

Biochemistry  
Team 434

# PHOSPHOLIPID COMPOUNDS OF PHYSIOLOGICAL IMPORTANCE

Respiratory Block

**COLOR INDEX:** Red= Important Purple= Addition Orange= Explanation

Biochemistry434@gmail.com

# ❖ *Objectives*

- **Selected members of phospholipids**
- **Physiological importance of phospholipids**
- **Phospholipases:**
  - Phospholipases **A1, A2, C and D**
  - Lysosomal phospholipase: **Sphingomyelinase**

# Functions Of Phospholipids

## membrane bound phospholipids

structural: predominant lipids of cell membranes

signaling: source of IP3 and DAG

anchoring: attaching some proteins to membranes

myelin sheath: insulator and speeds up transmission of nerve impulses

as if it has 2 hands one holds the membrane the other hand holds another structure ex: protein

which is about sphingomyelin + phospholipid + other components

## non membrane bound phospholipids

easy reinflation of alveoli by air: lung surfactant

detergent effect: essential component of bile solublize cholesterol, preventing gallstones

emulsifying lipids, helping in lipids digestion

structural: coat of lipoproteins

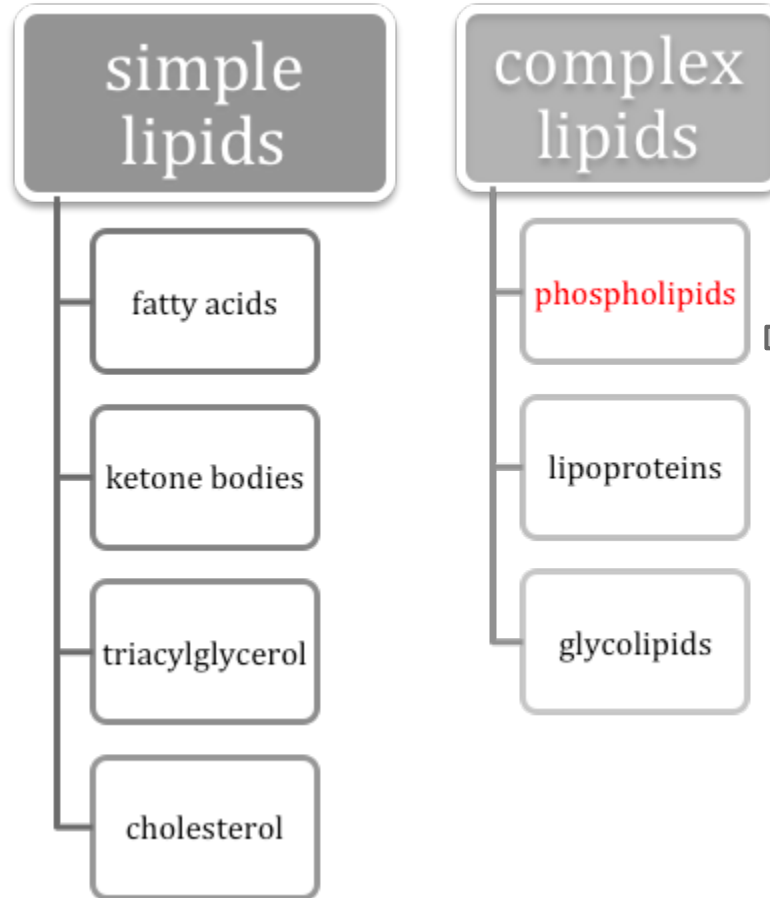
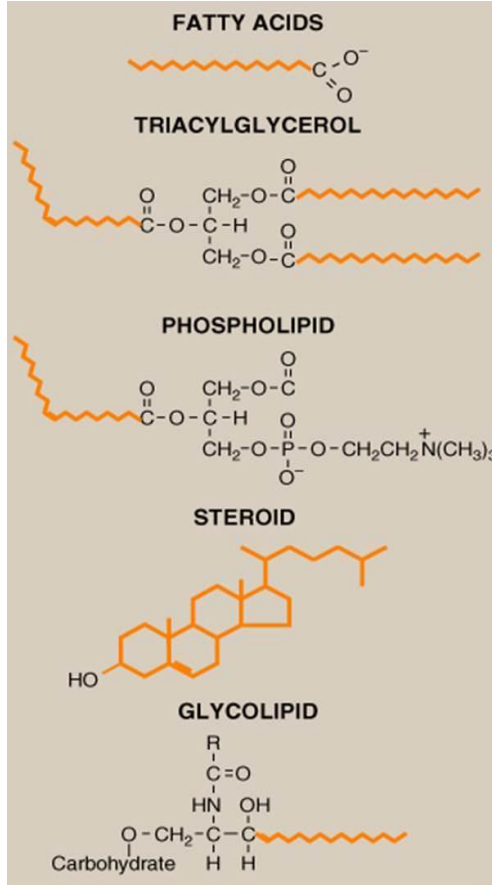
### Background: lipid compounds

Heterogeneous group

Relatively water-insoluble except **ketone bodies**

Soluble in nonpolar solvents

# Lipids compound: heterogeneous group



1-glycero-phospholipids:  
glycerol containing  
phospholipids

2-sphingo-phospholipids:  
sphingosine containing  
phospholipids

# *There are two classes of phospholipids:*

## **1-glycero-phospholipids**

Have **glycerol** as the backbone

Predominant lipids in membranes All contain (or are derivatives of) phosphatidic acid "**which is the parent compound**".

### **What is phosphatidic acid?**

It is Diacylglycerol (**DAG**) with a phosphate group. This is the simplest glycerophospholipid.

## **2-Sphingo-phospholipids**

Have **sphingosine** as the back bone

Sphingosine-containing phospholipids e.g. sphingomyelin ( myelin sheath ).

When adding a long chain of fatty acid to sphingosine on the (  $\text{NH}_2$  ) group it's called ceramide "**parent compound**". After that adding Phosphorylcholine to the ceramide will turn it into **SPHINGOMYELIN**.

# ◆ Phosphatidylcholine

We will talk about dipalmitoyl lecithin (DPPC) which is a major component of surfactant.

- **Where is it synthesized and secreted?**

In granular pneumocytes, aka: **type II alveolar cells**.

Makes up **65%** of lung surfactant .

طبقة زي الغازلين

to prevent the alveolar from collapsing

"تفرقع" COLLAPSE = **atelectasis**



We have talked about the function of surfactant many times as it decreases surface tension. So now, let us jump to a pathologic process :

**Congenital Respiratory Distress Syndrome (CRDS):**

Surfactant is usually produced after 32 weeks of gestation "الحمل" (around 8 months). Premature infants are at increased risk of CRDS.

Instead of listing the information regarding CRDS, it would be better if we put it as **a Q & A**

What are the symptoms of CRDS?

Neonates would have difficulty breathing and since the surface tension is increased with the loss of surfactant, the alveoli may collapse & it may lead to death.

1) **How can we diagnose this before birth?**

We take a sample of the amniotic fluid & take the ratio between lecithin (which is our friend that makes surfactant) and sphingomyelin. So we will do this: Lecithin (L) / Sphingomyelin (S) "L/S". The rule is that: a ratio of 2 and above means that the baby is OK.

2) **A pregnant woman had an L/S ratio of 1. What drugs could help in her case?**

- We can administer a beta 2 agonist that causes postponing of labor.
- We can give glucocorticoids shortly before delivery because it expresses some genes that help.

3) **What is the treatment for the freshly born neonate with CRDS?**

- We can give them surfactant. It is administered in the trachea.



# Phosphatidylinositol 4,5 bisphosphate

• Hormone → G Protein coupled receptor on cell membrane → activation of Gq alpha subunit → Production of IP3 & DAG → mobilization of intracellular Ca → activation of protein kinase C cellular response

• The hormone could be Ach, ADH, or catecholamines.

• Phosphatidylinositol is digested to Diacylglycerol (DAG) and Inositol Triphosphate (IP3) by phospholipase C.

## Anchoring “ربط” functions of PI:

Anchoring

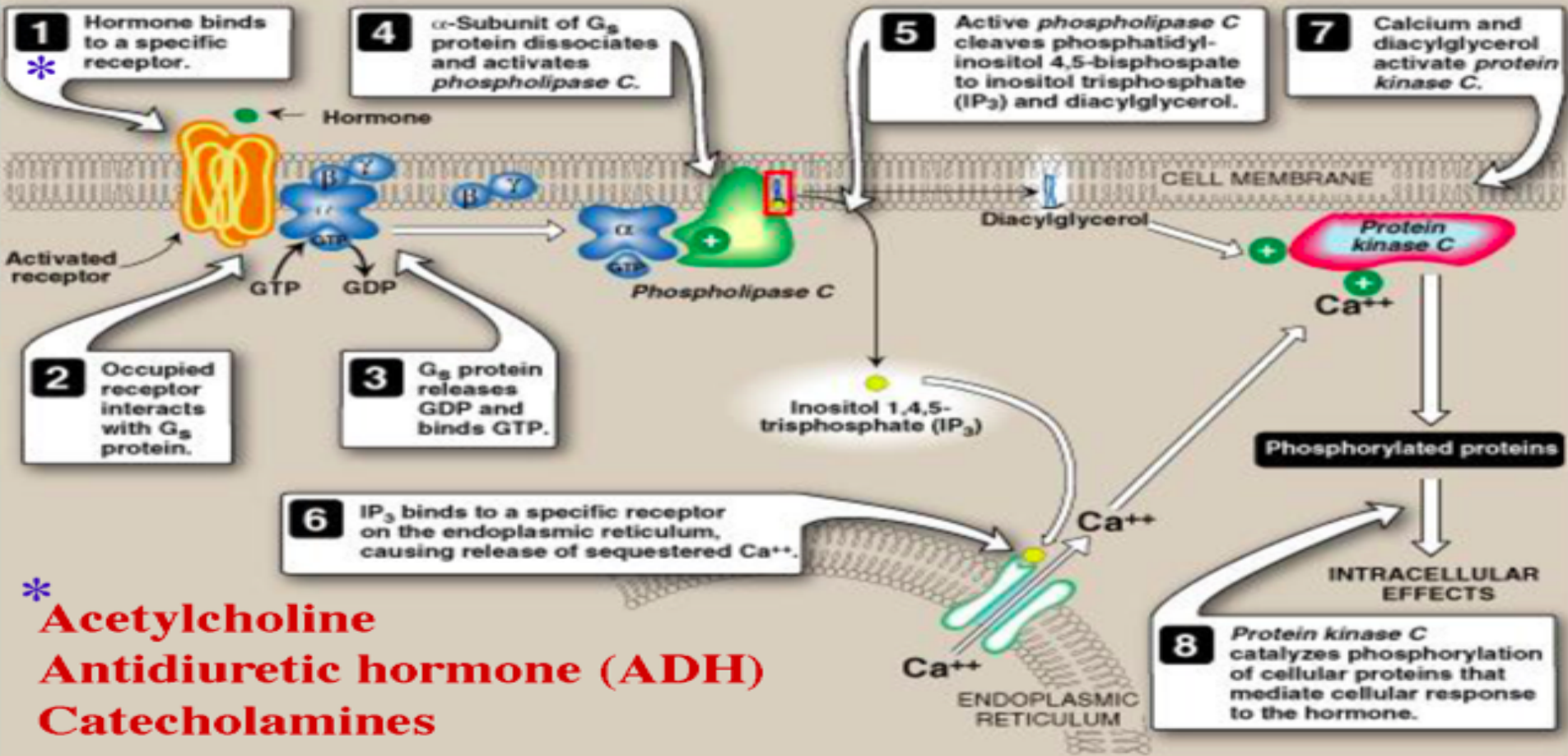
of proteins to membranes via Carbohydrate-Phosphatidylinositol Bridge

Examples include: 1) Ach Esterases in the postsynaptic membrane. 2) alkaline phosphatase which is found in the surface of small intestines.

These proteins can be cleaved from their attachment to the membranes

by phospholipase C

# Intracellular Signaling by Inositol trisphosphate





## Sphingo-phospholipids:

Sphingosine-containing phospholipids e.g. sphingomyelin ( myelin sheath ).

When adding a long chain of fatty acid to sphingosine on the (  $\text{NH}_2$  ) group it's called **ceramide**. After that adding Phosphorylcholine to the ceramide will turn it into **SPHINGOMYELIN**.

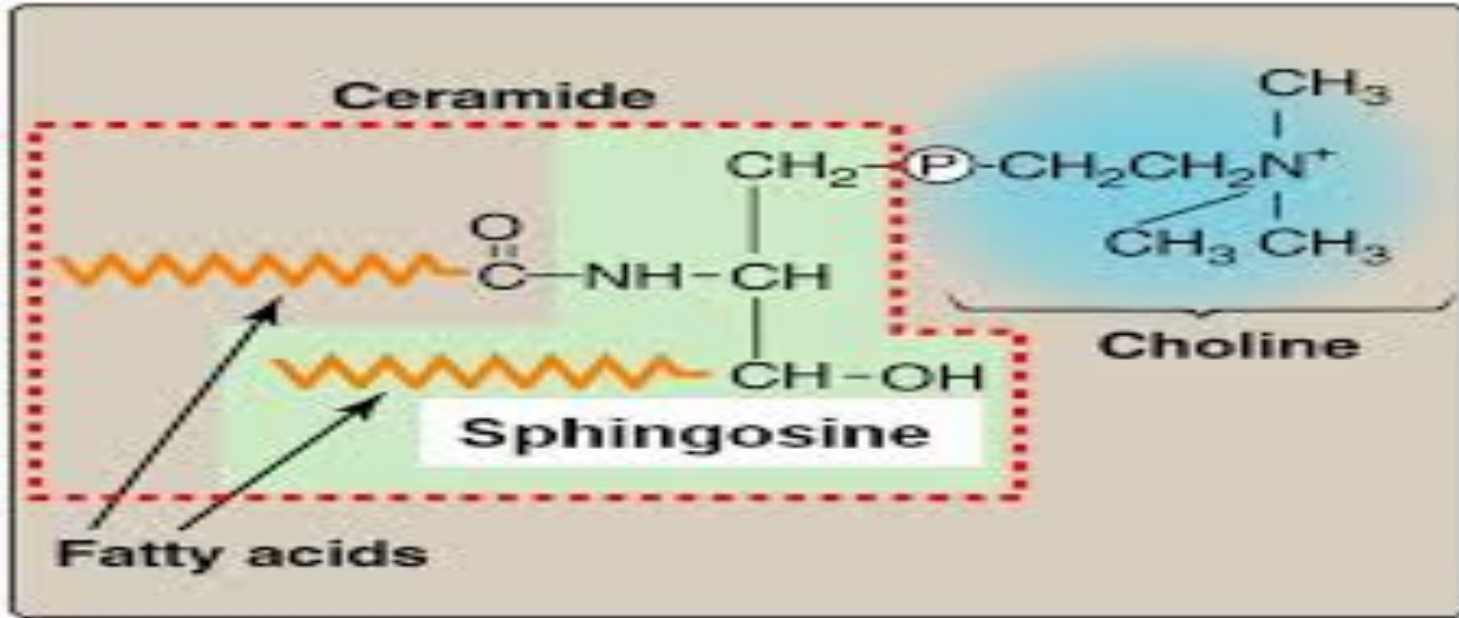
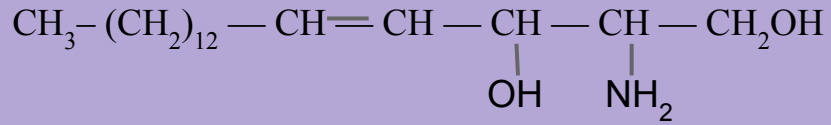


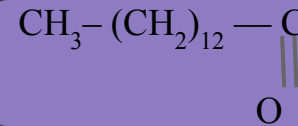
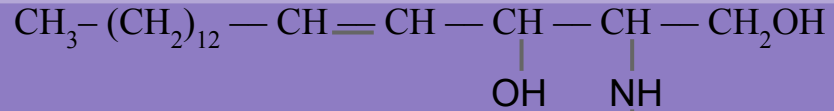
Figure 17.4

Structure of sphingomyelin, showing sphingosine (in green box) and ceramide components (in dashed box).

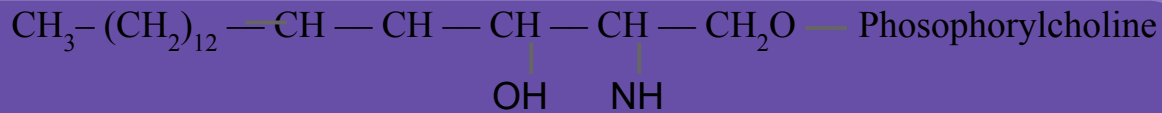
sphingosine: long chain, unsaturated amino acid.



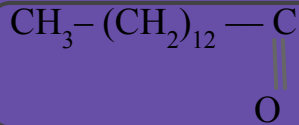
**Ceramide :**  
**Parent sphingolipid**  
**compound**



long chain  
fatty acid



long chain  
fatty acid



**Sphingomyelin**

# Structure & Function of Myelin Sheath

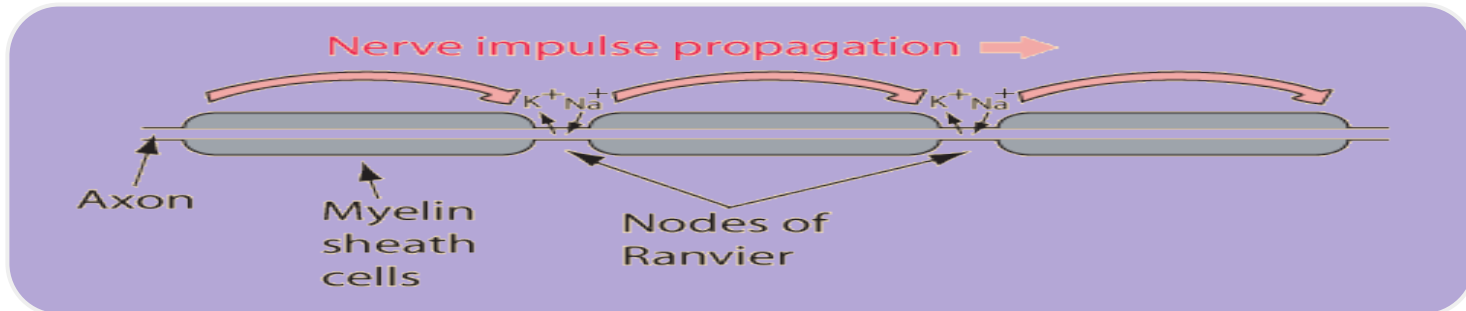
Myelin structure:

**Lipids (80%)    Proteins (20%)**

A) Glycolipids ( *mainly* )

B) sphingomyelin

Myelin sheath insulates the nerve axon to avoid signal leakage and greatly **speeds up** the transmission of impulses along axons.



# *Lipoprotein structure*

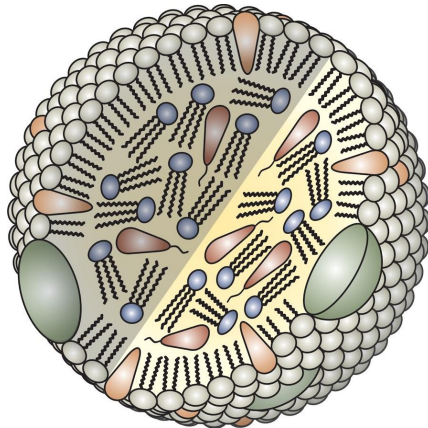
## Outer part ( surface coat ) :

- apoproteins or **apolipoproteins** .
- phospholipids
- free cholesterol

( relatively hydrophilic, allowing transport of lipid particles of the core in the aqueous plasma )

## Inner part ( Lipid core ) :

- according to the **type of lipoproteins** .
- different lipid components in various combinations.



### SURFACE COAT



unesterified cholesterol



phospholipids



apolipoproteins

### LIPID CORE



cholesteryl esters



triglycerides

# Phospholipases

a group of enzymes that catalyze the cleavage of phospholipids. While some phospholipases possess substrate specificity for certain phospholipid species so it has remodeling and degradation functions.

## ❖ for glycerophospholipids

*phospholipase A1* : present in many mammalian tissues .

*Phospholipase A2* : acts on phosphatidylinositol to release arachidonic acid ( the precursor of the prostaglandins ) , present in pancreatic juice , snake and bee venoms and inhibited by glucocorticoids they have them to degrade phospholipid in our body (virulence factor )

*Phospholipase C*: found in liver lysosomes and bacterial toxin, activated by PIP system.

*phospholipase D* : found primarily in plant tissue  
cause they need to cleave PI 4,5 Bisphosphate to it component

## ❖ for sphingophospholipids

**Lysosomal phospholipase :**

-sphingomyelinase :

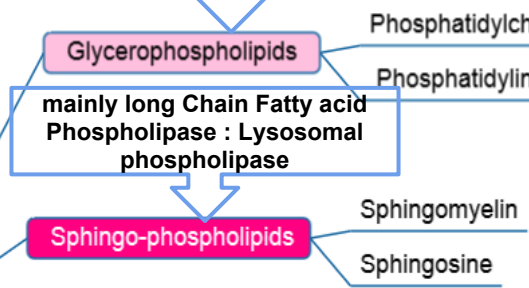
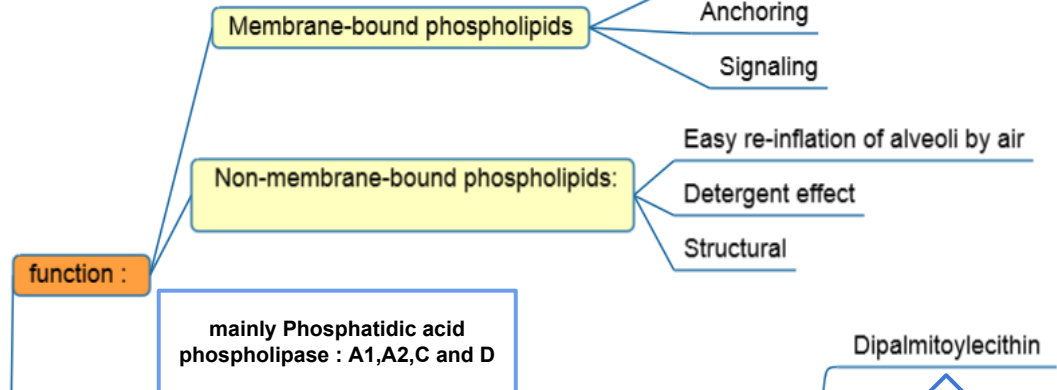
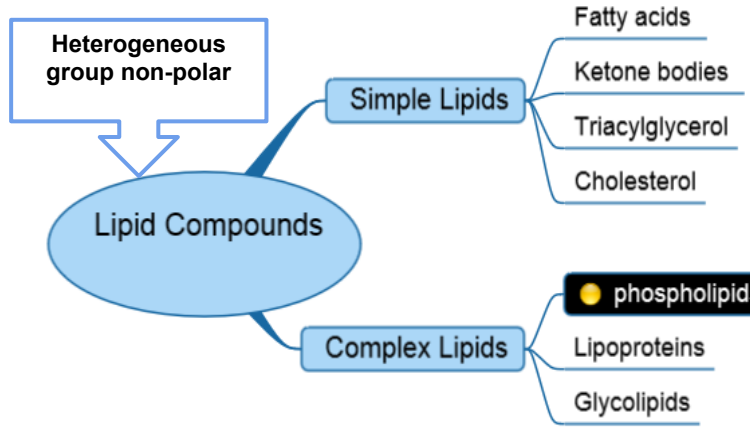
**catalyze** Sphingomyelin to produce → ceramide + phosphocholine .

# Summary

**1** Congenital Respiratory distress syndrome (RDS) :  
Insufficient production of lung surfactant

**2** Phosphatidylinositol System :

- Signal : Hormones or neurotransmitters
- receptor: G-protein coupled receptor
- Effects : - activation of phospholipase C.
- Hydrolysis of phosphatidylinositol 4,5-bisphosphate
- Production of IP3 ( Ca<sup>2+</sup>) and DAG
- Activation of protein kinase C .
- Response : Phosphorylation (either activation or inhibition of the enzyme )



Dipalmitoylecithin

- Synthesized and secreted by granular pneumocytes
- Major lipid component (65%) of lung surfactant decreases surface tension → preventing alveolar collapse

**N.B : Phospholipases functions are :**

- Degradation of phospholipids
- Remodeling of phospholipids:  
replacing fatty acid by alternative one

# MCQs

Many of these questions we took from 433 team, because these are very helpful:

**Q1) Which one of the following has a signaling function:**

- A- Inositol trisphosphate C-Dipalmitoylecithin  
B- Proteins D- ATP

**Q2) Diabetic 35 week pregnant patient came to your clinic and you predicted that she will deliver prematurely which one of these test will make us sure that the baby has normal surfactant level:**

- a- manteaux test.  
b- lecithin/sphingomyelin ratio  
c- RAST test.

**Q3) phospholipids is transported in the circulation in the form of:**

- A- phospholipase A1 B- phospholipase A2  
C- lipoprotein D- phospholipase c

**Q4) which of following is responsible for remodeling and degradation of phospholipids:**

- a- sphingomyelin  
b- lipoprotein  
c- phospholipases  
d- phosphatidic acid

**Q5)The MAIN component of lung surfactant is:**

- A- cholesterol B- proteins  
C- DPPC. D- Carbohydrates

**Q6) lung surfactant are made of:**

- A- non membranebound phospholipid B- membrane bound phospholipid  
C- phospholipase D D- phospholipase A2

**Q7) All lipid compounds are lipid soluble except:**

- A- Ketone bodies
- B- cholesterol
- C- fatty acids
- D- triacylglycerol

**Q8) 28 week pregnant lady was going deliver her baby early, which one of these you should give her to prevent the low surfactant percentage:**

- A- VIT.D
- B- Adrenalin
- C- Intra tracheal administration of surfactant
- D- Glucocorticoids

**Q9) The anchor proteins can be cleaved from their attachment to the membranes by:**

- A- Phospholipase C
- B- Phospholipase A2
- C- Phospholipase A1
- D- Phospholipase D

**Q10) phospholipase A2 is inhibited by:**

- A- Trypsin
- B- Glucocorticoids
- C- fructose 1,6-bisphosphatase
- D- Bacteria

Ans: 1-A 2-B 3-C 4-C 5-C 6-A 7-A 8-D 9-A 10-B



## ❖ *Done By:*

- Nouf AlOraini
- Rana AlJunadil
- Mohammad Al Sabeeh
- Mohammad Al Kharraz
- Mashael Hussein
- Ameerah Bin Zuair
- Sarah Al Jasser
- Reem Labani
- Anas Al Zahrani
- Mohammad Al Mashouq

# BioCHEMiSTRY

is A

## Piece of Cake



UNCHEWABLE INSOLUBLE CAKE