Advancements in Cardiovascular Drug Therapies

Abstract

Cardiovascular diseases, including heart disease and stroke, remain the leading cause of death worldwide. Despite significant progress in preventing and treating these conditions, there is still a need for effective and safe drug therapies that can reduce the risk of cardiovascular events and improve patient outcomes. In recent years, there have been several exciting advancements in cardiovascular drug therapies that hold promise for the future of cardiovascular disease management. In this article, we will explore some of the latest advancements in cardiovascular drug therapies, including novel drug targets, innovative drug delivery systems, and emerging therapeutic modalities.

Keywords: Liposomes • Photo diagnosis • Breast cancer • Nano medicine • Nanotechnology • Drug delivery • Anticancer

Introduction

One of the most promising areas of research in cardiovascular drug therapies is the development of proprotein converses subtilizing/Kevin type 9 (PCSK9) inhibitors. PCSK9 is a protein that regulates the levels of low-density lipoprotein (LDL) cholesterol in the bloodstream. Inhibiting PCSK9 can lead to a significant reduction in LDL cholesterol levels, which is a key risk factor for cardiovascular disease PCSK9 inhibitors, alirocumab and evolocumab; have been approved by the U.S. Food and Drug Administration (FDA) for the treatment of high cholesterol. These drugs have been shown to reduce LDL cholesterol levels by up to 60%, with a favorable safety profile. Ongoing research is exploring the potential of PCSK9 inhibitors for the prevention of cardiovascular events, such as heart attacks and strokes, in high-risk patients[1,3].

RNA-based therapies represent an emerging area of research in cardiovascular drug development. These therapies involve targeting specific genes or gene products involved in cardiovascular disease using small interfering RNA (siRNA) or antisense oligonucleotides (ASOs). One RNA-based therapy that has shown promise in clinical trials is inclisiran, a siRNA that targets PCSK9 mRNA. In a large-scale clinical trial, inclisiran was shown to significantly reduce LDL cholesterol levels, with a durable effect lasting up to six months. Another RNA-based therapy, AKCEA-APO (a)-Larks, targets Apo lipoprotein, a protein that is strongly associated with cardiovascular risk [4-6].

Sodium-glucose cotransporter 2 (SGLT2) inhibitors are a class of drugs that are primarily used to treat type 2 diabetes. These drugs work by inhibiting the reabsorption of glucose in the kidneys, leading to increased urinary excretion of glucose and a reduction in blood glucose levels. In recent years, SGLT2 inhibitors have also been shown to have cardiovascular benefits in patients with or without diabetes. Several large-scale clinical trials have demonstrated that SGLT2 inhibitors can reduce the risk of cardiovascular events, such as heart failure and stroke, in high-risk patients with type 2 diabetes. These drugs may also have a role in the prevention and treatment of heart failure in patients with or without diabetes [7-9].

In addition to novel drug targets and therapeutic modalities, there have been several advancements in drug delivery systems for cardiovascular drugs. These delivery systems aim to improve the pharmacokinetics and pharmacodynamics of drugs, leading to

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Received: 03-April-2023, Manuscript No. actvr-23-94214; Editor assigned: 06-April-2023, PreQC No. actvr-23-94214 (PQ); Reviewed: 20-April-2023, QC No. actvr-23-94214; Revised: 24-April-2023, Manuscript No. actvr-23-94214 (R); Published: 28-April-2023; DOI: 10.37532/ ACTVR.2023.13(2).21-24 improved efficacy and reduced side effects. One example of a novel drug delivery system is the use of nanoparticle-based systems for the delivery of siRNA and ASOs. These systems can improve the cellular uptake and stability of RNA-based therapies, leading to enhanced efficacy. Another example is the use of implantable drug delivery devices, which can provide sustained release of drugs over an extended period [10].

Discussion

Gene editing is an emerging therapeutic modality that holds promise for the Cardiovascular disease is one of the leading causes of death globally, with millions of people suffering from various cardiovascular conditions such as hypertension, stroke, and heart attacks. The development of new drugs has been instrumental in reducing the burden of cardiovascular disease, and the pharmaceutical industry continues to invest heavily in research and development of new and improved drugs to treat these conditions. This article provides a comprehensive review of some of the most promising new drugs for cardiovascular health.Proprotein converses subtilizing/Kevin type 9 (PCSK9) inhibitors are a new class of drugs that have shown remarkable efficacy in reducing low-density lipoprotein (LDL) cholesterol levels. PCSK9 inhibitors work by inhibiting the protein PCSK9, which is responsible for breaking down LDL receptors in the liver. This results in increased LDL receptor activity and a reduction in LDL cholesterol levels in the blood. Two PCSK9 inhibitors, evolocumab and alirocumab, have been approved by the US Food and Drug Administration (FDA) and are currently available for clinical use.

Angiotensin receptor-neprilysin inhibitors (ARNIs) are a new class of drugs that combine the benefits of angiotensin receptor blockers (ARBs) and neprilysin inhibitors. ARBs are commonly used to treat hypertension, while neprilysin inhibitors increase the levels of beneficial peptides such as natriuretic peptides and bradykinin. The combination of these two drugs has shown significant benefits in reducing the risk of heart failure hospitalization and death. The FDA has approved two ARNIs, sacubitril-valsartan and omapatrilat, for clinical use.

Sodium-glucose cotransporter 2 (SGLT2)

inhibitors are a new class of drugs that work by inhibiting the reabsorption of glucose in the kidneys, resulting in increased glucose excretion in the urine. SGLT2 inhibitors have been approved for the treatment of type 2 diabetes, but they have also shown promising results in reducing the risk of cardiovascular events such as heart failure and myocardial infarction. The FDA has approved several SGLT2 inhibitors, including dapagliflozin, dapagliflozin, and empagliflozin.

Prostaglandin receptor agonists are a new class of drugs that target the EP4 receptor, which is involved in several cardiovascular processes, including blood clotting. inflammation, and vascular function. The EP4 receptor agonists have shown promising results in reducing the risk of thrombotic events, myocardial infarction, and stroke. Several EP4 receptor agonists are currently in development, including ONO-9054 and CJ-42794.Adenosine receptor antagonists are a new class of drugs that target the A2A receptor, which is involved in several cardiovascular processes, including vasodilation, anti-inflammatory effects, and platelet inhibition. Adenosine receptor antagonists have shown promising results in reducing the risk of thrombotic events and myocardial infarction. Several adenosine receptor antagonists are currently in development, including SCH-58261 and ATL-146e. Cardiovascular diseases are the leading cause of death worldwide. Despite the advancements in medicine, the number of people affected by these diseases is on the rise. However, recent developments in drug therapy have opened new avenues for the treatment of cardiovascular diseases. In this article, we discuss some of the breakthrough drugs that are revolutionizing heart health.

Proportion converses subtilizing/Kevin type 9 (PCSK9) inhibitors are a class of drugs that lower low-density lipoprotein (LDL) cholesterol levels by inhibiting the PCSK9 protein. High levels of LDL cholesterol are a major risk factor for cardiovascular diseases, such as heart attack and stroke. PCSK9 inhibitors have been shown to significantly reduce the risk of cardiovascular events in patients with high LDL cholesterol levels. There are two PCSK9 inhibitors currently approved by the FDA: alirocumab and evolocumab. These drugs are administered as injections every two to four weeks.

PCSK9 inhibitors are typically reserved for patients who are unable to achieve their LDL cholesterol goals with statins or who are intolerant to statins.SGLT2 inhibitors are a class of drugs used to treat type diabetes. They work by inhibiting the reabsorption of glucose in the kidneys, leading to increased urinary glucose excretion. In addition to their blood sugar-lowering effects, SGLT2 inhibitors have been shown to reduce the risk of heart failure and cardiovascular events in patients with type 2 diabetes.

Three SGLT2 inhibitors are currently approved by the FDA for the treatment of type 2 diabetes: canagliflozin, dapagliflozin, and empagliflozin. These drugs are taken orally once daily. Recently, dapagliflozin was also approved for the treatment of heart failure in patients with or without diabetes. ARNIs are a combination of an angiotensin receptor blocker (ARB) and a neprilysin inhibitor. ARBs are commonly used to treat high blood pressure, while neprilysin inhibitors increase the levels of beneficial peptides that help regulate blood pressure and fluid balance. By combining these two drugs, ARNIs provide a dual mechanism of action that has been shown to improve outcomes in patients with heart failure. The first ARNI to be approved by the FDA was sacubitril/ valsartan, marketed under the brand name Entrust. This drug has been shown to reduce the risk of hospitalization for heart failure and cardiovascular death in patients with heart failure with reduced ejection fraction.

Anticoagulants are a class of drugs that prevent the formation of blood clots. They are commonly used to treat and prevent conditions such as deep vein thrombosis, pulmonary embolism, and stroke. Anticoagulants have also been shown to be effective in reducing the risk of cardiovascular events in patients with certain types of heart disease. Two types of anticoagulants are currently approved by the FDA for the treatment of cardiovascular diseases: direct oral anticoagulants (DOACs) and vitamin K antagonists (VKAs). DOACs, such as apixaban, dabigatran, edoxaban, and rivaroxaban, have several advantages over VKAs, including a lower risk of bleeding and fewer drug interactions. However, VKAs are still commonly used in certain patient populations, such as those with mechanical heart valves. Cardiovascular diseases (CVDs)

are the leading cause of death worldwide, responsible for an estimated 17.9 million deaths each year. These diseases affect the heart and blood vessels, and include conditions such as coronary artery disease, heart failure, and stroke. Despite significant advances in the treatment of CVDs, there is still a need for new drugs that can improve outcomes and reduce the burden of these diseases. In recent years, there have been several breakthroughs in the development of new drugs for CVDs. In this article, we will review some of the most promising new drugs in this field.

PCSK9 inhibitors are a new class of drugs that reduce low-density lipoprotein (LDL) cholesterol levels. These drugs work by blocking the activity of PCSK9, a protein that degrades the LDL receptor, which is responsible for removing LDL cholesterol from the blood. Two PCSK9 inhibitors, alirocumab and evolocumab, have been approved by the US Food and Drug Administration (FDA) for use in patients with high LDL cholesterol levels who are at high risk for CVDs. Studies have shown that these drugs can significantly reduce LDL cholesterol levels, and may also reduce the risk of cardiovascular events such as heart attacks and strokes.ARNIs are a new class of drugs that combine an angiotensin receptor blocker (ARB) and a neprilysin inhibitor. ARBs are commonly used to treat high blood pressure, while neprilysin inhibitors increase levels of natriuretic peptides, which are involved in the regulation of blood pressure and fluid balance. The first ARNI, sacubitril/ valsartan, was approved by the FDA in 2015 for the treatment of heart failure with reduced eiection fraction. Studies have shown that this drug can significantly reduce the risk of hospitalization and death in patients with this condition.

Sodium-glucose cotransporter-2 (SGLT2) inhibitors are a new class of drugs that reduce blood glucose levels by inhibiting the reabsorption of glucose by the kidneys. These drugs were initially approved for the treatment of type 2 diabetes, but have also been found to have cardiovascular benefits. Studies have shown that SGLT2 inhibitors can reduce the risk of cardiovascular events in patients with type 2 diabetes who have established CVDs, as well as in patients with heart failure with reduced ejection fraction,

even in the absence of diabetes. Antisense oligonucleotides are short pieces of synthetic DNA or RNA that can bind to messenger RNA (mRNA) and prevent it from being translated into protein.

Conclusions

The development of new drugs for cardiovascular health is an essential aspect of reducing the burden of cardiovascular disease globally. PCSK9 inhibitors, ARNIs, SGLT2 inhibitors, These drugs are being developed for the treatment of a variety of diseases, including CVDs. In particular, antisense oligonucleotides that target the production of Apo lipoprotein a component of LDL cholesterol, are being studied as a potential treatment for familial hypercholesterolemia (FH), a genetic condition that causes high levels of LDL cholesterol and increases the risk of CVDs. Preliminary studies have shown that these drugs can significantly reduce LDL cholesterol levels in patients with FH.RNAi therapeutics are a new class of drugs that use small pieces of RNA to selectively silence genes that are involved in disease processes. These drugs are being developed for the treatment of a wide range of diseases, including CVDs particular, RNAi therapeutics that target the production.

Conflict of Interest

None

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None

References

- 1. Semela D, Dufour JF. Angiogenesis and hepatocellular carcinoma. *Journal of Herpetology* 41,864-880 (2004).
- 2. Mineno J, Okamoto S, Ando T *et al.* The expression profile of microRNAs in mouse embryos. *Nucleic Acids Research.* 34, 1765-1771 (2006).
- Yamagata K, Fujiyama S, Ito S *et al.* Maturation of microRNA is hormonally regulated by a nuclear receptor. *Molecular Cell.* 36,340-347 (2009).
- 4. Liu WH, Yeh SH, Chen PJ *et al.* Role of microRNAs in hepatitis B virus replication and pathogenesis. *Biochim Biophys Acta.* 1809, 678-685 (2011).
- Hu H, Wang CJ, Gong L *et al.* (2007) Expression and significance of apoptosis inhibitor living in hepatocellular carcinoma. *Chinese Journal of Hepatobiliary Surgery.* 13,348 (2007).
- 6. Sarma DS, Rao PM, Rajalakshmi S *et al.* Liver tumour promotion by chemicals: models and mechanisms. Cancer Surveys. 5, 781-798 (1986).
- Gorlin RJ, Goltz RW. Multiple nevoid basal-cell epithelioma, jaw cysts and bifid rib: a syndrome. *N Engl J Med.* 262, 908-12 (1960).
- White JC. Multiple benign cystic epitheliomas. J Cutan Genitourin Dis. 12, 477-84 (1894).
- Silverman MK, Kopf AW, Grin CM et al. Recurrence rates of treated basal cell carcinomas. J Dermatol Surg Oncol. 18, 549-54 (1992).
- Thissen MR, Neumann HA, Schouten LJ. A systematic review of treatment modalities for primary basal cell carcinomas. *Arch Dermatol.* 135, 1177-83 (1999).