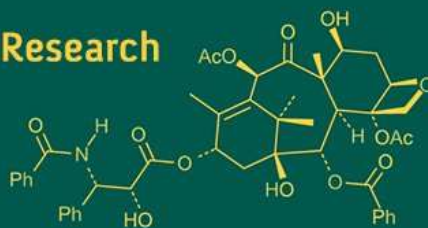
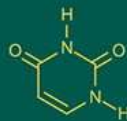
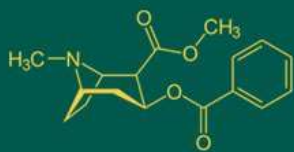


International Journal of Advanced Biochemistry Research



ISSN Print: 2617-4693
 ISSN Online: 2617-4707
 NAAS Rating: 5.29
 IJABR 2025; 9(5): 796-808
www.biochemjournal.com
 Received: 15-02-2025
 Accepted: 20-03-2025

Cherukuri Anusha
 Ph.D. Research Scholar,
 Department of Food and
 Nutrition, Punjab Agricultural
 University, Ludhiana, Punjab,
 India

Renuka Aggarwal
 Scientist, Department of Food
 and Nutrition, Punjab
 Agricultural University,
 Ludhiana, Punjab, India

Manisha Patil
 Ph.D. Research Scholar,
 Department of Food and
 Nutrition, Punjab Agricultural
 University, Ludhiana, Punjab,
 India

Kiran Grover
 Principal Extension Scientist
 Cum Head, Department of
 Food and Nutrition, Punjab
 Agricultural University,
 Ludhiana, Punjab, India

Combating disease with diet: The role of antioxidants against reactive oxygen species

Cherukuri Anusha, Renuka Aggarwal, Manisha Patil and Kiran Grover

DOI: <https://www.doi.org/10.33545/26174693.2025.v9.i5j.4429>

Abstract

Reactive oxygen species (ROS) are highly reactive molecules that play a dual role in cellular physiology, acting as signaling molecules at low concentrations while contributing to oxidative stress and cellular damage at elevated levels. This review explores the formation, regulation, and biological effects of ROS, emphasizing their implications in various pathologies, including cancer, diabetes, and neurodegenerative diseases. Mitochondria and NADPH oxidases are identified as primary sources of ROS, with superoxide dismutase (SOD) and other antioxidant enzymes playing crucial roles in mitigating oxidative damage. The balance between ROS production and antioxidant defenses is critical for maintaining cellular homeostasis and preventing disease progression. Furthermore, the review discusses emerging therapeutic strategies aimed at modulating ROS levels, such as gene therapy, stem cell therapy, and personalized medicine approaches that tailor antioxidant treatments based on individual metabolic profiles. The potential of probiotics in reducing inflammation and oxidative stress in gastrointestinal disorders is also highlighted. Understanding the intricate relationship between ROS and cellular signaling pathways, particularly the NF- κ B pathway, is essential for developing effective interventions against ROS-related diseases. This comprehensive overview underscores the importance of maintaining redox balance and presents avenues for future research focused on harnessing the beneficial aspects of ROS while minimizing their detrimental effects. Furthermore, this review provides a foundation for innovative therapeutic strategies targeting oxidative stress and its associated disorders by integrating knowledge from various fields, including molecular biology and clinical medicine.

Keywords: Reactive oxygen species, oxidative stress, antioxidants, disease pathogenesis, therapeutic strategies

1. Introduction

The human body is a complex entity composed of organs, systems, and various cellular responses that combine to fulfill specific functions necessary to sustain life (Grzegorz *et al.* 2024) ^[28]. Several types of reactive species participate in cellular responses and have attracted interest. These species are named according to the nature of reactive atoms such as oxygen (reactive oxygen species), nitrogen (reactive nitrogen species) or sulfur (reactive sulphur species) (Sies and Jones, 2020) ^[91]. Oxygen has a unique molecular structure (Fig.1) and is prevalent in cells. It readily accepts free electrons generated by normal oxidative metabolism within the cell, forming reactive oxygen species (ROS) (Richard and Davis, 2009) ^[82]. ROS are chemically reactive molecules containing oxygen that play a dual role in biological systems. These are molecules that contain at least one oxygen atom and exhibit greater reactivity compared to molecular oxygen and encompass both free radical species (such as singlet oxygen, hydroxyl radical, and superoxide) and non-radical species (such as hydrogen peroxide, H₂O₂) (Cheng; Rauf).

Corresponding Author:
Cherukuri Anusha
 Ph.D. Research Scholar,
 Department of Food and
 Nutrition, Punjab Agricultural
 University, Ludhiana, Punjab,
 India

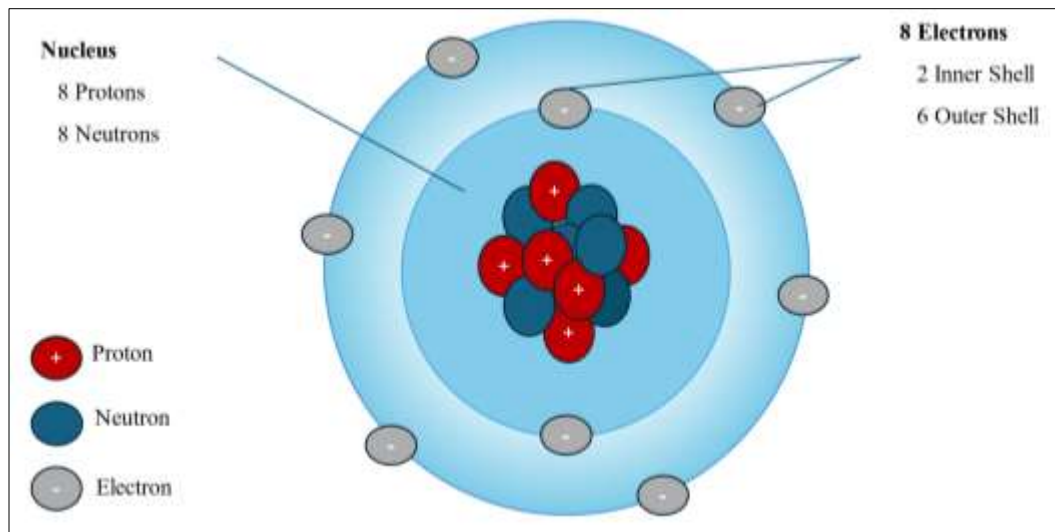


Fig 1: Oxygen atom

In physiological contexts, reactive oxygen species (ROS) are typically generated as a byproduct of normal cellular metabolism during oxidative reactions in the mitochondrial respiratory chain. Additionally, ROS are produced through various intra- and extracellular processes that regulate cellular homeostasis, including cell division, differentiation, and apoptosis. Elevated ROS levels can lead to cellular damage also activate specific signaling pathways involved in ROS scavenging to mitigate their detrimental effects. The balance between the generation of reactive oxygen species (ROS) and the antioxidant defense mechanisms is essential for preserving cellular homeostasis. Oxidative stress, stemming from an overabundance of ROS, is implicated in the pathogenesis of various diseases, including neurodegenerative disorders such as Alzheimer's (Czapski *et al.* 2016) [18] and Parkinson's diseases (Thomas *et al.* 2007) [98], cardiovascular diseases (Knock *et al.* 2019; Handy and Loscalzo, 2017) [50, 31] like atherosclerosis (Incalza *et al.* 2018) [38], cancer (Srinivas *et al.* 2019; Hemple and Trebak, 2017) [95, 33], diabetes, and inflammatory conditions (Lugrin *et al.* 2014; Tschopp, 2011) [58, 99]. ROS can instigate oxidative harm by interacting with cellular constituents, thereby disturbing normal cellular processes and advancing disease states. This review emphasizes the sources,

pathways associated with the production of ROS, the role of antioxidants along the strategies for ROS management.

2. Sources and Production of ROS

Various cellular sources contribute to ROS generation. Sources can be either endogenous (produced within the body) or exogenous (Outside the body) (Schieber and Chandel, 2014) [86] Fig.2. These ROS molecules originate from oxygen which is utilized in various metabolic responses. Mitochondria are the primary cellular organelles responsible for ROS generation, particularly through the electron transport chain (ETC) embedded in the inner mitochondrial membrane during oxidative phosphorylation (OXPHOS) for ATP production (Liguori *et al.* 2018) [54]. Around 2% of the oxygen is utilized through mitochondria to generate O_2^- . Therefore, mitochondria are considered the utmost source of ROS (Phaniendra *et al.* 2015) [72]. To counteract the harmful effects of ROS, cells are equipped with antioxidant defense systems comprising enzymes like superoxide dismutase (SOD), catalase, and glutathione peroxidase, as well as non-enzymatic antioxidants like vitamins C and E, glutathione, and flavonoids (Brand, 2016) [12] (Fig.3).

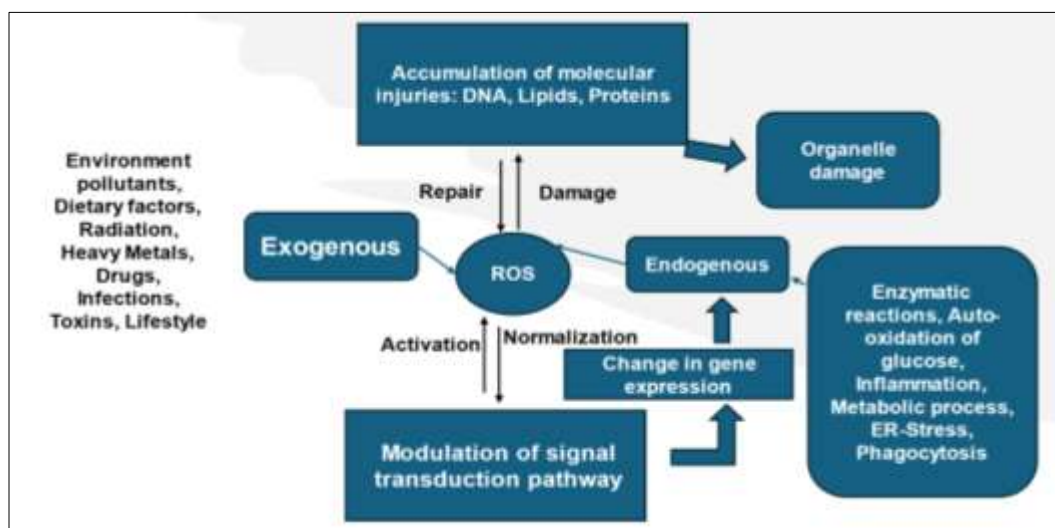


Fig 2: Sources and Production of ROS

3. Pathways associated with the production of ROS

Understanding the pathways through which ROS exert their effects and identifying potential inhibitors to regulate ROS levels are active areas of research in the field of oxidative stress biology. Targeting these pathways and developing effective ROS inhibitors shows potential for therapeutic

interventions in diseases linked to oxidative stress. Researchers aim to uncover novel strategies by understanding the complex interaction between ROS and cellular signaling pathways, crucial for mitigating oxidative damage and maintaining cellular health.

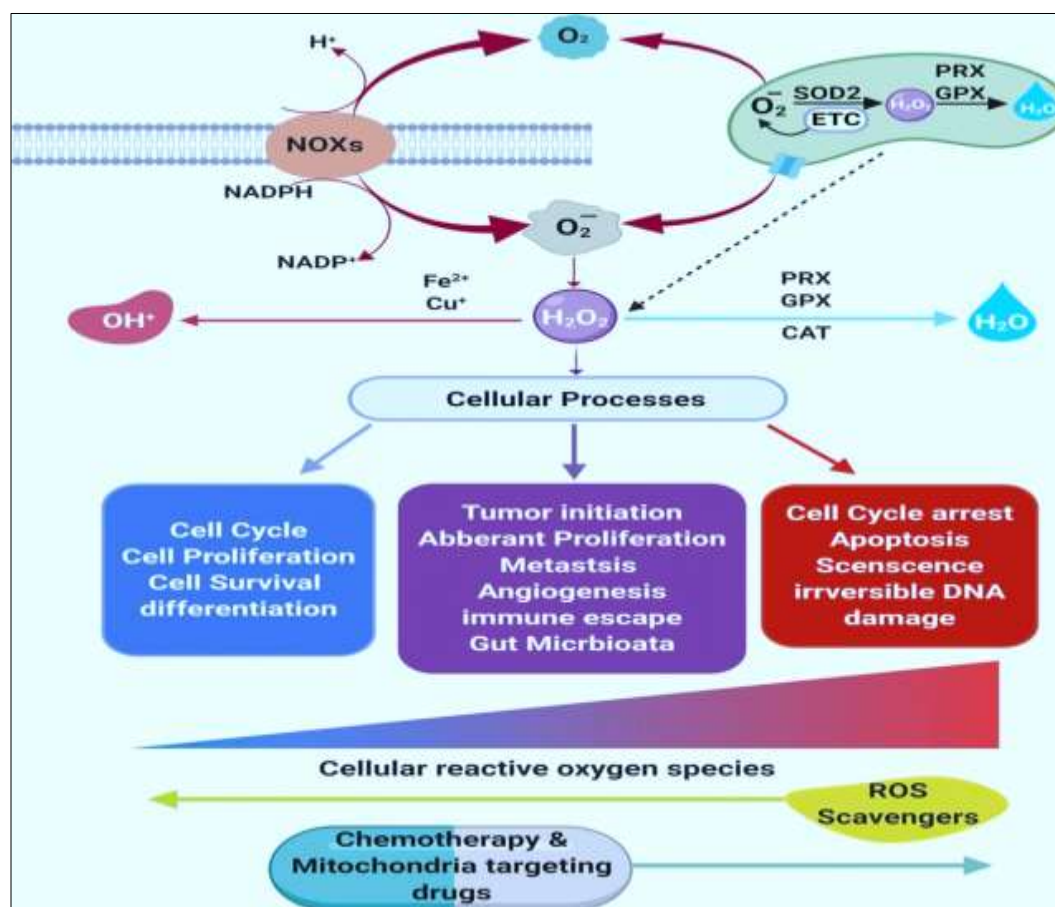


Fig 3: Generation and regulation of reactive oxygen species (ROS) and their impact on cellular functions.

Mitochondria and NADPH oxidases are primary sources of the formation of reactive oxygen species (ROS), including superoxide (O_2^-), hydroxyl radicals (OH^\bullet), and hydrogen peroxide (H_2O_2). Superoxide dismutase (SOD1 or SOD2) converts O_2^- into H_2O_2 , which can then be converted into water (H_2O) by peroxiredoxin (PRX), glutathione peroxidase (GPX), and catalase (CAT) in both mitochondria and cytosol. ROS are generated during normal cellular processes, with homeostasis maintained by cellular antioxidants. Low levels of ROS (green) are essential for maintaining normal cellular proliferation, survival, and differentiation. Moderate to high levels of ROS (light red) promote increased cellular proliferation, survival, tumor initiation, immune escape, genomic instability, metastasis, invasion, and angiogenesis. Extremely high levels of ROS (dark red), often induced by chemotherapeutic agents, are detrimental to cells, leading to cell cycle arrest, apoptosis, senescence, and irreparable DNA damage. (Kirtonia *et al.* 2020) [49].

3.1 Nuclear factor- Kappa B pathway

The nuclear factor-kappa B (NF- κ B) pathway regulates various cellular processes, including inflammation, immunity, cell survival, and proliferation. In the context of reactive oxygen species (ROS), the NF- κ B pathway plays a

significant role in responding to oxidative stress and maintaining cellular homeostasis (Pajares *et al.* 2018) [68]. When cells are exposed to ROS, they activate signaling pathways that can activate NF- κ B (Garda and Brink, 2014) [26] (Fig 4). ROS can directly influence the NF- κ B pathway by modulating the activity of key proteins involved in its activation. This pathway is activated by two distinct pathways namely canonical and non-canonical pathways (Bonizzi and Karin, 2004) [9]. Non-canonical ROS can activate NF- κ B through the phosphorylation of a protein called p65, which is a subunit of the NF- κ B complex (Hayes *et al.* 2020) [32]. This phosphorylation event is essential for p65 to engage with other proteins and activate the transcription of specific genes involved in the cellular response to oxidative stress. On the other hand, NF- κ B can also be inhibited by ROS under certain conditions (Khan *et al.* 2021) [47]. The relationship between ROS and NF- κ B is complex and context-dependent, with ROS being able to both activate and inhibit NF- κ B-mediated transcription (Vallabhapurapu and Karin, 2009) [102]. The balance between pro-inflammatory processes regulated by NF- κ B and the antioxidative conditions within cells is crucial for maintaining cellular health and responding to oxidative stress effectively (Lingappan, 2018) [56]. Overall, the NF- κ B ROS pathway represents a dynamic interplay between ROS

signaling and the cellular response mediated by NF- κ B. Understanding how ROS influences the NF- κ B pathway can provide insights into the mechanisms underlying oxidative

stress-related diseases and potential therapeutic strategies for modulating NF- κ B activity in response to ROS-induced damage (Morgan, 2011) [65].

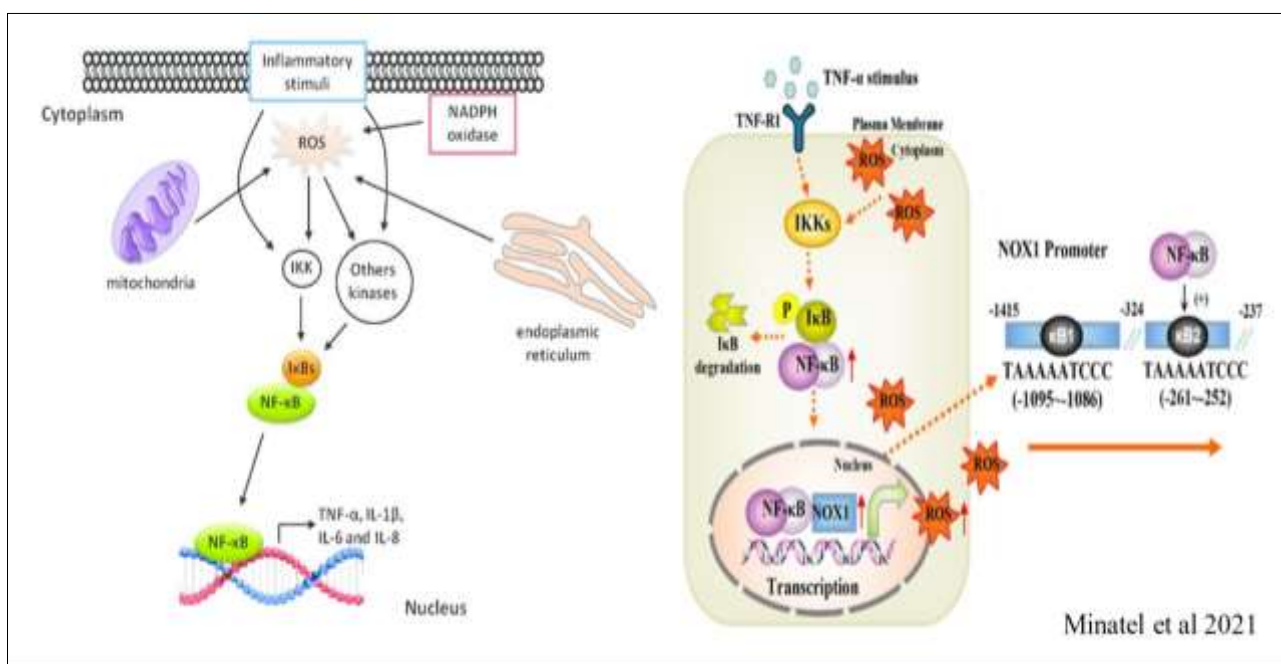


Fig 4a: Signaling Mechanism of ROS- Mediated Nuclear Factor Kappa-B (NF- κ B) Activation. **b.** Mechanism of NF- κ B activation by TNF- α stimulus and translocated into the nucleus, binds to NOX1 promoter region and activates oxidative stress leading to inflammation and ROS production. (Wu and Li, 2021) [21].

3.2. MAPK's Pathway

Mitogen-Activated Protein Kinases (MAPKs) pathway is a crucial signaling cascade that regulates various cellular processes in response to external stimuli, including stress, growth factors, and cytokines (Smalley, 2003) [92]. The MAPK pathway consists of a series of protein kinases that relay signals from the cell surface to the nucleus, ultimately leading to changes in gene expression and cellular responses (Sato *et al.* 2004) [84].

MAPK signaling pathway, also referred to as the Ras-Raf-ERK-MAPK pathway, comprises seven transduction families in mammals (Grosch *et al.* 2003) [27]. These families share a basic structure involving two serine/threonine kinases (Kanojia *et al.* 2017) [43] and one dual-specificity threonine/tyrosine kinase (Soh *et al.* 2000) [93]. ERK, a key member of the MAPK family which includes MEK1 and MEK2 genes, plays a pivotal role in signaling cascades, transmitting extracellular signals to intracellular targets (Kim *et al.* 2002) [48]. The MAPK signal transduction pathway is central to the regulation of cellular growth, development, and differentiation, and is crucial in processes such as cell proliferation, differentiation, apoptosis, and autophagy (Zhu *et al.* 2004) [119]. In eukaryotic cells, four main MAPK cascades have been identified: ERK, JNK/stress-activated protein kinase, p38 MAPK, and ERK5. Signal transmission in this pathway follows a three-stage enzyme-linked reaction involving MAP3K, MAP2K, and MAPK (Finlay *et al.* 2000) [23]. Within this pathway, Ras functions as an upstream activator, Raf as MAP3K, MEK as MAP2K, and ERK as MAPK, forming the Ras-Raf-MEK-ERK pathway (Hilger *et al.* 2002) [34]. Ras, the upstream protein of the Raf-MEK-ERK pathway, is a small G protein with an active GTP-bound form and an inactive GDP-bound form (Fan *et al.* 2019) [22]. It transmits signals by binding MAP3K and Raf kinases to the cell membrane,

subsequently activating these kinases. The MAPK/ERK pathway conveys extracellular information from cell surface receptors to DNA in the nucleus (Cuadrado and Nebreda, 2010) [17]. Ligand binding to the dimer transmembrane tyrosine kinase receptor initiates intracellular signaling along the Ras-Raf-MEK-ERK pathway (Aggarwal *et al.* 2019) [2]. Activation of this cascade results in the phosphorylation of ERK1/2, leading to the transcriptional induction of target genes in the nucleus and cytoplasm (Sidhanth *et al.* 2018) [89] (Fig 5).

3.3 Phosphoinositide 3-kinase (PI3K)-Akt signaling pathway

The Phosphoinositide 3-kinase (PI3K)-Akt signaling pathway is a crucial intracellular signaling pathway that plays a fundamental role in regulating various cellular processes, including cell growth, proliferation, survival, and metabolism (Innocenti *et al.* 2003; Qiu *et al.* 2014) [39, 78]. In the context of ROS, the PI3K-Akt pathway interacts with ROS signaling through multiple mechanisms (Pimienta and Pascual, 2007) [73]. ROS can directly activate PI3K by oxidizing and inhibiting PTEN, a negative regulator of PI3K, thereby activating Akt. Akt, in turn, regulates cellular responses to oxidative stress by phosphorylating and modulating downstream targets involved in cell survival and apoptosis, such as BAD and FOXO transcription factors. Conversely, ROS can indirectly influence the PI3K-Akt pathway by activating signaling cascades like MAPK, which can interact with the PI3K-Akt pathway to regulate cell growth and proliferation in response to oxidative stress (Xu *et al.* 2023) [112]. Moreover, ROS-induced oxidative modifications of proteins within the PI3K-Akt pathway can affect its activity and downstream signaling (Wang *et al.* 2016) [105]. The interplay between ROS and the PI3K-Akt pathway is crucial for cellular adaptation to oxidative stress

(Sies and Jones, 2020) [91]. While moderate ROS levels can activate signaling pathways like PI3K-Akt to enhance cell survival and antioxidant defenses, excessive ROS production can overwhelm cellular antioxidant mechanisms, leading to oxidative damage (Almeida *et al.* 2020). Understanding the complex interactions between ROS and the PI3K-Akt pathway is essential for deciphering cellular responses to oxidative stress and how dysregulation of these pathways contributes to diseases such as cancer, neurodegenerative disorders, and metabolic conditions (Kerins and Ooi, 2018) [46]. Targeting components of the PI3K-Akt pathway and redox signaling presents potential therapeutic avenues for managing diseases associated with oxidative stress.

4. Reactive Oxygen Species (ROS) and Associated Diseases

ROS are essential for normal cellular functions, excessive ROS production can lead to oxidative stress, which is implicated in the pathogenesis of numerous diseases mainly due to three reasons: Lipid oxidation, protein damage, and

DNA damage (Fig 6). The role of ROS in disease pathogenesis underscores the importance of maintaining redox balance within the body (Kirtonia *et al.* 2020) [49]. A few of the diseases along with the mechanisms is mentioned below.

a. Cancer: ROS are known to contribute to cancer development through several mechanisms. i) DNA Damage-High levels of ROS can cause oxidative DNA damage, leading to mutations and genomic instability, which are hallmarks of cancer (Karin, 2009; Uehara and Tanaka, 2018) [44, 101]. ii) Tumor Microenvironment-ROS can influence the tumor microenvironment by promoting inflammation and altering the behavior of immune cells, such as tumor-associated macrophages and myeloid-derived suppressor cells, which can enhance tumor growth and metastasis (Srinivas *et al.* 2019; Hempel and Trebak, 2017) [95, 33]. iii) Cell proliferation-ROS can activate signaling pathways that promote cell proliferation and survival, contributing to tumorigenesis (Salminen *et al.* 2019) [83].

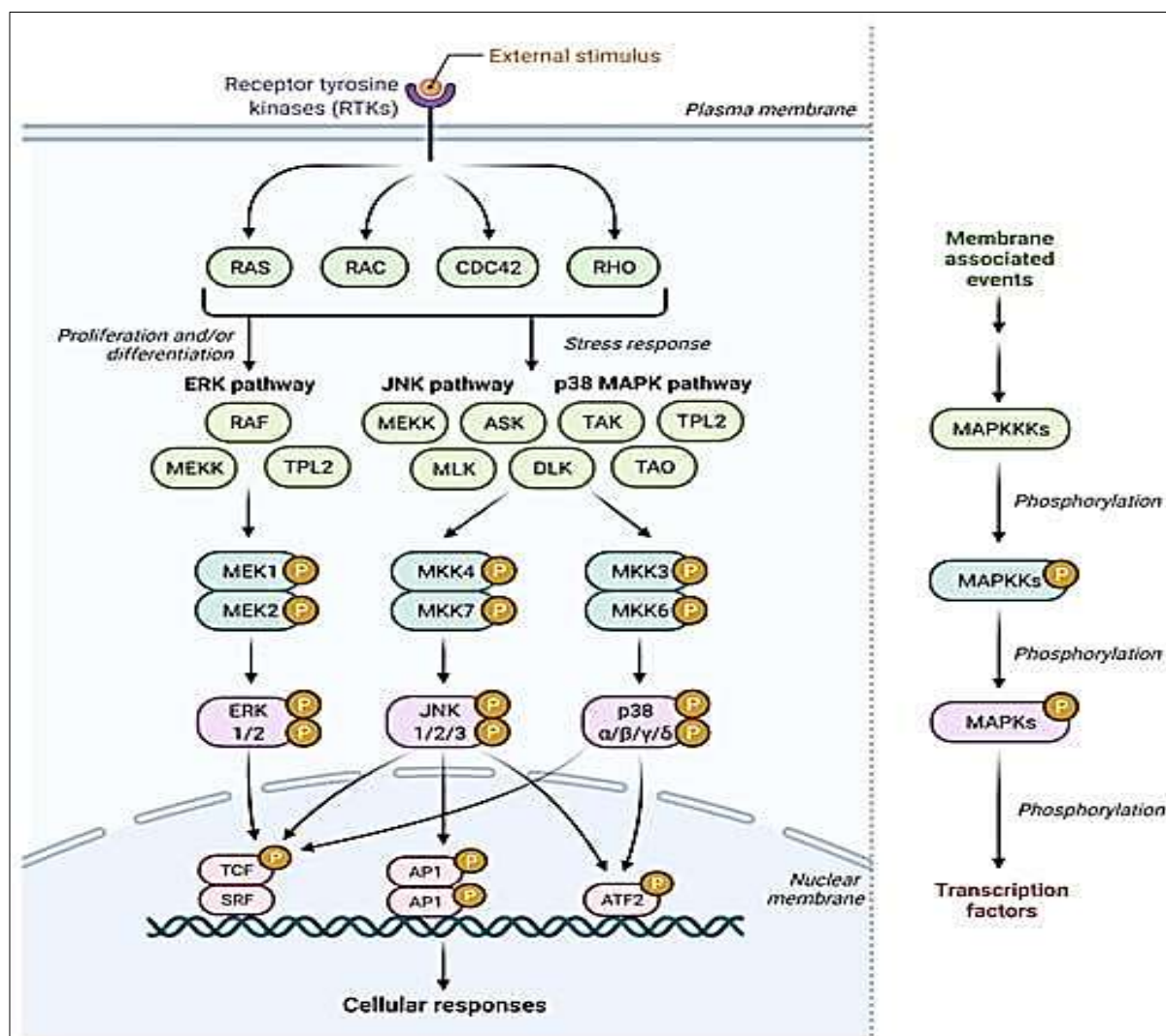


Fig 5: Activation of MAPK pathway. External stimulation activates three transcription factors through sequential protein phosphorylation and translocate to the nucleus leading to cellular response (Pua *et al.* 2022)

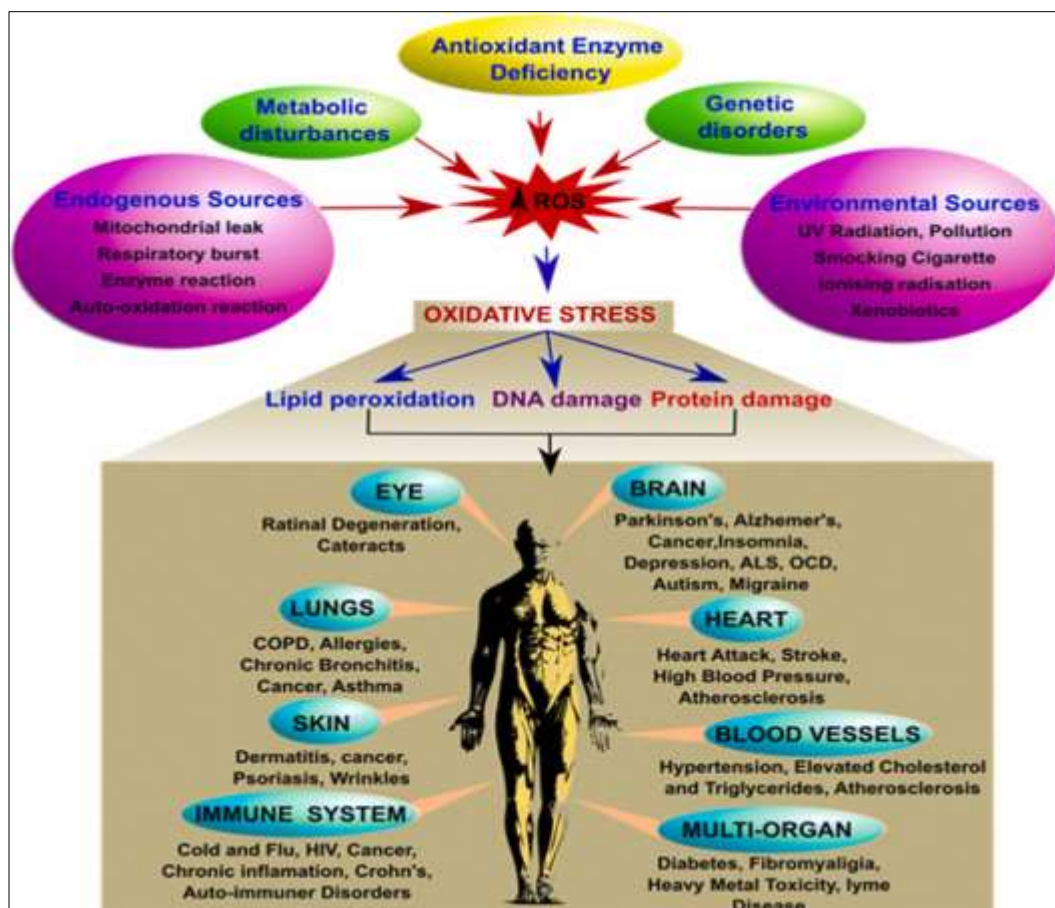


Fig 6: Effect of oxidative Stress on human Body (Atala *et al.* 2023)

- b. Cardiovascular Diseases:** Oxidative stress plays a critical role in the development of cardiovascular diseases: i. Endothelial Dysfunction- ROS can damage endothelial cells, leading to impaired vasodilation and increased vascular permeability, which are precursors to atherosclerosis. ii. Inflammation: ROS activate inflammatory pathways, resulting in the recruitment of immune cells to the vascular wall, further exacerbating atherosclerotic plaque formation (Puddu *et al.* 2005) ^[76]. iii. Myocardial Injury: In conditions such as ischemia-reperfusion injury, excessive ROS production can lead to cardiomyocyte death and heart failure (Wenzel *et al.* 2008) ^[106].
- c. Neurodegenerative Disorders:** ROS are implicated in the pathogenesis of several neurodegenerative diseases, including Alzheimer's and Parkinson's diseases (Qin *et al.* 2006) ^[77]: i. Oxidative Damage-Neurons are particularly vulnerable to oxidative stress due to their high metabolic activity and lipid-rich membranes (Tucci *et al.* 2012) ^[100]. ROS can damage proteins, lipids, and DNA, leading to neuronal dysfunction and death (Taradar and Pula, 2018) ^[97]. ii. Inflammation-ROS can activate microglia, the resident immune cells in the brain, leading to chronic neuroinflammation, which is associated with neurodegeneration (Sbodio *et al.* 2019) ^[85].
- d. Diabetes:** In diabetes, ROS contributes to various complications: a. Insulin Resistance-Elevated ROS levels can interfere with insulin signaling pathways, leading to insulin resistance and impaired glucose uptake (Panahi *et al.* 2017) ^[69]. B. Beta-Cell Dysfunction- Pancreatic beta cells are susceptible to

oxidative stress, which can impair insulin secretion and exacerbate hyperglycemia (Yoon *et al.* 2006; Kanikarla and Jain, 2015) ^[113, 42]. C. Vascular Complications- ROS promotes endothelial dysfunction and inflammation, contributing to complications such as diabetic retinopathy (Rendra *et al.* 2019) ^[81], nephropathy (Volpe *et al.* 2018) ^[104], and neuropathy (Gandhi *et al.* 2014) ^[25].

- e. Inflammatory Diseases:** Chronic inflammation is often associated with increased ROS production. Inflammatory Bowel Disease (IBD)- In conditions like IBD, ROS can perpetuate inflammatory responses and contribute to tissue damage (Chong *et al.* 2017; Bourreille *et al.* 2013) ^[16, 11]. Rheumatoid Arthritis-ROS is involved in the activation of inflammatory pathways and the destruction of joint tissues (Escames *et al.* 2012; Lin *et al.* 2005) ^[20, 55].
- f. Respiratory Disease:** Oxidative stress is a key factor in respiratory diseases (Wyche *et al.* 2004) ^[111]. Chronic Obstructive Pulmonary Disease (COPD)- ROS contributes to airway inflammation, mucus hypersecretion, and lung tissue damage in COPD (Young *et al.* 2015) ^[114]. Asthma- Increased ROS levels can exacerbate airway hyperresponsiveness and inflammation in asthmatic patients Chio and Tuveson, 2017) ^[15].

5. Role of Antioxidant

Antioxidants act as radical scavengers, hydrogen donors, electron donors, peroxide decomposers, singlet oxygen quenchers, enzyme inhibitors, synergists, and metal-chelating agents and can neutralize oxidants and counteract

free radicals (Han *et al.* 2021) [30]. These can be categorized into exogenous and endogenous according to their source of production (Fig 7). Antioxidants regulate the level of reactive oxygen species (ROS) by influencing gene expression and related signalling pathways to uphold redox equilibrium and preserve cellular integrity. Consequently, therapeutic approaches targeting antioxidants present a promising strategy for preventing and managing diseases resulting from excessive ROS exposure (Shen *et al.* 2019) [88]. Role of dietary antioxidants on human diseases is mentioned in Table 1.

6. Strategies for ROS Management

It is crucial to follow management strategies for reactive oxygen species (ROS) to prevent oxidative stress and associated cellular damage that can disrupt normal cellular function and contribute to the development of various diseases. By managing ROS effectively, one can help maintain cellular health and mitigate the risk of oxidative damage-related diseases. Several strategies such as

Antioxidant therapy: Involves the use of substances like Vitamin C, Vitamin E, and glutathione to neutralize ROS, restore redox balance, protect cellular components from oxidative damage, and modulate inflammatory responses (Nishino *et al.* 2017) [67]. These therapies help prevent mutations and maintain cell membrane integrity, which are crucial for proper cell function (Kawata *et al.* 2018) [45]. They also enhance the body's antioxidant defenses, such as Nrf2 activators (Ismail *et al.* 2020) [40] and dietary antioxidants. Furthermore, antioxidant therapy can prevent disease progression by improving endothelial function, slowing the progression of neurodegenerative disorders, and reducing diabetes complications (Song *et al.* 2017) [94]. Further research is needed to explore the efficacy of antioxidant compounds and their potential clinical applications.

Lifestyle and Dietary Modifications: ROS can be managed through lifestyle and dietary modifications. A balanced diet rich in antioxidants, including fruits, vegetables, whole grains, nuts, and seeds, can help neutralize ROS and reduce oxidative stress (Martinez *et al.* 2005) [61]. Regular exercise can enhance antioxidant defences and prevent increased ROS production. Limiting exposure to environmental pollutants and toxins, such as pollution, tobacco smoking, and alcohol consumption, can also help lower ROS levels. Ensure adequate sleep, maintain a restful environment, and practice relaxation techniques to restore the body (Chainy and Sahoo, 2020) [13]. Stress management techniques like meditation and physical activity can help reduce stress levels and lower ROS production (Hosseini *et al.* 2020) [36]. Hydration is crucial for overall health and can help flush out toxins. Some dietary supplements, such as antioxidant supplements, may be beneficial, but consult a healthcare professional before starting. Hormesis, such as calorie restriction and

intermittent fasting, can enhance antioxidant defenses and improve metabolic health, potentially reducing ROS levels. These strategies not only help manage ROS but also contribute to improved well-being and disease prevention (Ezerina *et al.* 2018) [21].

Pharmacological Interventions: Pharmaceutical interventions can help in mitigating oxidative stress-related damage. Strategies such as supplementations with antioxidants such as Coenzyme Q-10 Alpha-lipoic acid neutralize and reduce oxidative stress (Laleu *et al.* 2010) [52]. Mitochondrial-targeted antioxidant compounds such as Mito Q and SS-31, reduce ROS production. Anti-inflammatory medications reduce inflammation and indirectly reduce ROS production (Augsburger *et al.* 2019) [6].

Enhancing Endogenous antioxidant defenses: Nrf2 (Nuclear factor erythroid 2- related factor2) pathway plays a pivotal role in regulating the expression of antioxidant enzymes. (Zeng *et al.* 2019) [115] Activating this pathway can significantly boost the body's endogenous antioxidant defenses. Sulforaphane found in cruciferous vegetables such as broccoli and brussels sprouts is a potent Nrf2 activator that enhances the expression of various antioxidant enzymes (Joo *et al.* 2016) [41]. Curcumin from turmeric has also been shown to activate the pathway leading to increased production of endogenous antioxidants (Kwon *et al.* 2017) [51]. Hormesis a mild stressor, such as caloric restriction or intermittent fasting, stimulates the body's adaptive stress response, enhancing its antioxidant defences (Dao *et al.* 2020) [19].

Maintaining Mitochondrial Health: Mitochondrial biogenesis (production of new mitochondria) through exercise and calorie restriction can enhance cellular efficiency and reduce ROS production. Supplementing with nutrients like CoQ-10, carnitine and B vitamins improves mitochondrial health (Wind *et al.* 2010) [107].

Gene Therapy and Advanced Interventions: Gene editing, an emerging technology uses CRISPR (Clustered regularly interspaced short palindromic repeats) that allows for modification of the DNA and corrects genetic defects that produce excessive ROS (Perillo *et al.* 2020) [71]. Stem cell therapy is used to repair or replace damaged tissues and reduces oxidative stress in chronic diseases (Zhou *et al.* 2014) [117].

Monitoring and Diagnostics: Personalizing antioxidant therapies based on individual genetic and metabolic profiles can optimize ROS production. Regularly monitoring the oxidative stress biomarkers such as malondialdehyde and 8-oxo-dG can assist in evaluating the effectiveness of interventions.

By integrating these approaches, individuals can effectively manage ROS levels, mitigate oxidative stress, and reduce the susceptibility to ROS-associated diseases.

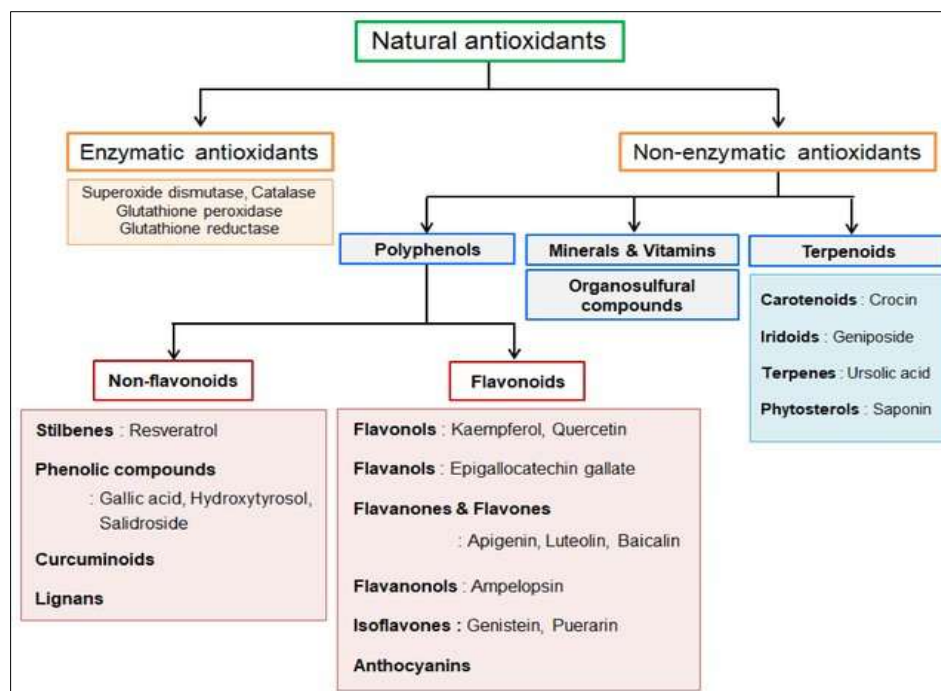


Fig 7: Classification of antioxidants based on the source of production (Lee and Im, 2021)

Table 1: Effect of antioxidants on diseases

Antioxidant	Dietary Source	Effect on diseases	References
Anthocyanin	Strawberries, Black rice	Reduced astrogliosis and maintained neuromuscular junctions and muscle function in ALS, prolonged lifespan in animal models.	Winter <i>et al.</i> 2017 Peng <i>et al.</i> 2014 [108, 70]
Lipoic acid	Muscle meats, kidney, liver, and heart	Shielded neurons from oxidative stress-induced mitochondrial dysfunction	Shay <i>et al.</i> 2009; Moreira <i>et al.</i> 2010; Zuo and Motherwell, 2013 [87, 64, 120]
Lycopene	Tomatoes, watermelon, papaya, apricot, and pink grapefruit	Enhanced clinical outcomes in asthma by reducing airway inflammation. Decreased LDL oxidation in the blood. Lycopene intake was negatively associated with the incidence of cardiovascular disease.	Wood <i>et al.</i> 2012 Rao and Agarwal 2000 [109, 79]
Melatonin	White mustard (seed), black mustard (seed), almond (seed), celery, walnuts, sweet corn, rice	Mitigated oxidative stress-related lung damage in respiratory diseases	Gumral <i>et al.</i> 2019; Bonnefont and Collin, 2010 [29, 10]
Phytochemicals	Fruits	Possibly prevent or postpone the onset of Parkinson's disease	Mazo <i>et al.</i> 2017 [62]
Polyphenols	Fruits, Vegetables, coffee, tea and Cereals	Increased intake of polyphenols was associated with a lower risk of cardiovascular disease. Exhibited anti-cancer effects against lung, breast, tongue, stomach, laryngeal, colon, and prostate cancers. Prolonged lifespan in animal models.	Vita, 2005 Manikandan <i>et al.</i> 2012. Ignarro <i>et al.</i> 2017; Peng <i>et al.</i> 2014 [103, 59, 37, 70]
Theaflavins	Black Tea	Increased longevity in animal models	Peng <i>et al.</i> 2014 [70]
Resveratrol	Purple wine and peanuts	Protected neurons against oxidative stress-induced toxicity	Anekonda, 2008; Bellaver <i>et al.</i> 2014 [4, 7]
Selenium	Tuna, oysters, salmon, eggs, green peas, pepper, onion, pork, Beef	A combination of selenium and vitamin E provided protection against oxidative damage in the colons of rats with ulcerative colitis.	Bitiren <i>et al.</i> 2010 [8]
Vitamin E	Wheatgerm oil, sunflower oil, hazelnut and almonds	Lowered the rates of cardiovascular disease-related mortality and non-fatal myocardial infarction. Mitigated functional decline related to Alzheimer's disease. A combination of vitamin E and coenzyme Q10 enhanced energy production in certain cases of Friedreich ataxia.	Navarro <i>et al.</i> 2008 [66]
Vitamin A	Eggs, dairy products, orange-colored fruits, green leafy and yellow-colored vegetables	Consumption of vitamins A and C was negatively correlated with the occurrence of asthma.	Tang <i>et al.</i> 2010; Allen <i>et al.</i> 2019 [96]
Vitamin C	Strawberry, Grapefruit, broccoli, and orange	Decreased airway inflammation and exercise-induced bronchoconstriction in asthma. Consumption of vitamins A and C was negatively correlated with the development of asthma.	Proteggente <i>et al.</i> 2002 [74]
Vitamin D	Fatty ocean fish, sunlight	Enhanced respiratory muscle function and exercise capacity in COPD. Boosted bone mineral density and lowered the risk of hip and other fractures in older adults.	Holick <i>et al.</i> 2011. Lips <i>et al.</i> 2020 [35, 57]

7. Conclusion

Reactive oxygen species (ROS) are highly reactive molecules that can cause oxidative stress, leading to cellular damage and contributing to various diseases, including neurodegenerative disorders, cardiovascular diseases, and cancer. The body has both endogenous and exogenous sources of ROS, and maintaining a balance between ROS production and antioxidant defenses is crucial for cellular health. Endogenous antioxidants, such as enzymes (e.g., superoxide dismutase, catalase, glutathione peroxidase) and non-enzymatic antioxidants (e.g., vitamins C and E, glutathione), play a vital role in neutralizing ROS. Strategies to enhance these defenses include activating the Nrf2 pathway, consuming a balanced diet rich in antioxidants, engaging in regular moderate exercise, ensuring adequate sleep, and utilizing pharmacological agents like N-acetylcysteine (NAC) to boost glutathione levels. Additionally, mild stressors such as caloric restriction and intermittent fasting can stimulate the body's adaptive stress response, further enhancing antioxidant defenses.

Enhancing endogenous antioxidant defenses is essential for managing ROS and preventing oxidative stress-related cellular damage. Individuals can significantly improve their body's ability to counteract oxidative stress by adopting dietary modifications, lifestyle changes, and pharmacological interventions. This proactive approach helps reduce the risk of various diseases and promotes overall health and longevity. Continued research into effective strategies for boosting antioxidant defenses will be crucial in developing therapeutic interventions for oxidative stress-related conditions.

Credit authorship contribution statement

Cherukuri Anusha: Writing original draft, conceptualization, review & editing. Manisha Patil: Writing, reviewing, and editing. Renuka Aggarwal: Reviewing and Supervision. Kiran Grover: Supervision and Conceptualization.

Ethical Approval

There was no need for ethical approval as this was a literature paper and the data used was already available to the public.

Consent for Publication

We have given the journal the right to publish this work.

Declaration of conflicting interests

The author (s) declared no potential conflicts of interest for the research, authorship, and/or publication of this article.

Data Availability statement

Since the study was a literature review, all the articles used in the study can be accessed online.

8. References

1. Abraham A, Kattoor AJ, Saldeen T, Mehta JL. Vitamin E and its anticancer effects. *Critical Reviews in Food Science and Nutrition*. 2019;59(17):2831-2838.
2. Aggarwal V, Tuli HS, Varol A, Thakral F, Yerer MB, Sak K, *et al.* Role of reactive oxygen species in cancer progression: Molecular mechanisms and recent advancements. *Biomolecules*. 2019;9(11):735.
3. Almeida M, Soares M, Ramalhinho AC, Moutinho JF, Breitenfeld L, Pereira L. The prognostic value of NRF2 in breast cancer patients: A systematic review with meta-analysis. *Breast Cancer Research and Treatment*. 2020;179(3):523-532.
4. Anekonda TS. Resveratrol-a boon for treating Alzheimer's disease? *Brain Research Reviews*. 2006;52(2):316-326.
5. Atala BJ, Rashmi RS, Nitish KB, Asim KD. Cellular Red-Ox system in health and disease: The latest update. *Biomedicine and Pharmacotherapy*. 2023;162:114606.
6. Augsburger F, Filippova A, Rasti D, Seredenina T, Lam M, Maghzal G, *et al.* Pharmacological characterization of the seven human NOX isoforms and their inhibitors. *Redox Biology*. 2019;26:101272.
7. Bellaver B, Souza DG, Souza DO, Quincozes-Santos A. Resveratrol increases antioxidant defenses and decreases proinflammatory cytokines in hippocampal astrocyte cultures from newborn, adult and aged Wistar rats. *Toxicology In Vitro*. 2014;28(3):479-484.
8. Bitiren M, Karakilcik AZ, Zerin M, Ozardali I, Selek S, Nazligul Y. Protective effects of selenium and vitamin E combination on experimental colitis in blood plasma and colon of rats. *Biological Trace Element Research*. 2010;136(1):87-95.
9. Bonizzi G, Karin M. The two NF-kappaB activation pathways and their role in innate and adaptive immunity. *Trends in Immunology*. 2004;25(6):280-288.
10. Bonnefont-Rousselot D, Collin F. Melatonin: action as an antioxidant and potential applications in human disease and aging. *Toxicology*. 2010;278(1):55-67.
11. Bourreille A, Cadiot G, le Dreau G, Laharie D, Beaugier L, Dupas JL, *et al.* *Saccharomyces boulardii* does not prevent relapse of Crohn's disease. *Clinical Gastroenterology and Hepatology*. 2013;11(8):982-987.
12. Brand MD. Mitochondrial generation of superoxide and hydrogen peroxide as the source of mitochondrial redox signaling. *Free Radical Biology and Medicine*. 2016;100:14-31.
13. Chainy GB, Sahoo DK. Hormones and oxidative stress: An overview. *Free Radical Research*. 2020;54(1):1-26.
14. Chen X, Song M, Zhang B, Zhang Y. Reactive oxygen species regulate T cell immune response in the tumor microenvironment. *Oxidative Medicine and Cellular Longevity*. 2016;2016:1580967.
15. Chio IIC, Tuveson DA. ROS in cancer: The burning question. *Trends in Molecular Medicine*. 2017;23(5):411-429.
16. Chong WC, Shastri MD, Eri R. Endoplasmic reticulum stress and oxidative stress: A vicious nexus implicated in bowel disease pathophysiology. *International Journal of Molecular Sciences*. 2017;18(4):771.
17. Cuadrado A, Nebreda AR. Mechanisms and functions of p38 MAPK signalling. *Biochemical Journal*. 2010;429(3):403-417.
18. Czapski GA, Czubowicz K, Strosznajder JB, Strosznajder RP. The lipoxygenases: their regulation and implication in Alzheimer's disease. *Neurochemical Research*. 2016;41(1-2):243-257.
19. Dao VTV, Elbatreek MH, Altenhöfer S, Casas AI, Pachado MP, Neullens CT, *et al.* Isoform selective NADPH oxidase inhibitor panel for pharmacological target validation. *Free Radical Biology and Medicine*. 2020;148:60-69.
20. Escames CL, Lopez JA, Garcia L, Garcia-Corzo F, Ortiz D, Acuna-Castroviejo M. Mitochondrial DNA

- and inflammatory diseases. *Human Genetics*. 2012;131(2):161-173.
21. Ezeriņa D, Takano Y, Hanaoka K, Urano Y, Dick TP. N-acetyl cysteine functions as a fast-acting antioxidant by triggering intracellular H₂S and sulfane sulfur production. *Cell Chemical Biology*. 2018;25(4):447-459.
 22. Fan Z, Wang X, Zhang M, Zhao C, Mei C, Li P. MAPK pathway inhibitors attenuated hydrogen peroxide-induced damage in neural cells. *BioMed Research International*. 2019;2019:5962014.
 23. Finlay D, Healy V, Furlong F. MAP kinase pathway signalling is essential for extracellular matrix-determined mammary epithelial cell survival. *Cell Death and Differentiation*. 2000;7(4):303-313.
 24. Förstermann U, Xia N, Li H. Roles of vascular oxidative stress and nitric oxide in the pathogenesis of atherosclerosis. *Circulation Research*. 2017;120(4):713-735.
 25. Gandhi GR, Jothi G, Antony PJ, Balakrishna K, Paulraj MG, Ignacimuthu S, *et al.* Gallic acid attenuates high-fat diet fed-streptozotocin-induced insulin resistance via partial agonism of PPAR γ in experimental type 2 diabetic rats and enhances glucose uptake through translocation and activation of GLUT4 in PI3K/p-Akt signaling pathway. *European Journal of Pharmacology*. 2014;745:201-216.
 26. Gardam S, Brink R. Non-canonical NF- κ B signaling initiated by BAFF influences B cell biology at multiple junctures. *Frontiers in Immunology*. 2014;4:509.
 27. Grosch S, Tegeder I, Schilling K, *et al.* Activation of c-Jun-N terminal-kinase is crucial for the induction of a cell cycle arrest in human colon carcinoma cells caused by flurbiprofen enantiomers. *FASEB Journal*. 2003;17(10):1316-1318.
 28. Grzegorz W, Stanislaw O, Krzysztof B, Michal G, Andrzej Z. The human body - is not only a biological entity. *Translational Research in Anatomy*. 2024;34:100270.
 29. Gumral N, Naziroglu M, Ongel K, Beydilli ED, Ozguner F, Sutcu R, *et al.* Antioxidant enzymes and melatonin levels in patients with bronchial asthma and chronic obstructive pulmonary disease during stable and exacerbation periods. *Cell Biochemistry and Function*. 2009;27(5):276-283.
 30. Han J, Sullivan KA, Schuyler AD, Hong Y, Pande M, States DJ, *et al.* Literature-based discovery of diabetes- and ROS-related targets. *BMC Medical Genomics*. 2010;3:49.
 31. Handy DE, Loscalzo J. Responses to reductive stress in the cardiovascular system. *Free Radical Biology and Medicine*. 2017;109:114-124.
 32. Hayes JD, Dinkova-Kostova AT, Tew KD. Oxidative stress in cancer. *Cancer Cell*. 2020;38(2):167-197.
 33. Hempel N, Trebak M. Crosstalk between calcium and reactive oxygen species signaling in cancer. *Cell Calcium*. 2017;63:70-96.
 34. Hilger RA, Kredke S, Hedley D, *et al.* ERK1/2 phosphorylation: a biomarker analysis within a phase I study with the new Raf kinase inhibitor BAY43-9006. *International Journal of Clinical Pharmacology and Therapeutics*. 2002;40:567-568.
 35. Holick MF, Binkley NC, Bischoff-Ferrari HA, *et al.* Evaluation, treatment, and prevention of vitamin D deficiency: an endocrine society clinical practice guideline. *Journal of Clinical Endocrinology and Metabolism*. 2011;96:1911-1930.
 36. Hosseini L, Vafaei MS, Badalzadeh R. Melatonin and nicotinamide mononucleotide attenuate myocardial ischemia/reperfusion injury via modulation of mitochondrial function and hemodynamic parameters in aged rats. *Journal of Cardiovascular Pharmacology and Therapeutics*. 2020;25:240-250.
 37. Ignarro LJ, Balestrieri ML, Napoli C. Nutrition, physical activity, and cardiovascular disease: an update. *Cardiovascular Research*. 2007;73:326-340.
 38. Incalza MA. Oxidative stress and reactive oxygen species in endothelial dysfunction associated with cardiovascular and metabolic diseases. *Vascular Pharmacology*. 2018;100:1-19.
 39. Innocenti M, Frittoli E, Ponzanelli I, *et al.* Phosphoinositide 3-kinase activates Rac by entering in a complex with Eps8, Abi1, and Sos-1. *The Journal of Cell Biology*. 2003;160:17-23.
 40. Ismail H, Shakkour Z, Tabet M, *et al.* Traumatic brain injury: Oxidative stress and novel anti-oxidants such as mitoquinone and edaravone. *Antioxidants*. 2020;9:943-953.
 41. Joo JH, Huh JE, Lee JH, *et al.* A novel pyrazole derivative protects from ovariectomy-induced osteoporosis through the inhibition of NADPH oxidase. *Scientific Reports*. 2016;6:22389.
 42. Kanikarla-Marie P, Jain SK. Role of hyperketonemia inducing oxidative stress and cellular damage in cultured hepatocytes and type 1 diabetic rat liver. *Cellular Physiology and Biochemistry*. 2015;37:2160-2170.
 43. Kanojia D, Garg M, Martinez J, *et al.* Kinase profiling of liposarcomas using RNAi and drug screening assays identified druggable targets. *Journal of Hematology and Oncology*. 2017;10:1-13.
 44. Karin M. NF-kappaB as a critical link between inflammation and cancer. *Cold Spring Harbor Perspectives in Biology*. 2009;1:a000141.
 45. Kawata A, Murakami Y, Suzuki S, Fujisawa S. Anti-inflammatory activity of β -carotene, lycopene and tri-n-butyl borane, a scavenger of reactive oxygen species. *In Vivo*. 2018;32:255-264.
 46. Kerins MJ, Ooi A. A catalog of somatic NRF2 gain-of-function mutations in cancer. *Scientific Reports*. 2018;8:12846.
 47. Khan AQ, Rashid K, AlAmodi AA, *et al.* Reactive oxygen species (ROS) in cancer pathogenesis and therapy: An update on the role of ROS in anticancer action of benzophenanthridine alkaloids. *Biomedicine and Pharmacotherapy*. 2021;143:112142.
 48. Kim GY, Mercer SE, Ewton DZ. The stress-activated protein kinases p38 alpha and JNK1 stabilize p21(Cip1) by phosphorylation. *Journal of Biological Chemistry*. 2002;277:29792-29802.
 49. Kirtonia A, Sethi G, Garg M. The multifaceted role of reactive oxygen species in tumorigenesis. *Cellular and Molecular Life Sciences*. 2020;77:4459-4483.
 50. Knock G. NADPH oxidase in the vasculature: expression, regulation and signalling pathways; role in normal cardiovascular physiology and its dysregulation in hypertension. *Free Radical Biology and Medicine*. 2019;145:385-427.

51. Kwon G, Uddin MJ, Lee G, *et al.* A novel pan-Nox inhibitor, APX-115, protects kidney injury in streptozotocin-induced diabetic mice: Possible role of peroxisomal and mitochondrial biogenesis. *Oncotarget*. 2017;8:74217-74232.
52. Laleu B, Gaggini F, Orchard M, *et al.* First-in-class, potent, and orally bioavailable NADPH oxidase isoform 4 (Nox4) inhibitors for the treatment of idiopathic pulmonary fibrosis. *Journal of Medicinal Chemistry*. 2010;53:7715-7730.
53. Lee Y, Im E. Regulation of miRNAs by the natural antioxidants in cardiovascular diseases: Focus on SIRT1 and eNOS. *Antioxidants*. 2021;10:377.
54. Liguori I, Russo G, Curcio F. Oxidative stress, aging, and diseases. *Clinical Interventions in Aging*. 2018;13:757-772.
55. Lin YAH, Berg P, Iyenga. The hyperglycemia-induced inflammatory response in adipocytes: the role of reactive oxygen species. *Journal of Biological Chemistry*. 2005;280:4617-4626.
56. Lingappan K. NF- κ B in oxidative stress. *Current Opinion in Toxicology*. 2018;7:81-86.
57. Lips P. Vitamin D deficiency and secondary hyperparathyroidism in the elderly: consequences for bone loss and fractures and therapeutic implications. *Endocrine Reviews*. 2001;22:477-501.
58. Lugin J, Rosenblatt-Velin N, Parapanov R, Liaudet L. The role of oxidative stress during inflammatory processes. *Biological Chemistry*. 2014;395:203-230.
59. Manikandan R, Beulaja M, Arulvasu C, *et al.* Synergistic anticancer activity of curcumin and catechin: an *in vitro* study using human cancer cell lines. *Microscopy Research and Technique*. 2012;75:112-116.
60. Marí M, de Gregorio E, de Dios C, *et al.* Mitochondrial glutathione: Recent insights and role in disease. *Antioxidants*. 2020;9:909.
61. Martinez GR, Almeida EA, Klitzke CF, Onuki J, Prado FM, Medeiros MH, Mascio PD. Measurement of melatonin and its metabolites: Importance for the evaluation of their biological roles. *Endocrine*. 2005;27:111-8.
62. Mazo NA, Echeverria V, Cabezas R, Avila-Rodriguez M, Aliev G, Leszek J. Medicinal plants as protective strategies against Parkinson's Disease. *Curr Pharm Des*. 2017;23:4180-8. doi: 10.2174/1381612823666170316142803.
63. Minatel IO, Francisqueti-Ferron F, Correa C, Lima G. Antioxidant Activity of γ -Oryzanol: A Complex Network of Interactions. *International Journal of Molecular Sciences*. 2016;17(8):1107. doi: 10.3390/ijms17081107.
64. Moreira PI, Zhu X, Wang X, Lee HG, Nunomura A, Petersen RB. Mitochondria: a therapeutic target in neurodegeneration. *Biochim Biophys Acta*. 2010;1802:212-20. doi: 10.1016/j.bbdis.2009.10.007.
65. Morgan MJ, Liu ZG. Crosstalk of reactive oxygen species and NF- κ B signaling. *Cell Res*. 2011;21:103-15.
66. Navarro-Alarcon M, Cabrera-Vique C. Selenium in food and the human body: a review. *Sci Total Environ*. 2008;400:115-41. doi: 10.1016/j.scitotenv.2008.06.024.
67. Nishino A, Yasui H, Maoka T. Reaction and scavenging mechanism of β -carotene and zeaxanthin with reactive oxygen species. *Journal of Oleo Science*. 2017;66:77-84.
68. Pajares M, Cuadrado A, Engedal N, Jirsova Z, Cahova M. The role of free radicals in autophagy regulation: Implications for aging. *Oxid Med Cell Longev*. 2018;2018:1-19.
69. Panahi Y, Khalili N, Sahebi E, Namazi S, Karimian MS, Majeed M, Sahebkar A. Antioxidant effects of curcuminoids in patients with type 2 diabetes mellitus: A randomized controlled trial. *Inflammopharmacology*. 2017;25:25-31.
70. Peng C, Wang X, Chen J, Jiao R, Wang L, Li YM. Biology of aging and role of dietary antioxidants. *Biomed Res Int*. 2014;2014:831841. doi: 10.1155/2014/831841.
71. Perillo B, Di Donato M, Pezone A. ROS in cancer therapy: the bright side of the moon. *Exp Mol Med*. 2020;52:192-203. doi: 10.1038/s12276-020-0384-2.
72. Phaniendra A, Jestadi DB, Periyasamy L. Free radicals: properties, sources, targets, and their implication in various diseases. *Indian J Clin Biochem*. 2015;30:11-26. doi: 10.1007/s12291-014-0446-0.
73. Pimienta G, Pascual J. Canonical and alternative MAPK signaling. *Cell Cycle*. 2007;6:2628-32.
74. Proteggente AR, Pannala AS, Paganga G, Van Buren L, Wagner E, Wiseman S. The antioxidant activity of regularly consumed fruits and vegetables reflects their phenolic and vitamin C composition. *Free Radic Res*. 2002;36:217-33. doi: 10.1080/10715760290006484.
75. Pua LJW, Mai CW, Chung FFL, Khoo ASB, Leong CO, Lim WM, Hii LW. Functional Roles of JNK and p38 MAPK Signaling in Nasopharyngeal Carcinoma. *Int J Mol Sci*. 2022;23(3):1108. doi: 10.3390/ijms23031108.
76. Puddu P, Puddu GM, Galletti L, Cravero E, Muscari A. Mitochondrial dysfunction as an initiating event in atherogenesis: a plausible hypothesis. *Cardiology*. 2005;103:137-41.
77. Qin B, Cartier L, Dubois-Dauphin M, Li B, Serrander L, Krause KH. A key role for the microglial NADPH oxidase in APP-dependent killing of neurons. *Neurobiol Aging*. 2006;27:1577-87.
78. Qiu X, Cheng JC, Chang HM, Leung PC. COX2 and PGE2 mediate EGF-induced E-cadherin-independent human ovarian cancer cell invasion. *Endocr Relat Cancer*. 2014;21:533-43.
79. Rao AV, Agarwal S. Role of antioxidant lycopene in cancer and heart disease. *J Am Coll Nutr*. 2000;19:563-9. doi: 10.1080/07315724.2000.1071895.
80. Rauf A, Khalil AA, Awadallah S, Khan SA, Abu-Izneid T, Kamran M, Hemeg HA, Mubarak MS, Khalid A, Wilairatana P. Reactive oxygen species in biological systems: Pathways, associated diseases, and potential inhibitors—A review. *Food Sci Nutr*. 2024;12:675-93. doi: 10.1002/fsn3.3784.
81. Rendra E, Riabov V, Mossel DM, Sevastyanova T, Harmsen MC, Kzhyskowska J. Reactive oxygen species (ROS) in macrophage activation and function in diabetes. *Immunobiology*. 2019;224:242-53.
82. Richard LA, Davis JM. Oxygen Toxicity and Reactive Oxygen Species: The Devil is in the Details. *Pediatr Res*. 2009;66:121-7.
83. Salminen A, Kauppinen A, Kaarniranta K. AMPK activation inhibits the functions of myeloid-derived

- suppressor cells (MDSC): impact on cancer and aging. *J Mol Med*. 2019;97:1049-64.
84. Sato S, Fujita N, Tsuruo T. Involvement of PDK1 in the MEK/MAPK signal-transduction pathway. *J Biol Chem*. 2004;279:33759-67.
 85. Sbodio JJ, Snyder SH, Paul BD. Redox mechanisms in neurodegeneration: from disease outcomes to therapeutic opportunities. *Antioxid Redox Signal*. 2019;30:1450-99.
 86. Schieber M, Chandel NS. ROS function in redox signaling and oxidative stress. *Curr Biol*. 2014;24:453-62. doi: 10.1016/j.cub.2014.03.034.
 87. Shay KP, Moreau RF, Smith EJ, Smith AR, Hagen TM. Alpha-lipoic acid as a dietary supplement: molecular mechanisms and therapeutic potential. *Biochim Biophys Acta*. 2009;1790:1149-60. doi: 10.1016/j.bbagen.2009.07.026.
 88. Shen G, Xu C, Hu R, Jain MR, Nair S, Lin W, Yang CS, Chan JY, Kong ANT. Comparison of (-)-epigallocatechin-3-gallate elicited liver and small intestine gene expression profiles between C57BL/6J mice and C57BL/6J/Nrf2 (-/-) mice. *Pharm Res*. 2019;22:1805-20.
 89. Sidhanth C, Manasa P, Krishnapriya S, Sneha S, Bindhya S, Nagare RP, Garg M, Ganesan TS. A systematic understanding of signaling by ErbB2 in cancer using phosphoproteomics. *Biochem Cell Biol*. 2018;96:295-305.
 90. Sies H, Berndt C, Jones DP. Oxidative Stress. *Annu Rev Biochem*. 2017;86:715-48. doi: 10.1146/annurev-biochem-061516-045037.
 91. Sies H, Jones DP. Reactive oxygen species (ROS) as pleiotropic physiological signaling agents. *Nature Reviews Molecular Cell Biology*. 2020;21:363-383. doi:10.1038/s41580-020-0230-3
 92. Smalley KSM. A pivotal role for ERK in the oncogenic behavior of malignant melanoma? *International Journal of Cancer*. 2003;104:527-32.
 93. Soh JW, Mao Y, Kim MG. Cyclic GMP mediates apoptosis induced by sulindac derivatives via activation of c-Jun NH2 terminal kinase 1. *Clinical Cancer Research*. 2000;6:4136-41.
 94. Song SB, Jang SY, Kang HT, Wei B, Jeoun UW, Yoon GS, Hwang ES. Modulation of mitochondrial membrane potential and ROS generation by nicotinamide in a manner independent of SIRT1 and mitophagy. *Molecules and Cells*. 2017;40:503-514.
 95. Srinivas US, Tan BWQ, Vellayappan BA, Jeyasekharan AD. ROS and the DNA damage response in cancer. *Redox Biology*. 2019;25:101084.
 96. Tang GW. Bioconversion of dietary provitamin A carotenoids to vitamin A in humans. *American Journal of Clinical Nutrition*. 2010;91:1468s-1473s. doi:10.3945/ajcn.2010.28674G
 97. Tarafdar A, Pula G. The role of NADPH oxidases and oxidative stress in neurodegenerative disorders. *International Journal of Molecular Sciences*. 2018;19:ijms19123824.
 98. Thomas MP, Chartrand K, Reynolds A, Vitvitsky V, Banerjee R, Gendelman HE. Ion channel blockade attenuates aggregated alpha-synuclein induction of microglial reactive oxygen species: relevance for the pathogenesis. [Journal name missing in original]. 2007;100:503-19.
 99. Tschopp J. Mitochondria: Sovereign of inflammation? *European Journal of Immunology*. 2011;41:1196-202.
 100. Tucci P, Morgese MG, Colaïanna M, Zotti M, Schiavone S, Cuomo V. A neurochemical consequence of steroid abuse: stanozolol-induced monoaminergic changes. *Steroids*. 2012;77:269-75.
 101. Uehara I, Tanaka N. Role of p53 in the regulation of the inflammatory tumor microenvironment and tumor suppression. *Cancers (Basel)*. 2018;10:219.
 102. Vallabhapurapu S, Karin M. Regulation and function of NF-kappaB transcription factors in the immune system. *Annual Review of Immunology*. 2009;27:693-733.
 103. Vita JA. Polyphenols and cardiovascular disease: effects on endothelial and platelet function. *American Journal of Clinical Nutrition*. 2005;81:292s-297s. doi:10.1093/ajcn/81.1.292S
 104. Volpe CMO, Villar-Delfino PH, Dos Anjos PMF, Nogueira Machado JA. Cellular death, reactive oxygen species (ROS) and diabetic complications. *Cell Death & Disease*. 2018;9:119-122.
 105. Wang J, Xiao Q, Chen X, Tong S, Sun J, Lv R, *et al*. LanCL1 protects prostate cancer cells from oxidative stress via suppression of JNK pathway. *Cell Death & Disease*. 2018;9:197-205.
 106. Wenzel P, Schuhmacher JS, Kienh S. Manganese superoxide dismutase and aldehyde dehydrogenase deficiency increase mitochondrial oxidative stress and aggravate age-dependent vascular dysfunction. *Cardiovascular Research*. 2008;80:280-289.
 107. Wind S, Beuerlein K, Eucker T, Mueller H, Scheurer P, Armitage ME, *et al*. Comparative pharmacology of chemically distinct NADPH oxidase inhibitors. *British Journal of Pharmacology*. 2010;161:885-898.
 108. Winter AN, Ross EK, Wilkins HM, Stankiewicz TR, Wallace T, Miller K. An anthocyanin-enriched extract from strawberries delays disease onset and extends survival in the hSOD1G93A mouse model of amyotrophic lateral sclerosis. *Nutritional Neuroscience*. 2017. doi:10.1080/1028415X.2017.1297023 [Epub ahead of print].
 109. Wood LG, Garg ML, Smart JM, Scott HA, Barker D, Gibson PG. Manipulating antioxidant intake in asthma: a randomized controlled trial. *American Journal of Clinical Nutrition*. 2012;96:534-543. doi:10.3945/ajcn.111.032623
 110. Wu W, Li L, Su X. Nuclear factor-kappaB regulates the transcription of NADPH oxidase 1 in human alveolar epithelial cells. *BMC Pulmonary Medicine*. 2021;21:98. <https://doi.org/10.1186/s12890-021-01464-z>
 111. Wyche KE, Wang SS, Griendling KK, Dikalov SI, Austin H, Rao S. C242T CYBA polymorphism of the NADPH oxidase is associated with reduced respiratory burst in human neutrophils. *Hypertension*. 2004;43:1246-51.
 112. Xu M, Che L, Gao K, Wang L, Yang X, Wen X, *et al*. Taurine alleviates oxidative stress in porcine mammary epithelial cells by stimulating the Nrf2-MAPK signaling pathway. *Food Science & Nutrition*. 2023;11:1736-1746.
 113. Yoon JS, Won KC, Lee HW. Glucose oxidation and production of reactive oxygen species (ROS) in INS-1 cells and rat islet cells exposed to high glucose. *The Journal of Korean Diabetes Association*. 2006;30:246-253.

114. Young B, Purcell C, Kuang YQ, Charette N, Dupré DJ. Superoxide dismutase 1 regulation of CXCR4-mediated signaling in prostate cancer cells is dependent on cellular oxidative state. *Cellular Physiology and Biochemistry*. 2015;37:2071-2084.
115. Zeng SY, Yang L, Yan QJ, Gao L, Lu HQ, Yan PK. Nox1/4 dual inhibitor GKT137831 attenuates hypertensive cardiac remodeling associated with the inhibition of ADAM17-dependent proinflammatory cytokines-induced signaling pathways in the rats with abdominal artery constriction. *Biomedicine and Pharmacotherapy*. 2019;109:1907-1914.
116. Zhang Y, Dawson VL, Dawson TM. Oxidative stress and genetics in the pathogenesis of Parkinson's disease. *Neurobiology of Disease*. 2007;7:240-50.
117. Zhou D, Shao L, Spitz DR. Reactive oxygen species in normal and tumor stem cells. *Advances in Cancer Research*. 2014;122:1-67. DOI:10.1016/B978-0-12-420117-0.00001-3.
118. Zhou ZD, Xie SP, Saw WT, Ho PGH, Wang HY, Lei Z, *et al.* The therapeutic implications of tea polyphenols against dopamine (DA) neuron degeneration in Parkinson's disease (PD). *Cell*. 2019;8:911.
119. Zhu H, Zhang L, Wu S. Induction of S-phase arrest and p21 overexpression by a small molecule 2[[3-(2,3 - dichlorophenoxy) propyl] amino]ethanol in correlation with activation of ERK. *Oncogene*. 2004;23:4984-92.
120. Zuo L, Motherwell MS. The impact of reactive oxygen species and genetic mitochondrial mutations in Parkinson's disease. *Gene*. 2013;532:18-23. doi:10.1016/j.gene.2013.07.085.