

Reprogramming the Immune System: The Science Behind Modern Immunotherapy

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Abstract

Chemotherapy has long been a cornerstone of cancer treatment, offering life-saving potential for millions. Yet its limitations—non-specific targeting, severe side effects, and variable efficacy—have prompted researchers to seek smarter, more personalized approaches. Enter nanotechnology, artificial intelligence (AI), and precision medicine: three transformative forces poised to redefine chemotherapy and usher in a new era of cancer care. Chemotherapy is evolving—from a one-size-fits-all approach to a sophisticated, personalized, and adaptive therapy. Nanotechnology delivers drugs with pinpoint accuracy, AI guides decision-making with unprecedented insight, and precision medicine ensures that treatment fits the patient, not the other way around. Together, these technologies are not just enhancing chemotherapy—they're redefining it. The future of cancer care is smarter, safer, and more humane. And it's already beginning

Keywords: Immunotherapy • Immune System • Cancer Treatment

Introduction

Conventional chemotherapy works by attacking rapidly dividing cells, which includes cancer cells—but also healthy cells in the bone marrow, digestive tract, and hair follicles. This lack of specificity leads to debilitating side effects such as nausea, fatigue, immunosuppression, and hair loss. Moreover, tumors often develop resistance to chemotherapy, rendering treatment ineffective over time. These challenges have catalyzed a shift toward more targeted, adaptive, and data-driven therapies—where chemotherapy is no longer a blunt instrument, but a precision-guided tool [1].

Nanotechnology involves manipulating materials at the scale of nanometers—one-billionth of a meter. According to MDPI's Pharmaceuticals, nanoparticle-mediated systems are already showing promise in overcoming drug resistance and enhancing site-specific delivery in various cancers. In oncology, nanoparticles

are engineered to deliver chemotherapy drugs directly to tumor cells, minimizing damage to healthy tissue [2].

According to a review in *Frontiers in Medical Technology*, nanoparticle-mediated drug delivery significantly improves bioavailability and reduces systemic toxicity, making chemotherapy more tolerable and effective [3].

Precision medicine aims to customize treatment based on a patient's genetic makeup, tumor profile, and lifestyle factors. Despite these challenges, the potential benefits far outweigh the risks, especially as technologies become more scalable and affordable. In chemotherapy, this means selecting drugs and dosages that are most likely to work for a specific patient [4].

Nanotechnology and AI are integral to precision medicine. The future of chemotherapy lies in integration. Researchers are exploring hybrid approaches that combine nanotechnology, AI, and precision medicine with other modalities like immunotherapy and radiation. Together, they enable the development of "smart" chemotherapy—where treatment is not only targeted but also dynamically adjusted based on real-time data [5].

Conclusion

As cancer rates rise globally, especially in low- and middle-income countries, scalable innovations are urgently needed. AI and nanotechnology offer the potential to democratize cancer care—making advanced chemotherapy accessible, efficient, and equitable. International collaborations, open-access research, and public-private partnerships will be key to translating these breakthroughs from lab to clinic. Chemotherapy is evolving—from a one-size-fits-all approach to a sophisticated, personalized, and adaptive therapy. Nanotechnology delivers drugs with pinpoint accuracy, AI guides decision-making with unprecedented insight, and precision medicine ensures that treatment fits the patient, not the other way around. Together, these technologies are not just enhancing chemotherapy—they're redefining it. The future of cancer care is smarter, safer, and more humane. And it's already beginning

References

1. Nauman, Muhammad, and Stephen Leslie. "Nonseminomatous testicular tumors." *StatPearls* (2023).
2. Williamson, Sean R., et al. "The World Health Organization 2016 classification of testicular germ cell tumours: a review and update from the International Society of Urological Pathology Testis Consultation Panel." *Histopathology* 70.3 (2017): 335-346.
3. Bulic-Jakus, Floriana, et al. "Teratoma: from spontaneous tumors to the pluripotency/malignancy assay." *Wiley Interdiscip Rev: Dev Biol.* 5.2 (2016): 186-209.
4. Shaffrey, Mark E., et al. "Maturation of intracranial immature teratomas: Report of two cases." *J Neurosurg.* 85.4 (1996): 672-676.
5. Mahajan, Swati, et al. "World Health Organization classification of tumors of the central nervous system 5th Edition (WHO CNS5): what's new?" *Indian J Pathol Microbiol.* 65.Suppl 1 (2022): S5-S13.

5. Packer, Roger J., Bruce H. Cohen, and Kathleen Cooney. "Intracranial germ cell tumors." *Oncologist* 5.4 (2000): 312-320.

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