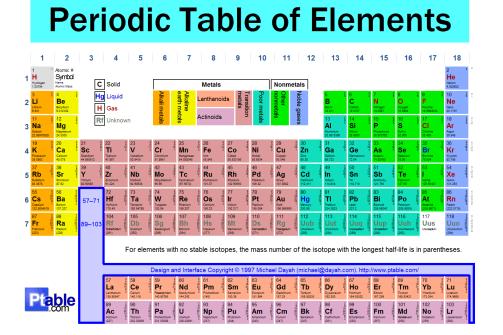
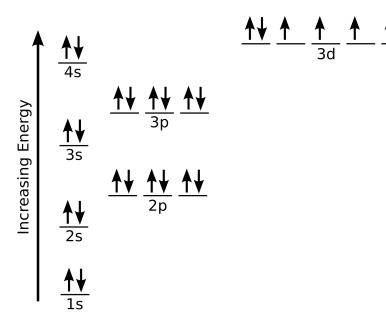
IRON METABOLISM

Harper's Illustrated Biochemistry chapter 50

IRON

- 26th element in the periodic table
 - Chemical Symbol: Fe
 - MW = 55.85
 - Electron Configuration: 1s² 2s²2p⁶ 3s²3p⁶4s²3d⁶
 - Fourth most abundant mineral O > Si > Al
 - Oxidation states = -2 to +6
- Readily interconverted, i.e. redox active
 - very useful for redox chemistry in the body
 - very dangerous chemistry





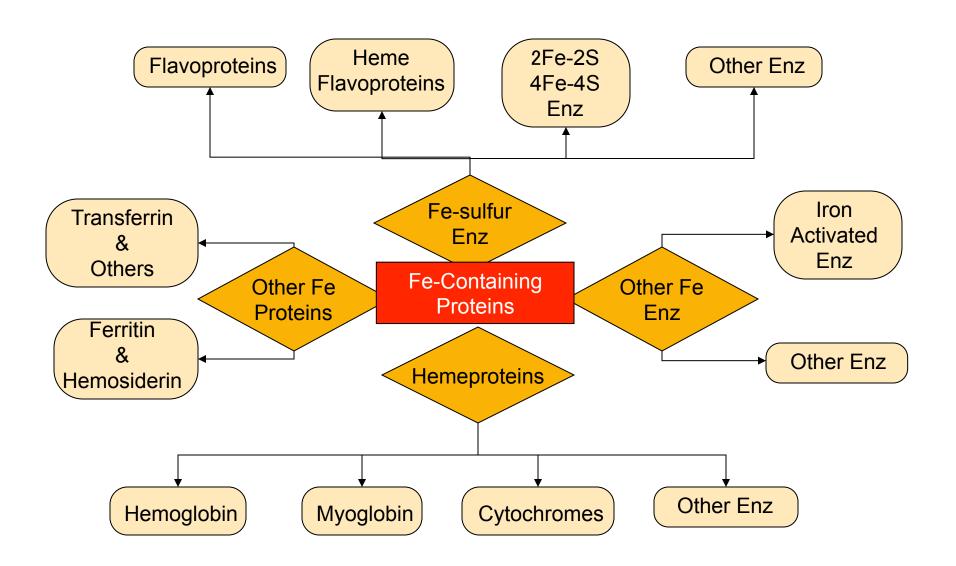
IRON FUNCTIONS IN BIOLOGY

- Oxygen Transport and Storage
 - Hemoglobin
 - Myoglobin
- Electron Transport and Energy Metabolism
 - Cytochromes
 - Fe-S proteins
- Substrate Oxidation & Reduction

Iron dependent enzyme:

- Ribonucleotide reductase
- Amino acid oxidases
- Fatty acid desaturases
- Nitric oxide synthetase
- Peroxidases
- Regulation of intracellular iron

IRON IN BIOLOGY



IRON FORMS IN DIET

Heme

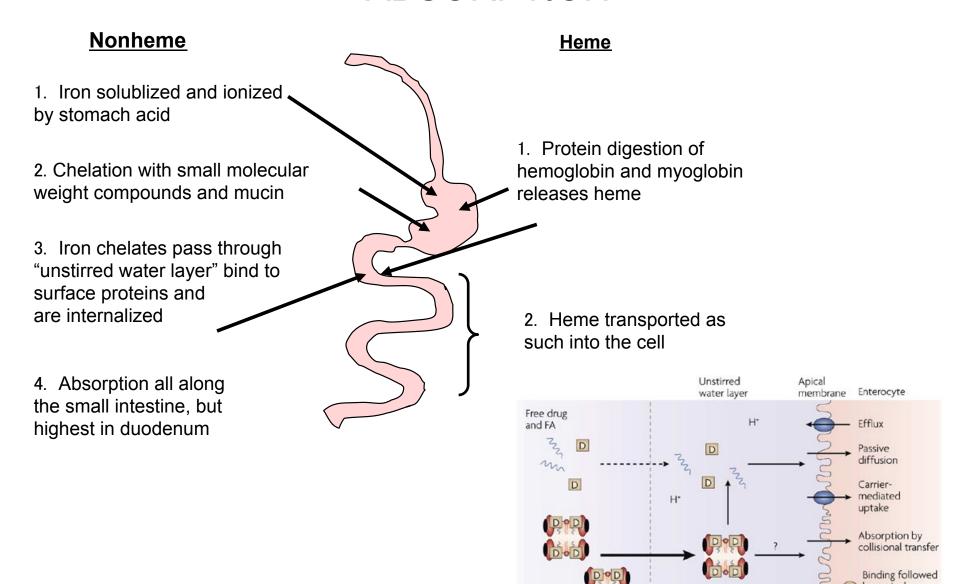
- Iron-porphyrin prosthetic group
- Hemoglobin, myoglobin, cytochromes
- Other iron-containing enzymes are
 ~3% body iron
 - Aconitase, peroxidases
- 5-35% is absorbed
- Exist as Fe²⁺

$$H_2C = CH$$
 H_3C
 CH_2
 CH_2
 CH_3
 CH_4
 CH_5
 CH_5
 CH_5
 CH_7
 CH_7
 CH_8
 CH_9
 CH

Nonheme

- >85% of iron in foods is non heme iron
- 2-20% is absorbed
- Exist as Fe³⁺

ABSORPTION



Micellar

drug and FA DOD

by vesicular

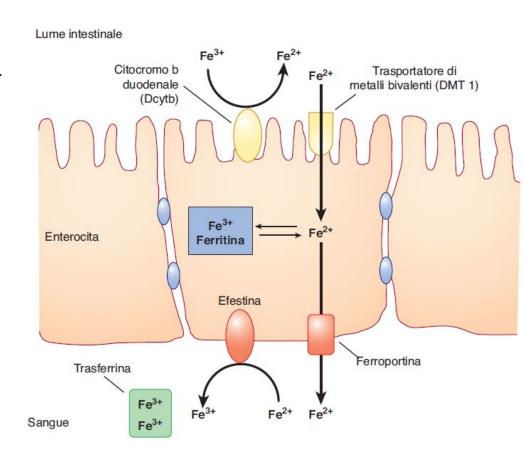
uptake

ABSORPTION

- Ferrous, Fe²⁺, most soluble = most absorbable
- Each mechanism has 3 phases
 - Iron uptake
 - Intraenterocyte transport
 - Storage and extraenterocyte transfer

Dietary Iron:

- Iron is essential element and must be precisely regulated.
- On the lumen side of small intestine iron is reduced from its ferric form(Fe³⁺) to ferrous form(Fe²⁺).
- Ferrous iron is then transported in enterocytes by DMT1(divalent metal transporter).



ABSORPTION

- Heme iron is an important dietary sources of iron because it is more effectively absorbed than nonheme iron.
- From 5% to 35% of heme iron is absorbed from a single meal, whereas non-heme iron absorption from a single meal can range 2%-20%, depending on the iron status of the individual and the ratio of enhancers and promotors in the diet. Thus, although it constitutes about 10% of the iron found in the diet, heme iron may provide up to one-third of total absorbed dietary iron.
- The reason ascorbic acid promote iron absorption is ascorbic acid maintain iron in a reduced form and forms a soluble chelate with iron. These actions are shared by organic acids such as citric, lactic acids.
- A number of dietary factors influence iron absorption.
 - Promotors
 - Amino Acids
 - Animal Proteins(for heme)
 - Ascorbic Acid
 - Hydrochloric Acid
 - Organic Acids
 - Sugars
 - Mucin

- Inhibitors
 - Carbonates
 - Calcium (for heme)
 - Egg yolk phosvitin
 - Fiber
 - Oxalates
 - Phosphates
 - Phytates
 - Plant polyphenols
 - Soy proteins

TRANSPORT

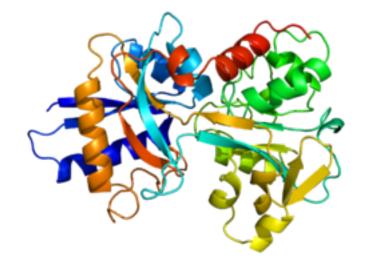
Free iron is toxic because it catalyses the Fenton reaction generating free oxygen radicals.

$$Fe^{2^{+}} + H_{2}O_{2}$$
 \longrightarrow $Fe^{3^{+}} + OH^{*} + OH^{-}$

- In biological systems iron is always bound to proteins to limit its toxicity.
- In plasma, it is bound to transferrin that plays a key role in iron transport to sites where it is required.

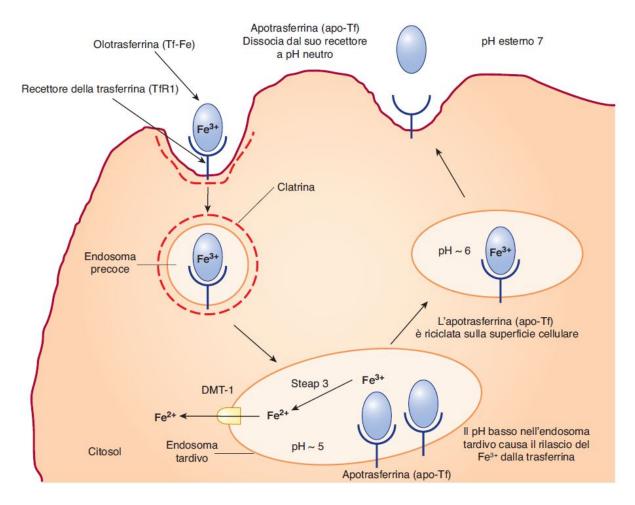
Transferrin: Transport iron

- Single polypeptides composed of two iron binding half-site motifs, ~679 aas, ~76 kDa MW;
- It is a glycoprotein synthesised in the liver;
- Bind <u>2 Fe³⁺</u> and 2 HCO₃
- Normally 25-50% saturated with iron
- Lactoferrin is iron binding protein in milk ,plasma and mucus secretion such as tears
- Ovotransferrin is iron binding protein in bird's egg white



- Transferrin glycosilation is compromised in some disorders and in chronic alcholism, where carbohydrate-deficient transferrin, CDT, is decrease and can be monitored by isoelectric focusing (IEF).
- CDT is a marker for chronic alcholism

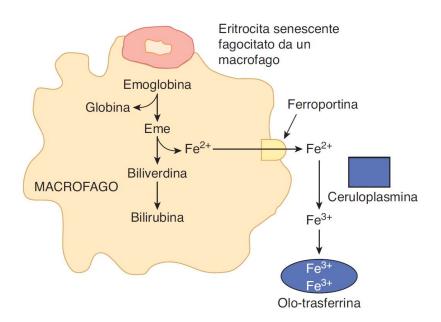
IRON TRANSPORT: TRANSFERRIN CYCLE



Transferrin cycle: holotransferrin (Tf-Fe) binds to transferrin receptor 1 (TfR1) on cell surface. Clathrin-coated vescicles form and endocitosis occurs forming endosomes where pH is acidic. The acidic pH causes iron release from transferrin. Apotransferrin (Apo.Tf) still binds to TfR1. Ferric iron is converted to ferrous iron by a iron reductase (Steap 3). Ferrous iron is transported in the cytosol trhough DMT-1. The TfR1-apo-Tf complex is recycled on cell surface where apo-Tf is released and TfR1 can bind another Tf-Fe.

IRON TRANSPORT: TRANSFERRIN CYCLE

- TfR1 is present in almost all cells, especially in erythrocytes precursors
- There is a TfR2 (TfR2) that is mainly expressed on epatocyte cells surface but it has a low affinity for Tf-Fe and it does not seem to be involved in iron uptake.
- It is one of the sensors for body iron stiored levels
- Erythorcites half-life is around 60 days and they are engulfed by macrophages, where heme is degraded and iron is recycled and it is the highest iron source for the body (25 mg per day) anddiet iron contributes with only 1-2 mg



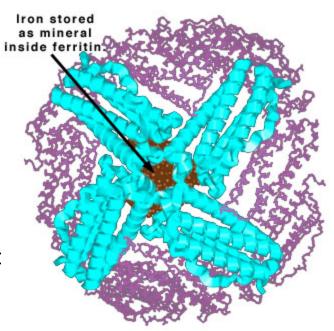
STORAGE IRON

Ferritin

- Major iron storage protein
- Apoferritin 24 polypeptide units in raspberry-like cluster
- Surrounds spherical cluster of <u>hydrated</u> ferric phosphate within its hollow center
- Can contain up to 4500 Fe atoms
- Liver contains ~60% of ferritin in the body
- Two types of subunits:
 - H subunit: 22 kDa, 182 aa, predominant in heart
 - L subunit: 20 kDa, 174 aa, predominant in liver

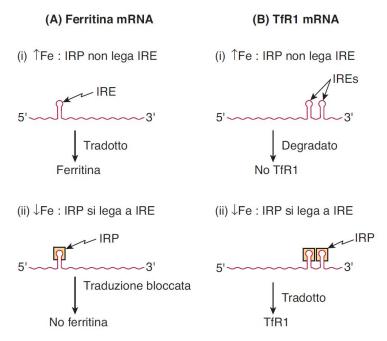
Hemosiderin

- ~50% liver iron stores
- Reacts to ferritin antibodies likely a degradation product
- Insoluble, ~30% iron by weight
- Less available for mobilization



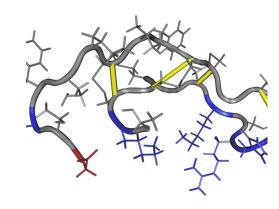
REGULATION OF INTRACELLULAR HOMEOSTASIS

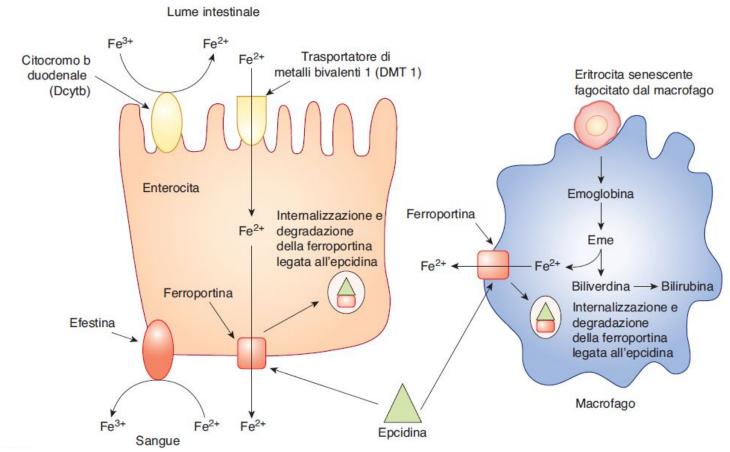
- Synthesis of TfR1 and ferritin are linked to the intracellular iron content
- When iron levels are high, ferritin is synthesised for iron storage and TrF1 synthesis is inhibited
- When iron levels are low, ferritin synthesis is blocked whereas TrF1 is active
- Regulation of mRNA stability is involved
- mRNA for ferritin and TrF1 contain iron response elements (IREs) forming hairpins in the untranslated regions at the 5' and 3', respectively
- IREs are linked to iron regulatory proteins (IRPs) that are sensitive to intracellular iron levels and induced by low levels of the metal
- IRPs bind to IREs when iron levels are low
- IRPs binding to 5' UTR mRNA blocks ferritin translation
- IRPs binding to 3' UTR mRNA stabilises mRNA and increases the synthesis of TrF1.



HEPCIDIN

- It is a protein with a key role in iron homeostasis
- It is synthesised by liver as a pro-peptide of 84 aa (pro-hepicidin)
- The bioactive peptide contains 25 aa
- This peptide binds to the cellular iron exporter, ferroportin, and initiates internalization and degradation





HEPICIDIN: REGULATION

- The major mechanism of hepicidin is THE REGULATION OF TRANSMEMBRANE IRON TRANSPORT
- It binds to FERROPORTIN, forms hepicidin-ferroportin complex ,which is degraded in the lysosomes and iron is locked inside the cells (mainly enterocytes, hepatocytes and macrophages).
- When hepicidin levels are low, iron exporting cells have abundant ferroportin and thus releases iron into plasma.
- When hepicidin concentration increases it binds to ferroportin and thus iron is retained in the cells.

