

Glycolysis

- Glucose is the major energy substrate in certain tissues like brain

- Glycolysis occurs in the cell's cytosol.

- it takes place in all organisms both aerobic and anaerobic mostly!

- The intermediates either: ① Provide entry points to the cycle ② They are useful directly! (met. s.)

① Priming / Activation

- Phosphorylation goals: ② (Tricking the cell by changing the glucose form.) keep continuous influx! ③ Trapping the sugar inside the cell.

* Step 1: - Mediated by → Hexokinase

- transfer phosphate from ATP to (OH) at carbon # 6.
- target site for cell regulation → Allosteric enzymes Regulation.
- trap the glucose inside the cell.
- The receptor that maintains the glucose influx inside the cell is → GLUT
- irreversible → but there is specific enzyme found in specific tissues called Glucose-6-phosphatase → dephosphorylation.

Regarding the Enzyme used in Step 1 (Hexokinase)

Hexokinase → different versions / isoforms exist in the Heart, brain and liver. same gene but different expression!

Hexokinase I, II, III: - non specific - can phosphorylate variety of hexose like: ① glucose ② Mannose - etc

- type I → involved in the Catabolic pathways
- type II + III → involved in anabolic pathways
- all the time phosphorylation - allosterically inhibited

Hexokinase IV: - expressed in the liver and β-cells of pancreas.
- specific for D-glucose
- specific phosphorylation only when the blood glucose is high.

- mediated by → phosphoglucose isomerase
- mannose + Fructose → enters glycolytic pathway at this point!
- Reversible.

Bi → 2 but not close
Di → 2 close (beside each other)

- Goal? Destabilize the ring!
- mediated by → Phosphofructo Kinase (PFK-1)
- rate limiting step (key regulatory step) → slowest step that determines the speed of the reaction.
- Phosphorylation of (OH) at carbon # 1

- mediated by → Aldose
- cleavage into 2 triose phosphates at the bond between C3-C4.

Can't go further! → isomerization to GAP! (Step 5) by Triose phosphate isomerase.
Precursor for glycerol → used for the formation of triglycerol!!!

- Super High energy molecule (Storing)
- oxidative phosphorylation.
- by → Glyceraldehyde 3-phosphate dehydrogenase.
- Goal → making high energy molecule.
- electron donors / Reductants (↓ electrons)

Regarding Step 6: Nicotinoamide Adenine Dinucleotide (NAD)

- NAD → derivative? Vit B3 (Niacin)
- exist in 2 forms: NAD⁺ (oxidized form) - Coenzyme for dehydrogenases
NADH (Reduced form)
- Energy rich molecule!
indirect form of energy!

1 NADH = 2.5 ATP

only in aerobic conditions!

- First ATP forming reaction (Direct Energy) (Substrate level formation)
- by → Phosphoglycerate Kinase

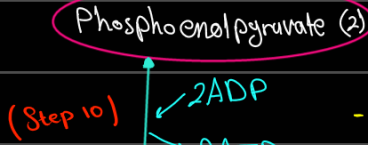
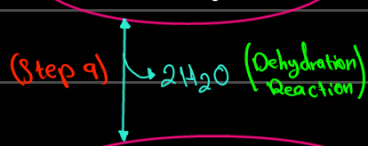
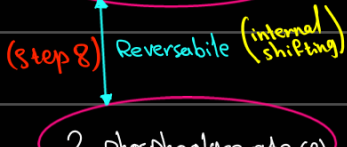
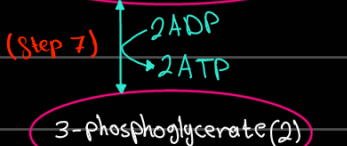
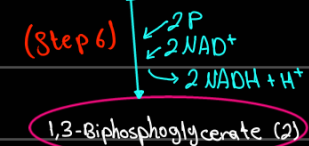
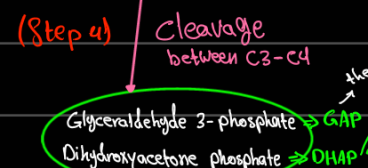
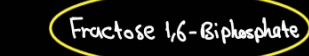
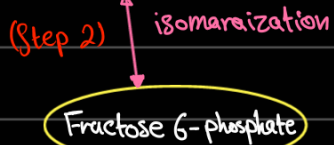
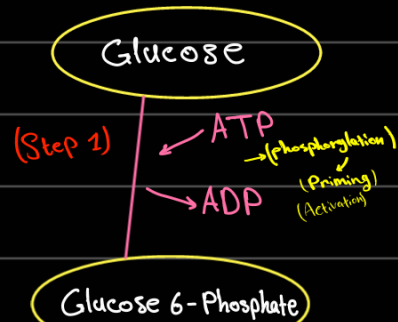
- Only terminal shifting → C3 to C2
- isomerization by: Phosphoglycerate mutase
- Activation of phosphate group

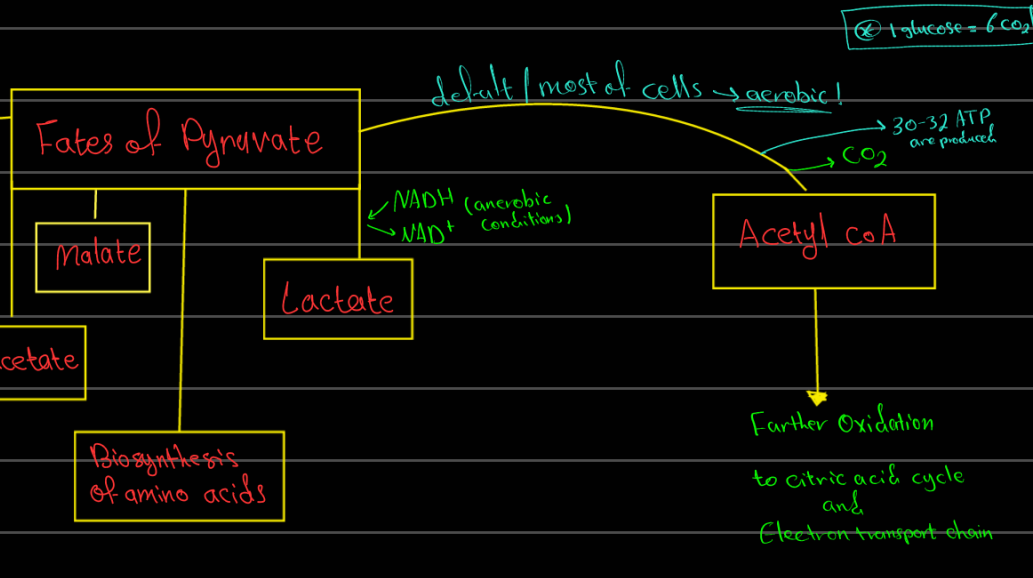
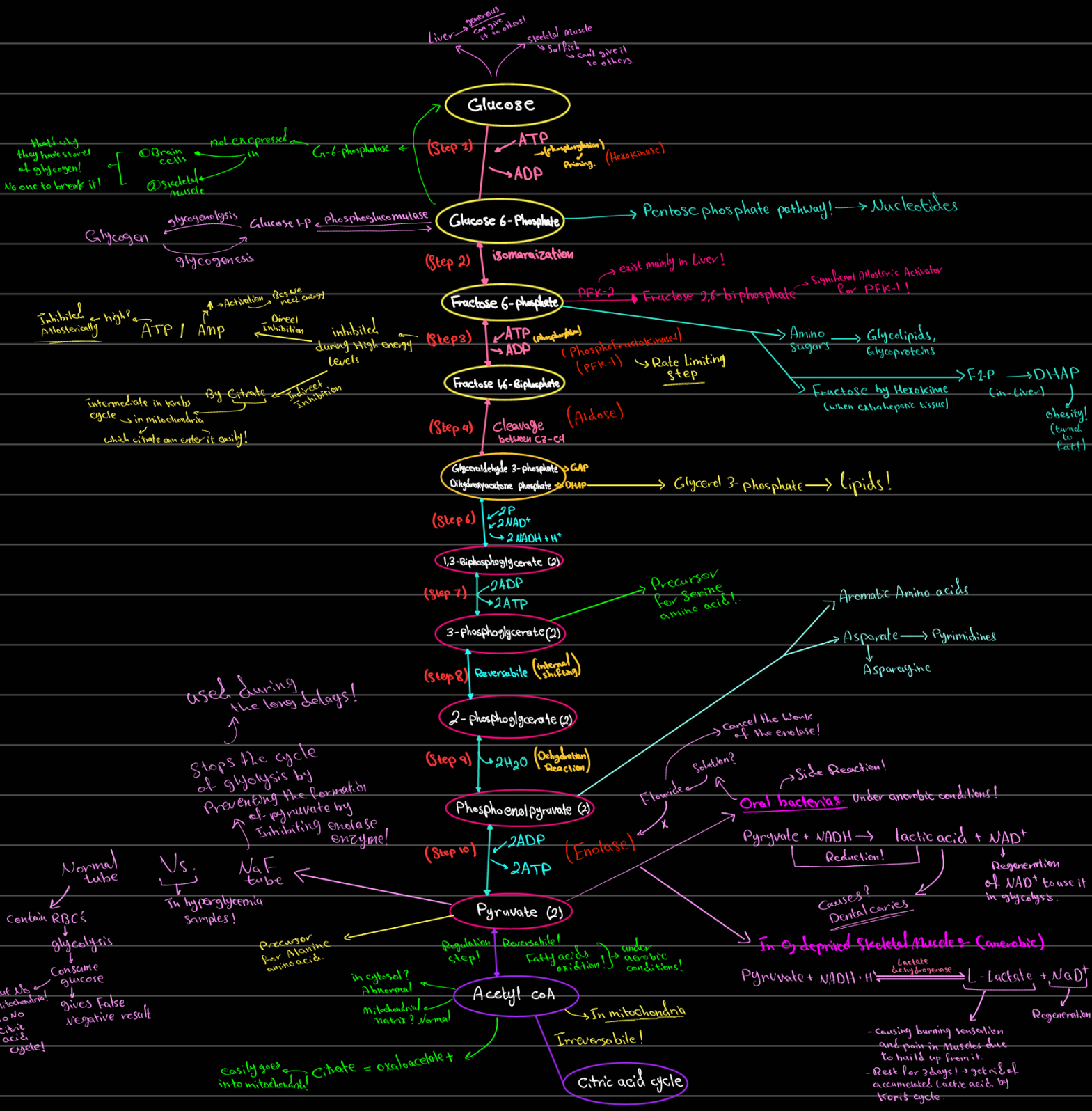
- 2nd super high energy molecule
- by → Enolase
- increase in the energy stored in phosphate.
- OH from Carbon # 3 is gone
- H from Carbon # 2 is gone
- Double bond between C3 + C2

- 2nd ATP is generated
- Substrate level formation by pyruvate kinase.

* Net result of Glycolysis

Step 7,10 - 2 ATP - 2 Pyruvate → End result
4 - 2 = 2
steps 1,3 - 2 NADH → step 6

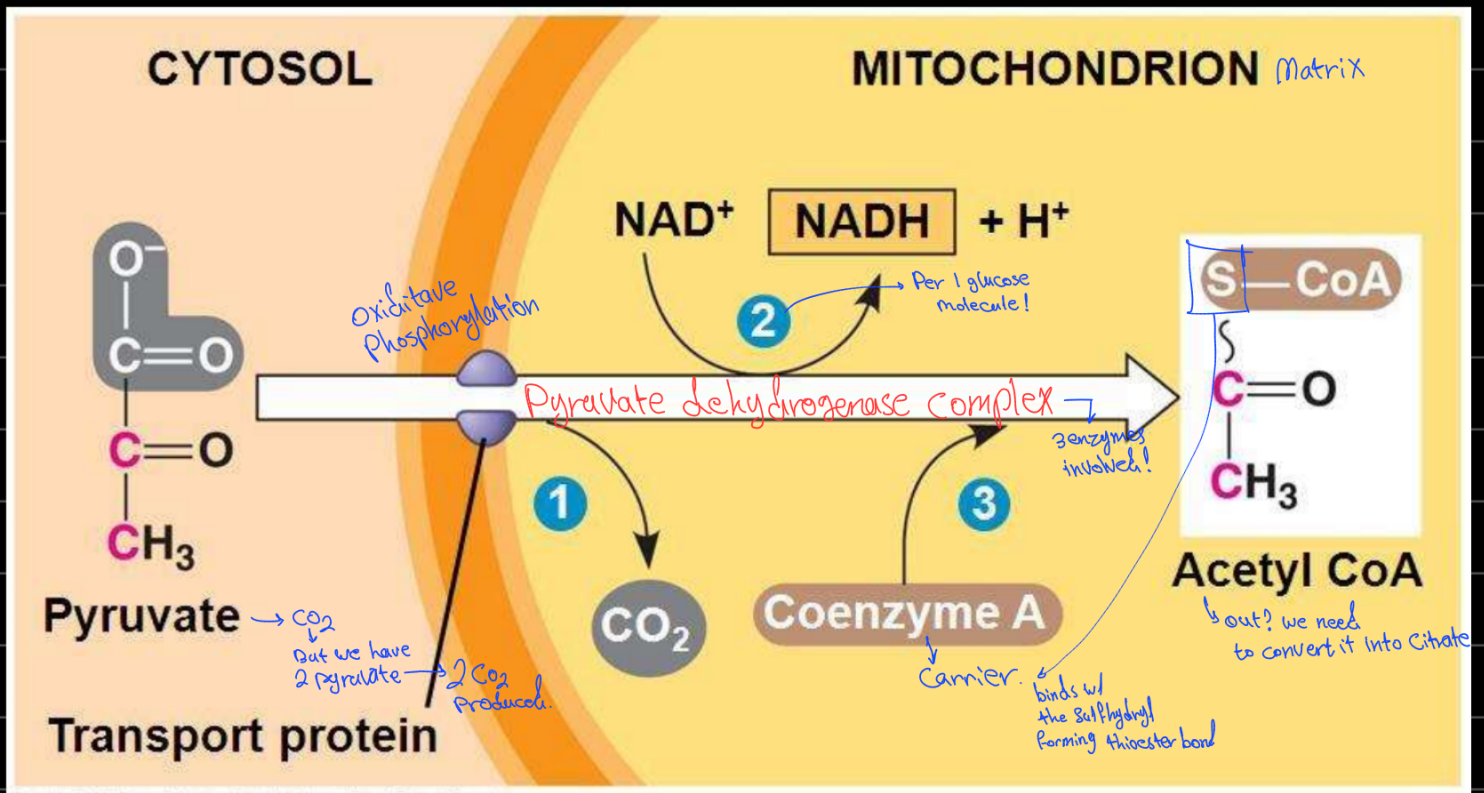




⊗ Milk → Yogurt → Lactic acid
 Fermentation reaction, the Lactic acid makes the milk curdle → which bacteria turns it into Yogurt!

Acetyl CoA Formation \Rightarrow in aerobic conditions!

- Occurs in the Mitochondrial matrix.
- Pyruvate (3C) \rightarrow acetyl CoA (2C)
- Shuttling of pyruvate from the cytosol is facilitated by Pyruvate translocase, exists in the inner mitochondrial membrane!



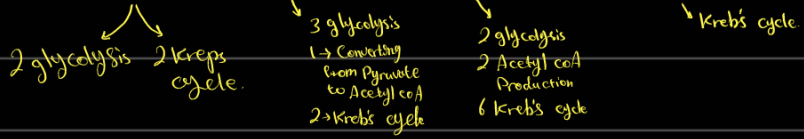
Pyruvate Dehydrogenase Complex:

E1 E2 E3

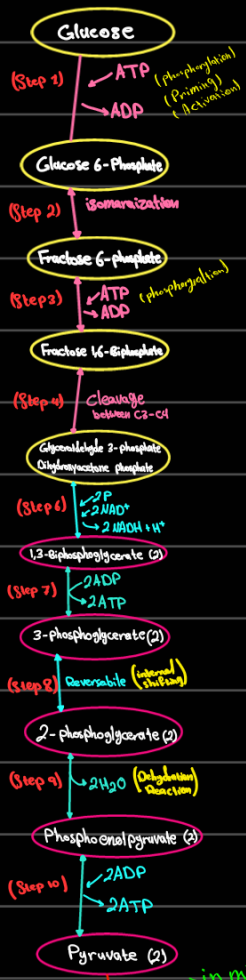
CoEnzymes:

- Thiamine pyrophosphate (TPP) a prosthetic group of E1
- Lipoic acid (lipoamide) a prosthetic group of E2
- Flavin adenine dinucleotide (FAD) a prosthetic group of E3
- Coenzyme A (CoA or CoA-SH)
- Nicotinamide adenine dinucleotide (NAD⁺)

At the End of Krebs's Cycle, the products are:



In Cytosol



Cytosolic NADH Shuttling ⇒ it can't go into the matrix, so where the e⁻ would go? by:

- ① **DHAP/G3P shuttle:**
 - is active in brain and skeletal muscle.
 - it delivers the 2e⁻ from cytosolic NADH to mitochondrial FAD.
 - Saves 1.5 ATP*
- ② **Aspartate / Malate Shuttle:**
 - is active in liver and heart.
 - it delivers the 2e⁻ from cytosolic NADH to mitochondrial NAD⁺, "by the membrane catching".
 - Saves 2.5 ATP*

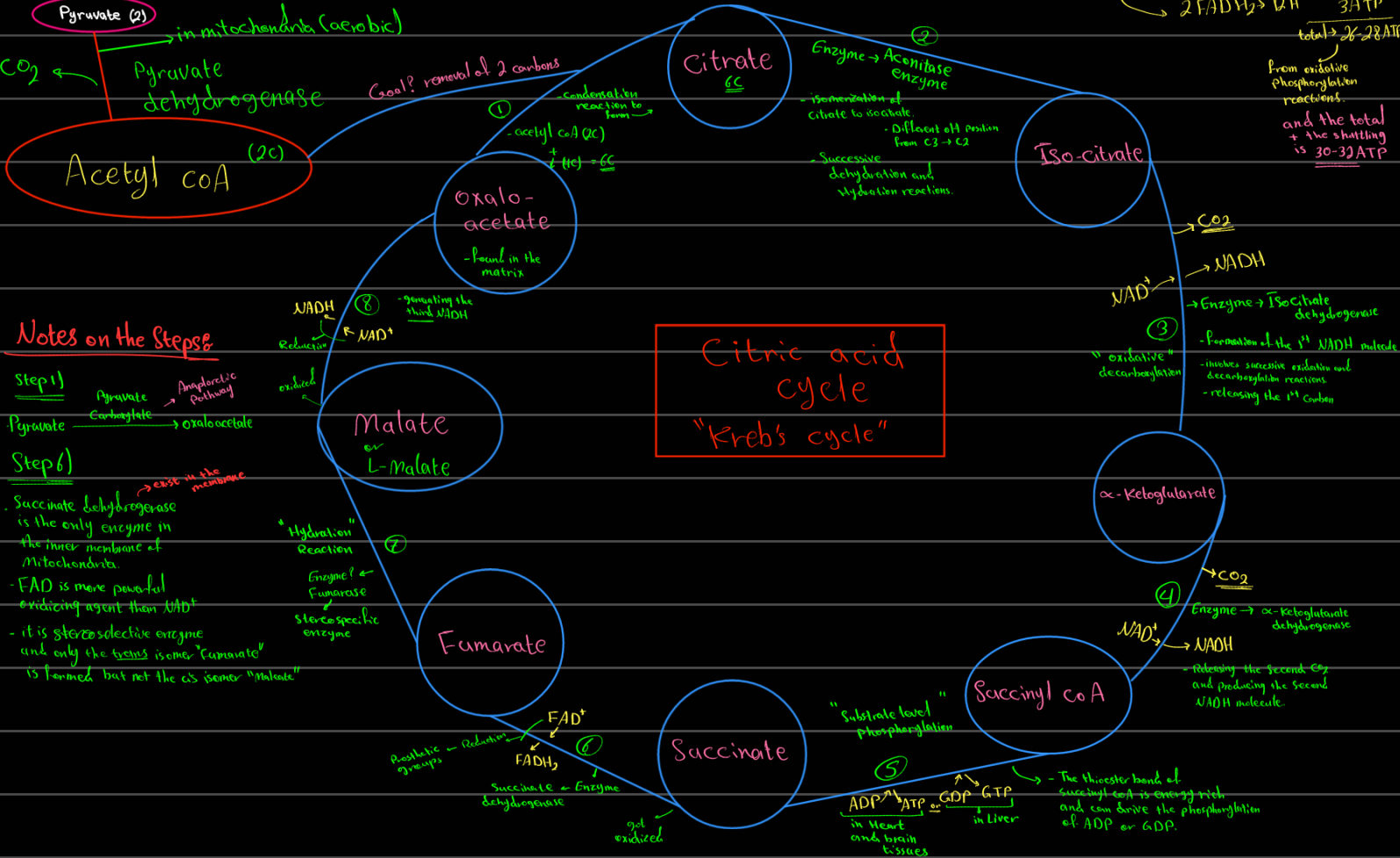
Biosynthetic Role of TCA intermediates:

- ① Succinyl CoA is used in synthesis of Heme and other porphyrins.
- ② Oxaloacetate is converted by transamination to the amino acid Aspartate. α-ketoglutarate " " " " glutamate. } Anaplerotic pathways.
- ③ Citrate in some tissues is transported to the cytosol where it is converted back to Acetyl CoA for fatty acids biosynthesis.

ATP count ⇒ 0 Glycolysis 12-20H⁺ pumped 3-5ATP

- ① Acetyl CoA Production → 20H⁺ " 5ATP
- ③ Krebs cycle → 6NADH → 60H⁺ 15ATP
- 2FADH₂ → 20H⁺ 3ATP
- total ⇒ 28ATP

From oxidative phosphorylation reactions and the total + the shuttling is 30-32ATP



Notes on the Steps:

- Step 1)** Pyruvate → Oxaloacetate (Anaplerotic pathway)
- Step 6)** Succinate dehydrogenase is the only enzyme in the inner membrane of Mitochondria.
- FAD is more powerful oxidizing agent than NAD⁺
 - it is stereoselective enzyme and only the trans isomer "Fumarate" is formed but not the cis isomer "Malate"

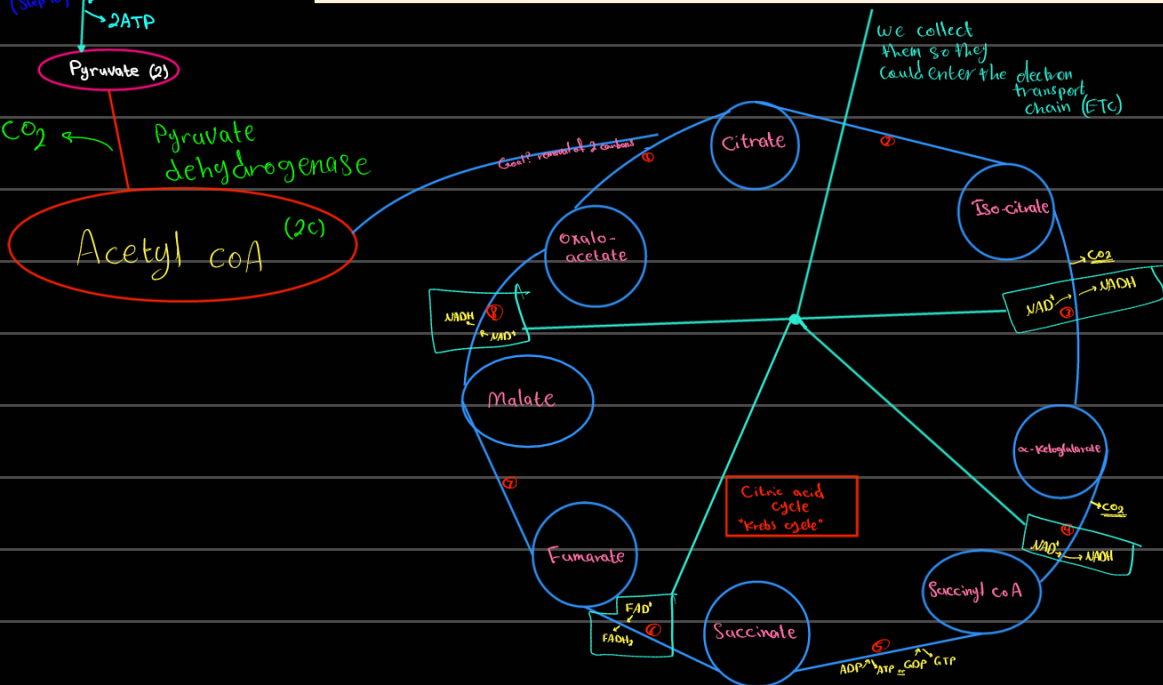
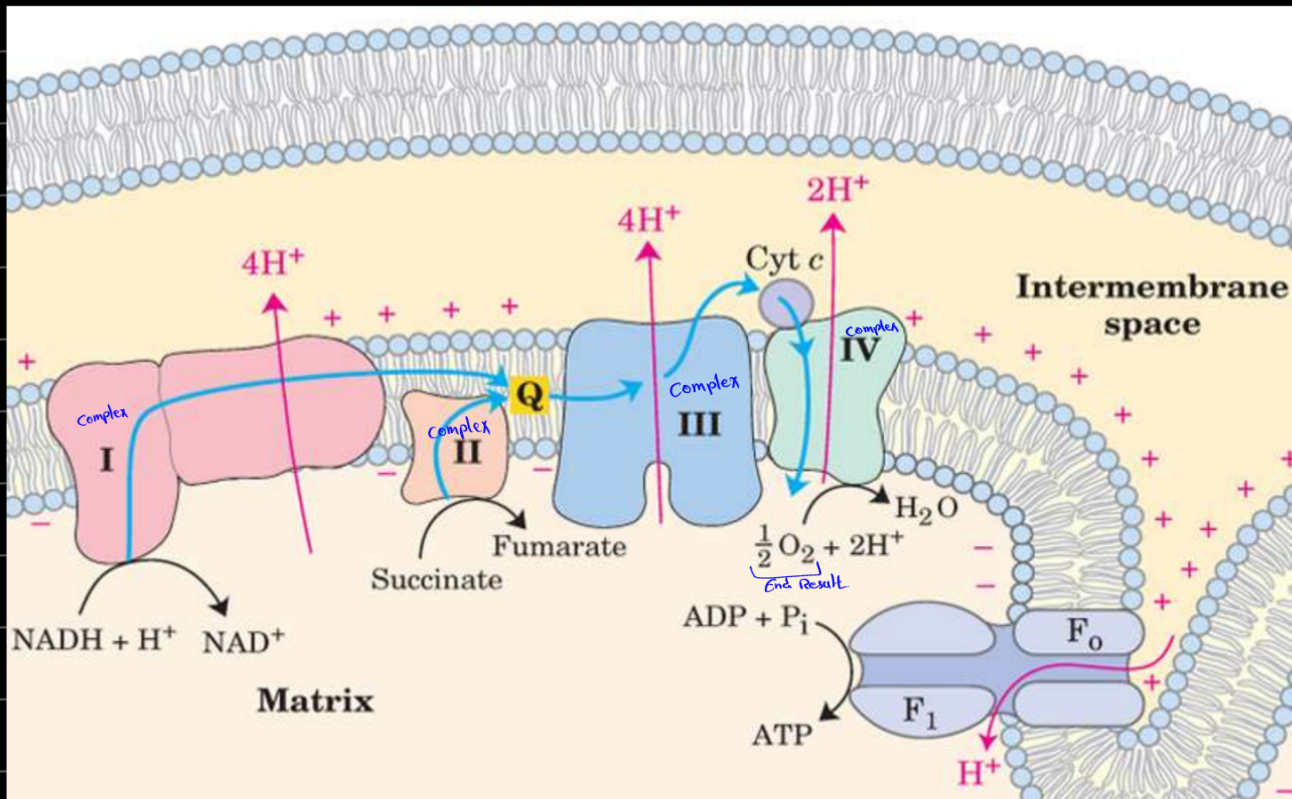
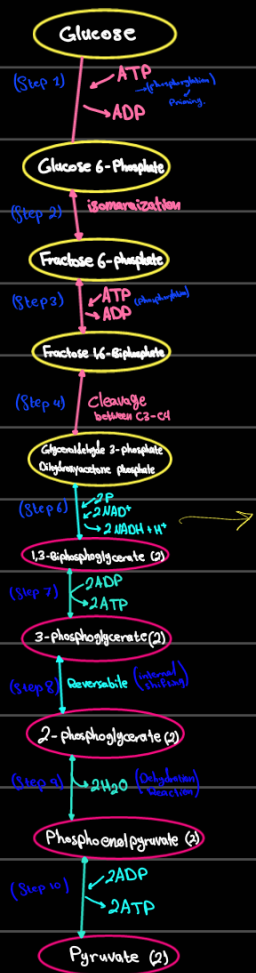
"Hydration" Reaction
 Enzyme → Fumarase
 stereospecific enzyme

Passive groups - Reduction
 Succinate → FAD⁺ → FADH₂ → Succinate

The Goal of the ETC is to pass the electrons From The FAD and NAD molecules to the inner mitochondrial membrane where there is 4 complexes that the electrons pass from 1st to the 4th complex. then the 4th complex gives the electrons to the O₂ forming H₂O.

Oxidative Phosphorylation: when FAD and NAD molecules loses their electrons in the chain, the free energy is lost too, so it got captured and stored by the production of ATP from ADP and inorganic phosphate. The remainder of the free energy which isn't trapped as ATP is released as heat.

Remember: NADH made in cytosol , it Can't get into mitochondrial matrix.

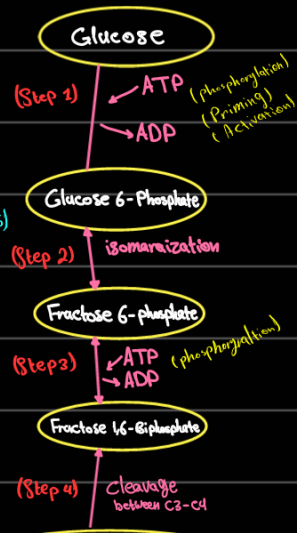


Metabolism of other sugars | Fructose

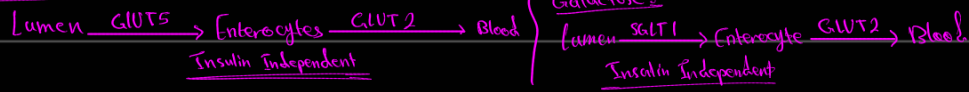
Abnormalities in Fructose Metabolism

- Essential fructosuria**: Deficiency of the hepatic fructokinase enzyme. (No treatment required) leads to incomplete metabolism of fructose in the liver excretion of the urine unchanged. Asymptomatic (benign condition).
- Hereditary fructose intolerance**: Deficiency of the aldolase B enzyme which results in accumulation of fructose-1-phosphate. (severe condition) Symptoms: vomiting, Abdominal pain, Hypoglycemia, Jaundice, Hemorrhage, Hepatomegaly and renal failure. Treatment: limiting fructose intake.
- IV infusion of fructose** would make the liver so busy by trapping the P_i and phosphorylation of fructose by fructokinase and it's lipogenic.

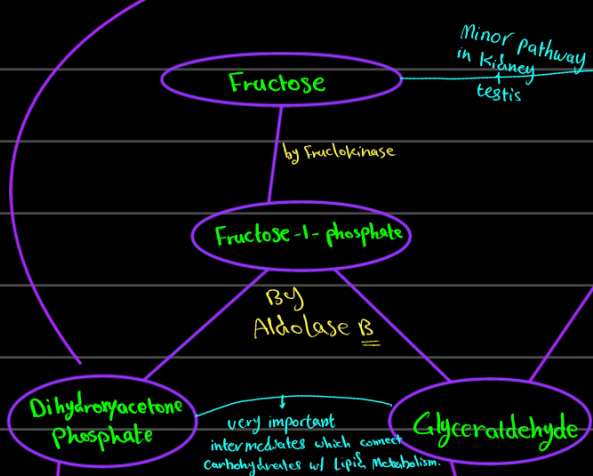
Dietary Fructose Intolerance also known as fructose malabsorption, due to impaired absorption of fructose from small intestine as a result of deficiency in fructose carriers (GLUT5).
Symptoms: ① Abdominal pain ② Cramps ③ Diarrhea ④ Bloating ⑤ Flatulence ⑥ Nausea.



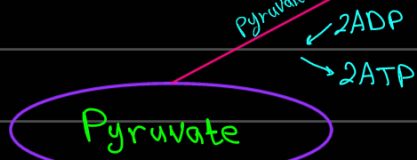
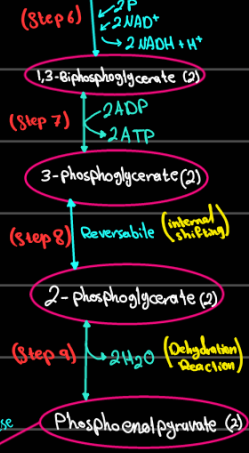
Fructose Absorption



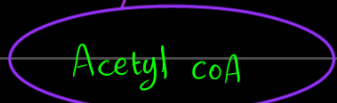
Triose phosphate Isomerase



Glyceraldehyde 3-phosphate
 - when it enter the glycolysis - it missed the 1st 2 controlling steps!
 on steps 1 + 2
 - So it only gets controlled on step 10!



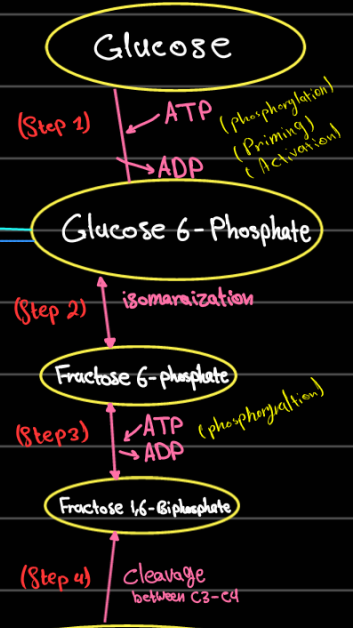
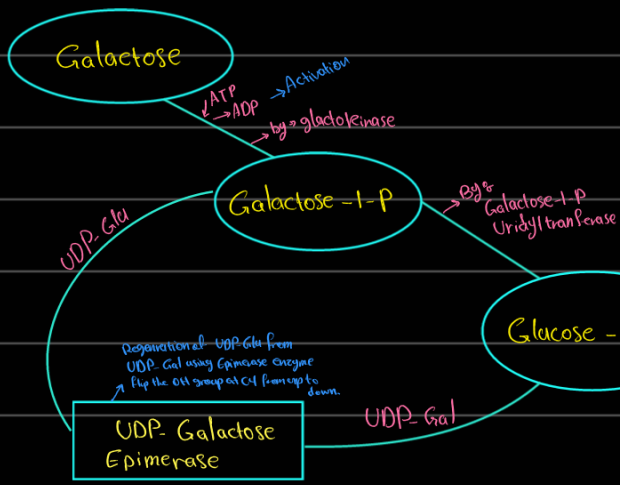
Major pathway in Liver
 No controlling
 Bad impact on the health!



Triglycerides (TAG)
 3 اساطير اكراتوز
 1 اساطير

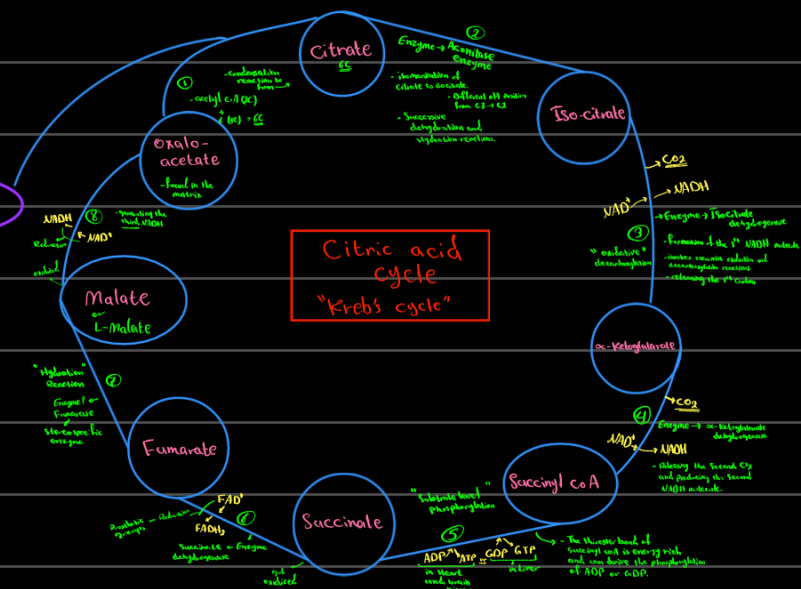
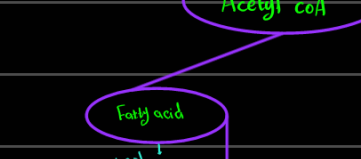
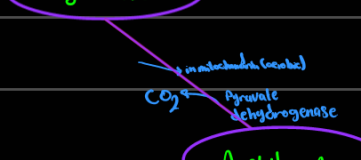
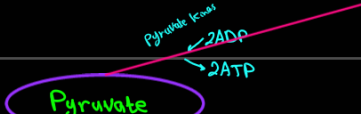
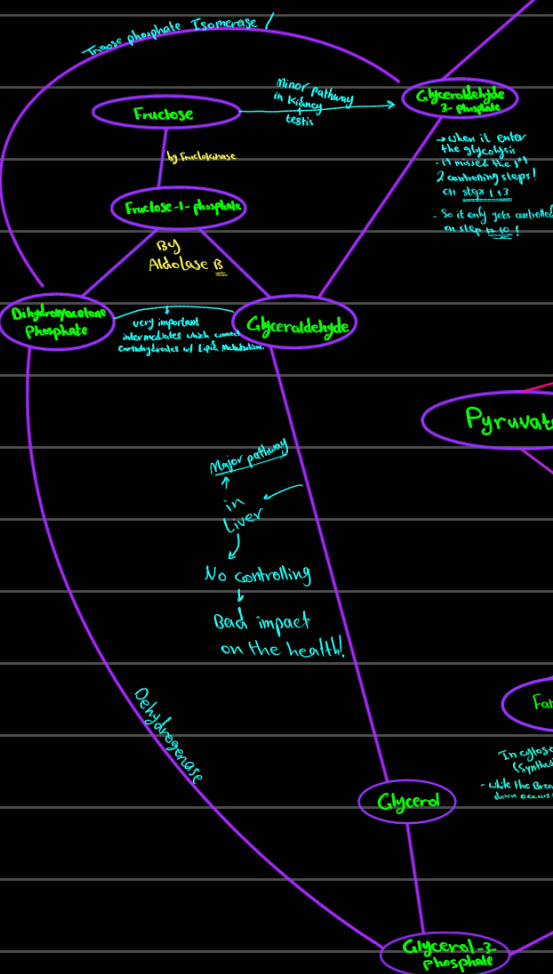
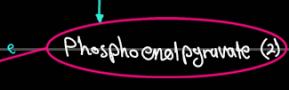
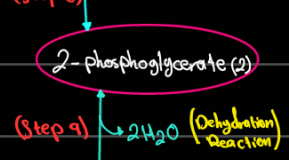
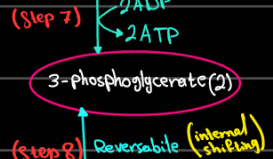
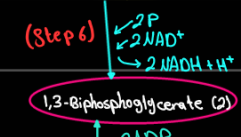
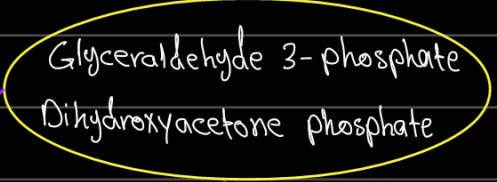
Dehydrogenase

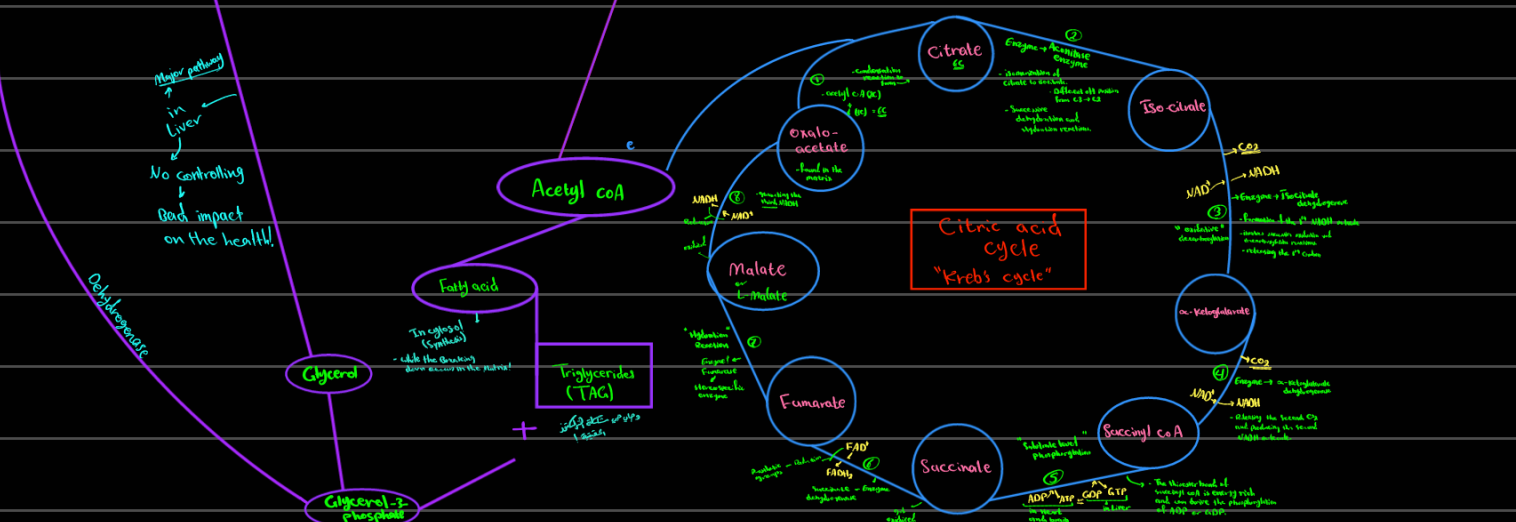
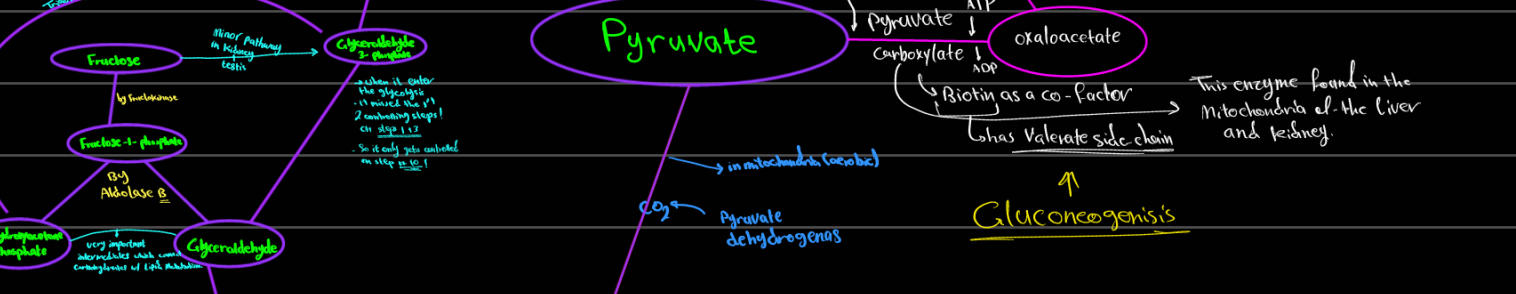
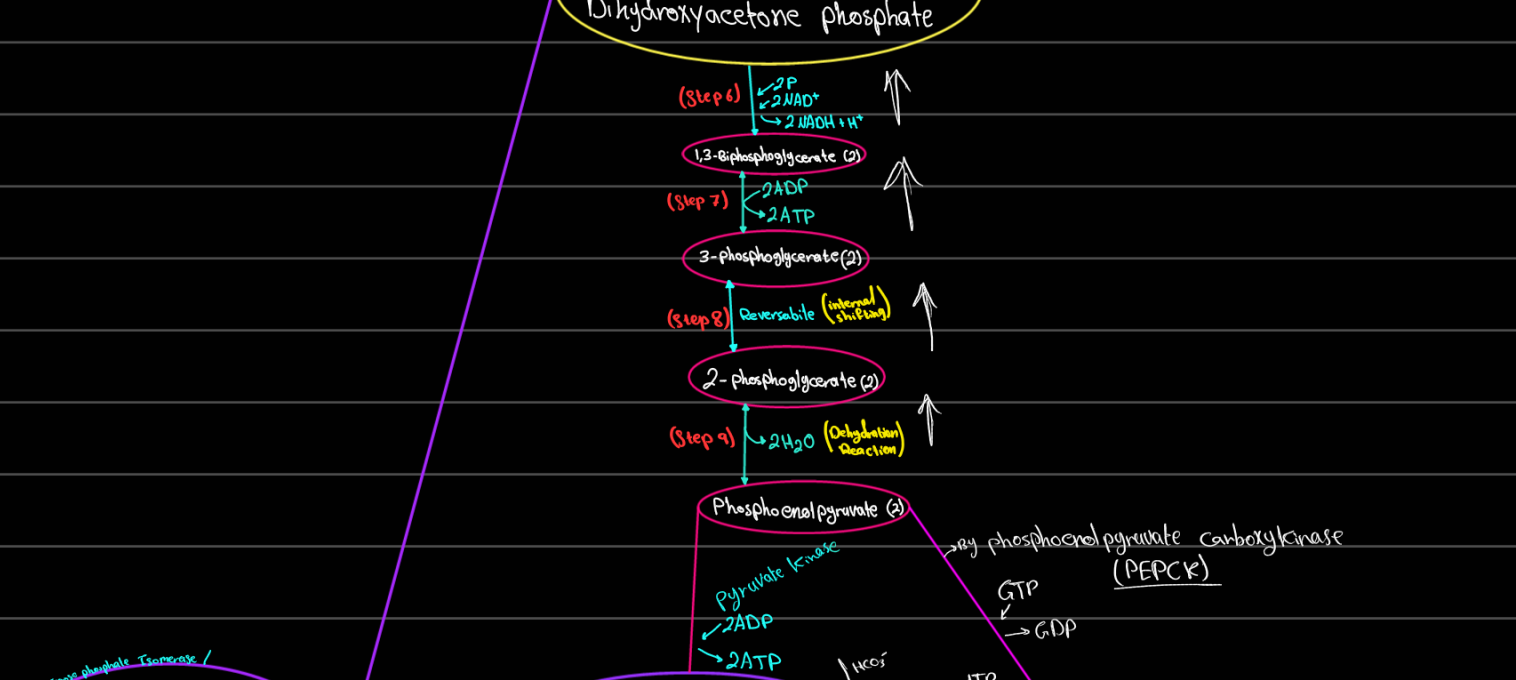




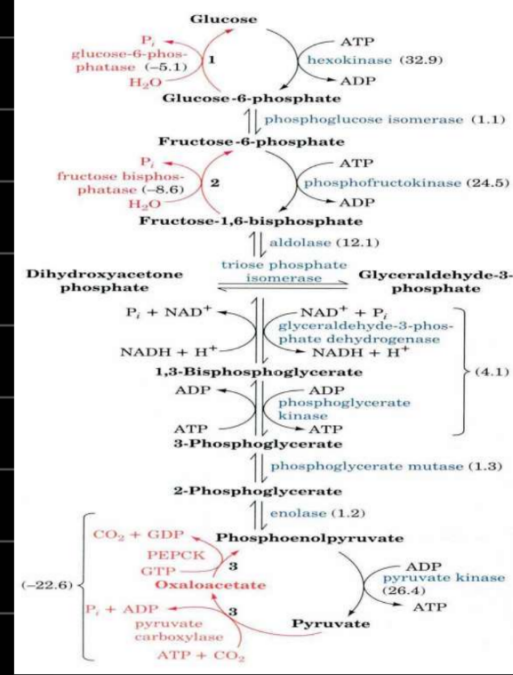
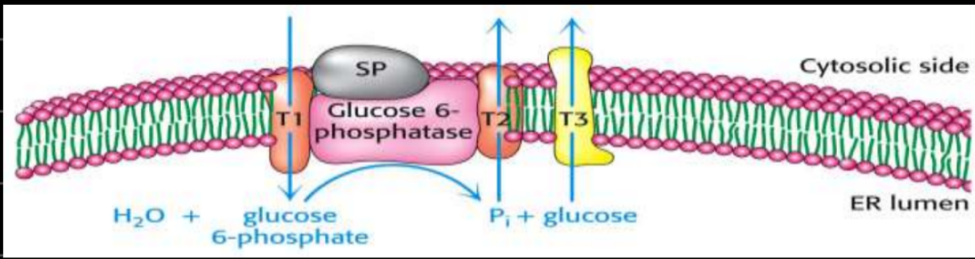
Galactosemia

Rare genetic disorder characterized by the inability to metabolize galactose due to deficiency of one of the three enzymes involved in galactose metabolism.





Generation of glucose from glucose-6-phosphate



Protein involved- SP-Ca binding proteins

$T_1 \Rightarrow$ transports G-6-P into the lumen of ER. $T_2 \Rightarrow$ transport P_i into the cytosol
 $T_3 \Rightarrow$ " " " " " "

-The overall reactions of gluconeogenesis are:
 $2 \text{ Pyruvate} + 2 \text{ NAD} + 4 \text{ H} + 4 \text{ ATP} + 2 \text{ GTP} + 6 \text{ H}_2\text{O}$

$\text{Glucose} + 2 \text{ NAD} + 4 \text{ ADP} + 2 \text{ GDP} + 4 \text{ P}_i$

Reciprocal Regulation by ATP/AMP

- AMP inhibits Fructose 1,6-Biphosphate but activates PFK-1
- ATP and citrate inhibits PFK-1 but activates Fructose 1,6-Biphosphate.
- High levels of ATP and Alanine, which signals that the energy charge is high and the building blocks are abundant, inhibits pyruvate Kinase
- Pyruvate carboxylase is activated by acetyl-CoA.
- ADP inhibits PEP Carboxylase and Pyruvate carboxylase.

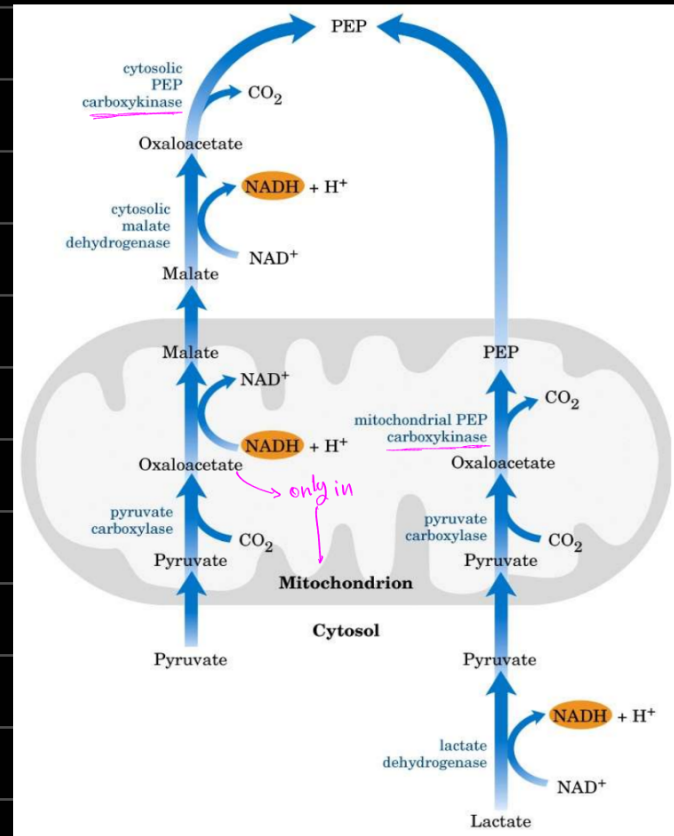
⊕ Gluconeogenesis is favored when the cell is rich in biosynthetic precursors and ATP.

Reciprocal Regulation by Fructose-2,6-Biphosphate

- Fructose 2,6-Biphosphate stimulate glycolysis by activating PFK-1 and inhibiting gluconeogenesis through the inhibition of Fructose 1,6-Biphosphate.
- During starvation, gluconeogenesis predominates because the level of Fructose-2,6-Biphosphate is low.

Insulin - Activates glycolysis (by activating PFK-1) and inhibits gluconeogenesis (By suppressing Fructose 1,6-Biphosphate).

Glucagon - Activates gluconeogenesis (By activating F-2,6-BP) and inhibits glycolysis (By suppressing PFK-1).



Acetyl-CoA regulates pyruvate carboxylase:

- The increase in Oxaloacetate Concent. \uparrow the activity of TCA cycle.
- Acetyl coA is an allosteric activator of pyruvate Carboxylase (Gluconeogenesis).
- ATP and NADH concentrations are increased \rightarrow Oxaloacetate goes into TCA cycle.

Allosteric activation by acetyl CoA

During starvation → excessive lipolysis → excessive oxidation of fatty acid into acetyl CoA
→ accumulation of acetyl CoA → activation of pyruvate carboxylase → activation of gluconeogenesis.

Substrate availability:

- The availability of gluconeogenic precursors like glucogenic amino acids → ↑ the hepatic gluconeogenesis.
- ↓ Insulin / glucagon ratio favor the mobilization of amino acids from muscle protein to provide their skeletons for gluconeogenesis.

Substrates for gluconeogenesis:

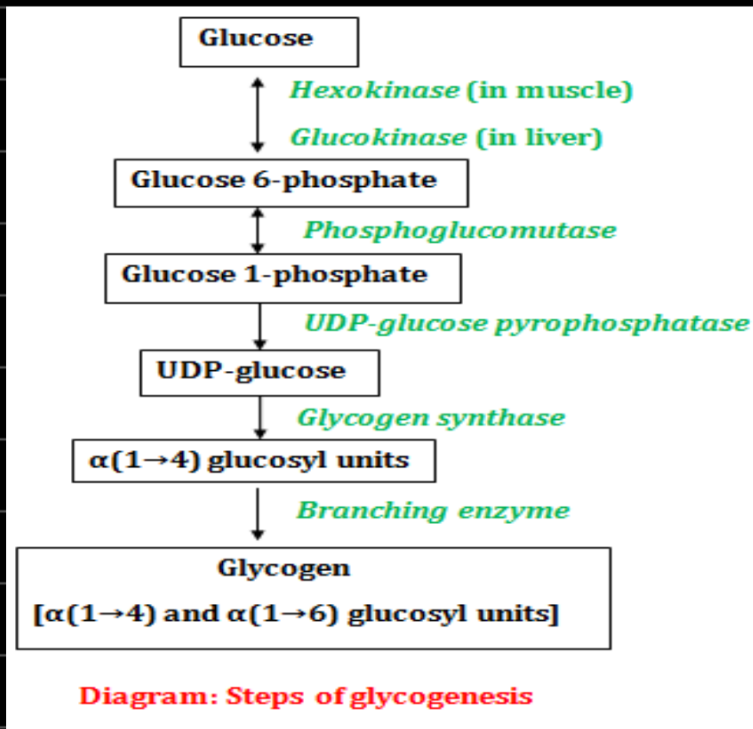
- Include all intermediates of glycolysis and TCA cycle, glycerol, lactate and the α -keto acids obtained from deamination of glucogenic A.A.s.
- **Glycerol**: obtained from the hydrolysis of the triglycerides in adipose tissue, travels to liver which is phosphorylated and metabolized.
 - DHAP is converted into glyceraldehyde 3-P by triose isomerase.
- Lactate: released from the RBC and exercising muscle, carried to the liver by the blood and converted to glucose and released again to blood through Cori cycle.
- Odd chain fatty acids: upon oxidation → propionyl CoA to be converted into succinyl CoA to join TCA cycle.
- α -keto acids: like pyruvate and α -ketoglutarate derived from amino acids alanine and glutamate. These substances enter TCA cycle to provide the oxaloacetate.
- All amino acids can feed into gluconeogenesis except leucine and lysine.

- Acetyl CoA cannot give rise to a net synthesis of glucose because of the irreversible nature of PDH that converts pyruvate to acetyl CoA.

- The Alanine cycle:

- The liver can also use the amino acid alanine similarly to lactate
- Following transamination to pyruvate, gluconeogenesis allows the liver to convert it to glucose for secretion into the blood

Glycogen metabolism:



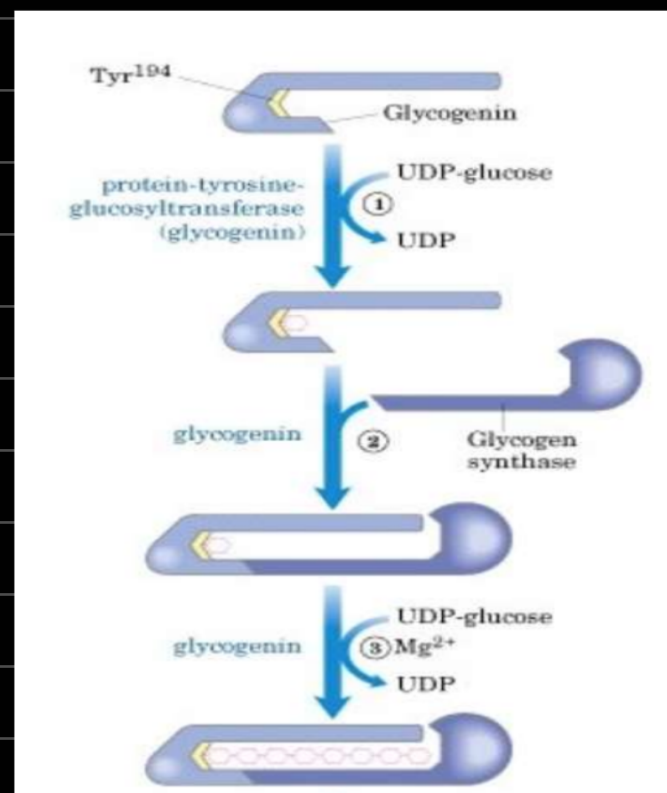
- Glycogen is mainly found in the skeletal muscle and the liver.
- Glycogen is synthesized when blood glucose level is high.

- GLUT4 is mainly found on adipose tissues, skeletal and cardiac muscles. it is insulin dependent!! so the insulin stimulate the synthesis of more GLUTs.

- GLUT 3 in neurons.

- GLUT 2 is bidirectional transporter expressed mainly in the liver and pancreatic B cells. and goes with Facilitated diffusion.

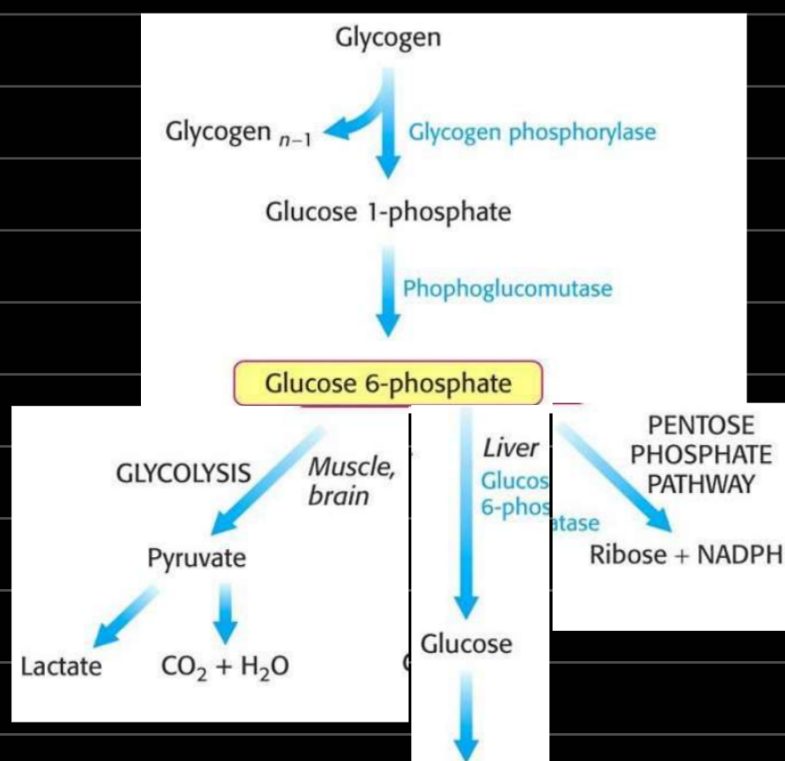
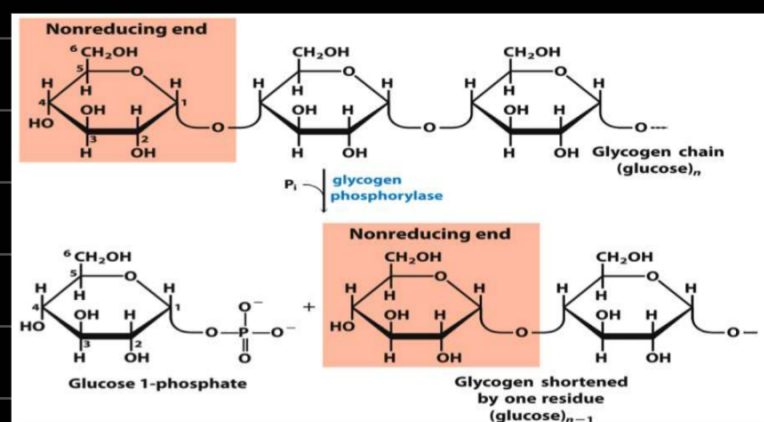
- The insulin hormone stimulate the Glycogenesis process



- **Step 1:** the first glucose is attached to tyrosine residue of a protein called glycogenin
- **Step 2:** glycogenin forms a tight complex with glycogen synthase
- **Step 3:** the chain is extended by sequential addition of up to 7 glucose residues autocatalyzed by glycogenin itself (α -1,4-glycosidic bond)
- **Step 4:** at this point, glycogen synthase dissociates and starts to extend the linear glycogen chain
- **Step 5:** the combined action of glycogen synthase and branching enzyme completes the glycogen particle
- **Step 6:** glycogen synthase dissociates from the newly synthesized glycogen molecule while the glycogenin remains covalently attached to reducing end

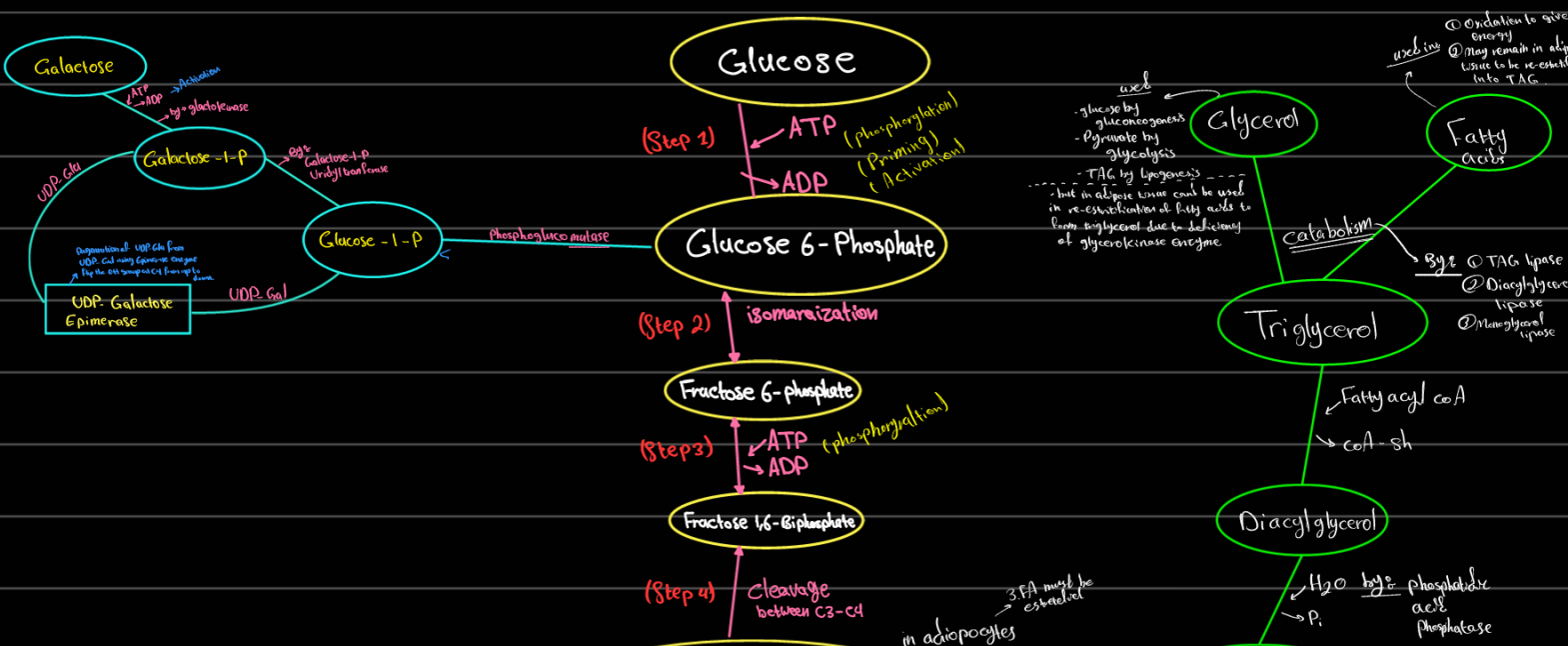
- Formation of branches:

the (α 1 \rightarrow 6) bonds found at the branch points of glycogen are formed by glycogen branching enzyme which catalyzes the transfer of small fragment (6-7 glucosyl residues) from the non-reducing end of a branch having at least eleven residues.

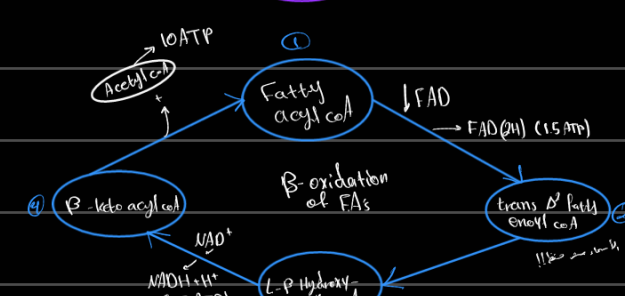
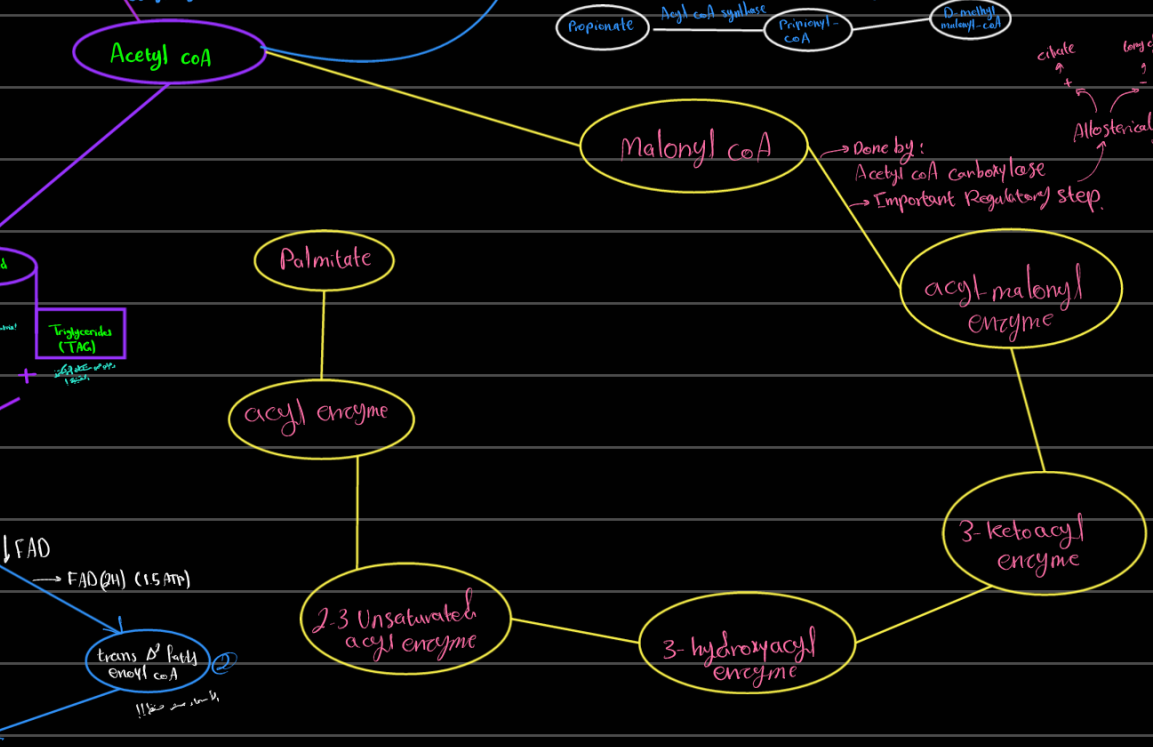
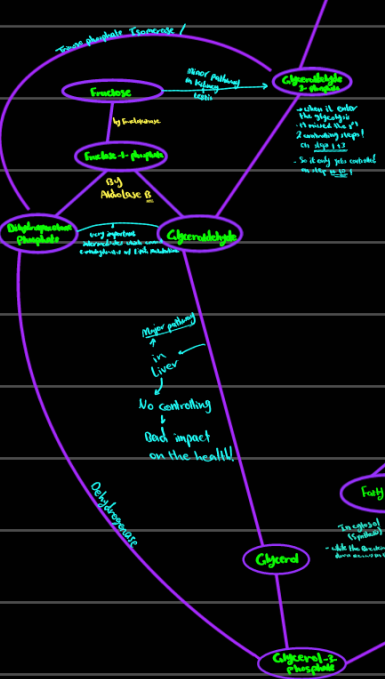
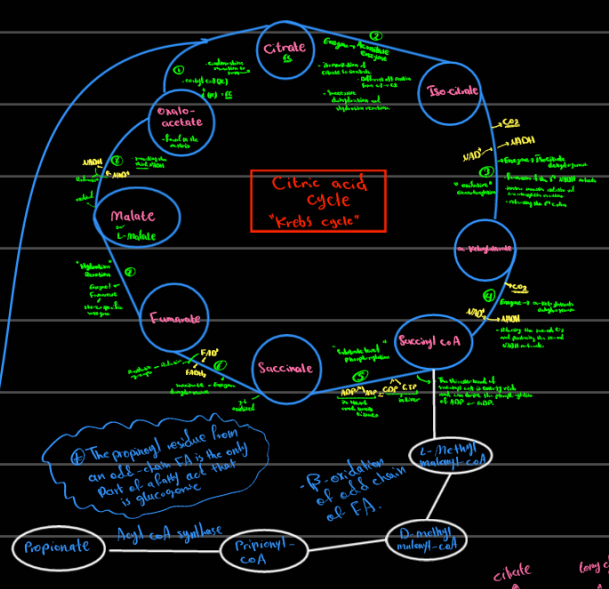
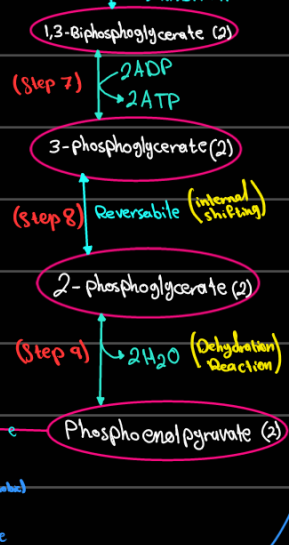


Glycolysis

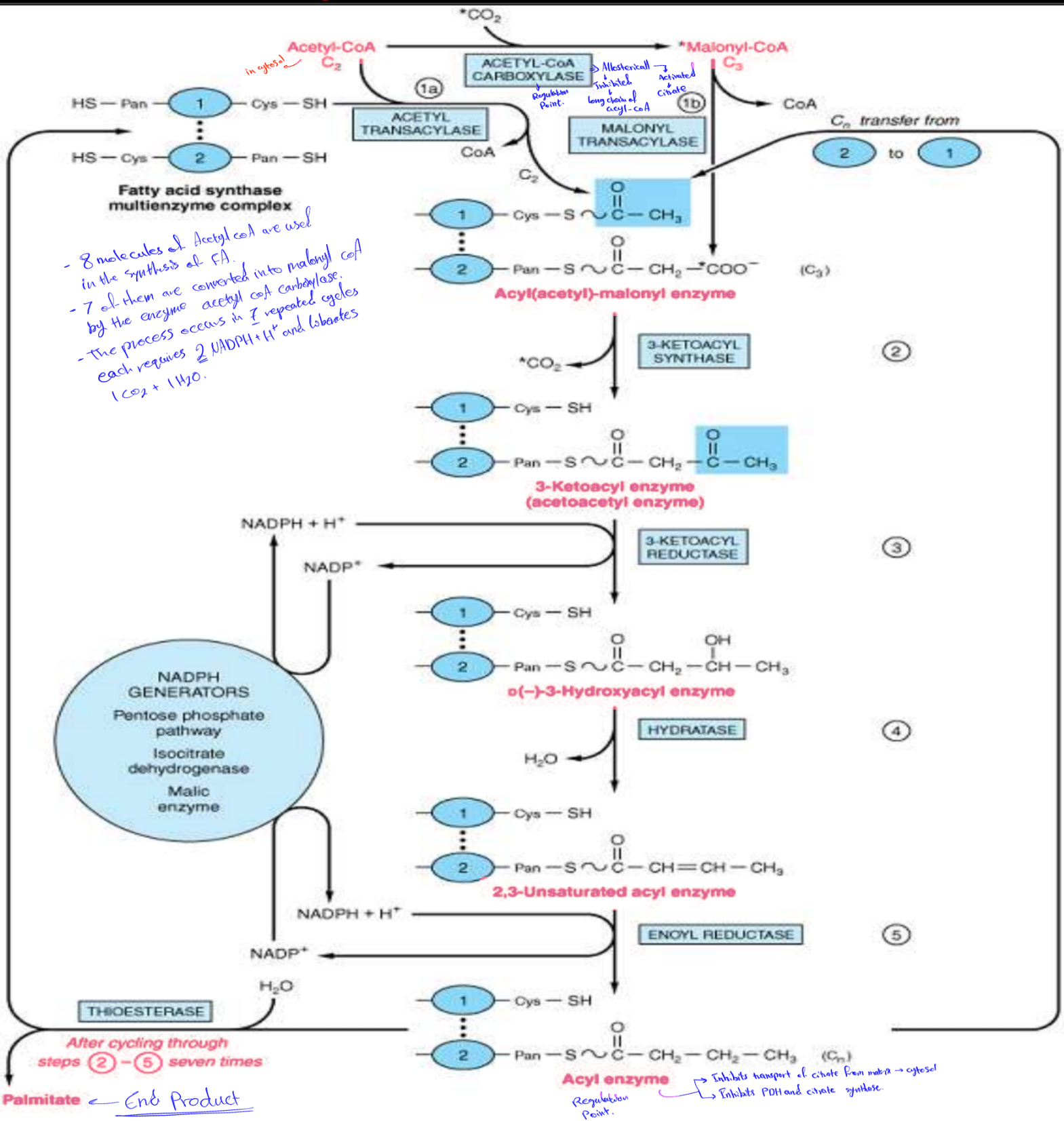
- the first step is to make the phosphorylase enzyme catalyzes the phosphorolysis step " the cleavage of the bond by the addition of inorganic phosphate".
- another enzyme; Debrancher enzyme then causes:
 - 1) Transferase activity: removes intact trisaccharide moiety (3 Glucose units) and transfer it to the end of some other branch.
 - 2) Second " the (α 1 \rightarrow 6) glucosidase activity": the enzyme removes the last glucose unit attached to the chain by (α 1 \rightarrow 6) glycosidic bond.
- The end result of this debranching process is the release of one glucose moiety each time.
- The end products of glycogenolysis are G1P (the major product) and glucose.



Glycerdehyde 3-phosphate ↔ **Dihydroxyacetone phosphate**
 - Abipocytes & Muscles lack glycerol kinase. Therefore DHAP is produced during glycolysis. Is a precursor for TAG synthesis in adipose tissues.
 - converted into glycerol-3-P (Insulin stimulates lipogenesis)



Fatty acid Synthesis



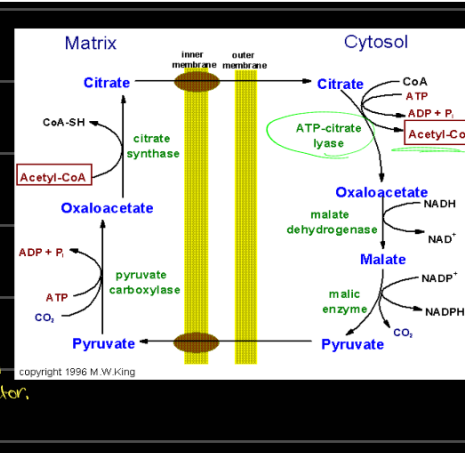
- Notes:**
- Acetyl CoA is always derived from glucose, never from FA. This is because Insulin alter animal drive lipogenesis not lipolysis from glucose.
 - NADPH + H⁺ is provided by:
 - Pentose phosphate pathway (Ribose-5-P)
 - Action of cytoplasmic isocitrate dehydrogenase on Isocitrate.
 - Action of malic enzyme on malate to produce pyruvate.
 - Every enzyme transfer Co₂ → requires Biotin as a co-factor.

Fate of palmitate:

- Esterification:** Palmitate esterified w/ glycerol to form acylglycerols or w/ cholesterol to form cholesterol esters.
- chain elongation:** Palmitate may be elongated to form longer FA.
- Destaturation:** synthesis of unsaturated FA. palmitate may undergo destaturation to form palmitoleic acid.
- Sphingosine formation:** it is formed by condensation of palmitoyl CoA and the amino acid serine.

Translocation of acetyl-CoA from matrix into cytosol occurs by:

- combining it w/ oxaloacetate and out from the matrix.
- Acetyl CoA may also pass through mitochondrial membrane into the cytosol in the form of acetyl carnitine by carnitine acetyl transferase, and Biotin as a co-factor.



Microsomal pathway for FA synthesis & main site for elongation for existing long chain, more than 16C.

(A) The elongated molecules are derived from -
① Palmitate: cytoplasmic pathway. ② FA of diet.

(B) The microsomal pathway needs malonyl CoA as acetyl donor and NADPH + H⁺ as coenzyme

(C) Function - This system becomes active during myelination of nerves in order to provide C22 and C24 FAs which are present in sphingolipids.

Synthesis Of Unsaturated Fatty Acids:

A. Nonessential unsaturated fatty acids:

1. These are fatty acids which contain one double bond e.g. palmitoleic acid (16:1) and oleic acid (18:1).
2. Synthesis of oleic acid (oleyl CoA) : It is synthesized - in the microsomes - from stearyl CoA (active stearic acid)

B. Essential fatty acid:

These are unsaturated fatty acids which contain more than one double bond.
Examples: linoleic acid and linolenic and arachidonic acid.

Functions:

- a- They are Important for normal growth.
- b- Synthesis of phospholipids
- c- Prevention of atherosclerosis: Essential fatty acids combine with cholesterol forming esters which are rapidly metabolized by the liver. This prevents precipitation of free cholesterol along the endothelium of blood vessels ~ prevents atherosclerosis.
- d- Synthesis of eicosanoid.

Regulation of lipolysis:

The key enzyme controlling lipolysis is Hormone sensitive triacylglycerol

lipase (HSL):

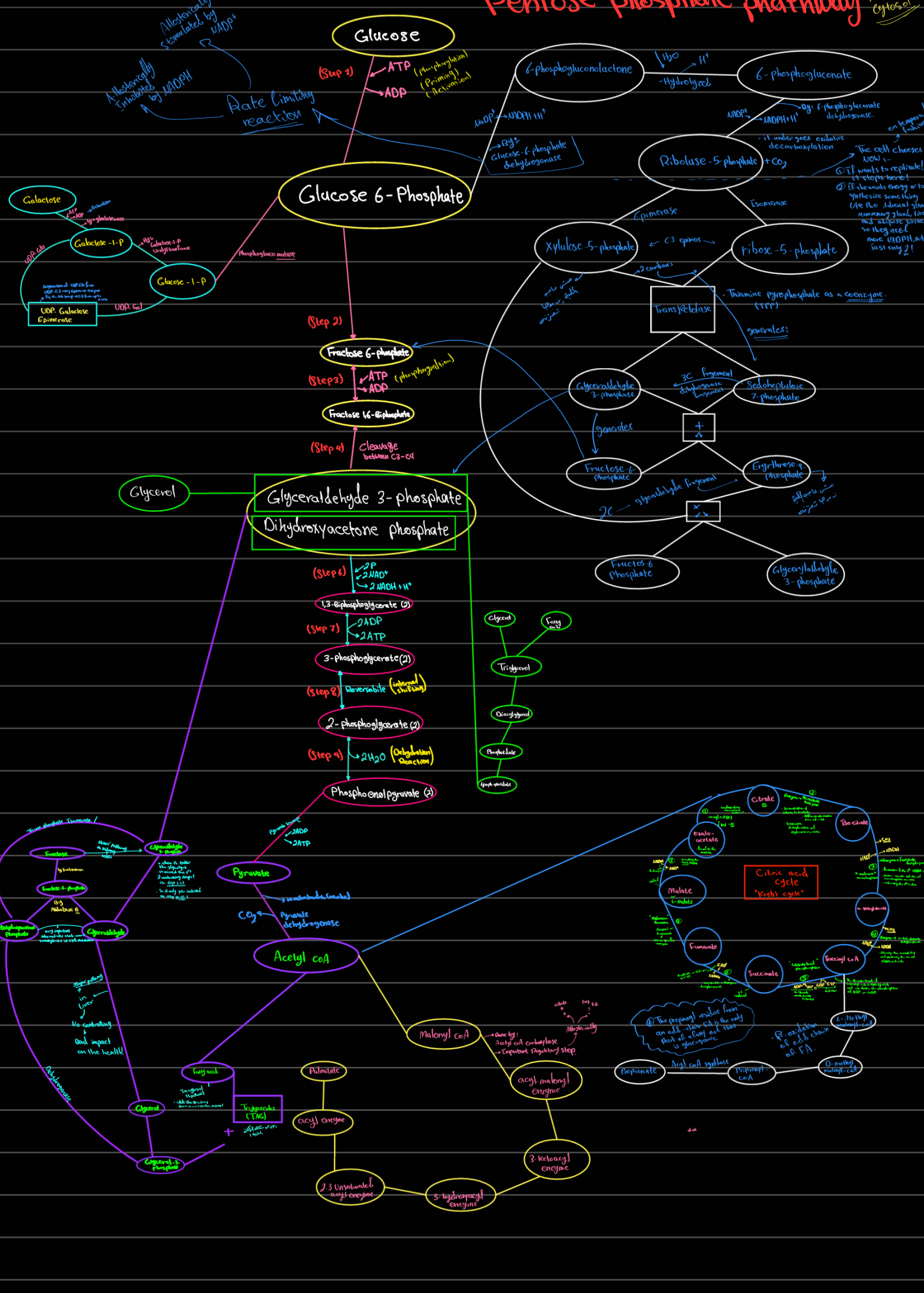
- This enzyme is activated when phosphorylated by 3' 5'-cyclic AMP dependent protein kinase.
- In the presence of high plasma level of insulin and glucose, HSL is dephosphorylated, and become inactive. So during fasting → stimulation of lipolysis.
- Coffee contains caffeine and tea contains theophylline. Both inhibit phosphodiesterase enzyme → stimulation of lipolysis.
- Causes of excessive lipolysis: where there is a need for energy; starvation, diabetes mellitus, low carbohydrate diet, and in certain infectious disease as in tuberculosis (due to high catabolic state).

Types of fatty acid oxidation

- Fatty acids can be oxidized by:
 - 1- **β-oxidation**- major mechanism, occurs in the mitochondrial matrix. 2-C units are released as acetyl CoA per cycle.
 - 2- **α-oxidation**- predominantly takes place in brain and liver, one carbon is lost in the form of CO₂ per cycle.
 - 3- **ω-oxidation**- minor mechanism, but becomes important in conditions of impaired β-oxidation
 - 4- **Peroxisomal oxidation**- mainly for the trimming of very long chain fatty acids.

The remaining of the Lecture are the Oxidations (some few details) and the last few slides.

Pentose phosphate pathway in the cytosol



G6P Dehydrogenase Deficiency:

- Also known as FAVISM

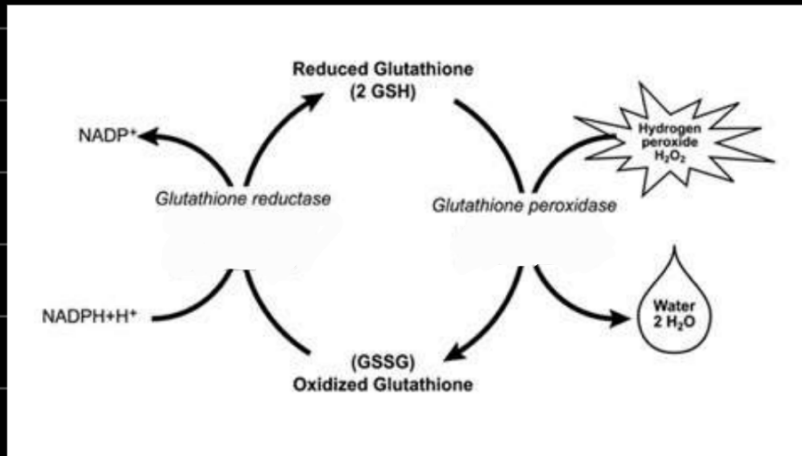
- it is X - Linked recessive genetic condition

- Inborn Error

- Congenital

- Inherited Disorder

- results in reduced intracellular NADPH level which participates in the glutathione cycle to protect cells against hydrogen peroxide.



- NADPH in RBCs is important to keep a high ratio of the reduced glutathione which is vital to protect cells from damaging effect of ROS (detoxification process)
- G6PD enzyme prevents oxidative damage
- G6PD deficiency is characterized by hemolytic anemia, especially in state of oxidative stress such as exposure to infection, some medications and certain foods (e.g. broad or fava beans).
- Oxidative stress is due to imbalance between the generation of ROS or free radicals (e.g. H₂O₂, .OH,...) and the removal by specific cellular enzymes (antioxidants) like glutathione peroxidase (enzyme abundant in cells).
- Oxidative stress depletes the reduced form of glutathione (GSH) and G6P dehydrogenase deficiency disorder can not supply enough NADPH to regenerate GSH from the oxidized one (GSSG) .
- Damaged RBCs are recycled to the spleen. The hemoglobin is metabolized to bilirubin causing jaundice in high concentration .

THE END

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