

Metabolism of lipids I: Absorption and transport

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Resources



- This lecture
- Lippincott's Biochemistry, Ch. 15

What are lipids?

- Lipids are heterogeneous, hydrophobic, compartmentalized in membranes, as droplets of triacylglycerol (TAG), or in lipoprotein (LP) particles or, or protein-bound.
- Functions: Energy, structures, molecular precursors (e.g., vitamins, signaling)
- The major dietary lipids are triacylglycerol, cholesterol and phospholipids.







Structure and classification of lipids







- Double bonds in FA are always spaced at three-carbon intervals.
- The addition of double bonds decreases the melting temperature (Tm) of a fatty acid
- Increasing the chain length increases the Tm.
- Membrane lipids typically contain unsaturated LCFA to maintain fluidity.

% of human body composition Fatty Acids (FAs) Saturated (SFAs) **Unsaturated fatty Acids (UFAs)** → Stearic acid (STA) 5% mm - Chemical structure: - Dietary sources: beef, lard, tallow **Polyunsaturated (PUFAs)** Monounaturated (MUFAs) → Palmitic acid (PA) 25% - Chemical structure: Oleic acid (OA - n-9) 50% - Dietary sources: palm oil, butter, lard and the second - Chemical structure: Myristic acid (MA) mil - Dietary sources: olive and pecan oils - Chemical structure: - Dietary sources: coconut, butter -> Lauric acid - Chemical structure: mil Omega-3 (n-3 PUFAs) Omega-6 (n-6 PUFAs) - Dietary sources: palm kernel, coconut → a-Linolenic acid (ALA) -+ Linoleic acid (LA) 10% mond - Chemical structure: - Chemical structure: - Dietary sources: soybean and canola oils - Dietary sources: safflower oil, meat Eicosapentaenoic acid (EPA) 1 - Chemical structure: month - Chemical structure: - Dietary sources: salmon, cod liver oil - Dietary sources: vegetable oils Figure legend: -+ Arachidonic acid (AA) Docosahexaenoic acid (DHA) - Chemical structure: Essential fatty acids Conditionally essential fatty acids Chemical structure: - Dietary sources: salmon, tuna, mussels - Dietary sources: poultry and egg

Forms of fatty acids



Free fatty acids (FFA): occur in all tissues and plasma (particularly during fasting).

- >90% of the plasma fatty acids are in the form of fatty acid esters (primarily TAG, cholesteryl esters, and phospholipids) contained in circulating lipoprotein particles.
- Plasma FFA are transported on albumin from adipose tissue to most tissues.

FFA can be oxidized by many tissues

- Liver and muscle, to provide energy
- Liver to synthesize ketone body
- Structural FA: membrane lipids as phospholipids and glycolipids
- Protein-associated FA facilitate membrane attachment.
- FAs are precursors of the hormone-like prostaglandins
- Esterified FAs: in the form of TAG stored in white adipose tissues as the major energy reserve of the body.

Acetyl versus acyl





Both groups are composed of alkyl groups along with another group.

Triacyglycerol







Tristearin a simple triglyceride

a mixed triglyceride

Lipoproteins





As lipid content increases, the density decreases

Function: transport of lipids (cholesterol, cholesterol esters, phospholipids & triacylglycerols) in blood plasma.



Composition of lipoproteins



	Chylomicrons	VLDL	LDL	HDL
Density (g/ml)	< 0.94	0.94-1.006	1.006-1.063	1.063-1.210
Diameter (Å)	2000-6000	600	250	70-120
Site of synthesis	Intestine	Liver	Liver	Liver, intestine
Total lipid (wt%)	99	92	85	50
Triacylglycerols	85	55 Liver	10	6
Cholesterol esters	3	18	50 (bad)	40 (good)
Apolipoproteins	A, C, E, B48	C, B100, E	B100	Α, Ϲ, Ε
Function	Transport of <u>dietary</u> TG	Transport of liver TG	Transport of cholesterol to peripheral tissues	Transport of cholesterol from peripheral tissues (cholesterol scavengers)



Lipid transport

Digestion of lipids





Digestion in the stomach



	Fatty acids	Human milk ^a %
	4:0	_
	6:0	_
	8:0	0.16
	10:0	1.82
	10:1 + 11:0	
	12:0	7.89
1	13:0	
1	14:0	9.45
1	14:1+15:0+15:1	0.84
	16:0	22.78
	16:1 + 17:0 + 17:1	3.04
	18:0	6.51
- x-	18:1 (n-9)	28.72
S).	18:2 (n-6)	15.12
•/·	18:3 (n-6)	0.15
	18:3 (n-3)	0.82
n.	20:0	0.40
	20:1	0.21
	20:2	0.31
	20:3 (n-6)	0.53
	20:4 (n-6)	0.52
	20:5 (n-3)	0.10
	22:0	
	22:1	
	22:4 (n-6)	0.08
	22:5 (n-6)	0.01
	22:5 (n-3)	0.17
	22:6 (n-3)	0.32
	24:0	0.04

- Acid-stable lipases: lingual lipase and gastric lipase
- It has an optimum pH of 2.5 − 5.
- Main target: triacylglycerides with short- and mediumchain fatty acids (< 12 carbons)</p>
- Significance: infants and patients of pancreatic lipasedeficiency or pancreatic insufficiency (e.g., cystic fibrosis).
- Short- and medium-chain fatty are absorbed in stomach.
- The action of lingual lipase is observed to be more significant in the newborn infants.

Emulsification in the small intestine

Two mechanisms of emulsification in the duodenum:

COOH

- Peristalsis : mechanical mixing leading to smaller droplets
- Conjugated bile salts



Cholic acid

Hydrophobic β surface CH₃ O_H O₌ CH₃ O_H O₌ O_H O₌ O_H





Fat globule

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Degradation by pancreatic enzymes

Triacylglycerol degradation



The significance of colipase



Pancreatic lipase is an interfacial enzyme that is most active at an oil-water interface





Bile salts coat lipid droplet and prevent association with lipase Addition of Bile Salts C B Addition of A Colipase

Time



Addition of colipase prevents association of lipase with the bile salt-coated fat droplet

Combined pancreatic lipase-colipase deficiency is an orphan disease

Colipase:

- · Secreted as a zymogen from the pancreas
- Activated by trypsin
- Anchors lipase into the micelle interface at a ratio of 1:1
- Restores activity of lipase against inhibitors



Degradation by pancreatic enzymes



Degradation of cholesteryl ester



Degradation by pancreatic enzymes



Degradation of phospholipids



Hormonal control





Hormonal control

- Entry of food (chyme) induces the release cholecystokinin (CCK; a peptide hormone) from the duodenum and jejunum.
 - Induces contraction of the gallbladder to release bile (bile salts, phospholipids, and free cholesterol)
 - Acts on the exocrine pancreatic cells to release digestive enzymes
 - Decreases gastric motility to slow down the release of gastric contents
- The low pH of the chyme entering the intestine induces intestinal cells to produce secretin (a peptide hormone).
 - Causes the pancreas to release a bicarbonate-rich solution to neutralize the pH and make it optimal for the digestive pancreatic enzymes.
 - Inhibits gastric motility.



2 Fat droplets form in the cisternae of the SER. Absorptive 3 cell Long-chain fatty acids and other Apolipoproteins are synthesized in the products of lipid digestion are RER and then (except for apolipoprotein converted back to triacylglycerols, A-I) move to the SER, where they associate phospholipids, and esters of with lipid droplets. Apolipoprotein A-I 8 cholesterol in the SER. associates with chylomicrons in the Golgi Glycerol, short-chain, apparatus. and medium-chain fatty acids pass through the enterocyte Glycerol, short-chain, and and enter blood SER Golgi medium-chain fatty acids capillary. Mixed micelle Lymphatic capillary (lacteal) Cholesterol Protein Lysophospholipids 000 Chylomicrons and Chylomicron VLDLs pass through Long-chain fatty acids large interendothelial Monoacylglycerols Blood RÉR channels of lymphatic capillary capillaries, and enter Unstirred water layer the lymph. 7 Vesicles carrying Nascent chylomicrons and VLDLs arrive chylomicrons or Transport vesicles fuse with the at the cis face of the Golgi apparatus. Here, VLDLs bud off from basolateral membrane, releasing apolipoproteins are glycosylated. the trans-Golgi chylomicrons or VLDLs. apparatus, and move 6 to the basolateral membrane in transport vesicles. 5

Absorption by enterocytes

- Mixed micelles are formed in the lumen from free fatty acids (FFA), monoacylglycerol, free cholesterol, bile salts, and fatsoluble vitamins.
- Cholesterol is poorly absorbed.
 Note: it can be drug-targeted
- The uptake of fatty acids across the enterocyte brushborder membrane occurs by both passive diffusion and by protein-mediated mechanisms.
- Short- and medium-chain FAs are directly absorbed passive diffusion.





Celiac disease (CD)

- Fat malabsorption leading to steatorrhea
- It is an autoimmune response to gliadin, a peptide found in gluten (wheat, rye, and barley).
- Gliadin contains many proline (14%) and glutamine (40%) residues, making it resistant to digestion.
- Lab tests: the presence of anti-tissue transglutaminana (anti-tTG) antibodies.
- Tissue biopsy: absence of villous surface epithelial c resulting in decreased nutrient absorption.





http://courses.washington.edu/pbio376/celiac/celiacdisease-376.html







Formation and release of chylomicrons



Fates of TAGs in chylomicrons





- TAGs in chylomicrons are hydrolyzed in the bloodstream by lipoprotein lipases that are anchored into the surface of endothelial cells.
- The resulting fatty acids have two possible fates:
 (1) When energy is in good supply, they are converted back to TAGs for storage in adipose tissues.
- (2) When cells need energy, the fatty acids are oxidized into acetyl-CoA.

Familial chylomicronemia (type I hyperlipoproteinemia) is a rare, autosomal-recessive disorder caused by a deficiency of LPL or its coenzyme apo C-II resulting in fasting chylomicronemia and severe hypertriacylglycerolemia, which can cause pancreatitis.

Fate of glycerol





Glycerol is carried in the bloodstream to the liver or kidneys, where it is phosphorylated and then converted to glyceraldehyde 3phosphate and dihydroxyacetone phosphate (DHAP) for either glycolysis or gluconeogenesis or synthesis of TAG.

Fate of chylomicrons

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LDL

ApoE

- When TAGs are removed, chylomicron remnants would contain cholesteryl esters, phospholipids, apolipoproteins, fat-soluble vitamins, and a small amount of TAG).
- Chylomicron remnants bind to apoE receptors via their apoE and are endocytosed.
- ApoE receptor exists in the liver, skeletal muscles, and adipose tissues.
- The intracellular remnants are hydrolyzed to their component parts.

Type III hyperlipoproteinemia: mutations in apoE gene leading to decreased clearance of chylomicron remnants.



Chylomicron

VLDL

Lipolysis