Biochemistry

Pavel Pestryakov

Novosibirsk State University Institute of chemical biology and fundamental medicine, SB RAS

+7(913)892-3045 Pavel.pestryakov@niboch.nsc.ru

Metabolism

Thousands of chemical reactions are taking place inside a cell in an organized, well coordinated, and purposeful manner; all these reactions are collectively called as **Metabolism**.

Purposes and characteristics:

- 1. To obtain chemical energy from the degradation of energy rich nutrients.
- 2. To obtain building blocks (precursors) of cellular macromolecules from food materials.
- 3. To construct vital macromolecules, such as proteins, nucleic acids, polysaccharides, etc.

The net of metabolic processes are called **Metabolic pathways**

Basis of Metabolism – chemical reactions catalyzed by sequential enzyme systems.

Regulation of metabolism –

- 1. Regulation through the action of allosteric enzymes, which increase or decrease the activity under the influence of effector molecules.
- 2. Hormonal regulation. Hormones are chemical messengers secreted by different endocrine glands.

3. Regulation at the DNA level; the concentration of the enzyme is changed by regulation at the level of synthesis of the enzyme.



Pathways of Metabolsm -

CATABOLISM (degradation)

energy rich complex macromolecules are degraded into smaller molecules. Energy released during this process is trapped as chemical energy, usually as ATP.

ANABOLISM (biosynthesis)

The cells synthesize complex molecules from simple precursors. Needs energy.

AMPHIBOLIC processe

Combination of anabolic and catabolic processes. Crossroads of metabolism

Flow through of foodstuff:

1 - digestion in the gastrointestinal tract converts the macromolecules into small units. **Primary metabolism**.

2 - small units are absorbed, catabolized to smaller components, and ultimately oxidized to CO2. The reducing equivalents are mainly generated in the mitochondria by the final common oxidative pathway, citric acid cycle. In this process, NADH or FADH2 are generated. **Secondary metabolism.**

3 - reduced equivalents enter into the electron transport chain (Respiratory chain), where energy is released. This is the **tertiary metabolism** or Internal respiration or cellular respiration



Pathways of Metabolsm -

CARBOHYDRATES – mainly around glucose

carbohydrates go through glycolysis pathway, are converted to acetyl-CoA Further are oxidized in the citric acid cycle AIM – provision of energy

LIPIDS – mainly around fatty acids AIM – provision of energy

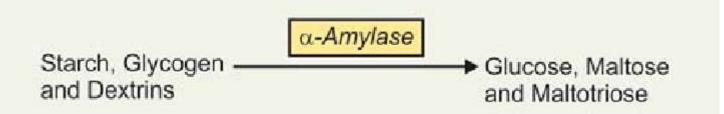
PROTEINS - amino acds

Can be transaminated and oxidized at carbon skeleton AIM – building blocks AND energy

DIGESTION OF CARBOHYDRATES

Dietary carbohydrates - polysaccharides: **starch and glycogen**. It also contains disaccharides: **sucrose**, **lactose** and **maltose** and in small amounts monosaccharides like **fructose** and pentoses.

1. Digestion in mouth



Salivary amylase (ptyalin) hydrolyzes α -1 \rightarrow 4 glycosidic linkage at random deep inside polysaccharide

2. Digestion in stomach

Practically no action. No enzymes in gastric juice.

3. Digestion in duodenum: Food reaches the duodenum where it meets the pancreatic juice. Pancreatic juice contains a carbohydrate-splitting enzyme *pancreatic amylase* (also called amylopsin) similar to salivary amylase.

DIGESTION OF CARBOHYDRATES

4. Digestion in Small Intestine

Action of Intestinal Juice

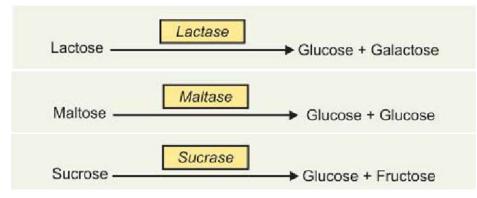
A• *Intestinal amylase*: This hydrolyses terminal α -1 \rightarrow 4 glycosidic linkage in polysaccharides and oligosaccharide molecules liberating free glucose molecule.

B • Lactase: β -galactosidase. Lactose is hydrolysed to equimolar amounts of glucose and galactose.

C* *Isomaltase:* hydrolysis of α -1 \rightarrow 6 glycosidic linkage, splitting α -limit dextrin at the branching points and producing maltose and glucose.

D • *Maltase:* The enzyme hydrolyses the α -1 \rightarrow 4 glycosidic linkage between glucose units in maltose = two glucose molecules.

E• *Sucrase*: hydrolyses sucrose molecule = equimolar quantities of glucose and fructose.



ABSORPTION OF CARBOHYDRATES

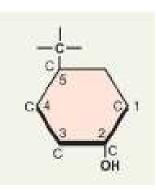
Carbohydrate digestion is complete when the food materials reach small intestine and all complex dietary carbohydrates like starch and glycogen and the disaccharides are ultimately converted to simpler monosaccharides. All monosaccharides, products of digestion of dietary carbohydrates, are practically completely absorbed almost entirely from the small intestine.

Two mechanisms:

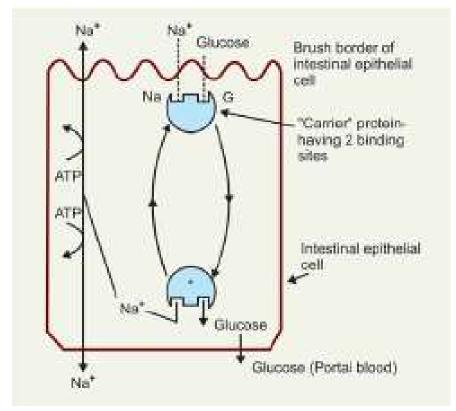
1. Simple diffusion: This is dependent on sugar concentration gradients between the intestinal lumen, mucosal cells and blood plasma. (monosaccharides)

2. "Active" Transport Mechanisms (Wilson and Crane's Hypothesis)
Glucose and galactose are absorbed very rapidly and hence it has been suggested that they are absorbed actively and it requires energy.

• Fructose absorption is also rapid but not so much as compared to glucose and galactose, but it is definitely faster than pentoses. Hence fructose is not absorbed by simple diffusion alone and it is suggested that some mechanism facilitates its transport, called as facilitated transport.



ABSORPTION OF CARBOHYDRATES



Active absorption of glucose

- COTRANSPORT

Sugars like D-fructose and Dmannose are probably absorbed by facilitated transport which requires the presence of carrier protein but does not require energy.

Other sugars like pentoses and Lisomers of glucose and galactose are absorbed passively by simple diffusion.

FATE OF MONOSACCHARIDES

Monosaccharides with the portal blood pass through the liver (the first 'filter') before entering the systemic circulation.

In liver two mechanisms operate:

- Withdrawal of carbohydrates from blood and
- Release of glucose by liver to the blood.

The functional state of the liver will be of prime importance and will have a profound influence on the carbohydrate metabolism on the entire organism.

The intake by the organs/tissues

- 1. Depend on the tissue
- 2. Can be active/passive
- 3. Can be facilitated by insulin

UTILISATION OF GLUCOSE

OXIDATION – for Energy

Oxidation of glucose or glycogen to pyruvate and lactate is called glycolysis. Glucose is degraded to pyruvate, which in presence of O2 is completely oxidized to CO2 and H2O. Glycolysis occurs in all tissues.

OXIDATION – not for Energy

HMP shunt

The pathway provides 1 NADPH which is used for reductive synthesis and 2 Pentoses which are used for nucleic acids synthesis. This pathway operates only in certain special tissues and not all tissues.

OXIDATION – not for Energy

Uronic Acid Pathway Provides D-glucuronic acid which is used for synthesis of mucopolysaccharides and conjugation reactions.

UTILISATION OF GLUCOSE – GLYCOLYSIS (glucose/glycogen to pyruvate/lactate for energy)

Originaly described by Embden, Meyerhof and Parnas. Hence, it is also called as **Embden Meyerhof** *pathway*.

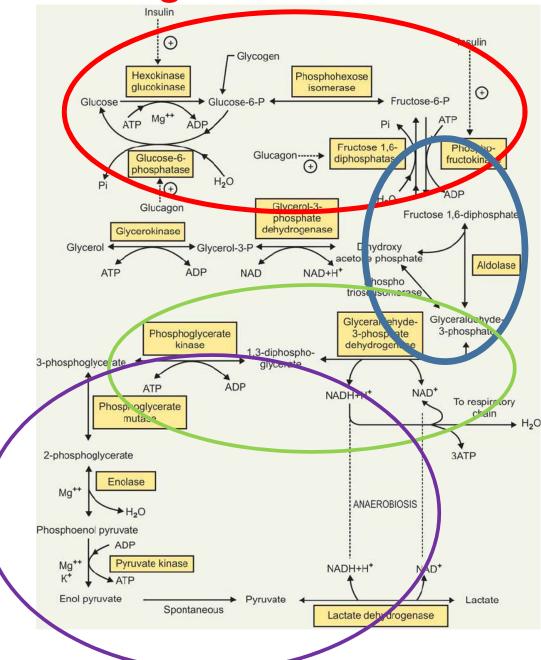
1. Occur in all tissues

2. Can happen in the presence and in the absence of O2 (skeletal muscles! Cancer cells)

3. Biphasic nature –

- **a.** Aerobic phase (Oxidation is carried out by dehydrogenation and reducing equivalent is transferred to NAD+. Reduced NAD in presence of O2 is oxidized in electron-transport chain producing ATP)
- **b.** Anarobic phase (NADH cannot be oxidised in electron transport chain, but can be oxidized to NAD+ by conversion of pyruvate to lactate, without producing ATP).

4. Occur extramitochondrially



Stage I -

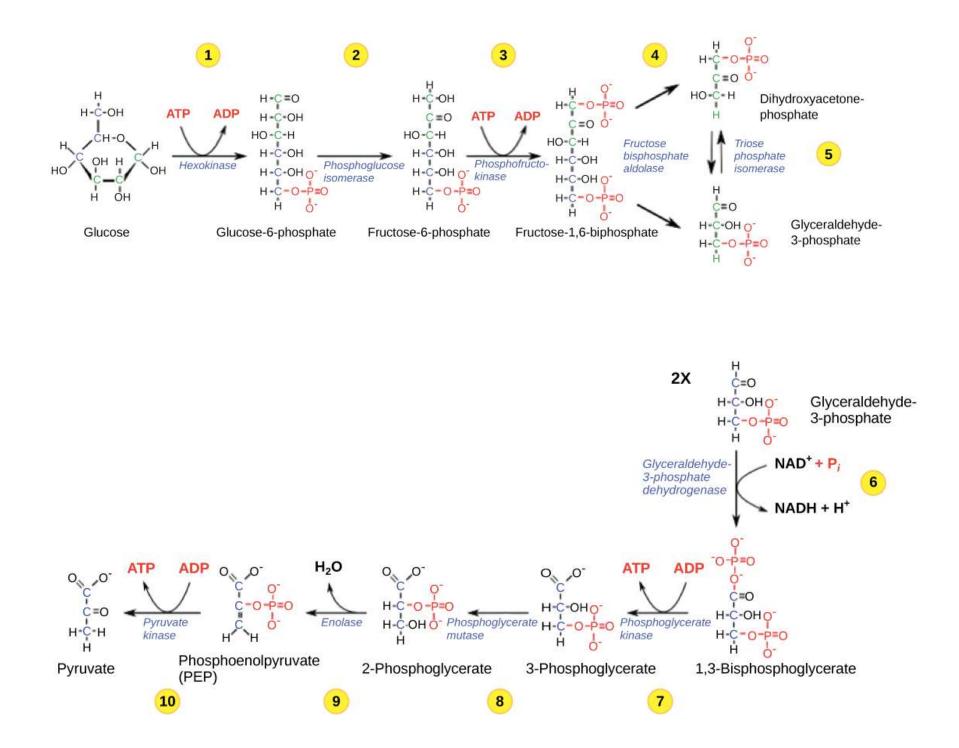
This is a preparatory stage. "Doing symmetrical glucose"

Stage II – Splitting of the molecule

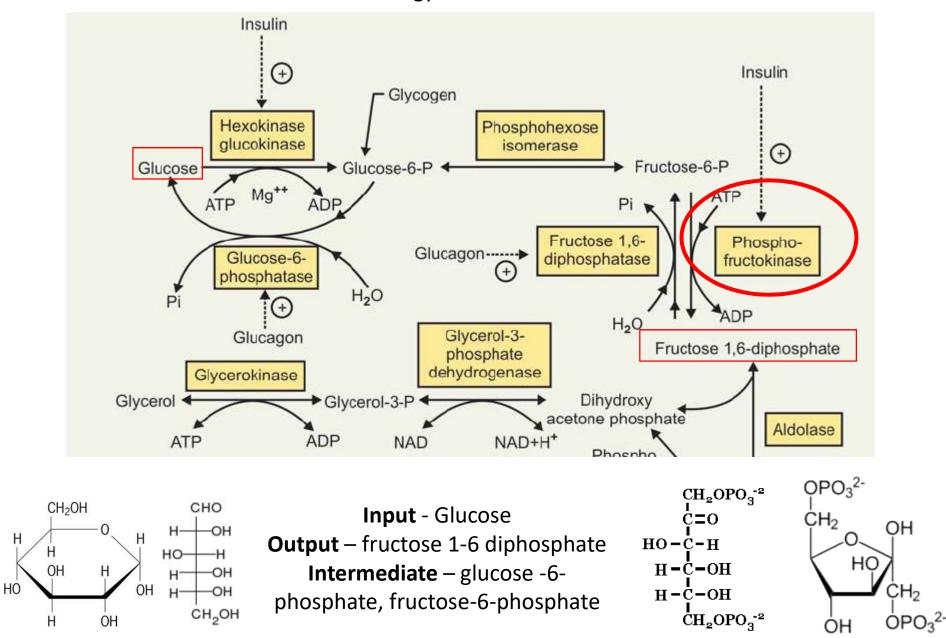
Stage III – Yielding of energy

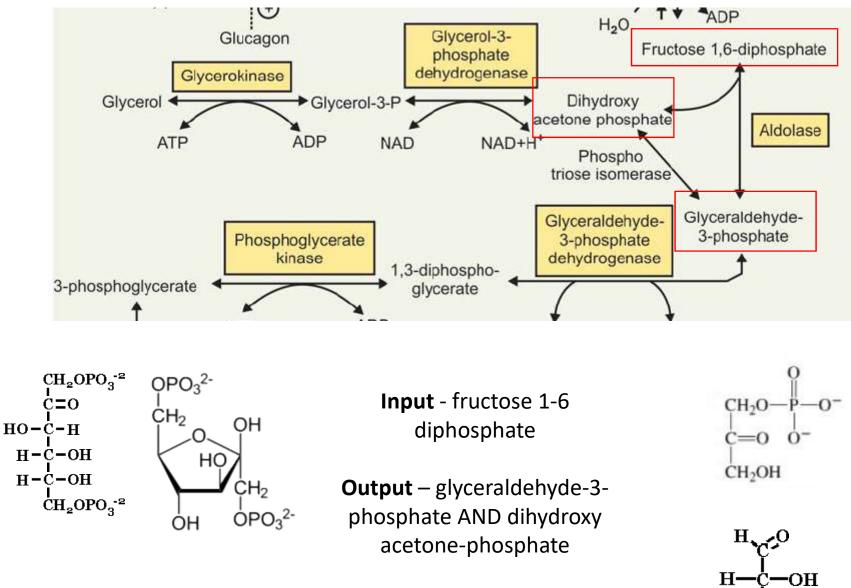
Stage IV –

Recovery of the PO4 group



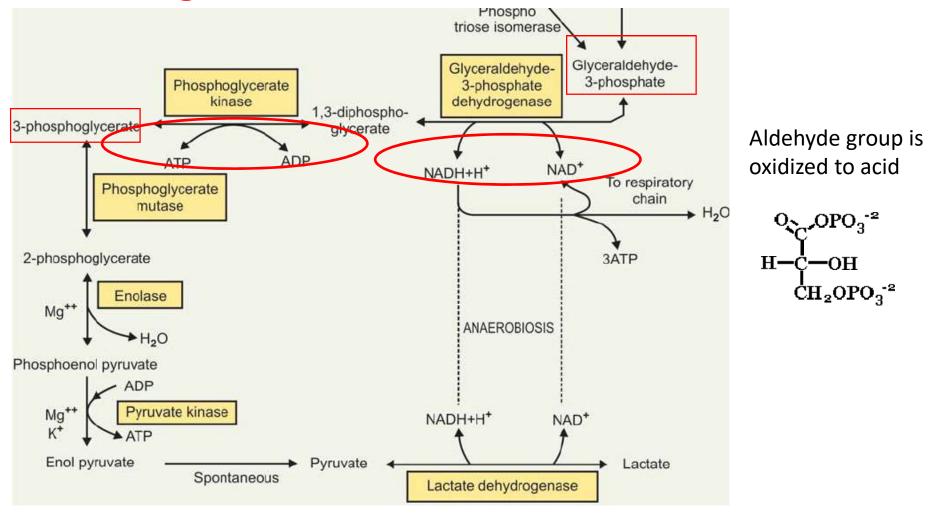
Loss of energy!



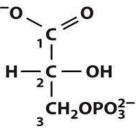


-С—ОН | СН₂ОРО₃-²

Gain of energy !!! (ATP and NADH)



H_._C,O H−C−OH CH₂OPO₃⁻² Input - glyceraldehyde-3-phosphate (dihydroxy acetone-phosphate also isomerizes to G-3-P) Output – 3-phosphoglycerate Intermediate – 1,3 biphospho glycerate



Bioenergetics Gain of energy Taking back Phospho triose isomerase phosphates that Glyceraldehyde-Glyceraldehydewere used in step I 3-phosphate Phosphoglycerate 3-phosphate dehydrogenase kinase 1,3-diphospho-3-phosphoglycerate glycerate ATP ADP 2 NAD⁺ NADH+H* To respiratory Phosphoglycerate chain mutase H20 -0P022 2 2-phosphoglycerate 3ATP CH2OH Enolase Mg++ ANAEROBIOSIS 3 H,O 3 Phosphoenol pyravate ADP -OPO2-Pyruvate kinase Mg⁺⁺ NADH+H* NAD⁺ K⁺ H-ATP Enol pyruvate Pyruvate Lactate н Spontaneous Lactate dehydrogenase Input - 3-phosphoglycerate -0 0. OH Ο. OH. Output – pyruvate Intermediate – 2-

phosphoglycerate,

phosphoenolpyruvate

Н-

с-он

₃CH₂OPO₃²⁻

 $C \equiv 0$

H₃C

-OH

H₂C

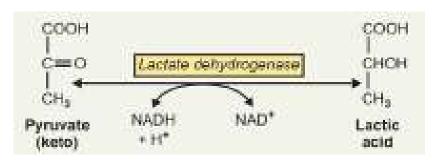
A – aerobic phase

	Reaction catalysed by	ATP Production
SI	age I	
٩.	Hexokinase/Glucokinase	
	reaction (for phosphorylation)	- 1 ATP
2.	Phosphofructokinase-1	
	(for phosphorylation)	- 1 ATP
St	age III	
3.	Glyceraldehyde-3-P dehydrogenase (oxidation of 2 NADH in	
	electron transport chain)	+ 6 ATP
4.	Phosphoglycerate kinase	
	(substrate level	101000
	phosphorylation)	+ 2 ATP
St.	age IV	
5.		
	(substrate level phosphorylation)	+ 2 ATP
	Net gai	in = 10-2
		= 8 ATP

In the presence of O2 NADH is converted back to NAD+ in electron-transport chain in mitochondria with generation of ATP (3ATP per NADH)

B – anaerobic phase

Electron-transfer chain is not working -> huge loss of NAD+ To recuperate NAD+ which can be limited pyruvate is converted to lactate



In anaerobic phase per molecule of glucose oxidation 4-2=2 ATP will be produced.

+2 ATP

Erythrocytes. Skeletal muscle under severe stress – acidosis. However, under harsh conditions NAD+ is further limited and glycolysis stops

HOW to regulate Glycolysis

(a) Changes in the rate of enzyme synthesis, Induction/repression. (timescale – hours)

Induction of glycolysis enzymes + inhibition of gluconeogenesis Glucokinase. Phospho-1-fructokinase, pyruvate kinase Glucose induces several enzymes, insulin also is an inducer

(b) Covalent modification by reversible phosphorylation. (very quick)

Phosphorylation of pyruvatekinase

(c) Allosteric modification.

Phosphofructokinase – inhibited by citrate and ATP, induced by AMP (AMP is very sensitive indicator of ATP concentration – rise metabolically amplified)

Conversion of pyruvate to Acetyl-CoA = oxidative decarboxylation

- 1. Occurs in the presence of O2
- 2. 3-carbon moiety are converted to 2-carbon Acetyl-CoA and CO2
- 3. Occurs in mitochondria (pyruvate is transported by specific proteins)

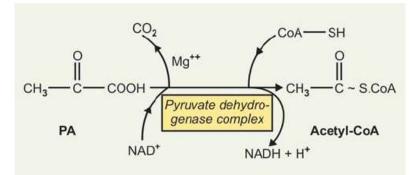
The heart of the reaction – *pyruvate dehydrogenase complex*

The enzyme complex consists of:

- 29 molecules of Pyruvate dehydrogenase (PD)
- + 8 molecules of Flavoprotein containing dihydrolipoyl dehydrogenase, and
- +1 molecule of dihydrolipoyl transacetylase.

The enzyme complex for its activity requires at least six coenzymes/cofactors:

- Thiamine pyrophosphate (TPP)
- Lipoic acid
- CoA–SH
- FAD
- NAD⁺ and
- Mg⁺⁺



Energy balance –

1 pyruvate = 1 NADH (NADH is usually oxidized to NAD+ and 3 ATP in electrontransportchain) therefore

1 pyruvate = 3 ATP

NET REACTION

HOW to regulate Conversion of pyruvate to Ac-CoA?

(a) Changes in the rate of enzyme synthesis, Induction/repression. (timescale – hours)

(b) Covalent modification by reversible phosphorylation. (very quick)

Phosphorylated pyruvate dehydrogenase complex is inactive.

Dephosphorylation of pyruvate dehydrogenase complex induced by insulin activates it. Phosphorylation is triggered by high ATP:ADP ratio, NADH:NAD+, Ac-CoA:CoA-SH, increase cyclicAMP

(c) Allosteric modification.

What else? Accumulation of pyruvate and lactate is seen if there's:

Lack of vitamin B1 (thiamine) and TPP – reduces the reaction (chronic alcoholism – chronic reduction of B1 vitamin)

CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle

THE FINAL STEP!

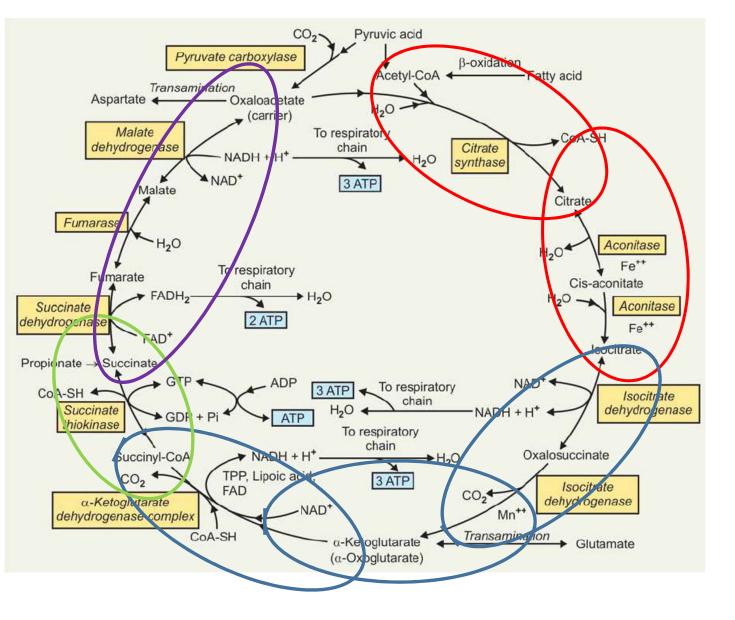
- 1. Cycle (!)
- 2. Final breakdown/catabolism stage of carbohydrates (as well as fats and proteins)
- 3. If we consider carbohydrates then **input** Ac-CoA after PDH complex (Input is 2-carbon moiety!)
- 4. Strictly **AEROBIC**
- 4. Output **ENERGY!** and CO2
- 5. Occurs in mitochondria (in matrix majorly inner side of mt inner membrane)

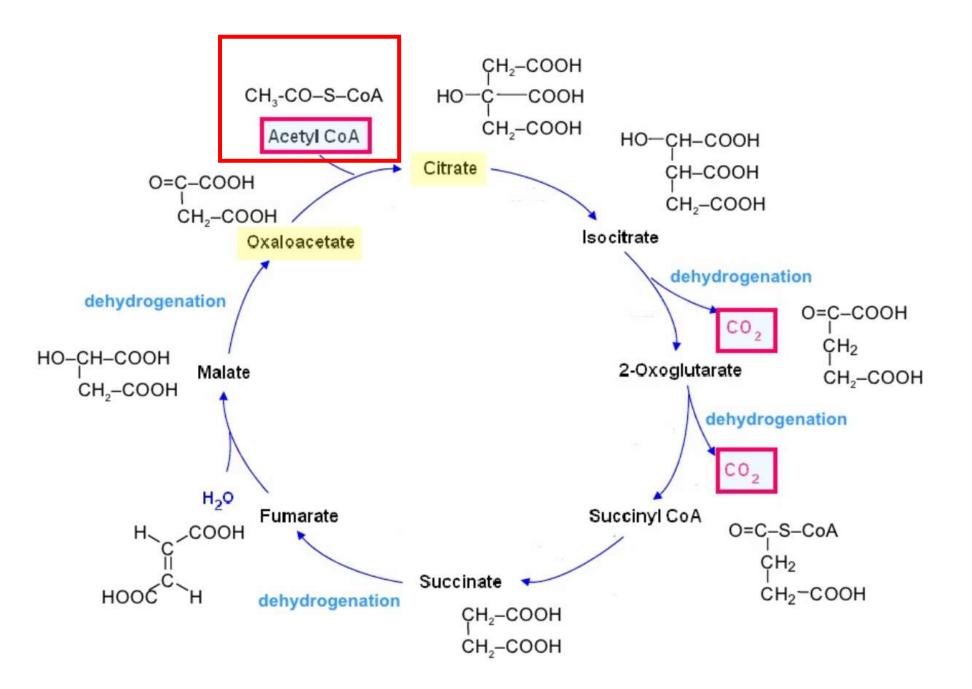
CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle

4 stages:

- Formation of citric acid and formation of isocitrate
- Isocitrate (6C) is converted to Succinyl-CoA (CO2 is released)
- 3. Succinyl-CoA is converted to succinic acid

4. succinic acid is oxidized to oxaloacetate (OAA) to continue the cycle





CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle

OUTLINE BRIEF

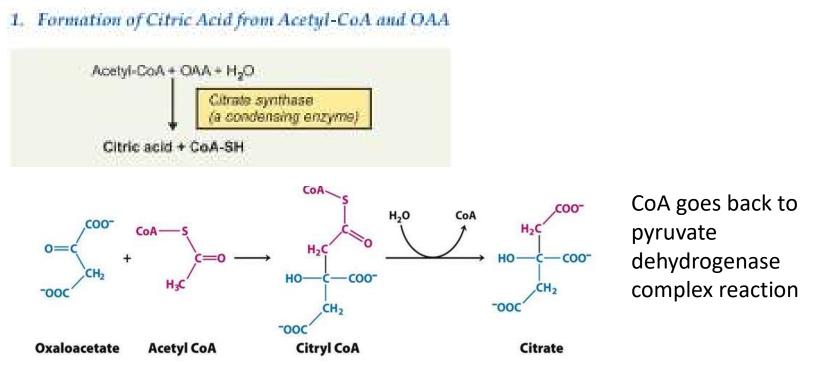
Acetyl-CoA (2-carbon group) brings in Acetyl group than is transferred to oxaloacetic acid (OAA). Citrate is formed.

Then dehydrogenations and loss of two molecules of CO2, accompanied by internal re-arrangements, occur.

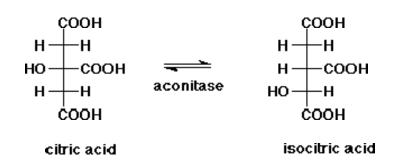
The final is oxaloacetic acid that goes to the beginning of the cycle and accepts another Acetyl group from Ac-CoA.

OAA – cycles!

CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle **STAGE 1**

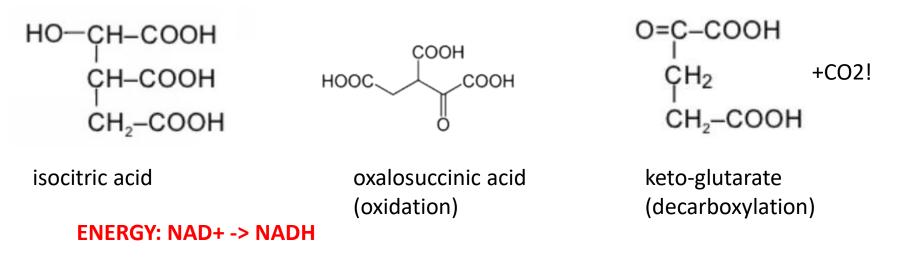


2. Formation of cis-aconitic acid and isocitric acid from citric acid:



CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle **STAGE 2**

1. Formation of oxalosuccinic acid and α -oxo-glutarate from isocitric acid



2. Oxidative decarboxylation of α -oxoglutarate to succinyl-CoA

The enzyme complex for its activity requires at least six coenzymes/cofactors:

- Thiamine pyrophosphate (TPP)
- Lipoic acid
- CoA–SH
- FAD
- NAD⁺ and
- Mg⁺⁺

D=C_S_CoA CH2 +CO2! CH2_COOH

ENERGY: NAD+ -> NADH

CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle **STAGE 3**

Succinyl-CoA is converted to succinic acid.

CH₂-COOH CH₂-COOH

Reaction requires GDP or IDP, which is converted in presence of Pi to either GTP or ITP.

• The release of free energy from oxidative decarboxylation of α -oxoglutarate is sufficient to generate one high energy bond in addition to the formation of NADH (preceding and following steps).

WHAT TO DO WITH GTP/ITP???

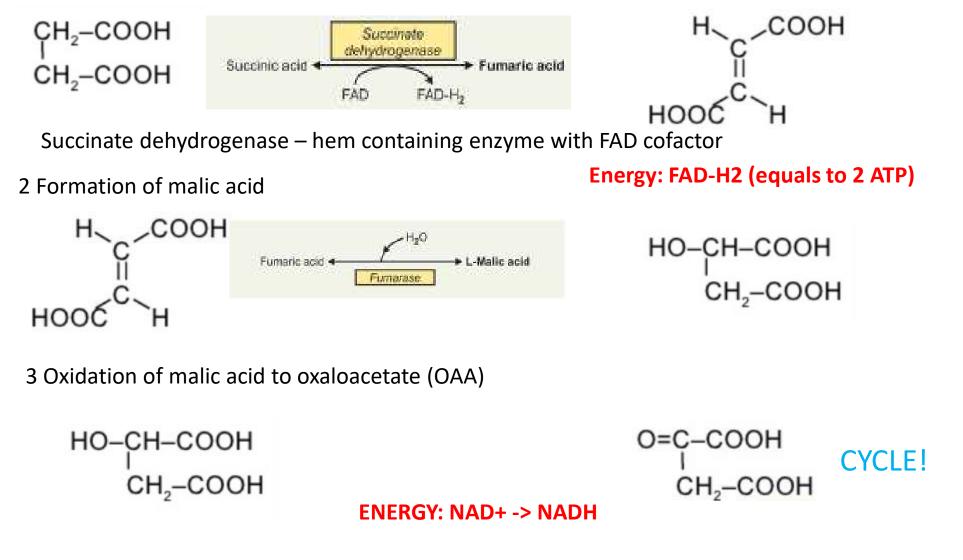
• In presence of enzyme nucleoside diphosphate kinase, ATP is produced either from GTP or ITP.

Energetic: One ATP is produced in this reaction at substrate level.

CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle **STAGE 4**

Succinyl-CoA is converted oxaloacetic acid to start the cycle

1 Oxidation of succinic acid to fumaric acid



CITRIC ACID CYCLE = trycarboxylic acid cycle, Krebs' cycle

ROLE OF VITAMINS IN TCA CYCLE

Five B vitamins are associated with TCA cycle essential for yielding energy.

• Riboflavin: In the form of flavin adenine dinuleotide (FAD)— a cofactor for succinate dehydrogenase enzyme.

• Niacin: In the form of nicotinamide adenine dinucleotide (NAD) the electron acceptor for isocitrate dehydrogenase, α -ketoglutarate dehydrogenase, and malate dehydrogenase.

• Thiamine: As "thiamine diphosphate"—required as coenzyme for decarboxylation in the α -ketoglutarate dehydrogenase reaction.

- Lipoic acid: It is required as coenzyme for α -ketoglutarate dehydrogenase reaction.
- Pantothenic acid: As part of coenzyme A, the cofactor attached to "active" carboxylic acid residues such as acetyCoA and succinyl-CoA.

TCA – regulation

KEY POINTS (which enzymes are regulated) Stage 1 – citrate synthase (Ac-CoA joining -> citrate) Stage 2 – isocitrate dehydrogenase (isocitrate oxidation -> oxalosuccinate(alphaketoglutarate)) Stage 3 – alpha-oxoglutarate dehydrogenase (alpha-ketoglutarate oxidative decarboxylation -> succinyl-CoA)

HOW to regulate TCA?

(a) Changes in the rate of enzyme synthesis, Induction/repression. (timescale – hours)

(b) Covalent modification by reversible phosphorylation. (very quick)

Stage 3 enzyme is very similar to enzyme of pyruvate conversion into Ac-CoA – regulation similar. Phosphorylated enzyme is not active. Therefore, dephosphorylation of enzyme complex induced by insulin activates it. On the other hand, phosphorylation is triggered by high ATP:ADP ratio, NADH:NAD+, Ac-CoA:CoA-SH, increase cyclicAMP

(c) Allosteric modification.
High ATP – negative on stage 1, negative on stage 2
High NADH – negative on stage 2
High ADP – positive on stage 2

TCA – anabolic/catabolic?

TCA – AMPHIBOLIC

Catabolic property = 2Ac-CoA is coverted into energy (ATP/NADH/FADH2), CO2 etc (Ac-CoA comes from carbohydrates/lipids/proteins)

Anabolic property = intermediates used in the biosynthesis

Heme synthesis – uses succinyl-CoA Cholesterol followed by steroids synthesis – uses Ac-CoA Long chain fatty acids synthesis – uses citrate flow from mitochondria (citrate is converted to Ac-CoA extramitochondrially) Aminoacid synthesis –

alpha-ketoglutarate – Arginine, Histidine, Glutamine, Proline, Glutamate fumarate – phenylalanine, tyrosine Succinyl-CoA – Valine, Isoleucine, Methionine oxaloacetate – Aspartate

AA that depends on pyruvate - Glycine, alanine, serine, cysteine/cystine, threonine, Hydroxy-Proline and tryptophan

ENERGY FROM Glucose (The net score)

1. Glucogenesis

in: *1glucose* out: 2ATP + 2NADH + *2pyruvate* (for glycogen 3ATP +2NADH +*2pyruvate*)

2. Pyruvate dehydrogenase complex

in: *2pyruvate* out: 2NADH + *2Ac-CoA*

3. **TCA**

in: 2Ac-CoA out: 6NADH + 2GTP/ITP + 2FADH2 ---- (energy currency rate) ----NADH = 3ATP (in electron-transfer chain) FADH2 = 2ATP (in electron-transfer chain) GTP/ITP = ATP (substrate level phosphorylation)

TOTAL SCORE

1glucose = 2 + 30 + 2 + 4 = 38ATP (39ATP for glycogen) AEROBICALLY!! (this is in case of Malate shuttle, 36 for alphaglycerophosphate shuttle)

1glucose = 2 ATP ANAEROBICALLY!

WHAT AFFECTS THE NET BALANCE OF ENERGY REACTION from glucose???

Transfer of compounds through membrane

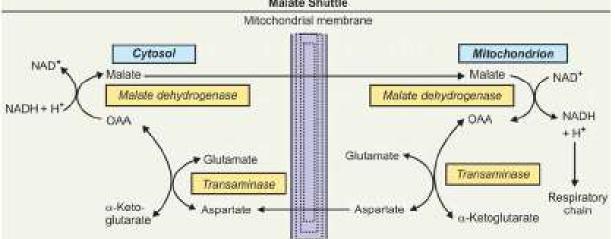
Glycolysis – extramitochondrial, pyruvate-to-AcCoA – intramitochondrial, TCA – intramitochondrial. NADH/FADH2 are utilized in electrontransfer chain (mitochondrial), so NADH from glycolysis should be transferred to electron-transfer chain. Mitochondrial membrane is not permeable for NADH!!!!

Shuttle systems ("brothers"-enzyme systems are present on both sides on mt membrane)

Trough transfer of Malate to mt/Aspartate from mt (theres intermediate of OAA and alpha-ketoglutarate)

Another way: Through transfer of glycerophosphate to mt (dihydroxeacetonephosph ate back). This shuttle uses FADH2-generating enzymes inside the mt – therefore there will be loss of energy during transfer.

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WHAT else uses shuttle systems? (Citrate shuttle – for Ac-CoA)



Effects

Pasteur effect –

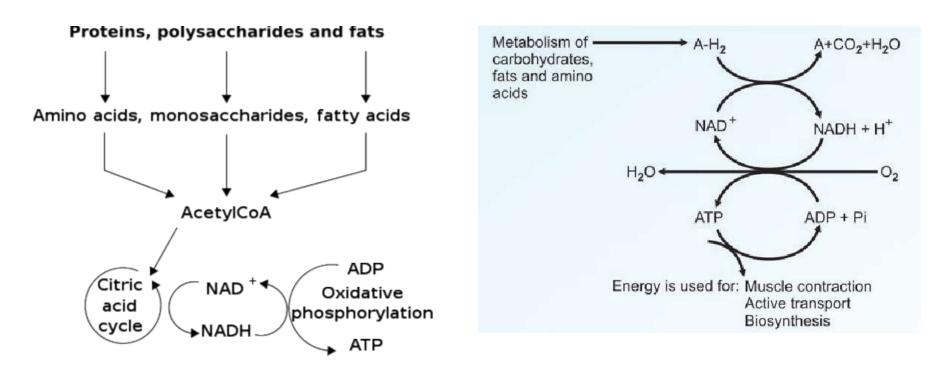
AERATION decreases glycolysis (less glucose is used by bacteria and less alcohol is formed) With working TCA a lot of ATP is formed – inhibits glycolysis at 1st stage

Biological oxidation and electron transfer chain

Metabolism

- 1. Primary digestion of macromolecular food into monomers
- 2. Secondary catabolization of monomers/derivatives
 - generation of O2 and reduced equivalents NADH, FADH2 (majorly in TCA)

3. Tertiary (internal respiration) – reduced equivalents go to electron transfer chain (ETC) and release energy, which is captured into ATP



Literature biochemistry

- 1. Lehninger Principles of Biochemistry (Nelson D.L., Cox M.M.)
- Principles and Techiniques of Biochemistry and Molecular Biology (Wilson K., Walker J.)