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Multiwalled carbon nanotubes as nanomaterial tool in the management of prostate cancer: A possible nanoformulation approach

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Abstract

Prostate cancer (PCa) is one of the leading diseases in men all over the world caused due to over-expression of PSMA (Prostate Specific Membrane Antigen). Currently, the detection and targeting of PCa is one of the major challenges in the prostate gland. Therefore, Bruton Tyrosine Kinase Inhibitor molecules like Ibrutinib (Ibr) loaded with nanomaterials like Multi walled Carbon nanotubes (MWCNTs), which has good Physico-chemical properties may be the best regimen to treat PCa. In this strategy, the chemically modified MWCNTs have excellent 'Biosensing' properties makes it easy for detecting PCa without fluorescent agent and thus targets particular site of PCa. In the present study, Ibr/MWCNTs conjugated with T₃₀ oligonucleotide mayselectively target and inhibit PSMA thereby reduce the over-expression in PCa. Hence, the proposed formulation design can extensively reduce the dosage regimen without any toxic effect. Additionally, the present hypothesis also revealed the binding mode of Ibrin the catalytic pocket of PSMA by *in silico* method. Therefore, we presume that if this hypothesis proves correct, it becomes an additional novel tool and one of the conceivable therapeutic options in treating PCa.

Keywords:Prostate cancer, Drug Delivery, Insilico studies, Carbon nanotubes

Abbreviations

PCa, Prostate cancer; PSMA, prostate specific membrane antigen; GCPII, glutamate carboxypeptidase II; AR, androgen receptor; IGF-1, insulin-like growth factor-1; T, testosterone; DHT, dihydrotestosterone; SHBG, sex hormone binding globulin; BTK,

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Bruton's tyrosine kinase; BCR, B-cell receptor; Ibr, Ibrutinib;LnCaP, lymph node carcinoma of the prostate; DU145, human prostate cancer cell line; XID, X-linked immune deficiency; PLCg2, Phospholipase C gamma 2; MDR, multi-drug resistance; MWCNTs, Mutiwalled carbon nanotubes; T₃₀ ODN, T₃₀oligonuclotide; MM-GBSA, molecular mechanics generalized born surface area; PDP, protein data bank; OPLS3e, optimized potential for liquid simulations.

1.Introduction

Prostate cancer (PCa) is one of the most common cancer type in men and most prevelent in western countries like Europe, the USA, and worldwide. According to globocon survey-2018, the rate of affected people increasing to 3.8 million and the mortality rate risesto 3.8%. The mortality and prevalence level of PCaincreasing due to lifestyle changes, environmental factors and many genetic factors. Therefore, PCa has become one of the major life-threatening diseases compared with other cancer diseases. Therefore, PCa is considered to be one of the life-threatening diseases as like other cancer types. A, 5

The Pathophysiology of PCa involves the over-expression of either prostate-specific membrane antigen(PSMA;Type II membrane protein) or glutamate carboxypeptidase II (GCPII). The expression of PSMA increases due to the metabolism of androgen receptor (AR) and modification of insulin-like growth factor-1 (IGF-1). Moreover, the primary risk factor of PCais associated with increased levels of sex hormone-like testosterone(T), dihydrotestosterone (DHT) and decreased levels of plasma level in sex hormone binding globulin (SHBG)⁶⁻⁹, the cause behind these are believed to bes life style changes , food habits (obesity) and genetic factors, which encompasses mechanism variations due to life style changes, food habits (obesity) and genetic factors.

Recently, Bruton's tyrosine kinase (BTK) inhibitors have been reported to play a major role in the radiosensitization of PCa. 17 Similarly, B-cell receptor(BCR) pathways were also reported to be involved in the implication of multiple signal transduction pathways, which include modifiable, survival, activation, proliferation, and segregation of B lymphocytes (hematopoietic cells). 18-22 Ibrutinib (Ibr), a BTK inhibitor, involves inhibition of multiple tyrosine kinase receptors, which is proven by *in vitro* cell line and *in vivo* xenograft studies in various cancer models likeLnCaP and DU145. Also, similar studies reveal that human prostate cancer cells and mutations in the BTK gene lead to B cell deficiencywhich further exhibited X-linked gamma globulinemia in humans,X-linked immune deficiency (XID) in micefrom multiple organs as well. 20 The Ibr comprises good potential as radio-sensitizing effects for 'BTK-BCR's signaling pathways. 18,19 Furthermore, Ibr binds to Cys481 of BTK, thereby

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inhibits kinase activity in the prostate gland.²³Generally, it also inhibits autophosphorylation activity, PLCg2 activation, enzyme inactive conformation and other downstream substrates of BTK in B cells.²⁴⁻²⁶

The main objective of PCa treatment is to endorse the higher concentration of drug in the PSMA. The drawbacks of the prostate gland are linked with tightly packed epithelial cells and thus over-expressed with multi-drug resistance (MDR) proteins, making it a potent barrier for the entry of chemicals and other biomolecules. Also, over-expression of PSMA leads to prostate cancer and treatment requires high concentration, which may further result in unwanted side effects and patient non-compliance. Hence to overcome the above mentioned problems/drawbacks, biomaterials like multiwalled carbon nanotubes (MWCNTs) loaded with Ibr could be a therapeutic approach to en route the increasing bioavailability with less toxic effect due to their surface area and Physico-chemical properties.

1.1 Why MWCNTs for diagnosis and detection of PCa?

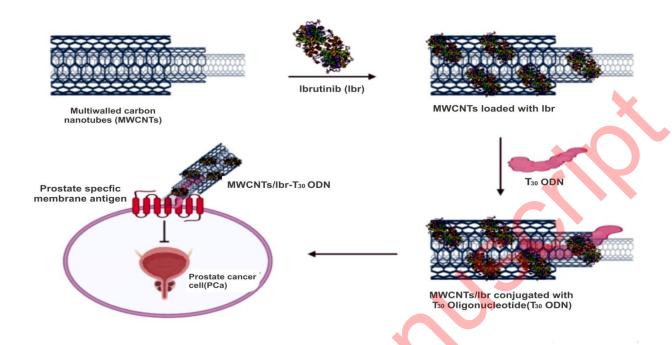
MWCNTs are being reported for different clinical approaches owing to their unique properties for detection and diagnosis. MWCNTs involve in a most important role for sensing activity-based diagnosis. Prostate-Specific Membrane Antigen (PSMA) detection is very complicated in the Prostate gland. MWCNTs acts as the most important biosensor for detecting the PSA biomarker level by using various detection methods like Photothermal therapy(PTT) and Photodynamic Therapy (PDT). The biosensor is one of the most excellent analytical tool for the detection of biomaterial samples concerning properties like functional group, structure and bio composition. Furthermore, the bio-composition is implicated in the process of electrical signal translation from the nano materials. ²⁷⁻³⁰Also, MWCNTs does not require any fluorescent agent for detection processand alsoMWCNTs are chemically modified with electrode for Biomedical imaging. ³¹⁻³⁴Besides, it also exhibits admirable optical properties to add to their unique property.

Generally, anticancer drug molecules contain a various mechanism of action with therapeutic effect is ascribed to the cytotoxicity effect but also influence killing the normal cells. So, MWCNTs based drug carrierimprove the drawback of the above-mentioned treatments by altering "Biodistribution and Pharmacokinetic" (Bd &Pk)and also improves the pharmacological properties. MWCNTs render good drug-carryingcapacity totarget site. Moreover, MWCNTs loaded drug molecules enhances the therapeutic effects by avoiding various factor like first metabolism reaction (*Invivo process*) and chemical instability.

2. Hypothesis

The present study is to provide an alternative combination of treatments for prostate cancer patients. For this purpose, here we hypothesize MWCNTs loaded with Ibr drug conjugated with T₃₀oligonuclotide (T₃₀ ODN)used as a carrier to suppress the PSMA, so that it can easily target circulating tumor DNA molecule. Henceforth the drugs incorporated could be effectively delivered to the target site of the prostate. We also presume that targeting the androgen receptor could help deliver the drug and suppress it. Furthermore, MWCNTs act as a biosensor and does not require any additional fluorescent agent for bioimaging purpose. In this strategy, MWCNTs-Ibr conjugates with ODN can promote the concentration of test product of interest in the prostate gland and may block the over-expression of PSMA. If our hypothesis works, we propose that prostate cancer's effective treatment would be a milestone in fighting against prostate-related issues. In this concept, the preliminary *insilico* studies like molecular docking and binding free energy calculation by molecular mechanics generalized born surface area (MM-GBSA), which revealed the binding pose of Ibr in the catalytic pocket of PSMA. The summary of the hypothesisisillustrated in Figure 1.

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3.1. The implication of the hypothesis:

In this hypothesis, MWCNTs conjugated with oligonucleotide T₃₀ (MWCNTs: ODN T₃₀) can be used to manage prostate cancer. Though many technologies are used to treat the disease, ultimately, they end up with failure. The present treatment helps in extending the mortality, whichdepends on the severity of the condition. Among the different cancers affecting the organs, the prostate gland turns to be an untreatable organ due to the negligible amount of the drugs entering the prostate. Hence, using MWCNTs-Ibr conjugated with T₃₀ oligonucleotides, might significantly influence the drug's placing in the target site. Therefore, it appears as a promising solution to penetrate cells and successfully deliver biomolecules. Moreover, the use of MWCNTs as a gene carrier is extensive and is currently growing therefore, the efficiency of the carrier in treating the disease could be enhanced.

3.2. Oligonucleotides inhibit prostate cancer:

three-dimensional (3D) structures ODN folds into specific among dissociationconcentrations in the Pico to Nanomolar range.³⁵ Moreover, in peculiarity to other nucleic acid molecular probes, aptamers interact and bind to their targets through structural identification. Likewise, ODN recognizes explicitlyin a wide range of targets, such as ions, drugs, peptides, toxins, bacteria, viruses, cells, and even tissues, 36-42 which weremostly concerned in the potential combination therapy of anti-androgen receptor (AR) in PCa, 43 The *invitro* and *invivo* anticancer activity of several ODN are in pipeline and demonstrated to be potential. 44-48 Many reports suggest that ODN involves different mechanisms in various organ sites. However, T₃₀ODN may significantly reduce the growth and survival of androgenindependent prostate tumor cells. Henceforth, it also promotes high bioavailability and reduces the toxicity and cell viability for PCa cell lines.⁴⁹

3.3. Justification of Hypothesis –insilicostudy

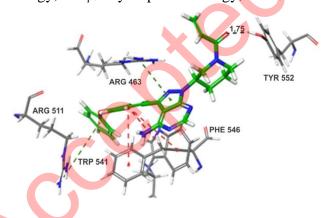
The 3D crystal structure of human glutamate carboxypeptidase II (GCPII) in complex with a phosphoramidite inhibitor (4LQG.pdb) was prepared using the Protein preparation wizard of

Schrodinger 2019-2.^{50,51}Bond orders were refined by the addition of missing hydrogens, loops and sidechains. Protonation and tautomeric states for acidic and basic residues were generate at pH 7.0. Protein minimization was performed using the OPLS3e (optimized potential for liquid simulations) molecular force field⁵²with RMSD of crystallographic heavy atoms kept at 0.30 Å. The structure of Ibr was downloaded from PubChem and LigPrep of Schrödinger suite 2019-2. Low energy conformers were generated, and energy minimized using the OPLS3e force field. 48A grid box was generated at the centroid of the co-crystal ligand keeping the Vander Waals scaling of 0.8 for the receptor with 0.15 as the partial charge cut-off. Using default parameters of glide, 53 the LigPrep generated low energy poses were dockedinto the active site of 4LQG.pdbin extra precision mode (XP). The post docking minimization was performed using Prime MM-GBSA (Schrodinger 2019-2), which combines the Generalized-Born/Surface Area (GB/SA) continuum solvent model OPLS3e force field model in calculating enthalpy and entropy contribution towards the ligand-protein complex. The glide and MM-GBSA energy results were mentioned in table 1. From the illustrated figure 2, the binding pose of Ibr (gscore:-5.60 kcal/mol; Δ_{Bind} : -60.36 kcal/mol) formed the majority of hydrophobic interactions with Arg463, Arg511, Trp541, and Phe546. The pyrazole ring of pyrazolopyrimidinering and phenyl ring formed π - π cation interactions with Arg463 and Arg511, respectively. The phenoxy ring attached at the third position of the pyrazolopyrimidine ring was positioned by forming stable π-πinteractions with two hydrophobic residues Trp541 and Phe546. One hydrogen bond was observed between the carbonyl oxygen of the Ibrandtheside chain of Tyr552.

Table:1 Glide and MMGB-SA energy values (kcal/mol) of Ibr in the catalytic pocket of 4LQG.pdb.

Compound	¹ gscore	² energy	$^{3}\Delta$ Coul	$^4\Delta_{ m vdW}$	$^5\Delta_{ m Lipo}$	$^6\Delta_{ m Bind}$
Ibrutinib	-5.60	-49.03	-41.76	-36.06	-28.02	-66.36

¹gscore: glide gscore; ²energy: glide energy; ³Δ _{Coul}:Coulomb energy; ⁴Δ_{vdW}: Vander Waal energy; ⁵Δ_{Lipo}: Hydrophobic energy; ⁶Δ_{Bind}: Total binding energy.



4. Results & Discussion:

With the many research banks, works have been carried out in nanotechnology to deliver anticancer drugs via various nanocarrier systems that arrived in many safety issues. Hence it ushers in new challenges with appreciation for safety and ethical aspects. Previous research shows that many new generation drugs and formulations have entered the pharmaceutical market with potent action with highercost and more toxic effects. Hence, the present proposed treatment methods end up with severe side effects and ineffective in many cases, which could be due to the above reasons. Henceforth, In recent years to curb such problems,

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novel/nanoparticulate drug delivery system (NDDS), either coated polymer metal/nucleotides complex, have shown an increase in circulation time in the body and reduces plasma protein adhesion, which has confirmed the enhancement pharmacokinetic(PK)parameters.It also promotes prolonged circulationlife⁵⁴using MWCNTs. Modification in the delivery system, like targeting the particular site, may improve the treatment and biocompatibility efficacy. Earlier reports suggest that the conjugation of MWCNT with antibody possesses the material's cellular uptake capability by prostate stem cell antigen(PSCA) isoverexpressed cancer cells. 55 In current work, the *insilico* studies revealed insights into the binding mode of Ibr in the catalytic pocket of glutamate carboxypeptidase II, where the total binding energy of Ibr was favored by the contribution of Vander wall (-36.06) kcal/mol), Columbic (-41.76 kcal/mol) and lipophilic energies (-28.02 kcal/mol). In this context, we hypothesize the use of nanotechnology as a tool for targeting to the site-specific prostategland, which would be a milestone in fighting against prostate tumor tissues. In addition, we discussed the earlier and most recent studies and clinical approaches of MWCNTs in PCa, both detection via biosensor based system anddiagonsis via DDS. It promises competent treatment in cost valuable way, it showed lowest amount side effects and also capable of decreasing time period. In addition, the new drug molecules remodel by various nanomaterials source. In this strategy, these biomolecules without difficulty interact with cells. Particularly, involvemajor role in targeting and drug delivery (TDD) in both in-vitro and invivomethod.

Ethical issues

Not applicable.

Conflict of interest

There is no conflict of interest.

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References

- Ferlay J, Colombet M, Soerjomataram I, Dyba T, Randi G, Bettio M, et al. Cancer incidence and mortality patterns in Europe: Estimates for 40 countries and 25 major cancers in 2018. *Eur J Cancer* [Internet]. 2018;103:356–87. Available from: https://doi.org/10.1016/j.ejca.2018.07.005
- 2. Siegel RL, Miller KD, Jemal A. Cancer statistics, 2019. CA Cancer J Clin. 2019;69(1):7–34.
- 3. Rawla P. Epidemiology of prostate cancer. *World journal of oncology*. 2019 Apr;10(2):63.
- 4. Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA, Jemal A. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin*. 2018;68(6):394–424.
- 5. Ferlay J, Colombet M, Soerjomataram I, Mathers C, Parkin DM, Piñeros M, Znaor A, Bray F. Estimating the global cancer incidence and mortality in 2018: GLOBOCAN

The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form.

- sources and methods. *International journal of cancer*. 2019 Apr 15;144(8):1941-53.
- 6. Pollard M, Luckert PH. Promotional effects of testosterone and high fat diet on the development of autochthonous prostate cancer in rats. *Cancer Lett.* 1986;32(2):223–7.
- 7. Noble RL. The Development of Prostatic Adenocarcinoma in Nb Rats following Prolonged Sex Hormone Administration. *Cancer Res.* 1977;37(6):1929-1933.
- 8. Pollard M, Luckert PH, Schmidt MA. Induction of prostate adenocarcinomas in Lobund Wistar rats by testosterone. *Prostate*. 1982;3(6):563–8.
- 9. Leav I, Ho SM, Ofner P, Merk FB, Kwan PWL, Damassa D. Biochemical alterations in sex hormone-induced hyperplasia and dysplasia of the dorsolateral prostates of noble rats. *J Natl Cancer Inst*. 1988;80(13):1045–53.
- 10. Hsing AW, Tsao L, Devesa SS. International trends and patterns of prostate cancer incidence and mortality. *International journal of cancer*. 2000 Jan 1;85(1):60-7.
- 11. Parkin DM, Whelan SL, Ferlay J, Teppo L, Thomas DB. Cancer incidence in five continents Volume VIII. *IARC scientific publication*. 2002(155).
- 12. Schottenfeld D, FraumeniJr JF, editors. Cancer epidemiology and prevention. *Oxford University Press*; 2006 Aug 24.
- 13. Pisani P, Parkin DM, Ferlay J. Estimates of the worldwide mortality from eighteen major cancers in 1985. Implications for prevention and projections of future burden. *Int J Cancer*. 1993;55(6):891–903.
- 14. Mettlin C. Changes in patterns of prostate cancer care in the United States: results of American College of Surgeons Commission on Cancer studies, 1974–1993. *The Prostate*. 1997 Aug 1;32(3):221-6.
- 15. Makridakis NM, Ross RK, Pike MC, Crocitto LE, Kolonel LN, Pearce CL, et al. Association of mis-sense substitution in SRD5A2 gene with prostate cancer in African-American and Hispanic men in Los Angeles, USA. *Lancet*. 1999;354(9183):975–8.
- 16. Ross RK, Coetzee GA, Pearce CL, Reichardt JKV, Bretsky P, Kolonel LN, et al. Androgen metabolism and prostate cancer: Establishing a model of genetic susceptibility. *Eur Urol.* 1999;35(5–6):355–61.
- 17. Rowlands M, Holly JMP, Gunnell D. Europe PMC Funders Group Circulating insulinlike growth factors (IGFs) and IGF binding proteins (IGFBPs) in PSA-detected prostate cancer: the large case control study ProtecT. *Cancer Research* 2012;72(2):503–15.
- 18. Eifert C, Wang X, Kokabee L, Kourtidis A, Jain R, Gerdes MJ, Conklin DS. A novel isoform of the B cell tyrosine kinase BTK protects breast cancer cells from apoptosis. *Genes, Chromosomes and Cancer*. 2013 Oct;52(10):961-75.
- 19. Smith CI, Baskin B, Humire-Greiff P, Zhou JN, Olsson PG, Maniar HS, Kjellen P, Lambris JD, Christensson B, Hammarström L. Expression of Bruton'sagammaglobulinemia tyrosine kinase gene, BTK, is selectively down-regulated in T lymphocytes and plasma cells. *The Journal of Immunology*. 1994 Jan 15;152(2):557-65.
- 20. Schmidt U, Boucheron N, Unger B, Ellmeier W. The role of Tec family kinases in myeloid cells. *Int Arch Allergy Immunol*. 2004;134(1):65–78.
- 21. D'Cruz OJ, Uckun FM. Novel Bruton's tyrosine kinase inhibitors currently in development. *Onco Targets Ther*. 2013;6:161–76.
- 22. Rawlings DJ. Bruton's tyrosine kinase controls a sustained calcium signal essential for B lineage development and function. *Clin Immunol*. 1999;91(3):243–53.
- 23. Ruderman EM, Pope RM. More than just B-cell inhibition. Arthritis Res Ther.

The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form.

- 2011;13(4):1-2.
- 24. Eda H, Santo L, Cirstea DD, Yee AJ, Scullen TA, Nemani N, et al. A novel Bruton's tyrosine kinase inhibitor CC-292 in combination with the proteasome inhibitor carfilzomib impacts the bone microenvironment in a multiple myeloma model with resultant antimyeloma activity. *Leukemia* [Internet]. 2014;28(9):1892–901. Available from: http://dx.doi.org/10.1038/leu.2014.69
- 25. Di Paolo JA, Huang T, Balazs M, Barbosa J, Barck KH, Bravo BJ, et al. Specific Btk inhibition suppresses B cell- and myeloid cell-mediated arthritis. *Nat Chem Biol*. 2011;7(1):41–50.
- 26. Huang DW, Sherman BT, Lempicki RA. Bioinformatics enrichment tools: Paths toward the comprehensive functional analysis of large gene lists. *Nucleic Acids Res.* 2009;37(1):1–13.
- 27. Karthik R, Sasikumar R, Chen SM, Vinoth Kumar J, Elangovan A, Muthuraj V, et al. A highly sensitive and selective electrochemical determination of non-steroidal prostate anti-cancer drug nilutamide based on f-MWCNT in tablet and human blood serum sample. *J Colloid Interface Sci* [Internet]. 2017;487:289–96. Available from: http://dx.doi.org/10.1016/j.jcis.2016.10.047
- 28. Farzin L, Sadjadi S, Shamsipur M, Sheibani S. An immunosensing device based on inhibition of mediator's faradaic process for early diagnosis of prostate cancer using bifunctional nanoplatform reinforced by carbon nanotube. *J Pharm Biomed Anal* [Internet]. 2019;172:259–67. Available from: https://doi.org/10.1016/j.jpba.2019.05.008
- 29. Sun X, Li C, Zhu Q, Chen J, Li J, Ding H, et al. A novel ultrasensitive sandwich-type photoelectrochemical immunoassay for PSA detection based on dual inhibition effect of Au/MWCNTs nanohybrids on N-GQDs/CdS QDs dual sensitized urchin-like TiO2. *Electrochim Acta* [Internet]. 2020;333:135480. Available from: https://doi.org/10.1016/j.electacta.2019.135480
- 30. Thamilselvan A, Rajagopal V, Suryanarayanan V. Highly sensitive and selective amperometric determination of BPA on carbon black/f-MWCNT composite modified GCE. *J Alloys Compd* [Internet]. 2019;786:698–706. Available from: https://doi.org/10.1016/j.jallcom.2019.02.020
- 31. Aliakbarinodehi N, De Micheli G, Carrara S. Highly Sensitive Enzymatic MWCNTs-Based Biosensors for Detection of Abiraterone in Human Serum. *Bionanoscience*. 2018;8(2):675–9.
- 32. Kim JP, Lee BY, Lee J, Hong S, Sim SJ. Enhancement of sensitivity and specificity by surface modification of carbon nanotubes in diagnosis of prostate cancer based on carbon nanotube field effect transistors. *Biosens Bioelectron*. 2009;24(11):3372–8.
- 33. Andraka J. Sensors for detection of mesothelin. US Patent, PCT/US2012/068589.2013 Nov 21.
- 34. Koo Y, Shanov VN, Yun Y. Carbon nanotube paper-based electroanalytical devices. *Micromachines*. 2016;7(4):1–9.
- 35. Nimjee SM, Rusconi CP, Sullenger BA. Aptamers: An emerging class of therapeutics. *Annu Rev Med.* 2005;56(1):555–83.
- 36. Parekh P, Tang Z, Turner PC, Moyer RW, Tan W. Aptamers recognizing glycosylated hemagglutinin expressed on the surface of vaccinia virus-infected cells. *Anal Chem.* 2010;82(20):8642–9.
- 37. Sefah K, Tang ZW, Shangguan DH, Chen H, Lopez-Colon D, Li Y, et al. Molecular

- recognition of acute myeloid leukemia using aptamers. Leukemia. 2009;23(2):235-44.
- 38. Bayrac AT, Sefah K, Parekh P, Bayrac C, Gulbakan B, Oktem HA, et al. In vitro selection of DNA aptamers to glioblastoma multiforme. *ACS Chem Neurosci*. 2011;2(3):175–81.
- 39. Bruno JG, Kiel JL. In vitro selection of DNA aptamers to anthrax spores with electrochemiluminescence detection. *Biosens Bioelectron*. 1999;14(5):457–64.
- 40. Kirby R, Cho EJ, Gehrke B, Bayer T, Park YS, Neikirk DP, et al. Aptamer-based sensor arrays for the detection and quantitation of proteins. *Anal Chem.* 2004;76(14):4066–75.
- 41. Shangguan D, Li Y, Tang Z, Cao ZC, Chen HW, Mallikaratchy P, et al. Aptamers evolved from live cells as effective molecular probes for cancer study. *Proc Natl Acad Sci* U S A. 2006;103(32):11838–43.
- 42. Tang Z, Parekh P, Turner P, Moyer RW, Tan W. Generating aptamers for recognition of virus-infected cells. *Clin Chem.* 2009;55(4):813–22.
- 43. Zhang X, Castanotto D, Nam S, Horne D, Stein C. 6BIO Enhances Oligonucleotide Activity in Cells: A Potential Combinatorial Anti-androgen Receptor Therapy in Prostate *Cancer Cells. Mol Ther* [Internet]. 2017;25(1):79–91. Available from: http://dx.doi.org/10.1016/j.ymthe.2016.10.017
- 44. Tran C, Ouk S, Clegg NJ, Chen Y, Watson PA, Arora V, et al. Development of a second-generation antiandrogen for treatment of advanced prostate cancer. *Science* (80-). 2009;324(5928):787–90.
- 45. Attard G, Reid AHM, Yap TA, Raynaud F, Dowsett M, Settatree S, et al. Phase I clinical trial of a selective inhibitor of CYP17, abiraterone acetate, confirms that castration-resistant prostate cancer commonly remains hormone driven. *J Clin Oncol*. 2008;26(28):4563–71.
- 46. Stein CA. Treatment Sequencing in Metastatic Castration-Resistant Prostate Cancer: A Clinical Commentary. *Clin Genitourin Cancer* [Internet]. 2015;13(5):407–9. Available from: http://dx.doi.org/10.1016/j.clgc.2015.05.005
- 47. Antonarakis ES, Lu C, Wang H, Luber B, Nakazawa M, Roeser JC, et al. AR-V7 and Resistance to Enzalutamide and Abiraterone in Prostate Cancer. *N Engl J Med*. 2014;371(11):1028–38.
- 48. Karaki S, Benizri S, Mejías R, Baylot V, Branger N, Nguyen T, et al. Lipidoligonucleotide conjugates improve cellular uptake and efficiency of TCTP-antisense in castration-resistant prostate cancer. *J Control Release* [Internet]. 2017;258:1–9. Available from: http://dx.doi.org/10.1016/j.jconrel.2017.04.042
- 49. Gnanasekar M, Thirugnanam S, Zheng G, Chen A, Ramaswamy K. T-Oligo induces apoptosis in advanced prostate cancer cells. *Oligonucleotides*. 2009;19(3):287–91.
- **50.** Madhavi Sastry G, Adzhigirey M, Day T, Annabhimoju R, Sherman W. Protein and ligand preparation: Parameters, protocols, and influence on virtual screening enrichments. *J Comput Aided Mol Des.* 2013;27(3):221–34.
- 51. Sidhu JS, Sharma S, Singh A, Garg N, Kaur N, Singh N. A naphthalimide-based novel ": Turn-On " fluorescence approach for the determination of uric acid and monitoring of xanthine oxidase activity. *Anal Methods*. 2019;11(32):4190–6.
- 52. Roos K, Wu C, Damm W, Reboul M, Stevenson JM, Lu C, et al. OPLS3e: Extending Force Field Coverage for Drug-Like Small Molecules. *J Chem Theory Comput*. 2019;15(3):1863–74.
- 53. Friesner RA, Murphy RB, Repasky MP, Frye LL, Greenwood JR, Halgren TA, et al. Extra precision glide: Docking and scoring incorporating a model of hydrophobic

The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form.

- enclosure for protein-ligand complexes. J Med Chem. 2006;49(21):6177–96.
- 54. Zhang L, Gu FX, Chan JM, Wang AZ, Langer RS, Farokhzad OC. Nanoparticles in medicine: Therapeutic applications and developments. *Clin Pharmacol Ther*. 2008;83(5):761–9.
- 55. Wu H, Shi H, Zhang H, Wang X, Yang Y, Yu C, et al. Prostate stem cell antigen antibody-conjugated multiwalled carbon nanotubes for targeted ultrasound imaging and drug delivery. *Biomaterials*. 2014;35(20):5369–80.

Figure 1

The schematic illustration of Ibr loaded MWCNTs conjugated with T₃₀ ODN to target particular site of PSMA for inhibiting PCa cell. The MWCNTs generally have good surface area so Ibr molecules easily loaded with MWCNT by covalent bonding and also its act as good carrier for targeting particular site and also MWCNTs having Biosensing property to diagnosis. MWCNTs/Ibr conjugation with T₃₀ODN might significantly influence the placing of the drug in the target site of PSMA. Therefore, it appears as a promising solution to penetrate cancer cells and successfully deliver in Ibr.

Figure 2

3D binding pose of Ibrutinib (Ibr) in the catalytic pocket of PSMA (4LQG.pdb)

The preliminary *insilico* studies like molecular docking and binding free energy calculation by molecular mechanics generalized born surface area (MM-GBSA), whichrevealed the binding pose of Ibr in the catalytic pocket of PSMA.