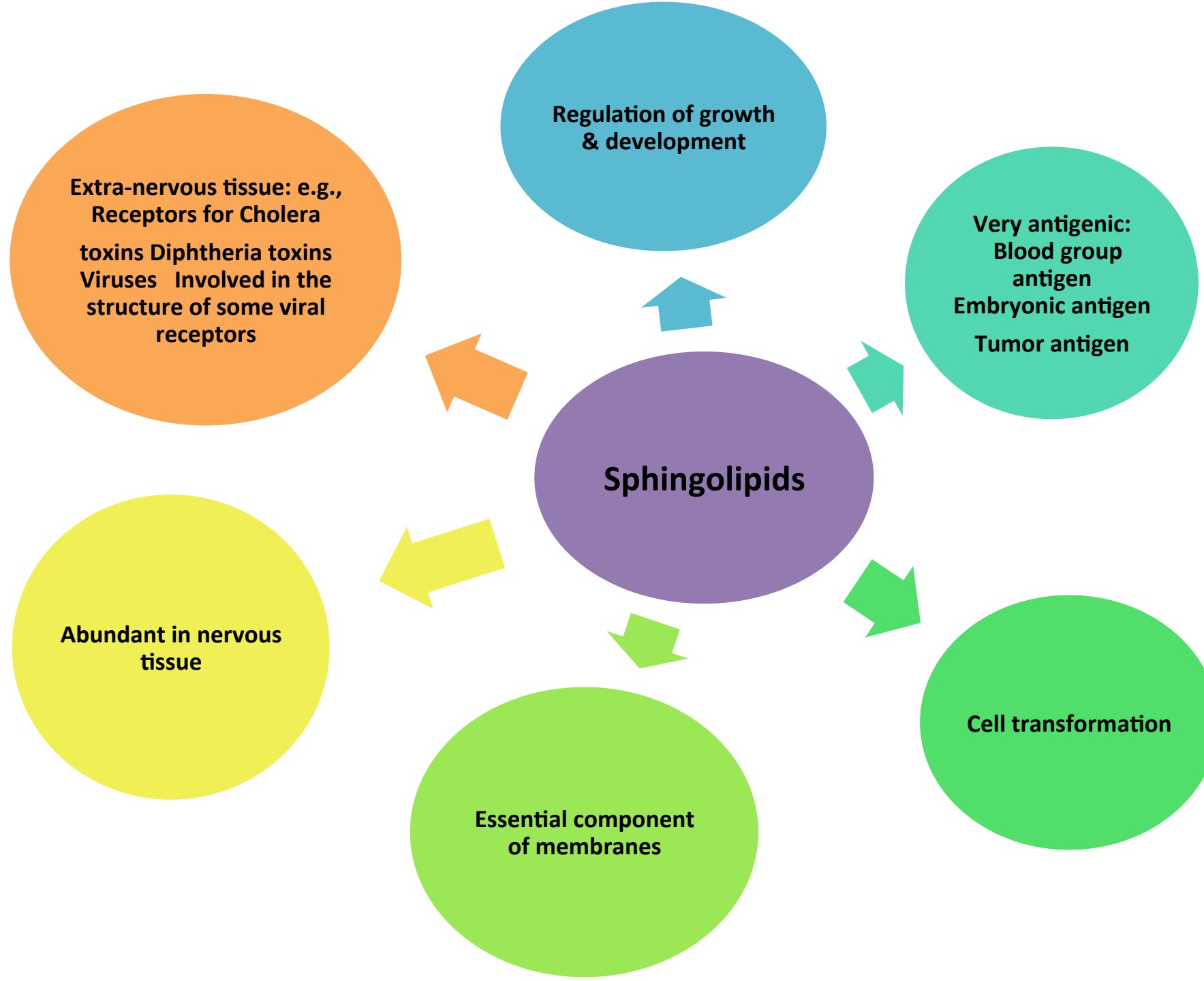


Biochemistry
Team 434

Sphingolipids and Myelin Structure

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Sphingolipids: Structure and Types

Sphingosine

Ceramide

Sphingomyelin

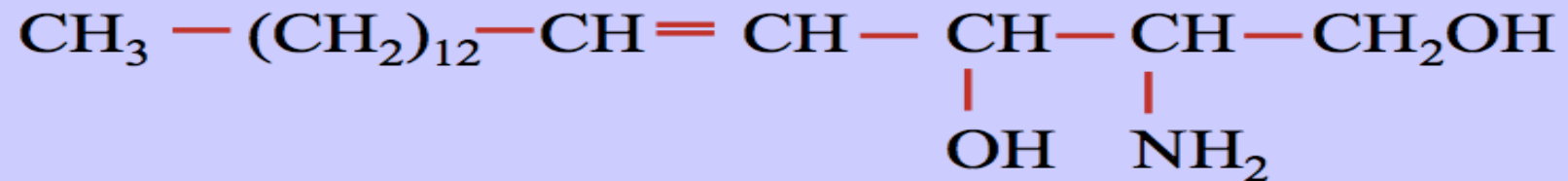
Cerebrosides

Gangliosides
Gangliosides are much more complicated than Cerebrosides

Structure and Types

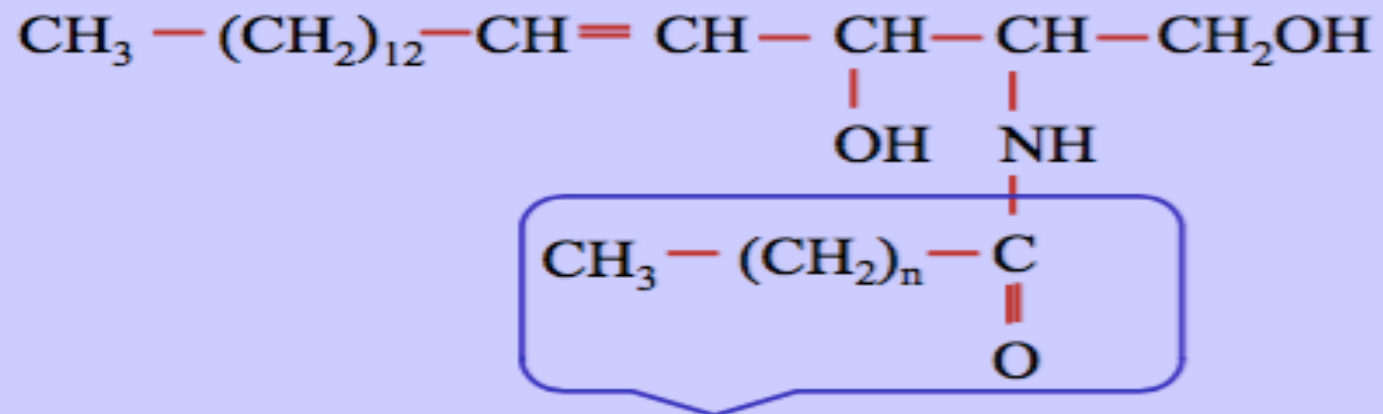
Sphingosine

Long chain, unsaturated amino alcohol



We don't have to memorize the structures.

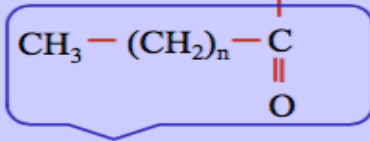
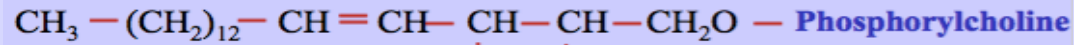
Ceramide = Sphingosine + fatty acid



Long Chain Fatty acid

The chain may reach 24 carbons so it is really long

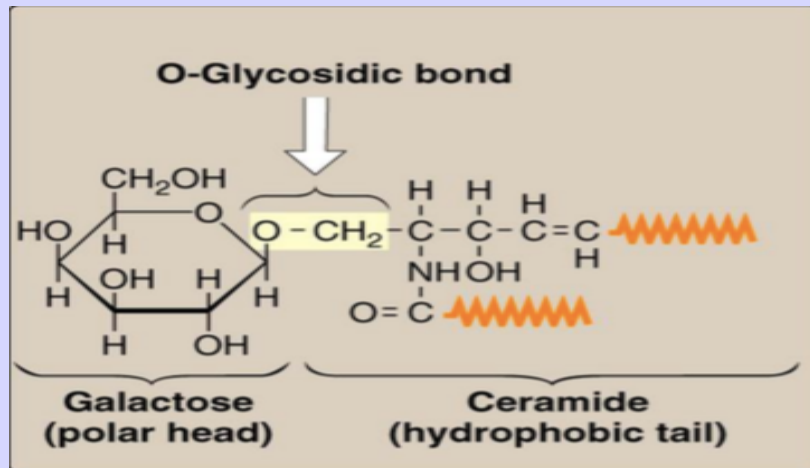
Sphingomyelin = Ceramide + Phosphorylcholine



Long Chain Fatty acid

Cerebrosides = Ceramide + Monosaccharides

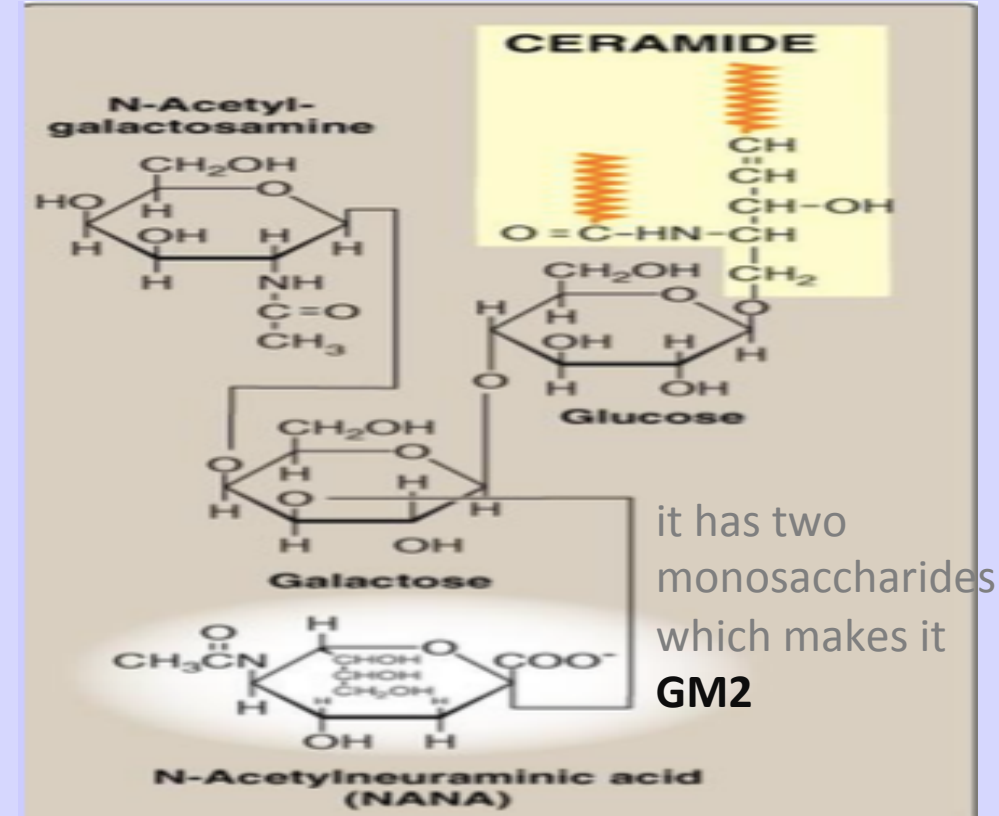
From the word cerebro we know how abundant this substance is –in the CNS-.



Gangliosides = Ceramide oligosaccharides + NANA

Gangliosides : each segment added has a specific function

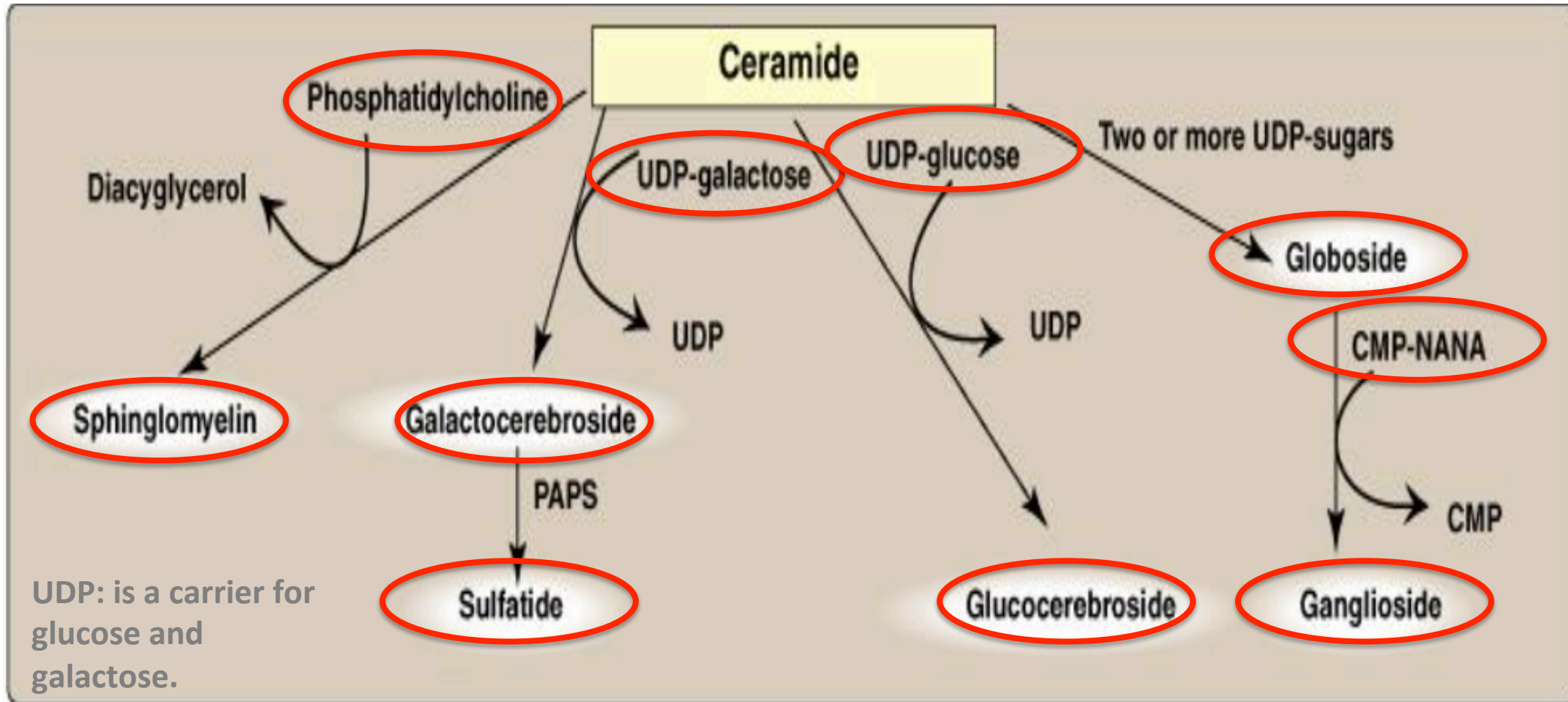
Oligosaccharides: saccharide polymer containing a small number (typically three to nine) of simple sugars (monosaccharides).



We don't have to memorize the structures.

Sphingolipids' Synthesis

Ceramide added to it phosphatidylcholine >
And then removal of diacylglycerol
will form: sphingomyelin.
And so on for the others.



Myelin Structure

- Myelin is a specialized cell membrane that ensheathes an axon to form a myelinated nerve fiber
- Myelin is produced by:
- Schwann cells: Peripheral nerves Oligodendrocytes: CNS
- Myelin composition:
Lipids (80%): Main component: Cerebrosides
- Other component: Sphingomyelin Proteins (20%): e.g., Myelin basic protein
- Fatty acid of Sphingomyelin: Myelin sheath:
- Very long chain fatty acids:
- **Lignoceric 24:0 saturated**
- **Nervonic 24:1 unsaturated**

0: stands for the number of double bond, it equals 0 so it's saturated
1 means that it is unsaturated

Function:

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

**Multiple sclerosis:
Neuro-degenerative, auto-immune disease Breakdown of myelin sheath (demyelination) Defective transmission of nerve impulses

Sphingolipidosis

Synthesis (Normal); Degradation (Defective)

- Substrate accumulates in organs
- Progressive, early death
- Phenotypic and genotypic variability
- Autosomal recessive (mostly)
- Rare, Except in Ashkenazi Jewish

Diagnosis:

- Measure enzyme activity
Cultured fibroblasts or peripheral leukocytes Cultured amniocytes (prenatal)
- Histologic examination
- DNA analysis

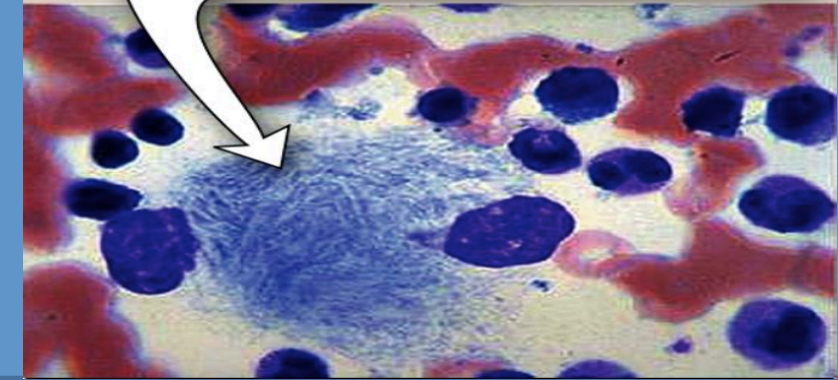
Treatment:

- Replacement Therapy:
Recombinant human enzyme
- Bone marrow transplantation:
Gaucher disease

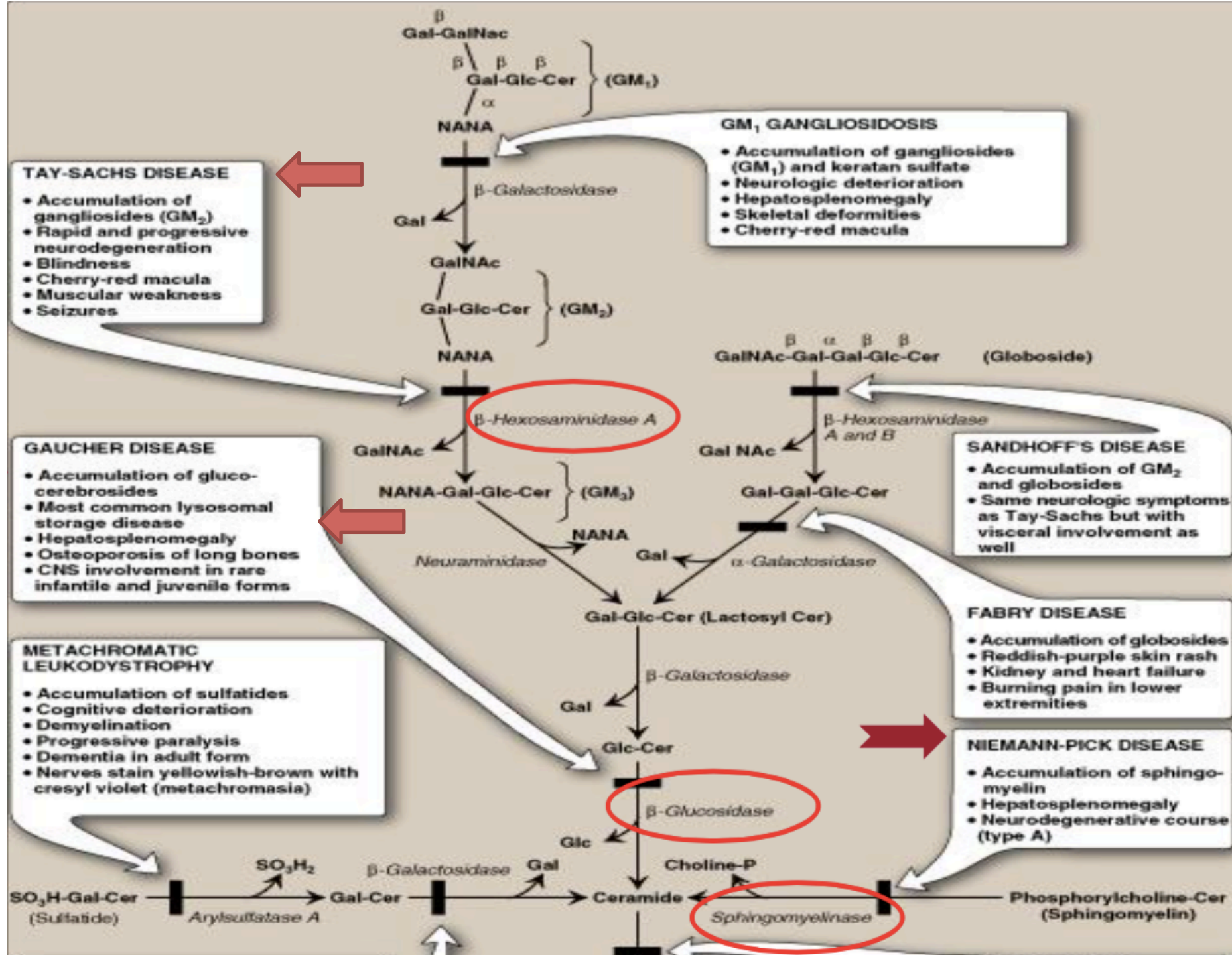
Cultured fibroblasts or peripheral leukocytes or any cell has a nucleus. Remember we can't use RBC

Gaucher Disease

The "crumpled tissue paper" appearance of the cytoplasm of Gaucher cells is caused by enlarged, elongated lysosomes filled with glucocerebroside.



The defect here is in the enzyme responsible for degradation substances so the neurons become filled with unwanted substances
Mostly autosomal recessive ((focus in families carrying this disease))



TAY-SACHS DISEASE:

- accumulation of gangliosides (GM2)
- rapid and progressive neurodegeneration.
- blindness.
- cherry-red macula.
- muscular weakness.
- seizures.

NIEMANN-PICK DISEASE:

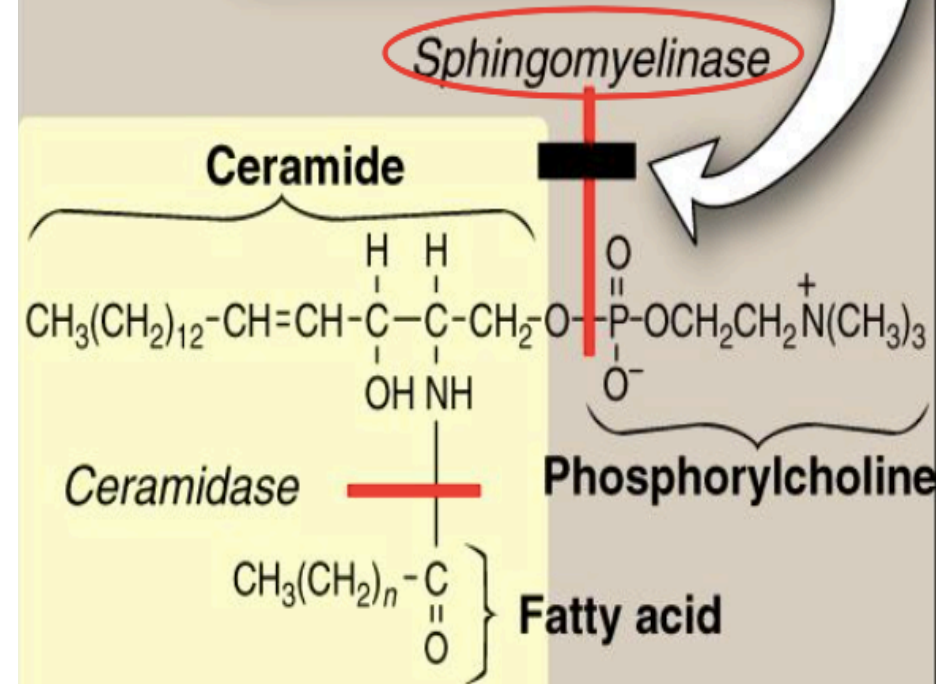
- accumulation of sphingomyelin.
- hepatosplenomegaly.
- neurodegenerative course (type A).
- Death in early childhood.

GAUCHER DISEASE:

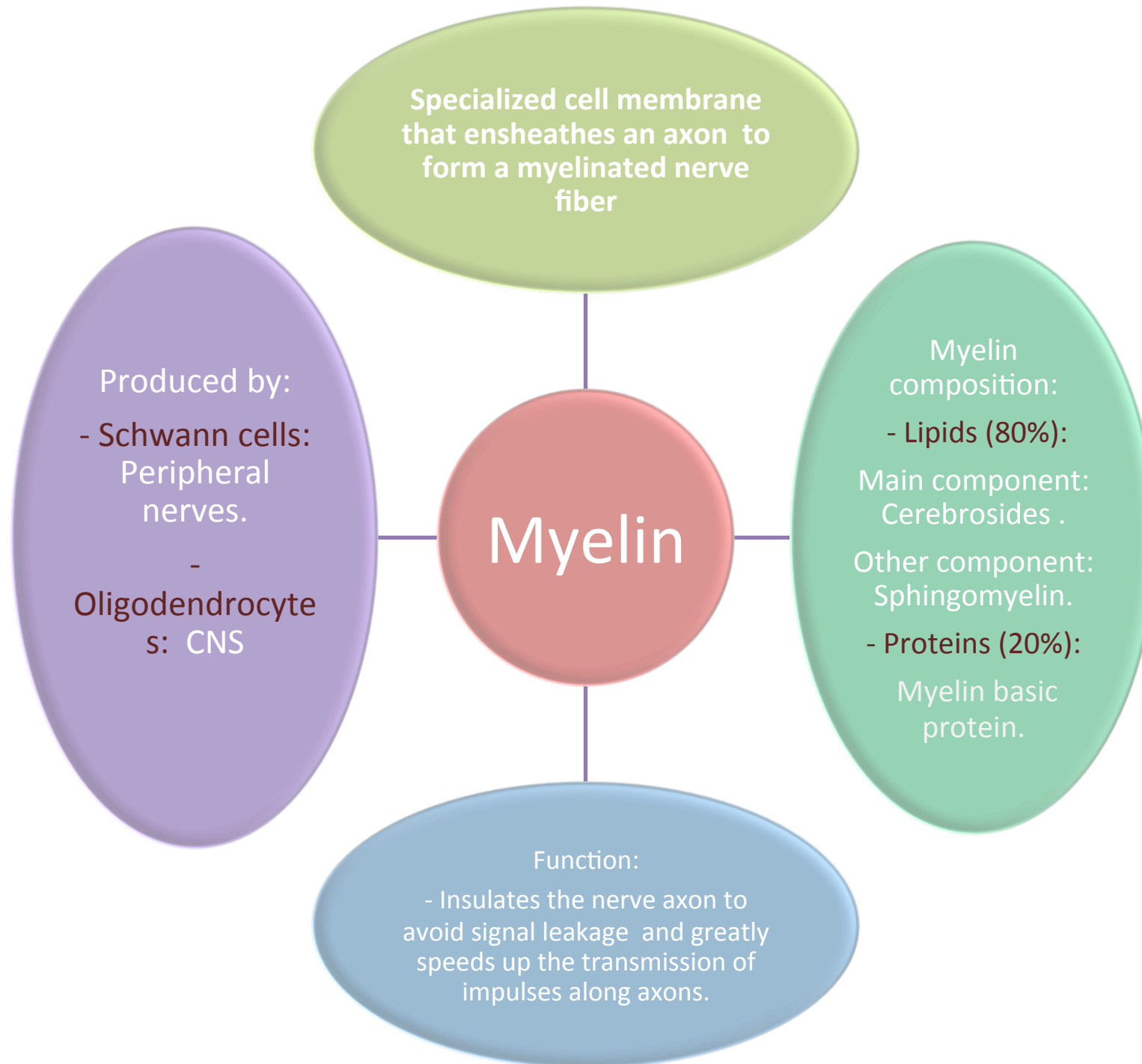
- accumulation of glucocerebrosides.
- most common lysosomal storage disease.
- hepatosplenomegaly.
- osteoprosis of long bones.
- CNS involvement in rare infantile and juvenile form.

NIEMANN-PICK DISEASE

- *Sphingomyelinase* deficiency
- Enlarged liver and spleen filled with lipid
- Severe mental retardation and neurodegeneration
- Death in early childhood



Summary



Summary

TAY-SACHS Disease:

- β -Hexosaminidase A deficiency.
- Accumulation of gangliosides (GM2).
 - Rapid and progressive neurodegeneration.
- Blindness, cherry-red macula, muscular weakness, seizures.

Sphingolipidosis

(genetic disease due to defective degradation of sphingolipids).

GAUCHER Disease:

- β -Glucosidase deficiency.
- Accumulation of Glucocerebrosides.
- Most common lysosomal storage disease.
 - Hepatosplenomegaly.
- Osteoporosis of long bones.

NIEMANN-PICK Disease:

- Sphingomyelinase deficiency.
- Accumulation of sphingo-myelin.
 - Hepatosplenomegaly.
 - Severe mental retardation & neurodegeneration.
- Death in early childhood.

MCQs

1) Patient with sphingomyelinase enzyme deficiency is most likely to develop

- A- Gaucher disease
- B- Farber disease
- C- Tay-Sachs disease
- D- Niemann-pick disease

2) the main component of the myelin is :

- A- Cerebrosides
- B- Galactocerebroside
- C-Sphingomyelin
- D- Gangliosides

3) A 10-month-old male is brought to the pediatrician by his mother who is concerned about his lack of interaction. He was previously playful and happy but now hardly ever smiles. On exam, he is found to have poor muscle tone and a cherry-red macula. Deficiency of which enzyme is most likely?

- A- Beta-Hexosaminidase A
- B- Beta-Glucosidase
- C- Sphingomyelinase

4) The precursor of all sphingolipids is:

- A- Phosphorycholine
- B- Ceramide
- C- Phospholipids
- D- Sphingosine

5) Which ONE of the following will attach to ceramide in order to form Gangliosides?

- A- Monosaccharides
- B- Oligosaccharides+NANA
- C- Phosphorycholine

6) Which ONE of the following is NOT a diagnostic procedure for Sphingolipidosis:

- A- Histologic examination
- B- Measurement of enzyme activity
- C- PCR
- D- DNA analysis

1- D
2- A
3- A
4- B
5- B
6- C

**Biochemistry
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https://www.youtube.com/watch?v=7h0lkds_d5E&feature=youtu.be

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