



# **Role of Endogenous Serotonin Replica Mediated Through $\beta$ -Catenin/Wnt Signaling in Lung Cancer Prevention and Prognosis - an *in-vitro* Study in A549 Cancer Cell Lines**

**M. Rishikesan<sup>a</sup>, Lavanya Prathap<sup>a†</sup>, Selvaraj Jayaraman<sup>b†</sup> and S. Preetha<sup>c†</sup>**

<sup>a</sup> *Department of Anatomy, Saveetha Dental College and Hospitals, Saveetha Institute of Medical and Technical Sciences, Saveetha University, Chennai – 600077, India.*

<sup>b</sup> *Department of Biochemistry, Saveetha Dental College and Hospitals, Saveetha Institute of Medical and Technical Sciences, Saveetha University, Chennai, India.*

<sup>c</sup> *Department of Physiology, Saveetha Dental College and Hospitals, Saveetha Institute of Medical and Technical Sciences, Chennai, India.*

## **Authors' contributions**

*This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.*

## **Article Information**

DOI: 10.9734/JPRI/2021/v33i60B35052

## **Open Peer Review History:**

This journal follows the Advanced Open Peer Review policy. Identity of the Reviewers, Editor(s) and additional Reviewers, peer review comments, different versions of the manuscript, comments of the editors, etc are available here: <https://www.sdiarticle5.com/review-history/81952>

**Original Research Article**

**Received 21 October 2021**  
**Accepted 26 December 2021**  
**Published 28 December 2021**

## **ABSTRACT**

**Background:** Lung cancer is still the most common cause of carcinoma-related death in the globe. Non-pharmacological treatments such as physical activity and exercise have been shown to improve quality of life and provide better results in lung cancer patients. Lung cancer patients usually lack adequate amounts of physical activity and exercise, both of which can improve quality of life.

**Aim:** To analyse Chemotherapeutic potential of endogenous serotonin replica mediated through  $\beta$ -catenin/Wnt signaling in lung tumor cell lines (A549).

**Methods and Materials:** The National Centre for Cell Sciences (NCCS), Pune, India, provided the human lung cancer cell line (A549). MTT assay was used to determine cell viability. Real-time PCR was used to examine  $\beta$ -Catenin mRNA, Wnt mRNA, and GSK mRNA gene expression. The significance of the acquired data was determined using one-way analysis of variance and Duncan's

<sup>†</sup>Associate Professor;

\*Corresponding author: E-mail: lavanyap.sdc@saveetha.com;

multiple range test with Graph Pad Prism version 5. Duncan's test was used to determine significance at the 0.05 level.

**Results:** The Results suggest that maximum inhibition of cell growth was at concentration (2-4 mM/ml) used in this study when compared to control. The cancer cells were significantly inhibited and it was found that there was notable reduction in GSK mRNA gene expression,  $\beta$ -Catenin, Wnt when compared to control at a dose of 2 mM/ml.

**Conclusion:** It may be concluded, based on the analyses' findings and the study's limitations, that the role of exercise induced endogenous serotonin may act as the regulator of wnt/ $\beta$ -catenin signaling in lung cancer cells. The exercise may help in maintaining the equilibrium of the gene expression by modeling Wnt/ $\beta$ -catenin signaling pathway and act as a protective factor in prevention.

*Keywords:  $\beta$ -Catenin; lung cancer; exercise; serotonin; Wnt signaling; innovative technique.*

## 1. INTRODUCTION

Lung carcinoma is still the most usual cause of tumor-related death in the globe. Cancer patients were urged to rest, heal, and conserve energy by avoiding strenuous physical exercise. Nonetheless, fresh evidence began to emerge in the late 1980s [1], supporting the idea that physical exercise, defined as any mobilization of the body induced by skeletal muscle and resulting in energy usage and exercise, may give relevant improvements in endogenous serotonin synthesis. The most usual cause of carcinoma - related death is lung cancer [2]. Human lung cancer cells (A549) are the most usual cause of cancer and death globally [3]. Serotonin is a neurotransmitter that generates nerve cells and transfers information between them. It can also be present in the digestive system. Tryptophan, an important amino acid, is used to make it [4]. Serotonin regulates our mood, happiness, and hormones throughout the body, allowing brain cells and other nerve systems to assist us in sleeping, eating, and digestion [5].

Non-pharmacological treatments such as physical activity and exercise have shown to enhance quality of life and provide better results in lung carcinoma patients. Patients with lung cancer usually lack adequate amounts of physical activity and exercise, both of which can improve quality of living. For those with lung tumor, there are no specific exercise advice or guidelines [6,7]. Cell viability MTT are functions to test cell viability and decreased percentage of cells denote the protective role of test compounds against cancer cells. Wnt are regulated cell growth and increase in gene expression favours cancer cell proliferation. Beta catenin aids cell-cell adhesion increase Proliferation of cancer cells, aided by changes in gene expression. Caspase 3 mRNA is an

apoptosis gene whose expression causes cancer cells to die. The experiences from our previous studies [8,9,10,9,11,12,13,14,12,14,15,16,17] have led us to focus on the current topic. Our researchers has elaborate stuff and research experience that has translate into good quality research papers [18–31,32,33–37]. Thus, the goal of the research is to analyze the chemotherapeutic role of endogenous serotonin replica in lung cancer prevention and prognosis in lung cancer cell line.

## 2. MATERIALS AND METHODS

This is an in vitro - experimental study that was carried out in a private dentistry college and hospital in Chennai. The institutional review board has given its approval to the study.

## 3. PROCEDURE

Sigma Chemical Pvt Ltd, USA, provided serotonin dimethyl sulfoxide (DMSO) and 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide (MTT). Gibco, Canada, provided trypsin-EDTA, foetal bovine serum (FBS), antibiotics-antimycotics, RPMI 1640 medium, and phosphate buffered saline (PBS). TAKARA provided the (5,5,6,6-tetrachloro-1,1,3,3-tetraethylbenzimidazolcarbocyanine iodide) and Real Time PCR kit (Meadowvale Blvd, Mississauga, ON L5N 5S2, Canada).

### 3.1 Cell lines and Cell Culture

The National Centre for Cell Sciences (NCCS), Pune, India, provided the human lung cancer cell line (A549). Cells were cultured at 37°C with 5% CO<sub>2</sub> in DMEM media, 10 percent foetal bovine serum, 100 U/ml penicillin, and 100 g/ml streptomycin in medium (Thermo Fisher Scientific, CA, USA).

### 3.2 Cell Viability by MTT Assay

The ability of mitochondrial reductases in liver cells to change MTT, a tetrazolium compound, into purple formazan crystals was measured using a modified colorimetric approach (Mosmann, 1983). A549 lung cancer cells (1 104/well) were treated for 48 hours to varied doses of serotonin (100, 200, and 400 M). After the treatment, each well was filled with 100 l of 0.5 mg/ml MTT solution and incubated for an hour at thirty seven degree Celsius. The crystals were diluted in 100 litres of dimethyl sulfoxide and let to sit in the dark for one hour. A Micro ELISA plate reader was used to measure the intensity of the colour generated at five seventy nanometer. The quantity of viable cells was calculated using the proportion of control cells grown in serum-free media. Cell viability in the control ground plate was reported to be 100% without any treatment. Percent cell viability = [A570 nm of treated cells/A570 nm of control cells] x 100 is the formula for measuring cell viability.

### 3.3 Gene expression analysis by Real Time-PCR

Each group's samples were immersed in 2 mL Trizol (Invitrogen, Carlsbad, CA, USA) for RNA extraction and maintained at 80°C until further processing. The manufacturer recommended using Superscript II reverse transcriptase (Invitrogen) to make cDNA from 2 g RNA in a 10 l sample volume. A total volume of 20 l was used for real-time PCR array analysis, which included 1 l cDNA, 10 l qPCR Master Mix 2x (Takara, USA), and 9 l ddH<sub>2</sub>O. Reactions were carried out using a Bio-Rad CFX96 Touch Real-Time PCR Detection System with universal thermal cycling conditions followed by a melting curve: @ 95°C for 5 seconds

Melting curves are obtained for all samples for quality control objectives. Melting curve analysis was used to determine the specificity of the amplification results for each primer pair. Using CFX Manager Version 2.1, the data were processed through the comparative CT approach, and the fold change was determined using the 2CT method provided by Schmittgen and Livak (2008). (Bio Rad, USA).

### 3.4 Statistical Analysis

The collected data were statistically analysed using one-way analysis of variance (ANOVA)

and Duncan's multiple range test with computer-based software (Graph Pad Prism version 5) and one-way analysis of variance (ANOVA) and Duncan's multiple range test to determine the significance of individual results among the control and experimental groups. At the 0.05 level, Duncan's test was performed to evaluate significance.

## 4. RESULTS

### 4.1 Effect of Serotonin on the Cell Viability

Cell viability of human lung cancer cells (A549) was determined using MTT assay administering the different doses of serotonin. It was found to exhibit inhibition of lung cancer cells by decreasing the percentage of viability of cancer cells in a dosage dependent manner when compared to control. It was found that maximum inhibition of cell growth was at concentration (2-4mM/ml) used in this study when in comparison to control [Fig. 1].

### 4.2 Effect of GSK m RNA Expression on the A549 Cancer Cells (Fold Change over Control)

GSK mRNA expression was measured in a dose-dependent fashion. At a dosage of 2mM/ml, the cancer cells were severely inhibited, and there was a considerable drop in GSK mRNA expression when compared to control. Furthermore, at a level of 4mM/ml, there was a substantial reduction in GSK mRNA expression when compared to control. Thus the decrease in gene expression was in dose dependent manner [Fig. 2].

### 4.3 Effect of $\beta$ -Catenin m RNA Expression on the A549 Cancer Cells (Fold Change over Control)

The mRNA expression of  $\beta$ -Catenin was assessed in a dose dependent manner. The cancer cells were significantly inhibited and it was found that there was significant decrease in mRNA expression of  $\beta$ -Catenin when compared to control at a dose of 2mM/ml. Further there was significant decrease in m RNA expression of  $\beta$ -Catenin when compared to control at a dose of 4mM/ml. Thus the decrease in gene expression was in dose dependent manner [Fig. 3].

#### 4.4 Effect of Wnt m RNA Expression on the A549 Cancer Cells (Fold Change over Control)

The mRNA gene expression of Wnt was assessed in a dose dependent manner. The cancer cells were significantly inhibited and it

was found that there was significant decrease in mRNA expression of Wnt when compared to control at a dose of 2mM/ml. Further there was significant decrease in mRNA expression of Wnt when in comparison to control at a dose of 4mM/ml. Thus the decrease in gene expression was in dose dependent manner [Fig. 4].

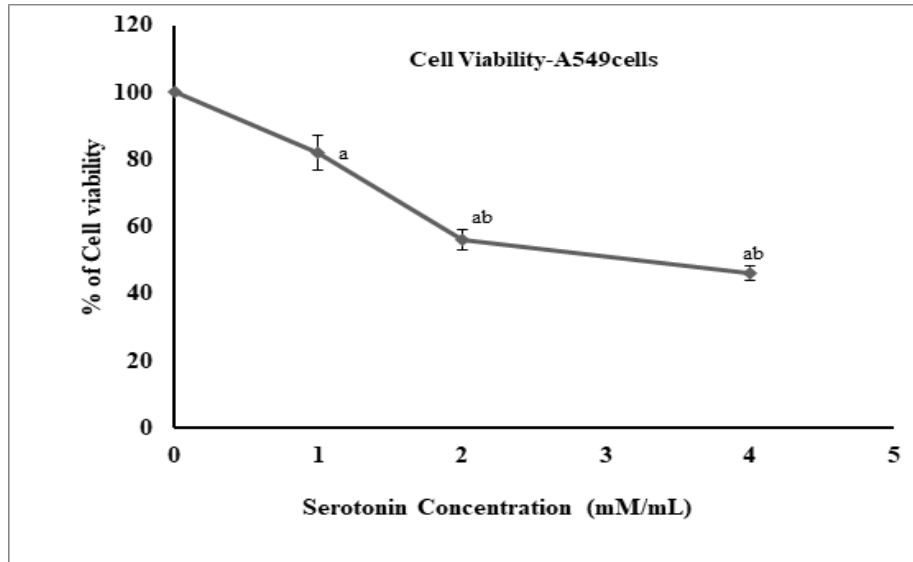


Fig. 1. Effect of serotonin on cell viability in human A549 cells. X axis represents serotonin concentration and Y axis represents % of cell viability. a-compared with untreated control cells, b-compared with 1mM treated A549 cells. Statistically Significant difference is observed in comparison with control in dose dependent manner with  $p < 0.05$

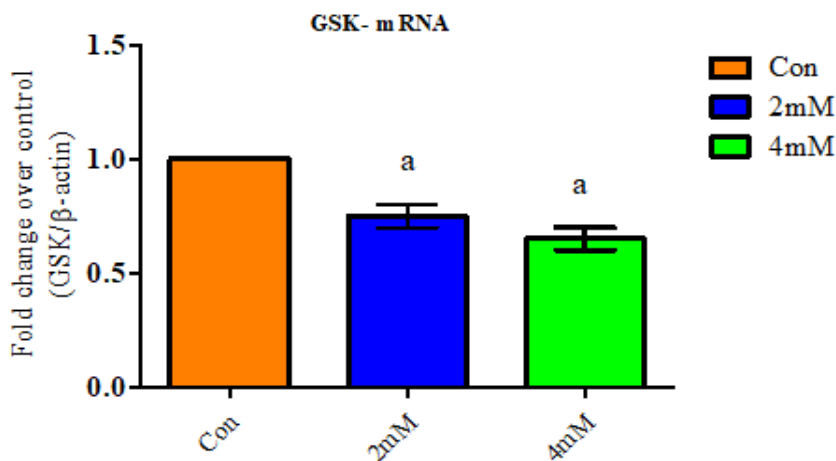
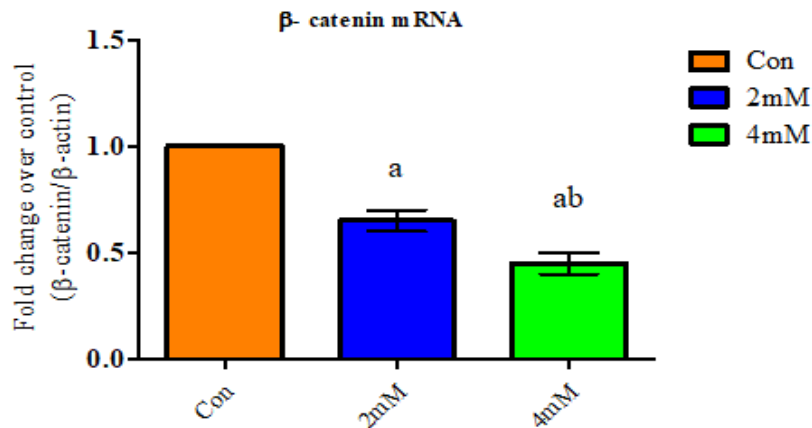
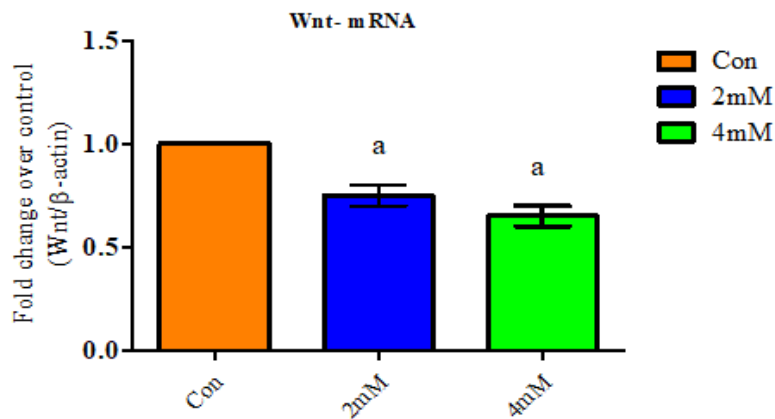


Fig. 2. Effect of serotonin on GSK mRNA expression in A549 cells. X axis represents serotonin concentration, Y axis represents fold change over control. Orange colour represents control, blue colour represents 2mM, green colour represents 4mM. Statistically Significant difference is observed in comparison with control in dose dependent manner with  $p < 0.05$



**Fig. 3** Effect of serotonin on  $\beta$ -catenin mRNA expression in A549 cells. X axis represents serotonin concentration, Y axis represents fold change over control. Orange colour represents concentration, blue colour represents 2mM, green colour represents 4mM. A-compared with untreated control cells. B-compared with 2mM serotonin treated cells. Statistically significant difference is observed in comparison with control in dose dependent manner with  $p < 0.05$



**Fig. 4.** Effect of serotonin on Wnt m RNA expression in A549 cells. X axis represents serotonin concentration, Y axis represents fold change over control. Orange colour represents concentration, blue colour represents 2mM, green colour represents 4mM. Statistically significant difference is observed in comparison with control in dose dependent manner with  $p < 0.05$

## 5. DISCUSSION

The study results may serve as supporting evidence to the context that exercise induced endogenous serotonin may act as a proactive compound against lung cancer cell progression. Understanding these types of interaction was used to design more selective and effective inhibitors. From this study, we confirmed that serotonin might act as a regulator for Wnt/beta catenin signaling pathway in lung carcinoma. The

function of beta catenin is to aid cell to cell adhesion and increases the survival of cancer cells. Serotonin that is secreted endogenously as a result of chronic exercise practice may aid in regulating the m RNA gene expression of Beta catenin by reducing its expression in cancer cells there by reduces the cancer cell survival [Fig. 1,2,3,4].

As the function of WNT is to regulate cell growth, from that concentration level of serotonin

increases level by level, It will reduce beta catenin mRNA gene expression in cancer cells when compared to that signalling Secreted wnt proteins [38] bind to a class of seven pass transmembrane receptors generated by the frizzled genes, causing the dishevelled protein to be phosphorylated, preventing glycogen synthase kinase from phosphorylating essential substrate.

Through its association with axin. Catherine L Granger et al in the year 2017 announced that however we underscore the significance of actual exercise in different clinical conditions the proof isn't in any case changed into the clinical practice because of a few boundaries. The author tended to the patient-level elements like stationary way of life, natural variables to be considered to distinguish individualized exercise remedy that can help in the regulation of cellular breakdown in the lungs [39].

These results of the various studies emphasize the importance of the dosage of exercise in regulating the apoptotic signaling pathway. Vigorous exercise induces oxidative stress which in turn may attenuate the upregulation of GSK [40], whereas moderate exercise maintains the oxidant and antioxidant level in equilibrium which may down regulate the GSK gene expression [41]. The outcome of the present study evidence the dose-dependent response of apoptotic signaling pathway on the induction of serotonin. The limits of the study includes less sample size and in future the study can be carried out with more cell interaction in human models as a large scale study to make the context evident.

## 6. CONCLUSION

Within the constraints of the study, it may be inferred that exercise-induced endogenous serotonin may act as a regulator of wnt/-catenin signalling in lung cancer cells based on the results of the investigation. The exercise may help in maintaining the equilibrium of the gene expression by modeling Wnt/ $\beta$ -catenin signaling pathway and act as a protective factor in prevention.

## DISCLAIMER

The products used for this research are commonly and predominantly use products in our area of research and country. There is absolutely no conflict of interest between the authors and producers of the products because we do not

intend to use these products as an avenue for any litigation but for the advancement of knowledge. Also, the research was not funded by the producing company rather it was funded by personal efforts of the authors

## CONSENT

It is not applicable.

## ETHICAL APPROVAL

It is not applicable.

## ACKNOWLEDGEMENT

We thank Saveetha Dental College for their support in successful completion of the study.

## SOURCE OF FUNDING

The present study was supported by the following agencies

- Saveetha Dental College,
- Saveetha Institute of Medical and Technical Science,
- Saveetha University
- Balakrishna Nursery and Primary School, Kattupakkam

## COMPETING INTERESTS

Authors have declared that no competing interests exist.

## REFERENCES

1. Winningham ML, MacVicar MG, Burke CA. Exercise for Cancer Patients: Guidelines and Precautions. *Phys Sportsmed.* 1986;14(10):125–34.
2. Ferlay J, Colombet M, Soerjomataram I, Dyba T, Randi G, Bettio M et al. Cancer incidence and mortality patterns in Europe: Estimates for 40 countries and 25 major cancers in 2018. *Eur J Cancer.* 2018;103:356–87.
3. Holmes MD, Chen WY, Feskanich D, Kroenke CH, Colditz GA. Physical activity and survival after breast cancer diagnosis. *Jama.* 2005;293(20):2479–86.
4. Haan J. Faculty Opinions recommendation of Triptans, serotonin agonists, and serotonin syndrome (serotonin toxicity): A review [Internet]. Faculty Opinions – Post-Publication Peer Review of the Biomedical Literature; 2010.

- Available:<http://dx.doi.org/10.3410/f.2377956.2007054>
5. Xie H, Krishnan S. Abstract 1327: Gold nanorods based hypoxia-targeted photothermal cancer therapy [Internet]. *Cancer Chemistry*; 2016. Available:<http://dx.doi.org/10.1158/1538-7445.am2016-1327>
  6. Edbrooke L, Aranda S, Granger CL, McDonald CF, Krishnasamy M, Mileskin L et al. Benefits of home-based multidisciplinary exercise and supportive care in inoperable non-small cell lung cancer - protocol for a phase II randomised controlled trial. *BMC Cancer*. 2017;17(1):663.
  7. Mc Credie M, Paul C, Skegg DCG, Williams S. Reproductive factors and breast cancer in New Zealand [Internet]. *International Journal of Cancer*. 1998;76:182–8. Available:[http://dx.doi.org/10.1002/\(sici\)1097-0215\(19980413\)76:2<182::aid-ijc3>3.0.co;2-t](http://dx.doi.org/10.1002/(sici)1097-0215(19980413)76:2<182::aid-ijc3>3.0.co;2-t)
  8. Shruthi M, Preetha S. Effect of simple tongue exercises in habitual snorers [Internet]. *Research Journal of Pharmacy and Technology*. 2018;11:3614. Available:<http://dx.doi.org/10.5958/0974-360x.2018.00665.0>
  9. Preetha S, Packyanathan J. Comparison of the effect of Yoga, Zumba and Aerobics in controlling blood pressure in the Indian population [Internet]. *Journal of Family Medicine and Primary Care*. 2020;9:547. Available:[http://dx.doi.org/10.4103/jfmpc.jfmpc\\_607\\_19](http://dx.doi.org/10.4103/jfmpc.jfmpc_607_19)
  10. J SK, Saveetha Dental College and Hospitals, Road PH, Chennai, Tamilnadu, Preetha S, et al. Effect of aerobics exercise and yoga on blood pressure in hypertensives [Internet]. *International Journal of Current Advanced Research*. 2017;6:3124–6. Available:<http://dx.doi.org/10.24327/ijcar.2017.3126.0200>
  11. Prathap L, Suganthirababu P, Ganesan D. Fluctuating asymmetry of dermatoglyphics and dna polymorphism in breast cancer population [Internet]., *Indian Journal of Public Health Research and Development*. 2019;10:3574. Available:<http://dx.doi.org/10.5958/0976-5506.2019.04141.x>
  12. Lavanya J, Prathap S, Alagesan J. Digital and palmar dermal ridge patterns in population with breast carcinoma. *Biomedicine*. 2014;34(3):315–21.
  13. Prathap L, Jagadeesan V. Association of quantitative and qualitative dermatoglyphic variable and DNA polymorphism in female breast cancer population. *Online J Health* [Internet]; 2017. Available:[https://www.researchgate.net/profile/Prathap\\_Suganthirababu/publication/321606278\\_Association\\_of\\_Quantitative\\_and\\_Qualitative\\_Dermatoglyphic\\_Variable\\_and\\_DNA\\_Polymorphism\\_in\\_Female\\_Breast\\_Cancer\\_Population/links/5a28c8f1a6fdcc8e8671c0cd/Association-of-Quantitative-and-Qualitative-Dermatoglyphic-Variable-and-DNA-Polymorphism-in-Female-Breast-Cancer-Population.pdf](https://www.researchgate.net/profile/Prathap_Suganthirababu/publication/321606278_Association_of_Quantitative_and_Qualitative_Dermatoglyphic_Variable_and_DNA_Polymorphism_in_Female_Breast_Cancer_Population/links/5a28c8f1a6fdcc8e8671c0cd/Association-of-Quantitative-and-Qualitative-Dermatoglyphic-Variable-and-DNA-Polymorphism-in-Female-Breast-Cancer-Population.pdf)
  14. Lavanya J, Kumar VJ, Sudhakar N, Prathap S. Analysis of DNA repair genetic polymorphism in breast cancer population. *Int J Pharma Bio Sci* [Internet]; 2015. Available:[https://scholar.google.ca/scholar?cluster=8949053652564257518&hl=en&as\\_sdt=0,5&scioldt=0,5](https://scholar.google.ca/scholar?cluster=8949053652564257518&hl=en&as_sdt=0,5&scioldt=0,5)
  15. Prathap L, Suganthirababu P. Estrogen Exposure and its Influence in DNA Repair Genetic Variants in Breast Cancer Population [Internet]. *Biomedical and Pharmacology Journal*. 2020;13:1321–7. Available:<http://dx.doi.org/10.13005/bpj/2001>
  16. Ravikumar H, Prathap L, Preetha S. Analysis of palmar atd angle in population with malocclusion. 2020;1174–82.
  17. Prathap L. Interplay of oxidative stress and lipoproteins in breast carcinoma initiation, promotion and progression -a systematic review. *PalArch's Journal of Archaeology of Egypt/ Egyptology* [Internet]; 2021. [Cited 2021 Mar 9];17(7). Available:<http://dx.doi.org/>
  18. Sekar D, Lakshmanan G, Mani P, Biruntha M. Methylation-dependent circulating micro RNA 510 in preeclampsia patients. *Hypertens Res*. 2019;42(10):1647–8.
  19. Princeton B, Santhakumar P, Prathap L. Awareness on preventive measures taken by health care professionals attending COVID-19 patients among dental students. *Eur J Dent*. 2020;14(S 01):S105–9.
  20. Logeshwari R, Rama Parvathy L. Generating logistic chaotic sequence using geometric pattern to decompose and recombine the pixel values. *Multimed Tools Appl*. 2020;79(31-32):22375–88.
  21. Johnson J, Lakshmanan G, M B, R M V, Kalimuthu K, Sekar D. Computational identification of MiRNA-7110 from

- pulmonary arterial hypertension (PAH) ESTs: A new micro RNA that links diabetes and PAH. *Hypertens Res.* 2020;43(4):360–2.
22. Paramasivam A, Priyadharsini JV, Raghunandhakumar S, Elumalai P. A novel COVID-19 and its effects on cardiovascular disease. *Hypertens Res.* 2020;43(7):729–30.
  23. Pujari GRS, Subramanian V, Rao SR. Effects of *Celastrus paniculatus* Willd. and *Sida cordifolia* Linn. in Kainic Acid Induced Hippocampus Damage in Rats. *Ind J Pharm Educ.* 2019;53(3):537–44.
  24. Rajkumar KV, Lakshmanan G, Sekar D. Identification of miR-802-5p and its involvement in type 2 diabetes mellitus. *World J Diabetes.* 2020;11(12):567–71.
  25. Ravisankar R, Jayaprakash P, Eswaran P, Mohanraj K, Vinitha G, Pichumani M. Synthesis, growth, optical and third-order nonlinear optical properties of glycine sodium nitrate single crystal for photonic device applications. *J Mater Sci: Mater Electron.* 2020;31(20):17320–31.
  26. Wu S, Rajeshkumar S, Madasamy M, Mahendran V. Green synthesis of copper nanoparticles using *Cissus vitiginea* and its antioxidant and antibacterial activity against urinary tract infection pathogens. *Artif Cells Nanomed Biotechnol.* 2020;48(1):1153–8.
  27. Vikneshan M, Saravanakumar R, Mangaiyarkarasi R, Rajeshkumar S, Samuel SR, Suganya M et al. Algal biomass as a source for novel oral nano-antimicrobial agent. *Saudi J Biol Sci.* 2020;27(12):3753–8.
  28. Alharbi KS, Fuloria NK, Fuloria S, Rahman SB, Al-Malki WH, Javed Shaikh MA et al. Nuclear factor-kappa B and its role in inflammatory lung disease. *Chem Biol Interact.* 2021;345:109568.
  29. Rao SK, Kalai Priya A, Manjunath Kamath S, Karthick P, Renganathan B, Anuraj S et al. Unequivocal evidence of enhanced room temperature sensing properties of clad modified Nd doped mullite Bi<sub>2</sub>Fe<sub>4</sub>O<sub>9</sub> in fiber optic gas sensor [Internet]. *Journal of Alloys and Compounds.* 2020;838:155603. Available:<http://dx.doi.org/10.1016/j.jallcom.2020.155603>
  30. Bhavikatti SK, Karobari MI, Zainuddin SLA, Marya A, Nadaf SJ, Sawant VJ et al. Investigating the Antioxidant and Cytocompatibility of *Mimusops elengi* Linn Extract over Human Gingival Fibroblast Cells. *Int J Environ Res Public Health* [Internet]. 2021;18(13). Available:<http://dx.doi.org/10.3390/ijerph18137162>
  31. Marya A, Karobari MI, Selvaraj S, Adil AH, Assiry AA, Rabaan AA et al. Risk Perception of SARS-CoV-2 Infection and Implementation of Various Protective Measures by Dentists Across Various Countries. *Int J Environ Res Public Health* [Internet]. 2021;18(11). Available:<http://dx.doi.org/10.3390/ijerph18115848>
  32. Barma MD, Muthupandiyan I, Samuel SR, Amaechi BT. Inhibition of *Streptococcus mutans*, antioxidant property and cytotoxicity of novel nano-zinc oxide varnish. *Arch Oral Biol.* 2021;126:105132.
  33. Vijayashree Priyadharsini J. In silico validation of the non-antibiotic drugs acetaminophen and ibuprofen as antibacterial agents against red complex pathogens. *J Periodontol.* 2019;90(12):1441–8.
  34. Priyadharsini JV, Vijayashree Priyadharsini J, Smiline Girija AS, Paramasivam A. In silico analysis of virulence genes in an emerging dental pathogen *A. baumannii* and related species [Internet]. *Archives of Oral Biology.* 2018;94:93–8. Available:<http://dx.doi.org/10.1016/j.archorlabio.2018.07.001>
  35. Uma Maheswari TN, Nivedhitha MS, Ramani P. Expression profile of salivary micro RNA-21 and 31 in oral potentially malignant disorders. *Braz Oral Res.* 2020;34:e002.
  36. Gudipaneni RK, Alam MK, Patil SR, Karobari MI. Measurement of the Maximum occlusal bite force and its relation to the caries spectrum of first permanent molars in early permanent dentition. *J Clin Pediatr Dent.* 2020;44(6):423–8.
  37. Chaturvedula BB, Muthukrishnan A, Bhuvanaraghan A, Sandler J, Thiruvengkatachari B. *Dens invaginatus*: A review and orthodontic implications. *Br Dent J.* 2021;230(6):345–50.
  38. Nusse R. Abstract IA01: Wnt signaling stem cell control and cancer [Internet]. *Signaling Pathways: Wnt.* 2016. Available:<http://dx.doi.org/10.1158/1557-3125.devbiolca15-ia01>
  39. Granger CL, Connolly B, Denehy L, Hart N, Antippa P, Lin K-Y, et al. Understanding



- factors influencing physical activity and exercise in lung cancer: A systematic review. *Support Care Cancer*. 2017;25(3):983–99.
40. Institute NC, National Cancer Institute. MAGE-A3-specific Immunotherapeutic GSK 2132231A [Internet]. Definitions; 2020. Available:<http://dx.doi.org/10.32388/ptadun>
41. Ahmed T. GSK Signs Cancer Deal with SuperGen [Internet]. Vol. 2009, PharmaDeals Review; 2009. Available:<http://dx.doi.org/10.3833/pdr.v2009i10.1263>

---

© 2021 Rishikesan et al.; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

*Peer-review history:*

*The peer review history for this paper can be accessed here:*  
<https://www.sdiarticle5.com/review-history/81952>