

APOPTOSIS: REGULATION AND MECHANISMS OF THE PROGRAMMED CELL SUICIDE-REVIEW*Kurbonov R. Khurshed**Wasiq Mehmood**Waqar Mehmood**Muhammad Ali Rehan**Addi Khalid**Haider Jamil**Samarkand State Medical University*

Abstract: Apoptosis, or programmed cell death, is a hallmark process of cellular homeostasis, embryonic development, and immune responses. It therefore plays an important role in the elimination of damaged or unnecessary cells through the protection of an organism against harmful effects, such as tumorigenesis and autoimmune diseases.

It reviews the current understanding of the mechanisms that regulate apoptosis, focusing on intrinsic and extrinsic pathways, regulatory molecules, and the biological significance of apoptosis both in health and disease. Beyond these issues, the review will discuss possible therapeutic interventions directed to apoptotic pathways for the treatment of cancer, neurodegenerative disorders, and other diseases involving dysregulation of apoptosis.

Keywords: apoptosis, programmed cell death, caspases, Bcl-2 family, mitochondrial pathway, extrinsic pathway, intrinsic pathway, cell signaling, apoptotic regulators, p53, death receptors, cytochrome c, DNA fragmentation, cell cycle, cancer therapy, immune response, cellular homeostasis.

Introduction.

Apoptosis is a highly regulated, energy-dependent process that has critical roles in normal development, functioning of the immune system, and maintenance of tissue homeostasis. Other than necrosis, that is, cell death resulting from injury or infection, apoptosis is a programmed process in an orderly and predictable fashion, characterized by distinct morphological and biochemical changes including shrinkage of the cell, chromatin condensation, DNA fragmentation, and membrane blebbing, followed by phagocytosis of the apoptotic bodies by neighboring cells without induction of inflammation [4,42].

The involvement of apoptosis in most physiological processes underlines its importance, which includes the elimination of damaged cells, morphogenesis of organs and tissues, and even shaping of the immune system. Conversely, dysregulation may

lead to severe pathologies such as cancer, autoimmune diseases, and neurodegenerative disorders.

There are two major pathways of apoptosis: the intrinsic, or mitochondrial, pathway, and the extrinsic, or death receptor, pathway. Both pathways ultimately result in the activation of caspases- proteolytic enzymes that carry out apoptosis through the cleavage of various substrates in the cell.

1. Intrinsic Pathway (Mitochondrial Pathway)

Internal stimuli, such as DNA damage, oxidative stress, or growth factor deprivation, activates the intrinsic pathway. This pathway is generally regulated by the balance between two sets of proteins from the Bcl-2 family: those that protect the integrity of the outer mitochondrial membrane and those that perturb it. Members of the Bcl-2 family include pro-apoptotic proteins, such as Bax and Bak, and anti-apoptotic proteins, such as Bcl-2 and Bcl-Xl [8,41].

When a cell is under stress, this promotes the permeabilization of the mitochondrial membrane by pro-apoptotic proteins like Bax and Bak. This allows the release of cytochrome c into the cytoplasm, where it forms an apoptosome complex with Apaf-1 (apoptotic protease activating factor-1) and procaspase-9. The complex serves to activate caspase-9, which then activates other downstream effector caspases, such as caspase-3, to execute the apoptotic program.

2. Extrinsic pathway (Death receptor pathway)

The extrinsic pathway is activated by extracellular signals due to the activation of death receptors on the cell surface. They are part of the tumor necrosis factor receptor superfamily, which includes receptors such as Fas, also known as CD95, and tumor necrosis factor-related apoptosis-inducing ligand receptors (TRAIL-Rs) [30].

The binding of a ligand-for instance, the interaction of Fas with its ligand, FasL- triggers the oligomerization of receptors and the recruitment of adaptor molecules, which include FADD, standing for Fas-associated death domain. Adaptor FADD in turn recruits procaspase-8 to form the death-inducing signaling complex, DISC. Activation of caspase-8 at the DISC directly activates the execution caspases, or, in case of several cell types, through the cleavage of Bid, a pro-apoptotic Bcl-2 family member, engages the intrinsic pathway [23].

Regulation of Apoptosis.

Apoptosis is a process with many controlling elements, regulating the balance between pro-apoptotic and anti-apoptotic signals. This regulation involves many levels:

1. Bcl-2 Family Proteins

The Bcl-2 family of proteins is an essential regulator of the intrinsic apoptotic pathway, more specifically of mitochondrial outer membrane permeabilization. Anti-apoptotic members, represented by Bcl-2 and Bcl-xL, maintain mitochondrial

integrity, while pro-apoptotic ones, exemplified by Bax and Bak, initiate cytochrome c release, thus initiating apoptosis. Several post-translational regulatory mechanisms, including phosphorylation and ubiquitination, tune these interactions between family members, enabling modulation of their activity in response to cellular signals.

2. Inhibitor of Apoptosis Proteins (IAPs)

Members of the IAP family of proteins are known inhibitors of caspases that prevent apoptosis. These proteins, such as the X-linked inhibitor of apoptosis protein (XIAP), bind and inhibit caspases-3, -7, and -9. Maintaining stringent control over the activity of IAPs is paramount to assure proper control of apoptosis, and molecules such as Smac/DIABLO (released from mitochondria in response to an apoptotic signal) antagonize IAPs to favor cell death.

3. p53 Tumor Suppressor

p53 is the central moderator of apoptosis, especially with respect to DNA damage. In its active state, p53 can induce the transcription of pro-apoptotic genes such as Bax, PUMA, and Noxa and induce apoptosis via the mitochondrial pathway. It also directly interacts with Bcl-2 family proteins to initiate apoptosis in a transcriptionally independent way.

4. Caspases

Caspases are the main executors of apoptosis, wherein initiator caspases could be activated through an intrinsic or extrinsic pathway-the examples being caspase-8 and caspase-9. The activated caspases then cleave and activate the effector caspases caspase-3 and caspase-7. Such processes dismantle the cell through the cleavage of essential structural and functional proteins. In any case, caspase activity needs to be regulated, since uncontrolled activation might lead to unwanted cell death [5,6,27].

Apoptosis in Disease.

1. Cancer

Abrogation of apoptosis is a feature of many cancers and enables their survival in spite of oncogenic transformation or environmental insult. This generally arises through overexpression of anti-apoptotic proteins, such as Bcl-2, or loss of pro-apoptotic regulators, including p53 mutations. Targeting of apoptotic pathways thus represents a promising approach in cancer treatment, either by Bcl-2 inhibitors or by TRAIL receptor agonists.

2. Neurodegenerative diseases:

Alzheimer's disease, Parkinson's disease, and Huntington's disease represent a category of neurodegenerative nervous system diseases collectively characterized by excessive apoptosis. Neurons inappropriately enter an apoptosis death program in response to stress signals, such as oxidative damage or protein misfolding, resulting in progressive neurodegeneration.

3. Autoimmune Diseases :

Defective apoptosis among autoreactive lymphocytes, for example, is one major factor resulting in autoimmune diseases. In SLE, for example, ineffective clearance of apoptotic cells may lead to the accumulation and presentation of cellular debris that drives autoimmunity.

Given its central role in a variety of diseases, therapies targeting apoptotic pathways have considerable promise. Approaches include: - BH3 mimetics: These molecules mimic the action of pro-apoptotic Bcl-2 family members in promoting apoptosis in cancer cells. - TRAIL receptor agonists-are agents that can cause extrinsic apoptosis in malignant cells. Inhibitors of IAPs acting to promote caspase activation in cells bypassing apoptosis. Probably, the future of research is in fine-tuning these approaches to selectively target disease cells without the involvement of normal tissues and thereby further improve the therapeutic potential of apoptosis modulation in medicine [7,14,26].

Apoptosis Pathways: The Main Regulators in Cellular Homeostasis and Disease.

Programmed cell death or apoptosis is one of the important biological processes in the maintenance of tissue homeostasis and plays an important role during the process of development, the immune response, and elimination of cells that are either damaged or dangerous to an organism. Dysregulation in apoptosis can give rise to diseases ranging from cancer to autoimmune disorders and neurodegenerative diseases. For such states of disease, therapeutic intervention needs proper understanding of the pathways and molecular mechanisms of apoptosis [11].

Apoptosis: The Necessity of Cell Death for Cellular Homeostasis.

Apoptosis is a tightly regulated process that ensures the orderly demolition and removal of unwanted or damaged cells without inducing inflammation or injury to neighboring tissues. Such a process in healthy organisms maintains a balance between cell proliferation and cell death, ensuring that tissues and organs perform their functions correctly. It plays a part in many physiological processes, such as embryonic development, functioning of the immune system, and remodeling of tissues [31].

Normally, various stimuli, including DNA damage, oxidative stress, and aberrant proteins, usually trigger apoptosis in cells. The process involves a cascade of highly regulated signaling pathways that eventually lead to the activation of specific enzymes, known as caspases, responsible for conducting the cell through its demise.

Generally, apoptosis occurs via one of two major pathways: an intrinsic/mitochondrial pathway and the other an extrinsic/death receptor pathway. Both result in the activation of caspases-a family of cysteine proteases responsible for the execution phase of apoptosis.

1. Intrinsic Pathway (Mitochondrial Pathway)

In general, the intrinsic pathway is activated by signals that originate from inside the cell and often occur as a response to internal stress such as DNA damage, oxidative

stress, or loss of growth factors. The key regulator of the intrinsic pathway is the mitochondria-the powerhouse of the cell [18].

Due to pro-apoptotic signals, MOMP occurs, allowing the release of cytochrome c into the cytosol. The released cytochrome c, in the cytosol, binds to a protein called Apaf-1, apoptotic protease activating factor-1, forming an apoptosome structure. This complex then activates an initiator caspase-9, which in turn activates executioner caspases mainly caspase-3 and caspase-7, systematically degrading cellular components.

The Bcl-2 family is considered the major regulator of the intrinsic pathway. The proteins of this family can be either pro-apoptotic-for instance, Bax and Bak-or anti-apoptotic-for instance, Bcl-2 and Bcl-xL-and the fate of the cell depends on the balance between these opposing forces. Pro-apoptotic proteins induce permeabilization of the mitochondrial membrane, whereas anti-apoptotic proteins block it [18].

2. Extrinsic Pathway (Death Receptor Pathway)

The extrinsic pathway of apoptosis is generally initiated in response to various forms of cellular stress or damage through the action of cell surface death receptors. Death receptors are members of the tumor necrosis factor receptor superfamily, which encompasses several receptors, among them being Fas/CD95 and TNF receptor 1/TNFR1. Binding of ligands, such as FasL (Fas ligand) or TNF, to these receptors leads to the assembly of a structure called the death-inducing signaling complex/DISC [19,20].

Upon formation, the DISC activates initiator caspase-8, and sometimes with the help of caspase-10, further gets the executioner caspases-like caspase-3 activated which then leads to cell death. In a few cases, the extrinsic pathway may merge at later steps with the mitochondrial or intrinsic pathway to amplify the apoptotic signal.

The Role of Mitochondria in Apoptosis: From Cellular Life to Death.

Mitochondria are often referred to as the "powerhouses of the cell," essential for cellular energy production, metabolism, and the regulation of cell fate. While mitochondria are necessary to maintain cellular life through ATP production, they have equally become recognized as major regulators of programmed cell death, or apoptosis. This dual role in both life and death underlines the complexity of mitochondria and places them at an important site in cellular homeostasis. Apoptosis, on the other hand, is a highly regulated process that assures orderly cell elimination following damage or other rules of elimination and centers around mitochondria through the intrinsic pathway.

Mitochondria and the intrinsic pathway of apoptosis.

The mitochondrial pathway, or intrinsic pathway of apoptosis, is internally initiated by cell stress signals such as DNA damage, oxidative stress, and nutrient deprivation. These Stressors initiate a cascade of signals that all converge on changing

the membrane permeability of the mitochondria. This proves to be a crucial step in the process because MOMP releases pro-apoptotic factors into the cytosol.

The process at its core is driven by the interplay of the Bcl-2 family, which orchestrates the balance of pro-apoptotic and anti-apoptotic signals.

Pro-apoptotic proteins, such as Bax and Bak, form pores in the mitochondrial outer membrane, enabling release of cytochrome c and other death-promoting factors. Anti-apoptotic members of the Bcl-2 family, represented by Bcl-2 and Bcl-xL, exhibit inhibitory functions on MOMP and maintain mitochondrial integrity, which prevents apoptosis. The balance of activity among these proteins dictates whether a cell lives or dies by apoptosis [29].

Release of Pro-Apoptotic Factors.

One of the most pivotal events in mitochondria-mediated apoptosis is the release of cytochrome c from the mitochondria intermembrane space into the cytosol.

After release into the cytosol, cytochrome c associates with apoptotic protease activating factor-1 (Apaf-1) and forms a complex called the apoptosome. This complex, in turn, recruits and activates caspase-9, one of the initiator caspases, that subsequently activates executioner caspases such as caspase-3. These caspases mediate the orderly destruction of the cell by cleavage of key cellular components to produce characteristic apoptotic features such as DNA fragmentation, cell shrinkage, and membrane blebbing. In addition to cytochrome c, other mitochondrial factors released during apoptosis into the cytosol include Smac/DIABLO and Omi/HtrA2. These proteins function to facilitate apoptosis by neutralizing IAPs, which are inhibitors of apoptosis proteins that prevent caspase activity. The action of Smac/DIABLO and Omi/HtrA2 counteracts this and ensures that the apoptotic cascade proceeds efficiently [2,9].

Mitochondria as Sensors of Cellular Stress.

The mitochondria are highly sensitive to changes in the cellular environment and thus function as critical cellular sensors of cellular stress.

The increased accumulation of ROS within the mitochondria during conditions of high oxidative stress may induce oxidative damage to mitochondrial DNA, proteins, and lipids. This form of insult may compromise mitochondrial function and integrity, providing a stimulus for the activation of apoptosis. In this context, the mitochondria play a dual role: they are both targets of oxidative damage and amplifiers of apoptotic signals. Moreover, the involvement of mitochondria in the regulation of calcium homeostasis, already referred to, represents another critical event for the induction of apoptosis. In fact, an excessive influx of calcium into mitochondria may favor opening of the mitochondrial permeability transition pore, with subsequent loss of mitochondrial membrane potential, swelling, and finally rupture of the outer

membrane. This disrupts not only ATP production but also reinforces the apoptotic response by releasing pro-apoptotic factors [24].

Mitochondria and Disease.

Dysregulation of mitochondria-mediated apoptosis forms the basis of a wide variety of diseases. For example, in the case of cancer, defects in apoptotic pathways allow cancer cells to evade cell death, thus leading to tumor growth and therapeutic resistance. Overexpression of anti-apoptotic proteins, such as Bcl-2 and Bcl-xL, is typical in most cancers, thereby allowing them to survive under oncogenic stress. Such is a promising therapeutic strategy that has targeted these proteins, with small molecule inhibitors including BH3 mimetics, in attempts to restore apoptosis in cancer cells. Conversely, in neurodegenerative diseases like Alzheimer's, Parkinson's, and Huntington's disease, the mitochondrial-mediated apoptosis is excessive. These neurodegenerative diseases involve abnormal mitochondrial dynamics, overproduction of ROS, and defective energy metabolism that leads to the death of neuronal cells. Protection to mitochondrial function by therapeutic strategies and prevention of excessive apoptosis may be considered as a future perspective for treatment strategies in these neurodegenerative disorders [25,32].

Therapeutic Implications.

Because of the central role of mitochondria in apoptosis, they represent one of the most critical targets of therapeutic intervention by diseases set upon by either excessive, or insufficient, cell death.

In cancer, reactivating apoptosis involves either targeting the Bcl-2 family of proteins or augmenting the release of pro-apoptotic factors. This is exactly opposite to the idea observed in diseases where excess apoptosis causes damage in a tissue, such as in ischemic injury and neurodegeneration-conditions wherein therapies protecting mitochondrial integrity and preventing MOMP may be beneficial. For instance, mitochondrially targeted antioxidants have been explored for their effect on reducing oxidative stress and protecting mitochondrial dysfunction against neurodegenerative diseases. In addition, inhibitors of the mPTP have also shown promise in certain preclinical models of ischemia-reperfusion injury, which would again support a view that modulation of mitochondrial permeability may represent a useful approach toward the prevention of context-specific cell death [1,12,37].

However, mitochondria do much more than merely produce energy; they are also at the hub of the regulation of apoptosis and key players in determining cell fates.

By regulating the release of pro-apoptotic factors and acting as sensors of cellular stress, mitochondria determine a cell's decision to survive or undergo programmed cell death. Dysregulation in mitochondrial-mediated apoptosis can lead to various diseases, ranging from cancer to neurodegenerative disorders. Consequently, mitochondria have become a major focal point in therapeutic development. The

detailed research on the role of mitochondria in inducing apoptosis continues to provide enlightenment on the basic processes of life and death occurring in the cell.

Caspases in Apoptosis: Molecular Switches for Cell Death.

Programmed cell death, or apoptosis, is important in the maintenance of cellular homeostasis and in development of tissues; its deficiency may impair the immune system. In contrast with necrosis, uncontrolled cell death that leads to inflammation, apoptosis is a process by which undesirable cells are eliminated non-invasively. Central to this process is a family of cysteine proteases known as caspases. These caspases may be conceptualized as molecular switches through which both intrinsic and extrinsic pathway signals are transduced to execute a cell death program [3,34].

The caspases - cysteine-aspartic proteases - are a family of enzymes that represent critical elements in both the triggering and execution phases of apoptosis. They are synthesized as proenzymes or inactive zymogens, which need to undergo activation by specific cleavage at specific aspartate residues. Caspases, based on their roles in apoptosis, are classified into two categories:

1. Initiator caspases, such as caspase-8, caspase-9, and caspase-2: They sense the apoptotic signal and trigger the cascade due to the activation of the executioner caspases [38].
2. Executioner caspases, including caspase-3, caspase-6, and caspase-7: These are activated by initiator caspases and carry out the apoptotic program through the cleavage of a wide array of cellular substrates, leading to cell dismantling [36].

Caspases are activated through two major apoptotic pathways: the extrinsic or death receptor pathway and the intrinsic or mitochondrial pathway.

1. Extrinsic Pathway:

The extrinsic pathway is a response to a signal originating outside the cell; it involves the interaction of a ligand, such as FasL or TNF- α , with its death receptor counterpart, such as Fas or TNFR, respectively. The outcome of this cross-linking between ligand and receptor is multimerization, which then forms the death-inducing signaling complex, DISC, that recruits and activates caspase-8. Once activated, caspase-8 directly cleaves and activates executioner caspases such as caspase-3, leading to apoptosis. This pathway is crucial for the immune system in removing virus-infected or malignant cells [10].

2. Intrinsic Pathway:

The intrinsic pathway originates from the mitochondria and is normally triggered by intracellular stress signals due to DNA damage, oxidative stress, or growth factor deprivation. Such stressors provoke the MOMP and release of the cytochrome c into the cytosol. Cytochrome c, together with Apaf-1, constitutes the apoptosome, which in turn activates caspase-9. Caspase-9 cleaves and activates executioner caspases. The stage will be set for cellular demolition. This pathway is tightly regulated

by members of the Bcl-2 family of proteins, which either promote [e.g., Bax, Bak] or inhibit [e.g., Bcl-2, Bcl-xL] apoptosis [21].

The Role of Executioner Caspases Once activated, the initiator caspases proteolytically activate the executioner caspases, which include caspase-3 and caspase-7. These executioner caspases cleave a wide range of cellular substrates, including proteins responsible for cellular structural integrity, such as cytoskeletal proteins; DNA repair, such as PARP; and other vital cellular functions. This results in the typical morphological changes seen in apoptotic cells, including chromatin condensation, membrane blebbing, and the eventual formation of apoptotic bodies.

Executioner caspases not only target structural proteins but also contribute to the activation of endonucleases responsible for DNA fragmentation, thus ensuring orderly breakdown of the cell into apoptotic bodies that can be phagocytosed by neighboring cells of immune cells without inducing an inflammatory response.

Regulation of Caspases.

Caspase activity is tightly regulated through various mechanisms, including: 1. IAPs: These proteins, including XIAP, bind and inhibit both the initiator and executioner caspases, thus preventing unwanted apoptosis. 2. Bcl-2 Family Proteins: The balance between pro-apoptotic and anti-apoptotic Bcl-2 family members regulates mitochondrial permeability, thereby modulating activation of the intrinsic pathway. 3. Post-translational Modifications: Caspases are subjected to phosphorylation, ubiquitination, and other modifications that can either enhance or inhibit their activity. 4. Proteolytic Cleavage: Caspases become activated through proteolytic cleavage of their inactive zymogen forms. This may be highly regulated through upstream signaling molecules [16,33].

Caspases and Disease.

Most human diseases have been linked to aberrant regulation of caspases and apoptosis. Excessive activation of caspases can lead to degenerative disorders, including Alzheimer's disease, Parkinson's disease, and Huntington's disease, in which inappropriate cell death leads to the death of functional neurons. Conversely, defective caspase activation leads to the survival of cells destined to die by apoptosis, thereby contributing to the development of cancer, autoimmune diseases, and inflammatory disorders.

In cancer, for example, tumor cells often bypass apoptosis by downregulating the expression of caspases, mutating caspase genes, or overexpressing IAPs and anti-apoptotic Bcl-2 family proteins. Hence, tumor cells can withstand genotoxic stress conditions and immune surveillance. The recognition of such mechanisms has prompted therapeutic strategies that involve the restoration of caspase-dependent apoptosis in tumors [28,39].

Apoptosis in Cancer: Mechanisms of Tumor Suppression and Evasion.

There are mainly two pathways that control apoptosis:

1. The Intrinsic (Mitochondrial) Pathway:

This pathway is initiated through intracellular stress signals such as DNA damage, oxidative stress, and oncogene activation. The main executors of the pathway are the Bcl-2 family proteins, which modulate the permeability of mitochondrial membranes. Pro-apoptotic members, including Bax and Bak, induce the release of cytochrome c from mitochondria into the cytoplasm, where it activates caspase-9 by inducing a caspase cascade that results in cell death. Anti-apoptotic proteins such as Bcl-2 and Bcl-xL, which maintain mitochondrial integrity, oppose this process.

2. The Extrinsic or Death Receptor Pathway:

This pathway is triggered by external signals, namely, the ligation of ligands to death receptors on the cell surface. Some of the well-known receptors include Fas, TNF receptor, and TRAIL receptors. Following their activation, these receptors activate a caspase cascade through the activation of caspase-8, which, in turn, either directly or indirectly, through the cleavage of Bid, a proapoptotic protein, activates the downstream effector caspases, including caspase-3, leading to cell death.

Apoptosis as a Tumor Suppressor.

Apoptosis is an important process in which cells with potential damage or abnormalities are eliminated to prevent their proliferation and tumor formation. Many tumor suppressor proteins function as regulators of apoptosis, such as:

- p53: The "guardian of the genome," p53 has a central role in the detection of DNA damage and other cellular stresses. Upon activation, p53 can mediate apoptosis by transactivating pro-apoptotic proteins-like Bax or Puma-or downregulating anti-apoptotic proteins. In most cancers, p53 is mutated; the resultant loss of this checkpoint allows cells with genomic abnormalities to evade apoptosis and continue proliferating.
- PTEN: Another important tumor suppressor, PTEN opposes the action of the PI3K/Akt pathway, which promotes cell survival. Loss of PTEN correlates with heightened Akt activity-potently preventing apoptosis from taking place and consequently furthering tumor development.

Evasion of Apoptosis in Cancer.

One of the hallmarks of cancer is that malignant cells avoid apoptosis, thereby often achieving continuous growth and survival under conditions in which normal cells would die. There are various ways through which cancer cells evade apoptosis: 1. Upregulation of Anti-apoptotic Proteins: Most cancers express high levels of anti-apoptotic members of the Bcl-2 family, which include Bcl-2, Bcl-xL, and Mcl-1, and thereby prevent the release of cytochrome c and inhibit the intrinsic pathway of

apoptosis. High expression of such proteins has been associated with resistance to chemotherapy and poor prognosis in a number of cancers, such as leukemia and lymphoma.

2. Inactivation of p53: Genetic alterations that inactivate TP53, a tumor suppressor gene, are among the most common in human cancer. This results in the loss of the critical function of p53 to induce apoptosis in cells with damaged DNA or activated oncogenes. Many cancers also overexpress MDM2, a negative regulator of p53, further contributing to apoptotic evasion.

3. Death Receptors Are Lost: Often, tumor cells tend to downregulate or mutate the death receptors taking part in the extrinsic pathway of apoptosis, such as Fas and TRAIL-R; this makes them less sensitive to signals arriving for cell death. For example, mutations in the Fas receptor are common in metastatic cancers and, thus, help evade immune-mediated apoptosis.

4. Aberrant Apoptotic Signaling: The process of apoptosis includes a downstream signaling cascade in which the expressions of caspases or inhibitors of apoptosis proteins can be altered. Overexpression of IAPs, binding, and inhibiting caspases are common features in many cancers, including resistance to apoptosis-inducing therapies.

5. Activation of Survival Pathways: Oncogenic signaling pathways, like PI3K/Akt and NF- κ B, act to repress programmed cell death and thus favor survival. In tumor cells, the activation of survival pathways conveys a selective advantage due to resistance against apoptotic signals emanating from the tumor microenvironment, cytotoxic drugs, and immune cells [15,17,22].

Therapeutic Implications.

Given the critical role in neoplastic development and tumor progression, targeting apoptotic pathways has become an attractive strategy. Several strategies are in testing or under investigation:

Bcl-2 inhibitors:

Selective Bcl-2 inhibitors, such as venetoclax, have demonstrated clinical efficacy in hematologic malignancies like CLL at least in part through the restoration of apoptosis [40].

Death Receptor Agonists:

Therapeutic agents targeting death receptors, for example TRAIL receptor agonists, seek to induce the extrinsic apoptosis pathway in tumor cells. So far, clinical success has been poor due to the occurrence of resistance mechanisms and toxicity [13].

p53 reactivation:

These are small molecules that restore the function of mutant p53 or interfere with the interaction of p53 with its negative regulator MDM2. Such drugs could enhance the apoptotic response in tumors harboring non-functional p53 pathways. IAP Antagonists: Inhibitors of IAPs are also being developed, which relieve the inhibition on caspases and promote apoptosis in cancer cells. These agents have shown potential in preclinical studies but need further clinical development [35].

Conclusion.

Apoptosis represents an important mechanism of tumor suppression in which abnormal or damaged cells that might lead to the development of tumors are eliminated.

Cancer cells, however, have developed active ways of escaping apoptosis, thus surviving and proliferating unopposed. Knowledge about the molecular mechanisms controlling apoptotic pathways and their perturbations in cancer enables a researcher to elaborate on more potent therapies aimed at the restoration of the intact apoptotic machinery in malignant cells. With our ever-increasing knowledge concerning apoptosis and its role in cancer, this represents a highly promising area of research for the advancement of cancer treatment and improvements in patient outcomes.

References:

1. Abate M. et al. Mitochondria as playmakers of apoptosis, autophagy and senescence //Seminars in cell & developmental biology. – Academic Press, 2020. – T. 98. – C. 139-153.
2. Alqathama A. CASPASE-3 FUNCTION //CASPASE-3. – C. 21.
3. Asadi M. et al. Caspase-3: structure, function, and biotechnological aspects //Biotechnology and Applied Biochemistry. – 2022. – T. 69. – №. 4. – C. 1633-1645.
4. Ashkenazi A. Targeting the extrinsic apoptosis pathway in cancer //Cytokine & growth factor reviews. – 2008. – T. 19. – №. 3-4. – C. 325-331.
5. Berthelet J., Dubrez L. Regulation of apoptosis by inhibitors of apoptosis (IAPs) //Cells. – 2013. – T. 2. – №. 1. – C. 163-187.
6. Breckenridge D. G. et al. Regulation of apoptosis by endoplasmic reticulum pathways //Oncogene. – 2003. – T. 22. – №. 53. – C. 8608-8618.
7. Carson D. A., Ribeiro J. M. Apoptosis and disease //The Lancet. – 1993. – T. 341. – №. 8855. – C. 1251-1254.
8. Chao D. T. et al. Bcl-XL and Bcl-2 repress a common pathway of cell death //The Journal of experimental medicine. – 1995. – T. 182. – №. 3. – C. 821-828.
9. Chota A., George B. P., Abrahamse H. Interactions of multidomain pro-apoptotic and anti-apoptotic proteins in cancer cell death //Oncotarget. – 2021. – T. 12. – №. 16. – C. 1615.

10. Clement M. V., Stamenkovic I. Fas and tumor necrosis factor receptor-mediated cell death: similarities and distinctions //The Journal of experimental medicine. – 1994. – T. 180. – №. 2. – C. 557-567.
11. DeLong M. J. Apoptosis: a modulator of cellular homeostasis and disease states //Annals of the New York Academy of Sciences. – 1998. – T. 842. – №. 1. – C. 82-90.
12. Erekat N. S. Apoptosis and its therapeutic implications in neurodegenerative diseases //Clinical Anatomy. – 2022. – T. 35. – №. 1. – C. 65-78.
13. Falschlehner C. et al. TRAIL and other TRAIL receptor agonists as novel cancer therapeutics //Therapeutic Targets of the TNF Superfamily. – 2009. – C. 195-206.
14. Favaloro B. et al. Role of apoptosis in disease //Aging (Albany NY). – 2012. – T. 4. – №. 5. – C. 330.
15. Fernald K., Kurokawa M. Evading apoptosis in cancer //Trends in cell biology. – 2013. – T. 23. – №. 12. – C. 620-633.
16. Fesik S. W., Shi Y. Controlling the caspases //Science. – 2001. – T. 294. – №. 5546. – C. 1477-1478.
17. Fulda S. Tumor resistance to apoptosis //International journal of cancer. – 2009. – T. 124. – №. 3. – C. 511-515.
18. Green D. R. The mitochondrial pathway of apoptosis part II: the BCL-2 protein family //Cold Spring Harbor perspectives in biology. – 2022. – T. 14. – №. 6. – C. a041046.
19. Guerrache A., Micheau O. TNF-Related Apoptosis-Inducing Ligand: Non-Apoptotic Signalling //Cells. – 2024. – T. 13. – №. 6. – C. 521.
20. Han Y. H. et al. Regulation of anoikis by extrinsic death receptor pathways //Cell Communication and Signaling. – 2023. – T. 21. – №. 1. – C. 227.
21. Hao Z. et al. Specific ablation of the apoptotic functions of cytochrome C reveals a differential requirement for cytochrome C and Apaf-1 in apoptosis //Cell. – 2005. – T. 121. – №. 4. – C. 579-591.
22. Hensley P., Mishra M., Kyprianou N. Targeting caspases in cancer therapeutics //Biological chemistry. – 2013. – T. 394. – №. 7. – C. 831-843.
23. Inoue N. et al. Molecular characteristics of porcine Fas-associated death domain (FADD) and procaspase-8 //Journal of Reproduction and Development. – 2007. – T. 53. – №. 2. – C. 427-436.
24. Kumar V., Maity S. ER stress-sensor proteins and ER-mitochondrial crosstalk—signaling beyond (ER) stress response //Biomolecules. – 2021. – T. 11. – №. 2. – C. 173.
25. Lei C. et al. Copper induces mitochondria-mediated apoptosis via AMPK-mTOR pathway in hypothalamus of Pigs //Ecotoxicology and environmental safety. – 2021. – T. 220. – C. 112395.

26. Letai A. Apoptosis and cancer //Annual Review of Cancer Biology. – 2017. – T. 1. – №. 1. – C. 275-294.
27. Maximov G. K., Maximov K. G. The role of p53 tumor-suppressor protein in apoptosis and cancerogenesis //Biotechnology & Biotechnological Equipment. – 2008. – T. 22. – №. 2. – C. 664-668.
28. McIlwain D. R., Berger T., Mak T. W. Caspase functions in cell death and disease //Cold Spring Harbor perspectives in biology. – 2013. – T. 5. – №. 4. – C. a008656.
29. Mollazadeh H. et al. Effects of statins on mitochondrial pathways //Journal of Cachexia, Sarcopenia and Muscle. – 2021. – T. 12. – №. 2. – C. 237-251.
30. Nair P. et al. Apoptosis initiation through the cell-extrinsic pathway //Methods in enzymology. – Academic Press, 2014. – T. 544. – C. 99-128.
31. Obeng E. Apoptosis (programmed cell death) and its signals-A review //Brazilian Journal of Biology. – 2020. – T. 81. – №. 4. – C. 1133-1143.
32. Pantiya P. et al. Mitochondrial abnormalities in neurodegenerative models and possible interventions: Focus on Alzheimer's disease, Parkinson's disease, Huntington's disease //Mitochondrion. – 2020. – T. 55. – C. 14-47.
33. Pop C., Salvesen G. S. Human caspases: activation, specificity, and regulation //Journal of biological Chemistry. – 2009. – T. 284. – №. 33. – C. 21777-21781.
34. Salvesen G. S. Caspases and apoptosis //Essays in biochemistry. – 2002. – T. 38. – C. 9-19.
35. Selivanova G., Wiman K. G. Reactivation of mutant p53: molecular mechanisms and therapeutic potential //Oncogene. – 2007. – T. 26. – №. 15. – C. 2243-2254.
36. Sgorbissa A. et al. Caspase-3 and caspase-7 but not caspase-6 cleave Gas2 in vitro: implications for microfilament reorganization during apoptosis //Journal of cell science. – 1999. – T. 112. – №. 23. – C. 4475-4482.
37. Sharma V. K. et al. Apoptotic pathways and Alzheimer's disease: probing therapeutic potential //Neurochemical research. – 2021. – T. 46. – №. 12. – C. 3103-3122.
38. Shelton S. N., Dillard C. D., Robertson J. D. Activation of caspase-9, but not caspase-2 or caspase-8, is essential for heat-induced apoptosis in Jurkat cells //Journal of Biological Chemistry. – 2010. – T. 285. – №. 52. – C. 40525-40533.
39. Van Opendenbosch N., Lamkanfi M. Caspases in cell death, inflammation, and disease //Immunity. – 2019. – T. 50. – №. 6. – C. 1352-1364.
40. Vogler M. et al. Bcl-2 inhibitors: small molecules with a big impact on cancer therapy //Cell Death & Differentiation. – 2009. – T. 16. – №. 3. – C. 360-367.
41. Wu C. C., Bratton S. B. Regulation of the intrinsic apoptosis pathway by reactive oxygen species //Antioxidants & redox signaling. – 2013. – T. 19. – №. 6. – C. 546-558.

42.Zimmermann K. C., Green D. R. How cells die: apoptosis pathways //Journal of Allergy and Clinical Immunology. – 2001. – T. 108. – №. 4. – C. S99-S103.

