Hormone Biosynthesis and Metabolism

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Introduction

"Hormones"

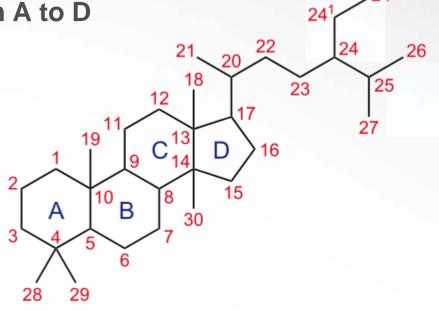
- Substances that provide means of communication
- Chemical regulatory and signaling agents
- **Local sites: cellular communication necessary**
- **Paracrine**
 - Intercellular communication, local diffusion
- **Autocrine**
 - Intracellular communication, production of regulating substances
- **Intracrine**
 - Intracellular communication, unsecreted substances bind to intracellular receptors

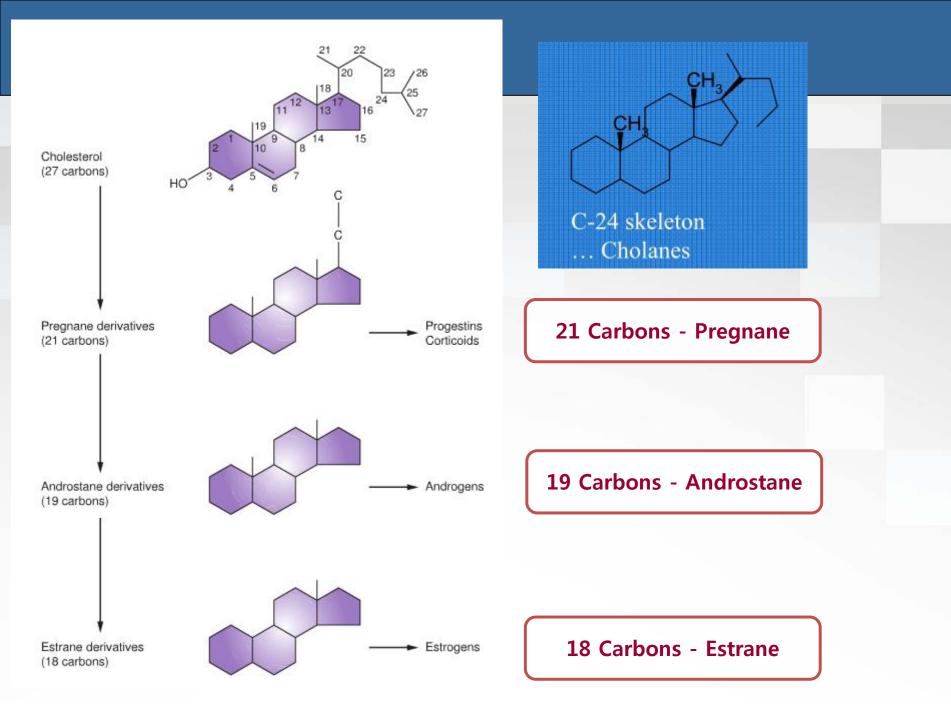
Structure of Steroid Hormone

- Basically similar structure with relatively minor chemical differences
- Basic structure: per-hydro-cyclo-pentane-phenanthrene molecule
- Composed of 6-carbon rings and one 5-carbon ring
- One 6-carbon ring is benzene, two of the 6-carbon rings are naphthalene, and three 6-carbon rings are phenanthrene

Structure of Steroid Hormone

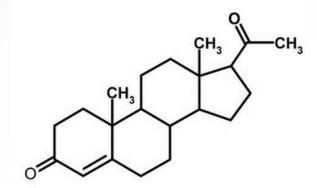
- phenanthrene (three 6-carbon rings) + cyclopentane (5carbon ring)
- Four rings named A,B,C and D
 - A,B,C : cyclohexanes (hexagon)
 - **D: cyclopentane (pentagon)**
 - **N** Direction of numbering: from A to D





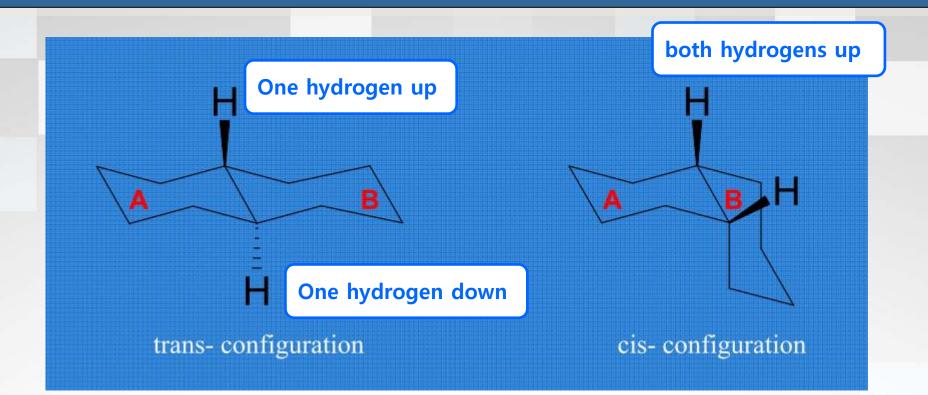
Steroid Hormone Nomenclature

- Number of carbon atoms for basic name: pregnane, androstane or estrane
- Position indicated by number of carbon attachment
- Double bonds: -ene (1), -diene (2), -triene (3)
- Hydroxyl groups: -ol (1), -diol (2), -triol (3)
- Ketone groups: -one (1), -dione (2), -trione (3)
- Special designations
 - Elimination: dehydro (OH), deoxy (O2), nor (carbon)
 - **Delta or** Δ : location of double bond



Example> Progesterone ⇒ 4-Pregnene-3,20-dione

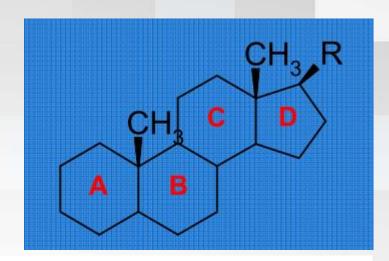
Isomers of Sex Steroid

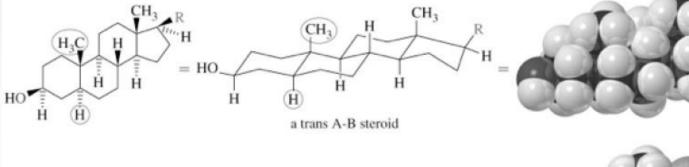


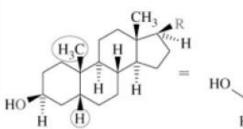
 Trans-fused cyclohexane rings are more stable than cisfused

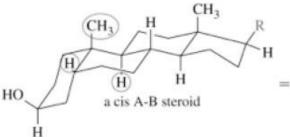
Configurational Isomers of Steroids

- Fusion points between rings
 - 3 fusion points x 2= 6
 - 2⁶ isomers = 64











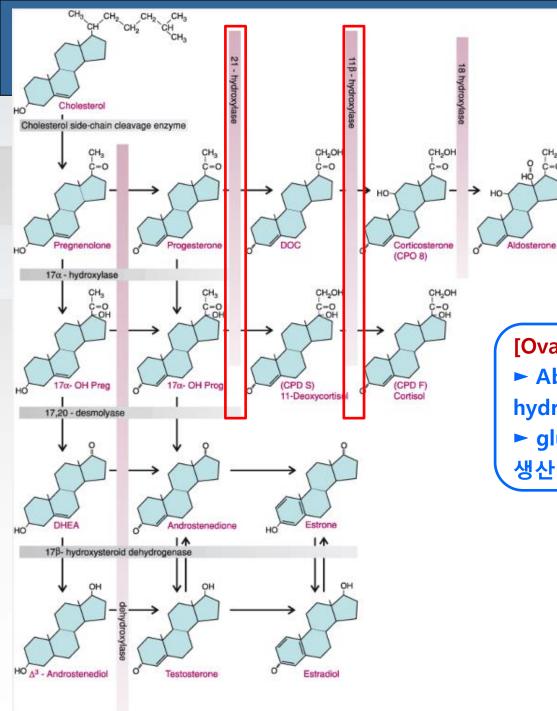
Major sites of steroid hormone biosynthesis

Adrenal cortex

- **Zona fascicularis and reticularis**
 - Minor mineralocorticoids, Glucocorticoids, Adrenal androgens
- 🕅 Zona glomerulosa
 - Aldosterone
- Ovaries
 - Theca cells
 - DHEA
 - Granulosa cells and developing follicles
 - Estrogen
 - Corpus luteum
 - Progesterone

Reactions during Steroidogenesis

Cleavage of (catalyze the bonds)		Desmolase rxn				
Conversion hydroxyl gro		Dehydrogenase rxn				
Addition of	OH group	Hydroxylation rxn				
Creation of	double bond	Removal of hydrogen				
Addition of	hydrogen to	saturation				
Enzyme	С	ellular Location	Reactions	Reactions		
P450scc	N	1itochondria	Cholesterol	Cholesterol side chain cleavage		
P450c11 Mitochondria			11-hydroxylase 18-hydroxylase 19-methyloxidase			
P450c17	P450c17 Endoplasmic reticulum			17-hydroxylase, 17,20-lyase		
P450c21 Endoplasmic reticulum			21-hydroxy	21-hydroxylase		
P450arom	CYPC19A1	idoplasmic reticulum	Aromatase	Aromatase		

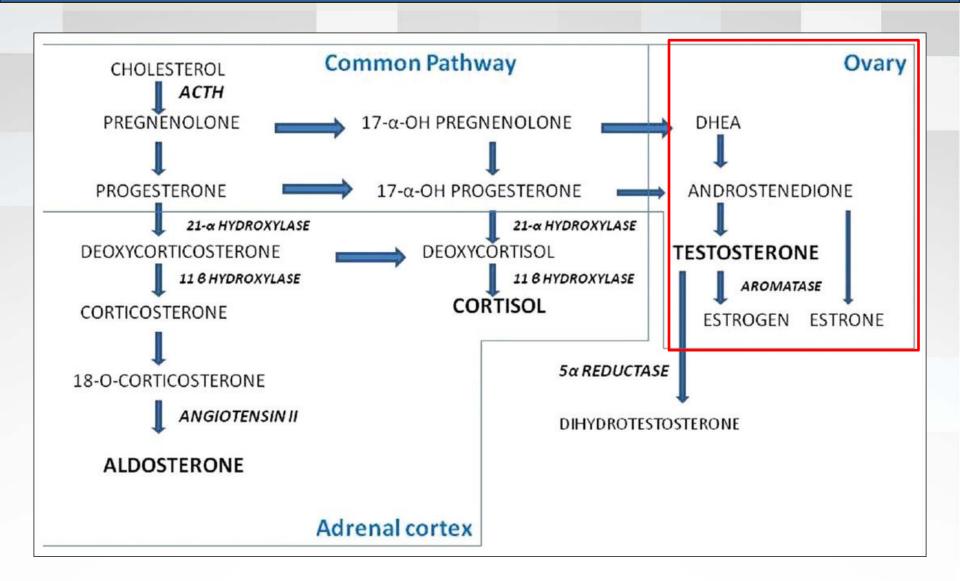


[Ovary] Absence of 21-hydroxylase & 11βhydroxylase glucocorticoid, mineralocorticoid 생산 불가

CH2OH

c-o

Steroidogenesis Pathway



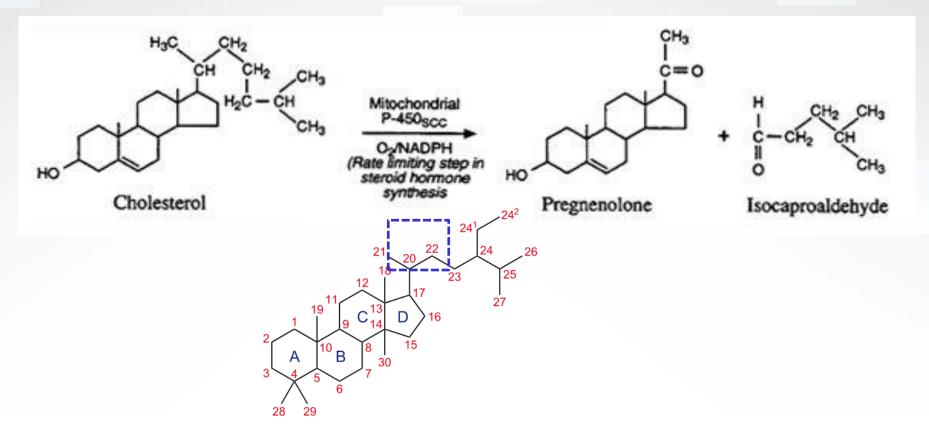


- 21-hydroxylase def.
 - Simple virilizing, salt-wasting and late-onset (non-classic)
 - Markedly elevated level of 17-OHP
- 3β-HSD def.
 - **Increased DHEA, DHEA-S**
- 11-hydroxylase def.
 - Virilization, hypertension
 - **Classic form: elevated DOC, DHEA, DHEA-S, ADD**

Cholesterol → **Pregnenolone**

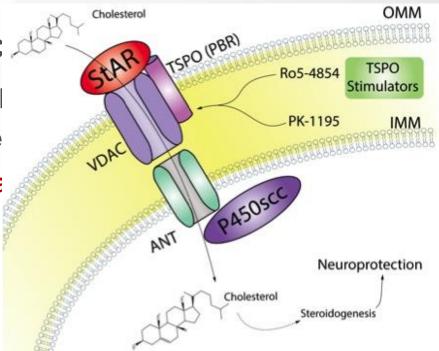
P450scc in the mitochondria

- **by effect of tropic hormone stimulation by ant. Pituitary**
- Side chain cleavage at carbon 20 and 22 position
 - = 20,22-desmolase



Rate-limiting Step in Steroidogenesis

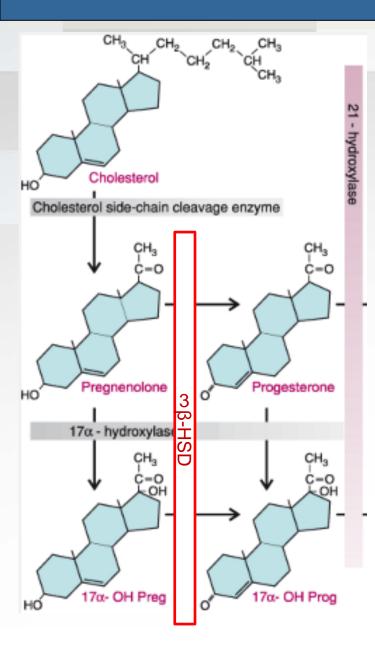
- Transfer of cholesterol from outer mitochondrial membrane to inner mitochondrial membrane
- Regulator proteins of acute intracellular cholesterol
 transfer
 - Sterol carrier protein 2 (SC
 - Steroidogenesis activator
 - Peripheral benzodiazepine
 - Steroidogenic acute regula



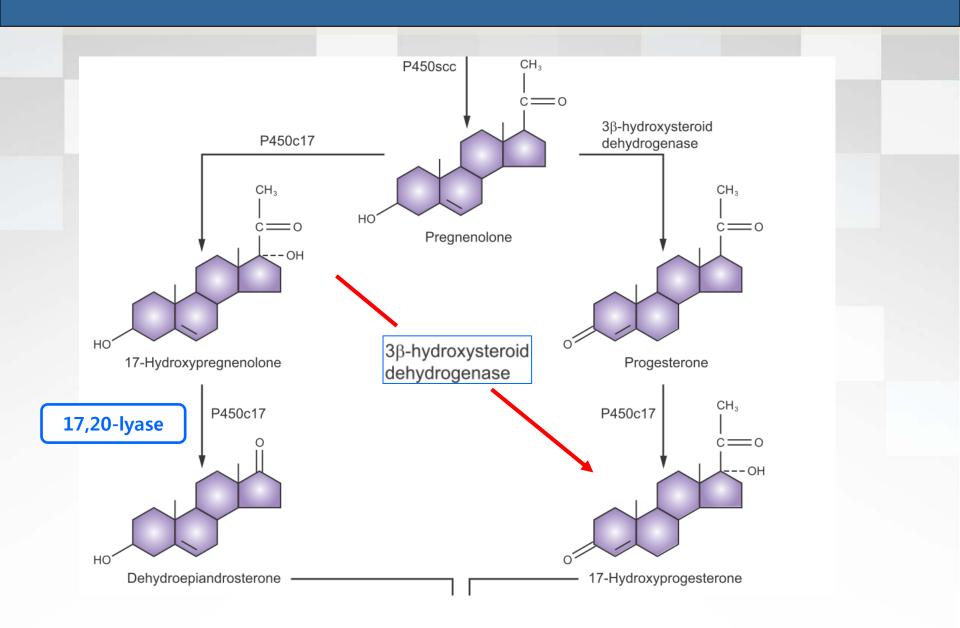
Steroidogenic Acute Regulator (StAR) Protein

- Increases steroid production
- Imported and localized in mitochondria
- Congenital Lipoid Adrenal Hyperplasia (AR disorder)
 - N Mutation in StAR gene → premature stop codons
 - **Failure in adrenal, gonadal steroidogenesis**
 - **Low level of steroidogenesis possible** \rightarrow feminization at puberty
 - Accumulation of intracellular lipid deposits → destroys steroidogenic capability
- StAR required for adrenal and gonadal steroidogenesis, necessary for normal male sexual differentiation

Pregnenolone \rightarrow **Progesterone**

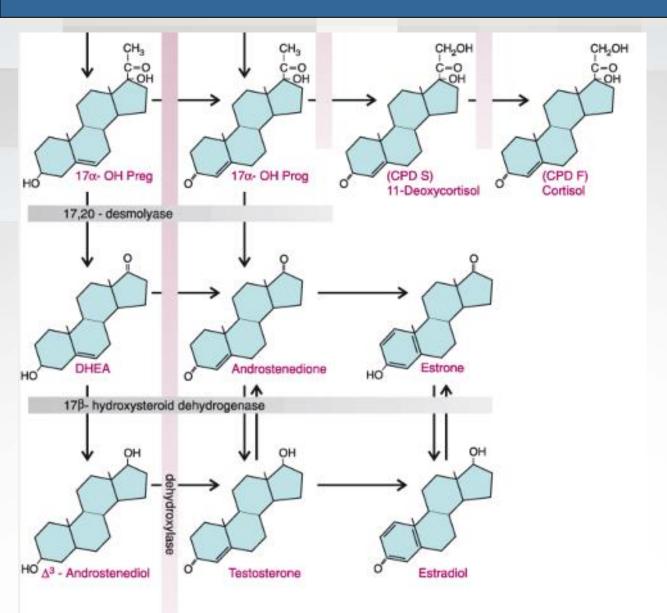


- Pregnenolone → progesterone
 - : two pathways!
 - By 3β-hydroxysteroid dehydrogenase (HSD)
 - By Δ^{4-5} isomerase reaction



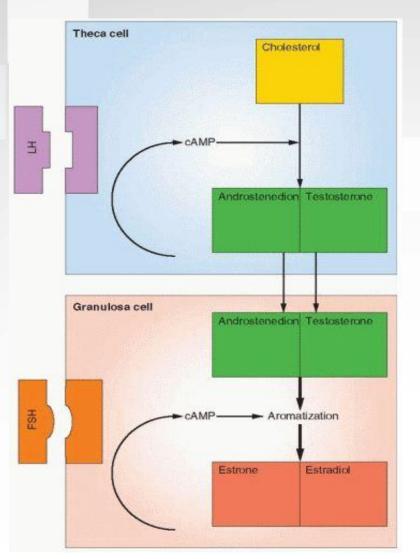
• P450c17

- 17-hydroxylase and 17,20-lyase
- **Adrenal gland**
 - Very little effect of 17,20-lyase
- Theca cell and Leydig cell
 - Both activities
 - Principal pathway via DHEA
- Corpus Iuteum
 - Principal pathway via progesterone



The Two-Cell System

First proposed by Falck in 1959



1. FSH receptors are present on granulosa cells

2. FSH receptors are induced by FSH itself

 3. LH receptors are present on theca cells and initially absent on granulosa cells →
 FSH induces appearance of LH receptors on granulosa cells with follicle growth

4. FSH induces aromatase enzyme activity in granulosa cells

Primordial Follicle

1st visible sign of follicular development

- Increase in the size of oocyte
- Cuboidal granulosa cells rather than squamous



- Initiation of follicular growth: independent of FSH or LH
 - Primordial follicles in anencephalic fetus

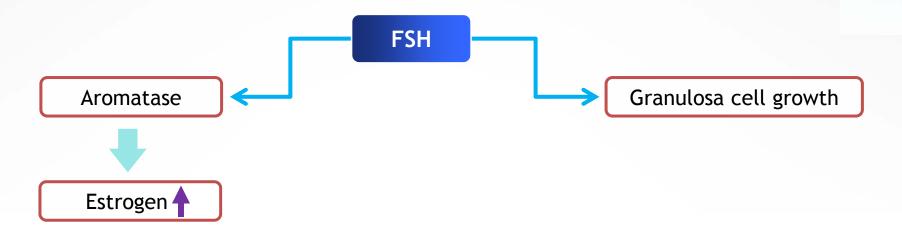
Baker & Scrimgeour. J Reprod Fertil 1980;60(1):193-9.

Preantral Follicle

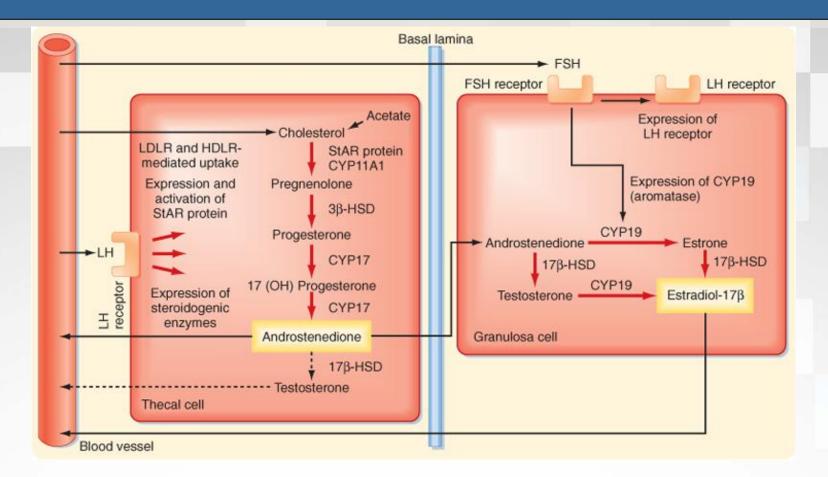
- Preantral follicle
 - Enlargement of oocyte
 - Surrounded by zona pellucida
 - Multilayer of G cells and organization of theca layer



- Dependent on gonadotropin
- Correlated with increasing production of estrogen



Preantral Follicle



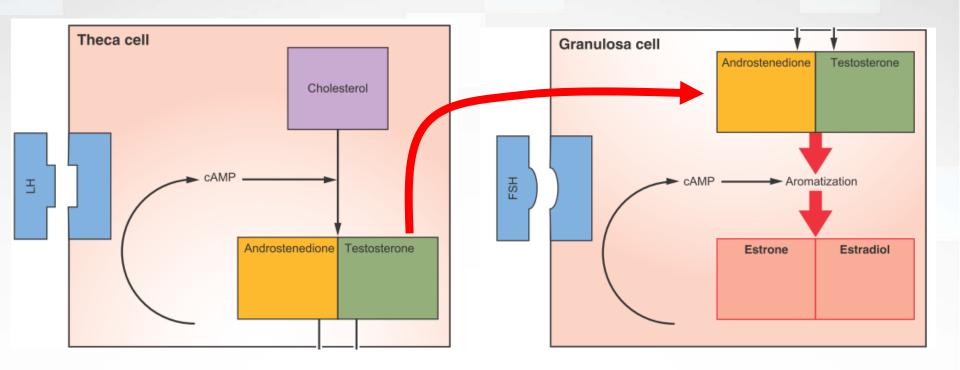
• Estrogen production

- Limited by FSH Rc contents
- FSH: raise the concentration of its own receptor on G cells
- 1,500 receptors / G cell

Two Cell, Two-Gonadotropin Theory

Preantral follicle & antral follicle

- LH receptors: only on the theca cells (20,000 Rc / cell)
- **FSH receptors: only on the granulosa cells**



Antral Follicle

Dominant substance of FF in antral follicle
 FSH & E2

• LH

- Not normally present in FF until the midcycle
- Premature elevation

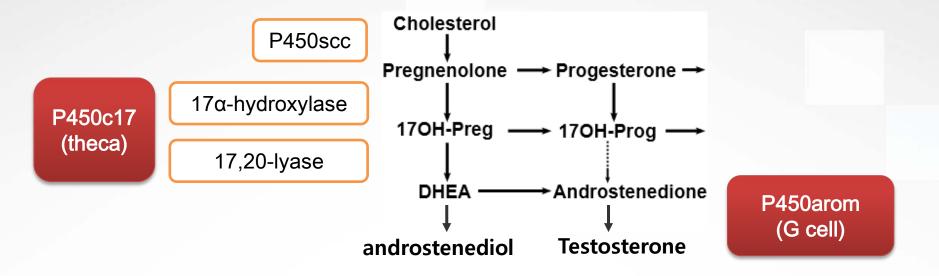
Decreased mitotic activity in G cells Degenerative change Increased level of androgen

Two Cell, Two-Gonadotropin Theory

- Interaction btw granulosa and theca cells
 - Not fully functional until later in antral development
- G cells in small antral follicle
 - **Tendency to convert and rogen to 5\alpha-reduced form**
- G cells in large antral follicle
 - Preferentially metabolize androgen to estrogen

Two Cell, Two-Gonadotropin Theory

- P450c17
 - Expression in the theca cells
 - Conversion of 21-carbon substrate to androgens
 - N 17α-hydroxylase / 17,20-lyase



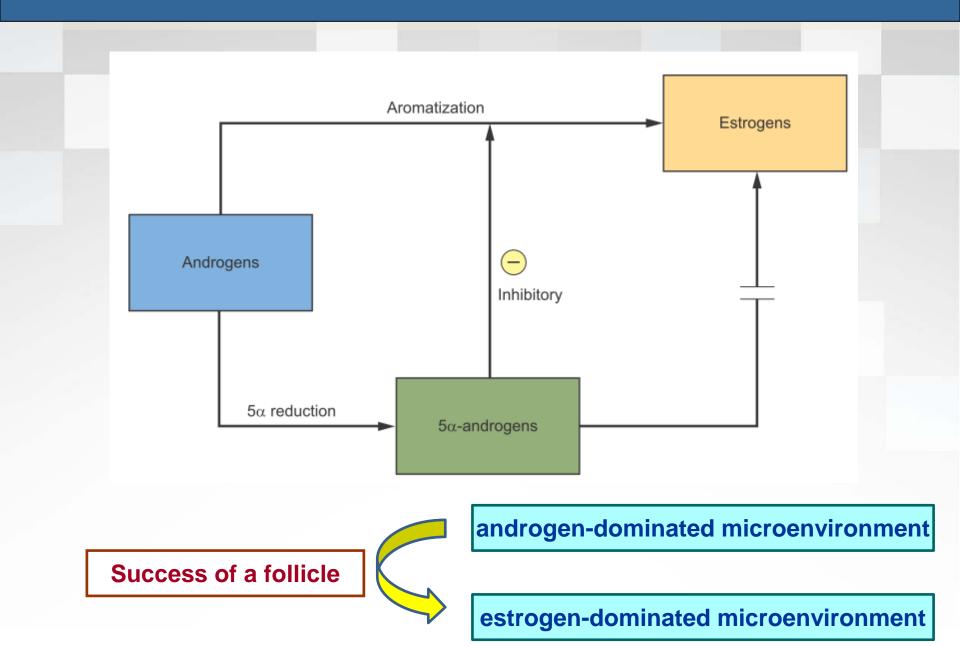
Androgen in Preantral Follicle

Substrate for FSH-induced aromatization

	Low conc.	High conc.		
+	Enhance aromatase activity	Conversion to more potent 5α- reduced androgens rather than estrogen		
		 Cannot be converted to estrogen Inhibition of aromatase activity 		
		- Inhibition of FSH induction of LH Rc formation		



Androgen in Preantral Follicle



Blood Transport of Steroids

- Estradiol and testosterone circulating in blood
 - Mostly bound to a protein carrier, "SHBG"
 - ▶ 30% loosely bound to albumin
 - **1% unbound and free**
 - Very small percentage bound to corticosteroid-binding globulin
- Hyperthyroidism, pregnancy, estrogen \Rightarrow SHBG \uparrow
- Corticoids, androgens, progestins, GH, insulin, IGF-1 \Rightarrow SHBG \downarrow
- Biologic effects of major sex steroids: determined by unbound portion "free hormone" "active hormone"
- Routine assays mostly determine 'total' hormone concentrations

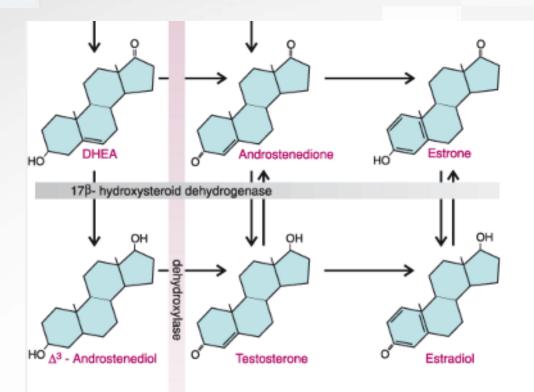
SHBG

- localized to short arm (p12-13) of chromosome 17
- Circulating level of SHBG: inversely related to Bwt
 - N Weight gain → SHBG \downarrow → changes in unbound levels of sex steroids
- Insulin resistance, hyperinsulinemia \rightarrow decreases SHBG levels
- Android fat (abdominal wall, visceral-mesenteric locations)
 → asso. with hyperinsulinemia, hyperandrogenism, decreased SHBG
- SHBG conc. \Rightarrow marker for hyperinsulinemic insulin resistance
- Low SHBG ⇒ predictor for type 2 DM

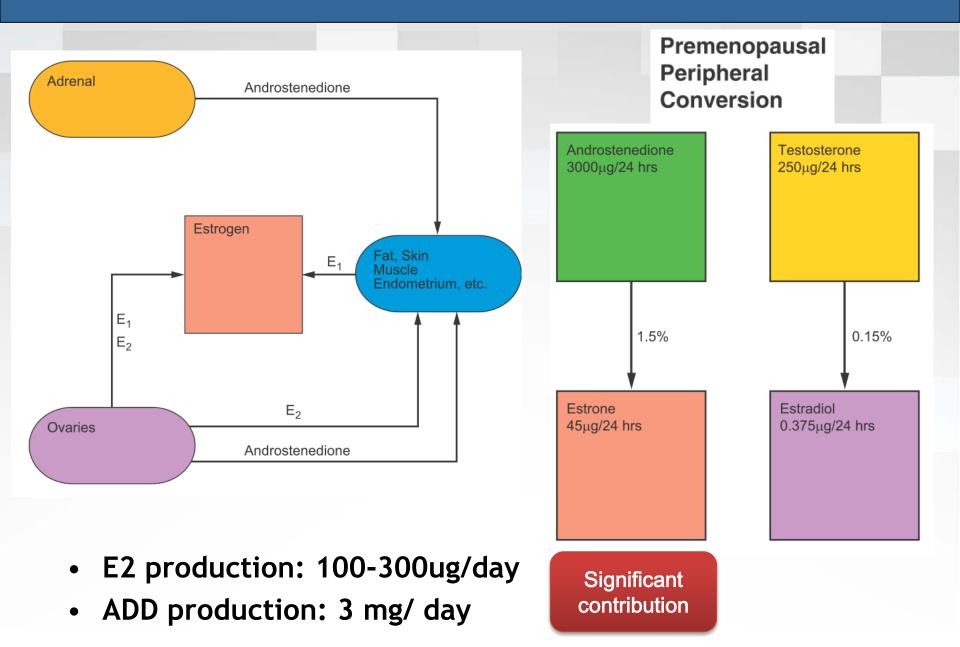
Estrogen Metabolism

Estradiol: major estrogen product of ovary, two pathways

- **Testosterone** \rightarrow (P450 AROM) \rightarrow Estradiol
- Androstenedione → via estrone (secreted in significant amounts)
 → Estradiol



Estrogen Metabolism



Progesterone Metabolism

- Progesterone production rate
 - No Pph. conversion
 - Combination of secretion from adrenal gland and ovaries
 - Luteal phase: 20-30mg/day
 - **10-20% excreted as pregnanediol**
- Blood levels of progesterone
 - After ovulation: 3~15ng/mL
 - **CAH**
 - serum progesterone: as high as 50 times above normal
 - Serum 17-OHP: 10-400 times normal

Androgen Metabolism

- Origin of circulating androgens in female
 - **ADD**
 - Adrenal (50%), ovary (50%)
 - **DHEA**
 - Adrenal (50%), ovary (25%), pph. Conversion (25%)
 - **Testosterone**
 - Adrenal (25%), ovary (25%), pph. Conversion (50%)

Androgen Metabolism

In men..

Majority of circulating DHT is derived from testosterone , converted by 5α reductase to DHT

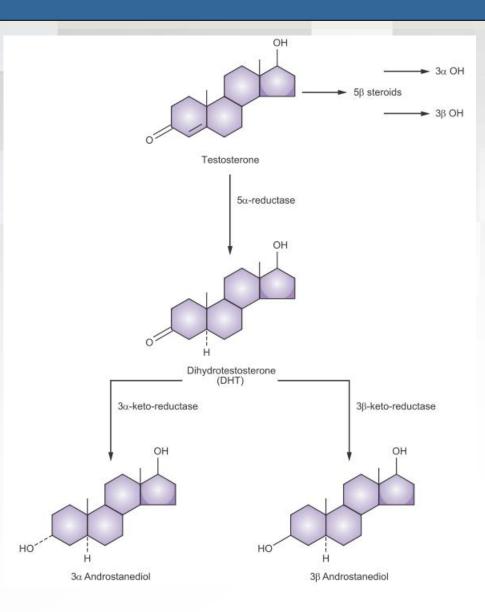
In women..

- Production rate: ADD > T
- Blood DHT primarily derived from ADD and partly from DHEA-S

• DHT

- Intracrine hormone (formed and act within target tissues)
- Blood DHT only about one-tenth the level of circulating testosterone

Androgen Metabolism



Testosterone converted to DHT by 5 α -reductase

DHT further reduced to androstenediol (inactive) by 3 α-keto-reductase

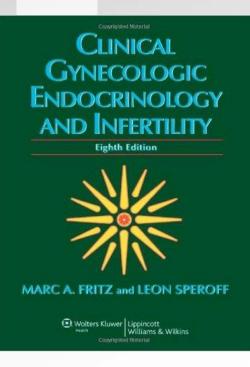
Wolffian duct structures

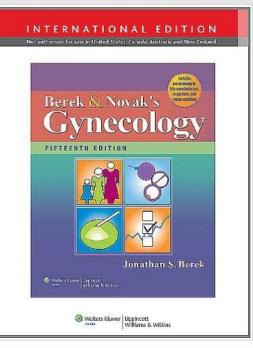
- epididymis, vas deference, seminal vesicle
- Dependent on testosterone

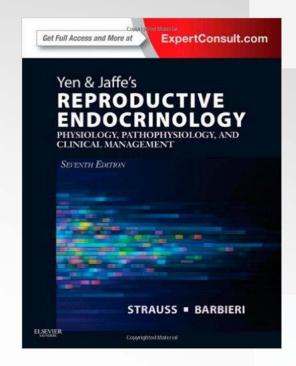
Urogenital sinus /tubercle

- Male external genitalia, urethra, prostate
- Requires conversion to DHT

Recommended Readings







Thank You for Your Attention!

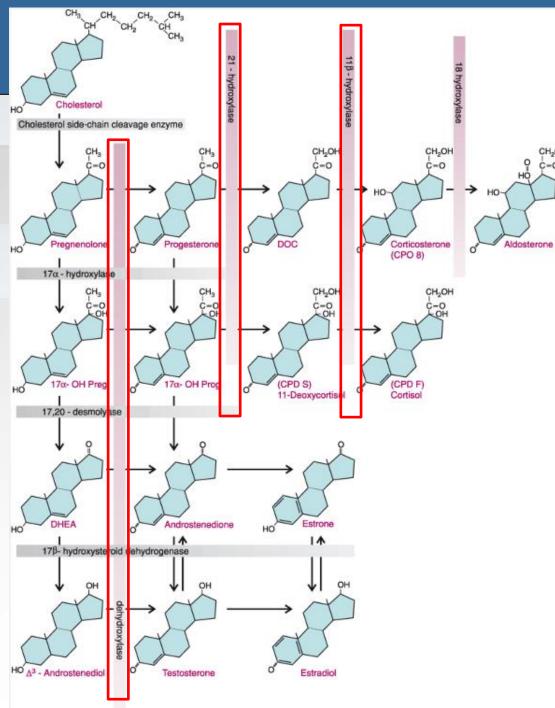
서울대학교병

Testosterone and SHBG

Mass Input for TT

Data Entry								
Total Testosterone:		ng/dL						
SHBG:		nmol/L						
Albumin (default = 43):		g/L						
calculate reset	🗏 print							
Data Results								
Free Androgen Index:]						
Free Testosterone* (cFT):		pg/mL		% of Total				
Bioavailable Testosterone:		ng/dL		% of Total				

* This software is intended to facilitate calculation of 'free' and 'bioavailable' testosterone estimates, yielding results in accord with Vermeulen et al., JCEM 1999;84:3666, and with the ISSAM calculator. Siemens Healthcare Diagnostics (SHD) makes no claims as to the clinical utility or relative value of these derived measures. Results obtained with this software are intended for use only by qualified healthcare professionals, taking into account all relevant patient data in accordance with best medical practices. The use of this calculator is subject to the license on the distribution CD, cat. no. ZS1383CD.

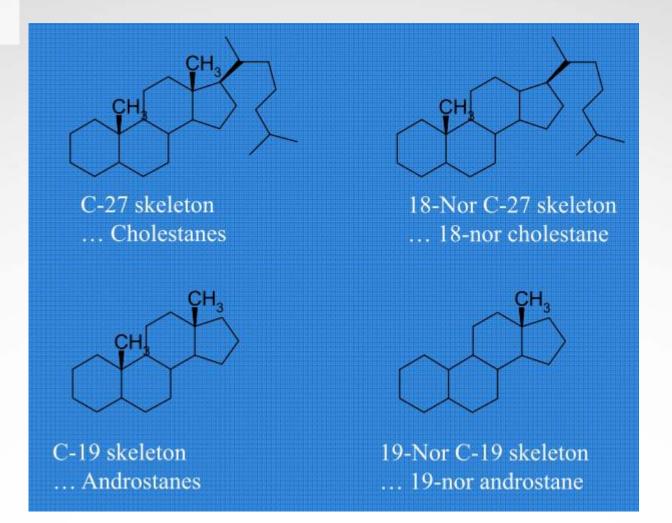


CAH



Steroid Hormone Nomenclature

Usage of 'Nor' terminology



Preantral Follicle

- Synergistic effect of FSH and estrogen
 - **Rapid accumulation of FSH Rc**
 - S Follicular response to relatively low conc. of FSH
 - Autocrine function for E2 within the follicle

