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The Role of the Immune System in Carcinogenesis and Cancer Immunotherapy

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Abstract

The aim of research is describing that immune system in the carcinogenesis also that cancer immunotherapy. In the never-ending quest to comprehend and battle cancer, the complex relationship between the immune system and carcinogenesis becomes a focus of scientific investigation. The intricate research of this interaction, which spans the domains of immunological surveillance, immune editing, and the tumor microenvironment, is captured in this research. For measuring the research study used Smart PLS also describe descriptive statistic, correlation also that model analysis between them. The immune system becomes a formidable opponent in the complex interaction between cancer and the immune system as the disease skillfully moves through the stages of elimination, equilibrium, and escape. This revolutionary environment is made possible by cancer vaccines, monoclonal antibodies, and creative approaches that offer tailored and focused treatments. Turning the pages, the story of cancer immunotherapy represents not just a success of human resourcefulness but also a growing comprehension of the complex systems that regulate our internal existence. Overall result founded that immune system shows direct related with carcinogenesis and cancer immunotherapy. The voyage begins with a promise: a future in which the immune system emerges as a tactical ally in the never-ending battle against cancer, not merely as a defense. The optimism for a disease that can be conquered endures as the sections are written, driven by scientific curiosity and unyielding resolve. We are at the brink of a new age in cancer therapy, one in which the immune system stands tall as a symbol of hope and therapeutic.

Keywords:

immune System (IS), Carcinogenesis (CC), Cancer Immunotherapy (CI), Smart PLS Algorithm.

Introduction

complicated network that is composed of organs, cells, and proteins and which can defend the body against infection and perform the role of protector for the cells of the body is called as immune system. The immune system is designed in such an organized way it develops the record of every little germ that enters the body and it performs the role of defender for the body so that it can recognize that microbe in case of is again into the same body. The role of the immune system is extremely unique. It protects the body of an organism from disease by performing its role against the harmful substances, germs,

This is an open-access journal, and articles are distributed under the terms of the Creative Commons Attribution-Non-Commercial-Share Alike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms. and cells that are dangerous to the body. Many cells, organs, and proteins are part of the immune system^[1]. One cannot notice the role of the immune system unless someone does not fall sick or face any injury. The main tissues and organs that comprise the immune system include bone marrow, spleen, thymus, tonsils, mucus membranes, and skin. Some cells are called specialized cells, including granulocytes, macrophages, and T lymphocytes. The immune cells are transported by lymphatic vessels of the immune system, and the immune cells will accumulate at lymph nodes. Lymph nodes are found throughout the body. There are two major types of immunity: active immunity and passive immunity. Immune function takes a stand to hamper the tumor growth, cancer cells, and TME step by step,

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and it stops the functions of all tumor-causing agents by activating the immune checkpoint and commands the CD4+ T cells to perform their role^[2]. The relationship between cancer cells and the immune system is based on three main principles. First, how an immune system performs its role in protecting an organism from such dangerous cancer-causing agents. First of all, the immune system recognizes the antigens from the pathogens, then it compels the effectors to target them and finally destroy such cancer-causing agents. So, it is the function of the immune system to search for cancer cells and then destroy them. It performs a significant role in cancer treatment as cancer cells' features vary from the normal cells^[3].

So, the immune system is designed in such a way that it can recognize and destroy these abnormal cells that have cancer-causing abilities inside them. Most likely, the location of immune cells is in the vicinity of the tumor, so it can hamper the growth of these cancer-causing agents. The branch of biology in which the interaction of cancer cells and the immune system is under discussion is known as cancer immunology. The immune system performs its functions and affects the development and treatment of cancer^[4]. Throughout medical history, there has been an ongoing curiosity and worry with cancer, the powerful enemy that constantly tests the human body's fortitude. Its mysterious nature, unchecked cell division, and the capacity to undermine the body's complex defenses have sparked a continuous search for a more profound understanding of its causes, development, and, most importantly, possibilities for therapeutic intervention.

The complex dance between the immune system and carcinogenesis is at the forefront of this scientific investigation. This dance holds the key to solving the mysteries of cancer biology and has recently become the focus of ground-breaking developments in cancer treatment, particularly in the area of cancer immunotherapy. The immune system, a complex network of cells, tissues, and organs, is the body's protective barrier against infections and aberrant cells with the potential to become cancer. It plays a critical function in monitoring and preserving the integrity of the cellular landscape. It is in this framework that the complex interaction between the immune system and cancer is revealed.

The story starts with the idea of immune surveillance, which is the immune system's constant observation of the body's cellular environment. Immune cells, particularly T cells, serve as sentinels in this constant state of alertness, spotting and killing cells that exhibit abnormal behavior, including the telltale signs of malignancy. There are various types of cancer. Many of them try to suppress the immune function and cause the immune system's abnormal functioning. Such types of 108

cancer spread towards the bone marrow which is an organ of the immune system, and make one's immunity weak against such dangerous diseases. After the establishment of molecular mechanisms, one therapeutic option came into the spotlight: immunotherapy. Immunotherapy is established for those patients that were treated with traditional therapy, but that therapy did not prove effective for that patient. The growth and spread of cancer-causing agents could not be controlled with that traditional treatment^[5].

The person who treated the cancer patient for the very first time was Edwin Smith Papyrus. It was the very first time a surgical procedure was used to treat solid tumors. After that, radiation therapy came into being with time. Roentgen was the person who gave the idea of using Xrays to diagnose cancerous cells. After that, chemotherapy began to be used in the medical field. William B. Coley was the first person to understand that the immune system plays a significant role in cancer treatment. He noticed that many of his patients who were suffering from sarcoma (which is a type of cancer in which cancerous cells appear at various locations within the body of the patient) undergo an abrupt change in which their tumor moves towards a less dangerous stage. This network which is based on complex cells and humoral factors that is known as the immune system is divided into two interconnected branches^[6].

Now, let's exchange about cancer immunotherapy, a ground-breaking paradigm change in cancer treatment. Equipped with a deep comprehension of the immune system's crucial function in cancer, scientists have made efforts to use its innate potential for medicinal gains. Checkpoint inhibitors are prime examples of this strategy because they interfere with the inhibitory signals cancer cells use to avoid being detected by the immune system. Specifically, medications that target cytotoxic T-lymphocyte-associated protein 4 (CTLA-4), programmed cell death protein 1 (PD-1), and programmed death-ligand 1 (PD-L1) have become effective tools in enabling the immune system to fully combat cancer. Cancer immunotherapy has expanded beyond checkpoint inhibitors to include cutting-edge techniques like CAR-T (chimeric antigen receptorspecific T-cell) treatment. By genetically modifying a patient's T cells to produce receptors that selectively target cancer cells, this ground-breaking method offers a targeted and individualized attack on tumors [7].

With the development of CAR-T treatment, a new age in which the body's immune cells are redesigned to become powerful combatants against cancer is being heralded. One of these natural systems is known as innate immunity. The immune system provides immunity with the help of its antibodies and the population of T and B lymphocytes. Natural immunity is based on the Journal of Carcinogenesis - 2024, 23:01 population of a large number of different types of cells that perform various functions, and all these functions, when combined, will protect against dangerous diseases like cancer^[8]. The second immunity is acquired immunity, which is based on aa unique procedure in which mutations occur in the population of two cell types called B and T lymphocytes that can produce various shapes called antibodies and T cell receptors^[9]. It is not a straight path from immune surveillance to carcinogenesis, though. The immune system participates in a dynamic process called immune editing as part of its never-ending quest to eliminate possible threats. Three unique phases make up this delicate tango between the immune system and cancer cells: elimination, balance, and escape. During the removal stage, the immune system effectively destroys cancerous cells in the early stages, stopping the growth of tumors.

This stage symbolizes the immune system's unwavering dedication to preserving cellular balance. However, cancer, even the cunning opponent, may endure an immune attack. After then comes the equilibrium phase, characterized by a precarious balance in which cancer cells and the immune system coexist without one of them taking control. While this balance keeps cancer from winning outright, it can set the stage for a tenacious and flexible enemy. It prepares cancer cells for the escape phase, during which they develop defense mechanisms against immunological recognition and destruction. This phase, which is marked by immune evasion, is a critical point in the development and spread of tumors in the course of cancer. When these molecules, which are called antibodies, combine with proteins that are structurally related to them, called antigens, and provide some signals that cause the propagation of antigens-specific lymphocyte output, there will be a required immune response.

The population of two more molecules, which are major histocompatibility complex gene products and cytokines^[10]. Necessary cell-to-cell link occurs because these molecules result in the form of required immune response. Antibodies are those specific proteins that are formed by B cells against non-self-molecules. Antibodies can react against the antigens, and they can also activate the complement system. One of the most important complement effects is phagocytosis^[11]. In the middle of dance, cancer cells complex build an this immunosuppressive environment in the tumor microenvironment, which poses a threat to the effectiveness of immune responses. Within this framework, cancer immunotherapy emerges as a paradigm-shifting approach that uses the body's natural defenses to specifically target and eliminate cancer.

The arsenal of immunotherapeutic techniques, which includes precision-guided CAR-T cell therapy armament and checkpoint inhibitors that release immunological Journal of Carcinogenesis - 2024, 23:01

brakes, signifies a shift from traditional therapies. In this intricate story, the tumor microenvironment turns out to be an important character. Like cunning puppet masters, tumors may control the surrounding environment to produce an immunosuppressive atmosphere that reduces the effectiveness of immune responses. Several processes, including the release of immunosuppressive chemicals and the enlistment of regulatory immune cells, contribute to creating an atmosphere that facilitates the spread of cancer. To develop tactics that can tip the scales in favor of the immune system, it is essential to comprehend the dynamic interplay between cancer cells and the immune system inside the tumor microenvironment.

Another aspect of immunotherapy is cancer vaccines, which prime the immune system to recognize and fight cancer cells, providing a preventative or therapeutic toolkit. These vaccines are a proactive approach to halting the growth of cancer or enhancing the immune system's capacity to destroy pre-existing tumors since they are made to elicit an immune response against certain antigens linked to cancer. As a flexible weapon in the immunotherapeutic toolbox, monoclonal antibodies are able to target and attach to particular proteins on the surface of cancer cells precisely.

The multimodal strategy in the fight against cancer is aided by monoclonal antibodies, which either label cancer cells for elimination or stop their proliferation. The development of cancer immunotherapy is a monument to human inventiveness as well as the intricate relationship between the immune system and disease. It represents a divergence from conventional therapeutic approaches and provides patients confronting powerful enemies inside their bodies with a ray of hope. The field of cancer therapy is about to undergo revolutionary shifts as research into the intricate relationship between the immune system and cancer unfolds. These developments will see the body's defenses become powerful partners in the battle against one of humanity's most fearsome enemies.

Research Objective

The main purpose of this research is to understand the immune system's role in working against cancer-causing agents and the immune system's performance in the phenomenon of cancer immunotherapy. After studying this research, one can understand the importance of the immune system in fighting against the different diseasecausing agents.

Literature Review

Researchers claim that probiotics play a critical role in improving the immunization of the body against cancer cells. most of the cancer cells that are dominant in ovarian cancer lose their biologically active status due to the use of probiotics as an immunization strategy. To prevent colon cancer from spreading across the body, nutrition-based immunization preventive therapies are made^[12]. Studies explain that a group of certain bacterial and fungi types plays a role in the human microbiome. these microbiome poses therapeutic role and are used in treatment against different cancer types^[13]. Studies suggest that certain malignancies result in the onset of cancer in different parts of the body including the breast and brain region. the prevalence of cancer-related malignancy due to HCMV is higher.

The genome of HCMV consists of oncogenes that are involved in developing cancer.by identifying the mechanism behind the mode of action of HCMV, the potential therapeutic treatment approaches can be developed^[14]. Studies predict that by comprehending the behind tumorigenesis, mechanism treatment approaches against cancer types can be developed. the interactive relationship between a host and its immune system is the key feature that plays a major role in developing anticancer therapies^[15]. The knowledge and understanding of cancer patients' immune systems provide new insight to clinicians for developing anticancer therapies^[16, 17].

Studies show that the immune system has specialized cells that manage its response when any external stimuli come in contact with the body, these cells are innate cells that can transform the homeostatic conditions into the inflammatory response. For regulating the functioning of innate cell stem, the microbiome is used in immunotherapy-based treatments^[18]. Studies explain that obesity is among the major health problem that results in cancer onset. most cancer cells are developed in obese persons, which develops various risks in affected patients. these risks include an increase in the production of growth hormones^[19].studies reveal that G6PD plays a prominent role in the energy metabolizing process. The G6PD is highly involved in initiating the formation of cancer cells in the body. TCGA is a test used to identify the role of G6PD in initiating oncogeneses. a substance capable of inducing cancer mechanism in PPP is G6PD^[20, 21]. Studies predict that under certain pathophysiological conditions, lipid vesicle formation takes place. These vesicles are termed exosomes that are formed through the ESCRT process. The communication between different cells is made through exosomes. the intracellular communication role exosomes play makes them prominent in cancer development^[22]. Studies explain that removing cancer cells from the body is a difficult task as cancer cells keep on replicating. the immortality feature associated with cancer cells makes their destruction difficult. under certain conditions, cancer cell dies using treatment-based therapies but these dying cancer cells still can redevelop into new cancer cells^[23].scholar explains that cancer have various types, and each type leads to serious complications .lung cancer is a cancer type that is treated. Through ICI process. the blocking technique of ICI makes it effective in treatment process against lung cancer. using biomarkers in the working process of the ICI technique improves its overall efficiency, making it suitable as a therapeutic target against cancer. One of the biomarkers for ICI is the microbiome. The microbiome can be a therapeutic agent to improve the ICI-based treatment procedure^[24].studies elaborate that cancer associated with the gut is treated using effective strategic treatment approaches. The treatment therapies used against the GC reduce the chances of diseases spread in a patient. several microbiomes are involved in causing GC, and in regulating the function of this microbiome, the use of immune regulation therapeutic therapy is made^[25]. Studies predict that the involvement of receptors in intracellular-based recognizing patterns helps them maintain the immune response. the RLR receptors are among the receptors that are involved in initiating immune response. For developing immunotherapy against bacteria and virus attacks, the use of RNA intermediate as a receptor is made^[26]. Studies claim that HPV is associated with developing cancer cells in various parts of the body.in the pelvis region and vagina, the cancer cells are formed due to HPV entrance into the patient's body. the involvement of oncogenes in developing HPV is prominent through studies^[27].

Scholars reveal that using the chemotherapeutic approach for treating the HNSCC is significantly critical for maintaining squamous cells functioning properly. The immune mechanism underlying the HNSCC onset is studied, and then a possible treatment strategy is employed^[28]. Scholastics' studies highlight that a genetic mutation is one of the activators of cancer cells in the human body. Any changes in the genetic patterns leads to serious alternation in the immune response of a person, making him more prone to develop cancer. Several bacteria and microorganisms are involved in causing genetic mutations, which in turn results in alternation in all the metabolic processes [29].scholars suggest that TME has several heterogeneous components responsible for developing patients' liver cancer cells. The tumor-infiltrating B lymphocytes are the cells used for developing therapies that help the liver become immunogenic against heterogeneous tumor cells^[30].

Scholar's therapies ssshow that many of the microbial community resides inhuman body. this community is in symbiotic relationship with the host.in developing GC, the microorganism helicobacter pylori is involved. the involvement process of microbiomes in causing cancer cells in different body regions is first studied, and then responsible treatment therapies are developed against it^[31]. Moreover, the CSC cells have characteristic feature of initiating the cancer cell developmental process.

carcinogenic tumors that are capable of inducing mutations causes chance cell production. various strategies and approaches have been used to make CSC capable of destroying cancer cells and not promoting its progression^[32]. Studies explain that the uniqueness of microorganisms is because of their unique nature. the working biological system is maintained through the use of magnesium. Mg is prominently inilbve in regulating the overall functioning of immune responses. The immune system response against certain malignancies is predicted through the use of Mg^[33].Scholar knowledge based Studies serval that dietary supplements are the main factors contributing to cancer onset. Poor dietary conditions result in serious infections that ultimately develop into cancer. the interaction between the microbiome and human is understandable for mangling the cancer-based treatment response. the functioning of the microbiomes that induce immune repossess in the host is affected by diet^[34].

Applications

The complex relationship between the immune system and cancer and the developments in cancer immunotherapy have far-reaching and revolutionary implications. The following are some significant uses in a range of fields:

Clinical Intervention

• Immunotherapies: By strengthening the body's immune reaction against cancer cells, checkpoint inhibitors, CAR-T cell therapy, and cancer vaccines are transforming the way that cancer is treated. Numerous tumors, such as melanoma, lung cancer, and hematological malignancies, respond favorably to these treatments.

Precision Health Care

• Personalized Therapies: Precision medicine in cancer treatment has been made possible by the development of immunotherapy. More focused and efficient treatments are possible when interventions are customized according to the patient's immunological profile and the unique features of their tumor.

Preventing Cancer

vaccinations: Cancer vaccinations, whether therapeutic or preventative, may be able to lower the risk of recurrence or stop the formation of some cancers. For example, HPV vaccinations target viruses connected to cervical and other malignancies.

Investigation and Medication Creation

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• Biomarker discovery: By comprehending the immunological environment in cancer, biomarkers that can forecast therapy response and direct therapeutic choices can be found.

- Development of Targeted Drugs: Knowledge of the

interplay between the immune system and cancer helps researchers create new targeted medications that alter specific immune system components to boost anti-cancer responses.

Tools for Diagnosis

• Immunohistochemistry: Pathologists can diagnose and categorize malignancies by using immune histochemical examination of tumor samples to determine the expression of certain proteins.

• Liquid biopsies: Real-time data on the course of cancer and the effectiveness of treatment can be obtained by tracking circulating tumor cells and cell-free DNA in the blood.

Combination Treatments

• Synergistic Approaches: By targeting cancer cells through several pathways at once, immunotherapies with conventional treatments combined like chemotherapy or radiation can improve therapeutic success.

Education and Awareness Regarding Cancer

• Public health initiatives: A better knowledge of the immune system's involvement in cancer enables the creation of educational initiatives and public health campaigns aimed at increasing knowledge of risk factors, early detection techniques, and preventative measures.

The field of predictive medicine

• Response Prediction: Individual responses to specific immunotherapies may be predicted using biomarkers and genetic profiling, facilitating a more educated choice of therapeutic approaches.

Impact on Global Health

• Accessibility: Continuing research attempts to solve issues with cost, infrastructure, and healthcare inequities to make immunotherapies more widely available. Research efforts may be directed towards developing cost-effective immunotherapies, more exploring alternative manufacturing methods, or finding ways to reduce the overall treatment expenses.

Collaboration between researchers, pharmaceutical companies, and regulatory bodies is crucial to identify and implement strategies to make these therapies more affordable

Upcoming Innovations

• Gene editing: New approaches to improving the immune system's capacity to recognize and destroy cancer cells may be made possible by developments in gene editing technologies like CRISPR.

• AI and Big Data: By combining AI and big data analytics with cancer research, new therapeutic targets may be found more quickly, and treatment plans can be

optimized. Applications of the developing knowledge of the link between immunity and cancer span the whole range of cancer care, from prevention to therapy and beyond. As long as research is conducted, the field of oncology might see revolutionary applications that could improve the prognosis of those who have cancer.

Name	No.	Mean	Median	Scale min	Scale max	Standard deviation	Excess kurtosis	Skewness	Cramér-von Mises P Value
IS1	0	1.551	1.000	1.000	4.000	0.810	1.698	1.496	0.000
IS2	1	2.000	2.000	1.000	4.000	0.808	-0.222	0.479	0.000
IS3	2	1.837	2.000	1.000	3.000	0.710	-0.982	0.254	0.000
CC1	3	1.592	1.000	1.000	4.000	0.780	1.865	1.412	0.000
CC2	4	1.612	1.000	1.000	4.000	0.723	1.049	1.095	0.000
CC3	5	1.735	2.000	1.000	4.000	0.852	0.937	1.166	0.000
CI1	6	1.592	1.000	1.000	4.000	0.780	0.533	1.146	0.000
CI2	7	1.571	2.000	1.000	3.000	0.606	-0.545	0.567	0.000
CI3	8	2.020	2.000	1.000	4.000	0.892	-0.152	0.671	0.000

Descriptive statistic

The above result describes that descriptive statistic results present each variable's mean value, median rates, standard deviation, skewness rates, and probability values. result preset that IS1 shows that mean value is 1.551 its standard deviation rate is 81% deviating from mean. The result describes that probability value of 0.000 shows that 100% significantly value of each variable.

The IS2, IS3 the mean rates of independent variable its rates are 2.000 and 1.837, respectively. CC is a mediator variable. Its average value is 1.592, 1.612, 1.735. All mean values are positive average rates. The standard deviation rates of 85%, 78%, 60% and 89% deviate from the mean.

According to the result, the overall minimum value is 1.000, the maximum value is 4.000 the median rate is 2.000 respectively. Cancer immunotherapy aims to use the immune system's capacity to recognize and destroy

cancer cells. There are several methods:

1. Checkpoint Inhibitors: These medications prevent the immune system from receiving signals that might otherwise weaken its defenses against cancerous cells. PD-1/PD-L1 and CTLA-4 targeting medications are two examples. Chimeric Antigen Receptor T-cell treatment, often known as CAR-T cell therapy, entails altering a patient's T cells to express a receptor that identifies and targets cancer cells.

Vaccines against cancer: Vaccines elicit the immune system to identify and combat cancerous cells. These can be therapeutic (to treat cancer that has already manifested) or preventative (to stop cancer from developing). Monoclonal antibodies: These antibodies can recognize and identify certain proteins on the surface of cancer cells so that the immune system can destroy them.

l able 2									
	IS1	IS2	IS3	CC1	CC2	CC3	CI1	CI2	CI3
CC1	-0.225	0.291	-0.157	1.000	0.000	0.000	0.000	0.000	0.000
CC2	0.400	0.279	0.433	-0.063	1.000	0.000	0.000	0.000	0.000
CC3	0.123	0.474	0.030	0.635	0.197	1.000	0.000	0.000	0.000
CI1	0.001	-0.162	-0.378	-0.005	0.009	-0.040	1.000	0.000	0.000
CI2	-0.267	0.042	-0.115	0.364	-0.286	0.215	-0.068	1.000	0.000
CI3	0.069	-0.198	-0.285	-0.135	0.360	0.115	0.393	-0.248	1.000
IS1	1.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
IS2	0.062	1.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
IS3	0.263	0.498	1.000	0.000	0.000	0.000	0.000	0.000	0.000

Correlation coefficient

The above result describes that correlation coefficient analysis results it describe that CC1 present that -0.225 negative relation between them.

The CC1 also presents a -0.157 negative link with IS3 0.069, -0.198, 0.042, -0.115, 0.364 its shows aa negative and some positive correlation between them. IS2, and IS3 its show that 6%, 26% 49% present that positive correlation between them. The immune system and

cancer interact in a number of ways:

1. Immune surveillance refers to the immune system's ongoing search for aberrant cells within the body. T cells are examples of immune cells that can identify and destroy cancer cells. 2. Through a dynamic process known as immune editing, the immune system may modify the properties of tumors as they develop. Elimination, Equilibrium, and Escape are its three stages.

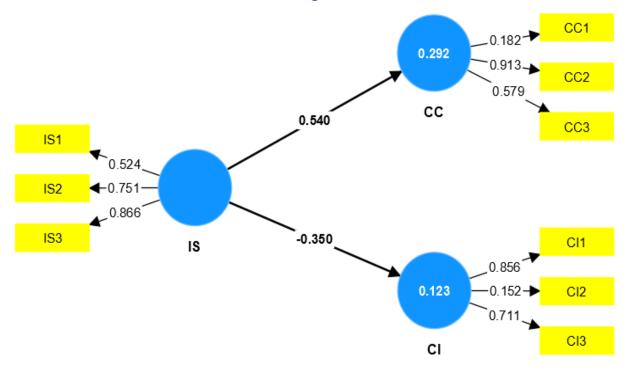
Table 2

Smart PLS Algorithm Model

During the elimination stage, cancer cells are eliminated by the immune system.

The immune system and cancer cells are in a state of balance during the equilibrium phase. Cancer cells create defense mechanisms against immune system recognition during the escape phase.

3. Tumour Microenvironment: Immune responses may be impacted by the tumor microenvironment. Tumors can provide an immunosuppressive environment that hinders the efficient operation of immune cells.





The above model describes that the smart PLS Algorithm model result shows that IS is independent at 52%, 75%, and 86% positive rates. The IS shows a 54% positive link with CC, and it shows 29% for CC1, CC2, and CC3, 18%, 91%, and 57%, respectively. The CI shows 85%, 15%, also that 71% positive values, and the IS shows that -0.350 negative link between them.

Conclusion

The complex interplay between the immune system and carcinogenesis reveals a fascinating tale of alertness, flexibility, and perseverance. The immune system, the guardian of intracellular peace, conducts an ongoing dance with cancer cells that is characterized by the stages of extermination, balance, and flight. As the immune system tries to keep its position of superiority, cancer cells, because of their hiding capacity, take hold and can cause tumors to grow slowly.

The dynamic tumor microenvironment serves as a battleground for this delicate interaction, as tumors use crafty tactics to manipulate the immune system. Understanding these strategies is critical to creating therapeutic approaches that undermine the immune-suppressive barriers cancer cells have built. Now, enter Journal of Carcinogenesis - 2024, 23:01

the age of cancer immunotherapy, a ground-breaking theory that uses the immune system's innate ability to fight cancer. The arsenal of immunotherapeutic techniques differs from traditional therapies, ranging from checkpoint inhibitors that stop immune responses to CAR-T cell therapy, which turns the body's own cells into precisely targeted killers.

Monoclonal antibodies, cancer vaccines, and many other approaches all represent a departure from the one-sizefits-all strategy and a move towards tailored and focused therapies. This paradigm change highlights the scientific community's tenacity in the face of one of humanity's greatest crises, while also reflecting the progress gained in comprehending the complexity of the immune-cancer interaction.

We are on the verge of a revolution in cancer therapy, with tailored, efficient, and minimally intrusive treatments at our fingertips. The progression from immune surveillance to immunotherapy is a marvel of human ingenuity and a reflection of our growing comprehension of the complex mechanisms governing our inside existence. It serves as evidence of the unwavering search for remedies that might prolong and enhance the lives of cancer patients. The story of cancer immunotherapy will probably change in the chapters that remain written, exposing fresh angles and cutting-edge tactics to outwit the enemy's constant adaptation. The field of immunology, oncology, and molecular biology is advancing into previously unexplored areas, with the immune system acting as a protector and a tactical partner in the battle against cancer. The hope for a day when cancer is defeated is still alive as the pages of this novel turn, driven by scientific curiosity and the unrelenting spirit of discovery. Although the route is difficult and the obstacles great, the combination of creativity, knowledge, and willpower opens the door to a new era in cancer therapy, one in which the immune system stands tall as a ray of hope and recovery.

Recommendations

Investigate databases of clinical trials, such as ClinicalTrials.gov, to learn about current and planned cancer immunotherapy research.

• Participate in conversations with others sharing knowledge and experiences about cancer and immunotherapy on forums such as Reddit (e.g., r/cancer, r/Immunology).

• For up-to-date information and insights, follow respectable institutions, scientists, and medical professionals on Twitter. Accounts on Twitter like @AACR, @sit cancer, and @Cancer Research might be useful places to start. Never forget to assess sources thoroughly and seek information from respectable organizations and subject-matter experts. Cancer research and immunotherapy are always changing; therefore, keeping up to date can help you understand the subtleties and innovations in this dynamic area.

References

- D. Pardoll, "Does the immune system see tumors as foreign or self?," *Annual review of immunology*, vol. 21, no. 1, pp. 807-839, 2003.
- X. Liu *et al.*, "The role of gut microbiota in lung cancer: from carcinogenesis to immunotherapy," *Frontiers in Oncology*, vol. 11, p. 720842, 2021.
- N. Bhardwaj, "Harnessing the immune system to treat cancer," *The Journal of clinical investigation*, vol. 117, no. 5, pp. 1130-1136, 2007.
- 4. C. V. Ichim, "Revisiting immunosurveillance and immunostimulation: Implications for cancer immunotherapy," *Journal of translational medicine*, vol. 3, no. 1, pp. 1-13, 2005.
- R. J. Prestwich *et al.*, "The immune system—is it relevant to cancer development, progression and treatment?," *Clinical oncology*, vol. 20, no. 2, pp. 101-112, 2008.
- J. K. Adam, B. Odhav, and K. D. Bhoola, "Immune responses in cancer," *Pharmacology & therapeutics*, vol. 99, no. 1, pp. 113-132, 2003.
- A. S. Higioka, J. M. Martins, and F. Martinello, "Evaluation of the clinicai analysis service provided to an emergency department," *Jornal Brasileiro de Patologia e Medicina Laboratorial*, vol. 55, pp. 04-19, 2019, doi: 10.5935/1676-2444.20190005.
- M. D. Vesely and R. D. Schreiber, "Cancer immunoediting: antigens, mechanisms, and implications to cancer immunotherapy,"

Annals of the New York Academy of Sciences, vol. 1284, no. 1, pp. 1-5, 2013.

- 9. J. L. Markman and S. L. Shiao, "Impact of the immune system and immunotherapy in colorectal cancer," *Journal of gastrointestinal oncology*, vol. 6, no. 2, p. 208, 2015.
- M. J. Smyth, E. Cretney, M. H. Kershaw, and Y. Hayakawa, "Cytokines in cancer immunity and immunotherapy," *Immunological reviews*, vol. 202, no. 1, pp. 275-293, 2004.
- S. Upadhyay, N. Sharma, K. B. Gupta, and M. Dhiman, "Role of immune system in tumor progression and carcinogenesis," *Journal of cellular biochemistry*, vol. 119, no. 7, pp. 5028-5042, 2018.
- X. Zhao, Z. Liu, and T. Chen, "Potential role of vaginal microbiota in ovarian cancer carcinogenesis, progression and treatment," *Pharmaceutics*, vol. 15, no. 3, p. 948, 2023.
- 13. C. Xia *et al.*, "Human microbiomes in cancer development and therapy," *MedComm*, vol. 4, no. 2, p. e221, 2023.
- C. Yu, S. He, W. Zhu, P. Ru, X. Ge, and K. Govindasamy, "Human cytomegalovirus in cancer: the mechanism of HCMV-induced carcinogenesis and its therapeutic potential," *Frontiers in Cellular and Infection Microbiology*, vol. 13, 2023.
- L. Bertola and L. F. Malloy-Diniz, "Assessing knowledge: psychometric properties of the BAMS semantic memory battery," *Archives of Clinical Psychiatry (São Paulo)*, vol. 45, pp. 33-37, 2018.
- V. Dhara *et al.*, "Decoding the influence of the immune system and immunotherapy targets on carcinomas: A hidden prism in oral cancer therapy," *Disease-a-Month*, vol. 69, no. 1, p. 101353, 2023.
- J. Khateeb, E. Fuchs, and M. Khamaisi, "Diabetes and lung disease: an underestimated relationship," *Review of Diabetic Studies*, vol. 15, no. 1, pp. 1-15, 2019.
- I. Mattiola and A. Diefenbach, "Regulation of innate immune system function by the microbiome: Consequences for tumor immunity and cancer immunotherapy," in *Seminars in Immunology*, 2023, vol. 66: Elsevier, p. 101724.
- L. Dyck and L. Lynch, "Diverse effects of obesity on antitumor immunity and immunotherapy," *Trends in Molecular Medicine*, 2023.
- B. Liu *et al.*, "Pan-cancer analysis of G6PD carcinogenesis in human tumors," *Carcinogenesis*, p. bgad043, 2023.
- A. K. S. Teixeira and J. L. A. Vasconcelos, "Histopathological profile of patients diagnosed with malignant tumors assisted in a hospital of reference of Agreste Pernambucano," *Jornal Brasileiro de Patologia e Medicina Laboratorial*, vol. 55, pp. 87-97, 2019, doi: 10.5935/1676-2444.20190002.
- K. Stefańska *et al.*, "The Role of Exosomes in Human Carcinogenesis and Cancer Therapy—Recent Findings from Molecular and Clinical Research," *Cells*, vol. 12, no. 3, p. 356, 2023.
- S. He, Q. Huang, and J. Cheng, "The unfolding story of dying tumor cells during cancer treatment," *Frontiers in Immunology*, vol. 14, p. 1073561, 2023.
- 24. K. Kennedy, K. Khaddour, N. Ramnath, and F. Weinberg, "The Lung Microbiome in Carcinogenesis and Immunotherapy Treatment," *The Cancer Journal*, vol. 29, no. 2, pp. 61-69, 2023.
- M. Wang, G. Yang, Y. Tian, Q. Zhang, Z. Liu, and Y. Xin, "The role of the gut microbiota in gastric cancer: The immunoregulation and immunotherapy," *Frontiers in Immunology*, vol. 14, 2023.
- Y. Jiang *et al.*, "Exploiting RIG-I-like receptor pathway for cancer immunotherapy," *Journal of Hematology & Oncology*, vol. 16, no. 1, p. 8, 2023.
- N. Egawa, "Papillomaviruses and cancer: commonalities and differences in HPV carcinogenesis at different sites of the body," *International Journal of Clinical Oncology*, pp. 1-9, 2023.

- F. F. Lamenza *et al.*, "Inducible TgfbR1 and Pten deletion in a model of tongue carcinogenesis and chemoprevention," *Cancer Gene Therapy*, pp. 1-11, 2023.
- G. El Tekle and W. S. Garrett, "Bacteria in cancer initiation, promotion and progression," *Nature Reviews Cancer*, vol. 23, no. 9, pp. 600-618, 2023.
- G. Milardi and A. Lleo, "Tumor-Infiltrating B Lymphocytes: Promising Immunotherapeutic Targets for Primary Liver Cancer Treatment," *Cancers*, vol. 15, no. 7, p. 2182, 2023.
- F. Ait-Zenati, F. Djoudi, D. Mehelleb, and M. Madaoui, "Involvement of the human microbiome in frequent cancers, current knowledge and carcinogenesis mechanisms," *Bulletin du*

Cancer, 2023.

- R. A. Eid *et al.*, "Targeting Cancer Stem Cells as the Key Driver of Carcinogenesis and Therapeutic Resistance," *International Journal* of *Molecular Sciences*, vol. 24, no. 2, p. 1786, 2023.
- S. Ashique *et al.*, "A narrative review on the role of magnesium in immune regulation, inflammation, infectious diseases, and cancer," *Journal of Health, Population and Nutrition*, vol. 42, no. 1, p. 74, 2023.
- K. L. Greathouse *et al.*, "Diet-microbiome interactions in cancer treatment: Opportunities and challenges for precision nutrition in cancer," *Neoplasia*, vol. 29, p. 100800, 2022.