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What Agencies Regulate Retail Stores? How to Buy an FCC Frequency What Towers Does Straight Talk... Who Regulates Cable Companies? How to Implement OSHA Safety Standards How to Start an Online Television... How to Start Your Own Alarm Monitoring... Asbestos Removal Laws for Pennsylvania How to Update a CAGE Code Florida Department of Professional... Starting a Small Airline Business... Government Grants for Radio How to Start an AM Radio Station More people are dying from accidents than from stroke, Alzheimer's, and diabetes.Share on PinterestThe number of accidental deaths in the United States has been growing for years, and nobody seems to be paying attention.According to the Centers for Disease Control and Prevention (CDC), accidents are now the fourth leading cause of death in the United States. As of 2014, that meant 136,053 deaths per year. That number sits far behind the two leading causes of death in the United States: heart disease (614,348 deaths per year) and cancer (591,699 deaths per year).However, it may surprise many that accidents kill more people annually than numerous other conditions, including stroke, Alzheimer's, and diabetes.Read more: Why it'll pay off to ban trans fats next year »That's precisely what author Steve Casner examined in his new book, "Careful: A User's Guide to Our Injury-Prone Minds." Casner works as a research psychologist at NASA, and holds an interdisciplinary PhD in psychology, computer science, and medicine from the University of Pittsburgh. "We've got this problem with injuries. Fatalities are, for the first time in 100 years, starting to creep up," he told Healthline. "There is so much discussion of other diseases, and there should be, but here's one that has just become the fourth leading cause of death in the U.S., and it's being underdiscussed." His book begins as a primer on public safety: the diligent ways laws and technological developments have made people safer and safer. Owing to common sense rules and devices like drunk-driving laws (first enacted in 1939), seat belts, and smoke alarms, the accidental death rate dropped for most the 20th century.By 1992, the number of accidental deaths in the United States had been halved from 1 in 20, to 1 in 40.After that, "The fatality rate just sort of stayed where it was for the next eight years," Casner wrote in his book. "And then it started rising again."Read more: Consumer group says canned foods still contain dangerous chemical »The reason for this is multifold: technological, social, and psychological — and all three tend to overlap heavily.The most apparent technological danger, especially for teenagers and parents of teenagers, are cellphones. According to a study by the National Safety Council, more than a quarter of all car crashes in the United States are attributed to cell phone usage.Those numbers are also believed to be underreported.However, as Healthline reported last year, distracted walking is becoming just as prevalent and dangerous. A common talking point of 2016 was the release of "Pokémon Go," an augmented reality game that required players to actually get up and walk around outside in order to play. The game inadvertently led to numerous tragic incidents — like falling off cliffs, and violent altercations after entering private property — due to players intently focusing on their cell phones, rather than the world around them."We're going to have to adopt a whole new attitude towards being careful, and learn something about how we may not be well-adapted to modern living," said Casner. "We're retooling our world so quickly in ways that challenge our everyday intuitions about survival, and cell phones are just the latest example."Read more: Can you tax people into quitting smoking? »Casner accepts that cell phone usage is partially to blame, but he doesn't point his finger at it specifically for the rise in accidental deaths.Essentially, we have come to the end of the line in which "putting rubber corners on stuff" or implementing new safety precautions is any more effective than thirty years ago.Take, for example, the Dutch village of Eerbeek that is testing LED traffic signals built right into the pavement so distracted pedestrians staring down at their phones will notice them. Casner called this kind of safety mechanism a "Band-Aid solution."Instead, Casner wrote, "The next safety revolution is going to have to happen in our own minds."Read more: Why do so many drugs have problems after they get approved »Going back to the issue of cell phones, and the myriad distractions they have introduced to everyday life, Casner is more concerned with the psychology of distraction, rather than the phone itself.Multitasking — driving and using a smartphone, for example — is far more taxing on the human brain than we seem to believe, and that makes it incredibly dangerous."We really need to think about the human limits of our ability to pay attention," he said.The phone is just the current iteration of a larger psychosocial issue."In ten years, this big concern over cell phones will be eclipsed by something even bigger," said Casner.However, what he hopes is that his work will play some part in making people more aware of these dangers, and to just pay a bit more attention in their daily lives to the things going on around them. For all the thought that we give to exercise, diet, and heart disease, we need to be more careful with how we conduct our lives in an increasingly distracted world."If we keep pushing ahead with medical advancements and we all live to be 150, the sad truth is that we probably won't, because we may get killed doing something long before that" he said. Researchers seek to develop drugs that are less toxic and achieve longer remissions in multiple myeloma patients.An extremely effective method that causes cell death in multiple myeloma that targets CDK4 and ARK5 proteins was found in a recent study.Despite advances in therapies for patients with multiple myeloma, the median survival rate is 7 to 8 years and accounts for 10,000 annual deaths in the United States."Even in the era of great drug development, there is an urgent need to develop drugs that are less toxic and achieve longer remissions for all patients," said study co-author Samir Parekh, MD.Researchers from Icahn School of Medicine at Mount Sinai in collaboration with Onconova Therapeutics developed the compound ON123300, which includes the inhibitors ARK5 and CDK4.During the study, published in Cancer Research, the effects of ON123300 were evaluated against myeloma cell lines and primary samples from patients with recurring myeloma."ARK5 is critical for myeloma survival and this study suggests a novel function for ARK5 in bridging the mTOR and MYC pathways," said lead study author Deepak Perumal, Ph.D. "Given that MYC is critically over expressed in myeloma, we sought to determine whether selective inhibition of ARK5 and CDK4 could be an effective way to target MYC-driven proliferation in myeloma."The results of the study showed that the myeloma cells had a sensitivity to ON123300, while normal peripheral blood cells did not. The compound resulted in tumor cell death, halting the cancer cell growth in vitro and in vivo mouse models."Our study results show that ON123300 induces cell death and negatively regulates key oncogenic pathways in multiple myeloma cells," Dr. Parekh said. "This is the first report showing potent cytotoxicity of CDK4 and ARK5 inhibition in MM and provides the foundation for further clinical trials using CDK4 and ARK5 inhibitors to improve outcomes for MM patients." In the Stem Cell Biology Program, investigators are studying the natural life cycle of human embryonic stem cells. They use induced pluripotent stem cells (iPSCs) to understand disorders of blood-making organs, known as the hematopoietic system. Our scientists are using stem cells to study the development of pain and muscle disorders, trying to re-create pain nerve cells and muscle tissue in the lab to identify potential new drug candidates. Scientists leading other projects are working to generate laboratory-made blood cells that could circulate in the body, delivering drug therapy without forming tumors. They are also seeking to understand the role of immune cells in the brain and trying to develop a "mini-brain" in the lab to serve as a disease model to study neurodegeneration.Faculty The life and death of the cells in our bodies are tightly regulated. This is essential for normal function and limiting damage. But cell death can have side effects, and if it malfunctions, our health is at stake. Share on PinterestWhen cells burst and die, their contents are released, causing inflammation.Every day, more than 50 billion cells die in our bodies. These are not random events, but part of a finely tuned biological mechanism called programmed cell death.Multicellular organisms, including humans, need to keep a tight lid on the number of cells in their bodies. This would be easy if the cells never divided, but some areas — such as the blood, skin, and lining of the gut — are constantly producing new cells. Cell death stops excessive and damaged cells from accumulating. This balance, or homeostasis, is essential to maintain a healthy organism and to prevent disease. It is also a crucial mechanism of defense against pathogens, as cells that are infected with bacteria or viruses are removed this way. Under normal circumstances, dying cells are recycled by the immune system. But unfortunately, programmed cell death is not a foolproof mechanism.When things go wrong, it can have dire consequences. Cancer, autoimmune conditions, and neurodegeneration are all linked to failures of normal cell death and cell clearance. There are several different ways that a cell can die. Whatever is at the root of cell death, the corpse lodged in the tissue cannot stick around forever. Here, we enter the realm of the phagocytes, which are specialized white blood, or epithelial, cells that are able to swallow, or engulf, dying cells.Phagocytes patrol our tissues on the lookout for "find-me" signals released by dying cells, and then engulf them when they encounter "eat-me" signals. They are also the gatekeepers of inflammation, and cell death can either be pro- or anti-inflammatory, leading to different outcomes. ApoptosisApoptosis is the most common form of cell death and is referred to as programmed cell suicide. During apoptosis, a cell is broken up and packaged into small, self-contained pieces, which are easily recycled by phagocytes.Apoptosis is often kick-started by an accumulation of stress signals, such as damaged DNA or low oxygen. This causes leaks in the membranes of mitochondria, which are the powerhouses that convert oxygen into energy in the cell. Once mitochondria are damaged, a cell is well and truly on its way to becoming a corpse.Apoptosis can also be initiated by outside triggers. These activate so-called death receptors on the cell. To make it easy for patrolling phagocytes to home in and engulf apoptotic cells, they release strong "find-me" and "eat-me" signals. NecrosisThe main hallmark of necrotic cell death is swelling leading to rupture of the cell membrane. This leads to components leaking out from inside the cell, in much the same way that air leaks from a tyre with a puncture. Necrosis happens in response to high temperature or high pressure. Scientists call this the passive form of necrosis, as it does not require any specific activity by the cell.However, there are two forms of necrosis — necroptosis and pyroptosis — which are actively regulated by the cell and are now recognized as specialized forms of programmed cell death. As with passive necrosis, swelling causes the cell to burst. But inside, closely orchestrated sequences of events take place. There is some evidence that necroptosis may be a backup system that kicks in when certain pathogens, which can inhibit apoptosis, infect a cell. Both necroptosis and pyroptosis are thought to actively initiate inflammation to alert the immune system of pathogen infection. Because these processes cause the cell to burst, components from within the cell spill into the surrounding space. These act as danger signals, or damage-associated molecular patterns (DAMPs). Phagocytes and other immune cells react strongly to DAMPs by springing into action and causing inflammation. "This technique is an evolutionarily invaluable contribution to innate immunity, combining the killing of pathogen-infected cells with alerting the immune system through the release of DAMPs," noted the authors of a recent review about programmed cell death.This is specific to necroptosis and pyroptosis and does not usually occur during apoptosis, in which cell components are neatly packaged. However, if phagocytes fail to clear apoptotic cells quickly, these cells can turn necrotic, resulting in inflammation. AutophagyUnder normal circumstances, autophagy is a pro-survival mechanism. In response to nutrient starvation, a cell can gain essential nourishment by digesting part of its interior.But it also serves a way of countering cell stress, which can occur when proteins aggregate or damage to the cellular machinery occurs.Autophagy allows a cell to remove the danger by digesting the culprits. Scientists now believe that autophagy itself can trigger cell death, although it may be a rare and highly specialized event. Autophagy is certainly known to play a role when tissues are formed during development, and it is also thought to contribute to both apoptosis and necroptosis. The tight regulation of cell death is necessary to maintain the balance of functional cells in our tissues and to prevent infection.If this is impaired, it can have severe consequences, as a recent article about cell death signaling pointed out. "[D]eregulation of the signaling pathways that trigger cell death can lead to the development of catastrophic diseases such as cancer and autoimmunity (too little cell death) as well as degenerative diseases (too much cell death)," Douglas R. Green, Ph.D., St. Jude's Children's Research Hospital, Memphis, TN.Cancer cells are masters at evading our immune system and avoiding death. When a cancer spreads to distant sites, or metastasizes, the culprit cells must overcome cell death pathways to avoid facing their demise in the process. Many cancers have developed sophisticated mechanisms to do this by hijacking components of the apoptosis, necrosis, and autophagy signaling pathways. By deactivating these, cancers can avoid cell death when they spread through the body. Anoikis is a specialized form of apoptosis, which occurs in cells that have detached from their normal environment and find themselves in a new home in the body. This is crucial in preventing cancer cells from spreading. But cancers have evolved clever ways of preventing anoikis from cutting short their deadly excursions to find new homes in our bodies.Some cancer drugs target programmed cell death in order to reactivate these processes and kill the cancer cells. But cell death pathways do not happen in isolation, and activating one type of cell death does not guarantee that a cell does not switch to a different pathway, thus avoiding the therapeutic effect. The inflammatory response to the release of DAMPs that follows necroptosis and pyroptosis, and to some extent apoptosis, can have both immediate and long-term consequences.Inflammation induced by DAMPs can reach beyond phagocytes and lead to general, or systemic, inflammation. This, in turn, can lead to life-threatening sepsis. Scientists have also begun to understand the link between necroptosis and several inflammatory diseases, such as COPD and atherosclerosis. Pyroptosis has also recently been implicated in the development of systemic lupus. Cell death in neurodegenerative diseases — including Alzheimer's disease, Parkinson's disease, and Huntington's disease — is thought to occur via apoptosis of damaged cells. Necroptosis has also been linked to Huntington's disease, as well as amyotrophic lateral sclerosis, and scientists are increasingly looking at the link between inflammation and neurodegeneration. To tackle this complex interplay between disease and programmed cell death, a holistic view of the multitude of signaling pathways and processes involved will be necessary."Crossstalk between these pathways potentially provides numerous backup mechanisms for cell death programs and could explain why inhibition of a single program often has minor consequences for the organism." Douglas R. Green, Ph.D.Once a fuller picture emerges, it may be possible to tackle cell death with therapeutic interventions aimed at preventing cancer metastasis, excessive inflammation, and neurodegeneration. Therefore, programmed cell death is normal and vital, but it can sometimes go awry, leading to potentially serious health problems.



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