

# Biochemical Signalling - 2

## G proteins and GPCRs

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# Objectives

- Receptors that bind hormones (continued)
  - G Proteins and their receptors, GPCRs
    - cAMP Pathway
    - Phosphoinositide Pathway
  - Drugs and Toxins affecting Cell Signalling
- Complexity of Hormonal Signalling

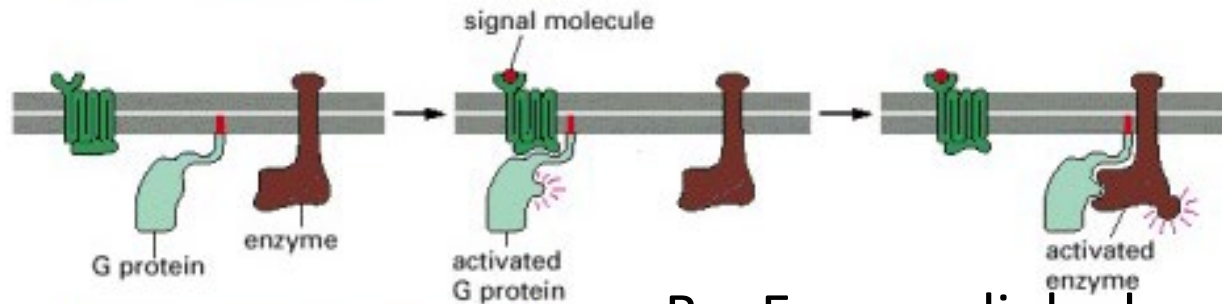
Textbook Chap.20



# Main classes of hormonal receptors

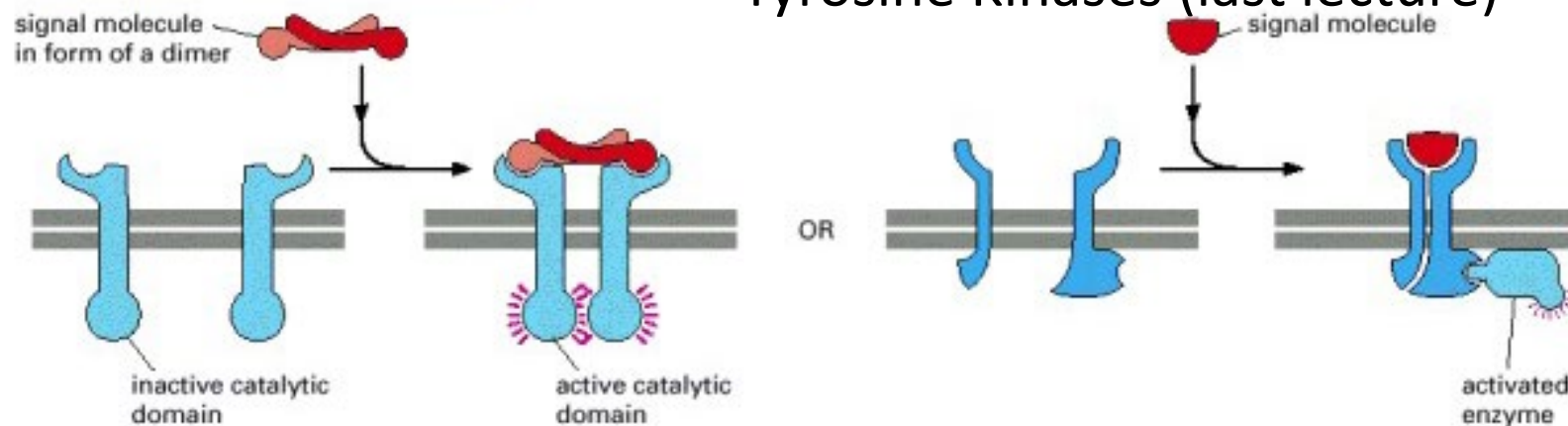
A. G-Protein-linked receptors or G-Protein Coupled Receptors (GPCRs) – this lecture

(B) G-PROTEIN-LINKED RECEPTORS



B. Enzyme-linked receptors: e.g. Receptor Tyrosine Kinases (last lecture)

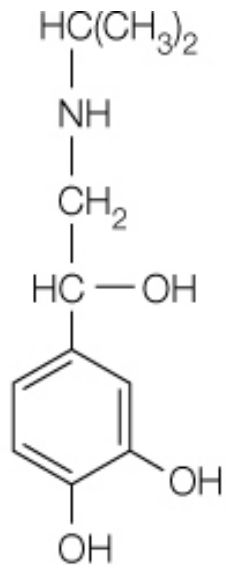
(C) ENZYME-LINKED RECEPTORS



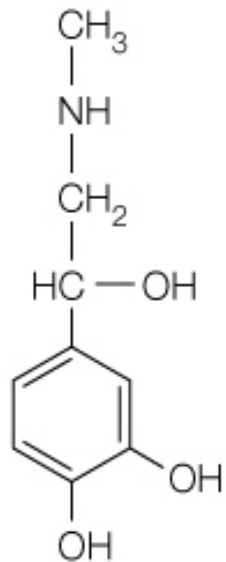
# What are GPCRs?

- Largest known protein family with >800 members in the human genome.
- Essential sensory functions: sight, smell and taste.
- Ligands include:
  - nucleosides, nucleotides,
  - $\text{Ca}^{2+}$ ,
  - catecholamines (adrenalin and nonadrenalin), other bioactive amines (e.g., histamine and serotonin) and a variety of peptide and protein hormones, and
  - Lipids.
- Target of >30% of pharmaceutical drugs.

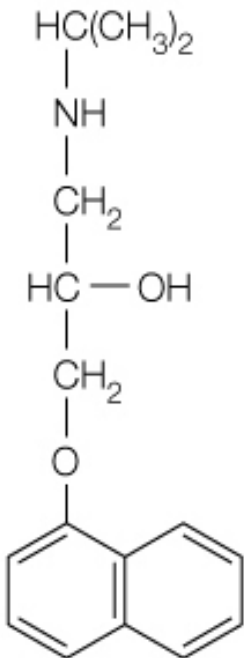




**Isoproterenol**



**Epinephrine**



**Propranolol**

# Receptors historically defined by Interactions with Drugs (from last lecture)

- Before the structure of hormone receptors were known, tissues and cells had been categorized pharmacologically in terms of their response to epinephrine analogs
- The epinephrine (adrenaline) analogs such as isoproterenol and propranolol acted either as:
  - agonists – agents that act similarly to epinephrine
  - antagonists – agents that block the action of epinephrine
- Propranolol antagonizes  $\beta_2$ -adrenergic receptors (controls blood pressure)
- Isoproterenol agonizes  $\beta_2$ -adrenergic receptors (used to treat asthma)

# Adrenergic Receptors are GPCRs

- Adrenergic is based on **adrenalin**, an older term for **epinephrine**
- Adrenergic receptors were originally thought to be adenylate cyclases
- It is now known that hormones that act through second messengers involve a three-protein module:
  - **Receptor**
  - **Transducer** (G-protein)
  - **Effector** (adenylate cyclase or a related enzyme)

TABLE 20.1 Some biological actions associated with adrenergic receptors

| Receptor Class | Action  |
|----------------|---|
| $\alpha_1$     | Smooth muscle contraction in blood vessels and skin, gastrointestinal system, kidney, and urethral sphincter<br>Increased sweat gland secretion   |
| $\alpha_2$     | Decreased glucagon and insulin release from pancreas<br>Contraction of sphincters in the gastrointestinal tract   |
| $\beta_1$      | Increased heart rate, contraction, and expelled fluid volume<br>Increased renin secretion from kidney   |
| $\beta_2$      | Smooth muscle relaxation in gastrointestinal tract, lung bronchia<br>Increased lipolysis<br>Increased glycogenolysis and gluconeogenesis<br>Decreased histamine release from mast cells<br>Increased anabolism in skeletal muscle |



# Signalling by G Proteins – 3 components

1. **Receptor:** The extracellular signalling molecule binds to **G-protein-coupled receptors (GPCRs)**, which are transmembrane proteins.
2. **Transducer:** G proteins are heterotrimers that are anchored to the cytoplasmic side of the membrane.
3. **Effector** - Second messenger system: Adenylate cyclase is a transmembrane enzyme that generates the secondary messenger, cAMP (cyclic AMP).

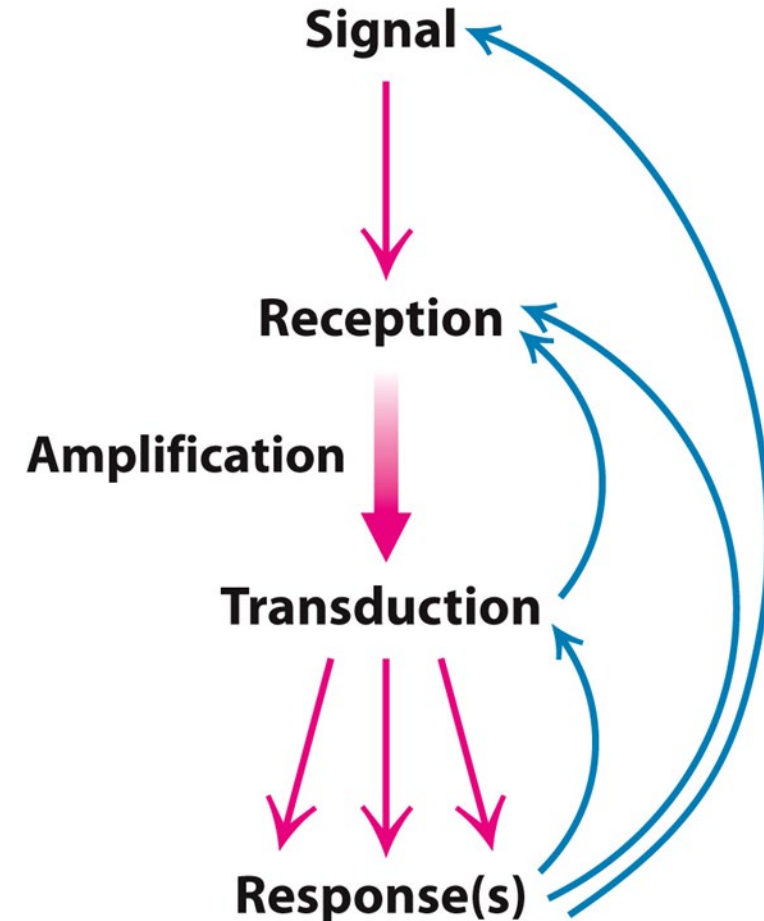


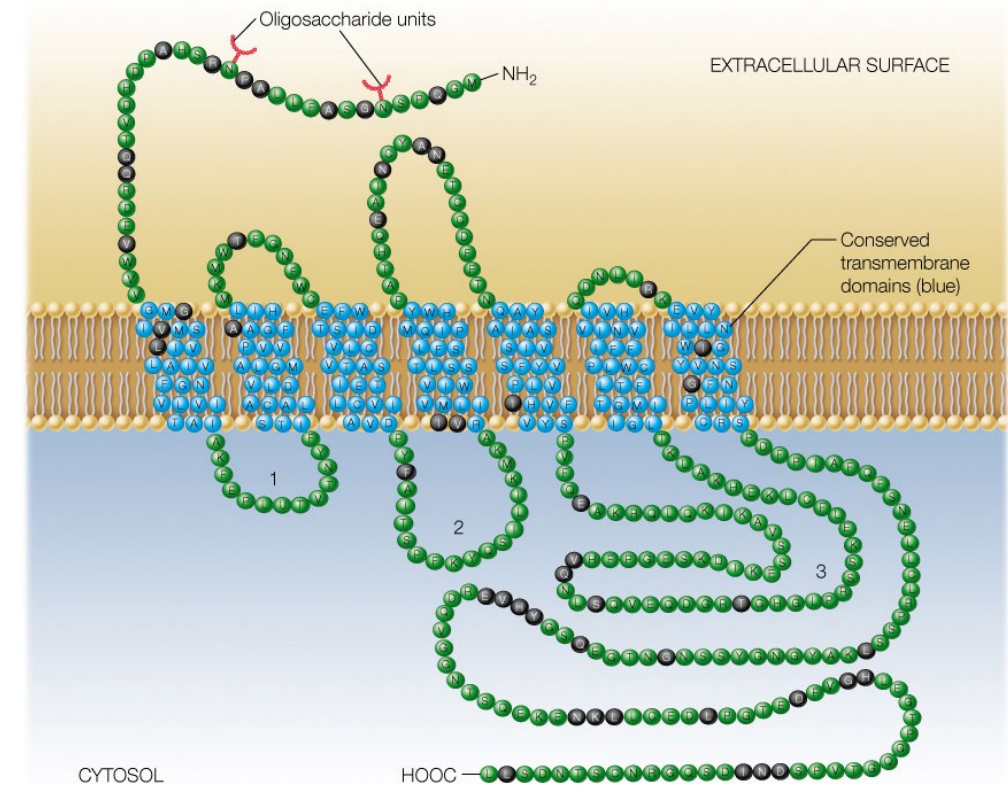
Figure 14.2  
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# Amino Acid Sequence of the Human $\beta_2$ -Adrenergic Receptor

1. Like all G protein-coupled receptors (GPCRs), the human  $\beta_2$ -adrenergic receptor has seven transmembrane (TM) helices
2. GPCRs are the largest family of membrane receptors in humans.
  - N-terminus: extracellular
  - 7 hydrophobic sequence segments embedded in the membrane as  $\alpha$ -helices
  - Loops in between
  - Long cytoplasmic tail, with the C-terminus
3. Ligand-binding site is located between the TM helices.
  - TM helices twist when ligand is bound.

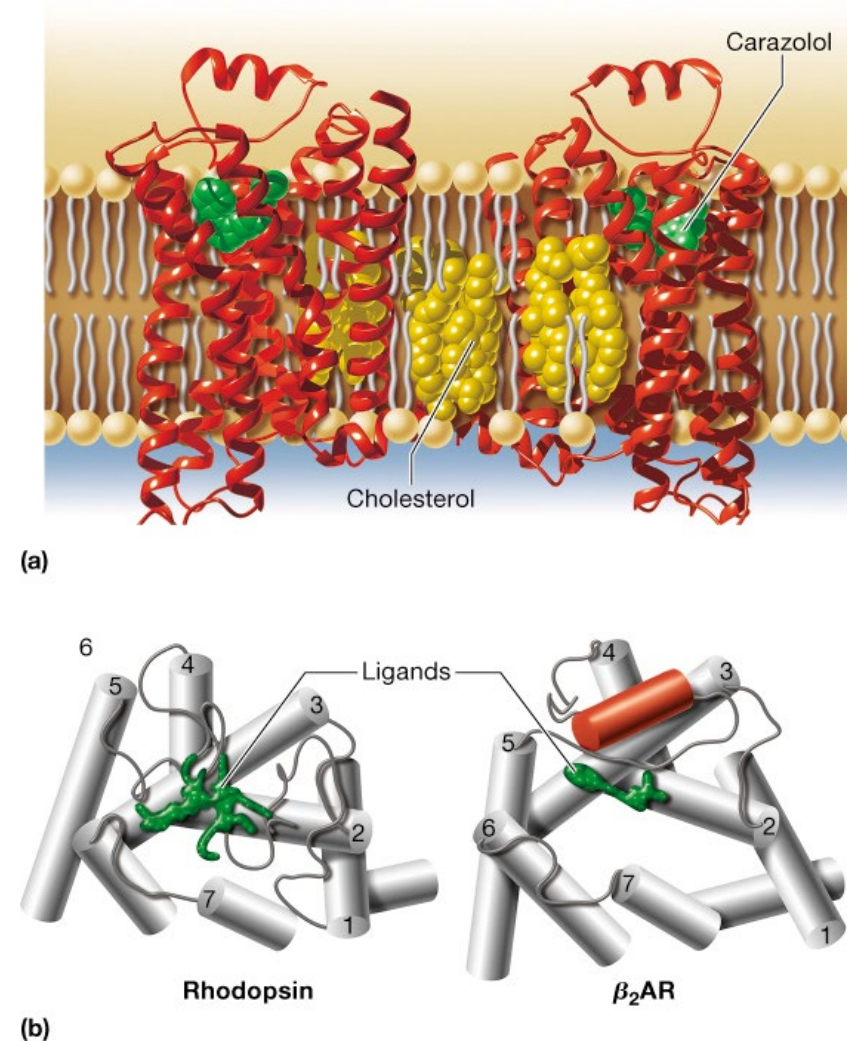


**FIGURE 20.3** Amino acid sequence of the human  $\beta_2$ -adrenergic receptor.



# GPCR Structure

- The  $\beta_2$ -adrenergic receptor ( $\beta_2$ AR) and rhodopsin are G-protein coupled receptors (GPCRs)
- The structure of  $\beta_2$ AR in complex with carazolol (a  $\beta_2$  antagonist) is shown at top
- The bottom panel shows striking similarity between  $\beta_2$ AR (bottom right) and the vision protein rhodopsin (bottom left)

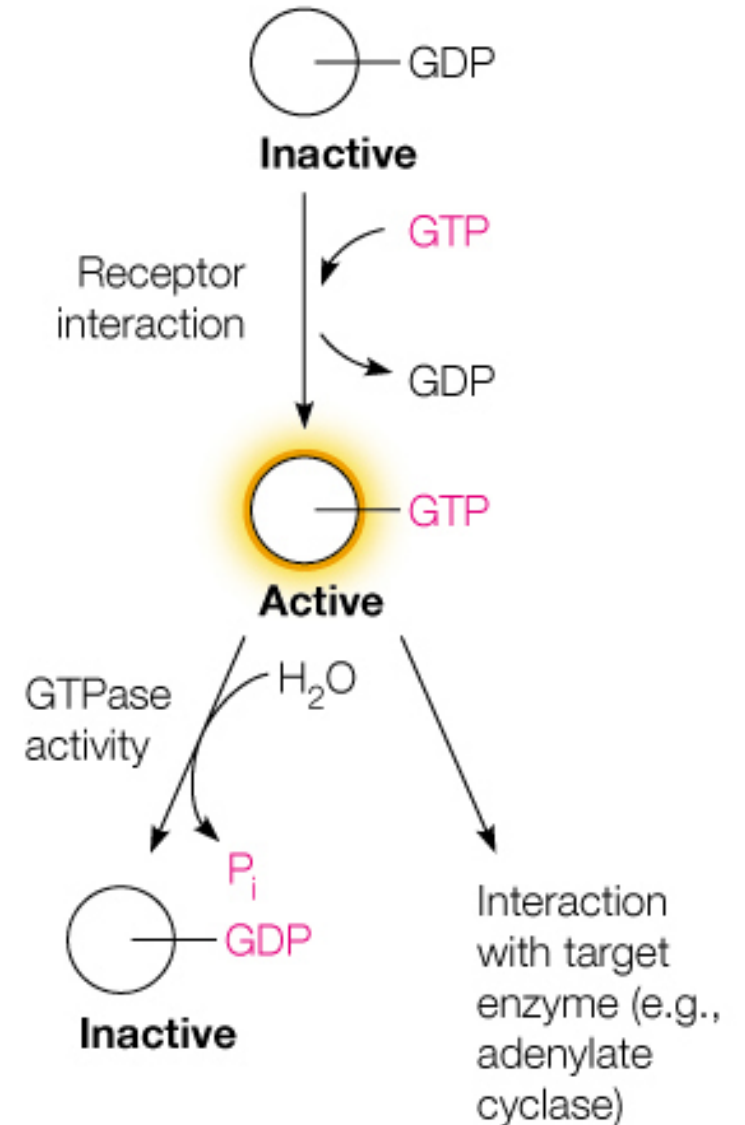


**FIGURE 20.4** Structure of the human  $\beta_2$  adrenergic receptor.

# G Proteins

- are heterotrimeric proteins ( $\alpha$ ,  $\beta$ ,  $\gamma$ ) that can bind GTP and GDP via the  $\alpha$  subunit
- The binding of extracellular hormone or agonist to a GPCR causes a conformational change that stimulates the receptor to interact with a G protein
- This interaction of GPCR with G protein stimulates an exchange of bound GDP to GTP in the  $\alpha$  subunit of the G protein
- When G proteins bind GTP, some ( $G_s$ ) activate adenylate cyclase; others ( $G_i$ ) inhibit adenylate cyclase
- The  $\alpha$  subunit possesses weak GTPase activity, slowly converting GTP to GDP

## Signal transduction pathway



# The $\alpha$ -subunit of G protein binds to the intracellular part of GPCR

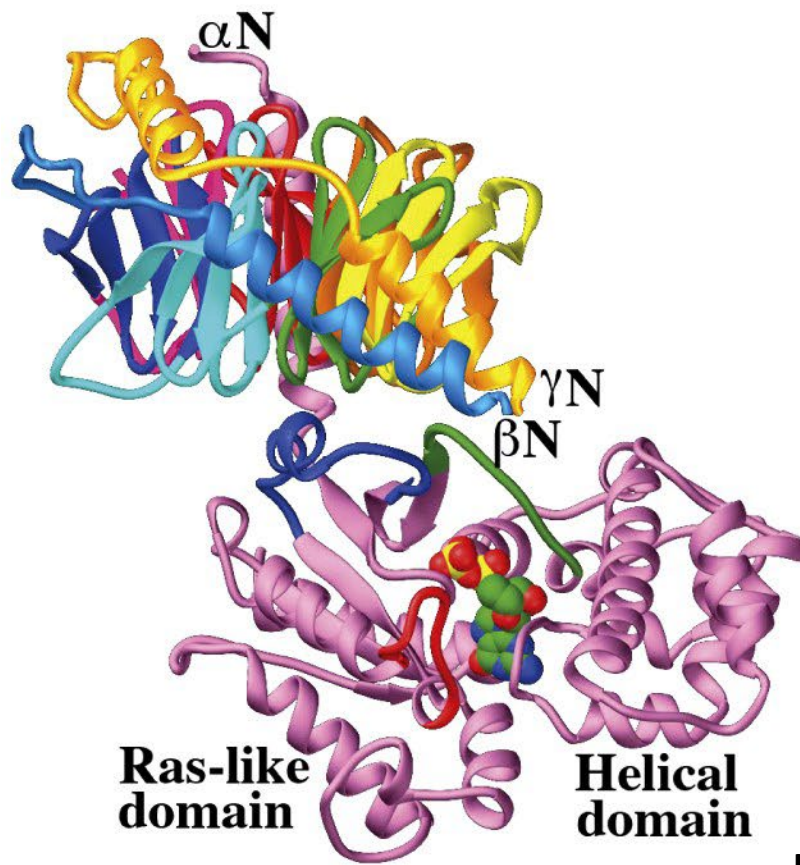
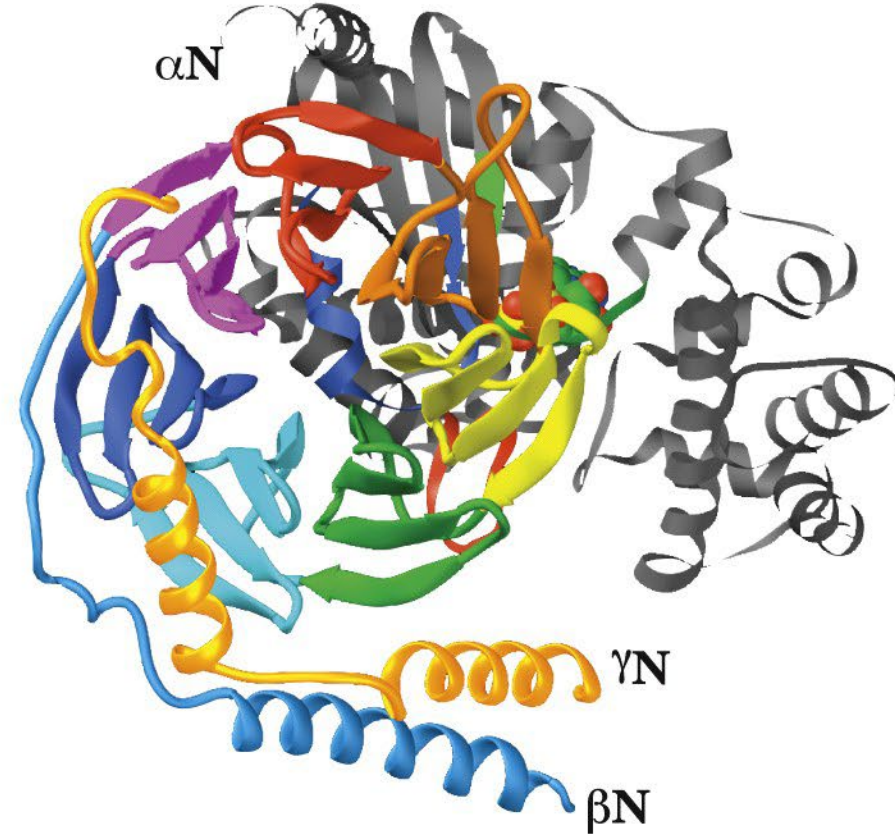


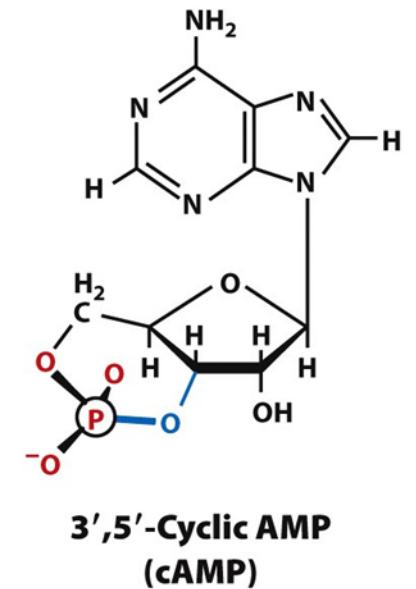
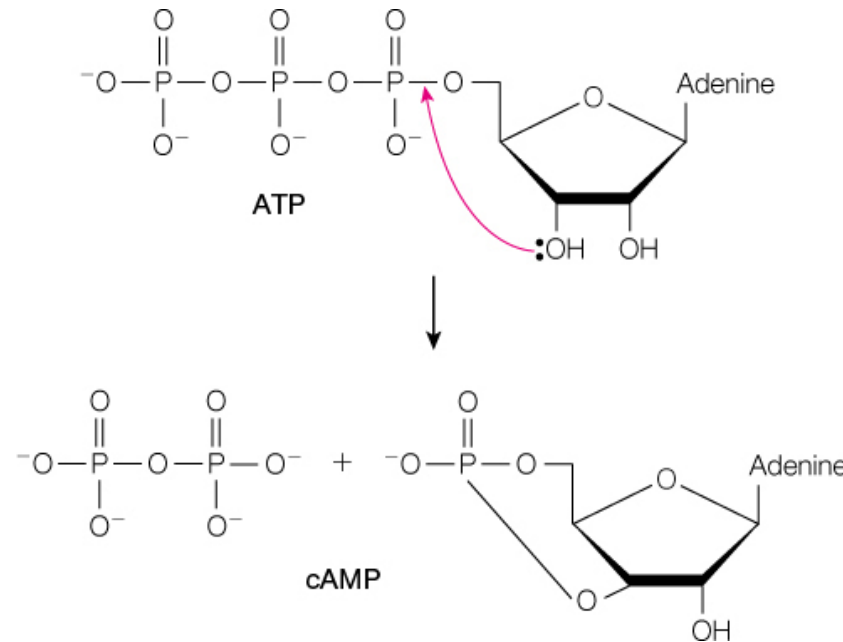
Figure 13-19  
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Heterotrimeric G protein  
PDBid [1GP2](#)

# Effector Protein Adenylate Cyclase (AC)

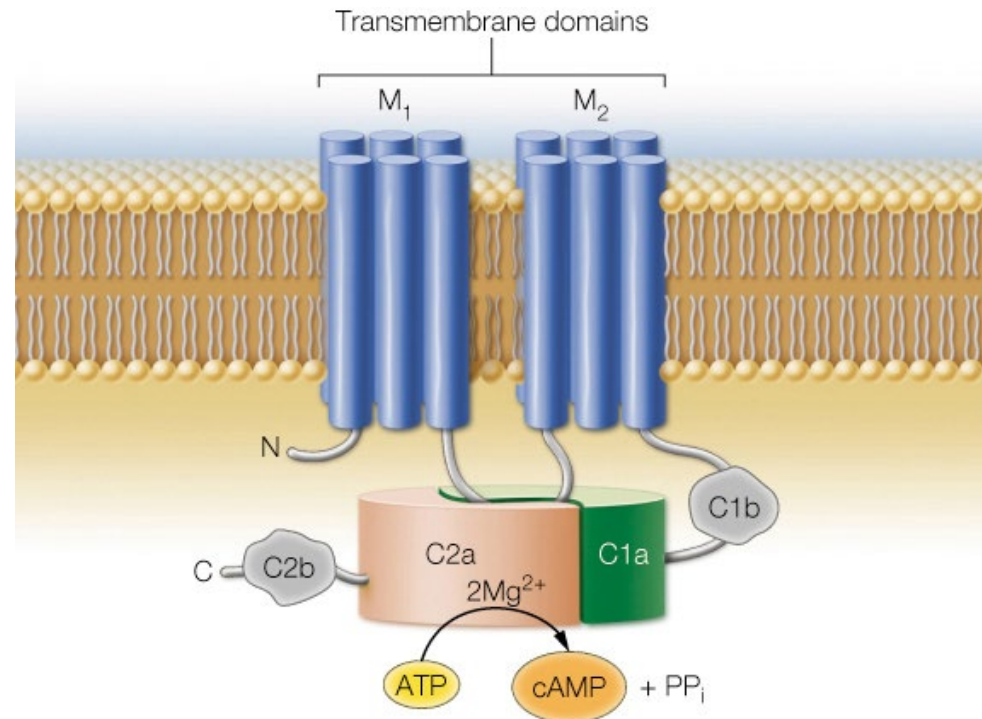
- G-proteins have several targets but **AC is the target in adrenergic signaling**
- AC catalyzes the conversion of ATP to the second messenger **cyclic AMP (cAMP)** and pyrophosphate
- **GAP, the GTPase-activating protein** helps to turn on the GTPase activity of the  $\alpha$  subunit, **initiating the release from AC, thereby deactivating AC**
- **cAMP targets soluble protein kinases and activates them to phosphorylate other proteins** – this is the end result of GPCR signalling.
- Active second **cAMP** is eventually **converted to the normal (inactive) AMP** by **cAMP phosphodiesterase**





# Effector Protein Adenylate Cyclase (AC)

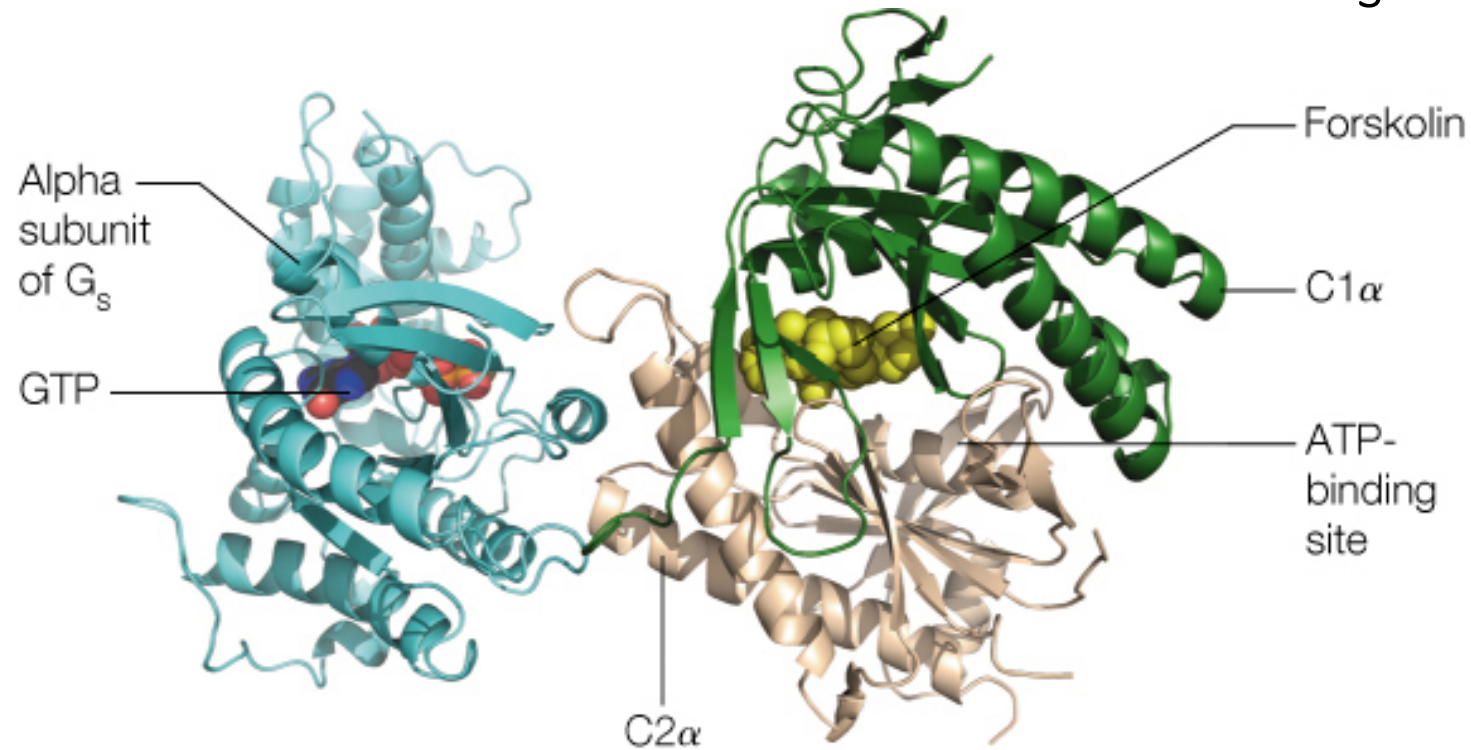
- AC consists of two transmembrane domains ( $M_1$  and  $M_2$ ) and two homologous cytoplasmic domains ( $C1\alpha$  and  $C2\alpha$ ) that come together to form the active site



(b) Schematic diagram showing relationships of the catalytic domains to the transmembrane helical regions.

**FIGURE 20.7** Crystal structure of an adenylate cyclase catalytic domain.

# Crystal Structure of the AC Catalytic Domains Bound the $\alpha$ Subunit of $G_s$



(a) The C1 $\alpha$  and C2 $\alpha$  catalytic domains (tan and green) were crystallized as a complex with forskolin (yellow) and  $\alpha_s$ , the  $\alpha$  subunit of  $G_s$  (turquoise). The catalytic site where ATP is bound consists of residues from both domains. GTP bound to  $\alpha_s$  is shown as well (blue and red colored atoms).



# Steps in G protein signalling

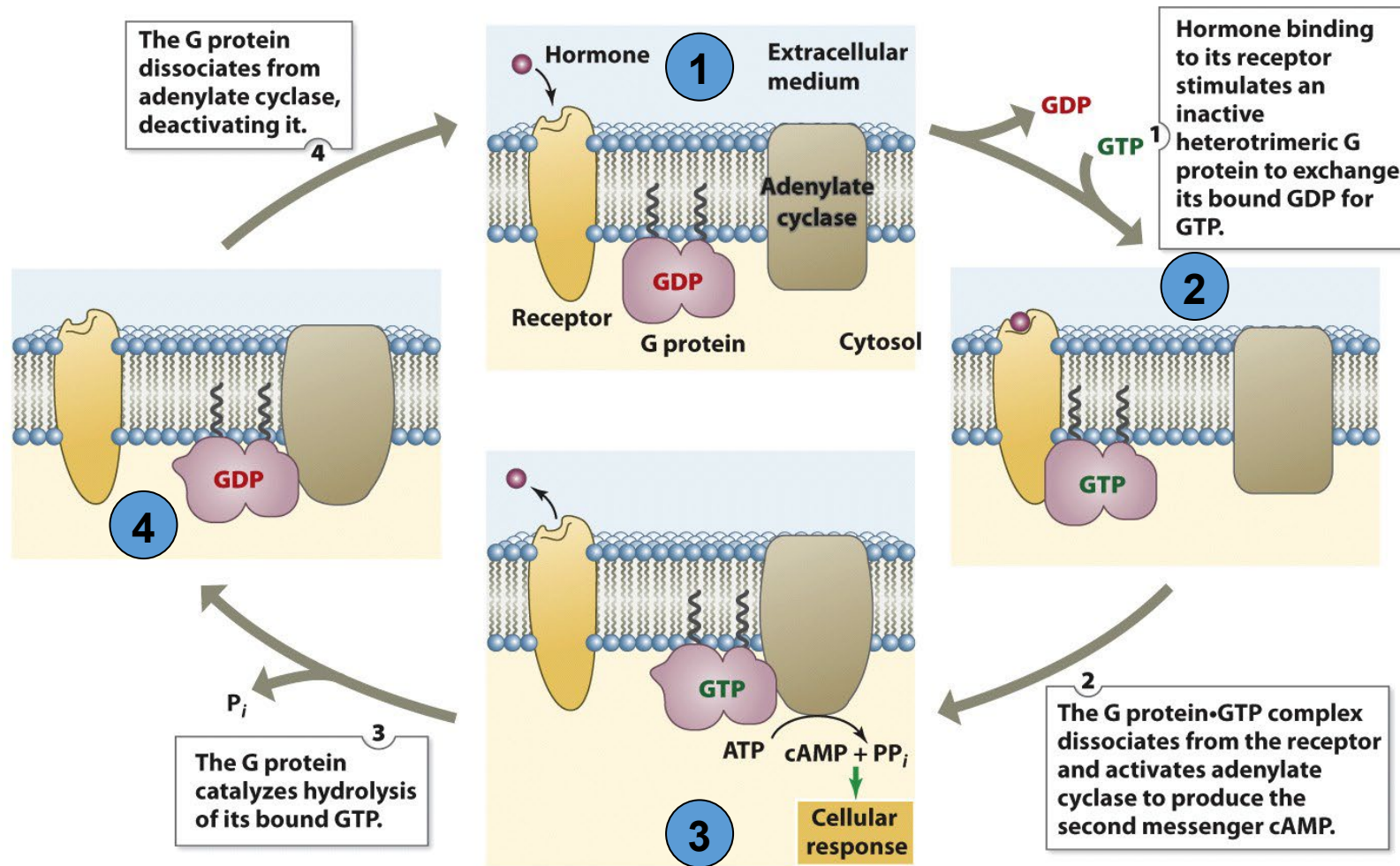


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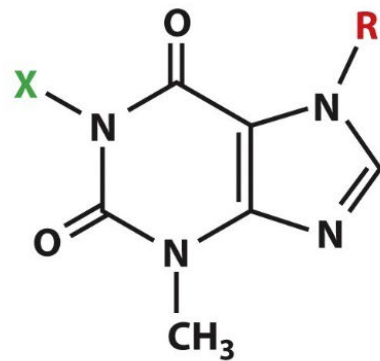
# Ending cAMP signalling

- The secondary messenger, cAMP, has to be hydrolysed to AMP, to end the signalling process.
- Enzymes, cAMP-phosphodiesterases (PDEs), step in to do this. PDEs are activated by
  - $\text{Ca}^{2+}$
  - Phosphorylation by PKA and insulin-stimulated PKA.
- PDEs provide crosstalk between cAMP-based and other signalling systems.
- Drugs that are PDE inhibitors used for asthma, congestive heart failure, depression, inflammation, retinal degeneration and erectile dysfunction (Viagra).



# Drugs affect Cell Signalling

- Adenylate cyclase system affected by adenosine analogues in coffee, tea and chocolate (xanthine alkaloids).



**R = CH<sub>3</sub>**    **X = CH<sub>3</sub>**  
**R = H**      **X = CH<sub>3</sub>**  
**R = CH<sub>3</sub>**    **X = H**

**Caffeine (1,3,7-trimethylxanthine)**

**Theophylline (1,3-dimethylxanthine)**

**Theobromine (1,7-dimethylxanthine)**

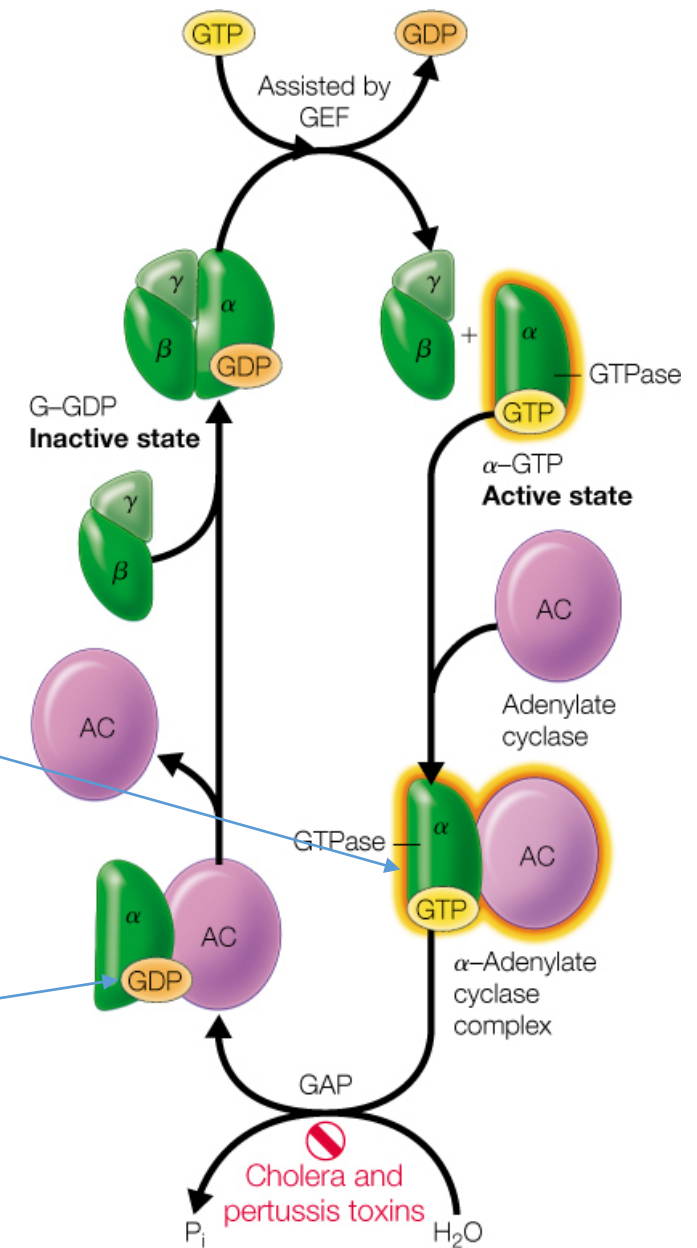
- Antagonise adenosine receptors, through inhibitory G proteins
- Lead to excess cAMP production
- Results in downstream PKA activation.

Box 13-4 part 1  
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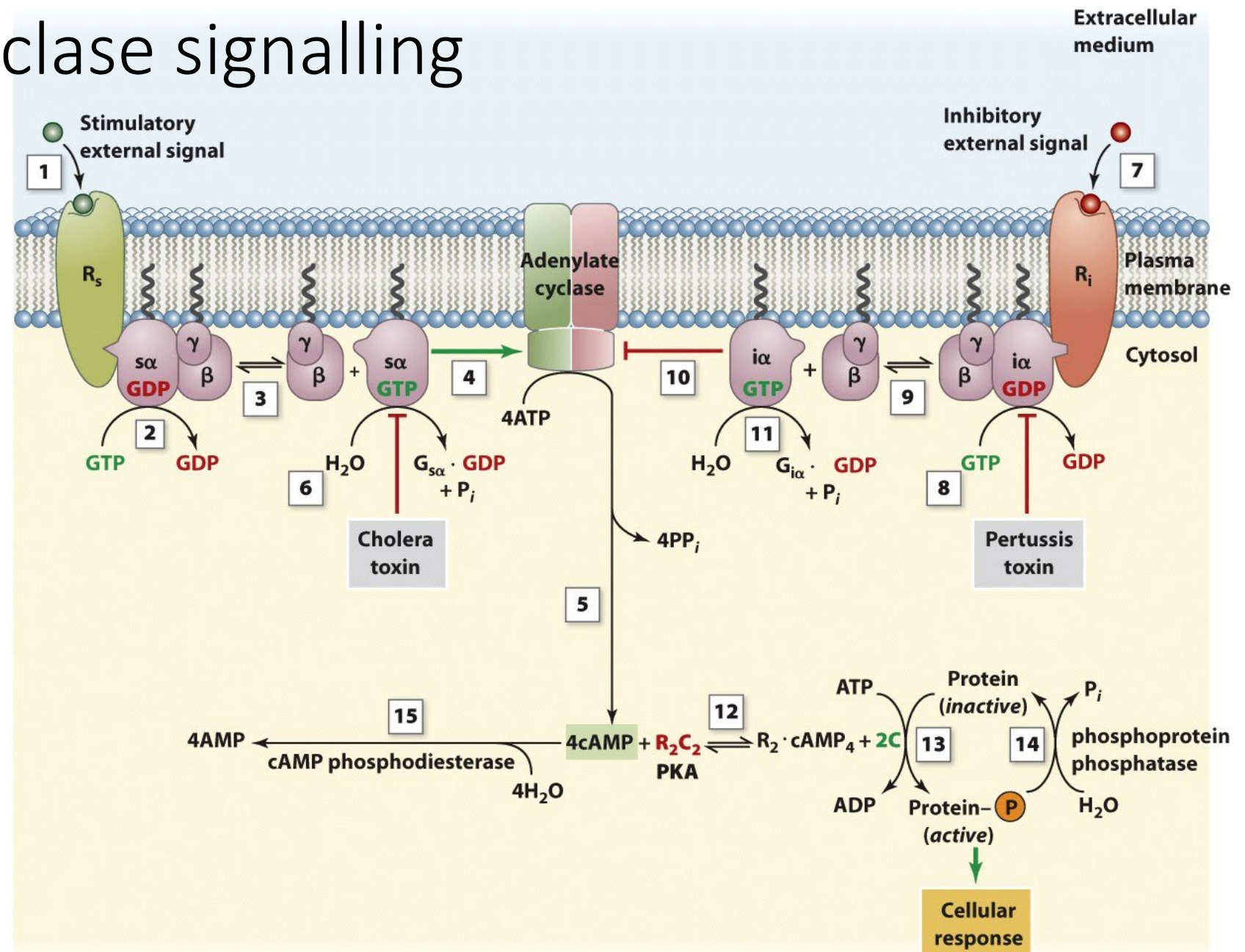
# Toxins affect Cell Signalling

- Bacterial toxins affect G protein function
- A fragment of **cholera toxin** causes a side chain modification on  $G\alpha$ , forming  $Gs\alpha$ .
  - cAMP is produced.
  - GTP cannot be hydrolysed by  $Gs\alpha$ .
  - Fluid influx in intestines, due to uncontrolled cAMP levels.
  - Dehydration.
- Similar but less dramatic effect from ***E. coli*** through heat-labile enterotoxins produced.
- **Pertussis toxin** (from the whooping cough agent) causes a different side chain modification on  $G\alpha$ , forming  $Gi\alpha$ .
  - $Gi\alpha$  cannot exchange bound GDP for GTP
  - Once again cAMP levels go unchecked.
  - ~400,000 infant deaths worldwide.
  - (prevented by triple antigen, DTP vaccine).



# The adenylate cyclase signalling system

- Toxins affect G protein function



# Alternative to cAMP Signalling: the Phosphoinositide Pathway

- Ingredients: GPCR, heterotrimeric G protein, a specific phospholipase (PLC) and a phosphorylated glycerophospholipid.
- Three secondary messengers generated:
  - IP3: inositol-1,4,5-triphosphate
  - $\text{Ca}^{2+}$  and
  - **DAG: diacyl-glycerol**. This could differ, based on the phospholipid that is hydrolysed.
    - Lipid soluble and activates membrane bound PKC, which triggers a cascade.



# Phosphoinositide Signalling

- DAGs are produced from glycerophospholipids by hydrolysis (Lecture 9)
- Important for lipid synthesis and breakdown (later lectures)
- Implications for **obesity** and fat burning
- Involved in several **cancers**, especially in melanoma.

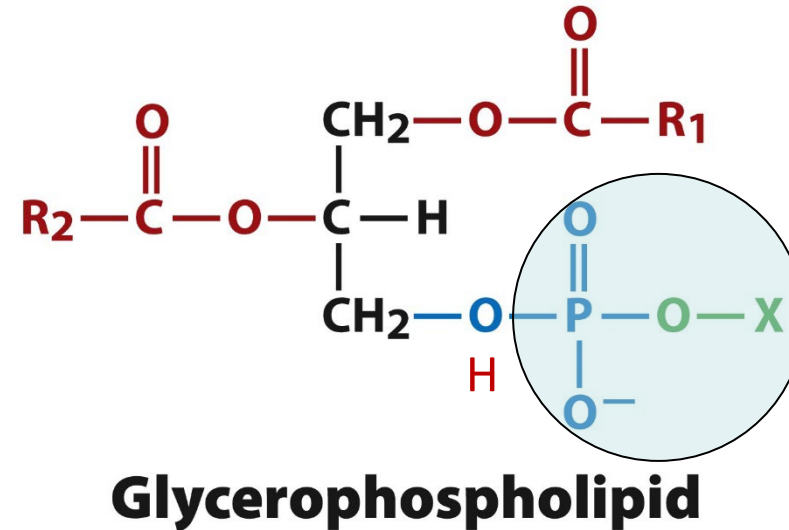


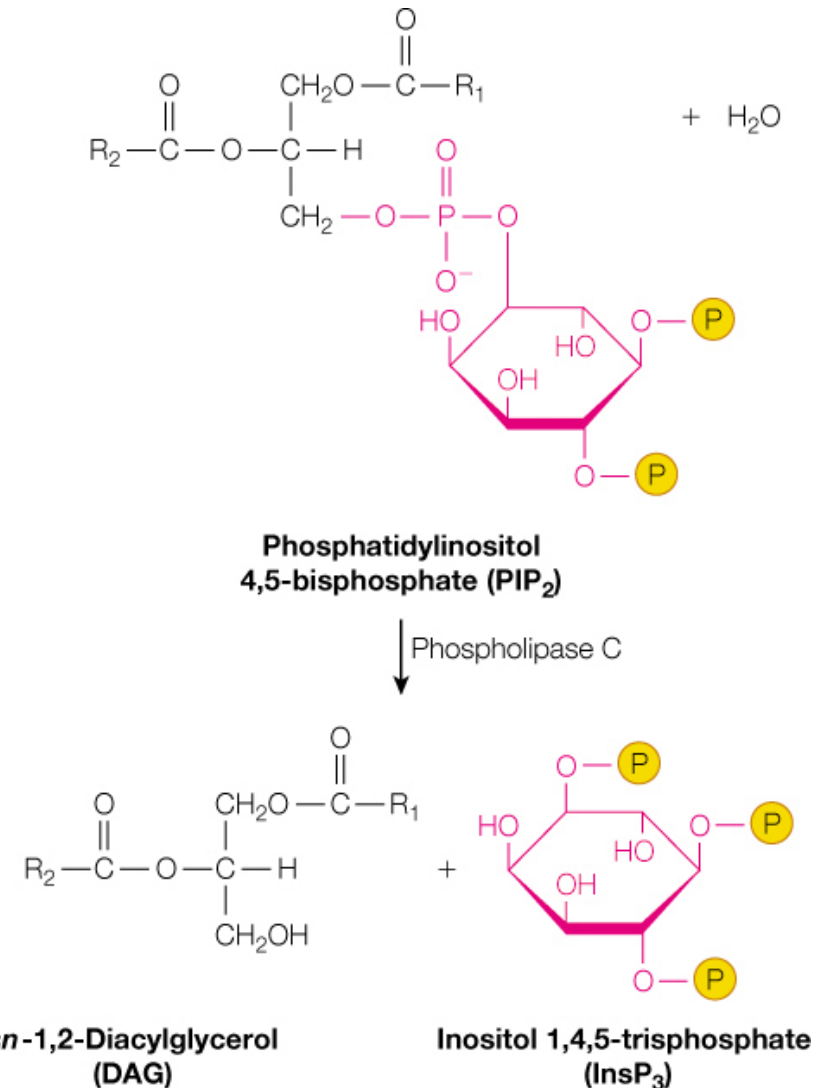
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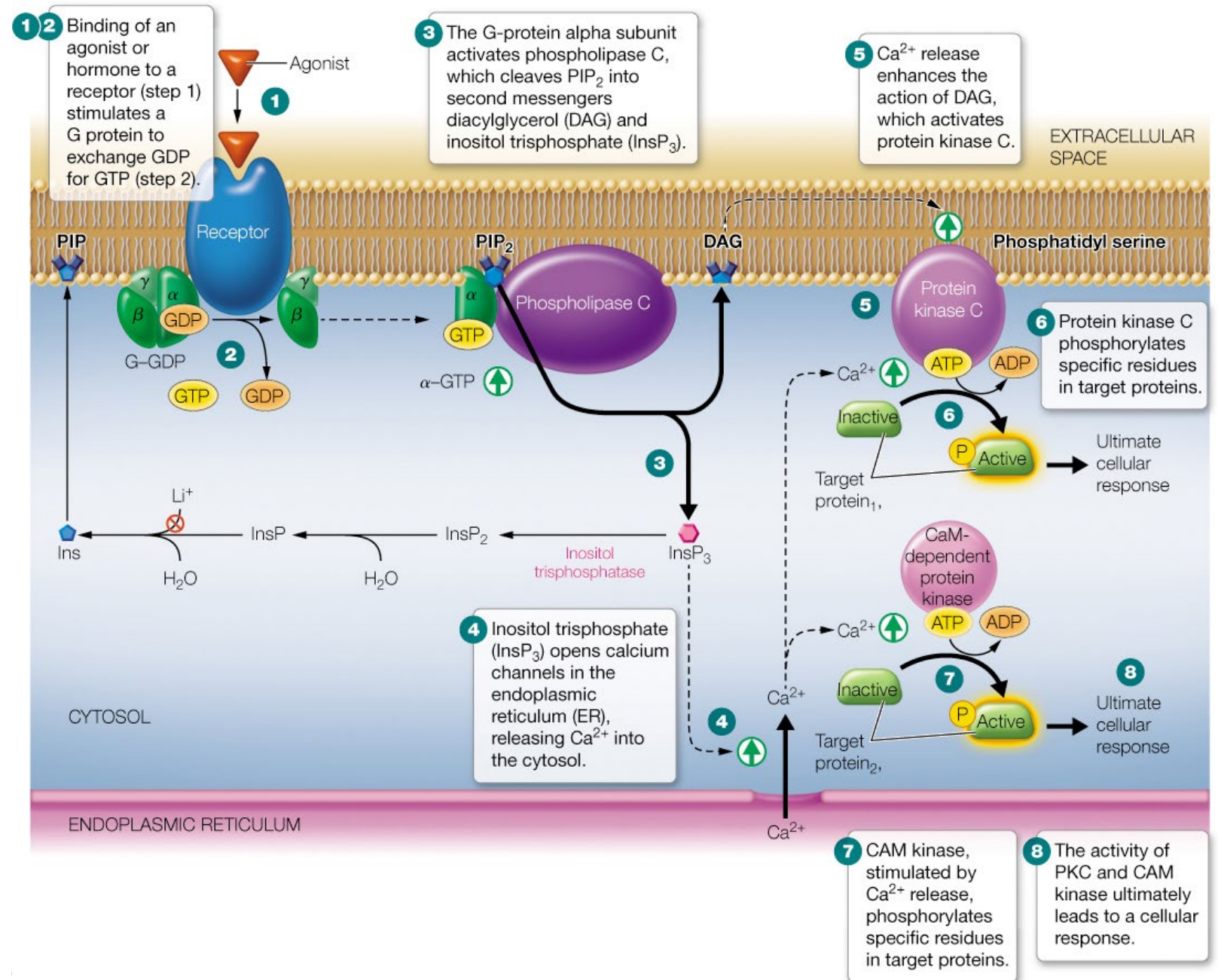
# Phosphatidylinositol 4,5-Bisphosphate (PIP<sub>2</sub>) as a Source of Two Second Messengers

- In the phosphoinositide system, G protein activates **phospholipase C** (instead of adenylate cyclase)
- **Phospholipase C** cleaves PIP<sub>2</sub> into the second messengers inositol 1,4,5-trisphosphate (**InsP<sub>3</sub>**) and *sn*-1,2-diacylglycerol (**DAG**)
- InsP<sub>3</sub> binds and opens calcium channels, releasing Ca<sup>2+</sup> from its intracellular ER stores
- **Protein kinase C** is activated by DAG and Ca<sup>2+</sup>, which phosphorylates target proteins such as calmodulin





# Signal Transduction Pathways Involving Phospho-Inositide Turnover



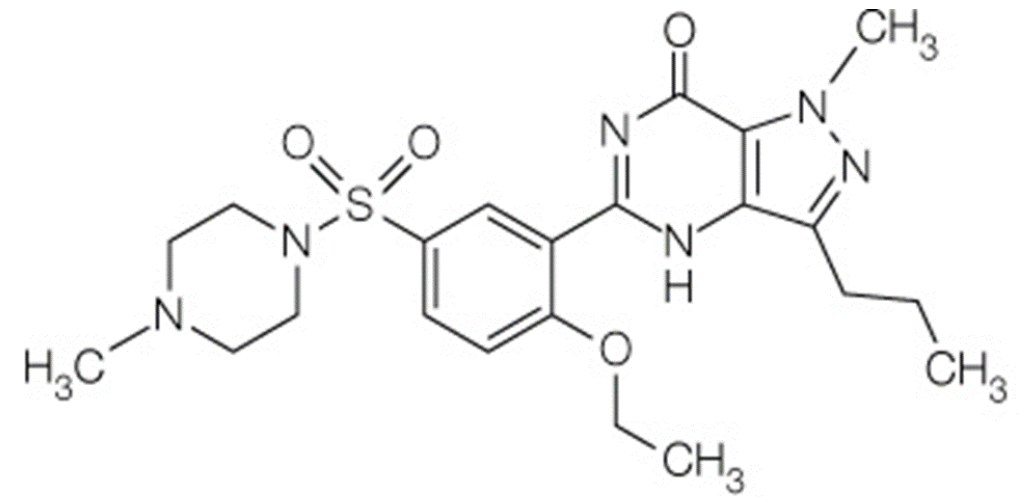
**TABLE 20.2** Some cellular processes controlled by the phosphoinositide second-messenger system

| Extracellular Signal          | Target Tissue                                       | Cellular Response                                   |
|-------------------------------|---|---|
| Acetylcholine                 | Pancreas<br>Pancreas (islet cells)<br>Smooth muscle | Amylase secretion<br>Insulin release<br>Contraction |
| Vasopressin                   | Liver   | Glycogenolysis                                      |
| Thrombin                      | Blood platelets                                     | Platelet aggregation                                |
| Antigens                      | Lymphoblasts<br>Mast cells                          | DNA synthesis<br>Histamine secretion                |
| Growth factors                | Fibroblasts   | DNA synthesis                                       |
| Spermatozoa                   | Eggs (sea urchin)                                   | Fertilization                                       |
| Light                         | Photoreceptors<br>( <i>Limulus</i> )                | Phototransduction                                   |
| Thyrotropin-releasing hormone | Pituitary anterior lobe                             | Prolactin secretion                                 |

## Cellular Processes Controlled by Phosphoinositide

# Nitric Oxide (NO) as a Second Messenger

- Actions of nitric oxide:
  - Regulation of neurotransmission
  - Stimulating defense to microbial infection
  - Vasodilation
- NO acts by stimulating guanylate cyclase, which converts GTP to cGMP
- Action of cGMP is terminated by cGMP phosphodiesterase, which converts cGMP to GMP
- Viagra is a cGMP phosphodiesterase inhibitor, so its action sustains levels of cGMP needed to stimulate sustained blood flow.



**Sildenafil (Viagra)**

# GP/GPCR Signalling Summary

- G protein–coupled receptors (GPCRs) are integral membrane proteins, containing seven membrane-spanning helices and undergo conformational changes when a hormone binds.
- A hormone binds at a specific site of a GPCR located on the extracellular side of the plasma membrane, which triggers the interaction of a G protein on the cytosolic side of the membrane
- This interaction activates the G protein, which then initiates the synthesis of second messengers (such as cyclic AMP) to affect target metabolic processes
- Ligand binding to a GPCR induces the  $\alpha$  subunit of the associated G protein to exchange GDP for GTP and dissociate from the  $\beta$  and  $\gamma$  subunits.
- Adenylate cyclase is activated to produce cAMP, which in turn activates protein kinase A.
- Signalling activity is limited through the action of phosphodiesterases that act on cAMP and cGMP.
- GPCRs can also signal through the phosphoinositide pathway.



# Complexity of hormone signalling

- Hormones have multiple roles in the cell
- They can trigger multiple signalling pathways, involving
  - metabolism as well as
  - cellular growth and differentiation
- Signalling pathways are complex and involve multiple enzymes and second messengers in the case of GPCRs
- Example: insulin signals via an RTK receptor:
  - Glucose transport
  - Glycogen synthesis
  - DNA/RNA/Protein synthesis





# Insulin signalling cascade

