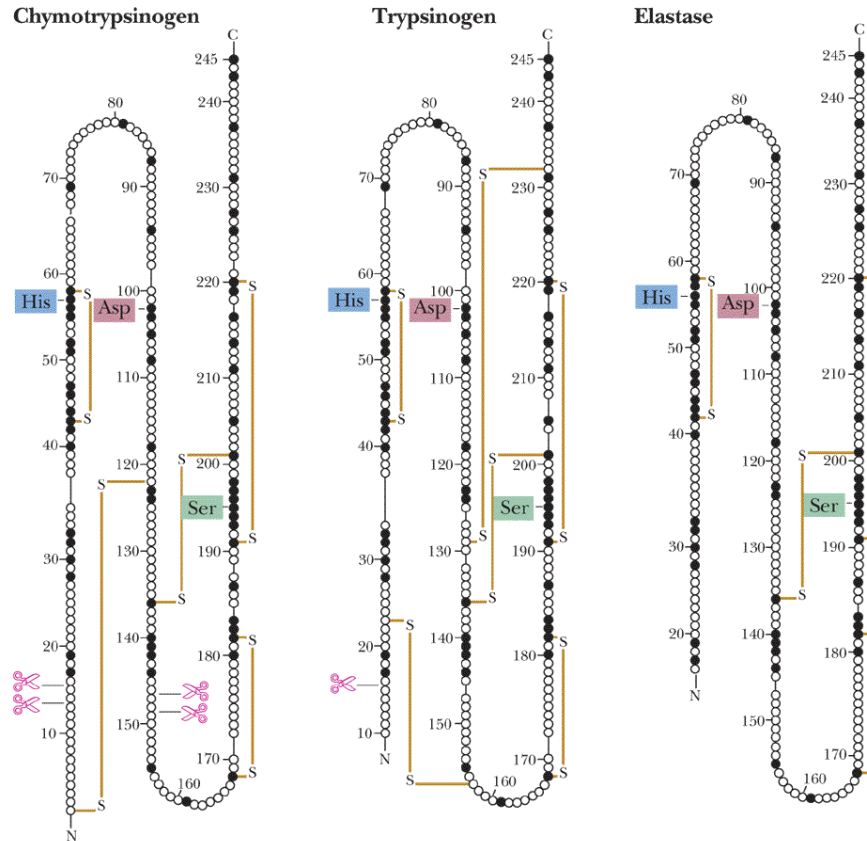


Protease Mechanism and Activation

Zymogens, chymotrypsin, aspartic proteases

Protease Zymogens and Binding Sites

Garrett/Grisham, Biochemistry with a Human Focus
Figure 11.13



His—Asp—Ser

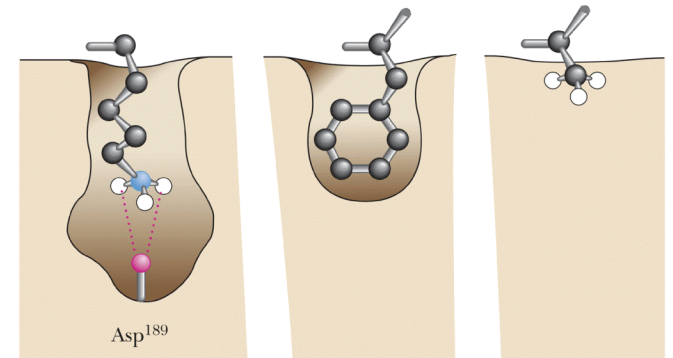
Catalytic Triad

Garrett/Grisham, Biochemistry with a Human Focus
Figure 11.16

Trypsin

Chymotrypsin

Elastase

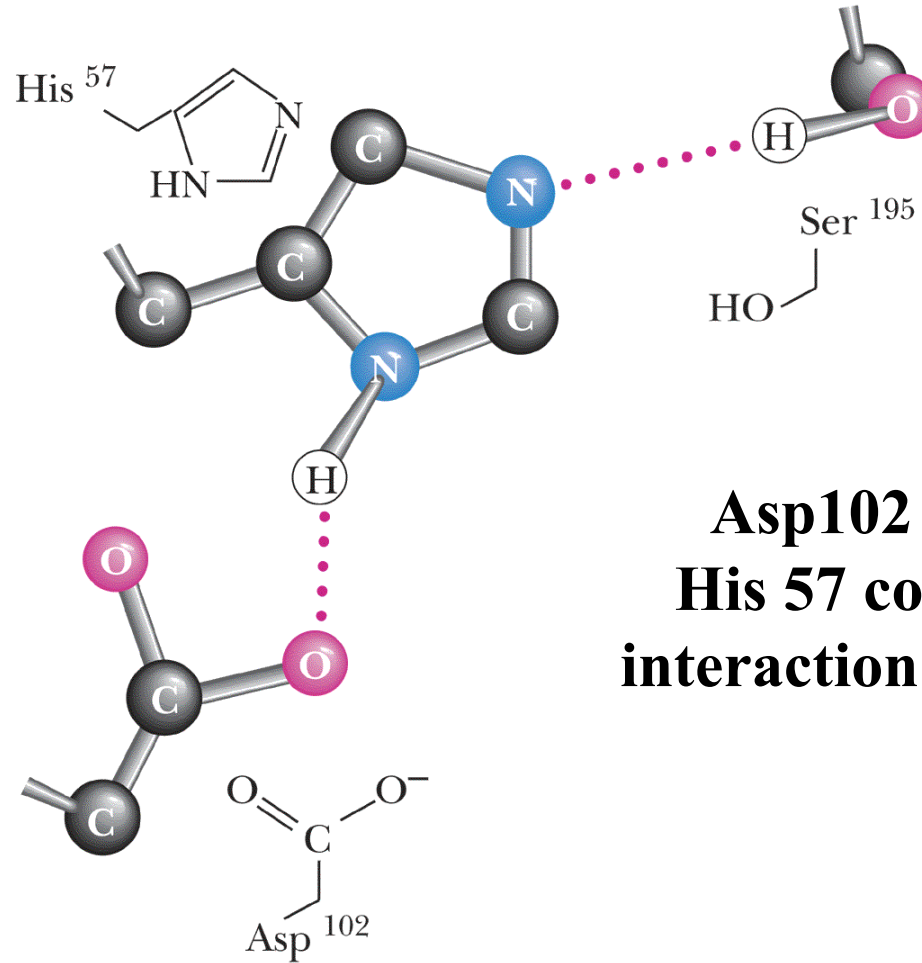


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Active site pocket confers
specificity

Catalytic Triad

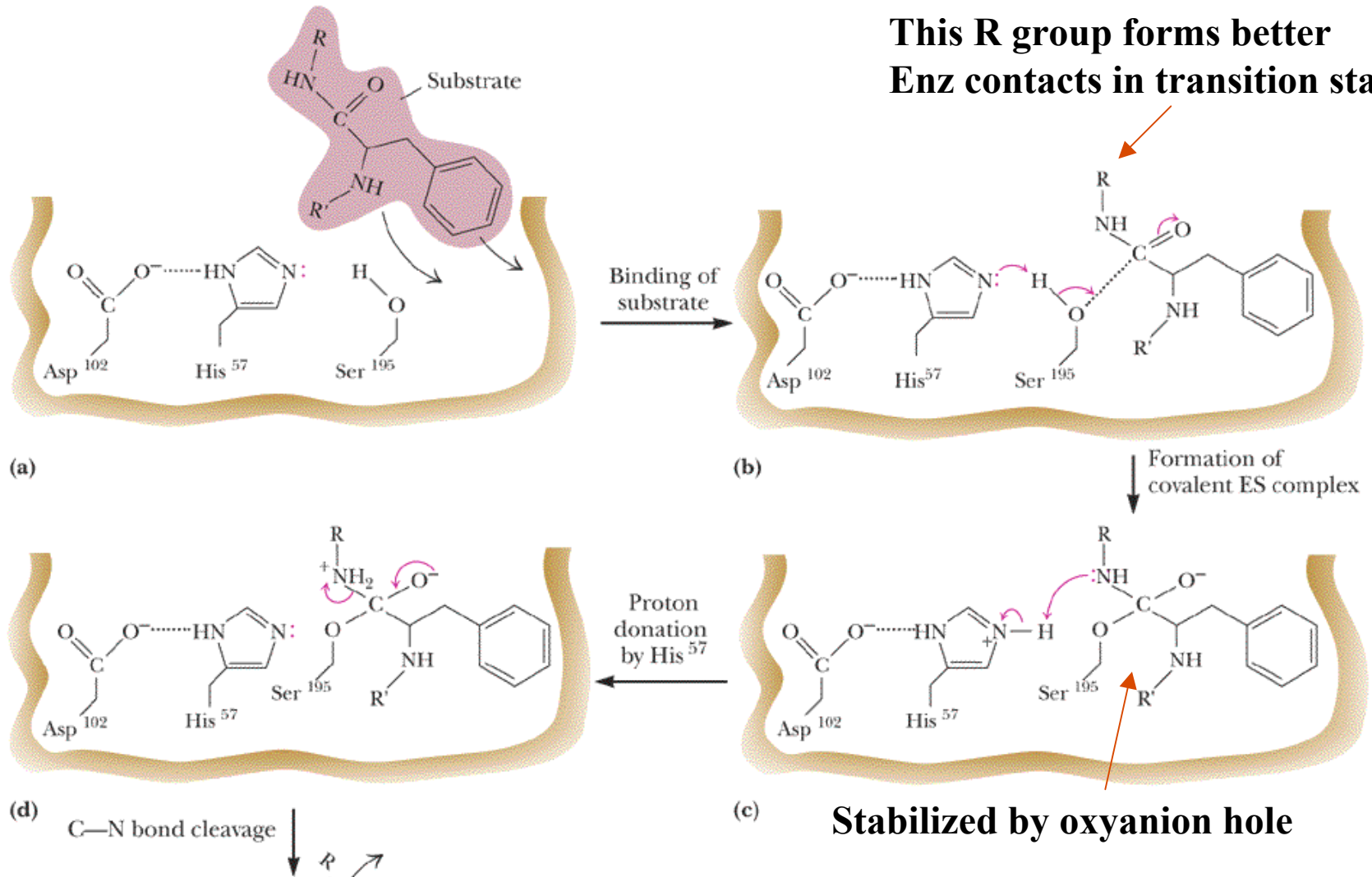
Garrett/Grisham, Biochemistry with a Human Focus
Figure 11.15

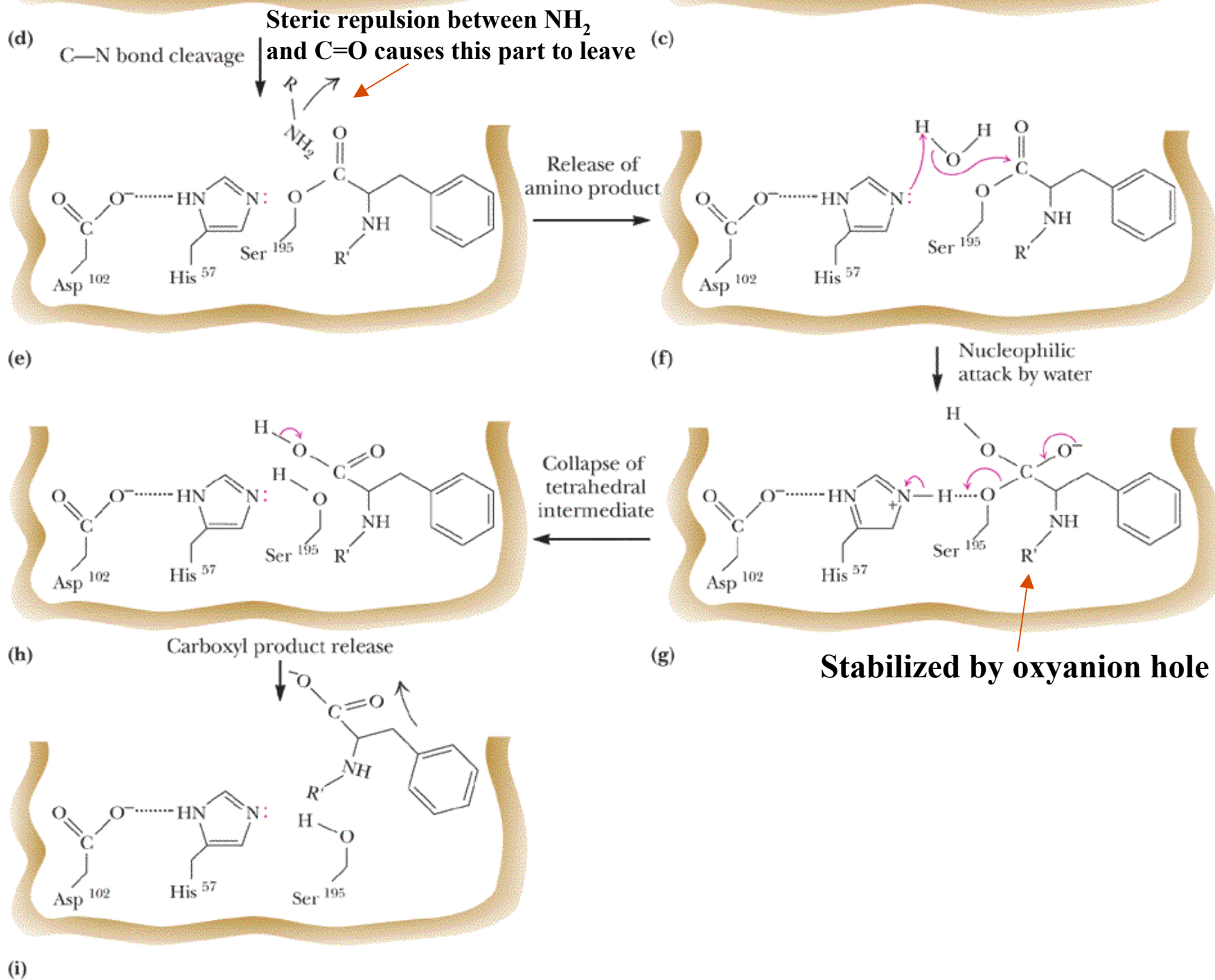


**Asp102 positions
His 57 correctly for
interaction with Ser195**

Chymotrypsin Mechanism

This R group forms better Enz contacts in transition state.





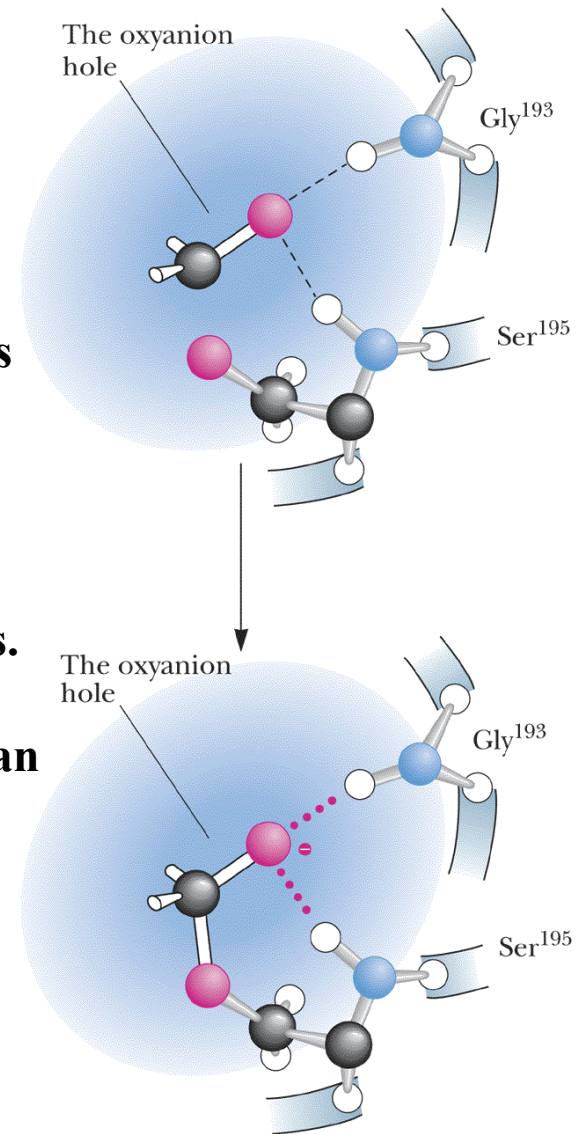
Oxyanion Hole

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Unnumbered Figure Page 379

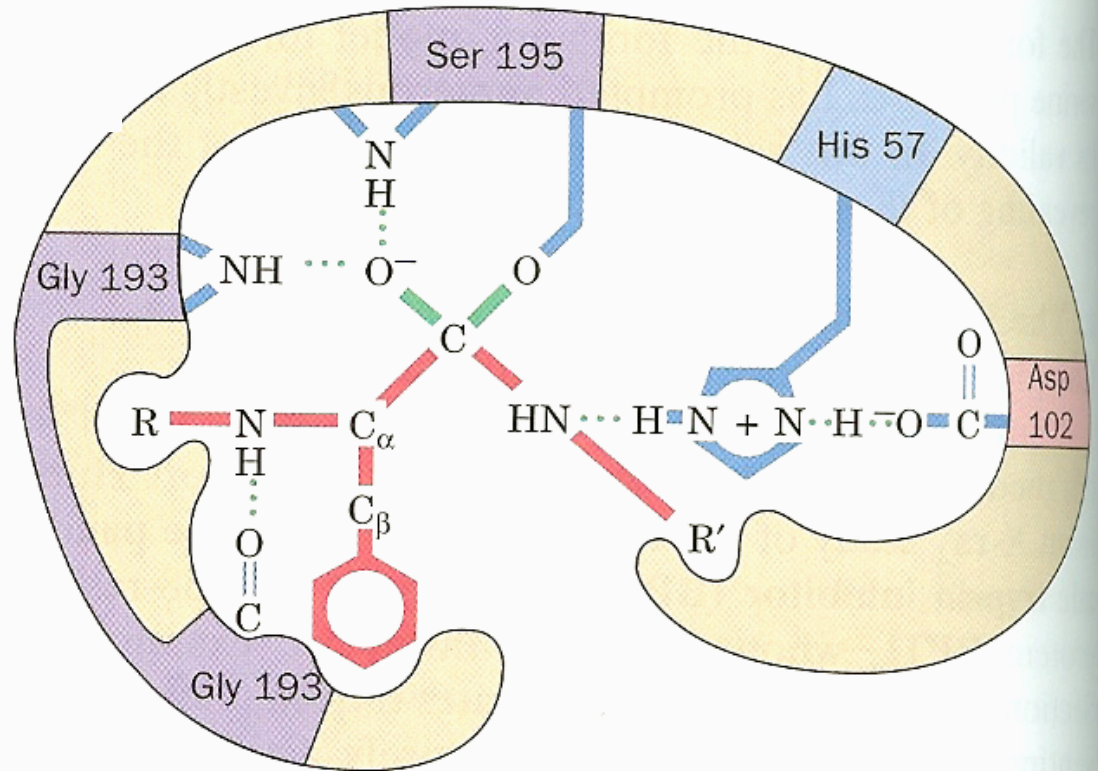
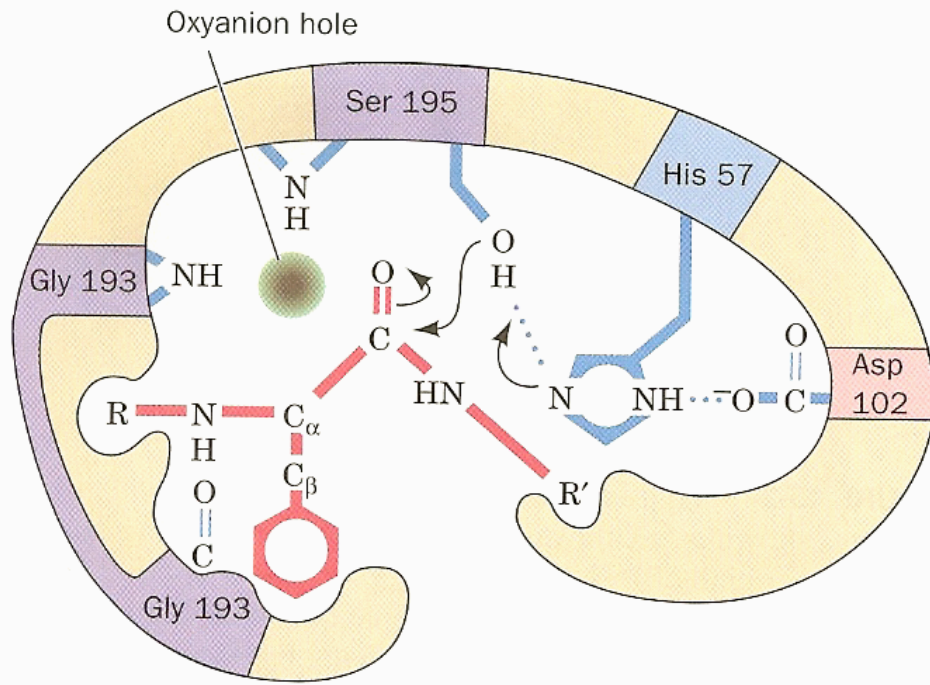
The formation of the tetrahedral intermediate, (c and g), is stabilized by interactions with the Backbone amide N-H groups of Ser195 and Gly193.

Formation of the tetrahedral intermediate increases The interactions between the carbonyl oxygen and The N-H of the backbone for two reasons:

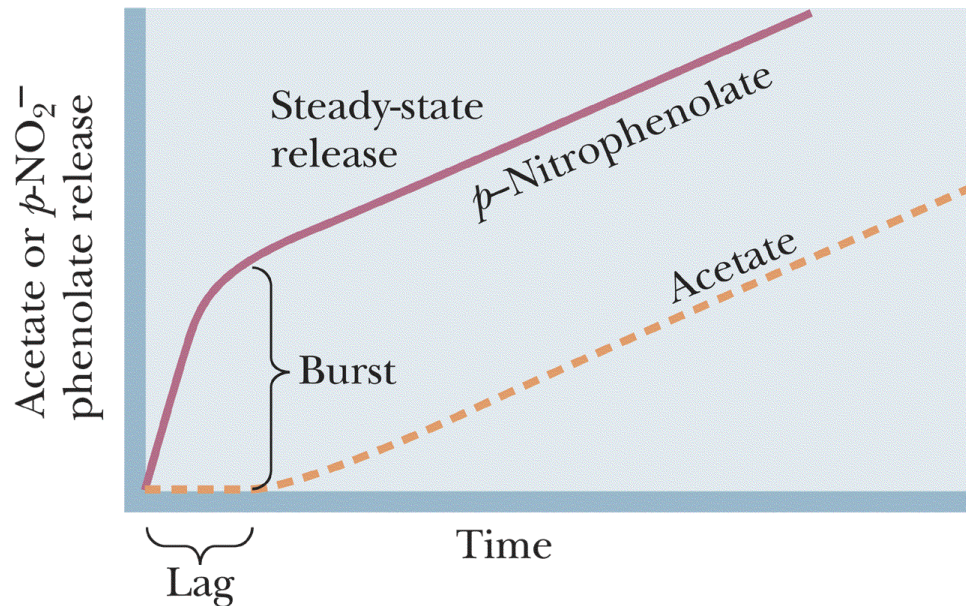
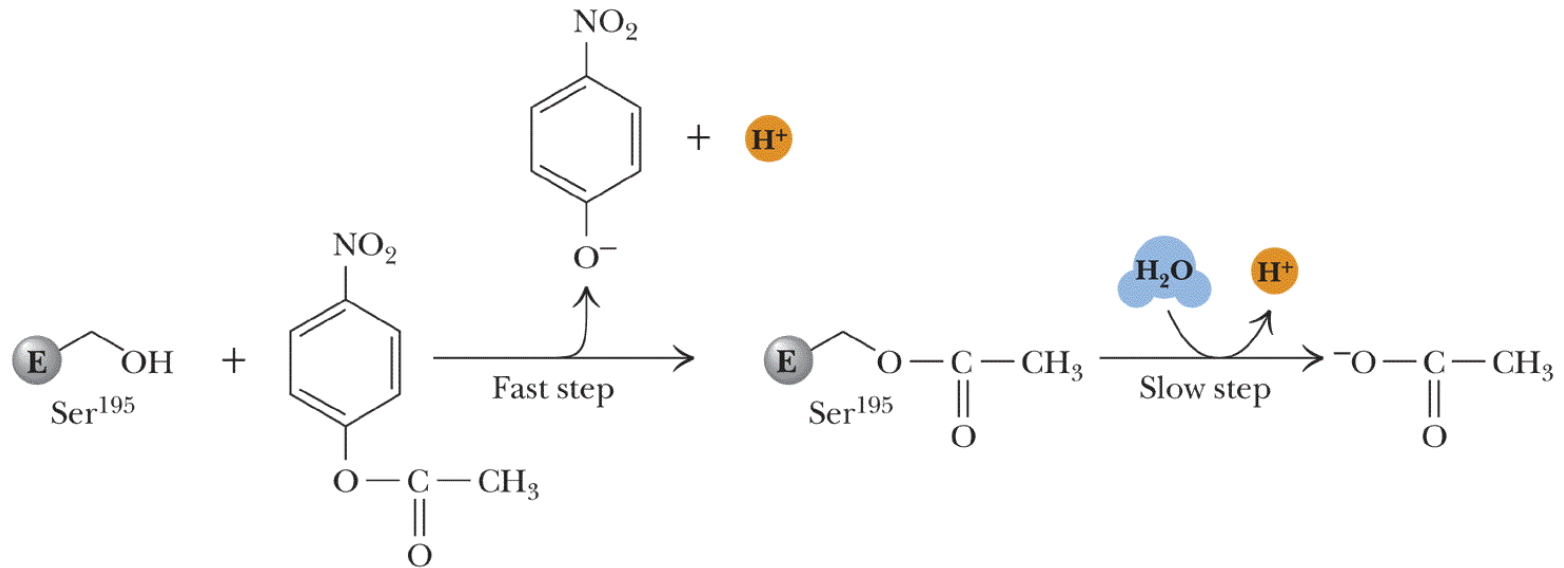
- 1) $C=O \rightarrow C\text{---}O^-$ the increased bond length of the $C\text{---}O^-$ brings the oxygen closer to the N-H groups.
- 2) Negatively charged O^- interacts more strongly than Uncharged O in $C=O$.



(a)



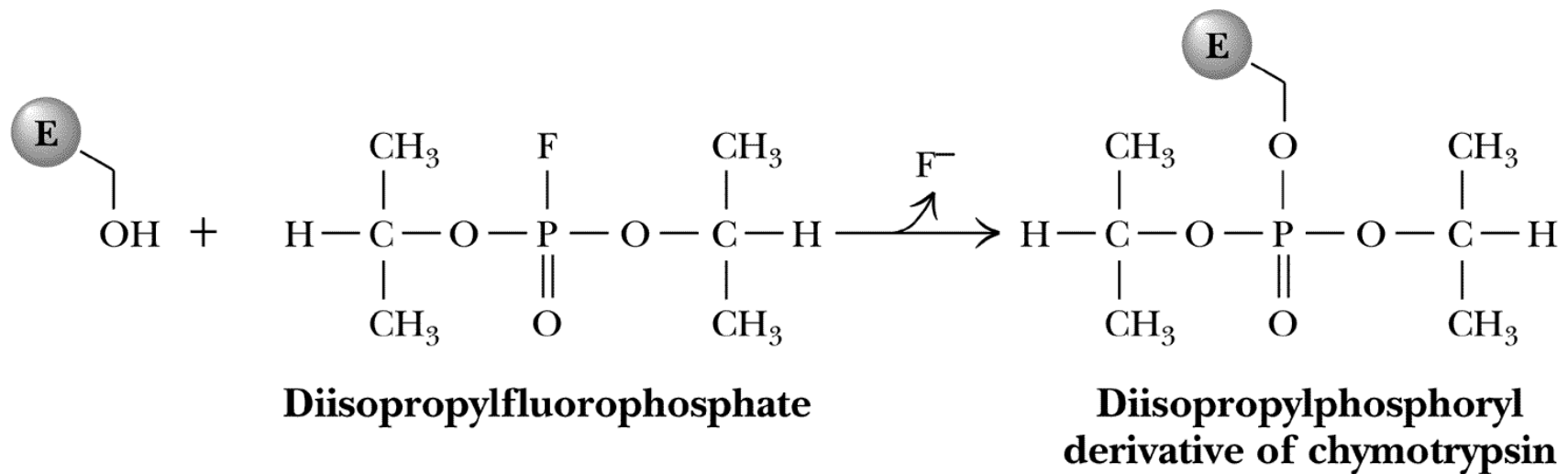
Rate-limiting Step



Chymotrypsin Inhibitor

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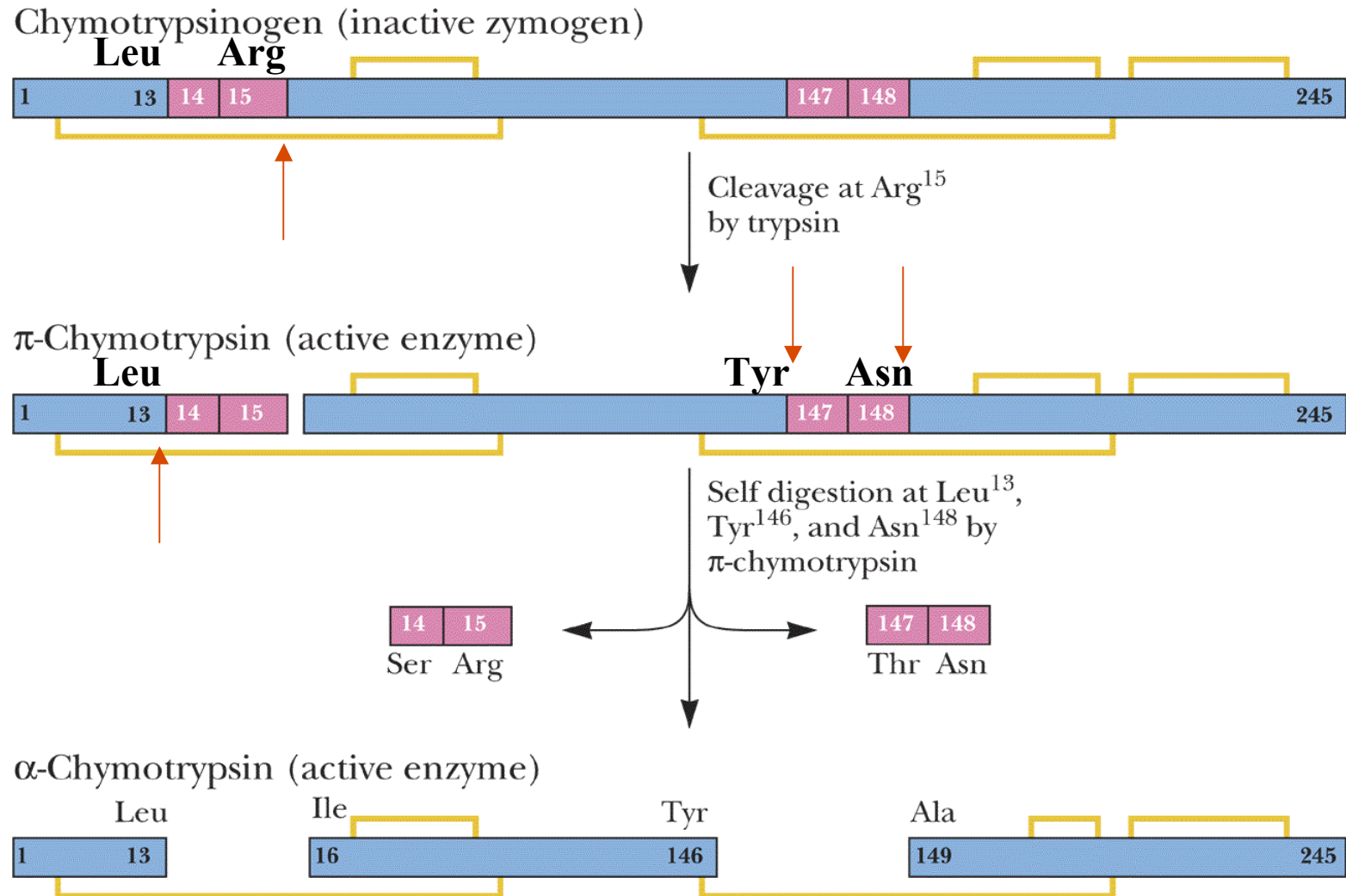
Figure 11.20



Activation of Chymotrypsinogen

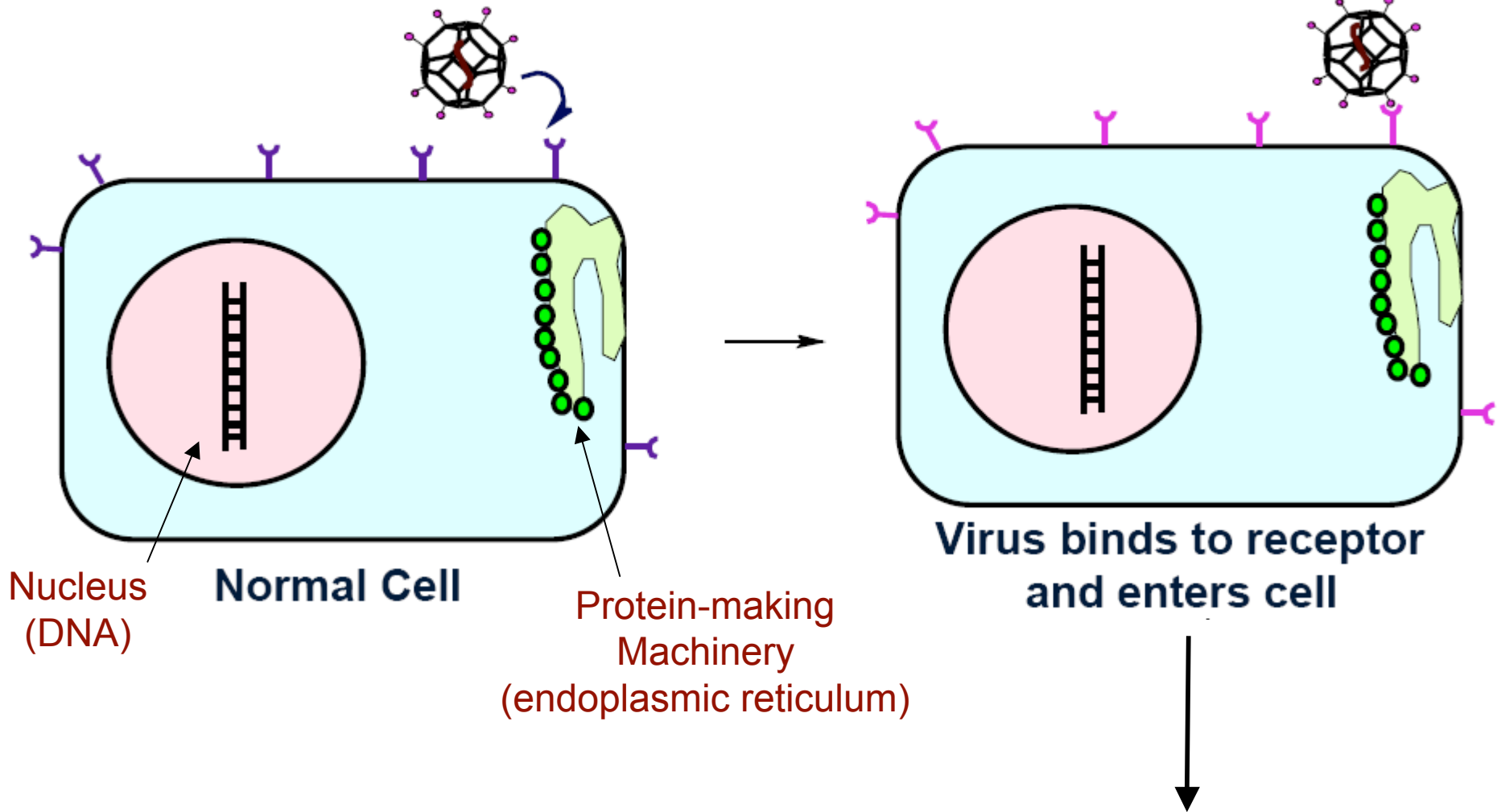
Garrett/Grisham, Biochemistry with a Human Focus

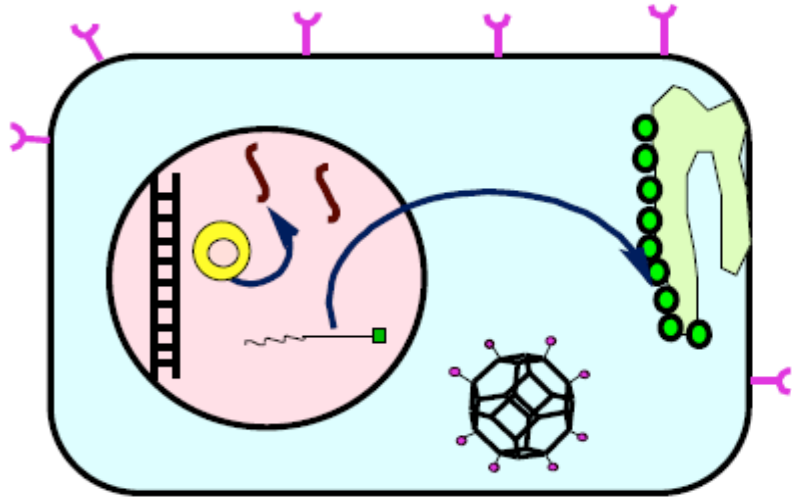
Figure 10.24



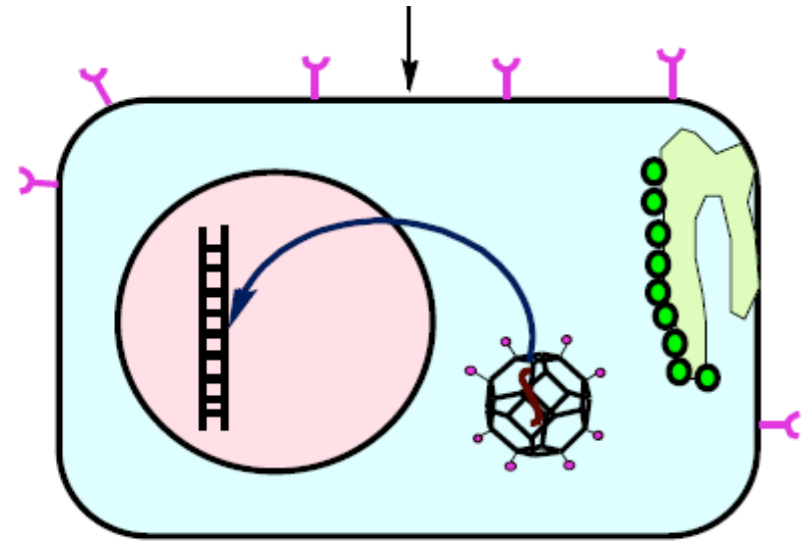


Human Immunodeficiency Virus (HIV)

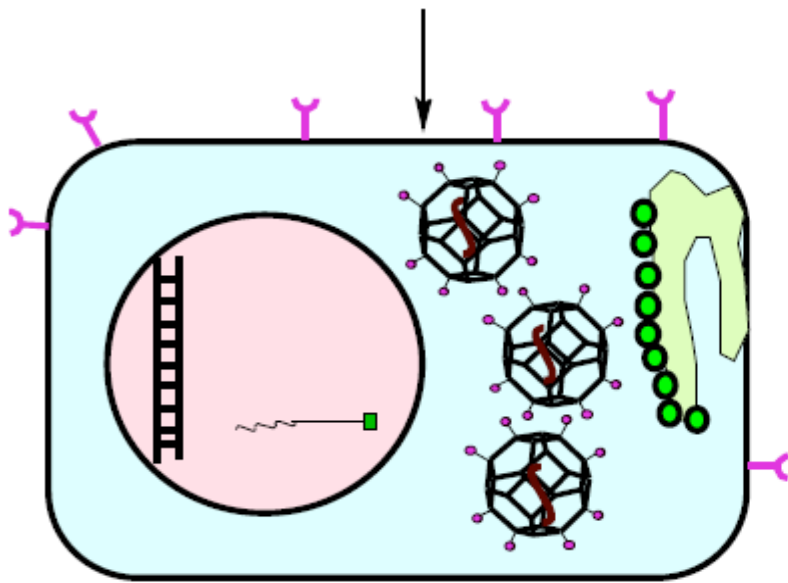




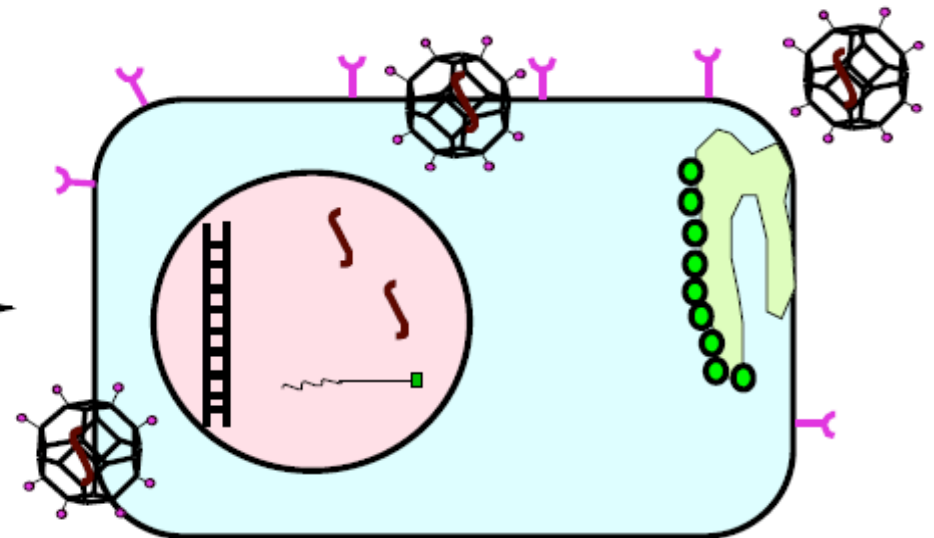
Virus makes copies of its RNA and makes viral proteins



RT copies RNA to DNA then DNA is inserted into host cell's DNA

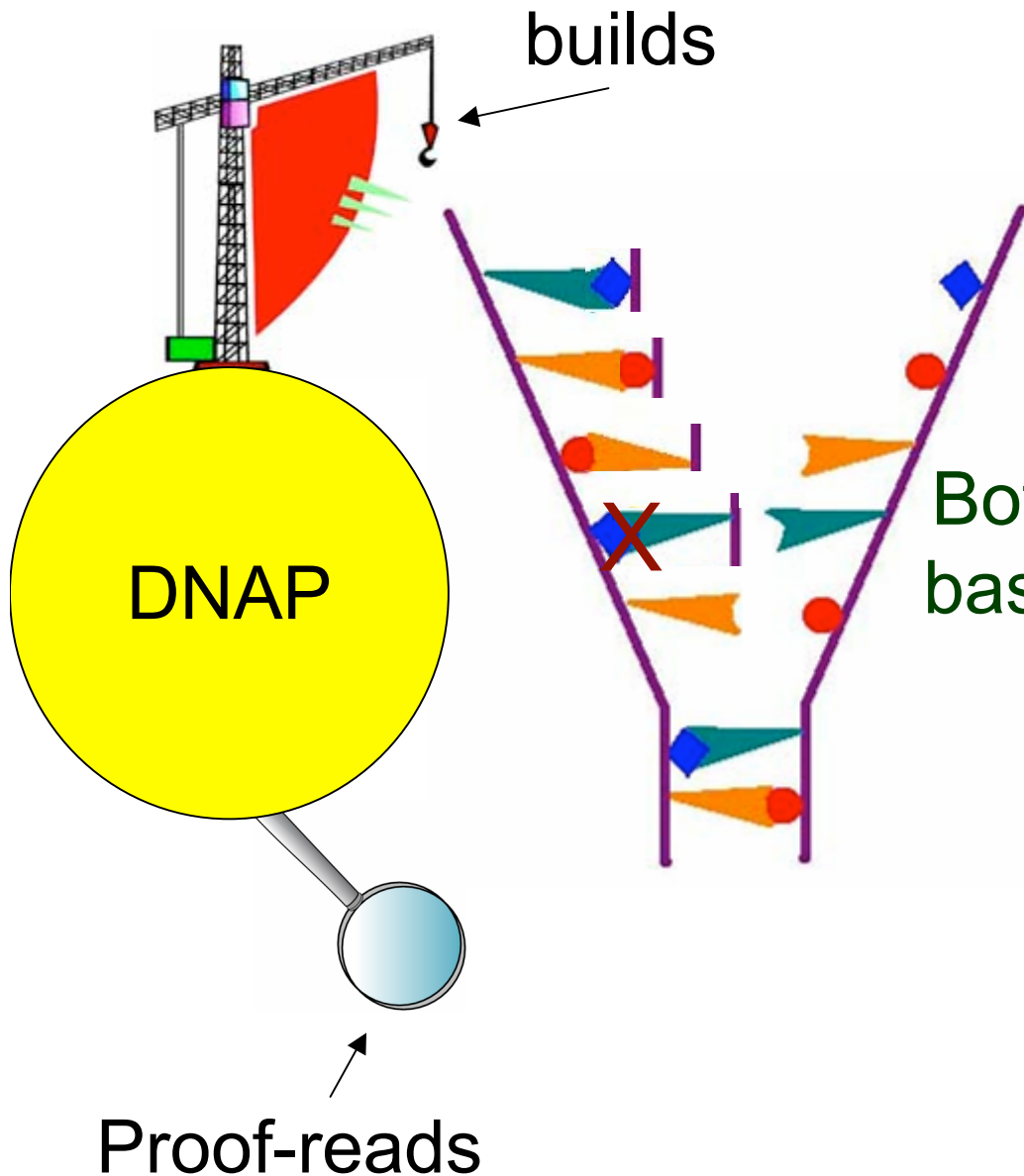


New progeny viruses are assembled



Progeny viruses are released into cytoplasm

Human DNA Replication



Our cells copy their DNA using an enzyme called DNA polymerase (DNAP)

Both builds DNA by putting in bases that match each strand
Thereby making a copy

Also proof-reads each copied base to make sure it is right

Makes DNA copy highly accurate

HIV RNA Conversion



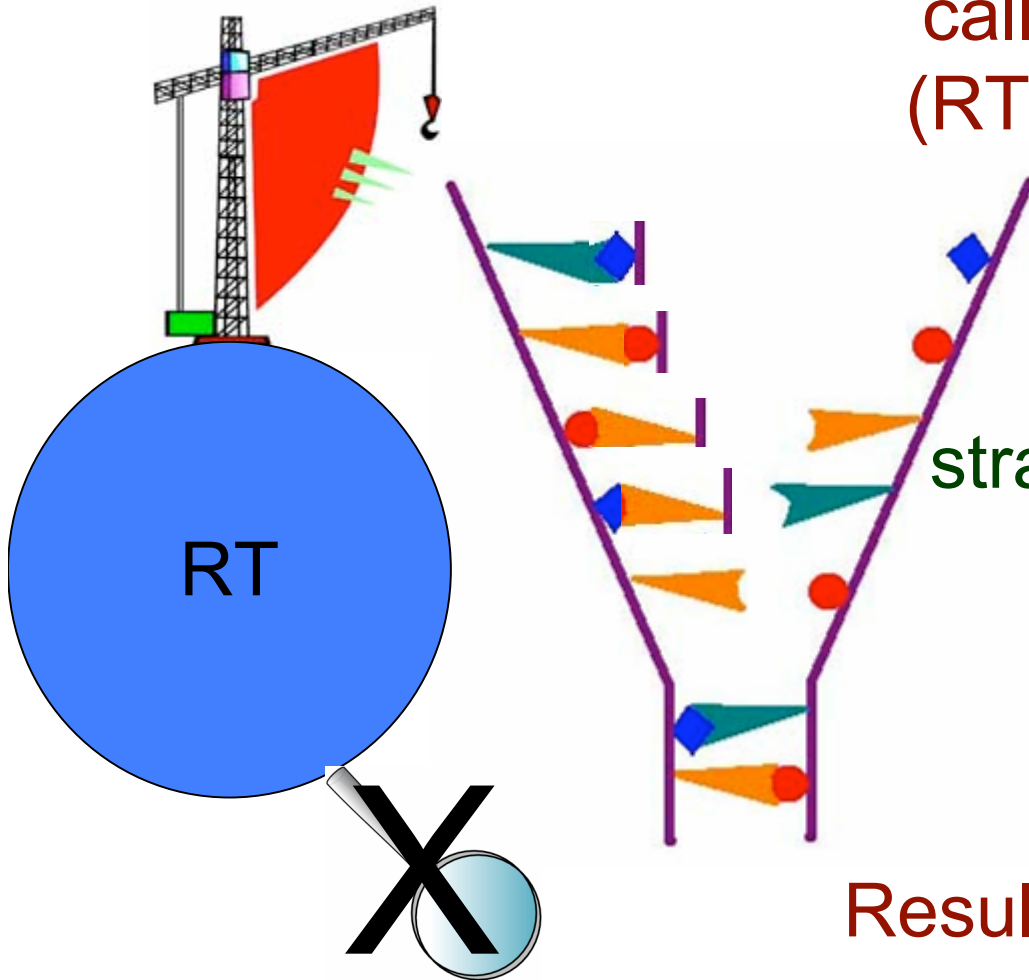
Viruses use an enzyme called Reverse Transcriptase (RT) to copy its RNA into DNA

Builds DNA by putting in bases that match each strand thereby making a copy

CANNOT proof-read to make sure right so makes a lot of errors

Results in high rate of mutations

Makes various mutated strains





HIV Cocktail



Three enzymes important for HIV to replicate:

Reverse Transcriptase: Copies virus RNA into DNA
Very, Very error prone

Integrase: puts viral DNA copy into host cell's DNA

Protease: Cuts proteins into functional pieces

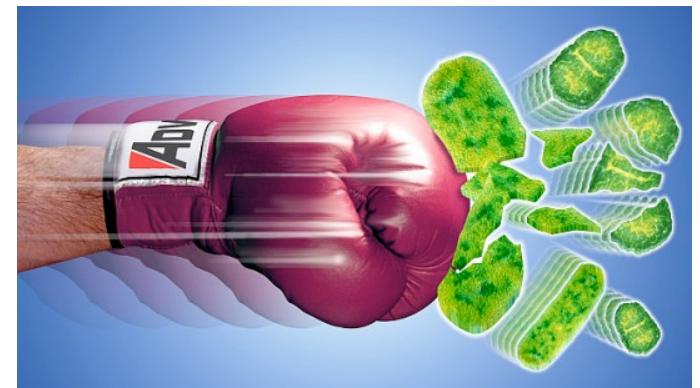


HIV Cocktail

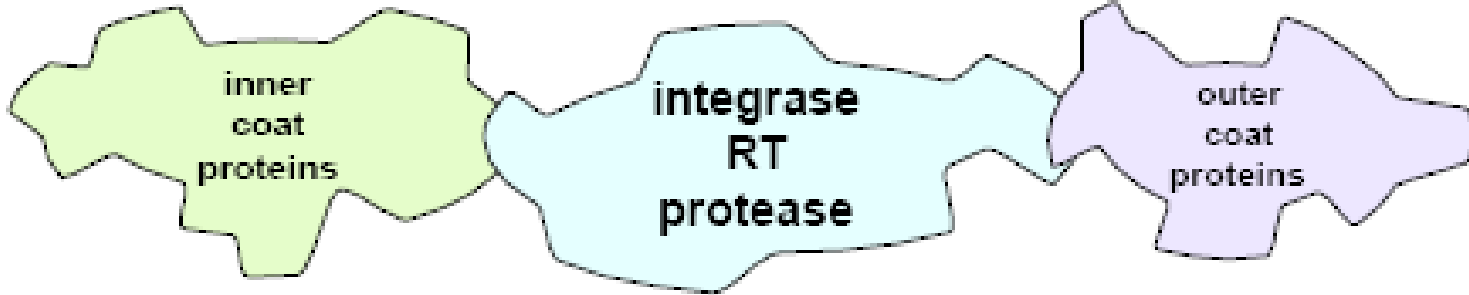
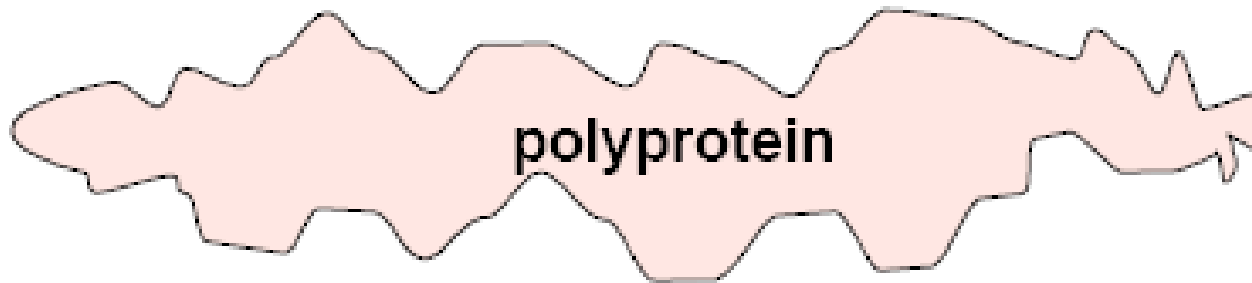
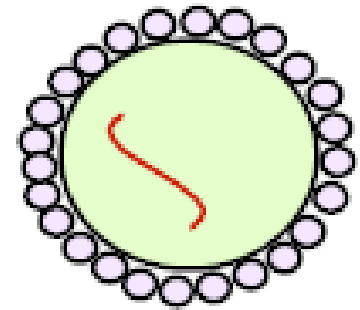
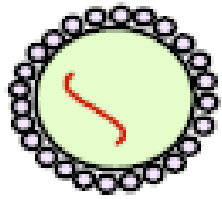
Because HIV can mutate so rapidly
cant just knock out one enzyme
or mutations provide resistance to the drug

So have to knock out more than one (preferably all three)

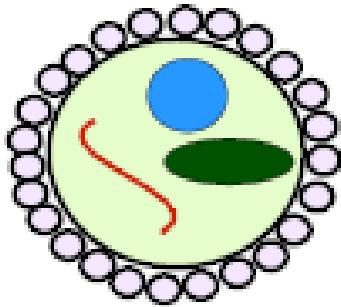
Makes it much less likely that mutations will allow the
virus to survive in the presence of
many drugs with multiple targets.



HIV Mechanism



Protease excises itself and then cleaves the other proteins from polyprotein thereby producing active virus parts.



Each virus is then packed with:

- 1) Reverse Transcriptase ●
- 2) Integrase ●

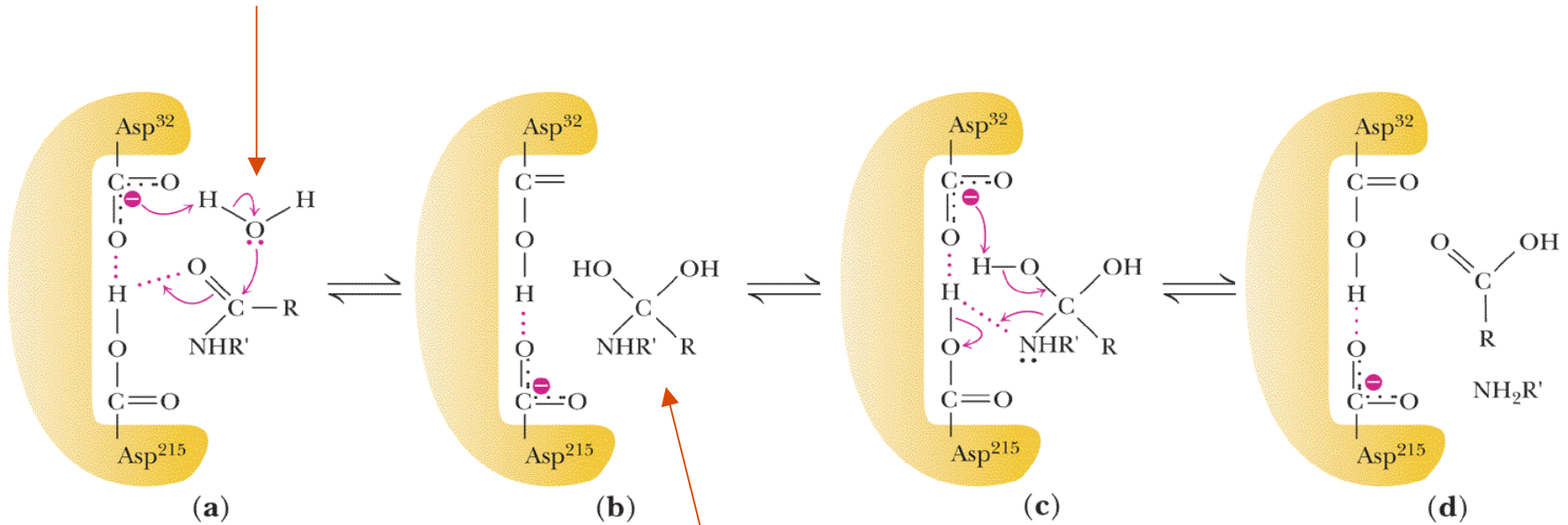
Why not packed with protease?

Aspartic Protease Mechanism

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Figure 11.23

**Catalytic
Water**

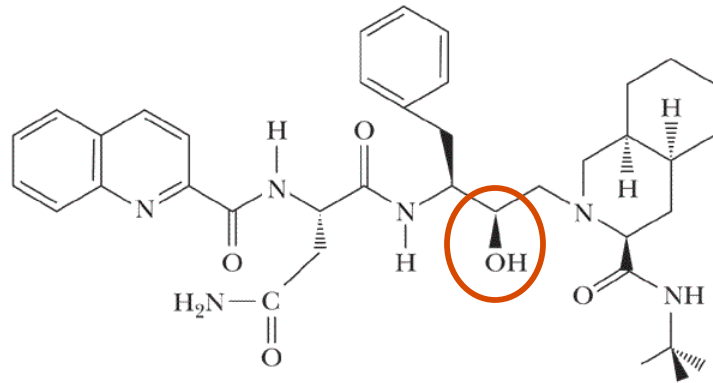


**One proton is shared
between Asp215 and
Asp32.**

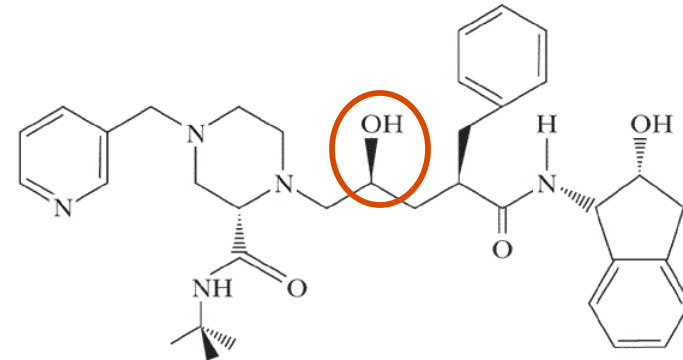
**Tetrahedral
Intermediate**

HIV PROTEASE INHIBITORS

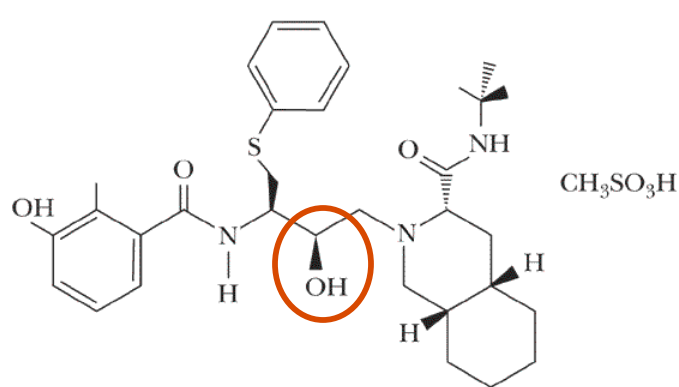
Garrett/Grisham, Biochemistry with a Human Focus
Unnumbered Figure Page 382



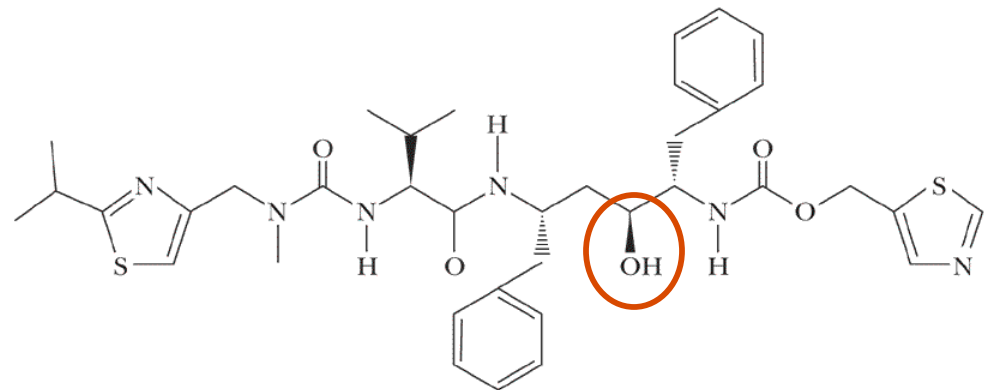
Invirase (Saquinavir)



Crixivan (Indinavir)



Viracept (Nelfinavir mesylate)

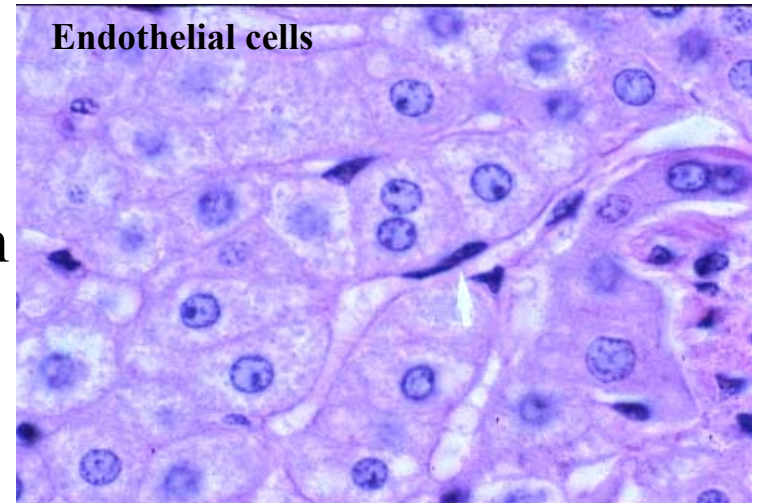


Norvir (Ritonavir)

Major Components of Blood Clotting

1) Intact Endothelial Cells

- inhibit blood clotting
- surface not conducive to clot formation
- display membrane proteins that inhibit clotting
- store von Willebrand factor in cytop. granules. Constitutively expressed and secreted into circulation or subendothelium. (20% made by platelets, rest endothelium)
- make prostacyclin ~ inhibits platelet aggregation



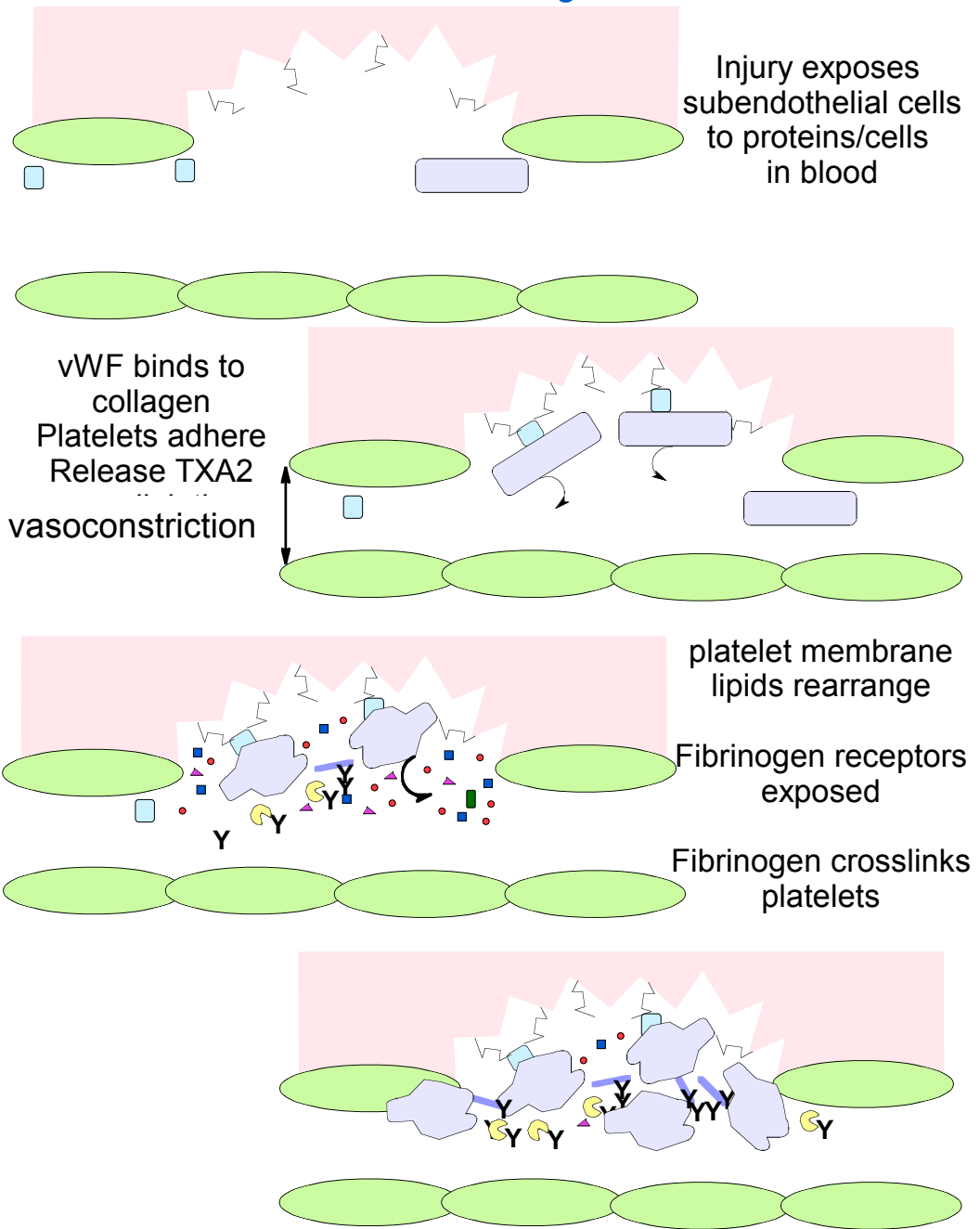
<http://www.meddean.luc.edu/lumen/MedEd/orfpath/murali.htm>



<http://www.vet.uga.edu/vpp/CLERK/anderson/>

Endothelial cells with stored vWF (red)

Blood Clotting Initiation

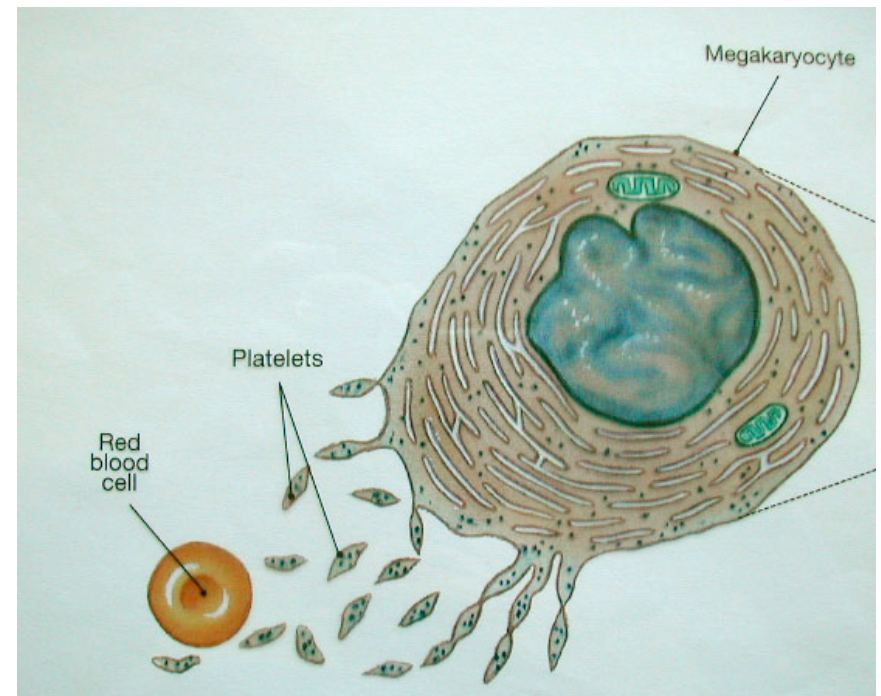
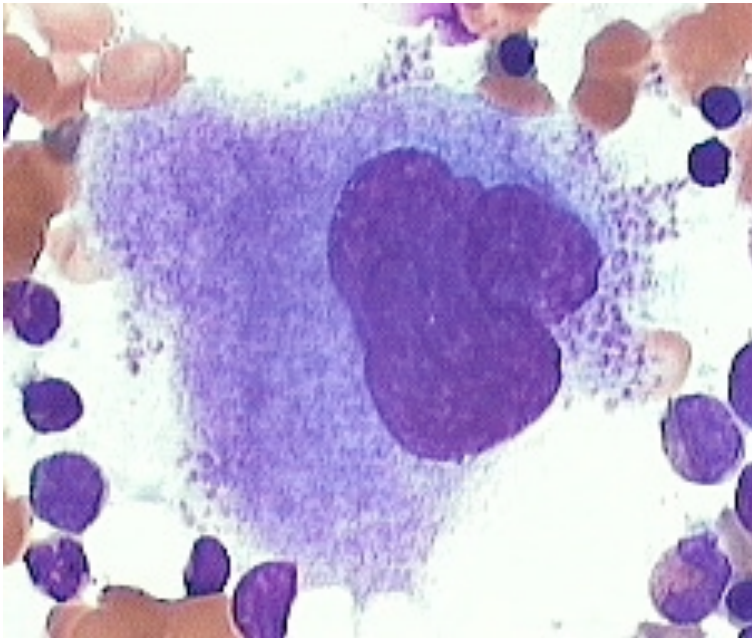


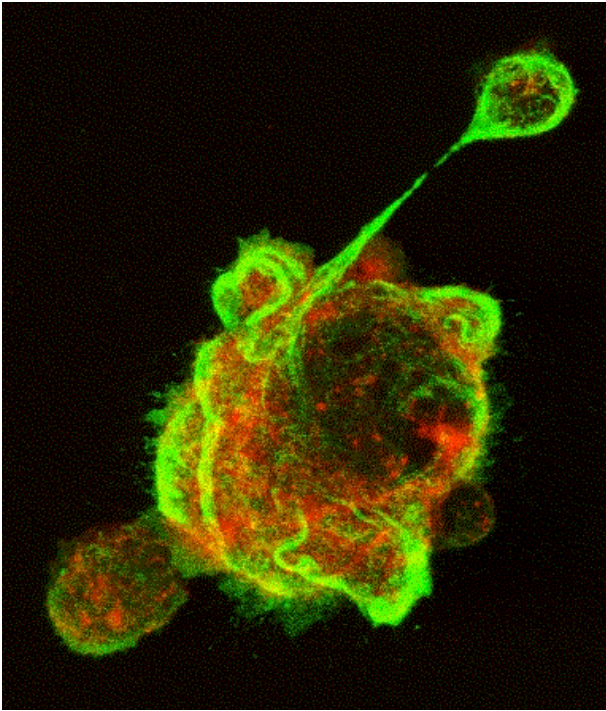
2) Subendothelial Cells

- contain membrane prots and extracellular matrix prots (collagen) that normally do not contact blood
- When exposed after injury, platelets aggregate at the site by mediation of von Willebrand factor (vWF) that binds to both platelet receptors and collagen/subendo cells
- vWF is a large, multimeric protein with subunits of 225 kD each

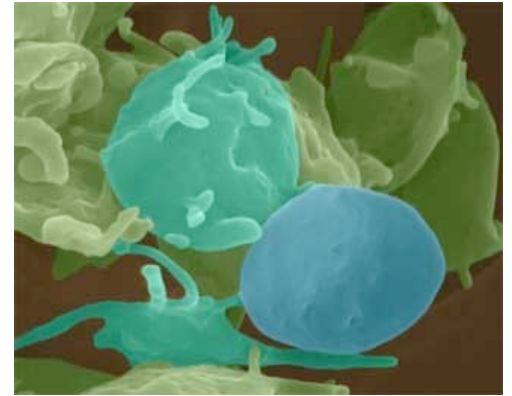
3) Platelets

- unpigmented, enucleated cells that are fragments of larger progenitor cells called megakaryocytes (bone marrow).
- Once bound release TxA₂ and serotonin (and more!) that induce vasoconstriction to reduce blood flow and increase platelet aggregation.

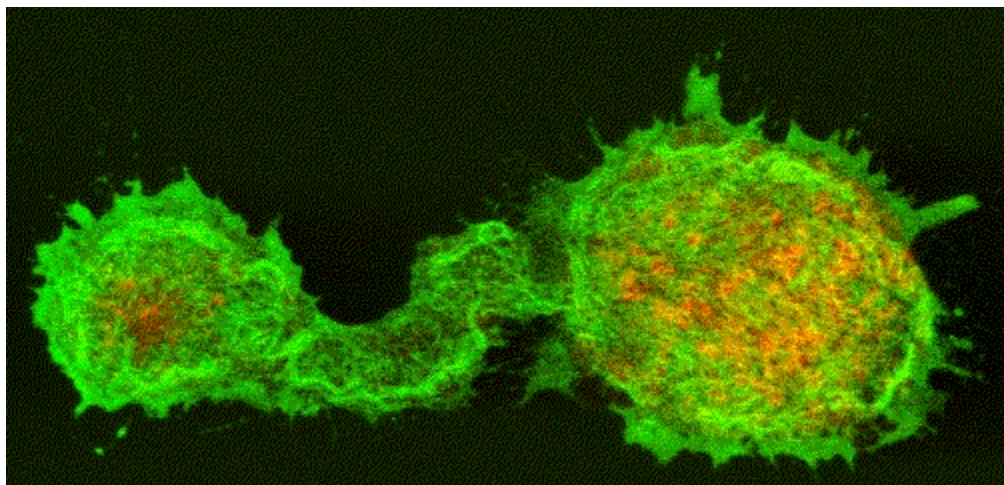




Platelets bleb off of
megakaryocytes

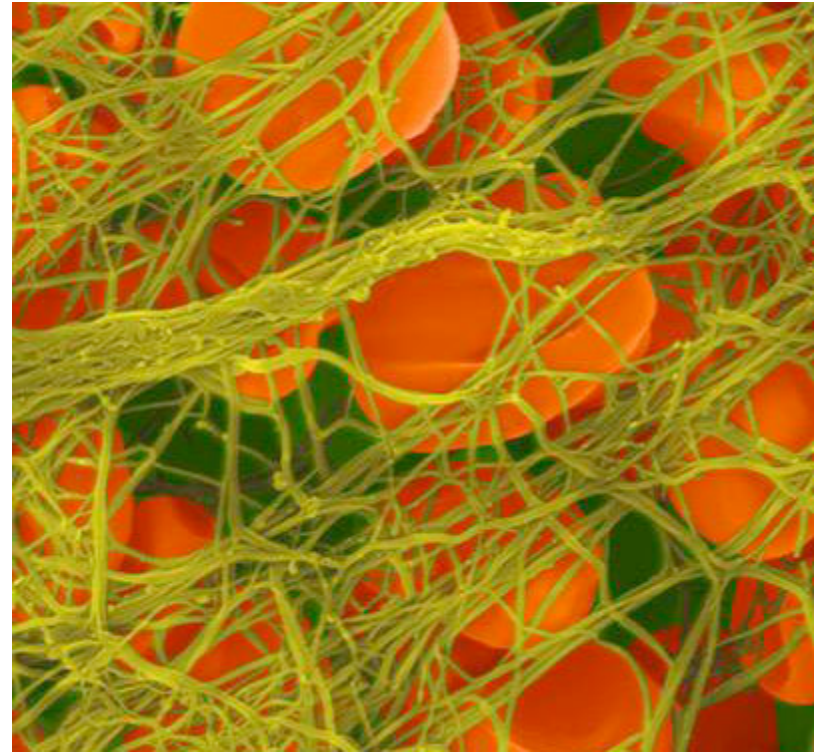


Platelets



4) Clotting Factors

- Soluble plasma proteins
- most made in liver
- most are serine proteases and circulate as zymogens
- cascade in which clotting factors are activated by selective proteolytic cleavage must have Ca^{2+}



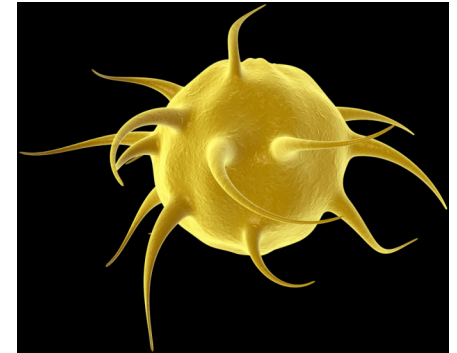
Factor
Number

Common Name

I	Fibrinogen
II	Prothrombin
III	Tissue Factor
IV	Ca ²⁺
Va	Proaccelerin
VII	Proconvertin
VIII	Antihemophilic Factor
IX	Christmas Factor
X	Stuart Factor
XI	Plasma thromboplastin antecedent
XII	Hageman factor
XIII	Fibrin Stabilizing Factor

* Step 1: Platelet Aggregation

- Platelet adhesion is mediated by vWF. This activates platelets causing release of TxA₂
- During activation, a receptor for fibrinogen becomes exposed on the platelet membrane.
- Activated platelets release:



α-granules	{	Fibrinogen	}	dense core granules
		vWF		
α-granules	{	Factor V	}	
		Factor VIII		
		Platelet derived growth factor (PDGF) ~ promotes healing		
		Platelet factor IV – prevents formation of active thrombin inhibitor from heparin and anti-thrombin III.		

ADP/ATP

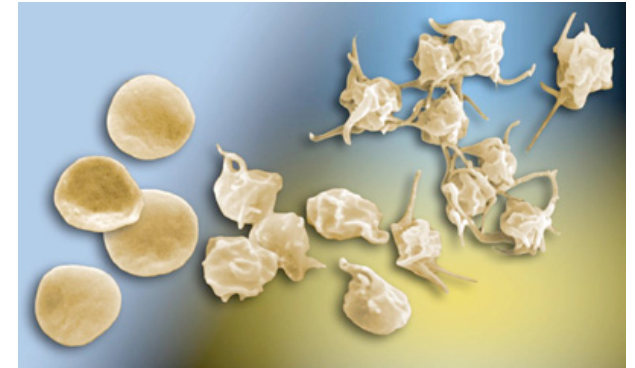
Serotonin

Ca²⁺

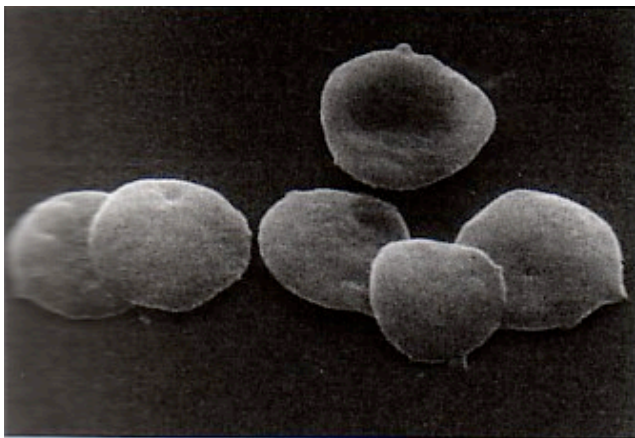
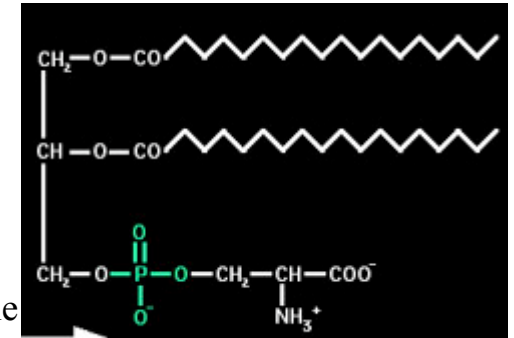
Platelet activation also induces large morphological changes

- membrane lipids rearrange

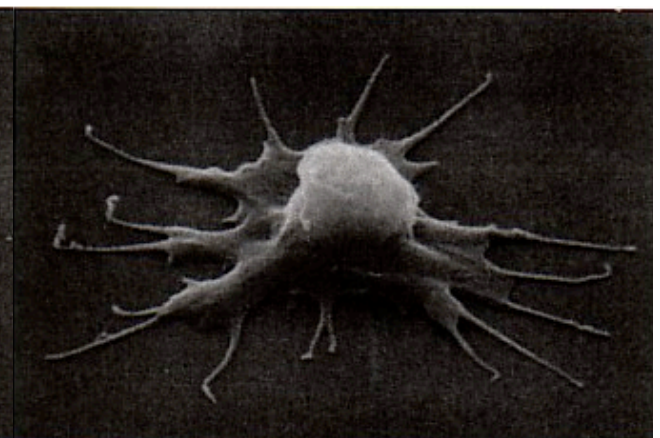
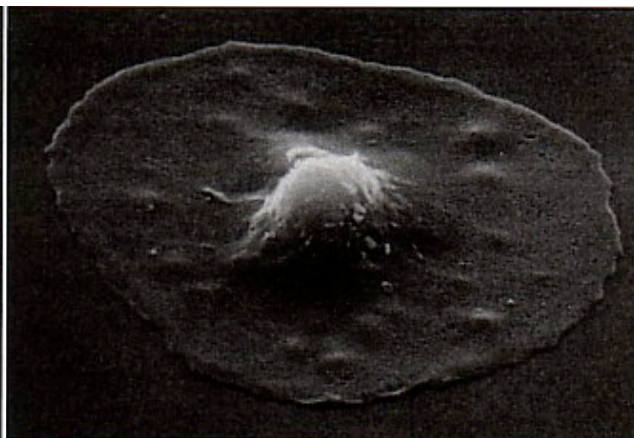
-phosphatidyl serine which is usually on the inner membrane of the platelet, flips out to outer membrane where it plays a role in binding prothrombin.



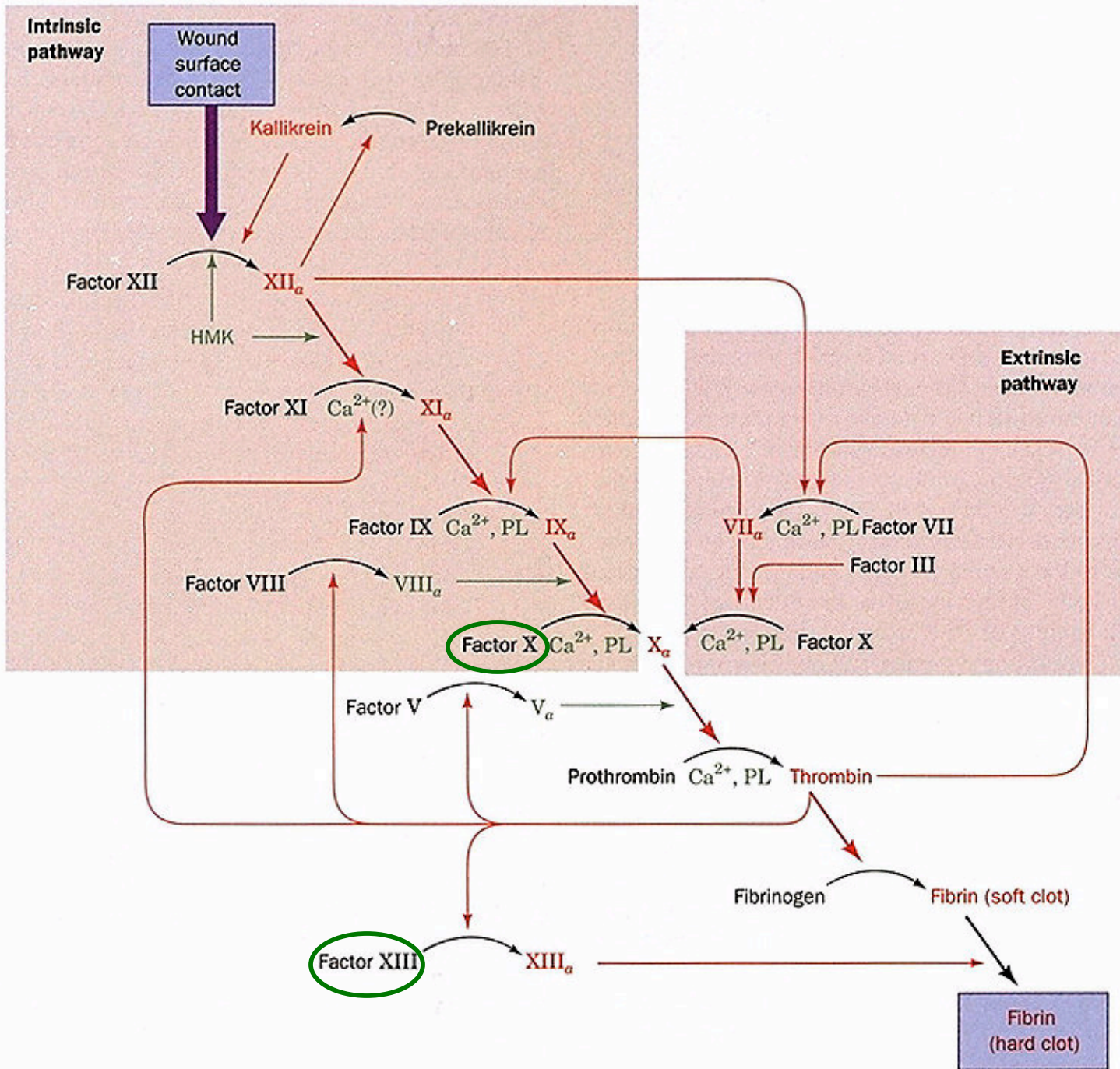
phosphatidyl serine



unactivated



fully activated

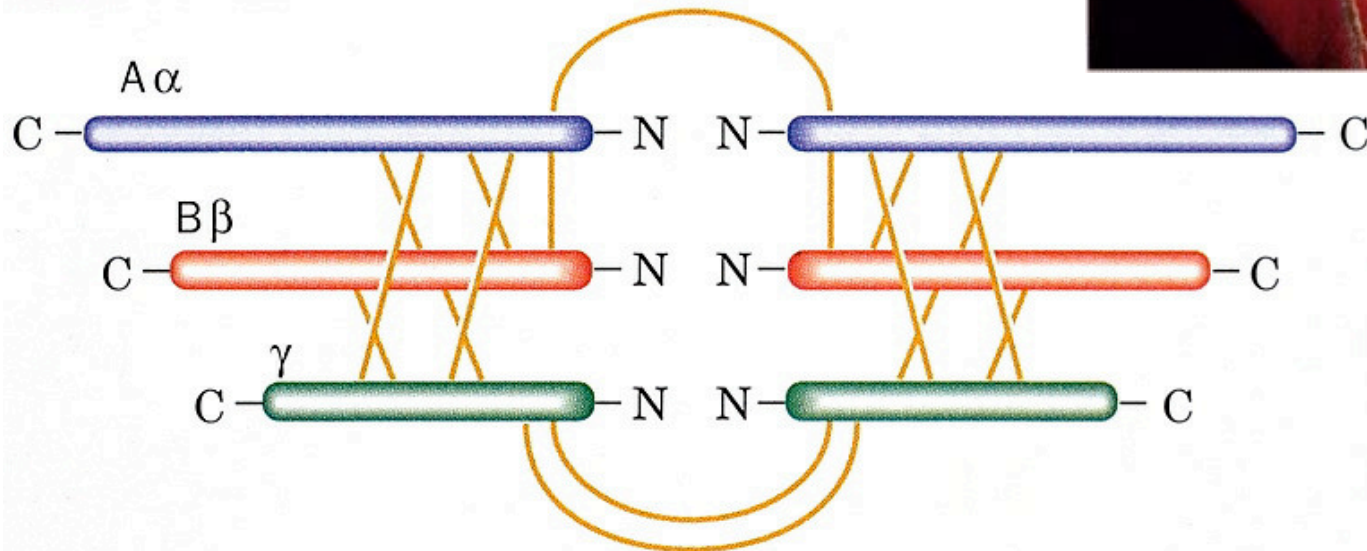


Step 2: Fibrin is formed by cleaving fibrinogen (factor I)

- Thrombin catalyzes the conversion of fibrinogen to fibrin
- Fibrinogen is 2-3% of plasma protein
- Fibrinogen has 3 pairs of non-identical subunits
A α (610 res) B β (461 res) γ (411 res)

-Also two pairs of N-linked oligosaccharides

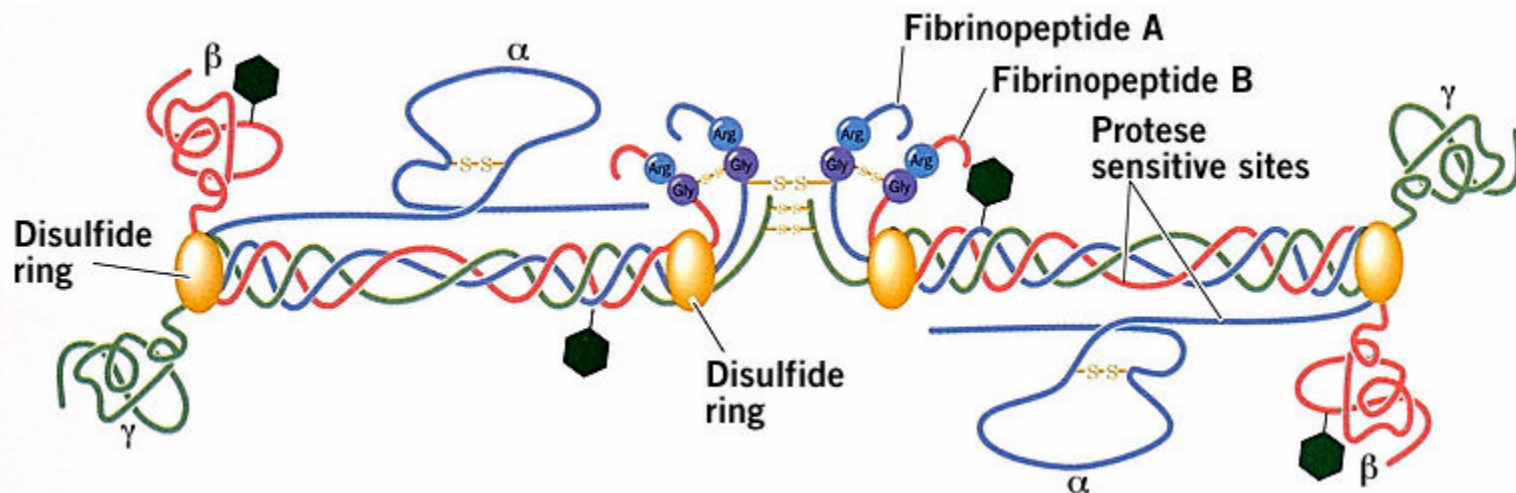
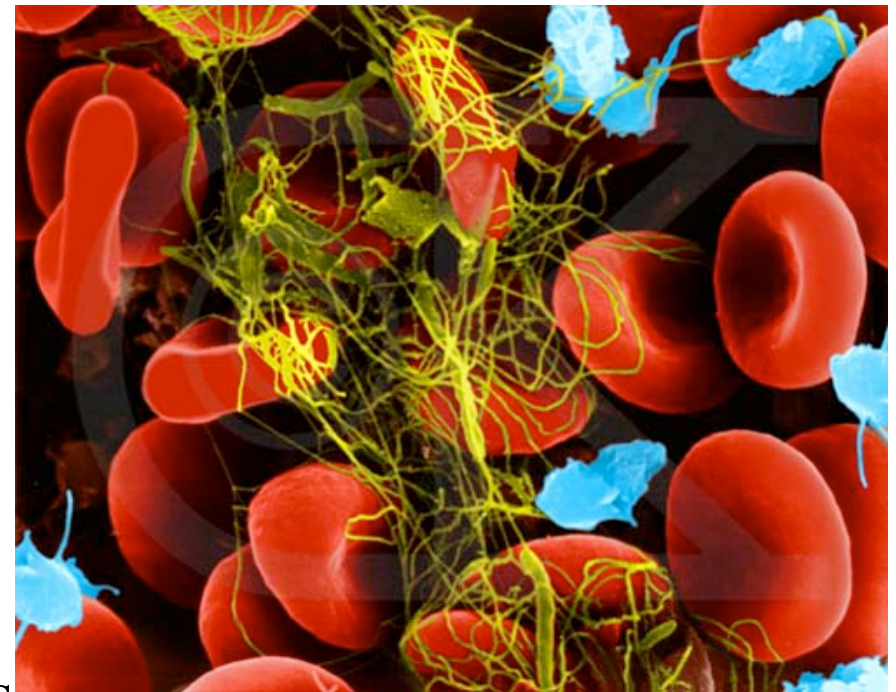
-A and B refer to parts of α and β released upon thrombin cleav. A (20 aa) ; B (18 aa)



Once cleaved, fibrin is insoluble

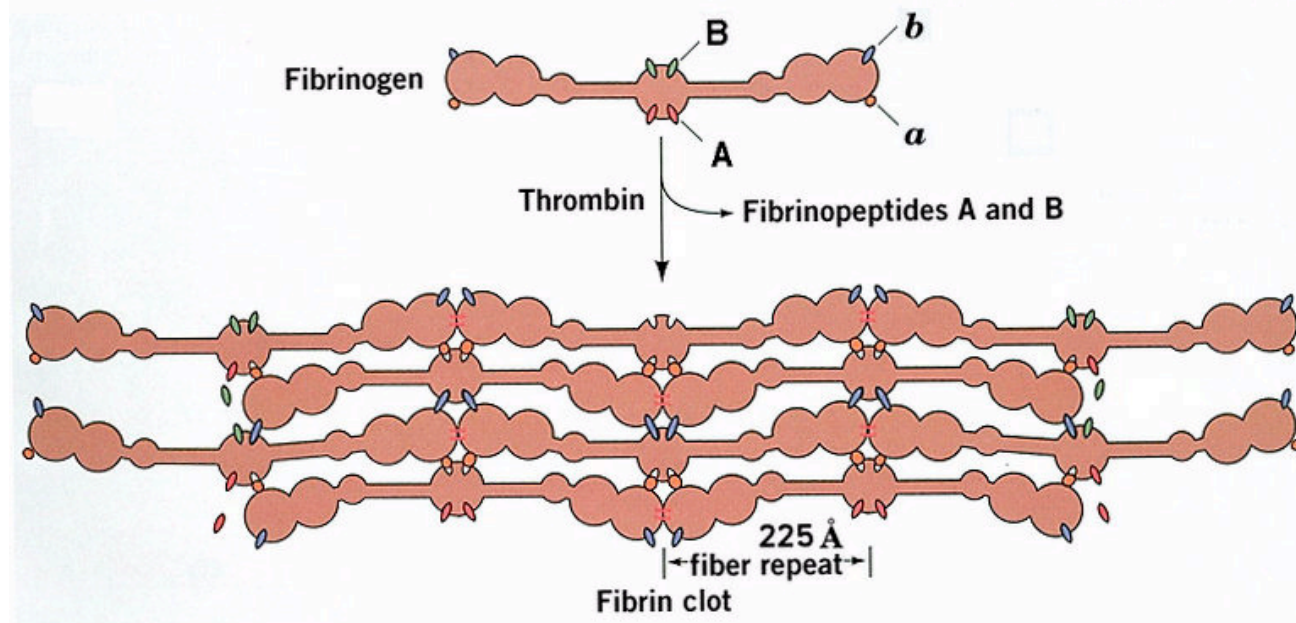
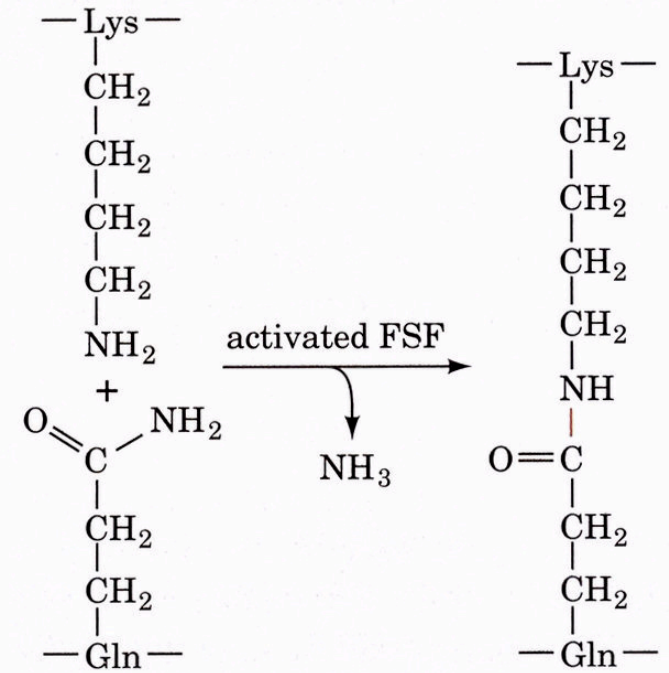
So how do A and B confer solubility?

- 1) A & B mask sites that mediate aggregation
- 2) A & B are highly anionic and so repel other fibrinogen molecules

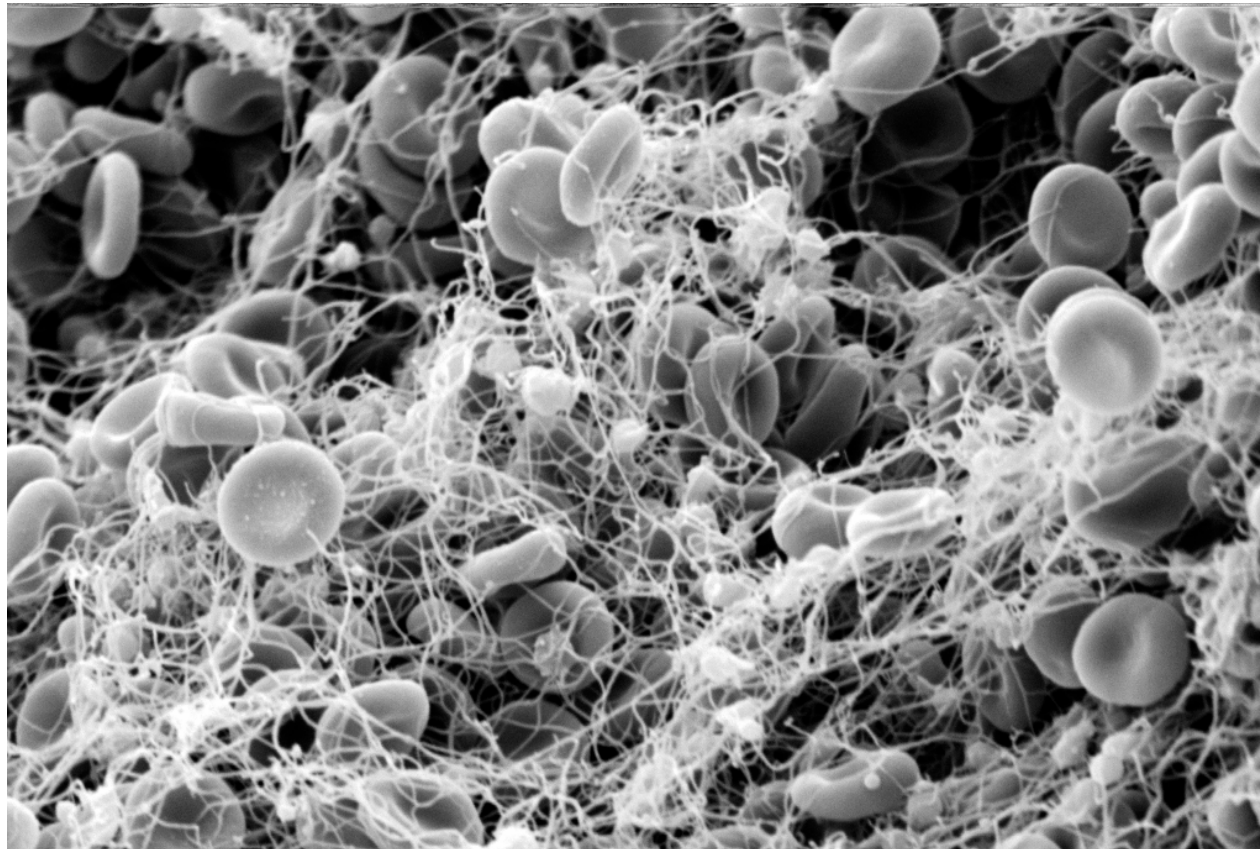


*Step 3: Conversion of soft fibrin clots to hard clots

- Involves crosslinking of neighboring fibrin molecules
- Catalyzed by fibrin-stabilizing factor (fsf or factor XIIIa)
- Joins C-term segments of γ chains by forming isopeptide bonds between Gln on one γ and a Lys on the other.



- α are linked also but slower
- If decreased FSF, have increased bleeding
- FSF in both platelets and plasma occur as zymogen activated by thrombin
- Thrombin cleaves an Arg-Gly bond near the N-terminus of FSF



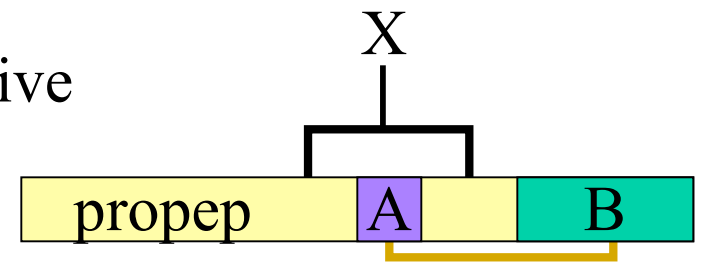
Overview of Thrombin Activation

Thrombin needs to active only locally, at site of injury

Circulates in plasma as prothrombin – single chain of 582 aa
(almost twice the size of active thrombin)

Monomer in zymogen but a dimer when active

A chain (36aa) and B chain (259aa)
connected by disulfide bond



Prothrombin is cleaved by factor X twice

Arg271 – Thr 272 releases N-term propeptide

Arg320 – Ile 321 separates A and B chains

Second cleavage activates, allowing an ion pair

NH_4^+ of Ile321 and Asp524

Propeptide of Prothrombin

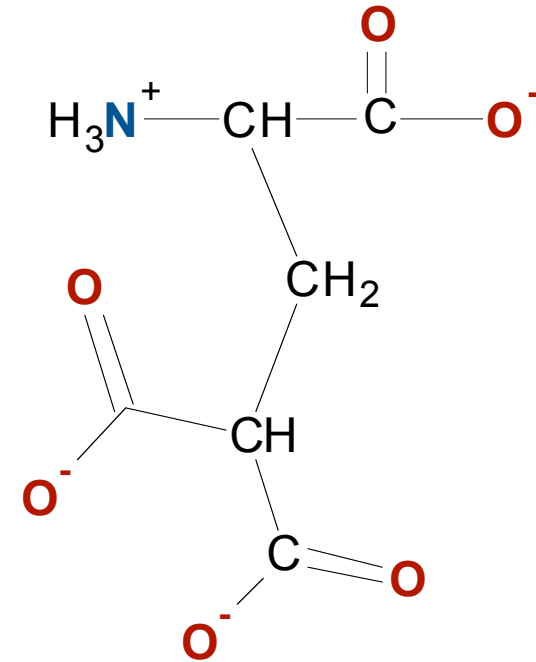
- Propeptide has 3 domains

1) N-term 40 residue Gla domain

- Gla = γ carboxyglutamate

- Strong Ca^{2+} chelator

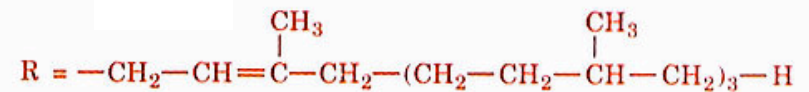
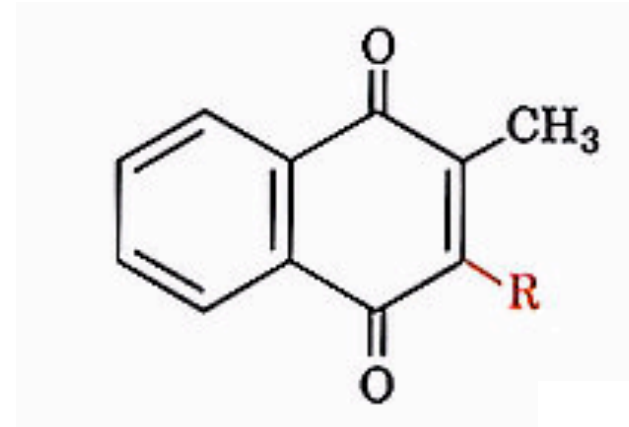
- Bind Ca^{2+} that mediates interaction with phospholipid membrane of platelet



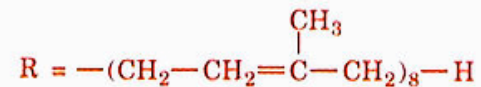
H_3N^+ -¹ Ala – Asn – Thr – Phe – Leu – Gla – Gla – Val – Arg – Lys ¹⁰ –
¹¹ Gly – Asn – Leu – Gla – Arg – Gla – Cys – Val – Gla – Gla ²⁰ –
²¹ Thr – Cys – Ser – Tyr – Gla – Gla – Ala – Phe – Gla – Ala ³⁰ –
³¹ Leu – Gla – Ser – Ser – Thr – Ala – Thr – Asp – Val – Phe ⁴⁰ –

Vitamin K as a Cofactor

- Vit K is essential cofactor for proper prothrombin synthesis
- Must have in diet or no clotting
- Prothrombin is made in liver
- Made without Vit K but only 1-2% active. Reason is that Vit K is a necessary cofactor for post-translational modification of prothrombin in ER
- Needed for Glu conversion to Gla



Vitamin K₁ (Phylloquinone)



Vitamin K₂ (Menaquinone)



Vitamin K₃ (Menadione)

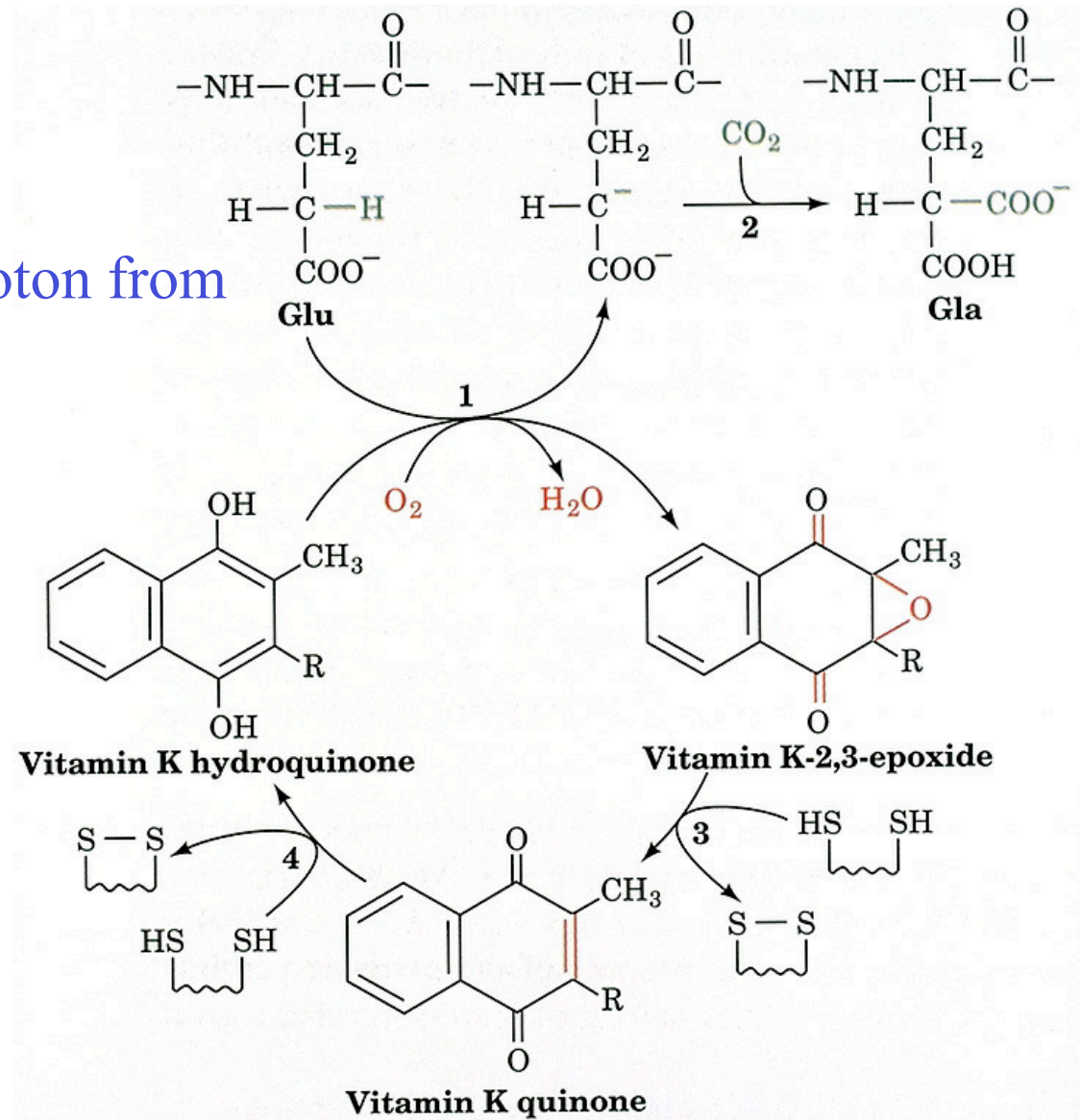
Vitamin K cofactor in Glu to Gla conversion

Conversion of Glu to Gla

1) Vitamin K extracts a γ proton from Glu, yielding a carbanion

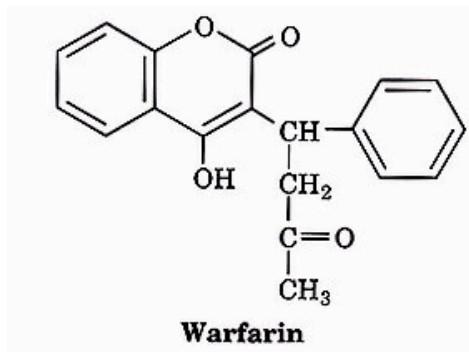
2) The carbanion then reacts with CO_2 to yield Gla

3 & 4) Vitamin K is regenerated



Inhibitors of Vitamin K Regeneration

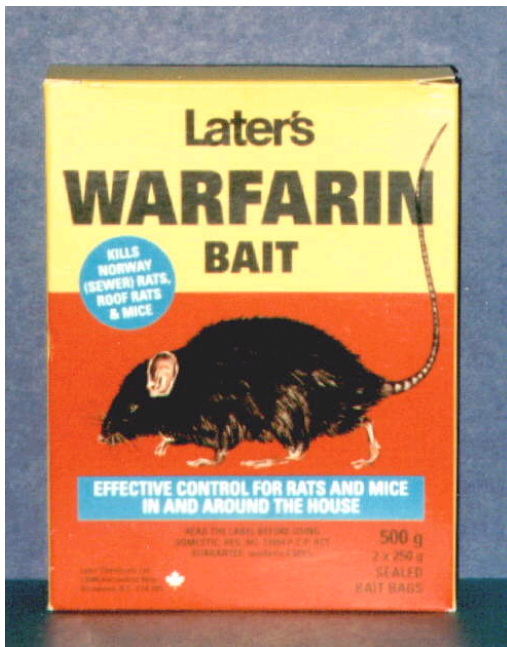
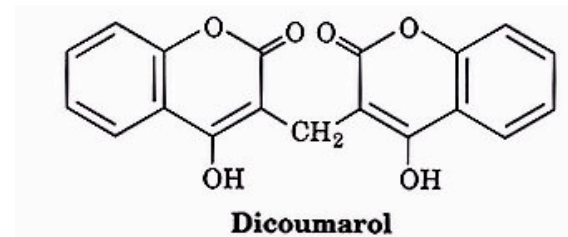
warfarin (rat poison)



- Take awhile to take effect because turnover of coagulation proteins is relatively slow (~5-7 days).

- Wont affect prots synthesized before ingestion

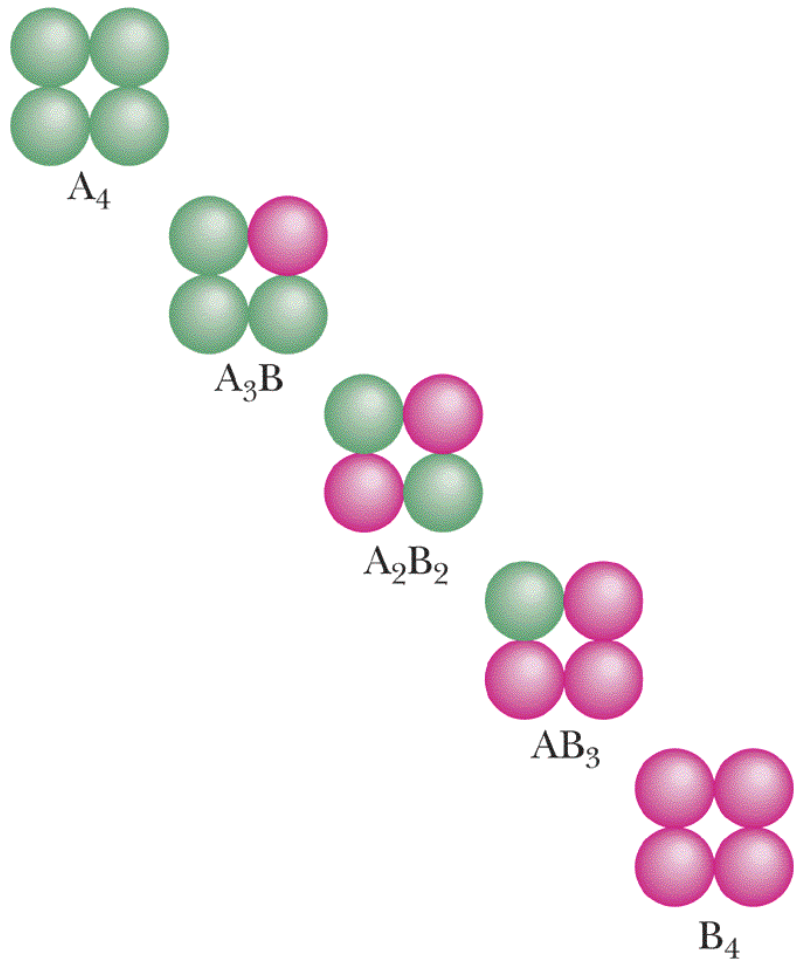
dicoumarol (spoiled sweet clover)



Isozymes of Lactate Dehydrogenase

Garrett/Grisham, Biochemistry with a Human Focus
Figure 10.26

(a) The five isomers of lactate dehydrogenase



(b)

	A_4	A_3B	A_2B_2	AB_3	B_4
Liver	●	○	○	○	○
Muscle	●	○	○	○	○
White cells	○	○	●	○	○
Brain	○	○	●	●	○
Red cells	○	○	○	●	○
Kidney	○	○	○	●	●
Heart	○	○	○	○	●