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Promising chalcone derivative for glioblastoma therapy

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Abstract

Glioblastoma (GBM) is the most frequent and lethal primary brain tumor, rapidly growing and spreading into nearby healthy tissues with devastating effects for patients and those around them. GBM has currently no cure, being the average survival of GBM patients after diagnosis limited to a few months. The drug resistance ability and fast regrowth of GBM are the main problems related to current treatments. The intrinsic high heterogeneity and the microenvironment of these tumors are some of the reasons for the low efficacy of the available treatments. Therefore, new therapy alternatives for this highly aggressive brain cancer are urgently needed. Chalcones are synthetic or naturally occurring compounds that have been widely investigated for cancer targeting. Thus, in this work, chalcone derivatives were tested regarding their inhibitory activity and specificity toward GBM cell lines. The chalcone derivative with the most potent and selective cytotoxic effects on GBM cells was further investigated regarding its ability to reduce critical hallmark features of GBM. This derivative showed to successfully reduce key targets for cancer treatment, namely the invasion and proliferation capacity of tumor cells by inducing cell cycling arrest and cell apoptosis. Moreover, to overcome potential systemic side effects and its poor water solubility, this compound was successfully encapsulated into liposomes. Therapeutic concentrations were incorporated retaining the potent in vitro growth inhibitory effect of the selected chalcone. In conclusion, our results demonstrated that this new formulation can be a promising starting point for the discovery of new and more effective drug treatments for GBM.

Keywords

glioblastoma; chalcone; cell death; drug delivery; liposomes.

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Glioblastoma (GBM)



• Primary Brain Tumor

- Highly heterogeneous
- Nuclear atypia
 Asy
 - Asymptomatic

Elbanan, M. et al. 2015, Neuroimaging Clin N Am



Therapy

- Surgical resection is the first line of treatment.
- Radiotherapy treatment on a dose schedule.
- Chemotherapy, alkylating agent temozolomide (TMZ).

Median survival of 12-15 months after diagnosis

Stupp, R. et al. 2005, The New England Journal of Medicine



Challenges



Mendanha, D. et al. 2021 Journal of Controlled Release



Chemotherapeutic Agents Limitations



- Solubility
- Blood circulation time
- Reaching tumor site
- Secondary effects

New Chemotherapeutic agents and Delivery systems are needed



Chalcones

Antimicrobial Antioxidant Anti-inflammatory Antitumor Simple **Easily obtained Incorporation of** by Synthesis functional groups Chemistry

Moreira, J. et al. 2021 Molecules

Chalcone derivatives



Chemical structure of chalcone derivatives

Mendanha, D. et al. 2021 Molecules



Chalcone derivatives IC₅₀ in GBM cells





72 h Chalcone 1 IC₅₀ [μM]:

- GL261 7.34 μM
- U87 18.07 μM
- bEnd.3 not applicable

Mendanha, D. et al. 2021 Molecules

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Chalcone 1 inhibits glioblastoma proliferation



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Chalcone 1 inhibits glioblastoma invasion





Mendanha, D. et al. 2021 Molecules



Chalcone 1 induces cell death via apoptosis



U87



Cell cycle arrest in the G₂/M checkpoint



Mendanha, D. et al. 2021 Molecules



Chalcone 1 loaded liposomes



Mendanha, D. et al. 2021 Molecules



Biological assessment of chalcone 1 loaded liposome



Mendanha, D. et al. 2021 Molecules

Conclusions

- Chalcone derivative 1 presents **antiproliferative** and **anti-invasion** activities towards GBM.
- Apoptosis induced in GBM cells by chalcone 1 derivative is triggered by cell cycle arrest in G₂/M checkpoint.
- **Liposomes** loaded with chalcone 1 were successfully developed.
- Liposomes loaded with chalcone derivatives can provide new treatment alternatives to GBM.



Future Perspectives

- Assessment of **signaling pathways** on GBM cells after treatment.
- Analysis of **apoptotic pathways** (intrinsic vs extrinsic pathways).
- Development of biofunctionalized liposomes BBB crossing and GBM targeting - to deliver chalcone 1.
- *In vivo* assays Orthotopic intracranial GBM model.





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