ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 10| Issue: 9| September 2024|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

NANOMEDICINE BREAKTHROUGH: REVOLUTIONIZING CERVICAL CANCER TREATMENT WITH PRECISION DRUG DELIVERY

Bipin Singh[1], Gurvir singh[2], Vishal kajla[3], Sahil[4], Sushant gore[5], Jasleen kaur[6], Dr. Ajay Bilandi[7]

[1,2,4,6]College of pharmacy, RIMT University, Mandi gobindgarh, Punjab, India
[3]Assistant professor, College of pharmacy, RIMT University, Mandi gobindgarh, Punjab, India
[5]Chandigarh group of colleges, Landran, Mohali, Punjab, India
[7]Principal, Bhai Gurdas College of Pharmacy, Sangrur, Punjab

Article DOI: https://doi.org/10.36713/epra18291
DOI No: 10.36713/epra18291

ABSTRACT

Cervical cancer, a global health issue, is a major concern, particularly in regions with limited healthcare resources. To address this, targeted drug delivery strategies have emerged as promising solutions. These involve delivering therapeutic agents directly to cancerous cells, minimizing systemic side effects, and enhancing treatment efficacy. Delivery systems like nanoparticles, liposomes, polymeric micelles, hydrogels, and local drug delivery devices have been developed to overcome barriers like drug resistance and limited penetration. Emerging targeting strategies like tumor-specific ligands, immunotherapy, virotherapy, and gene therapy are also promising for improving treatment specificity and efficacy in cervical cancer. These approaches address the intricate cellular pathways involved in the disease progression, paving the way for more personalized and effective treatments. The synergy between advancements in drug delivery technologies and targeting strategies offers hope for a future where cervical cancer can be effectively managed and potentially eradicated.

KEYWORDS: *Targeted drug delivery, Nanoparticles, Immunotherapy, Gene therapy, Personalized treatments, Cervical cancer*

INTRODUCTION

Cervical cancer, a major public health issue, is primarily caused by the lack of treatment facilities and systematic screening programs in low- and middle-income nations, highlighting the crucial role public health initiatives play in reducing its impact and preventing further death and morbidity [1]. Cervical cancer affects around 6.6% of the population worldwide; 570,000 new cases were reported in 2018, indicating the disease's significant prevalence [2]. Despite being the leading cause of death for women worldwide and in the US, socioeconomic obstacles that affect timely preventative screenings contribute to variations in incidence and outcomes [3]. The implementation of preventive interventions such as immunizations, awareness screening programs, and dietary changes has been demonstrated to reduce the incidence of cervical cancer by at least 50% in developed nations [4]. This demonstrates the effectiveness of preventative and early detection techniques. Furthermore, there may be additional ways to reduce the incidence of cervical cancer by addressing risk factors other than HPV infection, such as illiteracy, poverty, multiparity, tobacco use, malnourishment, and poor genital cleanliness, especially in developing nations where 80% of cases globally occur [5]. With the development of screening programs and HPV vaccination, which have shown good results in lowering incidence and death rates, cervical cancer may one day no longer be a public health concern [6]. Increasing cervical cancer awareness and education is critically needed, particularly in low- and middle-income countries where there are few preventative options and low levels of understanding. Reducing the global incidence of cervical cancer requires addressing these issues by increasing literacy and enhancing health-seeking habits [7]. Along with improvements in HPV detection, vaccination, and screening methods, government initiatives have been instrumental in making cervical cancer a largely curable disease and significantly reducing its incidence in developed nations [8]. Numerous research programs that strive to minimize side effects and maximize effectiveness have revealed the vital importance of effective medicine delivery systems in the treatment of cervical cancer.

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 10| Issue: 9| September 2024|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

Drug Delivery Strategy	Advantages	References
1.Localized drug delivery techniques include lipid-based nanocarriers, gels, nanoparticles, polymeric films, rods, and wafers.	Greater medication concentration at the targeted site, improved treatment outcomes, and reduced side effects	Aggarwal et al. (2017)[9]
2. Medication administration vaginally	Benefits for fertility-sparing surgery, fewer systemic side effects, reduced medication dosages, direct delivery to the site of action, and a lower likelihood of recurrence	Mcconville (2015), Major &Mcconville (2017)[10]
3.Liposomes, hydrogels, dendrimers, and nanoparticles are examples of nanocarriers.	Safer substitutes for traditional chemotherapy, localized and tailored medication administration for cervical cancer	Gupta & Gupta (2017)[11]
4.Nanotechnology made nanocarriers possible.	In cervical carcinoma cells, improved drug solubility, bioavailability, and targeted toxicity	Himiniuc et al. (2022)[12]
5. Intravaginal delivery using nanomedicine	Improved therapeutic effectiveness and mucosal penetration	Liu et al. (2023)[13]
6. Anti-angiogenesis, immune checkpoint inhibitor therapy, and tailored pharmaceutical therapy	Overcoming side effects and medication resistance while boosting targeted therapy efficacy	Ji (Undated) [14]
7.Nanomaterial-based delivery techniques (liposomes, dendrimers, polymers)	Customized delivery to a tumor, reduced toxicity, and improved biocompatibility	Zhou et al. (2021) [15]
8.Specialized delivery systems for medications	-	Ghosh et al. (2022) [16]
9.Utilizing cytotoxic medications such as cisplatin in combination with early surgery	Improved prognosis for high-risk cervical cancer	Jones (1993) [17]
10. Delivering medications vaginally in order to treat cervical cancer locally	-	Wang et al. (2021) [18]
11.Bevacizumab in conjunction with anti-neoplastic systemic treatments	Boost overall survival in cervical cancer patients with recurrent or metastatic disease	Markman (2014) [19]

Table 1: Distinct medications for cervical cancer that offer advantageous delivery methods

Different Drug Delivery Methods

Liposomes and Nanoparticles

Nanoparticles and liposomes are innovative treatments for cervical cancer, offering reduced side effects, enhanced efficacy, and tailored drug delivery. These nanocarriers target cancer cells through enhanced permeability and retention, allowing for targeted delivery through surface changes. Mucosal penetration strategies, such as "first mucus-adhering then mucosal penetration," demonstrate how nanomedicine successfully penetrates biological barriers to deliver therapeutic chemicals [20]. Considerable progress in the creation of liposomes and nanoparticles has shown promising results in the targeted treatment of cervical cancer. The application of chitosan-coated solid lipid nanoparticles for the delivery of cisplatin demonstrated significant cytotoxicity against malignant cells, suggesting the potential for enhanced treatment outcomes [21]. Furthermore, the development of folic acid-conjugated chitosan-coated poly(D-L-lactideco-glycolide) (PLGA) nanoparticles aimed to deliver carboplatin directly to cervical cancer cells, hence enhancing the antiproliferative effects [22].

Ursolic acid nanoparticles have been proven to effectively induce apoptosis both in vitro and in vivo, thereby slowing the advancement of cervical cancer [23]. Despite advancements, challenges like distribution effectiveness, toxicity management, multidrug resistance, and stability remain. Research focuses on developing multifunctional nanocarriers that target, image, and treat patients. Surface engineering and materials science advancements are being explored to improve targeting effectiveness. Efficient carriers require understanding tumor biology and microenvironment [24].

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 10| Issue: 9| September 2024|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

Hydrogels and Polymeric Micelles

This article discusses the role of polymeric micelles and hydrogels in treating cervical cancer, highlighting their biocompatibility, controlled release capabilities, and potential for direct drug administration to tumor sites. The authors highlight the challenges of systemic immunotherapeutic agent administration, particularly in the use of polymer-based hydrogels for localized drug release in cancer immunotherapy. The article highlights the importance of these innovative drug delivery strategies in improving treatment effectiveness and patient outcomes [25]. The study highlights how well these materials function to offer controlled release, which increases immune response while lowering the possibility of unfavorable consequences. In a different study, Q. Qian et al. developed a mucoadhesive nanogel specifically for the treatment of cervical cancer [26]. A novel formulation of paclitaxel and β-cyclodextrin, based on mucoadhesive poly(acrylic acid), ensures strong cytotoxicity to cancer cells. This study highlights the importance of strategically designing drug delivery systems to increase localized treatments, counteract multidrug resistance, and prolong retention times in specific regions. Recent research has made significant progress in using hydrogels and polymeric micelles for cervical cancer treatment [27]. The thermosensitive hydrogel formulation demonstrated exceptional efficacy in preventing cervical cancer recurrence in mice post-surgery. This highlights the potential of hydrogels in localized therapy, offering new opportunities for treating cervical cancer recurrence. Research on PEG-based hydrogels highlights their high drug encapsulation rates, easy modifiability, and biocompatibility [28]. Advancements in material science have made PEG-based hydrogels a promising option for controlled medication administration in cancer treatment, demonstrating advancements in cervical cancer prevention.

Local Drug Delivery Devices

Local drug delivery devices (LDDs) like intracervical devices and intrauterine systems are increasingly used in treating cervical cancer. These devices allow chemotherapeutic medicines to be delivered directly to the affected area, minimizing systemic adverse effects and potentially increasing treatment effectiveness. They also improve patient outcomes and reduce post-surgery recurrence. The precision of these devices promotes better therapeutic outcomes, less systemic adverse effects, and fertility preservation in reproductive-age women. Innovative devices like the intravaginal ring for Alisertib represent a step forward in localized, extended drug delivery [29-32]. LDDs face challenges such as device tolerability, patient compliance, discomfort, complications, and limited accessibility in developing countries. Additionally, concerns arise about inadequate distribution of intratumor drugs, necessitating further clinical and technological advancements to overcome these obstacles and improve their effectiveness and adoption [33]. The fact that close supervision and monitoring are necessary to ensure the safety and effectiveness of these treatments highlights just how challenging it is to employ LDDs in clinical settings [34].

Present Treatment Obstacles for Cervical Cancer

Conventional chemotherapy, a widely used treatment for various cancers, has significant drawbacks in treating cervical cancer due to its systemic distribution of cytotoxic chemicals. These chemicals can damage healthy cells, causing various side effects. This necessitates the development of more specific therapeutic approaches that target malignant cells without endangering healthy tissue. Additionally, drug resistance, a common issue in cancer treatment, often hinders the efficacy of traditional chemotherapy, limiting the available therapeutic options for advanced cervical cancer stages [35, 36]. Targeted therapy is a promising approach in the fight against cervical cancer, targeting malignant cells and processes that enable their proliferation. This approach offers a safer and more effective alternative to traditional chemotherapy. Understanding the disease's molecular biology is crucial for creating and integrating targeted therapy into cervical cancer treatment regimens, including identifying biomarkers for therapeutic intervention [37,38]. The development of drug delivery systems (DDS) is crucial for improving cervical cancer treatment. These systems, including intrauterine systems, local drug delivery devices, and intracervical devices, aim to minimize systemic exposure and maximize therapeutic effect. They can improve the effectiveness of traditional chemotherapeutic drugs and targeted therapies by ensuring optimal drug concentrations, decreasing drug resistance, and minimizing side effects. Research is ongoing to refine these technologies [39,40].

Approaches to Targeting in Cervical Cancer

Tumor-specific ligands for targeted treatment of cervical cancer constitute a significant advance in the field of targeted therapy. The objective is to identify molecular targets and biomarkers unique to cervical cancer cells so that, in accordance with the tumor profiles of individual patients, less toxic and more successful treatments can be administered.Progress in Targeting Cervical Cancer Since the expression of programmed death ligand 1 (PD-L1) has become a critical biomarker for patient enrollment in checkpoint inhibitor therapy, cervical cancer precision medicine has advanced [41]. When it comes to addressing estrogen receptors connected to human papillomavirus-induced cervical cancer, tumor-specific ligands are especially helpful. This emphasizes how crucial molecularly targeted medications are to enhancing the efficacy and specificity of therapy [42]. Because of developments in targeted treatment development, there is now a greater variety of treatments accessible for cervical cancer. Innovative strategies include gene therapy, virotherapy, and immunotherapy. Notably, these strategies include gene therapy to repair aberrant genes and improve tumor cell immunogenicity, immune checkpoint suppression with CTLA-4/PD-1/PDL-1, and oncolytic viruses such as Newcastle disease virus [43]. This approach highlights the flexibility and potential of targeted therapy in addressing the pathogenesis of cervical cancer with more precision.It has been discovered that epigenetic biomarkers can help with tailored treatment and improved outcomes for cervical cancer. These include the degree of methylation of specific genes and the expression levels of proteins such as cyclooxygenase-2, hypoxia-inducible factor 1α, and the receptor for the epidermal growth factor [44]. These indicators improve prognosis and responsiveness to treatment by directing the development of therapy regimens pertinent to the genetic and molecular features of the tumor.

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 10| Issue: 9| September 2024|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

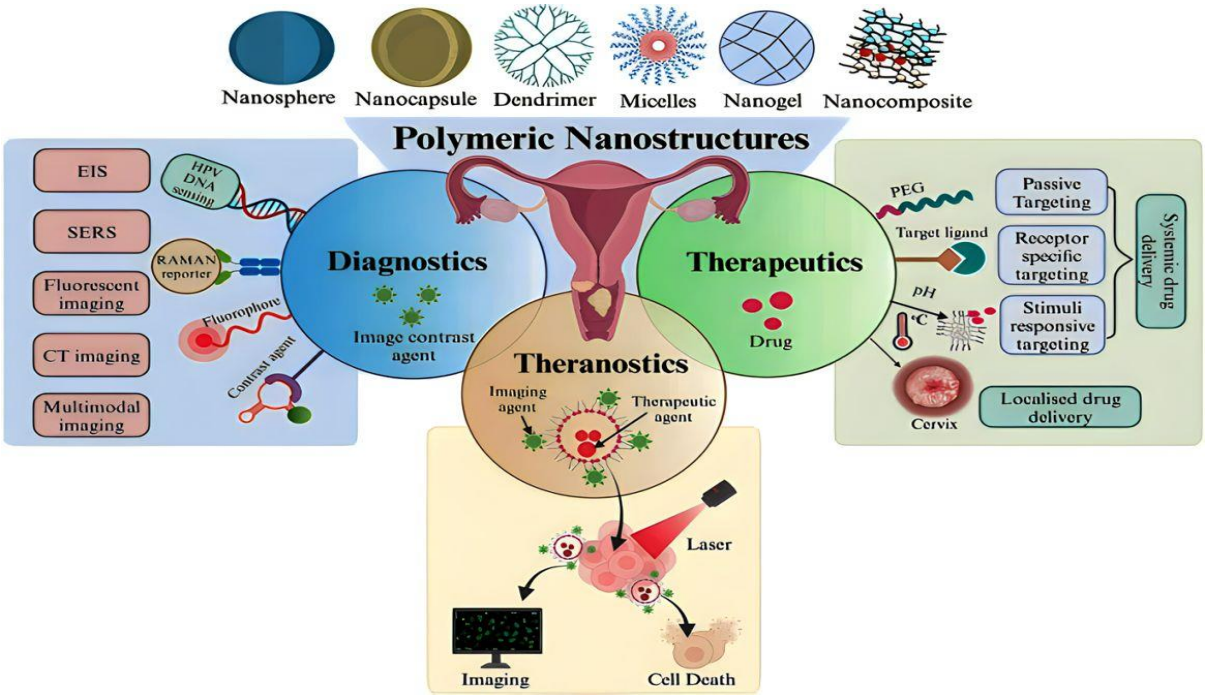

Figure: -1 A) The drawbacks of traditional cervical cancer treatment and diagnostic methods. B) The benefits of different structural alterations in polymeric nanostructures. C) The benefits of different structural adjustments in polymeric nanostructures

Clinical Applications

Combining chemotherapy and surgery to treat high-risk cervical cancer has the potential to increase survival rates, especially when cisplatin-containing regimens are effective in regressing advanced and recurrent tumours [45]. Inhibiting PCNA, or proliferating cell nuclear antigen, offers a novel therapeutic strategy that emphasizes the need of focusing on certain molecular targets when treating cervical cancer [46]. The exploration of the phosphatidylinositol 3-kinases (PI3K), apoptosis-promoting factor (AKT), and mTOR pathway as targets for cervical cancer therapy opens up new avenues for treatment alternatives. Blocking its constituent elements may offer a strong resistance against cervical cancer, given the critical role this channel plays in the formation and survival of tumours [47].

Cell-Penetrating Peptides

In addition to examining the limited utility of systemic anti-neoplastic medications, a study looks at the effectiveness of bevacizumab when combined with chemotherapy regimens to improve overall survival in patients with metastatic or recurrent cervical cancer [48]. Another critical study focuses on natural chemicals such as osthole, praeruptorin, scopoletin, and auraptene. These compounds have been demonstrated to have cytotoxic and antiproliferative effects on cervical carcinoma cells, indicating that they could be utilized to boost the tumor cells' susceptibility to radiation or chemotherapy and decrease the side effects of conventional therapy [49]. Furthermore, tailored delivery techniques have been studied in the treatment of cervical cancer due to their potential to give high drug concentration at target locations. Using gels, nanoparticles, and polymeric films as well as nanocarriers and local drug delivery systems are some of these tactics [50]. Immunotherapy, virotherapy, and gene therapy are also highlighted as possible treatment modalities. The development of targeted therapies for cervical cancer includes the use of oncolytic viruses, immune checkpoint inhibition against PD-1/PDL-1, and CTLA-4 suppression [51].

Case Studies and Clinical Applications in Cervical Cancer

Recent developments in drug delivery systems for cervical cancer aim to enhance treatment efficacy and minimize side effects. Researchers are exploring novel techniques like liposomes, hydrogels, nanoparticles, and intravaginal rings, patches, and films to improve regulated drug delivery to the affected location and reduce systemic adverse effects [52,53]. Many studies have been conducted on the possibility for localized drug delivery using nanocarrier-based systems, including gels, nanoparticles, polymeric films, rods, and lipid-based nanocarriers. These techniques enable high medication concentrations at the target site, which may improve treatment outcomes while reducing toxicity [54]. Systemic/targeted drug delivery techniques such hydrogels, liposomes, and nanoparticles are thought to be safer and more effective than conventional chemotherapy for the treatment of cervical cancer. Localized drug delivery techniques such as cervical patches, films, and rings have been highlighted for their ability to deliver medication directly to the tumor site, reducing systemic side effects and requiring lower dosages [55, 56]. Localized drug delivery offers several benefits over systemic delivery strategies in the treatment of cervical cancer by facilitating direct therapy administration to the action site. This strategy, which asks for lower dosages while also reducing systemic side effects, is a significant advancement in targeted cancer therapy [57]. Targeted drug delivery techniques further enhance therapeutic efficacy by delivering higher medicine concentrations directly to tumors and thereby minimizing systemic toxicity [58].

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 10| Issue: 9| September 2024|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

Views from Patients with Cervical Cancer

Patients' open observations of their real experiences and quality of life during and after cervical cancer treatment reveal significant elements that impact their overall well-being. A comprehensive study on the quality of life among survivors of cervical cancer focused on physical, mental, and social well-being, highlighting the intricate balance that is disrupted by the disease and its treatment [59-61]. Although specifics of these experiences are not discussed in the abstract, patients undergoing definitive chemotherapy and radiation therapy mentioned specific concerns that negatively impacted their quality of life. It does, however, emphasize how important it is to better understand patients' perspectives during such intensive therapies [62]. A significant 10-year follow-up study provided insight into the quality of life after surgery for patients with early-stage cervical cancer. This longitudinal approach allowed for a greater understanding of the long-term consequences of cancer treatment on survivors, as well as noteworthy effects on their social interactions, psychological health, and daily activities [63]. Research also looks at the health-related quality of life for patients who underwent significant surgery and neoadjuvant therapy for locally advanced cervical cancer. Again, the focus was on assessing how diverse treatment approaches impact patients' perceptions of their health and overall degree of satisfaction with life after treatment, highlighting the crucial role that customized care approaches play [64].

It has been shown that postoperative treatments significantly improve the quality of life for individuals with cervical cancer. Improvements were observed in areas such as interpersonal connections, mental health, and environment, indicating that supportive care and rehabilitation can greatly enhance recovery and quality of life following surgery [65]. The quality of a patient's sexual life is a crucial consideration for people undergoing surgery for cervical cancer, particularly for those who are fertile. In order to promote young women's mental health recovery and post-treatment mental health, it is imperative that family dynamics and sexual health be addressed as part of comprehensive cancer care [66].

A comparative study from the STARS research provides a comprehensive examination of quality of life for individuals with early-stage cervical cancer undergoing different adjuvant therapy regimens. This analysis plays a critical role in guiding treatment decisions that align with patients' preferences and life aspirations, so ensuring a patient-centered approach to cancer care [67]. A comprehensive evaluation revealed the significant impact of contemporary treatment modalities on women's self-reported health-related quality of life. This study included patient-reported data from other studies to give a thorough picture of how modern treatments affect survivors, offering valuable knowledge for improving care strategies [68]. The cumulative results of these studies demonstrate how important it is to incorporate patient viewpoints into the planning of cervical cancer treatment. Understanding the nuances present in patients' experiences, expectations, and perceived quality of life guides the development of more complete, effective, and compassionate treatment and support programs tailored to each patient's specific needs.

CONCLUSION

Targeted drug delivery in cervical cancer presents a promising avenue for improved therapeutic outcomes. Innovative strategies like localized systems, nanocarriers, and nanomedicine have overcome challenges like drug resistance, systemic toxicity, and limited penetration. These advancements have the potential to revolutionize treatment paradigms, offering patients enhanced efficacy and reduced side effects. As the field evolves, interdisciplinary collaborations and exploration of novel delivery modalities will be crucial for realizing the full therapeutic potential of targeted drug delivery in cervical cancer.

Future Prospectives

- ✓ Advancement in Localized Drug Delivery Systems.
- ✓ Integration of Nanotechnology and Personalized Medicine.
- ✓ Development of Advanced Combination Therapies.
- ✓ Focus on Addressing Drug Resistance.
- ✓ Enhancing Patient-Centered Care and Quality of Life.

REFERENCE

1. *A. Goodman, "The Social Ecology of Cervical Cancer: The Challenges to Pap Smear Screening," doi:10.4236/IJCM.2013.412A1004, 2013.*
2. *Sombeer Sharma, A. Deep, A. Rana, Monu Yadav, A. Sharma, "Possible Biomarkers and Therapeutic Targets for the Management of Cervical Cancer," doi:10.2174/1573394715666190126142508, 2020.*
3. *Patti Olusola, H. Banerjee, J. Philley, S. Dasgupta, "Human Papilloma Virus-Associated Cervical Cancer and Health Disparities," doi:10.3390/cells8060622, 2019.*
4. *Jyotsna A. Saonere, "Awareness screening programme reduces the risk of cervical cancer in women," 2010.*
5. *Ramaiah Vinay Kumar, S. Bhasker, "Potential opportunities to reduce cervical cancer by addressing risk factors other than HPV," doi:10.3802/jgo.2013.24.4.295, 2013.*
6. *D. Currow, Sanchia Aranda, "Renewed cervical screening: what the early results tell us," doi:10.5694/mja2.50267, 2019.*
7. *S. Azam, "Awareness and Perspectives on Cervical Cancer and Practices Related to it: How far it has Promoted? In: Recent Advances in Cervical Cancer," 2016.*
8. *Barbara A Wuerthner, Maria Avila-Wallace, "Cervical cancer: Screening, management, and prevention," doi:10.1097/01.NPR.0000490390.43604.5f, 2016.*
9. *Aggarwal U, Goyal A, Rath G. Development of Drug Targeting and Delivery in Cervical Cancer. Curr Drug Targets. 2017 Oct 9. DOI:10.2174/1568009617666171009165105.*
10. *Mcconville C. The therapeutic potential of vaginal drug delivery in the treatment of cervical cancer. Ther Deliv. 2015 May 22. DOI:10.4155/tde.15.13.*
11. *Gupta S, Gupta M. Possible role of nanocarriers in drug delivery against cervical cancer. Nanomed. 2017. DOI:10.1080/20022727.2017.1335567.*
12. *Himiniuc L, Toma B, Popovici R, Grigore A, Hamod A, Volovăț C, et al. Update on the Use of Nanocarriers and Drug Delivery Systems and Future Directions in Cervical Cancer. J Int Res. 2022 May 4. DOI:10.1155/2022/1636908.*

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 10| Issue: 9| September 2024|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

13. *Liu Y, Yang Z, Feng L, Xia Y, Wei G, Lu W. Advance in Nanomedicine for Improving Mucosal Penetration and Effective Therapy of Cervical Cancer. Small. 2023 Jun 20. DOI:10.1002/smll.202303772.*
14. *Ji M. Research on Cervical Cancer and Its Drug Treatment. E3S Web Conf. [Date Unknown]. DOI:10.1051/e3sconf/202018503041.*
15. *Zhou P, Liu W, Cheng Y, Qian D. Nanoparticle-based applications for cervical cancer treatment in drug delivery, gene editing, and therapeutic cancer vaccines. Wiley Interdiscip Rev NanomedNanobiotechnol. 2021 May 4. DOI:10.1002/wnan.1718.*
16. *Ghosh S, Jayaram P, Kabekkodu S, Satyamoorthy K. Targeted drug delivery in cervical cancer: Current perspectives. Eur J Pharmacol. 2022 Jan 9. DOI:10.1016/j.ejphar.2022.174751.*
17. *Jones W. New approaches to high-risk cervical cancer: Advanced cervical cancer. Cancer. 1993 Feb 15. DOI:10.1002/cncr.2820710408.*
18. *Wang X, Liu S, Guan Y, Ding J, Ma C, Xie Z. Vaginal drug delivery approaches for localized management of cervical cancer. Adv Drug Deliv Rev. 2021 Apr 12. DOI:10.1016/j.addr.2021.04.009.*
19. *Markman M. Advances in cervical cancer pharmacotherapies. Expert Rev Anticancer Ther. 2014 Feb 14. DOI:10.1586/17512433.2014.884924.*
20. *Y. Liu et al., "Advance in Nanomedicine for Improving Mucosal Penetration and Effective Therapy of Cervical Cancer," Small, vol. 23, no. 772, Jun. 2023. DOI:10.1002/smll.202303772.*
21. *J. Wang, Y. Wang, and X. Meng, "Chitosan Nanolayered Cisplatin-Loaded Lipid Nanoparticles for Enhanced Anticancer Efficacy in Cervical Cancer," Nanoscale Res Lett., vol. 11, no. 498, Nov. 2016. DOI:10.1186/s11671-016-1698-9.*
22. *J. Ji, P. Zuo, and Y.-l. Wang, "Enhanced Antiproliferative Effect of Carboplatin in Cervical Cancer Cells Utilizing Folate-Grafted Polymeric Nanoparticles," Nanoscale Res Lett., vol. 10, no. 1162, Nov. 2015. DOI:10.1186/s11671-015-1162-2.*
23. *S. Wang, X. Meng, and Y. Dong, "Ursolic acid nanoparticles inhibit cervical cancer growth in vitro and in vivo via apoptosis induction," Int J Oncol., vol. 50, no. 4, Apr. 2017. DOI:10.3892/ijo.2017.3890.*
24. *A. Sugumaran and V. Mathialagan, "Colloidal Nanocarriers a Versatile Targeted Delivery System for Cervical Cancer," Curr Drug Targets, vol. 21, no. 15, Jun. 2020. DOI:10.2174/1381612826666200625110950.*
25. *Z. Xie et al., "Polymer-based hydrogels with local drug release for cancer immunotherapy," Biopharmaceutics, vol. 139, Feb. 2021.*
26. *Q. Qian et al., "A Paclitaxel-Based Mucoadhesive Nanogel with Multivalent Interactions for Cervical Cancer Therapy," Small, vol. 15, no. 48, Nov. 2019.*
27. *X. Wang et al., "Vaginal delivery of carboplatin-loaded thermosensitive hydrogel to prevent local cervical cancer recurrence in mice," Drug Delivery, vol. 23, no. 7, Jul. 2016.*
28. *Z. Wang et al., "Poly Ethylene Glycol (PEG)-Based Hydrogels for Drug Delivery in Cancer Therapy: A Comprehensive Review," Advanced Drug Delivery Reviews, Apr. 2023.*
29. *Major, C. Mcconville, "Vaginal drug delivery for the localised treatment of cervical cancer," 2017. Available at: https://dx.doi.org/10.1007/s13346-017-0395-2.*
30. *U. Aggarwal, A. Goyal, G. Rath, "Development of Drug Targeting and Delivery in Cervical Cancer," 2017. https://dx.doi.org/10.2174/1568009617666171009165105.*
31. *S. Gupta, M. Gupta, "Possible role of nanocarriers in drug delivery against cervical cancer," 2017. https://dx.doi.org/10.1080/20022727.2017.1335567.*
32. *H. Sidhu, J. H. Price, P. McCarron, D. Mccafferty, A. Woolfson, D. Biggart, W. Thompson, "A randomised controlled trial evaluating a novel cytotoxic drug delivery system for the treatment of cervical intraepithelial neoplasia," 1997. https://dx.doi.org/10.1111/j.1471-0528.1997.tb11034.x.*
33. *U. Hani, R. Osmani, R. R. Bhosale, H. Shivakumar, P. K. Kulkarni, "Current Perspectives on Novel Drug Delivery Systems and Approaches for Management of Cervical Cancer: A Comprehensive Review," 2016. https://dx.doi.org/10.2174/1389450116666150505154720.*
34. *Yu Liu, Ziyi Yang, Ling-lin Feng, Yu Xia, G. Wei, Weiyue Lu, "Advance in Nanomedicine for Improving Mucosal Penetration and Effective Therapy of Cervical Cancer," 2023. Available at: https://dx.doi.org/10.1002/smll.202303772.*
35. *R. Kim, R. Alvarez, G. Omura, "Advances in the treatment of gynecologic malignancies. Part 1: Cancers of the cervix and vulva," 2002. Available at: https://pubmed.ncbi.nlm.nih.gov/12469929.*
36. *U. Hani, et al., "Current Perspectives on Novel Drug Delivery Systems and Approaches for Management of Cervical Cancer: A Comprehensive Review," 2016.*
37. *I. Major, C. Mcconville, "Vaginal drug delivery for the localised treatment of cervical cancer," 2017.*
38. *U. Aggarwal, et al., "Development of Drug Targeting and Delivery in Cervical Cancer," 2017.*
39. *S. Gupta, M. Gupta, "Possible role of nanocarriers in drug delivery against cervical cancer," 2017.*
40. *H. Sidhu, et al., "A randomised controlled trial evaluating a novel cytotoxic drug delivery system for the treatment of cervical intraepithelial neoplasia," 1997.*
41. *Manrriquez, E., Zakhour, M., & Salani, R. (2021). Precision medicine for cervical cancer. https://dx.doi.org/10.1097/GCO.0000000000000755*
42. *Dwarampudi, L. P., Gowthamarajan, K., Shanmugam, R., Madhuri, K., Nilani, P., & Kumar, M. (2013). The potential therapeutic targets for cervical cancer. https://dx.doi.org/10.4103/2278-344X.115679*
43. *Nor Aini Lubis Mhd Zain, et al. (2019). Prospective Therapeutic Strategies for Cervical Cancer.*
44. *Iida, M., Banno, K., Yanokura, M., Nakamura, K., Adachi, M., Nogami, Y., Umene, K., Masuda, K., Kisu, I., Iwata, T., Tanaka, K., & Aoki, D. (2014). Candidate biomarkers for cervical cancer treatment: Potential for clinical practice. https://dx.doi.org/10.3892/MCO.2014.324*
45. *Jones, W. (1993). New approaches to high-risk cervical cancer: Advanced cervical cancer. https://dx.doi.org/10.1002/cncr.2820710408*
46. *Wendel, S. O., Snow, J. A., Gu, L., Banerjee, N. S., Malkas, L., & Wallace, N. (2023). The potential of PCNA inhibition as a therapeutic strategy in cervical cancer. https://dx.doi.org/10.1002/jmv.29244*
47. *Wu, J., Chen, C., & Zhao, K. (2013). Phosphatidylinositol 3-kinase signaling as a therapeutic target for cervical cancer. https://dx.doi.org/10.2174/1568009611313020004*

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 10| Issue: 9| September 2024|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2024: 8.402 || ISI Value: 1.188

48. M. Markman, "Advances in cervical cancer pharmacotherapies," *Expert Rev Anticancer Ther*, vol. 14, no. 2, pp. 207–214, Feb. 2014. Available: https://dx.doi.org/10.1586/17512433.2014.884924
49. B. de la Cruz-Concepción et al., "Use of coumarins as complementary medicine with an integrative approach against cervical cancer: background and mechanisms of action," *Eur Rev Med Pharmacol Sci*, vol. 25, no. 24, pp. 7760-7769, Dec. 2021. Available: https://dx.doi.org/10.26355/eurrev_202112_27612
50. U. Aggarwal, A. Goyal, G. Rath, "Development of Drug Targeting and Delivery in Cervical Cancer," *Current Drug Targets*, vol. 18, no. 15, pp. 1735-1746, Oct. 2017. Available: https://dx.doi.org/10.2174/1568009617666171009165105
51. Nor Aini Lubis Mhd Zain et al., "Prospective Therapeutic Strategies for Cervical Cancer," 2019.
52. F. Ordikhani et al., "Drug Delivery Approaches for the Treatment of Cervical Cancer," *Pharmaceutics*, vol. 8, no. 3, 2016, DOI: 10.3390/pharmaceutics8030023.
53. U. Hani et al., "Current Perspectives on Novel Drug Delivery Systems and Approaches for Management of Cervical Cancer: A Comprehensive Review," *Curr Drug Targets*, vol. 17, no. 14, 2016, DOI: 10.2174/1389450116666150505154720.
54. U. Aggarwal et al., "Development of Drug Targeting and Delivery in Cervical Cancer," 2017, DOI: 10.2174/1568009617666171009165105.
55. S. Gupta, M. Gupta, "Possible role of nanocarriers in drug delivery against cervical cancer," 2017, DOI: 10.1080/20022727.2017.1335567.
56. I. Major, C. Mcconville, "Vaginal drug delivery for the localized treatment of cervical cancer," *Drug Deliv. Transl. Res.*, 2017, DOI: 10.1007/s13346-017-0395-2.
57. C. Mcconville, "The therapeutic potential of vaginal drug delivery in the treatment of cervical cancer," 2015, DOI: 10.4155/tde.15.13.
58. S. Ghosh et al., "Targeted drug delivery in cervical cancer: Current perspectives," *Eur J Pharmacol*, 2022, DOI: 10.1016/j.ejphar.2022.174751.
59. . "Comprehensive Study on the Quality of Life in Cervical Cancer Patients." [DOI:10.31525/ct1-nct03967457](https://dx.doi.org/10.31525/ct1-nct03967457)
60. J. Conway et al., "Patient-reported quality of life in cervical cancer patients treated with definitive chemoradiation." [DOI:10.1016/s0167-8140(18)31121-6](https://dx.doi.org/10.1016/s0167-8140(18)31121-6)
61. Michael J. Halaska et al., "10 years follow-up of postoperative quality of life in patients with early stage cervical cancer – prospective study." [DOI: 10.1136/ijgc-2023-esgo.182](https://dx.doi.org/10.1136/ijgc-2023-esgo.182)
62. Bolin Liu et al., "Health-related quality of life in locally advanced cervical cancer patients treated with neoadjuvant therapy followed by radical surgery." [DOI: 10.1016/j.ygyno.2019.07.005](https://dx.doi.org/10.1016/j.ygyno.2019.07.005)
63. Xue-ping Wang, Li-ping Huang, "Research Progress on Life Quality of Patient Experiencing Cervical Cancer Surgery." [DOI:10.3877/CMA.J.ISSN.1673-5250.2012.05.035](https://dx.doi.org/10.3877/CMA.J.ISSN.1673-5250.2012.05.035)
64. He Huang et al., "Comparative analysis of quality of life for three different adjuvant treatment modality in early stage cervical cancer: an analysis from STARS study." [DOI:10.1016/s0090-8258(21)00705-8](https://dx.doi.org/10.1016/s0090-8258(21)00705-8)
65. L. Wiltink et al., "A systematic review of the impact of contemporary treatment modalities for cervical cancer on women's self-reported health-related quality of life." [DOI: 10.1007/s00520-020-05554-2](https://dx.doi.org/10.1007/s00520-020-05554-2)
66. Gaibian Zhu, Xinyan Li, "Effect of postoperative intervention on the quality of life of patients with cervical cancer." [DOI:10.3760/CMA.J.ISSN.1006-9801.2016.12.007](https://dx.doi.org/10.3760/CMA.J.ISSN.1006-9801.2016.12.007)
67. Casper Tax et al., "Measuring health-related quality of life in cervical cancer patients: a systematic review of the most used questionnaires and their validity." [DOI:10.1186/s12874-016-0289-x](https://dx.doi.org/10.1186/s12874-016-0289-x)
68. J. Khalil et al., "Quality of life in long-term cervical cancer survivors: Results from a single institution." [DOI:10.1016/S0959-8049(16)31497-6](https://dx.doi.org/10.1016/S0959-8049(16)31497-6)