

Metabolism of mono and disaccharide

Metabolism of fructose

sources of fructose?

➤ The major source of fructose is the disaccharide sucrose, which, when cleaved in the intestine, releases (equimolar amounts) of fructose and glucose

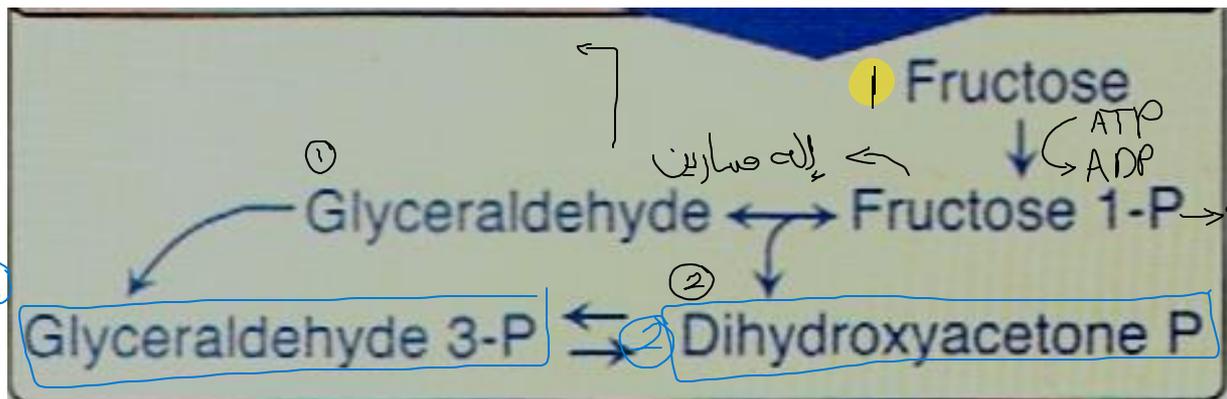
كميات متساوية ←

➤ fructose is also found as a free monosaccharide in high-fructose corn syrup (55 percent fructose/45 percent glucose, which is used to sweeten most cola drinks), in many fruits, and in honey.

تدخل
دخول

➤ Entry of fructose into cells is not insulin-dependent and, in contrast to glucose, fructose does not promote the secretion of insulin.

الغلوكوز يحفز إفراز الانسولين بينما الفركتوز لا يحفز إفرازه



إلى صاراين ←

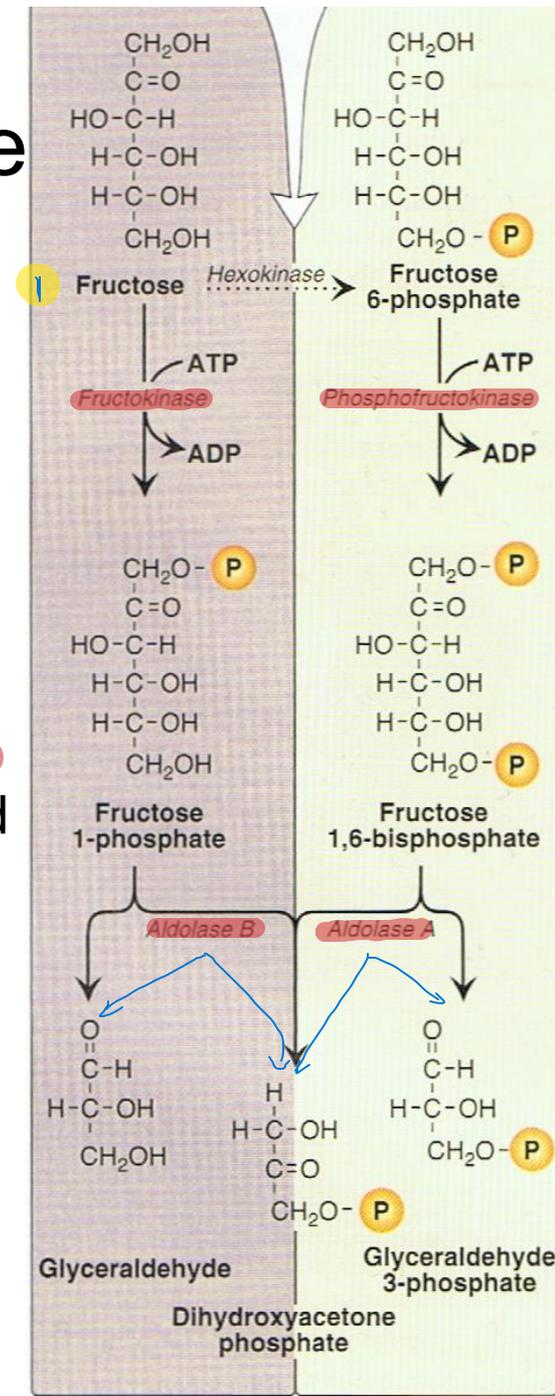
ATP → ADP

لا تبط جزئي فوسفات
عند كاربون رقم 1

النتيجة النهائي ←

Metabolism of fructose

- A. Phosphorylation of fructose: by **hexokinase** or **fructokinase** (found in the liver, kidney, and the small intestinal mucosa). and **converts fructose to fructose 1-phosphate**, using **ATP as the phosphate donor**
- B. **Cleavage of fructose 1-phosphate (by **aldolase B**) to dihydroxyacetone phosphate (DHAP) and glyceraldehyde.** DHAP can directly enter glycolysis or gluconeogenesis, whereas glyceraldehyde can be metabolized by other pathways



Metabolism of fructose

حركية

C. Kinetics of fructose metabolism → the velocity which it is metabolized

A. The rate of fructose metabolism is more rapid than that of glucose because the trioses formed from fructose 1-phosphate bypass phosphofructokinase (the major rate-limiting step in glycolysis). why?!

B. Intravenous infusion of fructose elevate the rate of lipogenesis caused by the enhanced production of acetyl CoA.

← تسريع وزيدي
للفركتوز

اضطرابات

← باختصار الفركتوز لا يمر بخطوة فوسفوفركتوكاينيز عثمان هيك Metabolism الأسرع.

D. Disorders of fructose metabolism

A. fructokinase deficiency: benign condition (حالة حميدة) اضطراب

B. Hereditary fructose intolerance (HFI): a severe disturbance of liver and kidney metabolism as a result of aldolase B deficiency. Fructose 1-phosphate accumulates, and ATP and inorganic phosphate levels fall significantly, causing hyperuricemia, hypoglycemia, vomiting, jaundice, hemorrhage and hepatomegaly.

← عدم تحمل الفركتوز
الوراثي

يرقان

If fructose was not removed from the diet, liver failure and death can occur.

Diagnosis of HFI can be made on the basis of fructose in the urine

Metabolism of fructose

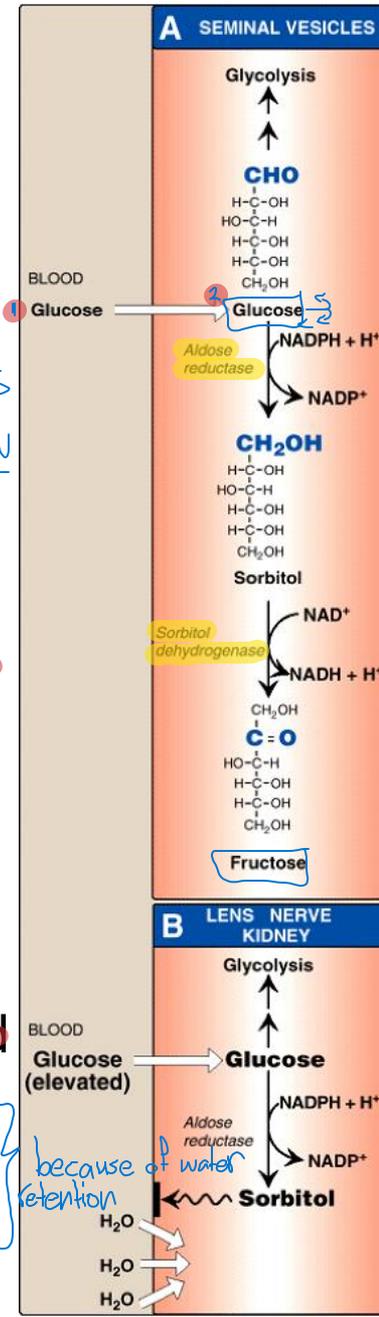
E. Conversion of mannose to fructose 6-phosphate
 Hexokinase phosphorylates mannose, producing mannose 6-phosphate, which is (reversibly) isomerized to fructose 6-phosphate by phosphomannose isomerase.

قابل للإفكاس
 يسير في كلا الاتجاهين

F. Conversion of glucose to fructose via sorbitol

A. In seminal vesicles, glucose converts to sorbitol by aldehyde reductase followed by oxidation of sorbitol by sorbitol dehydrogenase to produce fructose. This is necessary in seminal vesicles as fructose is a major carbohydrate energy source.

B. In hyperglycemia as in uncontrolled diabetes glucose enter these cells (retina, lens, kidney, nerve cells) convert to sorbitol which will be trapped inside the cell, leading to water retention due to osmosis. cataract formation, peripheral neuropathy, and vascular problems leading to nephropathy and retinopathy.

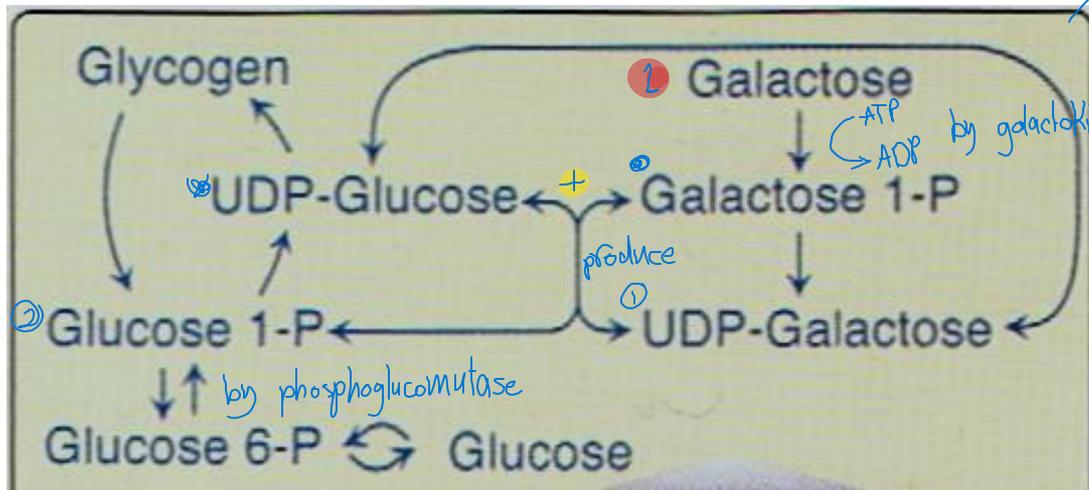


Galactose metabolism

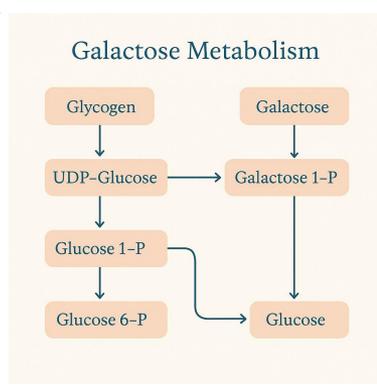
- The major dietary source is lactose (in milk)
- Phosphorylation of galactose by galactokinase to galactose 1P using ATP as phosphate donor
- Formation of UDP-galactose by exchange with UDP-glucose. The enzyme that catalyzes this reaction is galactose 1-phosphate uridyl-transferase.

→ phosphate group

← بسلايد 9 ففهوم أكثر



توصيف أكثر



Galactose metabolism

- C. Use of UDP-galactose as a carbon source for glycolysis or gluconeogenesis. UDP-galactose is then converted to UDP-glucose by UDP-hexose 4-epimerase.
- D. Role of UDP-galactose in biosynthetic reactions: can be utilized in many metabolic pathways as in biosynthesis of lactose, glycoproteins, glycolipids, and glycosaminoglycans.
- E. Disorders of galactose metabolism
- A. classic galactosemia: **Galactose 1-phosphate uridylyltransferase** is missing and so galactose 1P and galactose accumulate in cell causing a problem similar to that in fructose intolerance

استرات

إضطرابات

غيابه نقص

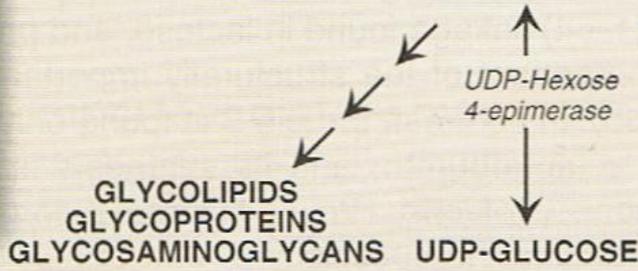
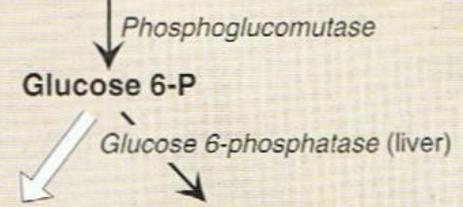
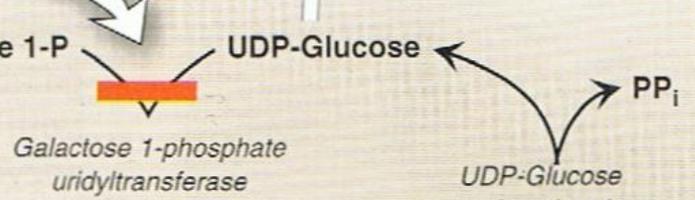
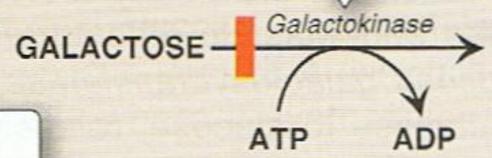
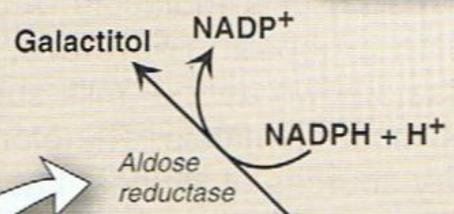
لعدم تحمل الجلوكوز الوراثي

CLASSIC GALACTOSEMIA

- **Uridyltransferase deficiency.**
- Autosomal recessive disorder (1 in 23,000 births).
- **It causes** galactosemia and galactosuria, vomiting, diarrhea, and jaundice.
- **Accumulation of galactose 1-phosphate and galactitol** in nerve, lens, liver, and kidney tissue causes liver damage, severe mental retardation, and cataracts.
- Antenatal diagnosis is possible by chorionic villus sampling.
- **Therapy:** Rapid diagnosis and removal of galactose (therefore, lactose) from the diet.

GALACTOKINASE DEFICIENCY

- This causes galactosemia and galactosuria. → galactose in urine
- It causes galactitol accumulation if galactose is present in the diet.



ALDOSE REDUCTASE

- The enzyme is present in liver, kidney, retina, lens, nerve tissue, seminal vesicles, and ovaries.
- It is physiologically unimportant in galactose metabolism unless galactose levels are high (as in galactosemia).
- Elevated galactitol can cause cataracts.

دلیل کاتاراکت
انجمن

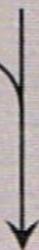
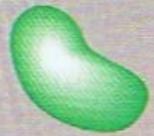
Lactose synthesis

- ❑ Produced in mammary glands of mammals
- ❑ Lactose is synthesized by lactose transferase which transfers galactose from UDP-galactose to glucose, releasing UDP.
- ❑ This enzyme is composed of two proteins, A and B. Protein A is a β -D-galactosyltransferase, and is found in a number of body tissues.
- ❑ In tissues other than the lactating mammary gland, this enzyme transfers galactose from UDP-galactose to N-acetyl-D-glucosamine, forming the same (1-4) linkage found in lactose, and producing N-acetyllactosamine a component of the structurally important N-linked glycoproteins.
- ❑ In contrast, protein B is found only in lactating mammary glands. It is α -lactalbumin, and its synthesis is stimulated by the peptide hormone, prolactin. Protein B forms a complex with the enzyme, protein A, changing the specificity of that transferase so that lactose, rather than N-acetyllactosamine, is produced.

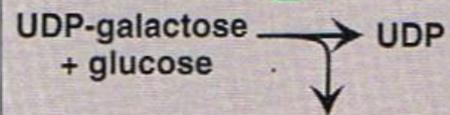
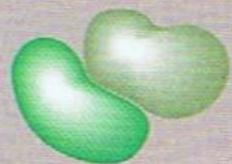
β -D-Galactosyltransferase
(protein A)



α -Lactalbumin
(protein B)



UDP-galactose:glucose
galactosyltransferase



Lactose

