

Lecture 10: Other Factors Affecting AR

I. Gonadal

Modulate AR response to catecholamines

- 1) ***estrogen & progesterone*** → ***catecholamine metabolism***
- 2) oviduct & uterine smooth muscles response:
 - a) α -AR → contraction: ↑ estrogen → uterus
 - b) β -AR → relaxation: pregnancy/↑ progesterone → uterus

II. Adrenal Steroid Hormones

glucocorticoid

permissive role → cAMP mediated effects on liver/other organs
e.g. catecholamines in adrenalectomized rats?

↓ **gluconeogenesis/glycogenesis & lipolytic response of adipose**
~cardiovascular response

III. Thyroid Hormones (TH)

↑TH → catecholamine effect enhanced
↓TH → catecholamine effect depressed } → sympathetic neurons

Sympathoadrenal Functions

I. Constancy of homeostasis

A) ↓ blood pressure, glucose, O₂ availability → ↑ catecholamines

B) stress any condition → elevated plasma catecholamines

↑ E: dogs: barking

↑ E & NE: humans → exercise, standing, post surgery, low glucose

C) E

adrenal: humoral messenger → stimulus to autonomic effectors

D) NE

sympathetic neurons → local control autonomic effectors

II. Dependent on the AR types at effectors

A) Receptors of autonomic effector cells

1) α -AR & β -AR

2) only β -AR with cholinergic receptors

B) Smooth muscle

1) α -AR contraction (except intestines):

Ach \rightarrow relaxation

2) β -AR relaxation (except cardiac):

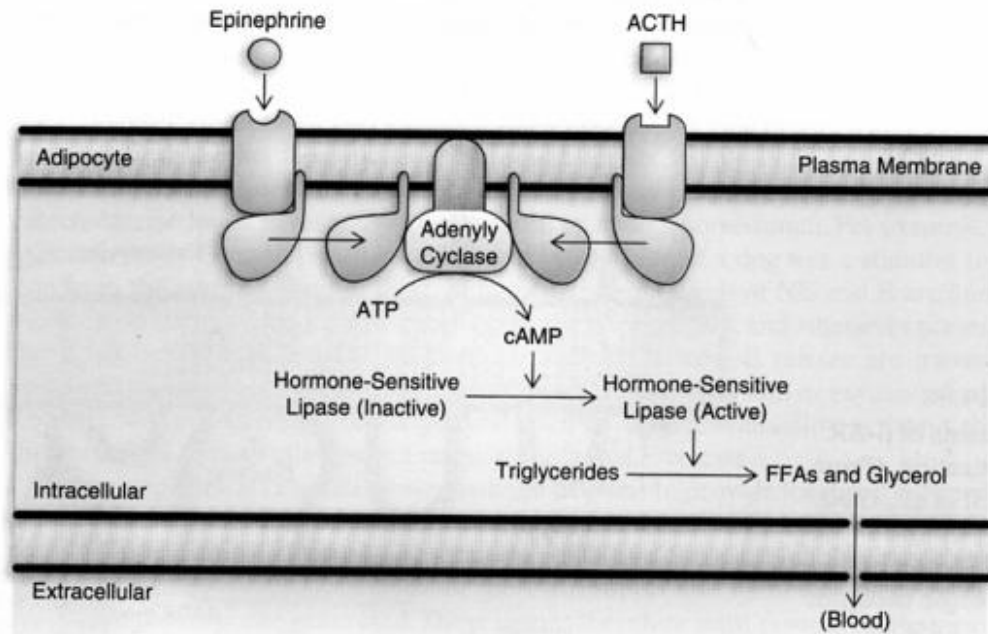
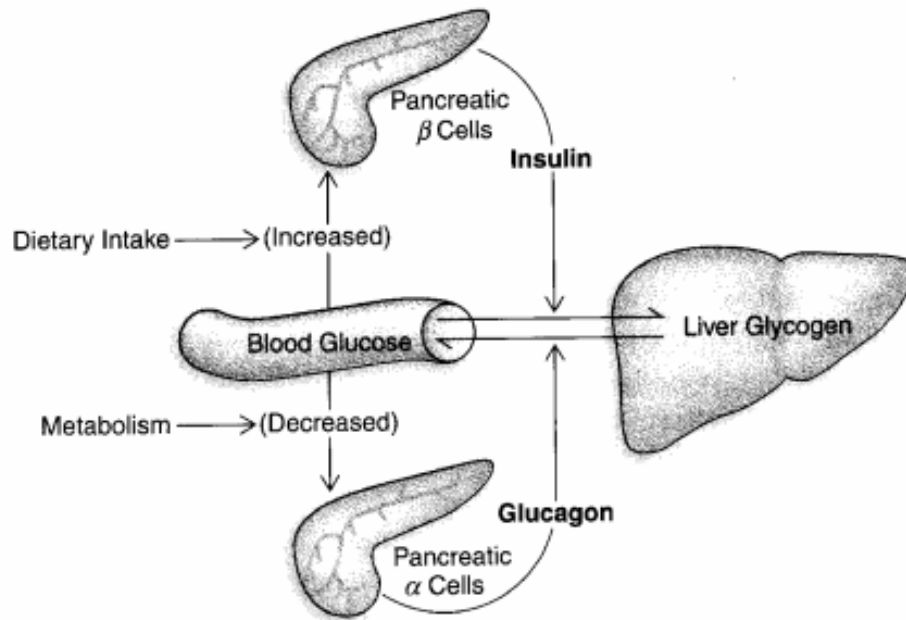
cholinergic receptors \rightarrow contraction

C) Domination α -AR > β -AR

D) Cellular secretion

1) α -AR inhibitory

2) β -AR stimulatory



Carbohydrate Metabolism

- E → 1) β -AR: hepatic glycogenolysis & glucose release
- a) skeletal glycogen
 - b) β -AR: glycogen → lactic acid
 - c) lactic acid liver → gluconeogenesis → glucose
- Cat → 2) α -AR
- inhibitory pancreatic B cell insulin secretion
- Cat → 3) β -AR: stimulatory pancreatic A cell glucagon secretion
- denervation → 4) adrenal gland: blocked Cat response to hypoglycemia?
anesthesia ↗
- brain glucoreceptors regulating sympathoadrenal response
 - research → caudal forebrain

Fat Metabolism

Adipose tissue

Cat adrenal/sympathetic β -AR \rightarrow \uparrow lipolysis \rightarrow FFA* & glycerol

FFA \rightarrow

- 1) brain/cardiac: energy source (glucose-sparing)
- 2) liver: conversion to glucose

Paradox: lean individuals do not gain weight when overfed

- 1) metabolic defect \rightarrow obesity
- 2) genetic: conversion of food \rightarrow body fat

stimulants for sympathetic nervous system (SNS)
diet-induced thermogenesis \downarrow NE

***FFA = Free Fatty Acids**

Protein Metabolism

E → β -AR & cAMP

↓ skeletal muscle release of FAAs

↓ skeletal muscle proteolysis

E important short-term response in fight/flight response

↑ lactate/glycerol/glucose

FAA substrate not needed

***FAA = Free Amino Acid**

Thermogenesis

Mammals (rats)

1) fasting:

↓ sympathetic activity → conserve calories

↓ metabolic activity/heat production

2) feeding:

↑ sympathetic activity expend calories

↑ metabolic activity/heat production

3) shivering:

a) shivering thermogenesis → piloerection (goose bumps)

1) SNS → primary effects: heat production

2) muscular activity → secondary effects: heat production

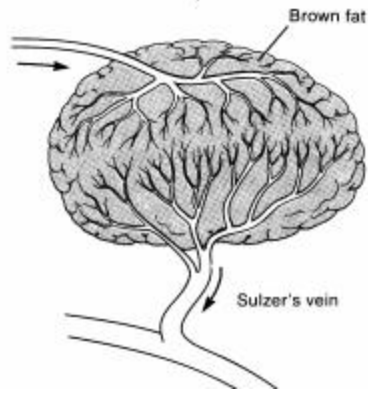
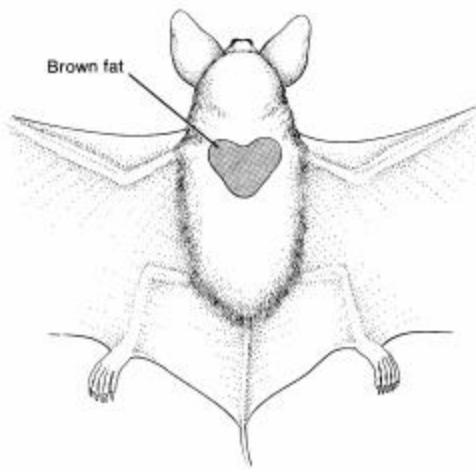
b) nonshivering thermogenesis →

1) NE → β -AR: brown adipose tissue (BAT)

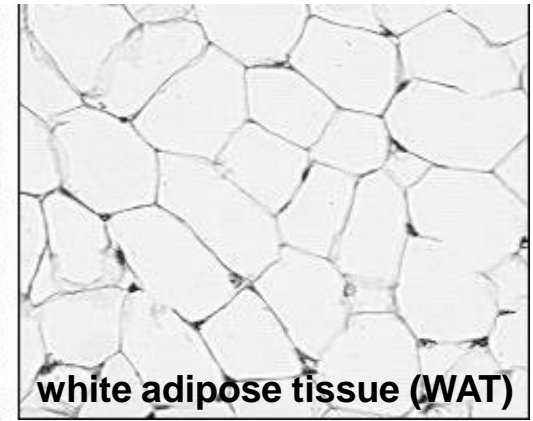
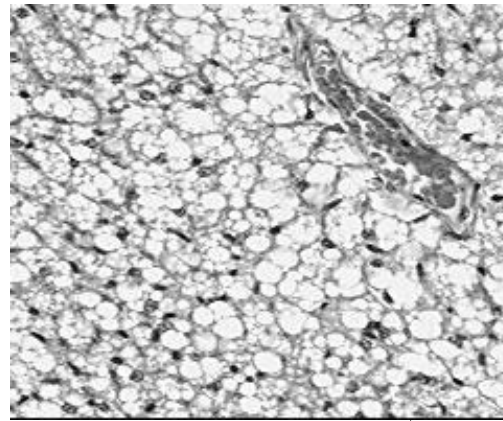
a) metabolic heat production

b) dietary-induced

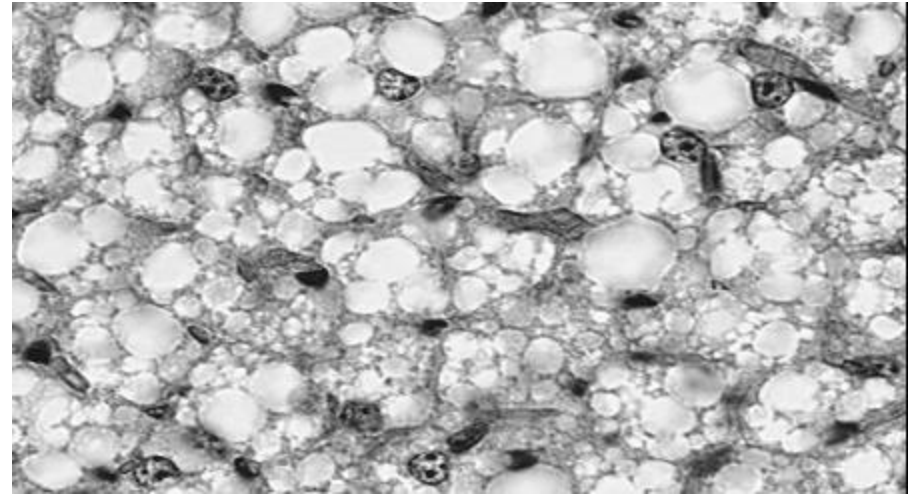
c) mitotic division of BAT humans??



adipose tissue
 little cytoplasm
 lipid droplets



↑
 brown adipose tissue (BAT)
 ↓



- ↑ variable sized lipid droplets
- ↑ capillaries
- ↑ mitochondria

Nonshivering Thermogenesis

exposure to cold → NE → β -AR: BAT → **mitochondrial uncoupling protein (MUP)**

a) uncouple oxidative phosphorylation

b) utilize substrates to quickly generate heat rather than ATP

1) WAT: hydrolysis of triglyceride → fatty acid + glycerol

2) BAT: fatty acid + MUP → fatty acid oxidation → heat production

c) neonates (unswaddled newborns) infrared detection heat
fat deposits neck & interscapular regions

d) premies

↑ S/V ? heat loss

↑ S of head (which is seldom cloth-covered)

↓ musculature & inability or reluctance to shiver

↓ thermal insulation , e.g. subcutaneous fat & fine body hair

↓ nervous system development → respond slower to cold
(e.g. contracting skin blood vessels)

e) animals coming out of hibernation

Adipose Tissue Hormones & Enzyme

1) adiponectin

modulates metabolism: glucose regulation & fatty acid catabolism

type 2 diabetes

atherosclerosis

obesity

non-alcoholic fatty liver disease

2) resistin ??? link between obesity & diabetes mellitus type 2

a) mice:

correlation between resistin titers & blood glucose levels

b) humans:

no link: resistin & obese humans with diabetes mellitus type 2

3) angiotensin

4) plasminogen activator inhibitor-1 (PAI-1): ↓ breakdown clots

5) TNF α (tumor necrosis factor) → systemic inflammation

6) IL-6 (interleukin) → acute inflammation reaction

7) leptin → regulation of appetite & metabolism

8) aromatase → estradiol

Cardiovascular Response to Stress

- E → β -AR
- 1) force of heartbeat
 - 2) rate of heartbeat
 - 3) β -AR: vascular smooth muscular of coronary arteries
selective shunting of blood from →
skin/ mucosa/ connective/ kidneys
kidneys??
↓ glucose via urine
 - 4) spleen α -AR
↑ erythrocyte plasma
↑ oxygen capacity
 - 5) β -AR bronchial smooth muscles → relaxation: dilation
 - 6) Clotting ← E
↑ adhesiveness
↓ clotting time

Sympathoadrenal Pathophysiology

1) adrenal chromaffin tumors early life

CAT hypersecretion →

- a) hypertension
- b) hyper basal metabolism/ oxygen consumption
- c) weight loss
- d) psychosis
- e) tremulousness

2) asthma

pulmonary function ?? β -AR bronchial smooth muscles
receptor uncoupling & numbers

3) heart disease fat cell metabolism → lipogenesis/lipolysis

- a) α -AR → fat storage
- b) β -AR → catabolism
- c) sexual difference ↑ α -AR male couch potatoes
females: #s & size of fat cells in buttocks/ hips /thighs
- d) anatomical: upper body adipose ↑ hypertension/diabetes /stroke?