

Prominence of CYP1A1 as a molecular landmark in cancer

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Abstract—The cytochrome P450 1A1 (CYP1A1) gene is a critical member of the cytochrome P450 superfamily, encoding an enzyme involved in the metabolism of numerous endogenous compounds and environmental carcinogens. Increasing evidence highlights the significant role of CYP1A1 in cancer initiation, progression, and therapeutic response. CYP1A1 participates in the bioactivation of polycyclic aromatic hydrocarbons, heterocyclic amines, and other xenobiotics into reactive intermediates capable of inducing DNA damage, mutagenesis, and genomic instability. Genetic polymorphisms within the CYP1A1 gene have been extensively associated with altered enzyme activity and susceptibility to various malignancies, including lung, breast, colorectal, prostate, and head and neck cancers. Furthermore, aberrant expression of CYP1A1 has been observed in tumor tissues, suggesting its involvement in cancer cell proliferation, apoptosis regulation, angiogenesis, and metastatic potential. Environmental factors such as tobacco smoke, industrial pollutants, dietary components, and occupational exposures can modulate CYP1A1 expression through activation of the aryl hydrocarbon receptor signaling pathway, thereby influencing cancer risk. Recent studies have also explored the prognostic and predictive value of CYP1A1 expression patterns and genetic variants in determining treatment outcomes and drug metabolism. Understanding the molecular mechanisms governing CYP1A1 function provides valuable insights into gene–environment interactions and cancer pathogenesis. This review summarizes current knowledge regarding the biological functions, genetic variations, regulatory mechanisms, and clinical significance of CYP1A1 in cancer. It further discusses emerging opportunities for utilizing CYP1A1 as a biomarker for cancer risk assessment, prognosis, and personalized therapeutic strategies, emphasizing its potential role in precision oncology and cancer prevention.

Index Terms—CYP1A1, Cancer, Primary and secondary malignancy, oncogenes

I. INTRODUCTION

The cytochrome P450 1A1 (CYP1A1) gene is a member of the cytochrome P450 superfamily, a large group of enzymes responsible for the metabolism of a wide range of endogenous and

exogenous compounds. In humans, the CYP1A1 gene is located on chromosome 15q24.1 and encodes the CYP1A1 enzyme, which plays a crucial role in the oxidative metabolism of environmental pollutants, xenobiotics, drugs, and procarcinogens. CYP1A1 is predominantly expressed in extrahepatic tissues such as the lungs, intestines, placenta, and lymphocytes, although its expression can also be induced in other tissues under specific environmental conditions. The enzyme is particularly important in the biotransformation of polycyclic aromatic hydrocarbons (PAHs), aromatic amines, dioxins, and other toxic compounds commonly found in cigarette smoke, industrial emissions, and contaminated food [1]. Through phase I metabolic reactions, CYP1A1 converts these compounds into more reactive intermediates, which can subsequently bind to DNA and form DNA adducts, potentially leading to mutations and carcinogenesis if not adequately repaired. The expression of CYP1A1 is tightly regulated by the aryl hydrocarbon receptor (AhR) signaling pathway. Upon exposure to environmental toxins such as benzo[a]pyrene or dioxins, AhR becomes activated and translocates to the nucleus, where it interacts with specific response elements in the CYP1A1 promoter region, resulting in enhanced gene transcription. This inducible expression serves as a defense mechanism to facilitate the detoxification of harmful substances; however, excessive or prolonged activation may increase the production of reactive metabolites and oxidative stress, thereby contributing to disease development [2]. Numerous studies have demonstrated that CYP1A1 expression is altered in various pathological conditions, particularly cancer. Elevated levels of CYP1A1 have been reported in several tumor types, including lung, breast, colorectal, prostate, and head and neck cancers, suggesting a role in tumor initiation and progression.

Genetic polymorphisms in the CYP1A1 gene have attracted considerable attention because of their influence on enzyme activity and individual susceptibility to cancer. Several common variants, including CYP1A12A (*MspI*), CYP1A12C (Ile462Val), and CYP1A1*4 (Thr461Asn), have been associated with altered metabolic capacity and differential cancer risk across populations. Individuals carrying certain polymorphic alleles may exhibit increased activation of carcinogens, leading to a higher likelihood of DNA damage and tumor development, especially when combined with environmental exposures such as smoking. In addition to its role in carcinogen metabolism, CYP1A1 has been implicated in the metabolism of endogenous substrates, including estrogens and arachidonic acid derivatives, which may further influence cellular proliferation, inflammation, and cancer biology [3]. Recent research has also highlighted the potential of CYP1A1 as a biomarker for cancer susceptibility, prognosis, and therapeutic response. Understanding the molecular mechanisms, regulatory pathways, and genetic variations of CYP1A1 is therefore essential for elucidating gene–environment interactions in cancer and developing personalized approaches for disease prevention, diagnosis, and treatment. Beyond its established role in xenobiotic metabolism, the CYP1A1 gene has emerged as an important molecular factor in understanding the complex relationship between environmental exposure and cancer susceptibility. The CYP1A1 enzyme belongs to the CYP1 family, which also includes CYP1A2 and CYP1B1, enzymes known for their involvement in the metabolic activation and detoxification of numerous chemical compounds [4].

CYP1A1 exhibits broad substrate specificity and catalyzes oxidation reactions that convert lipophilic substances into more water-soluble metabolites, facilitating their elimination from the body. However, this metabolic process is often described as a double-edged sword because certain substrates are transformed into highly reactive intermediates capable of inducing cellular damage. For example, benzo[a]pyrene, a major carcinogenic component of tobacco smoke, is metabolically activated by CYP1A1 into epoxide derivatives that can form covalent DNA adduct. The accumulation of such DNA lesions may lead to mutations in critical genes involved in cell-cycle regulation, apoptosis, and DNA repair, thereby increasing the risk of malignant transformation [5]. Recent studies have revealed that CYP1A1 expression is influenced not only by environmental toxicants but also by epigenetic mechanisms, including DNA methylation, histone modifications, and microRNA-mediated regulation. Aberrant epigenetic alterations can result in either overexpression or suppression of CYP1A1, affecting cellular responses to carcinogens and therapeutic agents. Furthermore, CYP1A1-generated reactive oxygen species (ROS) have been implicated in oxidative stress, inflammation, and cellular signaling pathways that contribute to cancer progression. Elevated oxidative stress can damage proteins, lipids, and nucleic acids while simultaneously activating signaling cascades such as MAPK, NF- κ B, and PI3K/Akt pathways, which are associated with cell survival, proliferation, and metastasis [6]. The role of CYP1A1 in hormone-dependent cancers has also gained significant attention because the enzyme participates in estrogen metabolism. Altered estrogen metabolite profiles resulting from variations in CYP1A1 activity may influence breast and ovarian cancer development by affecting hormone signaling and cellular growth. In addition to its involvement in carcinogenesis, CYP1A1 has important implications for pharmacology and personalized medicine. The enzyme contributes to the metabolism of several therapeutic agents, and genetic variations in CYP1A1 may influence drug efficacy, toxicity, and patient outcomes [7]. Consequently, CYP1A1 genotyping has been investigated as a potential tool for predicting individual responses to anticancer therapies and tailoring treatment strategies. Advances in molecular biology and genomic technologies have further enabled researchers to explore CYP1A1-targeted interventions, including inhibitors and modulators aimed at reducing carcinogen activation and limiting tumor progression. Collectively, these findings highlight the multifaceted role of CYP1A1 in human health and disease, emphasizing its significance as a key mediator of gene–environment interactions and a promising target for cancer prevention, risk assessment, and precision oncology [8].

II. CYP1A1 IN CANCER

The cytochrome P450 1A1 (CYP1A1) gene has gained considerable attention in cancer research due to its critical role in the metabolic activation of environmental carcinogens and its influence on cancer susceptibility, progression, and therapeutic outcomes. CYP1A1 belongs to the cytochrome P450 superfamily of enzymes, which are involved in the metabolism of a wide range of endogenous and exogenous compounds. The enzyme encoded by CYP1A1 is primarily

expressed in extrahepatic tissues, including the lungs, intestines, kidneys, placenta, and lymphocytes, where it participates in phase I metabolic reactions. One of its most significant functions is the oxidation of polycyclic aromatic hydrocarbons (PAHs), heterocyclic amines, dioxins, and other xenobiotics into reactive metabolites [9].

Although these reactions are essential for detoxification and elimination of harmful compounds, they can also produce highly reactive intermediates capable of binding to DNA and forming DNA adducts. The accumulation of DNA adducts can induce mutations, chromosomal instability, and alterations in gene expression, thereby contributing to the initiation of carcinogenesis. Consequently, CYP1A1 is often considered a key molecular link between environmental exposure and cancer development. The involvement of CYP1A1 in cancer is particularly evident in malignancies associated with tobacco smoke and environmental pollutants. Cigarette smoke contains numerous carcinogenic compounds, including benzo[a]pyrene, which undergo metabolic activation by CYP1A1 to form DNA-reactive metabolites [10]. These metabolites can induce mutations in critical tumor suppressor genes and oncogenes, thereby promoting the development of lung cancer. Several epidemiological studies have demonstrated a strong association between CYP1A1 polymorphisms and increased susceptibility to lung cancer, especially among smokers. Similar associations have been reported in other cancers, including breast, colorectal, prostate, gastric, esophageal, cervical, bladder, and head and neck cancers. The impact of CYP1A1 on cancer risk is often influenced by the interaction between genetic predisposition and environmental exposure. Individuals carrying specific CYP1A1 variants may exhibit enhanced enzyme activity, leading to increased carcinogen activation and a higher likelihood of DNA damage when exposed to environmental toxins [11].

Genetic polymorphisms of the CYP1A1 gene have been extensively investigated as potential biomarkers of cancer susceptibility. Among the most studied variants are CYP1A12A (*MspI*), CYP1A12C (Ile462Val), and CYP1A1*4 (Thr461Asn). These polymorphisms can alter enzyme expression levels, catalytic activity, or substrate affinity, thereby influencing individual differences in carcinogen metabolism. Numerous case-control and meta-analysis studies have reported significant associations between these genetic variants and increased risks of various cancers, although the magnitude of the association may vary among ethnic groups and geographic populations. For example, the Ile462Val polymorphism has been linked to elevated risks of lung, breast, and colorectal cancers in several populations due to its association with increased enzymatic activity and enhanced formation of DNA-damaging metabolites [12]. The study of CYP1A1 polymorphisms has therefore provided valuable insights into the molecular mechanisms underlying cancer susceptibility and has highlighted the importance of gene–environment interactions in carcinogenesis. In addition to its role in cancer initiation, CYP1A1 contributes to cancer progression through multiple molecular mechanisms. Elevated expression of CYP1A1 has been detected in numerous tumor tissues and cancer cell lines, suggesting that the enzyme may influence tumor growth and survival. Increased CYP1A1 activity can generate reactive oxygen species (ROS) during the metabolism of xenobiotics and endogenous substrates.

Excessive ROS production results in oxidative stress, which damages cellular macromolecules, including DNA, proteins, and lipids [13]. Oxidative stress can also activate signaling pathways involved in cell proliferation, survival, inflammation, angiogenesis, and metastasis. Pathways such as NF- κ B, MAPK, PI3K/Akt, and JAK/STAT have been shown to be influenced directly or indirectly by CYP1A1-mediated oxidative processes. Activation of these pathways can promote tumor cell growth, inhibit apoptosis, and facilitate the invasion and migration of cancer cells. Consequently, aberrant CYP1A1 expression may contribute not only to the initiation of cancer but also to its progression and aggressiveness [14].

The regulation of CYP1A1 expression is closely linked to the aryl hydrocarbon receptor (AhR) signaling pathway, which plays a crucial role in mediating cellular responses to environmental toxins. Upon exposure to ligands such as dioxins, PAHs, and other environmental contaminants, AhR translocates to the nucleus and forms a complex with the AhR nuclear translocator (ARNT). This complex binds to xenobiotic response elements within the CYP1A1 promoter region, leading to transcriptional activation of the gene. Persistent activation of the AhR-CYP1A1 axis has been implicated in chronic inflammation, immune dysregulation, and tumor development. Recent studies suggest that aberrant AhR signaling may create a tumor-promoting microenvironment by influencing cytokine production, immune cell infiltration, and cancer stem cell maintenance [15]. These findings further emphasize the importance of CYP1A1 as a mediator of environmental carcinogenesis and cancer progression. Emerging evidence also indicates that CYP1A1 may influence the efficacy and toxicity of anticancer therapies. Because cytochrome P450 enzymes are involved in drug metabolism, variations in CYP1A1 expression and activity can affect the pharmacokinetics of chemotherapeutic agents. Certain CYP1A1 polymorphisms have been associated with altered responses to chemotherapy, targeted therapies, and combination treatment regimens. As a result, CYP1A1 is increasingly being explored as a predictive biomarker for treatment response and as a potential target for personalized medicine [16]. Advances in genomic profiling and precision oncology have facilitated the identification of patients with specific CYP1A1 genetic variants who may benefit from tailored therapeutic strategies. Furthermore, pharmacological inhibitors and natural compounds capable of modulating CYP1A1 activity are being investigated for their potential to reduce carcinogen activation and suppress tumor growth.

Overall, CYP1A1 plays a multifaceted role in cancer biology by influencing carcinogen metabolism, oxidative stress, genetic susceptibility, tumor progression, and therapeutic response. Its central position at the interface between environmental exposure and cellular metabolism makes it a critical determinant of cancer risk and outcome [17]. Continued research into the molecular mechanisms, regulatory pathways, and genetic variations of CYP1A1 is expected to improve our understanding of cancer pathogenesis and support the development of novel diagnostic, prognostic, and therapeutic approaches. The growing body of evidence underscores the importance of CYP1A1 as both a biomarker and a potential therapeutic target in the era of precision oncology [18].

III. CYP1A1 IN CELL CYCLE AND REGULATION

The cytochrome P450 1A1 (CYP1A1) enzyme is traditionally recognized for its role in the metabolism of xenobiotics and environmental carcinogens; however, increasing evidence suggests that CYP1A1 also participates in the regulation of fundamental cellular processes, including cell-cycle progression, cellular proliferation, apoptosis, and signal transduction. The cell cycle is a tightly regulated sequence of events that controls cell growth and division through distinct phases, namely G1, S, G2, and M phases. Proper regulation of the cell cycle is essential for maintaining genomic stability and tissue homeostasis, whereas dysregulation can lead to uncontrolled cellular proliferation and cancer development. Recent studies have indicated that CYP1A1 influences cell-cycle regulation both directly and indirectly through its effects on oxidative stress, metabolic signaling, transcriptional regulation, and interactions with multiple cellular pathways [19].

Altered expression of CYP1A1 has been observed in several cancers, suggesting that the enzyme contributes to mechanisms governing cell proliferation and tumor progression. One of the primary ways by which CYP1A1 affects the cell cycle is through the generation of reactive oxygen species (ROS) during the metabolism of endogenous and exogenous substrates. While physiological levels of ROS function as signaling molecules that regulate normal cellular activities, excessive ROS production can induce oxidative stress and alter the activity of proteins involved in cell-cycle control. CYP1A1-mediated oxidative stress can modulate the expression and function of cyclins, cyclin-dependent kinases (CDKs), and CDK inhibitors, which are the major regulators of cell-cycle progression [20]. Elevated ROS levels may stimulate signaling pathways such as mitogen-activated protein kinase (MAPK), phosphoinositide 3-kinase/protein kinase B (PI3K/Akt), and nuclear factor-kappa B (NF- κ B), all of which are known to promote cell survival and proliferation. Activation of these pathways can enhance the expression of cyclin D1 and cyclin E, facilitating the transition from the G1 phase to the S phase and promoting DNA synthesis. Consequently, abnormal CYP1A1 expression may contribute to uncontrolled cellular growth through the deregulation of cell-cycle checkpoints [21].

The role of CYP1A1 in cell-cycle regulation is also closely linked to the aryl hydrocarbon receptor (AhR) signaling pathway. AhR is a ligand-activated transcription factor that regulates the expression of CYP1A1 in response to environmental contaminants such as dioxins and polycyclic aromatic hydrocarbons. Upon activation, AhR translocates to the nucleus and induces CYP1A1 transcription through interaction with xenobiotic response elements. Beyond xenobiotic metabolism, AhR signaling has significant effects on cell-cycle regulation. Studies have shown that AhR can interact with key cell-cycle proteins, including retinoblastoma protein (Rb), cyclin-dependent kinases, and E2F transcription factors. Through these interactions, AhR activation and subsequent CYP1A1 induction may influence cell-cycle progression and cellular proliferation. In certain cellular contexts, sustained activation of the AhR-CYP1A1 axis promotes cell growth and tumor development, whereas in others it may induce growth arrest, highlighting the complexity of this regulatory network [22].

Another important mechanism through which CYP1A1 affects the cell cycle involves its influence on apoptosis and DNA damage responses. Metabolic activation of carcinogens by CYP1A1 generates reactive intermediates capable of forming DNA adducts and inducing genomic instability. DNA damage activates checkpoint proteins such as ataxia-telangiectasia mutated (ATM), ataxia-telangiectasia and Rad3-related (ATR), checkpoint kinase 1 (CHK1), and checkpoint kinase 2 (CHK2), which temporarily halt cell-cycle progression to allow DNA repair. However, chronic CYP1A1-mediated DNA damage may overwhelm repair mechanisms, resulting in mutations in critical regulatory genes such as TP53, RB1, and CDKN1A. The tumor suppressor protein p53 plays a central role in cell-cycle arrest and apoptosis by regulating the expression of p21, a cyclin-dependent kinase inhibitor that blocks progression from G1 to S phase [23]. Alterations in CYP1A1 activity can therefore influence p53-dependent pathways, affecting cellular decisions regarding repair, senescence, or apoptosis. In cancer cells, dysregulated CYP1A1 expression may contribute to the evasion of apoptosis and continued proliferation despite the presence of DNA damage. Emerging evidence also suggests that CYP1A1 may regulate cell-cycle progression through its involvement in the metabolism of endogenous signaling molecules.

The enzyme participates in the metabolism of estrogens, arachidonic acid derivatives, and other bioactive compounds that influence cellular growth and differentiation. Estrogen metabolites generated through CYP1A1 activity can modulate estrogen receptor signaling pathways, which play critical roles in the regulation of cell proliferation in hormone-dependent tissues. In breast and reproductive cancers, alterations in CYP1A1 expression may affect hormonal balance and promote aberrant cell-cycle progression [24]. Similarly, CYP1A1-mediated metabolism of lipid-derived signaling molecules can influence inflammatory pathways and growth factor signaling networks that regulate cyclin expression and cell-cycle transitions. Recent studies have further demonstrated that suppression or silencing of CYP1A1 expression can reduce cellular proliferation and induce cell-cycle arrest in various cancer models. Experimental inhibition of CYP1A1 has been associated with decreased cyclin expression, reduced DNA synthesis, and accumulation of cells in the G0/G1 phase, indicating a role for CYP1A1 in promoting cell-cycle progression. Conversely, overexpression of CYP1A1 has been linked to enhanced proliferative capacity and increased tumor aggressiveness. These findings suggest that CYP1A1 may function as a regulator of cell growth and could serve as a potential therapeutic target in cancer treatment [25]. Pharmacological agents that inhibit CYP1A1 activity may not only reduce carcinogen activation but also suppress cancer cell proliferation by restoring normal cell-cycle control mechanisms. Overall, CYP1A1 plays a multifaceted role in the regulation of the cell cycle through its effects on oxidative stress, DNA damage responses, apoptosis, hormonal metabolism, and multiple intracellular signaling pathways. The enzyme acts as an important mediator connecting environmental exposures with cellular regulatory networks that govern proliferation and survival. Dysregulation of CYP1A1 expression or activity can disrupt normal cell-cycle checkpoints, promote genomic instability, and facilitate tumor development and progression. Continued investigation into the molecular mechanisms underlying CYP1A1-mediated cell-cycle

regulation will provide valuable insights into cancer biology and may contribute to the development of novel therapeutic strategies targeting aberrant proliferative signaling in human malignancies [26].

IV. DISCUSSION

The significance of CYP1A1 in cell-cycle regulation and cancer has become increasingly evident as research has expanded beyond its traditional role in xenobiotic metabolism. While CYP1A1 was initially recognized primarily for its involvement in the biotransformation of environmental pollutants and procarcinogens, emerging evidence indicates that this enzyme plays a broader role in regulating cellular homeostasis, proliferation, apoptosis, and tumor progression. The ability of CYP1A1 to metabolically activate numerous carcinogenic compounds places it at a critical intersection between environmental exposure and cancer susceptibility. However, its influence extends beyond carcinogen activation, affecting intracellular signaling pathways and molecular mechanisms that directly govern cell-cycle progression [27]. This dual role highlights the importance of CYP1A1 as both an initiator of carcinogenic processes and a regulator of tumor development. One of the most significant aspects of CYP1A1 function in cancer is its contribution to the generation of reactive oxygen species (ROS) and oxidative stress. During the metabolism of xenobiotics and endogenous substrates, CYP1A1 can produce reactive intermediates that influence cellular redox balance.

Moderate levels of ROS act as signaling molecules that regulate cell proliferation and differentiation, whereas excessive ROS production can cause DNA damage, chromosomal instability, and mutations in genes controlling the cell cycle. Persistent oxidative stress resulting from aberrant CYP1A1 activity may therefore disrupt normal cell-cycle checkpoints and promote uncontrolled cellular proliferation. Such disturbances facilitate the accumulation of genetic alterations that are characteristic of cancer cells. The ability of CYP1A1 to influence oxidative signaling pathways further emphasizes its importance in tumor initiation and progression [28]. The relationship between CYP1A1 and cell-cycle regulation is particularly significant because cell-cycle dysregulation is a hallmark of cancer. Cell-cycle progression is controlled by a complex network of cyclins, cyclin-dependent kinases (CDKs), tumor suppressors, and checkpoint proteins that ensure accurate DNA replication and chromosome segregation. Studies suggest that altered CYP1A1 expression can affect the expression and activity of these regulatory molecules through various signaling pathways, including MAPK, PI3K/Akt, NF- κ B, and ERK pathways. Activation of these pathways promotes the expression of cyclins and other proliferative factors that facilitate progression through critical cell-cycle checkpoints, particularly the G1/S transition. Consequently, increased CYP1A1 activity may contribute to enhanced cellular proliferation, a characteristic feature of malignant transformation. Conversely, inhibition of CYP1A1 has been shown in several experimental models to induce cell-cycle arrest and suppress cancer cell growth, suggesting that CYP1A1 may function as a positive regulator of proliferation in certain tumor types [29].

Another important consideration is the interaction between CYP1A1 and the aryl hydrocarbon receptor (AhR) signaling pathway. AhR is a ligand-activated transcription factor that regulates CYP1A1 expression in response to environmental toxicants. Recent studies have demonstrated that AhR signaling itself is involved in the regulation of cell-cycle progression, apoptosis, stemness, and immune responses. Activation of the AhR-CYP1A1 axis can influence the activity of key cell-cycle regulators such as retinoblastoma protein (Rb), E2F transcription factors, and cyclin-dependent kinases. In cancer cells, persistent activation of this pathway may create conditions favorable for tumor growth and survival [30]. The AhR-CYP1A1 signaling network therefore represents an important molecular bridge linking environmental carcinogens to altered cell-cycle control and cancer development. The significance of CYP1A1 is also evident in its role in DNA damage and genomic instability. CYP1A1-mediated activation of procarcinogens produces reactive metabolites that can form DNA adducts, resulting in mutations if repair mechanisms fail. DNA damage activates checkpoint pathways involving ATM, ATR, CHK1, CHK2, and p53, which are responsible for halting cell-cycle progression and facilitating DNA repair.

However, chronic exposure to carcinogens and prolonged CYP1A1 activation may overwhelm these protective mechanisms, leading to mutations in genes essential for maintaining genomic integrity. Such mutations can impair cell-cycle checkpoints and apoptosis pathways, enabling damaged cells to survive and proliferate. This process contributes significantly to the initiation and progression of various cancers, including lung, breast, colorectal, prostate, and head and neck cancers. Genetic polymorphisms in the CYP1A1 gene further underscore its importance in cancer susceptibility and cell-cycle regulation. Variations such as *CYP1A12A* and *CYP1A12C* have been associated with altered enzyme activity and differential cancer risk among populations [31].

Individuals carrying high-activity variants may generate greater amounts of carcinogenic metabolites and oxidative stress, increasing the likelihood of DNA damage and cell-cycle dysregulation. The influence of these polymorphisms demonstrates how genetic factors can modify the biological effects of environmental exposures, emphasizing the importance of gene–environment interactions in cancer development. The study of CYP1A1 polymorphisms has therefore provided valuable insights into individual variations in cancer susceptibility and disease progression. In addition to its role in carcinogenesis, CYP1A1 has emerged as a potential biomarker and therapeutic target in oncology. Elevated CYP1A1 expression has been reported in several tumor types and is often associated with aggressive tumor behavior, poor prognosis, and resistance to therapy. Because CYP1A1 influences both carcinogen metabolism and proliferative signaling pathways, targeting this enzyme may provide dual therapeutic benefits by reducing the formation of DNA-damaging metabolites and inhibiting cancer cell growth [32]. Experimental studies have demonstrated that pharmacological inhibition or genetic suppression of CYP1A1 can decrease cell proliferation, induce apoptosis, and enhance sensitivity to anticancer agents.

These findings suggest that CYP1A1-targeted therapies could complement existing treatment strategies and contribute to the development of precision medicine approaches.

Overall, the growing body of evidence highlights the multifaceted significance of CYP1A1 in cell-cycle regulation and cancer biology. Through its involvement in oxidative stress generation, DNA damage, signaling pathway modulation, cell-cycle checkpoint regulation, and carcinogen activation, CYP1A1 serves as a crucial mediator linking environmental factors to tumor development. Its ability to influence both the initiation and progression of cancer underscores its value as a biomarker for risk assessment, prognosis, and therapeutic response [33]. Continued investigation into the molecular mechanisms underlying CYP1A1 function will enhance our understanding of cancer pathogenesis and may facilitate the development of novel diagnostic and therapeutic strategies aimed at improving cancer prevention and treatment outcomes.

V. CONCLUSION

In conclusion, the cytochrome P450 1A1 (CYP1A1) gene represents a crucial molecular component in the complex interplay between environmental exposures, genetic susceptibility, and cancer development. As a key member of the cytochrome P450 superfamily, CYP1A1 plays a central role in the metabolism of numerous xenobiotics, environmental pollutants, and procarcinogens. While its physiological function is essential for the detoxification and elimination of potentially harmful compounds, CYP1A1-mediated metabolic activation can also generate reactive intermediates capable of inducing DNA damage, oxidative stress, and genomic instability, thereby contributing to carcinogenesis. Extensive research has demonstrated that altered CYP1A1 expression and genetic polymorphisms are associated with increased susceptibility to a wide range of cancers, including lung, breast, colorectal, prostate, gastric, and head and neck malignancies. Furthermore, CYP1A1 has emerged as an important regulator of cellular processes beyond xenobiotic metabolism, influencing cell-cycle progression, apoptosis, proliferation, and intracellular signaling pathways that are frequently dysregulated in cancer. The significance of CYP1A1 is further highlighted by its close association with the aryl hydrocarbon receptor signaling pathway and its ability to mediate critical gene–environment interactions.

Variations in CYP1A1 activity can significantly affect individual responses to environmental carcinogens and therapeutic agents, making it a valuable biomarker for cancer risk assessment, prognosis, and treatment response. Advances in molecular biology, genomics, and precision medicine have expanded our understanding of CYP1A1 function, revealing its potential as both a diagnostic indicator and a therapeutic target. Targeting CYP1A1 and its associated pathways may provide novel opportunities for cancer prevention and treatment by reducing carcinogen activation, limiting tumor progression, and enhancing therapeutic efficacy. Overall, the growing body of evidence underscores the prominence of CYP1A1 in cancer biology and highlights the need for continued research to fully elucidate its molecular mechanisms and clinical applications in oncology.

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