



Biochemical pathways regulating the Function of Sensory Organs

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Sensory Organs and Sensory Neurons



Vision >

Olfaction >

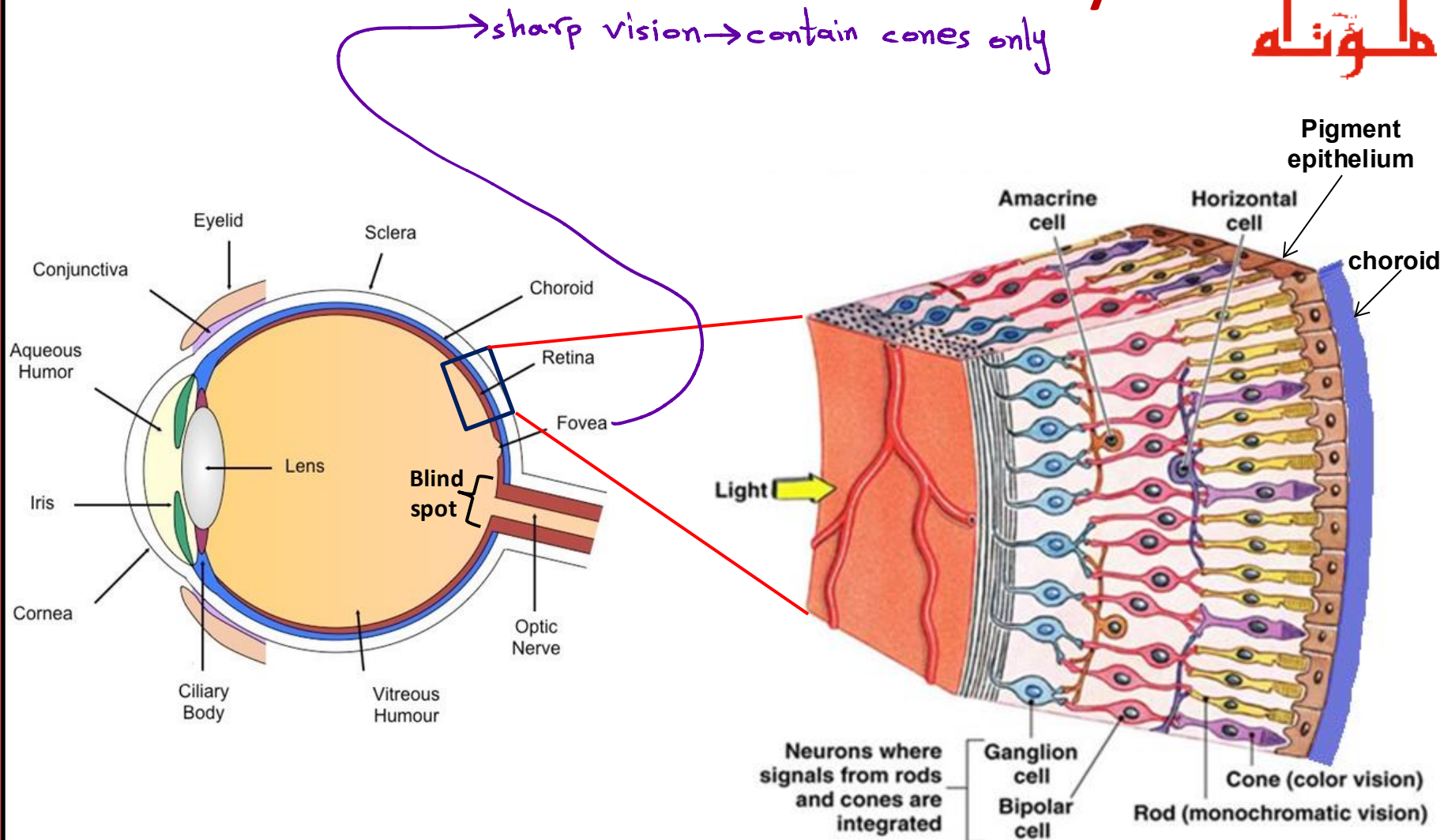
Taste >





Biochemistry of Vision

The Structure of Human Eye

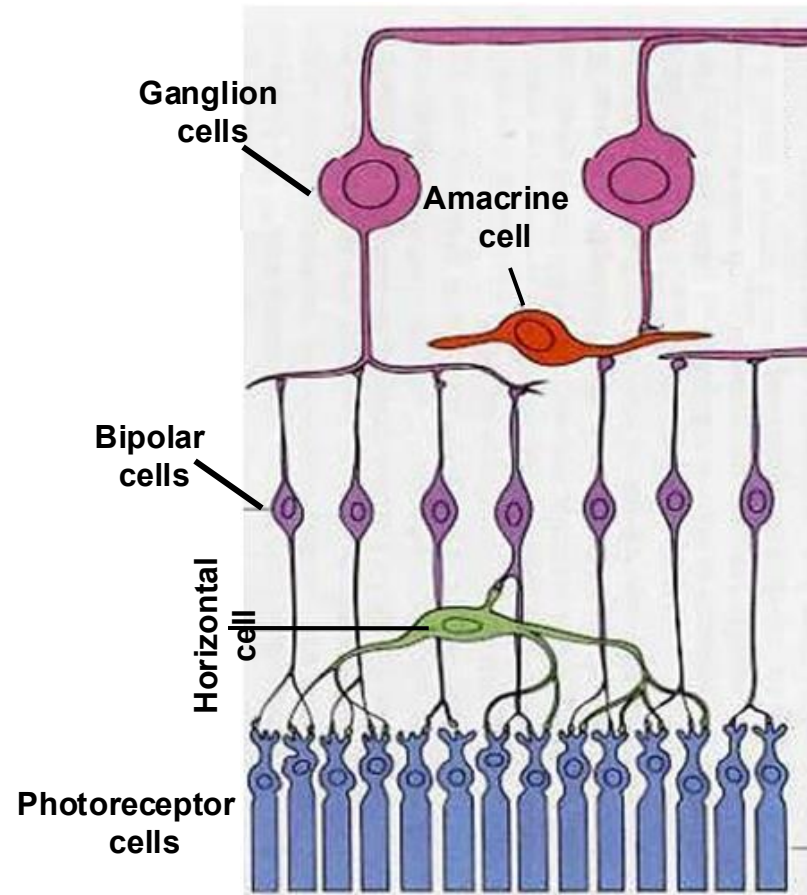


Ganglion cells axons containing visual input cluster and form optic nerve which will leave to skull through blind spot (optic disk)

The Structure of Retina



- The retina has **3 layers of neurons** (the photoreceptor, the bipolar and the ganglion cells) and **2 layers of synapses** including the unique ribbon synapses or lateral connection via the horizontal and amacrine cells
- Horizontal cells make synapses with rods, cones and bipolar cells whereas the amacrine cells connect bipolar with ganglion cells. **Thus horizontal and amacrine cells are involved in the indirect path of visual input transmission.**

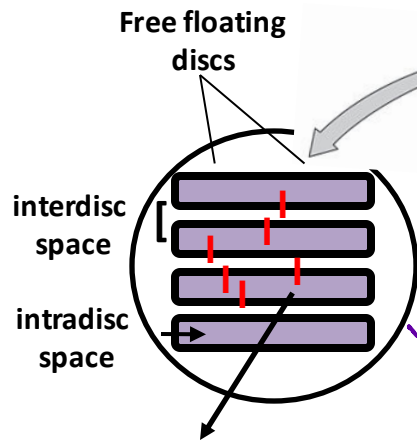
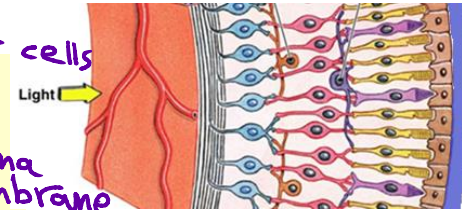


Photoreceptor cells



Retina contains two types of photoreceptors:

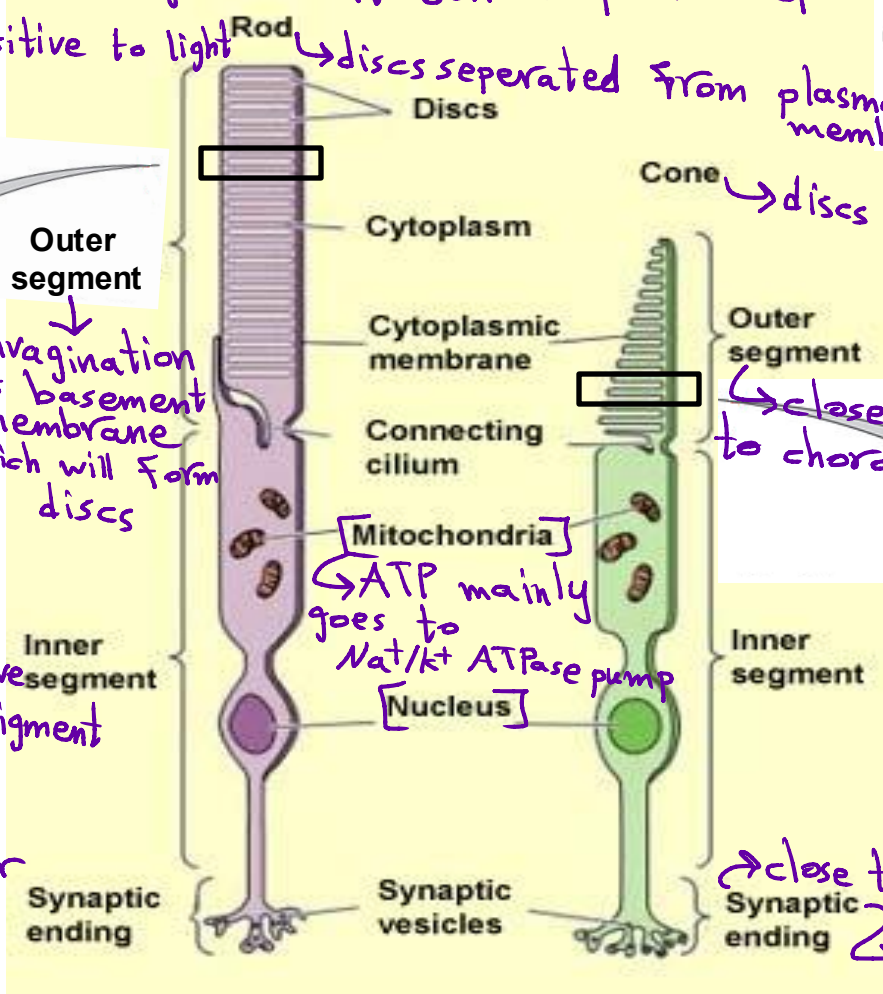
- ⊗ Retina sensitive to the light cuz it contain photoreceptor cells
- ⊗ photoreceptor cells sensitive to light cuz of outersegment



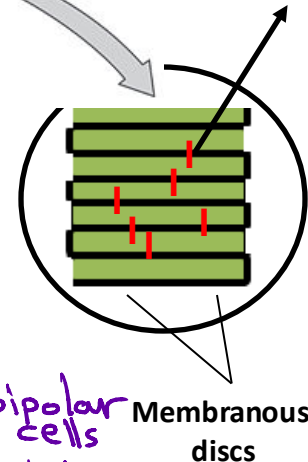
invagination of basement membrane which will form discs

⊗ outersegment sensitive to light cuz of visual pigment (photo)

⊗ rods and cones differ only in outersegment shape

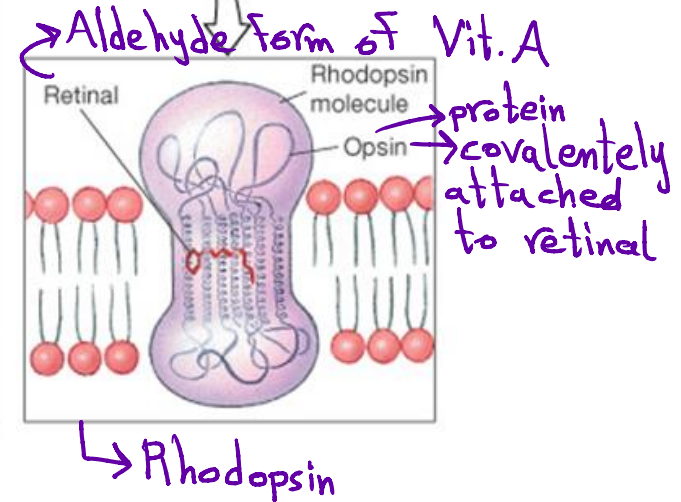
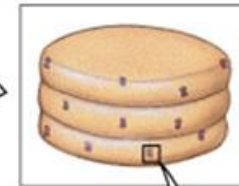
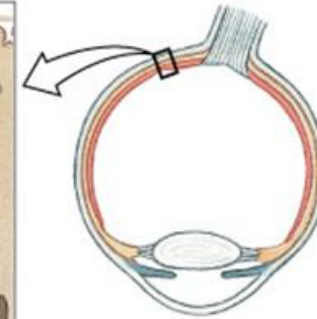
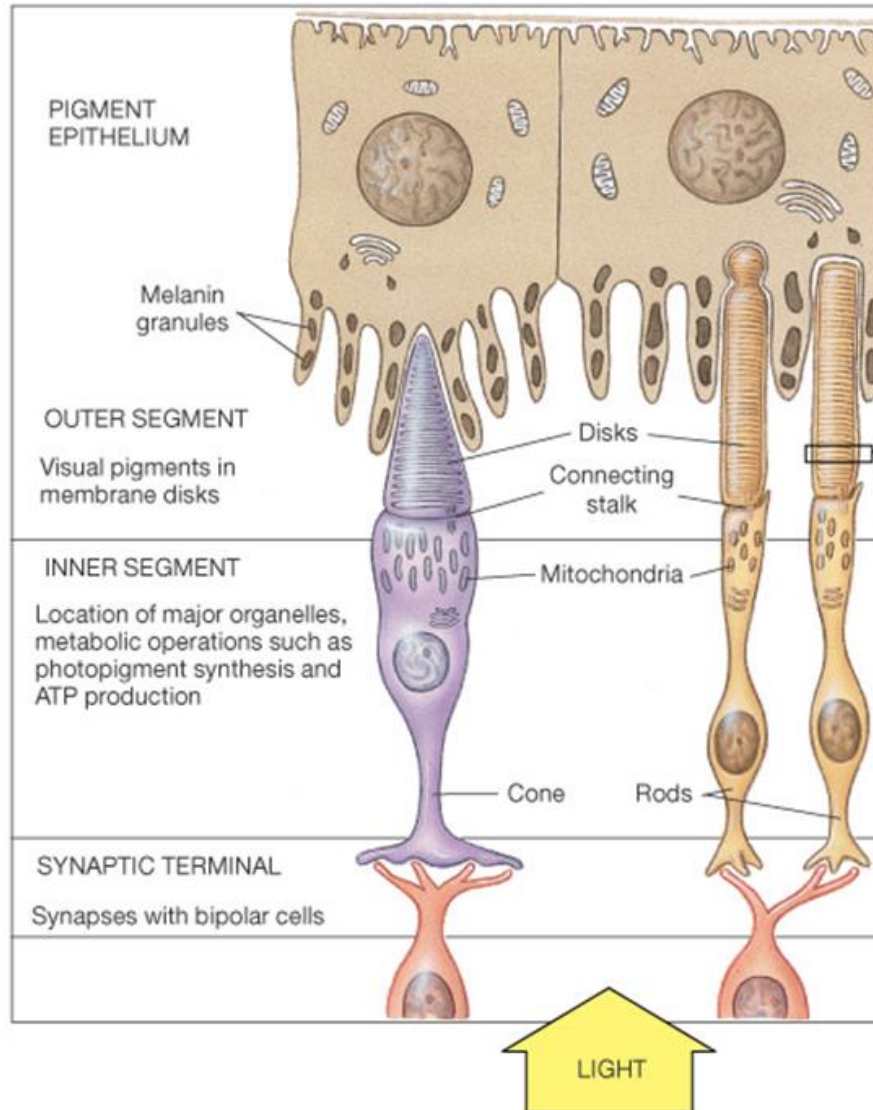


discs remain attached to plasma membrane
continuous invagination
close to choroid



close to bipolar cells
inhibitory

Visual Pigment



Structure of Rhodopsin



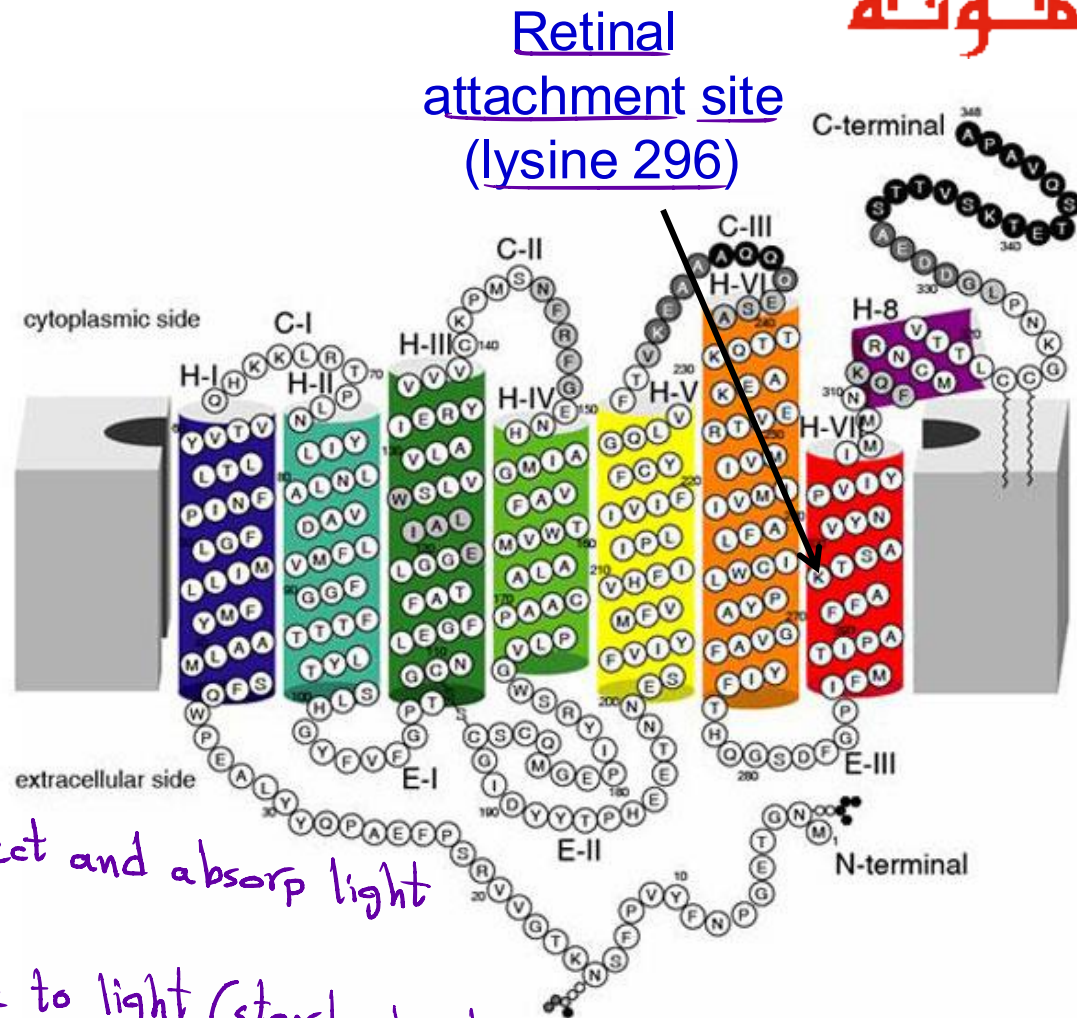
- Rhodopsin is the only visual pigment in rods → dim light
مشة ظلام داسع

- It consists of the transmembrane protein (GPCR) called **opsin** and light sensitive moiety called

retinal (the aldehyde form of Vitamin A)

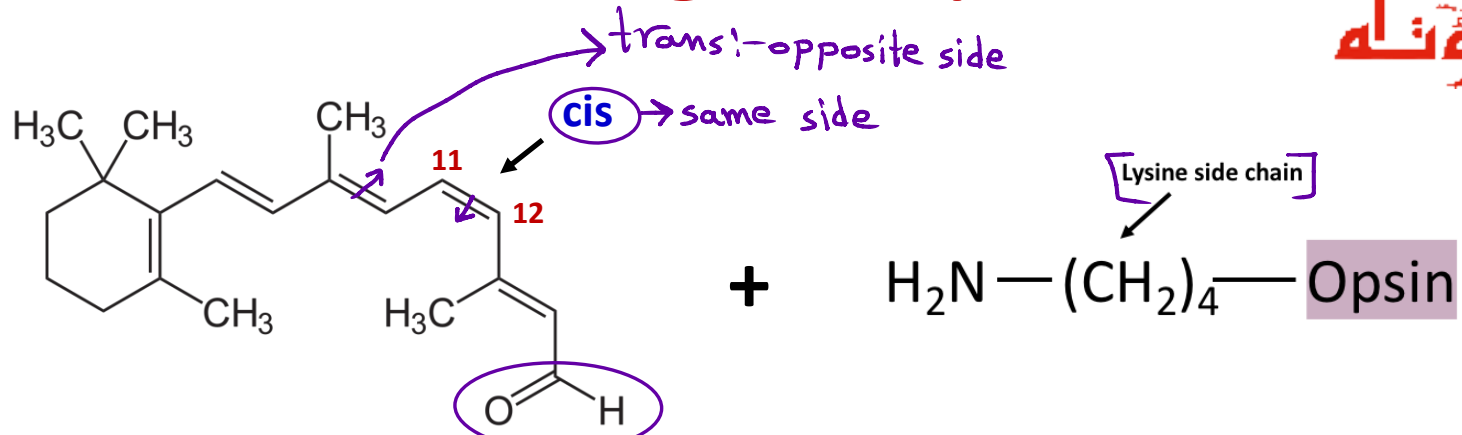
→ detect and absorb light

→ sensitive to light (start visual process through biochemical changes)



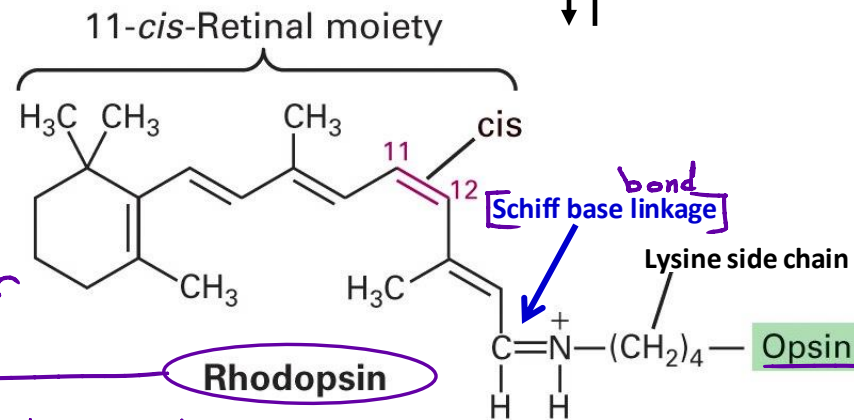
فيت. أ ← الجذر بقوي النظر

Retinal Binding to Opsin



retinal
↓
ligand

opsin
↓
receptor



$+\text{H}_2\text{O}$

→ G-protein coupled receptor protein with it's ligand rebound → and this ligand stimulated by light

Iodopsin

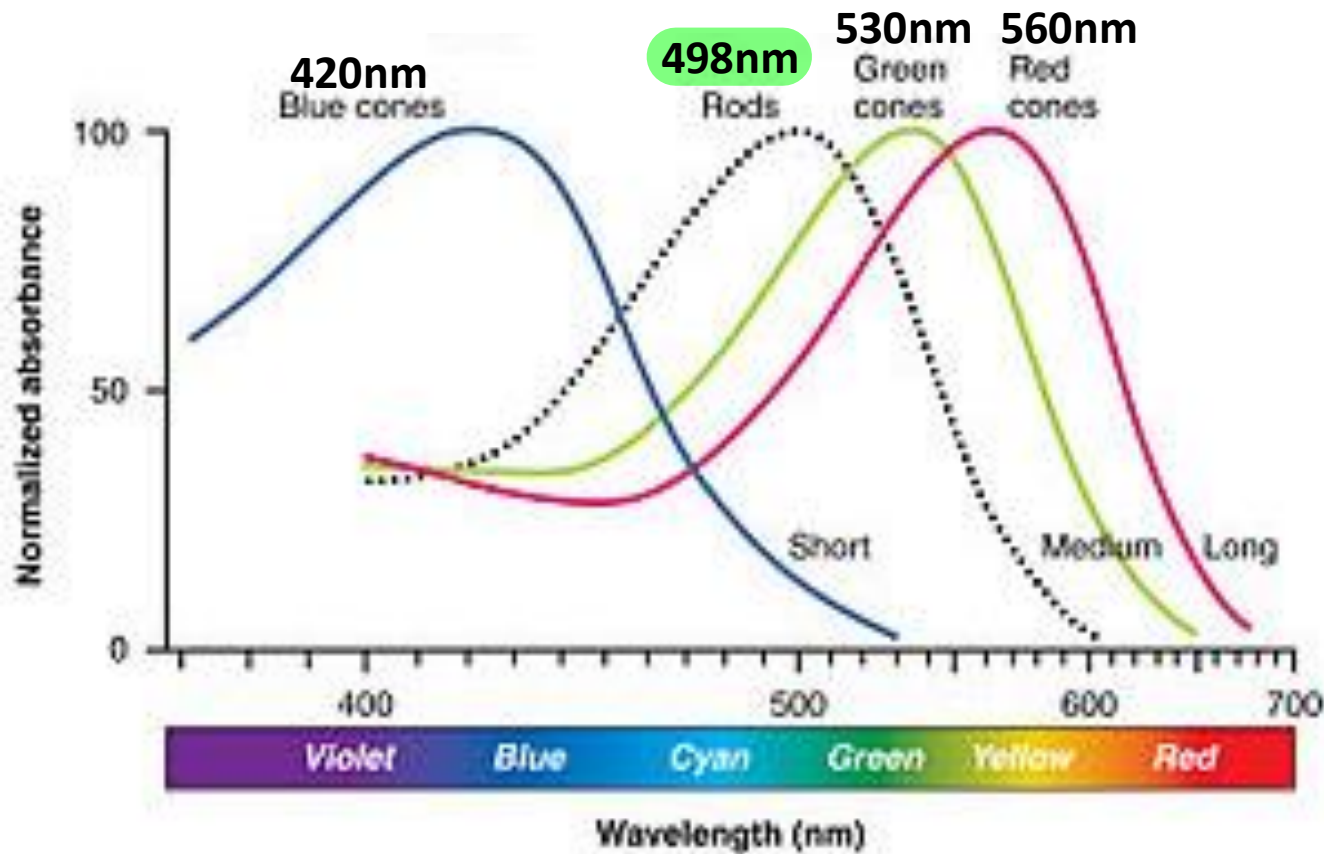


- Iodopsin is the visual pigment in cones ^{day light} consisting of cone opsin protein (photopsin) and the same light sensitive moiety: retinal
 - 3 different types of iodopsins and consequently 3 different types of cone cells (which give us color vision):
 1. L cones (photopsin I + retinal) → red light, 560nm ^{long wave}
 2. M cones (photopsin II + retinal) → green light, 530nm ^{medium wave}
 3. S cones (photopsin III + retinal) → blue light, 420nm ^{short wave}
- differ in few amino acids → detect light in different wave lengths

عملية النظر تحتاج إلى الضوء لتحدث
لـ في حال كنت في غرفة مغلقة بلا أي
مصدر للضوء لن ترى أبداً

الرقام هاهي مش حفظ

3 Different Cones



(400-700) → eye can see

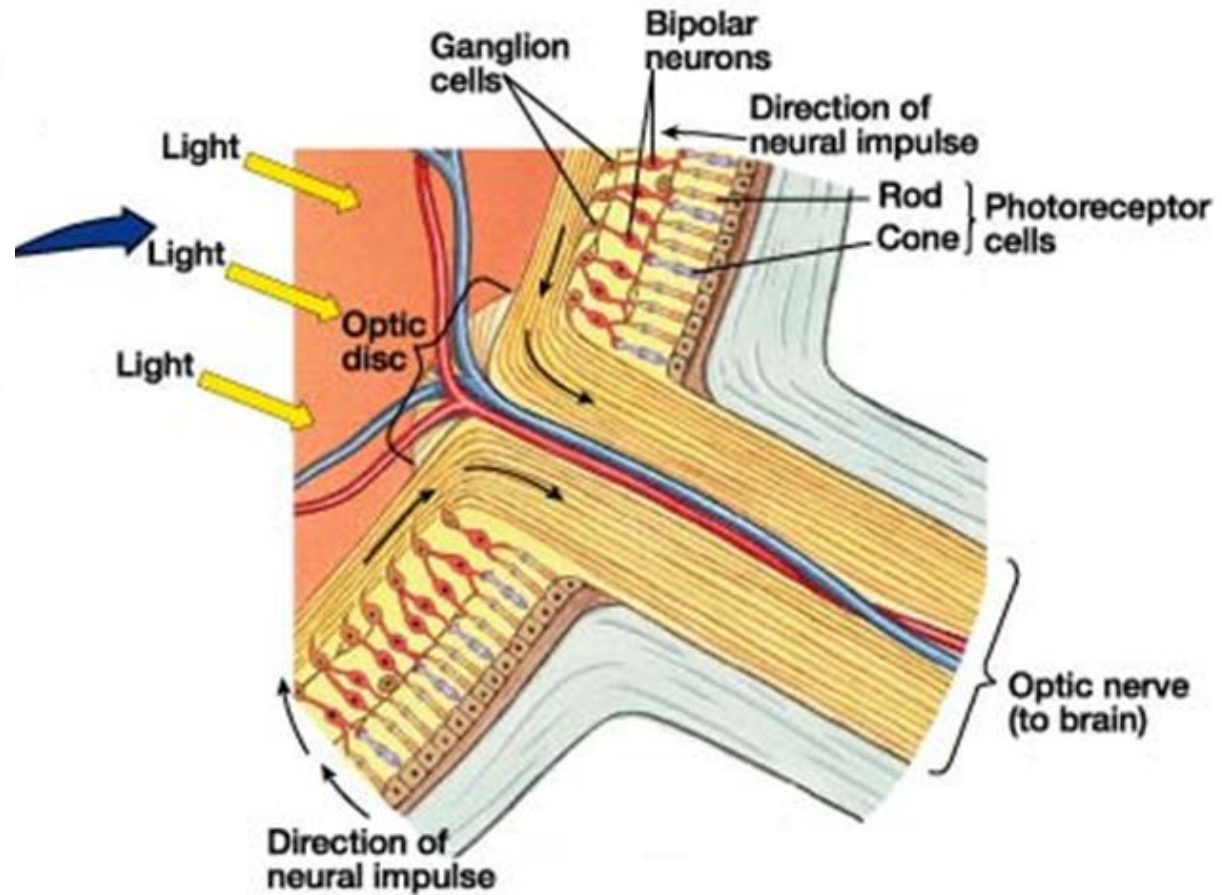
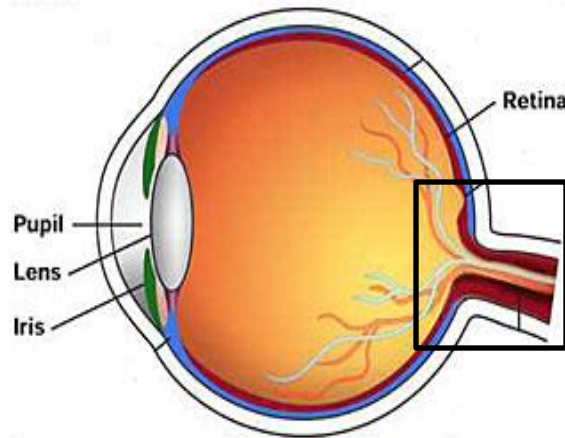
↳ below or more → eye can't see

Phototransduction



- Phototransduction is the process by which the light detected by photoreceptor cells in the retina is converted into electrical (or cellular) signals.

Phototransduction



Phototransduction



- Phototransduction is the process by which the light detected by photoreceptor cells in the retina is converted into electrical (or cellular) signals.
- These are transmitted as nerve impulses back through layers of retina to optic nerve fibers *↳ G-signaling pathway*
- The optic nerve carries the information to the brain to be processed there
- What is the molecular mechanism involved in visual cycle and how does the absorbed light create a response ?

Phototransduction Cascade

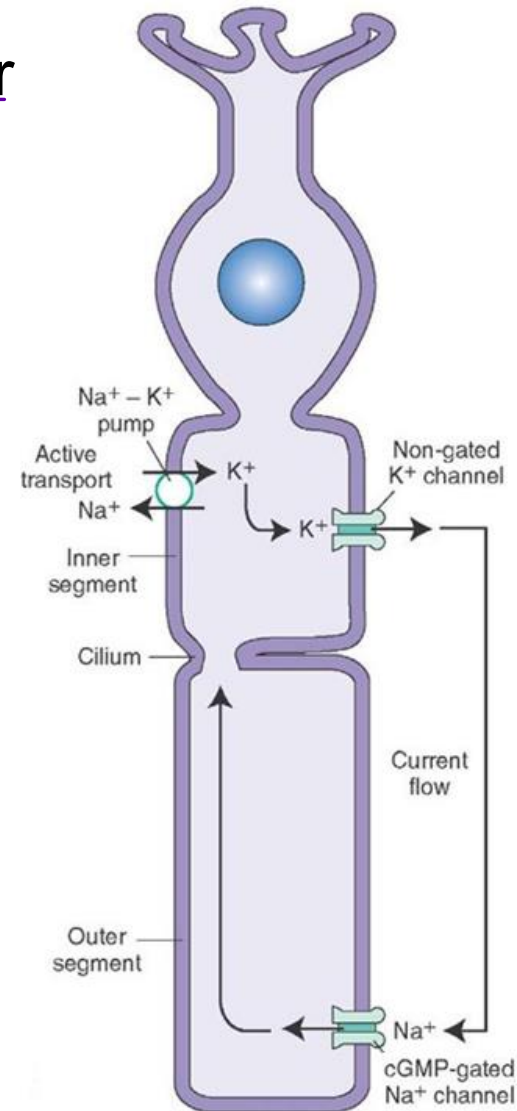


- In the absence of light, the photoreceptor cell is in the depolarized state with membrane potential of -40 mV. This depends on:

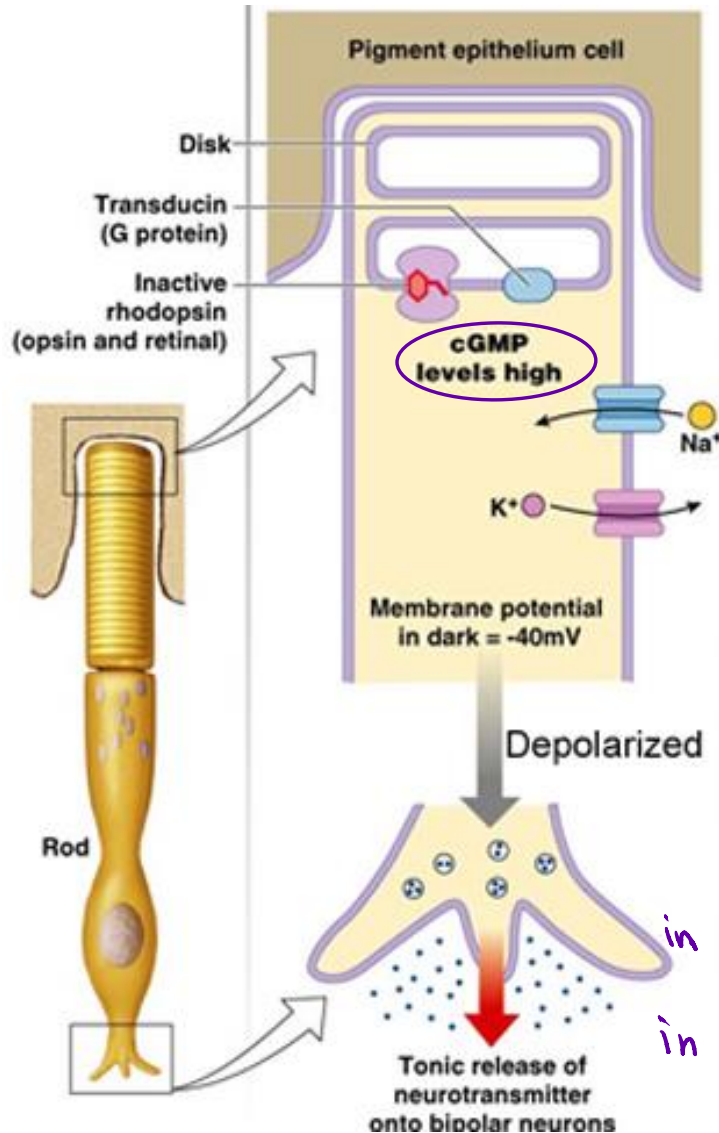
1. Non-gated K^+ channel: outflux of K^+ (ongoing outward K^+ current)

3. cGMP-gated Na^+ channel: influx of Na^+ (inward Na^+ current known as **dark current**)
dependent on its level *high levels in*

3. Na^+ - K^+ pump: it is an active transport requires ATP (to transfer 3 Na^+ out and 2 K^+ in)



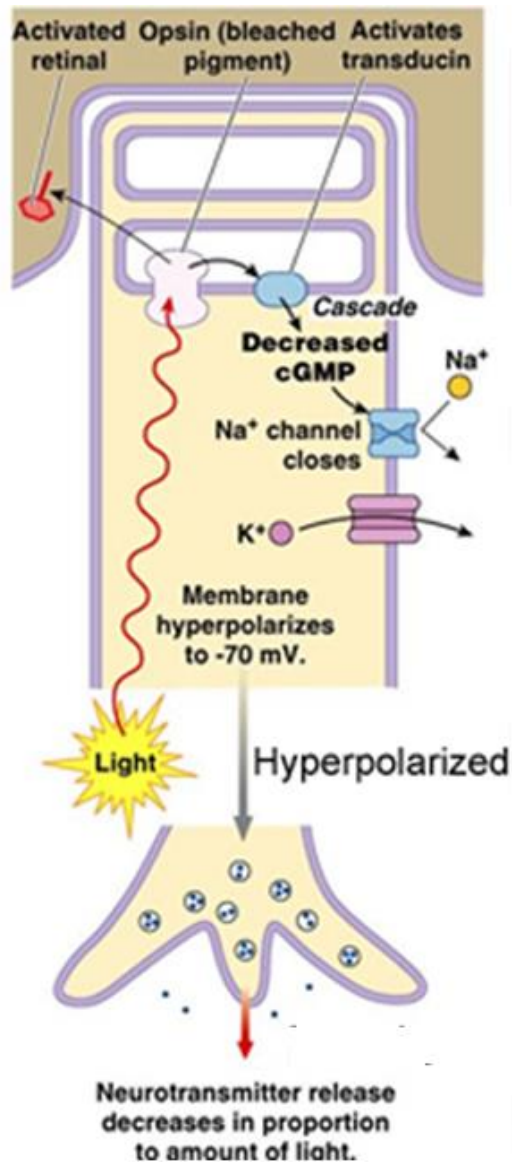
Phototransduction Cascade



- In darkness, **rhodopsin is inactive** and cGMP level is high thus Na⁺ channels are open.
- The neurotransmitter molecules are released from synaptic terminal of photoreceptor cell.

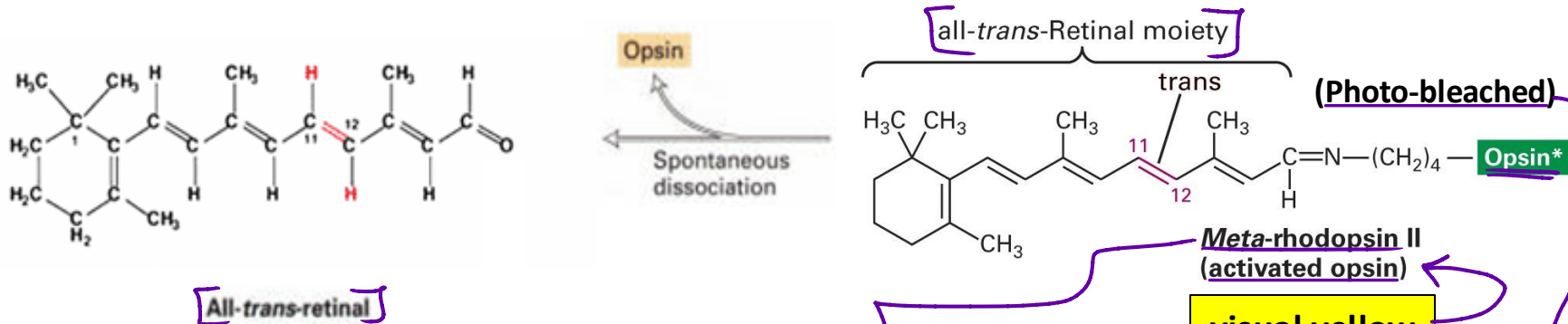
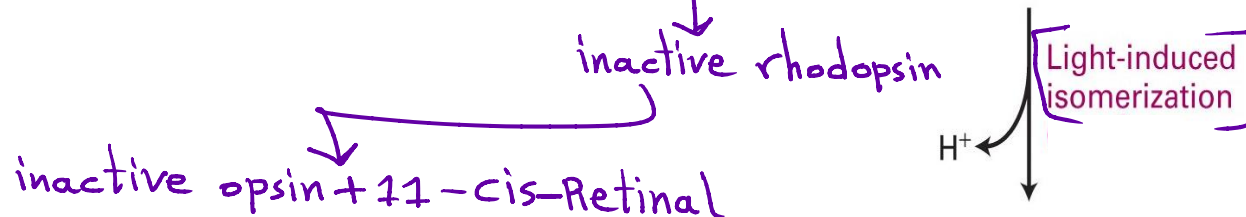
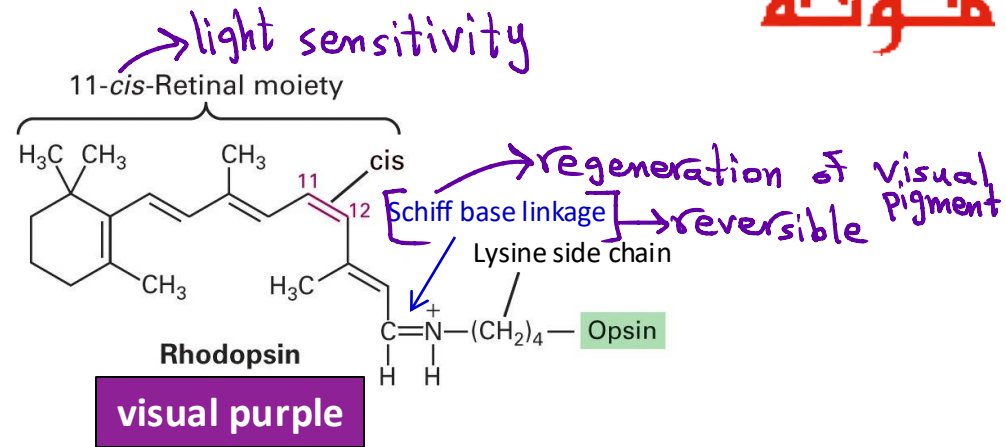
in absence of light → photoreceptors depolarized
in presence of light → photoreceptors hyperpolarized

Phototransduction Cascade



In presence of light, a series of changes occur within **rhodopsin** which activate a downstream signaling cascade resulting in the **closure of Na⁺ channels**. Indeed, rhodopsin dissociates, the activated opsin decreases **cGMP** which in turn closes Na⁺ channels and **hyperpolarizes** the cell. Consequently, less neurotransmitter molecules are released.

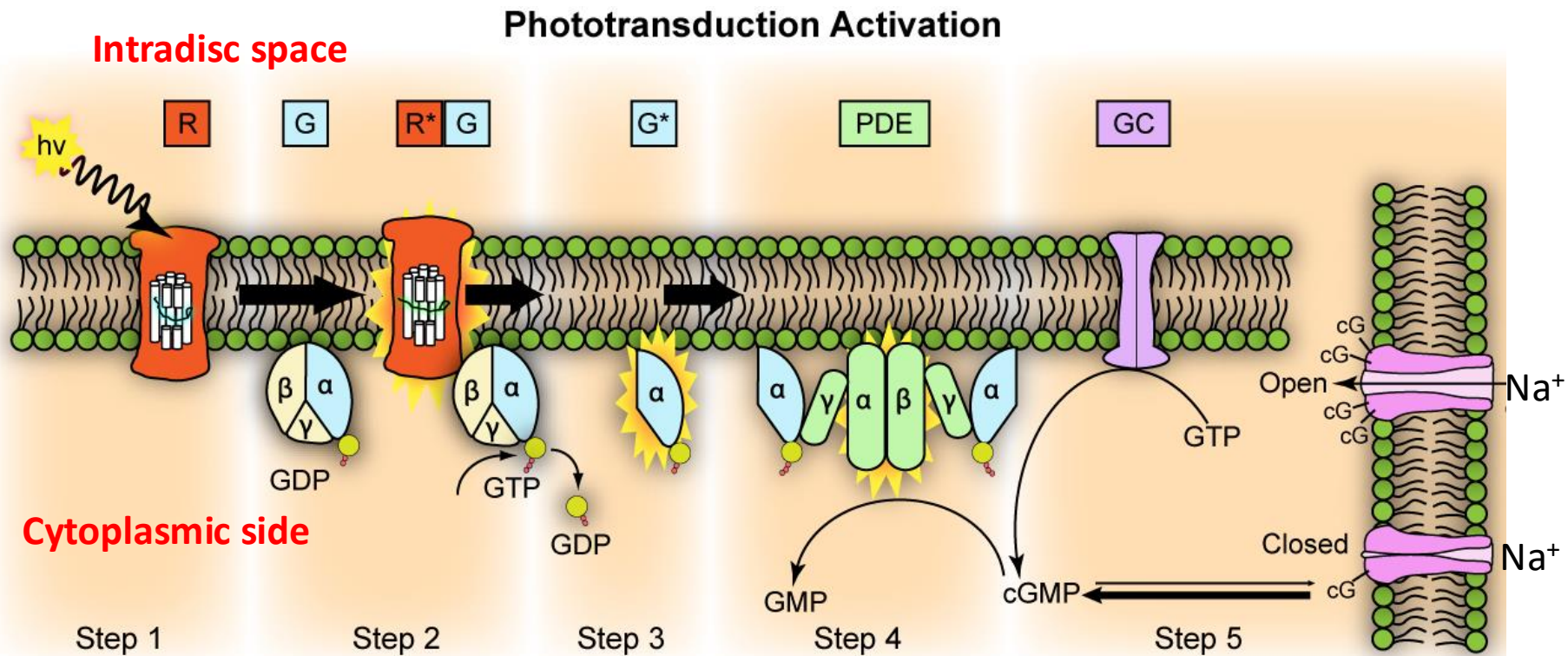
Photoisomerization of retinal



active opsin + All-*trans*-Retinal

[visual purple → visual yellow] → this process called

G-protein signaling pathway

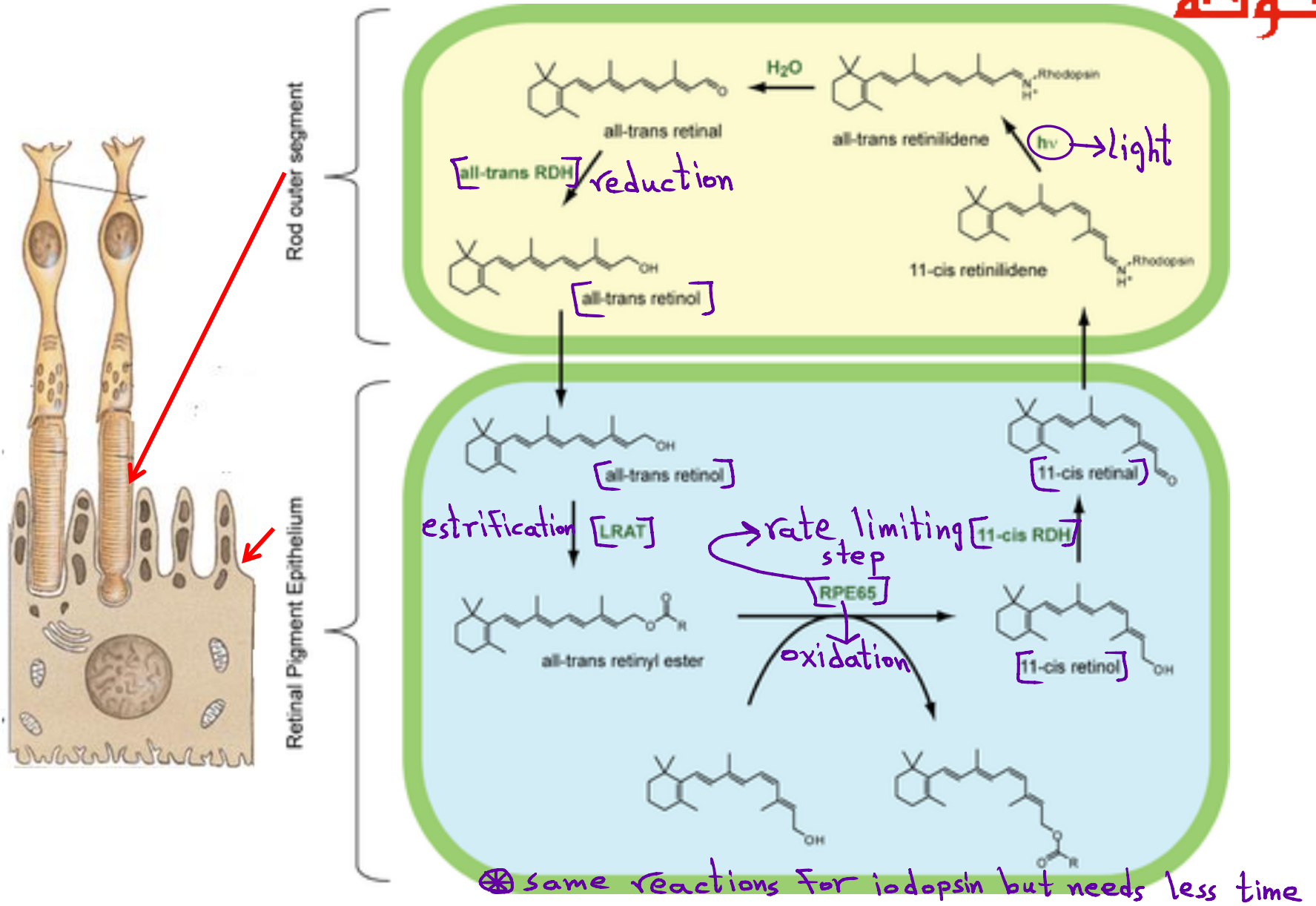


G-protein signaling pathway



- The activated rhodopsin (R^*) binds to and activates the heterotrimeric G-protein “transducin” by exchanging its GDP with GTP
↳ G-protein name in photoreceptor cells
- The α -subunit of transducin bound to GTP (the activated transducin, G^*) dissociates from its β and γ subunits
- G^* binds to the inhibitory γ subunits of phosphodiesterase enzyme (PDE) activating its two catalytic subunits: α and β . The activated PDE converts cGMP to GMP so reduces the cGMP level and consequently the closure of Na^+ channels. Thus, the membrane is hyperpolarized and the rate of neurotransmitters release is reduced
- Normally, Guanylyl cyclase (GC) enzyme synthesizes cGMP from GTP. So cGMP is the second messenger in phototransduction cascade

Regeneration of Visual Pigment



Regeneration of Visual Pigment



→ (10-15) minutes → iodopsin

- In darkness, inactive rhodopsin consists of opsin covalently linked to 11-cis retinal via schiff base bond. Light induces photoisomerization of 11-cis retinal to all trans retinal. The rhodopsin becomes activated (called meta-rhodopsin II) and loses its visible purple color (photobleached)
- **Long after visual cycle is complete, the activated rhodopsin dissociates and the all-trans retinal is released to be recycled back to 11-cis retinal**
- **A series of biochemical reactions occur both in the outer segment of photoreceptor cell and the pigment epithelium layer in retina to regenerate the visual pigment again**
- First, all-trans retinal is reduced to all-trans retinol via all-trans retinol dehydrogenase (all-trans RDH) which travels back to retinal pigment epithelium (RPE).

Regeneration of Visual Pigment



- In RPE, all-trans retinol is first esterified by lecithin retinol acyltransferase (LRAT) to form all-trans retinyl ester (a chemically stable storage form of vitamin A in RPE).
- When further ^(Retinal)chromophore is required, the isomerase enzyme RPE65 (retinal pigment epithelium specific 65-KDa protein) synthesizes 11-cis retinol by using all-trans retinyl ester as substrate.
- 11-cis retinol is converted via 11-cis retinol dehydrogenase (11-cis RDH) to 11-cis retinal before travelling back to the outer segment of photoreceptor cell where it is again conjugated to an opsin to form new functional visual pigment (e.g. rhodopsin)

Light and Dark Adaptation



- Visual adaptation: is the ability of visual system to automatically adjust its sensitivity to accommodate a change in light intensity. **Two types**:
 1. ^{→ rods regeneration} Dark adaptation: is the slow recovery of visual sensitivity (**20-30 min**) after exposure to a bright/strong light (i.e. when you move from the light to the dark).
 2. ^{→ cones regeneration} Light adaptation: is the adaptation to increased level of illumination (i.e. when you move from the dark to the light, **5 min**).
- Mechanisms underlying light /dark adaptation:
 1. Pupil size to adjust amount of light reaching the retina → *fastest*
 2. Switch-over between rods and cones → *Fast*
 3. Bleaching / regeneration of photopigments → *slow*

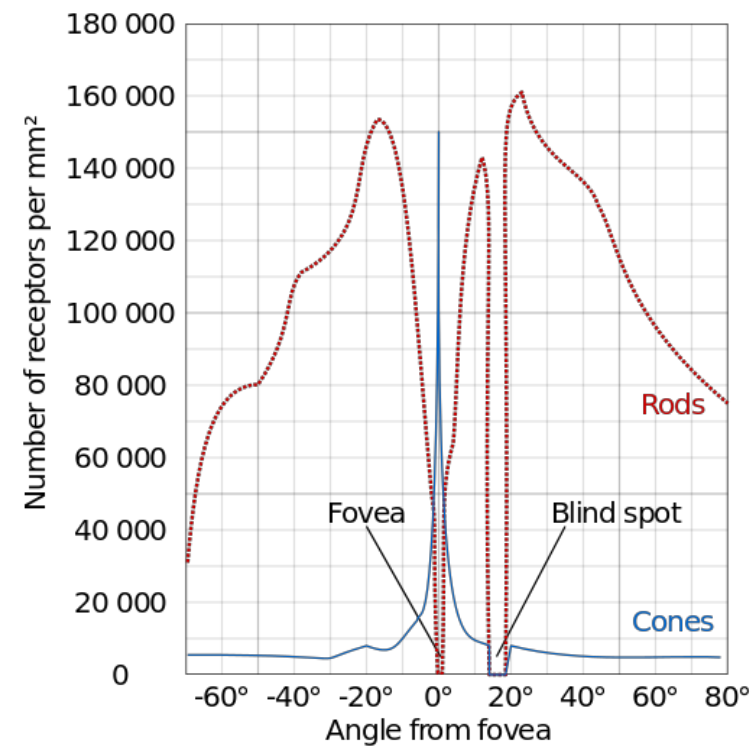
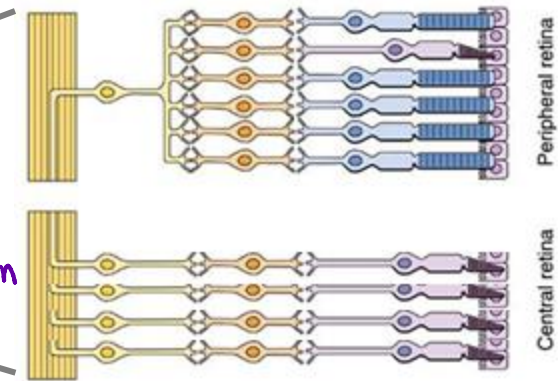
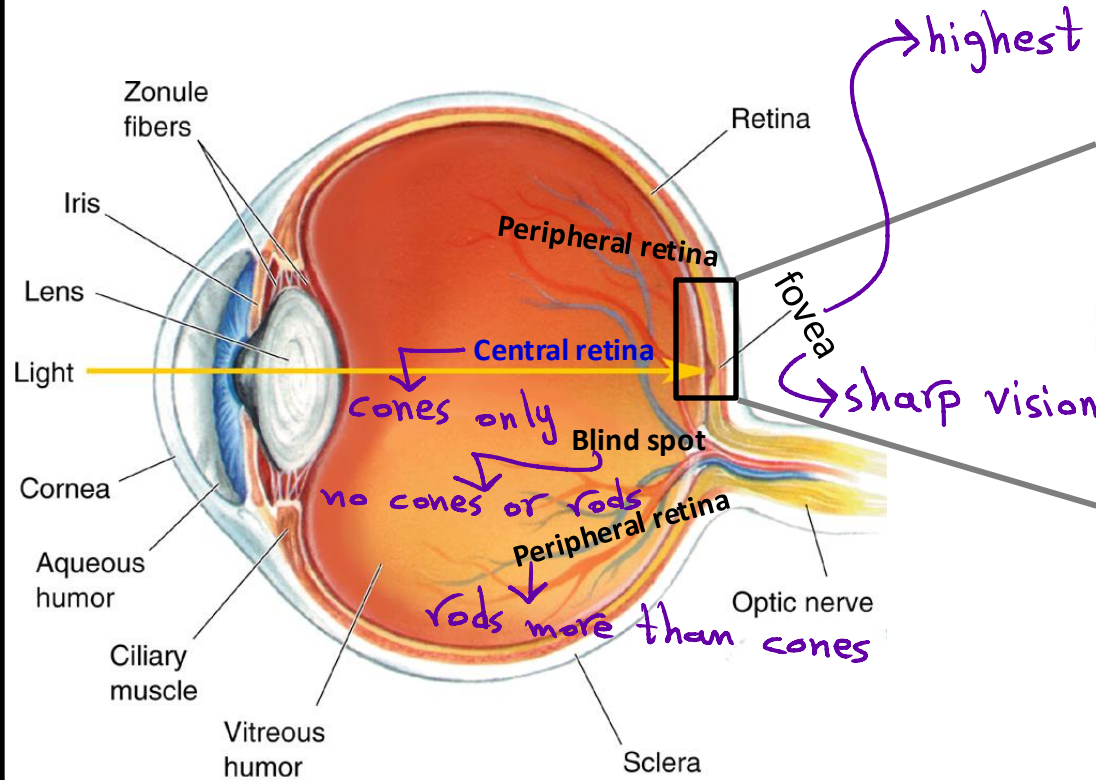
Photoreceptor cells



Retina contains two types of photoreceptors:

1. Rod cells: about 120 million, function in dim light (night vision) and do not perceive color, with high sensitivity and low resolution
2. Cone cells: about 6 million, function in bright light (daytime vision) and are responsible for color vision, with low sensitivity and high resolution

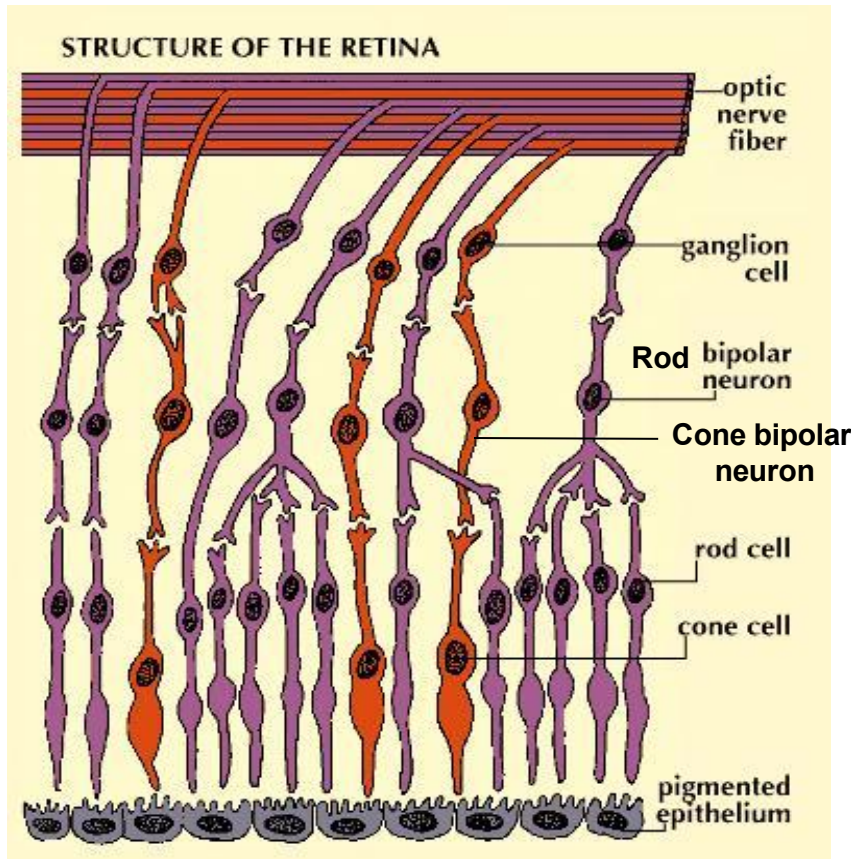
Distribution of Rods & Cones across Retina



Synaptic pattern of Photoreceptors



- ⊗ multiple rods give visual information to one bipolar cell → low acuity
- ⊗ one cone give visual information to one bipolar cell → high visual acuity



High degree of convergence reduces resolution in rod system, whereas 1:1 relationship of cones to bipolar and ganglion cells increases the resolution or visual acuity.

Rods vs. Cones

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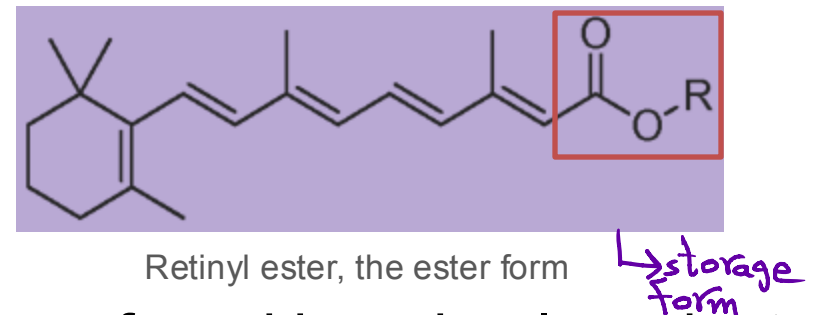
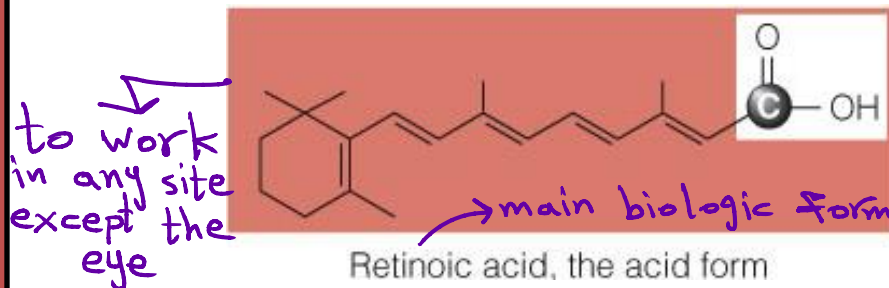
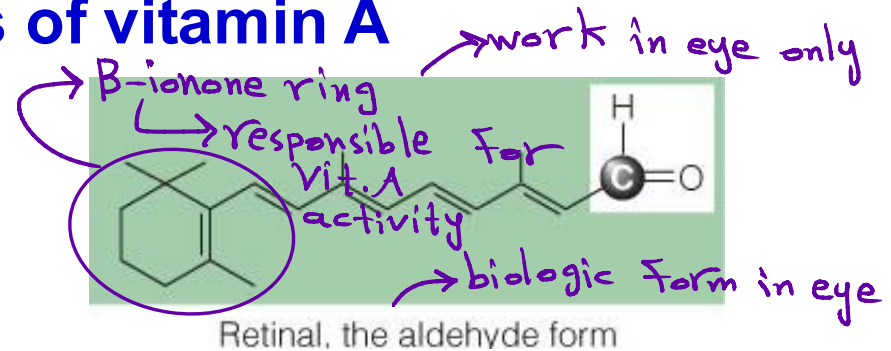
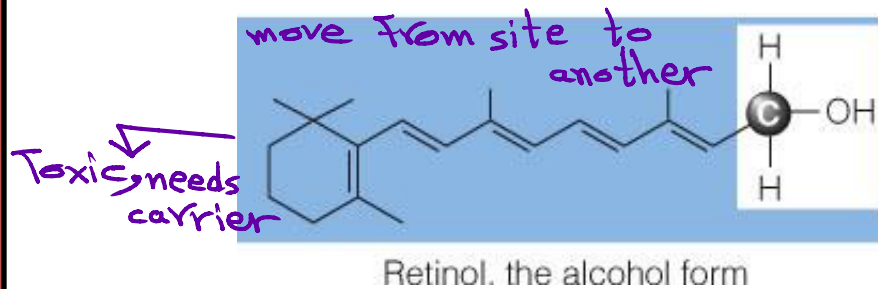
Rods	Cones
Used for <u>scotopic</u> vision (vision under low light conditions) or night vision	Used for <u>photopic</u> vision (vision under high light conditions) or day vision
Very light sensitive	Not very light sensitive
Loss causes night blindness	Loss causes legal blindness
Low visual acuity (poor resolution) as many rods are connected to one bipolar cells showing a high degree of convergence	High visual acuity; better spatial resolution as each cone is connected to one bipolar cell
Not present in fovea	Concentrated in fovea
Outer segment is rod shaped	Outer segment is cone shaped
Confer <u>achromatic</u> or monochromatic vision	Confer color vision (<u>trichromatic</u> vision)
Stacks of membrane-enclosed disks are unattached to cell membrane directly	Disks are attached to outer membrane
About 120 million rods distributed around the retina (peripheral vision)	About 6 million cones distributed in each retina (central vision)
One type of photosensitive pigment (Rhodopsin)	Three types of photosensitive pigments in humans (blue, green and red cones)

Vitamin A and Visual Cycle



- Vitamin A is one of the fat-soluble vitamins
- Derivatives of vitamin A (preformed): retinol, retinal (retinaldehyde), retinoic acid (the biologically active metabolite of vitamin A) and retinyl ester

4 main forms of vitamin A



- These preformed compounds are found in animal products as retinyl esters (e.g. liver, eggs, cod liver oil, meat, dairy products etc)

Vitamin A and Visual Cycle



- Retinoids: are a class of chemical compounds that are related chemically to vitamin A. They are widely used in medicine as they have diverse functions in the body

- First generation: retinal, retinol, tretinoin (all *trans* retinoic acid, Retin-A) , isotretinoin (Roaccutane, UK and Accutane, USA) and alitretinoin



- ~~Second generation: etretinate and its metabolite acitretin~~
- ~~Third generation: tazarotene, bexarotene and Adapalene~~

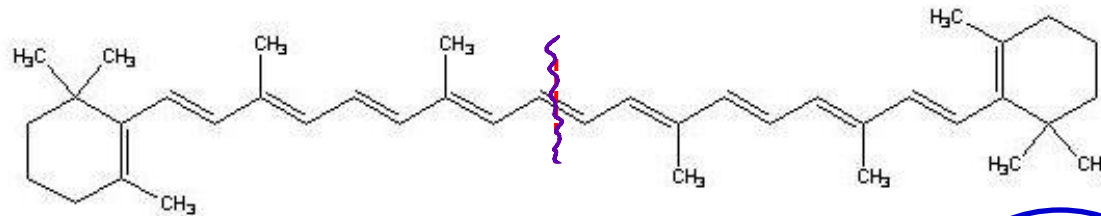


Vitamin A and Visual Cycle

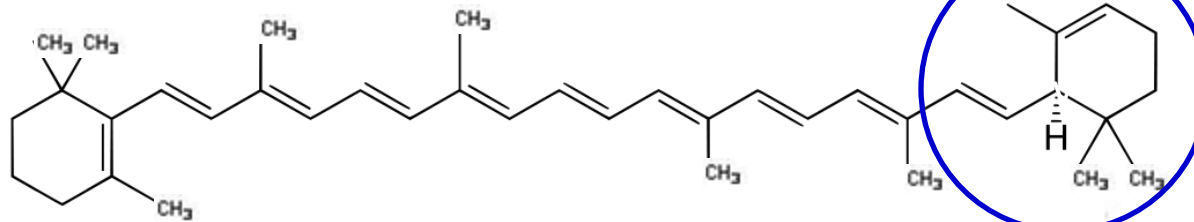


- Provitamin A: like some carotenoids which can be converted/ metabolized in the body to retinoids with vitamin A activity. They are found in plant sources (e.g. carrot)

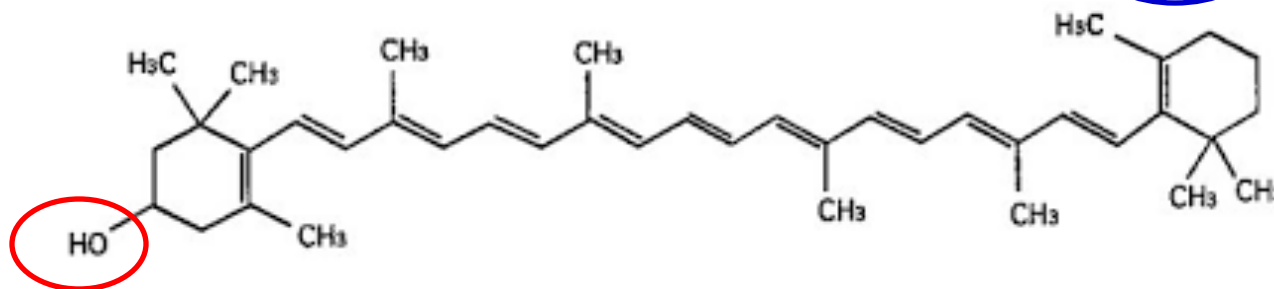
الجزر



→ most potent
β-carotene
→ give 2 Vit.A



α-carotene
↓
give 1 Vit.A



β-cryptoxanthin
→ give 1 Vit.A

Vitamin A and Visual Cycle



المطلوب بست اللون

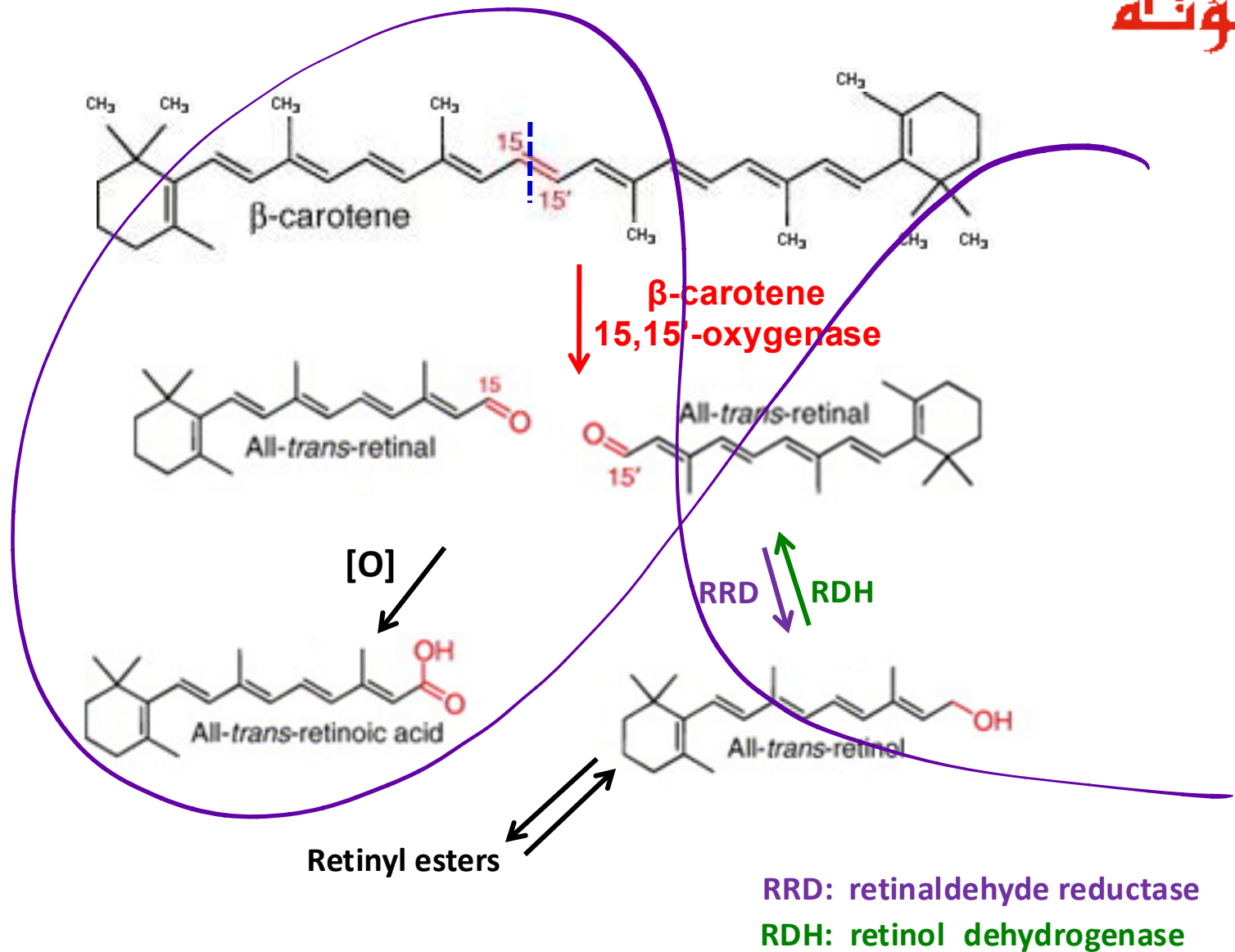
- Carotenoids: are organic pigments synthesized by plants and cannot be made by animals. Two classes:
 1. **Carotenes**: are responsible for the orange color of many vegetables & fruits (e.g. carrots and sweet potatoes) also for yellow color of milk-fat and butter (in low concentration). Some are provitamin A: like α -carotene (single retinyl group) and β -carotene (two retinyl groups)
 2. **Xanthophylls**: are yellow pigments. β -cryptoxanthin (provitamin A) is the only xanthophyll which possess vitamin A activity.

Carotenoids Absorption & Metabolism



- Only a limited amount of the provitamin carotenoids (plant sources) can be absorbed intact. These are stored in body tissues such as adipose cells of fat depots throughout the body. To date, the only side effect of excess beta-carotene supplementation appears to be yellowing of the skin.
- Carotenoids are largely converted to retinol (vitamin A) during intestinal absorption in the mucosal cell.

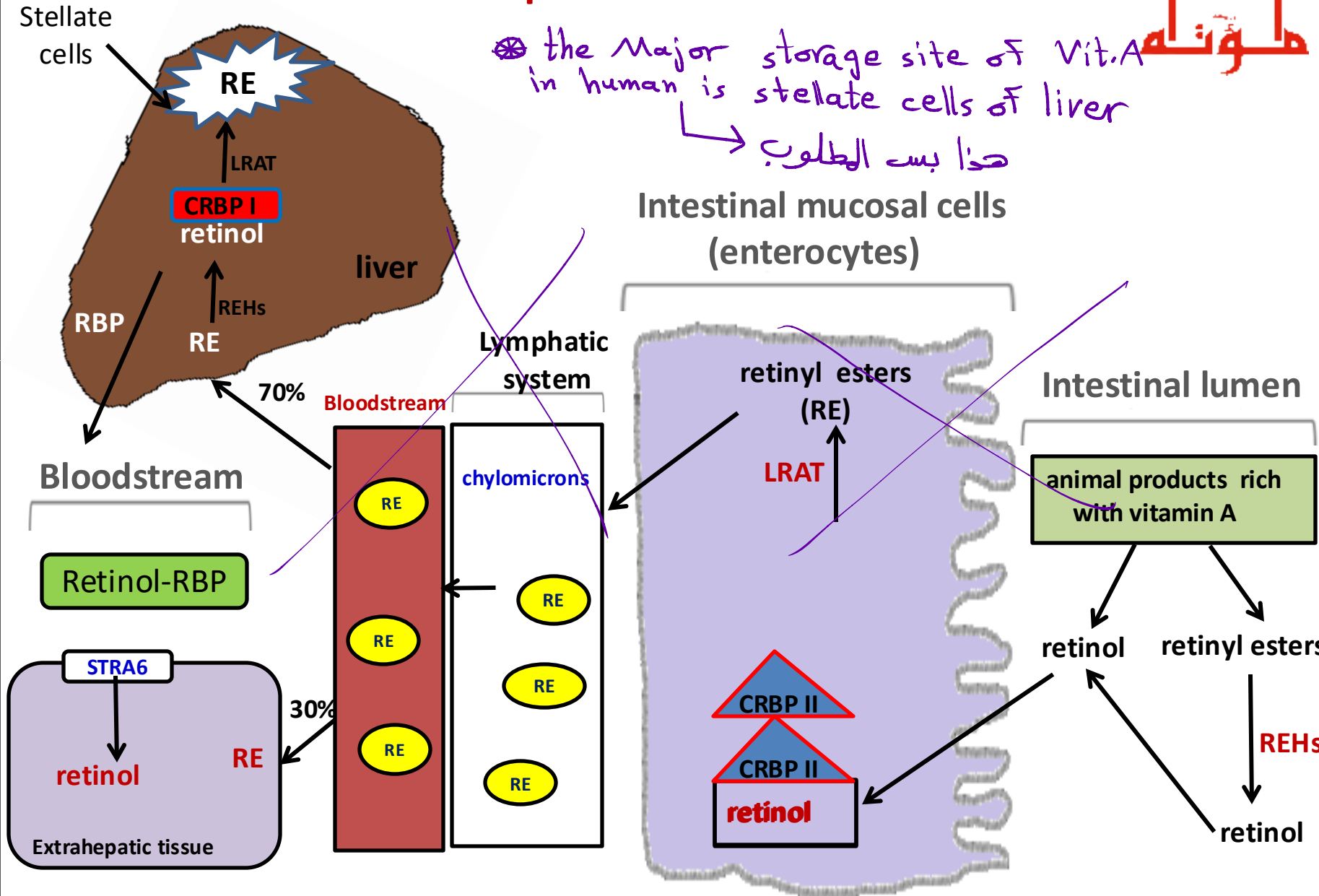
Hydrolysis of β -carotene



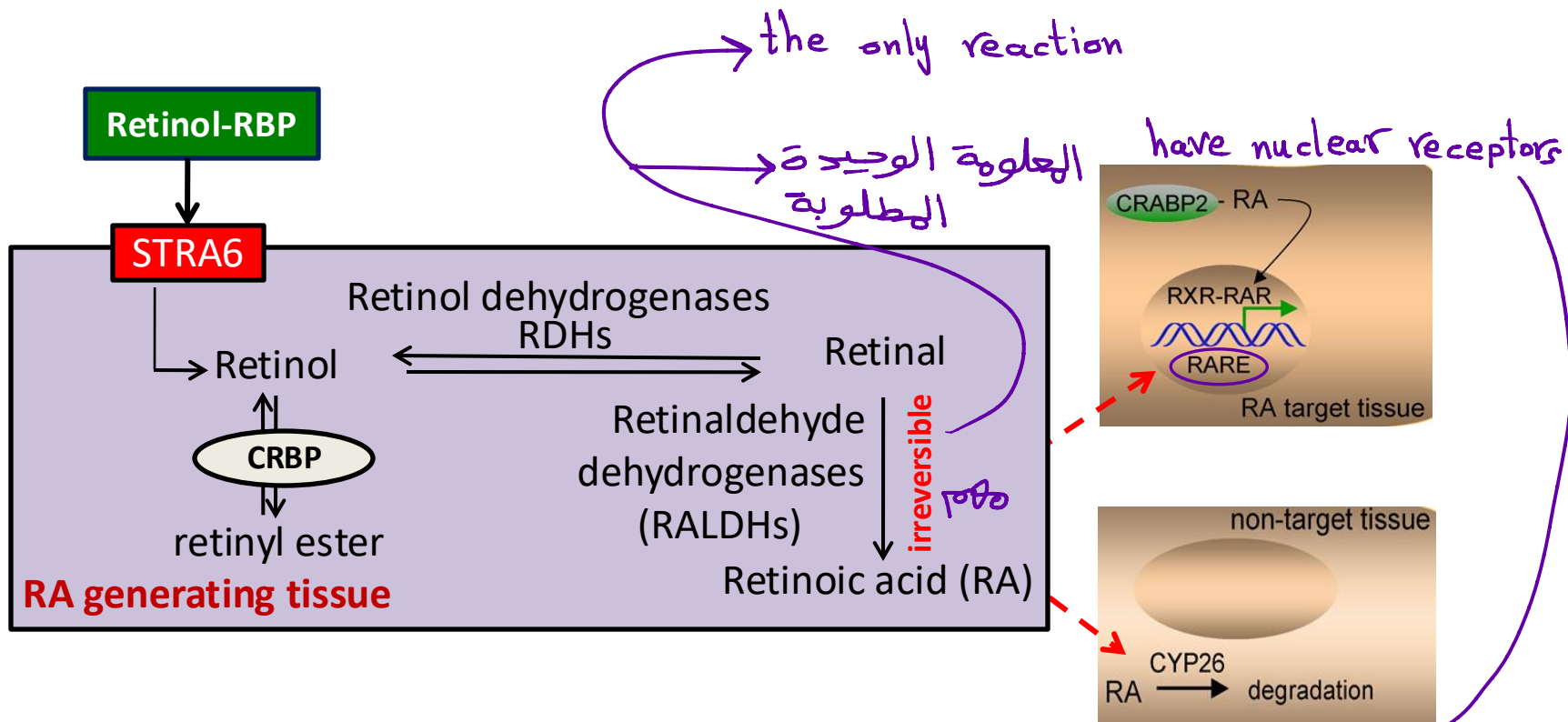
Vitamin A Absorption & Metabolism



the Major storage site of Vit.A in human is stellate cells of liver
هذا بس المطلوب



Vitamin A Absorption & Metabolism



pregnant women should avoid Vit. A sources

Vitamin A Absorption & Metabolism



- **REHs**: retinyl ester hydrolases like pancreatic triglyceride lipase the main enzyme responsible for the REH activity in intestinal lumen and hepatic lipase enzyme in hepatocytes
- **LRAT**: lecithin retinol acyl transferase
- **CRBPs**: cellular retinol binding proteins like **CRBPI** (ubiquitously expressed in tissues), **CRBP II** (primarily expressed in small intestine) and **CRBP III** (predominantly expressed in adipose tissue, heart, muscle & mammary).
- **RBP**: retinol binding protein
- **STRA6**: stimulated by retinoic acid 6



Vitamin A Absorption & Metabolism

- Retinol is stored in several tissues particularly liver (as retinyl esters).
- Vitamin A is mobilized from liver stores and transported in plasma as retinol bound to a specific transport protein called retinol binding protein “**RBP**” (retinol is toxic, so, it is not let free and should be esterified or bound to RBP).
- Nonspecific and unregulated delivery of retinoids to biological membranes can lead to vitamin A toxicity.

Physiological Roles of Vitamin A



- 1. Vision:** Vitamin A is a component of photopigments (rhodopsin & iodopsins) in which retinal (the visual active form of vitamin A) is bound to the protein opsin. These play an essential role in the conversion of light energy into nerve impulses at the retina
- 2. Gene transcription and embryonic development:** this role is played by retinoic acid form of vitamin A. RA binds its nuclear receptor RAR to regulate the transcription of its target genes

Physiological Roles of Vitamin A



- Therefore, **RA** influences the induction and patterning of some tissues at early stages of embryonic development
- Studies showed that **RA** is essential for development of several organs such as hindbrain, spinal cord, heart, eye...etc.
- Vitamin A is unique among the vitamins in that its concentration must be within a very narrow range in order to avoid both deficiency and toxicity
- Adding vitamin A or **RA** to embryo can easily induce teratogenic effects including major alterations in organogenesis (i.e. congenital abnormalities or birth defects)

Physiological Roles of Vitamin A



3. **Antioxidant:** carotenoids like **β -Carotene** protect the body from free-radical damage to DNA and cells to prevent diseases like cancer.
4. **Maintain skin health:** vitamin A, and more specifically, **retinoic acid**, appears to maintain normal skin health by switching on genes and differentiating keratinocytes (immature skin cells) into mature epidermal cells. The retinoic drug isotretinoin (**Ro-accutane®**) is the most commonly prescribed agent for treatment of acne.
5. **Reproduction: retinoic acid** (RA) supports both male and female reproduction. RA plays a vital role during the spermatogenesis (the process of production of sperm cells). In females, vitamin A is important to maintain normal fertilization, implantation and to overcome fetal resorption or malformation

Physiological Roles of Vitamin A



6. **Bone growth:** vitamin A is important for healthy bones.

However, excessive amounts of vitamin A have been linked to bone loss and an increase in the risk of hip fracture. Indeed, too much **retinoic acid** affects the process of bone remodeling because it:

- activates bone resorption by increasing the number and activity of osteoclasts (the cells that break down bone).
- decreases the growth of osteoblasts (the cells that support bone growth)

Vitamin A Deficiency



- Vitamin A is stored in the body so it would take a year or more to develop a deficiency in the presence of inadequate intake.
- Vitamin A deficiency (**Hypovitaminosis A**):
 1. Infectious diseases due to impaired immunity
 2. Night Blindness (**Nyctalopia**): patient cannot see in dim/low light or near darkness conditions. Nyctalopia is first detectable sign of vitamin A deficiency.
 3. Complete blindness in severe deficiency.
 4. Xerophthalmia: dryness of the conjunctiva and cornea. If untreated, it can lead to corneal ulceration and keratomalacia (softening and necrosis of the cornea due to severe VAD)
 5. Keratinization of the skin: changes in epithelial cells results in keratinization, rough dry and scaly skin.

Vitamin A Toxicity



- Vitamin A toxicity (**Hypervitaminosis A**): can occur with concentrated amounts of vitamin A from animal foods, fortified foods, or supplements or consuming excessive amounts of β -carotene from supplements.
 1. Bone defects: increased activity of osteoclasts causes weakened bones and contributes to osteoporosis and fractures
 2. Birth defects: abnormal fetal development and malformation.