

Effects of Arsenic Exposure in Humans

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Abstract:

Arsenic is a naturally occurring toxic metalloid that poses a serious threat to human health when exposure occurs through contaminated drinking water, food, air, or occupational sources. Chronic arsenic exposure has been strongly associated with the development of various types of cancer, making it a significant global public health concern. This review paper examines the carcinogenic effects of arsenic exposure in humans, focusing on its sources, mechanisms of toxicity, and role in cancer development. Arsenic induces carcinogenesis through multiple biological pathways, including oxidative stress, DNA damage, genomic instability, epigenetic alterations, impaired DNA repair mechanisms, and disruption of cellular signaling pathways. Long-term exposure has been linked to increased risks of skin, lung, bladder, liver, kidney, and other cancers. Epidemiological studies conducted in arsenic-affected regions have consistently demonstrated a positive association between arsenic exposure and cancer incidence. The paper also discusses factors influencing individual susceptibility, such as exposure duration, concentration, nutritional status, and genetic predisposition. Understanding the molecular mechanisms underlying arsenic-induced carcinogenesis is essential for developing effective prevention, early detection, and public health intervention strategies. The study highlights the need for continuous monitoring of arsenic contamination, implementation of safe drinking water policies, and increased public awareness to reduce the burden of arsenic-related cancers worldwide.

Keywords: Arsenic, Carcinogenesis, Human Health, DNA Damage, Oxidative Stress, Cancer Risk, Environmental Toxicology, Chronic Exposure, Public Health, Genotoxicity.

Introduction

Arsenic is a naturally occurring metalloid that is widely distributed in the earth's crust and is recognized as one of the most hazardous environmental pollutants affecting human health. Human exposure to arsenic occurs primarily through contaminated drinking water, food, industrial emissions, mining activities, agricultural chemicals, and occupational environments. Due to its widespread presence and toxic nature, arsenic contamination has become a major public health concern in many countries around the world. Long-term exposure to arsenic has been associated with numerous adverse health effects, including skin disorders, cardiovascular diseases, neurological impairments, respiratory problems, and various forms of cancer.

Among its many toxic effects, the carcinogenic potential of arsenic has received considerable scientific attention. The International Agency for Research on Cancer has classified arsenic and inorganic arsenic compounds as Group 1 human carcinogens because of strong evidence linking exposure to cancer

development in humans. Epidemiological studies have consistently demonstrated that chronic arsenic exposure increases the risk of several cancers, particularly those affecting the skin, lungs, bladder, liver, and kidneys. The burden of arsenic-related cancers is especially significant in regions where groundwater contamination is widespread.

The carcinogenic effects of arsenic are complex and involve multiple biological mechanisms. Arsenic can induce oxidative stress, generate reactive oxygen species, damage cellular DNA, alter gene expression, disrupt DNA repair processes, and cause epigenetic modifications. These changes contribute to genetic instability and abnormal cell proliferation, which may ultimately lead to cancer development. Unlike many conventional carcinogens, arsenic often acts indirectly by influencing cellular pathways and enhancing susceptibility to malignant transformation.

Understanding the mechanisms through which arsenic causes cancer is essential for effective risk assessment, disease prevention, and public health management. Increased industrialization, environmental pollution, and continued dependence on contaminated groundwater sources have further emphasized the need for comprehensive research on arsenic toxicity. Therefore, this research paper aims to examine the carcinogenic effects of arsenic exposure in humans, focusing on its sources of exposure, mechanisms of carcinogenesis, associated cancer types, and the implications for public health. The study also highlights the importance of preventive measures, environmental monitoring, and policy interventions to reduce human exposure and minimize the health risks associated with arsenic contamination.

Aspect	Description
Environmental Toxicant	Arsenic is a naturally occurring toxic metalloid present in water, soil, air, and rocks.
Major Sources	Drinking water, food, industrial pollution, mining activities, pesticides, and occupational exposure.
Global Concern	Millions of people are exposed to arsenic contamination worldwide.
Carcinogenic Classification	Classified as a Group 1 human carcinogen by IARC.
Major Affected Organs	Skin, lungs, bladder, liver, kidneys, and digestive system.
Mechanisms of Toxicity	Oxidative stress, DNA damage, epigenetic changes, and genomic instability.
Health Effects	Cancer, cardiovascular diseases, neurological disorders, and immune dysfunction.
Research Importance	Understanding cancer mechanisms and developing prevention strategies.
Public Health Relevance	Supports environmental management, safe water policies, and cancer prevention programs.
Study Objective	To examine the carcinogenic effects of arsenic exposure in humans and identify preventive measures.

Review of literature

Irwin and co-researchers (2025) reviewed arsenic contamination in soil and its impact on human health. The study found that exposure to arsenic-contaminated soil was associated with DNA damage, cancer development, neurological disorders, and adverse birth outcomes. The researchers concluded that soil-

based exposure pathways require greater international attention for effective risk assessment and public health pr

A recent international systematic review and meta-analysis(2025) examined the relationship between arsenic exposure and skin cancer risk. The findings demonstrated that long-term arsenic exposure significantly increases the risk of both melanoma and non-melanoma skin cancers. The study strengthened existing evidence regarding arsenic as a major environmental carcinogen affecting human populations worldwide.

Kasmi and co-workers(2023) conducted a systematic review investigating the relationship between arsenic exposure and digestive cancers. After reviewing multiple cohort, ecological, and case-control studies, the researchers found evidence suggesting an association between arsenic exposure and cancers of the liver, pancreas, biliary tract, stomach, and colorectal region. The study recommended more high-quality international research on digestive cancer risks associated with arsenic exp

Martínez-Castillo and co-researchers(2021)reviewed the health impacts of inorganic arsenic exposure in different countries. Their findings indicated that chronic exposure to arsenic-contaminated drinking water significantly increases the risk of malignant disorders, including lung, urinary tract, and skin cancers. The study also highlighted multiple non-carcinogenic effects involving neurological, cardiovascular, renal, and immune systems.

Tchounwou and colleagues(2003) conducted a comprehensive review on the carcinogenic and systemic health effects of arsenic exposure. The study reported that arsenic contamination through drinking water and occupational exposure is a major global public health concern. The researchers found strong associations between arsenic exposure and cancers of the skin, lung, liver, bladder, kidney, and colon. The study emphasized the need for further research on the mechanisms of arsenic-induced carcinogenesis.

Need for study

The review of literature indicates that numerous studies have examined the toxic and carcinogenic effects of arsenic exposure, particularly its association with skin, lung, bladder, liver, and kidney cancers. Previous researchers have extensively investigated arsenic contamination, oxidative stress, DNA damage, epigenetic alterations, and epidemiological patterns of arsenic-related cancers. However, several important gaps still exist in the current body of knowledge.

- Most studies have focused on specific cancer types, while comprehensive investigations covering multiple organ systems affected by arsenic exposure remain limited.
- Although the molecular mechanisms of arsenic-induced carcinogenesis have been explored, the interaction between genetic susceptibility, environmental factors, and exposure duration is not yet fully understood.
- Many studies are region-specific, and comparative assessments across different populations and environmental settings are relatively scarce.
- Limited research has integrated epidemiological evidence with molecular and cellular mechanisms to provide a holistic understanding of arsenic-induced cancer development.
- The role of emerging biomarkers for the early detection and prediction of arsenic-related cancers requires further investigation.

The study will attempt to address the following points:

1. To examine the major sources of arsenic exposure in humans and their contribution to environmental and occupational health risks.
2. To investigate the carcinogenic effects of arsenic exposure on different human organs and body systems.
3. To analyze the biological and molecular mechanisms involved in arsenic-induced carcinogenesis, including DNA damage, oxidative stress, and epigenetic alterations.
4. To identify the major types of cancers associated with chronic arsenic exposure, such as skin, lung, bladder, liver, and kidney cancers.
5. To assess the relationship between the duration and level of arsenic exposure and cancer risk in human populations.

Findings of the study

- ❖ Arsenic exposure remains a major environmental and public health concern in many parts of the world, particularly in regions with contaminated groundwater sources.
- ❖ Drinking water contaminated with arsenic has been identified as the primary route of human exposure, followed by food consumption, occupational exposure, and environmental pollution.
- ❖ Chronic arsenic exposure significantly increases the risk of developing various types of cancers, including skin, lung, bladder, liver, and kidney cancers.
- ❖ The study has found a strong positive relationship between the duration of arsenic exposure and the likelihood of cancer development.
- ❖ Arsenic induces carcinogenesis through multiple biological mechanisms such as oxidative stress, DNA damage, genomic instability, and epigenetic modifications.
- ❖ Long-term exposure to arsenic disrupts normal cellular functions and interferes with DNA repair mechanisms, increasing the possibility of malignant transformation.
- ❖ Epidemiological studies conducted in different countries consistently reported higher cancer incidence among populations exposed to elevated arsenic concentrations.
- ❖ Skin cancer was found to be one of the earliest and most commonly reported malignancies associated with arsenic exposure.
- ❖ The study revealed that arsenic exposure may also contribute to cancer progression and metastasis through alterations in cellular signaling pathways.
- ❖ Individuals with poor nutritional status, genetic susceptibility, and prolonged exposure were found to be at greater risk of arsenic-induced cancers.
- ❖ Occupational groups working in mining, smelting, pesticide production, and related industries showed higher levels of arsenic exposure and associated health risks.
- ❖ Current scientific evidence confirms that inorganic arsenic is a proven human carcinogen and poses significant long-term health hazards.

Mechanisms of Arsenic Toxicity

The Arsenite(As-III) or the-Trivalent compounds of Arsenic have been found to interact with the Sulfhydryl(thiol) groups, thus stimulating or hindering the functions of vital enzyme proteins while the Pentavalent Arsenic forms simulate the actions to the Phosphate, thereby inhibiting the transfer of

Phosphate groups especially altering the oxidative phosphorylation process in Mitochondria. Thus at stoichiometric significant levels, Arsenic can compete with Phosphate in metabolic reactions. Also noteworthy is the fact that occurrence of 'Gaseous Arsine', formed by the combination of Arsenic with Hydrogen, has the ability to act as a hemolytic compound (ATSDR, 2007, 2016).

Recent studies have shown that metabolically active forms of Arsenic can promote activation of enzymes like NADPH Oxidases, stimulating "Reactive Oxygen Species" (ROS) generation in the mitochondrial environment and adversely affecting Respiration. Actually Arsenic does not directly participate in the process of ROS production. Rather Arsenic is found to affect the vital Cysteine (Sulphur containing groups) residues of the receptors and signaling enzymes, which eventually lead to the production of "Reactive Oxygen Species" through activation of NADPH Oxidase enzymes (Straub et al., 2008, 2009; ATSDR, 2016). The Oxidants, once produced function as second messengers in the process, which then stimulate Kinases, specifically bearing Tyrosine and Serine/Threonine residues. These activated Kinase based processes, then stimulate the proliferation and consequently increase in cell number, which can eventually lead to cell transformation (Simeonova and Luster, 2002; Andrew et al. 2009, NRC, 2014; ATSDR, 2016).

Chronic exposures to Arsenicals have been found to cause diverse types of epigenetic effects which include changes in methylation of DNA, altered Histone modifications and eventually instability of genome (Rossman and Klein, 2011; ATSDR, 2016, Bailey et al. 2016, Howe and Gamble, 2016). Recent works have reported that mechanism of toxicity of Arsenic may vary with the type of cell or organ. Stem cells of the target tissues or organs are adversely affected, eventually leading to Oncogenesis or impairment of normal metabolic and regenerative processes (Tokar et al., 2011; Bailey et al., 2016; Zhang et al., 2016).

CARCINOGENIC POTENTIAL OF ARSENIC:--

The Carcinogenic potential of Arsenic was initially noted by Hutchinson. As per reports of IARC (2012), treatment of individuals with therapeutic arsenic compounds can lead to increased incidences of Skin Cancers.

Thus, reports of IARC (2012) and NTP (2016) have designated Arsenic to be carcinogenic in Man. The mode of action is probably dependent upon various factors but it has been found that arsenic is able to induce chromosomal abnormalities, change in chromosome number (aneuploidy) and cause formation of micronuclei (IARC, 2012, ATSDR, 2016).

Recent research works have stated that Arsenic can act as a Co-mutagen or a cofactor in carcinogenesis (Rossman et al. 2002, IARC, 2012, ATSDR, 2016.)

It has been concluded that Arsenic in its inorganic form and its metabolic forms do not directly affect DNA and thus are not genotoxic, but arsenic does react with thiol groups of vital proteins, which then alter the normal transcription and epigenetic processes, leading finally to cancers and tumour growth (Cohen et al. 2013; NRC, 2014).

Furthermore, Arsenic adversely affects DNA repair processes (Hartwig et al.; 2002, Kitchin and Wallace, 2008; Zhou et al., 2014). Arsenic also has been found to inhibit genes which are responsible for DNA repair.

Trivalent Arsenic in its inorganic form binds to Cysteine of specific regions of DNA which serve to coordinate with Zinc (during normal conditions).

Arsenic replaces Zinc in these specific coordination pockets, thereby inhibiting protein function and promoting instability of the genome (Hartwig et al., 2002; Zhou et al. 2011; IARC, 2012).

Furthermore, there is repression of p53 tumour suppressor, (encoded by p53 gene, also known as “Guardian of the Genome”.) and stimulation of abnormal antioxidant and antiapoptotic responses are inhibited, which may provide the basis for Co-carcinogenic action of Arsenic compounds (IARC, 2012; NRC, 2014).

In the body, Arsenic occurs in blood and is excreted through urine particularly after current exposure.

It is pertinent to mention here that methylation of Inorganic Arsenic promotes its excretion, thus protecting the body, in the short term, but arsenicals like Methylarsenite (MMA) and Dimethylarsenite (DMA) do exert their adverse effects over a long period of exposure and have been found to increase the risks of Cancer and Cardiovascular disease, when present in high amounts in the body.

At low body levels, MMA and DMA predispose individuals towards increased Adiposity and incidence of Diabetes (Cosselman et al., 2015). However, there are certain animal species, which cannot methylate arsenicals and this feature may be an adaptive measure.

Inside the body, Pentavalent Arsenate is found to be reduced to Trivalent Arsenite by Arsenate Reductase enzyme, which is probably a purine nucleoside phosphorylase enzyme. Later on, arsenite is biotransformed into Methylarsonic Acid and Dimethylarsinic acid (DMA) by the enzyme-Arsenite Methyltransferase, which mediates the transfer of Methyl group from S-adenosyl methionine (Hughes et al. 2011, Li et al., 2017). There are studies which have reported that methylation of arsenic depends upon factors like gender and age of individual. Genes responsible for metabolism of Arsenic in the body are subjected to genetic polymorphism, (Engstrom et al. 2013; Li et al., 2017.) Moreover, Arsenic Metabolic processes have been found to change during woman's pregnancy, which indicates toxicological effects of Arsenic on the developing foetus. (Hopenhayn et al., 2003).

Conclusion

Arsenic exposure continues to be a significant environmental and public health challenge worldwide due to its widespread occurrence and well-established carcinogenic potential. The present study highlights that chronic exposure to arsenic through contaminated drinking water, food, air, and occupational sources is strongly associated with an increased risk of several cancers, particularly those affecting the skin, lungs, bladder, liver, and kidneys. Scientific evidence indicates that arsenic induces carcinogenesis through complex mechanisms involving oxidative stress, DNA damage, genomic instability, epigenetic alterations, and disruption of cellular signaling pathways. These biological changes contribute to abnormal cell growth and ultimately lead to cancer development.

The review of various studies demonstrates a consistent association between long-term arsenic exposure and elevated cancer incidence in exposed populations. The findings further reveal that factors such as exposure duration, concentration levels, nutritional status, age, and genetic susceptibility influence the severity of health effects. Despite considerable progress in understanding arsenic toxicity, challenges remain in identifying early biomarkers, understanding low-dose chronic exposure effects, and developing effective prevention strategies.

The study concludes that reducing human exposure to arsenic should be a global public health priority. Regular monitoring of water quality, implementation of strict environmental regulations, public awareness programmes, and access to safe drinking water are essential measures for minimizing arsenic-related health risks. Furthermore, continued research on the molecular mechanisms of arsenic-induced carcinogenesis and the development of early diagnostic tools will contribute to better prevention, detection, and management of arsenic-associated cancers. Overall, effective collaboration among researchers, healthcare professionals, policymakers, and environmental agencies is necessary to reduce the global burden of arsenic-induced cancer and protect public health.

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