

Biochemical Pathways of Apoptosis and Cell Survival

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ABOVE THE STUDY

Apoptosis and cell survival pathways represent two tightly regulated and fundamentally interconnected biochemical systems that determine cellular fate. In my opinion, these pathways should not be viewed as opposing forces but rather as a dynamic equilibrium that maintains tissue homeostasis, development, and immune function. Dysregulation of this balance lies at the core of many human diseases, including cancer, neurodegeneration, autoimmune disorders, and ischemic injury.

At the biochemical level, apoptosis is a form of programmed cell death characterized by energy-dependent cellular dismantling without provoking inflammation. It is primarily executed through two major pathways: the intrinsic (mitochondrial) pathway and the extrinsic (death receptor) pathway. The intrinsic pathway is regulated by mitochondrial integrity and involves the release of cytochrome c into the cytoplasm, which activates caspase-9 and downstream effector caspases such as caspase-3. This cascade leads to membrane blebbing, and eventual cellular disassembly. In my view, mitochondria serve as the central decision-making hub for apoptosis, integrating diverse stress signals into a unified death response.

The extrinsic pathway is initiated by the binding of extracellular ligands such as Fas ligand or TNF- α to their respective death receptors. This interaction triggers the formation of the Death-Inducing Signaling Complex (DISC), leading to activation of caspase-8 and subsequent downstream apoptotic events. Importantly, both intrinsic and extrinsic pathways converge on common executioner caspases, highlighting the integrated nature of apoptotic signaling networks.

Cell survival pathways, in contrast, are primarily mediated by signaling cascades such as PI3K/AKT, NF- κ B, and MAPK/ERK pathways. These pathways promote cell proliferation, inhibit apoptosis, and enhance metabolic adaptation under stress conditions. The PI3K/AKT pathway, for example, phosphorylates and inactivates pro-apoptotic proteins such as while simultaneously promoting protein synthesis and glucose metabolism. In my opinion, this pathway acts as a central

survival switch that determines whether a cell adapts or undergoes programmed death.

The balance between apoptosis and survival is tightly regulated by the BCL-2 family of proteins, which includes both pro-apoptotic and anti-apoptotic members. Proteins such as BAX and BAK promote mitochondrial outer membrane permeabilization, while BCL-2 and BCL-XL inhibit this process. The relative expression and activity of these proteins determine cellular susceptibility to apoptosis. Disruption of this balance is a common feature in cancer, where overexpression of anti-apoptotic proteins allows malignant cells to evade programmed cell death.

In neurodegenerative diseases, the opposite imbalance is often observed, with excessive apoptosis contributing to progressive neuronal loss. Factors such as oxidative stress, mitochondrial dysfunction, and protein aggregation can activate apoptotic pathways, leading to irreversible cell death. In my view, this dual role of apoptosis protective in cancer but destructive in neurodegeneration highlights its context-dependent nature in disease biology.

Another important aspect is the role of cellular stress signaling in modulating apoptosis and survival. Stress-activated kinases such as JNK and p38 MAPK can promote apoptosis under severe stress conditions, while mild activation may support adaptive survival responses. This dose-dependent signaling behavior illustrates the finely tuned regulatory networks that govern cell fate decisions.

Autophagy also intersects with apoptosis and survival pathways, acting as a cellular quality control mechanism. Under stress conditions, autophagy can promote survival by recycling damaged organelles and proteins. However, excessive or dysregulated autophagy may contribute to cell death. In my opinion, the crosstalk between autophagy and apoptosis represents a critical regulatory node in determining cellular outcomes under pathological conditions.

From a therapeutic perspective, targeting apoptosis and survival pathways has significant clinical relevance. In cancer therapy, strategies often aim to reactivate apoptotic pathways or inhibit

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survival signaling to induce tumor cell death. Conversely, in degenerative diseases, efforts focus on enhancing survival pathways or inhibiting excessive apoptosis to preserve functional cells. However, achieving precise control remains challenging due to the interconnected nature of these signaling networks.

Emerging research also highlights the role of metabolic state in regulating apoptosis and survival. Cellular energy levels, redox status, and nutrient availability can all influence apoptotic sensitivity. For example, ATP depletion can shift cells from apoptosis toward necrosis, altering inflammatory outcomes. In

my view, this metabolic integration adds another layer of complexity to cell fate regulation.

In conclusion, biochemical pathways of apoptosis and cell survival form an intricate and highly coordinated network that governs cellular fate decisions. In my opinion, understanding this balance is essential for deciphering disease mechanisms and developing targeted therapies. Future advances will likely depend on systems-level approaches that integrate signaling, metabolism, and gene regulation to precisely modulate cell survival outcomes in human disease.