

# "Glycogen Metabolism"

## I. Overview

### Importance of Blood Glucose

- A constant source of blood glucose is an absolute requirement for human life.
- Glucose is the greatly preferred energy source for the brain.
- Glucose is the required energy source for cells with few or no mitochondria, such as mature red blood cells.
- Glucose is essential as an energy source for exercising muscle.
  - It serves as the substrate for anaerobic glycolysis in muscle.

### Sources of Blood Glucose

- Blood glucose can be obtained from three primary sources:
  - The diet
  - Glycogen degradation



- Gluconeogenesis

## Dietary Glucose

- Dietary intake of glucose and glucose precursors is sporadic.
- Glucose precursors include:
  - Starch (a polysaccharide)
  - Disaccharides
  - Monosaccharides
- Depending on the diet, dietary intake is not always a reliable source of blood glucose.

## Gluconeogenesis

- Gluconeogenesis can provide sustained synthesis of glucose.
- It is somewhat slow in responding to a falling blood glucose level.



## Glycogen: Rapidly Mobilized Glucose Reserve

- The body has developed mechanisms for storing a supply of glucose in a rapidly mobilized form: glycogen.
- In the absence of a dietary source of glucose:
  - Glucose is rapidly released into the blood from liver glycogen.
- Similarly:
  - Muscle glycogen is extensively degraded in exercising muscle.
  - This degradation provides muscle tissue with an important energy source.

## Glucose Synthesis When Glycogen Stores Are Depleted

- When glycogen stores are depleted, specific tissues synthesize glucose de novo.
- Carbon sources for gluconeogenesis include:
  - Glycerol
  - Lactate
  - Pyruvate



- Amino acids

## II. Structure and Function

### Major Glycogen Stores

- The main stores of glycogen are found in:
  - Skeletal muscle
  - Liver
- Most other cells store small amounts of glycogen for their own use.

### Functional Role of Glycogen

- Muscle glycogen:
  - Serves as a fuel reserve for the synthesis of ATP during muscle contraction.
- Liver glycogen:
  - Maintains the blood glucose concentration, particularly during the early stages of a fast.



- (Note: Liver glycogen can maintain blood glucose for <24 hours.)

## A. Amounts in Liver and Muscle

- Muscle:
  - Approximately 400 g of glycogen.
  - Makes up 1% to 2% of the fresh weight of resting muscle.
- Liver:
  - Approximately 100 g of glycogen.
  - Makes up to 10% of the fresh weight of a well-fed adult liver.
- What limits the production of glycogen at these levels is not clear.
- In glycogen storage diseases (GSDs):
  - The amount of glycogen in the liver and/or muscle can be significantly higher.



- (Note: In the body, muscle mass is greater than liver mass. Consequently, most of the body's glycogen is found in skeletal muscle.)

## B. Structure

- Glycogen is a branched-chain polysaccharide made exclusively from  $\alpha$ -D-glucose.
- Primary glycosidic bond:
  - $\alpha(1\rightarrow4)$  linkage
- Branching occurs:
  - After an average of 8 to 14 glucosyl residues
  - Each branch contains an  $\alpha(1\rightarrow6)$  linkage
- A single glycogen molecule can contain up to 55,000 glucosyl residues.
- Glycogen polymers exist as:
  - Large, spherical cytoplasmic granules (particles)



- These granules also contain:
  - Most of the enzymes necessary for glycogen synthesis and degradation

### C. Glycogen Store Fluctuation

- Liver glycogen:
  - Increases during the well-fed state.
  - Is depleted during a fast.
- Muscle glycogen:
  - Is not affected by short periods of fasting (a few days).
  - Is only moderately decreased in prolonged fasting (weeks).
- Muscle glycogen is synthesized to replenish muscle stores after they have been depleted following strenuous exercise.
- (Note: Glycogen synthesis and degradation go on continuously. The difference between the rates of these two processes determines the levels of stored glycogen during specific physiologic states.)



### III. Synthesis (Glycogenesis)

- Glycogen is synthesized from molecules of  $\alpha$ -D-glucose.
- The process occurs in the cytosol.
- It requires energy supplied by:
  - ATP (for the phosphorylation of glucose)
  - Uridine triphosphate (UTP)

#### A. Uridine Diphosphate Glucose Synthesis

- $\alpha$ -D-glucose attached to uridine diphosphate (UDP) is the source of all the glucosyl residues that are added to the growing glycogen molecule.
- UDP-glucose is synthesized from:
  - Glucose 1-phosphate
  - UTP
  - Enzyme: UDP-glucose pyrophosphorylase



- Pyrophosphate (PPi) is the second product of the reaction.
  - It is hydrolyzed to two inorganic phosphates (Pi) by pyrophosphatase.
  - The hydrolysis is exergonic, which ensures that the UDP-glucose pyrophosphorylase reaction proceeds in the direction of UDP-glucose production.
- (Note: Glucose 1-phosphate is generated from glucose 6-phosphate by phosphoglucomutase. Glucose 1,6-bisphosphate is an obligatory intermediate in this reversible reaction.

## .B. Primer Requirement and Synthesis

- Glycogen synthase:
  - Catalyzes the formation of  $\alpha(1\rightarrow4)$  linkages in glycogen.
  - Cannot initiate chain synthesis using free glucose as an acceptor from UDP-glucose.
  - Only elongates existing chains of glucose.
  - Therefore, requires a primer.



- A fragment of glycogen can serve as a primer.
- In the absence of a fragment, the homodimeric protein glycogenin serves as the acceptor of glucose from UDP-glucose.
- The side-chain hydroxyl group of tyrosine-194 in glycogenin is the site where the initial glucosyl unit is attached.
- The reaction is catalyzed by glycogenin itself via autoglucosylation, making glycogenin an enzyme.
- Glycogenin then catalyzes the transfer of at least four molecules of glucose from UDP-glucose.
  - This produces a short,  $\alpha(1\rightarrow4)$ -linked glucosyl chain.
- This short chain serves as a primer for elongation by glycogen synthase, which is recruited by glycogenin.
- (Note: Glycogenin stays associated with and forms the core of a glycogen granule.)



### C. Elongation by Glycogen Synthase

- Elongation of a glycogen chain involves:
  - The transfer of glucose from UDP-glucose to the nonreducing end of the growing chain.
  - Formation of a new glycosidic bond between:
    - The anomeric hydroxyl group of carbon 1 of the activated glucose
    - And carbon 4 of the accepting glucosyl residue
- (Note: The nonreducing end of a carbohydrate chain is one in which the anomeric carbon of the terminal sugar is linked by a glycosidic bond to another molecule, making the terminal sugar nonreducing.)
- The enzyme responsible for making  $\alpha(1\rightarrow4)$  linkages in glycogen is glycogen synthase.
- (Note: The UDP released when the new  $\alpha[1\rightarrow4]$  glycosidic bond is made can be phosphorylated to UTP by nucleoside diphosphate kinase [ $\text{UDP} + \text{ATP} \rightleftharpoons \text{UTP} + \text{ADP}$ ].)



## D. Branch Formation

- If no other synthetic enzyme acted on the glycogen chain:
  - The resulting structure would be a linear (unbranched) chain of glucosyl residues.
  - These would be attached by  $\alpha(1 \rightarrow 4)$  linkages.
  - Such a compound is found in plant tissues and is called amylose.
- In contrast, glycogen:
  - Has branches located, on average, eight glucosyl residues apart.
  - Forms a highly branched, tree-like structure.
- This structure is:
  - Far more soluble than unbranched amylose.
  - Has more nonreducing ends, allowing:
    - Faster addition of new glucosyl residues.
    - Faster removal of glucosyl residues.
  - This greatly accelerates glycogen synthesis rate and dramatically increases glycogen size.



## 1. Branch Synthesis

- Branches are made by the action of:
  - Branching enzyme: amylo- $\alpha(1\rightarrow4)\rightarrow\alpha(1\rightarrow6)$ -transglycosylase
- This enzyme:
  - Removes a set of 6 to 8 glucosyl residues from the nonreducing end of the glycogen chain.
  - Breaks an  $\alpha(1\rightarrow4)$  bond.
  - Attaches the removed segment to a nonterminal glucosyl residue by an  $\alpha(1\rightarrow6)$  linkage.
  - Thus functions as a 4:6 transferase.
- The resulting ends can now be further elongated by glycogen synthase:
  - New nonreducing end
  - Old nonreducing end (from which residues were removed)



## 2. Additional Branch Synthesis

- After elongation of the two ends:
  - Their terminal 6 to 8 glucosyl residues can be removed.
  - These can be used to make additional branches.

## IV. Degradation (Glycogenolysis)

- The degradative pathway that mobilizes stored glycogen in liver and skeletal muscle:
  - Is not a reversal of the synthetic reactions.
  - Requires a separate set of cytosolic enzymes.
- When glycogen is degraded:
  - The primary product is glucose 1-phosphate, obtained by breaking  $\alpha(1\rightarrow4)$  glycosidic bonds.
  - Free glucose is also released from each  $\alpha(1\rightarrow6)$ -linked glucosyl residue (branch point).



## A. Chain Shortening

- Glycogen phosphorylase:
  - Sequentially cleaves  $\alpha(1\rightarrow4)$  glycosidic bonds between glucosyl residues.
  - Acts at the nonreducing ends of glycogen chains.
  - Uses simple phosphorolysis (not hydrolysis), producing glucose 1-phosphate.
  - Continues until four glucosyl units remain on each chain at a branch point.
- The resulting structure is called a limit dextrin.
  - Phosphorylase cannot degrade it any further.
- (Note: Phosphorylase requires pyridoxal phosphate, a derivative of vitamin B6, as a coenzyme.)

## B. Branch Removal

- Branches are removed by the two enzymic activities of a single bifunctional protein, the debranching enzyme.



1. oligo- $\alpha(1\rightarrow4)\rightarrow\alpha(1\rightarrow4)$ -glucantransferase activity:

- Removes the outer three of the four glucosyl residues remaining at a branch.
- Transfers them to the nonreducing end of another chain, thereby lengthening it.
- Breaks an  $\alpha(1\rightarrow4)$  bond and makes an  $\alpha(1\rightarrow4)$  bond.
- Functions as a 4:4 transferase.

2. amylo- $\alpha(1\rightarrow6)$ -glucosidase activity:

- Removes the remaining glucose residue attached via an  $\alpha(1\rightarrow6)$  linkage.
- Does so hydrolytically, releasing free (nonphosphorylated) glucose.

• After branch removal:

- The glucosyl chain is again available for degradation by glycogen phosphorylase.
- Degradation continues until four glucosyl units in the next branch are reached.



## C. Glucose 1-Phosphate Isomerization to Glucose 6-Phosphate

- Glucose 1-phosphate, produced by glycogen phosphorylase, is:
  - Isomerized in the cytosol to glucose 6-phosphate by phosphoglucomutase.
- In the liver:
  - Glucose 6-phosphate is transported into the endoplasmic reticulum (ER) by glucose 6-phosphate translocase.
  - In the ER:
    - It is dephosphorylated to glucose by glucose 6-phosphatase.
      - Same enzyme used in the last step of gluconeogenesis
  - The resulting glucose is transported from the ER to the cytosol.
  - Hepatocytes release glycogen-derived glucose into the blood to help maintain blood glucose levels until gluconeogenesis becomes active.



- (Note: Muscle lacks glucose 6-phosphatase. Consequently:
  - Glucose 6-phosphate cannot be dephosphorylated or released into the blood.
  - Instead, it enters glycolysis, providing energy needed for muscle contraction.)

#### D. Lysosomal Degradation

- A small amount (1% to 3%) of glycogen is degraded by the lysosomal enzyme acid  $\alpha(1\rightarrow4)$ -glucosidase (acid maltase).
- The purpose of this autophagic pathway is unknown.
- Deficiency of acid maltase causes:
  - Accumulation of glycogen in lysosomal vacuoles.
  - Leads to GSD type II: Pompe disease.
- (Note: Pompe disease, caused by acid maltase deficiency, is the only GSD that is a lysosomal storage disease.)



- Lysosomal storage diseases:
  - Are genetic disorders characterized by accumulation of abnormal amounts of carbohydrates or lipids.
  - Caused primarily by:
    - Decreased lysosomal degradation due to:
      - Absence, or
      - Decreased activity or amount of a specific lysosomal acid hydrolase responsible for degradation.

### Glycogen Storage Diseases

Type <sup>a</sup>	Deficient Enzyme	Main Signs/Symptoms
I – Von Gierke disease	Glucose-6-phosphatase	Lactic acidosis, hypoglycemia, hyperuricemia, Impaired growth, bone thinning
II – Pompe disease <sup>a</sup>	Acid $\alpha$ -glucosidase (acid maltase)	Excess glycogen in lysosomes. Normal blood sugar. Enlarged liver and heart; muscle weakness and heart problems in severe forms
III – Cori disease <sup>a</sup>	Glycogen debranching enzyme (4:4 transferase)	Enlarged liver, growth delay, fasting hypoglycemia, abnormal glycogen structure, elevated fat in blood, possible muscle weakness
IV – Andersen disease	Glycogen branching enzyme (4:6 transferase)	Growth delay, enlarged liver, myopathy; death by age 5 usually
V – McArdle disease <sup>a</sup>	Muscle glycogen phosphorylase (myophosphorylase)	Muscle weakness and cramping after exercise; usually a relatively benign, chronic condition
VI – Hers disease	Liver glycogen phosphorylase	Liver enlargement; hypoglycemia; developmental delay
VII – Tarui disease	Muscle phosphofructokinase	Exercise-induced muscle cramps, developmental delay, hemolytic anemia in some



## V. Regulation of Glycogenesis And Glycogenolysis

- Glycogen metabolism is tightly regulated to maintain blood glucose homeostasis.
- In the liver:
  - Glycogenesis is accelerated in the well-fed state.
  - Glycogenolysis is accelerated during fasting.
- In skeletal muscle:
  - Glycogenolysis occurs during active exercise.
  - Glycogenesis begins when the muscle is at rest.
- Regulation occurs at two levels:
  - a. Hormonal (covalent) regulation: via phosphorylation/dephosphorylation of enzymes to meet whole-body needs.
  - b. Allosteric regulation: by effector molecules to meet specific tissue needs.

### A. Covalent Activation of Glycogenolysis

- Hormones involved: Glucagon (liver) and Epinephrine (liver + muscle)



- Hormone binding occurs at G protein-coupled receptors (GPCRs) on the plasma membrane, triggering a cascade.

## 1. Protein Kinase A (PKA) Activation

- Hormone (glucagon/epinephrine) binds to GPCR → activates G protein → activates adenylyl cyclase.
- Adenylyl cyclase converts ATP to cyclic AMP (cAMP).
- cAMP activates PKA by:
  - Binding to PKA's regulatory subunits.
  - Releasing the catalytic subunits (active).
- Active PKA phosphorylates several enzymes involved in glycogen metabolism.
- (Note: When cAMP is degraded, inactive tetrameric PKA reforms.)



## 2. Phosphorylase Kinase Activation

- Exists in:
  - Inactive "b" form
  - Active "a" form
- PKA phosphorylates phosphorylase kinase  $b \rightarrow a$  (active form).

## 3. Glycogen Phosphorylase Activation

- Exists in:
  - Inactive dephosphorylated "b" form
  - Active phosphorylated "a" form
- Phosphorylase kinase a phosphorylates glycogen phosphorylase  $b \rightarrow a$ , initiating glycogenolysis.

## 4. Signal Amplification

- Each hormone  $\rightarrow$  multiple PKA molecules
- Each PKA  $\rightarrow$  multiple phosphorylase kinases



- Each phosphorylase kinase  $\rightarrow$  many glycogen phosphorylase a
- Result: Amplified glycogen breakdown

## S. Maintenance of Phosphorylated State

- Protein phosphatase-1 (PPI):
  - Normally removes phosphate groups.
  - Is inhibited by inhibitor proteins, which are activated by cAMP.
  - Result: Prolonged activation of glycogenolysis enzymes.
- Insulin:
  - Activates phosphodiesterase, which degrades cAMP.
  - Opposes effects of glucagon and epinephrine.

## B. Covalent Inhibition of Glycogenesis

- Glycogen synthase exists in two forms:
  - Active "a" form = dephosphorylated
  - Inactive "b" form = phosphorylated



- Phosphorylation = Inactivation
  - Occurs at multiple sites on glycogen synthase.
  - The more phosphorylated, the less active the enzyme becomes.
  - Catalyzed by several protein kinases, including:
    - PKA (protein kinase A)
    - Phosphorylase kinase
- Dephosphorylation by PPI (Protein Phosphatase-I):
  - Converts inactive glycogen synthase b  $\rightarrow$  active "a" form
  - Promotes glycogenesis

### C. Allosteric Regulation of Glycogenesis and Glycogenolysis

- Allosteric regulation allows enzymes to rapidly respond to metabolite levels and energy status of the cell.
- Can override hormonal (covalent) regulation.



- Enzymes exist in equilibrium between:
  - R (relaxed) state = more active
  - T (tense) state = less active
  - Effectors shift R/T balance, altering activity without changing phosphorylation.

## 1. Regulation in the Well-Fed State

- Glycogen synthase b:
  - Allosterically activated by glucose 6-phosphate in liver and muscle (↑ in fed state)
- Glycogen phosphorylase a:
  - Allosterically inhibited by:
    - Glucose 6-phosphate
    - ATP (high-energy signal)
    - In liver only: Free glucose also inhibits



## 2. Glycogenolysis Activation by AMP

- In muscle, glycogen phosphorylase b (myophosphorylase) is:
  - Activated by AMP without phosphorylation
  - AMP binds allosterically and shifts enzyme to active R state
- AMP levels  $\uparrow$  during:
  - Anoxia
  - ATP depletion
  - Extreme exercise conditions
- AMP also activates PFK-I in glycolysis  $\rightarrow$  glucose from glycogen is oxidized for energy

## 3. Glycogenolysis Activation by Calcium ( $\text{Ca}^{2+}$ )

- $\text{Ca}^{2+}$  release occurs in:
  - Muscle  $\rightarrow$  in response to neural stimulation
  - Liver  $\rightarrow$  in response to epinephrine binding  $\alpha_1$ -adrenergic receptors



- $\text{Ca}^{2+}$  binds to calmodulin (CaM):
  - CaM is a ubiquitous  $\text{Ca}^{2+}$ -binding protein
  - Binds 4  $\text{Ca}^{2+}$  ions  $\rightarrow$  changes conformation
  - $\text{Ca}^{2+}$ -CaM complex activates enzymes by binding as an essential subunit

### Role in Phosphorylase Kinase Activation

- Phosphorylase kinase is a tetramer, and its  $\delta$ -subunit is calmodulin
- Binding of  $\text{Ca}^{2+}$  to CaM activates phosphorylase kinase
  - This occurs without needing phosphorylation by PKA
  - Allows cAMP-independent activation of glycogenolysis

Note: Epinephrine acting on  $\beta$ -adrenergic receptors  $\rightarrow$  activates cAMP pathway (not  $\text{Ca}^{2+}$ )

#### a. Muscle Phosphorylase Kinase Activation

- Trigger: Muscle contraction  $\rightarrow$   $\uparrow$  ATP demand



- Process:

- Nerve impulses → depolarization
- $\text{Ca}^{2+}$  released from sarcoplasmic reticulum into sarcoplasm
- $\text{Ca}^{2+}$  binds CaM ( $\delta$ -subunit) → activates phosphorylase kinase b
- Phosphorylase kinase b → activates glycogen phosphorylase → glycogen → glucose 6-phosphate → glycolysis

## b. Liver Phosphorylase Kinase Activation

- Trigger: Epinephrine → physiological stress → ↑ blood glucose demand

- Process:

- Epinephrine binds  $\alpha_1$ -adrenergic GPCRs in hepatocytes
- Activates phospholipid-dependent cascade
- $\text{Ca}^{2+}$  released from ER into cytoplasm
- $\text{Ca}^{2+}$ -CaM complex → activates hepatic phosphorylase kinase b
- Initiates glycogenolysis



Additional Role: Released  $\text{Ca}^{2+}$  also helps activate protein kinase C, which can:

- Phosphorylate & inactivate glycogen synthase a

## VI. Glycogen Storage Diseases (GSDs)

Definition:

- A group of genetic disorders caused by deficiencies in enzymes involved in glycogen degradation or (less commonly) glycogen synthesis.

### Common Clinical Features

- Hypoglycemia (↓ blood glucose)
- Hepatomegaly (enlarged liver)
- Delayed growth
- Muscle weakness or exercise-induced cramps



## Underlying Mechanisms

- Two main outcomes:
  - a. Abnormal glycogen structure formation
  - b. Excess accumulation of normal glycogen due to impaired degradation

## Tissue Specificity

- Liver-specific enzyme defect → leads to hypoglycemia
- Muscle-specific enzyme defect → leads to muscle weakness
- Generalized defects → affect multiple tissues (e.g., heart, kidneys)

## Disease Severity Spectrum

- Mild forms: Not life-threatening
- Severe forms: Can be fatal in early childhood



# Epidemiology

- 15 recognized types of GSD
- Some types are extremely rare

