

## Research Article

# Commentary on Radiation Induced Skin Fibrosis (RISF): Opportunity for Angiotensin II-Dependent Intervention

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Received: August 05, 2024; Accepted: August 12, 2024; Published: August 19, 2024

The publication “Radiation Induced Skin Fibrosis (RISF): Opportunity for Angiotensin II-Dependent Intervention” presents a compelling examination of an emerging therapeutic target for mitigating the adverse effects of radiation therapy. Radiation-induced skin fibrosis is a debilitating condition that manifests as thickened and scarred skin following radiation treatment, often significantly complicating the quality of life for cancer patients status post radiation. We propose a novel dual intervention strategy involving the simultaneous modulation of angiotensin II (Ang II) and reactive oxygen species (ROS) pathways, offering a fresh perspective on how to address this challenging side effect. The study meticulously reviews the pathophysiology of RISF, highlighting how radiation triggers a cascade of fibrotic responses. We elucidate the role of Ang II and ROS activation, for their involvement in various fibrotic processes, in exacerbating skin fibrosis. We argue that the dual role of Ang II and elevated ROS in promoting fibrosis makes it a promising target for therapeutic intervention. This insight is significant, given the current lack of effective treatments for RISF that directly address its underlying mechanisms. We believe that one of the strengths of the publication is its integration of detailed mechanisms pathways with preclinical data and clinical observations. In this manner, we effectively link experimental findings with clinical outcomes, underscoring how Ang II antagonists and ROS inhibition could potentially alter the course of RISF. By referencing both animal models and human studies, the paper builds a robust case for the proposed intervention. This comprehensive approach with detailed figures and a supplemental summary table not only supports the feasibility of targeting both Ang II and ROS but also provides a foundation for potential future clinical trials.

Although the concept of dual targeting Ang II and ROS is innovative, we believe that further publications addressing additional potential limitations and considerations would be valuable. For example, dose range finding studies and the safety of long-term Ang II inhibition in the context of RISF have yet to be fully established. Additionally, we think that further research into personalized approaches, considering the variability in individual responses to radiation and drug interventions, would be beneficial. “Moreover,

future considerations into the broader implications of the proposed dual treatment approach would provide additional guidance. Integrating Ang II inhibitors and targeted antioxidant therapy into standard care protocols for patients undergoing radiation therapy could have significant impacts on treatment strategies and patient management. Additional commentary could explore how these approaches might be incorporated into existing treatment regimens and what additional research would be necessary to facilitate such integration.

In conclusion, “Radiation Induced Skin Fibrosis (RISF): Opportunity for Angiotensin II-Dependent Intervention” represents a significant step forward in the quest to improve the management of RISF. By focusing on a dual approach to targeting Ang II and ROS pathways, we offer a promising new avenue for therapeutic development. Future research might address the highlighted potential limitations and further validate the proposed intervention’s clinical benefits. Overall, we believe this publication is a valuable contribution to the field and could pave the way for more effective treatments for patients suffering from radiation-induced fibrosis in general.

**Citation:**

Brown ML (2024) Commentary on Radiation Induced Skin Fibrosis (RISF): Opportunity for Angiotensin II-Dependent Intervention. *Psychol J Res Open* Volume 6(4): 1-1.