

Via Glicolítica

Utilização da glicose pelas células

Matriz extracelular
e polissacarídeos
da parede celular

Glicogênio,
amido, sacarose

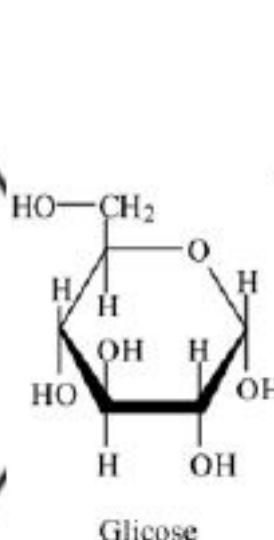
Síntese de
polímeros
estruturais

Oxidação
pela via da
pentose-fosfato

Ribose-5-fosfato

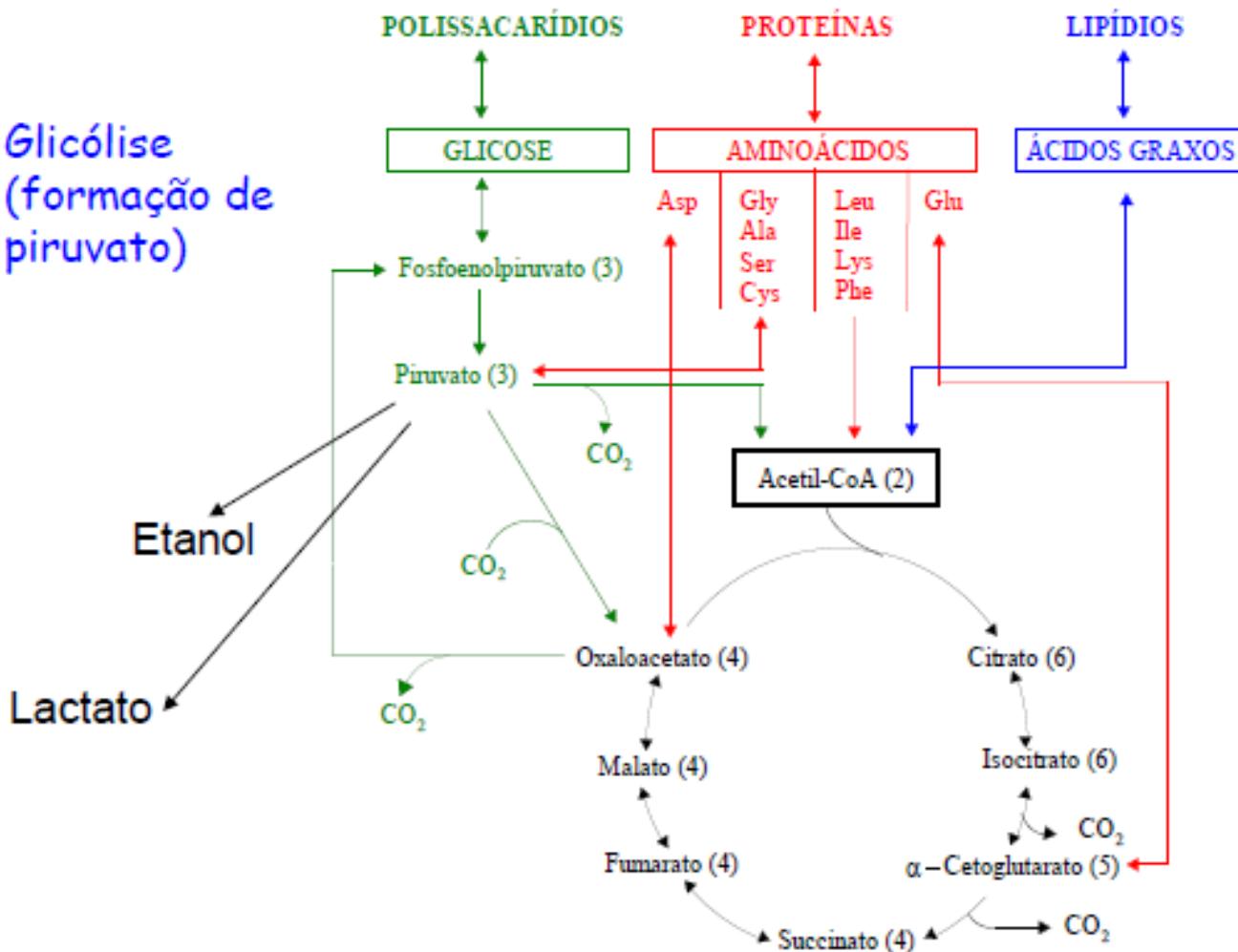
Oxidação
por glicólise

Piruvato



Glicólise (formação de piruvato)

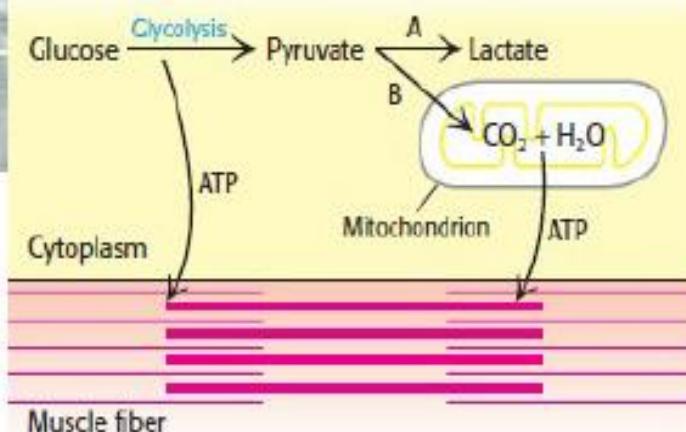
MAPA II



Vias de degradação da glicose



Usain Bolt sprints to a win in the 200-meter finals at the Olympics in Rio de Janeiro in 2016. Glucose metabolism can generate the ATP to power muscle contraction. During a sprint, when the ATP needs outpace oxygen delivery, as would be the case for Bolt, glucose is metabolized to lactate. When oxygen delivery is adequate, glucose is metabolized more efficiently to carbon dioxide and water. [Odd Andersen/Getty Images.]



- A. Low O₂
(last seconds of a sprint)
- B. Normal
(long, slow run)



<https://www.youtube.com/watch?v=hDq1rhUkV-g>

<http://www.iubmb-nicholson.org/mp4/glycolysis.mp4>

<https://www.youtube.com/watch?v=WISpTBUDXoI>

Importância da Glicólise

- 1 - Principal meio de degradação da glicose.
- 2 - Obtenção de Energia mesmo em condições anaeróbias.
- 3 - Principal via de obtenção de energia nos eritrocitos, medula renal, cérebro e esperma.

Como a glicose é transportada para dentro das celulas



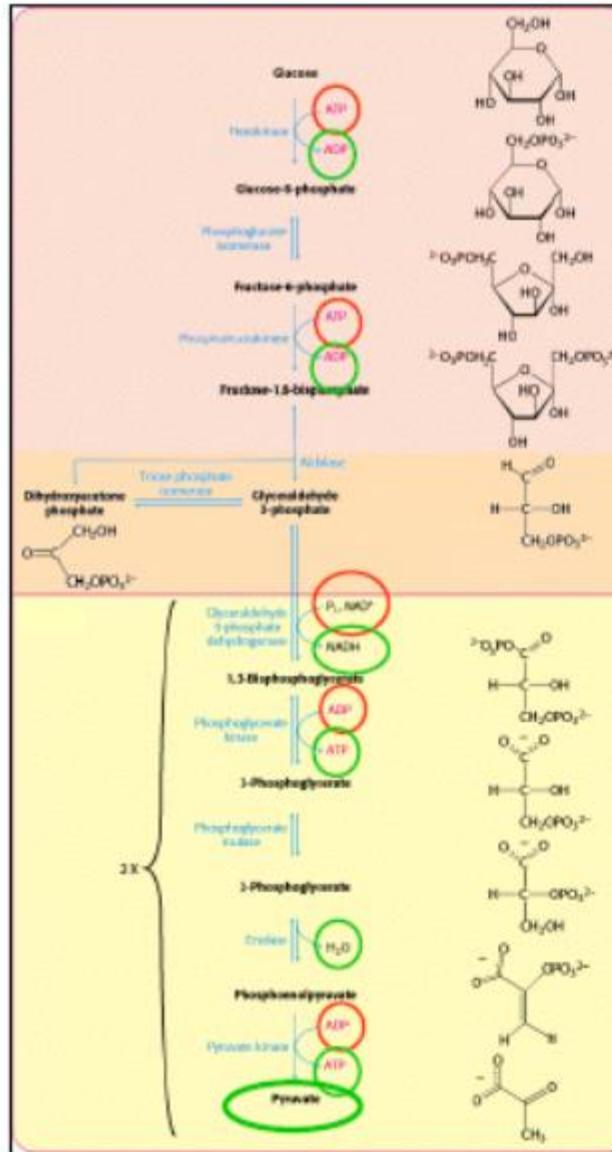
TABLE 16.4 Family of glucose transporters

Name	Tissue location	K_M	Comments
GLUT1	All mammalian tissues	1 mM	Basal glucose uptake
GLUT2	Liver and pancreatic β cells	15–20 mM	In the pancreas, plays a role in the regulation of insulin In the liver, removes excess glucose from the blood
GLUT3	All mammalian tissues	1 mM	Basal glucose uptake
GLUT4	Muscle and fat cells	5 mM	Amount in muscle plasma membrane increases with endurance training
GLUT5	Small intestine	—	Primarily a fructose transporter



1- Ativação ou Fosforilação da Glicose

2- Transformação do Gliceraldeído em Piruvato

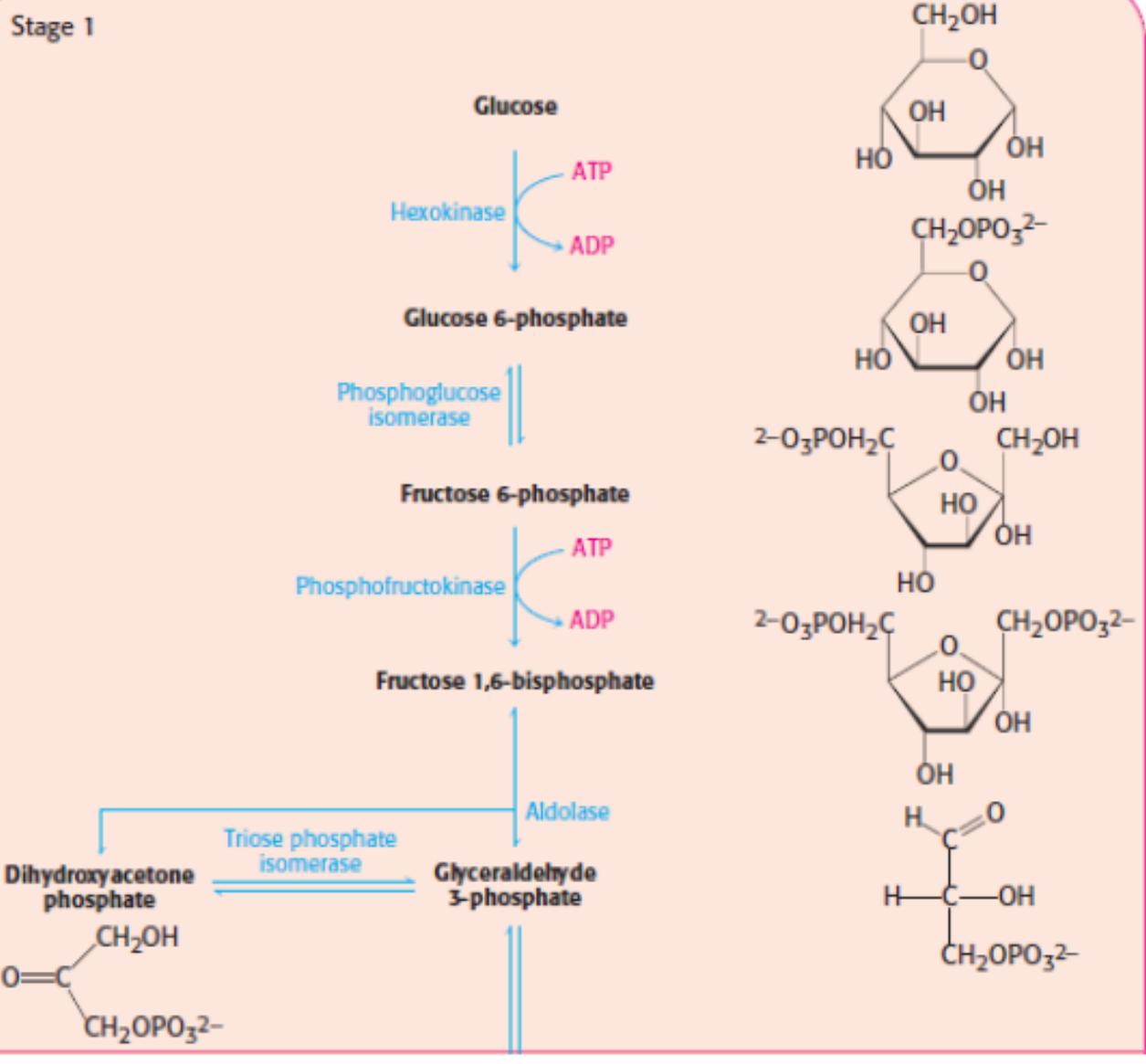
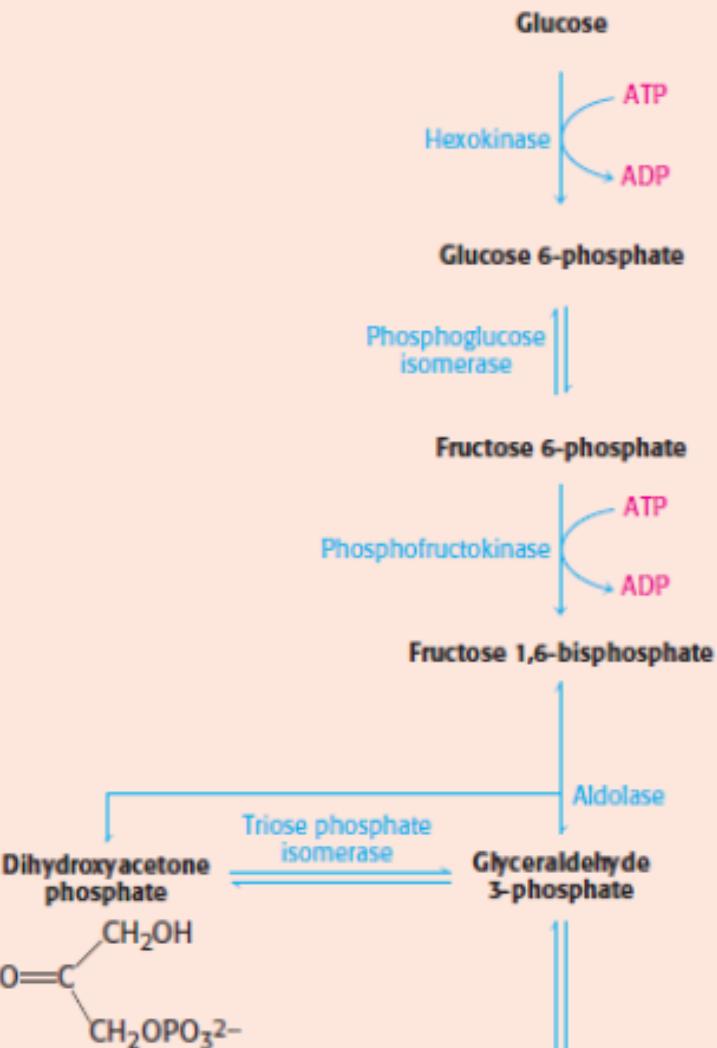


Fase preparatória

Fase compensatória

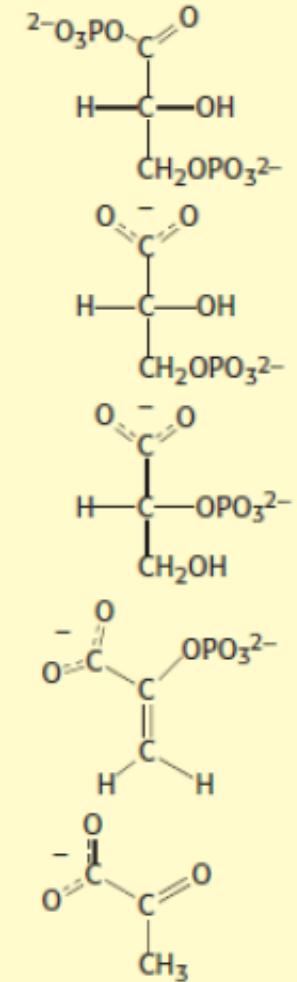
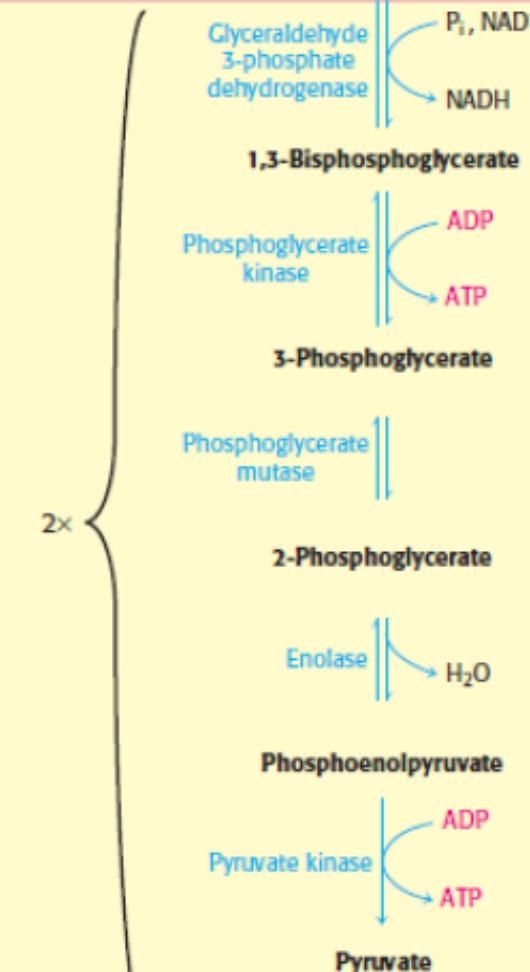
Fase preparatoria

Stage 1



Fase compensatoria

Stage 2



Como a glicose é transportada para dentro das celulas

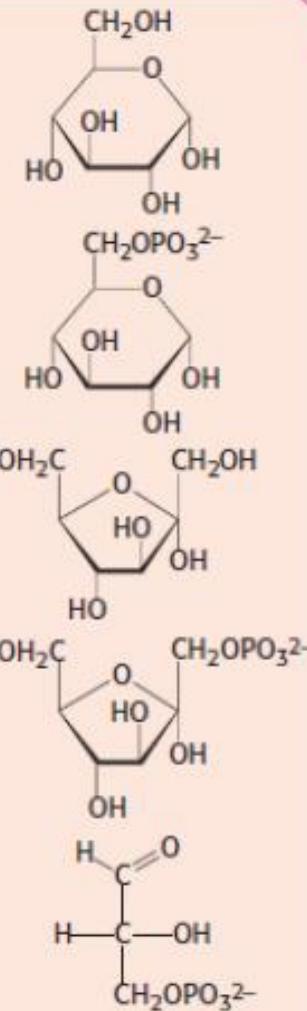
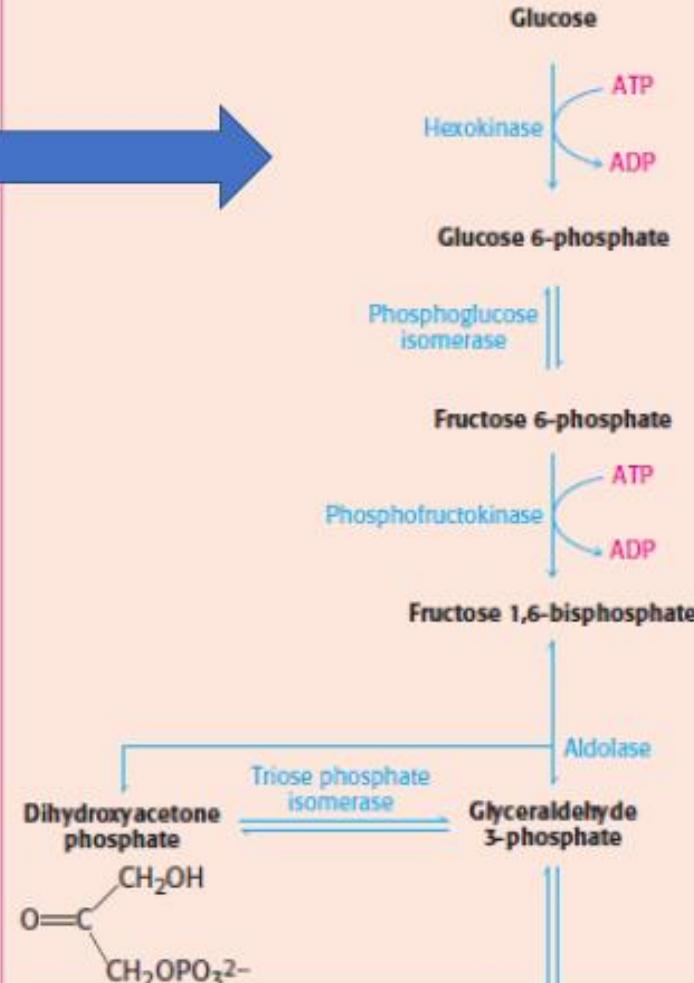


TABLE 16.4 Family of glucose transporters

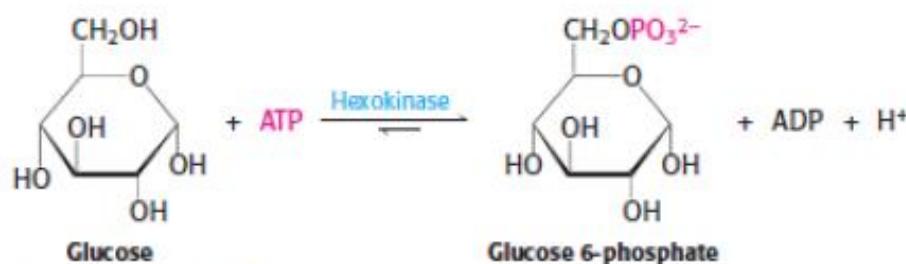
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Activação ou Fosforilação da Glicose

Stage 1

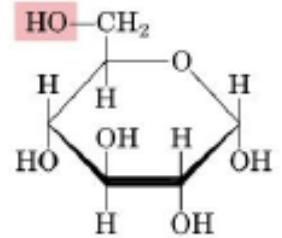


Permite a entrada da Glicose no Metabolismo Intracelular
A Glicose-6-P não passa pela membrana plasmática
→ Reação irreversível

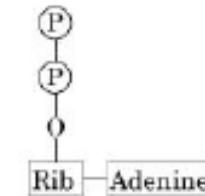
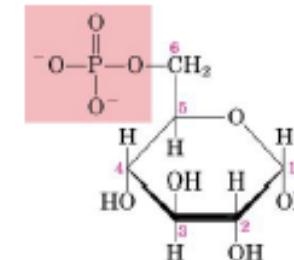
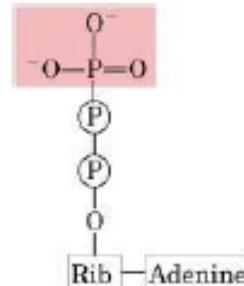


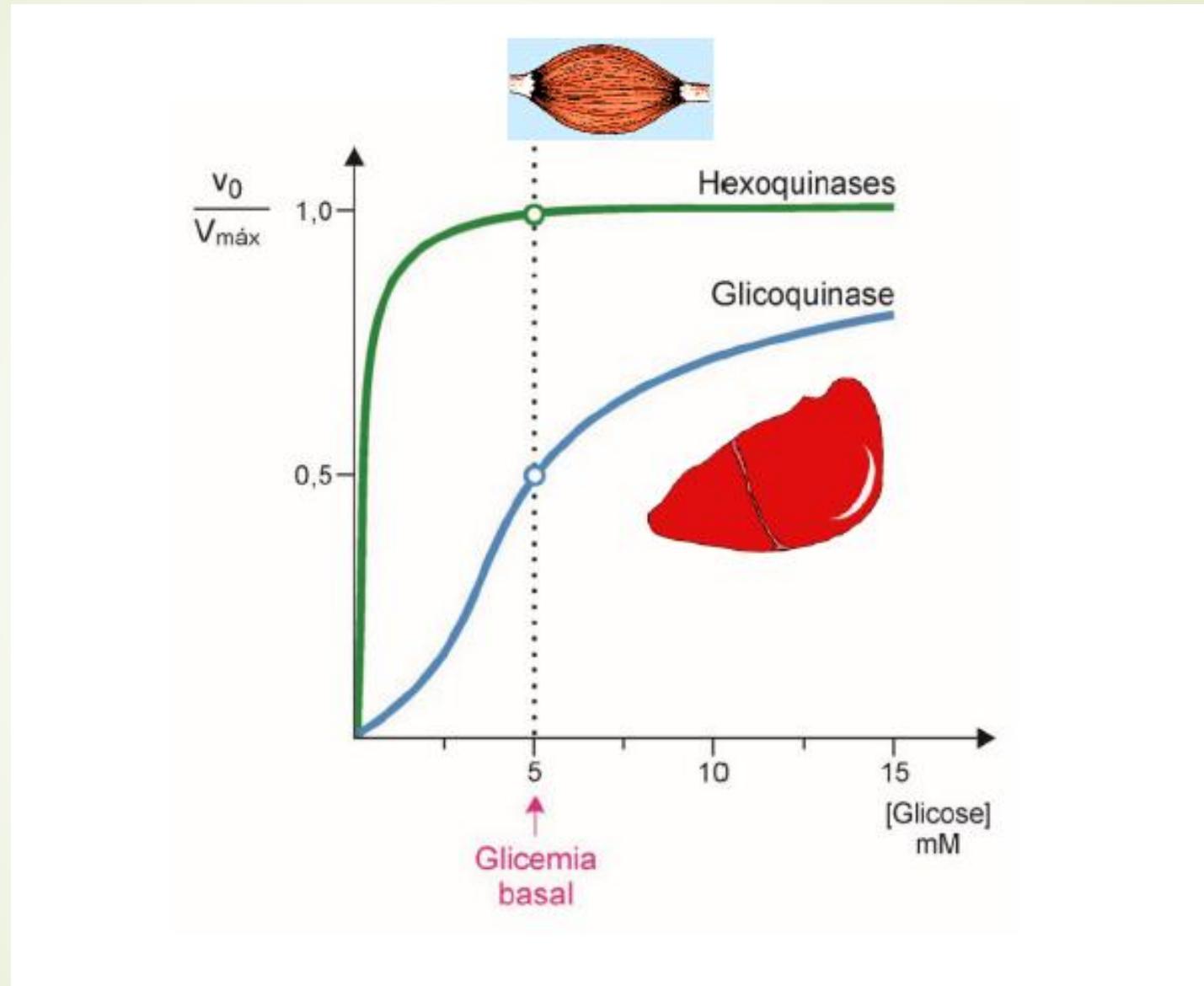
hexoquinase

• Glicose + ATP → Glicose -6-Fosfato + ADP

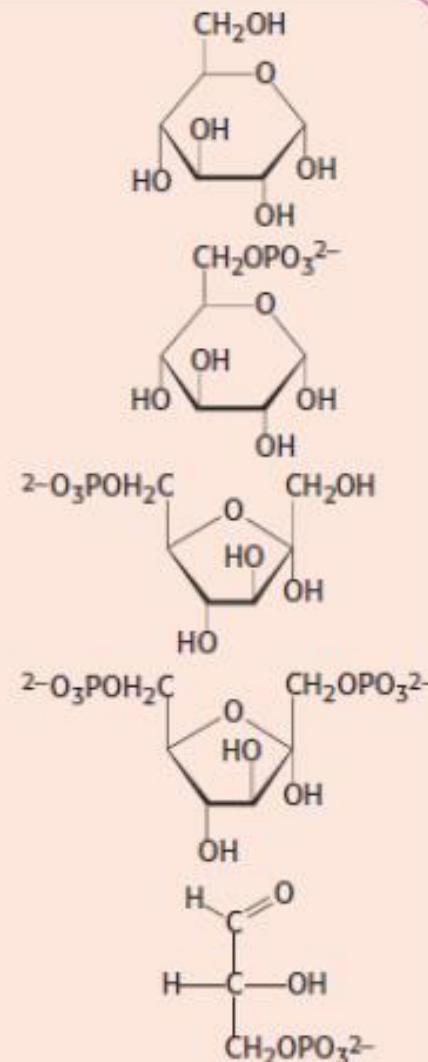
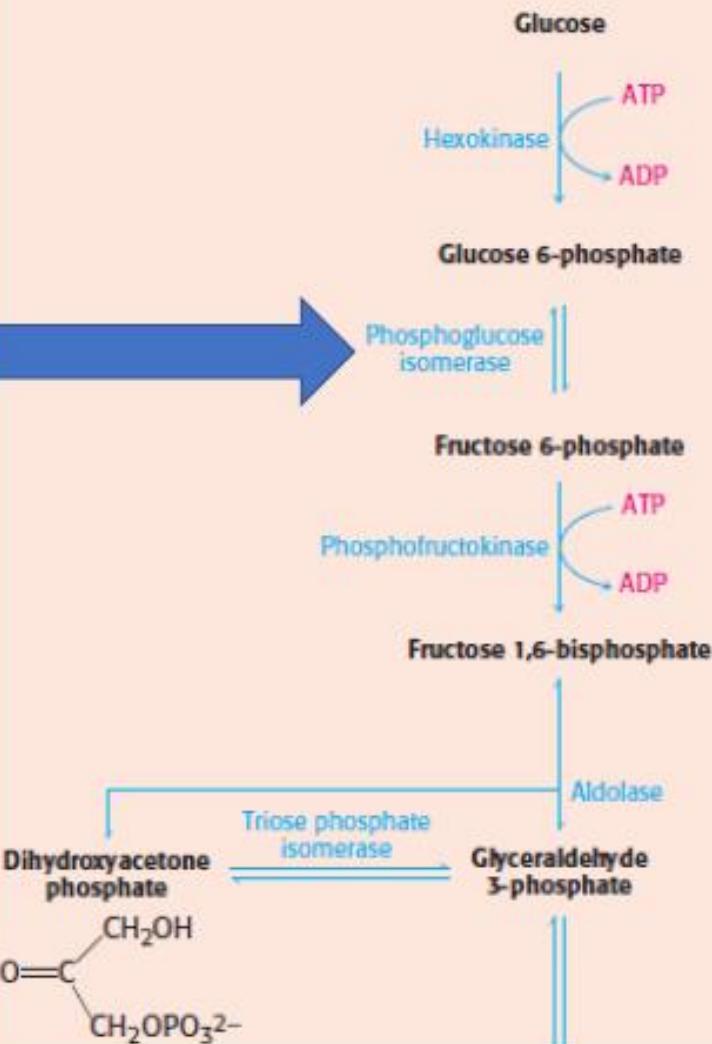


ATP

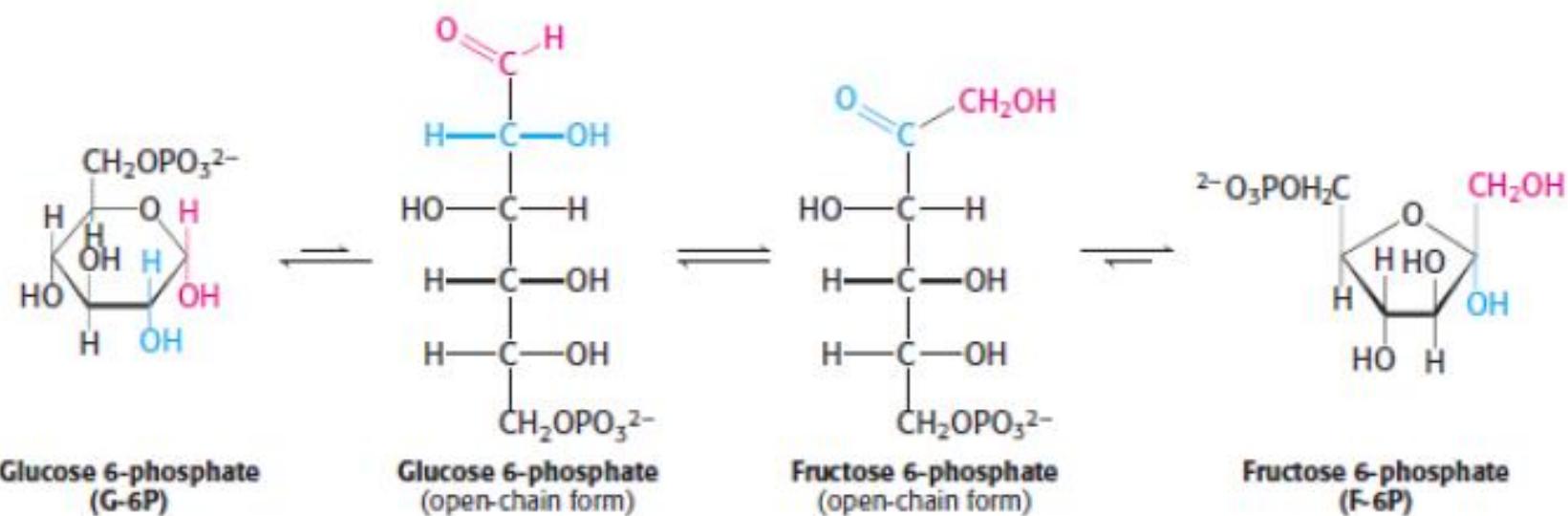




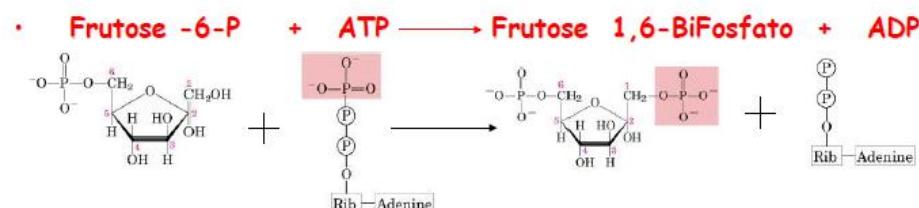
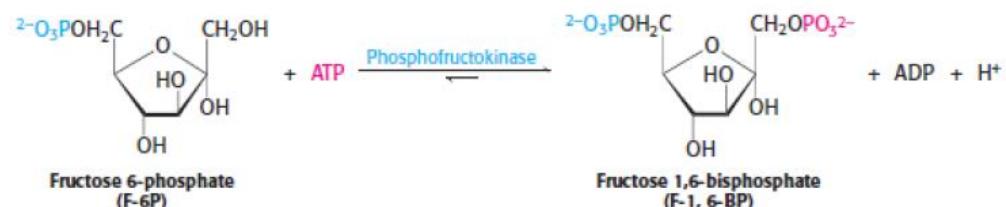
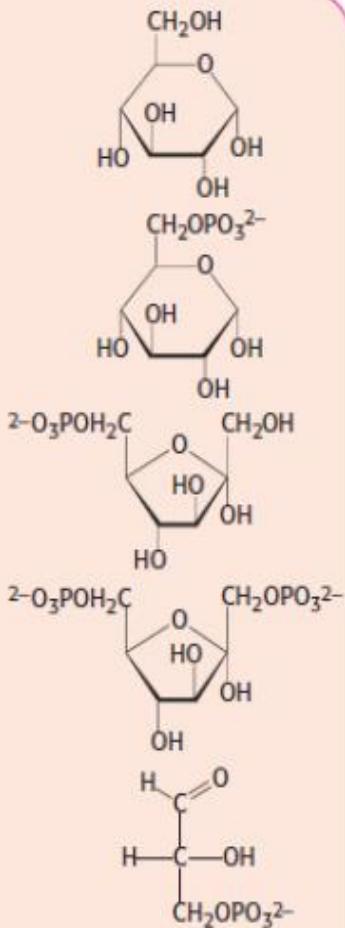
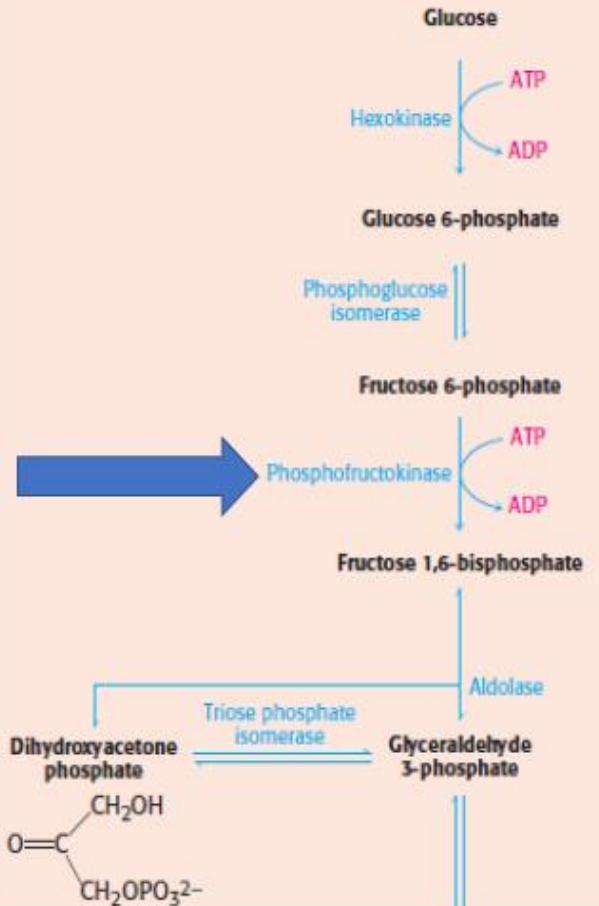
Stage 1



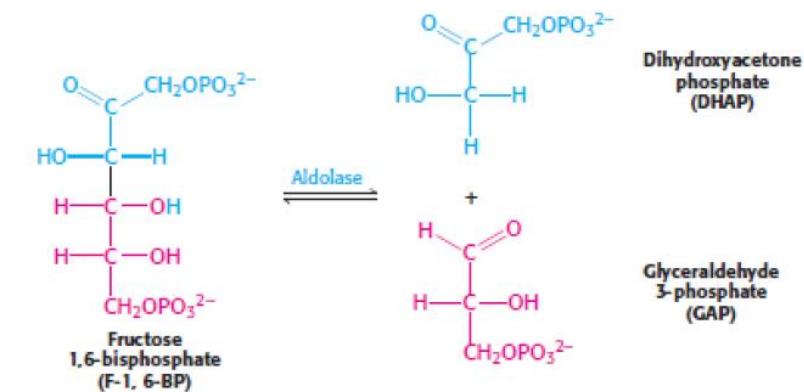
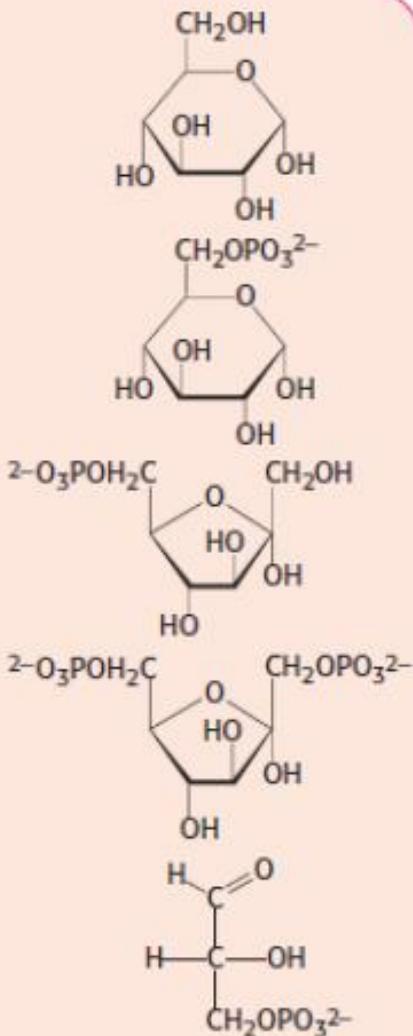
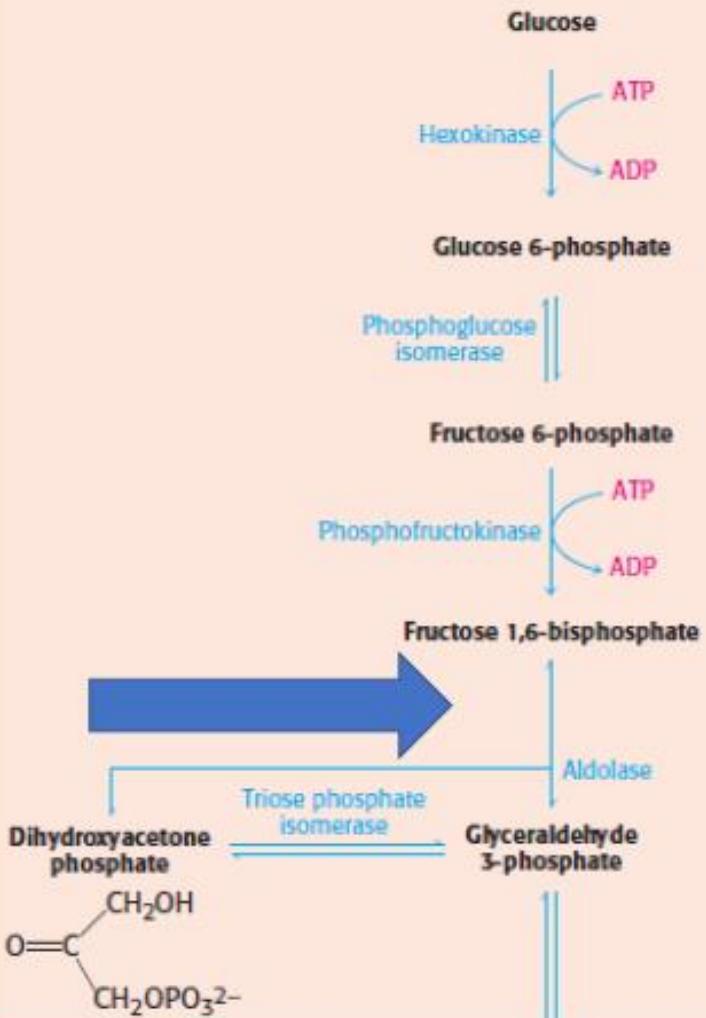
Fosfoglicose isomerase (Aldose para Cetose)



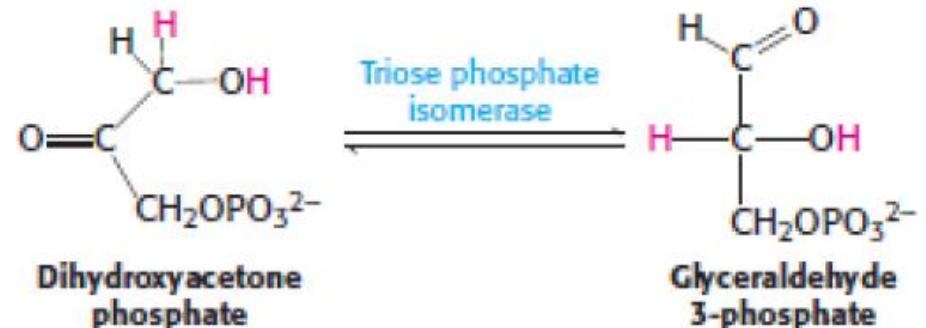
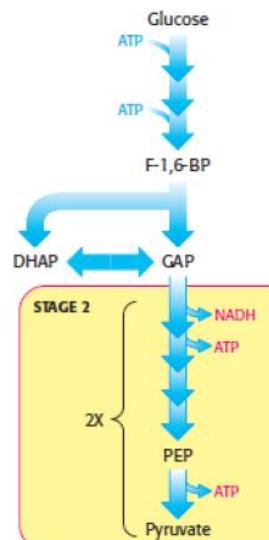
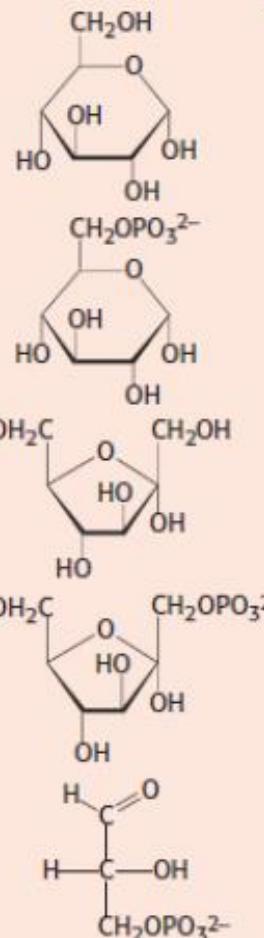
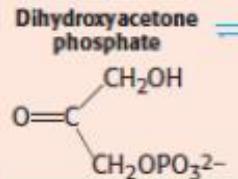
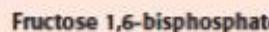
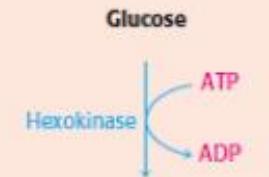
Stage 1



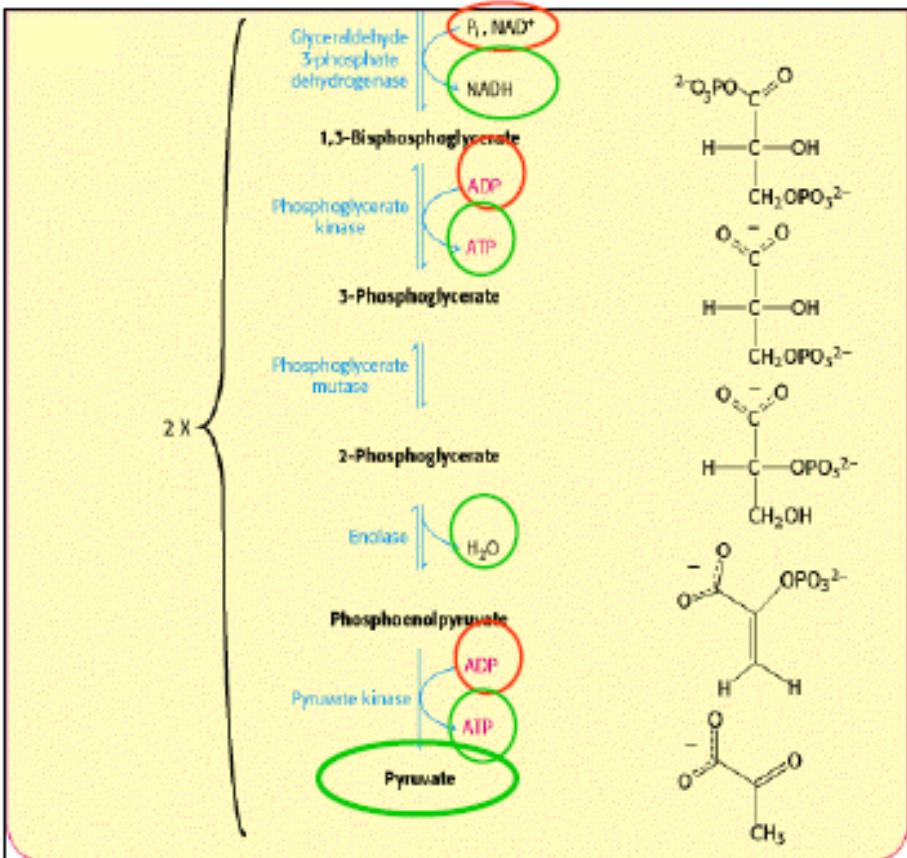
Stage 1



Stage 1

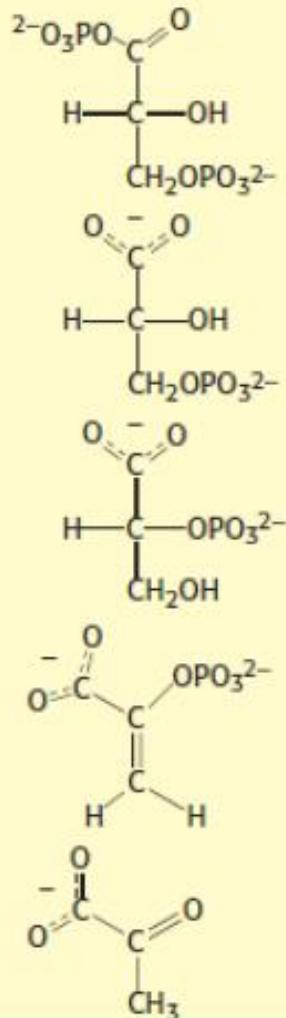
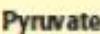
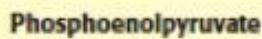
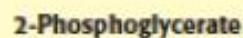
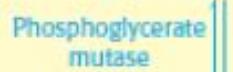
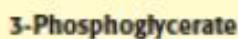
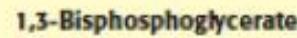
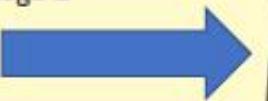


Transformação do Gliceraldeído em Piruvato



Fase compensatória

Stage 2



Dinucleótido de nicotinamida e adenina

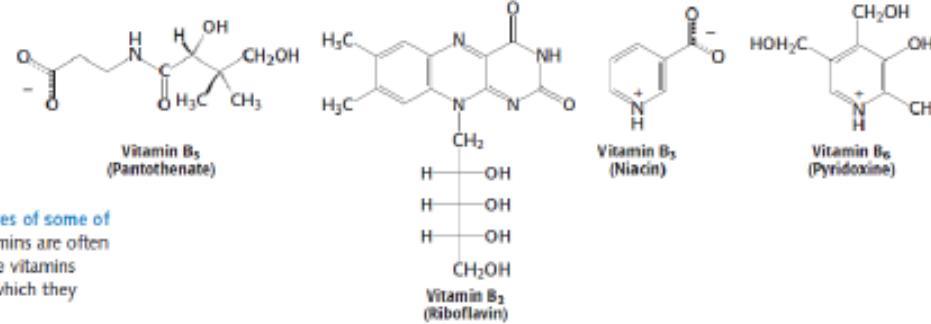
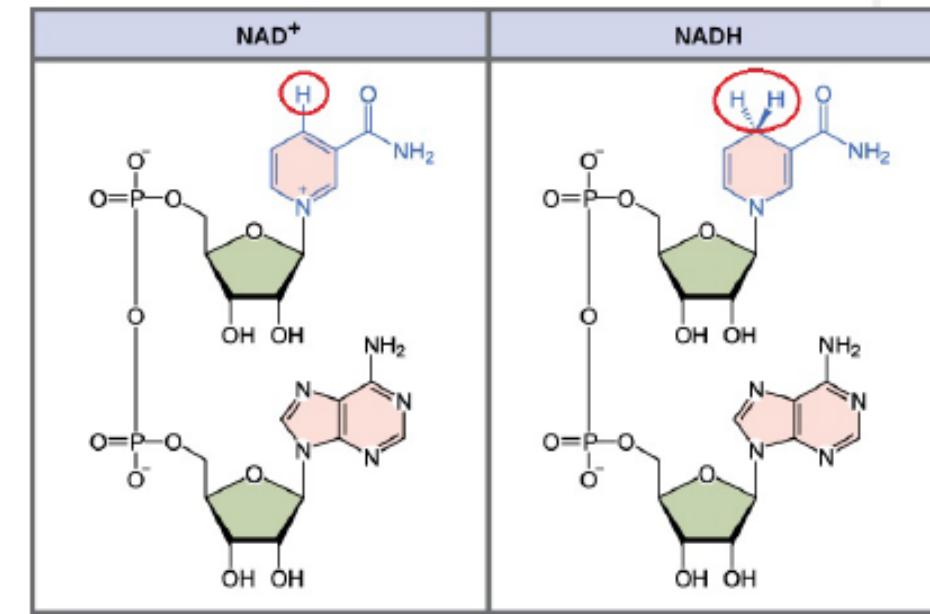
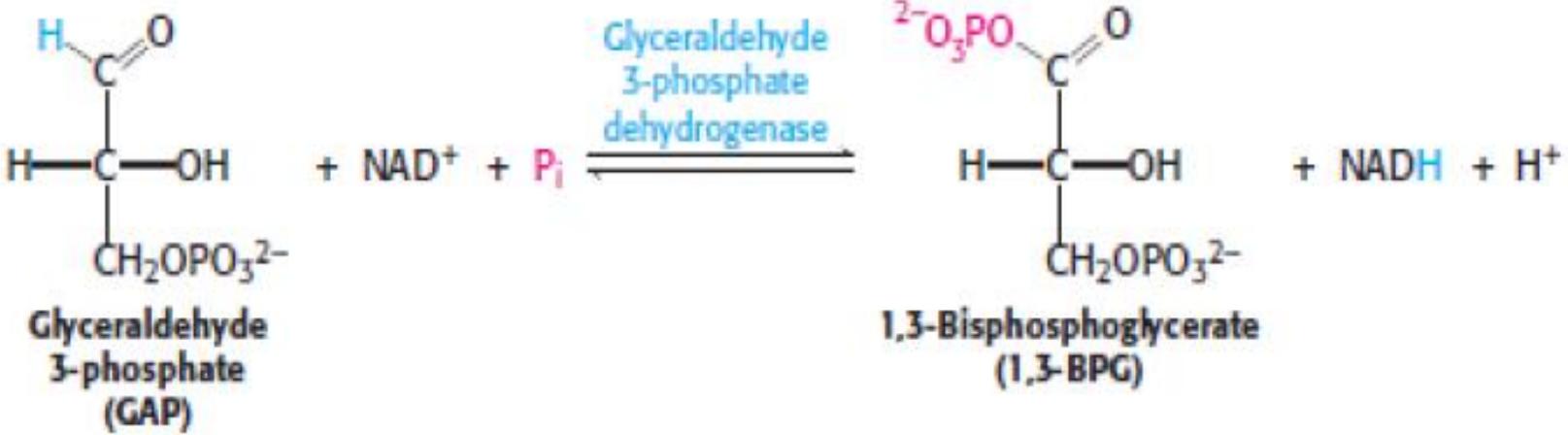


FIGURE 15.17 Structures of some of the B vitamins. These vitamins are often referred to as water-soluble vitamins because of the ease with which they dissolve in water.

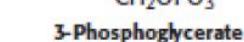
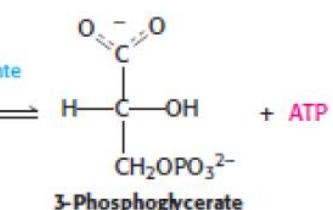
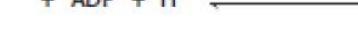
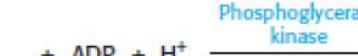
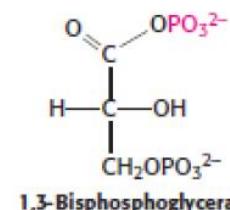
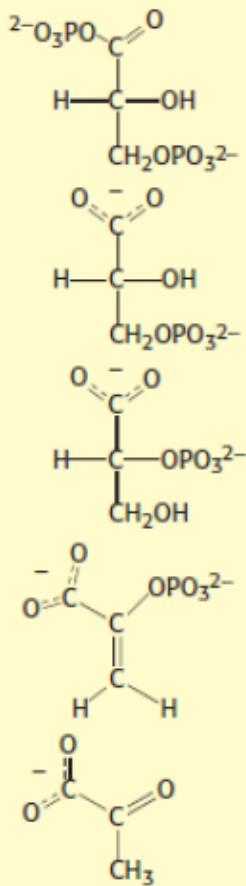
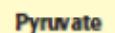
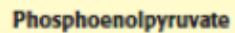


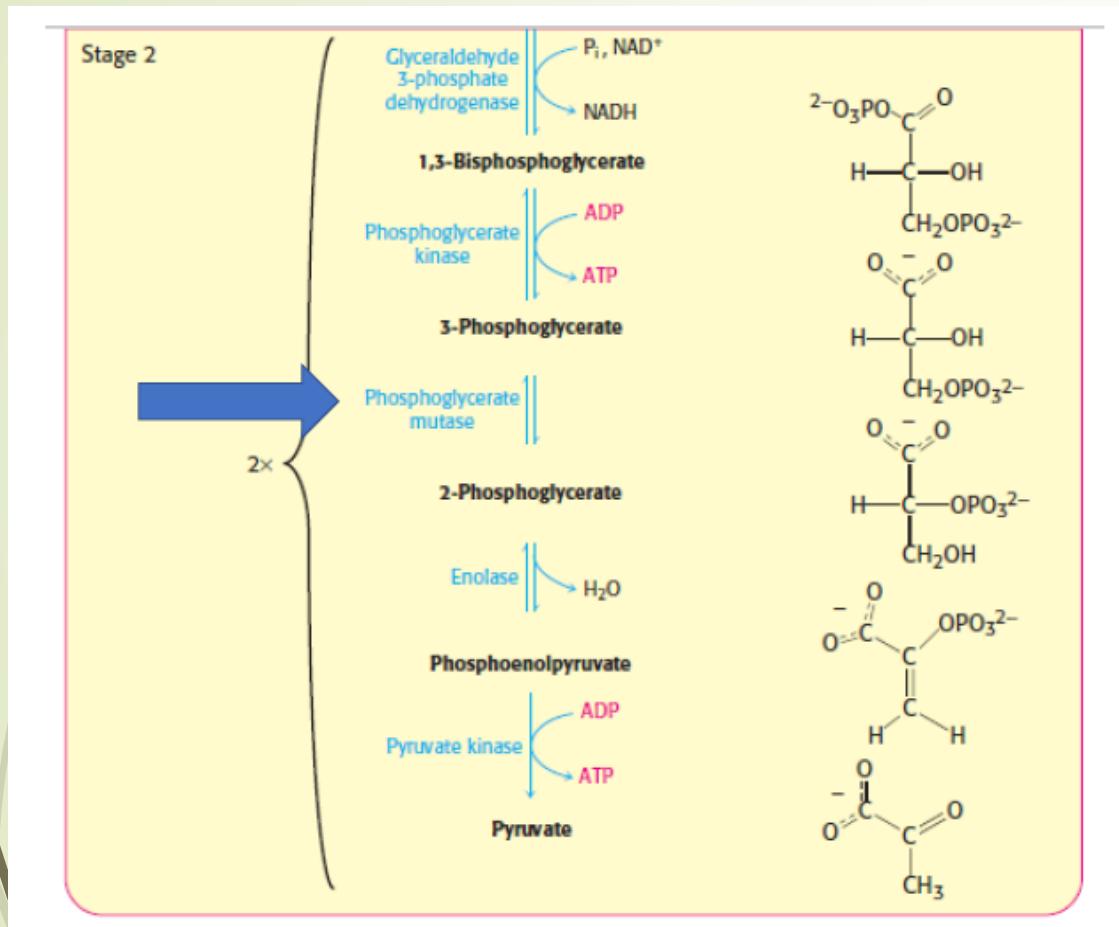


Stage 2

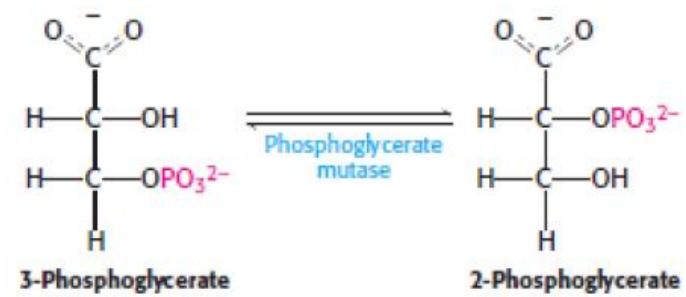


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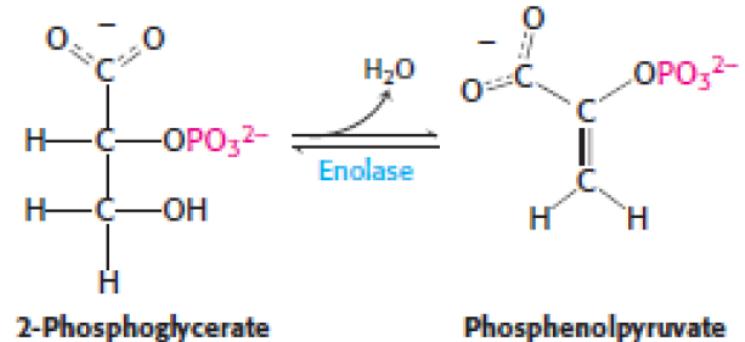
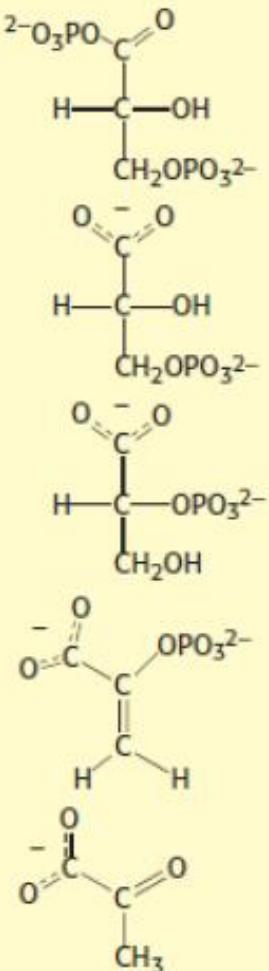
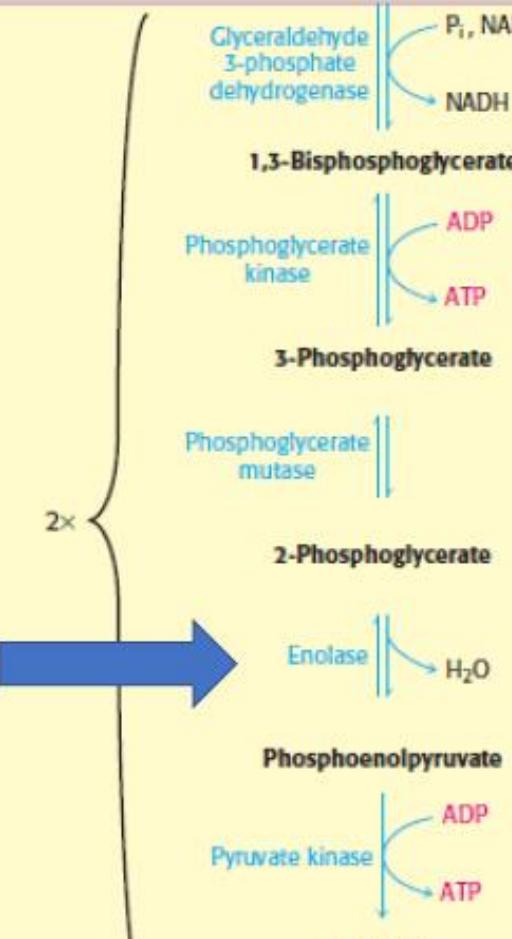




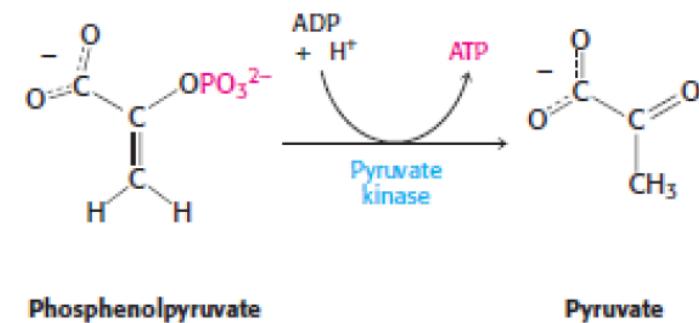
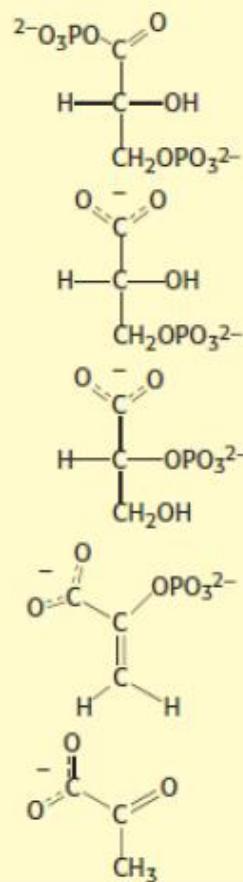
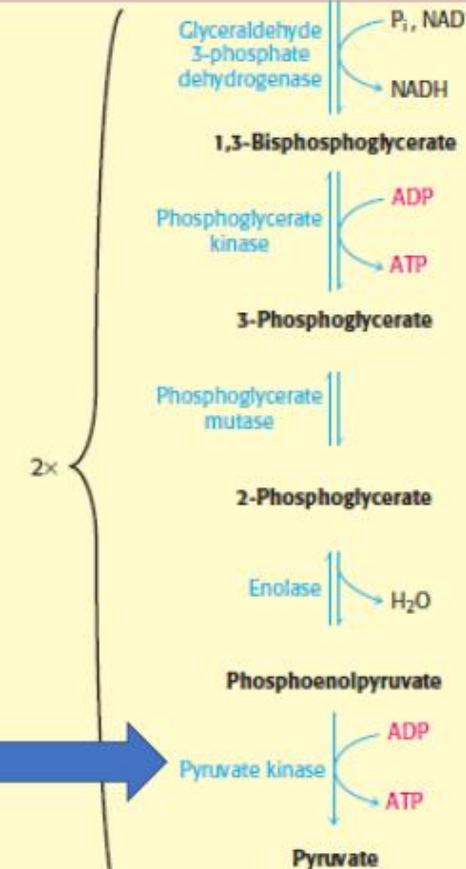
"Mutase", muda o Grupo Fosfato de Posição dentro da Molécula



Stage 2



Stage 2



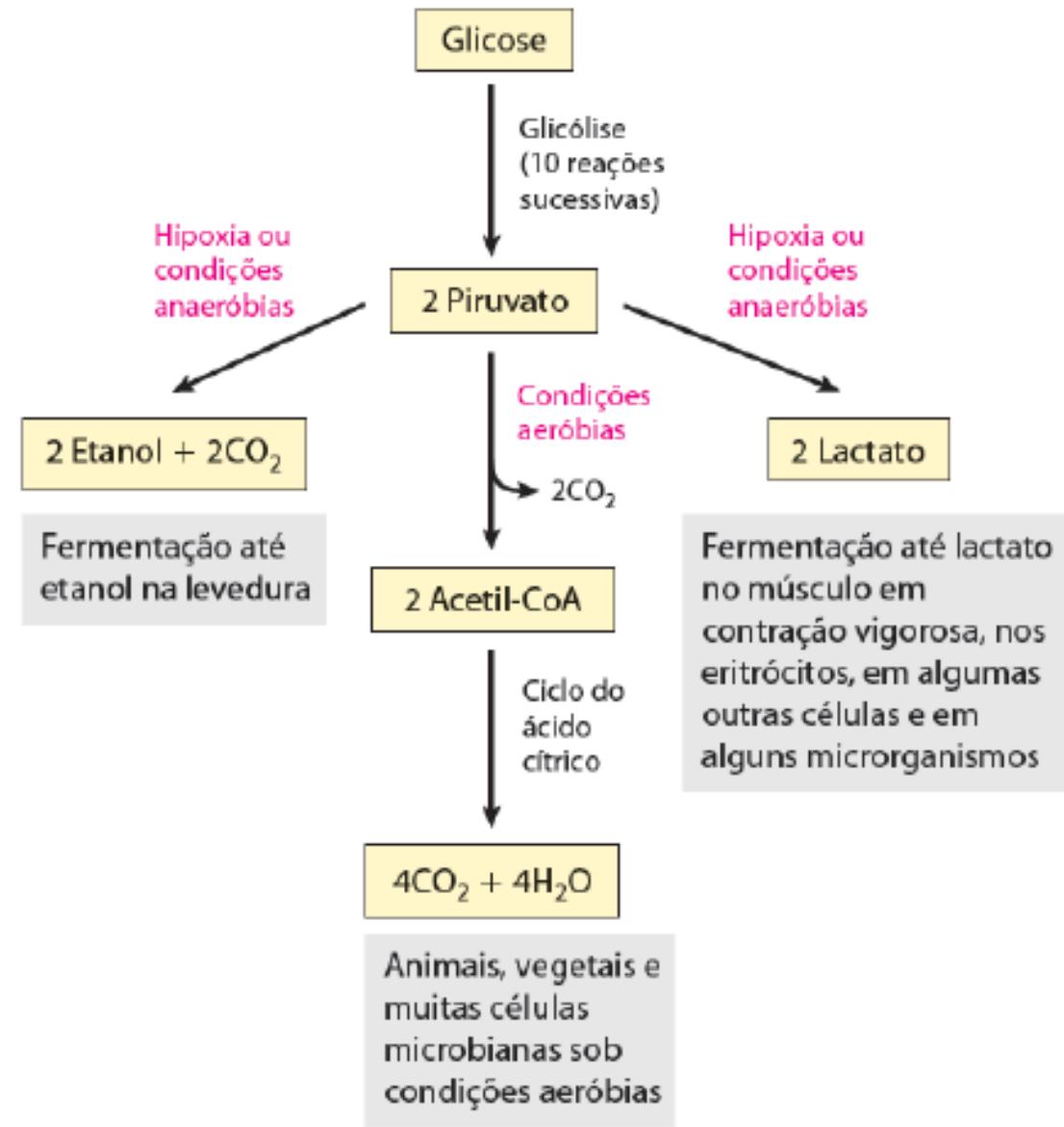
- Reacção Exorgónica Irreversível
- Transferencia do Grupo Fosfato do Fosfoenolpiruvato para o ADP

TABELA 14-2 Variação de energia livre das reações glicolíticas em eritrócitos

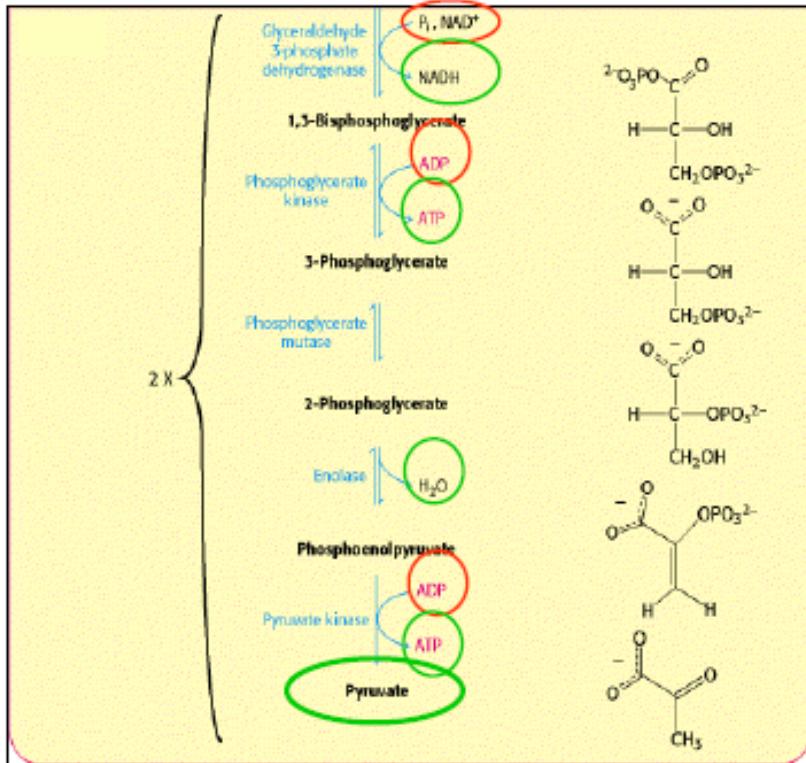
Etapa da reação glicolítica	ΔG° (kJ/mol)	ΔG (kJ/mol)
① Glicose + ATP \longrightarrow glicose-6-fosfato + ADP	-16,7	-33,4
② Glicose-6-fosfato \rightleftharpoons frutose-6-fosfato	1,7	0 a 25
③ Frutose-6-fosfato + ATP \longrightarrow frutose-1,6-bifosfato + ADP	-14,2	-22,2
④ Frutose-1,6-bifosfato \rightleftharpoons di-hidroxiacetona-fosfato + gliceraldeído-3-fosfato	23,8	-6 a 0
⑤ Di-hidroxiacetona-fosfato \rightleftharpoons gliceraldeído-3-fosfato	7,5	0 a 4
⑥ Gliceraldeído-3-fosfato + P _i + NAD ⁺ \rightleftharpoons 1,3-bifosfoglicerato + NADH + H ⁺	6,3	-2 a 2
⑦ 1,3-Bifosfoglicerato + ADP \rightleftharpoons 3-fosfoglicerato + ATP	-18,8	0 a 2
⑧ 3-Fosfoglicerato \rightleftharpoons 2-fosfoglicerato	4,4	0 a 0,8
⑨ 2-Fosfoglicerato \rightleftharpoons fosfoenolpiruvato + H ₂ O	7,5	0 a 3,3
⑩ Fosfoenolpiruvato + ADP \longrightarrow piruvato + ATP	-31,4	-16,7

Nota: ΔG° é a variação de energia livre padrão, como definido no Capítulo 13 (p. 507-508). ΔG é a variação de energia livre calculada a partir das concentrações reais dos intermediários glicolíticos presentes em condições fisiológicas nos eritrócitos, em pH 7. As reações glicolíticas de contorno da gliconeogênese estão mostradas em vermelho. As equações bioquímicas não são necessariamente equilibradas para H ou carga (p. 517).

Destinos do piruvato

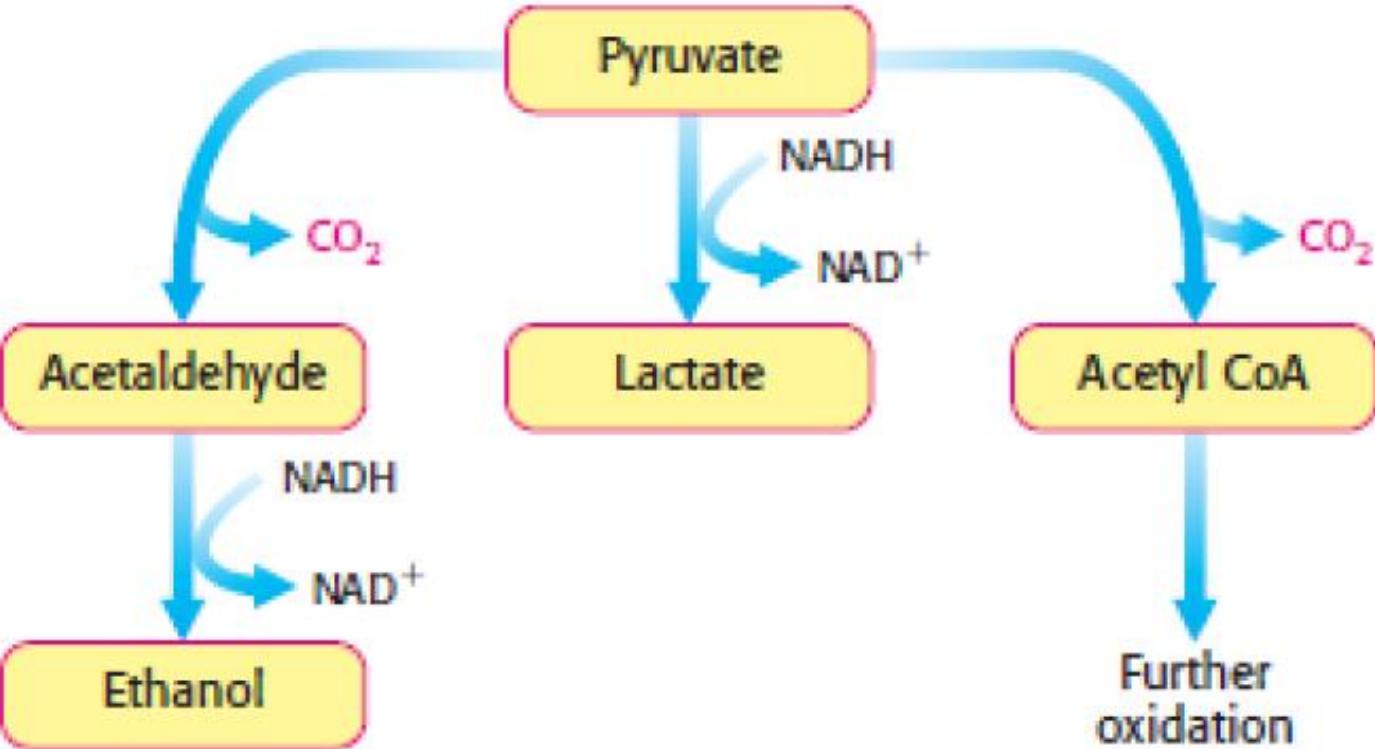


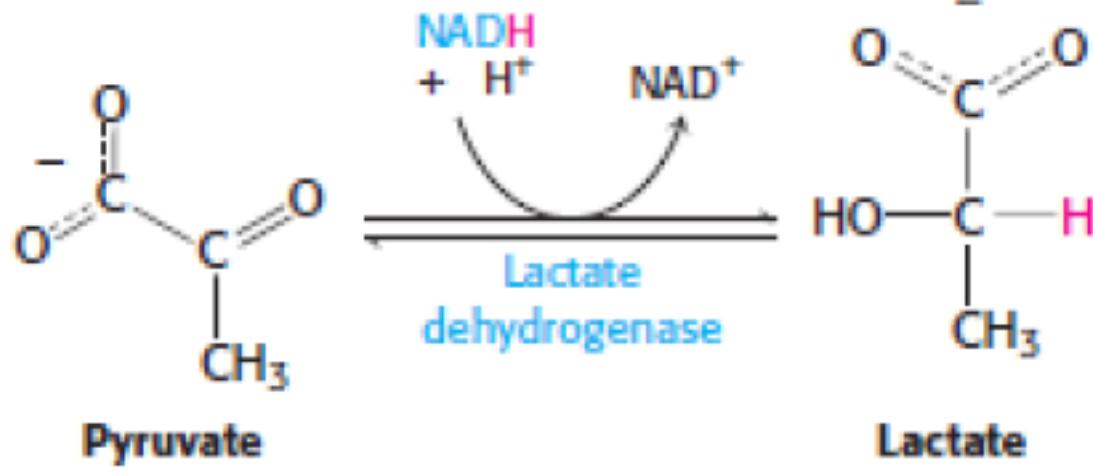
Transformação do Gliceraldeído em Piruvato

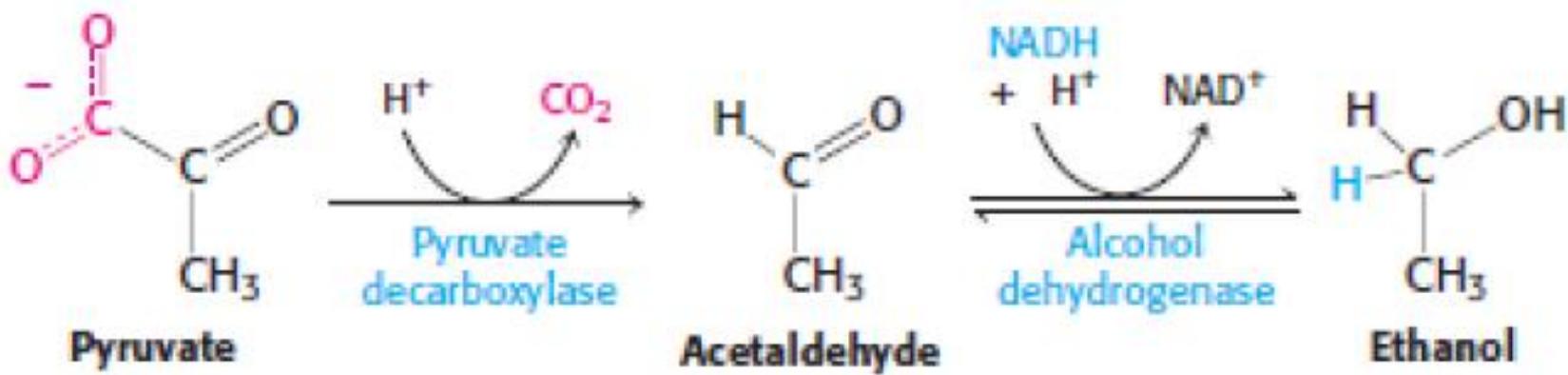


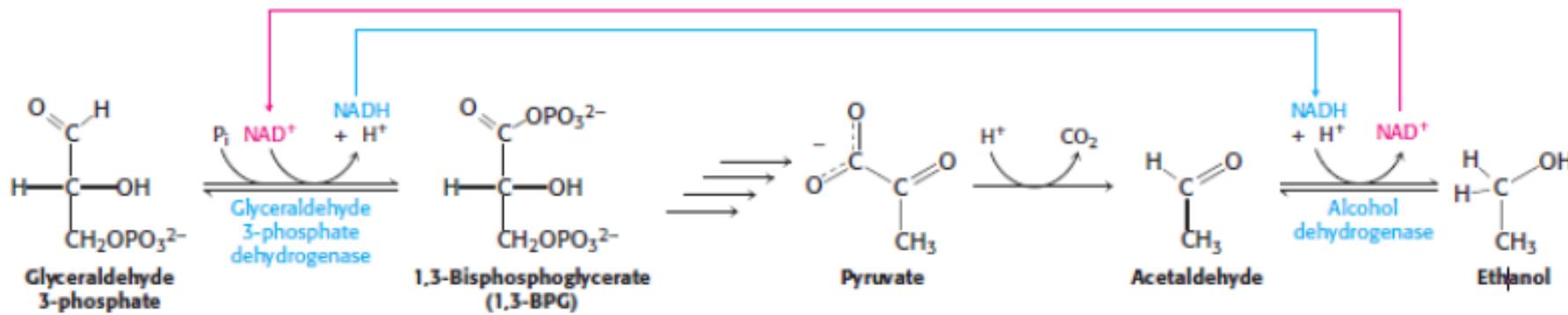
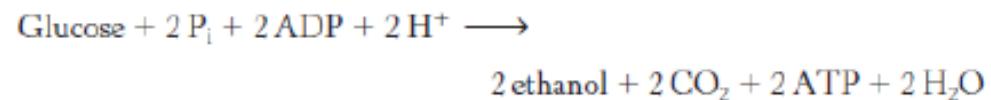
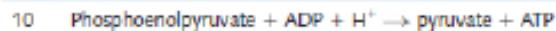
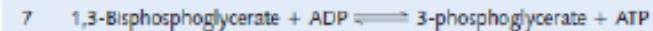
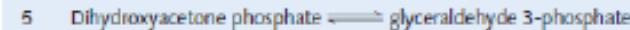
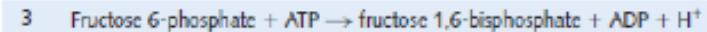
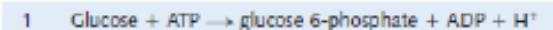
Fase compensatória
Requer NAD⁺

De onde vem o NAD⁺?











- 1 Glucose + ATP \rightarrow glucose 6-phosphate + ADP + H⁺
- 2 Glucose 6-phosphate \rightleftharpoons fructose 6-phosphate
- 3 Fructose 6-phosphate + ATP \rightarrow fructose 1,6-bisphosphate + ADP + H⁺
- 4 Fructose 1,6-bisphosphate \rightleftharpoons dihydroxyacetone phosphate + glyceraldehyde 3-phosphate
- 5 Dihydroxyacetone phosphate \rightleftharpoons glyceraldehyde 3-phosphate
- 6 Glyceraldehyde 3-phosphate + P_i $\xrightarrow{\text{NAD}^+}$ 1,3-bisphosphoglycerate \leftarrow NADH + H⁺
- 7 1,3-Bisphosphoglycerate + ADP \rightleftharpoons 3-phosphoglycerate + ATP
- 8 3-Phosphoglycerate \rightleftharpoons 2-phosphoglycerate
- 9 2-Phosphoglycerate \rightleftharpoons phosphoenolpyruvate + H₂O
- 10 Phosphoenolpyruvate + ADP + H⁺ \rightarrow pyruvate + ATP

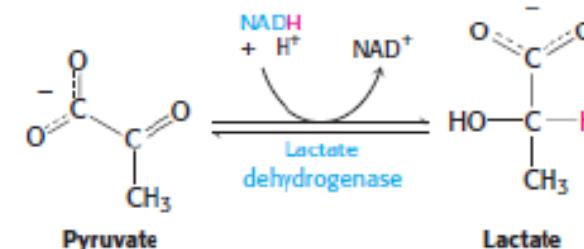


TABLE 16.2 Examples of pathogenic obligate anaerobes

Bacterium	Result of infection
<i>Clostridium tetani</i>	Tetanus (lockjaw)
<i>Clostridium botulinum</i>	Botulism (an especially severe type of food poisoning)
<i>Clostridium perfringens</i>	Gas gangrene (gas is produced as an end point of the fermentation, distorting and destroying the tissue)
<i>Bartonella hensela</i>	Cat scratch fever (flu-like symptoms)
<i>Bacteroides fragilis</i>	Abdominal, pelvic, pulmonary, and blood infections

TABLE 16.3 Starting and ending points of various fermentations

Glucose	→ Lactate
Lactate	→ Acetate
Glucose	→ Ethanol
Ethanol	→ Acetate
Arginine	→ Carbon Dioxide
Pyrimidines	→ Carbon Dioxide
Purines	→ Formate
Ethylene glycol	→ Acetate
Threonine	→ Propionate
Leucine	→ 2-Alkylacetate
Phenylalanine	→ Propionate

Note: The products of some fermentations are the substrates for others.

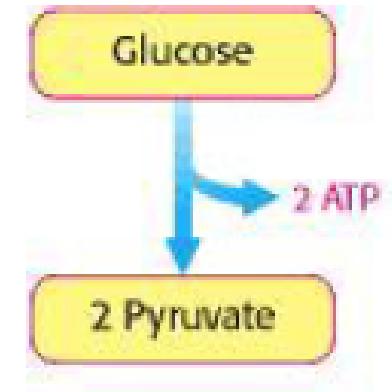
Controle Da Glicólise

A necessidade glicolítica varia de acordo com os diferentes estados fisiológicos

Há uma ativa degradação deste açúcar após uma refeição rica em carboidratos, assim como uma acentuada redução durante o Jejum.

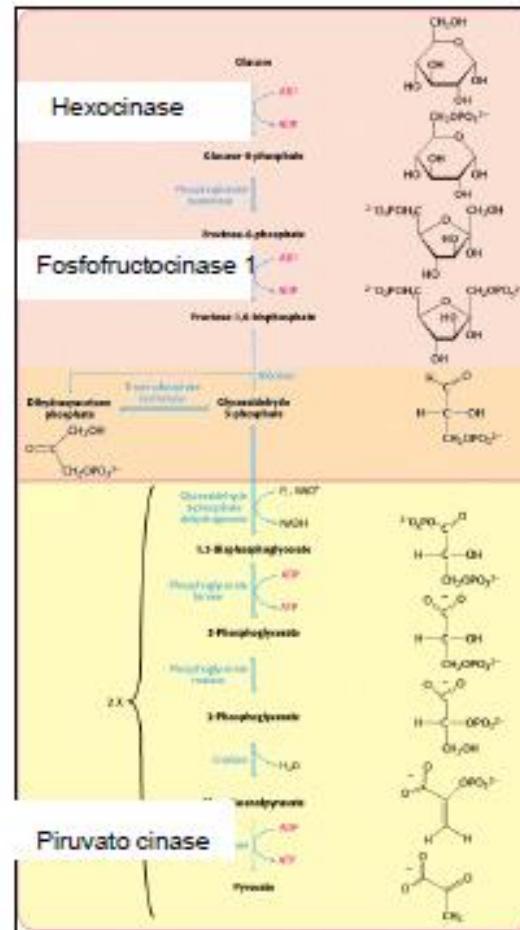
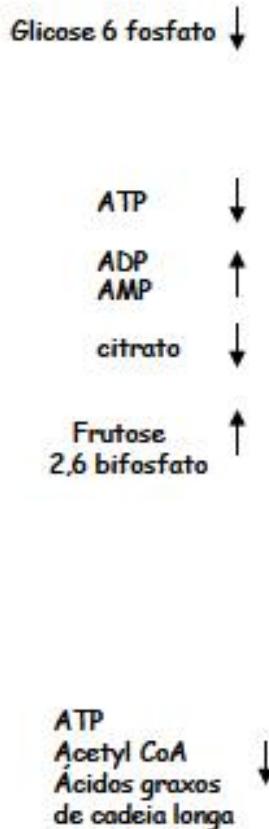
Deste Modo, o grau de conversão de Glicose para o Piruvato é regulado, por forma a satisfazer as necessidades celulares

Controle Da Glicólise

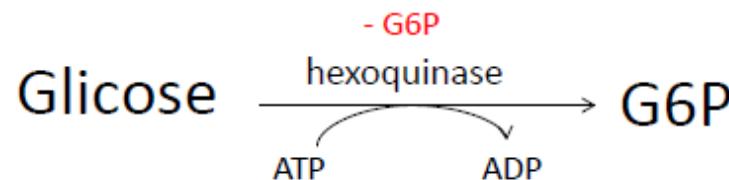
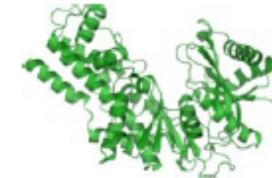


- O Controle a Longo Prazo da Glicólise, particularmente no fígado, é efetuado à partir de alterações na quantidade de enzimas glicolíticas.
- O Controlo a Curto Prazo é feito por alteração alostérica (concentração de produtos) reversível das enzimas e também pela sua fosforilação.

As enzimas mais propensas a serem locais de controle são as que catalisam as reações irreversíveis
Regulação alostérica destas enzimas



Hexoquinase / Glicoquinase

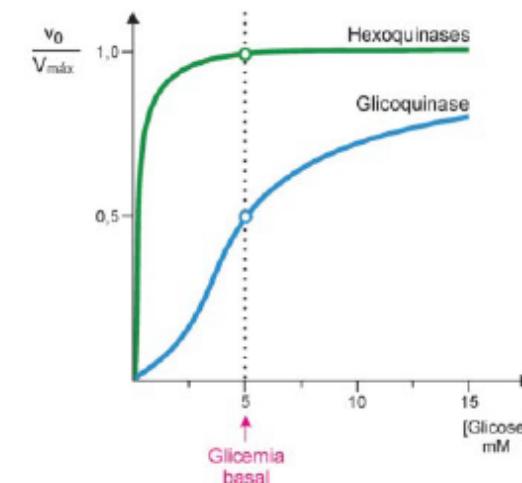


Hexoquinase: $K_m = 0,1 \text{ mM}$

Hexoquinase IV ou Glicoquinase (fígado): $K_m = 10 \text{ mM}$

[Glicoquinase] aumenta com insulina

Glicoquinase não é inibida por G6P



Fosfofrutoquinase

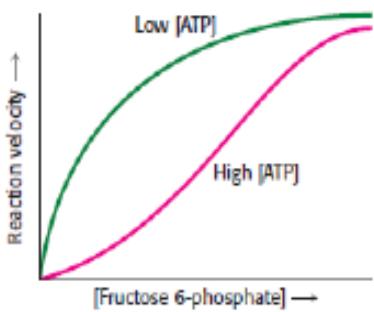
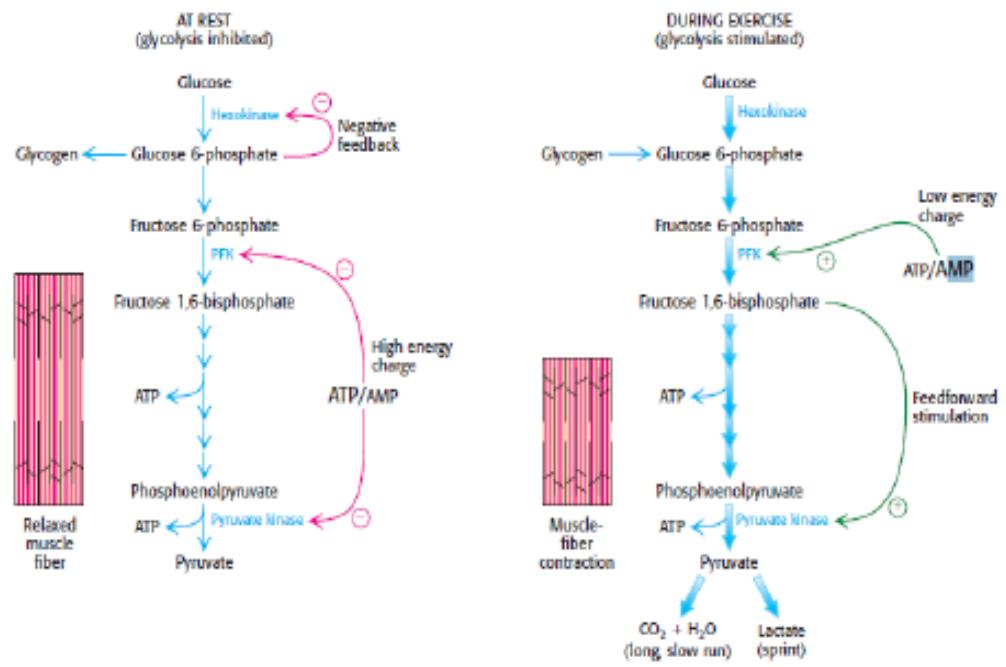
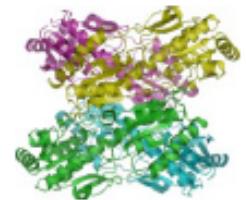


FIGURE 16.16 Allosteric regulation of phosphofructokinase. A high level of ATP inhibits the enzyme by decreasing its affinity for fructose 6-phosphate.

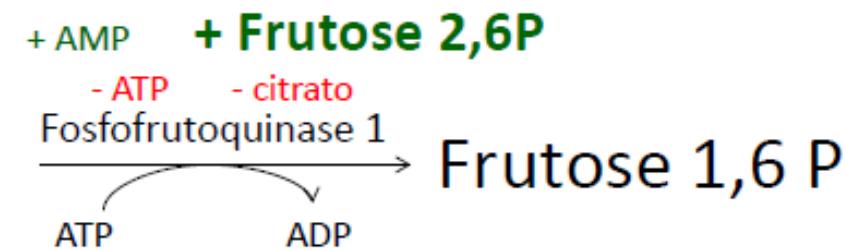


Fosfofrutoquinase 1

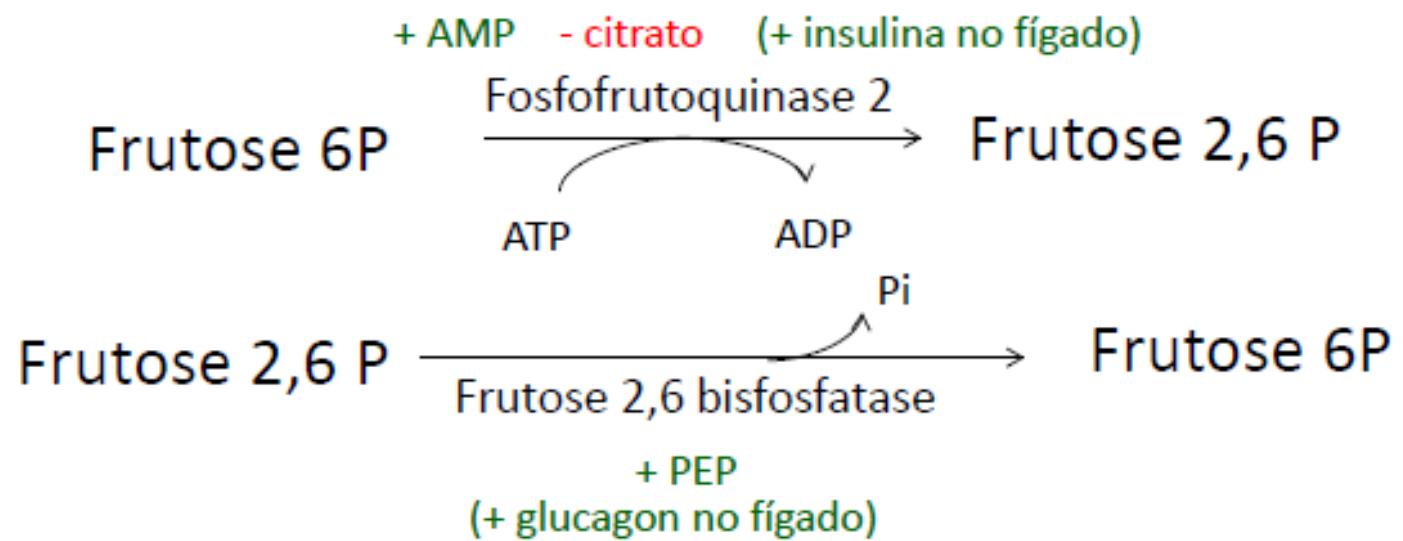


ATP
ADP
AMP
citrato
Frutose 2,6 bifosfato

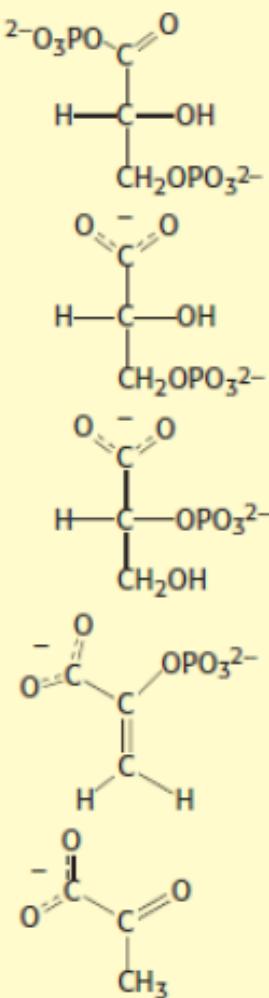
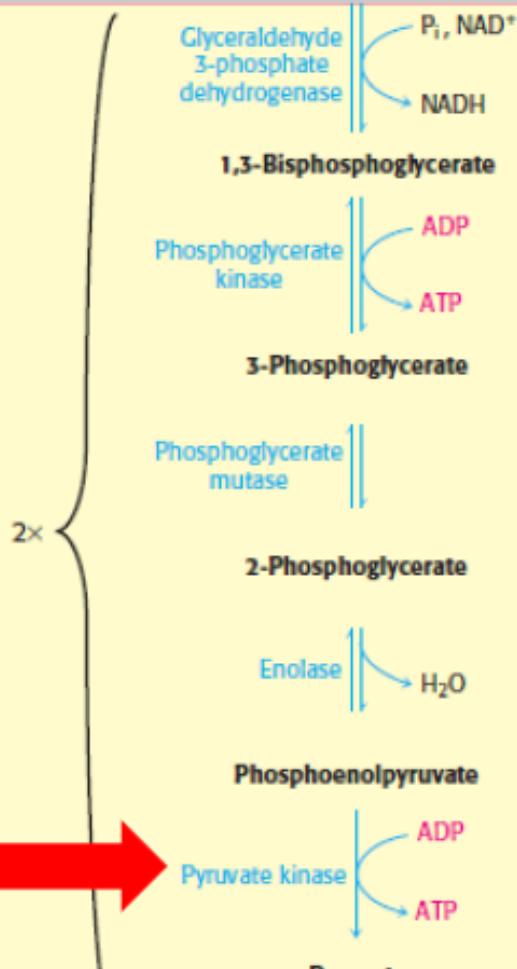
Frutose 6P



Fosfofrutoquinase 2

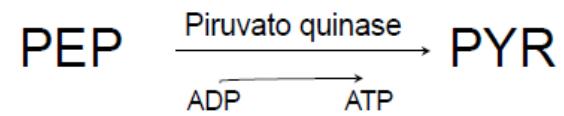


Stage 2



Piruvato Quinase

(+ insulina no figado) (- glucagon no figado)
- alanina (no figado) - ATP
+ Frutose 1,6P



A insulina aumenta a conc. e atividade da piruvato quinase

Alguns tecidos dependem da glicose como única fonte de energia

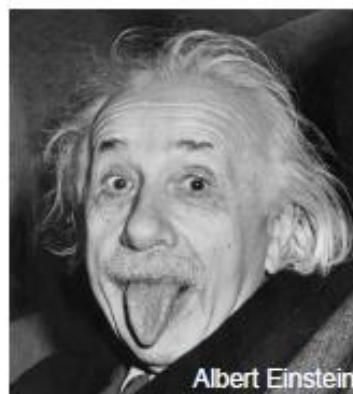
Hemáceas utilizam exclusivamente glicose para a produção de ATP (não tem mitocôndrias).
Produzem lactate constantemente

Músculo utiliza preferencialmente a glicose/glicogênio durante exercício físico intenso.

O cérebro utiliza grandes quantidades de glicose.



hemáceas



Albert Einstein



Usain Bolt

Intolerância a Lactose

