SAR Journal of Medical Biochemistry

Abbreviated Key Title: *SAR J Med Biochem* Home page: <u>https://sarpublication.com/journal/sarjmb/home</u> DOI: 10.36346/sarjmb.2022.v03i02.002



Review Article

Micro RNA the Important Biomarker in Cancer

Dr. Hiba Sabah Jasim^{1*}

¹Microbiology Department, Medicine College, University of Baghdad, Iraq

*Corresponding Author: Dr. Hiba Sabah Jasim

Microbiology Department, Medicine College, University of Baghdad, Iraq

Article History: | Received: 06.02.2022 | Accepted: 10.03.2022 | Published: 14.03.2022 |

Abstract: MicroRNAs are a set of short noncoding RNAs that post transcriptionally control the gene expression through matching with its corresponding mRNAs. The down regulated of micro RNAs may be suggested as a novel kind of "oncomirs" or "tumor suppressors," acting an important effect in the development of carcinoma. Employing genome wide detection techniques, common erratic expression types of micro RNAs have been recognized in a wide arrangement of cancers in human, demonstrate huge potential as modern detection and predictive agents of up normality and elevation of sensitivity and specificity. The diagnosable micro RNAs in blood and the further body fluids with rise constancy supply a profuse origin for micro RNA based agents in cancer cases. In spite of the verity that a growing number of effort micro RNA agents have been determinate, the transmission of micro RNAs based agents from board to bedside as yet important treatment and control many challenges. This study will demonstrate the recent comprehensive of micro RNAs as important agents in cancer of human.

Keywords: Cancer, Biomarker, micro RNAs.

Copyright © 2022 The Author(s): This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CC BY-NC 4.0) which permits unrestricted use, distribution, and reproduction in any medium for non-commercial use provided the original author and source are credited.

INTRODUCTION

Micro-RNAs considered short non-coding RNAs and are about twenty to twenty four nucleotides that play essential role in most biological pathways in mammals and animals, miRNAs affect several cancerrelated functions such as control of cell cycle, proliferation, differentiation, apoptosis, metabolism and migration. Also several aspects of the micro-RNA production route and inhibition techniques are yet occult; the main mechanisms that recognized for several micro RNAs, primary miRNA duplicate are created by the enzyme polymerase type two, each detached duplicated fragments or involved with the area of signaling genes processing start as the micro process or combination which contain the Drosha that acts to liberate the precursor micro RNA hairpin which then prefix into the cytoplasm through the agent Export in number 5.

Then in the cytoplasm, a complex involved the enzyme DICER which can split the precursor miRNA to produce the ss-miRNA, which in turn combined to the RNA induced silencing complex that known as RISC, main agent enzyme such as Argonaute type two and GW type 182. Then the grown micro RNA produces next to duplication of the genes non activated through connecting with the RNA induce silencing complex to integral series which play on the target mRNAs that found at 3' region [1, 2].

The combinatorial regulation of miRNA which mean a single miRNA can target multiple mRNA may reach hundred and mRNA may target from more than one miRNA; the expression can affect a multiple transcripts and influence cancer associated signaling routes [3, 4].

Micro RNA genes are present each in noncoding DNA area or in the introns of coding genes [5]. Also, nearly fifty percent of micro RNAs are grouped in the chromosomes with a specific promoter [6] and transcribed to produce variants micro RNAs groups that consist of widespread mRNAs goals and biological pathways due to their typical grain areas [7].

It is fully instituted that micro RNA production is a complicated procedure which usually consist of 3 important proceedings, which are: the first proceeding will occur in the nucleus, the genes of miRNA are

Citation: Hiba Sabah Jasim (2022). Micro RNA the Important Biomarker in Cancer, SAR J Med Biochem, 3(2), 16-30.

duplicated through the enzyme RNA polymerase type two to produce primary micro RNA [8]. The second proceeding is the enzyme Drosha RNase type three endonuclease statuses the primary micro RNA to release a precursor micro RNA hairpin which is actively transform outside from the nucleus by Ran GTP also the Exportin number 5 play an important role in transformation [9]. The third proceeding is treat in the cytoplasm as Dicer RNase type thee endonuclease splits the precursor micro RNA into a ssmiRNA [9] after that the mature micro RNA straps to argonaute group and the accumulation of the RNA induce silencing complex with the physiological actions. Then being integrate to the RNA induced silencing complex, the foreword micro RNA promote the genes that act after transcription to induce silencing by the RNA induced silencing complex to be partly integral with the goal mRNA mainly present at the 3' area [10].

Also, in the current review that demonstrates the ss micro RNA could control several mRNAs may be more than 100 on average and more than sixty percent of human coding genes are preserved goals of micro RNAs [11]. Presented the preponderance of mRNA goals controlled by micro RNAs, irregular micro RNA expression deeply effect a broad species of cell control passages substantial to cell reproduction [12], programmed cell death[13], and fatigue repayment[14]. In cancer case, miRNA turn as a new type of tumor inhibitor genes or oncogenes called "oncomirs" [15]. Next the initial detected tumor inhibitor micro RNAgene types miR-15a, miR-16 circulating in the evolution of B-cell cancer of lymph nodes [16, 17]. Uncommonly, it has been continuously assured through several reviews as the "oncomirs" in plenty of carcinoma correlated signaling passages. Such as, micro RNA type 17 trigger PI3K and AKT pathways and control cancer development [18], the center of p53 micro RNA type 34 communicating control the Wnt route [19] and raise EMT schedule [20], and let type 7 progress the growth suppression by negatively control RAS route [21]. Simultaneously, these notices bear a micro RNA related complicated network type that relate tumor inhibitive signaling routes in cancer cases, demonstrating that micro RNAs that could act an important part in the progression of the disease.

The central dogma of molecular biology was no longer "central" after the discovery that gene expression involves more complex layers of regulation than the DNA sequences. Micro RNAs are one of the most well studied non-coding RNAs that play a critical role in gene regulation, some of which are dysregulated in association with certain cancer types [22]. Cancer is a serious threat to human life and health, and in recent years, it has become a leading cause of death in humans. According to statistical reports, new cases of cancer reached 14.1 million Worldwide, and the total number of cancer-related deaths reached 8.2 million in 2012. With an increase in life expectancy and deterioration of the global ecosystem, the incidence of cancer is increasing. It is expected that the number of new cases will reach 23.6 million by 2030 [23].

Currently, chemotherapy, radiotherapy, and surgery are the most common cancer therapies. For cancers such as lymphoma, leukemia, small cell lung cancer, chemotherapy is the first line of treatment. For other solid tumors, chemotherapy can be used as an auxiliary treatment to eliminate postoperative residual nodules to prevent relapse or as pre-local tumor before surgery or radiotherapy. In addition, chemotherapy is also used as palliative care in patients who cannot undergo radical surgery [24]. In recent decades, chemotherapy drugs have made great progress, but the occurrence of tumor drug resistance often leads to treatment failure.

For advanced cancer patients, drug-resistance is a major obstacle to successful treatment [25]. According to statistical reports, more than 90% of deaths of tumor patients are associated with chemotherapeutic drug resistance [26, 27]. Overall, drug resistance can be divided into endogenous and acquired drug resistance, and the underlying mechanisms need to be elucidated. At present, it is believed that the increase in drug efflux, target switch, cell cycle checkpoints alteration, apoptosis inhibition, and increase in DNA damage repair are all related to drug resistance [28]. The first cancerassociated miRNA was discovered from the study on the commonly deleted region 13q14 in patients with leukemia type B-cell chronic , where the minimally deleted area among patients located at first exons of two non-protein coding RNA transcripts, DLEU 1 and DLEU 2 (Deleted In Lymphocytic Leukemia 1 and 2), aligned in opposite directions [22]. Techniques of micro RNA down regulation in carcinoma

It has fallen obviously that micro RNA coding is down regulated in man cancers. The implied techniques consist the anomaly of chromosome, duplicational regulated alterations, change of epigenetic also the disorder found in micro RNA production.

Expansion or cancellation of micro RNA genes

Micro RNA coding in malicious cells contrast with ordinary cells are predominatingly assign to changes in entire micro RNA reduplicate numbering and gene positions (expansion, cancellation or transformation). Previously detect of micro RNA gene position alter is the lack of micro RNA type 15a-16group gene at the Chtype 13q14, that usually noticed in lymphocyte cell cancer cases [29]. In the cancer of the lung, the area 5q33 shelter micro

RNA type 143 and micro RNA type 145 is usually skip, outcome in diminution coding of the two micro RNAs [30].

Expansion of miRNA types 17 to 92 group that presented in cancer of B lymphocyte[31] and cancer cases of lung [32], and transformation of group that was demonstrate in severe leukemia [33],resulting of high of these micro RNAs in these cases. The rise indecision of genomic changes in micro RNA location was assured through rise determination order based contrast genomic cross bred in approximately 230samples from cancer cases of ovary, melanoma and breast cancers [34, 35]. These feedbacks propose that irregular micro RNA code in pernicious cells may increase from expansion or cancellation of particular genomic areas comprehensive micro RNA genes.

Duplicational regulate of micro RNAs

Micro RNA code is tense regulate through variant transcription agents, so irregular code of micro RNA in carcinoma maybe due to down regulation of several opener duplication agents, for example p53 and Myc. The find out of the Myc, usually control in several cancer cases to control the reproduction of the cells and the programmed cell death, stimulate the duplication of the micro RNA type 17–92 group by connect of the E-box agents into the micro RNA type17–92 promoter [36-38].

The p53 micro RNA type 34 control hub is an important model of how duplicational agent controls micro RNA code to intermediate cancer inhibitor action [39, 40]. The p53 is a cancer inhibitor convert through the gene type TP53, which considered as the most widely altered genes in cancer cases. The p53 control the coding and the action of several different genes, such as micro RNA genes, that form the p53 group to control the development of the cell and programmed cell death. As the p53 intermediated.

Phenotypes, micro RNA type 34 groups which consist of micro RNA types thirty four groups allow cell cycle detention, programmed cell death in cases of carcinoma[41], using p53 also micro RNA type thirty four are controlled. The hypothesis was demonstrated by several experiments [42,43], recognized that the p53 may trigger the production of micro RNA type thirty four class A, to induce the programmed cell death by direct connect to the initial part of the transcription of micro RNA type thirty four class A gene [44]. Also the other studies found that p53 performs its action by controlling the coding of a group of micro RNAs, as micro RNA type 605 [45], micro RNA type 1246 [46], and micro RNA type 107 [47]. Also the p53 and c- Myc considered as the two major demonstrated transcriptional agents, more transcriptional agents have been present to control micro RNA expression. Such as, micro RNA type 223 isusually found in the hematopoietic system with important actions in myeloid lineage development, and its code is decreased in several cancers consisting cancer in liver and acute myeloid leukemia [48]. Fukao et al. demonstrate that the coding of micro RNA type two hundred twenty three genes is driven by the myeloid transcription agents C/EBPs and PU.1 [49]. Another study found that micro RNA type two hundred twenty three and the coding agents C/EBP α , NFI

A. These two coding agents important in connecting to micro RNA type two hundred twenty three at very decrease scales, while the retinoic acid may trigger the C-EBP α translocation with the Nfi-a to control micro RNA type 223 code [50]. So the, micro RNA coding is will tuned through several agents to persist transcription process, and it's down regulation that may form cancer.

Downregulated of epigenetics alterations

The epigenetic changes are usually demonstrated in cancer, consisting universal human decrease of DNA methylation, and increase the methylation of thecancer inhibitors and damaged of histone manipulation path. It is known that micro RNAs, the same as to protein coding genes, both are affected by epigenetic alteration [51]. Fazi they found that micro RNA type 223 codes was epigenetically affected and become inactive through AML1/ETO, the pathway that was the important of Amlrelated fusion code, by CpG silencing [52]. The demonstration of another study found that seventeen from approximately 300 micro RNAs are responsible of controlling more than three folds in cancer cells of bladder after the therapy process of histone acetylation inhibitors and DNA methylation. The micro RNA type 127, present in a CpG group and the coding of this micro RNA decrease in cancer cells, and there was an increase level of it following the therapy, which was fond with the dysregulation of preoncogening type Bcl number 6, which showed that histone deacetylase inhibition and DNA methylation may stimulate the expression of micro RNAs that can play as tumor inhibitors [53]. Another study demonstrates micro RNA type 148a, and micro RNA type 34b/c group is part to particular hypermethylation related to inactivating in carcinoma. Also the, recuperation of micro RNA in tumor suppressed their mobility, decrease cancer development and suppressed dissemination cases. Also, it decreased expressions of micro RNA type 124a, micro RNA types 9-1 and micro RNA type one hundred forty five class5p that related to increase the DNA methylation in lung, colon cancer [54, 55]. The previous information demonstrate the important action of epigenetic control in micro RNA expression through cancer progression, using as

the obvious histone acetylation and DNA methylation of micro RNA genes may be conserved as important biomarkers for detection of cancer.

Defuse biogenesis process of micro RNA

The micro RNA production is regulated by many regulatory proteins and enzymes, such as Dicer, Drosha, Argonaute and Exportin type 5, which lead to right micro RNA progression from pri-miRNA precursors. So, the aberrant expression or mutation of any particular of micro RNA production may cause defect in normal production and expression of micro RNAs.

Dicer and Drosha are the important two keysof the enzyme type RNase III endonucleases in micro RNA production, in production of miRNA precursor and micro RNA: micro RNA. Current reviews demonstrate the action of the enzymes through down regulation of several cancers. A study by a group found that a huge part of micro RNA is controlled at the step of Drosha processing, and this control has an important role in miRNA expression through cancer progression [56]. Another study by Walz demonstrated that Dicer and drosha enzymes may have nucleotide alteration in fifteen % from five hundred thirty four cancers, which may lead to low expression of micro RNA type 200. About the dysregulation of Dicer, it was found that Dicer type one defuse in colorectal cancer cells lead to production of the increase ability of cancer progression and spread [57,58]. Also, increase level of Drosha and Dicer mRNA scales in carcinoma of ovary related to increased median survival [59], then may lead to low level of Dicer expression that related to decrease patient survival [60]. The important relation between reduced let-7 expression and lower Dicer mRNA after surgery was demonstrated in patients with cancer of lung cells [61]. The enzyme AGO is an important slicing part of the complex that called RISC and has an essential action in RNA silencing processes. The dysregulation of the enzyme Argonaute may occur. Such as, the human gene of EIF2C1hAgo1 is usually missed in Wilms cancer of the kidney [62]. The expression of human argonaute is controlled in a cell-dependent manner. So, AGO type two expression scales in gastric carcinoma and metastasis to lymph path are accurately increase when compared with healthy persons [63], while AGO type two expression may decrease, due to decrease RNAi efficiency, in melanoma when compareto first stage of melanocytes [64,65].

Micro RNAs and the dysregulation in cancer

As the dysregulation of micro RNA is well demonstrated in several abnormalities, the evolution and experiments of rat types increase the lack of individual micro RNA groups. Also, the properties of the enzyme Dicer knockout types have demonstrated the role of the micro RNA control system in the two states the cancerous diseases and the normal physiology. Tumors usually found with decrease scales of mature micro RNA [66] the outcome of epigenetic silencing, genetic damage and defuse in their production path or duplication depression as demonstrated in the pathway of Myc [67]. Also, the frame mutation due to microsatellite instability have been found in TAarbp2, the action of the Dicer enzyme, as stabilizing agent in gastric and colorectal cancer [68,69], though the presence of these mutations continue to be determined [70]. In addition to these points, expansion of the Drosha loci have been described in esophageal tumor [71] and the high expression of Dicer were present in related with disease development in case cancer of prostate [72].

Changes and alteration in genes

It was found that approximately fifty percent of micro RNA is present at weak parts and carcinoma specifies position [73]. However since then, several other micro RNA have been found and the connection amidst position micro RNA density also fragility appear as increase complicated more than formerly known. Additionally plenary presence of the micro RNA genes on weak positions, tumor particular transformation stop site, frequently CpG group that demonstrated and reach that micro RNA genes are related with weak positions [74]. Also the triggering parts are with no important of proteins are with micro RNA and genes of their spread in weak versus non weak positions was present. Real alteration in its position amidst micro RNA and the other genes as particular chromosome analyzed. Such as, a far increase presence of micro RNA in weak parts when compare to the genes that found in chromosome number nineteen, also in chromosome number fourteen the adverse is correct. These reviews were most general, the relevance admits tumor united areas and micro RNA locations is not direct forward and possibly carcinoma specific type [75]. Apart from constructional genetic alterations. somatic transformation of micro RNA goals that certified lead to fleeing from organization of an mRNA goal through a particular micro RNA [76].

Possibility, mutations that alter a micro RNA grain sequence could remove target suppression by tumor inhibitor micro RNA or allow for changed target selection, which may be related to formation of oncogene. While naturally in process sequence alterations, such as single nucleotide polymorphism, have been found to effect micro RNA goals in cancerrelated passage [77], tumor specific alteration may be rare. Sequencing from tumors has specified that in spite of changes being discovered in micro RNA

initial duplication there was no proof with alteration that changed the series of the grown micro RNA [78].

Changes and alterations in epigenetic procedures

Lost epigenetic alterations are present as a feature of carcinoma, for example increase methylation in DNA sequence of tumor inhibitors, whole DNA hypomethylation and change of the his tone modification patterns [79].As the protein signaling codes, micro RNA code is as well object to alteration of epigenetics in carcinoma cases. Big ratios of micro RNA position are related with CpG islands lead to powerful basis to their regulation by DNA methylation [80]. Most studies used therapy with chromatin remodeling drugs to reveal epigenetically non active micro RNA such as, up regulation of over methylated tumor inhibitor micro RNA by 5/aza/20 deoxycytidine therapy in micro RNA type 127 [81], type 9-1 [82], and type 34b/c group [83]. Uniformly distinctive micro RNA type 124a code was found in micro RNA sequence from tumors of colon and rectum deficient in DMTase type one and DMTase type three b enzymes [84]. Furthermore, possibility oncogenic micro RNA can be not regulated by DNA hypomethylation [85].

Particular transcription factors may induct chromatin remodeling enzymes to individual micro RNA position, as seen in the case of micro RNA type 223palsy through the Aml one/Eto, the extreme prevalent incorporation protein related to severe bone marrow leukemia. Here either small interfering RNA treatment versus Aml one/Eto or down methylation therapy enhanced micro RNA type 223 levels and repaired cell discrimination [86]. Mapping founded approaches have as well assistance identify micro RNA promoters paused in cancer cases.

One study found the assembly amidst DNA methylation situation of initiation of part tumor related micro RNA and micro RNA coding in carcinoma of breast. An alternative promoter of the micro RNA type 200b group was specified [87].

As the same of methylation of DNA, the acetylation of histone performs the second epigenetic mechanism down regulation in tumor cases. Inhibition of the level of histone can diminish the coding of adverse oncogenic micro RNA as obvious of reviews utilizing deacetylase of histone suppressor where change of micro RNA scales that found after therapy [88].The connection among micro RNA and epigenetics is dived by the reality that confirmed micro RNA may found to control ingredients of the epigenetic mechanism. Coding of micro RNA type twenty nine, such as, may suppress the expression of the enzymes DMTase type 3A and DMTase type 3B, thus abolishing irregular DNA methylation. Encore of

micro RNA type 29 codes in non-small cell lung cancer cells led to de-suppression of tumor inhibitor genes non activated by CpG methylation [89].

Also the micro RNA type one hundred one goals the enzyme histone DMTase that called EzH type two that participate to the epigenetic non activated of specific proteins and controls the permanence and spread of tumors. In cancer cells of prostate of micro RNA type one hundred one coding diminution through carcinomas improvement, parallel in garise in EzH type two coding [90, 91].

The role of the transcription factors in micro RNA control in cancer patients

Aside from epigenetic and genetic influences, down regulation of micro RNA coding may affect the irregular duplication agent action in carcinoma. Almost 50 % of micro RNA codes are existing in the genes of ribonucleic acid whereas the remainder are special duplication parts of their promoter that transcribed by RNA polymerase II [92]. Micro RNA genes are usually grouped and processed as polycistronic mission or eradicate from mRNA. An increases of Polymerase type two related transcription agents is accountable for regulate of micro RNA genes, with a single agent chance capacity to trigger or inhibit several micro RNA genes.

The role of oncogenic transcription factors in down regulation of micro RNA

The oncogenic transcription agent Myc connects promoter areas of several micro RNA. Though MYC is the cause of up regulatingmicro RNA type seventeen to nighty two groups [93], the standard impact of MYC action is diffuse inhibition of micro RNA coding [67]. Through those micro RNA deregulated through MYC are many with notarized preprogrammed cell death, antiproliferative and tumorinhibitor action, for example micro RNA type 15a-16, micro RNA type 26a and micro RNA type 34 groups[94]. Transcriptional actions of Myc may cause repression of micro RNA, such as Lin type 28A and Lin type 28B are trigger by Myc and are needed for inhibition of the let type 7 micro RNA [95], itself a negative control of Myc [96]. Many reviews have found the action of micro RNA in the processing agent groups in carcinoma, as that of the triggered the Ras. The triggering of Ras may cause inhibition of the micro RNA type 143/145 group in KRAS in cancer of pancreas through Ras responsive element-binding protein type one that bind to micro RNA type 143-145 promoter [97]. Also, the transcriptional inhibitor type ZEB1 can suppress the transcription of micro RNA type 200 group micro RNA type 141 and micro RNA type 200c, that can control the ZEB type one and powerfully trigger two[98], epithelial and

discrimination in colorectal and pancreatic cancer cells [99].

Micro RNA suppression by decrease of tumor inhibitor transcription agents

The transcription of micro RNA with mistumorigenic effects is usually triggered by transcription agents that are in the same time tumor inhibitors. As several tumorinhibitor are mutated or lost in tumor this may lead to loss of coding of micro RNAs with significant growth inhibitor actions. The transcription agent p53 control the cellular reply to DNA deterioration and acts a critical function in control of the apoptosis and cell cycle. Its significant is assurance through truth demonstrates the alteration of fifty percent of tumors also the action of the dysregulated by several processes [100].

The target of mRNA according to the miRNA type 34 group consist pathways E2 and D, which dependent kinases6 and 4 (CDK6 and CDK4), CDC type 25c, BCL2 and Myc. Consist the actions of these different genes in promoting cell inhibiting and proliferation and the apoptosis, it is known that miRNA type 34 triggering the p53 components and its action in the negative control of growth of the cell[101]. Many other micro RNAs have also been found as regulation goals for p53. Such as miRNA type 107, miRNA type 192 or miRNA type 200 that are micro RNAs that suppress angiogenesis and epithelial to mesenchyme transition [102]. Also a number of p53 trigger micro RNAs including miRNA type 194, miRNA type 192, miRNA type 215, and miRNA types143/145, have been shown to target MDM2. The p53 target gene is the principal negative control of p53, thus trigger of the seafore continuous micro RNAs introduce additional control structure at the p53 and MDM2 feedback knob [103].

The role of p53 in triggering the control of multiplemicro RNAs bolsters its tumor inhibitor functionand the deregulation or mutation of p53 in tumors may lead to loss the control of micro RNAs, also triggering cellular conversion, tumor construction and spread. As well to note, the p53 group organ p63 positively control duplication of Dicer type one. Tumors lose in p63 have extremely decrease Dicer type one code, which lead to lower levels of forward micro RNAs and an increased predisposition for metastasis [104]. Also changes in p63 present in very decrease level in cancer cells, and it decrease in a different of tumor cells and this usually related to aggressive ability [105].

Diffuse Micro RNAs as predictive agent for immediate detection

The distinguish of tumor recently may appear with decrease sensitivity, due to several cancers may

this, consider useful in the first diagnosis of cancer. Micro RNAs related to up normal growth with increase expression, while inhibitors present with low level. So, these tissue particular micro RNAs may become emerging biomarkers in carcinoma detection. Selection of serum microRNAs that may used to detect different patients with cancer from normal person; for example, in breast cancer [106], colorectal [107], gastric [108], lung [109], pancreatic [110], and hepatocellular [111] cancers, making them apparatus for immediate detection. Also, variants in the condensation of miRNAs may distinguishable through several tumor types and discrimination levels in breast carcinoma; lost scales of micro RNAs were related to HER2 and estrogen receptor case also, distinguish the detection and treatment control the circulating micro RNAs [112]. The idiom of micro RNA type 21 was related to the clinical level and molecular subgroup of spread

not be found in the first phase and retardation the therapy until. Micro RNA idiom is repeatedly not

control in carcinoma, pointing a specific code and,

large B-cell lymphoma, that's means the patient in first level may increase the consideration of plasma miRNA type21in patients at stage three and four and individual with several groups have an obvious discrimination[113]. Also, micro RNAs may present as detective correlation with cancer formation, which is main in the detection of invasion of cancer with absent of the root origin cause. A microarray of forty eight chosen micro RNAs may effect and assort ninety percent of main cancer in patient with spread cause cases [114]. The combined of miRNA type145 and miRNA type 451 may detect breast carcinoma and differentiate from normal individuals also other cancers, such as hepatocellular carcinoma, colorectal cancer, and lung cancer, which present with the action of circulating miRNAs in cancer sort [115].

Also, carcinoma cases are not only can detective from normal tissues but additionally those who suffered from inveterate infection were singled out by specific micro RNA expression pathway. Current investigations propose that blood stream miRNAs are important in the control the infection, and effect the epigenetic and genetic profile, and able of predicting the up normal stages [116]. Such as, a chosen miRNA code stage may distinguish between cancer of pancreas and chronic pancreas inflammation with apparent increase, while it may be applied as measurable substance in the detection of human hepatitis virus type B infection and HBV positive in patient with liver carcinoma. Although, there are several points to be known that the same miRNA may effect as oncogene or as inhibitor gene, according to various cancer stages [117]. Micro RNA type 125b may inhibit cell propagation and trigger cell cycle

detection in thyroid, ovarian and oral carcinomas. whereas it functioned oppositely in prostate cancer [118]. As a result, it is significant to discover the identical irregularly pattern of miRNAs in each type of carcinoma. Also, the event explains that several miRNAs are directly coded in cancer with a clear familial accumulation predisposition that may be used to genetic detection. MicroRNA type 15 and type 16 inhibited in several of patients with leukemia type B cell chronic lymphatic because of the 30-kb area of decrease level in chromosome type 13q14, which is the main considerably cancel genetic region of leukemia patient with B cell type. In a similar way, sever bone marrow malignancy cases with chromosomal transformation were demonstrated simultaneously with decrease scale of miRNA type two hundred twenty three [86].

The germ line substitution in nucleotide in genetic which is called single nucleotide polymorphism in genes of miRNA can be influence the formation of micro RNA which will lead to cause carcinoma. The SNP type rs417309, which present at the 3' area of the untranslated region of the enzyme Dicer, was regulatory related to ability of afford from cancer of the breast by the technique of break the connecting of micro RNA, while the single nucleotide position polymorphism of the let seven complementary sites may raise the dangerous of large cell lung cancer [119]. Such observation may be match with studies about genes of micro RNAs which are present in the fragile sites and genomic areas related to cancers [74].

Blood stream Micro RNA in early state of prediction

The huge project numbers have proposed the predictive and prognostic estimate of cancer correlated blood stream micro RNAs as they collaborate in the control of the progress of carcinoma. In the development of cancer from early stage to the more aggressive case, miRNAs alter as molecular components of cancer cells, and the alterations may appear by progression of tumor throughout the other steps of development. So the circulating micro RNAs are the main consistent predictive agent in disease monitoring. Circulating micro RNA type 142-3p related to increase the dangerous of return in adenocarcinoma of lung cells in patients of first level [120].

The scales of plasma micro RNA type 155 may be inverted the influence of operation and chemotherapy in cancer of breast, while the traditional measurable agents as the carcinoembryonic antigen and the tissue polypeptide specific antigen, were not very specific [121]. Changeable circulating micro RNAmay be assured to be combined with the disseminated case of cancer, and micro RNA type 141 achieved plus outcome in a screening test of patients with prostate cancer similarity of micro spread [122]. Low scale of blood stream micro RNA type 126 were correlated to therapy advantage in disseminated state of cancer of colon, as it was certain to related with angiogenesis by the pathway of paracrine [123]. In a similar way, the increase scale of circulating micro RNA type 122 have an important role and relation with the disseminated return in stage two and three of patients with breast cancer [124]. Micro RNA type 375 and type 200b in the serum were upregulated in patients with invasive prostate cancer contrast with patients in early stage of cancer [125].

Other micro RNAs that may affect the surface cells of cancer were present in high level in the serum of stomach cancer patient's andtrigger aggressive disease and peregrination [126,127]. Reacting micro RNAs were appear useful in treatment and control in neck- head squamous cell cancers [128]. Moreover, the alterations of circulating micro RNAs through treatment with chemicals also radiotherapy of carcinoma are well appreciated in several surveys. Large cell in cancer of lung in patients with (stage one typed to stage three type a) need global therapy which consist surgery and chemotherapy; a prognosis for drug and chemotherapy specify in development may decrease the not useful toxic chemotherapy [129]. Serum micro RNA type 22 and type 125 may lead to the needy resistant to pemetrexed based chemotherapy separately in NSCLC patients [130]. Serum micro RNA type 21 was associated with the relapse free survival in Dlbcl [131,132]. All these studies suggested that circulating miRNAs are promising invasive biomarkers and are considered to be valuable in tumor classification, and treatment strategy selection.

Micro RNAs in diagnosis of cancer and its treatment

As the main function of micro RNAs in cancer is being decode their possibility as diagnostic or prognostic agents is proved by huge number of studies. Also, the strategies of treatment include repreamble of micro RNAs decrease in tumor or suppress of oncogenic micro RNAs are quickly being progressing. First reproduction profiling result index that micro RNA code profiling could be effectively assort various tumor kinds and increase credibly than mRNA pathway, proposing that the micro RNA stock is a constant and singular appearance of various cell kinds and recognition levels[133]. Ever after, a comprehensive size of letters has determinate on particular micro RNA seguing up for personal carcinoma and cancer levels [134]. Due to of their consistent at fixed formalin tissues also the comparative facility may present at red tape quantified, micro RNA can rapidly get in medical lab,

which consider of the essential rolein detection also prediction.

Significantly, the cell and cancer kind specificity of micro RNA code pathway may express a promise for the effective detection of disseminated tumors of absent first origin [135]. Currently, the detect of micro RNA in body fluids, for example plasma, colostrum and urine [136], has massive observations of the ability of micro RNA as not aggressive agents of disease and treatment in several types of cancers such as ovarian cancer, lung cancer, colorectal cancer, renal cancer, prostate cancer and breast cancer [137].

Suppression of pro-oncogenic micro RNA

Suppression of expression micro RNAs usually related to cancer prognosis pathway that has been found from a plenty of xenograft experiments of various cancer state. Researches on the suppression of endogenous micro RNA were frontier by series projects on the liver specific micro RNA type 122 and its action in regulation serum cholesterol scales and aperient human hepatitis type virus C duplication[138]. Employing intravenous admission of cholesterol combined antagomirs controlled by 200 methylations, Kr€uztfeldt et al. found that specified alleviate of decrease of mRNAs consisting detection motifs convenient the suppressed micro RNA in different tissues.

Moreover, suppression of the liver particular micro RNA type 122 outcome in decreased scales of serum cholesterol in correspondence with the action of the specific mRNAs. Promoting of this task, kauppinen and his staff memberemploy closed nucleic acid antimicro RNAs against micro RNA type 122 in both primates and mice [138].

In a frontier project of employing systemic therapy with micro RNA suppress in a cancer regulation, in a study the researchers founded that miRNA type 10b as appear in high levels in disseminated breast cancer and demonstrate that this high levels of micro RNA type 10b at its sole can give metastatic possibility to else non aggressive cell grades [139]. Providing on this job, the cohort found that the intravenous injections with cholesterol related to the 200 methyl derived suppressor of micro RNA type 10b of immune suppressed mice transformation with an increase metastatic cancer of the breast in the breast lipid pad outcome in a strong suppression of disseminated at the cells of lungand the development of tumor stay slow leaving the growth in the first stage without any effect [140].

Similarly, employ a xenograft agent for liver cancer cell, is a suppresser of micro RNA type 221

found in decrease cancer cell reproduction in living body together with increase the scale of cell apoptosis [141]. Micro RNA type 9 is present not controlled in different tumor forms such as Hodgkin lymphoma. By employing the rat xenograft sample for cancer of lymph nodes it was found that circulation therapy by the LNA derived suppresser the micro RNA type ninewill reduce lymphoma growth in the hepatic cells also lead to up normality and loss of control about the micro RNA type 9 target mRNAs[142,143].Employing other agent to fix and collect micro RNA suppresser, Slack and his colleagues currently diffuse suppressor to micro RNA type 155 depend on nucleic acids and covered in very small particles to display the tumordevelopment of both orthograft and xenograft samples of lymph nodes [144].

Representation of tumorinhibitors micro RNAs

Representation of micro RNAs with tumor inhibitor action is, apart from the case of tumor cell objecting, more contracted by the quick degeneration of ribose nucleic acid plasma and tissue. As, the reflecting benefit of the virus submission modes and the subedit micro RNA imitative [145].As depict over, the micro RNA type 34 family is count essential tumor inhibitor and several code in key cancer course. Enhancing the seruling, reintroduction of lipid subedit micro RNA type thirty four that that present jointly a casual cancer lungpattern also at the xenograft pattern employing carcinoma of pancreas cells which lead to decrease the tumor development [146, 147]. In cases of liver caners the scale of micro RNA type 26 type which decreased in conformity and its action as it play as suppressor to clef cyclin E2 and D2[148]. Moreover, as micro RNAs have several minimum targets, impact their code scale that may have. Micro RNA is emerging as an essential group of jots with favorable spectacle for treatment in cancer. Moreover, as for other treatment groups, the activity and integrity of micro RNA derived medicine should be accurately estimated and will more count on cellular situation and pre standing epigenetic and genetic damages [149, 150].

REFERENCES

- Fabian, M.R., Sonenberg, N. (2012). The mechanics of miRNAmediated gene silencing: a look under the hood of miRISC. *Nat. Struct. Mol. Biol.* 19, 586-593.
- Saj, A., Lai, E.C. (2011). Control of microRNA biogenesis and transcription by cell signaling pathways.*Curr.Opin.Genet. Develop.* 21, 504-510.
- Lee, R.C., Feinbaum, R.L., Ambros, V. (1993). The C. elegans heterochronic gene lin-4 encodes small RNAs with antisense complementarity to lin-14. Cell 75, 843-854.
- 4. Lagos-Quintana, M., Rauhut, R., Lendeckel, W., Tuschl, T. (2001). Identification of novel genes

coding for small expressed RNAs. Science 294, 853-858.

- Krol, J., Loedige, I., & Filipowicz, W. (2010). The widespread regulation of microRNA biogenesis, function and decay. *Nature Reviews Genetics*, 11(9), 597-610.
- Kim, V. N., Han, J., & Siomi, M. C. (2009). Biogenesis of small RNAs in animals. *Nature reviews Molecular cell biology*, 10(2), 126-139.
- C.P. Concepcion, C.Bonetti, A. Ventura. "TheMicroRNA-17-92 family of MicroRNA clusters in development and disease," *Cancer Journal*, vol. 18, no. 3, pp. 262–267, 2012.
- 8. Cai, X., Hagedorn, C. H., & Cullen, B. R. (2004). Human microRNAs are processed from capped, polyadenylated transcripts that can also function as mRNAs. *Rna*, *10*(12), 1957-1966.
- Lee, Y., Ahn, C., Han, J., Choi, H., Kim, J., Yim, J., ... & Kim, V. N. (2003). The nuclear RNase III Drosha initiates microRNA processing. *Nature*, 425(6956), 415-419.
- Jansson, M. D., & Lund, A. H. (2012). MicroRNA and cancer. *Molecular oncology*, 6(6), 590-610.
- R. C. Friedman, K. K.-H. Farh, C. B. Burge, and D. P. Bartel, "Most mammalian mRNAs are conserved targets of microRNAs," *Genome Research*, vol. 19, no. 1, pp. 92–105, 2009.
- X.-Y.Li, Q.-F.Luo, C.-K.Wei, D.-F. Li, J. Li, and L. Fang "MiRNA-107 inhibits proliferation and migration by targeting CDK8 in breast cancer," *International Journal of Clinical andExperimental Medicine*, vol. 7, no. 1, pp. 32– 40, 2014.
- B. Wojtas, C. Ferraz, T. Stokowy et al., "Differential miRNA expression defines migration and reduced apoptosis in follicular thyroid carcinomas,"*Molecular and Cellular Endocrinology*, vol. 388, no. 1-2, pp. 1–9, 2014.
- C. Furdui, "Ionizing radiation: mechanisms and therapeutics," *Antioxidants & Redox Signaling*, vol. 21, no. 2, pp. 218–220, 2014.
- 15. Koturbash, F. J. Zemp, I. Pogribny, and O. Kovalchuk, "Small molecules with big effects: the role of the microRNAome in cancer and carcinogenesis," *Mutation Research*, vol. 722, no. 2, pp. 94–105, 2011.
- 16. G. A. Calin, C. D. Dumitru, M. Shimizu. (2002). "Frequent deletions and down- regulation of micro-RNA genes miR15 and miR16 at 13q14 in chronic lymphocytic leukemia," *Proceedings* of the National Academy of Sciences of the United States of America, 99(24), 15524–15529, 2002.
- G. Di Leva, M. Garofalo., & C. M. (2014). Croce, "MicroRNAs in cancer," *Annual Review of Pathology*, vol. 9, 287–314.
- 18. E. Rao, C. Jiang, M. Ji. (2012). "The miRNA-17 \sim 92 cluster mediates chemoresistance and

© 2022 | South Asian Research Publication

enhances tumor growth inmantle cell lymphoma via PI3K/AKTpathway activation," *Leukemia*, 26(5), 1064–1072.

- 19. H. Kim, H. S. Kim, N. G. Kim. (2011). "p53 and microRNA-3 are suppressors of canonical Wnt signaling," *Science Signaling*, 4, 197, article ra71, 2011.
- N. H. Kim, H. S. Kim, X.-Y. Li. (2011). "A p53/miRNA-34 axis regulates Snail1- dependent cancer cell epithelial-mesenchymal transition," *The Journal of Cell Biology*, 195, 9; 417–433.
- S. M. Johnson, H. Grosshans, J. Shingara. (2005). "RAS is regulated by the let-7 microRNA family," *Cell*, 120(5), 635–647, 2005.
- Liu, Y., Corcoran, M., Rasool, O., Ivanova, G., Ibbotson, R., Grander, D., Iyengar, A., Baranova, A., Kashuba, V., Merup, M. (1997). Cloning of two candidate tumor suppressor genes within a 10 kb region on chromosome 13q14, frequently deleted in chronic lymphocytic leukemia. *Oncogene*, 15, 2463–2473.
- 23. Stewart, B.W., Wild, C.P. (2014). World Cancer Report 2014. BW Stewart, CP wild, world Cancer report 2014. Lyon: *International Agency for Research Cancer*.
- Holohan, C., Van Schaeybroeck, S., Longley, D.B., Johnston, P.G. (2013). Cancer drug resistance: an evolving paradigm. *Nat Rev Cancer*, 13(10); 714–26.
- Sun, Y., Campisi, J., Higano, C., Beer, T.M., Porter, P., Coleman, I. (2012). Treatmentinduced damage to the tumor microenvironment promotes prostate cancer therapy resistance through WNT16B. *Nat Med*, *18*(9); 1359–68.
- Li, X.X., Lewis, M.T., Huang, J., Gutierrez, C., Osborne, C.K., Wu, M.F. (2008).Intrinsic resistance of tumorigenic breast cancer cells to chemotherapy. *J Natl Cancer I*, 100(9); 672–9.
- Longley, D.B., Johnston, P.G. (2005). Molecular mechanisms of drug resistance. *J Pathol*, 205(2); 275–92.
- 28. Gottesman, M.M. (2002). Mechanisms of cancer drug resistance. *Annu Rev Med*, 53; 615–27.
- Calin, G.A., Dumitru, C.D., Shimizu, M., Bichi, R., Zupo, S., Noch, E. (2002). Frequent deletions and down-regulation of micro-RNA genes miR15 and miR16 at 13q14 in chronic lymphocytic leukemia. *Proc Natl AcadSci* USA, 99; 15524– 15529.
- Calin, G.A., Croce, C.M. (2006). MicroRNAs and chromosomal abnormalities in cancer cells. *Oncogene*, 25; 6202–6210.
- 31. Tagawa, H., Seto, M. (2005). A microRNA cluster as a target of genomic amplification in malignant lymphoma. *Leukemia*, 19; 2013–2016.
- Hayashita, Y., Osada, H., Tatematsu, Y., Yamada, H., Yanagisawa, K., Tomida, S.(2005). A polycistronic microRNA cluster, miR-17-92, is

overexpressed in human lung cancers and enhances cell proliferation. *Cancer Res*, 65; 9628–9632.

- Mavrakis, K.J., Wolfe, A.L., Oricchio, E., Palomero, T., de Keersmaecker, K., McJunkin, K. (2010). Genome-wide RNA-mediated interference screen identifies miR-19 targets in Notch-induced T-cell acute lymphoblastic leukaemia. *Nat Cell Biol*, *12*; 372–379.
- 34. Zhang L, Huang J, Yang N, Greshock J, Megraw MS, Giannakakis, A. (2006). MicroRNAs exhibit high frequency genomic alterations in human cancer. *Proc Natl AcadSci USA*, 103; 9136–9141.
- 35. Calin, G.A., Sevignani, C., Dumitru, C.D., Hyslop, T., Noch, E., Yendamuri, S. (2004). Human microRNA genes are frequently located at fragile sites and genomic regions involved in cancers. *Proc Natl AcadSci USA*, 101; 2999– 3004.
- O'Donnell, K.A., Wentzel, E.A., Zeller, K.I, Dang, C.V., Mendell, J.T. (2005).c-Mycregulated microRNAs modulate E2F1 expression. *Nature*, 435; 839–843.
- Chang, T.C., Yu, D., Lee, Y.S., Wentzel, E.A., Arking, D.E., West, K.M. (2008). Widespread microRNA repression by Myc contributes to tumorigenesis. *Nat Genet*, 40; 43–50.
- Wang, B., Hsu, S.H., Wang, X., Kutay, H., Bid, H.K., Yu, J. (2004). Reciprocal regulation of microRNA-122 and c-Myc in hepatocellular cancer: role of E2F1 and transcription factor dimerization partner 2. *Hepatology*, 59; 555–566.
- Han, H., Sun, D., Li, W., Shen, H., Zhu, Y., Li, C. (2013).c-Myc-MicroRNA functional feedback loop affects hepatocarcinogenesis. *Hepatology*, 57; 2378–2389.
- He, L., He, X., Lim L.P., de Stanchina, E., Xuan, Z., Liang, Y. (2007). A microRNA component of the p53 tumour suppressor network. *Nature*, 447: 1130–1134.
- 41. Hermeking, H. (2010). The miR-34 family in cancer and apoptosis. *Cell Death Differ*, 17; 193–199.
- Raver-Shapira, N., Marciano, E., Meiri, E., Spector, Y., Rosenfeld, N., Moskovits, N. (2007). Transcriptional activation of miR-34a contributes to p53-mediated apoptosis. *Mol Cell*, 26; 731– 743.
- 43. Chang, T.C., Wentzel, E.A., Kent, O.A., Ramachandran, K., Mullendore, M., Lee, K.H. (2007).Transactivation of miR-34a by p53 broadly influences gene expression and promotes apoptosis. *Mol Cell*, 26; 745–752.
- Yamakuchi, M., Lowenstein, C.J. (2009). MiR-34, SIRT1, and p53: The feedback loop. *Cell Cycle*, 8; 712–715.
- 45. Xiao, J., Lin, H., Luo, X., Luo, X., Wang, Z. (2011). miR-605 joins p53 network to form a p53:

© 2022 | South Asian Research Publication

miR-605:Mdm2 positive feedback loop in response to stress. *EMBO J*, 30; 524–532.

- Zhang Y, Liao JM, Zeng SX, Lu H. p53 downregulates Down syndrome- associated DYRK1A through miR-1246. *EMBO Rep* 2011; 12: 811–817.
- Yamakuchi, M., Lotterman, C.D., Bao, C., Hruban, R.H., Karim, B., Mendell, J.T. (2010). Induced microRNA-107 inhibits HIF-1 and tumor angiogenesis. *Proc Natl AcadSci USA*, 53; 107: 6334–6339.
- Eyholzer, M., Schmid, S., Schardt, J.A., Haefliger, S., Mueller, B.U., Pabst, T. (2010). Complexity of miR-223 regulation by CEBPA in human AML. *Leuk Res*, 34; 672–676.
- Fukao, T., Fukuda, Y., Kiga, K., Sharif, J., Hino, K., Enomoto, Y. (2007). An evolutionarily conserved mechanism for microRNA-223 expression revealed by microRNA gene profiling. *Cell*, 129; 617–631.
- Fazi, F., Rosa, A., Fatica, A., Gelmetti, V., De Marchis, M.L., Nervi, C. (2005). A minicircuitry comprised of microRNA-223 and transcription factors NFI-A and C/EBPalpha regulates human granulopoiesis. *Cell*, 123: 819–831.
- Han, L., Witmer, P.D., Casey, E., Valle, D., Sukumar, S. (2007).DNA methylation regulates MicroRNA expression. *Cancer Biol Ther*, 6; 1284–1288.
- Fazi, F., Racanicchi, S., Zardo, G., Starnes, L.M., Mancini, M., Travaglini, L. (2007). Epigenetic silencing of the myelopoiesis regulator microRNA-223 by the AML1/ETO oncoprotein. *CancerCell*, 12; 457–466.
- 53. Saito, Y., Liang, G., Egger, G., Friedman, J.M., Chuang, J.C., Coetzee, G.A. (2006). Specific activation of microRNA-127 with downregulation of the proto-oncogene BCL6 by chromatinmodifying drugs in human cancer cells. *Cancer Cell*, 9; 435–443.
- Lujambio, A., Calin, G.A., Villanueva, A., Ropero, S., Sanchez-Cespedes, M., Blanco, D. (2008). A microRNA DNA methylation signature for human cancer metastasis. *Proc Natl AcadSci* USA, 105: 13556–13561.
- 55. Donzelli, S., Mori, F., Bellissimo, T., Sacconi, A., Casini, B., Frixa, T. (2015). Epigenetic silencing of miR-145-5p contributes to brain metastasis. *Oncotarget*, 6; 35183–35201.
- Thomson, J.M., Newman, M., Parker, J.S., Morin-Kensicki, E.M., Wright, T., Hammond, S.M. (2006).Extensive post-transcriptional regulation of microRNAs and its implications for cancer. *Genes Dev*, 20; 2202–2207.
- 57. Walz, A.L., Ooms, A., Gadd, S., Gerhard, D.S., Smith, M.A., Guidry, Auvil, J.M. (2015). Recurrent DGCR8, DROSHA, and SIX homeodomain mutations in favorable histology

- Wilms tumors. *Cancer Cell*, 27: 286–297.
 58. Iliou, M.S., da Silva-Diz, V., Carmona, F.J., Ramalho-Carvalho, J., Heyn, H., Villanueva, A. (2014). Impaired DICER1 function promotes stemness and metastasis in colon cancer. *Oncogene*, 33; 4003–4015.
- 59. Merritt, W.M., Lin, Y.G., Han, L.Y., Kamat, A.A., Spannuth, W.A., Schmandt, R. (2008). Dicer, Drosha, and outcomes in patients with ovarian cancer. *N Engl J Med*, 359; 2641–2650.
- Pampalakis, G., Diamandis, E.P., Katsaros, D., Sotiropoulou, G. (2010). Down-regulation of dicer expression in ovarian cancer tissues. *Clin Biochem*, 43; 324–327.
- 61. Karube, Y., Tanaka, H., Osada, H., Tomida, S., Tatematsu, Y., Yanagisawa, K. (2005). Reduced expression of Dicer associated with poor prognosis in lung cancer patients. *Cancer Sci*, 96; 111–115.
- 62. Dome, J.S., Coppes, M.J. (2002).Recent advances in Wilms tumor genetics. *CurrOpin Pediatr*, 14: 5–11.
- Zhang, J., Fan, X.S., Wang, C.X., Liu, B., Li, Q., Zhou, X.J. (2013).Up-regulation of Ago2 expression in gastric carcinoma. *Med Oncol*, 30; 628.
- 64. Völler, D., Reinders, J., Meister, G., Bosserhoff, A.K. (2013). Strong reduction of AGO2 expression in melanoma and cellular consequences.*Br J Cancer*, 109; 3116–3124.
- Melo, S.A., Moutinho, C., Ropero, S., Calin, G.A., Rossi, S., Spizzo, R. (2010). A genetic defect in exportin-5 traps precursor microRNAs in the nucleus of cancer cells. *Cancer Cell*, 18; 303– 315.
- Lu, J., Getz, G., Miska, E.A., Alvarez-Saavedra, E., Lamb, J., Peck, D., Sweet- Cordero, A., Ebert, B.L., Mak, R.H. (2005). MicroRNA expression profiles classify human cancers. *Nature*, 435, 834-838.
- Chang, T.C., Yu, D., Lee, Y.S., Wentzel, E.A., Arking, D.E., West, K.M., Dang, C.V., Thomas-Tikhonenko, A., Mendell, J.T. (2008). Widespread microRNA repression by Myc contributes totumorigenesis. *Nat. Genet*, 40, 43-50.
- Wang, Y.H., Zhu, H.Y., Miao, K.R., Liu, P., Xu, W., Li, J.Y. (2012). Downregulated Dicer expression predicts poor prognosis in chronic lymphocytic leukemia. *Cancer Sci*, 103, 875-881.
- Melo, S.A., Ropero, S., Moutinho, C., Aaltonen, L.A., Yamamoto, H., Calin, G.A., Rossi, S., Fernandez, A.F., Carneiro, F., Oliveira, C., Ferreira, B. (2009). A TARBP2 mutation in human cancer impairs microRNA processing and DICER1 function. *Nat. Genet*, 41, 365-370.
- 70. Garre, P., Perez-Segura, P., Diaz-Rubio, E., Caldes, T. (2010). Reassessing the TARBP2

mutation rate in hereditary nonpolyposis colorectal cancer. *Nat. Genet*, 42, 817-818.

- 71. Muller, P.A., Vousden, K.H., Norman, J.C. (2011). p53 and its mutants in tumor cell migration and invasion. *J. Cell. Biol.* 192, 209-218.
- Chiosea, S., Jelezcova, E., Chandran, U., Acquafondata, M., McHale, T., Sobol, R.W., Dhir, R. (2006). Up-regulation of dicer, a component of the MicroRNA machinery, in prostate adenocarcinoma. *Am. J. Pathol.* 169, 1812-1820.
- 73. Calin, G.A., Sevignani, C., Dumitru, C.D., Hyslop, T., Noch, E., Yendamuri, S., Shimizu, M., Rattan, S., Croce, C.M. (2004). Human microRNA genes are frequently located at fragile sites and genomic regions involved in cancers. *Proc. Natl. Acad. Sci. USA*, 101, 2999-3004.
- 74. Lagana, A., Russo, F., Sismeiro, C., Giugno, R., Pulvirenti, A., Ferro, A. (2010). Variability in the incidence of miRNAs and genes in fragile sites and the role of repeats and CpG islands in the distribution of genetic material. *PLoS One* 5, e11166.
- 75. Lamy, P., Andersen, C.L., Dyrskjot, L., Torring, N., Orntoft, T., Wiuf, C. (2006). Are microRNAs located in genomic regions associated with cancer? *Br. J. Cancer* 95, 1415-1418.
- Mayr, C., Hemann, M.T., Bartel, D.P. (2007). Disrupting the pairing between let-7 and Hmga2 enhances oncogenic transformation. *Science*, 315, 1576-1579.
- Wynendaele, J., Bohnke, A., Leucci, E., Nielsen, S.J., Lambertz, I., Hammer, S., Sbrzesny, N., Kubitza, D., Wolf, A., Gradhand, E., Balschun, K., Braicu, I., Sehouli, J., Darb-Esfahani, S. (2010). An illegitimate microRNA target site within the 3' UTR of MDM4 affects ovarian cancer progression and chemosensitivity.*Cancer Res.* 70, 9641-9649.
- 78. Diederichs, S., Haber, D.A. (2006). Sequence variations of microRNAs in human cancer: alterations in predicted secondary structure do not affect processing. *Cancer Res.* 66, 6097-6104.
- 79. Lopez-Serra, P., Esteller, M. (2012). DNA methylation-associated silencing of tumor-suppressor microRNAs in cancer. *Oncogene*, *31*, 1609-1622.
- Weber, B., Stresemann, C., Brueckner, B., Lyko, F. (2007). Methylation of human microRNA genes in normal and neoplastic cells. *Cell Cycle* 6, 1001-1005.
- 81. Saito, Y., Liang, G., Egger, G., Friedman, J.M., Chuang, J.C., Coetzee, G.A., Jones, P.A. (2006). Specific activation of microRNA-127 with downregulation of the proto-oncogene BCL6 by chromatin-modifying drugs in human cancer cells. *Cancer Cell* 9, 435-443.

^{© 2022 |} South Asian Research Publication

- Lehmann, U., Hasemeier, B., Christgen, M., Muller, M., Romermann, D., Langer, F., Kreipe, H., 2008. Epigenetic inactivation of microRNA gene hsa-mir-9-1 in human breast cancer.*J. Pathol.* 214, 17-24.
- 83. Toyota, M., Suzuki, H., Sasaki, Y., Maruyama, R., Imai, K., Shinomura, Y., Tokino, T., 2008. Epigenetic silencing of microRNA-34b/c and Bcell translocation gene 4 is associated with CpG island methylation in colorectal cancer. *Cancer Res.* 68, 4123-4132.
- Lujambio, A., Ropero, S., Ballestar, E., Fraga, M.F., Cerrato, C., Setien, F., Casado, S., Suarez-Gauthier, A., Sanchez-Cespedes, M., Git, A., Spiteri, I., 2007. Genetic unmasking of an epigenetically silenced microRNA in human cancer cells. *Cancer Res.* 67, 1424-1429.
- Brueckner, B., Stresemann, C., Kuner, R., Mund, C., Musch, T., Meister, M., Sultmann, H., Lyko, F., 2007. The human let-7a-3 locus contains an epigenetically regulated microRNA gene with oncogenic function. *Cancer Res.* 67, 1419-1423.
- Fazi, F., Racanicchi, S., Zardo, G., Starnes, L.M., Mancini, M., Travaglini, L., Diverio, D., Ammatuna, E., Cimino, G., Lo-Coco, F. (2007). Epigenetic silencing of themyelopoiesis regulator microRNA-223 by the AML1/ETO oncoprotein. *Cancer Cell*, 12; 457-466.
- 87. Wee, E.J., Peters, K., Nair, S.S., Hulf, T., Stein, S., Wagner, S., Bailey, P., Lee, S.Y., Qu, W.J., Brewster, B., French, J.D., Dobrovic, A. (2012). Mapping the regulatory sequences controlling 93 breast cancer-associated miRNA genes leads to the identification of two functional promoters of the Hsa-mir-200b cluster, methylation of which is associated with metastasis or hormone receptor status in advanced breast cancer. *Oncogene*, *31*, 4182-4195.
- Scott, G.K., Mattie, M.D., Berger, C.E., Benz, S.C., Benz, C.C. (2006). Rapid alteration of microRNA levels by histone deacetylase inhibition. *Cancer Res*; 66, 1277-1281.
- Fabbri, M., Garzon, R., Cimmino, A., Liu, Z., Zanesi, N., Callegari, E., Liu, S., Alder, H., Costinean, S., Chan, K.K., Marcucci, G., Calin, G.A., Huebner, K., Croce, C.M. (2007). MicroRNA-29 family reverts aberrant methylation in lung cancer by targeting DNA methyltransferases 3A and 3B. *Proc. Natl. Acad. Sci. USA* 104, 15805e15810.
- Varambally, S., Cao, Q., Mani, R.S., Shankar, S., Wang, X., Ateeq, B., Laxman, B., Cao, X., Jing, X., Ramnarayanan, K., Brenner, J.C., Yu, J., Kim, J.H., Han, B., Tan, P., Kumar-Sinha, C., Lonigro, R.J., Palanisamy, N. (2008). Genomic loss of microRNA-101 leads to overexpression of histone methyltransferase EZH2 in cancer. *Science* 322, 1695-1699.

- Iliopoulos, D., Lindahl-Allen, M., Polytarchou, C., Hirsch, H.A., Tsichlis, P.N., Struhl, K. (2010). Loss of miR-200 inhibition of Suz12 leads to polycomb-mediated repression required for the formation and maintenance of cancer stem cells. *Mol. Cell.* 39, 761-772.
- 92. Kim, V.N., Han, J., Siomi, M.C. (2009b). Biogenesis of small RNAs in animals.*Nat. Rev.Mol. Cell. Biol.* 10, 126-139.
- 93. Dews, M., Homayouni, A., Yu, D., Murphy, D., Sevignani, C., Wentzel, E., Furth, E.E., Lee, W.M., Enders, G.H., Mendell, J.T., Thomas-Tikhonenko, A. (2006). Augmentation of tumor angiogenesis by a Myc-activated microRNA cluster.*Nat. Genet*, 38, 1060-1065.
- 94. Bui, T.V., Mendell, J.T. (2010). Myc: maestro of microRNAs. *Genes Cancer* 1, 568-575.
- 95. Chang, T.C., Zeitels, L.R., Hwang, H.W., Chivukula, R.R., Wentzel, E.A., Dews, M., Jung, J., Gao, P., Dang, C.V., Beer, M.A. (2009). Lin-28Btransactivation is necessary for Myc-mediated let-7 repressionand proliferation. *Proc. Natl.Acad. Sci. USA* 106, 3384-3389.
- Kim, H.H., Kuwano, Y., Srikantan, S., Lee, E.K., Martindale, J.L., Gorospe, M. (2009a). HuR recruits let-7/RISC to repress c-Myc expression. *Genes Dev*, 23, 1743-1748.
- 97. Kent, O.A., Chivukula, R.R., Mullendore, M., Wentzel, E.A., Feldmann, G., Lee, K.H., Liu, S., Leach, S.D., Maitra, A., Mendell, J.T. (2010). Repression of the miR- 143/145 cluster by oncogenic Ras initiates a tumor-promoting feedforward pathway. *Genes Dev*, 24, 2754-2759.
- 98. Bracken, C.P., Gregory, P.A., Kolesnikoff, N., Bert, A.G., Wang, J., Shannon, M.F., Goodall, G.J. (2008). A double-negative feedback loop between ZEB1-SIP1 and the microRNA-200 family regulates epithelial-mesenchymal transition. *Cancer Res.* 68, 7846-7854.
- 99. Burk, U., Schubert, J., Wellner, U., Schmalhofer, O., Vincan, E., Spaderna, S., Brabletz, T. (2008). A reciprocal repression between ZEB1 and members of the miR- 200 family promotes EMT and invasion in cancer cells. *EMBO Rep.* 9, 582-589.
- 100.Chang, T.C., Wentzel, E.A., Kent, O.A., Ramachandran, K., Mullendore, M., Lee, K.H., Feldmann, G., Yamakuchi, M., Ferlito, M., Lowenstein, C.J., 2007. Transactivation of miR-34a by p53 broadly influences gene expression and promotes apoptosis. *Mol. Cell.* 26, 745-752.
- 101.Hermeking, H., 2012. MicroRNAs in the p53 network: micromanagement of tumor suppression. Nat. Rev. *Cancer* 12, 613-626.
- 102.Chang, C.J., Chao, C.H., Xia, W., Yang, J.Y., Xiong, Y., Li, C.W., Yu, W.H., Rehman, S.K., Hsu, J.L., Lee, H.H., Liu, M. (2011). p53 regulates epithelialmesenchymat transition and

© 2022 | South Asian Research Publication

stem cell properties through modulating miRNAs. *Nat. Cell. Biol.* 13, 317-323.

- 103.Xiao, J., Lin, H., Luo, X., Wang, Z. (2011). miR-605 joins p53 network to form a p53:miR-605:Mdm2 positive feedback loop in response to stress. *EMBO J.* 30, 524- 532.
- 104.Su, X., Chakravarti, D., Cho, M.S., Liu, L., Gi, Y.J., Lin, Y.L., Wistuba, I., Flores, E.R. (2010). TAp63 suppresses metastasis through coordinate regulation of Dicer and miRNAs. Nature 467, 986-990.
- 105.Muller, P.A., Vousden, K.H., Norman, J.C., 2011.p53 and its mutants in tumor cell migration and invasion. *J. Cell. Biol.* 192, 209-218.
- 106.Antolin, S., Calvo, L., Blanco-Calvo, M., Santiago, M. P., Lorenzo-Patino, M. J., Haz-Conde, M. (2015). Circulating miR-200c and miR-141 and outcomes in patients with breast cancer.*BMC Cancer* 15, 297.doi: 10.1186/ s12885-015-1238-5.
- 107.Zanutto, S., Pizzamiglio, S., Ghilotti, M., Bertan, C., Ravagnani, F., Perrone, F. (2014). Circulating miR-378 in plasma: a reliable, haemolysisindependentbiomarker for colorectal cancer. Br. J. Cancer 110 (4), 1001–1007. doi: 10.1038/ bjc.2013.819.
- 108.Zhang, J., Song, Y., Zhang, C., Zhi, X., Fu, H., Ma, Y. (2015b). Circulating MiR- 16-5p and MiR-19b-3p as two novel potential biomarkers to indicate progression of gastric cancer.*Theranostics*5 (7), 733–745. doi: 10.7150/thno.10305.
- 109.Zhao, Y., Song, Y., Yao, L., Song, G., & Teng, C. (2017). Circulating microRNAs: promising biomarkers involved in several cancers and other diseases. *DNA Cell Biol*, 36(2), 77–94. doi: 10.1089/dna.2016.3426.
- 110.Kawaguchi, T., Komatsu, S., Ichikawa, D., Morimura, R., Tsujiura, M., Konishi, H. (2013). Clinical impact of circulating miR-221 in plasma of patients with pancreatic cancer. *Br. J. Cancer*, *108* (2), 361–369. doi: 10.1038/bjc.2012.546.
- 111.Mirzaei, H., Khataminfar, S., Mohammadparast, S., Sales, S. S., Maftouh, M., Mohammadi, M. (2016). Circulating microRNAs as potential diagnostic biomarkers and therapeutic targets in gastric cancer: current status and future perspectives.*Curr. Med. Chem*, 23(36), 4135–4150. doi:
 10.2174/002086722226661(0818002854)

10.2174/0929867323666160818093854.

112.Stuckrath, I., Rack, B., Janni, W., Jager, B., Pantel, K., and Schwarzenbach, H. (2015). Aberrant plasma levels of circulating miR-16, miR-107, miR-130a and miR- 146a are associated with lymph node metastasis and receptor status of breast cancer patients. *Oncotarget*, 6(15), 13387– 13401. doi: 10.18632/ oncotarget.3874.

113.Chen, Y., Gao, D. Y., & Huang, L. (2015). In

© 2022 | South Asian Research Publication

vivo delivery of miRNAs for cancer therapy: challenges and strategies. *Adv. Drug Deliv. Rev.* 81, 128–141. doi: 10.1016/j.addr.2014.05.009.

- 114.Rosenfeld, N., Aharonov, R., Meiri, E., Rosenwald, S., Spector, Y., Zepeniuk, M. (2008). MicroRNAs accurately identify cancer tissue origin. *Nat. Biotechnol.* 26(4), 462–469. doi: 10.1038/nbt1392.
- 115.Ng, E. K., Li, R., Shin, V. Y., Jin, H. C., Leung, C. P., Ma, E. S. (2013). Circulating microRNAs as specific biomarkers for breast cancer detection. *PLoS One8* (1), e53141. doi: 10.1371/journal.pone.0053141.
- 116.Olivieri, F., Capri, M., Bonafè, M., Morsiani, C., Jung, H. J., Spazzafumo, L. (2016). Circulating miRNAs and miRNA shuttles as biomarkers: perspective trajectories of healthy and unhealthy aging. *Mech. Ageing Dev.* 165 (Pt B), 162– 170.doi: 10.1016/j.mad.2016.12.004.
- 117.Cortez, M. A., Buesoramos, C., Ferdin, J., Lopezberestein, G., Sood, A. K., & Calin, G. A. (2011). MicroRNAs in body fluids—the mix of hormones and biomarkers.*Nat. Rev. Clin. Oncol*, 8(8), 467–477. doi: 10.1038/nrclinonc, 76.
- 118.Nam, E. J., Yoon, H., Sang, W. K., Kim, H., Kim, Y. T., Kim, J. H. (2008). MicroRNA expression profiles in serous ovarian carcinoma. *Clin. Cancer Res*, 14(9), 2690–2695. doi: 10.1158/1078-0432.CCR-07-1731.
- 119.Chin, L. J., Ratner, E., Leng, S., Zhai, R., Nallur, S., Babar, I. (2008). A SNP in a let-7 microRNA complementary site in the KRAS 3 'untranslated region increases non-small cell lung cancer risk. *Cancer Res*, 68(20), 8535–8540. doi: 10.1158/0008-5472.CAN-08-2129.
- 120.Kaduthanam, S., Gade, S., Meister, M., Brase, J. C., Johannes, M., Dienemann, H. (2013). Serum miR-142-3p is associated with early relapse in operable lung adenocarcinoma patients. *Lung Cancer*, 80(2), 223–227. doi: 10.1016/j. lungcan.2013.01.013.
- 121.Sun, Y., Wang, M., Lin, G., Sun, S., Li, X., Qi, J. (2012). Serum microRNA-155 as a potential biomarker to track disease in breast cancer. *PLoS One*, 7(10), e47003. doi: 10.1371/journal.pone.0047003.
- 122.Gonzales, J. C., Fink, L. M., Goodman, O. B., Jr., Symanowski, J. T., Vogelzang, N. J., & Ward, D. C. (2011). Comparison of circulating MicroRNA 141 to circulating tumor cells, lactate dehydrogenase, and prostate-specific antigen for determining treatment response in patients with metastatic prostate cancer. *Clin.Genitourin. Cancer*, 9(1), 39–45. doi: 10.1016/j.clgc.2011.05.008
- 123.Hansen, T. F., Carlsen, A. L., Heegaard, N. H., Sørensen, F. B., & Jakobsen, A. (2015). Changes in circulating microRNA-126 during treatment

with chemotherapy and bevacizumab predicts treatment response in patients with metastatic colorectal cancer. *Br. J. Cancer*, *112*(4), 624–629. doi: 10.1038/ bjc.2014.652.

- 124. Wu, X., Somlo, G., Yu, Y., Palomares, M. R., Li, A. X., Zhou, W. (2012). De novo sequencing of circulating miRNAs identifies novel markers predicting clinical outcome of locally advanced breast cancer. J. Transl. Med. 10(1), 42.doi: 10.1186/1479-5876-10-42
- 125.Bryant, R. J., Pawlowski, T., Catto, J. W., Marsden, G., Vessella, R. L., Rhees, B. (2012). Changes in circulating microRNA levels associated with prostate cancer. *Br. J. Cancer*, *106*(4), 768–774. doi: 10.1038/bjc.2011.595.
- 126. Valladares-Ayerbes, M., Reboredo, M., Medina-Villaamil, V., Iglesias-Diaz, P., Lorenzo-Patino, M. J., Haz, M. (2012). Circulating miR-200c as a diagnostic and prognostic biomarker for gastric cancer.J. Transl. Med. 10, 186.doi: 10.1186/1479-5876-10-186.
- 127.Chen, W., Cai, F., Zhang, B., Barekati, Z., & Zhong, X. Y. (2013). The level of circulating miRNA-10b and miRNA-373 in detecting lymph node metastasis of breast cancer: potential biomarkers. *Tumor Biol*, *34*(1), 455–462. doi: 10.1007/s13277-012-0570-5.
- 128.Summerer, I., Niyazi, M., Unger, K., Pitea, A., Zangen, V., Hess, J. (2013). Changes in circulating microRNAs after radiochemotherapy in head and neck cancer patients. *Radiat. Oncol*, 8(1), 296.doi: 10.1186/1748-717X-8-296.
- 129.Hu, Z., Chen, X., Zhao, Y., Tian, T., Jin, G., Shu, Y. (2010). Serum microRNA signatures identified in a genome-wide serum microRNA expression profiling predict survival of non-small-cell lung cancer. J. Clin. Oncol, 28(10), 1721–1726.doi: 10.1200/JCO.2009.24.9342.
- 130.Franchina, T., Amodeo, V., Bronte, G., Savio, G., Ricciardi, G. R., Picciotto, M., (2014). Circulating miR-22, miR-24 and miR-34a as novel predictive biomarkers to pemetrexed-based chemotherapy in advanced non-small cell lung cancer.J. Cell Physiol, 229(1), 97–99. doi: 10.1002/jcp.24422.
- 131.Lawrie, C. H., Gal, S., Dunlop, H. M., Pushkaran, B., Liggins, A. P., Pulford, K. (2008). Detection of elevated levels of tumour-associated microRNAs in serum of patients with diffuse large B-cell lymphoma.*Br. J. Haematol.* 141(5), 672–675. doi: 10.1111/j.1365-2141.2008.07077.
- 132.Jacob, N. K., Cooley, J. V., Yee, T. N., Jacob, J., Alder, H., Wickramasinghe, P. (2013). Identification of sensitive serum microRNA biomarkers for radiation biodosimetry.*PLoS One*, 8(2), e57603. doi: 10.1371/journal.pone.0057603.
- 133.Olson, P., Lu, J., Zhang, H., Shai, A., Chun, M.G., Wang, Y., Libutti, S.K., Nakakura, E.K., Golub, T.R., Hanahan, D. (2009). MicroRNA

dynamics in the stages of tumorigenesis correlate with hallmark capabilities of cancer. Genes Dev. 23, 2152-2165.

- 134.Kong, Y.W., Ferland-McCollough, D., Jackson, T.J., Bushell, M. (2012). MicroRNAs in cancer management. Lancet Oncol.13, e249-258.
- 135.Ferracin, M., Pedriali, M., Veronese, A., Zagatti, B., Gafa, R., Magri, E., Lunardi, M., Munerato, G., Querzoli, G., Maestri, I., Ulazzi, L., Nenci, I., Croce, C.M., Lanza, G., Querzoli P., Negrini, M. (2011). MicroRNA profiling for the identification of cancers with unknown primary tissue-of-origin. *J. Pathol*, 225, 43-53.
- 136.Hanke, M., Hoefig, K., Merz, H., Feller, A.C., Kausch, I., Jocham, D., Warnecke, J.M., Sczakiel, G. (2010). A robust methodology to study urine microRNA as tumor marker: microRNA-126 and microRNA-182 are related to urinary bladder cancer. Urol. Oncol. 28, 655-661.
- 137.Cortez, M.A., Welsh, J.W., Calin, G.A. (2012). Circulating microRNAs as noninvasive biomarkers in breast cancer.Recent Results in Cancer Research.Fortschritte der Krebsforschung. Progresdans les recherchessur le cancer, 195, 151-161.
- 138.Lanford, R.E., Hildebrandt-Eriksen, E.S., Petri, A., Persson, R., Lindow, M., Munk, M.E., Kauppinen, S., Orum, H. (2010). Therapeutic silencing of microRNA-122 in primates with chronic hepatitis C virus infection. Science, 327, 198-201.
- 139.Ma, L., Teruya-Feldstein, J., Weinberg, R.A. (2007). Tumor invasion and metastasis initiated by microRNA-10b in breast cancer. Nature 449, 682-688.
- 140.Ma, L., Reinhardt, F., Pan, E., Soutschek, J., Bhat, B., Marcusson, E.G., Teruya-Feldstein, J., Bell, G.W., Weinberg, R.A. (2010). Therapeutic silencing of miR- 10b inhibits metastasis in a mouse mammary tumor model. Nat. Biotech, 28, 341- 347.
- 141.Park, J.K., Kogure, T., Nuovo, G.J., Jiang, J., He, L., Kim, J.H., Phelps, M.A., Papenfuss, T.L., Croce, C.M., Patel, T., Schmittgen, T.D. (2011). miR-221 silencing blocks hepatocellular carcinoma and promotes survival. Cancer Res, 71, 7608-7616.
- 142.Swarbrick, A., Woods, S.L., Shaw, A., Balakrishnan, A., Phua, Y. Nguyen, A., Chanthery, Y., Lim, L., Ashton, L.J., Judson, R.L., Huskey, N., Blelloch, R., Haber, M., Norris, M.D., Lengyel, P., Hackett, C.S. (2010). miR-380-5p represses p53 to control cellular survival and is associated with poor outcome in MYCNamplified neuroblastoma. *Nat. Med*, *16*, 1134-1140.
- 143.Wurdinger, T., Tannous, B.A., Saydam, O., Skog, J., Grau, S., Soutschek, J., Weissleder, R.,

© 2022 | South Asian Research Publication

Hiba Sabah Jasim; SAR J Med Biochem; Vol-3, Iss- 2 (Mar-Apr, 2022): 16-30. Breakefield, X.O., Krichevsky, A.M. (2008).

miR-296 regulates growth factor receptor overexpression in angiogenic endothelial cells. *Cancer Cell, 14*, 382- 393.

- 144.Babar, I.A., Cheng, C.J., Booth, C.J., Liang, X., Weidhaas, J.B., Saltzman, W.M., Slack, F.J. Nanoparticle-based therapy in an in vivo microRNA-155 (miR-155)- dependent mouse model of lymphoma. *Proc. Natl. Acad. Sci. USA* 109, 2012, E1695-1704.
- 145. Thorsen, S.B., Obad, S., Jensen, N.F., Stenvang, J., Kauppinen, S. (2012). The therapeutic potential of microRNAs in cancer. *Cancer J*, 18, 275-284.
- 146.Trang, P., Wiggins, J.F., Daige, C.L., Cho, C., Omotola, M., Brown, D., Weidhaas, J.B., Bader, A.G., Slack, F.J. (2011). Systemic delivery of tumor suppressor microRNA mimics using a neutral lipid emulsion inhibits lung tumors in mice. *Mol. Ther. J. Am. Soc. Gene Ther*, 19, 1116-1122.

- 147.Pramanik, D., Campbell, N.R., Karikari, C., Chivukula, R., Kent, O.A., Mendell, J.T., Maitra, A. (2011). Restitution of tumor suppressor microRNAs using a systemic nanovector inhibits pancreatic cancer growth in mice. *Mol. Cancer Ther.* 10, 1470- 1480.
- 148.Kota, J., Chivukula, R.R., O'Donnell, K.A., Wentzel, E.A., Montgomery, C.L., Hwang, H.W., Chang, T.C., Vivekanandan, P., Torbenson, M. (2009). Therapeutic microRNA delivery suppresses tumorigenesis in a murine liver cancer model. *Cell* 137, 1005-101.
- 149.Liu, B., Wu, X., Liu, B., Wang, C., Liu, Y., Zhou, Q., Xu, K. (2012). MiR-26a enhances metastasis potential of lung cancer cells via AKT pathway by targeting PTEN. *Biochim. Biophys. Acta*, 1822, 1692-1704.
- 150.Chen, Y., Gao, D.Y., Huang, L. (2015). In vivo delivery of miRNAs for cancer therapy: Challenges and strategies. *Adv. Drug Deliv. Rev*, *81*, 128–141.