

Chapter 2-II:

Glucose Catabolism

Control of glycolysis

Different tissues control glycolysis in different ways

3 kinase reactions: large negative free E changes

HK

PFK

PK

Table 14-1 $\Delta G^{\circ'}$ and ΔG for the Reactions of Glycolysis in Heart Muscle^a

Reaction	Enzyme	$\Delta G^{\circ'}$ (kJ · mol ⁻¹)	ΔG (kJ · mol ⁻¹)
1	Hexokinase	-20.9	-27.2
2	PGI	+2.2	-1.4
3	PFK	-17.2	-25.9
4	Aldolase	+22.8	-5.9
5	TIM	+7.9	~0
6 + 7	GAPDH + PGK	-16.7	-1.1
8	PGM	+4.7	-0.6
9	Enolase	-3.2	-2.4
10	PK	-23.0	-13.9

^aCalculated from data in Newsholme, E.A. and Start, C., *Regulation in Metabolism*, p. 97, Wiley (1973).

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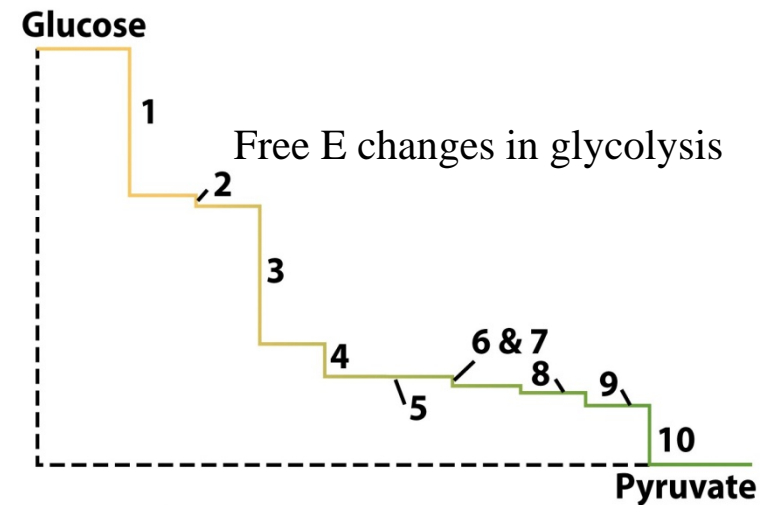


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PFK: the major flux controlling enzyme in muscle

HK is not required when glycogen is a source for glucose

Tetrameric enzyme in R & T conformations

Allosteric inhibitors: ATP (at regulatory site)

Allosteric activators: F26BP, ADP, AMP

AMP and ADP overcome the ATP inhibition

Low metabolic demand: high ATP & PFK inhibition

High metabolic demand: low ATP & PFK activation

Metabolic demand variation: 100-fold level but [ATP] variation is <10%

In muscle $[ATP]/[ADP] = \sim 10$ & $[ATP]/[AMP] = \sim 50$,
meaning greater fluctuation in [ADP] & [AMP]



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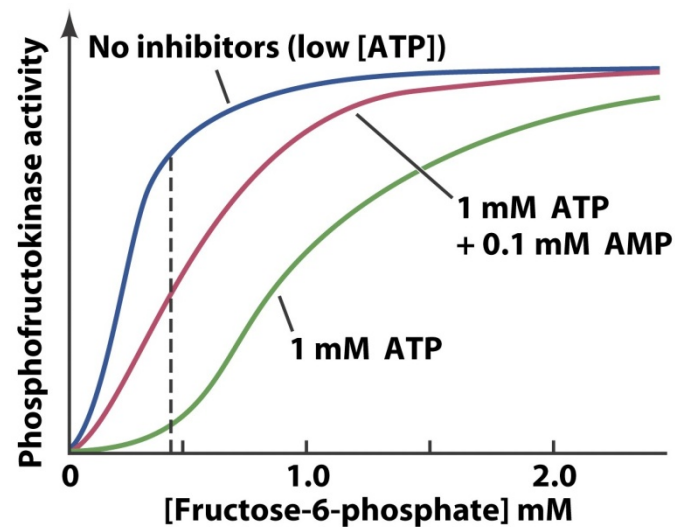


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Allosteric changes (T, blue)

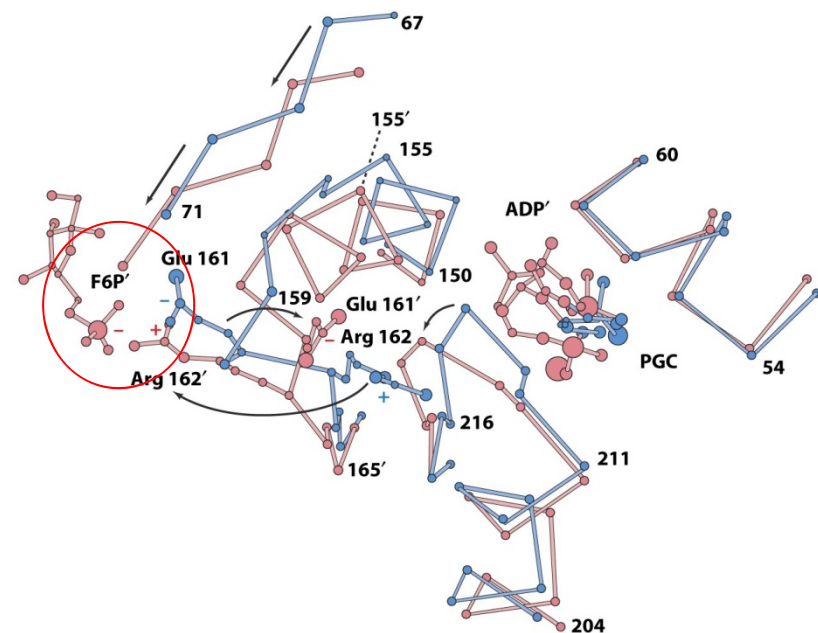


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Substrate cycling

Futile cycle? (net reaction: ATP hydrolysis by the combined actions of PFK & FBPase)

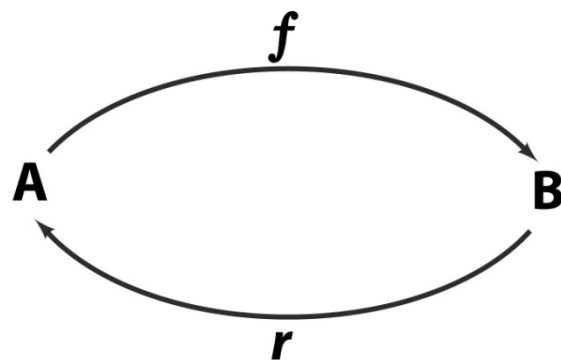
Additional control of PFK

greater **fractional effect** on pathway flux ($v_f - v_r$)
than allosteric control on a single enzyme (ex. F26P activates PFK but inhibits FBPase)

does not increase the maximum flux, but decrease the minimum flux
holding pattern (energetic price for rapid change from a resting to active state)

Generation of body heat (nonshivering thermogenesis)

substrate cycling is controlled by thyroid hormones, which stimulate metabolism
cold sensitive and obesity



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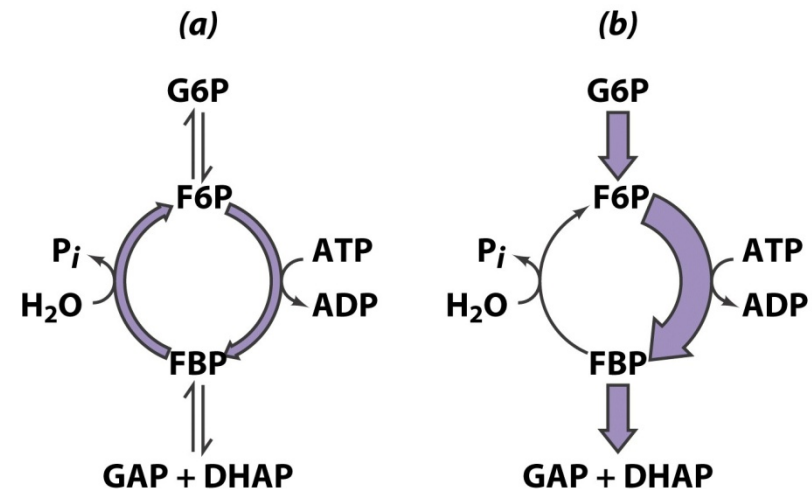


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Metabolism of hexoses other than glucose

Fructose, galactose, mannose

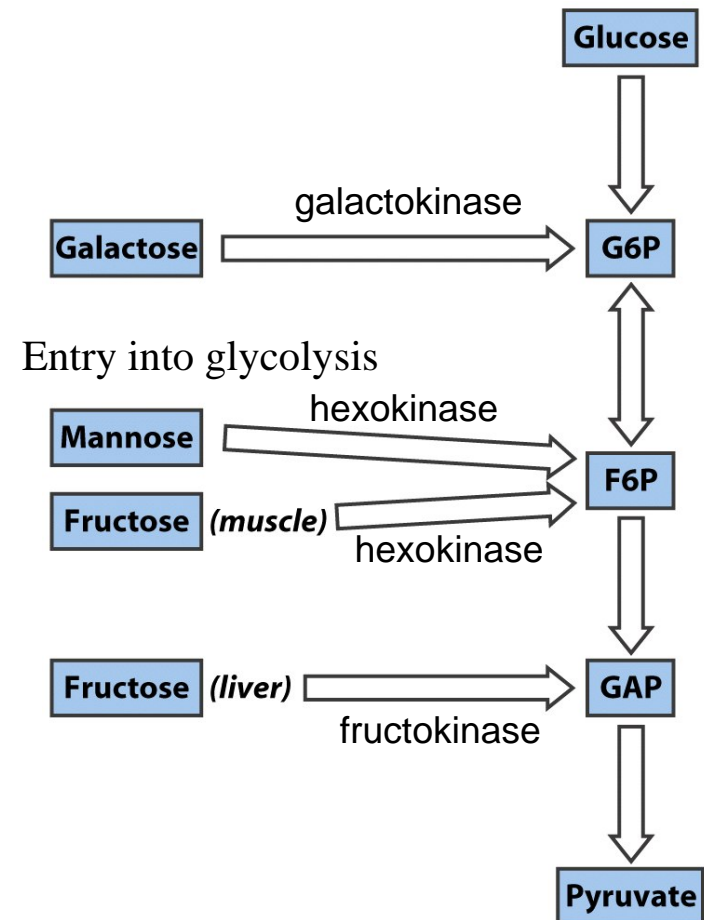
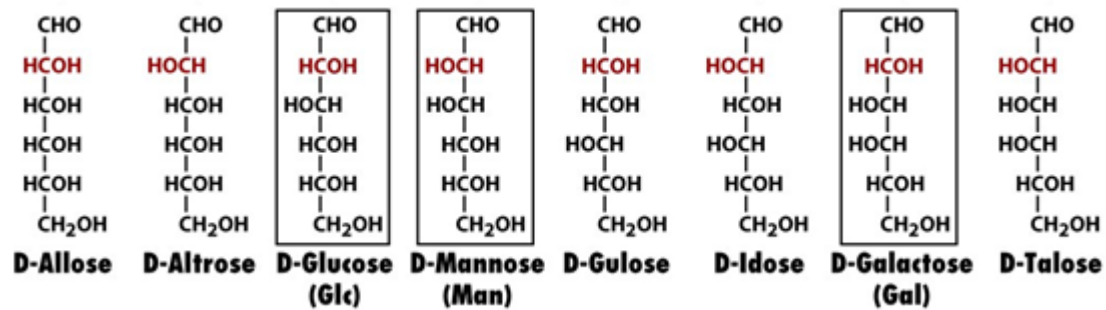


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Fructose

A major fuel in diets

Different metabolism in muscle and liver

Increasing fructose consumption

High fructose as a sweetener

Harmful? Bypass of PFK control

may be directed to lipid synthesis
in low ATP demand

Fructose intolerance

deficiency of type B aldolase: accumulation of F1P

depletion of liver Pi

[ATP] drop

liver damage

causing hypoglycemia, because [F1P] inhibits

glycogen phosphorylase & FBPase

However, the deficiency develops distaste

for sweet

Aldolase A: muscle

Aldolase B: liver

Aldolase C: brain

A&C prefer FBP, while B both

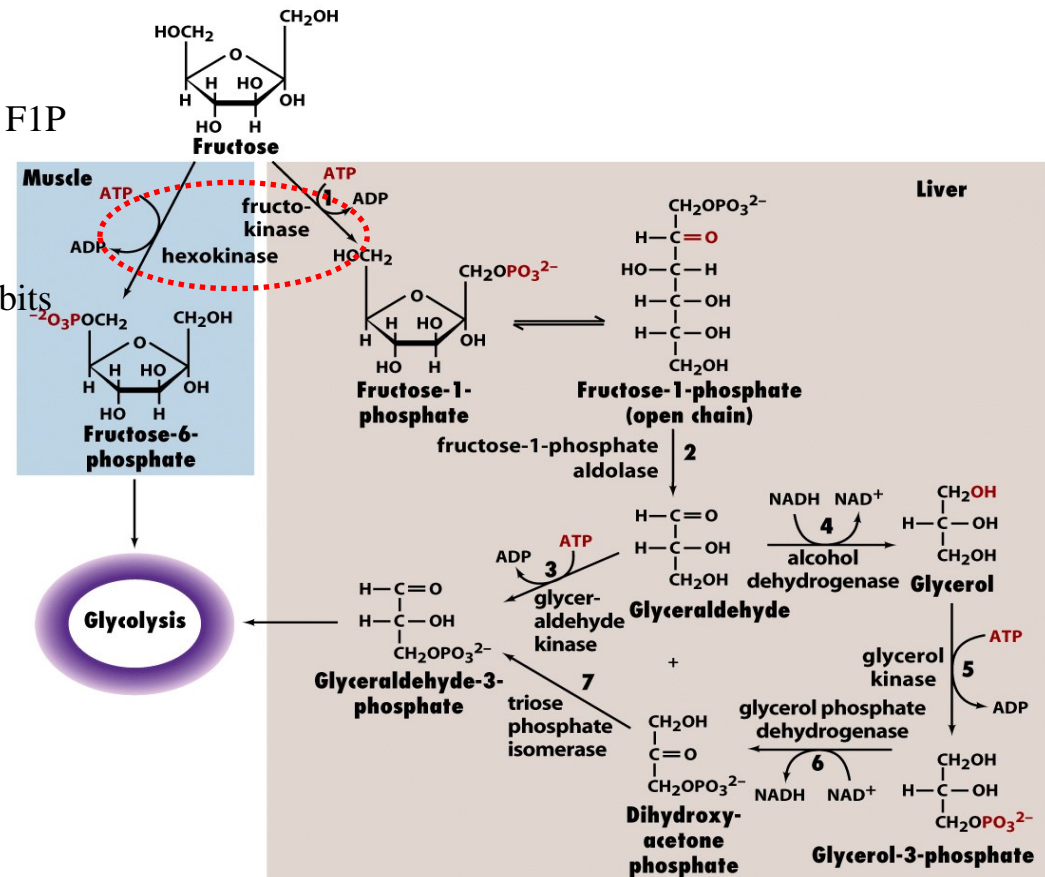


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Galactose

Lactose hydrolysis

Epimerization to glucose

Galactosemia: mostly deficiency in G1PUT

High galactose in blood: reduction to galactitol

cataract

mental retardation

liver damage

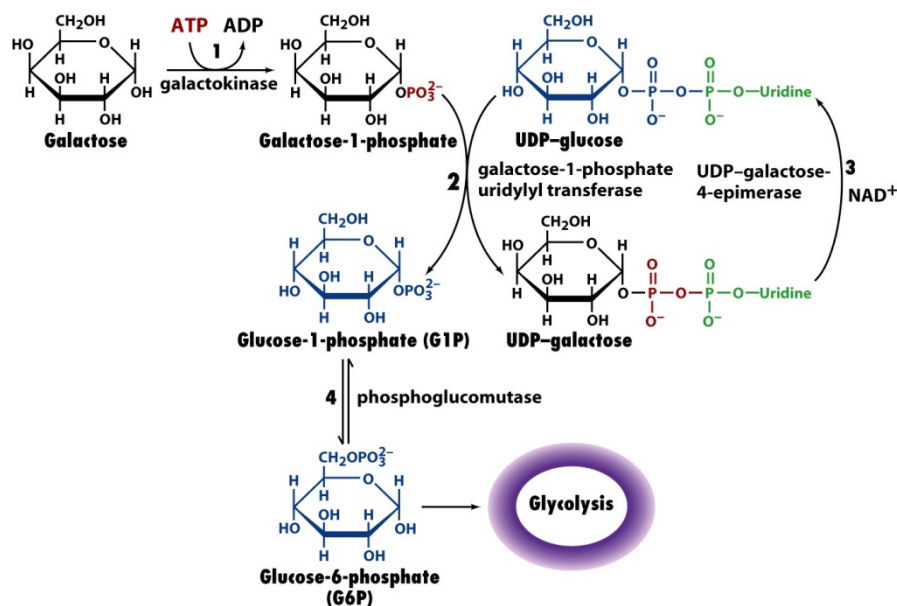
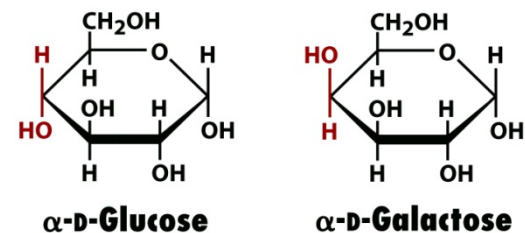
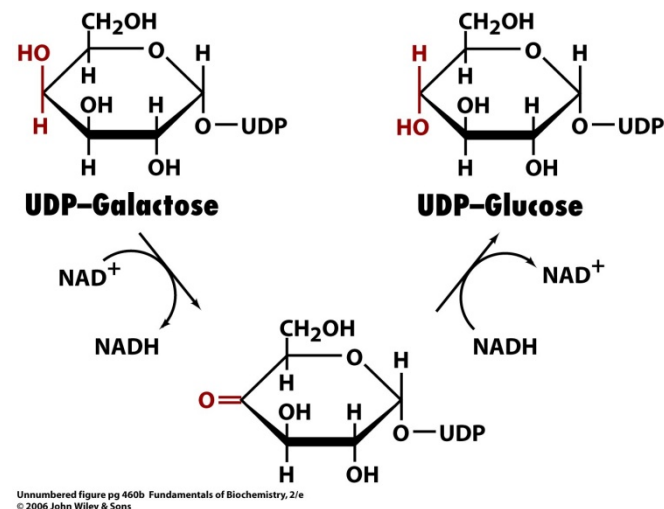


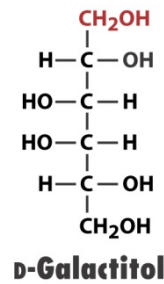
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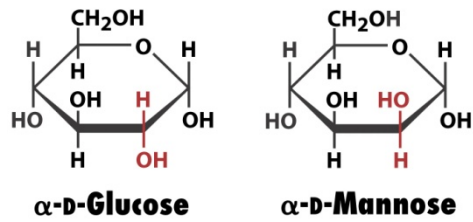


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Mannose



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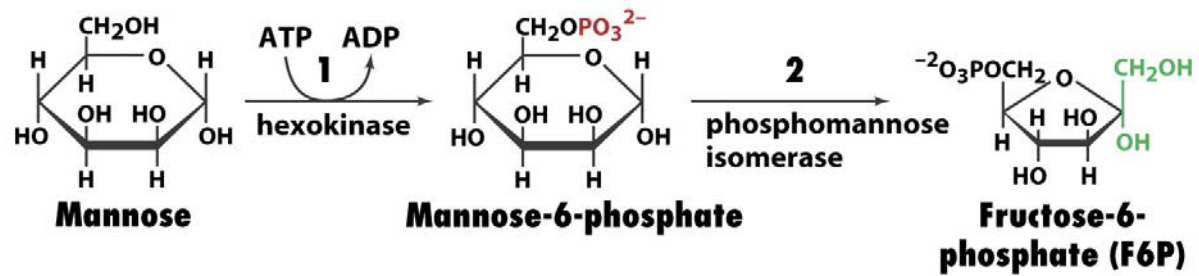


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Glucose in diabetes

Aldose reductase

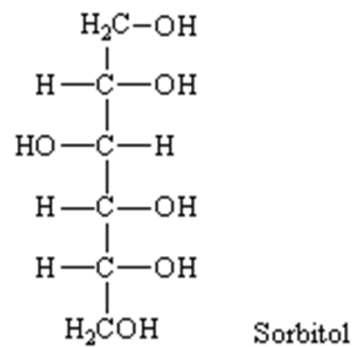
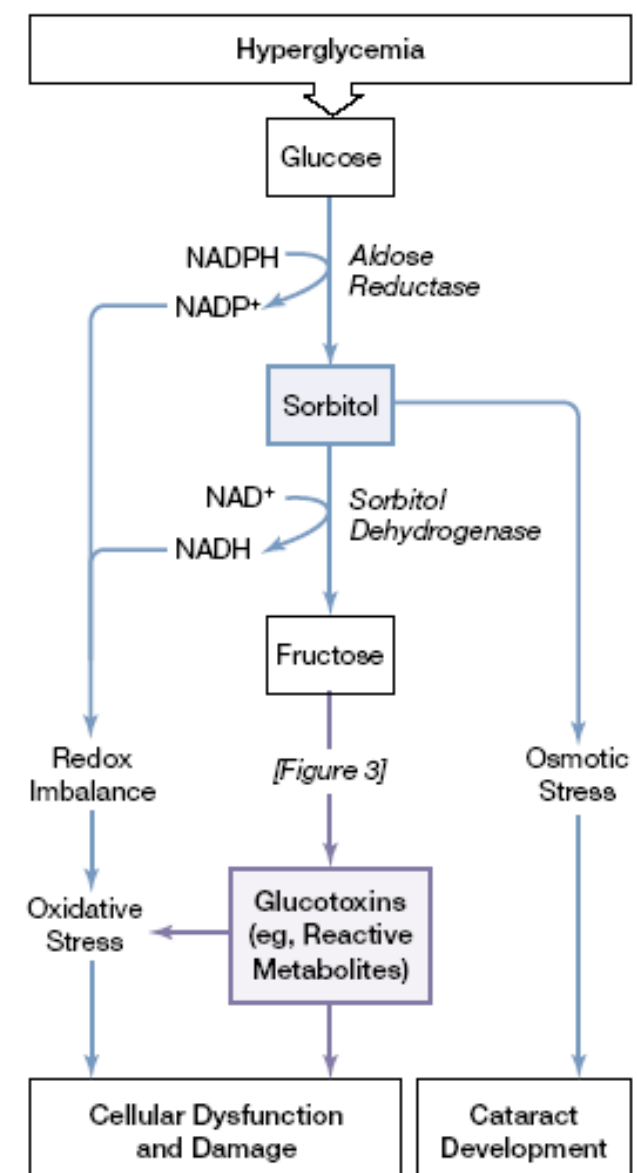


Figure 2. Aldose Reductase Pathway Theory



Pentose phosphate pathway

30% of glucose oxidation

Principal products

Reducing power: NADPH

Not interchangeable with NADH

Ribose-5-phosphate

3 stages

Oxidative reactions

Isomerization and epimerization

C-C cleavage and formation

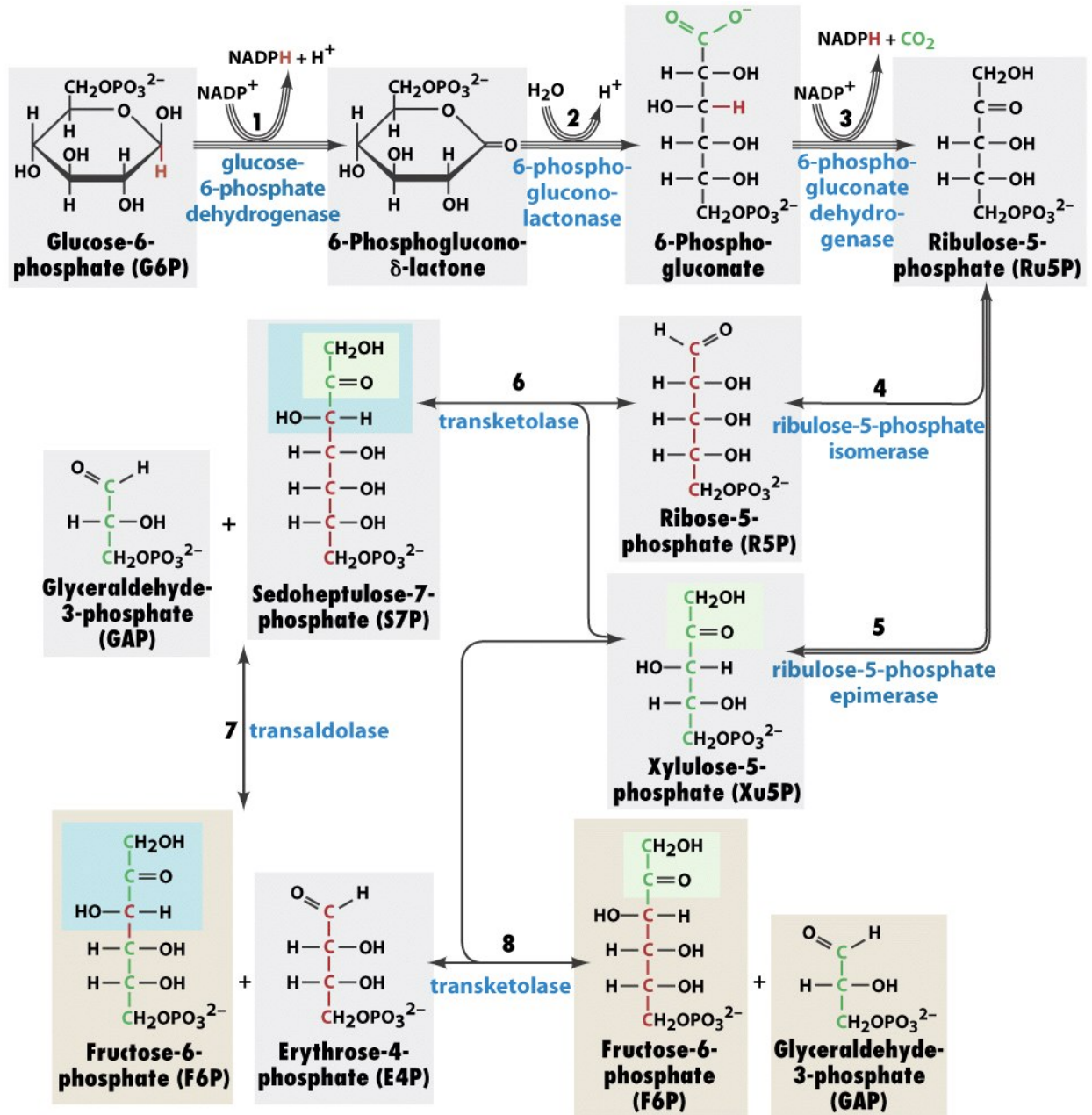
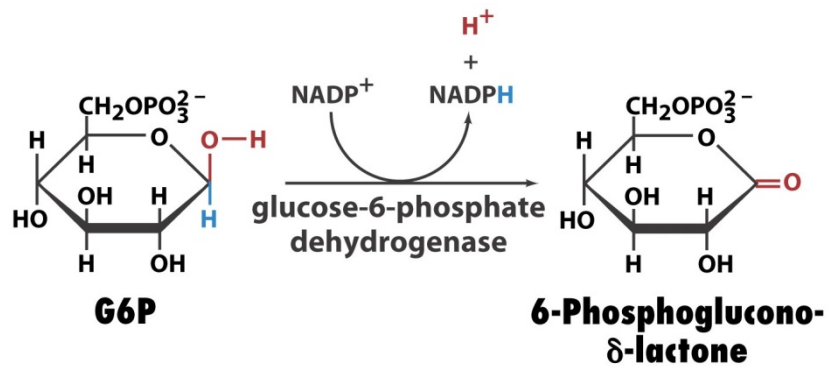


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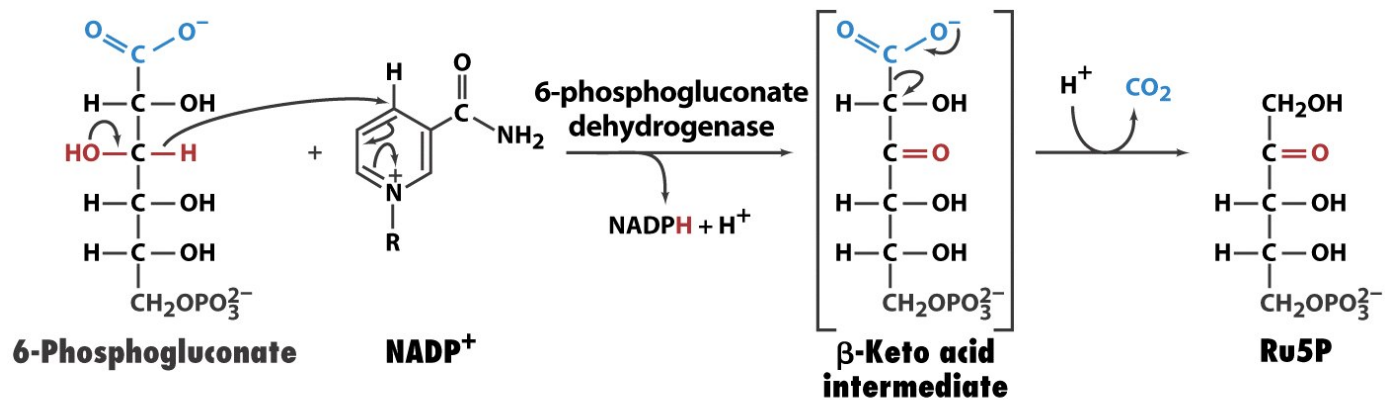


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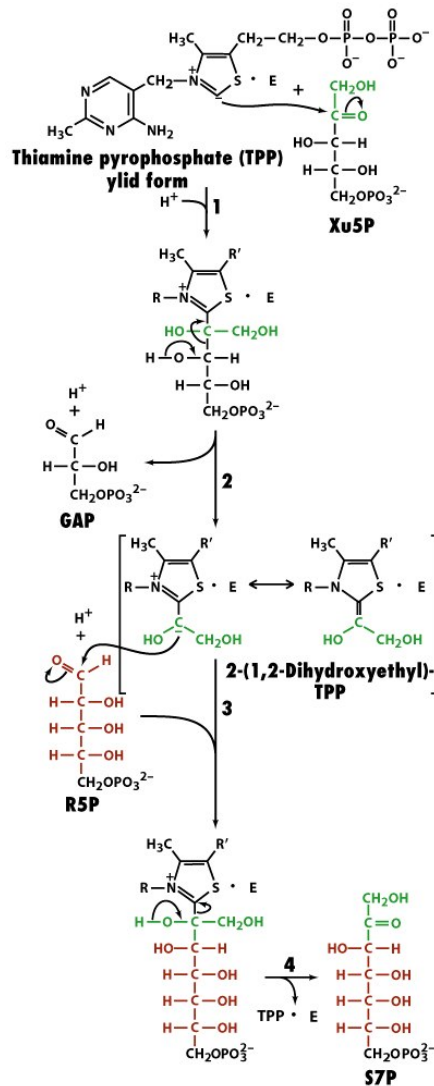


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Transketolase: transfer of C2 units

Transaldolase: transfer of C3 units

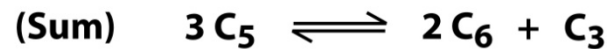
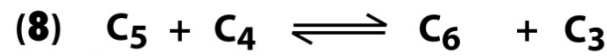
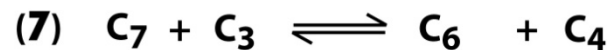
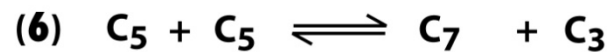


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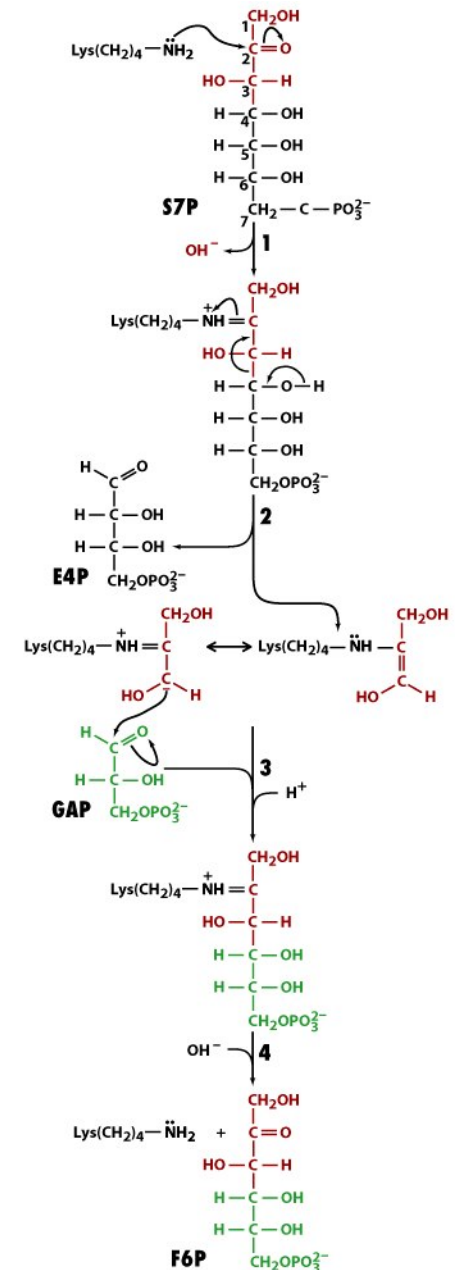


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Control of pentose phosphate pathway

Depends on the requirements of ATP, NADPH, R5P

G6P dehydrogenase: the first committed step

regulation by $[NADP^+]$: $[NADPH]/[NADP^+] = 100:1$

enzyme synthesis control by hormone

enzyme deficiency

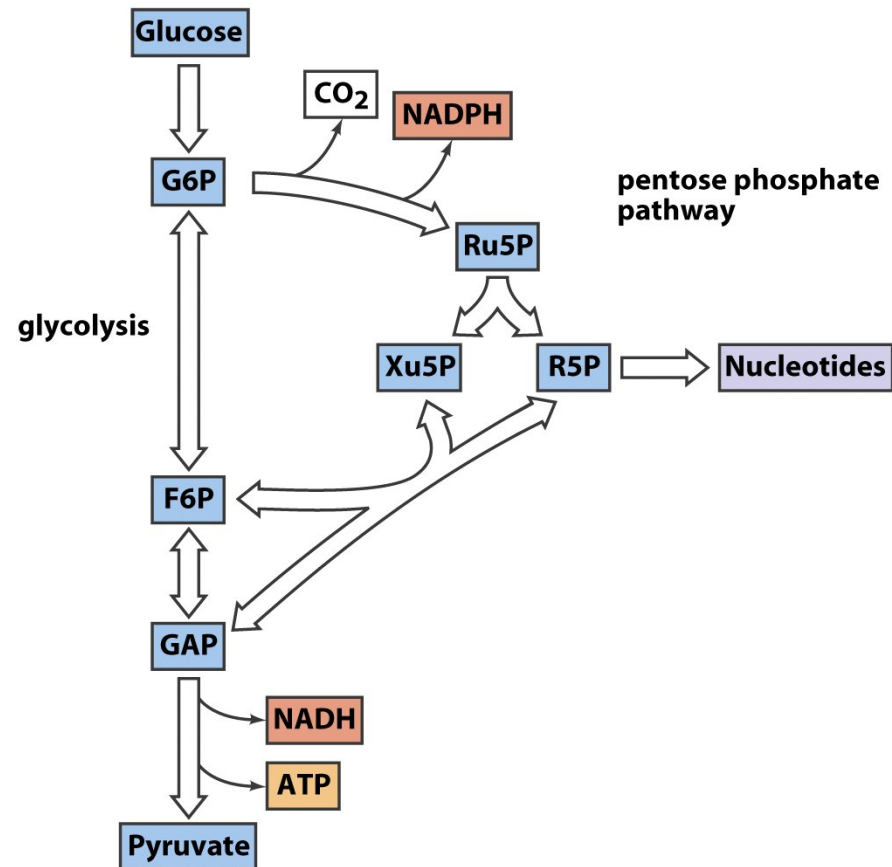


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G6PD deficiency

Common in African, Asian, Mediterranean

Deficiency of NADPH (for biosynthesis & ROS elimination)

In erythrocytes

glutathione (GSH) regeneration

Hemolytic anemia when ingest drugs (such as antimalarial drug primaquine) or eat fava beans

increased peroxide formation

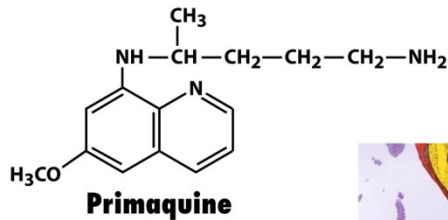
accelerated breakdown of mutant enzymes

membrane damage

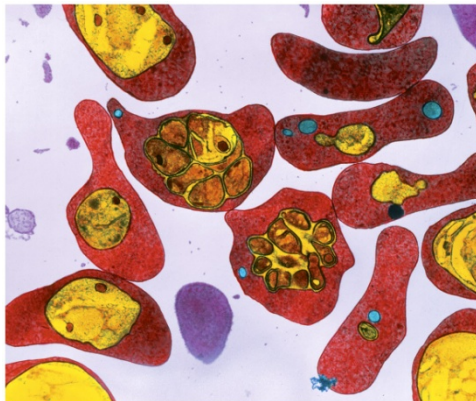
High prevalence

~400 G6PD variants

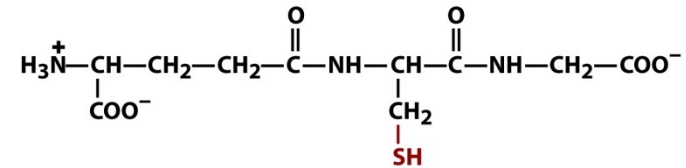
Selective advantage to malaria



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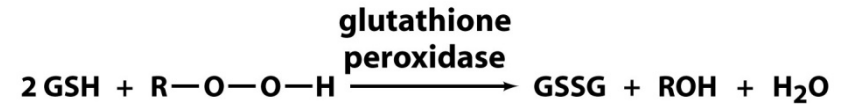


Box 14-4 figure 5 Fundamentals of Biochemistry, 2/e



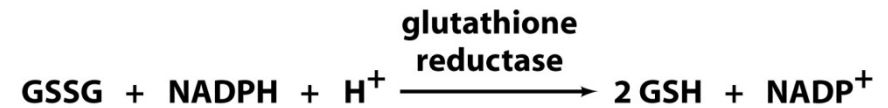
Glutathione (GSH)
(γ-L-glutamyl-L-cysteinylglycine)

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Organic hydroperoxide

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