

# Glucose Homeostasis

Editing File

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# Objectives



Define glucose homeostasis and the metabolic processes involved



Differentiate between different phases of glucose homeostasis



Discuss the primary sources of energy and major organs utilizing glucose during the five phases of homeostasis



Understand the role of hormones in maintaining glucose homeostasis

# Overview



Introduction



Sources of glucose

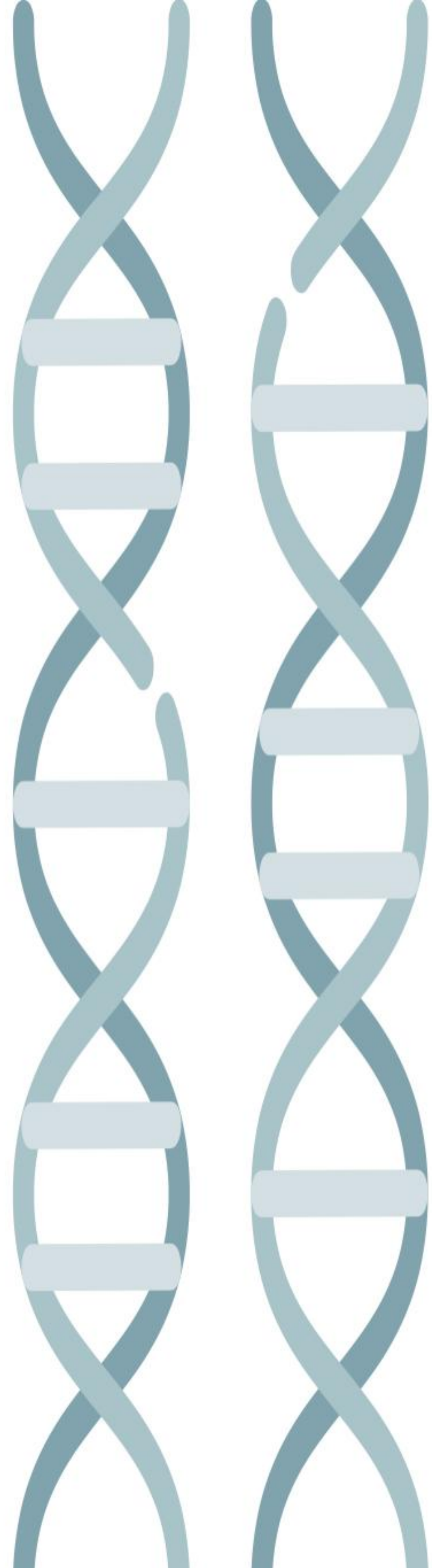


Phases of glucose homeostasis



Hormones in glucose homeostasis (actions, role in CHO metabolism):

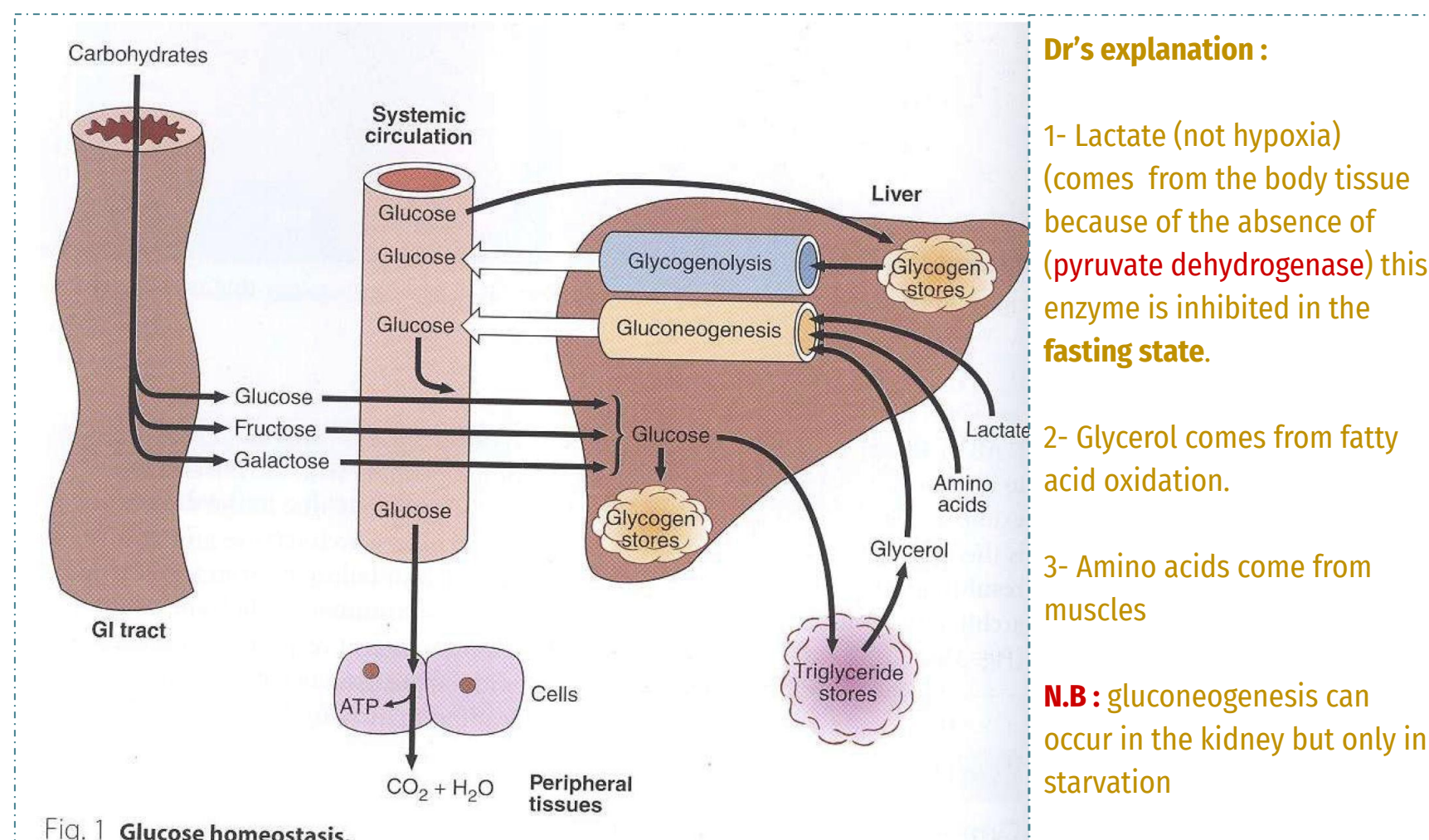
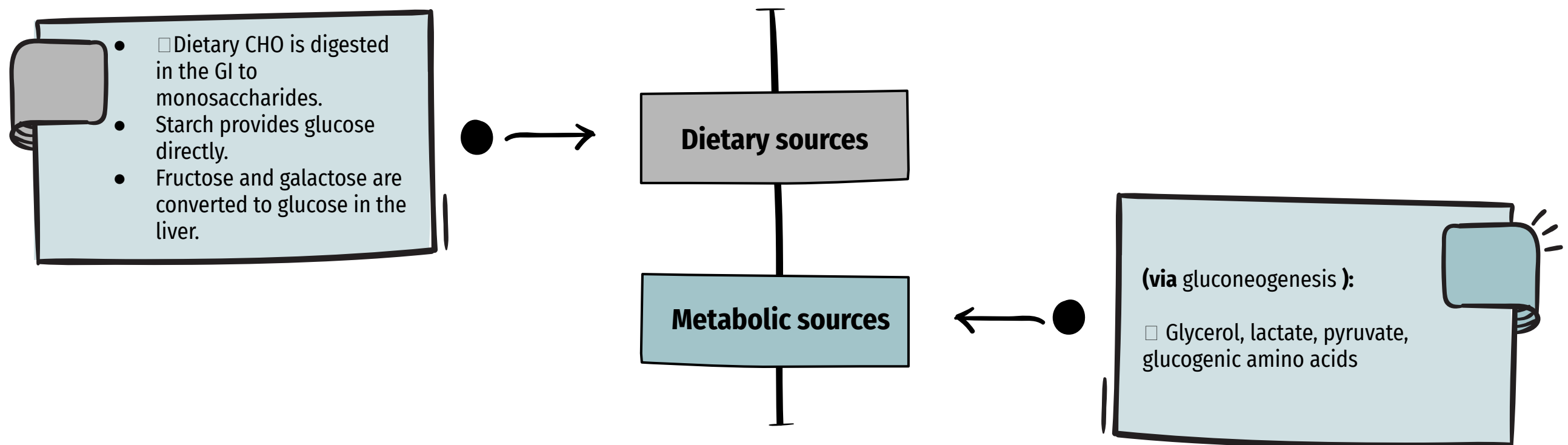
- Insulin
- Glucagon
- Cortisol
- Growth hormone
- Epinephrine



# Glucose homeostasis

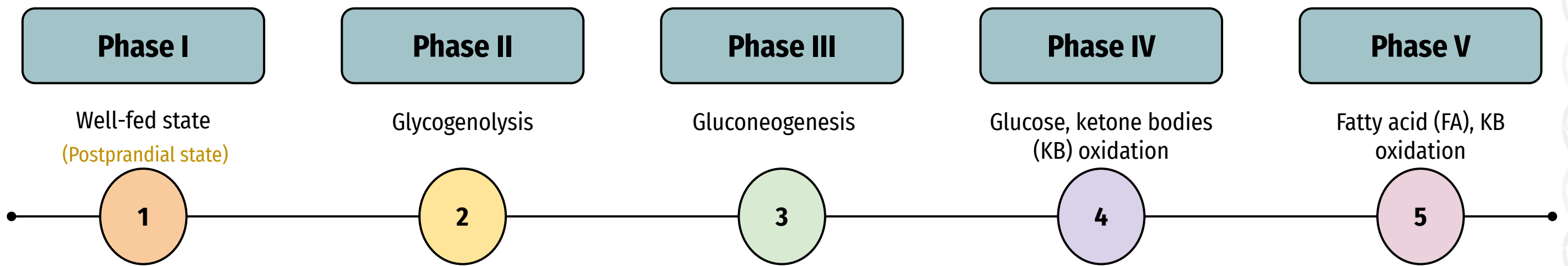
- **A process that :** Controls glucose metabolism **and** □ Maintains blood glucose level in the body
- Glucose is a major source of body's energy
- The liver plays a key role in maintaining blood glucose level
- Blood glucose level is tightly controlled because the brain constantly needs glucose
- Severe hypoglycemia can cause coma and death
- Chronic hyperglycemia results in glycation of proteins, endothelial dysfunction and diabetes.

# Sources of glucose



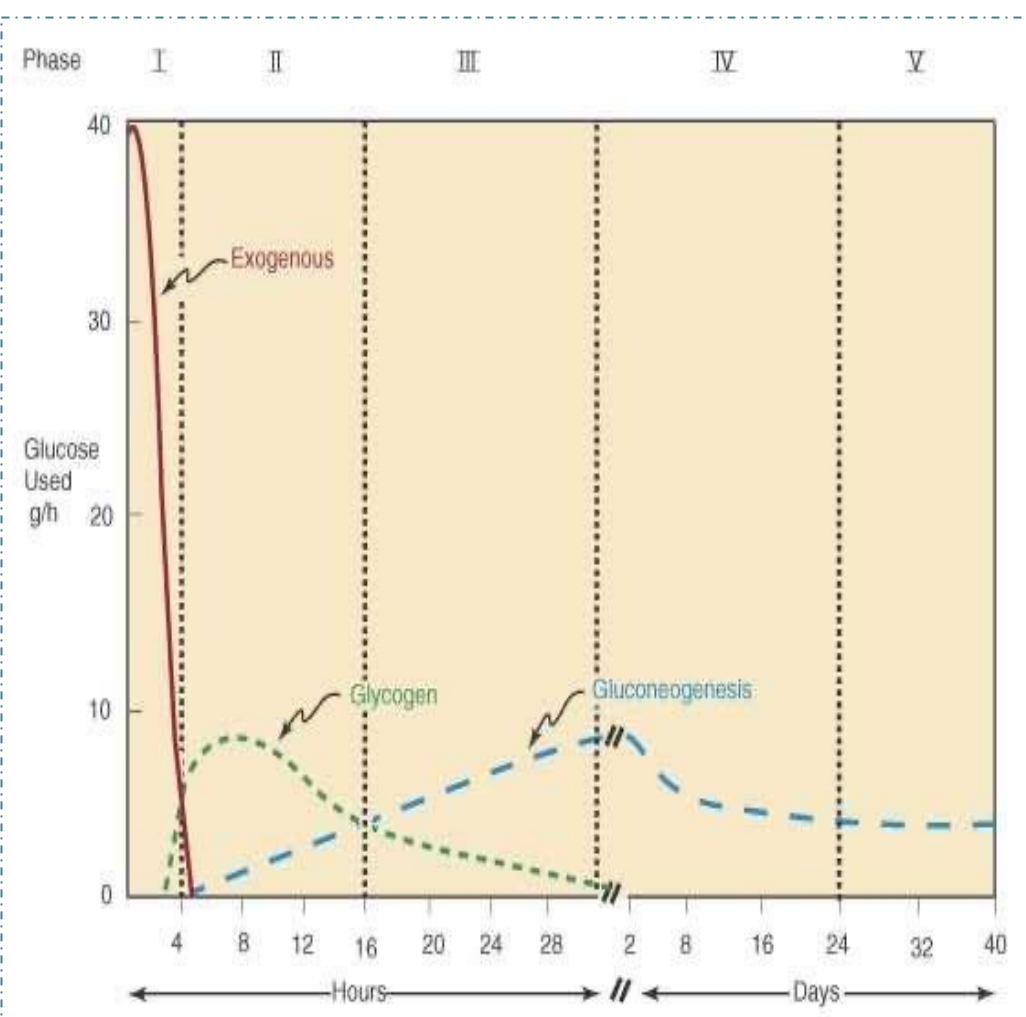
# Phases of glucose homeostasis

(Not separated phases they are overlapped)



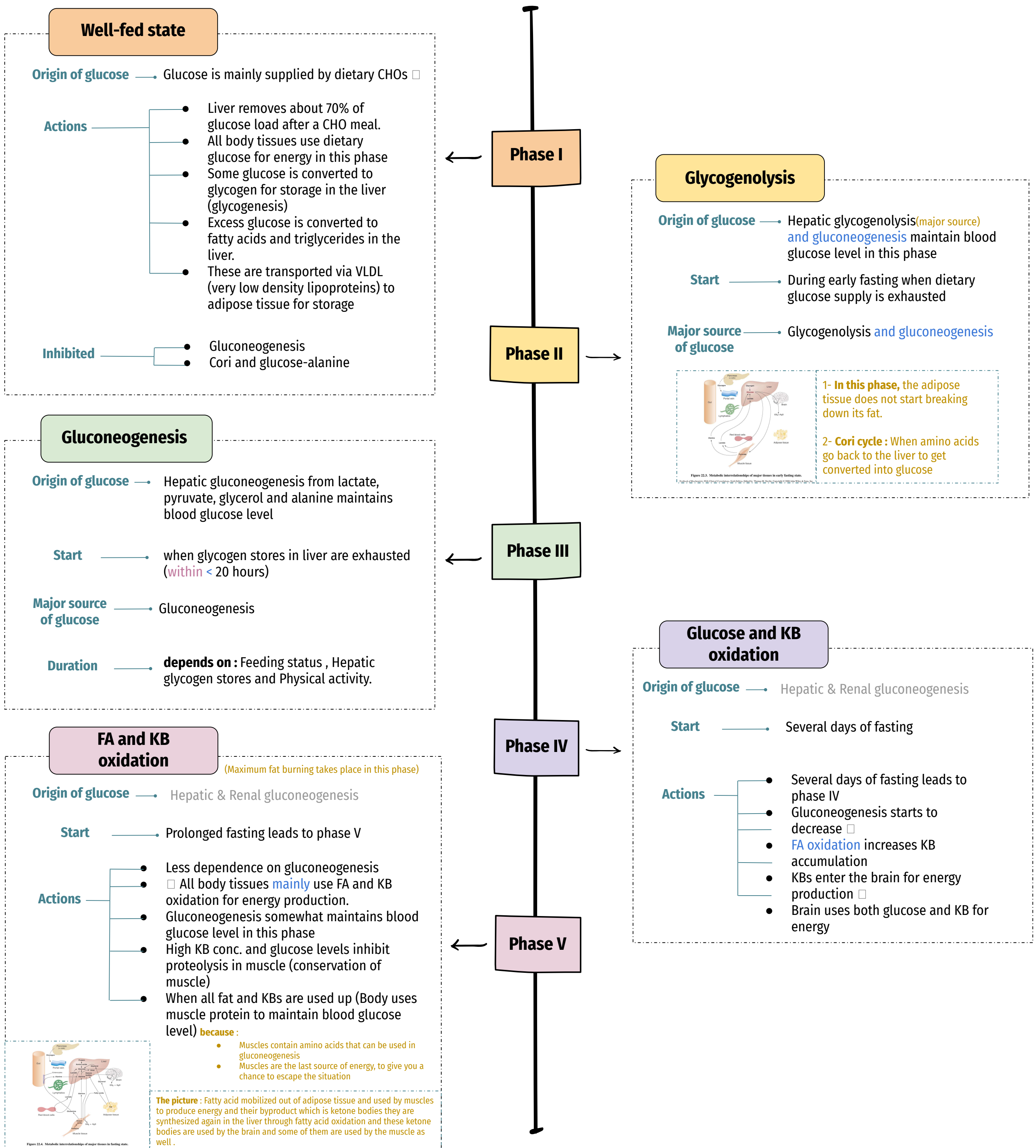
**Before you start keep that in your mind :**  
 1- What is providing glucose in the blood?  
 2- What are the different organs that used as a fuel?

Phase	Origin of blood glucose	Tissue using glucose	Major fuel of brain
<b>I</b>	Exogenous	All	Glucose
<b>II</b>	Glycogen(major source) , Hepatic gluconeogenesis	All except liver(Liver is the first organ that switch to fatty acid) , Muscle and adipose tissue at diminished rates	Glucose
<b>III</b>	Hepatic gluconeogenesis(major source) , Glycogen	All except liver , Muscle and adipose tissue at rates intermediate between II and IV	Glucose
<b>IV</b>	Gluconeogenesis, Hepatic and renal	Brain, RBCs, renal medulla, small amount by muscle	Glucose, ketone bodies
<b>V</b>	Gluconeogenesis, Hepatic and renal	Brain at a diminished rate, RBCs, renal medulla RBC and renal medulla cannot take ketone bodies	Ketone bodies(mainly), glucose



- Exogenous glucose comes from diet .
- (As we see the phases are overlapped, as glycogen decreases the gluconeogenesis increases).

# Phases of glucose homeostasis



# Hormones and glucose homeostasis

(Major hormones in glucose homeostasis are insulin and glucagon the remaining are minor)

## Hormones that regulate glucose metabolism:

**Insulin** (lowers blood glucose level)

**Glucagon**

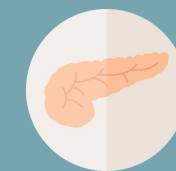
Cortisol

Growth hormone

Adrenaline

**Antagonize insulin action**

## Insulin



Plays a major role in glucose homeostasis

Synthesized by the  $\beta$ -cells of islets of Langerhans of pancreas

A small protein composed of two chains

Formed as prepro-insulin and converted to pro-insulin upon secretion\*

Rise in blood glucose level stimulates insulin secretion

Promotes entry of glucose into cells

## Insulin Actions



Inhibits **OFF**

Stimulate **ON**

Gluconeogenesis

Glucose uptake in muscles and adipose

Glycogenolysis

Glycolysis

Lipolysis

Glycogen synthesis

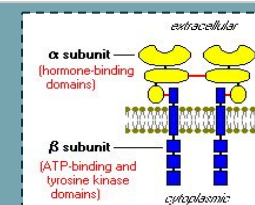
Ketogenesis

Protein synthesis

Proteolysis

Uptake of ion ( $K^+$  and  $PO_4^{3-}$ )

## Insulin's MOA



The insulin receptor is present on the plasma membrane of cell

Composed of:

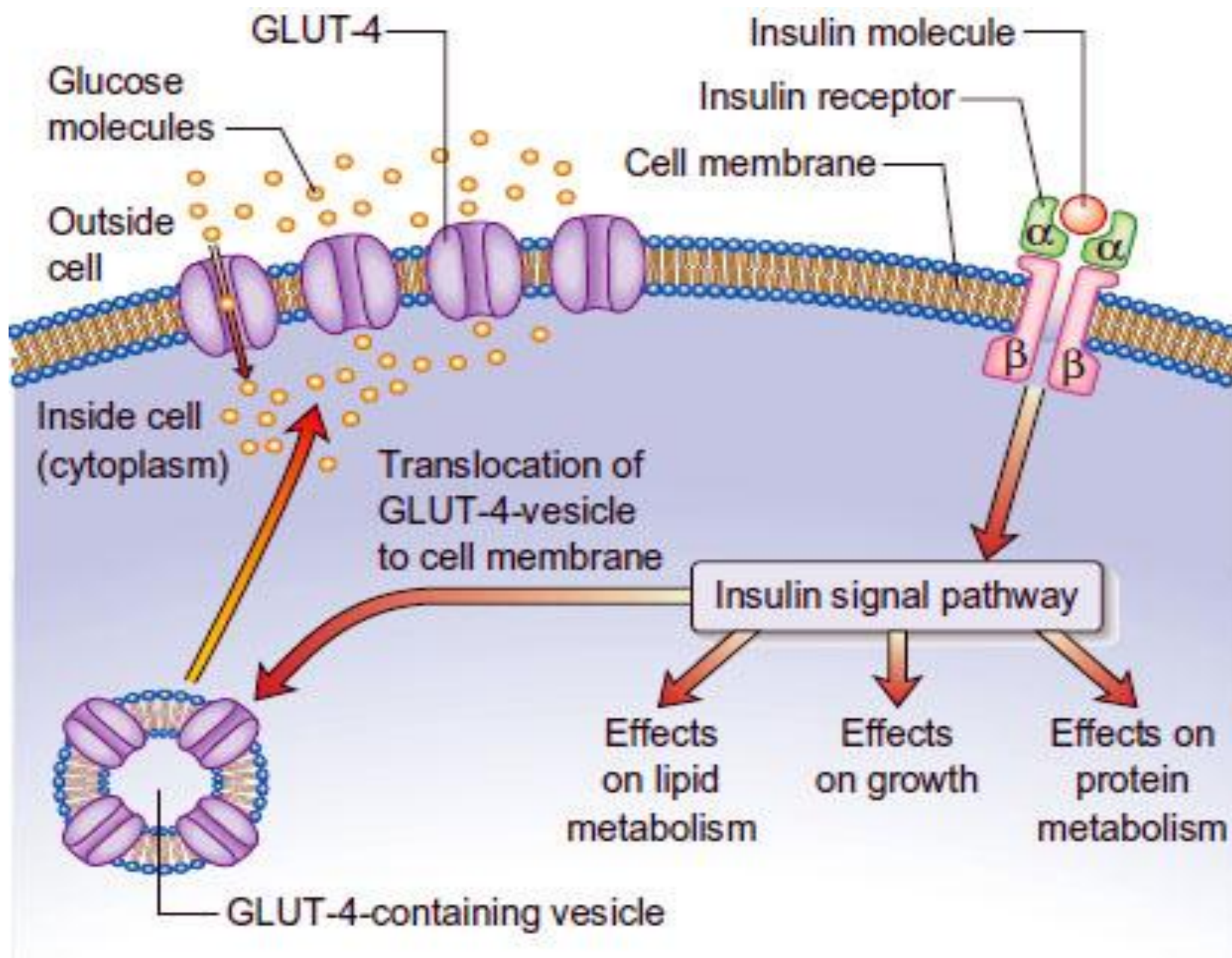
- 2 $\alpha$ -subunit (extracellular)
- 2 $\beta$ -subunit (cytoplasmic) (transmembrane)

Binding of insulin to  $\alpha$ -subunit causes phosphorylation of  $\beta$ -subunit

This activates the receptor

The activated receptor then phosphorylates intracellular proteins generating a biological response

# Insulin and CHO Metabolism



## Promotes glucose uptake into cell:

- 1 Glucose is diffused into cells through hexose transporters such as GLUT4
- 2 GLUT4 is present in cytoplasmic vesicles  
GLUT4 vesicles are channels which present inside the cell that promote entry of glucose into the Cell
- 3 Insulin binding to its receptor causes vesicles to diffuse into plasma membrane
- 4 GLUT4 is inserted into the membrane
- 5 Allowing glucose transport into the cell
- 6 Brain and liver have non insulin dependent glucose transporter

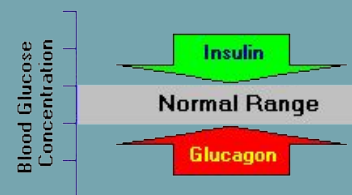


## Insulin's MOA in decreasing blood glucose levels:

- 1 Stimulates glycogen synthesis
- 2 Decreases blood glucose levels
- 3 Increases glycolysis
- 4 Stimulates protein synthesis
- 5 Insulin deficiency causes diabetes mellitus
- 6 Hyperinsulinemia is due to insulin resistance in:
  - Diabetes mellitus
  - Metabolic syndromeInsulin resistance= receptor defect or action defect

# Hormones that antagonize insulin actions

## Glucagon



A peptide hormone secreted by  $\alpha$ -cells of pancreatic islets

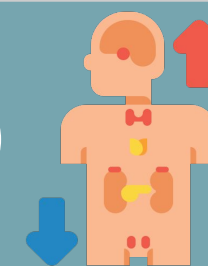
Secreted in response to hypoglycemia

Increases glucose levels

Stimulates glycogenolysis

Activates hepatic gluconeogenesis

## Glucocorticoids (Cortisol)



Cortisol is a steroid hormone secreted by adrenal gland

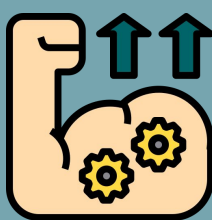
Contributes to glucose homeostasis

Maintains normal glucose levels in fasting by:

- Stimulates gluconeogenesis in the liver
- Mobilizes amino acids for gluconeogenesis
- Inhibits glucose uptake by cells\*

Stimulates fat breakdown in adipose tissue

## Growth hormone

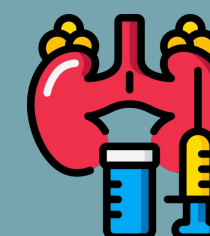


A protein hormone secreted by anterior pituitary gland

Maintains blood glucose levels by:

- Inhibiting insulin action
- Stimulating gluconeogenesis in the liver

## Epinephrine




A catecholamine hormone secreted by adrenal gland

Stimulates lipolysis in adipose tissue when glucose blood levels fall

Promotes glycogenolysis in skeletal muscle



# Extra Summary

<b>Glucose</b>	Sources of glucose	<ul style="list-style-type: none"> <li>• Dietary sources : CHO ( starch , fructose and galactose )</li> <li>• Metabolic sources : Glycerol, lactate, pyruvate, glucogenic amino acids ( <b>via</b> gluconeogenesis )</li> </ul>
	Glucose homeostasis	<ul style="list-style-type: none"> <li>• <b>A process that</b> : Controls glucose metabolism <b>and</b> <input type="checkbox"/> Maintains blood glucose level in the body</li> <li>• The liver plays a key role in maintaining blood glucose level</li> <li>• Blood glucose level is tightly controlled because the brain constantly needs glucose</li> <li>• Severe hypoglycemia can cause coma and death</li> <li>• Chronic hyperglycemia results in glycation of proteins, endothelial dysfunction and diabetes.</li> </ul>
	Phases of glucose homeostasis	<p><b>Phase I</b> (Well-fed state)</p> <p><b>Phase II</b> (Glycogenolysis)</p> <p><b>Phase III</b> (Gluconeogenesis)</p> <p><b>Phase IV</b> (Glucose and KB oxidation)</p> <p><b>Phase V</b> (FA and KB oxidation)</p>
	Hormones that regulate glucose homeostasis	<ul style="list-style-type: none"> <li>• Insulin</li> <li>• Glucagon</li> <li>• Cortisol</li> <li>• Growth hormone</li> <li>• Epinephrine</li> </ul>
<b>Insulin</b>	Overview	<ul style="list-style-type: none"> <li>• Plays a major role in glucose homeostasis</li> <li>• Synthesized by the <math>\beta</math>-cells of islets of Langerhans of pancreas</li> </ul>
	Actions	<p><b>Stimulate</b> </p> <p>Glucose uptake in muscle and adipose tissue, glycolysis, glycogen synthesis, protein synthesis and uptake of ions</p>
		<p><b>Inhibit</b> </p> <p>Gluconeogenesis, glycogenolysis, lipolysis, ketogenesis, proteolysis</p>
MOA	Binding of insulin to $\alpha$ -subunit causes phosphorylation of $\beta$ -subunit $\rightarrow$ activates the receptor $\rightarrow$ the activated receptor then phosphorylates intracellular proteins generating a biological response	
<b>Glucagon</b>	Overview	A peptide hormone secreted by $\alpha$ -cells of pancreatic islets
	Secretion	Secreted in response to hypoglycemia
	Actions	<p>Increases glucose levels</p> <p>Activates glycogenolysis</p> <p>Activates hepatic gluconeogenesis</p>
<b>Cortisol</b>	Overview	Cortisol is a steroid hormone secreted by adrenal gland contributes to glucose homeostasis
	Actions	<p>- Maintains normal glucose levels in fasting by:</p> <ul style="list-style-type: none"> <li>• Stimulates gluconeogenesis in the liver</li> <li>• Mobilizes amino acids for gluconeogenesis</li> <li>• Inhibits glucose uptake by cells*</li> </ul> <p>- Stimulates fat breakdown in adipose tissue</p>
<b>Growth hormone</b>	Overview	A protein hormone secreted by anterior pituitary gland
	Actions	<p>Maintains blood glucose levels by:</p> <ul style="list-style-type: none"> <li>• Inhibiting insulin action</li> <li>• Stimulating gluconeogenesis in the liver</li> </ul>
<b>Epinephrine</b>	Overview	A catecholamine secreted by adrenal glands
	Actions	<ul style="list-style-type: none"> <li>• Stimulates lipolysis in adipose tissue when glucose blood levels fall</li> <li>• Promotes glycogenolysis in skeletal muscle</li> </ul>

# Take Home Messages



Glucose homeostasis is a process that controls glucose metabolism and maintains blood glucose level in the body



There are five phases of glucose homeostasis - Phase I (well-fed state), Phase II (glycogenolysis), Phase III (gluconeogenesis), Phase IV (glucose, ketone bodies (KB) oxidation), Phase V (fatty acid (FA), KB oxidation)



Hormones that regulate glucose metabolism include insulin (lowers glucose level) and glucagon (increases glucose level)



Other hormones such as cortisol, growth hormone and adrenaline are known to antagonize the actions of insulin thus increases the blood glucose level





## MCQs

**1- Which structure plays a key role in maintaining blood glucose level?**

A-Kidney

B-Intestines

C-Liver

D-Brain

**2- Which process is inhibited during Phase I ?**

A-Glycogenolysis

B-Gluconeogenesis

C- KB oxidation

D-proteolysis

**3-When Does Phase III takes place?**

A-glycogen stores in liver are exhausted

B- Dietary glucose supply is exhausted

C-Prolonged fasting

D-Early Fasting

**4- Which one of the following does the insulin Inhibits?**

A- Glycolysis

B- Glycogenolysis

C- Glycogen synthesis

D- Protein synthesis

**5- A peptide hormone secreted by  $\alpha$ -cells of pancreatic islets:**

A- Cortisol

B- Epinephrine

C- Glucagon

D- Growth hormone

**6- What is the organ that has non insulin dependent glucose transporter?**

A- Brain

B- Liver

C- Kidney

D- A&B

Answers key

1-C

2-B

3-A

4-B

5-C

6-D



# SAQs

## 1- What are the complications of chronic hyperglycemia ?

glycation of proteins, endothelial dysfunction and diabetes

## 2- What are the sources of Glucose?

-**Dietary sources:** Dietary CHO is digested in the GI to monosaccharides □, Starch provides glucose directly □  
Fructose and galactose are converted to glucose in the liver

-**Metabolic sources:** (via gluconeogenesis): Glycerol, lactate, pyruvate, glucogenic amino acids

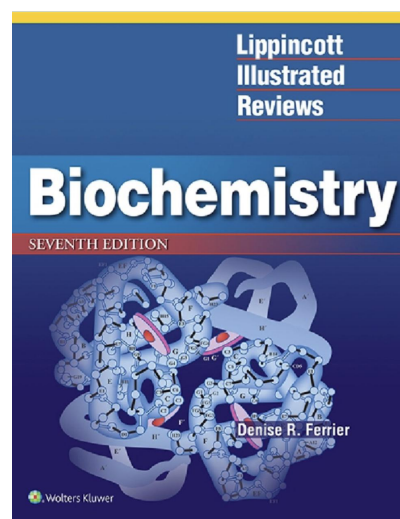
## 3- How does Glucagon contribute in maintaining blood glucose?

Stimulates glycogenolysis, Activates hepatic gluconeogenesis.

## Resources



Click on the book to download the resource

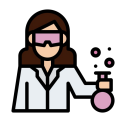




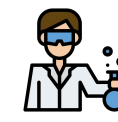
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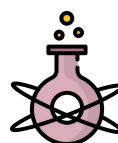


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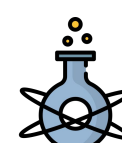


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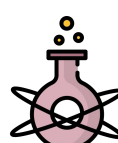
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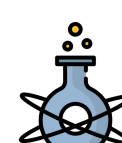
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Special thanks to Fahad AlAjmi for designing our team's logo.