Metabolism of Xenobiotics

BIOMEDICAL IMPORTANCE

Increasingly, humans are subjected to exposure to various foreign chemicals (xenobiotics)—drugs, food additives, pollutants, etc. Understanding how xenobiotics are handled at the cellular level is important in learning how to cope with the chemical onslaught. Knowledge of the metabolism of xenobiotics is basic to a rational understanding of pharmacology and therapeutics, pharmacy, toxicology, management of cancer, and drug addiction. All these areas involve administration of, or exposure to, xenobiotics.

HUMANS ENCOUNTER THOUSANDS OF XENOBIOTICS THAT MUST BE METABOLIZED BEFORE BEING EXCRETED

A xenobiotic (Gk *xenos* “stranger”) is a compound that is foreign to the body. The principal classes of xenobiotics of medical relevance are drugs, chemical carcinogens, and various compounds that have found their way into our environment by one route or another, such as polychlorinated biphenyls (PCBs) and certain insecticides. More than 200,000 manufactured environmental chemicals exist. Most of these compounds are subject to metabolism (chemical alteration) in the human body, with the liver being the main organ involved; occasionally, a xenobiotic may be excreted unchanged. At least 30 different enzymes catalyze reactions involved in xenobiotic metabolism; however, this chapter will only cover a selected group of them.

It is convenient to consider the metabolism of xenobiotics in two phases. In phase 1, the major reaction involved is hydroxylation, catalyzed by members of a class of enzymes referred to as
monooxygenases or cytochrome P450s. Hydroxylation may terminate the action of a drug, though this is not always the case. In addition to hydroxylation, these enzymes catalyze a wide range of reactions, including those involving deamination, dehalogenation, desulfuration, epoxidation, peroxygenation, and reduction. Reactions involving hydrolysis (eg, catalyzed by esterases) and certain other non-P450-catalyzed reactions also occur in phase 1. In phase 2, the hydroxylated or other compounds produced in phase 1 are converted by specific enzymes to various polar metabolites by conjugation with glucuronic acid, sulfate, acetate, glutathione, or certain amino acids, or by methylation. The overall purpose of the two phases of metabolism of xenobiotics is to increase their water solubility (polarity) and thus excretion from the body. Very hydrophobic xenobiotics would persist in adipose tissue almost indefinitely if they were not converted to more polar forms. In certain cases, phase 1 metabolic reactions convert xenobiotics from inactive to biologically active compounds. In these instances, the original xenobiotics are referred to as “prodrugs” or “procarcinogens.” In other cases, additional phase 1 reactions (eg, further hydroxylation reactions) convert the active compounds to less active or inactive forms prior to conjugation. In yet other cases, it is the conjugation reactions themselves that convert the active products of phase 1 reactions to less active or inactive species, which are subsequently excreted in the urine or bile. In a very few cases, conjugation may actually increase the biologic activity of a xenobiotic. The term “detoxification” is sometimes used for many of the reactions involved in the metabolism of xenobiotics. However, the term is not always appropriate because, as mentioned above, in some cases the reactions to which xenobiotics are subject actually increase their biologic activity and toxicity (Murray et al., 2003).
CONJUGATION REACTIONS PREPARE XENOBIOTICS FOR EXCRETION IN PHASE 2 OF THEIR METABOLISM

In phase 1 reactions, xenobiotics are generally converted to more polar, hydroxylated derivatives. In phase 2 reactions, these derivatives are conjugated with molecules such as glucuronic acid, sulfate, or glutathione. This renders them even more water-soluble, and they are eventually excreted in the urine or bile.

Five Types of Phase 2 Reactions Are Described Here

A. GLUCURONIDATION

UDP-glucuronic acid is the glucuronyl donor, and a variety of glucuronosyltransferases, present in both the endoplasmic reticulum and cytosol, are the catalysts. Molecules such as 2-acetylaminofluorene (a carcinogen), aniline, benzoic acid, meprobamate (a tranquilizer), phenol, and many steroids are excreted as glucuronides. The glucuronide may be attached to oxygen, nitrogen, or sulfur groups of the substrates. Glucuronidation is probably the most frequent conjugation reaction.

B. SULFATION

Some alcohols, arylamines, and phenols are sulfated. The sulfate donor in these and other biologic sulfation reactions (eg, sulfation of steroids, glycosaminoglycans, glycolipids, and glycoproteins) is adenosine 3'-phosphate-5'-phosphosulfate (PAPS); this compound is called “active sulfate.”
C. CONJUGATION WITH GLUTATHIONE

Glutathione (γ-glutamyl-cysteinylglycine) is a tripeptide consisting of glutamic acid, cysteine, and glycine. Glutathione is commonly abbreviated GSH (because of the sulfhydryl group of its cysteine, which is the business part of the molecule). A number of potentially toxic electrophilic xenobiotics (such as certain carcinogens) are conjugated to the nucleophilic GSH in reactions that can be represented as follows:

\[ R + GSH \rightarrow R—S—G \]

where \( R \) = an electrophilic xenobiotic. The enzymes catalyzing these reactions are called glutathione S-transferases and are present in high amounts in liver cytosol and in lower amounts in other tissues. A variety of glutathione S-transferases are present in human tissue. They exhibit different substrate specificities and can be separated by electrophoretic and other techniques. If the potentially toxic xenobiotics were not conjugated to GSH, they would be free to combine covalently with DNA, RNA, or cell protein and could lead to serious cell damage. GSH is therefore an important defense mechanism against certain toxic compounds, such as some drugs and carcinogens. If the levels of GSH in a tissue such as liver are lowered, then that tissue can be shown to be more susceptible to injury by various chemicals that would normally be conjugated to GSH. Glutathione conjugates are subjected to further metabolism before excretion.

Glutathione has other important functions in human cells apart from its role in xenobiotic metabolism.

1. It participates in the decomposition of potentially toxic hydrogen peroxide in the reaction catalyzed by glutathione peroxidase.
2. It is an important **intracellular reductant**, helping to maintain essential SH groups of enzymes in their reduced state.

3. A metabolic cycle involving GSH as a carrier has been implicated in the **transport of certain amino acids** across membranes in the kidney. The first reaction of the cycle is shown below.

   Amino acid + GSH → λ- Glutamyl amino acid + Cysteinylglycine

This reaction helps transfer certain amino acids across the plasma membrane, the amino acid being subsequently hydrolyzed from its complex with GSH and the GSH being resynthesized from cysteinylglycine. The enzyme catalyzing the above reaction is **λ-glutamyltransferase (GGT)**. It is present in the plasma membrane of renal tubular cells and bile ductule cells, and in the endoplasmic reticulum of hepatocytes. The enzyme has diagnostic value because it is released into the blood from hepatic cells in various hepatobiliary diseases.

**D. OTHER REACTIONS**

The two most important other reactions are acetylation and methylation.

1. **Acetylation**—Acetylation is represented by

   \[ X + \text{Acetyl-CoA} \rightarrow \text{Acetyl-X} + \text{CoA} \]

   where \( X \) represents a xenobiotic. As for other acetylation reactions, \text{acetyl-CoA} (active acetate) is the acetyl donor. These reactions are catalyzed by \text{acyltransferases} present in the cytosol of various tissues, particularly liver. The drug \text{isoniazid}, used in the treatment of tuberculosis, is subject to acetylation. **Polymorphic types** of
acetyltransferases exist, resulting in individuals who are classified as **slow or fast acetylators**, and influence the rate of clearance of drugs such as isoniazid from blood. Slow acetylators are more subject to certain toxic effects of isoniazid because the drug persists longer in these individuals.

2. **Methylation**—A few xenobiotics are subject to methylation by methyltransferases, employing **S-adenosylmethionine** (Figure 30–17) as the methyl donor.

![Figure 30–17. Formation of S-adenosylmethionine. ~CH3 represents the high group transfer potential of “active methionine.”](image)

*Figure 30–17. Formation of S-adenosylmethionine. ~CH3 represents the high group transfer potential of “active methionine.”*