

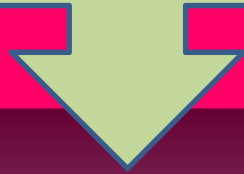
# **GLUCOSE METABOLISM**

# **What is Glucose Metabolism?**

# Glucose Metabolism is a Part of Carbohydrates Metabolism

- Carbohydrate metabolism includes the various biochemical processes responsible for the formation, breakdown and interconversion of carbohydrates in living organisms.
- The most important carbohydrate is glucose, a simple sugar (monosaccharide) that is found in foods and metabolized by nearly all known organisms.

# “Glucose” is the Carbohydrate Currency of the Body



□ Dietary Carbohydrates are Digested

in the

**Gastrointestinal Tract**

to

Simple Monosaccharide Abundantly Glucose

which are then all

Absorbed by the Intestinal Cells.

# “Glucose” is the Carbohydrate Currency of the Body .....cont.

- ❑ **Monosaccharides** other than glucose after the absorption by the intestine they are converted to glucose in the liver.

**GLUCOSE**



Absorption by  
Intestine

Carried by the Blood to  
Different body tissues

# Function of Glucose

- ❑ The Principal Biochemical Function of Glucose is to Provide Energy for Life Processes.

- ❑ **Glucose Oxidation**

is the primary source of energy for the biosynthesis of *Adenosine Triphosphate (ATP)*.

*Which is*

*The Universal Energy Source for Biological Reactions.*

# Routes of Glucose Metabolism Controlled by Insulin

□ *Here is a Very Simple Explanation of how we Convert Glucose into Energy.*

- In response to the rise in **blood-glucose levels** after a meal



The beta cells of the islets of Langerhans of the Pancreas release

**Insulin**

*A protein hormone which enhances glucose uptake by the different body cells.*

# Effect of Insulin on Glucose Uptake by Cells

- *The cells that need glucose have **specific insulin receptors** on their surface so that insulin can bind to them, encouraging glucose entry and utilization in the cells.*
- The glucose enters the cell by special protein molecules in the plasma membrane called “**glucose transporters**” ( **facilitated transport** ).



## Effect of Insulin on Glucose Uptake by Cells .....cont.

- ❑ Glucose can not enter the cells of most body tissues in the absence of insulin.
- ❑ **The main target tissues of insulin are:**
  - 1. Liver.***
  - 2. Muscles.***
  - 3. Adipose tissues.***

# Aerobic and Anaerobic Metabolism of Glucose

- **Once inside the cells, glucose is metabolized to produce energy. This may occur by either:**
  1. **Aerobic Metabolism** that occurs in combination with oxygen. It takes place in the cytosol and mitochondria.
  2. **Anaerobic Metabolism** which do not need oxygen. Takes place in the cytosol only.
- ***Red blood cells* do not have mitochondria, so they convert glucose into energy without the use of oxygen.**

**☐ Both Aerobic and Anaerobic Metabolic Pathways of Glucose Starts with Glycolysis**

**☐ What is Glycolysis?**

# Both Aerobic and Anaerobic Metabolic Pathways of Glucose Starts with Glycolysis

## □ Glycolysis

is a metabolic process by which

*6-Carbon Glucose*

molecule is oxidized to

*Two 3-carbon molecules of pyruvate.*

- For every glucose converted to 2 pyruvate:  
2 net ATP and 2 net NADH are formed.

# Glycolysis

Glucose molecule



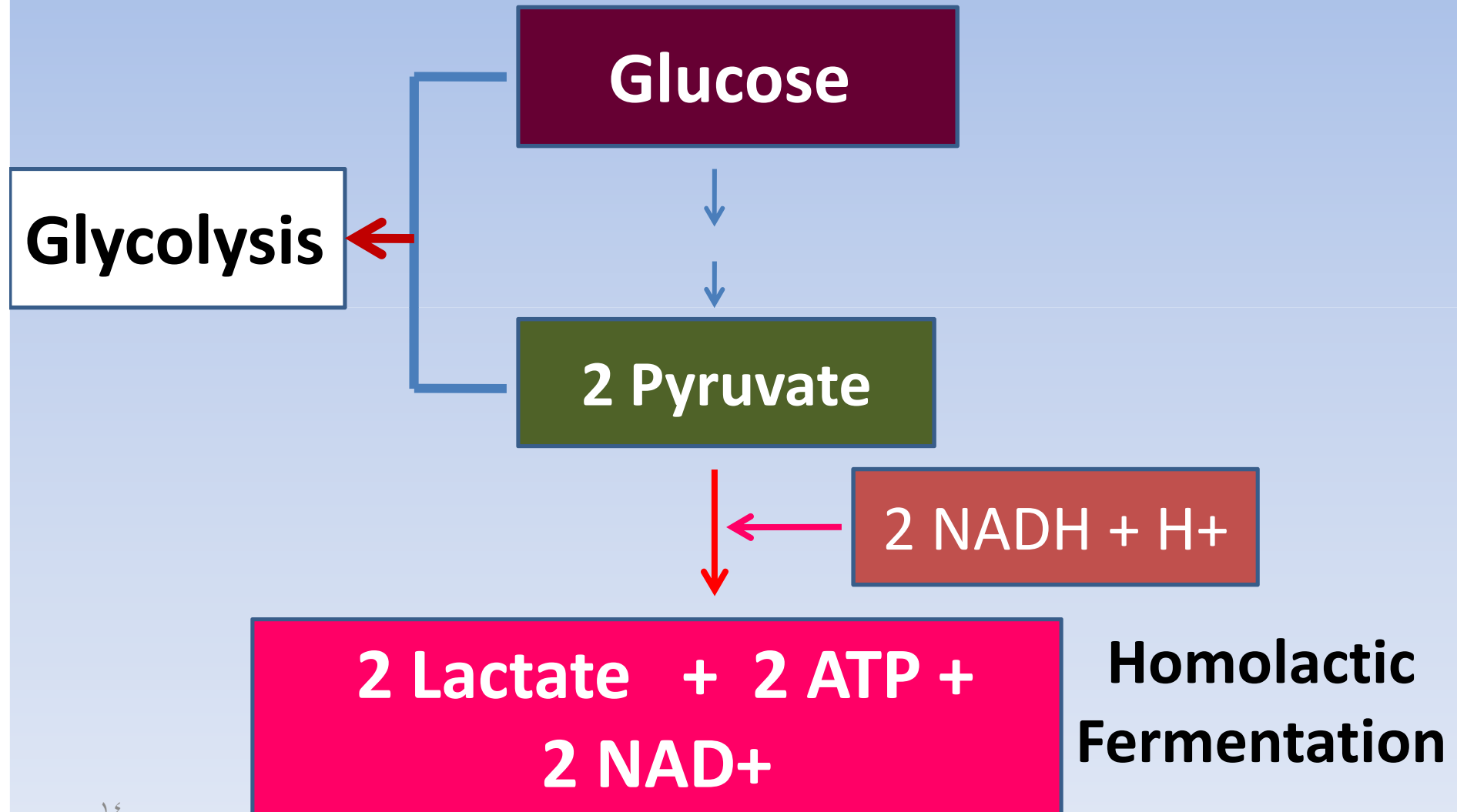
Oxidation

2 Pyruvate

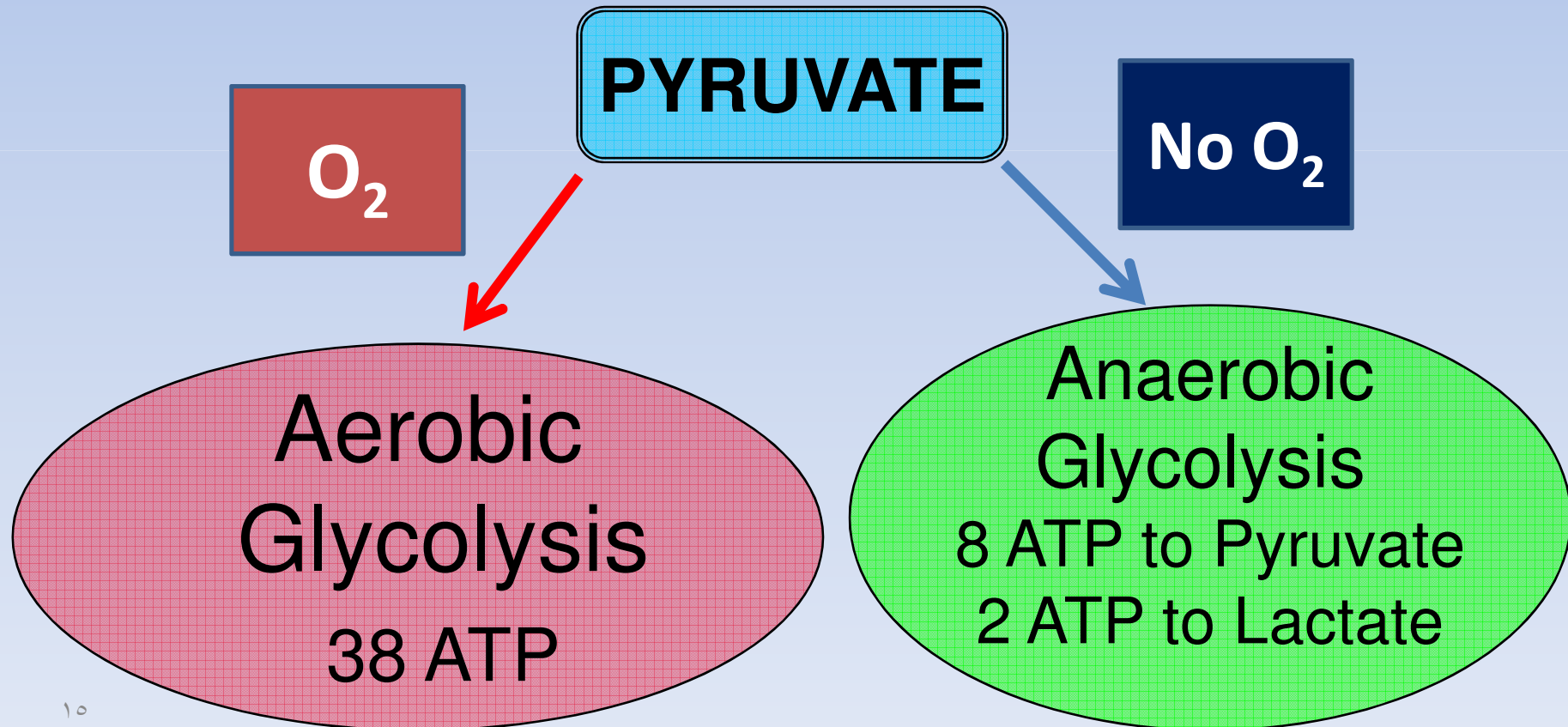
And

2 ATP + 2 NADH.

# Anaerobic Glycolytic Pathway



# Both Aerobic and Anaerobic Metabolic Pathways of Glucose Starts with Glycolysis



# Aerobic Glycolytic Pathway

One molecule of Glucose gives 38 ATP

**Glycolysis**  
**(Pyruvate Formation)**

**2 ATP**

**2 NADH (6 ATP)**

**Acetyl- CoA**  
**Formation**

**2 NADH (6 ATP)**

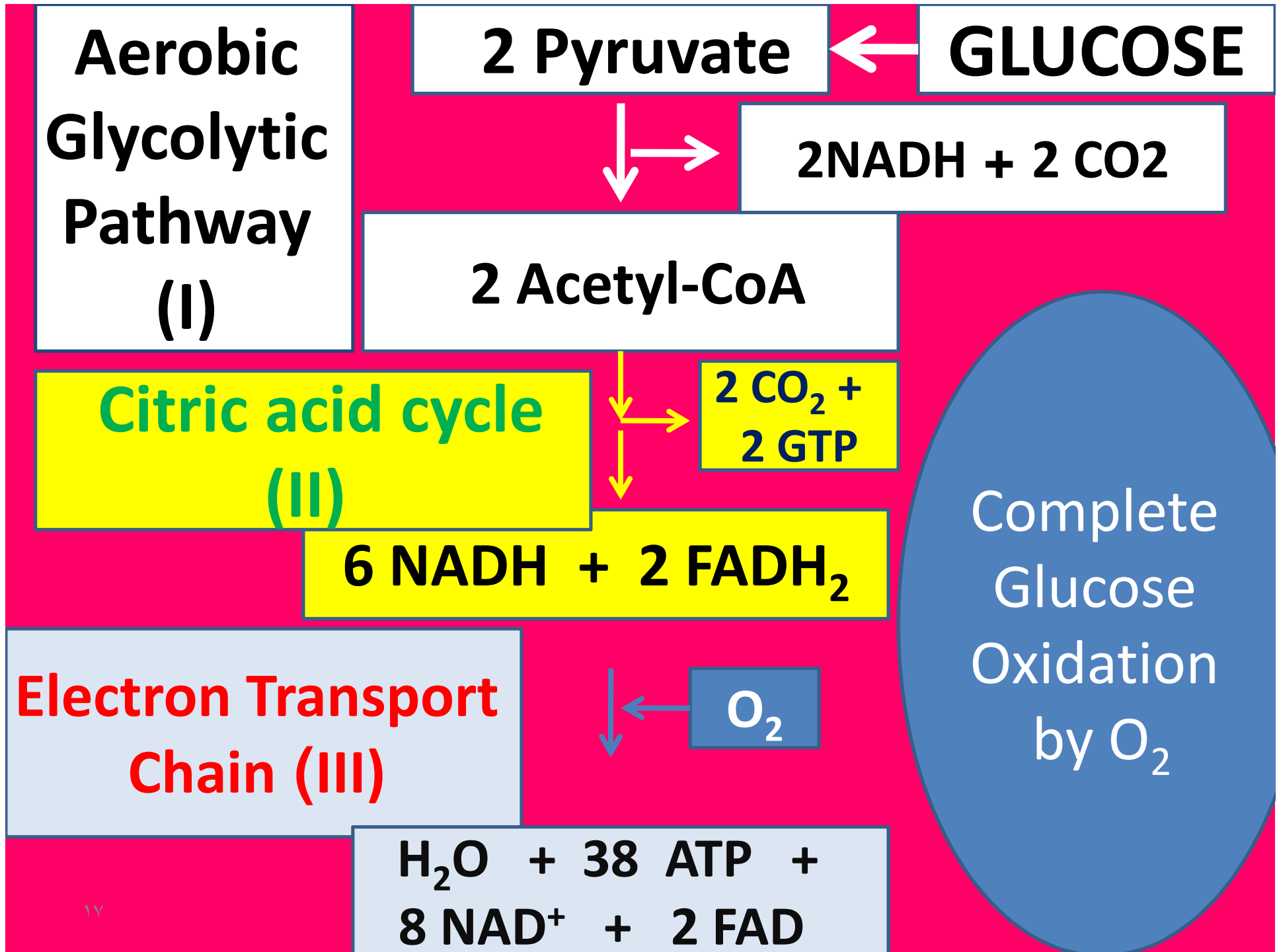
**Krebs Cycle**  
**Citric Acid Cycle**

**6 NADH (18 ATP)**

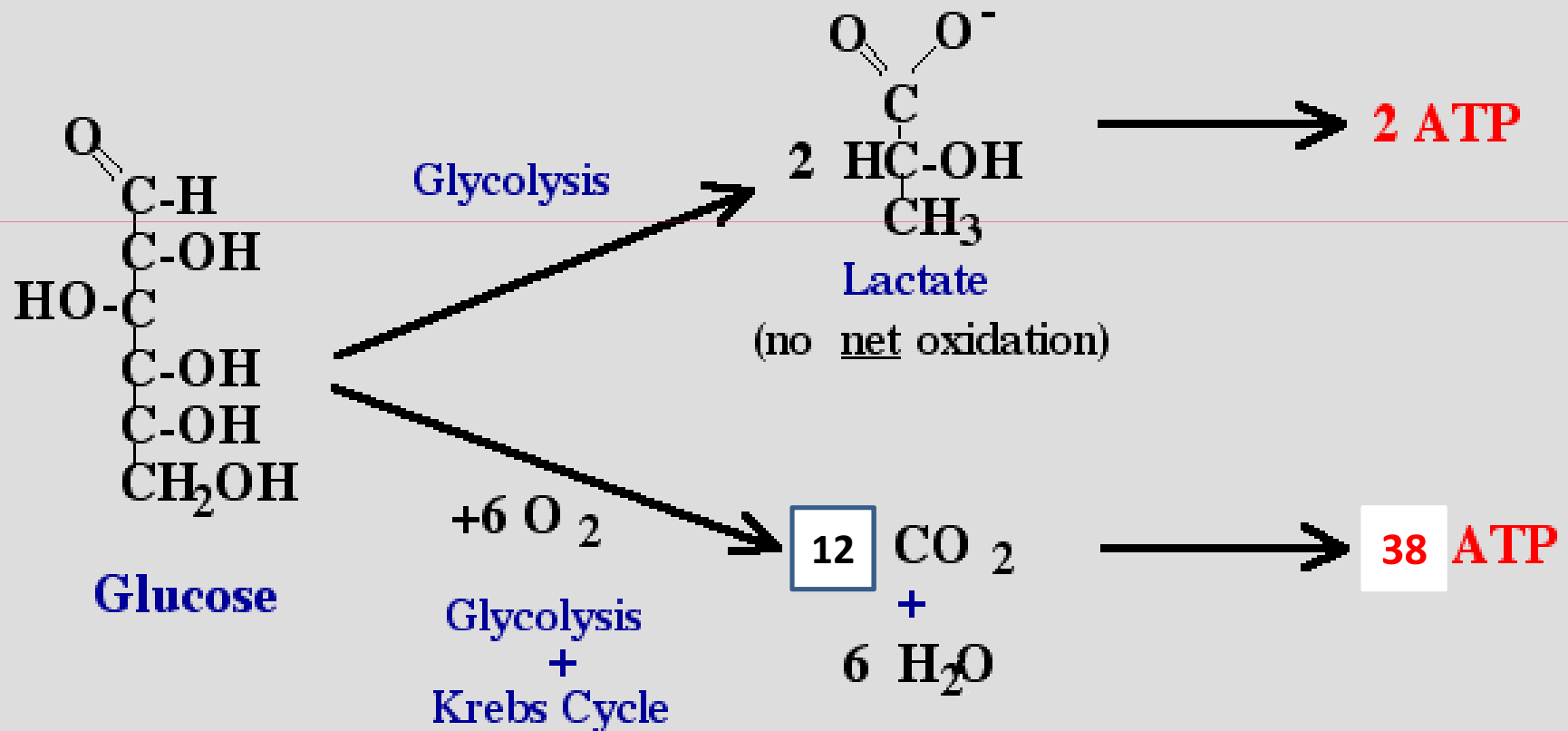
**2 FADH<sub>2</sub> (4ATP)**

**2 GTP (2ATP)**





# الطاقة الإجمالية ( ATP ) الناتجة من الجلايكوليسز و دورة كريس



# Physiological Importance of Glucose

- Energy is required for the normal functioning of the organs in the body.
- *Many tissues can use fat or protein instead of glucose as a source of energy but others such as the:*

*Brain mainly uses glucose*

And

*Red blood cells can only use glucose*

*As a source of energy*

# Physiological Importance of Glucose

## □ Glucose Metabolism

- Glucose is the Body's Fuel.

- Without glucose or without being able to convert it into energy rapidly and efficiently, we cannot survive in a good health. So it's very important that our

***Glucose - Energy-Metabolism System***

works efficiently.

# What are the Hormones that their Effects Opposed Insulin Effects?



- The Effects of insulin are opposed by other hormones: *Glucagon*, *Adrenaline*, *Glucocorticoides* and *Growth hormone*.

**These hormones  
sometimes are called  
Stress Hormones**

# Insulin and Glucagon Have Opposite Actions on Blood Glucose Level

## *A Meal Rich in Carbohydrates:*

- 1- Induces insulin secretion.
- 2- Suppresses glucagon release.

# Effects of Insulin on Body Metabolism

## □ Insulin Correlates with the Fed State

It Switches on

Pathways and Processes Involved in

*The Cellular Uptake and Storage of Metabolic  
Fuels*

and

switches off pathways involved in

**Fuel Breakdown.**

# Effects of Insulin on Body Metabolism

- **In Normal Individuals**
- **Insulin acts as the body's  
only**

Hypoglycemic Agent

**Insulin reduces blood glucose level.**

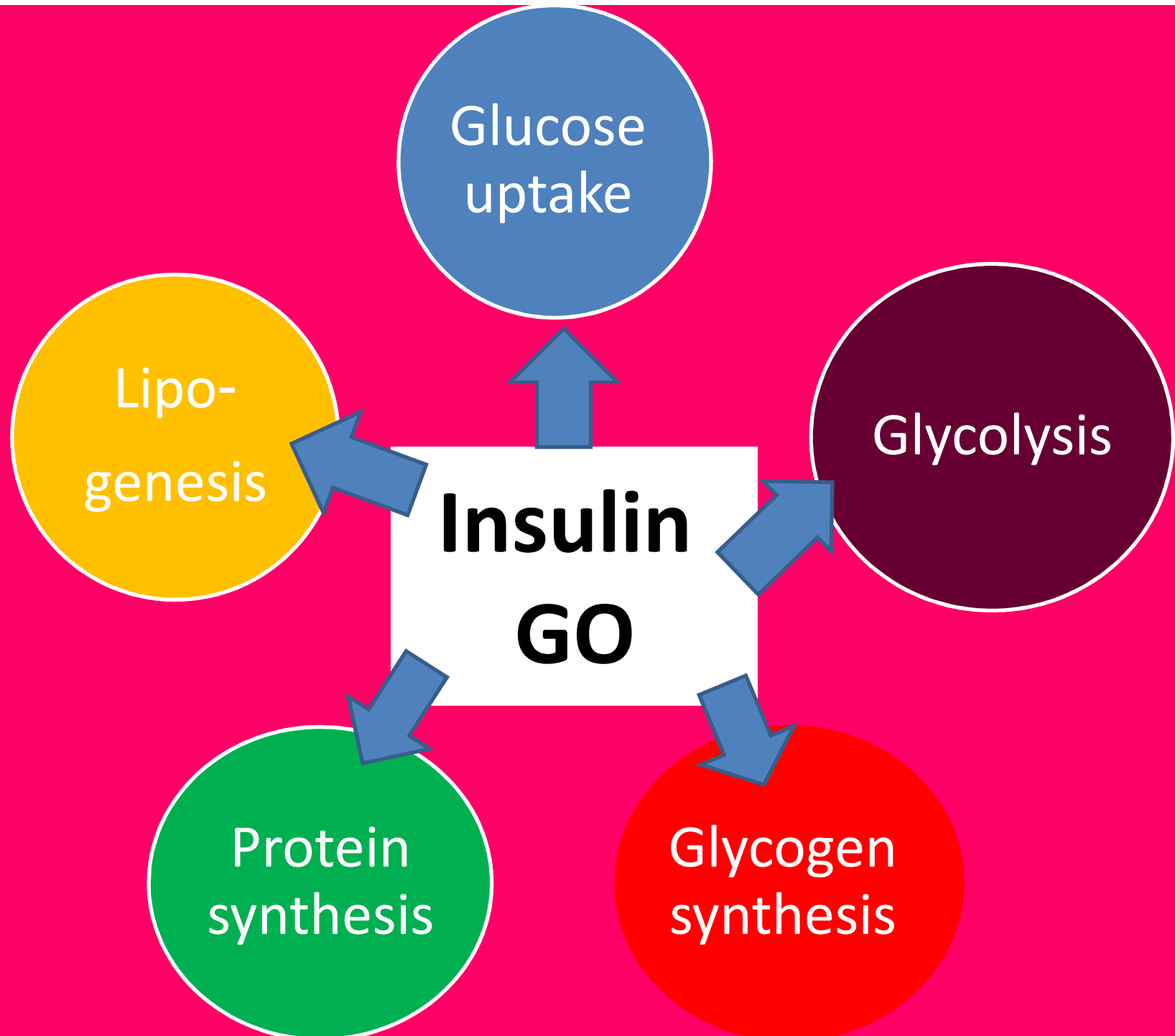


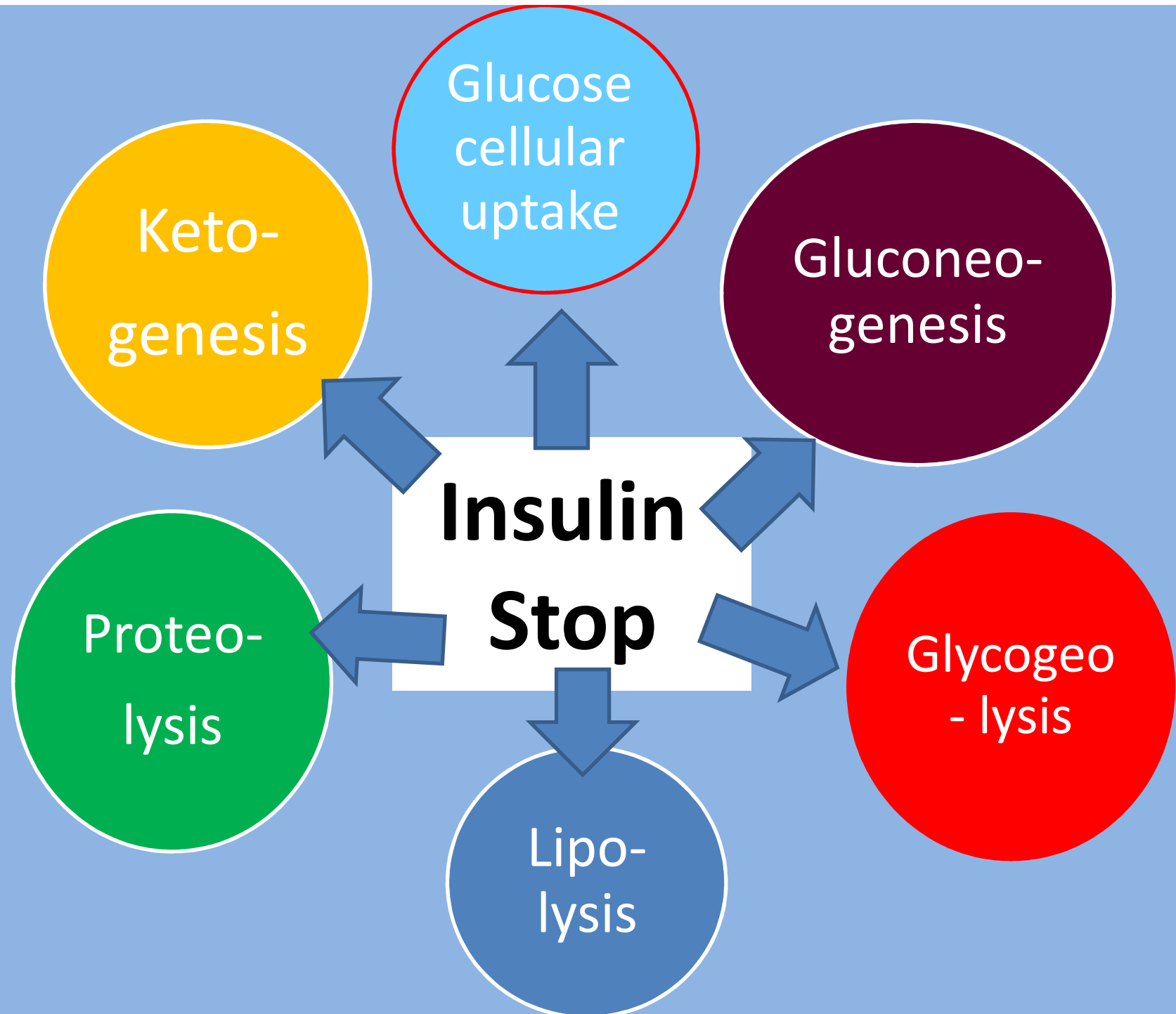
# The Metabolic Actions Of Insulin

.....?

# METABOLIC ACTIONS OF INSULIN

TISSUE			
	Liver	Adipose	Muscle
Inhibits :	<b>Glycogenolysis</b> <b>Gluconeogenesis</b> <b>ketogenesis</b>	lipolysis	-Protein breakdown -Amino acid release
Stimulates :	<b>- Glycogen and fatty acid synthesis</b>	Glycerol fatty acid synthesis	<b>- Glucose uptake and metabolism</b> -Amino acid uptake -Synthesis of protein <b>-Glycogenesis</b>






# The Insulin-Opposite Effects of Glucagon on the Blood Level of Glucose

## II . Function of Glucagon:

*1- Stimulates Gluconeogenesis*

*2- Stimulates Glycogenolysis*

- *Glucagon is a hyperglycemic agent it increases blood glucose level .*
- **After a Meal Rich in CHO, glucagon secretion is reduced.**



The Relationship  
Between Glucose  
Metabolism And  
**Diabetes Mellitus**  
is Very Important

# Glucose Metabolism in Diabetes Mellitus

In  
Diabetic Patients

The hormonal regulation of blood glucose levels and metabolic processes are abnormal and results in the classic sign of

**DIABETES MELLITUS:**

***Elevated Blood Glucose Levels.***

- The measuring of blood glucose levels is an important test in diabetes (and also other disorders).

# Metabolic Processes of Glucose in Normal Individuals

## Just Minutes After Ingestion of a Meal:

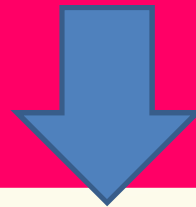
**(1) Blood glucose levels** increase, however by only 20% to 40% in nondiabetic individuals.

**(2) Blood insulin levels rapidly increase.** Most peripheral cells respond to the rise of blood glucose in the presence of insulin by rapidly increasing glucose transport into cells.



# Metabolic Processes of Glucose in the Diabetics

***In the diabetic, both the production and metabolism of glucose are increased.***



Thus, in the fasting state in diabetics, hepatic glucose release is greatly elevated, causing the diagnostic, fasting hyperglycemia of diabetics

# Metabolic Processes of Glucose in the Diabetics

- The decreased control of glucose metabolism by insulin causes the diabetic to be in

## Semistarvation State

*with an increased dependence on triglycerides as a source of fuel and on protein as a source of glucose precursors.*

# Types of Diabetes Mellitus .....cont.

There are 2 Types of Diabetes Mellitus:

## 1- Type I Diabetes.

- It accounts for 5% to 10% of the diagnosed cases of diabetes.
- This type of diabetes is caused by insufficient insulin secretion (insulinopenia).
- Insulin injections are necessary to maintain normal glucose metabolism.
- Individuals with type I diabetes are especially prone to **ketoacidosis**. Ketoacidosis refers to excessive formation of ketone bodies and low blood pH (acidosis).

# Types of Diabetes Mellitus

There are 2 Types of Diabetes Mellitus:

## 2- Type II Diabetes.

- The occurrence of type II diabetes has no correlation with blood insulin levels, however there is **insulin resistance**.
- The type II individual is usually (i) not treated with insulin injection, (ii) less prone to ketoacidosis, and (iii) is often in obese.

# Metabolic Processes of Glucose in the Diabetic .....cont.

After a meal, the inhibition of hepatic glucose output is

↓  
**Much smaller in the diabetic**

There is diminished insulin output and/or insulin resistance in diabetics

↓  
Abnormal and prolonged rise in blood glucose after a meal

# Oral Glucose Tolerance Test

- **Oral Glucose tolerance test (OGTT)** is used
- **OGTT** is not always necessary to diagnose diabetes as most patients have both significantly high blood sugar and symptoms of diabetes and don't require further testing.
- **OGTT** used to diagnose prediabetes ( patients at higher risk for developing DM in the future and currently have no symptoms of DM and their blood sugar is upper limit of normal).

# Oral Glucose Tolerance Test

- **Oral Glucose tolerance test (OGTT)** is a laboratory method to check how the body breaks down (metabolizes) blood sugar.
- OGTT is used to diagnose [prediabetes](#) and [diabetes](#).

# Metabolic Processes of Glucose in the Diabetics

- In summary, the carbohydrate metabolism in a diabetic is strikingly similar to that of a nondiabetic in the fasting state.
  - In both cases metabolism of fatty acids has replaced the metabolism of glucose as the principal source of energy for the cell.



# Diabetic Patients Suffer from Different Abnormalities

- **Late Complications of Diabetes Mellitus:**

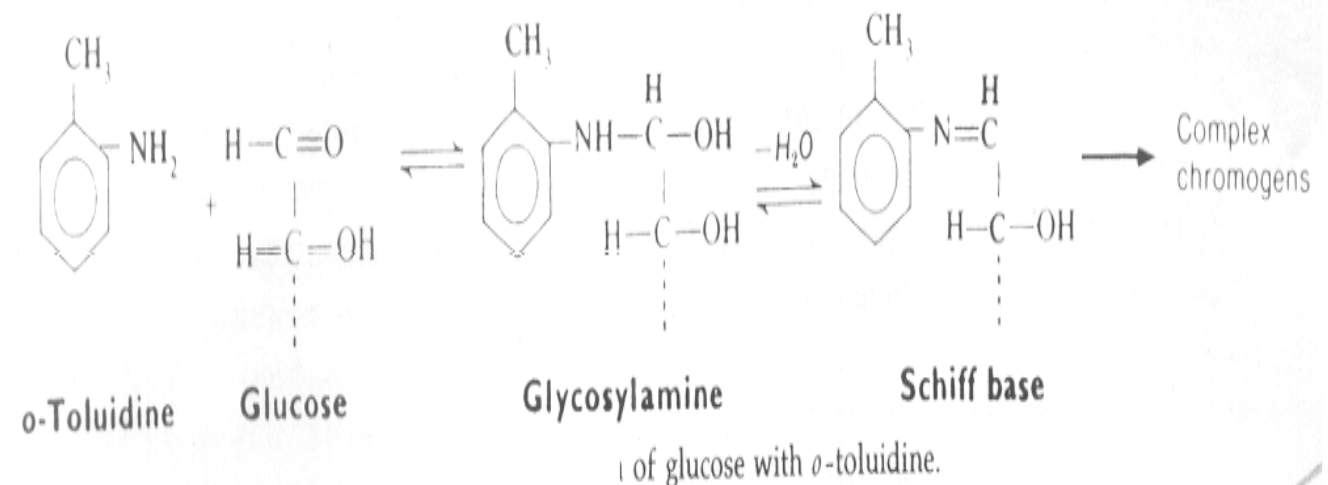
1. **Microangiopathy.**
2. **Retinopathy.**
3. **Nephropathy.**
4. **Neuropathy.**
5. **Macroangiopathy.**

# Principle of Method

- Various aromatic amines react with glucose in hot acetic acid solution to produce colored derivatives. Among those used is **o-toluidine**.
- The **o-toluidine** condenses initially with the aldehyde group of glucose to form an equilibrium mixture of a **glycosylamine** and the **corresponding Schiff base**, as illustrated

Figure 1.

Figure 1



# Principle of Method

- Further rearrangements and reactions take place after the original condensation to produce a mixture of blue green chromogens with an absorption maximum at 625 nm.

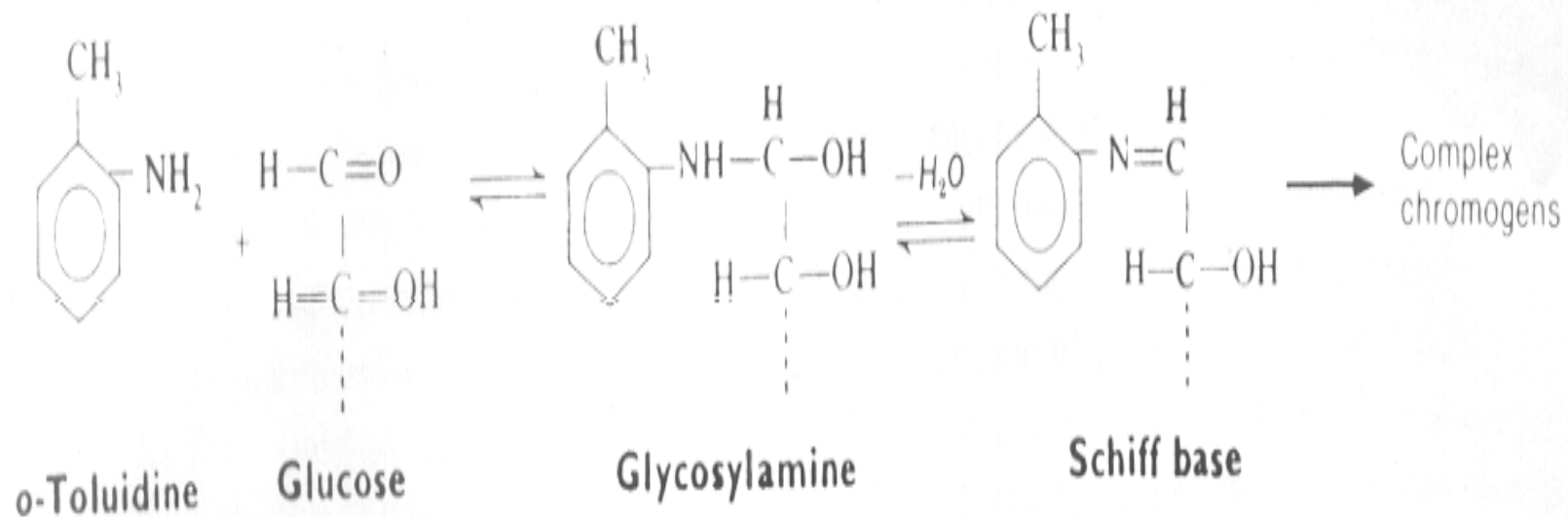


Figure 13-5. Reaction of glucose with *o*-toluidine.

# Method

- **Routine laboratory methods:**

1- Fasting blood glucose: not more than 100mg/dl

2- **Glucose tolerance test** (GTT) : the test involves the administration of a standard oral glucose dose ( 1 g glucose/kg body weight ) after an over night fast, blood is collected at frequent intervals ( usually 0, 0.5, 1, and 2 hours) and analyzed for blood glucose concentration. The peak value should be less than 160 mg/dl and occurs between 15 – 30 minutes after glucose administration.

# Materials

## Reagents :

- O – toluidine
- Working standard ( 100 mg/dl)
- Blood samples
- Distilled water

# Method

- Take 4 test tubes and label them T1 (test #2), T2(test #2), S (standard glucose), and B (blank), to each tube add 5 ml of o – toluidine, then pipette:
- 0.1 ml of sample # 1 in T1
- 0.1 ml of sample # 2 in T2
- 0.1 ml of standard glucose in S
- 0.1 ml of water in B
- Shake the tubes very well and put them in a boiling water bath for 10 minutes, remove tubes, cool under tap water and read the absorbance of T1, T2 and S against the blank tube B at 625 nm, record your results.

# Results

## Calculation :

### ❖ Blood glucose level in a test sample:

- $\frac{\text{Absorbance of test}}{\text{Absorbance of std}} \times 100 \text{ (mg/dl)} = \text{----- mg/dl}$   
( Concentration of Standard )

