

## Medical Nanotechnology: Small Technology and Big Impact in Oncology!

Farid Mena

Director R&D&I, International Consulting  
Expert in Healthcare and Biosystems, France

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### Editorial

Nowadays, cancer remains one of the main causes of death in the world. The utilization of nanoparticles for diagnosis and treatment in all cancers has raised research interest and funding in the area of medical nanotechnology. The daily increasing numbers of publications in nanotechnology report various promising applications from approaches that include nano-drug and gene delivery, molecular targeting, photothermal and photodynamic therapy, as well as magnetic localization/imaging, which are undoubtedly all important in oncology. Indeed, challenging issues in cancer care include more precise/accurate, efficient, faster and earlier diagnosis, prognosis and therapy. Cancer nanotechnology offers solutions that could identify and target more effectively and specifically cancer cells by delivering nano-drugs with lower undesired side-effects such as systemic toxicity than conventional medicines and agents (e.g., isotopes, dyes) [1,2].

For instance, various types of cancers such as pancreatic cancer are usually diagnosed at the advanced stages, respond poorly to the available chemotherapeutics and lead to high mortality rate. Selective delivery of therapeutics to their cellular targets, without side effects, is the foremost objective of current investigations. Novel drugs delivery systems including (hybrid-)nanoparticles, liposomes, quantum dots, micelles and drug conjugates offer hopes in the management of cancers [3,2].

Interestingly, thanks to its unique physical and chemical properties, graphene and its main derivatives (i.e., graphene oxide and reduced graphene) have also attracted tremendous interest in cancer theranostics (i.e., the use of imaging such as ultrasonography, positron electron tomography, fluorescent imaging, Spectroscopy combined to one or more therapeutic modalities) [4-6].

Ongoing and future studies should aim to investigate more deeply

**Corresponding author:** Farid Mena

 dr.fmena@gmail.com

Director R&D&I, International Consulting  
Expert in Healthcare and Biosystems,  
France.

**Tel:** +33 788 770 475

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the impact of the tumor microenvironment on the distribution and effects of nanoparticles and how these nanoparticles reversely affect the tumor microenvironment. Indeed, while enhanced permeability and retention effect (EPR) promotes nanoparticle extravasation, the abnormal tumor vasculature, high interstitial pressure and dense stroma structure limit homogeneous intratumoral distribution of nanoparticles and compromise their imaging and therapeutic effect(s). Moreover, heterogeneous distribution of nanoparticles in nontumor-stroma cells damages the nontumor cells, and interferes with tumor-stroma crosstalk. This can lead to inhibition of tumor progression, but can also paradoxically induce acquired resistance and facilitate tumor cell proliferation and metastasis [7].

Eventually, nanotheranostic strategies offer a way to accomplish evidence-based personalized medicine (EBPM) [5,8] and any of them should be carefully designed, calibrated/standardized for a specific theranostic objective in order to obtain more significant clinical impacts [9,10].

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