



## Mini Review

### Reprogramming Immunity: A New Perspective on Immunosuppressive Therapy in the Age of Precision Medicine

\*Schenker R, Orandi U, Ueshima R, Gabrielli J, Sagach Y

Biomedical Research Institute of Salamanca, University of Salamanca, Spain

\* **Corresponding Author:** Orandi U, Biomedical Research Institute of Salamanca, University of Salamanca, Spain

**Citation:** Orandi U, Reprogramming Immunity: A New Perspective on Immunosuppressive Therapy in the Age of Precision Medicine V1(3), 2025

**Copyright:** ©2025 Orandi U, this is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

**Received date:** November 03, 2025; **Accepted date:** November 11, 2025; **Published date:** November 17, 2025

**Keywords:** immune recalibration, immune reprogramming, immune cell activation, chronic drug therapy, immune-mediated diseases

## Abstract

Immunosuppressive therapy has traditionally focused on broadly dampening immune responses to prevent graft rejection and control autoimmune diseases. However, emerging insights into immune system complexity reveal that suppression alone is an incomplete strategy. This article presents a new perspective: immunosuppressive therapy as *immune reprogramming* rather than mere inhibition. Advances in systems biology, personalized medicine, and cellular engineering are enabling selective modulation of immune pathways, preserving protective immunity while minimizing adverse effects. By shifting from generalized suppression to targeted immune recalibration, the future of immunotherapy promises improved efficacy, reduced toxicity, and a more nuanced balance between tolerance and defence.

## Introduction

The immune system is a dynamic, adaptive network designed to protect the body from pathogens while maintaining tolerance to self. Immunosuppressive therapy has long been essential in clinical medicine, particularly in organ transplantation and autoimmune diseases such as rheumatoid arthritis and lupus. Conventional approaches rely on broadly acting agents that inhibit immune cell activation, proliferation, or signaling pathways. While effective, these strategies often come at the cost of increased infection risk, malignancy, and systemic toxicity.

A paradigm shift is now underway—moving from indiscriminate suppression to precise immune modulation.

## A New Perspective: Immune Reprogramming

Rather than viewing immunosuppression as a blunt tool, modern research suggests reframing it as *immune reprogramming*. This concept emphasizes:

- **Selective targeting of immune subsets** (e.g., effector vs regulatory T cells)
- **Temporal modulation** (adjusting therapy based on disease stage)
- **Restoration of immune balance** instead of global suppression

This approach aims to recalibrate the immune system rather than silence it

## Emerging Strategies in Immunosuppressive Therapy

### 1. Precision Medicine and Biomarker-Guided Therapy

Advances in genomics and proteomics enable identification of patient-specific immune signatures. Biomarkers can guide:

- Drug selection
- Dosage optimization
- Monitoring therapeutic response

This reduces unnecessary exposure and improves outcomes.

## Journal of Innovations in Medical Research and Clinical case Reports (JIMRCR)

## 2. Targeted Biological Agents

Biologics such as monoclonal antibodies and fusion proteins offer high specificity. These agents can:

- Block specific cytokines (e.g., TNF, IL-6)
- Inhibit co-stimulatory signals in T-cell activation
- Deplete pathogenic immune cells selectively

This targeted approach minimizes collateral damage to the immune system

## 3. Cellular Therapies

Regulatory T cells (Tregs) and engineered immune cells are being explored to induce immune tolerance. These therapies:

- Promote long-term immune regulation
- Reduce reliance on chronic drug therapy
- Offer potential cures rather than symptom control

## 4. Nanotechnology-Based Drug Delivery

Nanocarriers can deliver immunosuppressive drugs directly to affected tissues or specific immune cells. Benefits include:

- Reduced systemic toxicity
- Enhanced drug efficacy
- Controlled release profiles

## Future Directions

The future of immunosuppressive therapy lies in integration

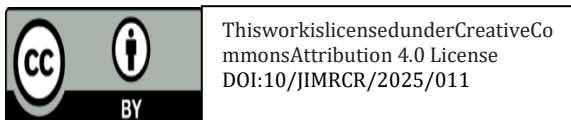
- Combining biologics with cellular therapies
- Using AI-driven models for treatment prediction
- Developing tolerance-inducing protocols in transplantation

## Conclusion

Immunosuppressive therapy is undergoing a conceptual transformation. The traditional model of broad immune inhibition is giving way to a more sophisticated framework centered on precision, selectivity, and immune reprogramming. By embracing this new perspective, clinicians and researchers can move closer to therapies that are not only effective but also safer and more sustainable. The challenge ahead lies in translating these innovations into accessible, real-world solutions that redefine how we manage immune-mediated diseases.

## References

1. Demori, I.; Losacco, S.; Giordano, G.; Mucci, V.; Blanchini, F.; Burlando, B. Fibromyalgia Pathogenesis Explained by a Neuroendocrine Multistable Model. *PLoS ONE* 2024, 19, e0303573.
2. Țăpoi, D.A.; Derewicz, D.; Gheorghisan-Gălățeanu, A.-A.; Dumitru, A.V.; Ciongariu, A.M.; Costache, M. The Impact of Clinical and Histopathological Factors on Disease Progression and Survival in Thick Cutaneous Melanomas. *Biomedicines* 2023, 11, 2616.
3. Karami, S.; Yanik, E.L.; Moore, L.E.; Pfeiffer, R.M.; Copeland, G.; Gonsalves, et al Risk of Renal Cell Carcinoma Among Kidney Transplant Recipients in the United States. *Am. J. Transpl.* 2016, 16, 3479–3489.
4. Landino, S.M.; Nawalaniec, J.T.; Hays, N.; Osho, A.A.; Keller, B.C.; Allan, J.S.; Keshavjee, S.; Madsen, J.C.; Hachem, R. The role of induction therapy in lung transplantation. *Am. J. Transpl.* 2025, 25,
5. Kouri, F.M.; Jensen, S.A.; Stegh, A.H. The Role of Bcl-2 Family Proteins in Therapy Responses of Malignant Astrocytic Gliomas: Bcl2L12 and Beyond. *Sci. World J.* 2012, 838916.
6. Rajabian, A.; Farzanehfar, M.; Hosseini, H.; Arab, F.L.; Nikkhah, A. Boswellic Acids as Promising Agents for the Management of Brain Diseases. *Life Sci.* 2023, 312, 121196.
7. Moser, J.C.; Wei, G.; Colonna, S.V.; Grossmann, K.F.; Patel, S.; Hynstrom, J.R. Comparative-effectiveness of pembrolizumab vs. nivolumab for patients with metastatic melanoma. *Acta Oncol.* 2020, 59, 434–437.



This work is licensed under Creative Commons Attribution 4.0 License  
DOI:10/JIMRCR/2025/011

**Your next submission with****Olites Publishers will reach you the below assets**

- We follow principles of publication led by the Committee on Publication Ethics (COPE).
- Double-blind peer review process which is just as well as constructive.
- Permanent archiving of your article on our website
- Quality Editorial service
- Manuscript accessibility in different formats (PDF, Full Text)
- authors retain copyrights
- unique DOI for all articles
- immediate, unrestricted online access

Learn more: [Journal of Innovations in Medical Research and Clinical case Reports Olites Publishers \(olitespublishing.org\)](https://olitespublishing.org/)