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M1 Renal: Nucleotide Metabolism

Dr. Robert Lyons Assistant Professor, Biological Chemistry Director, DNA Sequencing Core

Web: <u>http://seqcore.brcf.med.umich.edu/mcb500</u>



Fall 2008



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Nucleic Acid metabolism

Click on any blue rectangle to see details.



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Formation of PRPP: Phosphoribose pyrophosphate



PRPP Use in Purine Biosynthesis:





Nucleoside Monophosphate Kinases

AMP + ATP <--> 2ADP (adenylate kinase)

GMP + **ATP** <---> **GDP** + **ADP** (guanylate kinase)

• similar enzymes specific for each nucleotide

• no specificity for ribonucleotide vs. deoxyribonucleotide

Ribonucleotide Reductase



Hydroxyurea inhibits this enzyme: chemotherapeutic use

O || HONH⁻C⁻NH₂

Regulation of Ribonucleotide Reductase





Nucleoside Diphosphate Kinase

$N_1DP + N_2TP \iff N_1TP + N_2DP$

$dN_1DP + N_2TP \iff dN_1TP + N_2DP$

- No specificity for base
- No specificity for ribo vs deoxy



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Degradation of the Purine Nucleosides:



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"Salvage" Pathways for Purine Nucleotides



APRT - Adenine phosphoribosyl transferase - performs a similar function with adenine.

Adenosine Deaminase Deficiency:



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Hypoxanthine



Xanthine



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

Hyperuricemia can be caused by:

Accelerated degradation of purines:

Accelerated synthesis of purinesIncreased dietary intake of purines

Impaired renal clearance of uric acid

Allopurinol inhibits xanthine oxidase and reduces blood uric acid levels:



Allopurinol



An 80-year-old man with a 30-year history of gout, this patient had been treated intermittently to reduce his serum urate levels.



The New England Journal of Medicine

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...



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...used for pyrimidine synthesis



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 orotate to OMP to UMP. Not common.

Pyrimidine degradation:

Cytidine deaminase converts cytidine to uridine



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:



5-FU efficacy depends on rate of degradation vs activation



Degradation (via dihydropyrimidine dehydrogenase, DPD

DPD inhibitors can potentiate 5FU activity

Capecitabine mode of action:



Cytosine arabinoside (araC) activation and inactivation:



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