#### Selenium / selenite in cancer prevention, therapy, and aftercare

Second version

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#### Database: PubMed (www.ncbi.nlm.nih.gov/pubmed)

Abbreviations: Se Selenium (includes all types of Se compunds)

SoSel Selenite (usually sodium selenite)

#### Pharmakodynamics of selenite (API: sodium selenite pentahydrate)

Primary pharmacodynamics

The selenite anion (oxidation state +4) functions as an antioxidative substance and radical scavenger.

Secondary pharmacodynamics

Selenite is specifically and effectively incorporated in selenoenzymes (via the intermediate selenide). As a functional component of selenoenzymes selenite is

- 1. an efficient antioxidant (glutathione peroxidases, thioredoxin reductases)
- 2. an anti-inflammatory substance (e.g. downregulation of the proinflammatory transcription factor NF-kB)
- 3. an immunoactivator (e.g.upregulation of the high-affinity interleukin-2 receptor)
- 4. a crucial component of the DNA repair system (e.g. activation of impaired tumor suppressor gene p53, even in malignant tissues)

Search phrase		Pre-clin. / Clin. / RCT	Type of cancer	Literature reference	Comments
Cancer AND					
Se	4,232				
SoSel	713				
Cancer AND p	orevention 1,418		<b>Prospective studies</b> : beneficial effect on risk of lung, bladder, colorectal,	Overview see Rayman 2012, Bera et al. 2013	Preventive use makes sense in Se-deficient persons.
SoSel	195		liver, oesophageal, gastric-cardia,	Ct al. 2013	Two mechanisms under
3030.	133		thyroid and prostate cancers.		discussion: 1. Se is essential
			Meta-analyses: lung, bladder,		component of DNA repair, 2.
			prostate cancer.		Se as antioxidative protection
					against DNA damage.
				Lippman et al. 2009	Risk of Se-promoted diabetes
				Tsavachidou et al. 2009	type 2 (SELECT trial) proved
				Klein et al. 2011	to be an artifact.
				Directive 2008/100/EU	European RDA 55 mcg/d
					Dosage in trials 200 mcg/d
Cancer AND s	surgery				Best data from elective heart
Se	337				surgery (Stoppe et al. 2011,
SoSel	42	21 / 29 / <b>10</b>	Head and neck	Büntzel et al. 2010 (1)	2013):
			Head and neck, gynecol.	Büntzel et al. 2010 (2) Mücke et al. 2010	1. Intraoperative decrease of whole blood Se
Relevant add	ition:		Gynecol. (uterus) Breast	Dziaman et al. 2009	2. Independent predictor of
	.: Crit. Care 18:		Oral / lymphedema	Zimmermann et al. 2005	postoperative multi-organ
R68 (2014): R			Head and neck / lymphedema	Bruns et al. 2004	failure
analysis of 1047 sepsis			Radiation-associated edema	Micke et al. 2003	3. Severe Se decrease on 1 <sup>st</sup>
patients, no e			Head and neck / immunocompetence	Kiremidjan-Schumacher 2000	day post-op
selenium on	mortality and		Secondary lymphedema	Kasseroller 1998	
length of ICU	stay.		Brain	Pakdaman 1998	Dosages used: 200 – 2,000
					mcg/d

					Recommendation: > 2,000
					mcg/d
Cancer AN	ID radiotherapy				Puspitasari et al. 2014: Se
Se	92				supplementation may offer
SoSel	24	7 / 20 / <b>9</b>			specific benefits for several
					types of cancer patients who
					undergo radiotherapy.
Relevant a	iddition:				
Puspitasar	i, I., et al.: Updates		Gynecol. (uterus)	Mücke et al. 2013	500 mcg/d during RT:
on clinical	studies of		Head and neck	Büntzel et al. 2010 (1)	1. Reduction of side effects
selenium s	supplementation in		Head and neck, gynecol.	Büntzel et al. 2010 (2)	(radiogenic diarrhea)
radiothera	py. Radiation		Gynecol. (uterus)	Mücke et al. 2010	2. No reduction of efficacy of
Oncology 9	9: 125 (2014)		Oral	Elango et al. 2006	radiation therapy
			Head and neck / lymphedema	Bruns et al. 2004	3. Patients do not reach
			Radiation-associated edema	Micke et al. 2003	lower limit of Se reference
			Head and neck	Büntzel 1999	range – dosage still too low
			Breast	Schumacher 1999	4. Se blood levels drop after
					end of supplementation
					Recommendation: 1,000
					mcg/d during RT, 200 mcg/d
					after end of RT
	ID chemotherapy				Dosages used: 200 – 500
Se	865				mcg/d
SoSel	186	84 / 135 / <b>13</b>	Breast	Uhlenbruck et al. 2010	
			Head and neck	Büntzel et al. 2010 (1)	Highest dosages used by
			Head and neck, gynecol.	Büntzel et al. 2010 (2)	Asfour et al.: CHOP protocol
Relevant addition:			Non-Hodgkin's lymphoma	Asfour et al. 2006, 2007, 2009	in treatment of high-grade
Harvie, M.: Nutritional			Oral	Elango et al. 2006	NHL. Se 0.2 mg/kg/d for 5 –
supplements and cancer:		Oral / lymphedema	Zimmermann et al. 2005	30 days (person with 70 kg	
Potential benefits and proven			Head and neck / lymphedema	Bruns et al. 2004	BW: 14 mg/d!)
harm. ASCO Educ. Book 34:			Radiation-associated edema	Micke et al. 2003	1. Reduction in infection rate

e478 – 486 (2014)		Head and neck	Büntzel 1999	2. Improvement in cardiac
		Breast	Schumacher 1999	ejection (cardioprotection)
		Brain	Pakdaman 1998	3. Increase in tumor cell
				apoptosis
				3. Better complete response
				4. Better overall survival
				Safety: Only low-grade
				gastrointestinal side-effects
				(nausea, occasional vomiting)
				Recommendation: 1,000 –
				2,000 mcg/d during CTx, 200
				mcg/d after end of CTx
Cancer AND chemotherapy		Cancer cells	Thant et al. 2008	Se as a strategy to overcome
AND 5-fluorouracil			Schroeder et al. 2004	the 5-FU resistance of some
Se 11		Radiation-associated edema	Micke et al. 2003	cancer cell lines
SoSel 4				
Cancer AND chemotherapy		Mouse model	Caffrey and Frenkel 2013	Prevention of carboplation-
AND carboplatin				induced drug resistance
Se 7				
SoSel 3				
Cancer AND chemotherapy		Medical hypothesis	Altundag et al. 2005	Increase of efficacy of
AND cetuximab				cetuximab by down-
Se 1				regulation of prostaglandin
SoSel 0				synthesis
Cancer AND chemotherapy		Different cancer types	Ghorbani et al. 2013	Reduction of nephrotoxicity
AND cisplatin		Different cancer types	Weijl et al. 2004	Reduction of ototoxicity
Se 49	24 / 28 / <b>9</b>	Ovarian cancer	Sieja and Talercyk 2004	Reduction of gastrointestinal
SoSel 26	18 / 13 / <b>1</b>	Radiation-associated edema	Micke et al. 2003	side-effects
		Different cancer types	Eisendoorn et al. 2001	Reduction of bone marrow
		Different cancer types	Hu et al. 1997	suppression
				Reduction of mucositis

			Reduction of hair loss
			Dosages used: 100 – 4.000 mcg/d
			Recommendation: at least 1.000 mcg/d, 200 mcg/d after end of CTx
Cancer AND chemotherapy	Ovarian cancer	Sieja and Talercyk 2004	Reduction of gastrointestinal
AND cyclophosphamide	Non-Hodgkin's lymphoma	Asfour et al. 2007	side-effects
Se 15		Last et al. 2003	Reduction of bone marrow
SoSel 1			suppression
			Reduction of hair loss
Cancer AND chemotherapy	Cancer cell lines	Freitas et al. 2011	Synergistic effect of selenite
AND docetaxel		Schroeder et al. 2004	and docetaxel on prostate
Se 3			cancer cells
SoSel 2			
Cancer AND chemotherapy	Rat	Liu et al. 2013	Protection against
AND doxorubicin		Taskin and Dursun 2012	mitochondrial damage
Se 29 SoSel 9			Protection against cardiac dysfunction
Cancer AND chemotherapy	Cancer cell lines	Jüliger et al. 2007	Enhancement of apoptosis
AND etoposide	Cancer cen inies	Juliger et al. 2007	induction via NF-KB pathways
Se 4			madetion via W KB patriways
SoSel 4			
Cancer AND chemotherapy	Cancer cell lines	Szulkin et al. 2013	Combination of selenite and
AND gemcitabine			conventional drugs shows
Se 1			superior activity
SoSel 2			·
Cancer AND chemotherapy	Cancer cell lines	Schroeder et al. 2004	Enhancement of cytotoxicity
AND irinotecan			of irinotecan
Se 7			
SoSel 1			

Cancer AND chemotherapy	Cancer cell lines	Schroeder et al. 2004	Enhancement of cytotoxicity
AND methotrexate			of methotrexate
Se 5	Non-Hodgkin's lymphoma	Last et al. 2003	Better therapy response
SoSel 3			under higher Se levels
Cancer AND chemotherapy	Cancer cell lines	Schroeder et al. 2004	Enhancement of cytotoxicity
AND oxaliplatin			of oxaliplatin
Se 2			
SoSel 2			
Cancer AND chemotherapy	Cancer cell lines	Qi et al. 2011	MSA enhances caspase-
AND paclitaxel			mediated apoptosis in triple-
Se 8			negative breast cancer
SoSel 3			
Cancer AND chemotherapy	Non-Hodgkin's lymphoma	Asfour et al. 2007	Reduction of gastrointestinal
AND prednisone /		Last et al. 2003	side-effects
prednisolone			Reduction of bone marrow
Se 2			suppression
SoSel 1			Reduction of hair loss
Cancer AND chemotherapy	Cancer cell lines	Saifo et al. 2010	ß-Catenin as a drug
AND topotecan			resistance molecule is a
Se 2			target of MSA
SoSel 0			3.7.7
Cancer AND chemotherapy	Non-Hodgkin's lymphoma	Asfour et al. 2007	Reduction of gastrointestinal
AND vincristine	, , , , , , , , , , , , , , , , , , ,	Last et al. 2003	side-effects
Se 3			Reduction of bone marrow
SoSel 1			suppression
			35pp. 333.5
Cancer AND tamoxifen	Cancer cell lines	Li et al. 2008	MSA increases the growth-
Se 34			inhibitory effect of tamoxifen
SoSel 5			and reverses tamoxifen
			resistance in breast cancer
			cells
Cancer AND tumor aftercare			No relevant data
Se 0			

SoSel	0				
Cancer AND fatigue					No relevant data
Se	4				
SoSel	0				
Immune sys	tem				
Se	1,128	12	Breast cancer	Dziaman et al. 2009	Se reduces oxidative DNA
SoSel	221				damage in BRCA1 carriers
			Head- & neck cancer	Kiremidjian-Schumacher 2000	Se improves T-cell
					cytotoxicity against cancer
					cells
					Dosage in trials 200 mcg/d