

Therapeutic perspectives beyond the pathogenic properties of the microbes

Opinion

Microbes had been a problem and a challenge for the health care mainly due to the diseases they can cause, as well as the other negative impacts on economy and ecology related to their epidemiological aspects and both history and medicine have reported severe cases of illustrative examples.¹⁻⁶ With the development of sciences and technologies humans learned how to protect themselves from microbes and went further by starting to use microbes for their own benefits mainly in health care but also in other domains such as food production and biological researches. For instance, in food and beverage production we use some yeasts and bacteria for purposes such as fermentation and we use enzymes produced by genetically modified microorganisms in biological researches such as digestive enzymes used cell culture and restriction enzymes used in genetic researches. In the medical fields, the best examples remain the immunological applications including vaccines and antibodies productions with different examples that can be cited here in. Moreover, genetically modified bacteria are also used to produce active molecules such as insulin used to treat diabetes.

Modern applications became more sophisticated and more precise. Indeed, virus are used to introduce selected genes into cells to provide those cell with new properties such as producing a protein or modifying the cell physiology, this can be used in biology in developing animal models.¹¹⁻¹³

To test drugs for some human diseases including Alzheimer's disease.^{14,15} This method has been reported in literature as a promising therapeutic approach named "gene therapy" which consists in introducing a gene to a group of cell via a virus in order to treat or control a disease or a pathological situation.¹⁶⁻²⁰ It is also possible to introduce the virus *In Vitro* to a group of cells (for example stem cells) before we transplant those cell that would carry a gene(s) (From the viral infection) corresponding to the property we are willing to provide the cells with. Importantly, future advances may lead to completely new and innovative applications of the properties that microbes have. For instance, we can predict that the cytolytic properties of the virus may be used to kill the tumoral cells.²¹ We might use a virus specific to certain type of tumoral cells to treat cancerous. To "control" the virus replication and prevent the infection of the healthy cells by the virus, we may combine this virus injection with an anti-viral therapy by an exact calculation of both the virus dosage and the antiviral concentration. Of course, the routes of administration remain a key element and in this case we would propose a local injection of the virus and a systemic injection of the antiviral. Furthermore, the use of microbes as immune-stimulators remains a possibility as well.

These examples illustrate the possible therapeutic application of microbes that would allow us to move to a level in which we overcome the pathogenic properties toward a beneficial therapeutic usage especially with the advances in the related areas such as cell culture,²² genetic, pharmacology,^{13,14,23,24} natural^{15,23-26} or chemical products^{27,28} and microbiology within the context of a well-understanding of

Volume 1 Issue 5 - 2014

Abdelaziz Ghanemi

University of Chinese Academy of Sciences, China

Correspondence: Abdelaziz Ghanemi, Key Laboratory of Animal Models and Human Disease Mechanisms of Chinese Academy of Sciences & Yunnan Province, Kunming Institute of Zoology, Kunming, Yunnan 650223, China, Email ghnemiabdelaziz@hotmail.com

Received: December 19, 2014 | **Published:** December 24, 2014

diseases biochemical interactions and pathogenesis and cellular pathways.^{25,28-33}

Acknowledgments

Abdelaziz Ghanemi is the recipient of A 2013 CAS-TWAS President's Postgraduate Fellowship.

Conflicts of Interest

There is no conflict of interest.

Funding

None.

References

1. Parriott AM, Brown JM, Arah OA. Predischarge Postpartum methicillin Resistant *Staphylococcus aureus* Infection and Group B Streptococcus Carriage at the Individual and Hospital Levels. *Infect Dis Obstet Gynecol*. 2014;515646.
2. Matteelli A, Roggi A, Carvalho AC. Extensively drug-resistant tuberculosis: epidemiology and management. *Clin Epidemiol*. 2014;1(6): 111-118.
3. Gish R. Delta virus infection: epidemiology and initiatives to intercept it. *Gastroenterol Hepatol*. 2013;(N Y) 9(9):589-591.
4. Rosa RG, Schwarzbald AV, Dos Santos RP, et al. Vancomycin-Resistant Enterococcus faecium Bacteremia in a Tertiary Care Hospital: Epidemiology, Antimicrobial Susceptibility, and Outcome. *Biomed Res Int*. 2014;958469.
5. Ghebremichael M. The Syndromic versus Laboratory Diagnosis of Sexually Transmitted Infections in Resource-Limited Settings. *ISRN AIDS*. 2014;103452.
6. Edward C Oldfield IV, Edward C Oldfield III, et al. Clinical update for the diagnosis and treatment of infection. *World J Gastrointest Pharmacol Ther*. 2014;5(1):1-26.

7. Hedari CP, Khinkarly RW, Dbaibo GS. Meningococcal serogroups A, C, W-135, and Y tetanus toxoid conjugate vaccine: a new conjugate vaccine against invasive meningococcal disease. *Infect Drug Resist.* 2014;3(7):85–99.
8. Eng P, Lim LH, Loo CM, et al. Role of pneumococcal vaccination in prevention of pneumococcal disease among adults in Singapore. *Int J Gen Med.* 2014;31(7):179–191.
9. Kao CM, Schneyer RJ, Bocchini JA. Child and adolescent immunizations: selected review of recent US recommendations and literature. *Curr Opin Pediatr.* 2014;26(3):383–395.
10. Groschel MI, Prabowo SA, Cardona PJ, et al. Therapeutic vaccines for tuberculosis—A systematic review. *Vaccine.* 2014;32(26): 3162–3168.
11. Ghanemi A and S. Wu. Selecting Species for Pharmaceutical and Medical Research. *MOJ Cell Science and Report.* 2014;1(3): 00016.
12. Ghanemi A. Are we in Need of Dividing Zoology into Two Fields? *Journal of Dairy, Veterinary & Animal Research.* 2014;1(1): 00001.
13. Ghanemi A. Animal models of Alzheimer's disease: Limits and challenges. *NPG Neurologie–Psychiatrie–Geriatrie.* 2014;14(84):303–305.
14. Ghanemi A. Toward Optimizing Analytical Methods in Pharmacology. *Journal of Neurology & Stroke.* 2014;1(7):00043.
15. Ghanemi A. How important is pharmacognosy for doctors and dentists? *The Saudi Dental Journal.* 2015;27(1):1–2.
16. Van Til NP, Sarwari R, Visser TP, et al. Recombination-activating gene 1 (Rag1)-deficient mice with severe combined immunodeficiency treated with lentiviral gene therapy demonstrate autoimmune Omenn-like syndrome. *J Allergy Clin Immunol.* 2014;133(4):1116–1123.
17. Tereshchenko J, Maddalena A, Bahr M, et al. Pharmacologically controlled, discontinuous GDNF gene therapy restores motor function in a rat model of Parkinson's disease. *Neurobiol Dis.* 2014;65:35–42.
18. Chandrakasan S, Malik P. Gene therapy for hemoglobinopathies: the state of the field and the future. *Hematol Oncol Clin North Am.* 2014;28(2):199–216.
19. Apaolaza PS, Delgado D, del Pozo-Rodríguez A, et al. A novel gene therapy vector based on hyaluronic acid and solid lipid nanoparticles for ocular diseases. *Int J Pharm.* 2014;25(465):1–2, 25, 413–426.
20. Navarro-Yepes J, Zavala-Flores L, Anandhan A, et al. Antioxidant gene therapy against neuronal cell death. *Pharmacol Ther.* 2014;142(2):206–230.
21. Ghanemi A. How can we imagine the Future of Anti-Tumors Therapies? *Journal of Neurology & Stroke.* 2014;1(6): 00038.
22. Ghanemi A. Cell cultures in drug development: Applications, challenges and limitations. *Saudi Pharmaceutical Journal.* 2014.
23. Ghanemi A, Boubertakh B. Shorter and sturdier bridges between traditional Chinese medicines and modern pharmacology. *Saudi Pharmaceutical Journal.* 2014.
24. Ghanemi A. Is mapping borders between pharmacology and toxicology a necessity? *Saudi Pharmaceutical Journal.* 2014.
25. Ghanemi A, Hu X. Elements toward novel therapeutic targeting of the adrenergic system Neuropeptides. 2014;0143–4179(14): 00109–7.
26. BesmaBoubertakh, Xin-Guang Liu, Xiao-Lan, et al. A Spotlight on Chemical Constituents and Pharmacological Activities of *Nigella glandulifera* Freyn et Sint Seeds. *Journal of Chemistry.* 2013: 12.
27. Ghanemi A. Biological properties and perspective applications of “Bio-neuter” chemicals? *Saudi Pharmaceutical Journal.* 2014;22(1):1–2.
28. Ghanemi A. Toward overcoming the challenges facing biomedical analyses. *Alexandria Journal of Medicine.* 2014.
29. Ghanemi A. Schizophrenia and Parkinson's disease: Selected therapeutic advances beyond the dopaminergic etiologies. *Alexandria Journal of Medicine.* 2013;49(4):287–291.
30. Ghanemi A, Xintian H. Targeting the orexinergic system: Mainly but not only for sleep-wakefulness therapies. *Alexandria Journal of Medicine.* 2014.
31. Ghanemi A. Psychiatric neural networks and neuropharmacology: Selected advances and novel implications. *Saudi Pharm J.* 2014;22(2): 95–100.
32. Ghanemi A, Ling He, Ming Y. New factors influencing G protein coupled receptors' system functions. *Alexandria Journal of Medicine.* 2013;49(1):1–5.
33. Ghanemi A. Targeting G protein coupled receptor-related pathways as emerging molecular therapies. *Saudi Pharmaceutical Journal.* 2013.