Necrotizing of Cancer Cells is Possible through Drug Designing and Development

Wilson IB Onuigbo*

Department of Pathology, Medical Foundation and Clinic, Nigeria

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*Corresponding author: Wilson IB Onuigbo, Department of Pathology, Medical Foundation and Clinic 8 Nsukka Lane, Enugu 400001, Nigeria, Email: wilson.onuigbo@gmail.com

Abstract

The dictionary definition of “necrotizing” is causing or undergoing necrosis, a word said to have been first used in 1899. Historically, even before 1899, medical men and even cancer quacks had attempted to cure cancer with drugs. Nowadays, this is being intensified. Therefore, a personal hypothesis is proposed here with direct appeal to the recondite researchers in the fruitful field of drug designing and development.

Keywords: Cancer; Necrosis; Drug; Design; Thoracic duct; Research

Introduction

The Merriam-Webster’s Collegiate Dictionary defines “necrotizing” as “causing or undergoing necrosis” [1]. It went on to indicate that this word was first used in 1899. However, before that year, causing necrosis was broadly the intention of the medical masters faced with cancer cases [2]. Nowadays, there is the hot pursuit for cure, this being aided by the mounting monetary means [3]. In this context, there is the fruitful front, namely, developing new targets for cancer treatment [4,5]. It is necessary, therefore, to direct attention to the status of the thoracic duct itself with a hypothesis.

Hypothesis

Historical attention was drawn to the premier position of the Pathology Laboratory at the Glasgow Western Infirmary [6]. As fate would have it, when the author trained there, he devised the Mono-Block Formalin-METHOD for investigating lung cancer [7]. Therefore, the obtained 45cm long thoracic duct was coiled up in Swiss-roll fashion thereby facilitating its study in one microscope slide [8]. Thereupon, both lively cancer cells and dying cancer cells became research worthy. Indeed, the conclusion was clear thus: “Necrosis of the cancer cells was apparent in 3 cases, but it was clear that this had occurred in association with large aggregates of the malignant cells and that among each aggregated cells red blood corpuscles abounded.” In effect, an erythrocyte associated necrosis factor (EANF) materialized naturally [9].

Accordingly, the vista has been opened for the microenvironment of the thoracic duct to be used jointly by researchers in the fields of (a) drug development and (b) those capable of cannulating this duct [10] and viewing it with the intra-vital video microscope [11]. Thereafter, there should be retrieval of the scientifically rich materials that pointedly embody necrosis. In conclusion, this hitherto hidden intrinsic Factor ought to surface from the recommended joint co-operative exercise. Furthermore, to confirm or confute the above hypothesis should resound profitably. In all probability, this envisaged breakthrough in target therapy could conduce to cancer cure.

References


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