

Glucose in Endoplasmic Reticulum Stress and Resistant Framework Disturbance: A Potential Job in Malignant Growth Improvement

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Opinion Article

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Introduction

This study suggests that new studies are required into the possible relationship between cancer and the rapid up/down-regulation of glucose levels from long term high sugar dietary behaviour. Where there is no outside cancer-causing impact, for example, harmful affront or oxidative pressure, long haul high glucose admission might assume a few parts in malignant growth improvement and metastasis. Additionally, during endoplasmic reticulum (ER) stress conditions the unfurled protein reaction (UPR) flagging might become upset (under-actuated) allowing uncontrolled misfolded proteins adding to conditions for disease inception. Conversely, UPR signalling may then over-activate hindering immunogenic response to sequester and terminate cancer cells, providing further opportunities in cancer formation¹.

The endoplasmic reticulum organelle is responsible for folding linear polypeptides into precise 3D protein structures used within cells. ER stress occurs when the supply of unfolded proteins exceeds the capacity of the ER to fold, or when folding errors occur (misfolded proteins). ER stress results in the activation of multiple signalling pathways, called an unfolded protein response, to restore ER organelle homeostasis and hence cell survival. The role of misfolded proteins in cancer development is also studied in order to develop therapeutic models. Three key ER stress sensors that detect misfolded proteins and initiate UPR are inositol requiring enzyme 1 (IRE1), protein kinase RNA-like ER kinase (PERK) and activating transcription factor 6

(ATF6). These sensors are normally held in an inactive state by glucose regulated protein 78 (GRP78). When misfolding occurs, GPR78 has a greater affinity, binding to, the misfolded proteins, thus activating (by detaching from) ER stress sensors to initiate UPR.

High dietary sugar intake provides a direct and rapid upregulation of glucose into the bloodstream. Studies show that chronic hyperglycaemia downregulates UPR response with reduced levels of both GRP78 and UPR signalling pathway sensors². Conversely, GRP78 may be induced through glucose starvation and ad-hoc high sugar diets may contribute to rapid downregulations that may simulate glucose starvation conditions; resulting in GPR overexpression. The precise mechanisms are unclear and require further elucidation however we postulate that GPR78 oversupply may remain attached to stress sensors (IRE1, PERK, ATF6) and thus maintaining an inactive UPR signalling state. Studies show that overexpression of BiP (GRP78) suppressed activation of IRE1, ATF6 and to a lesser extent PERK. PERK is involved in pro-apoptotic signalling and increased GPR78 expression correlates to resistance to cell apoptosis. Studies also show that when GRP78 expression is knocked down UPR pathways are activated³. Thus, both the rapid upregulation and downregulation of glucose may play a key role in UPR signalling suppression. Signalling sensor under activation results in a failure to initiate UPR to restore balance thus misfolded proteins may accumulate. Further, proceeded with inability to start UPR may at last hinder the UPR end signal that would some way or another incite cell apoptosis. This may at last allow a few cells under ER stress conditions with over the top misfolded protein mistakes to advance cell division. The longer terms impacts of such aberrant cell replication may play a role in contributing to conditions for general cell malignancy to develop¹.

In addition to impacting eukaryotic cells in general, there may also be a more specific effect to immune cell biology. Under high glucose conditions, such as in type 2 diabetes, it is understood that inflammatory conditions prevail with an immune response to high blood glucose levels. This outcomes in additional cell harm as well as broad brokenness of the safe system. When glucose, and GPR78

levels, standardize the UPR tactile organization enacts. This may now result in a shift from UPR signalling under activation to a state of over activation. Moreover, there is a state of increased and prolonged expression of UPR sensors (IRE1, PERK, and ATF6) in an effort to process the accumulation of unfolded proteins to reach cellular homeostasis. Such prolonged ER stress conditions now plays an important role in disrupting the regulation of the immune system. Studies highlight the relationship of ER stress on the immune system and its implication for cancer development⁴. In particular, immunosuppression providing an opportunity for cancer formation.

ER stress with prolonged UPR signalling impacts the regulation and apoptosis of various immune cells types including T cells, B cells and immunosuppressive cells (Dendritic, type 2 macrophage, myeloid-derived suppressor cell (MDSC), and TReg). Moreover, MDSC cells are activated which impair the function of CD8+ T Cells, macrophages are suppressed, the antitumor immunity of Dendritic cells are compromised with diminished antigen presentation, and CD4+ T Cell apoptosis, differentiation and dysfunction is induced. Overall, the immune response may be impaired in its ability to infiltrate, sequester and terminate cancer cells. Long term and ad-hoc high sugar dietary intake results in a rapid up/down-regulation of glucose levels and may influence the under activation and over activation of UPR signalling during ER stress conditions. Consequentially, sustained and long term high sugar dietary behaviour that contributes to ER stress and UPR signalling instability may result in conditions for cancer initiation and development⁵. Hence, it is suggested that these areas require further study. One final remark, since ER stress has been implicated

in the pathogenesis of other diseases, there may also be a more acute relationship during periods of high cellular growth and division. This may influence the ability to conceive abnormal foetal termination, and neonatal developmental complications.

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