

BIOMARKERS OF ORAL SQUAMOUS CELL CARCINOMA: POTENTIAL DIAGNOSTIC AND PROGNOSTIC TOOLS

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Published: 4th November 2025

Abstract

Oral squamous cell carcinoma (OSCC) is a prevalent malignant tumor, where early diagnosis and effective prognostic assessment are crucial for improving patient outcomes. In recent years, biomarkers have attracted significant attention in OSCC research, emerging as potential tools for diagnosis and prognosis. This review summarizes the latest advancements in the study of biomarkers associated with oral squamous cell carcinoma, including various types of biomarkers such as genes, proteins, and non-coding RNA, and evaluates their application value in early detection, treatment response assessment, and prognostic judgment. By conducting a comprehensive analysis of the existing literature, this paper aims to provide insights that can enhance clinical practice.

Keywords: Oral squamous cell carcinoma; Biomarkers; Early diagnosis; Prognostic assessment; Tumor biology

1. Introduction

Oral squamous cell carcinoma (OSCC) is a significant health concern worldwide, characterized by its high incidence and mortality rates. Epidemiological studies indicate that OSCC is one of the most prevalent forms of oral cancer, with varying incidence across different geographic regions. Factors such as tobacco use, alcohol consumption, and human papillomavirus (HPV) infection have been identified as major risk factors contributing to the development of OSCC. For instance, HPV-related lesions have been increasingly recognized as significant contributors to the pathogenesis of OSCC, particularly in younger populations (Betz, 2019). Furthermore, poor oral health, including periodontal disease and tooth loss, has been shown to correlate with an increased risk of OSCC, suggesting a complex interplay between oral hygiene and cancer development (Da Silva et al., 2024; Tasoulas et al., 2024).

Biomarkers, defined as biological molecules that indicate a physiological or pathological process, play a crucial role in oncology. They serve as indicators for disease progression, treatment response, and overall prognosis. In the context of OSCC, biomarkers can enhance our understanding of tumor biology and facilitate early detection, which is critical for improving patient outcomes. For example, the identification of specific genetic alterations and molecular signatures associated with OSCC can lead to the development of targeted therapies and personalized treatment plans (Bakker et al., 2023). The growing interest in precision medicine underscores the importance of biomarkers in tailoring therapeutic strategies to individual patient profiles, ultimately aiming to improve survival rates and quality of life for patients with OSCC (Tran et al., 2020).

The purpose of this review is to explore the epidemiology and clinical characteristics of OSCC, with a focus on the role of biomarkers in its diagnosis and treatment. By synthesizing current research findings, this review aims to highlight the

significance of biomarkers in the clinical management of OSCC and discuss potential future directions for research in this area. Understanding the relationship between biomarkers and OSCC not only contributes to the existing body of knowledge but also has significant implications for enhancing patient care and treatment outcomes in this challenging disease landscape.

2. Genetic biomarkers for TSCC

2.1 TP53

The TP53 gene, often called the "guardian of the genome," is critical in regulating the cell cycle and maintaining genomic stability. Mutations in TP53 are one of the most common genetic alterations found in OSCC. These mutations can produce a dysfunctional p53 protein, which fails to execute its tumor-suppressive functions, thus promoting tumorigenesis. Studies have shown that TP53 mutations are associated with more aggressive disease and poorer prognosis in OSCC patients (J. H. Ji et al., 2022). Furthermore, the presence of TP53 mutations has been linked to specific clinical features, including advanced tumor stage and increased likelihood of metastasis (Romanovsky et al., 2023). Recent research utilizing whole-exome sequencing has identified novel mutations in the TP53 gene that affect the DNA damage repair and apoptosis pathways, underscoring the multifaceted role of TP53 in OSCC pathogenesis (F. Xie et al., 2022). Additionally, the heterogeneity of TP53 mutations within tumors suggests that different subclonal populations may exhibit varying responses to therapy, complicating treatment strategies (Tang & Chen, 2024). Overall, the TP53 mutation landscape in OSCC highlights its importance as a biomarker for prognosis and therapeutic targeting.

2.2 NOTCH1

The NOTCH gene is a highly conserved and evolutionarily ancient gene that is universally present in cells. On one hand, it plays a crucial role in the normal growth and development of mammals,

as well as in tissue homeostasis. On the other hand, it has also been reported to be inextricably linked to the occurrence and progression of many diseases, such as cancer (Artavanis-Tsakonas, 1988; Leong & Karsan, 2006). The role of the NOTCH signaling pathway in tumors is currently unclear. It plays different roles in various tumors, and even within the same tumor, it may simultaneously have both tumor-suppressing and oncogenic effects (Abby et al., 2023; Agrawal et al., 2011; Ellisen et al., 1991; Jafari et al., 2020; X. Jiao et al., 2012; Puente et al., 2011; Stransky et al., 2011; N. J. Wang et al., 2011; Weng et al., 2004; Yi et al., 2022).

NOTCH1 is the second most common mutated gene in whole-exome sequencing of HNSCC (Agrawal et al., 2011; Schmidl et al., 2022; Stransky et al., 2011). There is still considerable debate over the exact role of the NOTCH signaling pathway in oral squamous cell carcinoma. Some scholars have found that high expression of NOTCH can promote the proliferation, migration, and invasion of head and neck squamous cell carcinoma cells (Inamura et al., 2017; Weaver et al., 2016), and is closely related to tumor invasion, distant metastasis, and poor prognosis in patients (Morita et al., 2017; Tian et al., 2018). The combination of NOTCH signaling pathway inhibitors and EGFR inhibitors can inhibit the proliferation and migration of head and neck squamous cell carcinoma cells (Zheng et al., 2018). The expression of NOTCH promotes the cancer stem cell characteristics of head and neck squamous cell carcinoma (Lee et al., 2016). The NOTCH signaling pathway is associated with tumor immune escape in head and neck squamous cell carcinoma, and inhibiting the NOTCH signaling pathway can reduce immune-suppressive cells within the tumor (Mao et al., 2018). a pivotal role for ZMIZ1 as an oncogenic driver, possibly operating by activating the Notch1 signaling pathway, thereby facilitating TSCC invasion and migration. Yunqing Pang et al. found that ZMIZ1 plays a key role as an oncogenic driver, possibly by activating the Notch1 signaling pathway, thereby promoting the invasion and migration of tongue squamous cell carcinoma (Pang et al., 2024). Therefore, these scholars believe that NOTCH plays the role of an oncogene in head and neck

squamous cell carcinoma. Conversely, some researchers have found that the activation of NOTCH1 in head and neck squamous cell carcinoma cells inhibits tumor cell proliferation, leading to cell cycle arrest and increased cellular senescence (J. Jiao et al., 2009; Pickering et al., 2013). NOTCH1 has a higher nonsense mutation rate in HNSCC, and PTC124 can rescue these nonsense mutations, inhibiting the proliferation of HNSCC cells (Wu et al., 2022). Disabling the NOTCH signaling pathway in transgenic mice promotes the growth of head and neck tumors (Nyman et al., 2018). By expressing or activating the estrogen receptor, the expression of NOTCH is elevated, thereby inhibiting the proliferation of squamous cell carcinoma (Brooks et al., 2014). Overexpression of NOTCH can also improve the survival rate of patients with head and neck squamous cell carcinoma (Kaka et al., 2017; Wirth et al., 2018). Wu-Chou et al. found that NOTCH1 mutations are very common in OSCC and are associated with a shortened overall survival in OSCC patients (Grilli et al., 2020; Wu-Chou et al., 2021). Therefore, these scholars believe that NOTCH1 plays the role of a tumor suppressor gene in head and neck squamous cell carcinoma.

2.3 P16INK4a

P16INK4a, a cyclin-dependent kinase inhibitor, plays a pivotal role in regulating the cell cycle by inhibiting cyclin D-CDK4/6 complexes, thereby promoting cellular senescence. In the context of OSCC, the expression levels of P16INK4a have been extensively studied due to its association with human papillomavirus (HPV) infection and its potential as a prognostic marker. Elevated expression of P16INK4a is often observed in HPV-positive OSCC patients, indicating a distinct biological behavior compared to HPV-negative cases (Kravets et al., 2023). The overexpression of P16INK4a has been correlated with improved clinical outcomes, suggesting its role as a favorable prognostic indicator in OSCC (Thin et al., 2022). Moreover, P16INK4a's expression has been utilized as a diagnostic marker to differentiate between HPV-related and non-HPV-related OSCC, which is crucial for tailoring treatment approaches (Hakeem

et al., 2020). However, the expression of P16INK4a can also be influenced by other factors, including genetic alterations and the tumor microenvironment, highlighting the need for further research to fully elucidate its role in OSCC pathogenesis.

2.4 Impact of HPV-Related Genes

The relationship between human papillomavirus (HPV) and oral squamous cell carcinoma has garnered significant attention in recent years, particularly concerning the oncogenic potential of HPV-related genes such as E6 and E7. HPV-positive OSCC is characterized by the integration of viral DNA into the host genome, leading to the expression of E6 and E7 proteins, which disrupt normal cell cycle regulation and promote cellular transformation. E6 protein binds to and promotes the degradation of the p53 tumor suppressor protein, while E7 protein inactivates the retinoblastoma protein (pRb), resulting in unregulated cell proliferation (Ma et al., 2020). Studies have indicated that HPV-positive OSCC patients tend to have better clinical outcomes compared to their HPV-negative counterparts, which may be attributed to the distinct biological behavior of HPV-associated tumors (Morand et al., 2022). Furthermore, the expression levels of HPV oncogenes have been linked to specific immune responses within the tumor microenvironment, suggesting that HPV status may influence therapeutic responses (Berglund et al., 2022). Understanding the molecular mechanisms by which HPV-related genes contribute to OSCC pathogenesis is essential for developing targeted therapies and improving patient outcomes.

3. Proteins biomarkers for TSCC

3.1 SOX

The SOX family of transcription factors plays a complex role in cancer, involving aspects such as tumor invasion, metastasis, proliferation, apoptosis, epithelial-mesenchymal transition (EMT), stemness, and drug resistance. The abnormal expression of SOX family members is closely related to the

occurrence and development of cancer, with SOX2, SOX4, and SOX9 being the most studied members. They promote EMT and stemness of tumors by affecting signaling pathways such as Wnt/ β -catenin and TGF- β , and are associated with tumor prognosis and therapeutic resistance (X. Li et al., 2013; Wong et al., 2023). In addition, the SOX family is involved in the formation of the tumor immune microenvironment (TIME), regulating the differentiation, activation, and release of chemokines of immune cells, which affects the immune escape and immunotherapy efficacy of tumors (Kuwahara et al., 2012; Yang et al., 2016). Studies have also found that SOX family members can be regulated by epigenetic modifications and non-coding RNAs, affecting the progression of tumors (X. Chen et al., 2020; J.-Y. Li et al., 2012). Therefore, SOX family transcription factors are potential targets for cancer treatment, and therapeutic strategies targeting them are being actively explored, including the development of drugs that directly target SOX proteins and SOX-based immunotherapies (Liu et al., 2023; Ruzinova et al., 2023).

The SOX gene family plays a significant role in OSCC. A study demonstrated that high levels of SOX2 may indicate local spreading in patients with OSCC, while silencing the SOX2 gene can enhance the sensitivity of OSCC cells to cisplatin and inhibit their migration ability and cancer stem cell characteristics (Sacco et al., 2023).

Sox2, as an oncogene, is associated with maintaining the undifferentiated state of tumor stem cells (Luiz et al., 2018). The role of Sox4 in OSCC is controversial, but some studies have indicated that it may promote tumor development (Liu et al., 2016; Rosa et al., 2015, 2018). The transcription level of Sox7 in OSCC tissue is significantly lower than that in normal tissue, and the low level of Sox7 is significantly correlated with low tumor differentiation, advanced staging, and positive lymph node metastasis (D. Chen et al., 2018). The high expression of Sox8 is a vital rate (S.-L. Xie et al., 2018). SOX9 gene is highly expressed in oral cancer and might be potential therapeutic targets for oral cancer, and the poor overall survival of patients with the high expression of SOX9 (T. Li et al., 2023). A study indicated that the DNA hypomethylation-associated upregulation of Sox11 could promote oncogenic transformation via the PI3K/AKT pathway in OLP-associated OSCC (Liu et al., 2024). Therefore, Sox11 might be a reliable biomarker for predicting the progression of precancerous oral tissues (Liu et al., 2024). These findings not only reveal the complex mechanisms of Sox genes in OSCC but also provide new targets and biomarkers for future diagnosis and treatment.

related to its prognosis (Chaw et al., 2012; Elnasary et al., 2024; Sakamoto et al., 2012). By monitoring the occurrence of EMT, it may be possible to detect early OSCC, thereby improving patients' survival rates. E-cadherin is an important marker in the EMT process, a calcium-dependent transmembrane protein that links extracellular immunoglobulin domains and is involved in cell-to-cell adhesion. It plays a crucial role in maintaining cell polarity and integrity. Diniz-Freitas M et al. discovered that the invasive behavior of tumor cells can be significantly inhibited by transfecting E-cadherin protein, and they consider the reduction of E-cadherin expression to be a sign of malignancy (Diniz-Freitas et al., 2006). Ilena S Yim et al. also confirmed that molecular markers of EMT, including TWIST, vimentin, and N-cadherin, can serve as prognostic markers for oral cancer (Yim & Laronde, 2024). Subsequent extensive research data has also shown that the expression of E-cadherin is reduced in squamous cell carcinoma (SCC) or at the invasive front of SCC (Afrem et al., 2014; Costa et al., 2015; da Cunha et al., 2016; Diniz-Freitas et al., 2006).

3.4 CCND1 and other proteins

Cyclin D1 (CCND1) plays a vital role in promoting cell proliferation, and its mutations or deficiencies can lead to cell-cycle arrest and apoptosis (G. Chen et al., 2019; Sun et al., 2019; Xu et al., 2020). Notably, CCND1 acts as an oncogene that facilitates the progression of various cancers, including colorectal cancer (Albasri et al., 2019), breast cancer (Choi et al., 2019) and OSCC (Kujan et al., 2019; Ramos-García et al., 2019). Interestingly, studies have shown that silencing CCND1 is an effective approach to inhibit the progression of OSCC. Researchers have constructed a risk model associated with HNSCC (Ding et al., 2023), which includes 9 gene sets: CXCL13, MORF4L2, CTSL1, TMEM173, TBC1D2, WIPF1, C5orf15, LIPA, and ISG20. The results indicate that high expression of ISG20 and CTSL1 is positively correlated with poor prognosis in cancer patients, and ISG20 can promote angiogenesis, tumor cell proliferation, and metastasis. In addition, high expression of CXCL13 in tumors is associated with the prognosis of various cancers, including oral squamous cell carcinoma and breast cancer. TMEM173 is related to the clinical condition and immune response of HNSCC patients and can serve as a biological marker to improve patient prognosis. In HNSCC, 30% of the activated signaling pathways is the PI3K pathway, and genes encoding tyrosine kinase receptors involved in tumorigenesis (such as IGF1R, DDR2, EGFR, EPHB2, FGFR1, FGFR2, FGFR3, ERBB2, or MET) are also activated to

3.2 HIF-1 α

Hypoxia-inducible factor-1 (HIF-1) is a crucial transcription factor in the cellular response to hypoxia, composed of a heterodimer of β subunits and α subunits (Schofield & Ratcliffe, 2005). HIF-1 α , as one of the most important transcriptional molecules of the α subunits, participates in the occurrence and progression of tumors through genetic diversity as well as environmental mechanisms and hypoxic stimulation, making the upregulation of HIF-1 α particularly noteworthy compared to other subtypes (H.-S. Li et al., 2019). The formation of a hypoxic microenvironment can upregulate the expression of hypoxia-inducible factor 1 in tumor cells. As a transcription factor, HIF-1 can bind to the hypoxia response elements in the promoter region of target genes, thereby upregulating the expression of these genes. This leads to the inhibition of tumor cell apoptosis, promotion of tumor cell proliferation, and enhancement of tumor cell migration and invasion (Ebright et al., 2020; Gao et al., 2023; Hong et al., 2019; Shi et al., 2021; Zhong et al., 2022). In tongue cancer, the expression of HIF-1 α has been identified as a standalone prognostic indicator (Kang et al., 2013). Christian Wilhelm and colleagues confirmed that the transcription factor HIF-1 α is a relevant hypoxia-dependent oncogenic regulator in HNSCC (Wilhelm et al., 2021).

Ambika Murugesan et al. found that the expression of both HIF and Nestin has significant implications around metastatic OSCC (Murugesan et al., 2024). Sumera Sumera et al. conducted research indicating that increased expression of HIF-1 α is a tumor-specific finding, with minimal or no expression in normal oral tissues. Assessing the overexpression of HIF-1 α in OSCCs can enhance diagnostic accuracy (Sumera et al., 2023).

3.3 E-cadherin

The epithelial-to-mesenchymal transition (EMT) theory provides a good explanation for the occurrence, development, invasion, and metastasis of tumors, and thus has attracted increasing attention. EMT refers to a process in which epithelial cells undergo a morphological transformation towards a mesenchymal cell phenotype while acquiring migratory capabilities (Acloque et al., 2009). Studies have shown that tumors with strong metastatic potential, such as OSCC, exhibit EMT phenomena, and the occurrence of EMT may contribute to the progression of OSCC and is closely

varying degrees (Saada-Bouزيد et al., 2019).

3.5 Long non-coding RNAs biomarkers for TSCC

Long non-coding RNA (LncRNA) plays a regulatory role in protein expression on multiple levels (epigenetic regulation, transcriptional regulation, and post-transcriptional regulation), thereby influencing the occurrence and development of tumors (Folkins et al., 2009; Kaur et al., 2003; Saidi et al., 2008). Metastasis associated lung adenocarcinoma transcript 1 (MALAT1) is one of the earliest discovered lncRNAs. Initially identified in non-small cell lung cancer through subtractive hybridization, it is approximately 8700 base pairs in length and located on human chromosome 11q13 (P. Ji et al., 2003). It is overexpressed or mutated in various human malignant tumors such as breast cancer, renal cell carcinoma, non-small cell lung cancer, colon cancer, liver cancer, cervical cancer, and is associated with prognosis. Rania Shalaby et al. found that the long non-coding RNA MALAT1 is underexpressed in meningiomas and correlates with heightened tumor aggressiveness (Elhosary et al., 2024). Jing Ning et al. found that the overexpression of lncRNA MALAT1 enhanced the viability, proliferation, and invasive capabilities of multiple myeloma (MM) cells (Ning et al., 2024). In tissues affected by COPD and lung cancer, the expression of MALAT1 is elevated, and it facilitates tumor invasion and metastasis by modulating alternative splicing and gene expression patterns that are linked to the advancement of metastasis (Sweef et al., 2024). MALAT1 enhanced the proliferation, migration, and invasion of NSCLC cells and hindered apoptosis by modulating the expression of MDM4 through the action of miR-185-5p (D. Wang et al., 2020). Xuan Zhou et al. analyzed 96 OSCC specimens and found that the expression of MALAT1 in OSCC tissues was significantly higher than in normal oral tissues. Moreover, high expression of MALAT1 was closely associated with poor patient prognosis (Zhou et al., 2015). Salivary lncRNA MALAT1 serves as a miRNA-124 sponge and may represent a promising saliva-based biomarker for the detection of OSCC (Shalaby et al., 2024).

4. Conclusion

Genetic and protein biomarkers such as TP53, NOTCH1, P16INK4a, members of the SOX family, HIF-1 α , E-cadherin, and CCND1 play a crucial role in the occurrence, progression, and prognostic assessment of OSCC. In addition, long non-coding RNAs (LncRNAs), particularly MALAT1, also have

a significant impact on the regulation of OSCC and could potentially act as indicators for diagnosis and assessment of disease progression. These biomarkers not only help us to gain a deeper understanding of the tumor biology characteristics of OSCC but also provide new perspectives for early diagnosis, prognostic assessment, and personalized treatment. Further research is needed to explore the clinical applications of these biomarkers in order to improve the treatment outcomes and quality of life for patients with OSCC.

DECLARATION OF AI AND AI-ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

The English language of the article was improved with ChatGPT. Upon generating draft language, the author reviewed, edited and revised the language to their own liking and takes ultimate responsibility for the content of this publication.

AVAILABILITY OF DATA AND MATERIALS

The datasets supporting the conclusions of this article are available from the corresponding author on reasonable request.

ETHICS APPROVAL AND CONSENT TO PARTICIPATE

The study was approved by the Research Management Centre, MAHSA University (RMC/DECEMBER/2024/EC05) and the Medical Ethics Committee of Youjiang Medical University for Nationalities (approval number: 2024091101).

HUMAN AND ANIMAL RIGHTS

Not applicable.

CONSENT FOR PUBLICATION

Not applicable.

FUNDING

None

CONFLICT OF INTEREST

The authors declare that none of them has any conflict of interest.

ACKNOWLEDGEMENTS

The authors are grateful for the support from School of Basic Medical Sciences, Youjiang Medical University for Nationalities.

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