

## Potential use of cannabimimetics in the treatment of cancer

Luciano De Petrocellis<sup>1</sup>, Maurizio Bifulco<sup>2</sup>, Alessia Ligresti<sup>3</sup> and Vincenzo Di Marzo<sup>3</sup>

<sup>1</sup> Istituto di Cibernetica "Eduardo Caianiello", Consiglio Nazionale delle Ricerche, Via Campi Flegrei 34, Comprensorio Olivetti, Fabbricato 70, 80078 Pozzuoli (Napoli), Italy

<sup>2</sup> Istituto di Endocrinologia ed Oncologia Sperimentale, Consiglio Nazionale delle Ricerche, and Dipartimento di Scienze Farmaceutiche, Università degli Studi di Salerno, via Ponte Don Melillo, 84084 Fisciano (SA), Italy

<sup>3</sup> Istituto di Chimica Biomolecolare, Consiglio Nazionale delle Ricerche, Via Campi Flegrei 34, Comprensorio Olivetti, Fabbricato 70, 80078 Pozzuoli (Napoli), Italy

### Introduction

The medicinal use of *Cannabis sativa* preparations has a millennial history [1] and is currently being critically re-evaluated [2]. The hemp plant *Cannabis sativa* produces about 66 compounds known as cannabinoids, and the exact chemical structure of the major psychotropic principal, (-)- $\Delta^9$ -tetrahydrocannabinol ( $\Delta^9$ -THC) [3], was only identified in 1964, after decades of attempts and failures.  $\Delta^9$ -THC is highly hydrophobic and was initially thought to work by interacting directly with biomembranes. A few pharmaceutical items, such as Marinol<sup>®</sup> and Dronabinol<sup>®</sup>, both based on  $\Delta^9$ -THC, and Cesamet<sup>®</sup>, which instead is based on a synthetic  $\Delta^9$ -THC analog, nabilone, have been prescribed in the USA as anti-emetics and appetite-stimulants to cancer or AIDS patients even before the molecular mode of action of  $\Delta^9$ -THC was revealed [4]. It took the development of more-potent and enantiomerically pure  $\Delta^9$ -THC analogs to understand that psychotropic cannabinoids act via specific sites of action to produce their typical effects. The long-standing issue of the mechanism of action of  $\Delta^9$ -THC was solved with the discovery of cannabinoid receptors [5], and then of the *endocannabinoids*, endogenous agonists at cannabinoid receptors [6]. Two such receptor types have been cloned and characterized in mammalian tissues; they are coupled to G<sub>i/o</sub> proteins, through which they inhibit the adenylate cyclases, stimulate mitogen-activated protein kinases, and modulate the activity of Ca<sup>2+</sup> and K<sup>+</sup> channels to transduce the binding of agonists into biological responses (see [7] for a review). CB<sub>1</sub> receptors are expressed in several brain regions, with very high concentrations in the basal ganglia, hippocampus, cerebellum and cortex, and mediate the typical psychotropic effects of *Cannabis*, marijuana and  $\Delta^9$ -THC. Lower, albeit functionally active, amounts of CB<sub>1</sub> receptors are also found in peripheral neurons and various extra-neural sites