# Regulation of the metabolism

#### PRINCIPLES OF THE REGULATION OF THE METABOLISM: THEORETIC BASES

#### **ENZYMES -BIOCATALYSATORS**

HORMONES (Common mechanisms of the effect of hormones and neurotransmiters) RECEPTORS (Type of membrane receptors and intracelular receptors) ENZYMES VITAMINS METABOLIC REGULATIONS

# Hormones, Receptors, and Signal Transduction

General principles



- Higher organisms, from the fruit fly to humans, are comprised of cells.
- The cells often unite to form tissue which come together to form organs which together make up the organism.
- > Cells of an **organism** do not live in isolation.
- The communication between cells ultimately controls growth, differentiation, and metabolic processes within the organism.
- Communication between cells is often by direct cell to cell contact.
- Communication frequently occurs between cells over short and long distances.

# General principles cont...

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- In cases of short and long distance communication, a substance may be released by one cell and recognized by a different target cell.
- In the target cell, a specific response is induced.
- Cells use an amazing number of signaling chemicals.
  - These signaling molecules are termed "hormones."
- The ability of a hormone to induce a response in a target cell is usually mediated by a hormone receptor on, or in, the target cell.

# General characteristics of hormones

- Hormones are molecules synthesized by specific tissue. Classically these tissue were called glands.
- Hormones are secreted directly into the blood which carries them to their sites of action.
- Hormones are present at very low levels in the circulatory system.
- Hormones specifically affect or alter the activities of the responsive tissue (target tissue).
- Hormones act specifically via receptors located on, or in, target tissue.

# Hormone/Receptor Interaction Secondary Signals





pathobiochemistry - receptors

TEST

# Definitions

- Endocrine Refers to the internal secretion of biologically active substances.
- **Exocrine** Refers to secretion outside the body, for example, through sweat glands, mammary glands, or ducts lead to the gastrointestinal.
- **Hormone** Substances released by an endocrine gland and transported through the bloodstream to another tissue where it acts to regulate functions in the target tissue (classic definition).
  - Paracrine Hormones that act locally on cells that did not produce them.
  - Autocrine Hormones that act on cells that produced them.
- **Receptors** -Hormones bind to receptors molecules on cells. A receptor must specifically recognize the hormone from the numerous other molecules in the blood and transmit the hormone binding information into a cellular specific action.





# **Effects of signal molecules**

Name of the effect	Character of the effect	
endocrine	The signal molecule is carried by blood into the target cell, which is usually distant from the place of the synthesis. Typically hormones	
paracrine	The signal molecule is secreted into the ambient surroundings of the cell(local mediators). The signal molecule influences only the cells of the nearest surroundings.	
autocrine	The cell secretes the signal molecule and it is also a target. Features ale similer like paracrine effect.	

**Endocrine** – the signal molecule is carried by blood into the target cell, which is usually distant from the place of the synthesis. It is typical for hormones.

The concentration of the signal molecule in blood is very low (10-12-10-9 mol/l) – so target cell has a big affinity to the signal molecule – the binding hormone to receptor is very strong, hormone doesn't dissociate easy. Other feature is that it take definite time that the concentration of the hormone in blood will rise and the concentration of the homone in blood stays for definite time (a few minute or hour) rised.

**Paracrine**-The signal molecule is secreted into the ambient surroundings of the cell (local mediators). The signal molecule influences only the cells of the nearest surroundings. The concentration of the signal molecule in the surroundings of the cells is higher (10-9-10-6 mol/l). Affinity of the receptors to the signal molecule is lower – after decrease of the concentratrion in the surroundings of the cell, the signal molecule is separated. Paracrine signaling is determined for fast and localised communication between cells.

Autocrine – The cell secretes the signal molecule and it is also a target. Features ale similer like paracrine effect.

Juxtacrine-signalling between cells or cell and extracellular matrix require tight contact.

# **Common mechanisms of the effect of hormones and neurotransmiters.**

**Types signal molecules in the neurohumoral regulations:** 

Signal molecule	Source
HORMONES	secreted by endocrine glands, scattered glandular cells, eicosanoids a lot of other types of cells
NEUROHORMONES	secreted by neurons into the blood circulation
NEUROTRANSMITERS	secreted in the synaptic ending
CYTOKINES, GROWTH FACTORS, EICOSANOIDS	secreted by a lot of types of cells, usually not from endocrine glands

# Regulation of the metabolism is in the different levels, but always on the molecular base

**The Regulation of enzymatic reactions** is a central instrument of the regulation of the metabolism.

Regulation in the definite cellular compartment

Regulation in the complete cell

(proteome, specific receptors, izoenzymes, transporters, energetic state of the cell) Regulations followed from the **communication between cells** 

#### Levels of the regulation overlap.

#### **Regulation of the enzymatic activity**

• regulation of the **amount of enzyme** (synthesis and degradation)

• regulation of the activity of the enzyme (modification of the enzyme by proteolysis, covalent modification, allosteric regulation, interaction with the regulatory proteins)

• availability and concentration of the substrate (regulation of the transport)

#### TEST

The collective feature of all **substances with modulating effects** to the cells is their effect by receptors.

**Receptors** are allosteric proteins, which change their conformation after the bindind ligand. **Ligands** are signal molecules.

**Agonists** are ligands, where after the binding on the receptor cause the transduction of signal, **antagonists** after the binding on the receptor defend the signal transduction.

Receptors are localised on the **outer surface of the cytoplazmatic membrane or intracellulary**. In their structure there are two main components: (1) domain binding the ligand, which ensures the specifity of the binding with the relevant ligand; (2) effector domain, wich start a genesis of the biological answer after the binding of the ligand.

Activated receptor can enter into the reaction with other cellular components and realise the process of the signal transduction.

Tissues, whose cells have no molecules of the specific receptor, can't react to the relevant hormone.

Charakteristic feature of a transport of the signal by receptors is its **amplification**, when the only one molecule of the hormone is able to cause celullar answer with 104–105 times higher intensity.





TEST

# **Signal transduction**

# How does the cell take over the information carried by the chemical signal?

Reaction of the signal molecule with the receptor

**Membrane receptors** 

Proteins and smaller signal moleculs (peptides, amino acids, biogenic amins, eicosanoids) **Intracelular receptors** 

**Nepolar signal molecules** (steroids, jodthyronins, retinoats)





Nuclear receptors

estrogens

Cytoplasmic receptors Most steroid and thyroid hormones

> Cell surface membrane receptors Polypeptide hormones and catecholamines



A general model for the action of peptide hormones, catecholamines, and other membrane-active hormones. The hormone in the extra cellular fluid binds to the receptor and activates associated effector(s) systems, that may or may not be in the same molecule. This activation results in generation of an intracellular signal or second messenger that, through a variety of common and branched pathways, produces the final effects of the hormone on metabolic enzyme activity, protein synthesis, or cellular growth and differentiation.



# **Types of receptors**

Type of receptor	Ligand characteristics	Receptor characteristics	
Membrane	Big signal molecules (peptides and proteins) Small, strongly hydrophilic molecules (amonoacides and their derivates)	Intergral membrane proteins	
Intracellular	Small hydrophobic molecules (steroids, vitamin D, retinoids, thyroidal hormones)	Proteins in cytoplasm or in the nucleus	

# TESTMain types od membrane receptors

- **I. Receptors ion channels** (ROC, ligand-gated channels) only receptors for some neurotransmitters (ion channels controlled by neurotransmitters)
- **II. Receptors** interacting with **G-proteins** (heterotrimeric)

**III. Receptors** with its own catalytic activity

- a) guanylate-cyclase
- b) <u>proteinkinase</u>
- IV. Receptors cooperating with the non-receptor tyrosine kinases

(eg. JAK) – receptors for somatotropin (GRH), prolactin, erythropoietin, interferons, interleukins and other cytokines.

# Representation of various types of membrane receptors with examples of each type.



#### I. Receptors – ion channels

Receptors of the type of ion channels are present in the synapses, their ligands are neurotransmitters.

**Neurotransmitters - chemical signals**, enable the transfer of of nerve impulses between neurons or between a neuron and the target cell



#### synaptická štěrbina

- Neurotransmitter binds directly to the ion channel (ionotropic receptors) → electrical signal (neuron -neuron)
- The neurotransmitter binds to a receptor that generates second messenger (metabotropic receptors) → chemical signal (eg. smooth muscle)

#### TEST Membrane receptors for the neurotransmitters

**Ionotropic receptors - ligand-controlled ion channels** (ROC), e.g. excitatory **nicotinic acetylcholine** - channel for Na<sup>+</sup>/K<sup>+</sup>, glutamate (CNS, some afferent sensory neurons) - channel for Na<sup>+</sup>/K<sup>+</sup>/Ca<sup>2+</sup>,

inhibitory receptor GABAA (CNS) - channel for Cl-

Metabotropic receptors activating G proteins, e.g.

protein Gs adrenergic  $\beta 1$  a  $\beta 2$ , receptor GABAB, dopamine D1, protein Gi adrenergic  $\alpha 2$ , dopamine D3, muscarinic acetylcholine M2 (also opens K + channel),

protein Gq muscarinic acetylcholine M1, adrenergic α1.

#### TEST Neurotransmitters

There are more than 30 different neurotransmitters (amino acids, biogenic amines caused their transformation, or very large peptides).

**Examples:** 

#### In central nervous system

inhibitory **GABA** (minim. 50 % all synapses) **glycine** (prevails in the spinal cord) excitatory glutamate (more than 10%) acetylcholine (about 10%) **dopamine**(about 1 %, in striatum 15 %) serotonine histamine aspartate noradrenalin (less than 1 %, in hypotalamus 5 %) adenosine

Neuromodulation endorphins and enkephalins, endozepines, delta-sleep-inducing peptide etc. In peripheral nervous system

 <u>efferent neurons</u>

 excitatory acetylcholine

 noradrenaline

 <u>primary sensory afferent</u>
 excitatory glutamate

 (Aβ fibers, tactile)
 substantion P (peptide)
 (C Aδ fiber nociceptive)

# TESTMajor neurotransmitter receptors Acetylcholine receptors

Occurs at neuromuscular junctions of skeletal muscle and in almost all peripheral dendrites of efferent neurons. It consists of five subunits (2a, b, g,  $\epsilon$ ) penetrating the membrane. Acetylcholine is synthesized by the presynaptic neuron region of acetyl-CoA to choline and before release is stored in vesicles stored close to the active zone of the presynaptic membrane. Membrane also has the voltage-gated Ca2+ channels, which open when the action potential is expanded to the membrane. Increased levels of Ca2 + in the neuron endings activates the Ca + -dependent protein kinase, whichphosphorylates synapsin and other proteins, thereby effecting fusion of the vesicles with the presynaptic plasma membrane of and release acetylcholine into the synaptic cleft. Acetylcholine binds the two subunits and his binding causes a conformational change and short influx of sodium ions into the cell and potassium ions out of the cell. This causes depolarization of postsynaptic membrane. and if the threshold is reached, potential-dependent channels are opened for Na + and the action potential arises. Once acetylcholine secretion ceases, its concentration in the cleft decreases and acetylcholine stops to bind to receptors. Acetylcholine is decomposed by acetylcholinesterase, which is bound to the surface of the postsynaptic membrane.





#### TEST

# **Major neurotransmitter receptors**

# **Acetylcholine receptors**

Receptor	Nicotine	Μι	ıscarinic
		M <sub>1</sub> , M <sub>3</sub>	$M_2$
Mechanism of action	ion channel	Gq	G <sub>i</sub>
The second messenger		$DG + IP_3$	cAMP
occurrence	<ul> <li>autonomic ganglia neurons,</li> <li>neuromuscular junction,</li> <li>chromaffin cells of the adrenal medulla</li> </ul>	<ul> <li>brain,</li> <li>smooth muscle,</li> <li>glandular cells</li> </ul>	• myocardium, • brain
	tubocurarine		atropin



One nerve impulse <u>in the neuromuscular junction</u> releases approx. 300 vesicles, one contains about 40,000 molecules of acetylcholine; concentration of acetylcholine in the synaptic cleft rises to 10 000 times. The mediator is rapidly hydrolyzed by acetylcholinesterase.

# Acetylcholinestherase

- The hydrolysis of acetylcholine to acetate and choline
- It is a serine hydrolase



## Acetylcholinesterase inhibitors

• a) reversible: carbamates (physostigmine, rivastigmine, neostigmine)



b) irreversible: organophosphates (DFP, soman, sarin)



Binding of toxic organophosphates to cholinesterase is done in two stages: reversible can be affected by reactivators)

irreversible - formation of covalent bonds between enzyme and organophosphate

## Nicotinic acetylcholine receptor of the nicotine type

e.g. at the neuromuscular junction - Na + / K + ionophore: asymmetrical pentamer of four types of homologous subunits penetrating the membrane.



#### Acetylcholine (cholinergic) receptors in peripheral efferent neurons



# Ligands interacting with acetylcholine receptors of nicotine types

**D-tubocurarine** - **competitive antagonist** of acetylcholine, prevents the opening of ionophore (depolarization does not occur) paralysis of skeletal muscles pancuronium, vecuronium ad. - muscle relaxants during prolonged operations

**Succinylcholine -** agonist binds more efficiently than acetylcholine and depolarizes. The persistent depolarization leads to loss of electrical excitability of membrane. Short term myrelaxans.

**Botulotoxine** – protein complex from Clostridium botulinum. Inhibits the release of acetylcholine from the nerve endings.

**Nicotine -** binds to receptors in the peripheral and vegetative nervous system which controls the internal organs. Here causes increased activity of the digestive tract: increase of production of saliva and digestive juices and the increase in activity of smooth muscles. Also increases the production of sweat and may cause the contraction of pupil.

## **Muscarinic** cholinergic receptors

Туре	<b>Principle of action</b>	Location
M <sub>1</sub>	G <sub>q</sub>	Autonomic ganglia, CNS, exocrine gland cells
M <sub>2</sub>	G <sub>i</sub>	heart, K+ channels opening
M <sub>3</sub>	Gq	Smooth muscle
M <sub>4</sub>	G <sub>i</sub>	CNS
M <sub>5</sub>	Gq	CNS

The alkaloid atropin is antagonist of muscarinic receptors preventing acetylcholine binding.

# Adrenergic synapse

Neurotransmitter of most postganglionic sympathetic neurons is <u>noradrenaline</u>. Some nerves can be also influenced by adrenaline.



# Synthesis and storage of catecholamines

- Dopamine is synthesized in the cytoplasm
- Dopamine is transported into vesicles (ATP-dependent process, against concentration gradient).
- Final hydroxylation of dopamine to noradrenaline occurs in vesicles.
# **Adrenergic receptors**

Receptor	α1	α,	β <sub>1</sub>	β <sub>2</sub>
G-protein	Gq	Gi		Gs
Second messenger	$DG + IP_3$	cAMP↓	cAMP ↑	
Examples of location	• GIT smooth muscle (sphincters) and skin blood vessels (contraction)	<ul> <li>adrenergic and cholinergic nervous terminals (transmitter releasing inhibited)</li> <li>pancreas (glandular secretion inhibited)</li> <li>thrombocytes (agregation)</li> </ul>	• myocard (intensity and frequency of contractions increased)	<ul> <li>smooth muscle in the uterus, bronchi (relaxation)</li> <li>GIT smooth muscle (peristalsis)</li> <li>pancreas (glandular secretion inhibited activated)</li> </ul>

## TEST β-Adrenergic receptors



#### The typical effects of $\beta$ -stimulation

- $\beta 1$  tachycardia, inotropic effect in the myocard,
- $\beta 2$  bronchodilation, vasodilation in the bronchial tree,
- $\beta$  3 mobilization of fat stores, thermogenesis.

# TEST Adrenergic receptors $\alpha 2 a \alpha 1$

## $\alpha$ 2-receptors

#### al-receptors



#### The typical effects of adrenergic

 $\alpha$ 2-stimulation:

#### glandular secretion inhibited

#### $\alpha$ 1-stimulation:

vasoconstriction bronchoconstriction motility of GIT inhibited

#### **Inhibitory GABA**<sub>A</sub> receptor

Ligand-gated channel (ROC) for **chloride anions**. The interaction with  $\gamma$ -aminomáselnou kyselinou (GABA) opens the channel. The influx of Cl<sup>-</sup> is the cause of hyperpolarization of the postsynaptic membrane and thus it's depolarization (formation of an action potential) disabled.



heteropentamer containig 3 subunits

#### **Another binding sites of GABA receptor**



## **Another binding sites of GABA receptor**

More than eleven <u>allosteric modulation sites</u> for substances increasing the effect of endogenous GABA (calming down, reduction of anxiety and myorelaxation): anesthetic, ethanol and numerous drugs such as benzodiazepines meprobamat and also various barbiturates.

On the contrary, another ligands compete for benzodiazepine binding site or act also as the **antagonists** of GABA (inverse agonists),  $\Rightarrow$  causing unease and anxiety (e.g. endogenous peptides called endozepines).

In brainstern and spinal cord, **glycin** has a similar function to GABA in brain. The inhibitory effect of glycinergic synapses is blocked by strychnine alkaloid, known seizure poison.

## Inhibitory GABAergic synapse

 $\gamma$ -Aminobutyric acid(GABA) is the main inhibitory neurotransmitter in CNS. Gabaergic synapses represent about 60 % of all brain synapses.



#### **Receptors of the most important neurotransmitters**

Ion channels (ROC)	Receptors associated with G-proteins         Gs (increasing cAMP)       Gi (decreasing cAMP)       Gq (increasing IP3 / DG)			
<u>Na+/K+</u> – acetylcholine nicotinic	_	acetylcholine muscarinic M2,4	acetylcholine muscarinic M1,3,5	
—	adrenergic β1,β2,β3	adrenergic α2	adrenergic α1	
<u>Na<sup>+</sup>/Ca<sup>2+</sup>/K<sup>+</sup></u> – glutamate ionophores	_	glutamate mGluR skupiny II a III	glutamate mGluR class I	
_	dopamine D1,5	dopamine D3,4	dopamine D2	
– serotonin 5-HT3	serotonin 5-HT4,6	serotonin 5-HT1	serotonin 5-HT2	
_	histamine H2	histamine H3,4	histamine H1	
_	_	—	tachykinin NK1 for substance P	
<u>C</u> – GABAA – glycine	GABAB (metabotropic)	_	_	

# **II. Receptors interacting with heterotrimeric G-proteins**

#### **Common structural features:**

All of them have seven hydrophobic  $\alpha$ helical domains, penetrate the mambrane and connect extra- and intracellular loops.

Few minutes

Neurotransmitters

Hormones

Agonist-ligand causes signale transduction

Antagonist- prevents

**Intracellular domains** bimding site for **interaction with G-protein of** <u>single</u> <u>specific type.</u> **Binding site for agonist**(binding sites for antagonists are also present)





# **Heterotrimeric G-proteins**

#### Proteins binding GDP or GTP

Mostly freely bound to cytoplasmatic membrane – thev can move along its inner surface.

Subunits  $\alpha$ ,  $\beta$  a  $\gamma$ .

Subunits Gβ and Gγ are hydrophobic and are not <u>specific</u>.

Identified more than 20 types of different  $G\alpha$  subunites.



Subunits  $G\alpha$  are the biggest, bind GDP or GTP and are <u>specific</u> for every type of transduction mechanism.

# Heterotrimeric G-proteins activation cycle by interaction with receptor-specific ligand complex





# **Chosen types of G-proteins**

Type of Gα subunit	Examples of activating receptor	Effect of activated Gα To target protein (intracellular signal)
Gα <sub>s</sub> (stimulating)	glucagon parathyrine β-adrenergic	Adenylatecyclase stimulation (cAMP, Ca2+)
$G\alpha_i$ (inhibitory)	somatostatin $\alpha_2$ -adrenergic	Adenylatecyclase inhibition (cAMP, K+)
$G\alpha_q$ (activating PI cascade)	vasopressin V1 endothelin ETA,B acetylcholine M1 α <sub>1</sub> -adrenergic	phospholipase C stimulation (DG+IP3, Ca2+)
Gα <sub>t</sub> (inhibitory) (transducin)	rhodopsin pathobiochemistry-receptors_1	phosphodiesterase cleaving cGMP stimulation 53

# Receptors activating G<sub>s</sub> and G<sub>i</sub> stimulate or inhibit adenylatecyclase

Adenylatecyclase - membrane enzyme catalysing reaction ATP  $\rightarrow$  cAMP + PP<sub>i</sub>;

cAMP is second messanger.

TEST



#### **Effects of cAMP in cells**



Protein phosphorylation.

In cytoplasm- most often metabolic enzymes (fast response)

In nucleus–gene specific transcription factor CREB (cAMP response element-binding protein) phosphorylation (pomalejší odpověď)

cAMP provides many different effects in the cell.

One of the most important effect is **proteinkinase** A activation, which phosphorylates many others metabolic enzymes. The effects of kinases can by aimed for certain proteins phosphorylation. That is maintained by specific proteins binding kinases. In the case of proteinkinase A, it is about so called AKAPs (A kinase anchoring proteins), which serve as supporting structure and localize proteinkinase A position near by certain substrate, which is supposed to be phosphorylated and at the same time, their spontaneous aktivity is reduced.

Proteinkinase A is heterotetrameric molecule, containing two regulatory and two catalytic subunits. In inactive state, subunits are bound to each other. cAMP binds regulatory subunits causing their separation from catalytic subunits, which become active and catalyze phoshate transmission from ATP to serine or threonine residues of target proteins. Proteinkinase A catalytic subunit also enters the nucleus where prosphorylate gen specific transcription factors so called CREB (cyclic AMP response element-binding protein). CREB binds cAMP-responsive element in unphosphorylated state and is poor transcription activator. After phosphorylation by proteinkinase A, CREB bind coactivator CBP (CREB-binding protein) causing transcription amplification. Some bacterial toxins modify G-proteins effect. Cholera is an infectious intestinal disease causing severe life threatening diarrheas. Diarrhea is caused by enterotoxin produced by bacteria Vibrio cholera. Choleratoxin is protein causing by its effect inhibition of GTPasa activity of Gs protein subunit. Modificated  $\Box$ s subunit is "frozen" in active state continually producing cAMP. cAMP effect is active channel for Cl- in intestinal cell membrane and its effect causes chloride ions and water secenation to intestinal lumen. Inhibitory G-protein is the target of pertusis toxin effect, which is produced with whooping cough by bacteria *Bordetella pertusis*. The result is Gi protein inactivation and cAMP overproduction.

Besides proteinkinase A activation and proteins phosphorylation, cAMP or cGMP can bind also ion channels influencing their permeability. Those mechanisms find its use especially in activation of olfactoryatandervisual perceptions. 56

## Examples of hormones effecting through PAK activation

Hormone	Localization of the effect	
CRH	Adenohypophysis	
TSH	Thyroid follicle	
LH	Testicular Leydig cells, yellow body (corpus luteum)	
FSH	Ovaria follicle cells, testicular Sertoli cells	
АСТН	Adrenal cortex	
ADH	Kidney distale tubule cells	
PGI <sub>2</sub>	Thrombocytes	
Adrenaline, noradrenaline	β - receptors in many cells	
glukagon	Livers	

# **III.** Receptors activating G<sub>q</sub> protein stimulate phospholipase C triggering phosphatidylinositol cascade



**III.** Receptors activating G<sub>q</sub> protein stimulate phospholipase C triggering phosphatidylinositol cascade



**Both products are second** "messengers": Inositol-1,4,5-trisphosphate opens Ca<sup>2+</sup> channel in ER membrane, diacylglycerol activate membrane proteinkinase C.



#### **Phosphatidylinositol cascade**



ligand controlled Ca<sup>2+</sup> ion channel

## Regulation of metabolism by cytoplasmatic Ca<sup>2+</sup> concentration changes

•Basal Ca<sup>2+</sup> concentration in cytoplasm ~  $1.10^{-7}$  mol/1

•Concentration increasing to ~  $1.10^{-6}$  fast and effectively activates different cellular process

•Ca<sup>2+</sup> increasing may be caused by

Ca<sup>2+</sup> influx through cytoplasmatic membrane (e.g. Smooth muscle contraction)

releasing from intracellular supplies (ER, mitochondrie) e.g.  $IP_3$  dependent  $Ca^{2+}$  channel in ER or ryanodine channels in skeletal and cardiac muscle

#### **Regulatory protein calmodulin**

Increasing  $Ca^{2+}$  level activates numerous <u>Ca<sup>2+</sup>-dependent</u> proteins forming family of small calcium dependent proteins.

The most important is **calmodulin** which is present in almost all cells.



 $Ca^{2+}$  binding to calmodulin (4 binding sites) changes its conformation and activates its interaction with another proteins, e.g. kinases, phosphatases and others.

Some of Ca-calmodulin-dependent kinases are highly specific, others have wide substrate specificity. pathobiochemistry

# Examples of hormones effecting through phosphatidylinositol system activation and PKC

Hormone	Localization of the effect
TRH	Adenohypophysis
GnRH	Adenohypophysis
TSH	Thyroid follicle
Angiotensin II/III	Adrenal cortex
	(zona glomerulosa)
Adrenaline	$\alpha_1$ - receptors

# **III. Receptors with enzymatic activity**

# **III. A) Receptors with guanylatecyclase activity**

After ligand binding transform GTP to cGMP

cGMP is second messenger

Activates proteinkinase G

Two kinds of receptors:

•membrane

•cytoplasmatic

cGMP can be also second messenger. Unlike adenylatecyclase, guanylatecyclase isn't activated by G-proteins.

There are two different types of guanylatecyclase: membrane bound enzymes activated dirrectly by extracellular ligands and soluble enzymes in cytoplasm, reacting to small diffusible molecules. Both types of quanylatecyclase are located in vascular smooth muscle cells.

#### TEST

#### **Membrane** receptors with guanylatecyclase activity



Receptors for ANP

Present especially in vascular smooth muscle and in kidneys

ANP is secentated by myocytes atria as a response to increasing of blood volume or pressure

#### proteinkinase G inactive

р

Membrane bound enzyme is receptor for natriuretic peptides (ANP, BNP, urodilatin). Receptor contains extracellular domain for ligand binding, simple transmembrane helix and intracellular guanylatecyclase domain. Guanylatecyclase activity is initiated by ANP binding to extracellular domain. Likewise cAMP and cGMP has effect through proteinkinase activation.

This kinase is called proteinkinase G according the convention. Natriuretic peptides receptors are localized in vascular smooth muscle, kidneys and other tissues. ANP is secentated by myocytes atria as a response to increasing blood volume or pressure in right atrium causing vasculature relaxation. That leads to decrasing of total peripheral resistance and improving of local blood flow. In kidneys, causes dilatation of afferent and narrowing of efferent glomerular arteriole and relaxation of mesangial cells. Glomerular capillary pressure and glomerular filtration are increased and that leads to increased sodium and water excretion.

#### **<u>Cytoplasmic</u>** receptors with a guanylatecyclase activity



The receptor is dimeric and a binds hem

NO is bound to the hem, its bond rises a catalytic activity of guanylatecyclase NO is generated by nitroxide synthase (NOS)

NO goes through by membranes easily, it can be generated also by other cells and to the target cell penetrates by diffusion.

#### Soluble guanylatecyclase

Soluble guanylatecyclase is in the cytoplasm of many cells. It is a dimeric molecule with a hem. It binds NO which causes in its structure conformation changes and rise its enzymatic activity. NO is synthetised by nitroxide synthase (NOS) from arginine. It can be also generated in organism from some exogenous compounds (NO donors), for example nitroglycerine, nitropruside. cGMP is degradeted by a few types soluble or in membrane bound cGMP phosphodiesterases. Inhibitors of cGMP phosphodiesterases cause also an increase of cGMP and prolong relaxation of smooth muscles.

## Proteinkinase G

cGMP sensitive proteinkinase G

It is spread in a lot of tissues

It phosphorylates different proteins (enzymes, transport proteins and so on)

#### **Effect of PKG in smooth muscles**

Phosphorylation of proteins:

- inactivation of proteins which promote releasing of Ca^{2+} from ER  $\Rightarrow \downarrow$  Ca^{2+}

- activation MLC phosphatase  $\Rightarrow$  inhibition of an actin-myosin interaction
- •Decrease of an activity of K<sup>+</sup>-channels which promote hyperpolarization  $\Rightarrow$  decrease of an influx Ca<sup>2+</sup> into the cell



# Meaning of NO/cGMP signalization in smooth muscles of vessels

cGMP is a crucial second messenger for an induction of relaxation of smooth muscles in vessels

 $\Rightarrow$  vasodilatation and increase flow of blood

NO is produced in endotel cells by nitroxide synthase from arginine (activation for example by acetylcholine) and diffuses into adjacent cells of smooth muscle



#### Drugs like organic nitrates are a source of exogenous NO



Therapy of angina pectoris

Vasodilatation effect to arteries releases coronary spasm and normalise a perfusion

## Inhibition of phosphodiesterase potentiates the effect of NO



There are more types of phosphodiesterases, depending in a type of cells.

Drug sildenafil (Viagra) is selective inhibitor of phosphodiesterase 5 (PDE5) which is highly expressed in smooth muscles of vessels. Viagra promotes the effect of NO $\cdot$  which is released during sexual stimulation by inhibition of PDE5 and rises a concentration of cGMP in *corpora cavernosa*. The result is a relaxation of smooth muscle in vessels and perfusion of *corpora cavernosa*.

# **III. B) Receptors with tyrosinkinase activity**

#### **Collective features**

•binding of the signal molecule to the receptor causes conformation changes

•tyrosinkinase activity of receptor is activated

• it caused autophosphorylation of tyrosine of receptor alternatively other proteins (IRS)

•other proteins (adapter molecules) bind to the phosphorylated receptor and substrates phosphorylated by the receptor

• adapter proteins bind to phosphotyrosine residue by SH2 domains (Src homologs of 2 domains).

• adapter proteins react with other molecules and a signal is carried by a cascade of phosphorylation/dephosphorylation reactions by changing of guanine nucleotides, conformation changes and so on.

Membrane receptor family with a tyrosinkinase activity is formed by receptors **for growth factors and insulin**. Growth factors stimulate mitosis, cell differentiation, migration of cells and apoptosis. Insulin stimulate an utilization of nutrients. Collective feature of receptors is intracellular tyrosinkinase domain.



For example IGF-1 (insulin-like growth factor-1)

receptor; EGF (epidermal growth factor) receptor; PDGF (platelet-derived growth factor) receptor belong into the subfamily with a tyrosinkinase activity.

# **Insulin receptor**

#### **Dimeric structure**

Binding site for insulin on  $\alpha$ - subunits Tyrosinkinase activity on  $\beta$ -subunits

Insulin

β

P.

Insulin binding to the receptor  $\rightarrow$  tyrosinkinase activity autophosphorylation of  $\beta$ -subunits and **phosphorylation of proteins IRS 1**-(insulin receptor substrates 1-4)

Binding insulin to the receptor causes internalization of complex hormon receptor, receptors are partially recyclated

P--P IRS1-4 P PI-3-kinase binding to the membrane activation of phosphoproteinphosphatase-1 pathobiochemistry-receptors activation Ras – expression of genes



#### **Insulin receptor**

Insulin receptor is in membranes like a dimmer. Each monomer consist of extracellular subunit  $\alpha$  and integral membrane subunit  $\beta$ . Subunits  $\alpha$  a  $\beta$  are connected by disulfide bond and disulfide bond is also between monomers. Binding sites for insulin are on  $\alpha$  subunits. Subunits  $\beta$  include domains with own tyrosinkinase activity. After bindind insulin  $\beta$  subunits phosphorylate themselves.



http://www.abcam.com/index.html?pageconfig=resource&rid=10602&pid=7

The substrates of the insulin receptor IRS1-4 are **adapter proteins**. If the insulin-receptor complex phosphorylated these proteins, they follow more proteins and activate them so.

#### **Examples mechanism of action of insulin receptor**

#### **Glycogen synthesis**

Phosphorylation of IRS activates the regulatory subunit of PI 3-kinase

The catalytic subunit of PI3-kinase phosphorylates PIP2 to PIP3

PIP3 activates protein kinase B (AKT) activation of PKB (ACP) helps PDK

Activated Akt diffuses into the cytoplasm and foforylates (inactivates) glykogensynthasa kinase

Glycogen synthesis is activated (the active form of glycogen synthase is dephosphorylated) Translocation of glucose transporters

Insulin receptor phosphorylates CBI (IRS)

**CBI-CAP** complex translocates into lipid raft membrane

CBI is reacted with an adapter proteinCrk Crk associated with C3G

C3G activates TC10 (G-protein)

Activates the translocation of transporters into the plasma membrane

#### The receptor for epidermal growth factor EGF

Receptor with tyrosine kinase activity

Once ligand binding occurs receptor dimerization



This activates the tyrosine kinase activity in the cytoplasmatic domain.

Receptor autophosphorylation

The phosphorylated sites bind Grb2 adapter protein (SH-2 domains).

Through SOS protein is activated by G-protein Ras  $\rightarrow$  aktivace MAP-kinase cascade (Ras / MAP-cascade)
# Ras is a monomeric G-protein (structural analogue α -subunits)

Monomer G-protein - binds GTP and has simultaneously GTPase activity. Activated GTP binding site GDP



Activation of Ras - a key step in signal transduction. Inactive Ras-GDP switches to active Ras -GTP, which activates another member of the pathway. Inactivation of Ras - subsequent hydrolysis of GTP by using activating protein GTPase activity of G-protein

# **Ras superfamily proteins**

- 5 families: Ras, Rho, Arf, Rab, Ran
- Anchored to the lipid membrane by lipid anchors (myristoyl, farnesyl)
- Monomer G-proteins, which play an important role in regulating growth, morphogenesis, cell motility, cytokinesis like.

Mutations in the Ras genes induce proliferation and pathologic antiapoptosis. Ras Mutations occur in about 30% of all human cancers.

### **MAP-kinase signaling pathway (Mitogen activated protein kinase)**

Described 3 systems, the most famous ERK.



## The mitogens - growth factors supporting the proliferation

#### Examples of mitogen:

Abbreviation	Name	Function
PDGF	Derived Growth Factor platelet	mitogen for connective tissue cells and undifferentiated neuroglia
EGF	Epidermal growth factor	mitogen series of cells of mesodermal origin and ectodermal
FGF-2	Fibroblast growth factor 2	mitogen for a variety of cells such as fibroblasts, endothelial cells, myoblasts; induces embryonic mesoderm
IL-2	Interleukin 2	mitogen for T-lymphocytes

## **Receptors with a serine / threonine kinase activity**

The ligand is e.g. transforming growth factor-  $\beta$  (TGF-  $\beta$ )



regulation proteins

## теят IV. Receptors activating non-receptor tyrosine kinase

JAK-STAT receptors (Janus Kinase – Signal Transducer and Activator of Transcription)



Receptor has kinase activity, but is associated with the tyrosine kinase JAK. After ligand binding receptors dimerize (homodimers or heterodimers) Activated somehow phosphorylate tyrosine residues on the receptor. The sites phosphorylated adapter proteins bind STAT (using SH2 domains) STAT are phosphorylated and dimerize.

STAT dimers translocate to the nucleus, where they act as transcription factors

# JAK-STAT receptors - a family of receptors for cytokines \* (e.g.interferons, interleukins)

Diverse cytokine effects are caused by the existence of large amounts of STAT proteins Receptors for various cytokines bind the various states which produces heterodimers in different combinations Thus, it is possible that different cytokines affect different genes

Receptors cooperating with the JAK-STAT also have prolactin, erythropoietin ad.

\* Cytokines - small signaling proteins involved in the immune response significantly. They are produced by immune cells (macrophages, T-cells etc.) and are capable of inducing such as rapid division and differentiation of certain cell types involved in the fight against pathogens and other features of the immune defense

## **Control Membrane Receptors**

Regulation by changing the number of receptors (down regulation, up-regulation)

Control properties receptor (desensitization)

#### For example: desensitization of β-adrenergic receptor

Upon binding of the ligand to the receptor activates BARK ( $\beta$ -adrenergic receptor kinase)

The cytoplasmic portion of the receptor molecule, the phosphorylation The phosphorylated site binding arrestin protein that inhibits the ability to activate G-protein

## TEST Intracellular receptors

## Steroid hormones, calcitriol, and iodo thyronine Retinome

Receptors are located in the cytoplasm or in the nucleus The hormone-receptor complexes bind to specific DNA sites and serve as transcription factors Hormone-receptor complex to the DNA binding site HRE (hormone response element) Superfamily of steroid and thyroid receptors - a family of structurally related proteins. Activation of transcription is a slower process, a response delay

# Example cortisol (glucocorticoid GK, their receptors GR)

cortisol in the extracellular space transmitted CBG (corticosteroid-binding globulin) hydrophobic molecule penetrates the cell hormone



**Dimeric complex cortisol receptor in the nucleus continues to site-specific dsDNA sequences of GRE** (glucocorticoid response element), i.e. on the HRE (hormone response element) specific to glucocorticoids.



## **Initiation of transcription cortisol**

Active complex cortisol receptor **binds to DNA** in a sequence-specific site **GRE** (glucocorticoid response element, one of the many HRE - hormone response elements). Complex itself, however, hormone-receptor **binding to DNA** and affect transcription is not capable. Connects to a specific coactivator proteins **GREB**(glucocorticoid response element-binding proteins). This complex via **mediator proteins** builds upon the basal transcriptional apparatus to the promoter and initiates transcription.

pathobiochemistry - receptors



#### TEST

#### **Overview of the most important neurotransmitter receptors**

### **Cholinergic synapsis**

Receptor	Nicotine	Muscarinic	
Mechanism of action	Ion channel	$\begin{array}{cccc} M_1, M_3, M_5 & M_2, M_4 \\ G_q & G_i \end{array}$	
Second messenger	-	$DG + IP_3$ cAMP	
Location	<ul> <li>•autonomic ganglia neurons</li> <li>•neuromuscular junction</li> <li>•chromaffin cells of the adrenal medulla</li> </ul>	<ul> <li>Brain</li> <li>Smooth muscle</li> <li>Glandular cells</li> <li>Myocardium</li> <li>Brain</li> </ul>	
Block receptor	Tubokurarine	Atropine	

Adrenergic synapses		TEST				
Receptor	or $\alpha_1$		α2	β1	β2	
G-protein	n G <sub>q</sub>		G <sub>i</sub>	Gs		
Second messenger	$DG + IP_3$		cAMP	cAMP		
Examples of location	•smooth muscles of the GIT (sphincters) and skin blood vessels (contraction)		<ul> <li>adrenergic and cholinergic nerve endings (inhibition of transmitter release)</li> <li>pancreas (exocrine secretion inhibition)</li> <li>platelets (aggregation)</li> </ul>	<ul> <li>•myocardium</li> <li>(increase in strength and frequency of contractions)</li> <li>•smooth muscle of the uterus, bronch (relaxation)</li> <li>•smooth muscle of GIT (peristalsis)</li> <li>•pancreas (exocrisis)</li> </ul>		

The action of the neurotransmitters in the autonomic nervous system						
System	Parasympaticus		Syn	Sympaticus		
Mediator	Acetylcholine		Acetylcholine		Noradrenaline	
Receptor	nicotine	muscarine	nicotine	muscarine	$\beta_{1,}\beta_{2},\alpha_{2},\alpha_{1}$	
Location	•dendrites ganglion neurons	•membrane s of target cells	<ul> <li>chromafinní buňky dřeně nadledvin</li> <li>dendrity neuronů ganglií</li> </ul>	•sweat glands	•membranes of target cells	