

Review Article

Advances in Cancer Treatment Technologies

Rajeev Narayan^{1*}, Emily Chen², Michael Johnson³, Fatima Al-Masri⁴, Carlos Ramirez⁵

University of Sydney, Australia

²Stanford University USA

University of Cambridge UK

⁴King Saud University, Saudi Arabia

⁵University of São Paulo, Brazil

***Corresponding author:** Rajeev Narayan, University of Sydney, Australia **Citation:** Narayan R, Chen E, Johnson M, Al-Masri F, Ramirez C (2025) Advances in Cancer Treatment Technologies, IJRSS: 2025-005

Received Date: 07 July 2025; **Accepted Date:** 17 July 2025; **Published Date:** 20 July 2025

Abstract

Cancer remains a leading cause of death globally despite significant advances in detection, diagnosis, and treatment. Over the last two decades, rapid developments in biotechnology, genomics, and immunology have introduced innovative treatment methods such as immunotherapy, targeted therapy, and precision medicine. This article comprehensively reviews the mechanisms, clinical applications, and challenges of modern cancer treatment technologies, drawing from major clinical trials and recent studies. With the integration of artificial intelligence, nanotechnology, and genomic data, cancer care is evolving rapidly toward personalized, minimally invasive, and highly effective approaches. The article concludes with a discussion on current limitations, ethical concerns, and future directions for achieving global accessibility and equity in oncology treatment.

Keywords: Keywords: Cancer therapy, immunotherapy, targeted drugs, personalized medicine, CAR-T, oncology innovation, AI in healthcare

Introduction

Cancer is the second leading cause of death worldwide, with nearly 10 million deaths annually (WHO, 2021). The disease encompasses over 200 different types, affecting virtually every organ system. Conventional treatments — surgery, chemotherapy, and radiotherapy — have saved millions of lives but are often associated with significant side effects, treatment resistance, and poor prognosis in late-stage cancers. The emergence of new technologies has revolutionized the field of oncology. Targeted therapies, immune-based approaches, and personalized regimens based on molecular profiling are shifting the treatment paradigm. This article aims to critically analyze the leading advancements in cancer therapy, focusing on their clinical application, efficacy, safety, and potential for future integration into mainstream treatment protocols.

Methodology

A structured literature review was conducted across PubMed, Scopus, and ClinicalTrials.gov databases for English-language studies published between 2010 and 2024. Search terms included: “cancer immunotherapy,” “CAR-T therapy,” “targeted therapy,” “oncology AI,” “precision medicine,” and “personalized cancer treatment.” Priority was given to Phase II/III clinical trials, systematic reviews, and meta-analyses. Clinical guidelines from the NCCN and ASCO were also referenced.

Immunotherapy

ImmuneCheckpoint Inhibitors

Checkpoint inhibitors (e.g., PD-1/PD-L1 and CTLA-4 blockers) have demonstrated remarkable success in cancers such as melanoma, lung cancer, and renal cell carcinoma. These agents work by "releasing the brakes" on the immune system, allowing T-cells to attack tumor cells.

Example: Pembrolizumab showed a 5-year overall survival rate of 34% in advanced melanoma patients (KEYNOTE-006 study).

Challenges: Autoimmune side effects, delayed responses, and non-responders.

CAR-T Cell Therapy Chimeric Antigen Receptor (CAR)-T cells are genetically engineered from a patient's T-cells to target specific cancer antigens. Approved for leukemias and lymphomas, CAR-T therapies like tisagenlecleucel and axicabtagene ciloleucel have shown durable remissions.

Limitations: Toxicities such as cytokine release syndrome (CRS) and neurotoxicity, high cost, and limited efficacy in solid tumors.

Cancer Vaccines & Oncolytic Viruses

Therapeutic vaccines aim to stimulate an immune response against tumor-specific antigens. Although still largely experimental, oncolytic viruses (e.g., T-VEC for melanoma) show promise in boosting anti-tumor immunity. Targeted

Therapies

Targeted therapies act on specific molecular pathways essential for tumor growth and survival.

Tyrosine Kinase Inhibitors (TKIs)

Drugs such as imatinib (CML), erlotinib (NSCLC), and sunitinib (RCC) inhibit aberrant kinase signaling, leading to reduced tumor cell proliferation.

Monoclonal Antibodies

Trastuzumab for HER2+ breast cancer and rituximab for CD20+ lymphomas are widely used antibody-based therapies that improve survival while minimizing collateral damage to normal cells.

Resistance Mechanisms

Despite initial responses, resistance to targeted therapies is common. Mechanisms include secondary mutations, alternative signaling pathway activation, and tumor heterogeneity. Combination therapies are being explored to overcome resistance.

Personalized and Precision Oncology

The sequencing of the human genome and advancements in next-generation sequencing (NGS) have transformed cancer into a disease of genomic alterations. Tumor profiling guides the use of specific agents in "basket trials" where patients are matched with therapies based on molecular markers.

Example: The NCI-MATCH trial matches patients to drugs targeting their tumor-specific mutations, regardless of cancer type.

Artificial Intelligence (AI) in Oncology

AI and machine learning algorithms are being integrated into imaging, diagnosis, drug discovery, and treatment planning. Deep learning aids in early detection (e.g., breast and lung cancer). AI tools analyze large genomic datasets to identify actionable mutations.

Challenges include data privacy, algorithm bias, and clinical validation.

Emerging Technologies

Nanomedicine

Nanoparticles can deliver chemotherapy directly to tumors, improving efficacy while reducing toxicity. Gene Editing CRISPR-Cas9 has been explored in modifying immune cells or correcting mutations, though ethical concerns and safety issues remain.

Liquid Biopsies

Non-invasive detection of circulating tumor DNA (ctDNA) allows real-time monitoring of treatment response and early detection of recurrence.

Socioeconomic and Ethical Considerations

Despite their promise, advanced cancer therapies are costly, raising concerns about access and equity. In low- and middle-income countries (LMICs), infrastructure and trained personnel are often lacking. Ethical issues include informed consent, potential misuse of genetic data, and disparities in clinical trial representation.

Challenges and Future Directions Toxicity management: Need for improved protocols to handle irAEs and CRS. Accessibility: Scaling manufacturing and reducing costs for global use. Standardization: Harmonizing diagnostic tests and treatment guidelines. Global collaboration: Building international cancer registries and sharing data to accelerate progress.

Conclusion

Cancer treatment technologies have evolved from broad-spectrum approaches to highly targeted, personalized interventions. Immunotherapy, precision medicine, and AI are reshaping the future of oncology. However, the full potential of these technologies can only be realized through equitable access, sustainable implementation, and ongoing innovation.

Reference

- 1.Sharma P, Allison JP (2015). Immune checkpoint targeting in cancer therapy. *Cell*, 161: 205–214.
- 2.Maude SL (2014) Tisagenlecleucel in B-cell leukemia. *New England Journal of Medicine*, 371: 1507–1517.
- 3.Mok TS (2009) Gefitinib or carboplatin-paclitaxel in pulmonary adenocarcinoma. *NEJM* 361: 947–957.
- 4.Swanton C (2012) Intratumor heterogeneity and evolution. *Cell* 151: 1149–1157.
- 5.The Cancer Genome Atlas Network. (2012). Comprehensive molecular portraits of human breast tumors *Nature*, 490: 61–70.
- 6.Topol EJ (2019) High-performance medicine: the convergence of human and artificial intelligence. *Nature Medicine*, 25: 44–56.
- 7.Jain RK, Stylianopoulos T (2010) Delivering nanomedicine to solid tumors. *Nature Reviews Clinical Oncology* 7: 653–664.