# Amino Acid Metabolism & Urea Cycle

Karolina Orocz



# Amino acid metabolism



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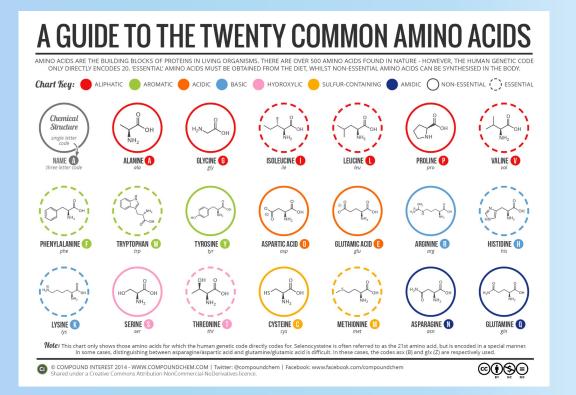
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# **Amino acid classifications**



### Amino acid structures





## Essential vs non-essential amino acids

10 essential amino acids: "PVT TIM HALL"

- PVT:
  - Phenylalanine
  - Valine
  - Tryptophan
- TIM:
  - Threonine
  - Isoleucine
  - Methionine
- HALL:
  - Histidine
  - Arginine
  - Leucine
  - Lysine



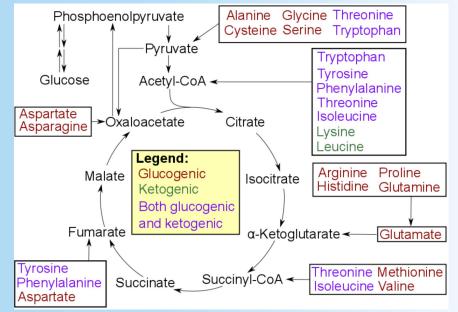
## Glucogenic vs ketogenic amino acids

**Glucogenic:** 

Can be converted into glucose via gluconeogenesis

Ketogenic:

Can be converted into acetyl-CoA in order to make ketone bodies



https://en.wikipedia.org/wiki/Glucogenic\_amino\_acid#/media/File:Amino\_acid\_catabolism\_revised.png



Ketogenic a.a: "Ls"	BOTH: "PITTT"	Gluconeogenic a.a:
Leucine Lysine	Phenylalanine Isoleucine Tyrosine Tryptophan Threonine	Everything else



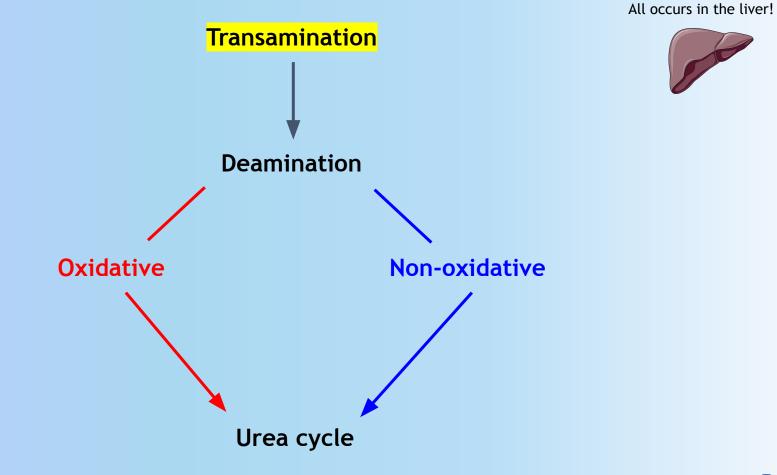
# General amino acid catabolism



## **Definitions:**

- 1) **Transamination:** Transfer of an amino group from an amino acid
- Deamination: Removal of an amino group from an amino acid, resulting with ammonia as a byproduct
- 3) Urea cycle: Neutralizes ammonia to be excreted as urea

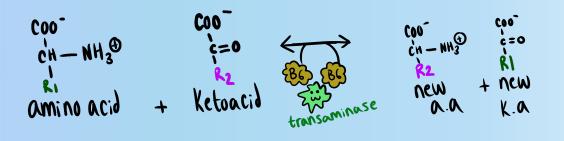






## Transamination

- Transferring an amino acid's amino group (NH3+) to its partner keto acid to make a new amino acid
- Done via aminotransferases/transaminases
  - Vitamin B6 (PLP/pyridoxine) dependent
- Main focus: Make glutamate (especially will be important for oxidative deamination)





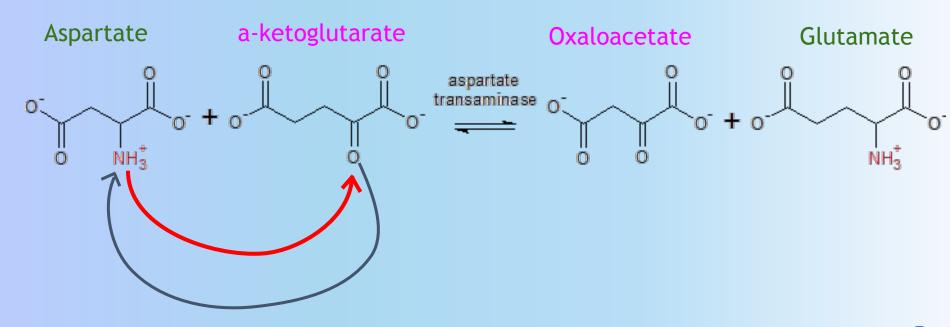
## **Examples of transamination**

Serum glutamic oxaloacetic transferase (SGOT):

- Aka aspartate transferase (AST)
- Liver enzyme: Found in the hepatocyte cytosol and mitochondria









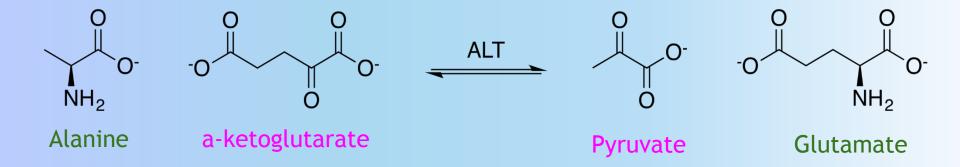
https://en.wikipedia.org/wiki/Aspartate transaminase#/media/File:Aspartate aminotransferase reaction.png

### Serum glutamic pyruvic transferase (SGPT):

- Aka alanine transferase (ALT)
- Liver enzyme: Found in the hepatocyte cytosol

a-ketoglutarate + EALa ESCPT + RG SGPT + RG

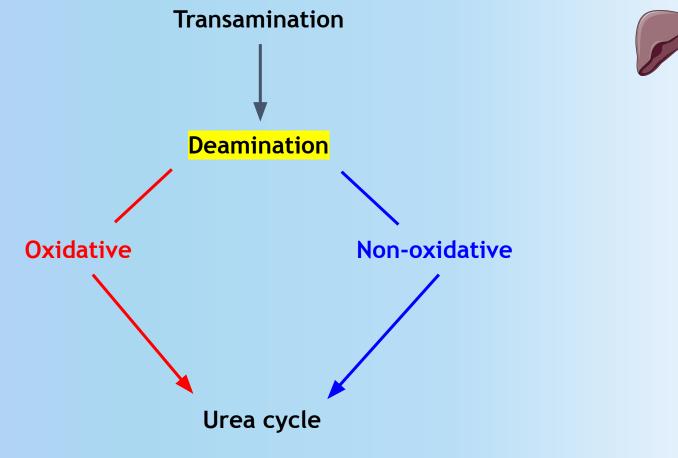






https://en.wikipedia.org/wiki/Alanine\_transaminase#/media/File:Alanine\_transaminase.png

### All occurs in the liver!



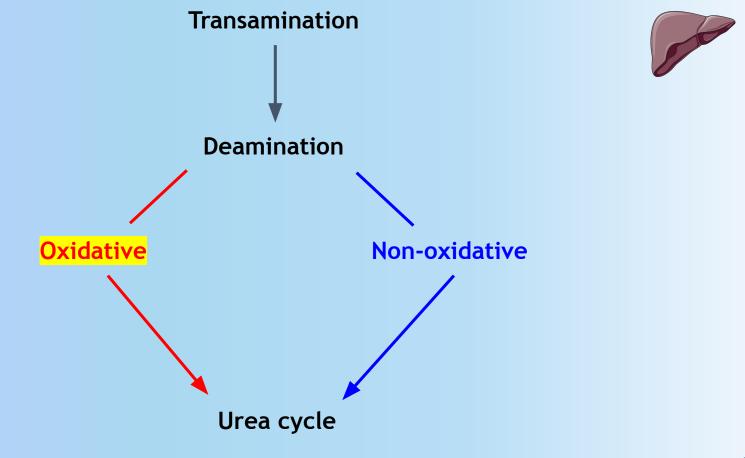


## Deamination

- Removal of an amino group from an amino acid
- Results in the release of ammonia
  - Ammonia is toxic, so must be neutralized via the urea cycle
- Occurs primarily in the liver, but also some in the kidney
- Two types:
  - Oxidative
  - $\circ \quad \text{Non-oxidative} \\$



### All occurs in the liver!

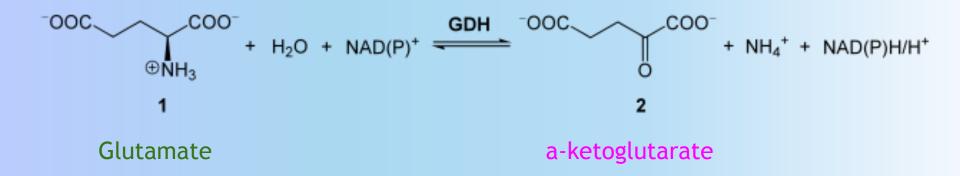




## **Oxidative deamination**

- Occurs with glutamate
- Oxidative: Glutamate donates a H+ to NADP+
- Enzyme: Glutamate dehydrogenase
- Products: alpha-ketoglutarate (keto acid), ammonia, & NADPH

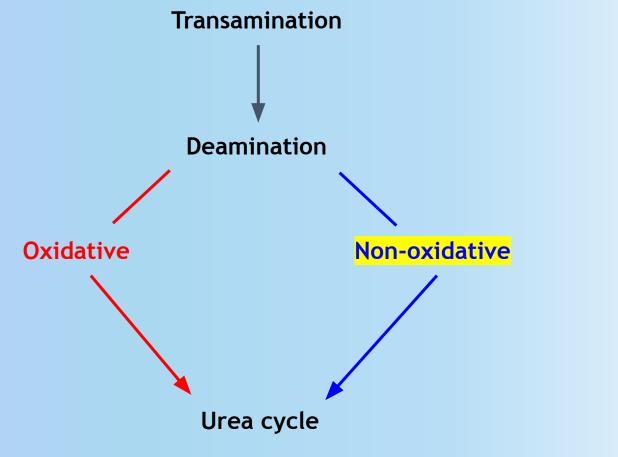






https://commons.wikimedia.org/wiki/File:Glutamate\_dehydrogenase\_reaction.svg

### All occurs in the liver!





## Non-oxidative deamination

- Non-Oxidative: No donation of H+ is involved
- Serine:
  - Enzyme: Serine dehydratase/deanimase
  - Vitamin B6 (PLP/pyridoxine) dependent
- Threonine:
  - Enzyme: Threonine dehydratase/deanimase
  - Vitamin B6 (PLP/pyridoxine) dependent
- Products: Ammonia, a keto acid, and water

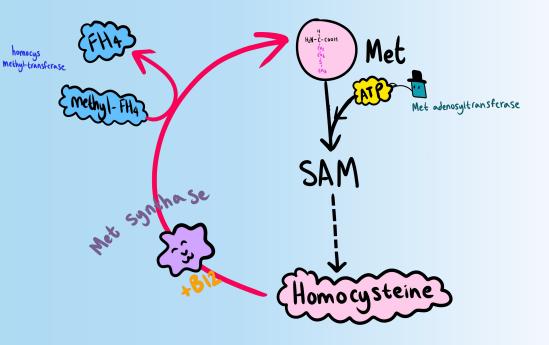


# Specific amino acid metabolisms & correlated diseases



## Methionine

- Methionine: sulfur-containing, essential amino acid
- Methionine makes homocysteine, and homocysteine can be converted back into methionine
- SAM: S-adenosylmethionine
- Methionine synthase requires vitamin B12 (cobalamin)
  - During methionine synthase reaction, a methyl group is taken from methyl-FH4 and given to homocysteine; this results in FH4 (aka THF/tetrahydrofolate) as a byproduct



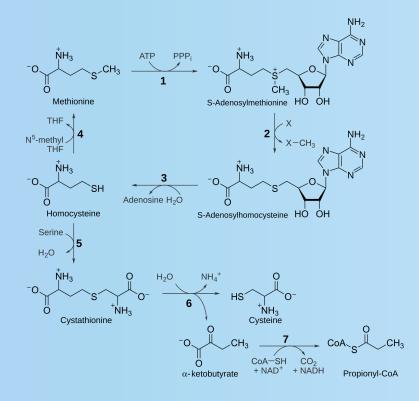


## Homocysteine

- Homocysteine can be converted into cystathionine and cysteine
- Cystathionine synthase is vitamin
   B6 (PLP/pyridoxine) dependent
- Cysteine: Sulfur-containing, non-essential amino acid



## Methionine & homocysteine metabolism



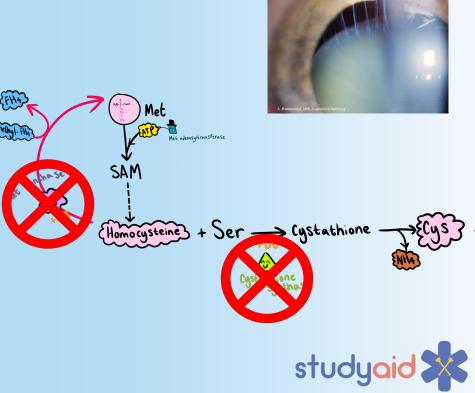


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## Clinical correlation: Homocystinuria

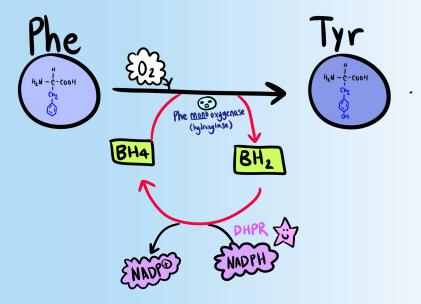
### • General:

- Deficiency of methionine synthase or cystathionine synthase
- Homocysteine build up in blood & urine
- Symptoms:
  - Lens dislocation
  - Marfanoid habitus: Long limbs, pectus excavatum, etc...
  - Intellectual disability
- Tx:
  - Restriction of methionine intake
  - B6, B12, and/or folate supplementation



## Phenylalanine

- Phenylalanine: Aromatic, essential amino acid
- Phenylalanine can be converted into tyrosine
- Phenylalanine
  - monooxygenase/hydroxylase is tetrahydrobiopterin (BH4) dependent
- BH4 is regenerated by the help of dihydropteridine reductase (DHPR)

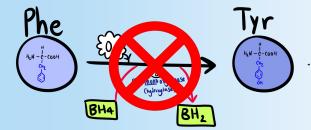




## **Clinical Correlation: Phenylketonuria (PKU)**

### • General:

- Deficiency of phenylalanine monooxygenase/hydroxylase
- Can range from mild to severe deficiency
- Phenylalanine gets converted into phenylpyruvate (acid) instead of tyrosine
- Phenylalanine/phenylpyruvate build up in blood and urine
- Symptoms:
  - Musty urine odor
  - Less skin pigment: due to less tyrosine
  - Severe intellectual disability, developmental delay, microcephaly



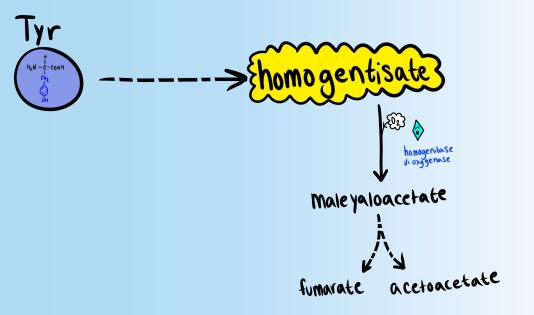




- Tx:
  - Lifelong restriction of Phe

## Tyrosine

- Tyrosine: Aromatic, non-essential amino acid
- Homogentisate/homogentisic acid: intermediate catabolite of tyrosine & phenylalanine
- Homogentisate dioxygenase: converts homogentisate into maleylacetoacetate, which is later converted into fumarate & acetoacetate

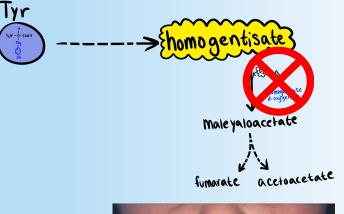




## **Clinical Correlation: Alkaptonuria**

### • General:

- Deficiency of homogentisate dioxygenase
- Homogentisate & tyrosine buildup in blood
   & urine
- Majority of symptoms start ~ age 40
- Symptoms:
  - Black, spotted pigment on skin and eyes
  - Black urine (due to aciduria)
  - Large joint arthritis
- Tx:
  - Restriction of tyrosine and phenylalanine

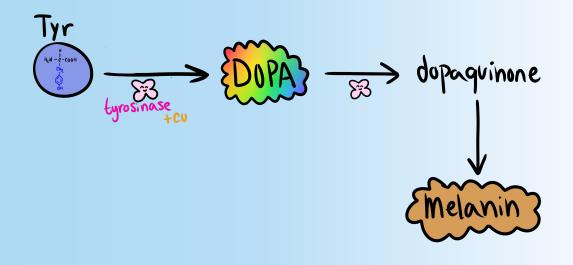




By Universidad CES - http://hdl.handle.net/123456789/464, CC B

## Tyrosine

- Tyrosine makes melanin, a oligomer/polymer that provides pigment for skin and hair
- Enzyme: tyrosinase
  - $\circ$  Is copper dependent

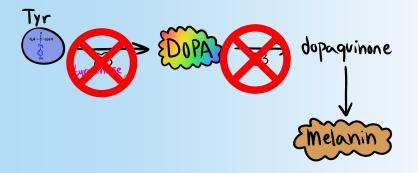




## **Clinical Correlation: Albinism**

### • General:

- Deficiency of tyrosinase
- Little or lack of melanin
- Inheritance: AR or X-linked
  - AR: Oculocutaneous & some ocular albinism types
  - X-linked: ocular albinism
- Symptoms:
  - Loss of skin, hair, & eye pigmentation
  - Vision defects
  - Increased risk of skin cancer





Karen Grønskov, Jakob Ek, and Karen Brondum-Nielsen: Oculocutaneous albinism Orphanet J Rare Dis. 2007; 2: 43. doi: 10.1186/1750-1172-2-43.

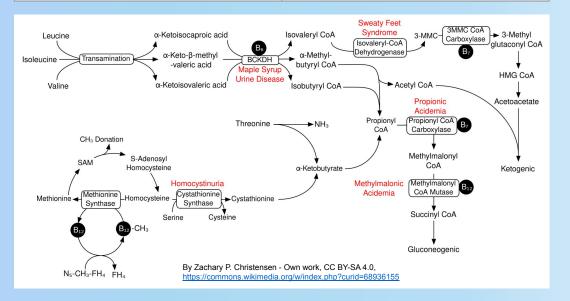


## **BCAAs**

- Leucine, Isoleucine, Valine: Essential amino acids with an aliphatic side chain (only contains H or C)
- Are predominantly metabolized in the liver and skeletal muscles
- Products are substrates that can be used in the Krebs cycle (directly or indirectly)



BCAA: "I love Bailey's"	Product
Isoleucine	Acetyl-CoA, Propionyl-CoA/Succinyl-CoA
Leucine	Acetyl-CoA, Acetoacetate
Valine	Propionyl-CoA/Succinyl-CoA



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### **Clinical Correlation: Maple Syrup Urine Disease**

#### • General:

- Deficiency of BCKA dehydrogenase (BCKD)
- BCAAs & BCKAs build-up in the blood & urine
- Inheritance: AR
- Symptoms:
  - In Classic MSUD, onset of symptoms within 48 hrs of birth
  - Ketoacidosis
  - Neurotoxicity
  - "Maple syrup" odor of urine
  - Fatal if not treated
- Tx:
  - Restriction and close monitoring of BCAAs





# Summary

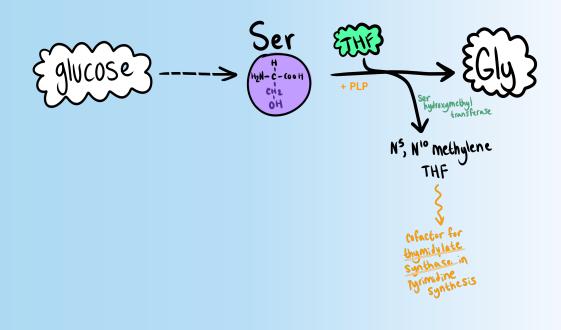
Disorder:	Cause:	Main symptoms:
Homocystinuria	<ul> <li>Deficiency of methionine synthase or cystathionine synthase</li> <li>Buildup of homocysteine</li> </ul>	<ul> <li>Lens dislocation</li> <li>Marfanoid habitus</li> <li>Intellectual disability</li> </ul>
Phenylketonuria	<ul> <li>Deficiency of Phenylalanine monooxygenase/hydroxylase</li> <li>Buildup of phenylalanine and its metabolites</li> </ul>	<ul> <li>Musty urine odor</li> <li>Fair skin &amp; hair</li> <li>Intellectual disability</li> </ul>
Alkaptonuria	<ul> <li>Deficiency of homogentisate dioxygenase</li> <li>Buildup of homogentisic acid</li> </ul>	<ul> <li>Black spots on skin &amp; eyes</li> <li>Black urine when exposed to air</li> <li>Arthritis</li> </ul>
Albinism	<ul> <li>Deficiency of tyrosinase</li> <li>Lack of melanin</li> </ul>	<ul> <li>Loss of pigmentation</li> <li>Vision defects</li> <li>Increased risk of skin cancer</li> </ul>
Maple syrup urine disease	<ul> <li>Deficiency of BCKA dehydrogenase</li> <li>Buildup of BCAA and BCKAs</li> </ul>	<ul> <li>Acidosis</li> <li>Sweet urine odor</li> <li>Neurotoxicity</li> </ul>
-		0.009000

# Extra amino acid metabolisms



## Serine

- Serine: Hydroxylic (-OH), non-essential amino acid
- Gluconeogenic molecule
- Can be converted into glycine
- Enzyme: Serine hydroxymethyl transferase
  - Dependent on Vitamin B6 (PLP/pyridoxine)



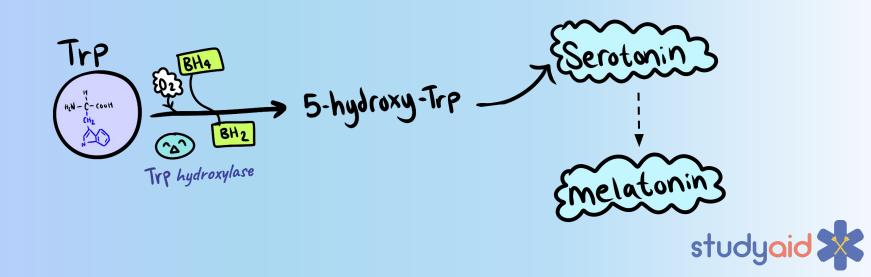


# Tryptophan

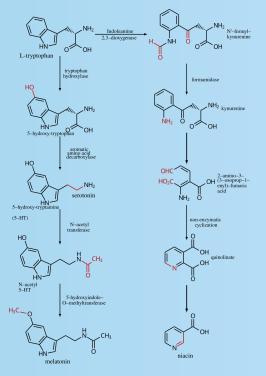
- Tryptophan: Aromatic, essential amino acid
- Tryptophan makes NAD & NADP
- Enzyme: Tryptophan dioxygenase



- Tryptophan makes serotonin & melatonin
- Enzyme: Tryptophan hydroxylase
  - Dependent on BH4 (tetrahydrobiopterin)



### Tryptophan metabolism

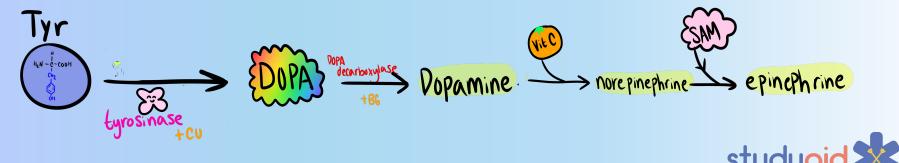


https://en.wikipedia.org/wiki/Trvptophan#/media/File:Trvptophan\_metabolism.svg

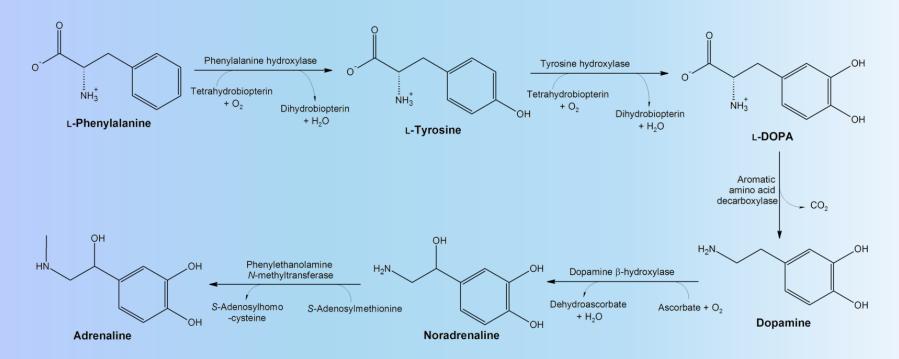


## Tyrosine

- Tyrosine: Aromatic, non-essential amino acid
- Tyrosine makes dopamine, norepinephrine, and epinephrine
- Dopamine & norepinephrine: neurotransmitters
  - Parkinson's disease: loss of dopamine-producing neurons in substantia nigra
  - Norepinephrine synthesis requires vitamin C
    - Scurvy: vitamin C deficiency
- Epinephrine: adrenal hormone involved in the sympathetic nervous system
  - Synthesis of epinephrine requires SAM (same SAM as in the methionine-homocysteine cycle)



### Phenylalanine/tyrosine metabolism

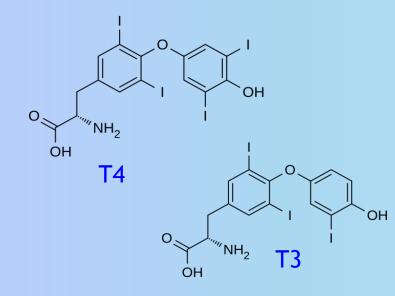


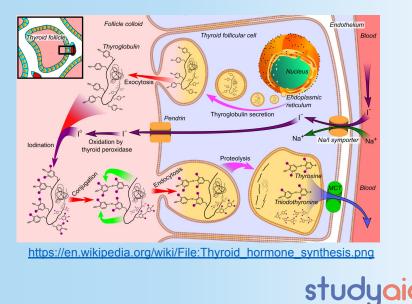
https://en.wikipedia.org/wiki/Tyrosine#/media/File:Conversion\_of\_phenylalanine\_and\_tyrosine\_to\_its\_biologically\_important\_derivatives.png



# Tyrosine

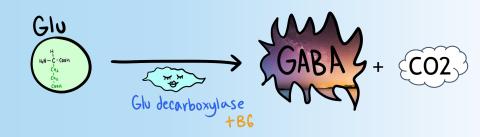
- Tyrosine makes thyroid hormones
- Thyroglobulin: Carries tyrosine, in which tyrosines are then partnered with iodine to make thyroid hormones





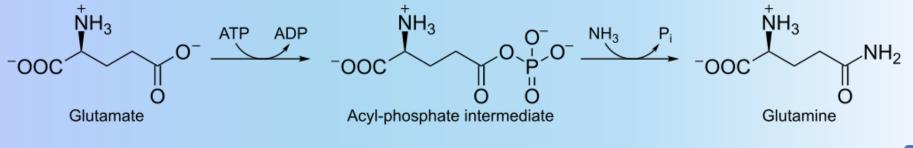
### Glutamate

- Glutamate: Acidic, non-essential amino acid
- Glutamate makes GABA
- GABA:
  - AKA y-aminobutyric acid
  - Inhibitory neurotransmitter in the central nervous system (CNS)
- Enzyme: Glutamate decarboxylase
  - Vitamin B6 (PLP/pyridoxine) dependent





- Glutamate can be converted into glutamine by adding a NH3+ to glutamate
- Enzyme: glutamine synthetase
- Especially important for uptaking excess ammonia (NH3) in astrocytes in the brain

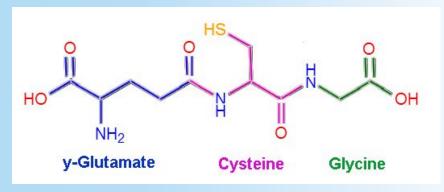


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https://commons.wikimedia.org/wiki/File:Glutamine synthetase reaction.svg

# Glutathione

- Glutathione:
  - Antioxidant
  - Re-oxidizes reduced glutathione in order to convert H2O2 (a reactive oxygen species) into H2O
- Glutamate + cysteine + glycine yields glutathione

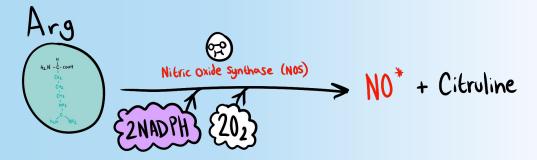


https://commons.wikimedia.org/wiki/File:Glutathione structure.png



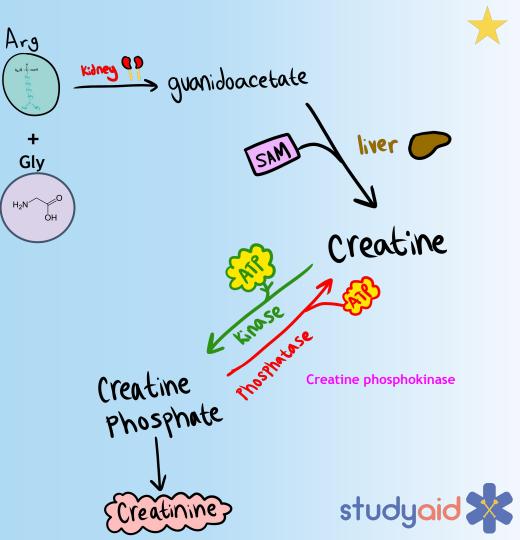
# Arginine

- Arginine: Basic, non-essential amino acid
- Arginine makes nitric oxide
- Nitric oxide (NO\*): free radical
  - For vasodilation
  - For macrophage respiratory burst
- NOS enzyme:
  - nNOS: for neurons
  - iNOS: cytokine-inducible NOS
  - eNOS: for endothelial cells





- Arginine + glycine + methionine make creatine
- Creatine phosphate:
  - Stores phosphate, a very high energy molecule, in the muscles
  - We have enough ATP in the body? Make creatine phosphate!
  - Don't have enough ATP in the body?
     Break down creatine phosphate!
- Creatinine:
  - Waste product of the muscles
  - Kidneys filter our creatinine
    - Marker of kidney function
    - High creatinine in the blood means that kidneys are not filtering well



Molecule	Products
Methionine	- SAM - Homocysteine
Homocysteine	<ul><li>Cysteine</li><li>A-ketobutyrate</li></ul>
Tryptophan	<ul> <li>NAD + NADP</li> <li>Serotonin</li> <li>Melatonin</li> </ul>
Phenylalanine	<ul><li>Tyrosine</li><li>Phenylpyruvate (acid in PKU)</li></ul>



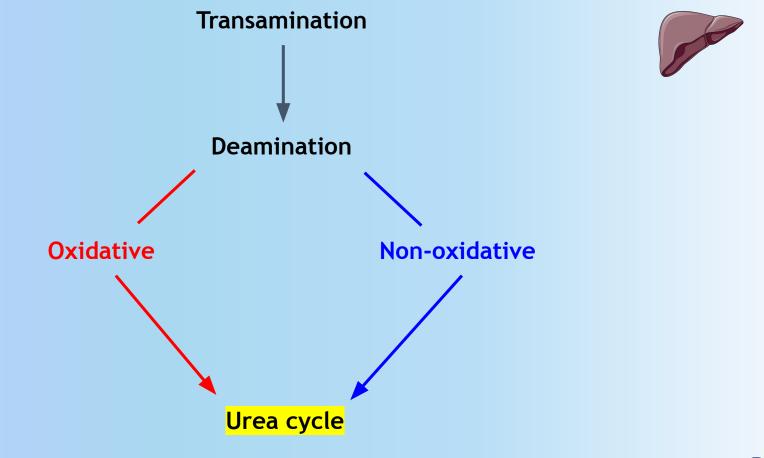
Molecule	Products
Tyrosine	<ul> <li>Homogentisate</li> <li>DOPA</li> <li>Melanin</li> <li>Dopamine</li> <li>Norepinephrine</li> <li>Epinephrine</li> <li>Thyroid hormones</li> </ul>
BCAAs	<ul> <li>Branched chain keto acids</li> <li>Acyl-CoA derivatives</li> </ul>
Arginine	<ul> <li>Nitric oxide</li> <li>Creatine &amp; creatinine</li> </ul>



# **Urea Cycle**



#### All occurs in the liver!



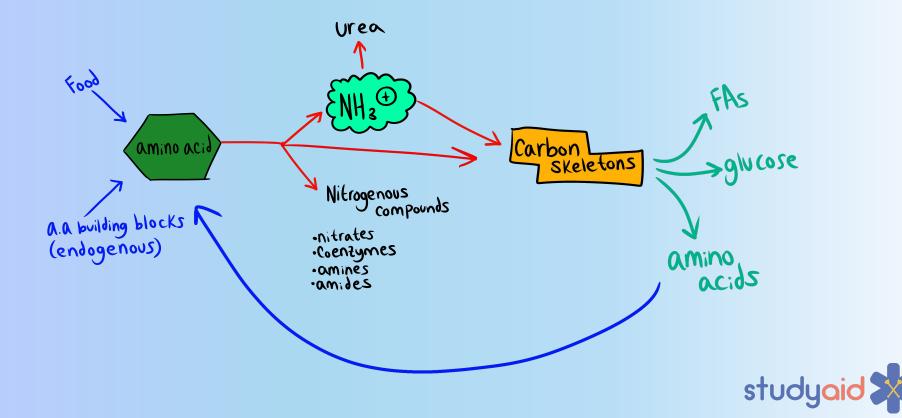


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- 1) Nitrogen cycling
- 2) Urea cycle
- 3) Hyperammonemia

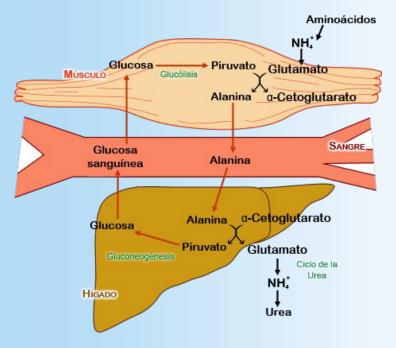


### Nitrogen cycling: General



# NC: Cahill Cycle

- Tissues and muscles make ammonia (NH3/NH4+), which is toxic and needs to be get rid of
- NH3 from muscles is transported via alanine to the liver
- Alanine lets go of NH3 and turns into pyruvate
  - Liver turns NH3 into urea via urea cycle, which is then excreted by the kidneys
  - Pyruvate can be turned into glucose via gluconeogenesis and used as energy in the muscle

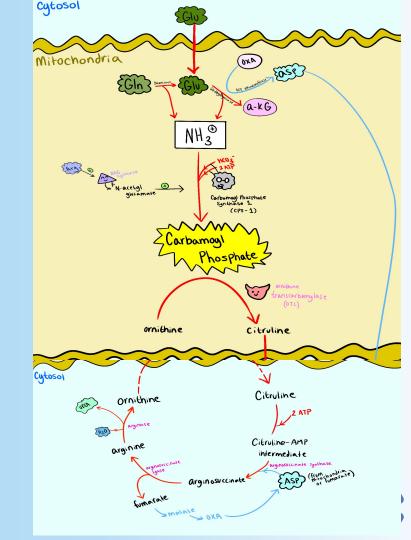


By CoriCycle-noLang.svg: PatriciaRderivative work: BiobulletM (talk) - CoriCycle-noLang.svg, CC BY-SA 3.0, https://commons.wikimedia.org/w/index.php?curid=10568590



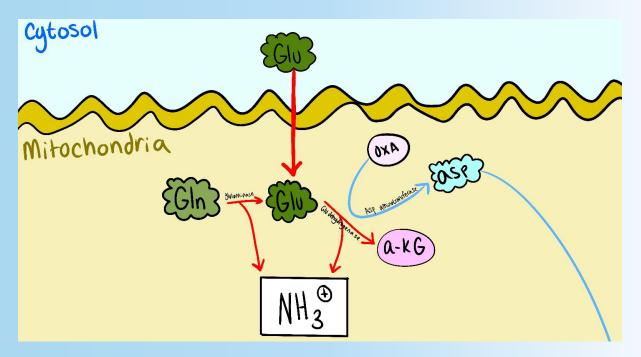
# What is the urea cycle?

- Detoxification method
- Converts ammonia (NH3/NH4+, toxic) into urea (H2NCONH2, nontoxic)
- Only occurs in the liver
- Three most important enzymes:
  - Carbamoyl phosphate synthetase 1 (CPS-1)
  - Ornithine transcarbamylase (OTC)
  - Arginase



# Urea cycle: Step 1

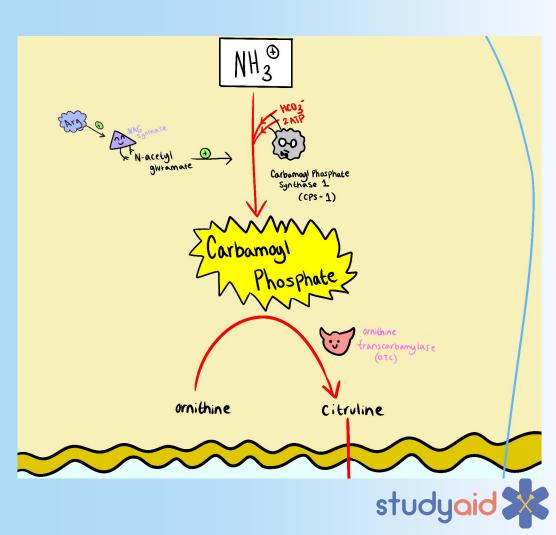
- Glutamate and glutamine release ammonia (NH3+)
- Aspartate is later used when the urea cycle occurs in cytosol





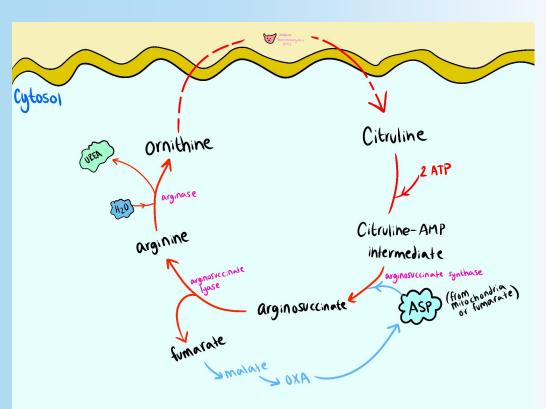
# Urea cycle: Step 2

- CPS-1 uses bicarbonate and ATP to make carbamoyl phosphate
- CPS-1 is a rate limiting enzyme
- CPS-1 is activated by N-acetyl-glutamate, which is made by N-acetyl-glutamate synthase (NAGS), which is activate by arginine
- Carbamoyl phosphate helps power OTC by turning ornithine into citrulline, two key urea cycle substrates in the cytosol



# Urea cycle: Step 3

- Citrulline + aspartate = argininosuccinate
- Argininosuccinate fumarate = arginine
  - Fumarate can be converted back into aspartate via krebs cycle (fumarate to oxaloacetate) and via glutamate oxaloacetate transaminase (oxaloacetate to aspartate)
- When converting arginine into ornithine, finally you make urea!
- Ornithine is converted back into citrulline via ornithine transcarbamylase inside the mitochondria





# **Clinical Correlation: Hyperammonemia**

- When you have too much ammonia in the blood
- Primary causes (ex: enzyme deficiency) or secondary (ex: hepatic cirrhosis)
- Primary causes:
  - NAGS deficiency
  - CPS-I defect
  - **OTC** defect
    - Most common
    - Increased orotic acid
    - Tx: Sodium benzoate (nitrogen scavenging agent)



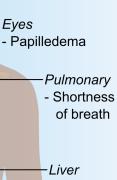
### • Symptoms:

- Vomiting
- Ataxia
- Seizures
- Encephalopathy
- Coma
- If not treated, can be fatal

### Symptoms of **Hyperammonemia**

#### General - Growth retardation - Hypothermia Muscular/Neurologic - Poor coordination - Dysdiadochokinesia - Hypotonia or

- hypertonia
- Ataxia
- Tremor
- Seizures
- Decorticate or decerebrate posturing



Central

- Coma

- Lethargy

- Combativeness

- Enlargement

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