Hypoxia and hyperoxia

SB20

- The MELAS syndrome (mitochondrial encephalopathy, lactic acidosis and stroke-like episodes)
- is a mitochondrial disease with heart manifestations
- in which hypertrophic cardiomyopathy is the most outstanding.

- A pregnant 23-year-old female undergoes neurology and cardiology consultations for possible mitochondrial disease
- On ECG concentric ventricular hypertrophy and normal ventricular function were found, with no other cardiovascular history

- Her mother had died at 42 years of age diagnosed with MELAS syndrome, with hypertrophic cardiomyopathy, multiple episodes of acute lung oedema, deafness and repeat ictus.
- Her grandmother had died in the fourth decade of life due to non-specified heart causes.
- From the 20th week of gestation on she began to have episodes in which she had difficulty breathing accompanied occasionally by typical chest pain.

• Which substrates are oxidized in the respiratory chain?

 What will be the ratio of NADH and NAD⁺ concentrations in hypoxia? • How increased concentrations of NADH will affect upon concentration of lactate?

Lactate can be elevated up to 30 fold



Hyperoxia

What are free radicals?

- Free radicals are highly reactive molecular species
- with an unpaired electron.
- They can react with, and modify, proteins, nucleic acids and fatty acids in cell membranes and plasma lipoproteins.

List some of the oxygen radicals (reactive oxygen species)

• superoxide $(O_2 \cdot \overline{})$

- hydroxyl (OH·)
- perhydroxyl (O_2H ·)

List the sources of oxygen radicals from figure 45-2.

- Oxygen radicals arise as a result of
- exposure to ionizing radiation,
- nonenzymic reactions of transition metal ions,
- respiratory burst of activated macrophages,
- and the normal oxidation of reduced flavin coenzymes.



• What is the role of oxygen radicals in activated macrophages?

Why it is important to have specific protein carriers in the body for transition metal ions?

• In the respiratory chain

oxidation of reduced flavin groups

transfer of electrones results with intermediates - radicals



What diseases are caused by DNA damage?

According to Figure 45-1 explain how radicals can cause autoimmune disease and atherosclerotic plaques.



Radical damage to lipids and proteins in **plasma lipoproteins** is a factor in the development of **atherosclerosis** and coronary artery disease;

radical damage to **nucleic acids** may induce heritable mutations and cancer;

radical damage to **proteins** may lead to the development of **autoimmune** diseases.

Slika 45-1. Radikali uzrokuju oštećenje tkiva.





• List the enzymatic antioxidants

• (Harper, Chapter 12).

• catalase

superoxide dismutase glutathione peroxidase, glutathione reductase Protection against radical damage is afforded by enzymes and nonenzymic reactions

- Enzymes
 - that remove superoxide ions and hydrogen peroxide,
 - enzymic reduction of **lipid peroxides** linked to oxidation of glutathione.

What is the substrate and the product of the enzyme **catalase** (Table 52-5)?

What is the substrate and the product of the enzyme **superoxide dismutase?**

Which reaction catalyzes **glutathione peroxidase**?



3. glutathione peroxidase (GPx; contains Se)







• Which reaction catalyzes glutathionereductase?

$2\text{GSH} + \text{R-O-OH} \rightarrow \text{G-S-S-G} + \text{R-OH} + \text{H}_2\text{O}$

$G-S-S-G + NADPH + H^+ \rightarrow 2GSH + NADP^+$

rate of encounter	
Enzyme	$k_{\rm cat}/K_{\rm M}({ m s}^{-1}{ m M}^{-1})$
Acetylcholinesterase	1.6×10^{8}
Carbonic anhydrase	8.3×10^{7}
Catalase	4×10^{7}
Crotonase	2.8×10^{8}
Fumarase	$1.6 imes 10^{8}$
Triose phosphate isomerase	2.4×10^{8}
β-Lactamase	1×10^{8}
Superoxide dismutase The fastest!	7×10^{9}

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stymes for which k

is close to the diffusion-controlled

Source: After A. Fersht, Structure and Mechanism in Protein Science: A Guide to Enzyme Catalysis and Protein Folding (W. H. Freeman and Company, 1999), Table 4.5.

Describe the mechanisms

- and dietary factors
- that protect against radical damage.

List the non-enzymatic antioxidants (Harper, Chapter 45).

Protection against radical damage is afforded by enzymes and nonenzymic reactions

- Nonenzymic reactions
 - of **lipid peroxides** with vitamin E,
 - reaction of radicals with compounds such as vitamins C and E, carotene, ubiquinone, uric acid, and dietary polyphenols that form relatively stable radicals that persist long enough to undergo reaction to nonradical products.

VITAMINs – exogenous non-enzymatic antioxidant

- vitamin E
- vitamin A
 - antioxidant in membranes

• vitamin C

operates in aqueous compartments of the cells and in the extracellular fluid

What effects show carotene and vitamin E in high doses?

- Except in people who were initially deficient,
- Intervention trials of vitamin E and carotene have generally shown increased mortality among those taking the supplements.
- Carotene is only an antioxidant at low concentrations of oxygen;
- at higher concentrations of oxygen it is an autocatalytic prooxidant.
- Vitamin E forms a stable radical that is capable of either undergoing reaction with water-soluble antioxidants or penetrating further into lipoproteins and tissues, so increasing radical damage.

Endogenous non-enzymatic antioxidant

Coenzyme Q (ubiquinol / ubiquinon)





