

DECIPHERING CANCER CELL METABOLISM: IMPLICATIONS FOR TARGETED THERAPIES

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Abstract

Understanding the intricate metabolic alterations in cancer cells is crucial for the development of effective targeted therapies. Cancer cell metabolism is characterized by rewired pathways that support rapid proliferation, survival, and metastasis. The Warburg effect, a hallmark of cancer metabolism, involves increased aerobic glycolysis even in the presence of oxygen, leading to elevated glucose uptake and lactate production. Beyond glycolysis, cancer cells exhibit alterations in glutamine metabolism, lipid synthesis, and amino acid metabolism to meet their energy and biosynthetic demands. Deciphering these metabolic adaptations offers insights into the vulnerabilities of cancer cells and the potential for targeted intervention. Targeting key metabolic enzymes and pathways has emerged as a promising strategy in cancer therapy. Small molecule inhibitors targeting glycolytic enzymes, such as hexokinase and pyruvate kinase, have shown efficacy in preclinical models and early-phase clinical trials. Similarly, inhibitors of glutamine metabolism, such as glutaminase inhibitors, disrupt cancer cell proliferation and survival. Moreover, the development of combination therapies targeting multiple metabolic pathways offers synergistic effects and improved treatment outcomes. Integration of metabolomic data, imaging techniques, and computational modeling enables the identification of metabolic signatures, predictive biomarkers, and personalized treatment strategies. Additionally, metabolic targeting holds promise for overcoming therapeutic resistance and enhancing the efficacy of current cancer therapies. In conclusion, deciphering cancer cell metabolism provides valuable insights into the molecular mechanisms driving tumorigenesis and informs the development of targeted therapies tailored to the metabolic vulnerabilities of cancer cells. By exploiting these metabolic dependencies, researchers aim to improve patient outcomes and advance precision medicine approaches in cancer therapy.

Keywords: Cancer Angiogenesis, Metabolomic Reprogramming, Cancer Cell Metabolism, Warburg Effect, Synergistic Effects .

INTRODUCTION

Cancer cell metabolism represents a hallmark of tumorigenesis, characterized by profound alterations in cellular bioenergetics and nutrient utilization to support the high demands of proliferation, survival, and metastasis. The Warburg effect, first described by Otto Warburg in the 1920s, is a hallmark of cancer cell metabolism, wherein cancer cells exhibit enhanced aerobic glycolysis, even in the presence of oxygen, leading to increased lactate production (Upadhyay, Khan, & Hassan, 2024). This metabolic switch allows cancer cells to rapidly generate ATP and biosynthetic precursors necessary for cell growth and division. Key regulators of glycolysis in cancer cells include oncogenes such as MYC and HIF-1 α , which promote the expression of glycolytic enzymes and glucose transporters, facilitating increased glucose uptake and utilization. Beyond glycolysis, cancer cells also reprogram other metabolic pathways to sustain their proliferative and survival demands (Abdel-Wahab, Mahmoud, & Al-Harizy, 2019). For instance, cancer cells exhibit increased glutamine uptake and utilization, supporting biosynthesis, redox balance, and energy production through

glutaminolysis. Additionally, altered lipid metabolism is a hallmark of cancer, with cancer cells displaying increased fatty acid synthesis and lipid uptake to support membrane biogenesis, energy production, and signaling pathways (Sundaram, Bupesh, & Saravanan, 2022). Dysregulated amino acid metabolism, including increased consumption of serine and glycine for nucleotide synthesis and one-carbon metabolism, is also commonly observed in cancer cells. Moreover, cancer cells exploit alternative metabolic pathways, such as the pentose phosphate pathway (PPP) and the serine-glycine-one-carbon (SGOC) pathway, to generate reducing equivalents and biosynthetic intermediates necessary for proliferation and survival. The rewiring of cancer cell metabolism is driven by a complex interplay of genetic, epigenetic, and environmental factors, including oncogene activation, tumor suppressor loss, hypoxia, nutrient availability, and metabolic stress (Crispo et al., 2019).

In addition to supporting cell growth and proliferation, altered metabolism in cancer cells also confers selective advantages for survival and adaptation to the tumor microenvironment. Cancer cells exhibit metabolic plasticity, enabling them to adapt to diverse environmental conditions and nutrient availabilities within the tumor microenvironment, including nutrient deprivation, hypoxia, and acidosis (Boedtkjer & Pedersen, 2020). Metabolic adaptations, such as increased autophagy, macropinocytosis, and scavenging of extracellular nutrients, allow cancer cells to maintain metabolic homeostasis and survive under stress conditions. Furthermore, metabolic reprogramming in cancer cells influences immune evasion and resistance to therapy. For example, cancer cells can manipulate the tumor microenvironment through metabolic alterations, such as lactate secretion and acidification, to suppress immune cell function and evade immune surveillance (Huber et al., 2017). Moreover, metabolic rewiring in cancer cells can confer resistance to chemotherapy and targeted therapies, as exemplified by alterations in drug metabolism, detoxification pathways, and drug efflux transporters.

Understanding the metabolic vulnerabilities of cancer cells holds significant promise for developing targeted therapeutic strategies to exploit metabolic dependencies and selectively kill cancer cells while sparing normal tissues. Metabolic inhibitors targeting key enzymes and transporters involved in cancer cell metabolism have shown promise in preclinical studies and clinical trials (Butler, Zhao, Muñoz-Pinedo, Lu, & Tan, 2013). For instance, inhibitors of glycolysis, such as 2-deoxyglucose (2-DG) and lonidamine, have been investigated as potential anticancer agents, either as monotherapies or in combination with standard-of-care treatments. Similarly, inhibitors targeting glutamine metabolism, such as glutaminase inhibitors and glutamine analogs, have demonstrated efficacy in preclinical models and early-phase clinical trials. Furthermore, inhibitors of lipid metabolism, including fatty acid synthase (FASN) inhibitors and acetyl-CoA carboxylase (ACC) inhibitors, are being evaluated as potential therapeutic agents for cancer treatment. Additionally, targeting the metabolic dependencies of specific cancer subtypes, such as mutations in metabolic enzymes or oncogenic signaling pathways, holds promise for precision medicine approaches in cancer therapy (Fendt, Frezza, & Erez, 2020).

In conclusion, cancer cell metabolism represents a fundamental hallmark of tumorigenesis, characterized by rewiring of metabolic pathways to support the proliferative and survival demands of cancer cells. Understanding the molecular mechanisms underlying metabolic reprogramming in cancer cells provides opportunities for developing novel therapeutic strategies to selectively target cancer

metabolism and improve treatment outcomes for cancer patients. Further research into the metabolic vulnerabilities of cancer cells, coupled with the development of innovative metabolic inhibitors and precision medicine approaches, holds promise for advancing cancer therapy and overcoming therapeutic resistance in the clinic (Sabnis & Bivona, 2019).

The Warburg effect, a phenomenon elucidated by Otto Warburg in the early 20th century, stands as a pivotal aspect of cancer metabolism. In essence, it signifies a profound metabolic reprogramming observed in cancer cells, characterized by a shift towards heightened aerobic glycolysis, despite the availability of oxygen. While normal cells predominantly rely on oxidative phosphorylation to generate ATP, cancer cells exhibit a preference for glycolysis, a less efficient pathway for energy production, even in oxygen-rich environments (Zhao & Li, 2021). This metabolic strategy allows cancer cells to generate energy and essential biomolecules rapidly, fulfilling their heightened demands for proliferation, survival, and metastasis. The Warburg effect is orchestrated by a complex interplay of genetic alterations, epigenetic modifications, and environmental cues within the tumor microenvironment. Oncogenes such as MYC and HIF-1 α play crucial roles in driving the expression of glycolytic enzymes and glucose transporters, thereby promoting increased glucose uptake and glycolytic flux in cancer cells. Furthermore, tumor suppressor gene mutations, such as those affecting p53, can further enhance glycolysis while impairing oxidative phosphorylation, contributing to the Warburg effect. Additionally, hypoxia, a common feature of solid tumors, stimulates the stabilization of HIF-1 α , which transcriptionally activates genes involved in glycolysis and angiogenesis, thereby fueling tumor growth and progression (Yeung, Pan, & Lee, 2008). Moreover, alterations in signaling pathways, nutrient availability, and metabolic intermediates also contribute to the metabolic reprogramming observed in cancer cells. Beyond ATP generation, the Warburg effect facilitates the diversion of glycolytic intermediates into biosynthetic pathways, supporting the synthesis of nucleotides, amino acids, and lipids necessary for sustained cell proliferation and biomass accumulation. Lactate, a byproduct of aerobic glycolysis, also plays a crucial role in the tumor microenvironment by acidifying the extracellular milieu, promoting tumor invasion, immune evasion, and therapy resistance. Despite its discovery nearly a century ago, the Warburg effect continues to captivate researchers due to its profound implications for cancer biology and therapy (Alkhamisy, 2019). Understanding the molecular mechanisms underlying the Warburg effect offers opportunities for developing innovative therapeutic strategies to target cancer metabolism selectively. Indeed, exploiting the metabolic vulnerabilities associated with the Warburg effect represents a promising avenue for cancer treatment, with ongoing efforts focused on developing small molecule inhibitors, metabolic modulators, and combination therapies to disrupt cancer cell metabolism and improve patient outcomes. Furthermore, advances in imaging techniques, metabolic profiling, and systems biology approaches offer new insights into the metabolic heterogeneity of tumors and may aid in the development of personalized treatment strategies tailored to individual patients (Lin, Keshari, & Park, 2017). In conclusion, the Warburg effect stands as a hallmark of cancer metabolism, driving tumor growth and progression while offering potential targets for therapeutic intervention and precision medicine approaches in oncology.

Oncogenic signals play a crucial role in orchestrating metabolic reprogramming in cancer cells, driving alterations in cellular bioenergetics and nutrient utilization to fuel tumorigenesis and support malignant progression. One of the most prominent examples of oncogene-driven metabolic reprogramming is the activation of the PI3K/Akt/mTOR signaling pathway, which promotes glycolysis, lipid synthesis, and protein translation to meet the increased demands of rapidly proliferating cancer cells (Navarro et al., 2022). Activation of receptor tyrosine kinases (RTKs) such as EGFR and HER2, commonly observed in various cancers, leads to downstream activation of PI3K/Akt/mTOR signaling, driving glucose uptake and glycolytic flux through increased expression of glucose transporters and glycolytic enzymes. Moreover, oncogenic activation of MYC, a transcription factor frequently dysregulated in cancer, enhances aerobic glycolysis and glutamine metabolism to support biomass accumulation and cell growth. MYC drives the expression of glycolytic enzymes and glutamine transporters, promoting the catabolism of glucose and glutamine to sustain ATP production and macromolecular synthesis (Stine, Walton, Altman, Hsieh, & Dang, 2015). Additionally, oncogenic RAS signaling, commonly mutated in human cancers, drives metabolic reprogramming by promoting glucose uptake, aerobic glycolysis, and the diversion of glycolytic intermediates into biosynthetic pathways. RAS-driven metabolic alterations are mediated through downstream effectors such as RAF and PI3K, which coordinate metabolic rewiring to support tumor growth and survival. Furthermore, oncogenic signaling pathways intersect with key metabolic regulators such as AMPK, p53, and HIF-1 α , further modulating cellular metabolism in response to nutrient availability, hypoxia, and metabolic stress. Dysregulation of oncogenic signals and metabolic pathways contributes to the metabolic heterogeneity observed within tumors, driving adaptation to dynamic microenvironmental cues and conferring selective advantages for tumor growth, invasion, and metastasis (Hirschey et al., 2015). Understanding the intricate crosstalk between oncogenic signals and metabolic reprogramming is essential for developing targeted therapeutic strategies aimed at exploiting metabolic vulnerabilities in cancer cells and improving treatment outcomes for cancer patients. Integration of omics approaches, computational modeling, and functional genomics holds promise for elucidating the complex network of interactions between oncogenic pathways and metabolic regulators in cancer cells, providing insights into the molecular mechanisms driving tumorigenesis and informing the development of novel precision medicine approaches. Targeting oncogenic-driven metabolic alterations represents a promising avenue for cancer therapy, with ongoing efforts focused on developing small molecule inhibitors, metabolic modulators, and combination therapies that selectively target cancer cell metabolism while sparing normal tissues (Griss, 2017). Moreover, the identification of metabolic biomarkers and non-invasive imaging techniques enables the monitoring of metabolic responses to therapy and the stratification of patients based on metabolic profiles, facilitating personalized treatment strategies and improving clinical outcomes. In conclusion, oncogenic signals play a central role in driving metabolic reprogramming in cancer cells, shaping the metabolic landscape of tumors and contributing to tumor progression and therapeutic resistance. Understanding the complex interplay between oncogenic pathways and metabolic regulators is essential for developing effective therapeutic strategies that target metabolic vulnerabilities in cancer cells, paving the way for precision medicine approaches in cancer therapy (Muluh, Shu, & Ying, 2023).

Metabolic targeting has emerged as a promising approach in cancer therapy, aiming to exploit the metabolic vulnerabilities of cancer cells while sparing normal tissues. The metabolic alterations observed in cancer cells, such as increased aerobic glycolysis, glutamine dependency, and altered lipid metabolism, provide unique opportunities for therapeutic intervention. One strategy involves targeting glycolysis, the process by which cancer cells preferentially metabolize glucose to generate energy and biosynthetic precursors (Martinez-Outschoorn, Peiris-Pagés, Pestell, Sotgia, & Lisanti, 2017). Small molecule inhibitors targeting key enzymes in the glycolytic pathway, such as hexokinase and pyruvate kinase, have shown promise in preclinical studies and early-phase clinical trials. Additionally, inhibitors targeting glutamine metabolism, including glutaminase inhibitors and glutamine analogs, disrupt the reliance of cancer cells on glutamine for biosynthesis, redox balance, and energy production. Furthermore, inhibitors of lipid metabolism, such as fatty acid synthase (FASN) inhibitors, suppress lipid synthesis and deprive cancer cells of essential building blocks for membrane biogenesis and signaling. Moreover, strategies targeting mitochondrial metabolism, such as inhibitors of mitochondrial respiration and oxidative phosphorylation, induce metabolic stress and apoptosis in cancer cells, particularly those with mitochondrial dysfunction or reliance on oxidative metabolism. The development of combination therapies targeting multiple metabolic pathways holds promise for overcoming therapeutic resistance and improving treatment outcomes in cancer patients (Labrie, Brugge, Mills, & Zervantonakis, 2022). Integration of metabolic targeting strategies with other modalities, such as chemotherapy, radiation therapy, and immunotherapy, offers synergistic effects and personalized treatment approaches tailored to the metabolic profile of individual tumors. Furthermore, advances in metabolic imaging techniques, biomarker identification, and patient stratification enable the selection of optimal therapeutic regimens and monitoring of treatment response in real time. In conclusion, metabolic targeting represents a promising avenue for cancer therapy, with ongoing efforts focused on developing innovative therapies that exploit the metabolic vulnerabilities of cancer cells, overcome therapeutic resistance, and improve clinical outcomes for cancer patients (Yap & Workman, 2012).

Cheminformatics, the interdisciplinary field that combines principles of chemistry, computer science, and information technology, plays a crucial role in the discovery, design, and development of cancer therapeutics. By leveraging computational and data-driven approaches, cheminformatics enables the efficient analysis, interpretation, and manipulation of chemical data to accelerate drug discovery and optimization processes. One key application of cheminformatics in cancer therapeutics is in the identification and design of novel small molecule inhibitors targeting specific molecular targets implicated in cancer pathogenesis (Monroig, Chen, Zhang, & Calin, 2015). Through virtual screening techniques, cheminformatics facilitates the rapid screening of large compound libraries to identify potential drug candidates with favorable pharmacological properties and bioactivity against oncogenic proteins, such as kinases, receptors, and enzymes involved in cancer progression. Moreover, cheminformatics methods, such as quantitative structure-activity relationship (QSAR) modeling and molecular docking simulations, enable the rational design and optimization of lead compounds to improve their potency, selectivity, and pharmacokinetic properties, ultimately leading to the development of more effective anticancer agents (Tabti et al., 2023).

Furthermore, chemoinformatics plays a critical role in repurposing existing drugs for cancer therapy by identifying new indications or targets based on their chemical structure and biological activity profiles. Through data mining of large-scale chemical and biological databases, chemoinformatics enables the systematic exploration of drug repositioning opportunities, thereby accelerating the identification of novel uses for approved drugs or investigational compounds in cancer treatment. By repurposing existing drugs, chemoinformatics offers a cost-effective and time-efficient strategy for drug discovery, leveraging existing knowledge and resources to rapidly advance potential therapeutics into clinical trials (Savva et al., 2019).

Moreover, chemoinformatics contributes to the optimization of drug combination therapies for cancer treatment by identifying synergistic drug combinations that target complementary pathways or mechanisms of action. Through computational modeling and network analysis of drug-target interactions, chemoinformatics enables the prediction of drug synergy based on their molecular properties and biological effects, facilitating the rational selection and design of combination therapies with enhanced efficacy and reduced toxicity. Additionally, chemoinformatics approaches, such as structure-based drug design and pharmacophore modeling, aid in the identification of druggable binding sites and key molecular interactions underlying drug synergy, guiding the rational design of optimized drug combinations for personalized cancer therapy (Zięba, Stępnicki, Matosiuk, & Kaczor, 2022).

Furthermore, chemoinformatics plays a pivotal role in precision medicine approaches for cancer treatment by integrating chemical, genomic, and clinical data to predict drug response and patient outcomes. Through the development of predictive models and computational algorithms, chemoinformatics enables the identification of biomarkers, genetic mutations, and molecular signatures associated with drug sensitivity or resistance in cancer patients (Baptista, Ferreira, & Rocha, 2021). By analyzing large-scale omics data and clinical datasets, chemoinformatics facilitates the stratification of cancer patients into molecularly defined subtypes or predictive biomarker profiles, guiding treatment selection and personalized therapeutic strategies. Additionally, chemoinformatics contributes to the development of companion diagnostics and predictive biomarker assays for cancer drugs, enabling the identification of patients most likely to benefit from specific treatments and the optimization of clinical trial designs for targeted therapies (Fridlyand et al., 2013).

Chemoinformatics plays a central role in cancer therapeutics by enabling the discovery, optimization, and personalized delivery of anticancer agents. Through computational and data-driven approaches, chemoinformatics accelerates the identification of novel drug candidates, repurposes existing drugs, optimizes combination therapies, and guides precision medicine approaches for cancer treatment. By integrating chemical, biological, and clinical data, chemoinformatics contributes to the development of more effective and personalized treatments for cancer patients, ultimately improving clinical outcomes and advancing cancer research (Hernández-Lemus & Martínez-García, 2021).

Perspectives in cancer metabolomic reprogramming offer exciting opportunities to deepen our understanding of tumorigenesis, identify novel therapeutic targets, and develop personalized treatment strategies. Metabolomics, the comprehensive study of small molecules involved in cellular metabolism, provides unique insights into the dynamic metabolic alterations that occur in cancer cells and the tumor

microenvironment. One key perspective is the exploration of metabolic rewiring as a hallmark of cancer, enabling cancer cells to adapt to diverse microenvironmental stresses and sustain their proliferative and survival demands (Martínez-Reyes & Chandel, 2021). By characterizing the metabolic signatures associated with different cancer types and stages, metabolomic profiling holds promise for identifying biomarkers for early detection, prognosis, and treatment response prediction.

Additionally, metabolomic studies shed light on the metabolic dependencies of cancer cells, uncovering vulnerabilities that can be exploited for therapeutic intervention. For example, targeting specific metabolic pathways essential for cancer cell survival, such as glycolysis, glutaminolysis, or lipid metabolism, holds promise for developing novel anticancer agents with improved efficacy and reduced toxicity (Shen et al., 2021). Moreover, metabolomic approaches facilitate the integration of multi-omics data, including genomics, transcriptomics, and proteomics, to gain a comprehensive understanding of the molecular mechanisms driving tumorigenesis and therapeutic resistance. By unraveling the complex interplay between genetic alterations and metabolic reprogramming in cancer cells, metabolomics offers insights into the heterogeneity of cancer phenotypes and the identification of patient-specific therapeutic targets. Furthermore, advances in metabolomic technologies, such as mass spectrometry and nuclear magnetic resonance spectroscopy, enable high-throughput profiling of metabolites in clinical samples, paving the way for the development of non-invasive diagnostic tools and real-time monitoring of treatment response in cancer patients. Integration of metabolomic data with imaging modalities, such as positron emission tomography (PET) and magnetic resonance imaging (MRI), offers complementary information on metabolic fluxes and spatial heterogeneity within tumors, facilitating the design of targeted therapies and personalized treatment strategies (Yang, Griffin, Qiang, & Ren, 2022).

Additionally, the application of machine learning and computational modeling to metabolomic data enables the prediction of metabolic phenotypes, patient outcomes, and drug responses, guiding the selection of optimal treatment regimens and the development of precision medicine approaches in cancer therapy. Moreover, metabolomic studies provide insights into the systemic effects of cancer metabolism on host physiology and the tumor microenvironment, offering opportunities for the development of metabolic-based interventions to modulate immune responses, tumor-stroma interactions, and therapeutic resistance mechanisms. By targeting metabolic vulnerabilities in both cancer cells and the tumor microenvironment, metabolomic reprogramming holds promise for improving the efficacy of current cancer therapies and overcoming treatment resistance. In conclusion, perspectives in cancer metabolomic reprogramming offer valuable insights into the complex metabolic alterations associated with tumorigenesis, providing opportunities for the development of novel diagnostic tools, therapeutic targets, and personalized treatment strategies. By integrating multi-omics data, advanced technologies, and computational approaches, metabolomic studies contribute to our understanding of cancer biology and guide the translation of basic research findings into clinical applications, ultimately improving patient outcomes and advancing cancer care (Schmidt et al., 2021).

References

- 1) Abdel-Wahab, A. F., Mahmoud, W., & Al-Harizy, R. M. (2019). Targeting glucose metabolism to suppress cancer progression: prospective of anti-glycolytic cancer therapy. *Pharmacological research*, 150, 104511.
- 2) Alkhamisy, J. H. (2019). Role Of Cardiolipin Remodeling In The Malignant Progression Of Breast Cancer.
- 3) Baptista, D., Ferreira, P. G., & Rocha, M. (2021). Deep learning for drug response prediction in cancer. *Briefings in bioinformatics*, 22(1), 360-379.
- 4) Boedtkjer, E., & Pedersen, S. F. (2020). The acidic tumor microenvironment as a driver of cancer. *Annual review of physiology*, 82, 103-126.
- 5) Butler, E. B., Zhao, Y., Muñoz-Pinedo, C., Lu, J., & Tan, M. (2013). Stalling the engine of resistance: targeting cancer metabolism to overcome therapeutic resistance. *Cancer research*, 73(9), 2709-2717.
- 6) Crispo, F., Condelli, V., Lepore, S., Notarangelo, T., Sgambato, A., Esposito, F., . . . Landriscina, M. (2019). Metabolic dysregulations and epigenetics: a bidirectional interplay that drives tumor progression. *Cells*, 8(8), 798.
- 7) Fendt, S.-M., Frezza, C., & Erez, A. (2020). Targeting metabolic plasticity and flexibility dynamics for cancer therapy. *Cancer discovery*, 10(12), 1797-1807.
- 8) Fridlyand, J., Simon, R. M., Walrath, J. C., Roach, N., Buller, R., Schenkein, D. P., . . . Scher, H. I. (2013). Considerations for the successful co-development of targeted cancer therapies and companion diagnostics. *Nature Reviews Drug Discovery*, 12(10), 743-755.
- 9) Griss, T. (2017). *Metabolic adaptation and its role in tumorigenesis*: McGill University (Canada).
- 10) Hernández-Lemus, E., & Martínez-García, M. (2021). Pathway-based drug-repurposing schemes in cancer: the role of translational bioinformatics. *Frontiers in Oncology*, 10, 605680.
- 11) Hirschey, M. D., DeBerardinis, R. J., Diehl, A. M. E., Drew, J. E., Frezza, C., Green, M. F., . . . Lea, M. A. (2015). *Dysregulated metabolism contributes to oncogenesis*. Paper presented at the Seminars in cancer biology.
- 12) Huber, V., Camisaschi, C., Berzi, A., Ferro, S., Lugini, L., Triulzi, T., . . . Rivoltini, L. (2017). *Cancer acidity: An ultimate frontier of tumor immune escape and a novel target of immunomodulation*. Paper presented at the Seminars in cancer biology.
- 13) Labrie, M., Brugge, J. S., Mills, G. B., & Zervantonakis, I. K. (2022). Therapy resistance: opportunities created by adaptive responses to targeted therapies in cancer. *Nature reviews Cancer*, 22(6), 323-339.
- 14) Lin, G., Keshari, K. R., & Park, J. M. (2017). Cancer metabolism and tumor heterogeneity: imaging perspectives using MR imaging and spectroscopy. *Contrast Media & Molecular Imaging*, 2017.
- 15) Martinez-Outschoorn, U. E., Peiris-Pagés, M., Pestell, R. G., Sotgia, F., & Lisanti, M. P. (2017). Cancer metabolism: a therapeutic perspective. *Nature reviews Clinical oncology*, 14(1), 11-31.
- 16) Martínez-Reyes, I., & Chandel, N. S. (2021). Cancer metabolism: looking forward. *Nature reviews Cancer*, 21(10), 669-680.
- 17) Monroig, P. d. C., Chen, L., Zhang, S., & Calin, G. A. (2015). Small molecule compounds targeting miRNAs for cancer therapy. *Advanced drug delivery reviews*, 81, 104-116.
- 18) Mulu, T. A., Shu, X.-s., & Ying, Y. (2023). Targeting cancer metabolic vulnerabilities for advanced therapeutic efficacy. *Biomedicine & Pharmacotherapy*, 162, 114658.
- 19) Navarro, C., Ortega, Á., Santeliz, R., Garrido, B., Chacín, M., Galban, N., . . . Bermúdez, V. (2022). Metabolic reprogramming in cancer cells: emerging molecular mechanisms and novel therapeutic approaches. *Pharmaceutics*, 14(6), 1303.
- 20) Sabnis, A. J., & Bivona, T. G. (2019). Principles of resistance to targeted cancer therapy: lessons from basic and translational cancer biology. *Trends in molecular medicine*, 25(3), 185-197.

- 21) Savva, K., Zachariou, M., Oulas, A., Minadakis, G., Sokratous, K., Dietis, N., & Spyrou, G. M. (2019). Computational drug repurposing for neurodegenerative diseases. *In Silico Drug Design*, 85-118.
- 22) Schmidt, D. R., Patel, R., Kirsch, D. G., Lewis, C. A., Vander Heiden, M. G., & Locasale, J. W. (2021). Metabolomics in cancer research and emerging applications in clinical oncology. *CA: a cancer journal for clinicians*, 71(4), 333-358.
- 23) Shen, Y.-A., Chen, C.-C., Chen, B.-J., Wu, Y.-T., Juan, J.-R., Chen, L.-Y., . . . Wei, Y.-H. (2021). Potential therapies targeting metabolic pathways in cancer stem cells. *Cells*, 10(7), 1772.
- 24) Stine, Z. E., Walton, Z. E., Altman, B. J., Hsieh, A. L., & Dang, C. V. (2015). MYC, metabolism, and cancer. *Cancer discovery*, 5(10), 1024-1039.
- 25) Sundaram, K. K. M., Bupesh, G., & Saravanan, K. M. (2022). Instrumentals behind embryo and cancer: a platform for prospective future in cancer research. *AIMS Molecular Science*, 9(1), 25-45.
- 26) Tabti, K., Baammi, S., Sbai, A., Maghat, H., Lakhlifi, T., & Bouachrine, M. (2023). Molecular modeling study of pyrrolidine derivatives as novel myeloid cell leukemia-1 inhibitors through combined 3D-QSAR, molecular docking, ADME/Tox and MD simulation techniques. *Journal of Biomolecular Structure and Dynamics*, 41(23), 13798-13814.
- 27) Upadhyay, S., Khan, S., & Hassan, M. I. (2024). Exploring the diverse role of pyruvate kinase M2 in cancer: Navigating beyond glycolysis and the Warburg effect. *Biochimica et Biophysica Acta (BBA)-Reviews on Cancer*, 189089.
- 28) Yang, J., Griffin, A., Qiang, Z., & Ren, J. (2022). Organelle-targeted therapies: a comprehensive review on system design for enabling precision oncology. *Signal transduction and targeted therapy*, 7(1), 379.
- 29) Yap, T. A., & Workman, P. (2012). Exploiting the cancer genome: strategies for the discovery and clinical development of targeted molecular therapeutics. *Annual review of pharmacology and toxicology*, 52, 549-573.
- 30) Yeung, S., Pan, J., & Lee, M.-H. (2008). Roles of p53, MYC and HIF-1 in regulating glycolysis—the seventh hallmark of cancer. *Cellular and molecular life sciences*, 65, 3981-3999.
- 31) Zhao, H., & Li, Y. (2021). Cancer metabolism and intervention therapy. *Molecular Biomedicine*, 2(1), 5.
- 32) Zięba, A., Stępnicki, P., Matosiuk, D., & Kaczor, A. A. (2022). What are the challenges with multi-targeted drug design for complex diseases? *Expert Opinion on Drug Discovery*, 17(7), 673-683.