

## Computational Approaches for Identifying Natural Multi-Target Drugs in Cancer Therapy- A Review Article

Dr. Kais Atwan Sherif Algailany<sup>1</sup>, DR. N. Dora Babu<sup>\*2</sup>, Dr Hamid Ghaffoori Hasan<sup>3</sup>

<sup>1</sup>Ass. Prof. Al Manara university, Department of Medical Science.,Iraq

<sup>2\*</sup>Professor & Hod College Of Pharmacy Al- Ayen Iraqi University Nasariyah ,Iraq (<https://orcid.org/0000-0002-4608-6538>)

<sup>3</sup>Prof. Al-Manara university ,Department of Medical Sciences,Pharmacy Dept.

**\*Corresponding Author**

Email ID: [dorababu@alayan.edu.iq](mailto:dorababu@alayan.edu.iq)

Cite this paper as: Dr. Kais Atwan Sherif Algailany, DR. N. Dora Babu, Dr Hamid Ghaffoori Hasan, (2025) Computational Approaches for Identifying Natural Multi-Target Drugs in Cancer Therapy- A Review Article. *Journal of Neonatal Surgery*, 14 (17s), 296-310.

### ABSTRACT

A new phase in drug discovery is essential. The majority of pharmaceutical development approaches rely on computer-generated data and insights. This article emphasizes advanced simulation techniques utilized in drug development. By the year 2040, the global incidence of cancer is expected to reach 30 million new cases, with the most significant increase occurring in low- and middle-income countries. Cancer diagnoses in the Americas are projected to rise by 55 percent, totaling 6.23 million cases by 2040. It is crucial to explore the kinetic profiles of ligand binding mechanisms and drug-target affinities. The review encompassed publications from August 2009 to August 2024 to incorporate both foundational and contemporary studies. Results & Discussion: Plant-derived pharmaceuticals encompass methyl transferase inhibitors, DNA damage inhibitors, HDAC inhibitors, and mitotic disruptors, focusing on their anticancer efficacy and development in clinical trials. Methyl transferase inhibitors (MTAs) are currently employed in cancer diagnostics as they target specific driver genes. However, this approach is limited by the extensive genetic alterations present in multiple driver genes within each tumor. The digital drug assignment (DDA) method prioritizes potential therapeutic candidates.

**Keywords:** Computational drug , multi-target drug development, Cancer treatment, Natural compounds in drug discovery

### 1. INTRODUCTION

Cancer can develop in nearly any organ or tissue within the body when abnormal cells multiply uncontrollably, breach their designated areas, and disseminate to other regions and organs. Patients diagnosed with cancer face a higher risk of mortality if the disease metastasizes. This process is referred to as metastasis. Alternative terms for cancer include neoplasm and malignant tumor. In 2018, cancer was responsible for the deaths of 9.6 million individuals globally, equating to one in every six people. The most prevalent cancers among men are lung, prostate, colon, stomach, and liver cancers. The increasing incidence of cancer is negatively impacting the health, mental well-being, and financial stability of individuals worldwide. Many cancer patients in low- and middle-income countries struggle to access timely and adequate medical treatment due to underdeveloped healthcare systems. In 2019, predictions indicated that by the year 2000, there would be 20 cases of breast cancer and 10 million cancer-related deaths. The World Health Organization (WHO) anticipates that over the next two decades, the cancer burden will increase by nearly 60%, placing significant pressure on healthcare systems, individuals, and communities. According to projections, there will be an estimated 30 million additional cancer cases globally by 2040, with the most significant increases occurring in developing nations, particularly those with low to medium incomes. If no preventive measures are implemented, cancer diagnoses in the Americas are expected to rise by 55%, reaching 6.23 million by 2040, as noted in a 2019 study. Common cancers are particularly dangerous as they can remain undetected at various stages. However, advancements in technology are expected to enhance early tumor detection, thereby improving patient survival rates, as this method generates a high number of true positive results. In 2020, [Apalla et al. 2020] Low-dose CT radiation exposure may also raise a patient's cancer risk.

Due to the enormous population that needs to be screened, a new, less invasive screening method is needed. To ensure that such a broad spectrum of healthcare professionals can operate the technology effectively, As of [HM, et al.2017] Sensors and microelectronics can be used in various industries to reduce the size of complex equipment. Medical technology has led to the development of diagnostic sensors over time. [Shin, Y. 2015] Sensor development in this field focuses on precisely identifying biomarkers and volatile metabolites associated with lung cancer. Their approaches to discovering cancer-related

chemicals differed substantially as a result. It is necessary to have sensors that can identify specific molecules. When it comes to [Devilee, P 2010]

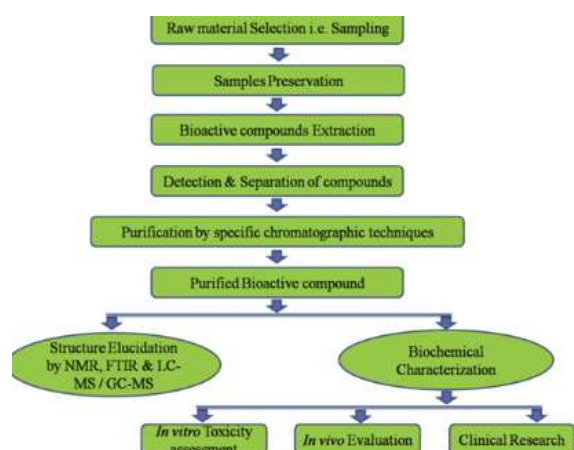
## 2. METHODOLOGY

Researchers searched the literature from August 2011 to August 2021 using methods utilised in prior study initiatives abroad. Each database was searched. E- research archives contain data from peer-reviewed articles, books, research papers, patent filings, and other anticancer plant studies. These records date back to August 2021. The most common cancers that affect both men and women include prostate and breast cancer, as well as Kaposi sarcoma and Burkitt's lymphoma.

## 3. RESULT & DISCUSSION

### *Evaluation of Cancer Target Medication*






Proteins are ideal for cancer treatment because they are natural and readily available. Incorporating protein into a patient's regular diet is simple due to its high absorption rate. Cornell, B. S., and Ye. Compared to synthetic substances, proteins are less toxic to human cells and are more tolerated by the body. According to [Shah, 2013], some exceptions include cyanogenetic glycosides and lignans, and some taxanes. Clinical trials may be possible for plant-derived medicines if the study is selective, nontoxic to regular cell lines, and cytotoxic to cancer cells. A few years ago, [Richardson 2009] Inhibitors of histone deacetylase (HDA), methyltransferase (MT), or mitotic disruption (MD) were all examples of plant-derived medicines. As seen in Figure 1, the numerous substances under review include their origin, anticancer activity, and development toward clinical trials in 1997 [Phillipson, J. D. 1997]







**Fig 1: Natural bioactive procedure for treating and evaluation**






**Table 1. List of plants and their potent bioactive phytocompounds for the possible therapeutic use in prevention and management of various cancers.**




Vegetal part and botanical name	Picture	Bioactive phytocompounds
<i>Taxus chinensis</i> (Pilger) Rehd (bark)		Paclitaxel (taxol)

<i>Curcuma longa</i> Linnaeus (rhizome)		Curcumin, demethoxycurcumin, bisdemethoxycurcumin, germacrone, furanodienone, zederone, and ar-turmerone
<i>Zingiber officinale</i> roscoe (rhizome)		Phenolic and terpene
<i>Camptotheca acuminata</i> Decne (leaf, flower, stem, fruit, root)		Alkaloids, flavonoids, and glycosides
<i>Vinca rosea</i> L. ( <i>Catharanthus roseus</i> (L.) G. Don) (leaf)		Vinca alkaloids: vindesine, vincristine, vinorelbine, and vinblastine
<i>Belamcanda chinensis</i> L. DC. (root)		Flavonoids, terpenoids, organic acids, and quinones

<i>Cryptolepis sanguinolenta</i> (Lindl.) Schltr. (leaf and root)		Alkaloids, flavones, and tannin
<i>Garcinia hanburryi</i> hook (fruit, leaf, and seed)		Polyphenols, benzophenones, xanthenes, and bioflavonoids
<i>Psoralea corylifolia</i> L. (Buguchi) (whole plant)		Psoralidin, meroterpenes, coumarins, and flavonoids
<i>Cimicifuga foetida</i> L. (rhizome)		Phenylpropanoids, lignans, cycloartane triterpenoids, chromones, amides



<i>Taxus baccata</i> L. (leaf and bark)		Paclitaxel (taxol), taxusin, baccatin, taxoids viz., baccatin, taxine, lignans, phenols steroids, flavonoids
<i>Viscum Album</i> L. (stem, leaf, and fruit)		Flavonoids, phenylpropanoids, alkaloids, proteins, triterpenes, steroids, lipophilic molecules, viscumneose XII, XIII, XIV, lectins, and conjugated acetylene
<i>Gardenia jasminoides</i> J. Ellis (stem, bark, and fruit)		Geniposide, crocin, genipin, gardenoside, and iridiod
<i>Colchicum autumnale</i> L. (bulb, flowers, and leave)		Colchicine
<i>Salvia prionitis</i> Hance (root)		Diterpenoid quinone, salvicine

<i>Raphanus sativus</i> L. (root, stem, leaf)		Flavanoid, glucosinolates, folic acid, flavonoids, polyphenolics, dietary fiber, vitamin A and C
<i>Tinospora cordifolia</i> (Willd.) Miers (bark, leaf, flower, and stem)		Polysaccharides, aliphatic compounds, phenolics, sesquiterpenoid, steroids, diterpenoid lactones, alkaloids, glycosides
<i>Nigella sativa</i> L. (seed)		Thymoquinone, dithymoquinone, and dihydrothymoquinone

Sulforaphane, isothiocyanates, isoflavones, and pomiferin are all HDAC inhibitors. They block carcinogenic proteins from causing cancer. Sulforaphane, for example, blocks critical targets in breast cancer development. [J L. 2004] Sulforaphane reduced ER, EGFR, and HER-2 expression in breast cancer cell lines. Apoptotic cells can enter apoptosis when HDAC inhibitors reactivate epigenetically suppressed acetylation-dependent genes (apoptosis). [Khazir, 2014] Plant-derived HDAC inhibitors can cure human malignancies more successfully. Vinca alkaloid derivatives include vincristine, vinblastine, vinorelbine, vindesine, and vinflunine target microtubule dynamics by binding to  $\alpha$ -tubulin. Taxanes like these, including Paclitaxel and docetaxel, destroy microtubules. [P. Saha & Kumar. R 2020] These chemicals hinder metaphase-anaphase transition, causing growth arrest and death. Paclitaxel works by stabilizing or polymerizing microtubules within cancer cells. [Solowey, E., Lichtenstein, M., Sallon 2014] Paclitaxel changed cancer treatment, and vincristine and vinblastine, two of its variants, were identified first. Plant extracts combining vinca alkaloids, Taxus diterpenes, Podophyllum lignans, and Camptotheca alkaloids may have improved anticancer effects. [Bhatnagar. P 2015] Urtica membranaceous, [Zschocke, S., Rabe2000] The study indicated that anticancer plant extracts might destroy cancer cells without affecting normal human lymphocytes and fibroblasts. Using plant extracts instead of chemical ones minimizes the chance of hazardous side effects. [Stagos, D., Amoutzias, G. D 2012] The plant extracts improved the number of G1 cells with decreased DNA content and chromatin condensation.

### **Traditional Concept for cancer management**

Natural bioactive compounds derived from medicinal plants have significantly contributed to human health. This review emphasizes the development of new anticancer agents and treatment strategies for various types of cancer. Consequently, numerous natural bioactive compounds and metabolites warrant investigation to understand their mechanisms of action and structural characteristics, which are essential for creating innovative anticancer drugs. Although the drug discovery process—encompassing compound isolation, characterization, biological activity assessment, and both preclinical and clinical trials—is time-consuming and expensive, the pursuit of green alternatives for cancer treatment that have minimal side effects is

invaluable. Recent advancements in modern techniques and sophisticated instrumentation have facilitated the identification of several new and more effective bioactive drugs sourced from potent medicinal plants, potentially leading to the development of impactful anticancer compounds. Additionally, due to their therapeutic properties, these compounds can be viewed not only as potential cancer treatments but also as promising supplementary foods or nutraceuticals that promote overall health and assist in cancer management. Plants serve as a rich reservoir of bioactive compounds, containing active molecules that influence various biochemical and signaling pathways. Recent research highlights the novelty and efficacy of anticancer drugs derived from plants. Moreover, certain medicinal plants and their bioactive constituents have demonstrated significant effects against a range of cancers, including breast cancer, lung cancer, leukemia, Kaposi sarcoma, testicular germ cell tumors, Hodgkin's lymphoma, follicular lymphoma, and acute lymphoblastic leukemia, among others, with their mechanisms of action being elucidated. Therefore, it is essential to continue the identification and discovery of these compounds to provide the public with more effective treatment options. Since ancient times, natural drugs have been central to medicinal practices and have served as primary healthcare solutions across various cultures. These drugs, encompassing plant-based, animal-based, and mineral-based medicines, have been particularly prominent in India and China, which are often considered mother nations for the utilization of natural-product drugs [32]. Approximately 80% of the world's population relies on traditional medicinal systems, and plant-derived drugs have significant therapeutic value [33]. Medicinal plants, the key components of these systems, have been used for their healing properties for centuries.

According to Ashok and Devasagayam (2007), nearly 70% of Indians rely on natural medications, a figure that increases to 90% in Africa. Herbal drugs, a critical component of natural drugs, play a significant role in Ayurveda, yoga, Unani, Siddha, homeopathy, and naturopathy [34]. Particularly in the realm of cancer, the convergence of ethnobotany and traditional knowledge is crucial to the development and use of natural medicines. Ethnobotanical investigations, which focus on the utilization of plants and other natural compounds by many civilizations, have yielded vital knowledge regarding their potential therapeutic attributes. Scientists and researchers have frequently been influenced by this conventional approach when attempting to identify plants that may possess anticancer properties. The utilization of periwinkle in traditional medicine, for instance, has resulted in the identification of vinca alkaloids, which are essential chemotherapeutic agents. The persistent integration of conventional wisdom and contemporary scientific investigation remains a pivotal catalyst in the ongoing pursuit of novel anticancer substances [35,36,37].

In the realm of anticancer drug discovery, natural products are pivotal because they offer a diverse array of therapeutic possibilities. This historical overview traces the journey from traditional medicine to modern cancer therapy. Initially, plant- and animal-derived compounds were used in traditional medicine, laying the foundation for understanding their therapeutic potential [38,39]. The 20th century saw a significant shift in the systematic isolation and characterization of active compounds from natural sources, leading to breakthroughs such as Vinca alkaloids, which had a substantial impact on treating challenging cancer types [39,40,41].

Progression in extraction and separation methodologies has facilitated the transformation of natural substances from conventional applications to contemporary medicinal agents. Previously, techniques employed to extract therapeutic chemicals from plants and other natural sources were frequently primitive, and lacked efficiency. However, since the introduction of modern technologies and chemistry, these techniques have progressed considerably. The use of methodologies such as ultrasonic, microwave-assisted, and supercritical fluid extraction has facilitated the selective and effective separation of active chemicals [42,43]. In addition to increasing the yield and purity of natural products, these developments have enabled the identification of novel molecules with anticancer effects. The capacity to extract and analyze the distinct constituents of conventional treatments has proven crucial in comprehending their mechanisms of action and formulating standardized pharmacological drugs [44,45].

The development of Taxol, or paclitaxel, from the Pacific yew tree epitomizes this evolution, balancing ecological sustainability with therapeutic advancement. Discovered as part of the National Cancer Institute program in the 1960s, Taxol's journey highlights the integration of emerging technologies such as high-throughput screening and computational modelling in drug discovery [38,46,47]. Despite challenges such as supply issues and ecological impacts, innovations in synthetic and semi-synthetic methodologies have paved the way for the next generation of anticancer drugs [48,49].

Taxol's mechanism of action, promoting tubulin assembly into microtubules and stabilizing them against disassembly, is distinct from other treatments of its time, making it a unique and effective anticancer agent [50]. However, the development of Taxol faced challenges, owing to the low abundance of the compound in its natural source and the ecological implications of harvesting yew trees. Advances in semi-synthesis from more abundant yew species eventually led to FDA approval of ovarian cancer treatment in the early 1990s [49,51]. Taxol's success story not only underlines the importance of natural products in drug discovery, but also emphasizes the need for sustainable sourcing and interdisciplinary collaboration in pharmaceutical development.

The incorporation of natural substances into contemporary pharmacopeia signifies a meaningful advancement in pharmaceutical exploration. Although the utilization of natural chemicals was first inspired by traditional medicine, their

integration into conventional healthcare has necessitated stringent scientific verification and standardization. Extensive pharmacological and toxicological testing was conducted as part of this procedure, to guarantee safety and effectiveness in strict adherence to rigorous standards of regulatory bodies [40]. The incorporation of natural compounds, such as Taxol, into pharmacopeia represents a transition from anecdotal and empirical use to evidence-based medicine. Furthermore, it emphasized the potential of natural products as an abundant reservoir of innovative therapeutic agents with the capacity to tackle a multitude of complex health ailments, such as diverse forms of cancer [52,53].

It has been explored and studied in natural compounds and their structural analogs, and show exceptional variation in chemicals. In addition, the distinct molecular characteristics of natural products enable them to offer greater safety and effectiveness [47]. Chemotherapy drugs like doxorubicin and cisplatin, as well as radiotherapy, are commonly employed in cancer treatment, but are associated with severe adverse reactions and toxic side effects. Radiotherapy, in particular, can lead to cognitive dysfunction and a decline in brain function [54]. Additionally, chemotherapy may result in secondary tumors and damage to normal tissues, presenting challenges for cancer survivors. Common issues during chemotherapy include bone marrow suppression, causing immunosuppression, and various toxicities such as liver, kidney, and heart toxicity [55]. For instance, cisplatin can induce nausea, vomiting, acute kidney injury, neurotoxicity, and ototoxicity. Some chemotherapy drugs may not effectively target less-active cancer cells, influencing overall survival and prognosis, negatively [56].

In recent times, natural compounds have gained importance in cancer prevention and treatment. These compounds, including phenols (such as curcumin, quercetin, resveratrol, and capsaicin), flavonoids (quercetin, tanshensin IIa, and icariin), terpenoids (andrographolide, artesunate, and atracylodes), alkaloids (matrine, berberine, and piperine), and others, play a crucial role. They exhibit anti-inflammatory properties, promote cell apoptosis, inhibit invasion and metastasis, and enhance immune responses. These natural compounds have demonstrated efficacy against various cancers like lung cancer, breast cancer, and ovarian cancer [57].

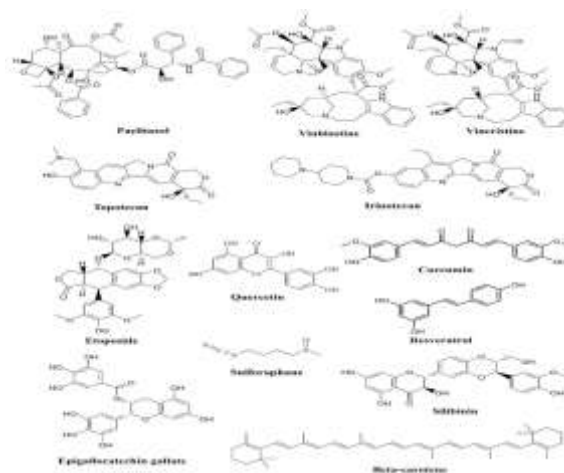
Compounds generated from bacteria, plants, and marine organisms are considered to be natural products. Throughout history, natural products have been crucial for the advancement in cancer treatments. Research on anti-cancer medication employs natural products because of their extensive chemical diversity, distinctive structural characteristics, and biological activity, which has less toxicity. As some of these substances have undergone evolutionary adaptations to protect species from illnesses, including cancer, they are promising candidates for anticancer drugs. Screening the anti-cancer activity of natural-product extracts is a customary initial step taken by researchers. Subsequently, promising extracts are isolated and purified to determine their precise active components. It is frequently possible to enhance the quality of natural products by chemical modification, as in the case of improving their bioavailability or targeting particular types of cancer cells. By synthesizing analogs or derivatives, medicinal chemists can augment the drug-like characteristics of substances.

About fifty percent of drugs originated from natural substances. These could be compounds that are either semi-synthetic or obtained from flora [58]. Examples of natural products used in anti-cancer drug development include the following (Figure 2 and Table 1).

#### ***Methods for identifying cancer drivers based on gene mutations***

A gene known as a "driver" must be changed in order for a tumour to grow. Cell division, checkpoints, and other genomic alterations accumulate in cancer cells as a result of driver mutations, which are somatic mutations that contribute to abnormal cell proliferation and carcinogenesis (fig 2) Mutations that have no effect on the cells may be possible. In 2007, [Settleman, J.] Due to clonal proliferation, all final cancer cells will have attendant mutations, making them just as important as driving mutations.



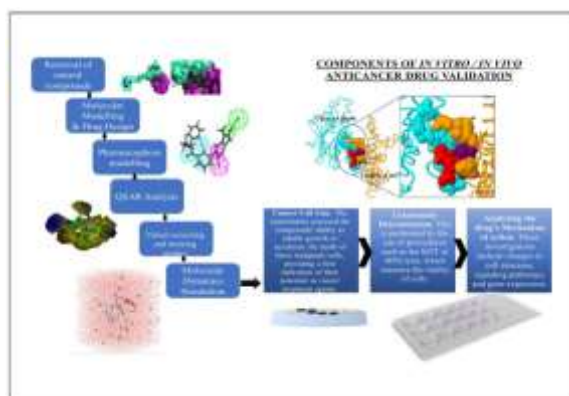


**Fig 2: Natural compounds and structures**

Proto-oncogenes and tumor suppressor genes are two cancer-causing genes. Oncogene genes like BRAF, KRAS, or MYC must have a gain of function mutation to become cancerous. [DeBerardinis 2007] Two copies of the tumor suppressor gene must be inactivated for the tumor to form. This includes TP53, PTEN, and CDKN2A. Finding driver genes can be done by looking for DNA sequences that affect a particular protein location. [McFarland 2014] These genes can be used to classify mutations that cause disease. Those genes that have changed more frequently than expected are known as driver genes. In multi-cancer patients, driver changes are more common.

In 2009, [Stratton, M. R.] Mutational processes have caused an overstock of mutations relative to the projected base rate, leading to a new class of approaches for finding areas of DNA. It has been discovered that 568 genes are responsible for 28,000 tumors and 66 malignancies. Only 2% of driver mutations in proteins are accountable for the more than 20 different malignancies caused. [J. R. Pon 2015.] Knowledge of driver genes and their tumorigenic potential is necessary for cancer patients' antibody or other inhibitor treatment. There are still many unanswered questions about driving genes.

In contrast to rare genes, those that often occur in the human population are discovered. A rare genetic mutation drives less than 1% of all malignancies. In 2020 [Salichos, L.]



**Fig 3: Classification drug validation**

To understand why particular driver mutations are so rare, researchers used a theoretical framework. The protein is activated by tissue-specific driver mutations with high or low frequency, according to the explanation. Because just a few driver mutations happen, the protein activation is insufficient, according to the theory of this study. Even while clinically unusual drivers may be found, computational software may not, which creates an entirely different set of complications. It is becoming more and more common knowledge that non-coding genes contribute to the occurrence of driving mutations, but their total number in the human genome is still very small. [Kumar, S. 2017, January 8] stated that These components generate extraordinarily lengthy sequences, notwithstanding our discovery.

#### ***Nano-medication for cancer drug development***

Discovering anti-cancer medications from natural sources faces numerous hurdles, which slow down the development of

effective treatments. The intricate molecular compositions of these natural products pose significant challenges, due to their complexity, making it difficult and resource-intensive to separate, identify, and synthesize them. Moreover, the efficacy of natural compounds as anti-cancer drugs is hindered by limited absorption and distribution in the body, leading to concerns about their bioavailability. Toxicity is a critical consideration, since certain natural substances can pose potential risks, necessitating thorough toxicological studies to ensure patient safety. Additionally, resistance to treatments derived from natural products may emerge in cancer cells, over time. Therefore, a deeper understanding of resistance mechanisms and the development of new strategies to counteract this resistance are essential.

Sourcing natural substances also creates sustainability challenges, as unsustainable farming practices and overharvesting can harm ecosystems and exhaust these resources. The case study of Combretastatin A4, derived from African bushwillow, exemplifies these concerns. Its low solubility and instability in water present significant obstacles to its clinical development. Researchers have tackled these issues by developing a water-soluble version, Combretastatin A-4 phosphate (CA-4P), and prodrug forms to enhance delivery and optimize therapeutic efficacy. Concurrently, employing computer models for natural-product-based drug development faces obstacles, due to the intricate and diverse structures of these molecules. Scarce experimental data, limited databases, and high structural flexibility further impede precise modeling. Variations in chemical makeup and bioactivity, along with poorly understood mechanisms of action, complicate the creation of standardized models. Challenges such as overfitting, substantial computational demands, and the necessity for rigorous experimental validation by regulatory bodies further add to these complexities.

Progress in utilizing natural ingredients for anticancer treatments faces major setbacks, due to intellectual property and patent issues. Often, complex legal matters surrounding the patenting of biological materials complicate the process for securing patents on molecules derived from living organisms. Biopiracy, which arises when indigenous groups are not fairly compensated for their traditional knowledge, presents another barrier. Legal and financial hurdles can impede research and development, alongside ethical concerns raised by these challenges. Striking a balance between protecting the rights of corporations and researchers, while acknowledging the valuable contributions and knowledge of traditional communities, is vital in addressing these intellectual property concerns.

The recruitment of participants and the design of clinical trials provide an additional set of obstacles in the development of anticancer medicines derived from natural products. The complexity of designing studies that assess the safety and effectiveness of these drugs stems from their varied characteristics. Recruiting an adequate number of volunteers who satisfy the precise criteria for these studies might pose challenges, especially in the case of rare or severe diseases. In light of these obstacles, novel trial-design methodologies, including adaptive trials and efficient patient recruitment and retention tactics, are required, to guarantee that clinical investigations provide dependable and significant findings.

### ***Strategies to Overcome the Challenges***

The relevance of ancient knowledge is increasingly being acknowledged, with the development of anticancer drugs derived from natural ingredients. Innovative medicinal compounds may be developed with the assistance of indigenous people and healers who have utilized these natural medicines for millennia. By adopting this strategy, researchers not only gain access to an abundance of untapped therapeutic chemicals and plants, but also promote a drug development process that is more inclusive and ethical. The establishment of collaborative alliances that demonstrate reverence and recognition of traditional wisdom may facilitate the identification of innovative anticancer drugs and save this priceless information for posterity. Advanced analytical methods such as mass spectrometry and nuclear magnetic resonance have greatly boosted the characterization of complex natural-product structures, leading to greater knowledge of their chemical characteristics and medicinal potential.

Nanotechnology plays a significant role in enhancing the bioavailability of natural products. Nanoparticle-based medication carriers have the potential to increase the solubility and stability of these chemicals, allowing better absorption and distribution inside the body. Furthermore, studying combination treatments that incorporate natural products and conventional anticancer medications might produce synergistic results. This method can assist in overcoming resistance mechanisms and enhancing treatment effects, by concurrently addressing several routes.

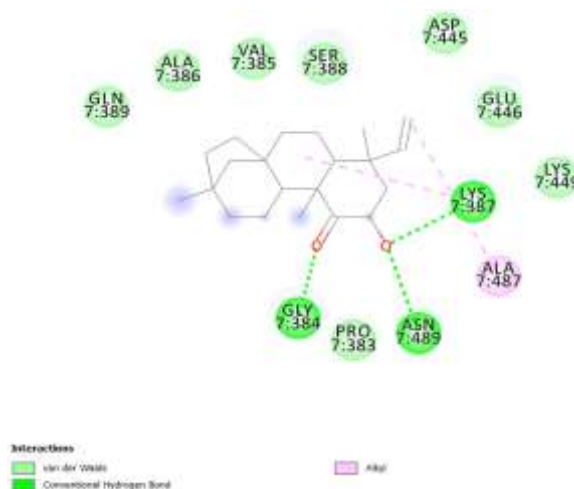
Reducing the toxicity of natural product-derived chemicals is another key concern. Strategies could entail prodrug development, where less hazardous precursor molecules are transformed into their active forms within the body, or devise focused drug-delivery methods to limit off-target effects. In addition, fostering sustainable techniques for gathering and cultivating natural products is crucial for safeguarding ecosystems and guaranteeing a steady supply of these valuable substances. Thus, ethical and ecologically acceptable procurement strategies are vital.

The combination of artificial intelligence (AI) and machine learning in this sector is set to transform the discovery and prediction of prospective natural-product-based anticancer medicines. AI systems can evaluate large datasets to locate molecules with high therapeutic potential, thereby accelerating the drug discovery process. Moreover, substantial clinical trials are essential to evaluate the safety and effectiveness of natural-product-derived anticancer medicines in humans. These

studies are critical for providing the evidence needed to bring promising drugs from the laboratory to clinical practice. Recent developments in deep learning have substantially altered drug discovery processes. Researchers have employed deep neural networks to study and predict drug-related parameters, including the bioactivity of prospective anticancer drugs. The future of drug development, especially in the field of natural products, entails combining deep-learning algorithms with standard computer methodologies. This technique is intended to boost the accuracy of predictions of the anticancer potential of natural chemicals.

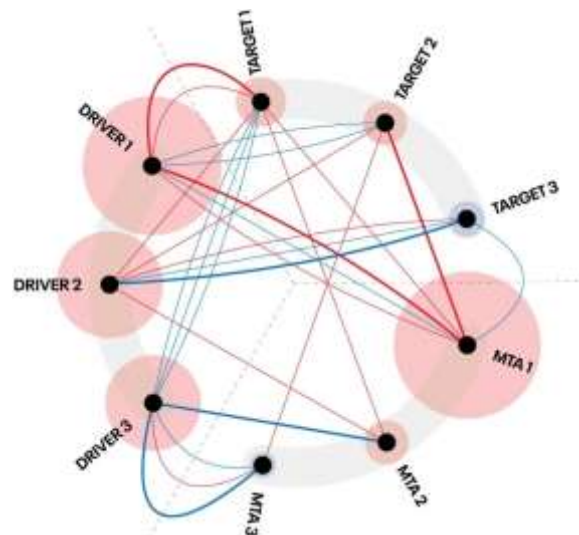
### ***Virtual Screening and Molecular docking of Cancer drugs***

By utilizing computer-aided drug design, you may save money, time, and effort to create new medications. In 2020, [Rzechorzek, N. J. 2020] Chemotherapy has long targeted DNA replication because cancer cells expand unchecked compared to noncancerous ones. DNA replication-licensing complex component MCM7 is a possible therapeutic target in some malignancies. We computationally tested 452 biogenic chemicals for their ability to bind to the MCM7 protein using the UEFS Natural Products dataset. According to [Pankaj Banerjee (P.B) and Eckert 2018], Three of them (UEFS99, UEFS137, and UEFS428) were shown to be very MCM7-specific (see below). Twelve active site amino acids in MCM7 are targeted by UEFS99 (Pro383, Gln384, Val 385, Ala386, Lys387, Ser388, Gln389, Asp445, Glu446, Lys449, Ala487, and Asn489). Van der Waals interactions between UEFS99 and MCM7 include Asp445, Gln389, and Lys449 of MCM7 (Figure 4). In the year of our Lord [(Xianxiao 2015]



**Fig 4: UEFS99-binding residues in MCM7** Residual interactions are denoted by a variety of colours..Digital drug assignment development for Artificial intelligence

Machine learning is commonly referred to as "artificial intelligence" (AI) (ML). When it comes to artificial intelligence (AI), computer science and the FDA's action plan use the term "intelligent computer programs." In 2019, [Tate, J. G.] It is difficult to find good predictive algorithms for treatment decisions based on ML because of the various variables that influence MTA efficacy. An advanced then rule-based expert system was employed to build the DDA system based on the experimental data. Transparency, openness, and consistency are all hallmarks of rule-based expert systems. [I. C. G C., 2020] reduced the system's complexity. The Realtime Oncology Treatment Calculator™ uses TMB, MSI, druggable targets, MTAs, and tumor type in its calculations (Fig.5). In addition, COSMIC was incorporated. A gene's molecular changes and druggable target genes and MTAs are all considered by the DDA algorithm during scoring. In 2020, the MDAP will be implemented. Then, based on their link to all of the tumor's putative driver genes, it assigns each gene a score. Based on how many "driver genes" they have, how many "target genes," and their ratings, MTAs are ranked. A study by [Belin, L. et al. 2017] According to evidence, biological parameters in one tumor can be compared to those in other tumors to compute weights.



**Fig 5: Schematic representation of a digital medication assignment system (DDA). Druggable molecular targets (TARGET) and cancer-promoting genes (DRIVER) have been linked (MTA). A DDA score is produced for each driver gene present in the tumour, together with their targets and MTAs. In the AEL score computation for DRIVERS, TARGETS, and MTAs, the lines represent evidence-based functional associations, not physical correlations.**

#### 4. CONCLUSION

The overexpression of MCM7, a component of the DNA replication licensing complex, has been observed in various human cancers. To identify potential inhibitors of MCM7, biogenic compounds were screened against the MCM7 protein. This study employed DDA, an advanced artificial intelligence (AI) system, to determine which molecular target agents (MTAs) should be prioritized for precision oncology. The system provides unique algorithms and an evidence database for each case, along with detailed explanations of its reasoning and procedural actions, ensuring human quality assurance. The expert system is rich in if-then relationships and methodologies. Such technologies are included in the FDA's AI/ML Action Plan for Medical Devices. The advantages of utilizing an electronic nose over a biosensor are significant, allowing for multiple readings without performance degradation, and enabling large-scale production of these devices. For modern science to advance, it must first understand and uphold traditional values such as harmony, healing, and compassion. Only through this understanding can balance, restoration, and empathy be effectively supported. The use of plant-derived anticancer drugs is gaining traction due to their effectiveness, necessitating regulation to meet demand and ensure sustainability. This report outlines key players in the Cancer Cognitive Computing market, including IBM, Microsoft, Google, Apple, Palantir, Alacris, and others. It encompasses financial data, product and service offerings, and recent developments. Furthermore, this section discusses the major industry players from both positive and negative perspectives. Consequently, the insights gained from this research can assist companies in formulating business strategies and identifying new opportunities within the global cancer cognitive computing market.

#### REFERENCES

- [1] Malnic, B., Hirono, J., Sato, T. & Buck, L. B. (1999). Combinatorial receptor codes for odors. *Cell*, 96(5), 713-723.
- [2] Ferlay, J., Shin, H. R., Bray, F., Forman, D., Mathers, C., & Parkin, D. M. (2010). Estimates of worldwide burden of cancer in 2008: GLOBOCAN 2008. *International journal of cancer*, 127(12), 2893-2917.
- [3] World Health Organization (WHO). (2020). Global Health Estimates 2020: Deaths by Cause, Age, Sex, by Country and by Region, 2000-2019. World Health Organization.
- [4] Tschandl P, Rinner C, Apalla Z, Argenziano G, Codella N, Halpern A, et al. Human-computer collaboration for skin cancer recognition. *Nat Med*. 2020 Aug;26(8):1229-34.
- [5] Brinker TJ, Hekler A, Enk AH, Berking C, Haferkamp S, Hauschild A, et al. Deep neural networks are superior to dermatologists in melanoma image classification. *Eur J Cancer*. 2019 Sep 1;119:11-7.
- [6] Esteva A, Kuprel B, Novoa RA, Ko J, Swetter SM, Blau HM, et al. Dermatologist-level classification of skin cancer with deep neural networks. *Nature*. 2017 Feb;542(7639):115-8.
- [7] Kim H, Goo JM, Lee KH, Kim YT, Park CM. Preoperative CT-based Deep Learning Model for Predicting



- Disease-Free Survival in Patients with Lung Adenocarcinomas. *Radiology*. 2020 Jul;296(1):216–24.
- [8] Geras KJ, Mann RM, Moy L. Artificial Intelligence for Mammography and Digital Breast Tomosynthesis: Current Concepts and Future Perspectives. *Radiology*. 2019 Nov;293(2):246–59.
- [9] Hu L, Bell D, Antani S, Xue Z, Yu K, Horning MP, et al. An Observational Study of Deep Learning and Automated Evaluation of Cervical Images for Cancer Screening. *JNCI J Natl Cancer Inst*. 2019 Sep 1;111(9):923–32.
- [10] Liu, Q., Lim, S. Y., Soo, R. A., Park, M. K., & Shin, Y. (2015). A rapid MZI-IDA sensor system for EGFR mutation testing in non-small cell lung cancer (NSCLC). *Biosensors and Bioelectronics*, 74, 865-871.
- [11] Bayley, J. P., & Devilee, P. (2010). Warburg tumours and the mechanisms of mitochondrial tumour suppressor genes. Barking up the right tree?. *Current opinion in genetics & development*, 20(3), 324-329.
- [12] Cornblatt, B. S., Ye, L., Dinkova-Kostova, A. T., Erb, M., Fahey, J. W., Singh, N. K., ... & Visvanathan, K. (2007). Preclinical and clinical evaluation of sulforaphane for chemoprevention in the breast. *Carcinogenesis*, 28(7), 1485-1490.
- [13] Amin, A., Gali-Muhtasib, H., Ocker, M., & Schneider-Stock, R. (2009). Overview of major classes of plant-derived anticancer drugs. *International journal of biomedical science: IJBS*, 5(1), 1.
- [14] Shah, U., Shah, R., Acharya, S., & Acharya, N. (2013). Novel anticancer agents from plant sources. *Chinese journal of natural medicines*, 11(1), 16-23.
- [15] Phillipson, J. D. (1997). Medicinal plants. *Journal of Biological Education*, 31(2), 109-115.
- [16] Purabi saha, Kajal mishra, Rajni Bala, Roshan Kumar\*, Shivam Kumar. A Comprehensive Review on Paclitaxel and its Envolving role in the Management of Ovarian Cancer. *International Journal Research and Analytical Review*. 2020;7(3)430-442.
- [17] Jordan, M. A., & Wilson, L. (2004). Microtubules as a target for anticancer drugs. *Nature Reviews Cancer*, 4(4), 253-265.
- [18] Khazir, J., Mir, B. A., Pilcher, L., & Riley, D. L. (2014). Role of plants in anticancer drug discovery. *Phytochemistry Letters*, 7, 173-181.
- [19] Solowey, E., Lichtenstein, M., Sallon, S., Paavilainen, H., Solowey, E., & Lorberboum-Galski, H. (2014). Evaluating medicinal plants for anticancer activity. *The Scientific World Journal*, 2014.
- [20] Bhatnagar, P., Pant, A. B., Shukla, Y., Chaudhari, B., Kumar, P., & Gupta, K. C. (2015). Bromelain nanoparticles protect against 7, 12-dimethylbenz [a] anthracene induced skin carcinogenesis in mouse model. *European Journal of Pharmaceutics and Biopharmaceutics*, 91, 35-46.
- [21] Zschocke, S., Rabe, T., Taylor, J. L., Jäger, A. K., & Van Staden, J. (2000). Plant part substitution—a way to conserve endangered medicinal plants?. *Journal of ethnopharmacology*, 71(1-2), 281-292.
- [22] Stagos, D., Amoutzias, G. D., Matakos, A., Spyrou, A., Tsatsakis, A. M., & Kouretas, D. (2012). Chemoprevention of liver cancer by plant polyphenols. *Food and Chemical Toxicology*, 50(6), 2155-2170.
- [23] Zajicek G (2001) Cancer and metaphysics. *Med Hypotheses* 57: 243-248.
- [24] Starwyn D (2012) The Psycho-Emotional Roots of Cancer. *Accupuncture Today Vol13*
- [25] Kearney KG, Richard EH (2017) Self-compassion and breast cancer in 23 cancer respondents: Is the way you relate to yourself a factor in disease onset and progress. *Psychology* 8: 14-26.
- [26] Rahnema M, Fhi Khoshkn M, Maddah SSB, Ahmadi F (2012) Iranian cancer patients' perception of spirituality: A qualitative content analysis study. *BMC Nursing* 11: 19.
- [27] Chauhan A, Semwal D K, Mishra S.P, Semwal RB (2017) Ayurvedic concept of Shatkriyakala: A traditional knowledge of cancer pathogenesis and therapy. *J Integr Med* 15: 88-94
- [28] Haber, D. A., & Settleman, J. (2007). Drivers and passengers. *Nature*, 446(7132), 145-146.
- [29] DeBerardinis, R. J., Lum, J. J., Hatzivassiliou, G., & Thompson, C. B. (2008). The biology of cancer: metabolic reprogramming fuels cell growth and proliferation. *Cell metabolism*, 7(1), 11-20.
- [30] McFarland, C. D. Mirny, L. A. & Korolev, K. S. (2014). Tug-of-war between driver and passenger mutations in cancer and other adaptive processes. *Proceedings of the National Academy of Sciences*, 111(42), 15138-15143.
- [31] Stratton, M. R., Campbell, P. J. & Futreal, P. A. (2009). The cancer genome. *Nature*, 458(7239), 719-724.
- [32] Salichos, L., Meyerson, W., Warrell, J., & Gerstein, M. (2020). Estimating growth patterns and driver effects

in tumor evolution from individual samples. *Nature communications*, 11(1), 1-14.

- [33] Kumar, S., & Gerstein, M. (2017). Less is more in the hunt for driver mutations. *Nature*, 547(7661), 40-41.
- [34] Tinkle, S., McNeil, S. E., Mühlebach, S., Bawa, R., Borchard, G., Barenholz, Y. & Desai, N. (2014). Nanomedicines: addressing the scientific and regulatory gap. *Annals of the New York Academy of Sciences*, 1313(1), 35-56.
- [35] Albanese, A., Tang, P. S., & Chan, W. C. (2012). The effect of nanoparticle size, shape, and surface chemistry on biological systems. *Annual review of biomedical engineering*, 14, 1-16.
- [36] Gerlowski LE, Jain RK. Microvascular permeability of normal and neoplastic tissues. *Microvasc Res*. 1986;31(3):288–305. doi: 10.1016/0026-2862(86)90018-X
- [37] Bregoli, L., Movia, D., Gavigan-Imedio, J. D., Lysaght, J., Reynolds, J., & Prina-Mello, A. (2016). Nanomedicine applied to translational oncology: A future perspective on cancer treatment. *Nanomedicine: Nanotechnology, Biology and Medicine*, 12(1), 81-103.
- [38] Kim, E. M., & Jeong, H. J. (2017). Current status and future direction of nanomedicine: focus on advanced biological and medical applications. *Nuclear medicine and molecular imaging*, 51(2), 106-117.
- [39] Magalhaes L.G., Ferreira L.L.G., Andricopulo A.D. Recent Advances and Perspectives in Cancer Drug Design. *An. Acad. Bras. Ciências*. 2018;90:1233–1250. doi: 10.1590/0001-3765201820170823. [DOI] [PubMed] [Google Scholar]
- [40] Kaleem M., Perwaiz M., Nur S.M., Abdulrahman A.O., Ahmad W., Al-Abbasi F.A., Kumar V., Kamal M.A., Anwar F. Epigenetics of Triple-Negative Breast Cancer via Natural Compounds. *Curr. Med. Chem*. 2021;29:1436–1458. doi: 10.2174/0929867328666210707165530. [DOI] [PubMed] [Google Scholar]
- [41] Karn V., Sandhya S., Hsu W., Parashar D., Singh H.N., Jha N.K., Gupta S., Dubey N.K., Kumar S. CRISPR/Cas9 System in Breast Cancer Therapy: Advancement, Limitations and Future Scope. *Cancer Cell Int*. 2022;22:234. doi: 10.1186/s12935-022-02654-3. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [42] Alhosin M., Sharif T., Mousli M., Etienne-Selloum N., Fuhrmann G., Schini-Kerth V.B., Bronner C. Down-Regulation of UHRF1, Associated with Re-Expression of Tumor Suppressor Genes, Is a Common Feature of Natural Compounds Exhibiting Anti-Cancer Properties. *J. Exp. Clin. Cancer Res*. 2011;30:41. doi: 10.1186/1756-9966-30-41. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [43] Parvez A., Choudhary F., Mudgal P., Khan R., Qureshi K.A., Aspatwar A., Farooqi H. PD-1 and PD-L1: Architects of Immune Symphony and Immunotherapy Breakthroughs in Cancer Treatment. *Front. Immunol*. 2023;14:1296341. doi: 10.3389/fimmu.2023.1296341. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [44] Chatterjee A., Mambo E., Sidransky D. Mitochondrial DNA Mutations in Human Cancer. *Oncogene*. 2006;25:4663–4674. doi: 10.1038/sj.onc.1209604. [DOI] [PubMed] [Google Scholar]
- [45] Watson I.R., Takahashi K., Futreal P.A., Chin L. Emerging Patterns of Somatic Mutations in Cancer. *Nat. Rev. Genet*. 2013;14:703–718. doi: 10.1038/nrg3539. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [46] Piñeros M., Parkin D.M., Ward K., Chokunonga E., Ervik M., Farrugia H., Gospodarowicz M., O’Sullivan B., Soerjomataram I., Swaminathan R., et al. Essential TNM: A Registry Tool to Reduce Gaps in Cancer Staging Information. *Lancet Oncol*. 2019;20:e103–e111. doi: 10.1016/S1470-2045(18)30897-0. [DOI] [PubMed] [Google Scholar]
- [47] Ferlay J., Colombet M., Soerjomataram I., Parkin D.M., Piñeros M., Znaor A., Bray F. Cancer Statistics for the Year 2020: An Overview. *Int. J. Cancer*. 2021;149:778–789. doi: 10.1002/ijc.33588. [DOI] [PubMed] [Google Scholar]
- [48] Loud J.T., Murphy J. Cancer Screening and Early Detection in the 21 St Century. *Semin. Oncol. Nurs*. 2017;33:121–128. doi: 10.1016/j.soncn.2017.02.002. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [49] Zugazagoitia J., Guedes C., Ponce S., Ferrer I., Molina-Pinelo S., Paz-Ares L. Current Challenges in Cancer Treatment. *Clin. Ther*. 2016;38:1551–1566. doi: 10.1016/j.clinthera.2016.03.026. [DOI] [PubMed] [Google Scholar]
- [50] Wang D.R., Wu X.L., Sun Y.L. Therapeutic Targets and Biomarkers of Tumor Immunotherapy: Response versus Non-Response. *Signal Transduct. Target. Ther*. 2022;7:331. doi: 10.1038/s41392-022-01136-2. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [51] Debela D.T., Muzazu S.G.Y., Heraro K.D., Ndalama M.T., Mesele B.W., Haile D.C., Kitui S.K., Manyazewal T. New Approaches and Procedures for Cancer Treatment: Current Perspectives. *SAGE Open Med*. 2021;9:20503121211034366. doi: 10.1177/20503121211034366. [DOI] [PMC free article] [PubMed] [Google Scholar]

Scholar]

- [52] Tohme S., Simmons R.L., Tsung A. Surgery for Cancer: A Trigger for Metastases. *Cancer Res.* 2017;77:1548–1552. doi: 10.1158/0008-5472.CAN-16-1536. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [53] Tiwari P.K., Ko T.-H., Dubey R., Chouhan M., Tsai L.-W., Singh H.N., Chaubey K.K., Dayal D., Chiang C.-W., Kumar S. CRISPR/Cas9 as a Therapeutic Tool for Triple Negative Breast Cancer: From Bench to Clinics. *Front. Mol. Biosci.* 2023;10:1214489. doi: 10.3389/fmolb.2023.1214489. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [54] Kumar M., Dubey R., Kumar Shukla P., Dayal D., Kumar Chaubey K., Tsai L.-W., Kumar S. Identification of Small Molecule Inhibitors of RAD52 for Breast Cancer Therapy: In Silico Approach. *J. Biomol. Struct. Dyn.* 2023;1–14. doi: 10.1080/07391102.2023.2220822. [DOI] [PubMed] [Google Scholar]
- [55] Baskar R., Lee K.A., Yeo R., Yeoh K.W. Cancer and Radiation Therapy: Current Advances and Future Directions. *Int. J. Med. Sci.* 2012;9:193. doi: 10.7150/ijms.3635. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [56] Salas-Benito D., Pérez-Gracia J.L., Ponz-Sarvisé M., Rodríguez-Ruiz M.E., Martínez-Forero I., Castañón E., López-Picazo J.M., Sanmamed M.F., Melero I. Paradigms on Immunotherapy Combinations with Chemotherapy. *Cancer Discov.* 2021;11:1353–1367. doi: 10.1158/2159-8290.CD-20-1312. [DOI] [PubMed] [Google Scholar]
- [57] Esfahani K., Roudaia L., Buhlaiga N., Del Rincon S.V., Papneja N., Miller W.H. A Review of Cancer Immunotherapy: From the Past, to the Present, to the Future. *Curr. Oncol.* 2020;27:87–97. doi: 10.3747/co.27.5223. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [58] Choi H.Y., Chang J.-E. Targeted Therapy for Cancers: From Ongoing Clinical Trials to FDA-Approved Drugs. *Int. J. Mol. Sci.* 2023;24:13618. doi: 10.3390/ijms241713618. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [59] Deli T., Orosz M., Jakab A. Hormone Replacement Therapy in Cancer Survivors—Review of the Literature. *Pathol. Oncol. Res.* 2020;26:63–78. doi: 10.1007/s12253-018-00569-x. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [60] Chu D.-T., Nguyen T.T., Tien N.L.B., Tran D.-K., Jeong J.-H., Anh P.G., Van Thanh V., Truong D.T., Dinh T.C. Recent Progress of Stem Cell Therapy in Cancer Treatment: Molecular Mechanisms and Potential Applications. *Cells.* 2020;9:563. doi: 10.3390/cells9030563. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [61] Tsimberidou A.M., Fountzilas E., Nikanjam M., Kurzrock R. Review of Precision Cancer Medicine: Evolution of the Treatment Paradigm. *Cancer Treat. Rev.* 2020;86:102019. doi: 10.1016/j.ctrv.2020.102019. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [62] Dumanovsky T., Augustin R., Rogers M., Lettang K., Meier D.E., Morrison R.S. The Growth of Palliative Care in U.S. Hospitals: A Status Report. *J. Palliat. Med.* 2016;19:8–15. doi: 10.1089/jpm.2015.0351. [DOI] [PMC free article] [PubMed] [Google Scholar]
- [63] Ma D.-L., Chan D.S.-H., Leung C.-H. Molecular Docking for Virtual Screening of Natural Product Databases. *Chem. Sci.* 2011;2:1656–1665. doi: 10.1039/C1SC00152C. [DOI] [Google Scholar]
- ..