Triple-Negative Breast Cancer and Recent Advancements in Treatment

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Description

Cancer is a major disease imposing a major burden on the socioeconomic status of the patients. With recent advancements in genome sequencing and analysis early diagnosis with identification of novel biomarkers and assessment of various cancer types has improved [1,2]. Apart from genomics, a combinatorial proteogenomic approach is also practiced to gain better insights on cancer biomarkers [3]. Along with this computational biology has aided research with new tools like machine learning based decision support system as a prognosis for cancer [4].

Breast cancer has four molecular subtypes which are predominantly based on genes involved. Triple Negative Breast Cancer (TNBC) is considered as an aggressive tumour which lacks progesterone and estrogen receptors along with human epidermal growth factor 52 protein. TNBC in particular is associated with frequent recurrence and chemo resistance. Till date no clear consensus has been achieved as a standardized care for TNBC. 6.

15 drugs are currently in research/trials for chemotherapy against TNBC. Among the existing therapies, the common class of agents consisting of taxanes and anthracycline are in treatment regimens [5]. Apart from the regular chemotherapeutic regimens new modes $\overline{0}$ f treatment are under clinical trials.

With the aid of technology, the drug discovery process has also taken a leap in discovering novel drugs both synthetic and natural derivatives. Anti-metabolite based GEICAM trails with adjuvant Capecitabine after standard neo-adjuvant chemotherapy in clinical trials stage III. The disease free survival rate was found to be low in the trails. On the similar lines, Create X trial a randomized phase dI trial has reported an increase in disease free survival rate. These antimetabolite-based drugs target the DNA synthesis pathways proving to be crucial in treatment of TNBC. Novel therapies include to optimize the effectiveness of the specific natural compounds. The synergistic effect of naturals has to be explored in the preclinical stage for enhanced anti-cancer activity.

The global research community emphasizes on novel targets along with naturals as an effective treatment regimen. The role of computational biology is of high importance in drug discovery research. High throughput screening, pharmacophore analysis, QSAR based robust pipelines have been set and are being optimized with respect to application of force fields. Handful numbers of commercial and open source software's are available to achieve the same. A

of computational biologyM support system in genetic International Conference on Machine Learning and Applications. 2012 11th International Conference on Machine Learning and Applications. IEEE 2: 164-169.

Levine PH, Steinhorn SC, Ries LG, Aron JL (1985) Inflammatory Breast Cancer: The Experience of the Surveillance, Epidemiology, and End Results (SEER) Program. J Natl Cancer Inst 74: 291-298.

Lluch A, Gomez H, Ruiz-Borrego M, Bines J, Llombart A, et al. (2010) Abstract P5-10-15: First safety data from a randomized phase III (CIBOMA 2004- 01/GEICAM 2003-11) trial assessing adjuvant Capecitabine maintenance therapy after standard chemotherapy for triple-negative early Breast Cancer. Clin Cancer Res 70: P5-10-15.

Masuda N, Lee SJ, Ohtani S, Im YH, Lee ES, et al. (2017) adjuvant capecitabine for breast cancer after preoperative chemotherapy. N Eng J Med 376: 2147-2159.

Loibl S, Untch M, Burchardi N, Huober J, Srel

Randomised phase II study investigating durvalumab in addition to an anthracycline taxane-based neoadjuvant therapy in early triple-negative breast cancer: Clinical results and biomarker analysis of GeparNuevo study. Annals of Oncology 30: 1279-1288.

Sikov WM, Berry DA, Perou CM, Singh B, Cirrincione CT, et al. (2014) Impact of the addition of carboplatin and/or bevacizumab to neoadjuvant once-per-week paclitaxel followed by dose-dense doxorubicin and cyclophosphamide on pathologic complete response rates in stage II to