2007-09

M1 - Renal, Fall 2007

Lyons, R.; Burney, R.

<http://hdl.handle.net/2027.42/64946>
http://hdl.handle.net/2027.42/64946
Unless otherwise noted, the content of this course material is licensed under a Creative Commons Attribution – Share Alike 3.0 License.

Copyright 2007, Robert Lyons.

The following information is intended to inform and educate and is not a tool for self-diagnosis or a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional. You should speak to your physician or make an appointment to be seen if you have questions or concerns about this information or your medical condition. You assume all responsibility for use and potential liability associated with any use of the material.

Material contains copyrighted content, used in accordance with U.S. law. Copyright holders of content included in this material should contact open.michigan@umich.edu with any questions, corrections, or clarifications regarding the use of content. The Regents of the University of Michigan do not license the use of third party content posted to this site unless such a license is specifically granted in connection with particular content objects. Users of content are responsible for their compliance with applicable law. Mention of specific products in this recording solely represents the opinion of the speaker and does not represent an endorsement by the University of Michigan.

Viewer discretion advised: Material may contain medical images that may be disturbing to some viewers.
Amino Acid metabolism

Amino acids

Glu, Gln, Asp, NH₃

Urea

Folate metabolism

Methylene THF

Met Cycle

Nucleic Acid metabolism

Purines

DNA

RNA

Pyrimidines

Uric Acid

(energy)
Formation of PRPP: Phosphoribose pyrophosphate

PRPP Use in Purine Biosynthesis:
The First Purine: Inosine Monophosphate
(folates are involved in this synthesis)

Conversion to Adenosine:

Inosine monophosphate → Adenosine monophosphate

Conversion to Guanosine:

Inosine monophosphate → Xanthosine monophosphate → Guanosine monophosphate
Nucleoside Monophosphate Kinases

AMP + ATP  $\leftrightarrow$  2ADP  (adenylate kinase)

GMP + ATP  $\leftrightarrow$  GDP + ADP  (guanylate kinase)

• similar enzymes specific for each nucleotide
• no specificity for ribonucleotide vs. deoxyribonucleotide
Ribonucleotide Reductase

Hydroxyurea inhibits this enzyme: chemotherapeutic use

\[ \text{HONH}^- \text{C}-\text{NH}_2 \]
Regulation of Ribonucleotide Reductase
Nucleoside Diphosphate Kinase

\[ \text{N}_1\text{DP} + \text{N}_2\text{TP} \leftrightarrow \text{N}_1\text{TP} + \text{N}_2\text{DP} \]

\[ \text{dN}_1\text{DP} + \text{N}_2\text{TP} \leftrightarrow \text{dN}_1\text{TP} + \text{N}_2\text{DP} \]

- No specificity for base
- No specificity for ribo vs deoxy
Feed-forward regulation by PRPP

```
PRPP

IMP

ATP  GTP

GMP  AMP

GTP  ATP
```
Feed-forward regulation by PRPP

PRPP

IMP

GMP ATP

GTP

AMP GTP

ATP
Feed-forward regulation by PRPP
Feed-forward regulation by PRPP
Degradation of the Purine Nucleosides:

Adenosine → Inosine → Hypoxanthine

Guanosine → Guanine → Xanthine → Uric acid

Adenosine deaminase (ADA)

purine nucleoside phosphorylase

purine nucleoside phosphorylase

xanthine oxidase

xanthine oxidase
“Salvage” Pathways for Purine Nucleotides

Hypoxanthine + Hypoxanthine-guanine phosphoribosyl transferase → Inosine monophosphate

PRPP

APRT - Adenine phosphoribosyl transferase - performs a similar function with adenine.
Adenosine Deaminase Deficiency:

Deoxyadenosine → dAMP → dADP → dATP

Adenosine deaminase (ADA) → Deoxyinosine → 2-deoxyribose → Hypoxanthine

Hypoxanthine → Guanine → Xanthine → Uric acid
Hyperuricemia can be caused by:

- Accelerated degradation of purines:
  - Accelerated synthesis of purines
  - Increased dietary intake of purines
- Impaired renal clearance of uric acid

Gout: deposition of urate crystals in joints, “tophi” in cooler periphery

Allopurinol inhibits xanthine oxidase and reduces blood uric acid levels:
The hands of a patient with a long history of gout, including high serum urate levels
Lesch-Nyhan Syndrome: Defective HGPRT

- hyperuricemia
- spasticity
- mental retardation
- self-mutilation behavior

A defect in APRT does NOT have similar consequences
Myoadenylate Deaminase ‘Fills’ the TCA Cycle in Muscle
Carbamoyl phosphate synthetase II - a *cytoplasmic* enzyme...

\[ 2\text{ATP} + \text{HCO}_3^- + \text{glutamine} + H_2O \rightarrow \text{NH}_2\text{C} - \text{O}^2- + \text{glutamate} + 2\text{ADP} + P_i \]

carbamoyl phosphate

...used for pyrimidine synthesis

\[ \text{carbamoyl phosphate} + \text{aspartate} \rightarrow \text{orotate} \]
Orotate is linked to PRPP to form Uridine monophosphate:
Newly-synthesized uridine monophosphate will be phosphorylated to UDP and UTP, as described for the purine nucleotides.

UTP can be converted to CTP by CTP Synthetase:
Some UDP is converted to dUDP via ribonucleotide reductase.

The Thymidylate Synthase Reaction:
Methotrexate Inhibits Dihydrofolate Reductase:

Dihydrofolate builds up, levels of THF become limiting, thymidylate synthase is unable to proceed. Follow it with a dose of Leucovorin, a.k.a. formyl-THF.
FdUMP Inhibits The Thymidylate Synthase Reaction:
Complicated Pathways for Pyrimidine Production:

This figure is primarily a study aid; you do not need to memorize it or reproduce it. The information here merely summarizes material from previous sections.
Pathologies of pyrimidine nucleotide biosynthesis:

Orotic acidurea due to OTC deficiency - please review your Urea Cycle notes.

Hereditary orotic acidurea - deficiency of the enzyme that convert orotase to OMP to UMP. Not common.
Pyrimidine degradation:

Cytidine deaminase converts cytidine to uridine

\[
\begin{align*}
\text{Cytidine} & \xrightarrow{\text{cytidine deaminase}} \text{Uridine} \\
\text{(deoxy)thymidine} & \xrightarrow{\text{pyrimidine phosphorylase}} \text{(P) deoxyribose-1-phosphate} + \text{thymine}
\end{align*}
\]

Degradation of the base proceeds (products are unimportant here)
Pyrimidines can be salvaged as well:

Enzyme: Pyrimidine nucleoside phosphorylases
Thymine + deoxyribose-1-phosphate  --> thymidine
(NOT thymidine monophosphate!)

Enzyme: Thymidine kinase - adds the monophosphate back
Thymidine + ATP --> thymidine monophosphate

Herpes Simplex Virus carries its own tk gene
Certain drugs act via the pyrimidine salvage pathway:

Acyclovir \[ \xrightarrow{\text{HSV thymidine kinase}} \] AcycloGMP

5-fluorouracil + deoxyribose-1-phosphate \[ \xrightarrow{\text{pyrimidine phosphorylase}} \] fluorodeoxyuridine \[ \xrightarrow{\text{uridine kinase}} \] fluorodeoxyuridine monophosphate (FdUMP)
5-FU efficacy depends on rate of degradation vs activation

5-FU \rightarrow \rightarrow \text{FdUMP} \rightarrow \text{inactivation of TS}

+ methylene-THF + Thymidylate Synthase

\text{Degradation}
\text{(via dihydropyrimidine dehydrogenase, DPD)}

\text{DPD inhibitors can potentiate 5FU activity}
Capecitabine mode of action:

Cytosine arabinoside (araC) activation and inactivation: