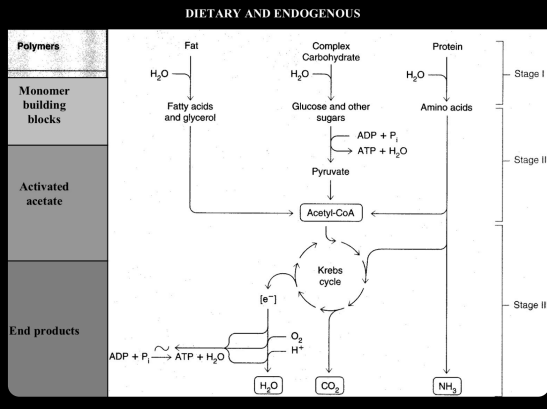
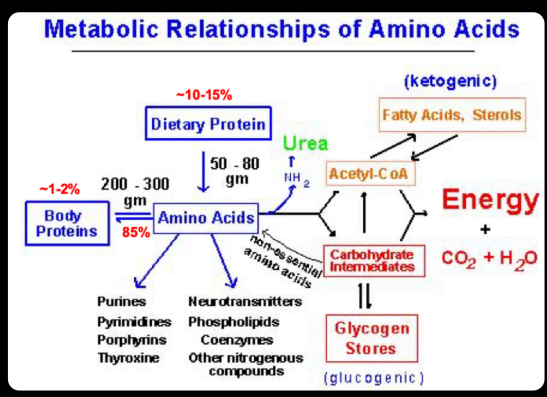
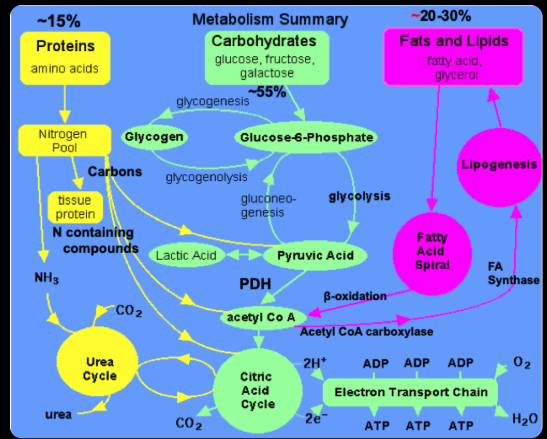
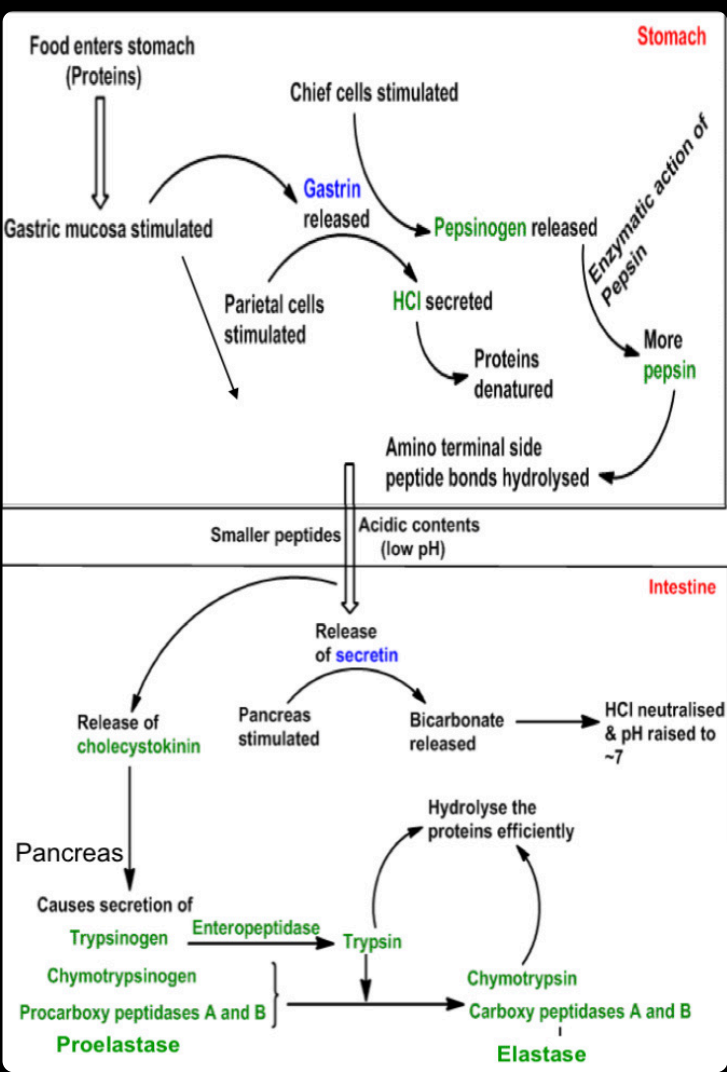


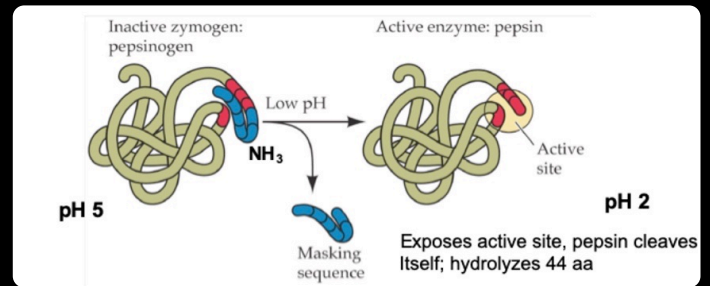
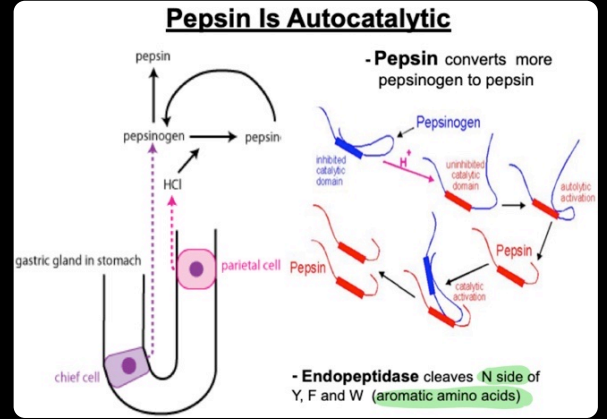
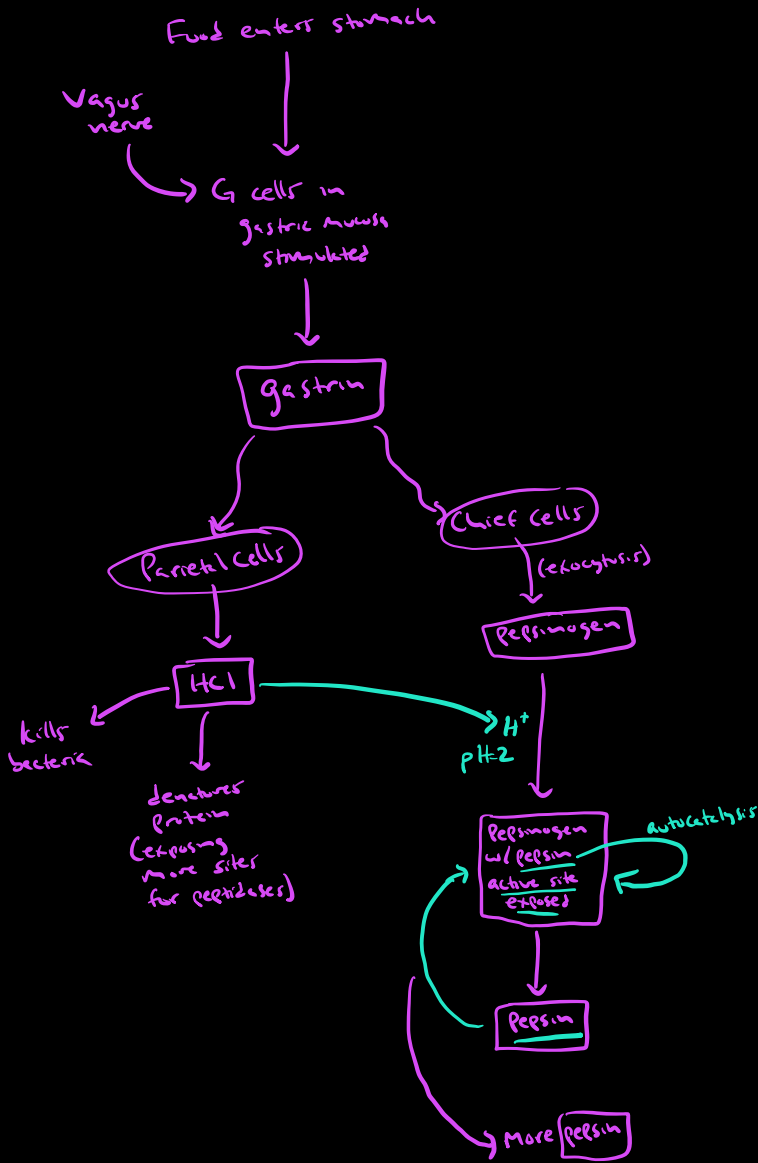
Pathway overview & proteolytic enzymes



Proteolytic Enzymes in GI tract

Enzyme	Zymogen (Inactive form)	Activated by:	Site of Synthesis	Site of Action	Optimum pH	
Endopeptidases - cleave within peptide @ specific AAs	Pepsin	pepsinogen	HCl, Pepsin (autocatalytic)	Stomach epithelium (Chief cells)	Stomach	2
	Chymotrypsin	Chymotrypsinogen	Trypsin	Pancreas	Intestine	7-8
	Trypsin	Trypsinogen	Enteropeptidase, Trypsin (autocatalytic)	Pancreas	Intestine	7-8
	Elastase	Proelastase	Trypsin	Pancreas	Intestine	7-8
Exopeptidases - cleave AA @ Carboxy or amino term.	Carboxypeptidase	ProCarboxypeptidase	Trypsin, Zn <sup>2+</sup>	Pancreas	Intestine	8
	Aminopeptidase	(X)	Mn <sup>2+</sup>	Intestine	Intestine	8-9

# Stomach



## Pepsin

- endopeptidase that cleaves longer polypeptides w/ large hydrophobic AAs
- cleaves @ N-term side of AA
- Tyr
- Phe
- Trp

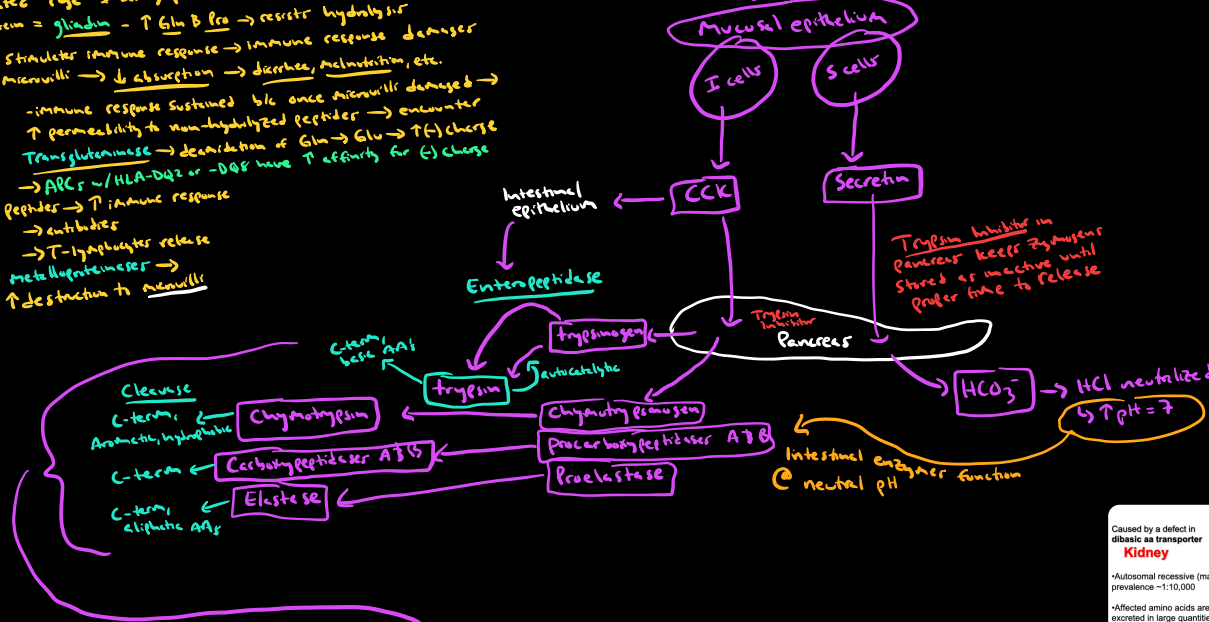
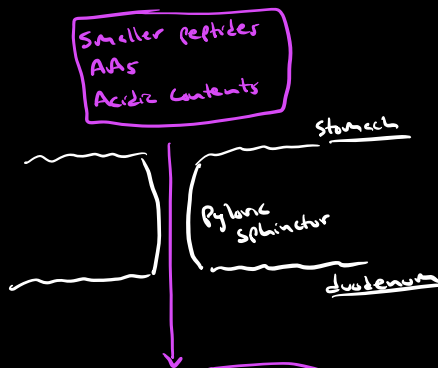
# Pancreas & Intestine (lumen & brush border)

## - Acute pancreatitis

- Premature activation of pancreatic zymogens → inflammation & self-digestion
- Trypsin → digests pancreas & activates other zymogens
- Elastase → breaks down elastic fibers in blood vessels → hemorrhage
- Phospholipase A<sub>2</sub> → Phospholipid acid → fat necrosis
- kallikrein - Ser protease → inflammation & thrombosis
- potentially caused by deficient trypsin inhibitor
- Tx: stop feeding, IV fluids, pain management

## - Celiac Disease

- Gluten-sensitive enteropathy, Celiac Sprue
- Malabsorption from inflammation injury to mucosa of small intestine after ingestion of wheat (gluten), or related rye & barley proteins
- protein = gliadin - ↑ Glu B Pro → resist hydrolysis
- stimulates immune response → immune response damages mucosa
- immune response sustained b/c once mucosa damaged → ↑ permeability to non-hydrolyzed peptides → encounter Transglutaminase → deamidation of Glu → Glu → T(-) charge
- ↑ ARCs = HLA-DQ2 or -DQ8 have ↑ affinity for (-) charge peptides → ↑ immune response
- → antibodies
- → T-lymphocyte release
- metalloproteinases → ↑ destruction to mucosa



**Cystinuria**

Caused by a defect in dibasic aa transporter

**Kidney**

Autosomal recessive (mainly), prevalence ~1:10,000

affected amino acids are excreted in large quantities (>300 mg/day) cysteine. insolubility of cysteine leads to the formation of cystine crystals at pH < 7.5

Photosensitivity, ataxia, neuropsychiatric symptoms

Treatment - low protein diet (decrease Met), low salt, maintain water diuresis

The inability to reabsorb cysteine leads to accumulation and subsequent precipitation of dibasic aa in the urinary tract.

**Cystine Stones**

**Cystine**

NC(C)C(S)C(N)C(=O)O

**Dibasic AAs**

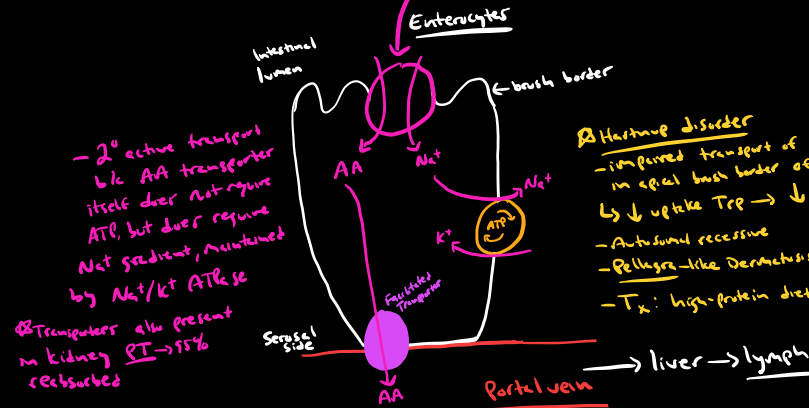
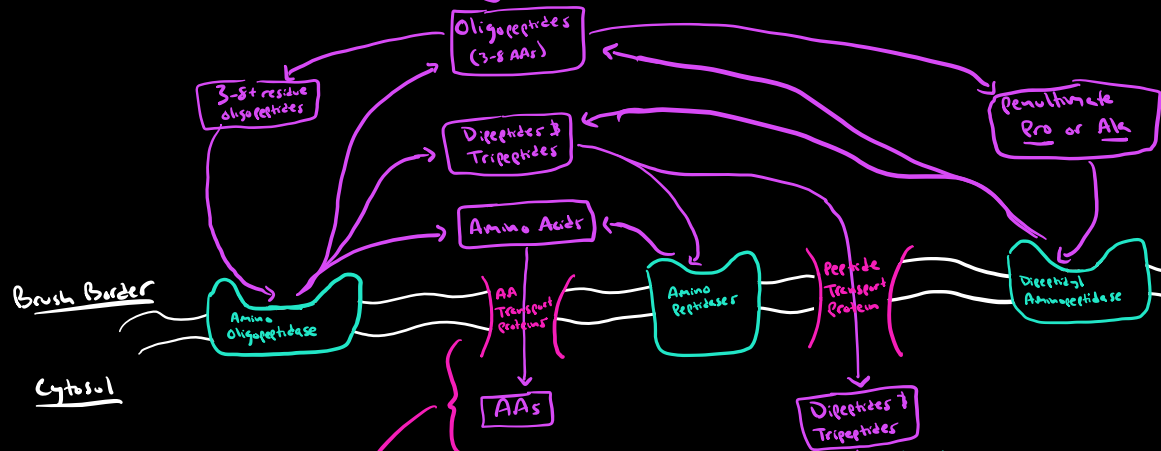
**Cysteine**

NC(C)C(S)C(N)C(=O)O

**Aspartic acid**

NC(C)C(N)C(=O)O

**Glutamic acid**

NC(C)C(N)C(=O)O


**B Hartnup disorder**

- impaired transport of neutral AAs (aromatic) in apical brush border of intestine & PT of kidney
- ↓ uptake Trp → ↓ synthesis of Niacin (B3), Serotonin, Melatonin
- Autosomal recessive
- Pellagra-like Dermatitis = Dermatitis, Diarrhea, Dementia
- Tx: high-protein diet & Niacin supplement

# Endogenous Protein Degradation (Protein $t_{1/2}$ , Lysosomal, Ubiquitination)

- 1-2% of body proteins turnover daily, 85% recycled
- Degradation = first order kinetics = proportional to [reactant]  $\rightarrow$  rate =  $k[A]$

## Protein Degradation Signals

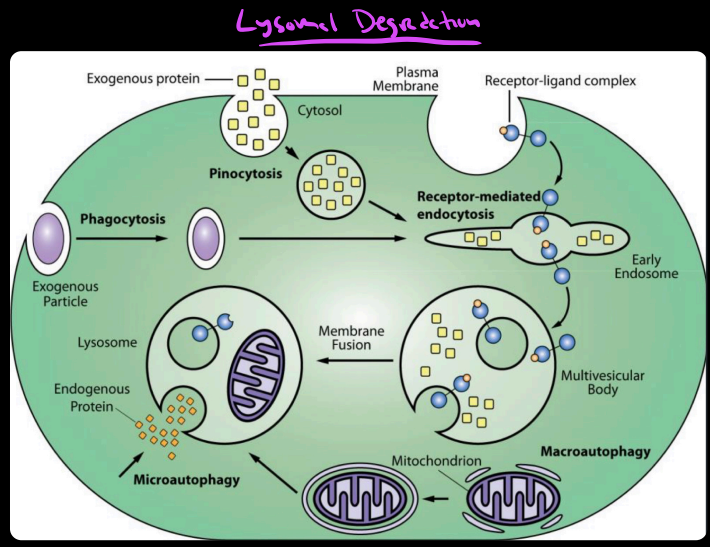
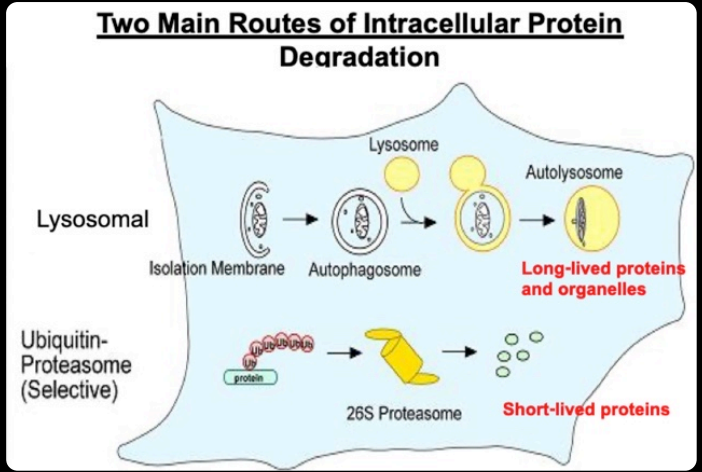
- Misfolded, abnormal
- PEST sequences
  - 12-60 residue domains,
  - $\uparrow\uparrow$  Proline (P), Glutamate (E), Serine (S), Threonine (T)
  - $t_{1/2} < 2$  hours
- N-terminal rule
  - amino terminal recognized by degradative machinery
  - Large, Charged AA's -  $t_{1/2} \leq 3$  min
    - Phe, Leu, Asp, Lys, Arg
  - Smaller AA's -  $t_{1/2} > 20$  hours
    - Met, Ser, Ala, Thr, Val, Gly

## Protein Domains

- HECT
  - Homologous to EG-AP Carboxyl Terminus
  - E6 protein of HPV 16 318
  - E6/EGAP tag E3 w/ubiquitin for degradation
- RING
  - Really Interesting New Gene
  - Zinc finger domain
- F-box
  - Found in E3 Ubiquitin Ligase adapter protein
- UBA domain
  - Ubiquitin-associated domain
- SOCS
  - Suppressors of Cytokine Signalling
  - always located @ C-terminus
  - helps target protein for ubiquitination

## Huntington's Disease

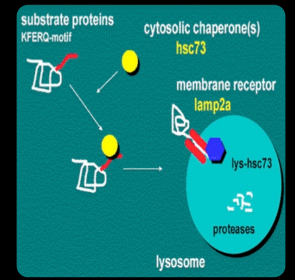
- Autosomal dominant
- mutated HTT gene, code for protein Huntington
  - $\hookrightarrow$  mutation causes  $\uparrow$  CAG repeats
  - $\hookrightarrow$  abnormally long version of Huntington protein
- mutated Huntington sticks to inner layer of autophagosomes
  - $\hookrightarrow$  prevents autophagosomes from gathering "garbage"
  - $\hookrightarrow$  autophagosomes arrive @ lysosomes empty
  - $\hookrightarrow$  accumulation of junk that should have been degraded



- Microautophagy - direct sequestration of cytosolic components via invagination in lysosomal membrane
- Macroautophagy - entire organelle (e.g., mitochondria)
  - Phagophore assembles/expands by acquiring membranes from intracellular organelles/external proteins
  - $\hookrightarrow$  phagophore expansion forms autophagosome
  - = entire organelle sequestered within another double membrane
  - $\hookrightarrow$  autophagosome fuses w/ lysosome  $\rightarrow$  autolysosome
  - $\hookrightarrow$  degradation

## Chaperone-mediated autophagy

- during periods of nutritional or oxidative stress, body first selectively degrades nonvital proteins containing KFERQ motif
  - Lys, Phe, Glu, Arg, Gln
- In cytosol, Hsc73 binds KFERQ
  - $\hookrightarrow$  Hsc73/protein complex binds to lysosome receptor Lamp2a (lysosome-associated membrane protein)



**Huntington's Disease: Mutated Huntingtin Disrupts Lysosomal Function**

**Normal**

**Huntington's Disease**

**HD - Degeneration of nerve cells**

Huntingtin - exact function unknown; important role in nerve cells; mutation - CAG repeat

Mutated huntingtin sticks to inside of autophagosomes, preventing their function

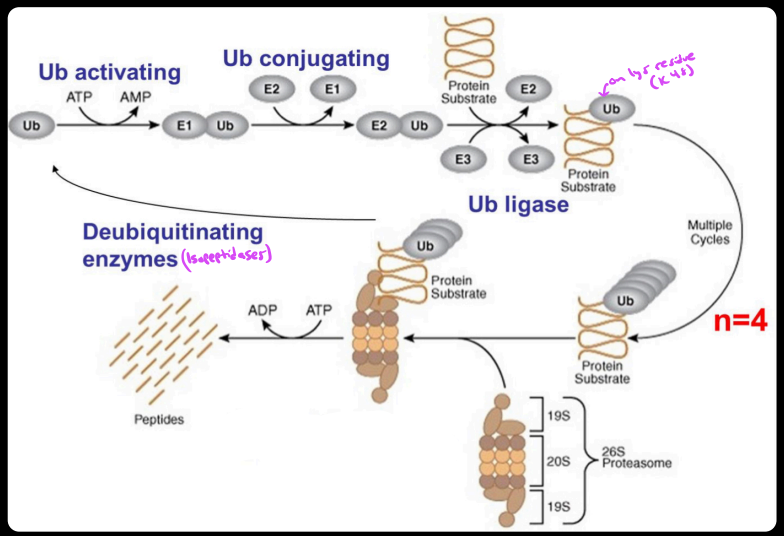
Leads to accumulation of dysfunctional mitochondria and protein aggregates

Trends in Neuroscience 2014



# Ubiquitin-Proteasome Pathway

- 80% of cellular proteins degraded via ubiquitin (Ub) pathway
- Involved in degradation of abnormal OR short-lived proteins
- located in cytosol and nucleus
- Ub tags proteins via
  - N-end rule
  - PEST sequences
  - degradation domains
- Proteins degraded via 26S proteasome
  - 2 outer 19S subunits
    - Recognizes polyubiquitinated proteins
  - Deubiquitination via isopeptidases
    - ATPases - unfold proteins to allow it to fit into proteolytic core
  - 1 20S subunit - Catalytic
    - proteolytic core where protein degradation occurs
    - several enzymes
      - Chymotrypsin-like
      - Trypsin-like
      - (peptidylglutamyl)-peptide hydrolase-like
      - degrade substrate
- 26S proteasome assembly = ATP-dependent



## E1: Ubiquitin Activating Enzyme

- Utilizes ATP to activate Ub (mammals 2 enzymes)
  - Initial step involves production of Ub-adenylate intermediate
- Ub is then transferred to Cys of Ub Activating Enzyme (E1)
  - Formation of high energy thioester bond
  - Reaction driven by the hydrolysis of pyrophosphate

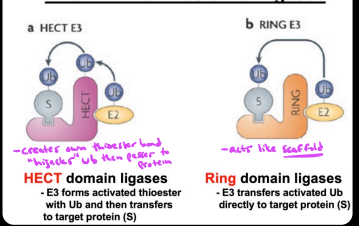
## E2: Ubiquitin Conjugating Protein

- Activated Ub is now transferred to Cys of Ub conjugating protein (E2)
  - Thioester exchange
- Multiple members

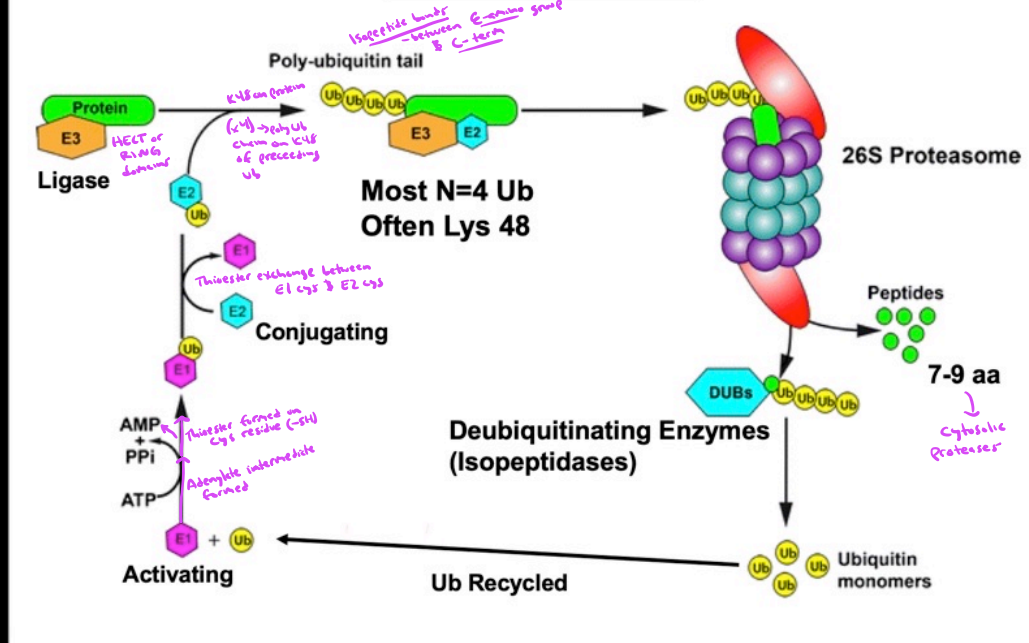
## E3: Ubiquitin Protein Ligase

- Recognizes target protein and transfers activated Ub to target protein (multiple members)
- Transfers Ub to epsilon amino group of Lys forming isopeptide bond
  - between E-amino group & C-term

## Two Main Families of E3 Ligases



# Polyubiquitination Directs Protein to 26S Proteasome



HECT domain ligases - E3 forms activated thioester with Ub and then transfers to target protein (S)  
 Ring domain ligases - E3 transfers activated Ub directly to target protein (S)

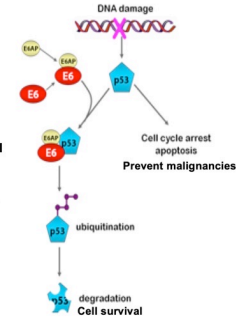
# Ub-Proteasome Diseases

## Human Papilloma Virus (HPV)

- DNA virus - infects cutaneous or mucosal epithelial cells
- causes most cervical carcinomas
- HPV 16 & 18 - 70% of cervical cancer
- HPV 16 - 25% associated w/ head & neck carcinomas
- HPV encodes E6 protein (viral oncoprotein)
- alters E3 ligase specificity → targets p53 for ubiquitination & degradation via 26S proteasome
- p53 = tumor suppressor protein
- binds & inhibits G1 cyclin-CDK complex
- ↳ arrests cells in G1

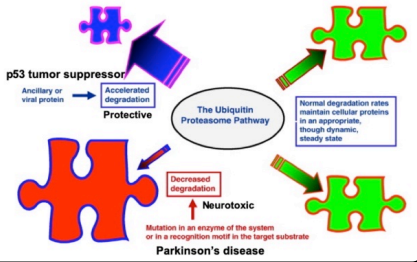
## HPV-Mediated Degradation of p53

- p53 is a tumor suppressor protein
- In HPV-positive cancer cells, E6, along with E6AP (host ubiquitin ligase), stimulates ubiquitination of p53 protein, thereby flagging it for proteasomal degradation.
  - Leads to an **increase in cell survival**
- **Vaccination** - Gardasil and Cervarix
  - Both protect against HPV 16 and 18, Gardasil also protects against HPV types 6 and 11.
  - Maximal benefit for Pre-HPV patients



<http://www.cancer.gov/cancercontrol/fields/htk/HPV>  
J. Gynecol. Oncol 27(2):1-12, 2016

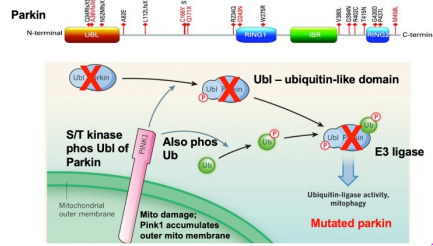
## Aberrations in the Ubiquitin-Proteasome System: Pathogenesis of Human Diseases



## Parkinson's Disease

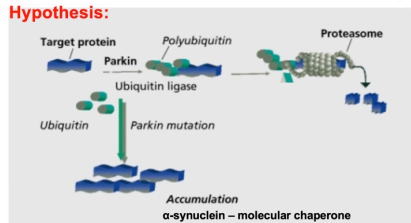
- Chronic, progressive disorder
- resting tremor, slowed movements, postural instability
- Defective Parkin protein
- Parkin = E3 ligase
- ↳ 50% of disease-causing defects in autosomal recessive juvenile onset PD
- Characterized by mitochondrial dysfunction, oxidative stress, & Lewy Bodies (protein aggregates)
- Normally, Parkin helps degrade dysfunctional mitochondria
- dysfunctional mitochondria → PLINK1 translocated to membrane surface → phosphorylates Ubl domain on Parkin AND phosphorylates Ubiquitin → Parkin-Ubl binds Ub → Active complex
- E3 ligase activity activates → encapsulation & degradation of defective mitochondria (Mitophagy)

## Parkin and Pink1 Promote Mitophagy



Leads to accumulation of dysfunctional mitochondria; Affects cellular energy but could also lead to production of ROS.

## Parkinson's Disease: Decreased Degradation of Neurotoxic Proteins



Parkin - Ring finger E3 ligase  
E3 defective, decreased ubiquitination, accumulation of neurotoxic proteins

## Multiple Myeloma

- malignant plasma cell disorder → overproduction of IgG
- Excessive NF-κB activity → tumorigenesis
- NF-κB pathway
- NF-κB = Tx factor w/ p65 & p50 subunits
- normally found in cytosol complexed w/ I-κB
- ↳ I-κB = inhibitor of NF-κB, masks NLS sequence
- ↑ stress → IKK (IκB kinase) phosphorylates I-κB → I-κB detected & degraded by proteasome → NF-κB NLS exposed → translocates to nucleus → ↑ Tx of pro-survival genes
- Tx: Bortezomib - 35% success rate
- Inhibits chymotrypsin-like activity of proteasome
- prevents degradation of I-κB → ↓ NF-κB activity
- ↓ Tx of pro-survival proteins

## Inactivation of NF-κB Pathway by Bortezomib

