## Cancer cell metabolism Normal cells use the TCA cycle and undergo oxidative phosphorylation, produce 32~34 glucose per ATP Warburg effect in cells, increase in glycolysis and oxidative glycolysis (increased lactic acid output even with sufficient oxygen). This is because oxidative phosphorylation produce more carbon-rich intermediates, provide carbon for biosynthesis, less metabolic ROS production. As cancer cell stage progresses, resistance to oxidative stress increase/reliance on oxidative phosphoylation increase. Variability in cancer cell metabolism Constant proliferation of cancer cells - rapid Darwinian selection model, increase in genetic variation. Spectrum of metabolic niche and differentiated states - between different tumour types · Cancer types with more differentiated tumour cells (e.g. Renal, colon, pancreas) requires less glucose and oxygen Cancer types with more cancer stem cells (e.g. lung, ovarian, leukemia), requires higher O2 and glucose levels. Cancer adapt to metabolise unusual types of nutrients (e.g. ketone, acetate, ammonia) Selection pressure: biosynthesis capacity—>cell-type specific metabolism (parental tissue or metastasis tissue), oxidative phosphorylation and treatment resistance in tumour after angiogenesis Tumour metabolism influenced by intrinsic + extrinsic factors Patient metabolism: diet, metabolic diseases (diabetes) Tumour microenvironment: nutrient availability, mechanical structure Parental tissue: location in the body, epigenetic regulation, genetic regulatory network Intrinsic effect: effect of mutation, aberration in signalling pathway Myc: regulator for biogenesis pathways (glucose metabolism, protein synthesis, nucleotide, lipid, amino acid synthesis) **HIF1a**: Switch upregulating oxidative glycolysis Only active in hypoxic normal cells. Active in tumour cells regardless of O2 availability Usually hydroxylated, ubiqutinated by E3 ubiquitin ligase, and degraded, but activated in tumour cells due to hyperactive AKT-mTOR pathway. Promote neoangiogenesis, upregulate expression of VEGF Promote glucose intake, glucose metabolism Promote expression of lactate dehydrogenase and pyruvate dehydrogenase, shift metabolism from oxidative phosphorylation to oxidative glycolysis. Angiogenesis: Initial tumour without blood vessels remain in hypoxic state, remains 1-3 mm<sup>3</sup> in size

With blood supply, allow more biogenesis, more proliferation, acquisition of phenotype (invasive-metastasis, hypoxic-

Tumour cells activate angiogenesis genes and secrete VEGF FGF Angiopoietin

Sprouting angiogenesis: new vessel branch from old vessel
Other mechanisms include Intussusception, vessel mimicry

resistance).

Various modes of angiogenesis: