



Designing Multi-Target Drugs for the Treatment of Neurodegenerative Diseases

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DESCRIPTION

Developing multi-target medications for neurodegenerative illnesses is a viable strategy for managing complicated conditions including Huntington's, Parkinson's and Alzheimer's. Complex pathogenic processes involving several metabolic pathways, such as inflammation, oxidative stress, protein misfolding and neurotransmitter abnormalities, are characteristics of these diseases. Since neurodegenerative disorders are complex, traditional one-drug-one-target treatments are restricted since they only address a single route, which frequently offers little relief and ignores the larger pathophysiology. The goal of multi-target medications, on the other hand, is to concurrently interact with various molecular targets in order to modify several malfunctioning pathways. Compared to single-target medications, multi-target treatments may be able to slow down neurodegeneration more successfully by treating several facets of the disease process, providing more symptomatic relief and maybe delaying the course of the illness.

The interconnectedness of the systems underlying neurodegenerative diseases provides justification for multi-target therapeutic design. Amyloid-Beta (A β) plaque and tau protein tangles, for example, are characteristic characteristics of Alzheimer's disease that result in neuroinflammation, oxidative stress and synaptic dysfunction. Similarly, alpha-synuclein protein aggregation in Parkinson's disease interferes with dopamine transmission and sets off neuroinflammatory pathways. Creating medications that can lower oxidative stress, prevent protein aggregation and reduce inflammation all at once would offer a more thorough therapeutic strategy than focusing on just one of these factors.

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Multi-target drug design, in this context, seeks to create substances that may interact with several molecular targets linked to these many disease processes, possibly providing a synergistic therapeutic impact. The development of multi-target medications that have both antioxidant and amyloid-beta aggregation-reducing capabilities is another creative tactic. One of the main pathogenic characteristics of Alzheimer's disease is amyloid-beta buildup, which causes oxidative stress and neuronal destruction. It may be possible to lessen plaque development and shield neurons from oxidative injury by using compounds that can both scavenge free radicals and inhibit amyloid-beta aggregation. Certain polyphenolic substances, like resveratrol and curcumin, for instance, have demonstrated promise in preclinical research due to their dual antioxidant and anti-amyloid characteristics.

In multi-target therapeutic discovery for neurodegenerative illnesses, drug repurposing has also become a useful strategy. Numerous medications that have previously received approval for other disorders have a variety of pharmacological actions, some of which may be advantageous in neurodegenerative settings. For example, it has been shown that AMP-activated protein Kinase (AMPK) is activated by antidiabetic medications like as metformin. This may have neuroprotective benefits by modifying energy metabolism and lowering inflammation. Additionally, the intricacy of neurodegenerative illnesses points to the necessity of customized multi-target treatments. A technique that works for all patients is ineffective since each patient may have distinct clinical traits or variations in the progression of their ailment. Personalized multi-target treatments that are adapted to each patient's unique needs may enhance treatment results by focusing on the pathways that are most pertinent to their illness profile. Multi-target medications have limits even if they have a lot of potential. The difficulty and expense of drug creation are increased by the intricacy of creating medications with several distinct activities and advantageous pharmacokinetics. Multi-target medications can have a variety of impacts on several biological systems, making it difficult to assess their safety and effectiveness in clinical studies. Because extensive studies are needed to demonstrate safety and efficacy across several targets, regulatory approval processes may also be more complex.