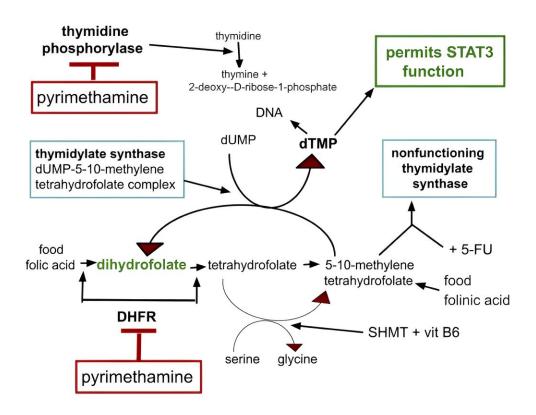


An augmentation to standard treatment of pancreatic ductal adenocarcinoma using five repurposed drugs

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Simplified overview of pyrimethamine effects on the folate cycle and STAT3. D. Credit: 2024 Kast.

In a new paper, researcher Richard E. Kast from IIAIGC Study Center presents the data and rationale for adding five generic non-oncology



drugs from general medical practice to gemcitabine, nab-paclitaxel, a current standard cytotoxic chemotherapy of pancreatic ductal adenocarcinoma.

The research perspective has been <u>published</u> in *Oncoscience* titled, "IPIAD- an augmentation regimen added to standard treatment of pancreatic ductal adenocarcinoma using already-marketed repurposed drugs irbesartan, pyrimethamine, itraconazole, azithromycin, and dapsone."

The regimen, called IPIAD, uses an <u>angiotensin receptor blocker</u> (ARB) irbesartan indicated for treating hypertension, an old antimicrobial drug pyrimethamine indicated for treating toxoplasmosis or malaria, an old antifungal drug itraconazole, an old broad spectrum antibiotic azithromycin, and an old antibiotic dapsone.

"In reviewing selected growth driving systems active in pancreatic ductal adenocarcinoma then comparing these with detailed data on ancillary attributes of the IPIAD drugs, one can predict <u>clinical benefit</u> and slowing growth of <u>pancreatic ductal adenocarcinoma</u> by this augmentation regimen," Kast concludes.

More information: Richard E. Kast, IPIAD- an augmentation regimen added to standard treatment of pancreatic ductal adenocarcinoma using already-marketed repurposed drugs irbesartan, pyrimethamine, itraconazole, azithromycin, and dapsone, *Oncoscience* (2024). DOI: 10.18632/oncoscience.594

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