appears to be centred on the NF- $\kappa$ B complex and C/EBP family.fig 4<sup>[1-44]</sup>



EFFECT OF SASP ON ATHEROSCLEROSIS (FIG 5)

| cell type                  | SASP          | Effect on atherosclerosis                                  |
|----------------------------|---------------|------------------------------------------------------------|
| Senescent endothelial cell | IL-6          | Form atherosclerotic plaques and cause thrombosis          |
|                            | IL-1          | Recruit more immune cells and form atherosclerotic plaques |
|                            | IL-8          | Form atherosclerotic plaques and cause thrombosis          |
|                            | IL-15         | Form atherosclerotic plaques                               |
|                            | MCP-1         | Recruit more immune cells and form atherosclerotic plaques |
|                            | TNF           | Recruit more immune cells and form atherosclerotic plaques |
|                            | ICAM-1,VCAM-1 | Recruit circulating monocytes and vascular injury          |
|                            | ET-1          | Vascular endothelial dysfunction                           |
|                            | PAI-1         | Cause thrombosis                                           |
|                            | VEGF          | Promote plaque angiogenesis and vascular remodeling        |

|                                       |                             |                                                                                |
|---------------------------------------|-----------------------------|--------------------------------------------------------------------------------|
| Senescent vascular smooth muscle cell | IL-1 $\alpha$               | Leading to inflammation and monocyte chemotaxis, and proteolysis               |
|                                       | IL-6                        | Leading to inflammation and impaired vascular mitochondrial function           |
|                                       | IL-8                        | Induce angiogenesis in coronary plaques                                        |
|                                       | CCL-3, 4                    | Recruit monocyte/macrophage cells and increase plaque size                     |
|                                       | MCP-1                       | Recruit monocyte cells                                                         |
|                                       | TGF- $\beta$ 1              | Enhance arterial stiffness and initiate the senescence of other cells          |
|                                       | MMP-1,2,3,7,8,9,10,12,13,14 | Fibrous cap of the plaque becomes thinner and extracellular matrix degradation |
|                                       | OPG                         | Vascular calcification;                                                        |
| Senescent T cell                      | VEGF                        | Promote plaque angiogenesis and vascular remodeling                            |
|                                       | IL-6                        | Leading to inflammation                                                        |
|                                       | TNF- $\alpha$               | Leading to inflammation                                                        |
| Senescent macrophage                  | IFN- $\gamma$               | Induces the activation of macrophages                                          |
|                                       | IL-1 $\beta$                | Leading to inflammation                                                        |
|                                       | IL-6                        | Leading to inflammation                                                        |
|                                       | TNF- $\alpha$               | Leading to inflammation                                                        |
|                                       | MMP-3, 13                   | Extracellular matrix degradation and thinning of the fibrous cap in artery     |



While long-term senescent cell accumulation in tissues causes an imbalance in the internal environment and dysfunction of the organs, short-term senescent cell accumulation in tissues is crucial to the stability of the internal environment and organ function.

REVERSE EFFECT IS DUE TO SASP.<sup>[5,7]</sup>  
SENOLYTICS AND SENOSTATICS: TARGETING AND UTILISING THE SASP

|                      |                                              |                                                                                                                      |
|----------------------|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| Senolytics           |                                              |                                                                                                                      |
|                      | BCL2 inhibitor                               | ↓ HCC tumour growth following FBP1 loss via SASP inhibition [                                                        |
|                      |                                              | ↓ PARP inhibitor induced senescent cells in ovarian and breast cancer                                                |
|                      |                                              | ↓ Metastatic burden by targeting TIMP1 deficient senescent cells in prostate cancer                                  |
| GX15-070 (Obatoclax) | BCL-2 inhibitor                              | ↑ Apoptosis of senescent cells induced by BET inhibition in TNBC                                                     |
|                      |                                              | ↓ Senescent cells induced by BMI1 inhibition enhancing tumour killing in DIPG                                        |
| uPAR CAR T cells     | uPAR                                         | ↓ Senescent cells extending lung adenocarcinoma survival.                                                            |
| Senostatics          |                                              |                                                                                                                      |
| Dasatinib            | SRC-family protein-tyrosine kinase inhibitor | ↓ HCC tumour growth following FBP1 loss via SASP inhibition                                                          |
| FK866/GMX1778        | NAMPT inhibitor                              | ↓ Senescent-associated cancer stem cell outgrowth in EOC                                                             |
| Irinotecan           | TOP1 inhibitor                               | ↑ SASP in ovarian cancer sensitising cells to anti-PD-1 therapy                                                      |
| Metformin            | Gluconeogenesis inhibition                   | ↓ mTOR and STAT3 pathway signalling in response to a CDK4/6 inhibitor repressing the stemness of HNSCC cancer cells. |
| NVP BSK805           | JAK2 inhibitor                               | ↓ SASP in Pten-deficient prostate tumours leading to increased CD8 activity                                          |
| Rapamycin            | mTOR inhibitor                               | ↓ Senescent fibroblasts in prostate cancer inhibiting tumour growth                                                  |
| Sertraline           | Serotonin reuptake inhibitor                 | ↓ mTOR signalling in HCC senescent cells causing apoptosis and reduction of tumour growth                            |
| Y-27632              | ROCK inhibitor                               | ↓ IL-6 and IL-8 production from senescent oral keratinocytes                                                         |

## CONCLUSION

SASP had the efficacy in treating cancer obesity age related diseases and atherosclerosis. A hidden marker and the function ,drugs to used wisely to be know in treating cancer .SASP plays a major role .Tumour microenvironment further studies to be focused to improve the expectancy in patients.

## Abbreviations

cancer-associated fibroblasts CAFs  
De oxy ribonucleoside DNA  
SASP Senescence-associated secretory phenotype  
CVD Cardiovascular disease  
LDL Low-density lipoprotein  
Sa $\beta$ G Senescence-associated beta galactosidase  
VEGF Vascular endothelial growth factor  
PDGF Platelet derived growth factor  
MMPs Metalloproteases  
EV Extracellular vesicle  
TNF Tumor necrosis factor  
ECM Extracellular matrix  
DAMPs Damage-associated molecular patterns  
M-TOR Mammalian target of rapamycin  
DDR DNA damage reaction

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