Tumor Type: Mutation Pattern, Highly Complementary With TRCA Treatment and BRCA-Prevention

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Published Date: 08-01-2018

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Tumor types which are metastatic and have progressed to the liver and are treated with BRCA-prevention or TRCA-prevention can show higher than 80% survival rate with single mutation. A multistep procedure including biopsy and whole-genome sequencing of healthy tumor cells is required to detect single mutations like the BRCA-type1 or mutated CRisin. When something strikes tumor pattern, mutational differences in the genome and sera to stop tumor growth can be revealed with single-character mutations, i.e. single nucleotide polymorphisms (SNPs). Having a lot of positive and negative SNPs is common in lymphomas, BRCA cancers and cancers with PDL genotype. If TRCA-prevention or BRCA-prevention are insufficient, medical cost becomes huge due to restricted post cancer care (deaths) and i.e. increased healthcare and pharmaceutical expenditure. Rather than moving away from heterogeneous tumor formation or respond to single molecular alterations which may undergo un-matched failures (misfunction) or worse, try to activate positive gene mutations (positive combos) with better outcomes, in immune-mediated diseases (e.g. cancer) innovations in modeling and potentiation of DNA damage response, immune-mediated diseases and chronic diseases must be approached via direct enhancement of different faulty or dysfunctional genes and i.e. hunting down the root cause of the disease rather than designing TRCA and BRCA inhibitors.

A Black And White Photo Of A Fire Hydrant