

NSAIDs in Cancer Promotion: An Authentic Role

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The malignancy state is studied with the help of inflammatory reaction of non-steroidal anti-inflammatory drugs and its prevention is studied. The non-steroidal anti-inflammatory drugs (NSAIDs) are usually given by physicians in many clinical conditions for the symptomatic treatment of pain and fever. They have anti-inflammatory properties, and these drugs have been investigated for their anticancer effects in various studies. This is because chronic inflammation has a wide connection to carcinogenesis. Anti-inflammatory drugs are also used in cancer treatment and prevention. In the past few years, research has been made that NSAIDs may lower the risk of certain types of cancer. However, there is also research that proves the contrary. NSAIDs are also known for many side effects, including some life-threatening ones. The use of NSAIDs which includes the risk of gastric cancer and aspirin has a relation between themselves which has not been well studied. This review has been performed in a systematic way and used the analysis of published information to know the association between use of this class of drugs and the risk of gastric cancer. This review will give the relation between the role of NSAIDs in cancer prevention and cancer promotion and chronic inflammation. Non-Steroidal Anti-inflammatory drugs (NSAIDs) are the class of drugs which help in the pain, inflammation (swallowing) and are also useful in fever. NSAIDs are one of the most used drugs for pain and inflammation because these drugs have antipyretic, analgesic, and anti-inflammatory properties. They are also used as an over-the-counter medication (OTC drug) in many of the cases. Side effects depend on the specified drug but most of the time it is dependent on the risk of gastrointestinal ulcers, heart attack and Renal disease. NSAIDs have fever relieving effect which has been well documented since the discovery and they have proven useful over the years to decrease pain and inflammatory conditions. It is particularly useful in postsurgical pain, acute and chronic orthopaedic pain. NSAIDs are aspirin, ibuprofen, and naproxen, and all are available over the counter (OTC) in many countries.

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Paracetamol is generally not classified in an NSAID because it has very less anti-inflammatory activity. It treats pain mainly by blocking COX-2 and inhibiting endocannabinoid reuptake almost exclusively within the brain, but not in the other parts of the body. NSAIDs are of two types that are non-selective and COX-Selector. Most of the NSAIDs are non-selective and COX-1 and COX-2 both activities have been inhibited. These NSAIDs inhibit platelet aggregation and increase the risk of gastrointestinal ulcers while reducing inflammation. Lastly, NSAIDs are associated with other non-cancerous, serious complications such as myocardial infarction, gastrointestinal bleeding, and renal failure. This is demonstrated that NSAIDs in the cancer treatment firstly need to be carefully observed and the prevention and the balance should be looked out for in the risk assessment and the advantages of the drug in relation to the findings, not fully evaluated the mode of action and the serious chronic damage to life.