

## SIGNALING PATHWAYS IN PHARMACOLOGY: MECHANISMS, THERAPEUTIC IMPLICATIONS, AND FUTURE DIRECTIONS

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### Article Info

Received 23/01/2026

Revised 16/02/2026

Accepted 27/02/2026

### Key words: -

Anticoagulant Signal Transduction, Pharmacology, Drug Discovery, Signaling Pathways, Precision Medicine.

### ABSTRACT

Signal transduction plays a pivotal role in pharmacology, where external signals are converted into cellular responses that influence physiological functions. This process is fundamental in understanding how drugs interact with receptors to produce therapeutic effects. Over time, the concept of cell signaling has evolved, leading to a deeper understanding of molecular mechanisms, especially concerning drug actions. Signaling pathways, such as G-protein-coupled receptors (GPCRs), receptor tyrosine kinases (RTKs), and ion channels, mediate cellular responses, regulate cell growth, and influence disease progression. Dysregulation in these pathways can lead to diseases such as cancer, neurodegenerative disorders, and metabolic conditions. Advances in drug discovery, targeting these signaling pathways, have led to the development of more effective therapies. The future of pharmacology lies in pathway-centered therapeutics, utilizing precision medicine, AI-driven models, and systems pharmacology to design targeted treatments with improved efficacy and reduced side effects. This review highlights the critical role of signal transduction in drug development and therapeutic applications.

### INTRODUCTION

Signal transduction, which involves the process by which external signals are converted into internal signals and vice versa, is the key to pharmacological effects on human biology and behavior (Cook, 1998) [1]. Overview of Signal Transduction in Pharmacology: Signal transduction, the process where external cues are translated into and external actions into internal actions and the reverse is the key in pharmacological actions on human biology and behavior [2–4].

Signal transduction is a mechanism through which the cells comprehend external signals and translate them into cellular responses. This process is very important in pharmacology to comprehend the interaction of drugs and receptors and their effects on the functions of cells. When a drug interacts with a particular receptor, it results in a sequence of intracellular signaling events, which are capable of modifying different physiological activities

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These signaling pathways may result in various therapeutic outcomes, and they are one of the key elements of designing a drug and its effect.

**In general, cell-signaling concepts have evolved throughout history in response to the ongoing dynamic transformations observed in cellular processes.**

Cell signaling has had a considerable development over the years. The initial explanations of the 20th century acknowledged that drugs could act upon the operations of the biological system by engaging with certain binding sites, now called receptors[5–7]. Neurotransmitter receptors, G-protein-coupled receptors (GPCRs), and ion channels were discovered, which helped us to comprehend the processes by which signaling pathways contribute to the cellular reaction. Further discoveries in cell biology and molecular pharmacology have since narrowed down these ideas and made it possible to come up with more specific drugs and therapies.

**Signaling pathways mediate responses to drugs, as well as control cell growth and differentiation**



Signaling pathways play a key role in the mechanism of action of drugs on the body[8]. These pathways can be based on activating or inhibition of certain enzymes, receptors, and ion channels that control cellular activities like the expression of genes, metabolism and the movement of ions. Drugs may alter these cellular mechanisms by acting on specific signaling pathways to treat a wide range of diseases, cancer to neurological diseases. These pathways are complex and understanding how they work is a crucial tool when developing more effective and less adverse drugs.

### Scope and Objectives of the Review

This review is to discuss the signal transduction processes in pharmacology, how these processes change the drug activity and development.[4,9–11] It will give a detailed overview of the development of the concepts of cell signaling throughout history and the significant advances of our awareness and knowledge of the signaling pathways and their involvement in drug actions. The review will also explore how these pathways are clinically relevant to drug design, resistance, and the newer aspect of precision medicine, which provides perspectives on future trends of drug development.

### The basics of Signal Transduction Key Components of Signaling

Signal transduction comprises a number of important elements that act in unison to transmit information to both the external side to the internal side of the cell and thus culminating into a cellular response [2, 12–14]. Such elements are ligands, receptors, second messengers and effector proteins. These components are important to understand the mechanism of cellary communication and reaction to different stimuli, especially when it comes to drug action and therapeutic intervention.

### Ligands and Receptors

Ligands Ligands are molecules (such as drugs or endogenous signaling molecules: hormones or neurotransmitters) binding to cell surface or intracellular receptors. This binding triggers the signal transduction process in that it leads to a conformational change in the receptor that triggers downstream signaling pathways. The receptors are usually membrane-bound proteins, including G-protein coupled receptor (GPCR) or ion channel, or intracellular proteins, such as nuclear hormone receptor. Specificity of the ligand receptor interaction defines the accuracy and the result of the signal.

### Second Messengers

Second messengers are small molecules which transmit signals of receptors to intracellular targets. Once a ligand activates a receptor it usually causes the production or release of second messengers, including cyclic AMP (cAMP), calcium ions ( $\text{Ca}^{2+}$ ) or inositol trisphosphate (IP3)[15]. These second messengers enhance the signal in the cell and it is possible to have a quick and large scale

cellular response. The coordinated action of signal amplification and modulation of various pathways by the second messengers relies on their ability to do this at the same time.

### Effector Proteins

Downstream targets of second messengers are called effector proteins and their activation or inhibition results in the ultimate cellular response. These proteins contain enzymes, transcription factors and ion channels which may be used to control numerous cellular processes, including metabolism, gene expression, cell growth, and apoptosis[16]. Through their interactions with effector proteins, signaling pathways regulate cellular activities, and therefore, they play vital roles in the design of therapeutic agents that are meant to alter these mechanisms.

### The following principles of signal amplification apply:

Signal amplification is the mechanism in which a small perturbation, e.g. binding of a ligand to a receptor, leads to a big cellular response[17–19]. This is normally done by the stimulation of the second messengers that may trigger a number of signaling cascades in the cell. Although occasionally microscopic quantities of ligand or receptor activity can initiate major physiological effects, the amplification process provides assurance that a launching physiological effect of such activity can be accomplished through minute amounts of the ligand or receptor activity in both normal and pathological cell functioning.

### Signaling networks can be integrated within each other; this process is known as crosstalk

Crosstalk happens when two or more signaling pathways come in contact with each other and this gives a chance to integrate the signals of the distinct origins. Such a combination is necessary to organize multicellular responses to several different stimuli[20]. Interactions between pathways may create synergies or antagonies that affect the outcome of cells. This is important to understand how these interactions work so as to design drugs which may be able to effectively tune specific signaling networks but not affect events of other important processes.

The brain has the capability to control how its signals are managed in both time and space

Signal transduction is a process that is strictly controlled both on time and space in order to make sure that cellular responses are well synchronized. Temporal regulation is the time of signal, whether it should be activated, maintained or, terminated at the appropriate time[4,21]. Spatial regulation is the confinement of signaling events to particular locations in the cell or in the cellular environment among cells. The two forms of regulation play a significant role in cell homeostasis and the prevention of signals causing aberrant or excessive responses that may be part of disease conditions. To



develop successful drugs, it is common to target such regulatory processes to regulate the duration and location of the signaling event.

### **Pathways of Signal Transduction Membrane-Associated**

#### **G protein-coupled receptor (GPCR) Signaling**

One of the biggest families of membrane receptors is GPCRs which contributes significantly to the cellular signaling. Activated by ligands, e.g. neurotransmitters or hormones, GPCRs undergo conformational changes, which activate related G-proteins. These G-proteins subsequently cause intracellular signaling cascades via the second messengers and affect different cellular functions such as heart rate, neurotransmission and immune responses[22,23]. Many physiological processes rely on GPCR signaling which is a source of many therapeutic drugs targeting diseases such as hypertension, depression and cancer.

#### **Gs, Gi, and Gq Pathways**

G-protein signaling pathways fall into three broad categories, the alpha subunits of which are Gs, Gi, and Gq. The Gs pathway triggers adenylate cyclase and raises cAMP (cyclic adenosine monophosphate) and activates protein kinase A (PKA)[24]. Gi suppresses adenylate cyclase which decreases cAMP and activates phospholipase C2 (PLC2) resulting in inositol trisphosphate (IP3) and diacylglycerol (DAG). The Gq pathway, likewise, stimulates the PLC -2, producing IP3 and DAG. These signaling routes control an extensive collection of cellular outcomes, including metabolism and gene expression and play a key role in coordinating complicated biological activities.

#### **The receptors are desensitized and internalized by this process**

The mechanism of desensitization of GPCR is the reduction in receptor responsiveness to subsequent stimulation by its agonist. This is in most cases mediated by the phosphorylation of the receptor which binds 2-arrestins that inhibit G-protein-coupling and promote receptor internalization[25]. Internalization is a process whereby the receptor is internalized into the cell which may result in the receptor being recycled or degraded. This control system facilitates the prevention of overstimulation and the fact that the cells are capable of adjusting themselves to the long-term signals, which is important in avoiding side effects in therapeutic uses of GPCRs.

#### **GPCR-Targeting Therapeutics: This approach focuses on specific drug targets using a GPCR antagonist as the selected antagonist**

A large number of therapeutic drugs are directed to GPCRs because they are implicated in many diseases. These medications may serve as agonists, antagonists or as allosteric modulators to either stimulate or inhibit GPCR

activity[5,26]. An example of this is the beta-blocker (propranolol) that binds  $\beta$ -adrenergic receptors in order to reduce hypertension, and the opioid receptor agonist (morphine), which is used to relieve pain. The modern changes in drug design are directed to develop more selective and biased agonists that can stimulate particular signaling pathways to support therapeutic effects with minimal side effects to improve the treatment outcome of different disorders.

#### **Tyrosine kinase are receptors through which external signals get into the cell**

Receptor tyrosine kinases (RTKs) are membrane-bound receptors, and, upon ligand binding, are dimerized and activated so that the intrinsic kinase activity is activated. This stimulates tyrosine phosphorylation of the receptor itself and downstream signaling proteins and triggers a cascade of events that controls cell growth, differentiation and survival. RTKs play a crucial role in numerous processes of the cell and are often associated with cancer since the mutations in RTKs or their signaling pathways may contribute to uncontrolled cell division and survival after the apoptosis.

#### **The binding of the ligand and the dimerization are described**

Activation of RTKs occurs when an extracellular ligand combines with the ligand-binding domain of the receptor which leads to a conformational change that brings two receptor molecules together (dimerization). This dimerization is essential in the activation of the kinase domains of each receptor which subsequently transphosphorylate themselves on certain tyrosine residues. Such phosphorylated tyrosine's are docking sites of downstream signaling molecules leading to complex intracellular signaling pathways that mediate cell division, migration and differentiation.

#### **The auto phosphorylation of the protein and its subsequent downstream signaling processes have been examined**

These autophosphorylated tyrosine sites, once the RTK has dimerized, act as binding sites of intracellular signaling proteins including SH2-domain-containing proteins which are known to activate downstream signaling cascades[27–31]. Such cascades include the Ras-MAPK pathway, PI3K-Akt pathway and others that control one of the most important cellular processes, such as gene expression, cell cycle progression, and cell survival. This is a fundamental element in the normal cellular operation but its deregulation may cause diseases particularly cancer, where excessive RTK signaling may stimulate cell growth unchecked.

#### **RTK Inhibitors in Oncology**

RTK inhibitors comprise a viable category of targeted cancer treatments, which targets to inhibit abnormal signaling by over-active RTK. Such inhibitors



may be small molecule tyrosine kinase inhibitors (TKIs), e.g. imatinib in chronic myelogenous leukemia (CML), or monoclonal antibodies of RTK extracellular ligand-binding domains[32–37]. These therapies block downstream signaling which results in cell proliferation, survival and metastasis of cancer cells by blocking the phosphorylation and activation of RTKs. The RTK inhibitors have brought a revolution in the treatment of cancer and have mainly been used to treat cancers that have particular mutations of specific receptors.

### **Ion Channel Signaling**

Ion channels are membrane proteins, which allows passing of ions through the cell membrane, which is important in the cell homeostasis and rapid communication between cells. Such channels play significant roles in such processes as neurotransmission, muscle contraction, and heart rhythm. The ion channels are very selective to specific ions, i.e., sodium, potassium, calcium, and chloride and their functionality is strictly regulated. Different ion channels are known to have an abnormal interaction with a range of diseases such as arrhythmia, epilepsy, and cystic fibrosis, which makes them significant targets of drug therapy to treat these disorders.

### **Ligand-Gated Ion Channels**

Ligand gated ion channels are opened by the binding of a particular ligand e.g. neurotransmitter. The binding causes a conformational change to the channel and ions are permitted to pass through the membrane. These channels play a key role in the nervous system transmission of synapses. As an example, the nicotinic acetylcholine receptor is a neuromuscular receptor, whereas GABA-A receptor is a brain inhibitory neurotransmitter receptor. The drugs using the ligand-gated ion channels, treating such conditions as anxiety, depression, and epilepsy, can manipulate synaptic activity.

### **Voltage-Gated Channels**

Voltage-gated ion channels become open or close depending on the variation of the membrane potential. These conduction channels play a very important role in spreading the action potentials of the excitable cells such as neurons, muscle cells and heart cells[38–40]. An example is that the rapid depolarization stage of the action potential is dependent on voltage-gated sodium channels and the polarization of the cell is assisted by potassium channels. One such effective mode of treatment using drugs such as lidocaine and phenytoin is modulation of the activity of voltage-gated channels to treat arrhythmias, seizures and pain.

### **Ion Channel Modulator Drugs**

Ion channel modulator drugs are medications that control the behavior of ion channels through modifying their functions either positively or negatively. The drugs are applicable in the treatment of a wide range of dysfunctional disorders and are used to treat epilepsy,

chronic pain, and cardiac arrhythmias. As a case in point, calcium channel blockers such as amlodipine are administered to cure hypertension and arrhythmias by blocking the entry of calcium into the smooth muscle cells. An example of how ion channel modulators can be used therapeutically is the use of local anesthetics such as lidocaine to block sodium channels to prevent nerve conduction and to cause localized anesthesia.

### **The signaling is a second important process**

Cytokine receptors play a key role in the communication between the immune cells because they mediate the actions of the cytokines and the cytokines are tiny proteins involved in immune reactions, inflammation, and cell communication[41–44]. Connections Cytokine receptors lack intrinsic kinase activity, although they mobilize intracellular Janus kinases (JAKs) to the receptor on ligand binding. These kinases consequently phosphorylate the receptors, thereby triggering the JAK-STAT pathway, which controls the expression of genes and immune reactions. These receptors are used as therapeutic targets because dysregulation of cytokine signaling has been involved in autoimmune diseases, cancers and inflammatory diseases.

### **JAK–STAT Pathway**

One of the signaling pathways is the JAK-STAT, which is triggered by cytokine receptors. Upon attachment to a cytokine receptor, the Janus kinases (JAKs) that bind phosphorylate the receptor. This phosphorylation forms docking sites of signal transducer and activator of transcription (STAT) proteins. The phosphorylated STAT proteins dimerize and move to the nucleus, which regulates gene expression of immunity, cell survival and differentiation. The JAK-STAT signaling is the key element of the immune system, which is blocked by certain inhibitors to treat cancers and autoimmune diseases.

Concerning the clinical relevance of immunotherapy, it is important to note that the present study seeks to demonstrate the efficacy of immunotherapy, particularly within the immune system (the human body) of humans. Clinical Relevance in Immunotherapy: In regards to the clinical relevance of immunotherapy, it is notable that the current study aims at proving the effectiveness of immunotherapy, specifically in the immune system (the human body) of a human being.

JAK-STAT pathway Cytokine receptor signaling has substantial clinical implications in immunotherapy. Signaling of dysregulated cytokine is involved in numerous diseases, such as autoimmune diseases such as rheumatoid arthritis, inflammatory diseases, and some cancers. Tofacitinib is the first JAK inhibitor, which has been created to counter this pathway, providing specific therapy against these diseases. These therapies should have the potential to alter immune responses, decrease inflammation and improve disease outcome by blocking particular cytokine receptor signals, which can be viewed



as a promising form of personalized medicine and immune control.

### Significant intracellular Signaling Pathways

#### MAPK/ERK Pathway

MAPK/ERK pathway is an essential intracellular signaling cascade, which controls several cellular functions, such as cell growth, differentiation and cell survival. Extracellular factors like growth factors and cytokines are often used to activate it. This is a chain of protein kinases where the signal along the cell surface is relayed to the nucleus which has an ultimate effect on the expression of genes. The MAPK/ERK is a very popular target of therapeutic interventions in cancer treatment because dysregulation of this pathway has been frequently observed in numerous cancer types.

#### RAS Activation

RAS is a small ATPase and activates the upstream of MAPK/ERK signaling cascade. RAS switches the GDP to GTP on activation by receptor tyrosine kinases (RTKs) or other signaling molecules and that activates the downstream effectors. RAS has a signalling cascade that is activated by RAS which results in MEK and eventually erk. It is a crucial controller of cell cycle progression, survival and differentiation and RAS mutations often follow cancers especially in solid tumors.

#### RAF–MEK–ERK Cascade

The RAFMEKERK cascade is the main route of the MAPKERK signaling pathway. RAS activates a serine/threonine kinase (RAF) once it is activated by RAS. RAF subsequently causes phosphorylation and activation of MEK (MAPK/ERK kinase) that subsequently phosphorylates ERK (extracellular signal-regulated kinase). ERK is activated and enters the nucleus where it controls gene expression of the cell growth, survival, and differentiation. The RAF-MEK-ERK signal transduction pathway is critical to regulating the reactions of cells to external cues and its failure is connected to many cancers and developmental issues.

#### PI3K–Act–motor Pathway

PI3K-Akt-mTOR pathway is one of the major signaling pathways that control cell survival, metabolism, and growth. Various extracellular signals trigger its activation, and these are growth factors, hormones, and cytokines. The process begins with the phosphoinositide 3-kinase (PI3K) activation to produce phosphatidylinositol-3,4,5-trisphosphate (PIP3), a second messenger that triggers Act activation. Act then controls numerous downstream events, among them the mammalian target of rapamycin (mTOR) that integrates cell growth and metabolism. The pathway is commonly unregulated in tumors such that cells lose their ability to regulate their own growth and die.

### PI3K Isoforms and Activation

PI3K (phosphoinositide 3-kinase) is available in various isoforms which are stimulated by various receptor classes, including RTKs, GPCRs, and integrin's. When the receptors are activated PI3K converts phosphatidylinositol 4,5-bisphosphate (PIP2) to PIP3, thereby recruiting and activating Act and other downstream signaling proteins[45]. Activation of PI3K isoforms determines the functioning of various cells, including cell growth, cell survival, cellular metabolism, and cellular migration. The activation of PI3K particularly the isoforms of the class IA are often found in different cancers and other pathologies, and thus is also drug development target.

### Act activation was also noted to induce cell survival in the analyzed cells

One important mediator of PI3K pathway is Act or protein kinase B (PKB). Upon the stimulation of PIP3, Act is phosphorylated, and the phosphorylated Act activates the kinase activity. Activated Act controls many cellular events, mainly survival of the cell by suppressing the apoptotic pathways. Act also determines cell growth by activating motor and controlling the production of proteins. Moreover, Act regulates the metabolism through the adjustment of the glucose uptake and lipid metabolism. Since Act is present in the stimulation of cell survival and growth, its excessive activation is commonly observed in cancers and leads to resistance to apoptosis and chemotherapy.

#### NF- $\kappa$ B Pathway

NF- $\kappa$ B pathway can be described as an important signaling pathway that controls immune response, inflammation and cell survival. NF- $\kappa$ B is a transcription factor which when activated, moves to the nucleus and triggers the expression of inflammatory, immune response and cell proliferation genes. This is a pathway triggered by diverse stimuli, which comprise pro-inflammatory cytokine, stress signals, and pathogen-associated molecules. NF- $\kappa$ B pathway dysregulation has been implicated in various diseases, and has been found to promote inflammation, cell survival and apoptotic resistance.

### The activation process of the DNase, consisting of three separate stages, is uniquely recorded in the literature as demonstrated below

Two pathways can trigger NF- $\kappa$ B pathway: canonical and non-canonical pathways. The pro-inflammatory signals, including TNF 1 or IL-1, activate the IKK complex and induce degradation of I $\kappa$ B proteins through the canonical pathway. This degradation enables the discharge of NF- $\kappa$ B dimers (e.g. p65/p50) which translocate to the nucleus and trigger gene expression. The non-canonical route entails activation of NF- $\kappa$ B inducing kinase (NIK) which causes p100 to be processed into p52, causing the activation of p52/RelB dimer. The two



pathways control immune responses but vary in terms of the mechanisms and results of these pathways.

### **The product possesses anti-inflammatory and anti-cancer properties, particularly in the prevention and treatment of tumors of the colon and breast**

NF- $\kappa$ B pathway is a central inflammatory as well as cancer pathway. NF- $\kappa$ B is activated by inflammatory cytokines such as TNF and IL-1 and results in the expression of genes which play a role in immune response and inflammation. Nevertheless, sustained NF- $\kappa$ B activity is associated with chronic inflammation, which is also characteristic of most autoimmune diseases and inflammatory diseases. NF- $\kappa$ B plays a role in cancer by facilitating tumorigenesis through the increased cell survival, growth, and chemo-resistance against the effects of chemotherapy-induced apoptosis. Therefore, NF- $\kappa$ B is an inflammatory mediator of chronic inflammation and cancer progression, hence making it a therapeutic target to reduce inflammation and impede cancer progression.

## **Second Messenger Systems**

### **Cyclic Nucleotides**

The nucleotides are cyclic and play a major role in cellular signal transmission. They control the different cellular functions such as gene expression, cell division and metabolism[46,47]. These two major cyclic nucleotides are cAMP and cGMP which are synthesised by activating certain enzymes namely, adenylyl cyclase and guanylate cyclase respectively. These molecules stimulate various target proteins including protein kinases that regulate cellular functions. Cyclic nucleotide signaling is the key element of understanding therapeutic methods that are oriented towards the regulation of heart activity, relaxation of smooth muscles, and neurochemicals.

### **cAMP Signaling**

Cyclic adenosine monophosphate (cAMP) is an important second messenger involved in a wide range of signal transduction, specifically in the control of metabolic and ionic transport, and in the expression of genes. A ligand binding a G-protein-coupled receptor (GPCR) causes the activation of adenylyl cyclase, which converts the ATP to cAMP, which in turn stimulates protein kinase A (PKA), which results in the phosphorylation of different target proteins involved in cellular activities such as glycogen breakdown, lipolysis, and release of neurotransmitters. The degradation of cAMP by phosphodiesterases is also a control mechanism, whereby the process controls the signaling level. The role of cAMP signaling in diseases includes heart failure and cancerous diseases.

### **cGMP Signaling**

Another crucial second messenger, and which is related to the regulation of processes like vasodilation, phototransduction and relaxation of smooth muscle, is cyclic guanosine monophosphate (cGMP), which is

synthesized by the enzyme guanylate cyclase, stimulated by many different stimuli, including nitric oxide (NO). The synthesis of cGMP triggers protein kinase G (PKG) and subsequent phosphorylation of proteins involved in cellular activities including smooth muscle relaxation and platelet aggregation, which are functionally important in the regulation of blood pressure and vascular tone, and can be pharmacologically manipulated by using nitrates, an example of which drug is nitroglycerine.

### **Calcium Signaling**

Calcium ions ( $\text{Ca}^{2+}$ ) are independent second messengers that are involved in the regulation of various cellular functions, such as muscle contraction, neurotransmitter release, gene expression, and cell death[48,49]. The calcium channels, pumps, and exchangers regulate the entry and exit of calcium ions into and out of the cytoplasm by tightly maintaining the concentration of  $\text{Ca}^{2+}$  in the cytoplasm. The dynamic increase in intracellular calcium concentration activates several signaling cascades, such as the activation of kinases, phosphatases and controls the activity of some proteins such as calmodulin. Calcium signaling dysregulation is associated with many diseases such as cardiac arrhythmias, neurodegenerative, and cancer.

### **Calcium Channels and Pumps**

Another regulator of the intracellular calcium levels is calcium channels and pumps. Voltage-gated calcium channels permit  $\text{Ca}^{2+}$  into the cell due to depolarization and trigger the events such as muscle contraction and neurotransmitter release[50–53]. Calcium pumps, on the other hand, including the sarcoplasmic/endoplasmic reticulum calcium ATPase (SERCA), actively release or reabsorb  $\text{Ca}^{2+}$  in and out of the cell and organelles, respectively, to maintain basal levels of calcium. Calcium influx and efflux balance are a necessary part of cellular homeostasis and functioning. Calcium homeostasis is a regulated process that takes place in the body and plays a major role in the occurrence of many diseases such as heart disease and additional neurological disorders.

### **Calmodulin-Dependent Responses: Moving forward, the experiment would identify the calmodulin-dependent responses**

Calmodulin (Calm) is a calcium binding protein that facilitates cellular action of calcium signaling. As calcium increases,  $\text{Ca}^{2+}$  binds to calmodulin, which triggers a conformational change and allows the activity of calmodulin to target and activate a diverse group of target proteins, such as kinases, phosphatases, and ion channels. The calmodulin-dependent protein kinase (Camp) is one of the most popular calmodulin-dependent enzymes that mediate metabolic processes, including gene expression, synaptic plasticity, and muscle contraction. The calmodulin-dependent responses play a critical role in different physiological processes and calmodulin signal



aberrancy is associated with diseases like hypertension, cancer, and neurodegenerative disorders.

### Lipid-Derived Messengers

The lipid-derived messengers (eicosanoids, triacylglycerol (DAG) and inositol trisphosphate (IP3)) have a role in the intracellular signaling pathways that control various cellular events, including inflammation, immune response, and cell growth[54–56]. These molecules are produced with the help of the membrane lipids with the help of the enzymes, e.g., phospholipases, which break or cleave phosphoinositide's or other lipid precursors. The lipid-derived messengers play a significant role in pathways that regulate such processes as cellular proliferation, metabolism, and apoptosis. The lipid signaling pathways are therapeutic targets in the treatment of cancer, autoimmune disease as well as cardiovascular disease.

### IP3 and DAG

Two of the key lipid-based second messengers that are formed because of phospholipase C (PLC) acting on the phosphoinositide, including PIP2 are inositol trisphosphate (IP3) and triacylglycerol (DAG). IP3 stimulates the discharge of calcium ions in the intracellular stores of the endoplasmic reticulum, and elevates the cytosolic calcium level, which coordinates a number of calcium-dependent signal transduction pathways. DAG will stay in the plasma membrane and will activate protein kinase C (PKC), which is a highly regulated cellular process including gene expression, cell differentiation and apoptosis. The interaction of IP3 and DAG is an important part of the regulation of several cellular responses to external stimuli.

### Eicosanoids

The eicosanoids are a family of lipid-derived signaling molecules such as prostaglandins, thromboxane, and leukotrienes, which occur because of the arachidonic acid, a fatty acid in cell membranes, synthesis[57–59]. These molecules play a highly diverse role in physiological reactions, and they include inflammation, immune response, and blood clotting. Eicosanoids are locally active in their site of production, to control the vasodilation, platelet aggregation, and the recruitment of immune cells. The eicosanoids due to their central involvement in the process of inflammation are the key targets of medicines like nonsteroidal anti-inflammatory drugs (NSAIDs), which block the activity of cyclooxygenase (COX) enzymes that produce prostaglandins, and treat pain and inflammation.

### Nuclear Signaling Pathways Steroid Hormone Receptors

The steroid hormone receptors are cellular receptors that facilitate the action of the steroid hormones, including estrogen, progesterone, glucocorticoids, and androgens. These receptors usually occur in the cytoplasm

or nucleus and play the role of ligand-activated transcription factors. In response to the binding of a steroid hormone to its receptor, the receptor is modified by means of a conformational change, which allows it to translocate to the nucleus, where it interacts with certain DNA sequences known as hormone response elements. This binding brings about the regulation of gene expression, which takes part in many physiological processes such as metabolism, immune response, and reproduction. Steroid hormones and receptor play a significant role in the treatment of cancer, inflammation, endocrine condition, and others.

### PPAR and Metabolic Regulation: PPAR inhibitors enhance lipid metabolism and affect blood glucose concentrations in patients undergoing different types of surgery

Peroxisome proliferator-activated receptors (PPARs) are receptors of nuclear hormones, which control the gene expression in many metabolic processes, including lipid metabolism, glucose homeostasis, and inflammation[60]. PPARs are of three major isoforms: PPAR alpha, PPAR beta/ delta and PPAR gamma with different distribution and functions in tissues. PPAR is mainly found in the liver where it plays a role in fatty acid oxidation and lipid metabolism by PPAR whilst PPAR plays an important role in abiogenesis and insulin sensitivity. The effects of PPARs are carried out by attaching themselves to certain ligands, including fatty acids and eicosanoids and either inhibiting or stimulating the expression of target genes. Thiazolidinedione's are PPAR agonists, which are applied to metabolic diseases (type 2 diabetes and dyslipidemia).

### The signal that signifies notch in cells can cause them to differentiate into cell types unlike their original ones

Notch signaling pathway is an extremely conserved pathway that controls the determination of cell fate, differentiation, and tissue patterning. Notch receptors are transmembrane proteins, which bind ligands to adjacent cells leading to proteolytic cleavage of the receptor and release of its intracellular domain. This area is translocated to the nucleus where it activates genes, which are involved in cell differentiation. This Notch pathway is important in the development and maintenance of stem cells as well as in the regeneration of tissues. Notch signaling is also linked with the dysregulation in a number of cancers and developmental disorders and therefore can be a therapeutic intervention target to regulate cell differentiation and tissue regeneration.

The process of epigenetic regulation and chromatin dynamics is influenced by the sensitivity and action-at-a-distance properties of chemical signaling, as described by the following equation: Sensitivity and action-at-a-distance properties of chemical signaling regulate the process of epigenetic regulation and chromatin dynamics as follows:  $S_1(K_1)/S_2(K_2)/S_3(K_3)/S_4(K_4)/S_5(K_5)/S_6(K_6)/S_7(K_7)$



Epigenetic regulation Epigenetic regulation is a type of hereditary modification of gene expression without actual modification of the DNA sequence. This control is mediated by the chemical modification of DNA and histone proteins, which change the structure of chromatin and accessibility. The main epigenetic regulation processes are DNA methylation, histone acetylation, and histone methylation, which may activate or repress the gene expression. Chromatin dynamics, the rearrangement of the chromatin to facilitate or inhibit access of the transcriptional machinery, has been at the center of cellular mechanisms and processes involved in development, aging and disease progression. Epigenetic modifications are reversible and can be affected by environmental factors, which can be used as potential targets of therapies to reverse abnormal gene expression, e.g. in cancer and neurological disorders.

### Dysregulation of Signals and Disease

**Oncogenic Mutations in Signaling Molecules: Oncogenic mutations in signaling molecules have been linked to malignancies in different body organs and include breast or epithelial tumors.**

The significant contributor to cancer occurrence is oncogenic mutations of signaling molecules. These mutations tend to involve critical elements of cellular signaling pathways including growth factor receptors, G-proteins or intracellular kinases resulting in unrestrained cell growth, survival and metastasis. As an illustration, mutations in Ras family of proteins, or receptor tyrosine kinases such as EGFR, may cause constitutive activation of signaling pathways such as MAPK/ERK or PI3K-Akt bypassing regular regulation. They promote uncontrolled cell growth and apoptotic resistance, which result in tumorigenesis. Inhibitors of these oncogenic signaling pathways have formed part of the current cancer treatment methods.

### Dysregulated Immune Signaling

<|human|>Immune Signaling: dysregulation of immune functioning in aging is a consequence of increased sensitivity to immunosenescence and immunosurveillance.

The central issues in autoimmune diseases, chronic inflammation and cancer are dysregulated immune signaling. In autoimmune diseases, the body attacks itself, e.g., rheumatoid arthritis or lupus, which is often caused by disturbed immune cell signaling between immune cells such as T-cells and B-cells. Signaling pathways of cytokines (ex: TNF and IL-1) tend to be hyperactive and cause chronic inflammation and tissue injury. In cancer, immune checkpoint pathways, in this case, PD-1/PD-L1 can be bypassed to avoid recognition by the immune system, and tumors may grow freely. The knowledge and control of the immune signaling pathways have enabled the creation of immunotherapies that help to replace immune functions and attack particular components of the immune system.

**The mechanism of neurodegenerative diseases depends on the pathways of neurodegenerative diseases and the analysis of genetic links in each individual case requires examining these pathways**

Neurodegenerative diseases include Alzheimer disease, Parkinson disease, Huntington disease and others, which are progressive in nature and involve neuronal degeneration and the impairment of their signaling pathways. Cellular signaling dysregulation is also a contributing factor to disease and death of neurons in many of these diseases. In this case, as an illustration, in the case of Alzheimer disease the amyloid-beta plaque buildup interferes with the calcium signaling and activates an inflammatory pathway that destroys neuronal cells. In Parkinson disease gene mutations such as Parkin and  $\alpha$ -synuclein disrupt the normal functioning of mitochondria and cellular signaling, thereby resulting in the death of neurons. Such signaling dysregulations are important in knowing how to come up with specific therapies to prevent or reduce the occurrence of these diseases.

### Metabolic Disorders and Endocrine Dysfunctions

Metabolic conditions and endocrine conditions are typically caused by the impairment of signaling pathways that help to control metabolic activity and hormones. Under pathological conditions such as diabetes type 2, the insulin signaling is disturbed thus causing insulin resistance and high sugar levels in blood. Likewise, in obesity, the changes in the leptin and ghrelin signaling pathways may cause the dysregulation of the appetite control and fat storage. Endocrine diseases like hypothyroidism or adrenal insufficiency are caused by a break in the pathways of the hormone signaling that control growth, metabolism and stress response. These signaling abnormalities will be imperative in formulation of therapy to normalize hormonal and metabolic functionality in the patients.

### Drug Discovery and Development Implications

**The identification and validation of the target will be performed based on the hypothesis**

Target discovery and validation are also important processes in drug discovery because they entail the process of identifying a particular molecule or pathway which is associated with a disease and ensuring its contribution to the development of a disease. This would start by comprehending the molecular processes behind the disease, which is followed by determining the possible drug targets that could be proteins, receptors, or enzymes. After identification of a target, the involvement of the target in the disease is determined by validation methods, such as genetic manipulation (i.e. gene knockdown or knockout models), biochemical assays and cellular models. Successful target identification and validation enhances the chances of coming up with drugs that would be able to modulate the target successfully to generate therapeutic effects.



### High-Throughput Screening

High-throughput screening (HTS) is an effective technique that allows to do a quick screening of thousands of drug compounds potentially interacting with a given target. HTS enables the screening of large chemical library in a limited amount of time to discover hits that have therapeutic potential. This is usually done with automated systems to execute biochemical or cellular assays which may be studied to locate compounds that generate the required biological response. To speed up the drug discovery process, HTS facilitates the process of finding lead compounds to develop further by optimising the process of discovering effective drugs to various diseases including cancer and infectious diseases.

### Structure-Based Drug Design

Structure-based drug design uses structural information (usually as three-dimensional structure) of the biological target, typically by using methods such as X-ray crystallography or NMR spectroscopy, to design drugs that selectively bind to the target. This is a method that aims at maximizing the fit between the target binding site and the drug molecule, and it is possible to develop compounds with increased specificity and efficacy. The pharmacokinetic properties of drugs could also be enhanced by structure-based design to make them not only effective but with desirable absorption, distribution, metabolism, and excretion (ADME) pharmacokinetic profiles. This method has been used to develop numerous successful drugs especially those that attack enzymes and disease-receptor processes.

### The Systems Pharmacology and Network Modeling

Systems pharmacology is a field that combines systems biology and pharmacology in order to comprehend the interactions of drugs with biological networks. Systems pharmacology is also investigating the effect of a drug on complete signaling systems, patterns of gene expression and metabolic pathways rather than on a single target. Network modeling is used to make predictions on how various part of the cell interact and how drugs can alter the interactions. This holistic system makes it possible to identify the off-target effects and the interactions of drugs with one another as well as biomarkers of treatment response which offer a more detailed picture of the efficacy and safety of the drugs. It is also becoming increasingly popular to design drugs more specifically according to the complexities of diseases, especially complex diseases, such as cancer, diabetes, and neurological disorders, using systems pharmacology.

### Biomarker Discovery Signal Pathways: Signal pathways Discovery Biomarker Discovery detects protein-protein interactions in a protein pathway by taking advantage of the fact that proteins are expressed sequentially in operons (ClustalW version 1.5)

Discovery of biomarkers is important in drug development as it provides molecular pointers of disease or

response to treatment. Biomarkers may also be used in terms of signaling pathways to show the way a drug can alter a particular set of molecular pathways and therefore can be used to monitor the efficacy of the treatment and forecast patient responses. Biomarkers may be proteins or nucleic acids or small molecules, which are engaged in disease pathophysiology or biological pathway to therapy. They can be used in clinical trials to enable more personalized medicine thereby selecting those patients who have the greatest likelihood of responding to a given drug. With the current progress in the study of signaling pathways, biomarker identification has remained a major part of the development of specific treatments against a broad selection of diseases.

### Signaling pathways Therapeutic Modulation of Signaling Pathways

#### Small-Molecule Inhibitors

Small-molecule inhibitors have found extensive application in the regulation of signaling pathways in the therapeutic treatment of a wide range of diseases, in particular cancer and autoimmune diseases. Their effect is to bind to certain enzymes, receptors, or other proteins of a signaling cascade, either inhibiting or altering their activity. As an example, the kinase inhibitor such as imatinib inhibits special tyrosine kinases in the proliferation of cancerous cells. Small molecules may be very specific, that is, specific to a molecule or pathway, yet it takes a great deal of screening and optimization to develop a small molecule that is potent, selective and has a low off-target effect. The common use of small-molecule inhibitors is their capacity to be administered orally and their wide range of therapeutic uses.

#### Biologicals

Biologics are biological therapeutics, which are big and multifaceted molecules that are clustered based on the living organisms. These therapies are tailored to specifically activate particular portions of signaling pathways, receptors, cytokines or antibodies. Biologics have a high degree of specificity and efficacy in disease with dysregulation in signaling, including autoimmune, cancers, and chronic inflammatory diseases. Biologics are normally delivered by injection or through infusion because of their complexity. Although they are able to offer a much more specific treatment with reduced off-target effects than small molecules, they are expensive and difficult to prepare.

#### Monoclonal Antibodies

Monoclonal antibodies (mAbs) are a type of biologic drugs that are specific to bind to target molecules, e.g. cell surface receptors, proteins or cytokines, in signaling pathways and they may block the receptor-ligand interaction, cause immune-mediated cell death, or regulate immune responses. Examples include trastuzumab (Herceptin) which is a drug that binds to the HER2 receptor in breast cancer cells and rituximab which is a



drug that binds to the CD20 receptor on B cells in lymphoma and rheumatoid arthritis. Monoclonal antibodies have transformed curing a number of cancer types, autoimmune diseases and inflammatory diseases by giving specific, pathway-directed therapies with few systemic side effects.

### Nucleic-Acid-Based Drugs

One new area of signaling pathways modulation is comprised of nucleic-acid-based drugs including DNA and RNA-based therapies. These medications can be used to attack and alter the genetic material of the cell and have a direct impact on the performance of the genes involved in the disease processes. These therapeutic methods can be used to remediate the molecular causes of diseases by regulating the expression of genes. The method provides exception opportunities to diseases that have no other form of treatments like genetic conditions or some types of cancer. Nevertheless, the issues of the delivery mechanisms and off-target effects are still serious obstacles to the popularization of these therapies.

### siRNA Therapies

The siRNA therapies are a category of nucleic-acid-based medication that interacts with specific messenger RNAs (mRNAs) to silence the expression. Researchers can specifically target and degrade mRNAs with the introduction of synthetic siRNA into cells, which can suppress the translation of disease-causing proteins and

is especially promising in treating diseases that rely on the silencing of specific genes, including some genetic diseases, viral diseases and cancer. The problem of effective delivery systems and the prevention of immune reactions is still being a hindrance to the translation of siRNA therapies into large-scale clinical practice, though, as of recently, this practice is becoming more and more viable through advances.

### I combined various pathways in order to achieve combination therapy

Combination therapy entails the application of several therapeutic agents to attack various sites in a signaling pathway or to attack several pathways simultaneously. This method may be especially useful in diseases with complicated signaling networks or where AD has been acquired to single agent treatment. In the case of cancer treatment, e.g., combination therapies may be applied to directly treat the tumor cells as well as the immune system, in which case immune checkpoint inhibitors are used in combination with chemotherapy or targeted therapies. Likewise, in autoimmune diseases, the combination of biologics with small-molecule inhibitors can be more effective in treating the disease by counteracting various components of the overactive immune system. The combination therapies have a massive potential to surmount the resistance mechanisms, as well as more durable treatment responses.

**Table 1: Key Components of Signal Transduction**

Component	Description	Examples
Ligands	Molecules that bind to receptors, initiating the signaling process.	Drugs, hormones, neurotransmitters
Receptors	Proteins that recognize ligands and undergo conformational changes to trigger signaling cascades.	GPCRs, ion channels, nuclear receptors
Second Messengers	Small molecules that amplify the signal within the cell.	cAMP
Effector Proteins	Proteins activated or inhibited by second messengers that mediate the cellular response.	Kinases, transcription factors, ion channels

**Table 2: Types of G-Protein-Coupled Receptor (GPCR) Pathways**

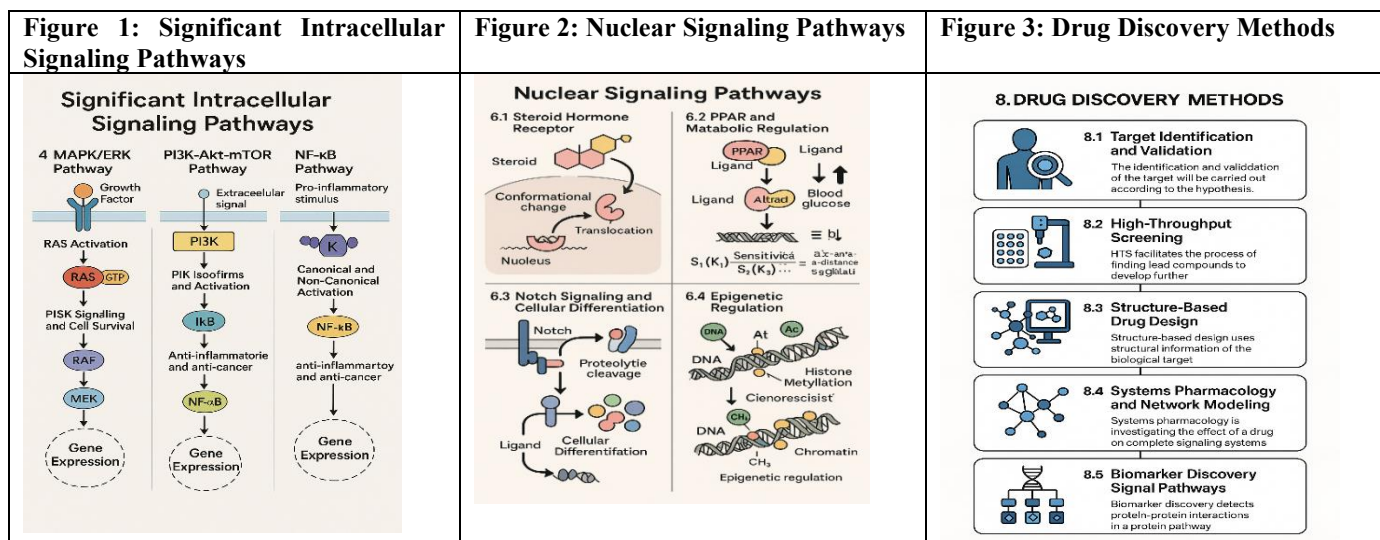
GPCR Pathway Type	Main Function	Examples of Signaling Molecules
Gs	Activates adenylate cyclase, increases	cAMP
Gi	Inhibits adenylate cyclase, decreases	IP3, DAG, PKC
Gq	Stimulates phospholipase C (PLC), producing IP3 and DAG, which regulate calcium release and PKC activation.	IP3, DAG, PKC

**Table 3: Types of Ion Channels Involved in Signal Transduction**

Ion Channel Type	Mechanism	Role in Signaling	Examples of Disorders Treated
Ligand-Gated Ion Channels	Open upon binding of a specific ligand (e.g., neurotransmitters).	Signal transmission in neurons, muscle contraction.	Epilepsy, anxiety, depression
Voltage-Gated Ion Channels	Open and close in response to changes in membrane potential.	Action potential propagation in excitable	Arrhythmias, seizures, pain



			cells.	
Ion Channel Modulators	Drugs that modulate the activity of ion channels	Treatment of ion channel dysfunctions.	Hypertension, chronic pain, arrhythmias	



**Experimental Systems of Signaling Study.**

Molecular biology methods are used to analyze the DNA profiles of individuals from various countries. Molecular biology is employed to determine the DNA profile of people of different nationalities.

Molecular biology methods are tools of analysis of cellular signaling pathways on a genetic and molecular basis. Gene expression analysis, PCR, Western blotting, and RNA sequencing are examples of techniques used to measure presence, quantity, and activity of signaling proteins and receptors among other related molecules. Other technologies like gene knockout or knockdown, like the CRISPR/Cas9 and RNA interference (RNAi), are frequently employed to investigate the activity of a given gene and its contribution to a signaling pathway. These tools are capable of revealing the necessary information about the manner in which signaling molecules can modulate cellular functions and be involved in disease, which allows identifying possible therapeutic targets.

**Imaging-Based Tools**

Imaging-based devices are precious when it comes to visualization of signaling events in living cell or tissue, and can be used to study how signaling molecules interact in real-time. Fluorescence microscopy, confocal microscopy and electron microscopy are techniques that allow one to see the structure of the cells, the localization of their receptors and the movement of signaling molecules in the cells. These tools offer space and time information which is absolutely essential in comprehending the process of activation and regulation of signaling pathways. Imaging technologies can be used to analyze the complexity and dynamics of signaling networks by labelling particular proteins with fluorescent labels or by biosensors which provide reports on cellular processes.

**Live-Cell Imaging:**

Live-cell imaging is an influential method to study the dynamic processes that occur in the cell in real-time, such as the stimulation of the signaling pathways. With the help of modern microscopy methods, including fluorescence microscopy and time-lapse photography, it is possible to trace the activity of signaling molecules, including second messengers, kinases, and transcription factors, in living cells. This method can be used to visualize cell events in real-time, including receptor internalization, protein interactions and gene expression. Live-cell imaging has a critical role in comprehending the way signaling pathways are controlled within their natural context and what role they play in cellular responses to stimuli or drugs.

**Computational and systems biology methods are applied to determine the evolutionary history of seabirds**

Comp systems bio-Computational systems bio-Computational biology applies mathematical models to experimental data, trying to understand complex biological networks (including signaling pathways) in biology. These methods allow scholars to model and forecast the actions of signaling networks at different circumstances. Building computational models provides scientists with an opportunity to study the way signaling pathways interact, how alterations to one pathway can impact other pathways, and how drugs can alter these networks. Network analysis and machine learning tools in the field of systems biology can be used to identify important nodes in signaling pathways, predict drug response, and create individualized approach to medicine. These computational methods allow to have a comprehensive picture of the cellular signaling



and the creation of more effective therapeutic interventions.

### Future Directions

#### Precision Pharmacology: Pathway Profiling

Precision pharmacology entails the use of individual medical interventions in response to the genetic, molecular and cellular characterization of particular patients. Pathway profiling is important in the approach because it helps give information on the dysregulated pathways which mediate a disease in a given patient. Pathway profiling can also be used to select targeted therapies that are most likely to be effective in individual patients by defining the individual alterations in signaling networks that lead to illness. Such an individual approach may enhance the effectiveness of the treatment and mitigate its side effects, as well as create more disease-specifically fitting drugs.

#### AI-Driven Pathway Mapping

The use of artificial intelligence (AI) and machine learning is also used to gain a faster insight into complex biological systems, such as signaling pathways. Pathway mapping with AI It uses computational models and large data of biology to discover novel knowledge about the interactions among signaling pathways, the way diseases pertain to them, and the way that drugs can be used to influence them. Using large quantities of experimental data, AI can assist in determining new drug targets, predicting pathway behavior and discovering unknown links among genes, proteins, and diseases. Such a strategy is bound to make drug discovery and development efficient and data-centric.

#### Multi-Target and Polypharmacology Approaches: After recognizing the issues with monotherapy, researchers have pursued alternative medications that can be employed alongside the therapy to manage the disease

Disease complication, particularly chronic and multifactorial diseases such as cancer, neurodegenerative and metabolic diseases may necessitate simultaneous modulation of multiple targets. Multi-target and polypharmacology Multi-target and polypharmacology approaches seek to develop drugs which engage more than one molecular target in a signaling network. This approach contributes to the high efficacy of the treatment process as it considers many details of the pathology of diseases and eliminates the problem of drug resistance. The side effects can also be less commonly experienced by polypharmacological drugs due to the balance in the effects on different targets. These methods signify a transition away of the old-fashioned single-target drug design to more comprehensive methods that are more representative of the character of biological systems.

#### People, in general, prefer using subjective predictive control to interpret their surroundings

NGP Pathway-drug therapies involve developing drugs that have a high degree of specificity in regulating particular signaling pathways that contribute to disease pathways, as well as enhancing efficacy and limiting off-target activity. The recent technology surrounding drug discovery, such as the high-throughput screening, structural biology and computational modeling are making it possible to produce highly selective drugs, which have the potential to attack specific elements of signaling pathways. These therapeutics involve small molecules, biologic drugs, and RNA-based drugs which can inhibit or activate critical proteins in one or a signaling cascade. Next-generation therapeutics will employ more targeted pathways modulation to offer improved therapy to diseases with intricate signaling defects, including cancer, autoimmune disease, and neurodegenerative illnesses.

### CONCLUSION

Cellular signaling is a dynamic process and a complicated process that regulates a broad spectrum of biological processes. Significant ideas in signaling are receptor activation, second messenger systems, protein kinase cascades and gene expression. Different classes of receptors that include GPCRs, RTKs, and ion channels when they bind their ligands trigger intracellular signaling. These signaling events are reinforced by the production of second messengers such as camp, calcium ions, and IP3, which will activate effector proteins to spur cellular responses. The signaling pathways are important to understand in deriving the molecular pathogenesis of disease and finding potential therapeutic targets. Drug discovery involves the study of signal pathways. The identification of signaling molecules and signaling pathways that are responsible in disease helps the researchers to come up with a targeted therapy that specifically modulates these pathways to bring back the homeostasis of the cells. The development of molecular biology, imaging and computational modeling technologies has led to increased understanding of the complex networks of the signaling events that regulate cell behavior. Improved treatment with reduced side effects through more precise targeting of individual components of these pathways using small molecules, biologics and nucleic-acid-based therapies is a possibility, which makes signaling pathways an important target of contemporary drug discovery. Pathway-based therapies are the future of pharmacology in which medicines are developed to act on specific signaling pathways involved in disease development. The methodology is an alternative to the conventional one-target-one-drug paradigm and is based on the complexity of biological systems, which involve simultaneous interactions of several components of signaling cascades. This change is being propelled by the growing fields of systems pharmacology, AI-informed pathway mapping and personalized medicine and is now making therapies based on the molecular profiles of



individual patients possible. Passing through the modulation of whole signaling networks, pathway-specific therapeutics are likely to be used in the future to treat

complex diseases such as cancer, neurodegenerative disorders and metabolic diseases with increased effectiveness and reduced side effects.

## REFERENCES

1. Tian, X., Wang, L., Zhang, L., Chen, X., Wang, W., Zhang, K., et al. (2025). New discoveries in therapeutic targets and drug development pathways for type 2 diabetes mellitus under the guidance of precision medicine. *European Journal of Medical Research*, 30.
2. Katoh, K. (2025). Integrin and its associated proteins as a mediator for mechano-signal transduction. *Biomolecules*, 15(2), 166.
3. Chen, H., Zhou, S., Ngocho, K., Zheng, J., He, X., Huang, J., et al. (2024). Oriented triplex DNA as a synthetic receptor for transmembrane signal transduction. *Nature Communications*, 15.
4. Ruta, V., Pagliarini, V., & Sette, C. (2021). Coordination of RNA processing regulation by signal transduction pathways. *Biomolecules*, 11(10), 1475.
5. Zhang, M., Chen, T., Lu, X., Lan, X., Chen, Z., & Lu, S. (2024). G protein-coupled receptors (GPCRs): Advances in structures, mechanisms and drug discovery. *Signal Transduction and Targeted Therapy*, 9.
6. Dahlgren, C., Björkman, L., Sundqvist, M., Mårtensson, J., Wu, Y., Forsman, H., et al. (2022). G protein coupled pattern recognition receptors expressed in neutrophils: Recognition, activation/modulation, signaling and receptor regulated functions. *Immunological Reviews*, 314, 69–92.
7. Liu, N., Wang, Y., Liu, S., & Li, T. (2021). G-Protein Coupled Receptors (GPCRs) in insects—A potential target for new insecticide development. *Molecules*, 26(10), 2993.
8. Ren, H., Ou, Q., Pu, Q., Lou, Y., Yang, X., Han, Y., et al. (2024). Comprehensive review on bimolecular fluorescence complementation and its application in deciphering protein–protein interactions in cell signaling pathways. *Biomolecules*, 14(7), 859.
9. Benedik, N. S., Proj, M., Steinebach, C., Sova, M., & Sosič, I. (2025). Targeting TAK1: Evolution of inhibitors, challenges, and future directions. *Pharmacology & Therapeutics*, 267, 108810.
10. Deng, Z., Fan, T., Xiao, C., Tian, H., Zheng, Y., Li, C., et al. (2024). TGF- $\beta$  signaling in health, disease, and therapeutics. *Signal Transduction and Targeted Therapy*, 9.
11. Corneth, O. B. J., Neys, S. F. H., & Hendriks, R. W. (2022). Aberrant B cell signaling in autoimmune diseases. *Cells*, 11(21), 3391.
12. Li, Q., Geng, S., Luo, H., Wang, W., Mo, Y.-Q., Luo, Q., et al. (2024). Signaling pathways involved in colorectal cancer: Pathogenesis and targeted therapy. *Signal Transduction and Targeted Therapy*, 9.
13. Su, J., Song, Y., Zhu, Z., Huang, X., Fan, J., Qiao, J., et al. (2024). Cell–cell communication: New insights and clinical implications. *Signal Transduction and Targeted Therapy*, 9.
14. Choi, S., Cho, N., & Kim, K. K. (2023). The implications of alternative pre-mRNA splicing in cell signal transduction. *Experimental & Molecular Medicine*, 55(1), 755–766.
15. Crul, T., & Maléth, J. (2021). Endoplasmic reticulum-plasma membrane contact sites as an organizing principle for compartmentalized calcium and cAMP signaling. *International Journal of Molecular Sciences*, 22(9), 4703.
16. Obsilova, V., & Obsil, T. (2022). Structural insights into the functional roles of 14-3-3 proteins. *Frontiers in Molecular Biosciences*, 9.
17. Wang, D., Chen, H., Jing, J., Liu, G., Ye, Z., & Meng, Y. (2024). The configuration of GRB2 in protein interaction and signal transduction. *Biomolecules*, 14(3), 259.
18. Qin, G., Liang, Y., Fang, X., & Xu, J. (2023). Single-molecule imaging reveals differential AT1R stoichiometry change in biased signaling. *International Journal of Molecular Sciences*, 25(1), 374.
19. Liu, G., Ma, X., Yang, H., Wang, L., Huang, S., Chen, W., et al. (2021). DNA-based artificial signaling system mimicking the dimerization of receptors for signal transduction and amplification. *Analytical Chemistry*, 93(23), 13807–13814.
20. Govorova, I. A., Nikitochkina, S. Y., & Vorotelyak, E. A. (2024). Influence of intersignaling crosstalk on the intracellular localization of YAP/TAZ in lung cells. *Cell Communication & Signaling*, 22.
21. Kramer, M. M., Weber, W., Lataster, L., & Radziwill, G. (2021). Optogenetic approaches for the spatiotemporal control of signal transduction pathways. *International Journal of Molecular Sciences*, 22(10), 5300.
22. Liccardo, F., Luini, A., & Di Martino, R. (2022). Endomembrane-based signaling by GPCRs and G-proteins. *Cells*, 11(3), 528.
23. Chaudhary, P. K., & Kim, S. (2021). An insight into GPCR and G-proteins as cancer drivers. *Cells*, 10(12), 3288.
24. Zhu, M., Li, X., Zhen, Z., Zheng, Y., Yang, J., Zhang, K., et al. (2022). The cAMP-PKA signaling pathway regulates hyphal growth, conidiation, trap morphogenesis, stress tolerance, and autophagy in *Arthrobotryx oligospora*. *Environmental Microbiology*, 24(12), 6524–6538.
25. Seyedabadi, M., Gharghabi, M., Gurevich, E. V., & Gurevich, V. V. (2021). Receptor-arrestin interactions: The GPCR perspective. *Biomolecules*, 11(2), 218.



26. Conflitti, P., Lyman, E., Sansom, M. S. P., Hildebrand, P. W., Gutiérrez-De-Terán, H., Carloni, P., et al. (2025). Functional dynamics of G protein-coupled receptors reveal new routes for drug discovery. *Nature Reviews Drug Discovery*, 24(3), 251–275.
27. Puranik, N., Jung, H., & Song, M. (2024). SPROUTY2, a negative feedback regulator of receptor tyrosine kinase signaling, associated with neurodevelopmental disorders: Current knowledge and future perspectives. *International Journal of Molecular Sciences*, 25(20), 11043.
28. Onorato, A., Guida, E., Colopi, A., Dolci, S., & Grimaldi, P. (2024). RAS/Mitogen-Activated Protein Kinase Signaling Pathway in Testicular Germ Cell Tumors. *Life*, 14(3), 327.
29. Wu, X., Liu, Z., & Liao, W. (2021). The involvement of gaseous signaling molecules in plant MAPK cascades: Function and signal transduction. *Planta*, 254, 37.
30. Tulpule, A., Neel, D. S., Makhija, S., Menon, S., Heslin, A., Allegakoen, H. R., et al. (2021). Kinase-mediated RAS signaling via membraneless cytoplasmic protein granules. *Cell*, 184(14), 2649–2664.e18.
31. Kwon, J. J., & Hahn, W. C. (2021). A leucine-rich repeat protein provides a SHOC2 the RAS circuit: A structure-function perspective. *Molecular and Cellular Biology*, 41(24).
32. Yadav, M., Sharma, A., Patne, K., Tabasum, S., Suryavanshi, J., Rawat, L., et al. (2025). AXL signaling in cancer: From molecular insights to targeted therapies. *Signal Transduction and Targeted Therapy*, 10.
33. Jiang, Z., Gu, Z., Yu, X., Cheng, T., & Liu, B. (2024). Research progress on the role of bypass activation mechanisms in resistance to tyrosine kinase inhibitors in non-small cell lung cancer. *Frontiers in Oncology*, 14.
34. Tomuleasa, C., Tigiu, A.-B., Munteanu, R., Moldovan, C.-S., Kegyes, D., Onaciu, A., et al. (2024). Therapeutic advances of targeting receptor tyrosine kinases in cancer. *Signal Transduction and Targeted Therapy*, 9.
35. Al-Ghabkari, A., Huang, B., & Park, M. (2024). Aberrant MET receptor tyrosine kinase signaling in glioblastoma: Targeted therapy and future directions. *Cells*, 13(3), 218.
36. Ebrahimi, N., Hamblin, M. R., Baziyar, P., Ghaderi, H., Ghanaatian, M., Aref, A. R., et al. (2023). Receptor tyrosine kinase inhibitors in cancer. *Cellular and Molecular Life Sciences*, 80(1), 47–29.
37. Maity, P., Chatterjee, J., Samarbakhsh, A., Joshi, G., Patil, K. T., Kumar, R., et al. (2023). Targeting the epidermal growth factor receptor with molecular degraders: State-of-the-art and future opportunities. *Journal of Medicinal Chemistry*, 66(8), 3135–3172.
38. Liu, H., Weng, J., Huang, C. L.-H., & Jackson, A. P. (2024). Voltage-gated sodium channels in cancers. *Biomarker Research*, 12.
39. Palmisano, V. F., Anguita-Ortiz, N., Faraji, S., Nogueira, J. J. (2024). Voltage-gated ion channels: Structure, pharmacology and photopharmacology. *ChemPhysChem*, 25.
40. Jiang, D., Zhang, J., & Xia, Z. (2022). Structural advances in voltage-gated sodium channels. *Frontiers in Pharmacology*, 13.
41. Liongue, C., Ward, A. C., Basheer, F., & Ratnayake, T. (2024). Janus Kinase 3 (JAK3): A critical conserved node in immunity disrupted in immune cell cancer and immunodeficiency. *International Journal of Molecular Sciences*, 25(5), 2977.
42. Puigdevall, L., Michiels, C., Stewardson, C., Dumoutier, L. (2022). JAK/STAT: Why choose a classical or an alternative pathway when you can have both? *Journal of Cellular and Molecular Medicine*, 26(6), 1865–1875.
43. Druszczyńska, M., Godkowicz, M., Kulesza, J., Wawrocki, S., & Fól, M. (2022). Cytokine receptors—regulators of antimycobacterial immune response. *International Journal of Molecular Sciences*, 23(3), 1112.
44. Yoshimura, A., Mise-Omata, S., Ito, M., & Ando, M. (2021). SOCS: Negative regulators of cytokine signaling for immune tolerance. *International Immunology*, 33(6), 711–716.
45. Stratiievska, A., Koh, D.-S., Naves, L. A., Raza, M., Carlson, S., Swanson, T. M., et al. (2024). Genetic code expansion, click chemistry, and light-activated PI3K reveal details of membrane protein trafficking downstream of receptor tyrosine kinases. *eLife*, 12.
46. Ham, H., Berchiche, Y. A., Soldatos, A., Jin, T., Loid, P., Watts, V. J., et al. (2024). Germline mutations in a G protein identify signaling cross-talk in T cells. *Science*, 385.
47. Ma, X.-Y., Chen, M.-M., & Meng, L.-H. (2024). Second messenger 2'3'-cyclic GMP-AMP (2'3'-cGAMP): The cell autonomous and non-autonomous roles in cancer progression. *Acta Pharmacologica Sinica*, 45(6), 890–899.
48. Pikor, D., Hurla, M., Słowikowski, B., Szymanowicz, O., Poszwa, J., Banaszek, N., et al. (2024). Calcium ions in the physiology and pathology of the central nervous system. *International Journal of Molecular Sciences*, 25(23), 13133.
49. Papa, A., Marx, S. O., & Kushner, J. (2024). Adrenergic regulation of calcium channels in the heart. *Annual Review of Physiology*, 84, 285–306.
50. O'Day, D. H. (2024). The complex interplay between toxic hallmark proteins, calmodulin-binding proteins, ion channels, and receptors involved in calcium dyshomeostasis in neurodegeneration. *Biomolecules*, 14(2), 173.



51. Gorobets, O., Zablotkii, V., Gorobets, S., & Polyakova, T. (2024). Modulation of calcium signaling and metabolic pathways in endothelial cells with magnetic fields. *Nanoscale Advances*, 6(2), 1163–1182.
52. Xu, H., & Van Remmen, H. (2021). The sarcoendoplasmic reticulum calcium ATPase (SERCA) pump: A potential target for intervention in aging and skeletal muscle pathologies. *Skeletal Muscle*, 11.
53. Boczek, T., Mackiewicz, J., Zylinska, L., Lisek, M., Sobolczyk, M., Guo, F., et al. (2021). Crosstalk among calcium ATPases: PMCA, SERCA, and SPCA in mental diseases. *International Journal of Molecular Sciences*, 22(6), 2785.
54. Kaffe, E., Tisi, A., Magkrioti, C., Aidinis, V., Mehal, W. Z., Flavell, R. A., et al. (2023). Bioactive signaling lipids as drivers of chronic liver diseases. *Journal of Hepatology*, 80(2), 140–154.
55. Chiurchiù, V., Sancesario, G., Siffeti, H., Fazio, F., Mercuri, N. B., Saracini, S., et al. (2022). Lipidomics of bioactive lipids in Alzheimer's and Parkinson's diseases: Where are we? *International Journal of Molecular Sciences*, 23(16), 6235.
56. Cockcroft, S. (2021). Mammalian lipids: Structure, synthesis, and function. *Essays in Biochemistry*, 65, 813–845.
57. Yamaguchi, A., Botta, E., & Holinstat, M. (2022). Eicosanoids in inflammation in the blood and the vessel. *Frontiers in Pharmacology*, 13.
58. Bosma, K. J., Kaiser, C. E., Gannon, M., & Kimple, M. E. (2022). Effects of arachidonic acid and its metabolites on functional beta-cell mass. *Metabolites*, 12(5), 342.
59. Regulska, M., Basta-Kaim, A., Trojan, E., Szuster-Głuszczak, M., & Leśkiewicz, M. (2021). The emerging role of the double-edged impact of arachidonic acid-derived eicosanoids in the neuroinflammatory background of depression. *Current Neuropharmacology*, 19(3), 278–293.
60. Yamazaki, T., Cable, E. E., & Schnabl, B. (2025). Peroxisome proliferator-activated receptor delta and liver diseases. *Hepatology Communications*, 9.

