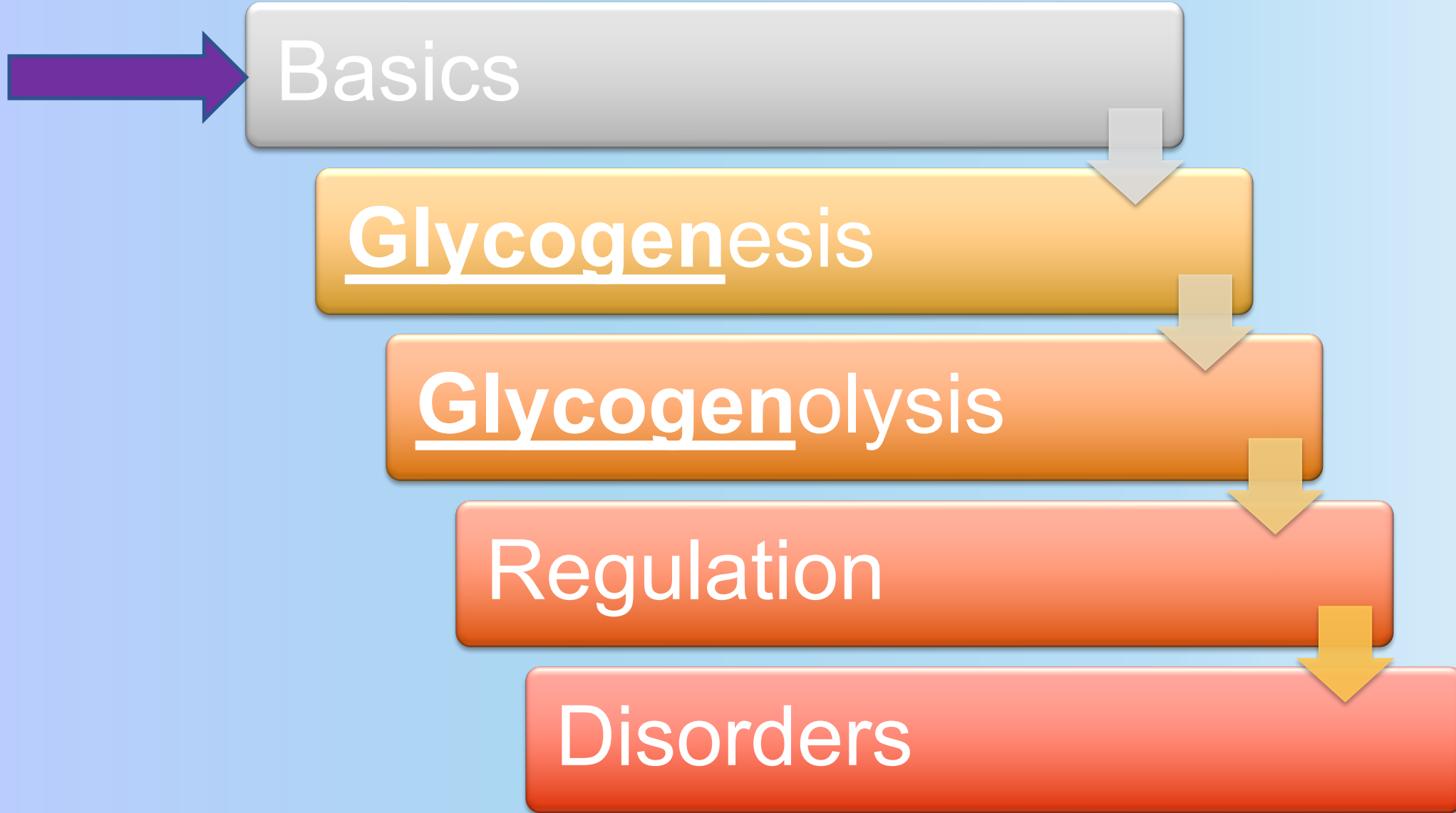


Glycogen Metabolism

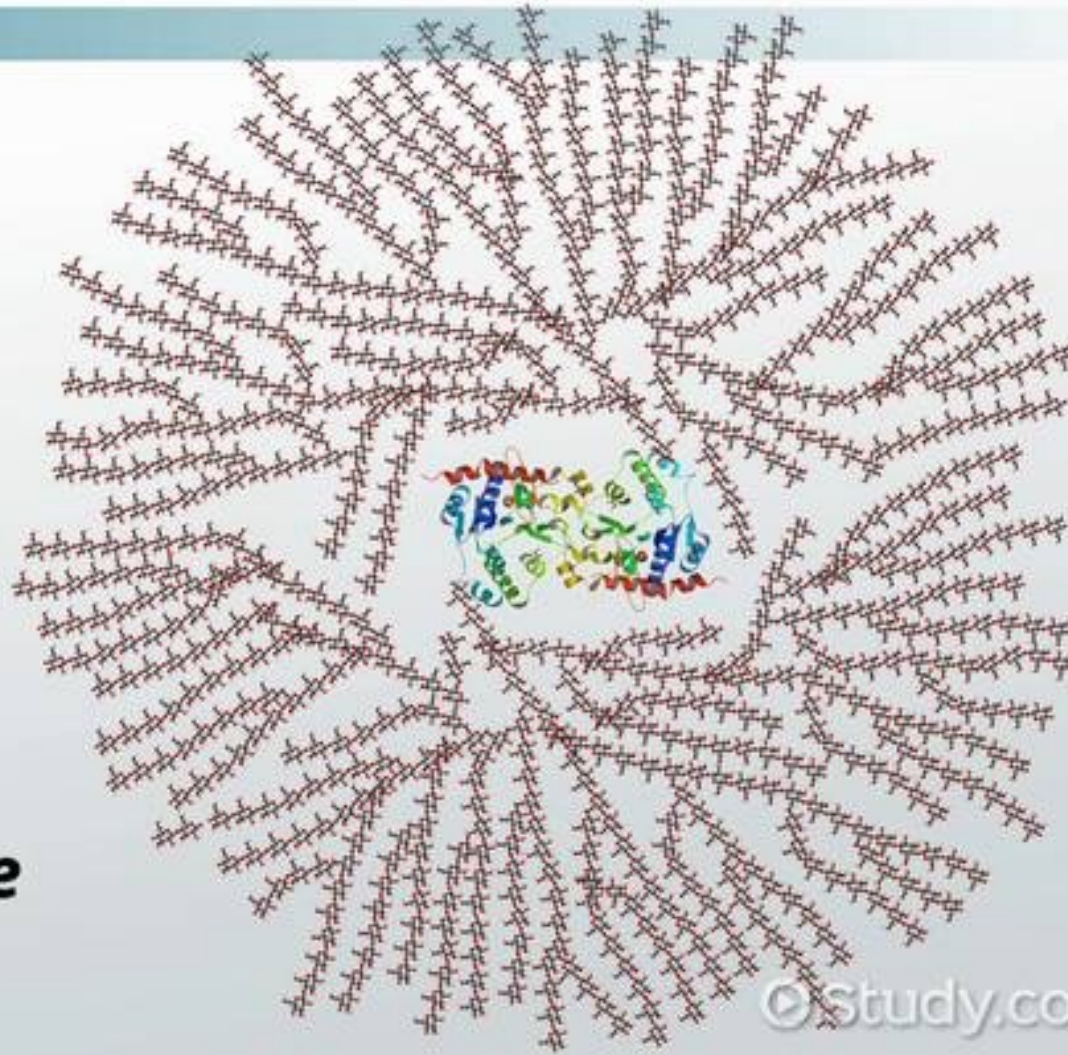
By Niki Brzezinski



GLYCOSIDIC LINKAGES

glycogen

**a polysaccharide
that is formed
from excess glucose
in the body**



© study.com

Why glycogen?

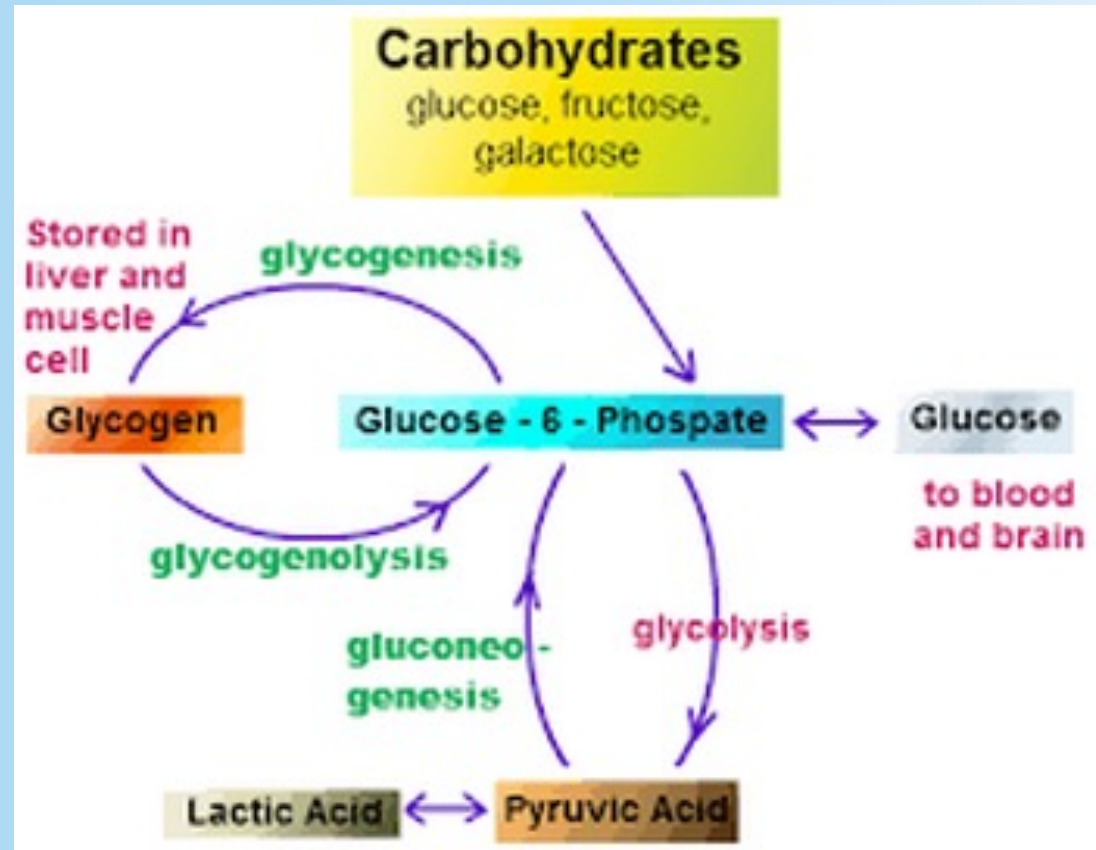
Basics

Glycogen uses 40x LESS energy to store than glucose

Cells physically can't store the same amount of glucose as glycogen; they would burst from the osmotic pressure

Gluconeogenesis is multistep process, requires time

Fats aren't an adequate source
- Ketone bodies - drop pH → ketoacidosis



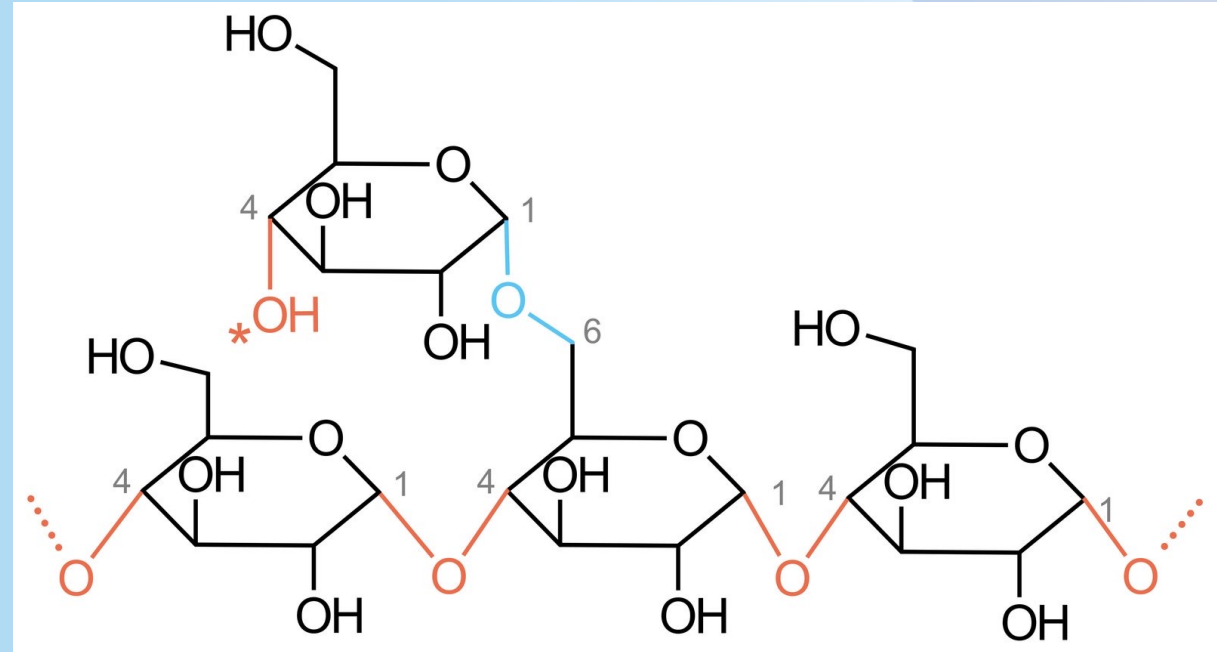
Chemical Structure

Straight chain: α 1,4 bonds

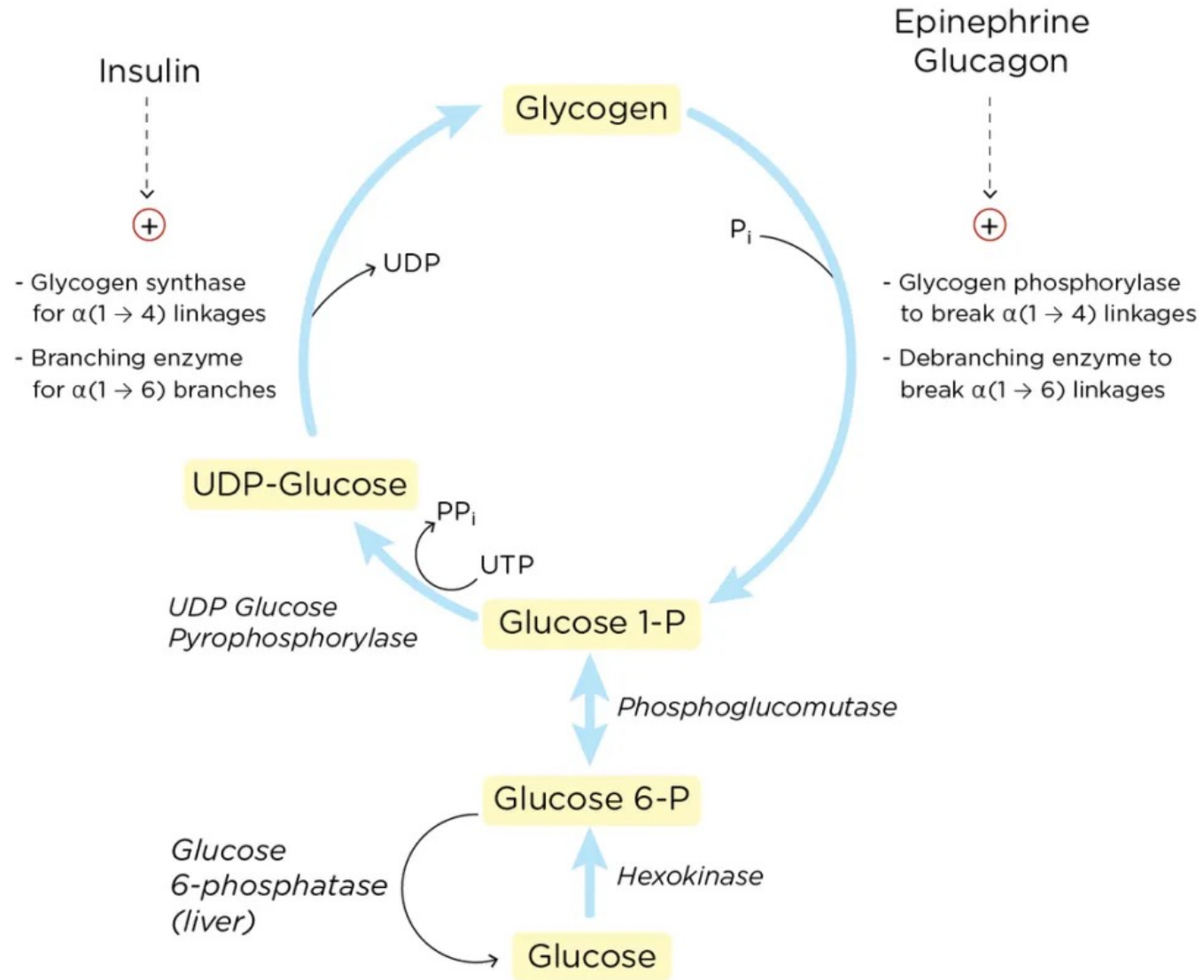
Branch chain: α 1,6 bonds
occur every 8-10 units

Exists as granules in cell cytoplasm
with enzymes for both glycogenesis
and glycogenolysis.

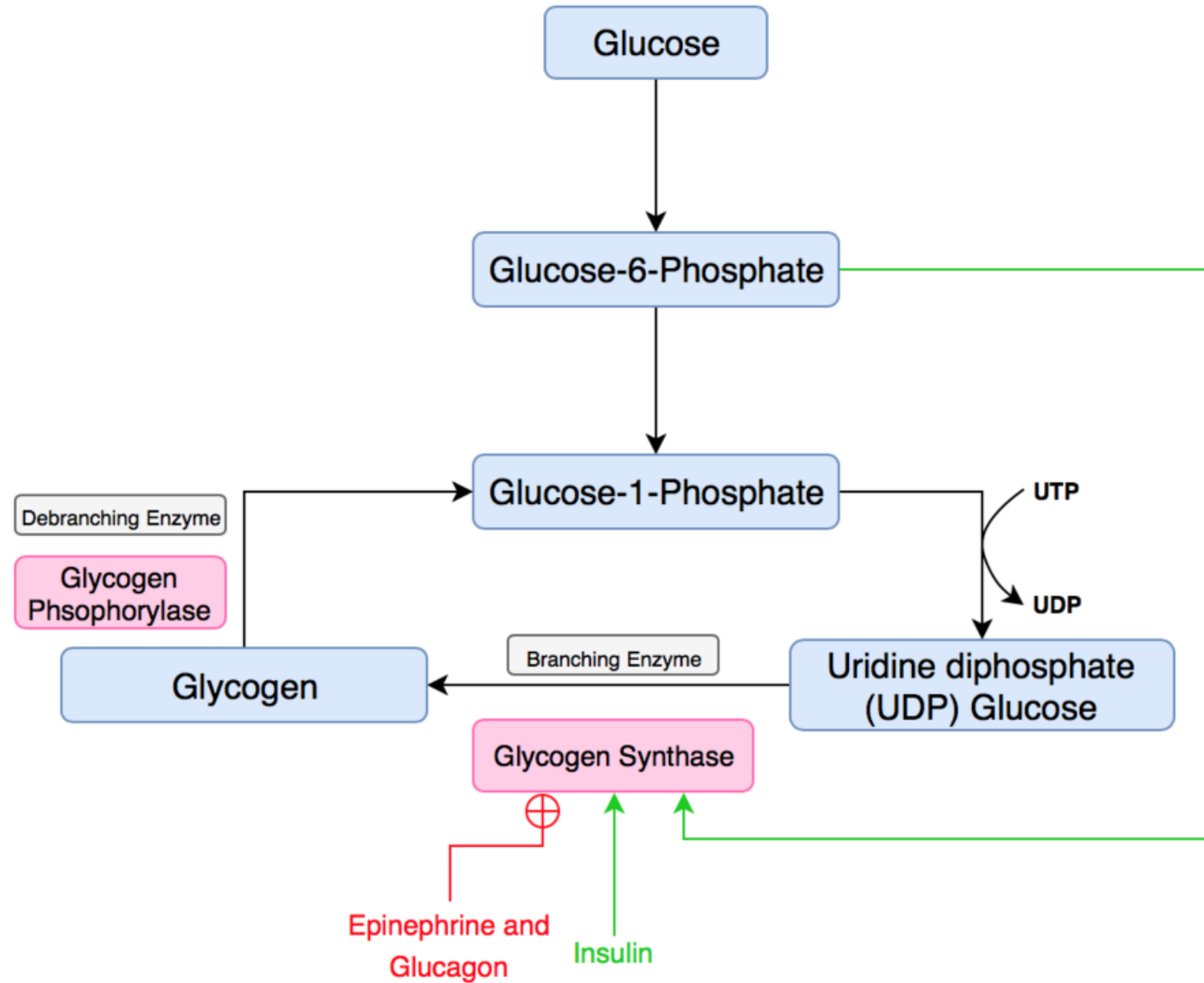
Main chain plus branches allows to
compact the molecule and makes it
easy to break down.



Glycogenesis and Glycogenolysis Occurs in Liver and Skeletal Muscle



Basics



Basics



Glycogenesis

Glycogenolysis

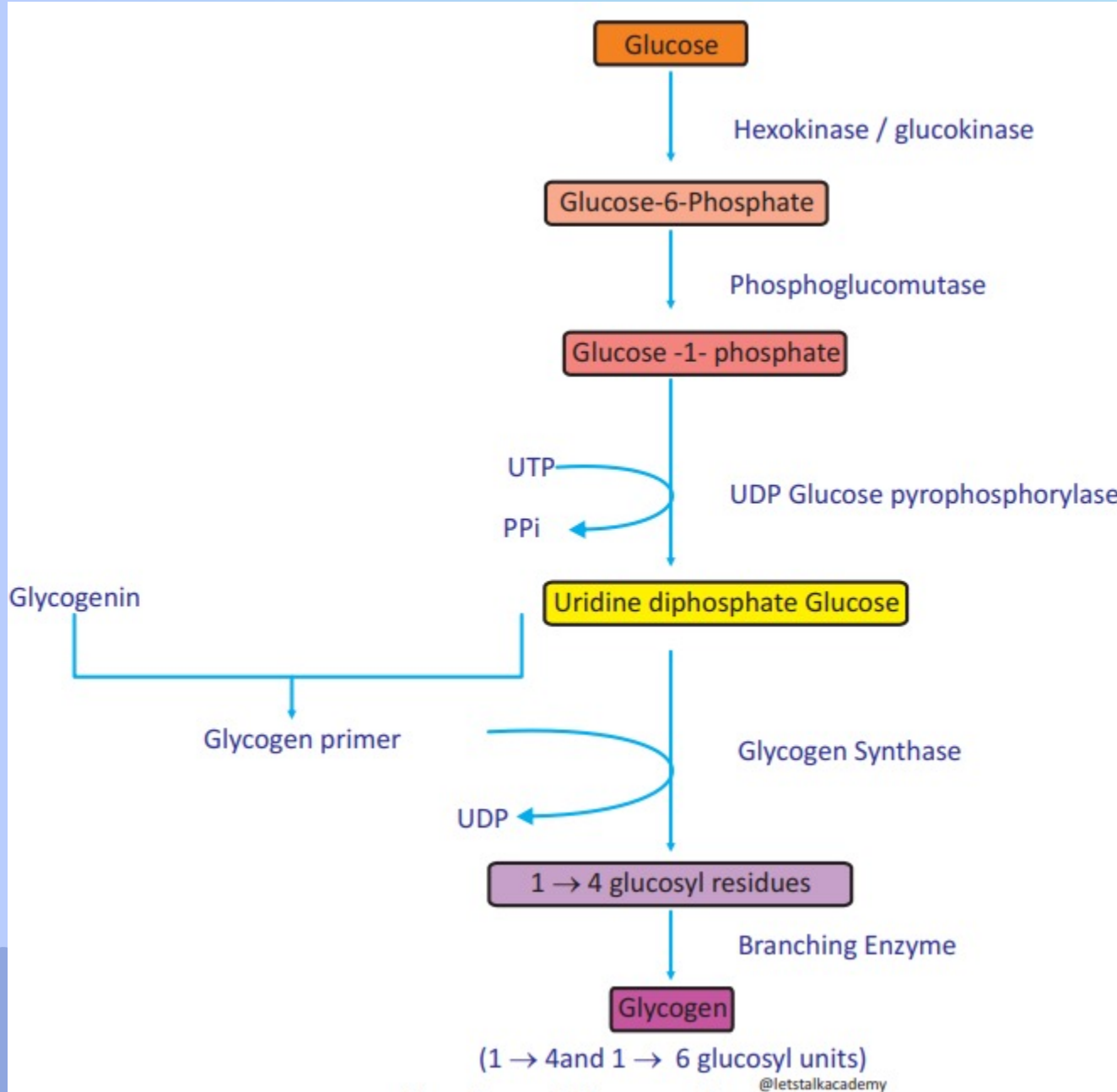
Regulation

Disorders

Glycogenesis

The big picture steps:

- Glycolysis rxn (hexokinase)
- Move the phosphate group (phosphoglucomutase)
- Add UDP to glucose (UDP glucose pyrophosphorylase)
- Attach the glucose to the 'primer' glycogenin
- Add more glucose molecules
- Add branches (branching enzyme)



Move the phosphate group

The details:

Process Diagram: Phosphoglucomutase Mechanism

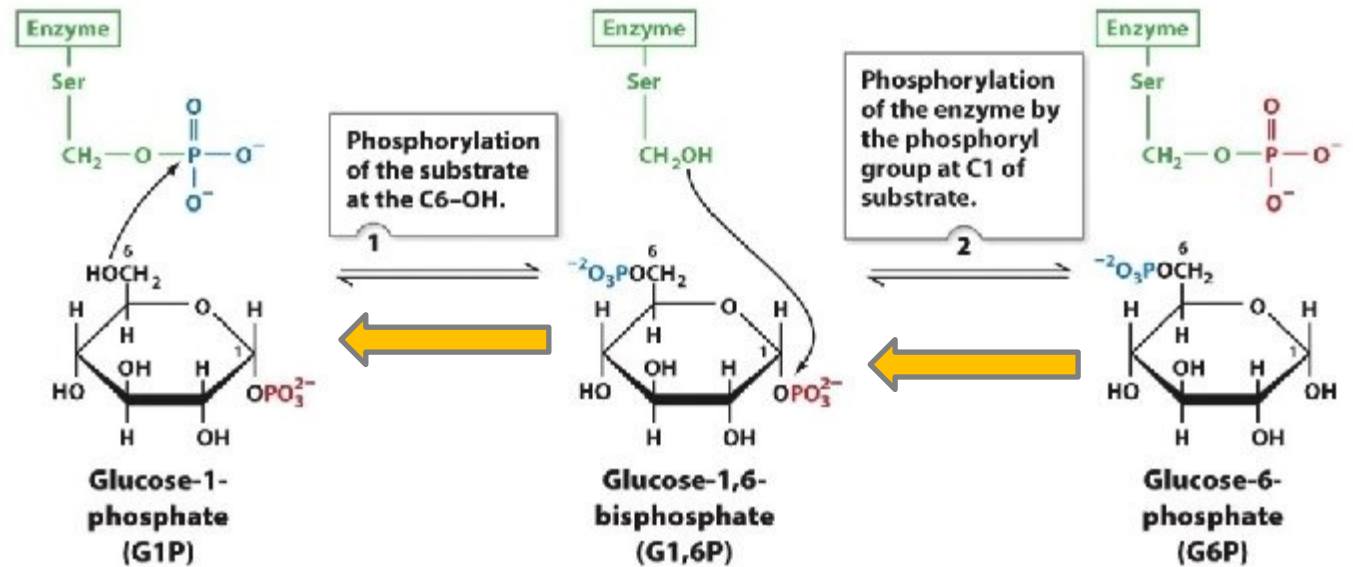
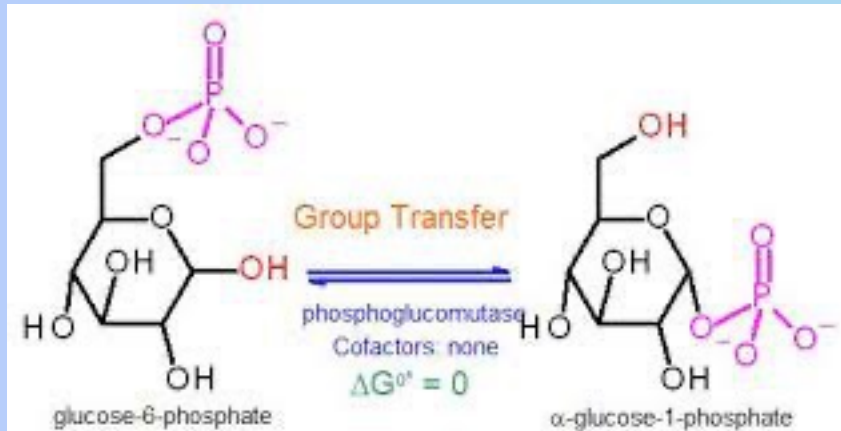
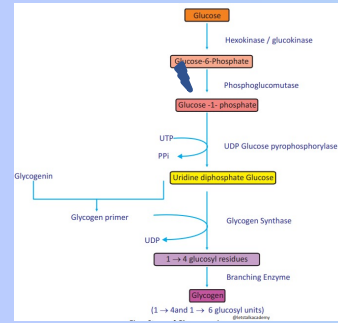
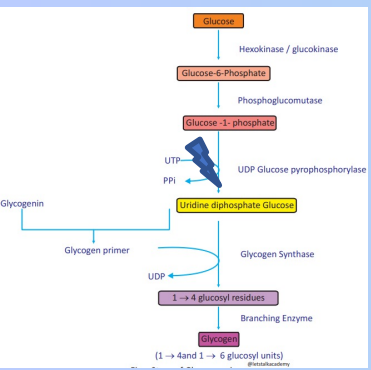


Figure 16-5
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Big picture

Glycogenesis

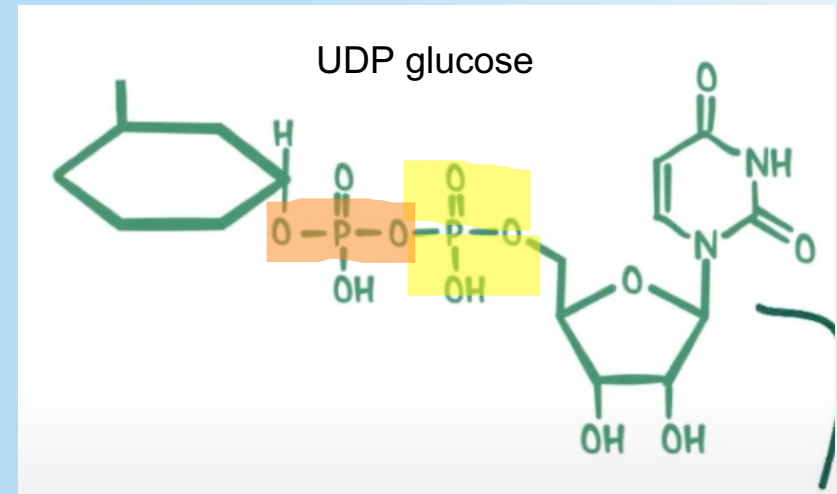
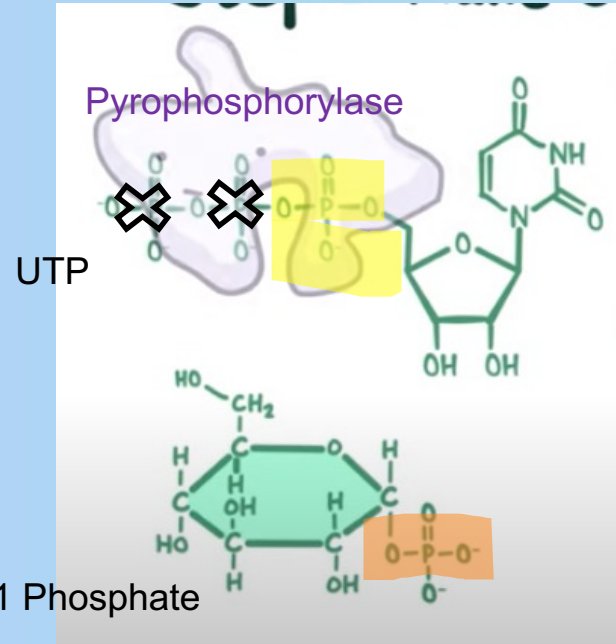




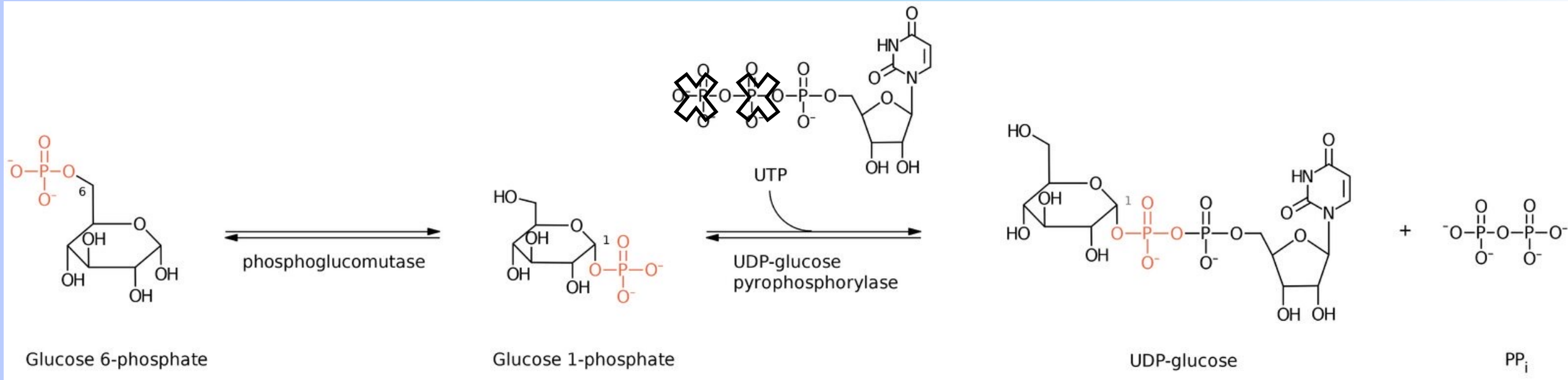
Pyrophosphorylase: Add the UDP to glucose

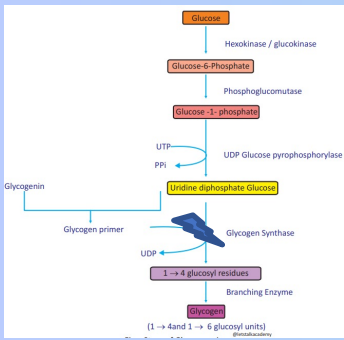
Adding the UDP “activates” the glucose. Glucose is stable as it is, need to transform it to a more reactive/high energy form.

UDP-glucose pyrophosphorylase removes 2 phosphates of UTP (gives the energy)



Glucose 1 Phosphate





Glycogen Synthase

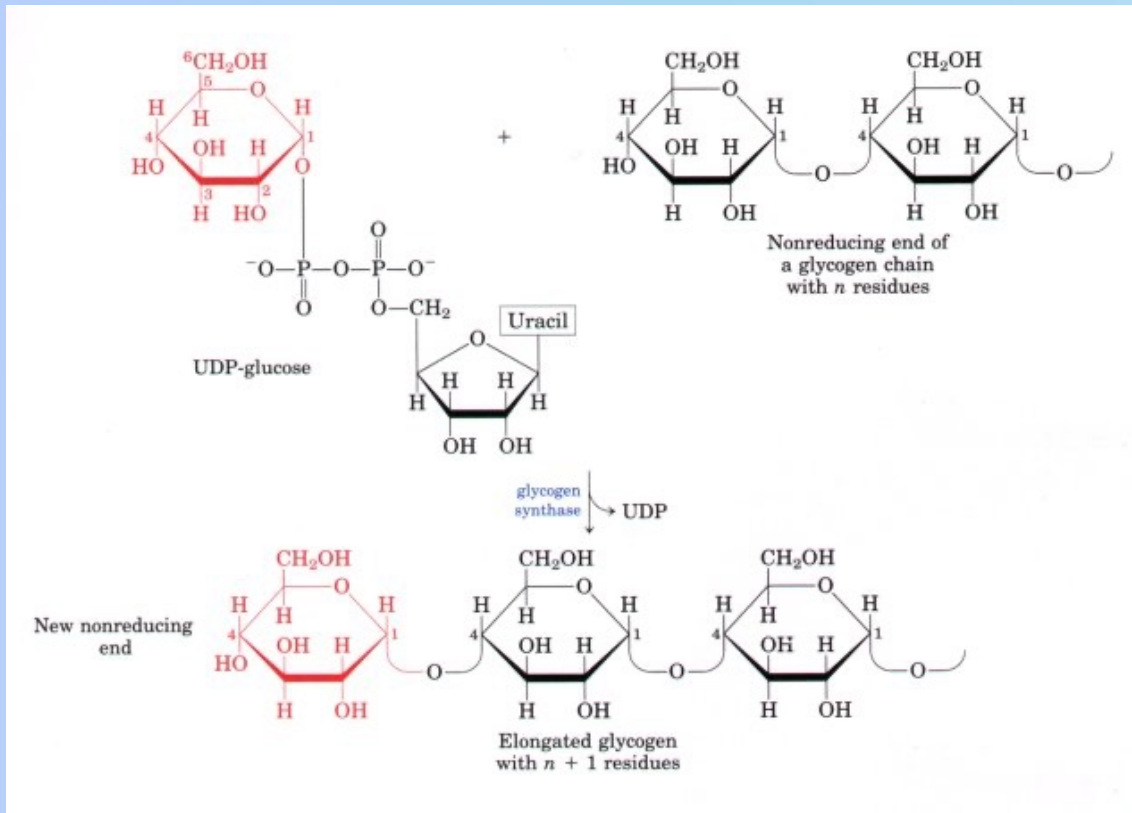
Makes $\alpha 1,4$ glycosidic bonds

- Hydroxyl group of carbon 1 of activated glucose to the C4 of the accepting glucose chain

Can only elongate an existing chain

RATE LIMITING STEP

ACTIVE WITHOUT phosphate

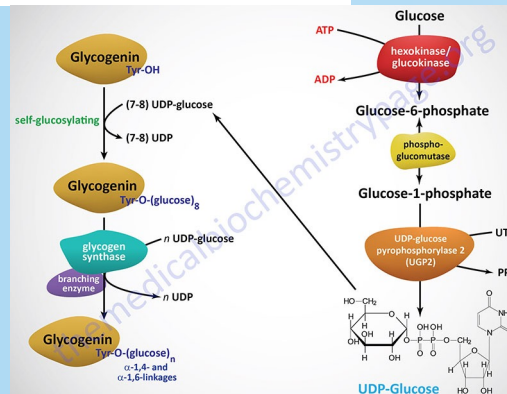
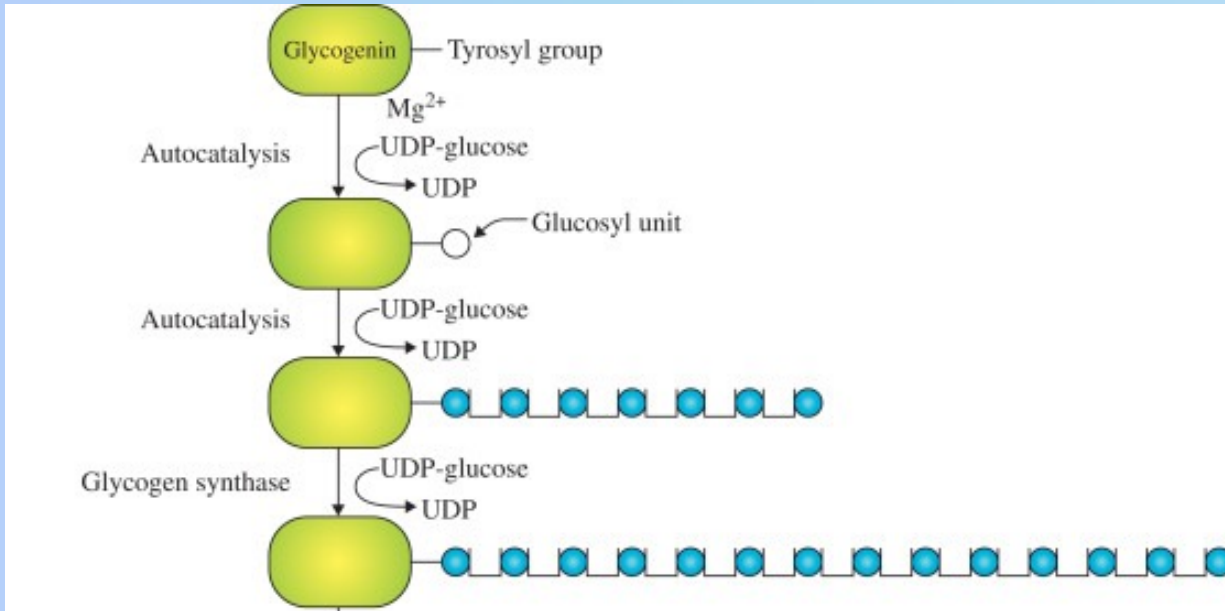
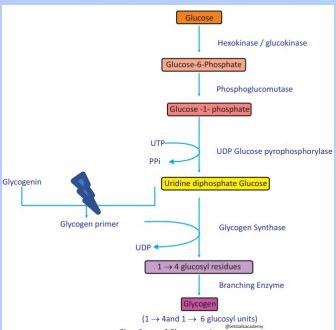


Glycogenin

Protein attached to a tyrosine residue.

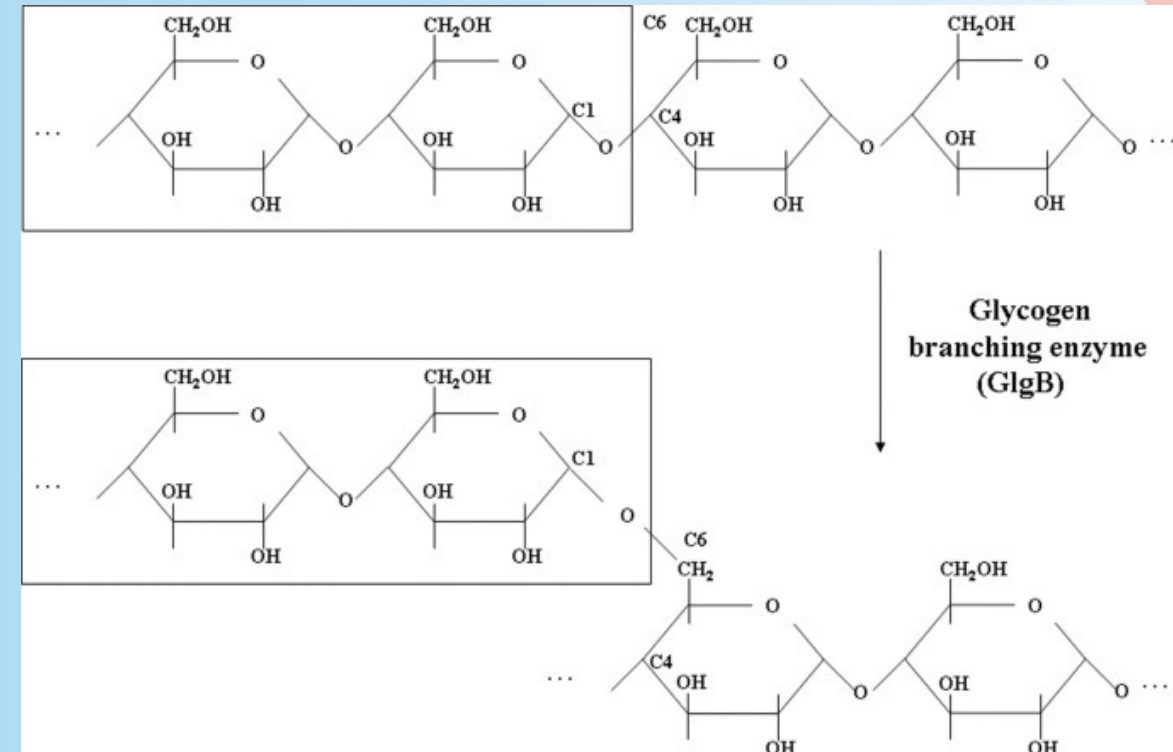
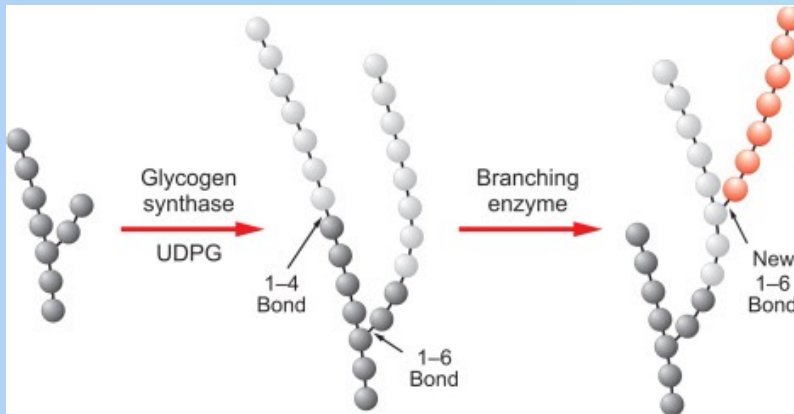
Autocatalysis UDP glucose to make a short chain so newer UDP glucose has a point to attach to. Acts as its own enzyme

Glycogenesis

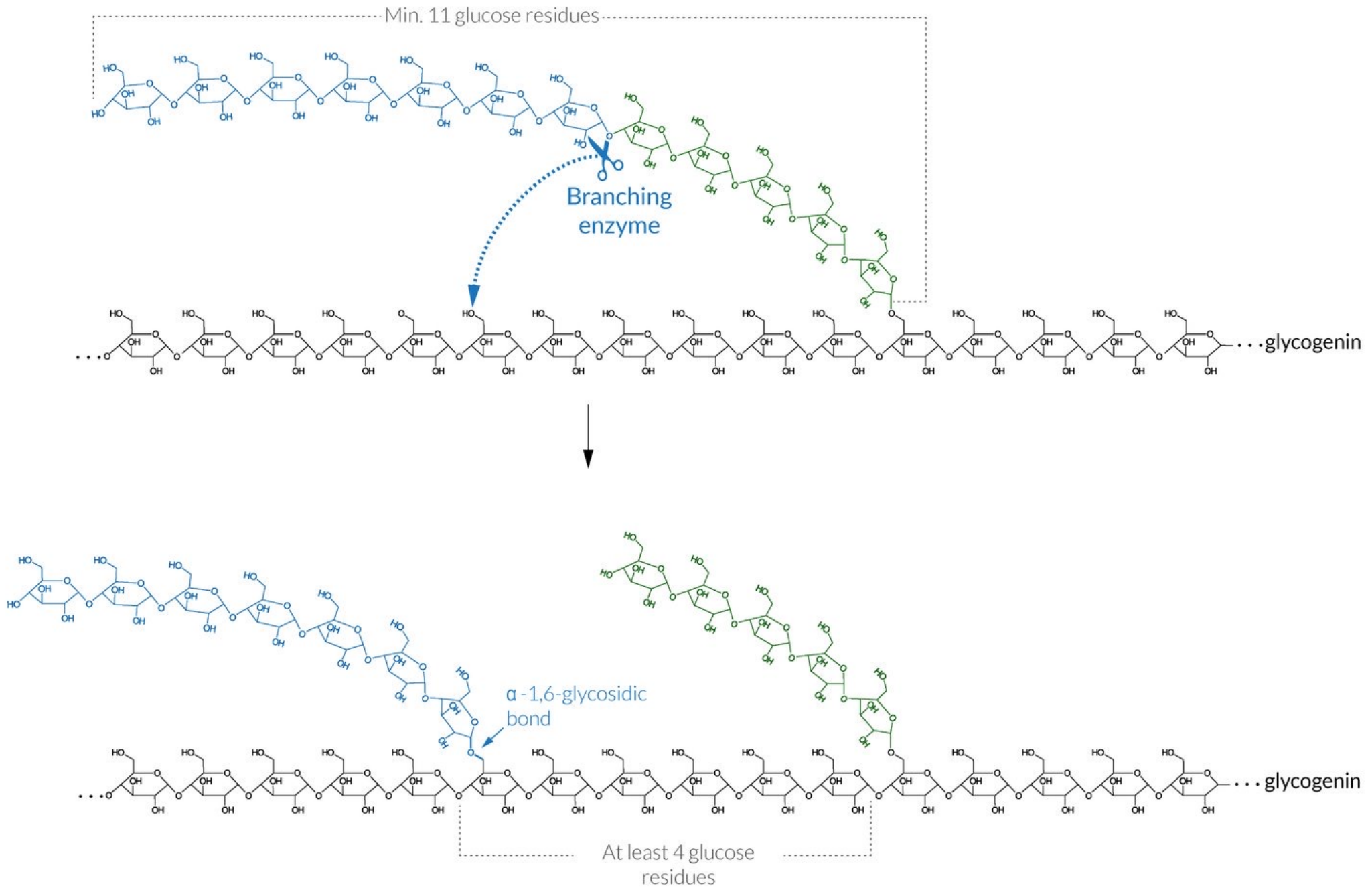


Branching enzyme

- Shortens chains at least 11 glucose long by branching them. And repeats this over and over again.
- Attaches as α 1,6 glycosidic bonds.
- Increases solubility and density



Glycogenesis



Basics

Glycogenesis

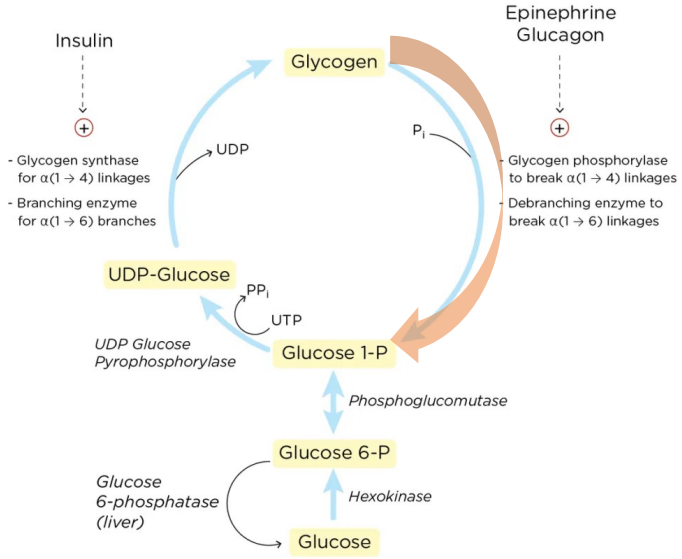
Glycogenolysis

Regulation

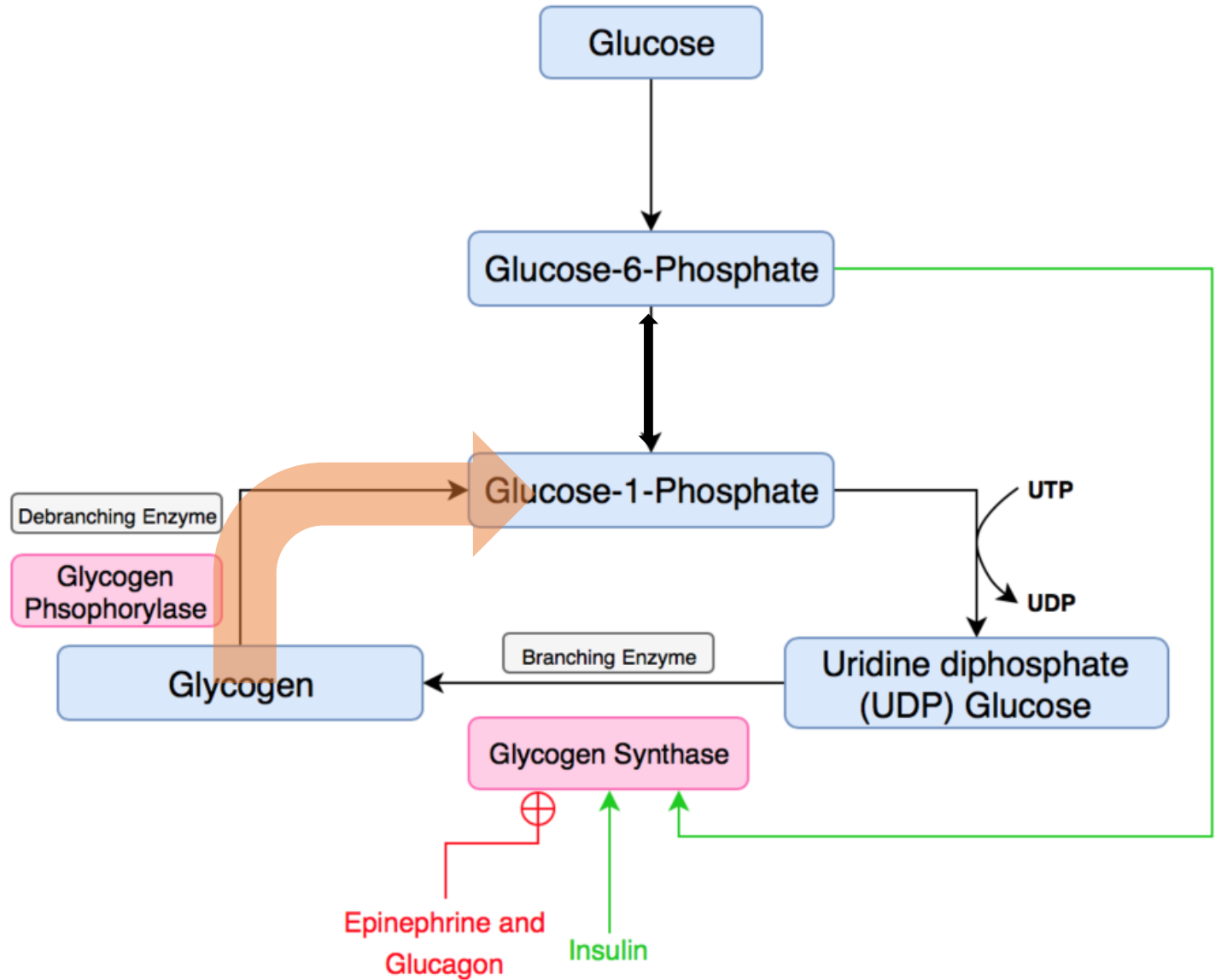
Disorders

Glycogenolysis

Glycogenesis and Glycogenolysis Occurs in Liver and Skeletal Muscle

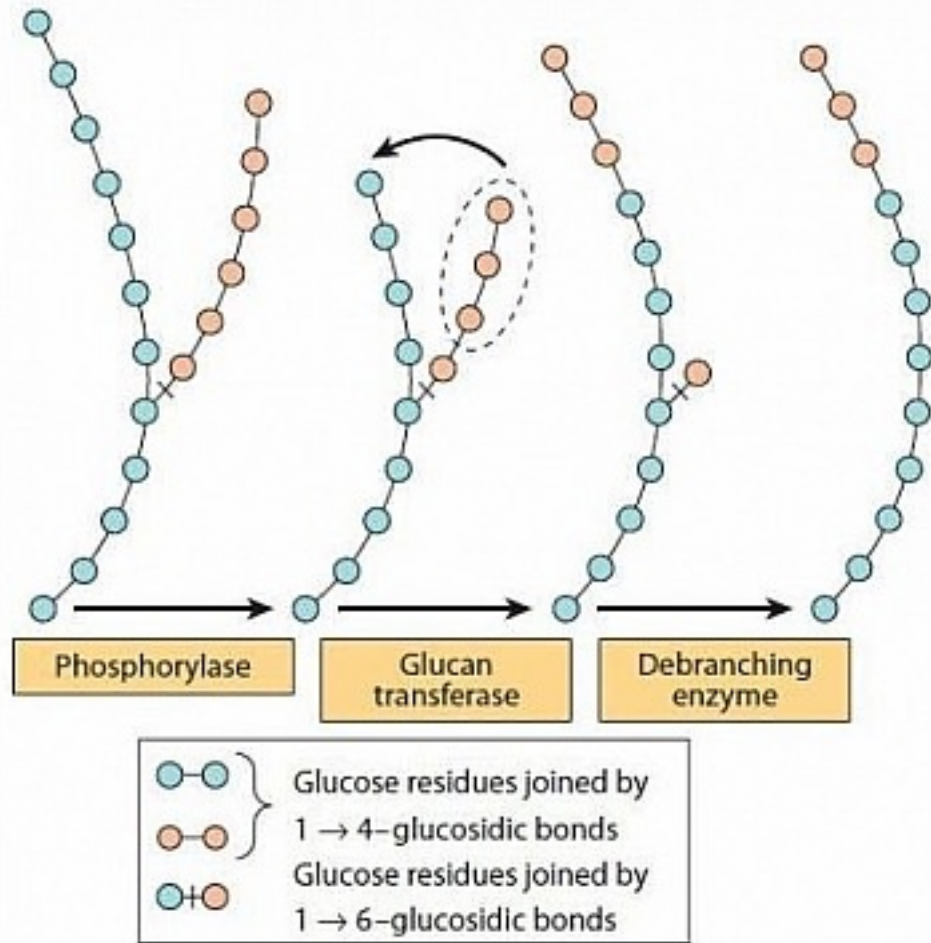


Jack Westin

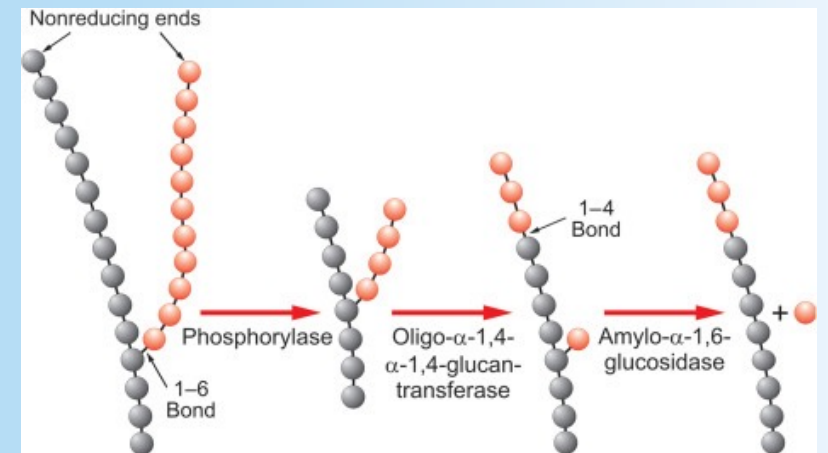


Glycogenolysis overview

Glycogenolysis



Take them off 1 at a time till we get to 4 → Move over 3 → Cut the 1 → Repeat



Glycogen Phosphorylase

- Break $\alpha 1,4$ bonds by phosphorylating
- Works from the outside \rightarrow in
- Residues leave as Glucose-1-phosphate
- STOPS until 4 glycosidic residues per branch
- Uses PLP (B6 derivative)
- ACTIVE when phosphorylated
- RATE LIMITING ENZYME**

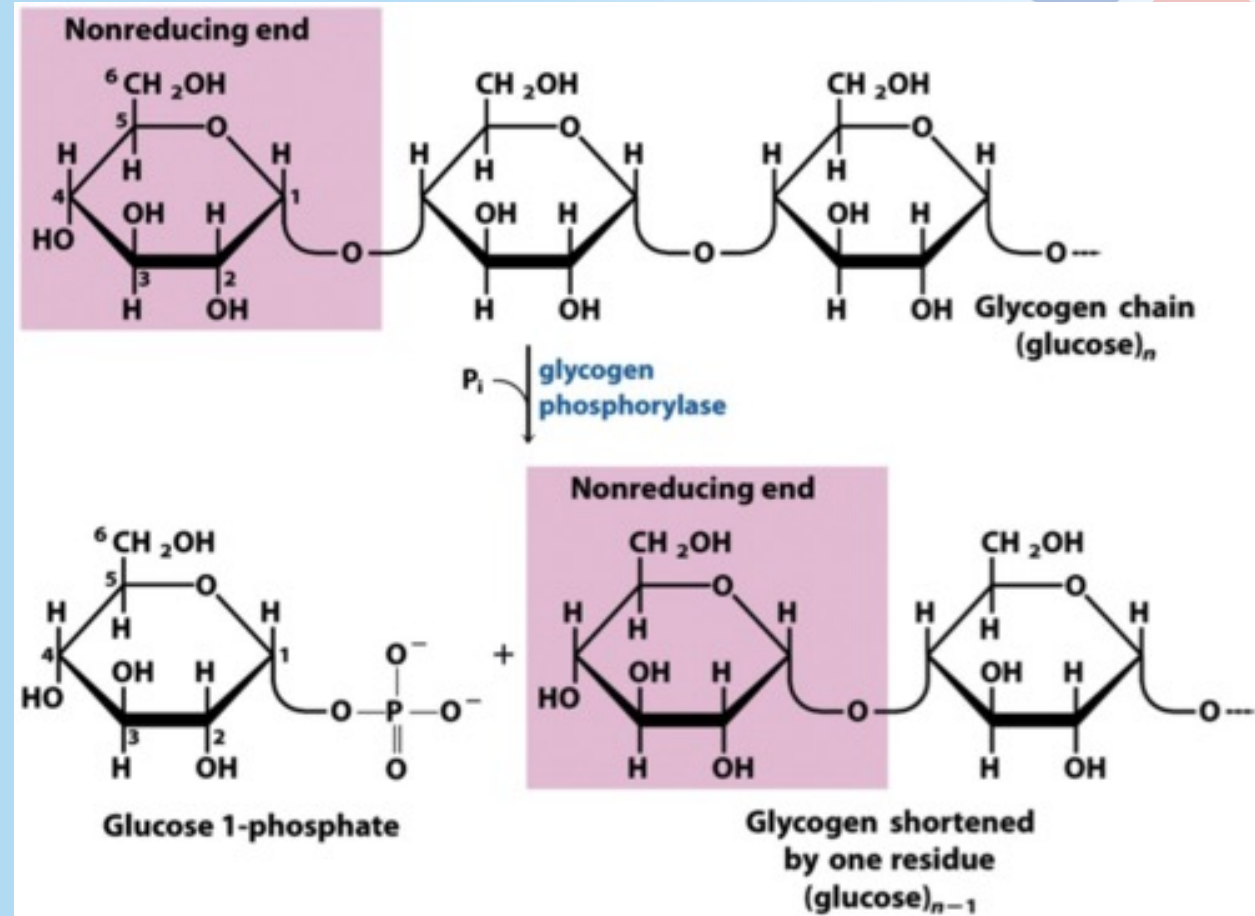
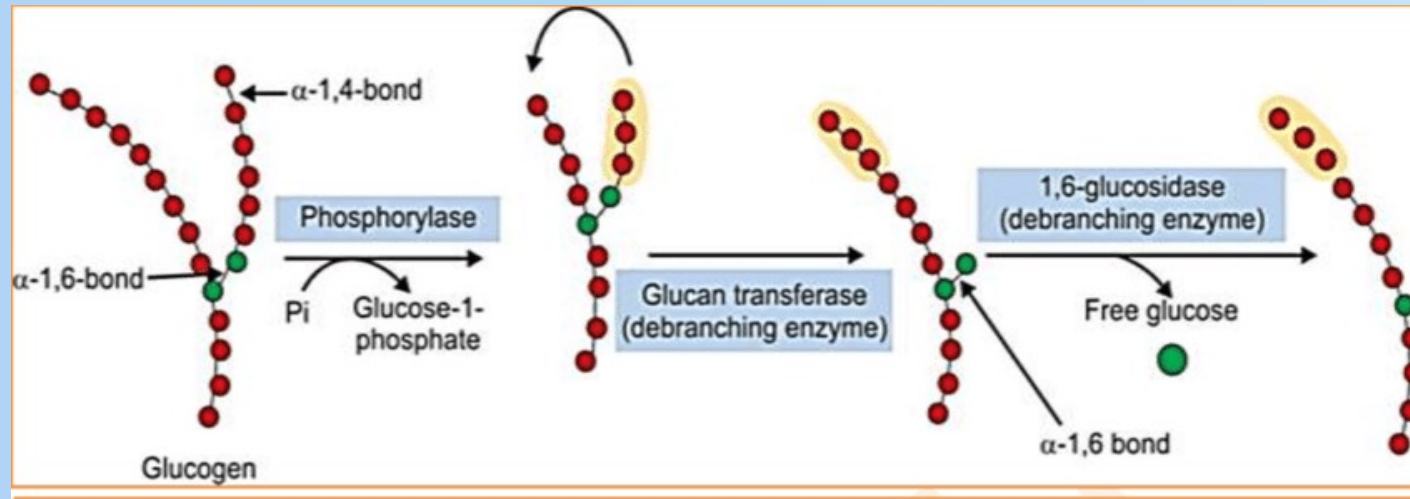


Figure 15-25
Lehninger Principles of Biochemistry, Fifth Edition
© 2008 W. H. Freeman and Company

Debranching enzyme

Enzyme with 2 catalytic sites



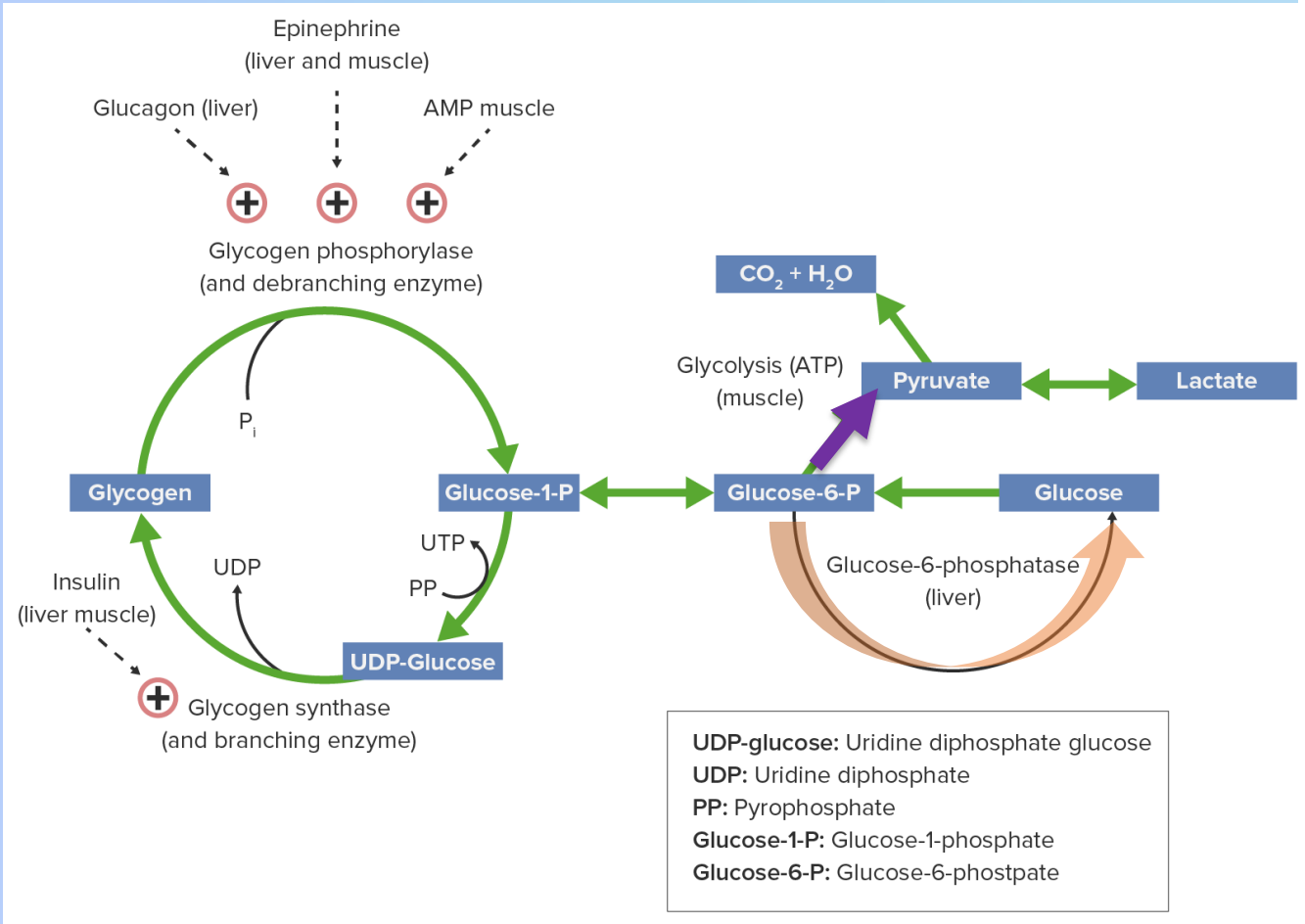
Glucan Transferase

- Moves trisaccharide unit

1,6 Glycosidase

- Cleaves branch and leaves free glucose

Glycogenolysis



- Immediate source in muscle, goes straight to glycolysis

- Remember Glucose-6-phosphatase is **ONLY** in liver
- Only liver can provide glucose to bloodstream



Basics

Glycogenesis

Glycogenolysis

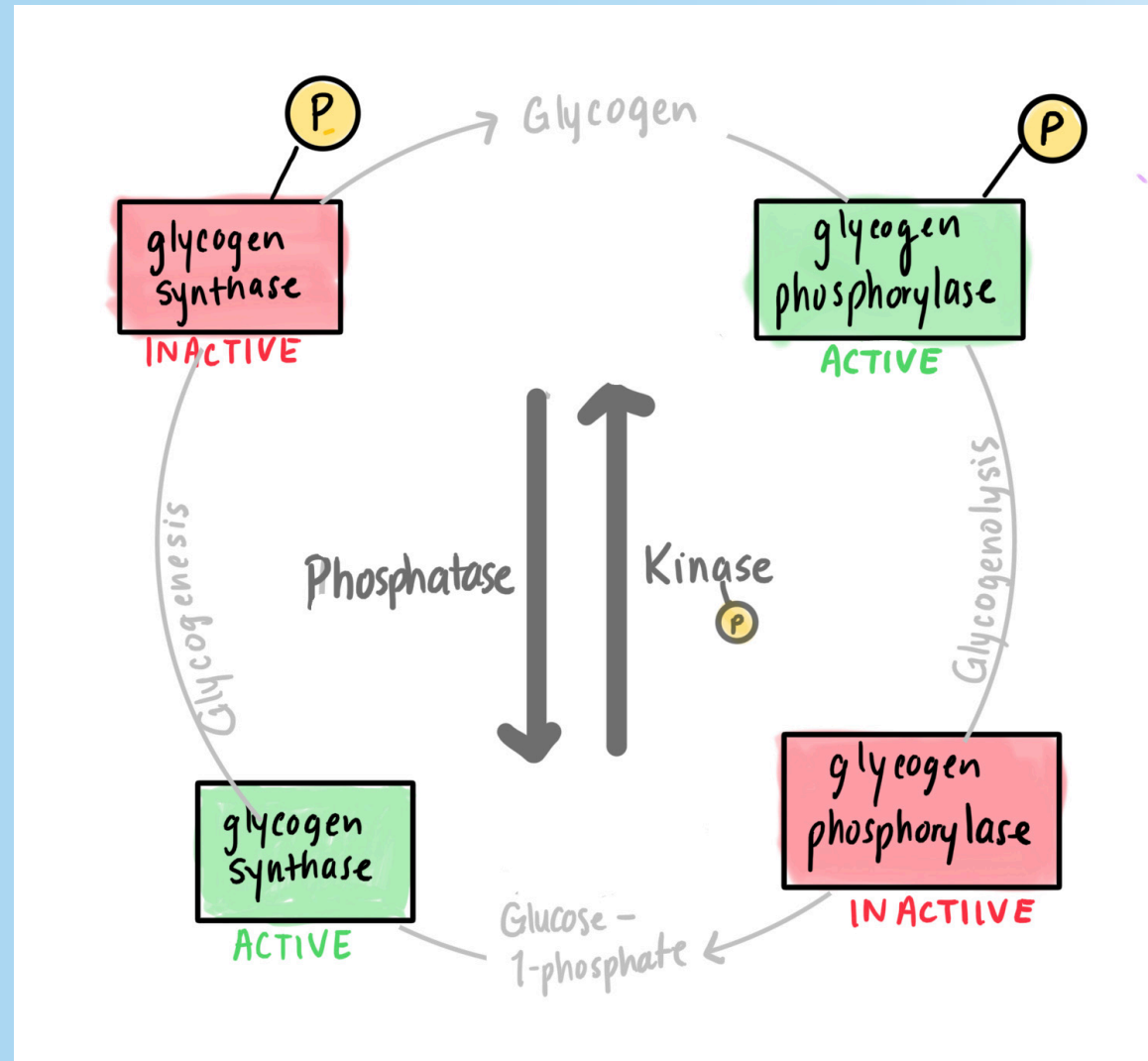
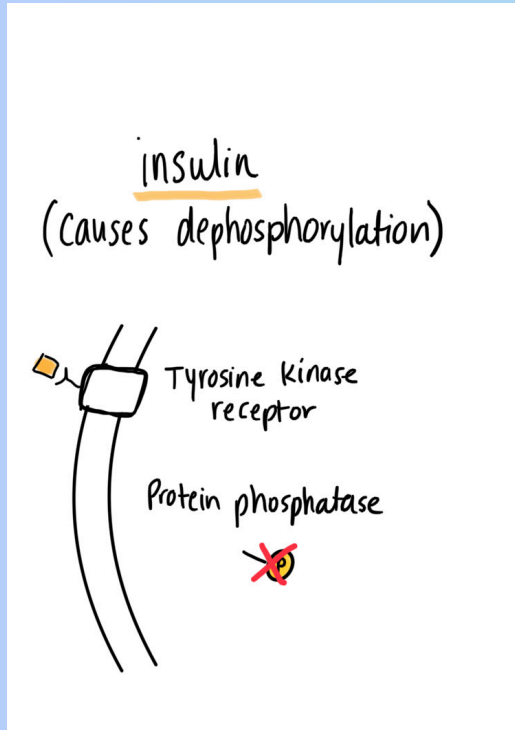
Regulation

Disorders

Regulation

Regulation via phosphate

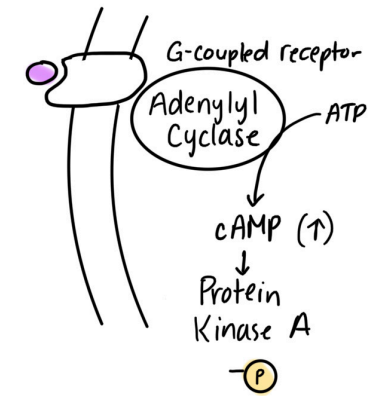
High glucose level
INSULIN



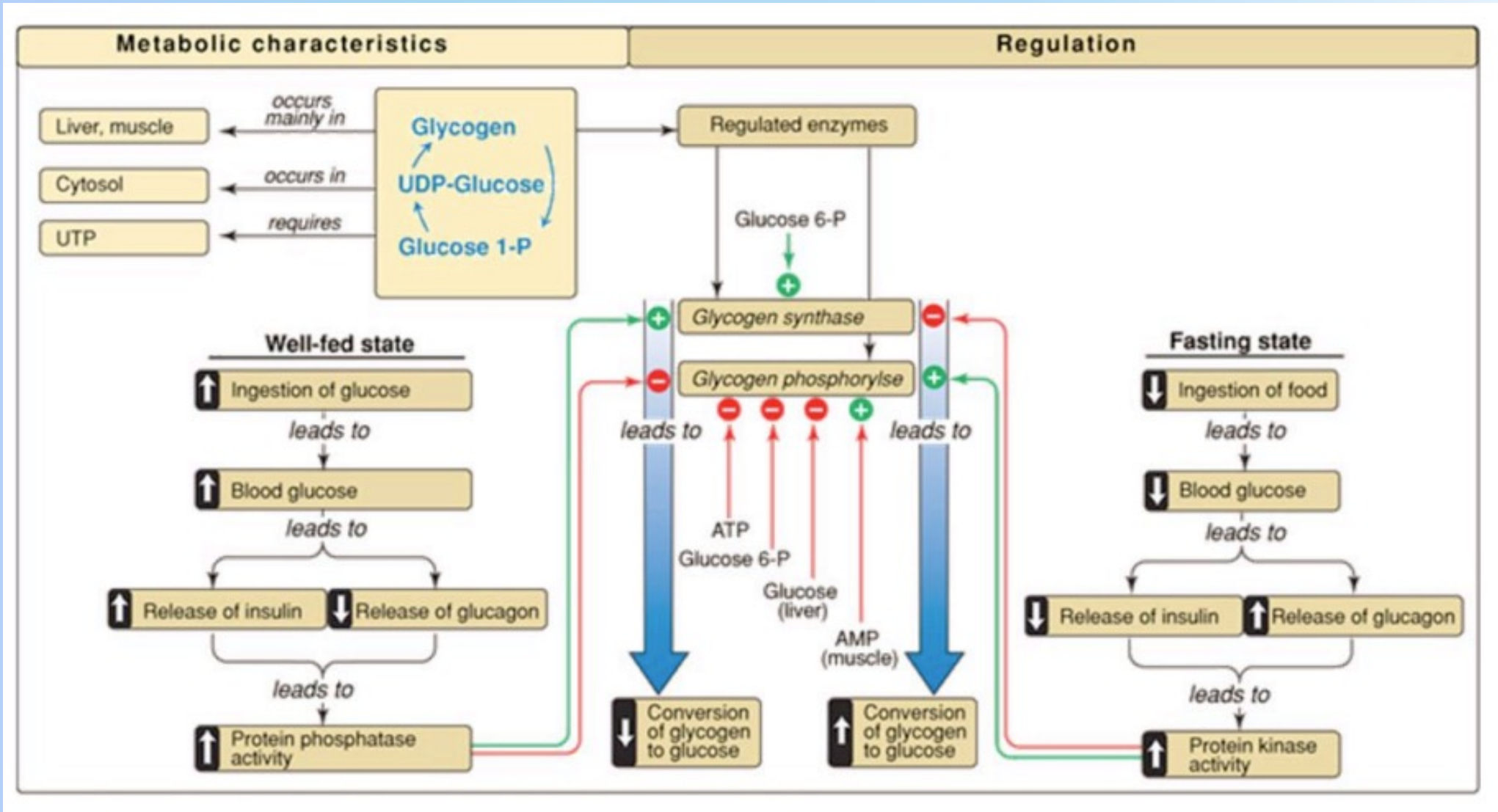
Low glucose level

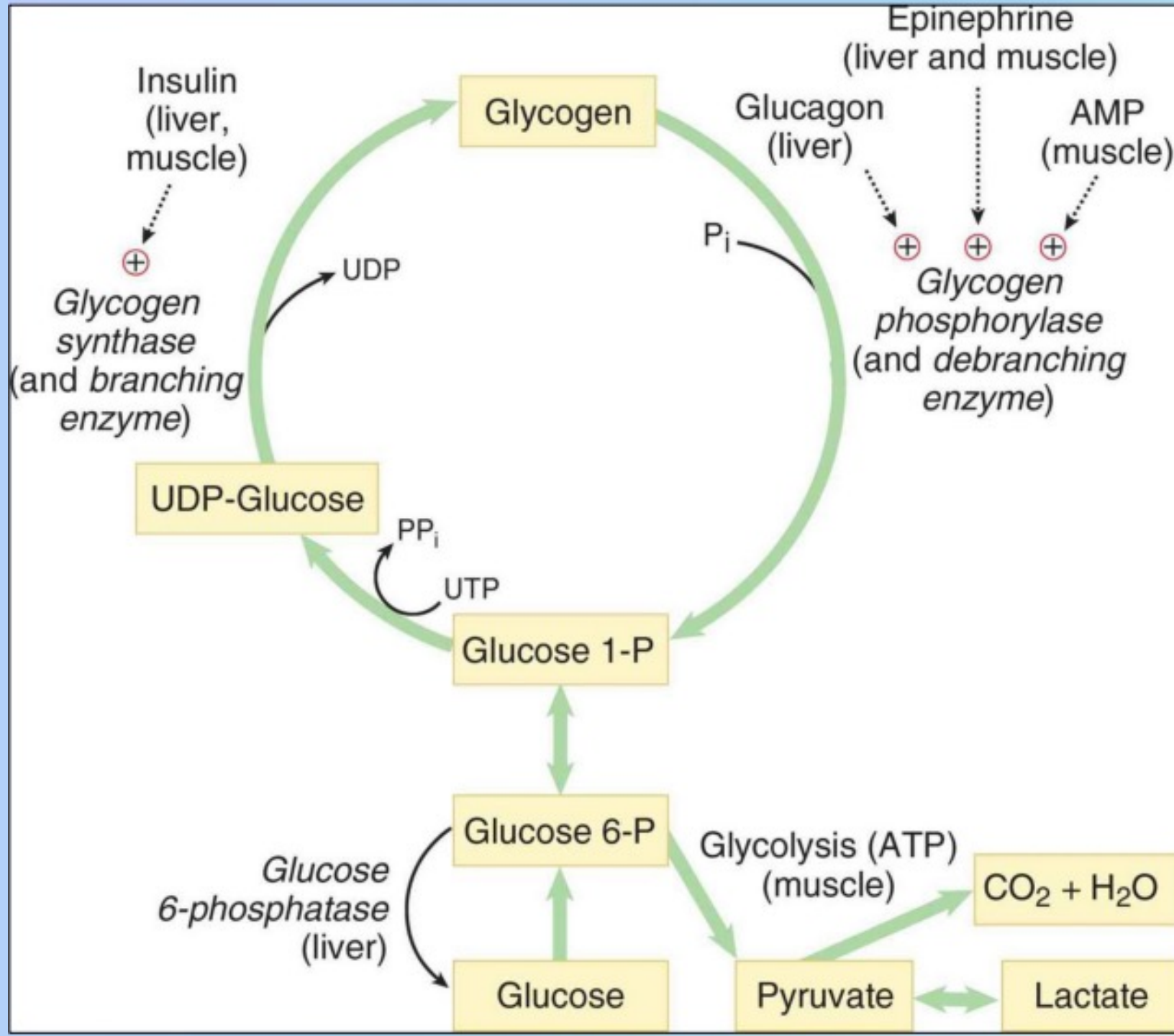
GLUCAGON & epinephrine

(liver) glucagon/epinephrine
(muscle) epinephrine
(causes phosphorylation)



Regulation





Basics

Glycogenesis

Glycogenolysis

Regulation

Disorders

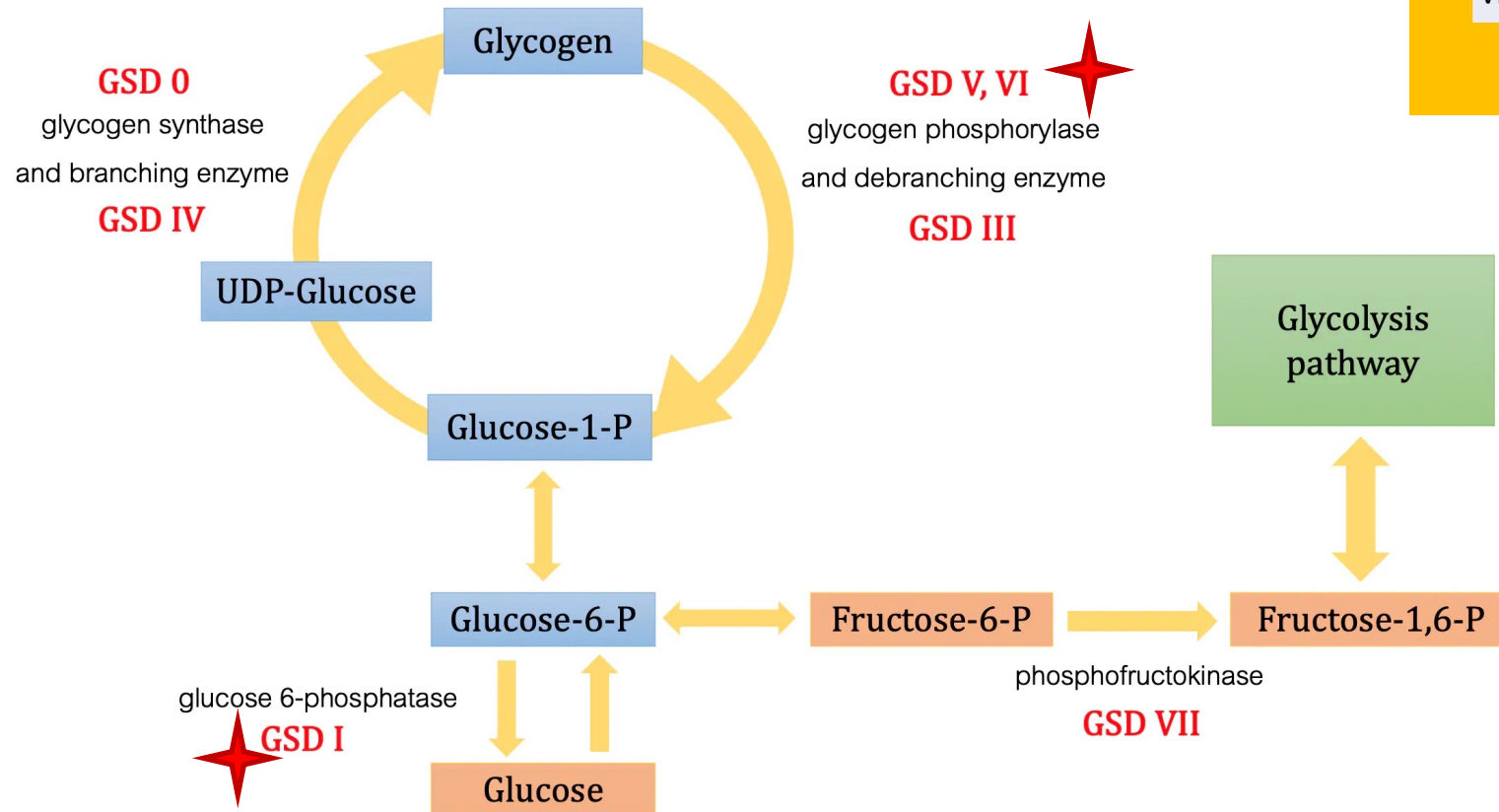
Glycogen Storage Disorders

Glycogen Storage Diseases

Type	Deficient Enzyme
I - Von Gierke	Glucose -6- Phosphate
II - Pompe	Lysosomal α 1,4 glycosidase
III - Cori	Debranching Enzyme
IV - Anderson	Branching Enzyme
V - McArdle	Muscle Glycogen Phosphorylase
VI - Hers	Hepatic Glycogen Phosphorylase

@ Villainous President Called And Molested Her.

www.dentaldevotee.blogspot.com



Type 1: Von Gierke Disease

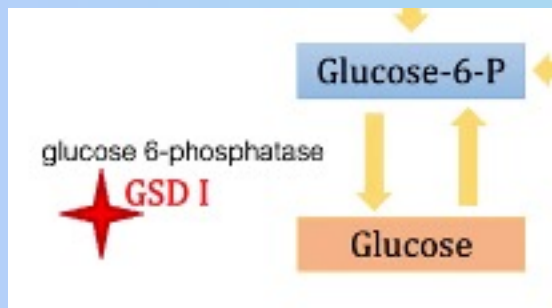
Glucose-6-phosphatase deficiency

Glucose can't be made

Inherited as autosomal recessive disorder
(both parents have to be carriers)

Deficient in liver, kidney and intestinal
mucosa

- Glycogen and fat accumulate in liver → hepatomegaly
- No glucose = hypoglycemia



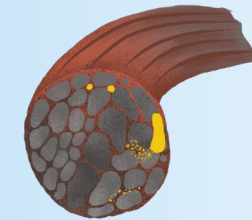
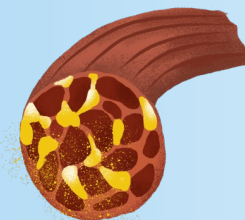
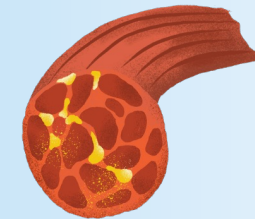
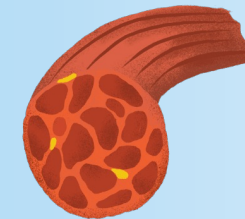
Type 2: Pompe Disease

Lysosomal GAA deficiency

Most severe disease

Affects muscle

Glycogen can't be broken down and
accumulates - especially in heart muscle

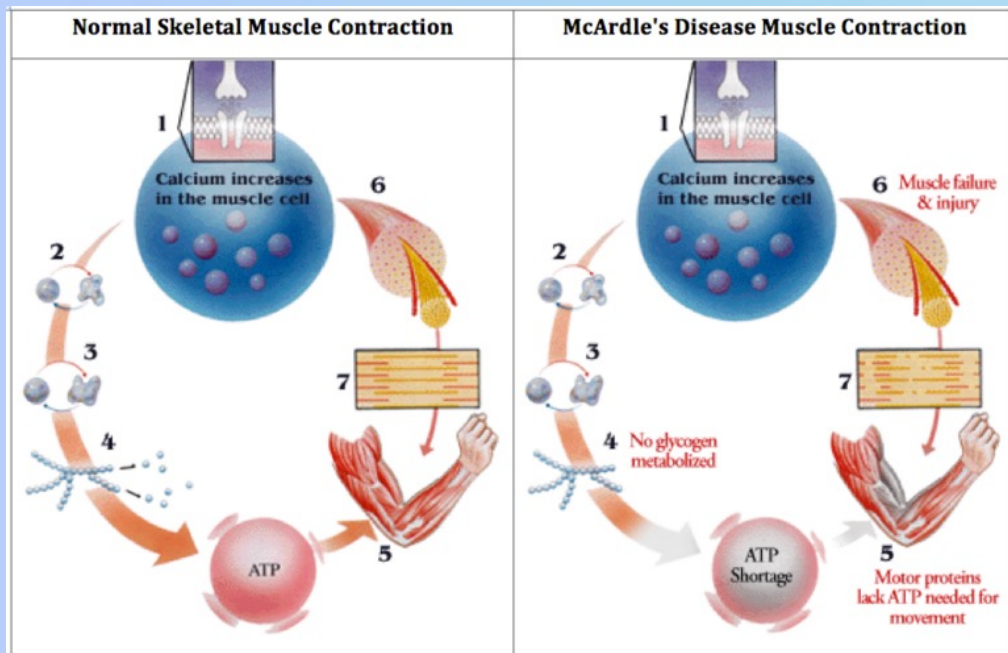


Type V: McArdle's Disease Myophosphorylase Deficiency

Autosomal recessive

Can't break down glycogen

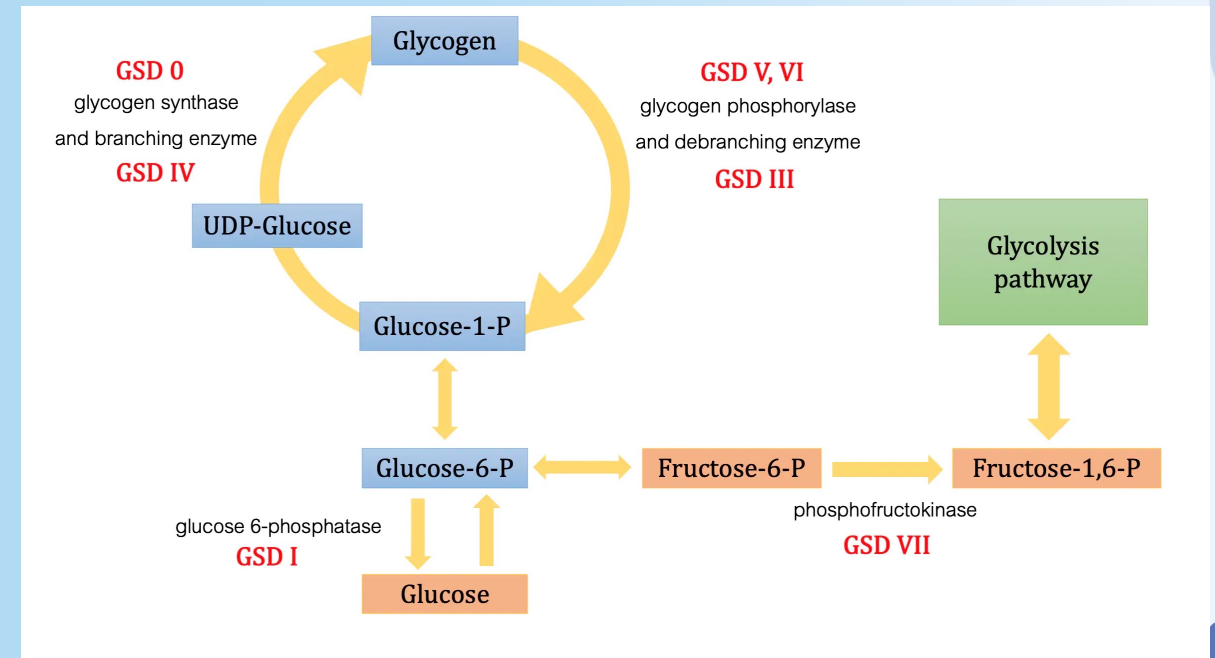
Deficiency of phosphorylase in MUSCLE



Type VI: Hers Disease Liver Phosphorylase Deficiency

Autosomal recessive (most) OR X-linked recessive

Can't break down glycogen in LIVER



Type	Deficient enzyme	Signs and symptoms
I: Von Gierke (90% of all GSDs)	Glucose-6-phosphatase	<ul style="list-style-type: none"> - Severe hypoglycemia → hyperlipidemia - Lactic acidosis - Hepatomegaly - Hyperuricemia - Short stature/doll-like facies/protruding abdomen
II: Pompe	Lysosomal enzyme defect (acid maltase)	<ul style="list-style-type: none"> - Cardiomegaly → death by age 2 - Hepatomegaly - Muscle weakness
III: Cori disease	Debranching enzyme	<ul style="list-style-type: none"> - Mild hypoglycemia and hepatomegaly
IV: Andersen disease	Branching enzyme	<ul style="list-style-type: none"> - Infantile hypotonia, cirrhosis and death by 2 years
V: McArdle	Muscle glycogen phosphorylase (myophosphorylase)	<ul style="list-style-type: none"> - Muscle cramps and weakness on exercise - Myoglobinuria - No rise in lactate during exercise - Recovery or «second wind» after 10-15 minutes of exercise
VI: Hers	Hepatic glycogen phosphorylase	<ul style="list-style-type: none"> - Mild fasting hypoglycemia (compensated by gluconeogenesis) - Hepatomegaly and cirrhosis

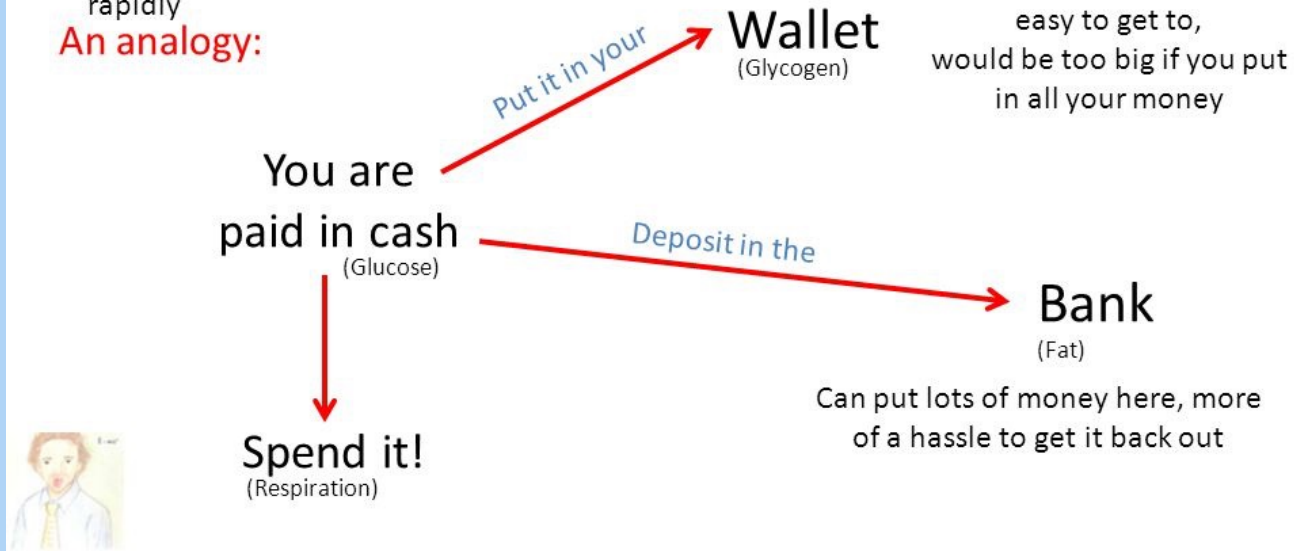


2.3.A3 Lipids are more suitable for long-term energy storage in humans than carbohydrates.

Why is glycogen is needed at all?

- Glycogen can be transported easily by the blood
- Fats in adipose tissue cannot be mobilized as rapidly

An analogy:





1 Go to wooclap.com

2 Enter the event code in the top banner

Event code
CFNHEU