



AMINO ACID FIRST STAGE

DR. RASHAD AL - TUUAMAH
MEDICAL BIOCHEMISTRY



AMINO ACID

AMINO ACIDS ARE THE BUILDING BLOCKS OF PROTEINS.

EACH AMINO ACID CONTAINS: AMINO GROUP (NH_2),

CARBOXYL GROUP (COOH), HYDROGEN ATOM, AND SIDE

CHAIN (R GROUP). THESE GROUPS DETERMINE THE

CHEMICAL BEHAVIOUR OF AMINO ACIDS.

Classification of Amino Acids :

amino acids are classified into two types:

1. Essential amino acids

2. Non-essential amino acid.

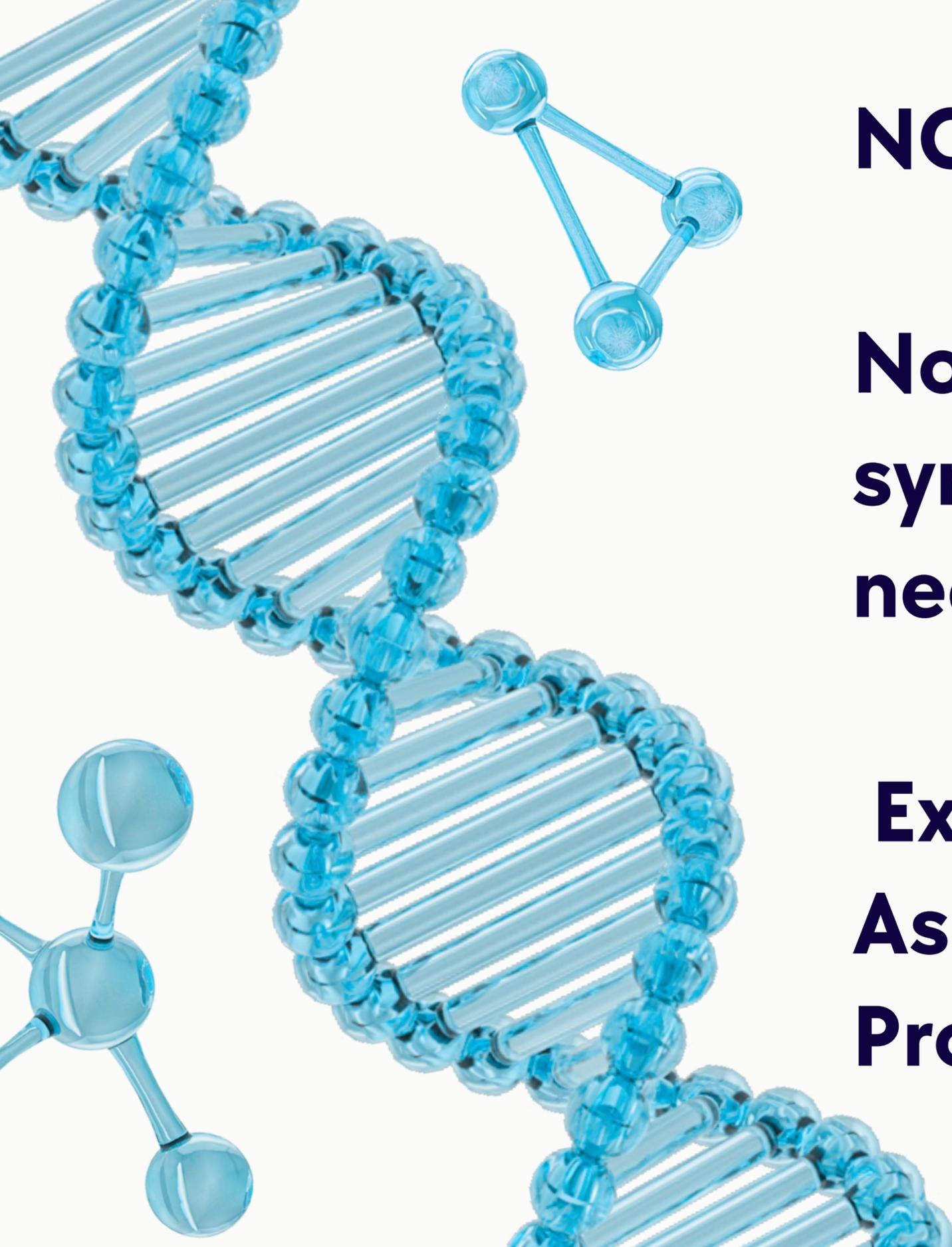
this classification depends on whether the body can synthesize them or not.



ESSENTIAL AMINO ACIDS :

Essential amino acids: cannot be synthesized by the body and must be obtained from diet.

Examples: Leucine, Isoleucine, Lysine, Methionine, Phenylalanine, Threonine, Tryptophan, Valine, Histidine.



NON-ESSENTIAL AMINO ACIDS :

Non-essential amino acids: can be synthesized in the body and do not need to be obtained from diet.

Examples: Alanine, Glycine, Aspartate, Glutamate, Serine, Proline.

AMINO GROUP :

the amino group (NH_2): contains a nitrogen atom, has a lone pair of electrons, and participates in several biochemical reactions.



REACTIONS DUE TO THE AMINO GROUP :

important reactions include:

1. Transamination

2. Deamination

3. Formation of carbamino compounds. these reactions are important in amino acid metabolism.



TRANSAMINATION :

Definition: transfer of the amino group from an amino acid to a keto acid. General reaction: Amino acid + α -keto acid produces New amino acid + new keto acid.



Enzymes and Cofactor :

Transamination requires:

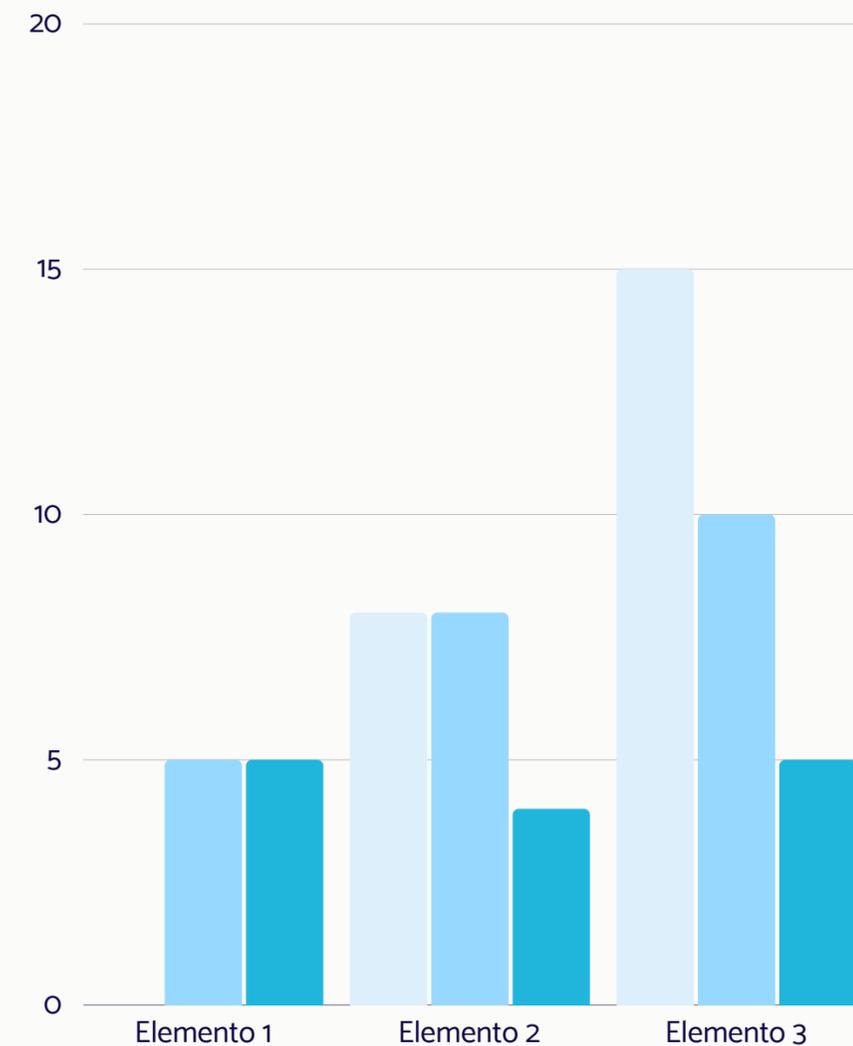
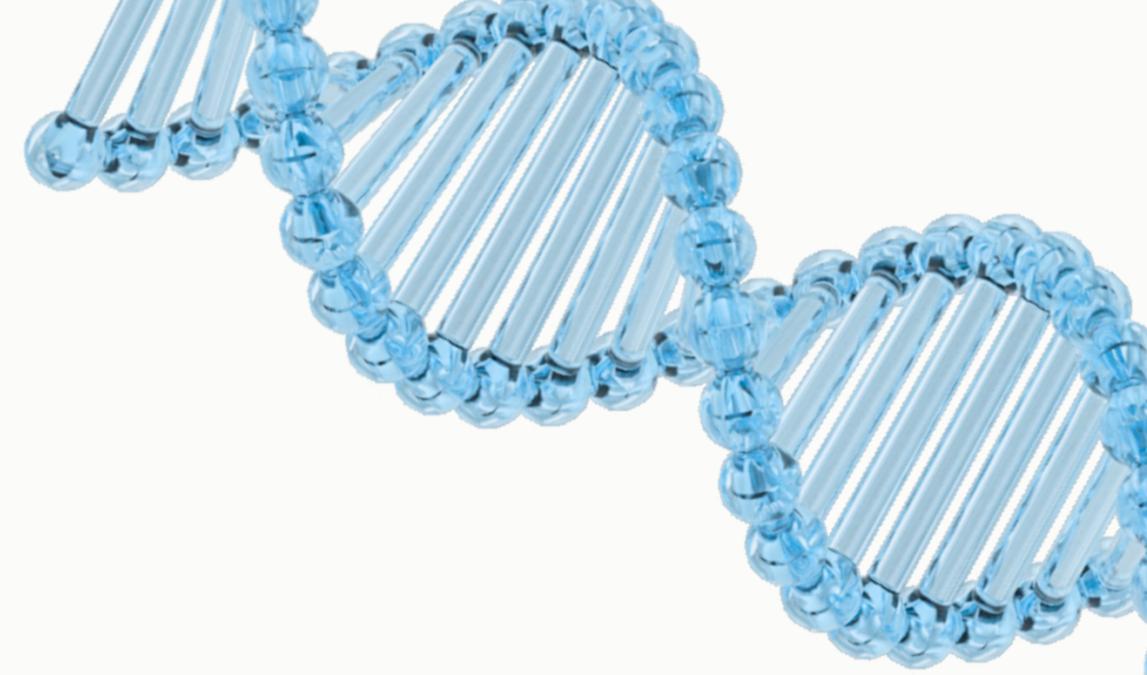
Enzymes: Aminotransferases.

Examples: ALT and AST.

Cofactor: Pyridoxal phosphate (PLP) derived from Vitamin B6.

Deamination :

Definition: removal of the amino group from an amino acid. Result: Amino acid produces Keto acid + Ammonia (NH₃). occurs mainly in the liver.



Carbamino Compound Formation :

amino groups can react with carbon dioxide (CO_2). Example: Hemoglobin + CO_2 produces Carbaminohemoglobin.

this reaction contributes to CO_2 transport in blood.



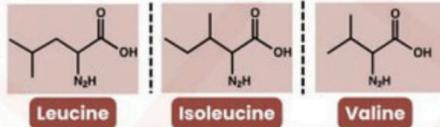
MAPLE SYRUP URINE DISEASE

PMF IAS

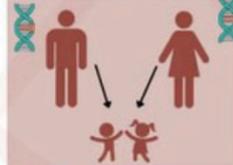
• Gene therapy offers new treatment options for **Maple Syrup Urine Disease (MSUD)**.

MSUD

1 A rare **Genetic disorder** caused by **BCKDH** deficiency, **preventing the metabolism of BCAAs** like leucine, isoleucine, and valine.



2 **Inheritance Pattern:** **Autosomal recessive;** requires mutated genes from both parents.



Symptoms of MSUD

Types of MSUD

Classic MSUD

Most severe and common; symptoms emerge within days of birth.



1

Intermediate MSUD

Milder than classic; symptoms appear between 5 months and 7 years.



2

Intermittent MSUD

Triggered by illness or stress; higher BCAA tolerance than classic MSUD.



3

Thiamine-Responsive MSUD

Improves with high-dose B1 and dietary restrictions.



4

Traditional Treatment Approaches

Dietary Management

Lifelong **low-protein diet** to restrict BCAA intake.



Liver Transplant

BCKDH enzyme therapy offers a cure but involves surgical risks.



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Severe Complications

If untreated, can cause seizures, coma, or death

Advancements in Gene Therapy

Recent Developments

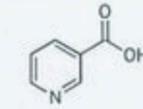
Adeno-associated viral (AAV) vector based gene therapy delivers functional BCKDHA and BCKDHB genes.

Adeno-Associated Viral (AAV) Vector:

AAVs are favored in gene therapy for low pathogenicity and efficient gene delivery.

PELLAGRA

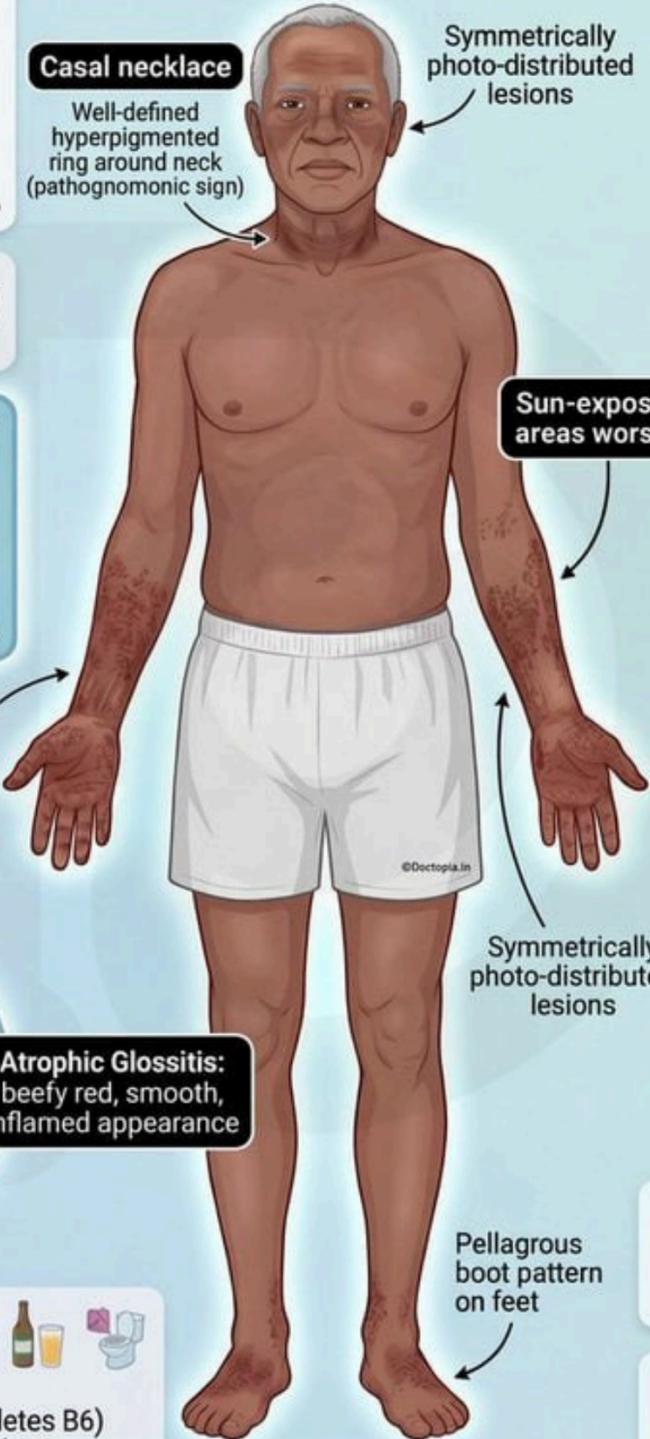
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Niacin (Vitamin B3)
→ Required for NAD⁺/NADP⁺ synthesis

Deficiency causes impaired cellular respiration

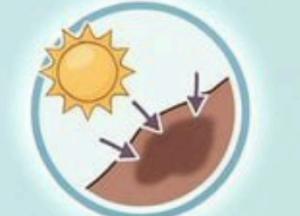
Mnemonic badge:
3 Ds = Dermatitis + Dementia + Diarrhea
(with optional 4th D: Death)



Casal necklace
Well-defined hyperpigmented ring around neck (pathognomonic sign)

Symmetrically photo-distributed lesions

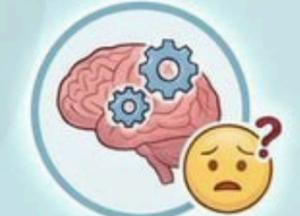
THE 3 Ds



1. Dermatitis
sun-exposed symmetric hyperpigmented lesions



2. Diarrhea
GI mucosal atrophy, malabsorption



3. Dementia
Cognitive decline, hallucinations, memory loss

Rough, scaly, hyperkeratotic dermatitis on forearms, hands

Sun-exposed areas worsen

Symmetrically photo-distributed lesions

Atrophic Glossitis:
beefy red, smooth, inflamed appearance

Pellagrous boot pattern on feet

Causes:

- malnutrition
- chronic alcoholism
- isoniazid therapy (depletes B6)
- tryptophan deficiency (e.g., Hartnup Disease, Carcinoid Syndrome)

Treatment:
Niacin supplementation

Diagnostic clue:
Casal necklace = pathognomonic pattern

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Ataxia

Aminoaciduria Niacin deficiency
Ataxia Neutral Amino Acid Deficiency

HARTNUP

Hereditary
Autosomal Recessive

Pellagra
Photosensitive Rash
Protein diet helps

Transport of Neutral AA defect
(at PCT and Enterocytes)

Tryptophan
Deficiency

Niacin deficiency Serotonin deficiency

Pellagra
3D

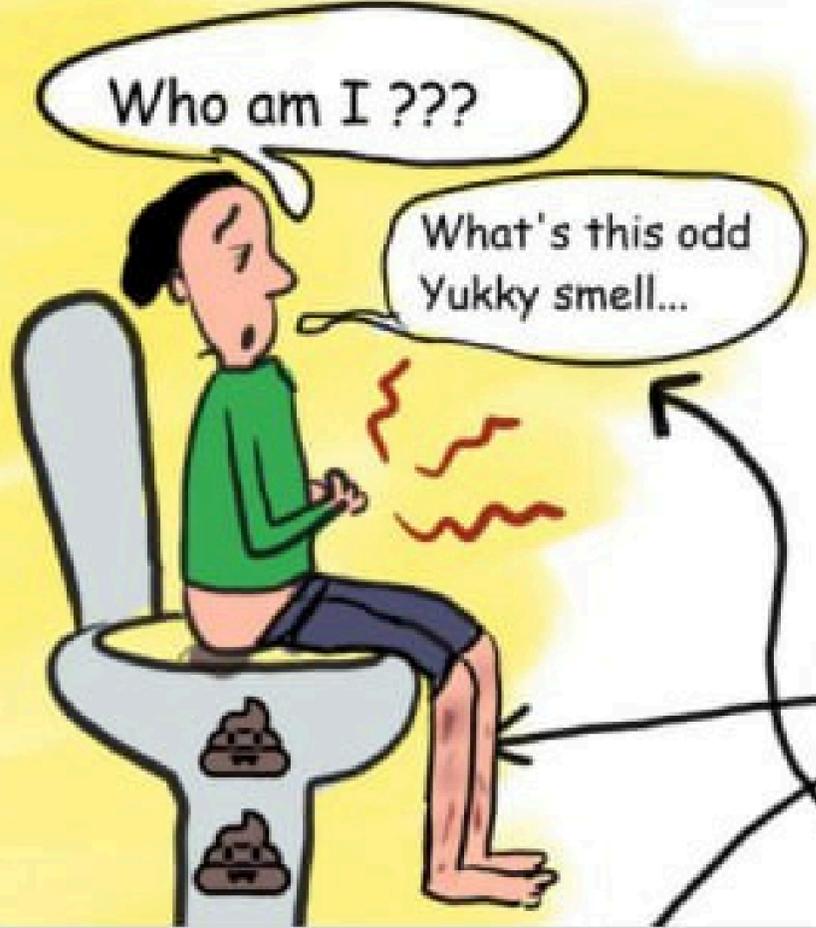
Neurological Problem

Ataxia

Dermatitis
Diarrhea
Dementia

Diagnosis
Increased amino acid
levels in Urine

Treatment
Protein diet
Niacin supplements





**THANK YOU FOR
YOUR ATTENTION !**

