

## Flavonoids as anti-inflammatory agents: implications in cancer and cardiovascular disease

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**Abstract** Chronic inflammation is being shown to be increasingly involved in the onset and development of several pathological disturbances such as arteriosclerosis, obesity, diabetes, neurodegenerative diseases and even cancer. Treatment for chronic inflammatory disorders has not been solved, and there is an urgent need to find new and safe anti-inflammatory compounds. Flavonoids belong to a group of natural substances occurring normally in the diet that exhibit a variety of beneficial effects on health. The anti-inflammatory properties of flavonoids have been studied recently, in order to establish and characterize their potential utility as therapeutic agents in the treatment of inflammatory diseases. Several mechanisms of action have been proposed to explain *in vivo* flavonoid anti-inflammatory actions, such as antioxidant activity, inhibition of eicosanoid generating enzymes or the modulation of the production of proinflammatory molecules. Recent studies have also shown that flavonoids are modulators of proinflammatory gene expression, thus leading to the attenuation of the inflammatory response. However, much work remains to be done in order to achieve definitive conclusions about their potential usefulness. This review summarizes the known mechanisms involved in the anti-inflammatory activity of flavonoids and the implications of these effects on the protection against cancer and cardiovascular disease.

**Keywords** Flavonoids · Inflammation · Cancer · Cardiovascular disease

**Introduction** Inflammation is an orchestrated biological process, induced by microbial infection or tissue injury. A major trigger of inflammation is the recognition of microbes by specific receptors of the innate immune system, which play a crucial role in the induction of early signals initiating and establishing the inflammatory setting [1]. A main function of inflammation is to resolve infection and to repair the damage in order to achieve homeostasis equilibrium. Thus, the ideal inflammatory response is rapid and destructive, yet specific and self-limiting [2]. The importance of this balance is demonstrated by findings in certain chronic infectious or inflammatory disorders, that the inflammatory response causes more damage to the host than the microbe. Inflammation and the immune system are intimately tied. Indeed, an over activation of innate immune response can cause chronic infection or chronic inflammation due to an inefficient regulation or resolution of the inflammatory response [3].

Although steroidal anti-inflammatory drugs and NSAIDs are currently used to treat acute inflammation, these drugs have not been entirely successful in curing chronic inflammatory disorders while such compounds are accompanied by unexpected side effects. Therefore, there is an urgent need to find safer anti-inflammatory compounds [4]. Traditional medicine has used extracts of different plants for the treatment of a wide variety of disorders including acute and chronic inflammation. Among the active constituents of these extracts, flavonoids are a family of substances whose members have many interesting biological properties

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including anticancer, antimicrobial, antiviral, anti-inflammatory, immunomodulatory, and antithrombotic activities [5–7]. Many investigations have repeatedly proven that flavonoid molecules exhibit anti-inflammatory functions. Thus, the anti-inflammatory activities of avonols (quercetin, rutin and morin) and avanones (hesperetin and hesperidin) were investigated in acute and chronic inflammation animal models [8]. Rutin was only effective in the chronic process, principally in adjuvant arthritis. On exhibit anti-inflammatory activity both, in vitro and in various animal models of inflammation [8, 9].

Among these biological activities, the anti-inflammatory capacity of flavonoids has long been utilized in Chinese and Western medicine by applying crude plant extracts. Many investigations have shown that a variety of flavonoid molecules exhibit anti-inflammatory activity both, in vitro and in various animal models of inflammation [8, 9].

In addition, inflammation is increasingly found to be involved in the development of several chronic diseases such as arteriosclerosis, obesity, diabetes, neurodegenerative diseases and even cancer. Among them, cardiovascular diseases and cancer are main causes of mortality in many countries. Numerous epidemiological studies indicate that an increase in the consumption of flavonoid-rich fruits and vegetables is associated with a decrease in the incidence of cardiovascular disease and different types of cancer [10]. This protective effect has been attributed in part to the anti-inflammatory properties of flavonoids [16]. Thus, it may be valuable to study the anti-inflammatory activity of flavonoids, not only in order to establish anti-inflammatory mechanisms, but also for developing a new class of anti-inflammatory agents, which may be useful in the treatment of these kind of diseases [17].

This document reviews the anti-inflammatory properties of flavonoids with special emphasis on the various mechanisms potentially implicated. We also summarize the central role that inflammation plays in the onset and progression of two of the most important diseases of the world: cancer and cardiovascular disease. The possible effects of flavonoids in the prevention and treatment of such diseases are also reviewed, on the basis of their anti-inflammatory activity.

## Flavonoids and inflammation

Flavonoids are a polyphenols subclass which are widely distributed in the plant kingdom, and are characterized by two or more aromatic rings, each bearing at least one aromatic hydroxyl and connected with a heterocyclic pyran [18]. Flavonoids are categorized into different subtypes based on the connection of an aromatic ring to the heterocyclic ring as well as the oxidation state and functional groups of the heterocyclic ring. Flavonoids are found in fruits, vegetables, legumes, herbs, spices, stems, flowers as well as tea and red wine. They are prominent components of citrus fruits and other food sources and are in many countries regularly consumed in a healthy diet. Table 1 shows the subclasses of flavonoids and their names of prominent food sources [18].

Anti-inflammatory mechanisms of flavonoids  
Several mechanisms explaining the anti-inflammatory activity of flavonoids have been described, including (a) antioxidative and radical scavenging activities, (b) regulation of cellular activities of inflammation-related metabolism enzymes (phospholipase A2, cyclooxygenase,

Table 1 Subclasses and prominent food avonoids and typical food sources

Flavonoid subclass	Food avonoid	Food source
Flavanols	Catechin, gallic catechin, epicatechin	Teas, red grapes and red wines
Flavanones	Naringenin, hesperetin, eriodictyol	Citrus foods
Flavones	Apigenin, luteolin	Green leafy spices
Iso avones	Daidzein, genistein, glycitein, biochanin A	Soybeans, soy foods, and legumes
Flavonols	Kaempferol, myricetin, quercetin, isorhamnetin	Nearly ubiquitous in foods
Anthocyanidins	Cyanidin, delphinidin, pelargonidin	Red, purple and blue berries

lipoyxygenase) and nitric oxide synthase, (d) modulation of hydroxyl radical, peroxy radicals, hypochlorous acid and the production of other proinflammatory molecules, (e) peroxynitrous acid, since they are oxidized by radicals, modulation of proinflammatory gene expression.

Flavonoids as antioxidants

Body cells and tissues are continuously threatened by the peroxynitrite [35]. Epicatechin and rutin have a powerful damage caused by free radicals and reactive oxygen species, hydroxyl radical (OH) scavenging effect, about 100–300 which are produced during normal oxygen metabolism or are sometimes higher than mannitol, a typical ROS scavenger, and induced by exogenous factors [24]. The increased production also inhibit the superoxide anion (O<sub>2</sub><sup>-</sup>) generation in the of reactive oxygen species accompany most forms of tissue injury, which have been implicated in a multitude of disease states ranging from inflammatory injury to myocardial infarction and cancer [25]. The mechanisms and the preventive actions against atherosclerosis sequence of events by which free radicals interfere with cellular functions are not fully understood, but some of the detrimental effects in biological systems include peroxidation of membrane lipids, oxidative damage to nucleic acids or carbohydrates and the oxidation of sulfhydryl and other susceptible groups in proteins [26, 27]. In addition, free radicals can attract various inflammatory mediators contributing to a generalized inflammatory response and tissue damage. Indeed, flavonoids are powerful in vitro antioxidants, being able to scavenge a wide range of free radical species, as well as to inhibit their formation.

Effect on ROS production by phagocytic cells

Phagocytosis is an important physiological process accompanied by the production of superoxide anion to peroxynitrite-mediated oxidation, in vitro, in a concentration-dependent fashion [35]. While ROS generated by phagocytes play an important physiological function, they can also cause cellular damage. The highly reactive oxygen species, along with other mediators elaborated by neutrophils and macrophages, can promote inflammation and cause tissue damage [28, 29]. Several flavonoids have been shown to be effective inhibitors of ROS production by activating human neutrophils [30–32].

Radical scavenging

Flavonoids are scavengers of a wide variety of reactive oxygen, nitrogen, and chlorine species such as superoxide

resulting in a more stable, less reactive radical [33]. Selected flavonoids can directly scavenge superoxide [34], whereas other flavonoids such as genistein and daidzein can scavenge the highly reactive oxygen-derived radical peroxyl radical (OH) scavenging effect, about 100–300 times higher than mannitol, a typical ROS scavenger, and also inhibit the superoxide anion (O<sub>2</sub><sup>-</sup>) generation in the xanthine-xanthine oxidase system [36]. By scavenging radicals, flavonoids can inhibit LDL oxidation in vitro [37] protecting the LDL particles. Such effect may have preventive actions against atherosclerosis. During inflammation, high concentrations of nitric oxide produced by inducible nitric oxide synthase in macrophages can result in oxidative damage. In such circumstances, activated macrophages greatly increase the simultaneous production of both nitric oxide and superoxide anions. Nitric oxide reacts with free radicals, thereby directly oxidize LDL, resulting in irreversible damage to the cell membrane [34]. When flavonoids are used as antioxidants, free radicals are scavenged and, therefore, can no longer react with nitric oxide, resulting in less cellular damage [38]. Also, nitric oxide can be viewed as a radical itself, and it has been reported that nitric oxide molecules are directly scavenged by flavonoids [39]. The soybean isoflavones genistein and daidzein increase LDL resistance to peroxynitrite-mediated oxidation, in vitro, in a concentration-dependent fashion [35]. In vivo experiments have demonstrated that oral administration of isoflavones and extracts from soy-based products decrease serum nitrite, nitrate and nitrotyrosine levels in LPS-induced rats [40]. Thus, isoflavone supplementation may inhibit reactive nitrogen species-induced oxidation, helping to provide a protective effect against cardiovascular and chronic inflammatory diseases.

Inhibition of pro-oxidant enzymes

Stimulation of inflammatory cells such as macrophages by bacterial endotoxins or inflammatory cytokines results in

increased expression of inducible nitric oxide synthase (iNOS) and subsequent production of large amount of nitric oxide that is able to produce oxidative injury. Flavonoids such as genistein correlated with a reduced IL-2 secretion and IL-2R expression in T cells stimulated with PHA/PMA. Also, PTK activation is required for LPS induction and activity in cultured macrophages [41, 42] by reducing the release of cytokines such as TNF- $\alpha$ , IL-6 and IL-1 $\beta$  from human blood monocytes [54, 57]. In *in vitro* studies with human peripheral mononuclear cells, genistein at a non-cytotoxic concentration, inhibited cell proliferation, and oxidizing molecules other than their regular substrates (L-2 and LTB4 production from stimulated cultures [59].

Lipoxygenases and cyclooxygenases are capable of oxidizing molecules other than their regular substrates (L-2 and LTB4 production from stimulated cultures [59]. with the potential for increasing oxidative lesion in some tissues. Some flavonoids and other plant polyphenols have been shown to increase in mRNA of IL- $\beta$ , IL-6 and TNF- $\alpha$  produced by the ability to inhibit cyclooxygenase (COX-2) and LPS-stimulated monocytes was blocked by genistein, lipoxygenase [43–45].

The xanthine oxidase pathway has been implicated as a very important factor  $\kappa$ B (NF- $\kappa$ B), a transcription factor involved in the important route in the oxidative injury to tissues. During expression of cytokine genes, illustrating a potentially ischemic conditions, xanthine dehydrogenase changes to xanthine oxidase that is a source of oxygen free radicals. Some flavonoids such as apigenin, chrysin or luteolin and flavonols such as kaempferol and quercetin showed remarkable antiproliferative effects on M-CSF-activated macrophages, which decreased oxidative injury [46].

Indeed, a variety of oxidants, free radicals and aldehydes may be related with their role as tyrosine kinase inhibitors are implicated in the pathogenesis of chronic inflammatory diseases, since polyphenolic components from dietary plants may increase the endogenous antioxidant potential and, thus, modulate cellular redox state. These compounds may be an alternative for the treatment of chronic inflammatory diseases.

#### Modulation of inflammatory related cell functions

The immune system is integrated by a highly complex regulated group of cells that may interact in a cell-cell manner and may also respond to intercellular messages including hormones, cytokines and autacoids. The immune response can be modified by diet, pharmacological agents, environmental pollutants, and naturally occurring food chemicals such as vitamins and flavonoids [47–49]. Some flavonoids display a remarkable array of biochemical and pharmacological actions that affect the function of immune cells and in inflammatory cells such as T cells, B cells, macrophages, neutrophils, mast cells, or basophils [50].

Several flavonoids specifically affect enzyme systems critically involved in the generation of inflammatory processes, especially tyrosine and serine-threonine protein kinases. These enzymes are involved in signaling transduction and cell activation processes such as T cell proliferation [51, 52], B lymphocyte activation [53] or cytokine production by stimulated monocytes [54].

Genistein, an isoflavone, has been demonstrated as a specific inhibitor for tyrosine protein kinase [55]. This activity may be involved in some of its anti-inflammatory effects, while T cell proliferation is accompanied by phosphorylation of tyrosine of particular T cell proteins. Trevillyan et al. [56] showed that the inhibition of the enzymatic activity of the T cell specific protein kinase p56lck by genistein correlated with a reduced IL-2 secretion and IL-2R expression in T cells stimulated with PHA/PMA. Also, PTK activation is required for LPS induction and activity in cultured macrophages [41, 42] by reducing the release of cytokines such as TNF- $\alpha$ , IL-6 and IL-1 $\beta$  from human blood monocytes [54, 57]. In *in vitro* studies with human peripheral mononuclear cells, genistein at a non-cytotoxic concentration, inhibited cell proliferation, and oxidizing molecules other than their regular substrates (L-2 and LTB4 production from stimulated cultures [59]. Geng and coworkers [54] demonstrated that a tenfold increase in mRNA of IL- $\beta$ , IL-6 and TNF- $\alpha$  produced by LPS-stimulated monocytes was blocked by genistein, which also reduced the LPS-induced activation of nuclear factor  $\kappa$ B (NF- $\kappa$ B), a transcription factor involved in the important route in the oxidative injury to tissues. During expression of cytokine genes, illustrating a potentially ischemic conditions, xanthine dehydrogenase changes to xanthine oxidase that is a source of oxygen free radicals. Some flavonoids such as apigenin, chrysin or luteolin and flavonols such as kaempferol and quercetin showed remarkable antiproliferative effects on M-CSF-activated macrophages, which decreased oxidative injury [46].

#### Modulation of proinflammatory enzyme activities

Many investigations have shown that different flavonoid molecules modulate the activity of arachidonic acid (AA) metabolizing enzymes such as phospholipase (PLA<sub>2</sub>) and cyclooxygenase (COX) and lipoxygenase (LOX) [65, 66], and the nitric oxide (NO) producing enzyme, nitric oxide synthase (NOS) [68, 69]. The inhibition of these enzymes reduces the production of AA, prostaglandins, leucotrienes, and NO, which are crucial mediators of inflammation. Thus, the inhibition of these enzymes by flavonoids may be one of the most important mechanisms of their anti-inflammatory activity.

*Arachidonic acid related enzymes*

Arachidonic acid release is a starting point for a general inflammatory response. Arachidonic acid is released from membrane phospholipids in cells by the action of phospholipase A<sub>2</sub> (PLA<sub>2</sub>) and metabolized by cyclooxygenase (COX) and lipoxygenase (LOX) pathways to prostaglandins, vasoactive leukotrienes (LT<sub>4</sub>, LTD<sub>4</sub>, LTE<sub>4</sub>), as well as to the potent chemoattractant LTB<sub>4</sub> [50]. Selected phenolic compounds such as flavonols and polyphenols were found to inhibit these enzymes, reducing the release and metabolism of arachidonic acid and thus, diminishing the formation of inflammatory mediators.

The first described flavonoid inhibitor of PLA<sub>2</sub> was quercetin, which inhibited PLA<sub>2</sub> from human neutrophils [70]. Later, several studies have repeatedly reported that quercetin and other flavonoids inhibit different isoforms of PLA<sub>2</sub> from different sources [65, 66, 71, 72].

Cyclooxygenase (COX) produces prostaglandins (PGs) and thromboxanes from AA. The enzyme exists in two different isoforms COX-1 and COX-2. Thus, COX-1 is a constitutive enzyme existing in almost every cell type, while COX-2 is an inducible enzyme that produces large quantities of PG, and is highly expressed in the inflammation related cells when they are stimulated with proinflammatory cytokines and/or bacterial lipopolysaccharide [73, 74].

Lipoxygenases (LOXs) are responsible for generating hydroxy acids and leukotrienes from AA. Among the different isoforms of LOX, 5- and 12-LOX are involved in allergic and inflammatory disorders, 5-LOX produces 5-HETE and LTs, which are potent chemoattractants, 12-LOX synthesizes 12-HETE, which aggregate platelets and induces inflammatory responses [75].

Some flavonoids such as luteolin, galangin or morin were for the first time described as inhibitors of COX [76]. From human thrombin aggregated platelets, certain flavonoids were identified as COX/LOX inhibitors, and this antagonistic activity was related with the structural characteristics of the different molecules: flavone derivatives such as flavone, apigenin, and chrysin inhibited platelet aggregation by depressing the COX pathway, while flavonol-related compounds such as myricetin and quercetin inhibited primarily LOX activity [77].

Flavonoids inhibiting COX-2 activity has been rarely reported, Chi et al. [67] compared the effect of different flavonoid derivatives on COX-1, COX-2, 5-LOX and 12-LOX activity. Among the studied molecules some prenylated flavonoids moderately inhibited COX-2, but with low selectivity over COX-1. Wogonin, a plant derived flavone was found to inhibit COX-2 activity as well as COX-2 expression in LPS induced macrophages [78, 79]. This compound did not significantly inhibit COX-1 and 12-LOX from human platelet homogenates [80]. The inhibitory effect of

wogonin on COX-2 activity may be a selective effect, since this compound inhibits PGE<sub>2</sub> production, but not LTB<sub>4</sub>

from IL-1 $\beta$  induced gingival fibroblasts [81]. The inhibition of 5-LOX from human polymorphonuclear cells by flavonoids has been investigated [82]. Thus, it has been shown that flavonoids act as redox inhibitors that can regulate lipoxygenase activity by preventing activation of resting form (ferrous state) to its reactive state (ferric) and simultaneously can convert the active form of lipoxygenase to its resting state. Among the molecules studied, genistein was a more potent inhibitor of LOX than daidzein, while glycosylated forms were as potent as their aglycones [82].

The LOX pathway generates leukotrienes. When COX-2 is blocked, the LOX pathway still produces the potent mediators of inflammation. Dual inhibition of COX/LOX has been suggested to be a relevant approach in the development of new anti-inflammatory treatments [83].

Some natural polyphenols such as curcumin are inhibitors of both COX and LOX. These compounds can modulate arachidonic acid metabolism at different stages, by inhibiting phosphorylation of cPLA<sub>2</sub>, inhibiting COX-2 protein expression and catalytic activity, and inhibiting 5-LOX activity [83].

*NO synthase*  
NO, a ubiquitous cellular mediator of physiological and pathological processes, is produced by a family of enzymes, including endothelial NOS (eNOS), neuronal NOS (nNOS) and inducible NOS (iNOS). The latter type is an inducible enzyme that is highly activated by inflammatory stimuli (LPS and inflammatory cytokines) in certain cells such as macrophages [84].

Indeed, iNOS is responsible for the overproduction of NO during inflammation. Thus, compounds that are able to reduce NO production by iNOS without affecting eNOS or nNOS may be desirable as anti-inflammatory agents. Certain flavonoids have been shown to inhibit NO production from macrophage or macrophage-like cells activated with inflammatory stimuli [85-89]. In this context, it has been reported that the high affinity of polyphenols for proteins and a possible subsequent conformational change of enzyme might be associated with the inhibitory effect by flavonoids on iNOS enzyme activity [68]. However, only a few studies have demonstrated a direct effect of flavonoids on enzyme activity. Cheon et al. (2000) studied the effects of some prenylated flavonoids and biflavonoids on LPS-induced nitric oxide production from RAW 264.7 cell line. These investigators found that such compounds inhibited the production of nitric oxide, this effect being mediated by the suppression of iNOS enzyme induction, but not by direct inhibition of



Cytokine production (TNF $\alpha$ , IL-6, IL-10 and IL-1R epithelial and dendritic cells, luteolin blocks LPS-induced antagonist) is strongly inhibited by the administration of aNF- $\kappa$ B signaling and proinflammatory gene expression p38 MAPK inhibitor in vivo, during human endotoxemia through the inhibition of IKK activity [119]. It has been [106]. In human chondrocytes, inhibition of JNK, p38, and reported in mouse alveolar macrophages that luteolin Erk1/2 MAP kinases downregulates IL-1-induced COX-2inhibits LPS-induced in inflammatory reactions by blocking expression and PGE<sub>2</sub>production [107]. Inhibition of the NF- $\kappa$ B and AP-1 activation pathways [10]. MAPKs is likely to result in a suppression of inflammatory Hämäläinen et al. studied the effect of eight flavonoid mediators and these kinases may be a target for anti-inflammatory compounds on the activation of inflammatory transcriptional factors NF- $\kappa$ B and STAT-1. All of them inhibited LPS has been shown to activate MAPK signaling cascadesPS-induced NF- $\kappa$ B activation, but only four of them: [108]. Xagorari et al. [109] have shown that the exposure of genistein, kaempferol, quercetin and daidzein also inhibited RAW 264.7 macrophages to LPS caused phosphorylation of STAT-1 activation. Interestingly, the three most potent ERK1/2, p38, and JNK pathways, pretreatment of cells with antagonists of iNOS expression and NO production (genistein abolished the LPS-induced stimulation of ERK1/2, kaempferol and quercetin) inhibit both NF- $\kappa$ B and p38, but not JNK phosphorylation. The contribution of STAT-1 activations, whereas those flavonoids inhibiting ERK1/2 and p38 pathways in stimulated TNF $\alpha$  production only NF- $\kappa$ B had smaller effect on iNOS expression [10]. In macrophages depends on the origin of macrophages and the nature of the stimulus [110–113]. By using specific inhibitors, these researchers demonstrated that only simultaneous inhibition of the two pathways resulted in drastic reduction of TNF $\alpha$  release [109], which is in agreement with results obtained with alveolar macrophages, where the activation of both ERK and p38 is necessary for optimal TNF $\alpha$  production [114]. Similar results have been obtained with quercetin, where pretreatment of LPS-stimulated RAW 264.7 cells with quercetin inhibited ERK and p38 in using these substances for the treatment of such diseases. activation, but not JNK activation [95].

Another control point of gene expression is the NF- $\kappa$ B transcriptional system, which is a major effector pathway involved in inflammation and innate immune responses. Cancer is a hyperproliferative disorder that involves morphological cellular transformation, dysregulation of inflammatory responses are regulated at the level of transcription by NF- $\kappa$ B. Activation of this nuclear factor is regulated by its endogenous inhibitor I $\kappa$ B, which complexes and sequesters NF- $\kappa$ B in the cytoplasm. Following stimulation, the successive activation of various kinases leads to the phosphorylation and degradation of I $\kappa$ B and subsequent release of NF- $\kappa$ B, which then translocates to the nucleus and activates the transcription of multiple genes, including TNF $\alpha$ , IL-6, IL-8, and other chemokines; MHC class II; ICAM-1; iNOS, and COX-2 [116]. Several flavonoids have been shown to downregulate the production of inflammatory mediators through the blockade of NF- $\kappa$ B pathway at different levels.

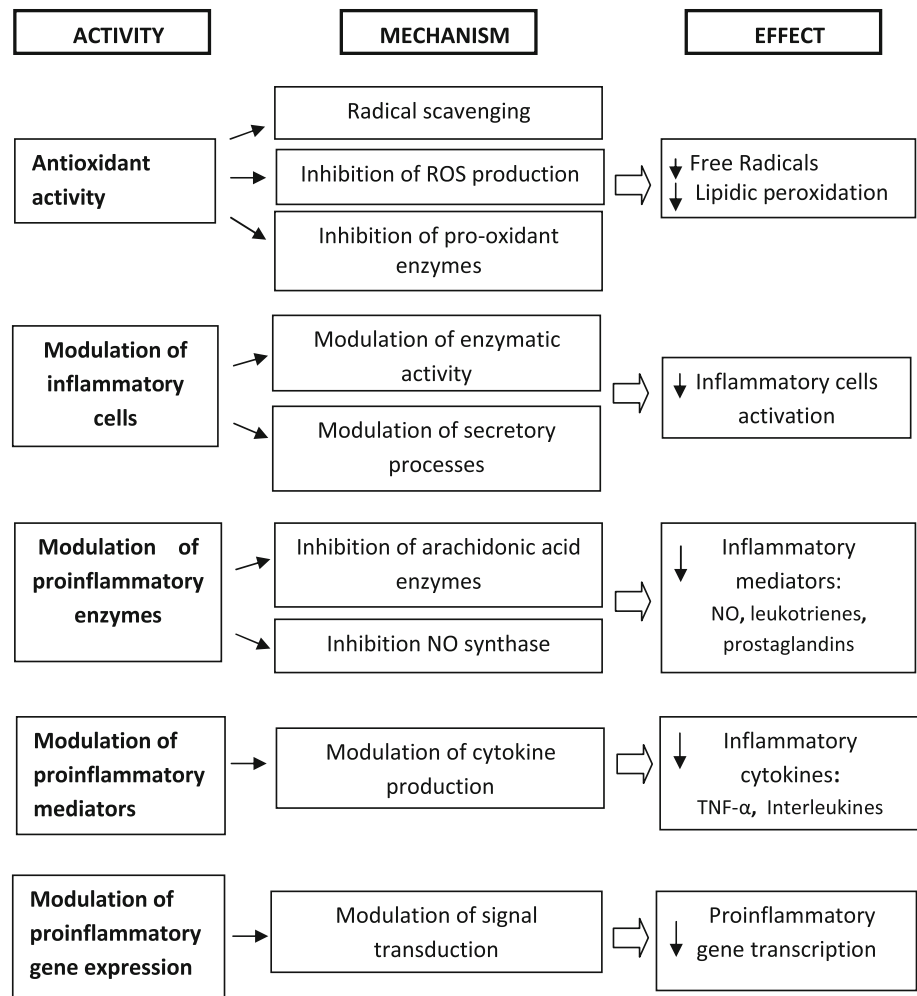
In this context, luteolin has shown potent anti-inflammatory properties by inhibiting LPS-induced pro-inflammatory molecule expression both in vitro [117] and in vivo [118]. The molecular mechanisms of luteolin-mediated immunomodulation have been extensively studied in different cellular lines. In murine macrophages RAW 264.7, luteolin inhibits gene expression and proinflammatory cytokine production by blocking protein tyrosine phosphorylation and NF- $\kappa$ B activation [93]. In intestinal

#### Flavonoids, inflammation and disease

Excessive inflammation is considered to be a critical factor in many human diseases, including cancer, cardiovascular diseases, obesity, type II diabetes, or inflammatory bowel disease [97]. The reported anti-inflammatory properties of natural products such as flavonoids may be a crucial factor in using these substances for the treatment of such diseases.

Flavonoids, inflammation and cancer  
 Inflammation plays a role in malignant processes: chronic inflammation predispose to cancer, immune inflammatory cells and inflammatory mediators are found in cancer, deletion of inflammatory mediators inhibits development of experimental cancers, and long-term use of nonsteroidal anti-inflammatory agents reduces the risk of some tumors [121–124]. Several lines of evidence are consistent with the view that inflammation is involved in tumor initiation, promotion and progression [121]. Recent data from mouse models of human cancer have established that inflammation, which orchestrates the tumor microenvironment, is a critical component of tumor evolution [126, 127]. Moreover, excessively and chronically produced proinflammatory mediators are thought to contribute to tumor promotion and progression [121, 126]. Chronically activated immune cells promote cancer development via direct and indirect mechanisms. Multiple

Fig. 1 Anti-inflammatory mechanisms of flavonoids



mechanisms have been identified explaining the way by which in inflammatory states can promote cancer development (Figs.1, 2). The cellular signaling pathways that regulate proliferation, survival and transformation of cells are of particular interest in current cancer research. Many of the molecular alterations associated with carcinogenesis occur in cell signaling pathways that regulate cell proliferation and differentiation. These pathways include several kinases such as MAPK, and protein kinases (PK), both of them, closely implicated in inflammatory processes. Abnormal activation or silencing of these kinases or their downstream transcription factors can result in uncontrolled cell growth, leading to malignant transformation [41].

Epidemiological studies have shown an inverse association between vegetables and fruits consumption and the risk of human cancers at many sites [28, 129]. Plant foods contain a wide variety of anticancer phytochemicals with potential bioactivities that may reduce cancer susceptibility. Among them, flavonoids are especially promising candidates for cancer prevention [30, 131]. Several studies in vitro and in animal models have demonstrated the effect of flavonoids in suppressing carcinogenesis [132–139].

Several mechanisms of action have been identified for flavonoid chemoprevention, including estrogenic/anti-inflammatory mechanisms implicated in specific flavonoid estrogenic activity, antiproliferation, induction of cell-cycle arrest or apoptosis, prevention of oxidation, induction of detoxification enzymes, regulation of the host immune system, anti-inflammatory activity and changes in cellular signaling [140].

Cancer is a largely preventable disease, namely, through an appropriate diet. Actually, since conventional therapeutic and surgical approaches have not been able to control the incidence of most cancer types, there is an



Fig. 2 Mechanisms of cancer promotion and progression by chronic inflammation

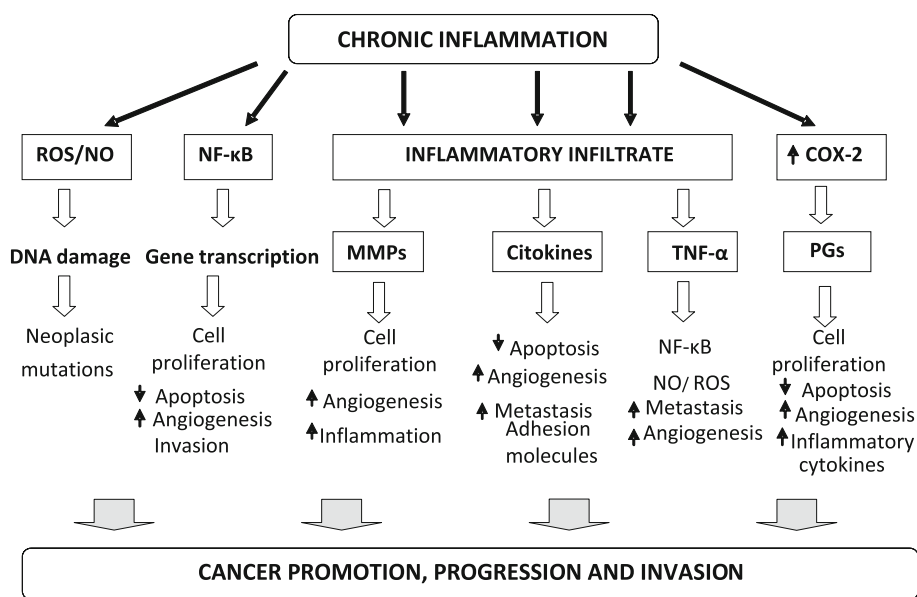


Table 2 Summary of studies demonstrating some of the anti-inflammatory mechanisms implicated in specific flavonoid chemoprevention

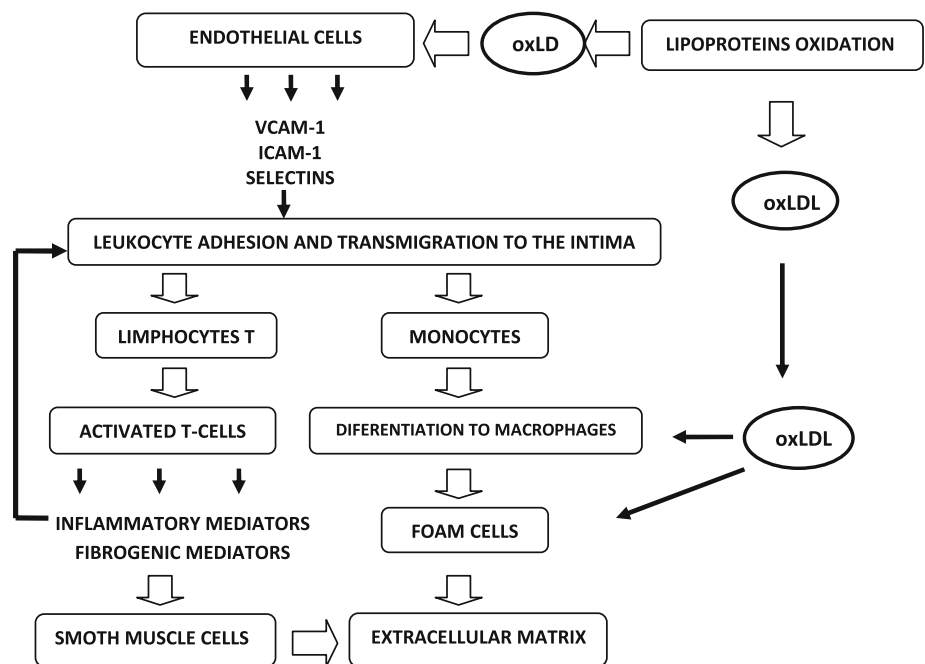
Mechanism	Compound	Cancer model	Reference
Antioxidant activity	Quercetin	Lung carcinogenesis	[142]
	Genistein	Neutrophils	[143]
COX-2 inhibition	Naringin	Colon carcinogenesis	[144]
	Tricin	Adenoma in APC <sup>fln</sup> mice	[145]
	Genistein	Human breast cancer cells	[146]
	Apigenin	UVB induced mouse skin tumors	[147]
Inhibition of PKC	Apigenin	Mouse skin tumors	[148]
	Luteolin	Skin tumor cell line	[149]
	Quercetin	Skin tumor cell line	[149]
Modulation of MAPK	Genistein	Prostate cancer	[150]
	Apigenin	Prostate cancer cells	[151]
	Apigenin	Breast carcinoma cells	[152]
Modulation of NFκB	Morin	Different tumor cell lines	[153]
	Genistein	Prostate, breast and pancreatic Cancer cells	[154-156]
	Apigenin	Prostate cancer	[157]

urgent need to develop strategies in order to achieve this goal. In this way, dietary polyphenolic compounds such as flavonoids can be important candidates for chemopreventive agents [158]. However, more data from in-human studies are needed in order to draw definitive conclusions. Recent advances in basic science have established a major role for inflammation in mediating all disease stages from initiation through progression and, ultimately, the thrombotic complications of atherosclerosis [60].

Cardiovascular disease is currently the main cause of death and illness in many countries. In inflammatory processes an initiation of atherosclerosis is the adherence of mononuclear cells to endothelium, which is triggered by a number of adhesion molecules such as P-selectin, E-selectin, vascular cell adhesion molecule-1 (VCAM-1) and

intercellular adhesion molecule-1 (ICAM-1) [62]. These molecules are expressed by endothelial and/or vascular smooth muscle cells upon proatherogenic stimuli such as oxidized LDL or oxidative free radicals [63, 164]. After monocytes and T lymphocytes bind to the surface of the arterial wall, they migrate into the subendothelial space where they differentiate and are transformed into macrophages and foam cells. Transendothelial migration of leukocytes during the inflammatory process is triggered by chemotactic proteins such as monocyte chemoattractant protein-1 (MCP-1) [65] as well as by proinflammatory cytokines secreted by macrophages and T cells, such as TNF- $\alpha$ , IL-1, IL-6, [166, 167] and growth factors such as platelet derived growth factor (PDGF), basic fibroblast growth factor (bFGF), insulin-like growth factor (IGF) and transforming growth factor- $\beta$  (TGF- $\beta$ ) [168]. These molecules contribute to atherogenesis by maintaining the inflammatory context, dietary antioxidants, as natural anti-inflammatory factors, may produce beneficial cardiovascular effects in human population, as supported by epidemiological data. Several prospective studies have reported inverse associations between antioxidant intake and cardiovascular disease incidence or mortality [174–177], whereas other studies have not [178, 179]. Recently, a prospective study of postmenopausal women showed that dietary intakes of flavonoids were associated with a reduced risk of death due to coronary heart and cardiovascular diseases [169]. In a recent work, Hooper et al. performed a systematic review of the effectiveness of different antioxidant subclasses and

Fig. 3 Inflammation in the initiation and progression of atherosclerosis



avonoid-rich food sources on CVD and risk factors. They research have received much attention over the past years concluded that although some avonoid-rich foods mayand a variety of potential beneficial effects have been have some clinically relevant effects on CVD risk factors, elucidated. Their potent anti-inflammatory activity sug- there are limited data from intervention trials for other guests the use of these compounds as potential prophylactic avonoid subclasses consumed as part of a normal diet and therapeutic agents. However, most of the research [181]. In addition to apparent benefits of avonoid intake in involved in in vitro studies and the scarcity of data in the primary prevention, one study suggested that avonoid bioavailability and in vivo models make it difficult to draw intake in the form of tea might have benefit among individuals with established cardiovascular disease [182].

There are several mechanisms by which avonoids may be protective against cardiovascular diseases, including antioxidant, anti-platelet, anti-inflammatory effects as well as increasing HDL, and improving endothelial function. Renewed scientific efforts will provide new insight into Central to the pathogenesis of atherosclerosis is the oxidation of low-density lipoprotein (LDL), avonoids have led to development of a new class of natural anti-oxidant effects and, additionally, some studies have shown that avonoids decrease lipid peroxidation of biological membranes [183]. On the other hand, some mechanisms implicated in the anti-inflammatory effects of avonoids may contribute to its cardiovascular protection, such as regulation of inflammatory mediators production. In an animal model, Droke et al. [184] demonstrated that soy isoflavone administration reduces the risk of cardiovascular disease associated with chronic inflammation, by down-regulating inflammatory mediators such as TNF- $\alpha$  and endothelial level. Furthermore, in vitro studies have revealed that dietary avonoids such as apigenin, chrysin, kaempferol or quercetin, attenuate the expression of adhesion molecules in human aortic endothelial cells [185].

Isoflavones also may protect against inflammatory vascular disease by inhibiting monocyte-endothelial cell adhesion [186]. Flavonoids also may contribute to stabilization of the atheroma plaque, quercetin has been shown to be inversely associated with mortality from coronary heart disease by inhibiting the expression of metalloproteinase 1 (MMP1), and the disruption of atherosclerotic plaques [187].

All of these data suggest a great potential for dietary avonoids as natural cardiovascular protectors. Continued studies of the biochemical mechanisms underlying cardiovascular diseases as well as biological effects of avonoids will unveil new strategies for the treatment of such pathological conditions.

## Conclusion

Excessive inflammation is considered as a critical factor in many human diseases, including two of the most extended burdens in the world: cancer and cardiovascular diseases. Epidemiological studies have demonstrated an inverse relationship between dietary avonoid intake and prevalence and risk of these diseases. So that, avonoids

are needed in order to establish their effectiveness in the treatment of chronic diseases such as cancer and cardiovascular diseases.

Central to the pathogenesis of atherosclerosis is the oxidation of low-density lipoprotein (LDL), avonoids have led to development of a new class of natural anti-oxidant effects and, additionally, some studies have shown that avonoids decrease lipid peroxidation of biological membranes [183]. On the other hand, some mechanisms implicated in the anti-inflammatory effects of avonoids may contribute to its cardiovascular protection, such as regulation of inflammatory mediators production. In an animal model, Droke et al. [184] demonstrated that soy isoflavone administration reduces the risk of cardiovascular disease associated with chronic inflammation, by down-regulating inflammatory mediators such as TNF- $\alpha$  and endothelial level. Furthermore, in vitro studies have revealed that dietary avonoids such as apigenin, chrysin, kaempferol or quercetin, attenuate the expression of adhesion molecules in human aortic endothelial cells [185].

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