

Editorial

Nanomedicine in Cancer Targeting and Therapy

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Currently, cancer represents a major cause of death in the world, despite all the progress made in developing new therapies. Gold standard therapies require the use of chemotherapeutic drugs associated with radiotherapy and the surgical excision of the localized tumors.

Unfortunately, chemotherapy/radiotherapy are not cell-specific but also affect healthy tissues, causing undesirable side effects. Furthermore, chemoresistance determines a reduction of clinical drug efficacy. Innovative therapeutic strategies are still required to overcome the intrinsic insensitivity of cancer cells. In this context, engineered nanostructured materials to specific target and kill cancer cells with a low drug dose, reducing the pharmacologic impact on healthy cells and their clonogenicity can pave the way towards new theragnostic strategies for cancer applications [1].

To this aim, recently it has been shown that the uses of different nanostructured materials for theragnostic applications [2–4] provide more functionality, representing a method of achieving a combined effect for cancer care [5]. Multifunctional nanostructured materials have the capability to carry out different active therapeutic molecules, maximizing drug efficacy with a single treatment, delivering therapeutic molecules to a specific place of action, and minimizing negative side effects [6–11]. In addition, the conjugation of nanostructured materials with targeting motifs/antibodies or imaging elements can be combined into a single nanostructure, enhancing the properties of materials with recognition capability and imaging [12].

In the last few years, researchers have focused on the activation of the immune system against cancer cells. Different nanostructured materials have been developed for this aim [13]. For example, nanoparticles have been developed to target the specific pathways of innate immune systems, such as Toll-like receptors, the programmed cell death protein 1, or the cytotoxic T lymphocyte antigen-4 [13,14].

Until now, existing clinical cancer therapy has not been applicable to all patients, principally due to the inadequate responses of individual patients caused by chemoresistance and/or immunosuppression.

With this in mind, we are confident that this Special Issue will be able to explore ground-breaking approaches to nano-theragnostic therapy in cancer applications. In particular, we are expecting several contributions from the scientific community including mini-reviews, reviews, or research articles, which will focus on:

- the new synthesis of multifunctional nanostructured materials;
- the application of theragnostic materials in cancer treatment;
- the immune system and nanostructured materials.

Cancer nanomedicine is thus a promising novel area with significant future improvement potential, allowing physicians to use new nanoweapons in the universal war against cancer. Bearing this challenge in our mind, we are truly confident of stimulating new directions in the personalized treatment of cancer patients.



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References

1. Vasan, N.; Baselga, J.; Hyman, D.M. A view on drug resistance in cancer. *Nature* **2019**, *575*, 299–309. [[CrossRef](#)] [[PubMed](#)]
2. Samadian, H.; Mohammad-Rezaei, R.; Jahanban-Esfahlan, R.; Massoumi, B.; Abbasian, M.; Jafarizad, A.; Jaymand, M. A de novo theranostic nanomedicine composed of PEGylated graphene oxide and gold nanoparticles for cancer therapy. *J. Mater. Res.* **2020**, *35*, 430–441. [[CrossRef](#)]
3. Chen, Q.; Zheng, Z.; He, X.; Rong, S.; Qin, Y.; Peng, X.; Zhang, R. A tumor-targeted theranostic nanomedicine with strong absorption in the NIR-II biowindow for image-guided multi-gradient therapy. *J. Mater. Chem. B* **2020**, *8*, 9492–9501. [[CrossRef](#)] [[PubMed](#)]
4. Bardhan, R.; Lal, S.; Joshi, A.; Halas, N.J. Theranostic nanoshells: From probe design to imaging and treatment of cancer. *Acc. Chem. Res.* **2011**, *44*, 936–946. [[CrossRef](#)] [[PubMed](#)]
5. Davis, M.E.; Chen, Z.; Shin, D.M. Nanoparticle therapeutics: An emerging treatment modality for cancer. *Nat. Rev. Drug Discov.* **2008**, *7*, 771–782. [[CrossRef](#)] [[PubMed](#)]
6. Sanna, V.; Pala, N.; Sechi, M. Targeted therapy using nanotechnology: Focus on cancer. *Int. J. Nanomed.* **2014**, *9*, 467–483.
7. Cortese, B.; D’Amone, S.; Palama, I.E. Wool-Like Hollow Polymeric Nanoparticles for CML Chemo-Combinatorial Therapy. *Pharmaceutics* **2018**, *10*, 52. [[CrossRef](#)] [[PubMed](#)]
8. Nam, J.; La, W.G.; Hwang, S.; Ha, Y.S.; Park, N.; Won, N.; Jung, S.; Bhang, S.H.; Ma, Y.J.; Cho, Y.M.; et al. pH-Responsive Assembly of Gold Nanoparticles and “Spatiotemporally Concerted” Drug Release for Synergistic Cancer Therapy. *ACS Nano* **2013**, *7*, 3388–3402. [[CrossRef](#)] [[PubMed](#)]
9. Wang, C.; Li, Z.; Cao, D.; Zhao, Y.L.; Gaines, J.W.; Bozdemir, O.A.; Ambrogio, M.W.; Frasconi, M.; Botros, Y.Y.; Zink, J.I.; et al. Stimulated Release of Size-Selected Cargos in Succession from Mesoporous Silica Nanoparticles. *Angew. Chem. Int. Ed.* **2012**, *51*, 5460–5465. [[CrossRef](#)]
10. Moorthi, C.; Manavalan, R.; Kathiresan, K. Nanotherapeutics to Overcome Conventional Cancer Chemotherapy Limitations. *J. Pharm. Pharm. Sci.* **2011**, *14*, 67–77.
11. Ostad, S.N.; Dehnad, S.; Nazari, Z.E.; Fini, S.T.; Mokhtari, N.; Shakibaie, M.; Shahverdi, A.R. Cytotoxic Activities of Silver Nanoparticles and Silver Ions in Parent and Tamoxifen-Resistant T47D Human Breast Cancer Cells and Their Combination Effects with Tamoxifen against Resistant Cells. *Avicenna J. Med. Biotechnol.* **2010**, *2*, 187–196.
12. Raj, S.; Khurana, S.; Choudhary, R.; Kesari, K.K.; Kamal, M.A.; Garg, N.; Ruokolainen, J.; Das, B.C.; Kumar, D. Specific targeting cancer cells with nanoparticles and drug delivery in cancer therapy. *Semin. Cancer Biol.* **2021**, *69*, 166–177. [[CrossRef](#)] [[PubMed](#)]
13. Cronin, J.G.; Jones, N.; Thornton, C.A.; Jenkins, G.; Doak, S.H.; Clift, M. Nanomaterials and Innate Immunity: A Perspective of the Current Status in Nanosafety. *Chem. Res. Toxicol.* **2020**, *33*, 1061–1073. [[CrossRef](#)]
14. Baglini, E.; Salerno, S.; Barresi, E.; Marzo, T.; Settimo, F.D.; Taliani, S. Cancer Immunotherapy: An Overview on Small Molecules as Inhibitors of the Immune Checkpoint PD-1/PD-L1 (2015–2021). *Mini Rev. Med. Chem.* **2022**, *22*, 1816–1827. [[CrossRef](#)]