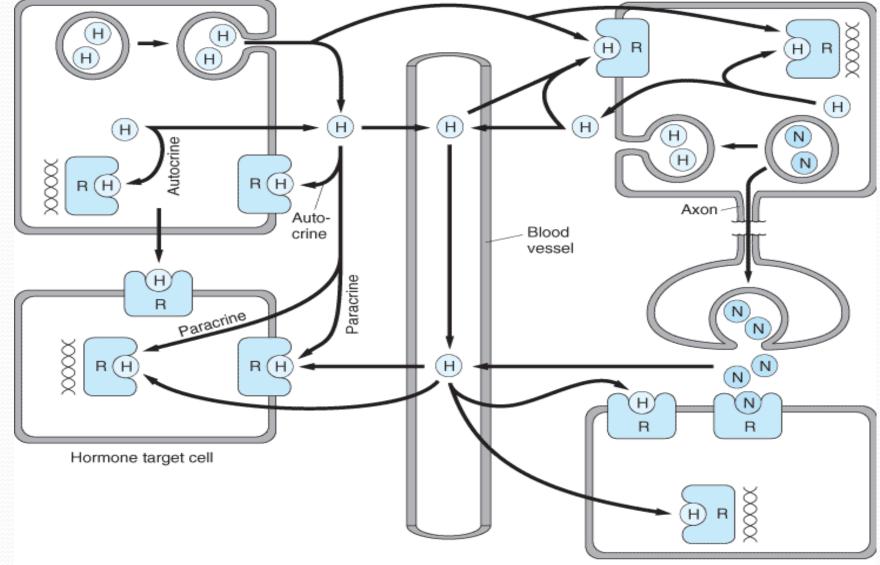
#### Action of hormones and neurotransmitters

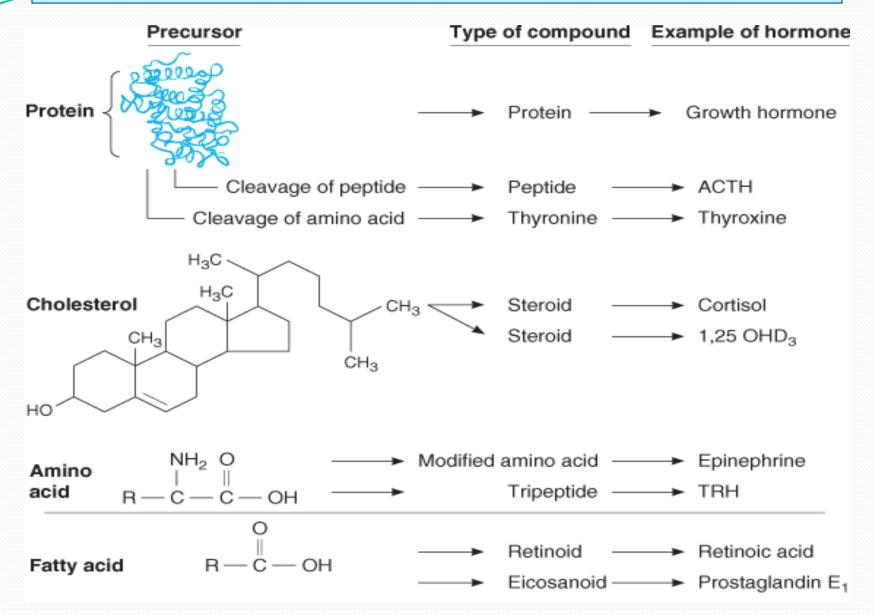


Neurotransmitter cell

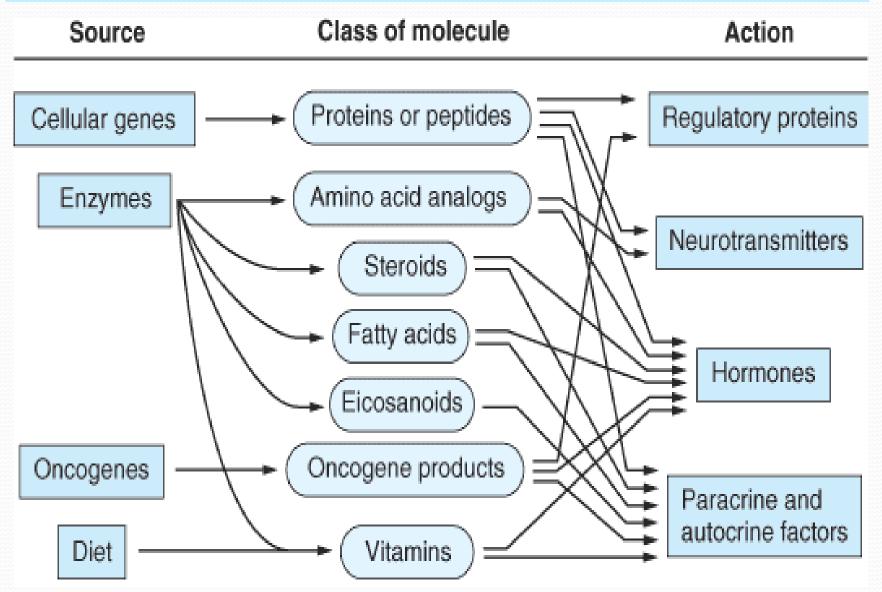


Neurotransmitter and hormone target cell

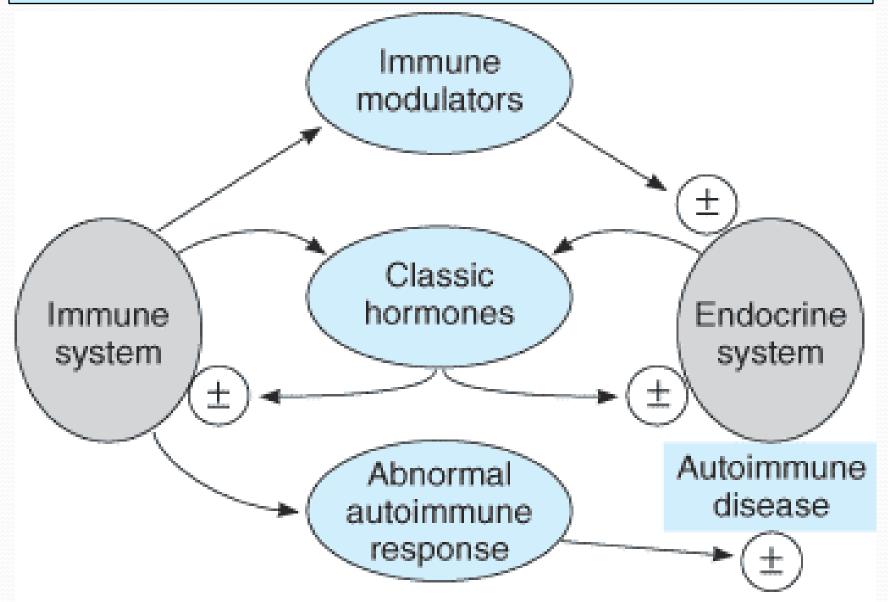
#### **Precursors of hormones**



#### Source, class, and actions of various molecules in the endocrine system



#### Endocrine and the immune system



## **Hormone Synthesis and Release**

Overview

- Compartmentation
  Hormones stored in vesicles: polypeptide hormones, neurotransmitters.
- Hormones not stored in vesicles: steroids, eicosanoids.

#### **Vesicle-Mediated Hormone Export**

#### Targeting and Translocation Across ER

Signal sequence (targeting):
Translocation
Modification

#### **Modulation of Hormone Levels (1)**

Hormone Synthesis

Regulation of Hormone Production
Transcription
Translation
Release

#### **Modulation of Hormone Levels (2)**

## Hormone Transport

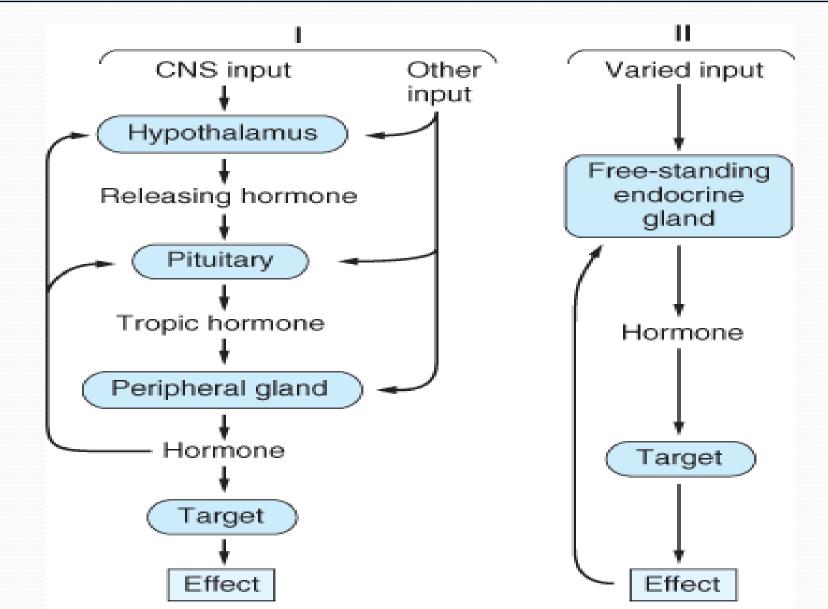
## In the circulation: free-bound (CBG, SHBG, TBG, TBG,...) Across the membrane.

#### **Modulation of Hormone Levels (3)**

#### Hormone Metabolism

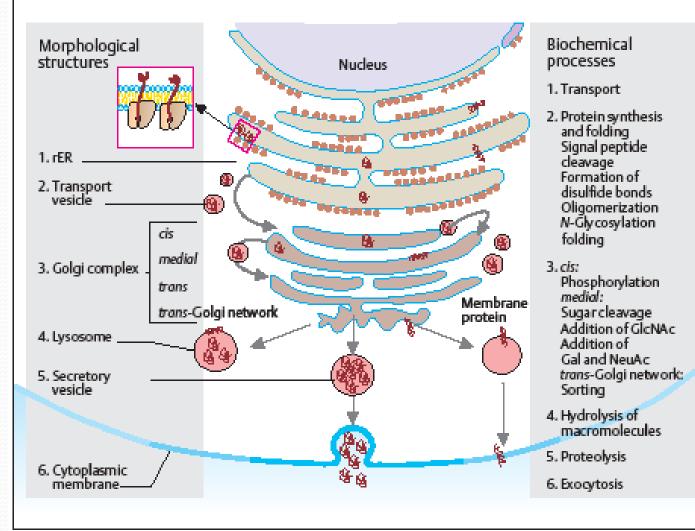
- Peptide hormones: glycosylation, internalization.
- Steroid, thyroid hormone, vit. D: conjugation, Activation (T4  $\rightarrow$  T3 ; T  $\rightarrow$  DHT)
- >Catecholamines and Eicosanoids.

#### **Control of endocrine gland function**

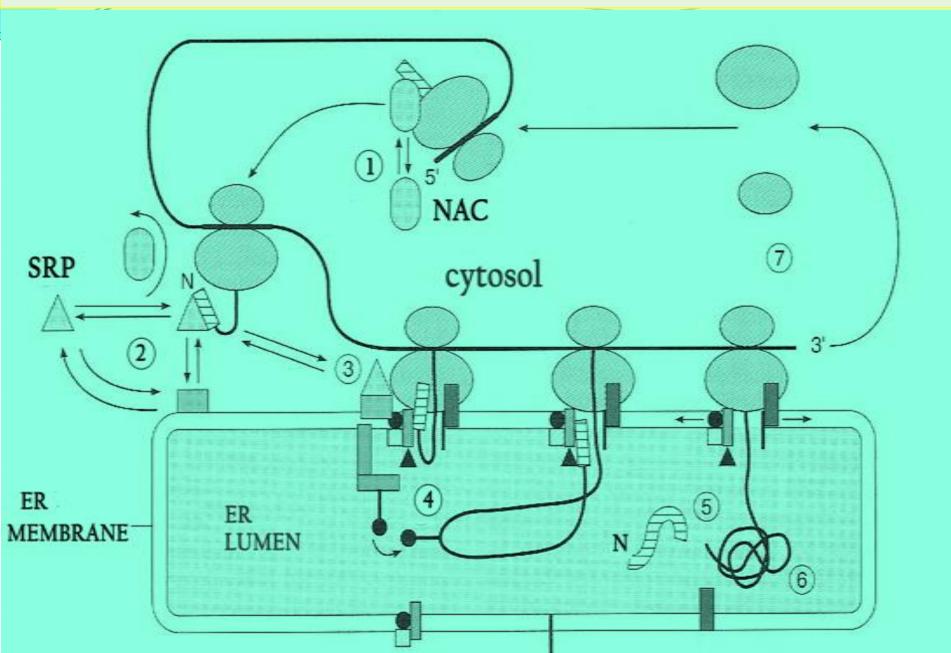


#### **Hormone synthesis**

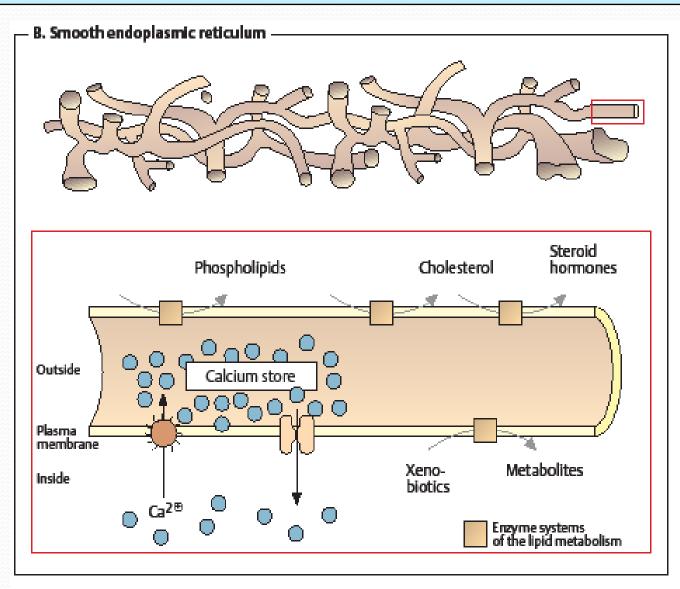
#### - A. Rough endoplasmic reticulum and Golgi apparatus



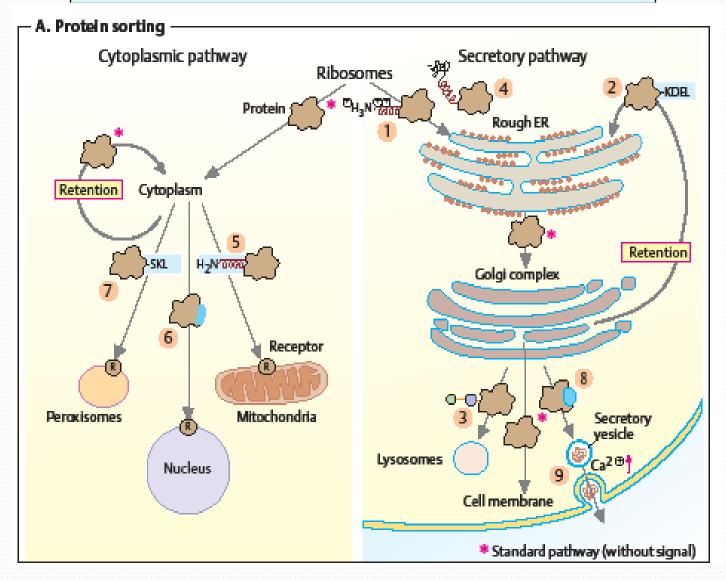
#### **Targeting and Translocation Across ER**



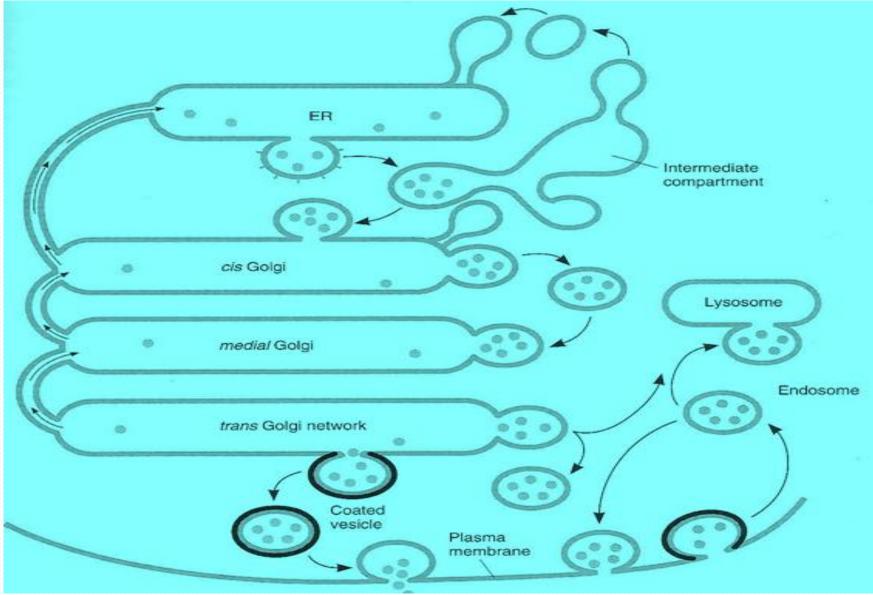
#### Hormone synthesis ...



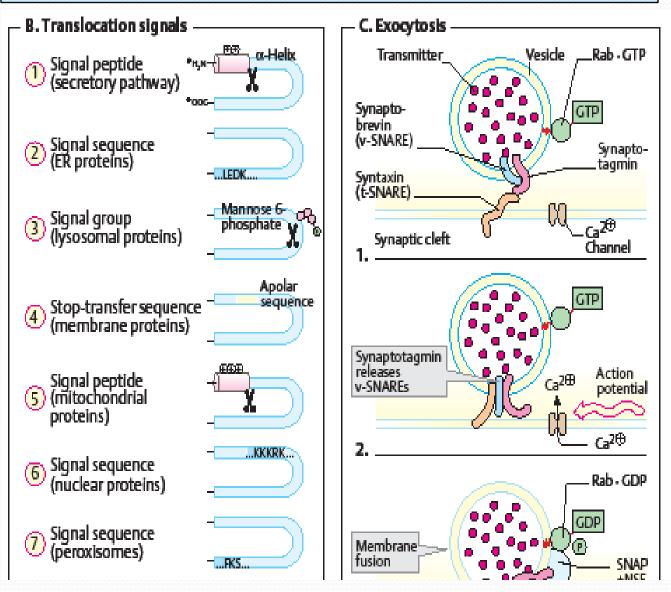
#### **Protein sorting**



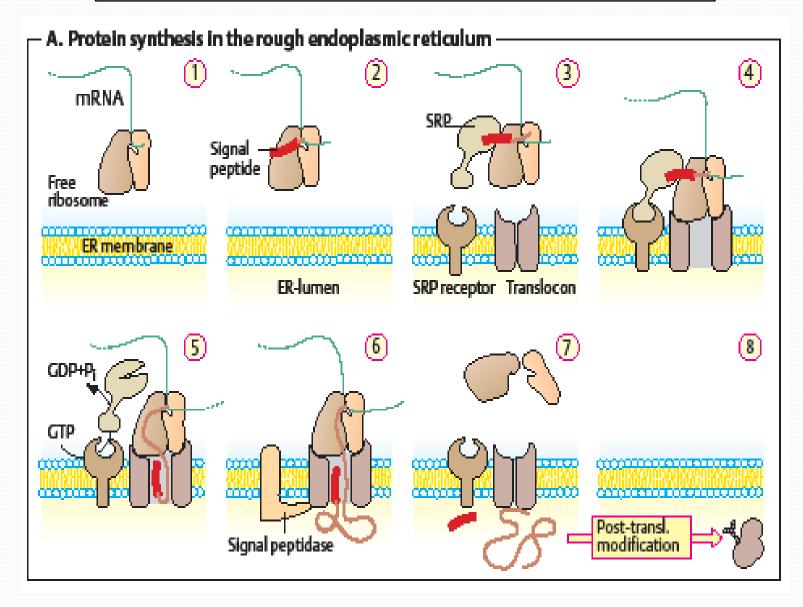
#### Vesicular Traffic: Exocytosis or Lysosomes



#### **Translocation signal**

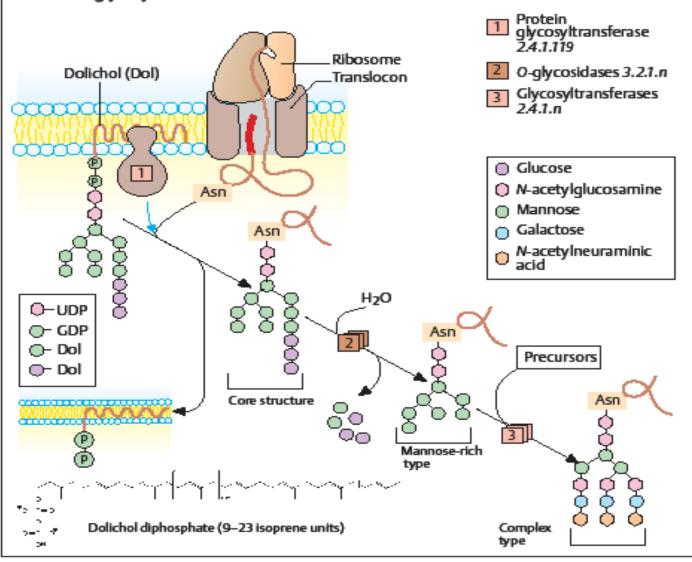


#### **Protein synthesis in RER**

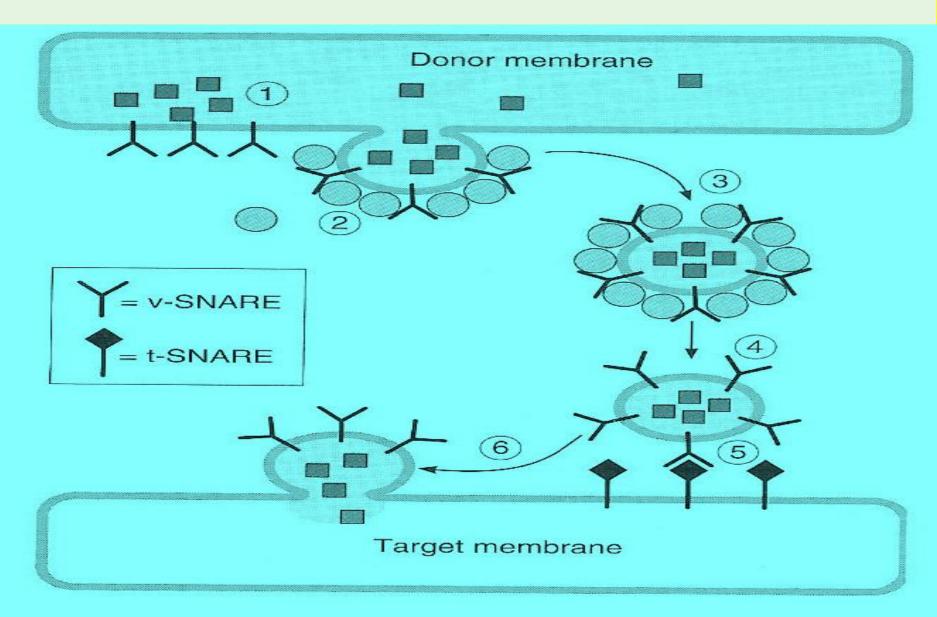


#### **Protein glycosylation**

B. Protein glycosylation



#### **Intracellular Vesicular Traffic**



## **Vesicle Sorting**

- **Regulated secretory pathway:** specific stimulation, SNARE.
- **Constitutive secretory pathway:** No stimulation.
- Content Segregation
- Lysosomal sorting: GlcNAc, signal patch.
- Endocytosis and Recycling: coated pits, dynamin

#### **Neurotransmitters and Thyroid Hormones**

#### •Secretion of Catecholamines

- **Regulated Secretory Pathway:** Ca<sup>++</sup>, vesicles
- Vesicles loaded with neurotransmitters and transports

#### •Secretion of Thyroid Hormones

 Vesicular and Nonvesicular trafficking Thyroglobulin Colloid Transcytosis

#### **Nonvesicular Hormone Transport**

## •Steroid Hormones

#### Synthesis

Adrenal – gonads – placenta - nervous system.

Cholesterol (de novo, acetate, stored, LDL).

LDL (Receptor-mediated endocytosis).

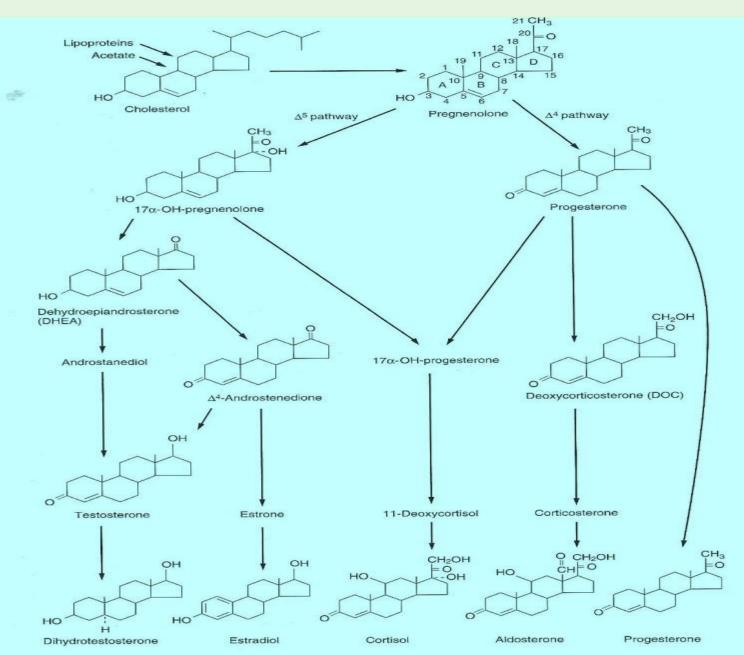
P<sub>450</sub>

## •Vitamin D

#### Transportations

Vitamin D transport protein, α-globulin

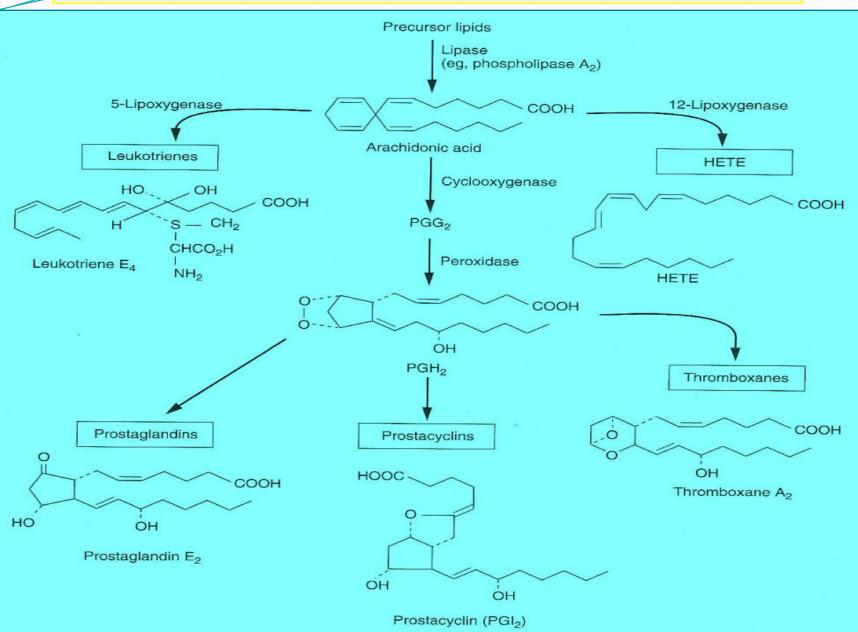
#### **Nonvesicular Hormone Transport: Steroids**



#### **Nonvesicular Hormone Transport**

# Eicosanoids Synthesis Arachidonic acid → PGs, prostacyclins, thromboxanes, HETE.

#### **Synthesis of Eicosanoids**



## **Membrane Traffic and Disease**

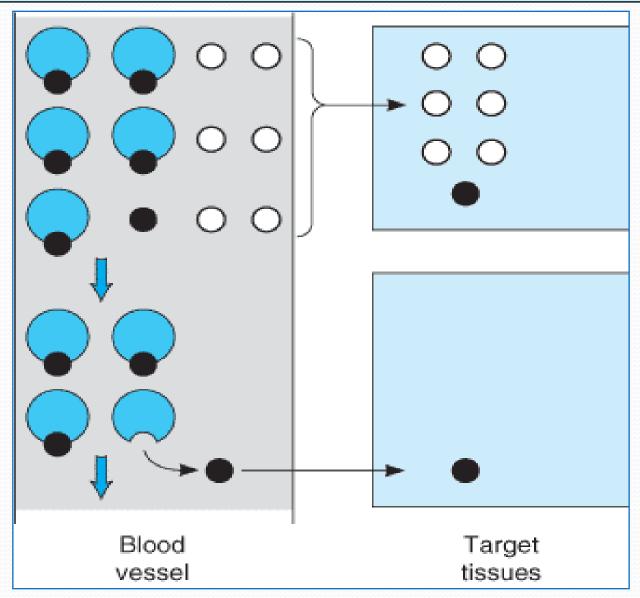
• Cystic Fibrosis

Mutations in membrane transporter  $ER \rightarrow PM$ 

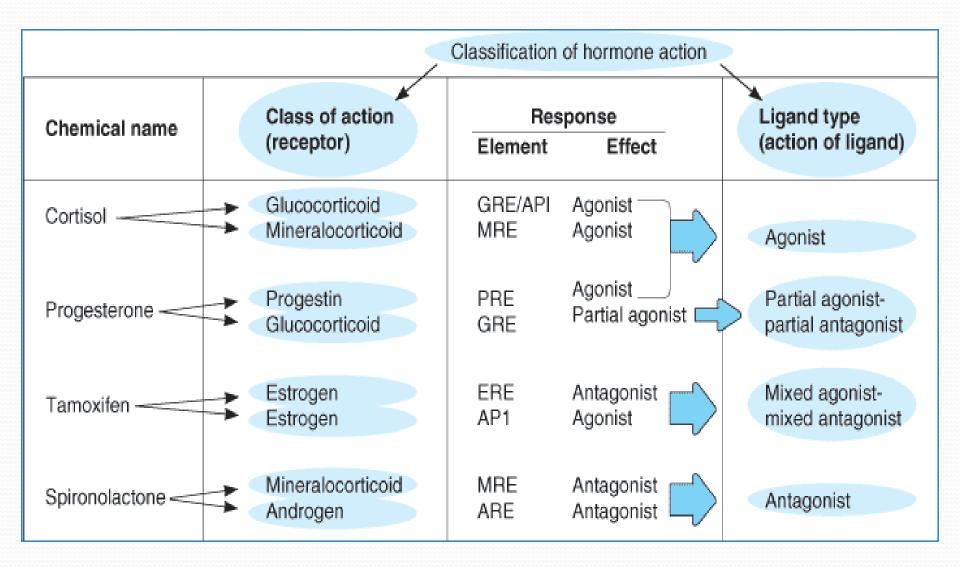
•*Emphysema* 

 $\alpha_1$  – anti protease deficiency

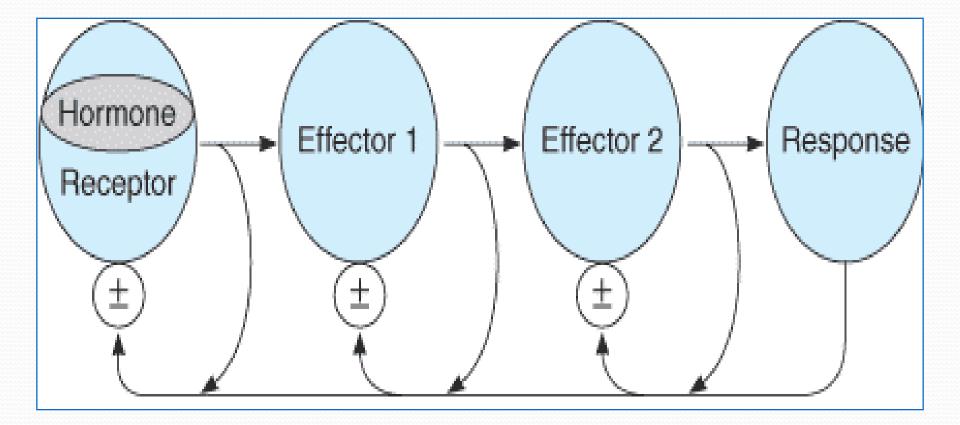
#### **Role of Binding proteins**



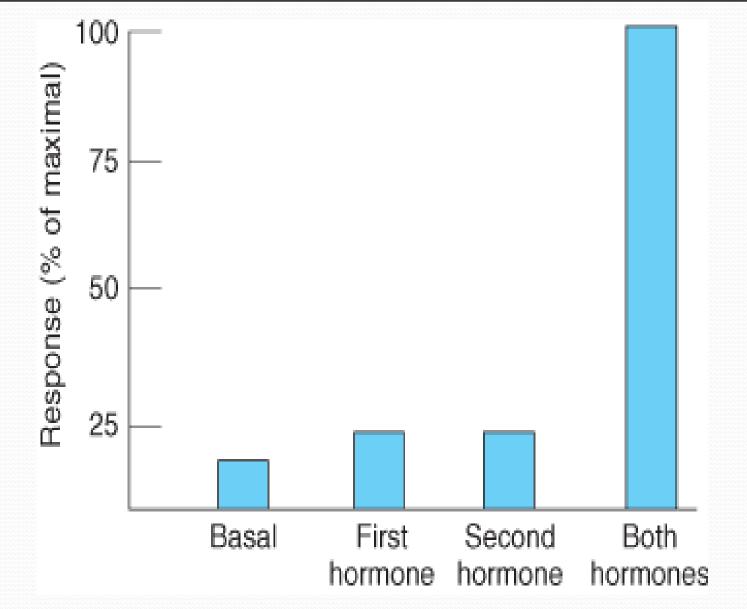
#### **Classification of hormone action**



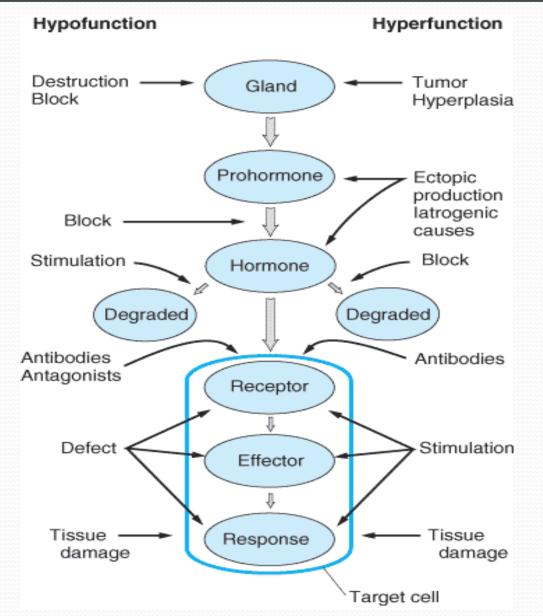
#### Regulation of hormone responsiveness: Feedback regulation



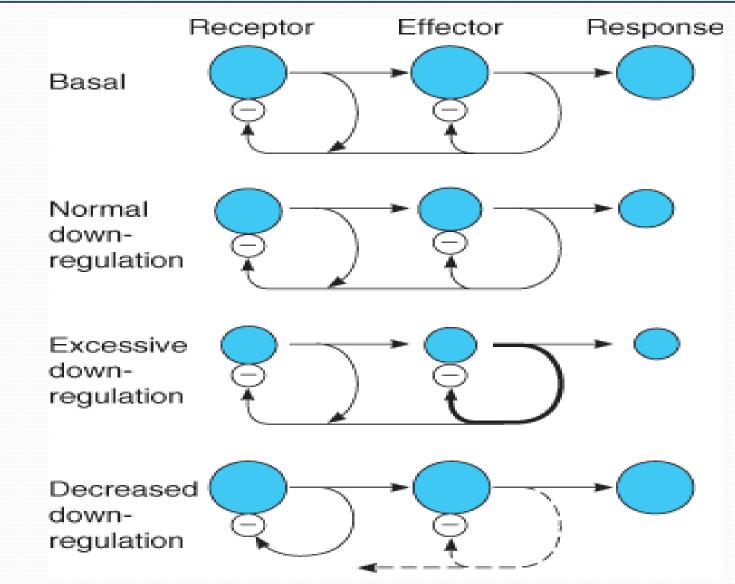
## Synergistic Hormone Response



#### **Hypofunction and hyperfunction**



#### Hypo- and hyperesponsiveness



#### **Actions of Hormones**

- Hormone Release
- Fetal Development
- Cell Growth and Cancer
- Intermediary Metabolism
- Mineral and water Metabolism
- Cardiovascular and Renal Function:
- Skeletal Function
- Reproductive Function
- Immune System
- Central Nervous System

#### **Disorders of the Endocrine System (1)**

## Hypofunction:

- Destruction of the Gland:
  - Autoimmune disease
- Extraglandular Disorders:
  - Renal disease:
- Defect in Hormone Biosynthesis:
  - Defects in genes
  - Dietary iodine deficiency

#### **Disorders of the Endocrine System (2)**

## Hyperfunction

- Tumors
- Ectopic tumors
- Hyperplasia
- Autoimmune Stimulation
- Hormone administration

#### Sensitivity

- Genetic defects
- Acquired Defects

#### **Approaches to Endocrine Patients (1)**

- Evidence-Based endocrinology
- History and Physical Examination
- Laboratory Studies
  - •Measurement of Hormone Levels: basal levels, precursor, metabolites.
  - Plasma and Urine Assays: Urine assays for steroids and catecholamine.
  - Free Hormone Levels: equilibrium dialysis, ultrafiltration, competitive binding.
  - •Immunoassays: RIA, ELISA, Sandwich technique.
  - •Nonimmunologic Assays: chemical, bioassays, receptor-binding.
  - Diagnosis of genetic Diseases: DNA sequence (PCR), RFLP.

#### **Approaches to Endocrine Patients (2)**

#### Laboratory Studies

- Indirect Measurements: hormone effects (glucose, Ca<sup>++</sup>, ...)
- **Provocative Test:** adrenal insufficiency, glucocorticoid excess.
- Imaging Studies: MRI, CT for endocrine tumors.
- **Biopsy procedures:** thyroid gland.

#### Screening of Endocrine Diseases

• Hypertension, diabetes.

#### Interpretation of Lab. Tests

#### **Treatment of Endocrine Diseases**

• Hormone replacement, blockers, surgery.

#### Metabolism, Transport and Elimination of Hormones (1)

## Polypeptide Hormones

#### • **Metabolism** Degradation, lysosomes

#### Transport

Free IGF-1 binding proteins, neurophysins, GH. Glycosylation.

#### Metabolism, Transport and Elimination of Hormones (2)

#### Steroid Hormones & Vitamin D

#### • Transport

CBG (transcortin), SHBG, vit. D binding protein.

#### Metabolism

Inactivation (water-soluble forms) Activation: T, vit. D Aldosterone

#### Metabolism, Transport and Elimination of Hormones (3)

## **Thyroid Hormone**

- **Transport** Free Bound: (TBG), TBPA, Albumin.
- Metabolism

Degradation (deiodinases: type I, type II)

## Catecholamines

Metabolism
 COMT, MAO → VMA