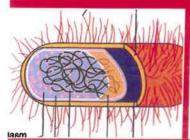
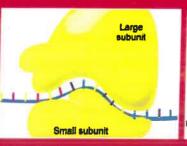


Cerebellum Biochemistry

For the Students By the Teachers



ALLOCUTE FINISHER



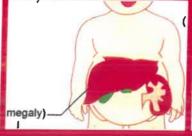








Table of Content

Chapter Name	Page No.	Chapter Name	Page No.
Unit 1. Concepts		3. Link reaction	67
1. The Four Smile formulas	1	4. TCA Cycle*	70
2. The two Lipases*	5	5. Pasteur's & Warburg Effect	74
3. How to use formulas*	6	6. NADH shuttles	75
4. camp & cgmp*	9	7. ETC*	77
5. Sources of blood glucose*	11	8. Gluconeogenesis	81
6. Fuel in fed, fasting & starvation	12	9. Reciprocal Regulation	84
7. Fasting state	13	10, TIGAR	86
8. Acetyl CoA*	14	11. Glycogen metabolism	87
9. Diabetes*	15	12. GSDs (Glycogen Storage Diseases)*	90
10. Respiratory Quotient	17	13. Glycogen Regulation	93
11. Cell Organelles	19	14. HMP*	95
12. Basics of Carbohydrate & Enzymes	25	15. Uronic acid pathway	99
13. High energy compounds*	29	16. Galactose metabolism	101
Clinical Practice Questions	31	17. Fructose metabolism	104
		18. Sorbitol pathway	106
Unit 2. Carbohydrate Chemistry		Clinical Practice Questions	108
1. Basics of Carbohydrate Chemistry	33	One liners	114
2. Isomerism*	36		
3. Classification of Carbohydrates*	40	Unit 4. Enzymes	
4. Mucopolysaccharidosis*	48	1. Enzyme basics	115
5. Beta- galactosidase"	52	2. Cofactors	118
6. GLUTs	53	3. Isoenzymes	120
Clinical Practice Questions	56	4. Enzyme classification	123
One liners	59	5. Enzyme kinetics	125
		6. Enzyme inhibitors	135
Unit 3. Carbohydrate Metabolism		7. Enzyme uses	139
1. Glycolysis	60	8. Enzyme regulation	140
2. Arsenic	66	Clinical Practice Questions	142
		One liners	146

^{*} These chapter are important for FMGE exams

<u>Chapter Name</u>	Page No.	Chapter Name	Page No.
Unit 5. Amino Acids		4. Lipoproteins	232
1. Amino acids basics*	147	5. HDL	239
2. Classification & Metabolism of Amino a	cids 151	6. Lipotropic factors*	241
3. Phenylketonuria*	159	7. Fatty acid synthesis*	242
4. Glycine metabolism	161	8. Ketone body pathways°	246
5. Phenylalanine & Tyrosine metabolism	164	9. Beta oxidation of fatty acids	248
6. Tryptophan metabolism	172	10. Cholesterol synthesis	252
7. Methionine & Cysteine metabolism	174	11. Bile acids	255
8. Catabolism of Amino Acids*	179	Clinical Practice Questions	257
9. Transamination*	181	One liners	263
10. Hyperammonemia*	184		
11. Urea cycle	185	Unit 8. Genetics/Molecular Biology	
12. Urea cycle disorders	188	1. Nucleotides*	266
Clinical Practice Questions	190	2. Basics of genetics	274
One liners	195	3. Genetic disorders*	279
		4. Mitochondrial DNA°	282
Unit 6. Proteins		5. DNA Replication*	284
1. Protein bonds & structure	197	6. Klenow fragment	288
2. Protein precipitation	200	7. DNA repair*	290
3. Color reactions of amino acids & protein	s* 202	8. Types of RNA	292
4. Chromatography & Electrophoresis*	206	9. Introns	294
5. Fibrous proteins	210	10. Transcription	295
6. Haem synthesis	213	11. Post transcriptional modifications*	297
7. Porphyria	215	12. Ribozymes	300
8. Haem catabolism	217	13. Operon model*	302
Clinical Practice Questions	218	14. Codon°	304
One liners	222	15 Translation*	307
		16. Genetic techniques®	313
Unit 7. Lipids		17. Epigenetics & genomic imprinting	319
1. Lipid chemistry	223	18. CRISPR*	321
2. Sphingolipidoses	228	Clinical Practice Questions	322
3. PUFAs	230	One liners	328
	11		

Chapter Na	<u>ame</u>	Page No.	<u>Chapter Name</u>	age No.
Unit 9. Mis	scellaneous	ÿ	16. Calcium	366
1. Alcol	hol metabolism*	330	17. Iron°	367
2. Vitar	nins general [*]	336	18. Copper	370
3. Vitar	min A*	339	19. Menke & wilson's disease	372
4. Vitar	min D*	343	20. Selenium & fluorine	374
5. Vitar	min E*	346	21. Zinc & chromium	376
6. Vitar	min K*	348	22. Free radicals	377
7. Vitar	min BI	350	23. Xenobiotics	381
8. Vitar	min B2*	352	24. Muscle energy systems	383
9. Vitar	nin B3*	353	25. Meister cycle*	384
10. Vitar		355	26. Buffers & Titration Curve	385
11. Vitar		356	27. Polyamine pathway	390
12. Vitar		358	28. HbA1c*	391
			29. One Carbon metabolism	392
13. Vitar		360	Clinical Practice Questions	393
14. Vitar	min B12	362	One liners	398
15. Vitai	min C*	364	Answers to all unit's clinical practice questions	400
			II	

^{*} These chapter are important for FMGE exams

Unit 1 Concepts

FOUR FORMULAS

Fed state (2 hours after food intake) → Anabolism occurs
Fasting state (12-18 hours without food)
Starvation (1-3 days without food)

SMILE FORMULA 1

Tells about which pathway/enzyme is Anabolic and which pathway/enzyme is Catabolic?

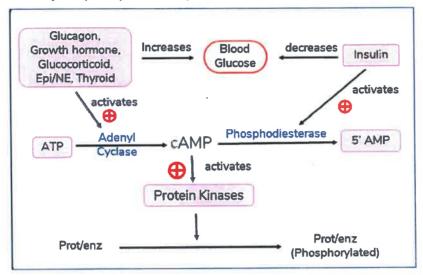
Anabolic pathways	Catabolic pathways		
 Glycogenesis HMP Fat Synthesis Lipoprotein Lipase (LPL) enzyme 	 Glycolysis Link Reaction Glycogenolysis β-oxidation of fatty acids Gluconeogenesis Ketone Body Synthesis Ketone Body utilization/breakdown Hormone Sensitive lipase (HSL) enzyme 		

Note: This division is based on whether pathway occur in catabolic or anabolic state. Pathway occurring in fed state are anabolic while pathways occur in fasting/starvation are considered as catabolic.

SMILE FORMULA 2

- Related to hormones Insulin and glucagon and their effects on pathways.
- Insulin is released in fed state to cause hypoglycemic action. So, consider insulin as anabolic hormone.
- Formula: Insulin activates all anabolic pathways/enzymes especially regulatory enzymes of anabolic pathways.
 - Exception: Insulin also activates two catabolic pathway enzymes i.e., Glycolysis and Link Reaction.
- · Formula: Glucagon activates all catabolic pathway/enzymes
 - Exception: glucagon does not activate two catabolic pathway enzymes, i.e., Glycolysis and Link Reaction, as these are activated by Insulin.

Phosphorylation and Dephosphorylation by cAMP



- cAMP causes phosphorylation
- Why many hormones increase blood glucose while only one hormone decreases blood glucose?
 - Because hypoglycaemia is more dangerous than hyperglycaemia.
- Insulin activates phosphodiesterase so ↓ cAMP and causes dephosphorylation
- Glucagon and epi/NE, GH, Glucocorticoid and thyroid hormones activates adenyl cyclase so 1 cAMP and cause phosphorylation

SMILE FORMULA 3

- Related to Phosphorylation and Dephosphorylation states of enzymes
 - Any Pathway or Enzyme which is activated by Insulin will be active in its Dephosphorylated state. It
 includes all anabolic pathways and glycolysis and Link reaction.
 - Any pathway or Enzyme which is activated by Glucagon (Catabolic enzymes) is active in Phosphorylated state.

Exception: ATP Citrate Lyase that is an anabolic enzyme (activated by insulin) but it is active in phosphorylated state

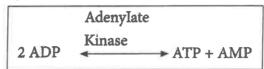
SMILE FORMULA 4

- · Tells Which pathway occurs in which compartment of the cell?
 - All Anabolic Pathways occur in Cytoplasm
 - All Catabolic Pathways occur in Mitochondria
 - Exception: Two catabolic pathways also occur in cytoplasm.
 - 1. Glycolysis
 - 2. Glycogenolysis
- · Pathways which occur in both Mitochondria and Cytoplasm
 - Urea cycle
 - Haem synthesis
 - Gluconeogenesis
- Whenever a pathway occurs in both, it starts in mitochondria and finishes in cytoplasm
- TCA, ETC → vital pathways that occur in mitochondria and do not depend on fed or fasting state

Note: There are some other pathways such as urea cycle, nucleotide, DNA, RNA, Protein and AA synthesis which are neither regulated by hormones and do not depend on fed and fasting state. So, don't use formulas for these pathways.

ADENYL KINASE

• It's a phosphotransferase and perform conversion of 2ADP to AMP and ATP



• Used for interconversion of nucleotides ADP, ATP and AMP which are required for different functions in the cell.

THE TWO LIPASES

Lipoprotein Lipase (LPL)	Hormone Senstitive Lipase (HSL)
Present in the endothelium of blood vessels	· Pre sent in the adipose tissues
Breaks down fats (TG) travelling in the blood to FA and Glycerol	Breaks down fats (TG) stored in adipose tissue to FA and Glycerol during fasting and starvation
 FA and Glycerol are absorbed into adipose tissue and get stored as TG 	 Released FA and Glycerol is passed into blood and used for energy by liver and other organs
Helps to store fats, hence considered as anabolic enzyme	Helps to break fats, hence considered as catabolic enzyme
 Activated by anabolic hormone insulin and inhibited by glucagon 	Activated by catabolic hormone glucagon and inhibited by insulin

HOW TO USE FORMULAS

Q1. Which of the following does not occur in mitochondria?

(AIIMS Nov 2016)

- (a) Beta oxidation
- (b) Fatty acid synthesis
- (c) DNA synthesis
- (d) Protein synthesis

Ans. (b) Fatty acid synthesis

Pathway	Nature	Compartment
Beta oxidation	Catabolic	Mitochondria
Fatty acid synthesis	Anabolic	Cytoplasm
DNA synthesis	Mitochondrial DNA and protein synthesis	Mitochondria
Protein synthesis		

Q2. Which of the following is active in dephosphorylated state?

(PGI May 2017)

- (a) Glycogen Synthase
- (b) Pyruvate Carboxylase
- (c) Glycogen phosphorylase
- (d) Acetyl CoA Carboxylase
- (e) Pyruvate dehydrogenase

Ans. (a, d, e)

(a) Glycogen Synthase	\rightarrow	Synthesis	\rightarrow	Anabolic
(b) Pyruvate Carboxylase	\rightarrow	Gluconeogenesis	\rightarrow	Catabolic
(c) Glycogen phosphorylase	\rightarrow	Break down	\rightarrow	Catabolic
(d) Acetyl CoA Carboxylase	\rightarrow	FA Synthesis	\rightarrow	Anabolic
(e) Pyruvate dehydrogenase	\rightarrow	Link reaction	\rightarrow	Catabolic

- Apply Smile formula 3: Pathways or Enzymes which are activated by Insulin (Anabolic Enzyme) are always
 active in Dephosphorylated state with link reaction as an exception.
- Q3. Insulin promotes lipogenesis by all except?
 - (a) Decreasing cAMP
 - (b) Increasing Glucose uptake

	(c) Inhibiting Pyruvate Dehydroge(d) Increasing Acetyl CoA	nase				
Ans.	(c) Inhibiting Pyruvate Dehydroge	nase				
•	Mitochondria are involved in all c (a) ATP Production (b) Apoptosis (c) Tri carboxylic Acid Cycle (d) Cholesterol Synthesis	of the f	following except:			
Ans.	(d) Cholesterol Synthesis					
Q 5.	Hormone Sensitive lipase is NOT (a) Insulin (b) Glucagon (c) Catecholamines (d) Thyroid	`activa	ted by:			
Ans	(b) Glucagon		tein Lipase ne Sensitive lipase	\rightarrow	Anabolic catabolic	
Q 6.	Which of the following is not set (a) Gluconeogenesis (b) Glycogen Breakdown (c) Ketogenesis (d) Glycogen Storage	en in lo	w insulin-Glucagon F	Ratio?		(AIIMS 2019)
Ans	(d) (Apply Smile formula 1 and 2)(a) Gluconeogenesis(b) Glycogen Breakdown(c) Ketogenesis(d) Glycogen Storage	Low Ins → → → →	sulin means catabolic catabolic catabolic catabolic Anabolic	state		
	. Which of the following is active (a) Glycogen Synthase (b) Pyruvate carboxylase (c) Glycogen Phosphorylase (d) PEPCK	in dep	hosphorylated Stat	e?		
Ans	(a) (Apply Smile formula 3) (a) Glycogen Synthase (b) Pyruvate carboxylase (c) Glycogen Phosphorylase (d) PEPCK	→→→→	Anabolic catabolic catabolic catabolic			

How to Use Formulas

- Q8. All occur in mitochondria except: [PGMEE 2015]
 - (a) Glycolysis
 - (b) TCA Cycle
 - (c) ETC
 - (d) Ketogenesis

Ans. (a) (Apply Smile formula 4)

Q9. The biosynthesis of the enzymes Pyruvate Carboxylase is repressed by:

(PGMEE 2012-13)

- (a) Insulin
- (b) Cortisol
- (c) Glucagon
- (d) Ketogenesis

Ans. (a) (Apply Smile formula 2)

Q10. Which of the following is active in phosphorylated state?

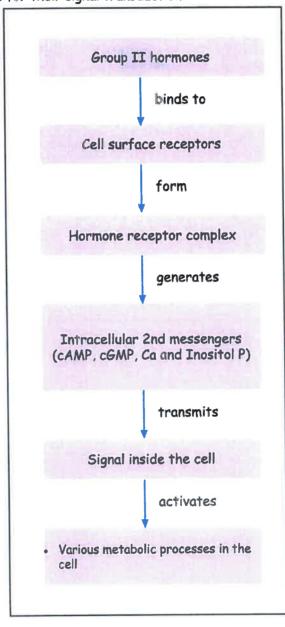
- (a) Glycogen Synthase
- (b) Glycogen Phosphorylase
- (c) Acetyl Co A Carboxylase
- (d) G6PD Enzyme

Ans. (b) (Apply Smile formula 3)

cAMP and cGMP

4 Chapter

- They are 2nd messengers
- · Used by group II hormones for their signal transduction



Differences between cAMP and cGMP

cAMP	CGMP			
More common	Less common			
Less sustained response	Long term and sustained response			
ATP Adenylate CAMP Cyclose Phosphodiesterase 5' AMP	GTP Guanylate CGMP Phosphodiesterase 5' GMP Guanylate cyclase exist in 2 forms: 1. Membrane bound form 2. Cytoplasmic form			
Activate protein kinase A	Activate protein kinase G			
 The hormones which use cAMP as second messenger are called as group IIa hormones such as: Glucagon LH FSH hCG Calcitonin Catecholamines 	 The hormones which use cGMP as second messenger are called as group IIb hormones It has role in Visual cycle Vasodilatory effect by NO (nitric oxide) Activation of peptide hormones like ANP and BNP (atrial and brain natriuretic peptides) where membrane bound guanylate cyclase is used. 			

SOURCES OF BLOOD GLUCOSE

Q1. Sources of Blood Glucose?

- 1. Food (till 2 hours of diet)
- 2, Liver Glycogen [provide glucose for 12-18 Hours]
- 3. Gluconeogenesis [Requires High Energy]

Q2. Main/Preferred fuel for the body?

- In fed state body will use carbohydrates preferably
- In fasting and starvation, body will first use mainly fat and then shift to using proteins.

Important Information

Exercise done in morning when body glycogen stores are depleted helps body to consume a lot of energy in gluconeogenesis hence is much more beneficial for reducing weight than exercise done at other times.



FUEL IN FED, FASTING AND STARVATION

TABLE: SUBSTRATES UTILIZED FOR ENERGY PRODUCTION

	Fed	Fasting	Starvation Starvation
Brain	Glucose	Glucose	KB
Heart	FA	FA	KB
Liver	Glucose	FA	Amino Acids
Muscle	Glucose	FA	FA and KB
Adipose tissue	Glucose	FA	FA
RBC	Glucose	Glucose	Glucose
Main fuel for body	Carbohydrate	Fat	Amino acids

In Fasting

- RBCs cannot use fatty acid or ketone bodies (KB) as fuel even during fasting as they don't have mitochondria where beta-oxidation occurs.
- Brain cannot use FA as FAs cannot cross blood brain barrier.

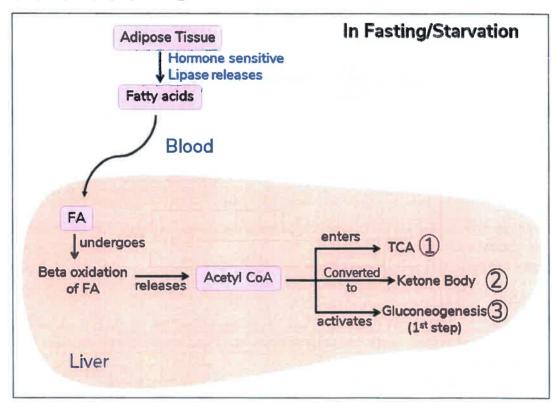
In Starvation

- Vital organs Brain and heart are adapted to use KB during starvation, so that, if glucose is exhausted by utilization in other organs, death can be avoided as heart and brain can still function by using ketone bodies as an alternative fuel.
- Muscle cells avoid or delay using proteins/AA as fuel to avoid body muscle loss.

Important Information

- Fetal heart and also in case of heart failure, main fuel is Glucose (GLUT-4 allows glucose transport in heart muscles during these conditions)
- Heart is adapted to use FA as main fuel as it works 24 hours and require continuous supply of energy by utilizing energy dense fats as compared to glucose.

SCENE IN FASTING STATE



Sequence of Utilization of Acetyl CoA

- 1. For use in TCA in liver cells to provide energy to liver cells for ketone bodies synthesis.
- 2. Once liver has generated enough energy for synthesis, acetyl CoA can now enter KB synthesis.
- 3. Once KB synthesis is up and running well and supplying the energy to vital organs, then gluconeogenesis will proceed, and acetyl-CoA can now be used for stimulation of 1st step of gluconeogenesis.

Note: Any defect of beta-oxidation in liver will lead to non-ketotic hypoglycemia due to non-formation of ketone bodies and no gluconeogenesis.