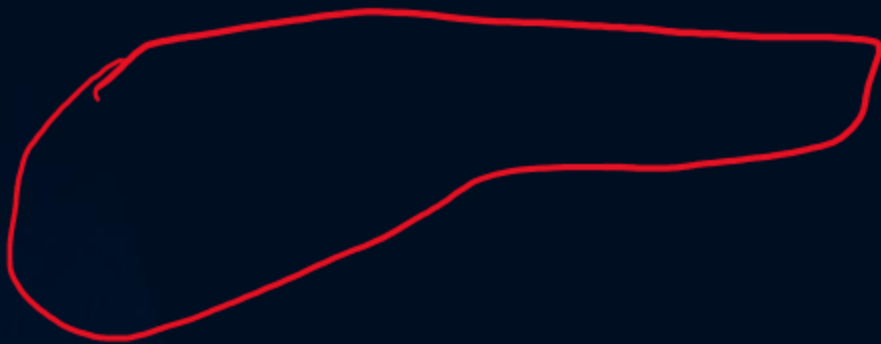


Endocrine Part 3

DIABETES MELLITUS

Pancreas.



Endocrine

Islets of Langerhans.



Alpha (Glucagon)

Beta (Insulin)

Delta (Somatostatin)

Homeostasis of blood sugar.

← 3.6 - 6.2 mmol/L

Hypoglycemia (4 - 6)

→ Hyperglycemia (DKA; HHS)

Glucose Metabolism

Sandwich

Glucose

2 ATP

(O₂) Aerobic metabolism

Pyruvate

Anaerobic metabolism

(no O₂)

ketone metabolism
Acetyl CoA
Fat metabolism
glycogen

Crebs Cycle

34 ATP
electron transport chains

Lactic Acid

Ethanol

ATP (Walk-Up Stairs)

Glucose Metabolism and Regulation

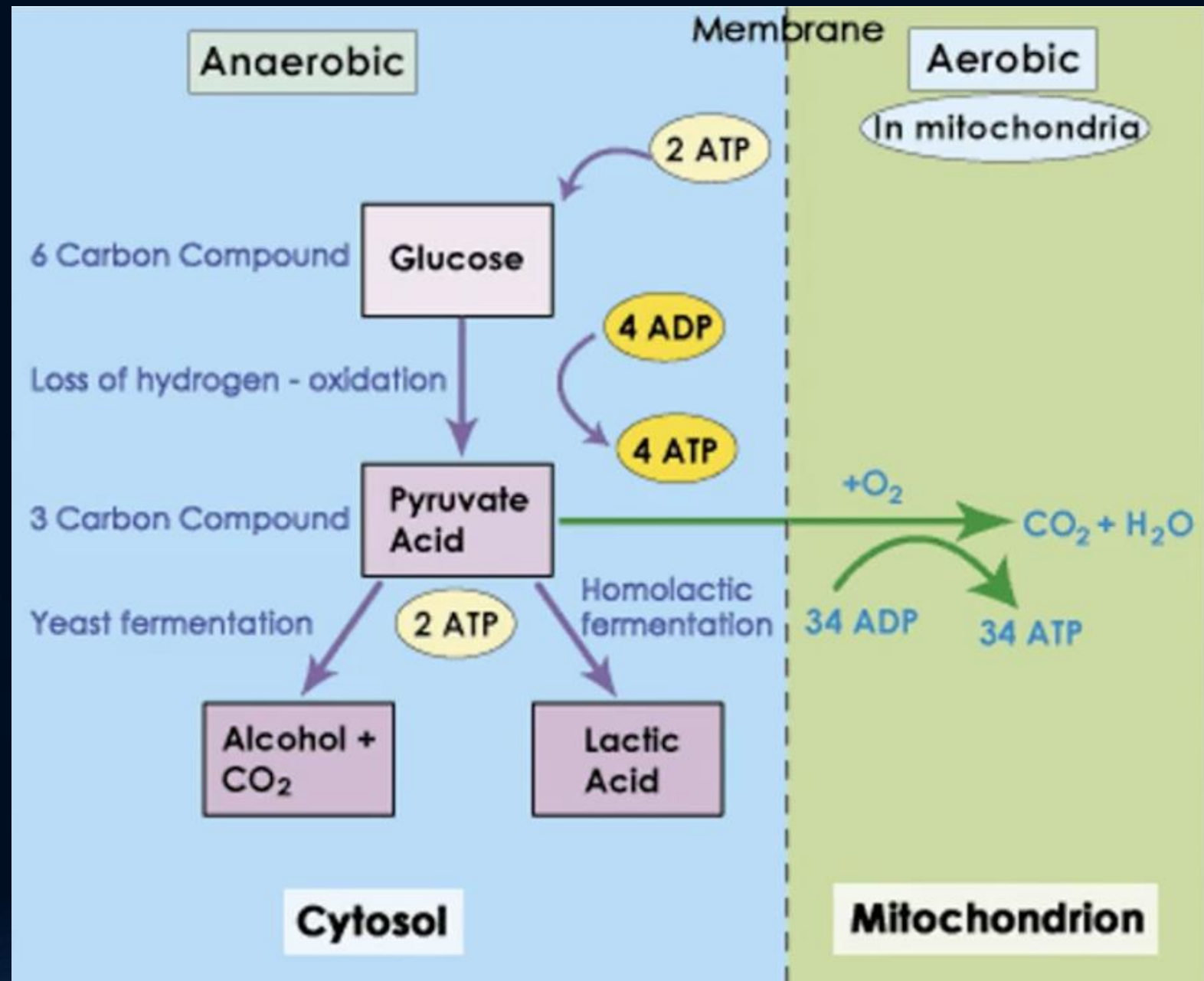
→ Glucose Transporters.

GLUT, 1 - 15

2
3
4
5
6

GLUT₄ needs insulin

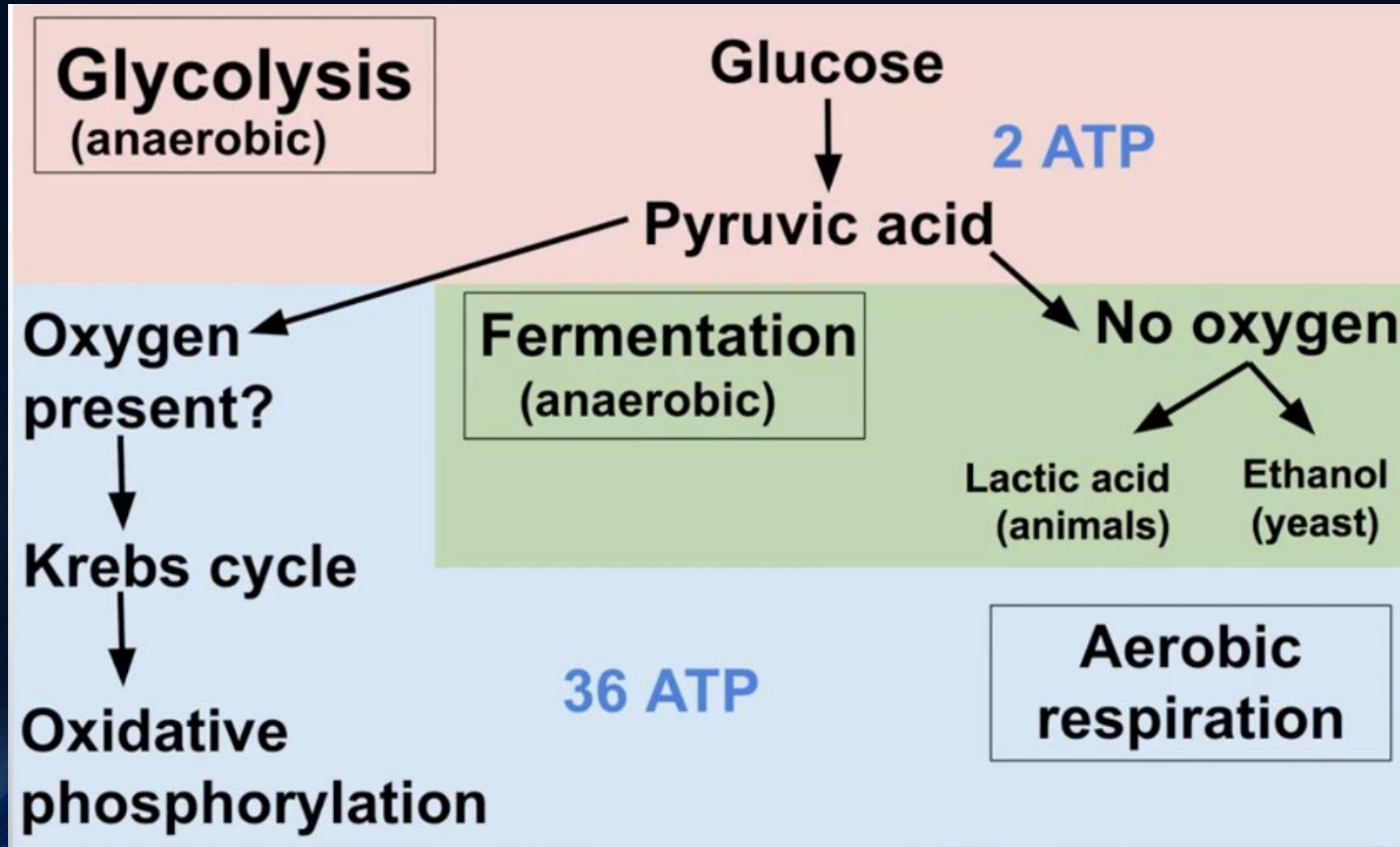
- sk. muscle-
- Adipose tissue.



Glucose Metabolism

- In CHO metabolism, pyruvic acid (3C) is converted to Acetyl CoA (2C)
 - Acetyl CoA enters citric acid cycle in mitochondria to produce NADH and FADH₂
 - NADH and FADH₂ are used to make ATP during oxidative phosphorylation in the enzyme transport system
- In absence of glucose, cells will begin to metabolize lipids and then proteins
 - Lipids are chopped apart into 2C Acetyl CoA units which can enter into citric acid cycle; Acetyl CoA units can also combine to form acetoacetic acid – ketone bodies

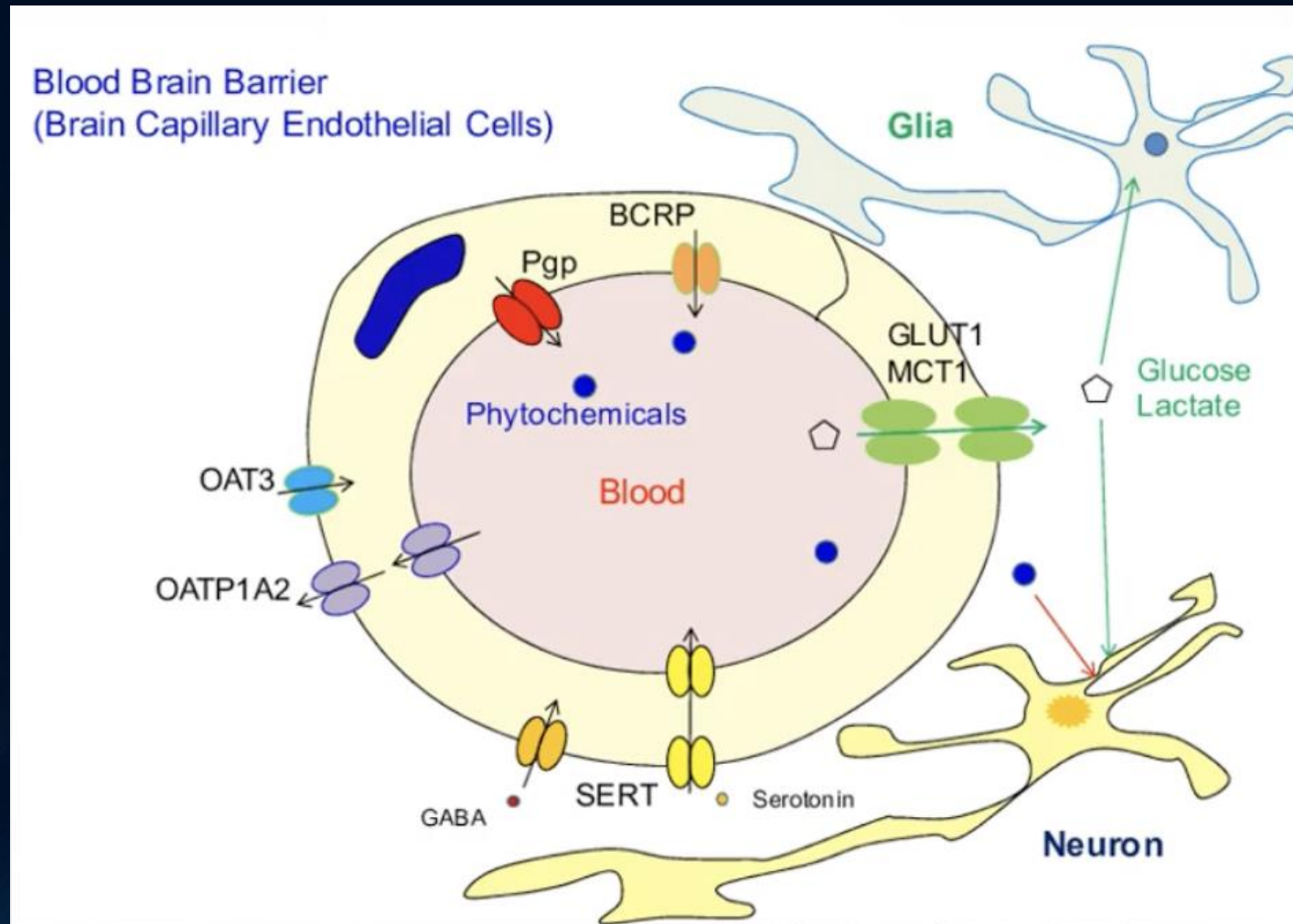
Glucose Metabolism



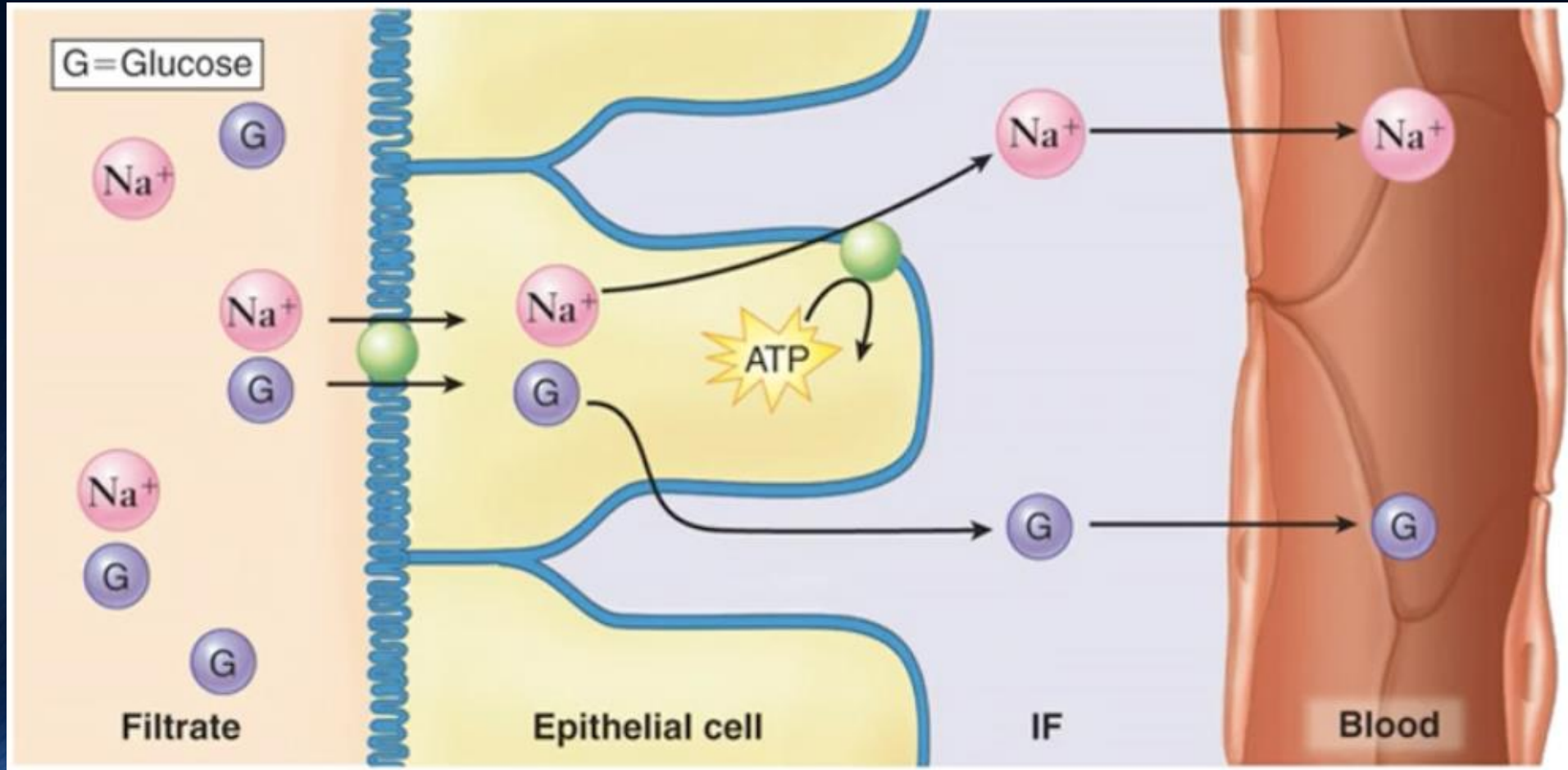
Glucose Transporters

- GLUT 1 – expression does not depend on insulin
 - Found in blood brain barrier – necessary for transporting glucose from the blood into the brain
 - Heart tissue
- GLUT 2 – expression does not depend on insulin
 - Found on liver cells
 - Pancreatic islet beta cells
 - Basolateral surface of tubule cells in kidney, brush border of GI
- GLUT 3 – expression does not depend on insulin
 - Nervous tissue
- GLUT 4 – expression depends on insulin
 - Skeletal muscle tissue
 - Adipose tissue

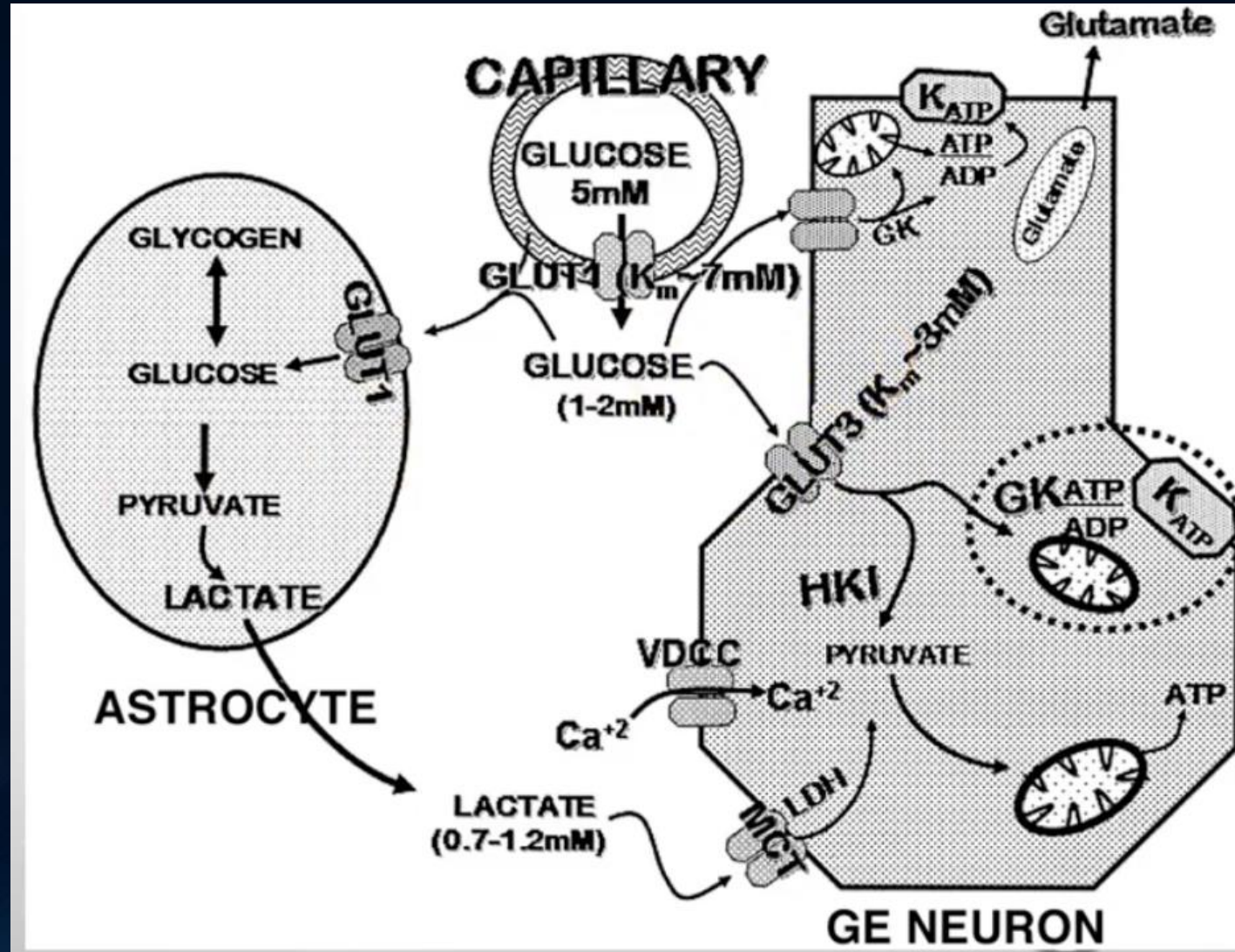
GLUT 1 Transporters



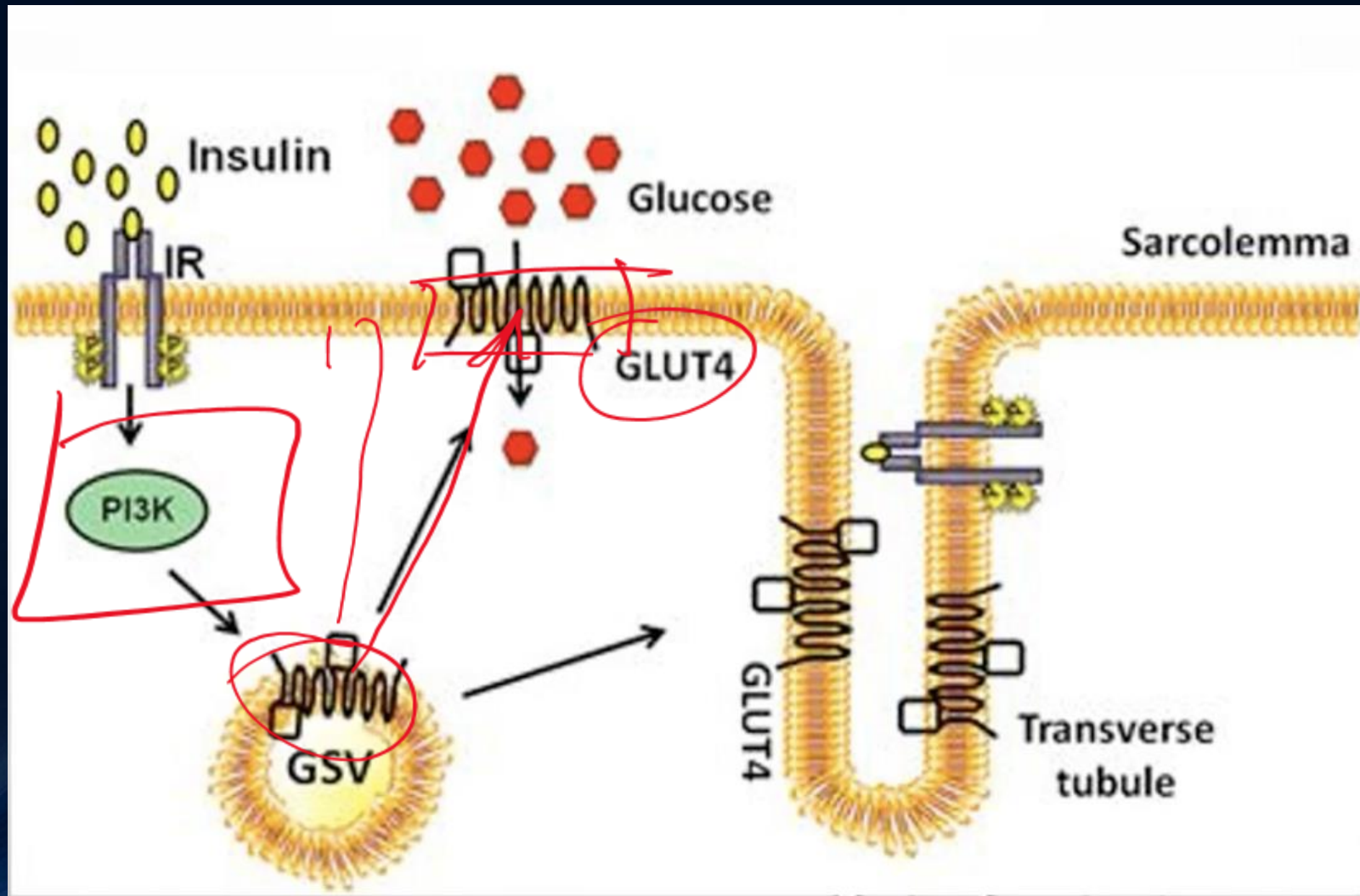
GLUT 2 Transporters



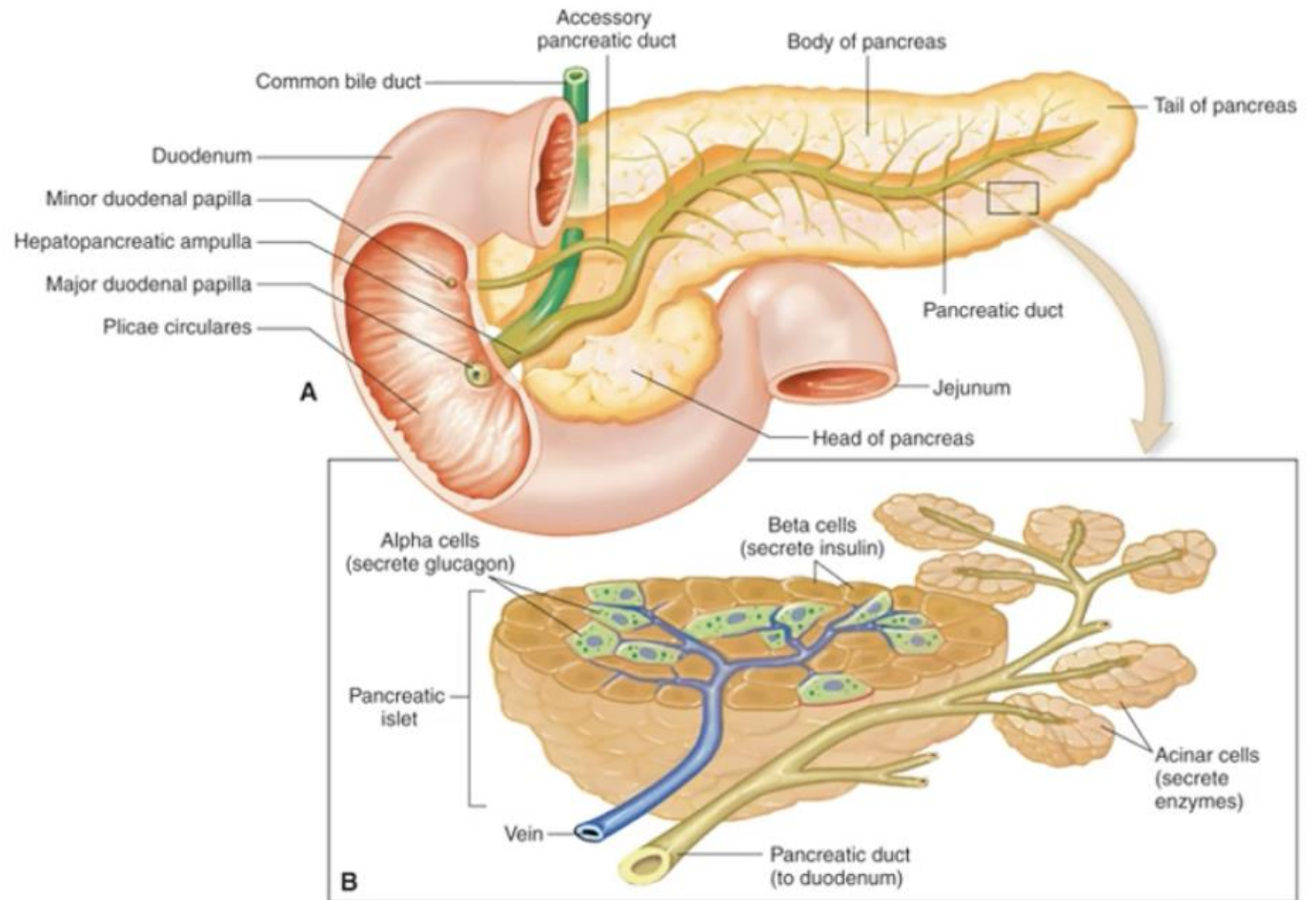
GLUT 3 Transporter



GLUT 4 Transporter



Role of Pancreas



high blood
sugar

Stimulate

Insulin
(β cells)

nervous
system (PNS)

(lock) SNS

α cells

Delta
cells

Regulation of Blood Glucose - Insulin

- Stimulus for secretion by pancreatic beta islet cells ("fed state")
 - Increased blood glucose – sensed by glucokinase (enzyme that converts glucose to glucose-6-P)
 - Inactivation of PNS
- Secretion of incretins by small intestine
 - GIP, GLP-1
- Actions
 - Increases expression of GLUT4 transporters, especially on skeletal muscle cells, adipocytes
 - Promotes uptake of glucose into these cell types as well as liver cells
 - Promotes conversion of monomers – polymers (glycogen, TG, protein)
 - Net effect is to reduce blood glucose

Insulin (\downarrow blood Glucose)

\rightarrow bring glucose
into cells.

Fat production

glycogenesis \uparrow

- liver
- Sk muscle.

prⁿ
Fats

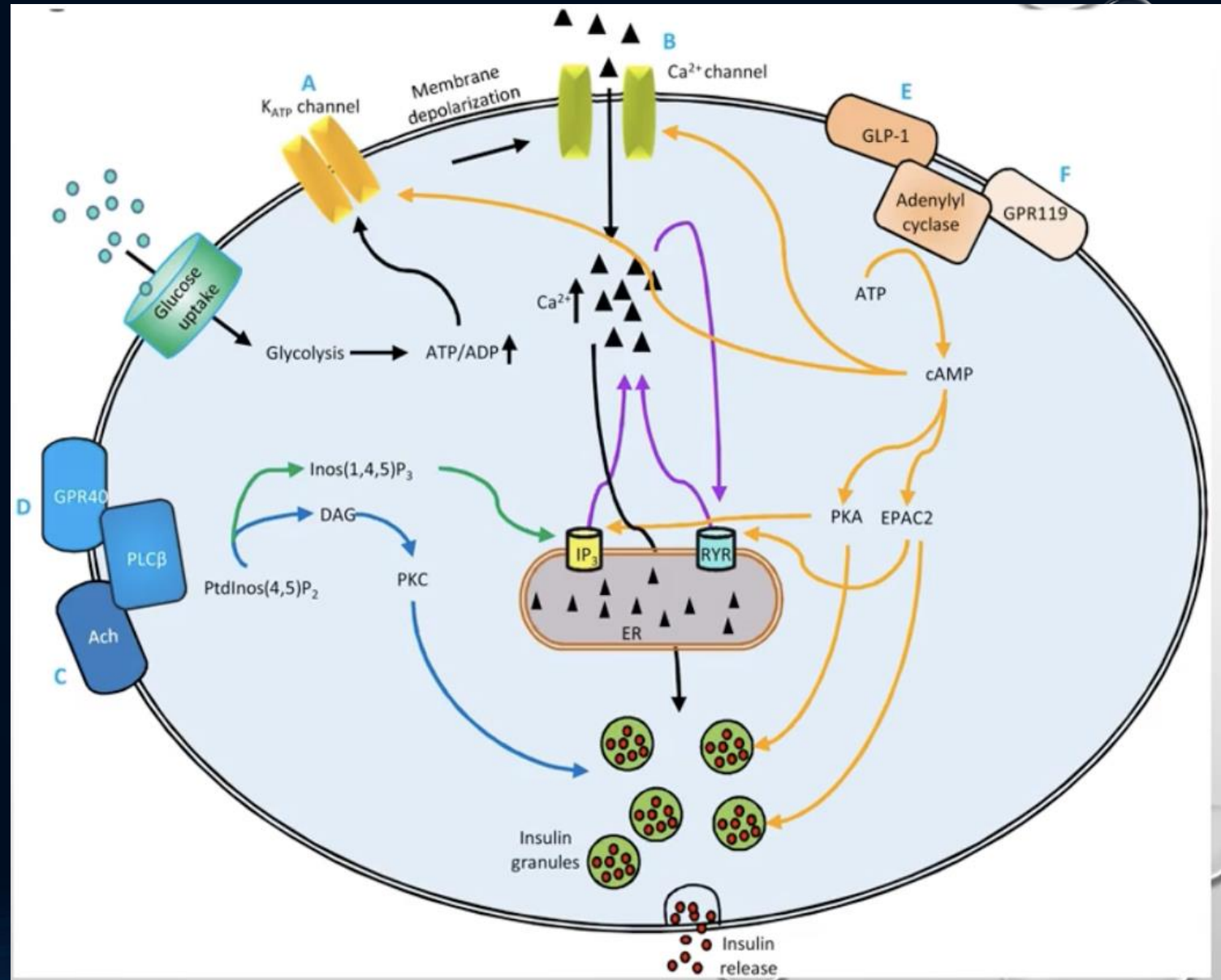
glycogenesis \uparrow

gluconeogenesis \uparrow

Gluca^{gen}.
(\uparrow blood sugar)
(mobilizes stores)

Insulin Release

Structural
classifications
of hormones



Regulation of Blood Glucose - Glucagon

- Stimulus for secretion by pancreatic alpha islet cells ("fasted state")
 - Decreased blood glucose
 - Increased activity of SNS via alpha-1 receptors
 - Glucagon secretion inhibited by incretins
- Actions – at liver cells, adipocytes and skeletal muscle tissue
 - Glycogenolysis: glycogen – glucose
 - Gluconeogenesis: AA/TG/Glycerol - glucose

→ $\beta\beta$ overdose
→ Relaxation smooth muscle.
→ Anaphylaxis

Glucagon

Adrenaline

BB

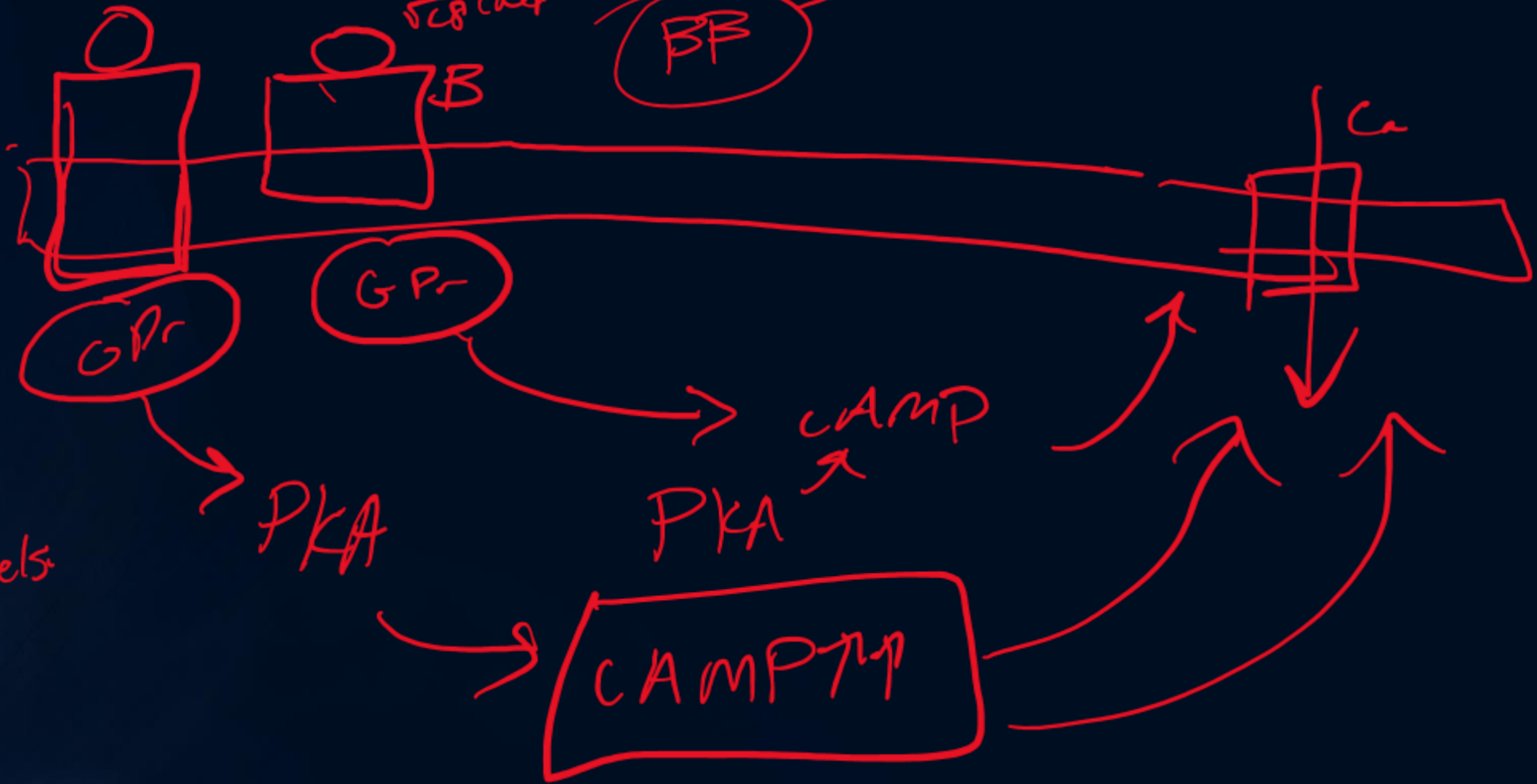
metoprolol

Epinephrine

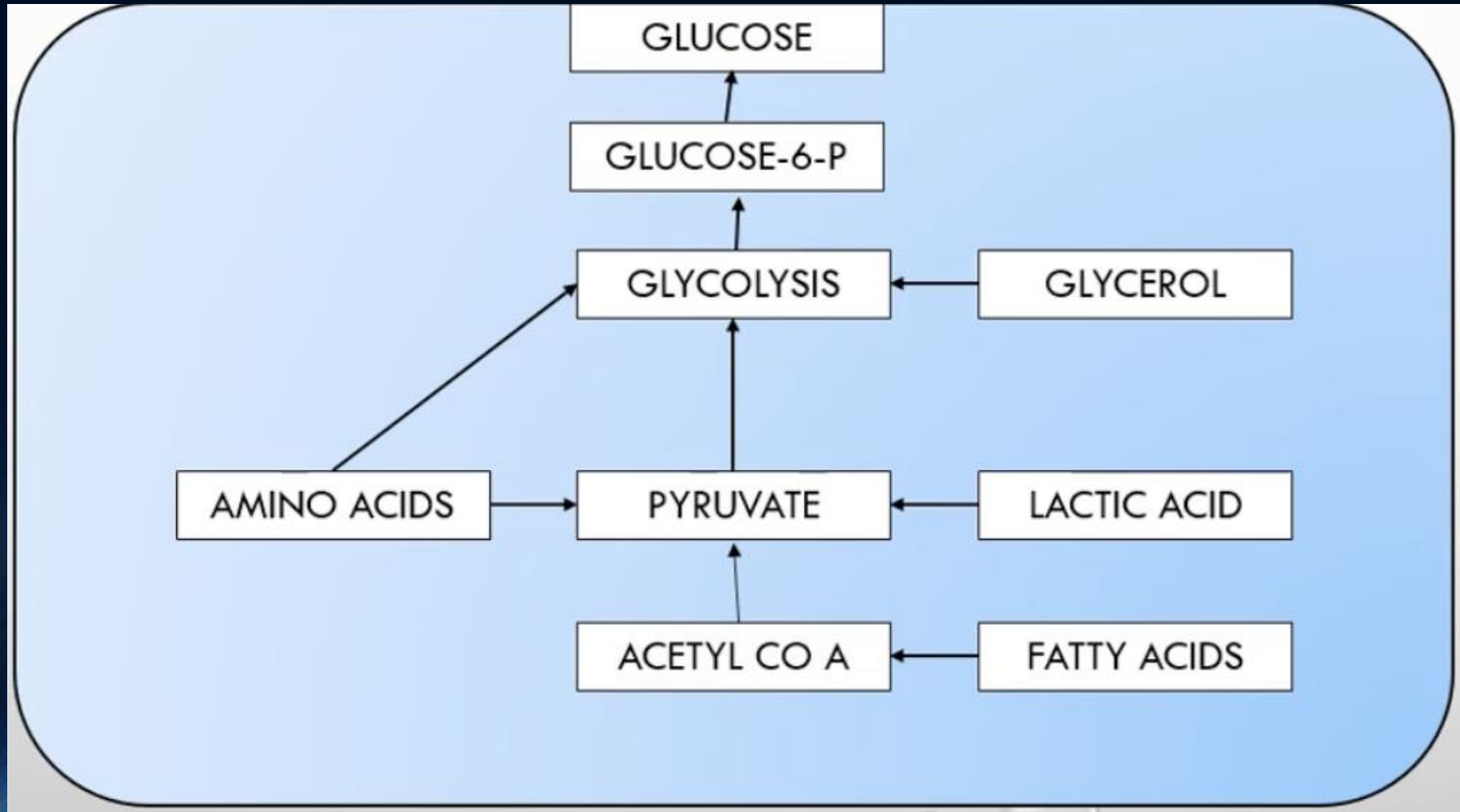
β_1 - H

β_2 - L

α - Vessels



Gluconeogenesis



Regulation of Blood Glucose - Others

- Epinephrine

- Secreted by adrenal medulla in response to SNS activity
- Effects
 - Directly stimulates release of glucagon
 - Stimulates skeletal muscle cells and liver cells – glycogeneolysis / gluconeogenesis

- Glucocorticoids

- Secreted by adrenal cortex following circadian rhythm, stress
- Effects
 - Promotes gluconeogenesis by liver cells

- Growth Hormone

- Secreted by anterior pituitary gland
- Effects
 - Increased gluconeogenesis by adipocytes